

Annual Membership Report: Data from specialist services in Wales 2022/23

Period 01/04/2022 - 31/03/2023

Acknowledgements



We are extremely thankful to the specialist services that are members of Welsh Women's Aid, who have provided their data which informs this report. We acknowledge the increasing demands on their services and resources to support the women, men and children and young people who have been affected by violence against women, domestic abuse, and sexual violence (VAWDASV), and appreciate their efforts in working with us to build a national picture of the sector.

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Foreword

As we look back at another year, and try to capture in words the vital and lifesaving work of specialist services across Wales, it is important to remember that we are describing lives. Lives which have been affected and altered by oppressions and violation, the harm experienced by survivors is not the result of unfortunate accidents but harm as a result of deliberate choices. Nothing in this report is minor, no number however small is insignificant. This annual membership report is our moment to reflect that many have sought help and many have received support but also shows how demand and complexity of cases continues to grow offering a moment perhaps to reflect. A moment to remind ourselves why prevention and early intervention must sit alongside our crisis response in order to truly end violence against women, domestic abuse, and sexual violence and truly bring about a change that lasts.

In a year where, alongside an unstable economic climate, high profile cases of public bodies or large organisations have shown misogyny and systemic racism to be a continuing problem, the need for survivor support to be both independent and values led is as important as ever. I urge commissioners and funders to provide adequate resources to ensure that independent and values led, specialist services are available to every survivor in Wales who seeks help.

Sara Kirkpatrick CEO

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Introduction

Welsh Women's Aid is the national umbrella body for third sector violence against women, domestic abuse and sexual violence (VAWDASV) specialist services in Wales. Our vision is a world in which women and children live free from domestic abuse, sexual violence and all forms of violence against women and by doing so achieve independence, freedom and liberation from oppression. We are working as a federation so that:

- Violence against women, domestic abuse and sexual violence is better understood, challenged and prevented.
- Governments, agencies and communities are held accountable for delivering action for change by women and children.
- The state, agencies and communities deliver more effective responses to violence against women, domestic abuse and sexual violence.
- Survivors access early support which meets their needs and improves their health and well-being.
- Specialist services are strengthened and supported to effectively meet diverse needs and reduce harmful effects of violence.
- Women and children have healthy, safe, and equal relationships.

The prevalence of violence against women, domestic abuse and sexual violence remains largely hidden. The extent of femicide, rape, domestic abuse, forced marriage, sexual harassment, female genital mutilation and other forms of abuse are often invisible in official statistics nationally and locally, and there is a lack of consensus about how such violence should be defined and measured, and how this can best be achieved. Recent estimates by the UK Government put the cost of domestic abuse for victims in England and Wales as £66 billion.¹ This does not account for the cost of all other forms of violence against women and girls, including sexual violence, so called honour-based abuse and sexual exploitation.

This report focuses on the referrals to and use of specialist services by survivors, for the 2022/23 financial year. The data is limited to that provided by members of our federation through the year and at the year-end, and by our Wales database of provision of local and national VAWDASV specialist services.

¹ Home Office, *Research and analysis: The economic and social costs of domestic abuse.* (UK Government website, 2019). Available at: <u>www.gov.uk/government/publications/the-economic-and- social-costs-of-domestic-abuse.</u>

Specifically, the data sources that inform this report are:

Quarterly Monitoring Data

At the end of each quarter in 2022/23, Welsh Women's Aid distributed a data form to gather output and outcome statistics from member services.

This annual data analysis report comprises the cumulative datasets submitted by our members to depict the national demand for their services and the nature of the responses provided across Wales.

'Routes to Support' database

Data has also been included from "Routes to Support", the only UK-wide online database which contains up-to-date information about local and national domestic abuse and other violence against women services throughout the UK. This report includes data for all services in Wales – wider than our membership – to provide a national picture of demand and provision of services throughout Wales.

The Routes to Support project is managed by Welsh Women's Aid (for Wales) in partnership with Women's Aid Federation of England, Scottish Women's Aid and Women's Aid Federation of Northern Ireland.

Live Fear Free Helpline

Data has been included from the national Live Fear Free helpline in Wales, managed and delivered by Welsh Women's Aid and funded by the Welsh Government.

National Overview: 2022/23



The Live Fear Free Helpline received to 23,272 contacts.

14,736 survivors were referred to local specialist services during this financial year.

Refuge-based support services

739 survivors benefitted from refuge-based support services.



712 survivors were unable to be supported by refuge-based support services.

246 children and young people, on average, were living in refuge.

21 survivors without 'recourse to public funds' (NRPF) were supported by refuge.

Community-based support services



9,155 survivors were supported by community-based support services.

498 survivors were unable to be supported by community-based support services.

2,067 children and young people, were supported directly, this period.

Sexual Violence-based support services



1,015 survivors were supported by sexual violence-based support services.375 survivors remained on the waiting list at the end of Quarter 4.

Sexual Exploitation-based support services

187 survivors were supported by sexual violence-based support services.

0 survivors remained on the waiting list at the end of Quarter 4.

About specialist services

Specialist services for survivors (delivered, for example, through refuge-based services that include refuge-based support, floating support, and community outreach support; or through rape crisis and sexual violence support and counselling; independent advocacy and 'one stop shop' women's centres) aim to deliver needs-led, strengths-based, gender responsive, trauma-informed support. These services protect, support, and empower survivors and their children and work to prevent violence and abuse from starting and escalating, and are provided by specialised staff with in-depth knowledge of violence against women, domestic abuse, and sexual violence.

This report focusses on our member services that offer physical and emotional safety, support, advocacy, and practical help, delivered through a combination of **refuge-based support, community outreach support**² and **dedicated sexual violence/rape crisis services**. Refuge-based services form part of a national and UK network of provision that helps families to have 24-hour access and move between refuges if needed.



Refuge-based support delivers a planned programme of therapeutic and practical support, above and beyond a safe place to stay, and access to peer support from other survivors.

This includes 24-hour access; information and practical help, individual and group support and safety planning; counselling; support and advocacy with housing, finances including benefits/ debt, health and well-being, parenting, immigration, legal, criminal and family justice systems, education and employment. The service is designed to meet, and is led by, the needs of survivors and their children, and is delivered by support workers (including dedicated support workers for children and young people) trained and experienced in violence against women, domestic abuse and sexual violence, in an environment which empowers women and children and promotes their autonomy and self-determination. This also includes resettlement support which helps survivors move on to rebuild their lives and establish themselves in local communities.



Domestic abuse/ VAWDASV community outreach support

delivers advocacy, protection and support for survivors in local communities through helpline support and information; short and

2 Includes 'floating support'. Floating Support is support provided in the community funded by *Supporting People* where the aim is to provide housing-related support in the community to sustain tenancies or re-house survivors.

long-term psychological counselling; information and practical help, individual and group support, and safety planning; peer support groups; support and advocacy with housing and sustaining tenancies, support with finances including benefits/debt, health and well-being, parenting, immigration, legal issues, education and employment; advocacy and support for survivors accessing specialist domestic violence courts, criminal and family justice systems; advocacy and education to support survivors using primary care, maternity and urgent treatment health services (e.g. IRIS advocacy in GP practices); and advocacy, support and counselling for survivors who have experienced multiple forms of abuse.



Dedicated rape crisis and sexual violence services provide services to survivors of rape and sexual assault through counselling, therapeutic sessions, individual or group support. Trained professionals are also available to provide information and advocacy with health services, housing, finances, well-being, parenting, education and employment, as well as providing support through the legal process, should individuals choose to report or not.



Partnership working includes institutional advocacy, training, provision of expert advice and upskilling professionals, services and partnerships to better identify, respond to, and prevent violence and abuse, and providing referral pathways from public services for survivors to access specialist support.



Prevention work in local communities through community engagement and supporting champions to speak out against violence; education of children, young people and adults; supporting survivors to engage in service improvement; delivering empowerment programmes (e.g. employability and anti-poverty work) and challenging inequality between men and women and intersectional discrimination which is the predominant cause and consequence of violence against women, domestic abuse and sexual violence.



Promotion of equality and human rights, which includes developing and delivering services that are led by and for women and led by and for Black and minority ethnic (BME) women. Safe separate provision for men and women, and services led by/for women and by/for BME women enable specialist services to operate from a framework of empowerment and self-determination. Services not only provide safety and support, but also empower women who see and hear that their experiences of sexism, racism or homophobia are not isolated, and help women find mutual support and self-determination. The provision of tailored support to survivors from Black and minority communities and to survivors who are women, by support workers who understand the particular risks and dynamics of violence experienced by women and experienced in different communities and the barriers to approaching mainstream services, is highly valued by survivors of abuse.



Risk management and behaviour change perpetrator programmes; some services also provide behaviour change and risk management programmes and individual interventions for perpetrators, which includes domestic violence perpetrator programmes and parallel partner/victim safety and support services.



The Live Fear Free Helpline offers a 24-hour, 365-days-a-year lifeline for survivors impacted by violence against women, domestic abuse, and sexual violence. It provides a main point of contact to survivors, family/friends and professionals, delivering holistic and integrated responses including information/sign-posting; needs and risk assessments; safety-planning, support and advocacy; and referral pathways to specialist and general services in Wales and the UK.



Access to all specialist services is through a combination of selfreferrals, referrals from other agencies, or referrals from the national Live Fear Free Helpline (delivered by Welsh Women's Aid and funded by the Welsh Government).



Quality standards: VAWDASV specialist services in Wales operate within a framework of accredited quality service standards which provide benchmarks for service providers, funders and commissioners about the extent and mix of services that should be available, who should provide them, and the evidence-based principles and practice base from which they should operate. In Wales, Welsh Women's Aid delivers the National Quality Service Standards for domestic abuse services, supported by the Welsh Government, that operate alongside dedicated sexual violence service standards for Wales accredited by Rape Crisis England & Wales and Survivors Trust. These are accompanied by Imkaan's service standards for specialist services led by and for Black and minority women, and Respect standards for working with perpetrators.

Who uses specialist services?

Violence against women, domestic abuse and sexual violence occurs in all communities and is widespread throughout every socioeconomic group, irrespective of age, gender identity, ability, sexuality, ethnicity religion or belief. However, it often remains hidden due to threats, shame, embarrassment, and fear.

Men are disproportionately perpetrators of abuse and women are disproportionately impacted by domestic violence and abuse, sexual violence and child sexual abuse, stalking, so called 'honour-based' violence, forced marriage, female genital mutilation (FGM), gang-related violence, and human trafficking. Some groups of women are more likely to be abused, including younger women, disabled women and girls, women and girls with mental health support needs, drug/alcohol dependency, or facing homelessness. Women from some Black and minority groups may face further barriers to seeking help due to racism, discrimination, stigmatisation, and community rejection.

Welsh Women's Aid promotes an intersectional approach, recognising the unique experiences of survivors of abuse and the ways in which difference and disadvantage may help or hinder access to support, safety, and justice. Differences such as age, sex, gender, class, ethnicity, ability, and sexuality intersect to inform lived experiences and these factors can further reinforce conditions of inequality and exclusion. This means that sex and gender-based violence can also be connected to factors such as ethnicity, age, class, disability, and sexuality.

When delivering support services, specialist services are committed to antidiscriminatory practice and to addressing the intersecting inequalities experienced by women and men.

Member services are encouraged to disaggregate data by the nine 'protected characteristics' identified in the Equality Act 2010 (sex, age, disability, gender reassignment, race, religion or belief, sexual orientation, marriage or civil partnership, and pregnancy and maternity). This data is collected for survivors who are newly referred to and who engage with specialist services for support,³ to help services comply with their legal responsibility to ensure services are accessible and targeted, and that anyone using their services is treated fairly and not discriminated against.

3 Data is available for survivors who engaged with community-based, sexual violence and refuge-based services only. Data related to protected characteristics related to children and adults aged 16+.

1.1: Sex of survivors

The sex of survivors was collected for 99% $(n=9,657)^4$ of survivors who engaged with specialist services in the financial year 2022/23. Across the specialist services, 95% (n=9,212) of all survivors were female whilst male survivors represented 5% (n=442) of the data sample. Of note, <1% (n=3) of survivors were categorised as 'intersex'. Of the 442 male survivors, the highest proportion (n=76, 10%) accessed sexual violence services which is congruent with the data provided in 2021/22.

Table 1:

		e-based port	Community- based support		Dedicated sexual violence support		Dedicated sexual exploitation support	
Male	11	2%	355	4%	76	10%	0	0%
Female	598	98%	7,872	96%	666	90%	76	100%
Other	0	0%	3	0%	0	0%	0	0%
Prefer not to say	0	0%	0	0%	0	0%	0	0%
Total sample	609		8,230		742		76	
Data unavailable	0		107		10		12	

1.2: Age

The data on age was available for 73% (n=7,131) of the survivors accessing specialist support services. The most prevalent age category of survivors accessing support services this financial year were between the ages of 25-34 (n=2,186, 31%). This aligns with the data provided in the previous financial year (2021/22). Of the 7,131 survivors whose age was recorded, 11% (n=811) were aged 16-24 whilst 1% (n=61) were aged 16 or under. This financial year, 2% (n=145) of survivors were aged 65 or over.

⁴ This figure is not inclusive of the survivors who chose not to disclose their sex.

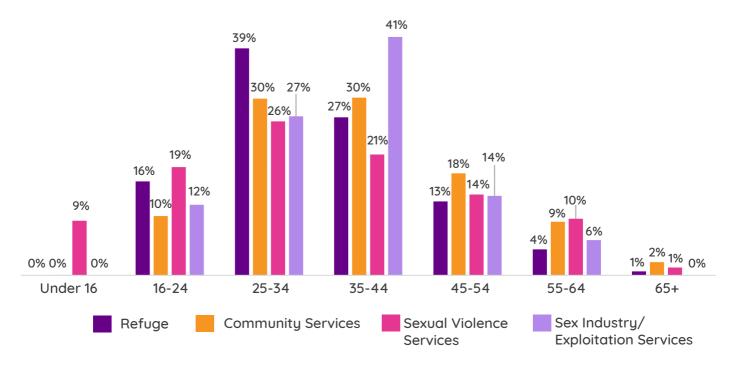


Figure 1: Age ranges of survivors engaging with services following referral

1.3: Disability

Welsh Women's Aid supports and advocates for the social model of disability and thus we aim to remove unnecessary barriers which may prevent survivors with a disability from accessing specialist support services. Of the survivors who engaged with the services, at least 15% (n=1,465) disclosed a disability, with the highest proportion (n=154, 20%) accessing sexual violence-based support services. Of note, it is likely that these figures are an underestimation as not all organisations are able to collate this data. Research⁵ has evidenced that women with a disability are more likely to experience violence and abuse than non-disabled women. For more information about VAWDASV and disability, please refer to our recent report with Disability Wales surveying survivors, which sets out recommendations for specialist and public services.⁶

5 ONS, Disability and Crime, UK: 2019 [Website],

<u>www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/compendium/focusonviolentcrimeandsexualoffences/yeare</u> <u>ndingmarch2015/chapter4intimatepersonalviolenceandpartnerabuse#heavily-victimised-groups-of-partner-abuse</u>, (accessed 25 August 2021).

6 The report is available online: www.welshwomensaid.org.uk/wp-content/uploads/2019/04/WWA-and-Disability-Wales-2019-report-Final-ENG.pdf

1.4: Gender identity

Of the 7,758 (79%) survivors who disclosed their gender identity, 94% (n=7,256) of survivors identified as a woman, 5% (n=386) of survivors identified as a man and 1% (n=89) identified as transgender.

1.5: Race and ethnicity

Data on ethnicity was available for 69% (n=6,732) of survivors. Of these, White: British, was the most prevalent ethnicity of survivors (n=6,219, 92%), followed by White: Other (n=195, 3%). Of note, just 8% (n=513) of survivors identified as a race or ethnicity other than White British. A full breakdown of ethnicity has been provided in *Table 2*.

Table 2:

Ethnic backgrounds of survivors engaging with services following referral

		-based port			Dedicated sexual violence support		Dedicated sexual exploitation support	
White: British (Welsh/English/Scottish /Northern Irish)	483	84%	5,211	94%	452	88%	73	96%
White: Irish	2	0%	18	0%	2	0%	0	0%
White: Irish or Gypsy Traveller	6	1%	5	0%	1	0%	0	0%
White: Other	25	4%	134	2%	36	7%	0	0%
Mixed/multiple ethnic group: White and Asian	3	1%	4	0%	3	1%	0	0%
Mixed/multiple ethnic group: White and Black African	2	0%	13	0%	3	1%	0	0%
Mixed/multiple ethnic group: White and Black Caribbean	3	1%	24	0%	1	0%	0	0%
Mixed/multiple ethnic group: Other mixed	7	1%	34	1%	3	1%	0	0%

		efuge-based Community- support based support		Dedic sexual v supp	iolence	Dedicated sexual exploitation support		
Asian or Asian British: Bangladeshi	6	1%	6	0%	2	0%	0	0%
Asian or Asian British: Chinese	0	0%	7	0%	0	0%	0	0%
Asian or Asian British: Indian	1	0%	17	0%	5	1%	0	0%
Asian or Asian British: Pakistani	4	1%	2	0%	0	0%	0	0%
Asian or Asian British: Other Asian	3	1%	23	0%	2	0%	0	0%
Black or Black British: Black African	5	1%	17	0%	1	0%	2	3%
Black or Black British: Black Caribbean	1	0%	5	0%	0	0%	0	0%
Black or Black British: Other Black	1	0%	4	0%	1	0%	1	1%
Other Ethnic Group: Arab	5	1%	8	0%	0	0%	0	0%
Other Ethnic Group: Other	17	3%	38	1%	0	0%	0	0%
Total sample	574	100%	5,570	100%	512	100%	76	100%
Data unavailable	35		2,767		240		12	

1.6: Religion or belief

Of the 5,071 (52%) survivors who disclosed their religion or belief, 81% (n=4,098) were recorded as having no religion. The most prevalent categories of religion were 'Christianity (all denominations)' which accounted for 14% (n=708) of survivors, followed by Islam which represented 1% of survivors (n=54).

Table 3:

Religion or belief of survivors engaging with services following referral

		Refuge-based Community- support based support		Dedic sexual v supp	violence	Dedicated sexual exploitation support		
No religion	340	76%	3,504	82%	241	77%	13	76%
Buddhist	0	0%	13	0%	0	0%	0	0%
Christian (all denominations)	71	16%	577	13%	58	19%	2	12%
Hindu	0	0%	10	0%	0	0%	0	0%
Jewish	0	0%	3	0%	0	0%	0	0%
Muslim	19	4%	24	1%	9	3%	2	12%
Sikh	1	0%	4	0%	1	0%	0	0%
Other	18	4%	159	4%	2	1%	0	0%
Total sample	449	100%	4,294	100%	311	100%	17	100%
Data available	160		4,043		441		71	

1.7: Sexual orientation

Sexual orientation was disclosed by 5,956 survivors which represents 61% of all survivors accessing support services in this financial year (2022/23). Of the 5,956 survivors, 93% (n=5,558) disclosed that they were heterosexual. Table 4 provides a breakdown of sexual orientation by service.

Table 4:

Sexual orientation of survivors engaging with services following referral

		e-based port	Community- based support				Dedicated sexua exploitation support	
Bisexual	27	6%	100	2%	65	16%	1	2%
Gay/homosexual male	4	1%	22	0%	5	1%	0	0%
Lesbian/homosexual female	14	3%	78	2%	18	4%	0	0%
Heterosexual	430	90%	4,767	95%	303	74%	58	98%
Other	3	1%	41	1%	20	5%	0	0%
Total sample	478	100%	5,008	100%	411	100%	59	100%
Data available	131		3,329		341		29	

1.8: Pregnancy and maternity

Of the 9,212 survivors who disclosed that they were female, 3% (n=291) were pregnant when accessing support services. When each service was viewed in isolation, 6% (n=38) of survivors accessing refuge-based support services, 3% (n=240) of survivors accessing community-based support services, 2% (n=12) of survivors accessing sexual-violence based support services and 1% (n=1) accessing dedicated sexual exploitation services were pregnant. In addition, within this reporting period, 2% (n=221) of females were reported to have had a child in the previous 12 months.

1.9: Language

In this reporting period, where language was recorded (n=6,658), 1% (n=99) of survivors disclosed that their first language was Welsh. Notably, for 3% (n=191) of survivors, their first language was neither English nor Welsh.

1.10: Relationship to perpetrator

In this financial year, where data was recorded (n=6,141, 63%), most perpetrators were categorised as an ex-partner (n=3,676, 60%) followed by current partners (n=1,763, 29%).

Table 5: Relationship to Perpetrator

		e-based port	Community- based support		مممنه المأتين المتنتيم م		Dedicated sexuc exploitation support	
Current Partner	117	23%	1,582	31%	53	9%	11	31%
Ex-Partner	350	68%	3,049	61%	271	48%	6	17%
Son	7	1%	132	3%	2	0%	0	0%
Daughter	0	0%	37	1%	0	0%	0	0%
Father	9	2%	57	1%	35	6%	0	0%
Mother	10	2%	45	1%	4	1%	0	0%
Step-Father	4	1%	18	0%	11	2%	0	0%
Step-Mother	2	0%	5	0%	0	0%	0	0%
Other Male	12	2%	116	2%	188	33%	12	34%
Other Female	3	1%	42	1%	2	0%	6	17%
Total sample	513	100%	5,082	100%	565	100%	35	100%
Data available	96		3,309		187		53	

Refuge-based support services

2.1. Referrals and access to services

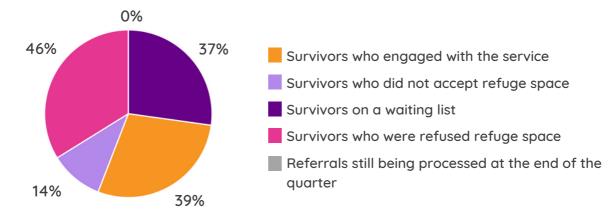
In this financial year, 739 survivors were supported by refuge-based support services, 98% (n=725) of whom were female. Of the 1,542 survivors who were referred into the service during this financial year, 39% (n=609) were supported by a service whilst 46% (n=712) of survivors were not able to be supported for reasons such as availability of space, safety, and individual needs.

Table 6:

Survivors referred to and accessing refuge-based support

	Women	Men	Other	Total
Total survivors supported in refuge-based services in 2022/23	725	14	0	739
No. of new referrals received in period	1,475	67	0	1,542
No. of survivors referred and engaged with service	598	11	0	609
Survivors not able to be supported by service	664	48	0	712
No. of survivors who did not accept support from service	209	8	0	217
No. of survivors on the waiting list at the end of Q4	0	0	0	0

Figure 2: Engagement with refuge-based support services across Wales⁸



2.2. Survivors unable to be supported

Survivors who could not supported by the refuge

In this financial year, 46% (n=712) of all new referrals were refused refuge-based support services. Where refusal reason was recorded (n=590, 83%), a shortage of refuge space was the most prevalent reason for refusal (n=164, 28%), which is congruent with the data provided in the previous financial year. Additional support needs associated with drugs and alcohol represented 17% (n=100) of all refusal reasons, followed by 11% (n=66) or referrals who were refused space as they were not experiencing domestic abuse. Table 7 demonstrates the number of refuge-based organisations in Wales who have the capacity to offer support to survivors with certain additional support needs and services to highlight the additional barriers faced when accessing support services.

8 Figure 2 is based on 1,999 referrals; the discrepancy is due to referrals placed on waiting lists across the financial year and therefore does not match the total number of new referrals received in this financial quarter.

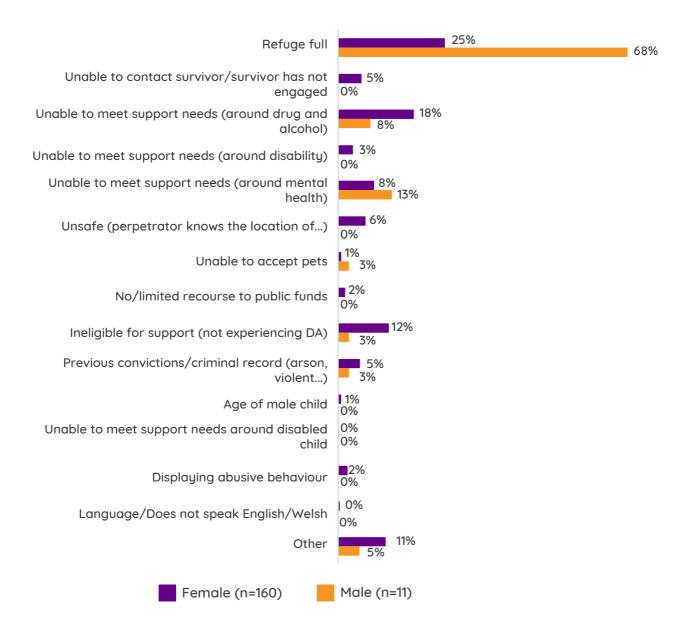
Table 7:

Number of refuge-based support organisations in Wales who accept women with additional support needs across 36 services in Wales⁹ (Routes to Support, October 2021).

Additional support needs	No. services	% of services
Women with mental health support needs	30	83%
Women with drug dependency needs	23	64%
Women with alcohol dependency needs	23	64%
Women on a Methadone programme	29	81%
No Recourse to Public Funds (NRPF)	13	36%
Wheelchair access	14	39%

9 This data includes multiple services which may fall under one umbrella organisation.

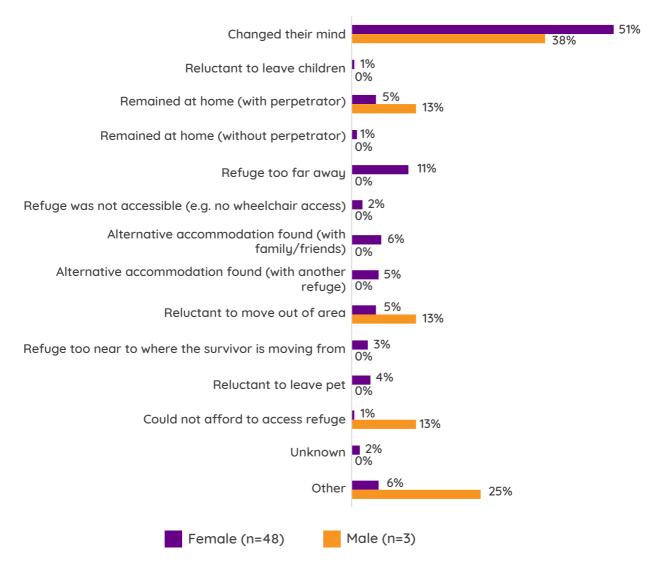
Figure 3: Reason survivors were not able to be supported by services in Wales



Survivors who did not accept support following referral

In this financial year, 14% (n=217) of all survivors referred (n=1,542) to refuge-based support services did not accept support, of which the reason was recorded for 92% (n=199). The most prevalent reason documented was 'a change of mind' (n=100, 50%). Of note, 11% (n=21) of the survivors refused as the refuge were too far away and 4% (n=7) of survivors were averse to leaving their pet. The lack of refuge spaces, as aforementioned, has an impact on the accessibility of refuge, as survivors may be required to temporarily relocate which means leaving the comfort of their community, family, work, pets, and children.

Figure 4: Reason survivors did not accept support from services



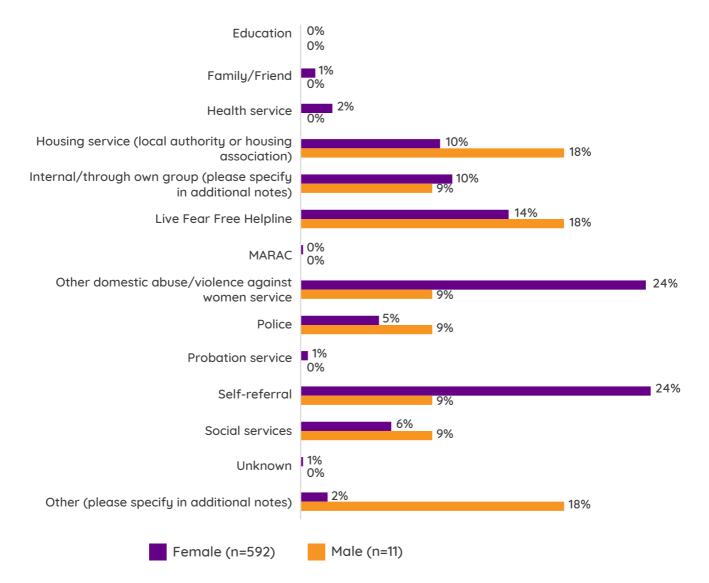
2.3. Referral sources and location

Referral sources

The data on the referral source was collected for 99% (n=603) of all survivors (n=609) accessing support this financial year. Self-referrals (n=144, 24%) and 'other VAWDASV services' (n=142, 24%) were the two most prevalent referral sources in this financial year. 'Other VAWDASV services' refers to external organisations within the sector who may not have capacity to support survivors themselves, and 'Internal Service' refers to another VAWDASV service being delivered within the organisation such as drop-in or IDVA. Both referral sources indicate that the survivor has already been accessing support for domestic abuse and, as such, has been assessed by a professional as requiring refuge support. This is a pivotal finding as it demonstrates that it is the wider system prior to refuge that enables engagement. When the data is broken down by sex, the most prevalent referral source for males (n=11) who

engaged with refuge-based support services in the financial year was through the housing service (local authority or housing association) (n=2, 18%) and the Live Fear Free Helpline (n=2, 18%). For females, the primary referral source was through self-referral (n=143, 24%).

Figure 5: Referral sources for survivors in Wales



Location

Specialist services in Wales provided information on the referral areas of 99% (n=604) of all survivors (n=609) who engaged with refuge-based support services in this financial year. Aligning with the data from the previous year, the largest proportion of survivors (n=305, 50%) were supported by services outside their local authority (within Wales). These findings support the importance of the national network of refuge services which enables survivors to move across local authority boundaries to access support and safety. Survivors and their children fleeing domestic abuse need quick access to the national (and UK) network of refuge-based

support. Survivors will not always be accepted or referred to refuges within the same area because there may not be capacity at that point to accept referrals, or it may not be safe to be housed within proximity to the perpetrator(s).

Table 8:

Local referral area of survivors who engaged with refuge-based support services

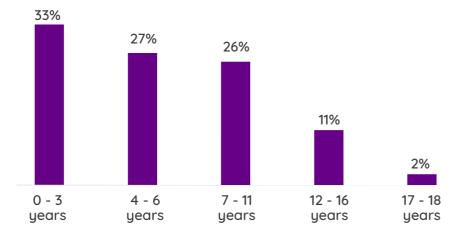
	Female	Male	т	otal
Own local authority	199	4	203	34%
Another local authority area in Wales	299	6	305	50%
Another local authority area in UK	95	1	96	16%
Outside of the UK	0	0	0	0%
Data unavailable	5	0	0	

2.4. Children of survivors in refuge-based support

Due to the format in which this data is collated, to avoid double counting, a quarterly average has been used to represent the number of children supported by refugebased support services.¹⁰ Twenty two percent (n=164) of all survivors supported in this financial year (n=739) had children who either lived with them at the refuge (n=131) or elsewhere (n=33). Subsequently, it can be purported that refuge-based support services directly supported 246 children in refuge per quarter (Total n=987). Where data on age was recorded (n=224), the most prevalent age of children who were in the refuge, on average was between 0-3 years (n=75, 33%).

Figure 6:

The average age of children in refuge



10 Data is calculated from the quarterly datasets for all children in service. As children can be in the service over multiple quarters, a quarterly average has been used to represent the number of children supported in refuge in any one period to prevent double counting.

In addition to the average of 246 children supported by refuge-based support services in a quarter, there was also an average of 33 children who did not live with survivors in the refuge, 40% (n=19) of whom were housed with social services and 24% (n=11) with another family member.

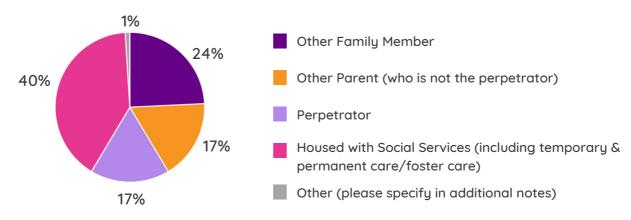


Figure 7: Place of residence of the children not housed in the refuge

2.5. Sex of primary perpetrator

The sex of the primary perpetrator was recorded for 99% (n=601) of all survivors (n=609) who engaged with specialist services in this financial year. Of the 604 survivors where the sex of the primary perpetrator was recorded, 92% (n=555) of the perpetrators were male whilst 7% (n=45) of perpetrators were female. A further breakdown revealed that male perpetrators were involved in 93% (n=550) of disclosures by female survivors (n=590).

Table 9:

Sex of primary perpetrator

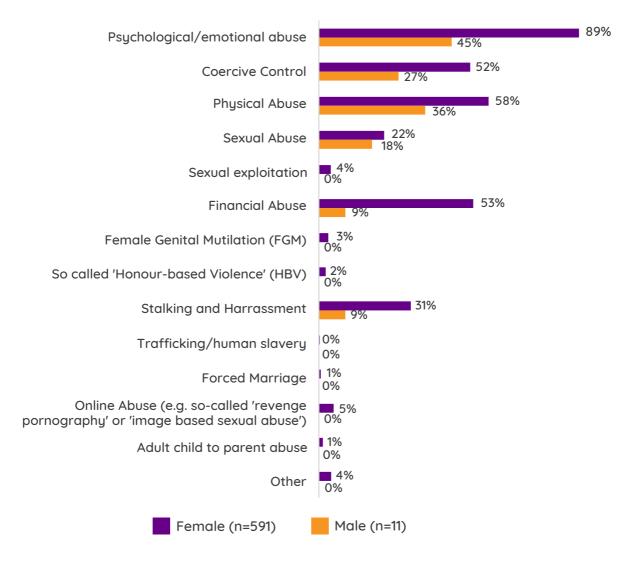
	Female survivor	Male survivor	Total	
Male perpetrator	550	5	555	92%
Female perpetrator	39	6	45	7%
Identifies as another sex	1	0	1	0%
Data unavailable	8	0	8	

2.6. Types of abuse

Notably, survivors were likely to experience an average of three forms of abuse.¹¹ Psychological/emotional abuse (n=531, 87%) and physical abuse (n=347, 57%) were the two most prevalent forms of abuse experienced by survivors (n=602). A substantial proportion of survivors were also experiencing financial abuse (n=313, 51%). Furthermore, 31% (n=187) survivors had been subjected to stalking and harassment. This is a substantial indicator of the need for refuge for women as the abuse continues beyond the end of a relationship. Notably, 5% (n=30) of survivors had experienced online abuse.

Figure 8:

Abuse types experienced by survivors in refuge-based support

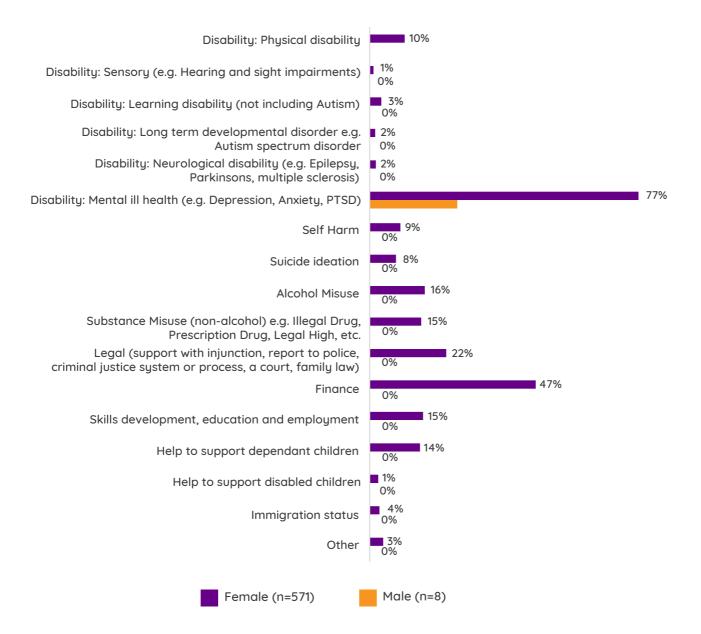


11 Total number of abuse types divided by total number of survivors included in the dataset.

2.7. Support needs

There are many survivors accessing refuge-based support services who have additional support needs (Figure 9), however, not all services are able to record this data and thus the data presented in this report is likely to be an underestimate. Support associated with mental health (n=441, 76%) and finances (n=271, 47%) were the two additional support needs which were the most prevalent in this financial year. Of note, 10% (n=57) of the survivors who disclosed additional support needs (n=579) had a physical disability, however, according to the 'Routes to Support' database (2021), of the 37 refuge-based support services in Wales, just 35% had wheelchair access. In addition, just 11% of refuges could accommodate a caregiver. These present substantial barriers for survivors.

Figure 9: Additional support needs of survivors in refuge-based support



2.8. Multi-agency risk assessment conference (MARAC) referrals

Survivors who are assessed as being at a high risk of being subjected to significant harm and/or homicide from perpetrators of domestic abuse are referred from the specialist services to a multi-agency risk assessment conference (MARAC) - a meeting attended by key agencies to discuss options for increasing the safety of the victim. For survivors who reside in refuge-based support services, the number of referrals made to MARAC and the number of service users who have been discussed at MARAC this financial year have been recorded. In total, 154 referrals were made to MARAC, of which 98% (n=151) were female and the remaining 2% (n=3) were male. There were 156 survivors discussed at MARAC.

2.9. No Recourse to Public Funds: Refuge-based support

In this financial year, 21 survivors with 'no recourse to public funds' (NRPF) were referred to refuge-based support services in Wales, 86% (n=18) of whom were supported by refuge-based support services. Whilst women and children with NRPF can still access refuge accommodation and other types of support, the UK Government issued guidance asking local authorities to assist people with NRPF in finding shelter and other support during the pandemic.¹³ This may have resulted in the decrease in referrals. For some survivors, their residence permits enable them to live in the UK, however, it may include the 'no recourse to public funds' (NRPF) clause which prevents access to benefits, tax credits, homelessness assistance and/or social housing.¹⁴

2.10. Moving on from specialist support

Length of stay

In this financial year, 565 survivors ceased support with refuge-based support services, of which, data was available for 99% (n=561) of survivors. Table 10 displays the length of time spent in refuge. Of the 561 survivors whose length of stay was recorded, the most prevalent length of stay was 6 months or less (n=444, 79%).

¹² The number of survivors discussed at MARAC were greater than the number of referrals as it is likely that a number of referrals were not discussed in quarter 4 of the previous financial year.

¹³ Scottish Women's Rights Centre, *Covid-19 and Support* [Website], https://www.scottishwomensrightscentre.org.uk/news/covid-19coronavirus-info/domestic-abuse-during-covid-19coronaviruswhat-can-i-do/. [Accessed 26/08/2021]

¹⁴ A full list of what is classed as 'public funds' and exceptions is available at: http://www.nrpfnetwork.org.uk/information/Pages/public-funds.aspx.

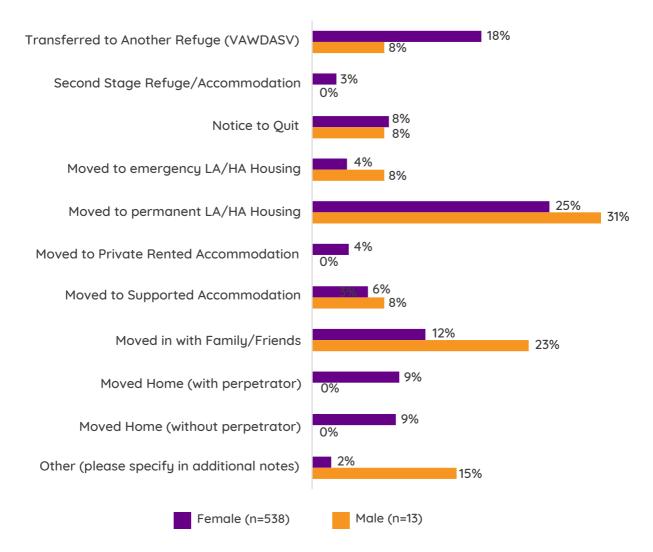
Table 10: Length of stay for survivors who left the service

	Fen	nale	Male		Total survivor	
6 Days or Less	72	13%	0	0%	72	13%
1 - 2 Weeks	60	11%	0	0%	60	11%
2 - 3 Weeks	40	7%	2	15%	42	7%
3 - 4 Weeks	33	6%	1	8%	34	6%
1 - 2 Months	67	12%	1	8%	68	12%
2 - 3 Months	50	9%	1	8%	51	9%
3 - 4 Months	48	9%	0	0%	48	9%
4 - 5 Months	35	6%	0	0%	35	6%
5 - 6 Months	31	6%	3	23%	34	6%
6-12 Months	79	14%	3	23%	82	15%
More than 12 Months	33	6%	2	15%	35	6%
Total	548		13		561	
Data unavailable	4		0		4	

Move-on reason

The move-on reason was recorded for 98% (n=551) of survivors in this reporting period. Of the 551 survivors whose reason for ceasing refuge was recorded, 25% (n=140) moved to permanent local authority/housing authority homes, 18% (n=98) were transferred to another refuge and 12% (n=68) moved in with family or friends.

Figure 10: Reason for ceasing refuge-based support



Community-based support services

3.1: Referrals and access to service

Community-based support services in Wales supported 9,155¹⁵ survivors in the community, 96% (n = 8,755) of whom were female. Examples of community-based support services include, but are not limited to, drop-in sessions, group work, advocacy, counselling, and peer-support. It is important to note that this figure is likely to be an underestimate as some member organisations were unable to report their figures. There were 12,171 new referrals received in this period. According to the data provided by the national membership of services, 8,337 survivors engaged with the service (68%) whilst 498 survivors were refused space (4%).

Table 11:

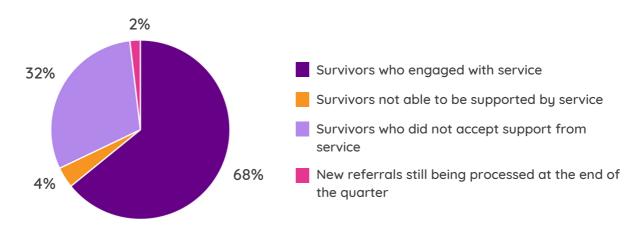
Survivors referred to and accessing community-based support¹⁶

	Female	Male	Other	Data missing	Total
Total survivors supported in community- based services in 2022/23	8,755	385	4	11	9,155
No. of new referrals received in this period	11,492	653	5	21	12,171
No. of survivors referred and engaged with service	7,966	355	3	13	8,337
Survivors not able to be supported by service	452	43	0	3	498
No. of survivors who did not accept support from service	3,583	244	2	14	3,843
No. of survivors on the waiting list at the end of Quarter 4	215	7	0	0	222
No. of new referrals still being processed at end of Quarter 4	94	8	0	0	102

¹⁵ Total supported calculated using total supported figure in Q1, then all new starters from Q2, Q3 and Q4 to prevent double counting.

¹⁶ Inconsistency of 831 referrals in *Table 11* is due to referrals engaging with community-based support services this quarter who may have been on previous waiting lists.

Figure 11: Engagement with community-based support services across Wales



3.2: Children and young people service provision

The national membership of services directly supported 2,067 children. Direct services accessed by children and young people can include one-to-one counselling, or group programmes designed to help children and young people come to cope with their experiences of domestic abuse. In 2022, the Welsh Government published their VAWDASV strategy 2022-2026,¹⁷ one objective of which stipulates the aim for "increased awareness in children, young people, and adults of the importance of safe, equal and healthy relationships and empowering them to positive personal choices". Furthermore, 2022 saw the introduction of new guidance provided by the Criminal Prosecution Service (CPS) which stipulates that "children affected by domestic abuse will be automatically treated as victims regardless of whether they were present during violent incidents".¹⁸

This financial year, 1,234 children were supported through awareness raising sessions.

Table 12: Support delivered to children and young people

	No. supported
No. of children directly supported (either one to one or in family sessions)	2,067
Total children supported this quarter through awareness raising (e.g. in schools)	1,234

¹⁷ Welsh Government (2022), Violence against women, domestic abuse and sexual violence: strategy 2022-2026 [*website*], <u>https://gov.wales/violence-against-women-domestic-abuse-and-sexual-violence-strategy-2022-2026-html</u> (accessed 19th July 2022).

¹⁸ CPS (2022), Children Classed as Domestic Abuse Victims Under New Guidance. [Website],

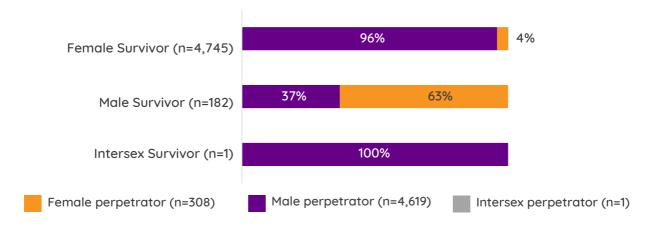
https://www.cps.gov.uk/cps/news/children-classed-domestic-abuse-victims-under-new-guidance (accessed 6th July 2023).

3.3: Sex of the primary perpetrator

The sex of the primary perpetrator was recorded for 59% (n = 4,928) of survivors accessing support services in this financial year (total n = 8,337). Of these, 94% (n = 4,619) of the perpetrators were male, further demonstrating the gendered natured of VAWDASV. For female survivors (n = 4,745), 96% (n = 4,551) of perpetrators were male, whilst the 4% (n = 193) were female. For male survivors (n = 182), 63% (n = 115) of perpetrators were female and the remaining 37% (n = 67) were male.

Figure 12:

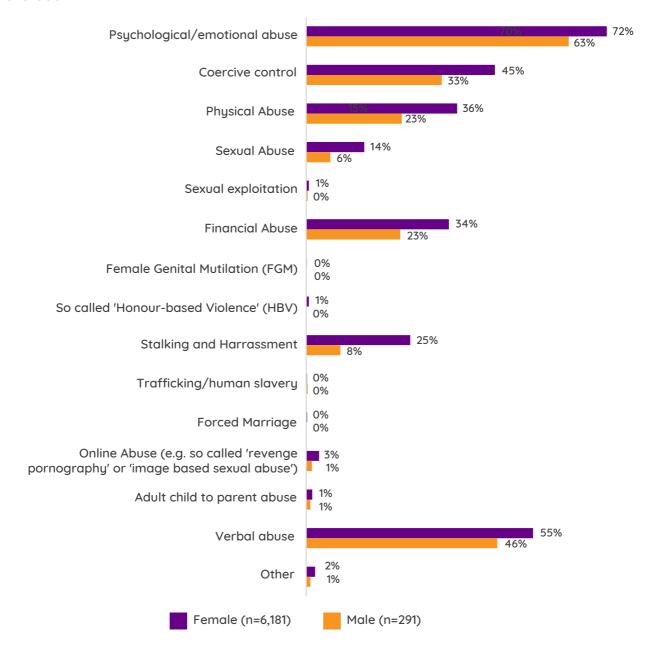
Sex of the primary perpetrator



3.4: Types of abuse disclosed

The abuse experienced by survivors was recorded for 78% (n = 6,482) of all new survivors who engaged with community-based support services this financial year (total n = 8,337). This financial year, psychological abuse (n = 4,661, 72%), verbal abuse (n=3,513, 54%) and coercive control (n = 2,904, 45%) were the three most prevalent forms of abuse. Notably, stalking and harassment was experienced by 24% (n=1,575) of survivors and financial abuse experienced by 34% (n=2,192).

Figure 13: Abuse types experienced by survivors accessing community-based support services ¹⁹

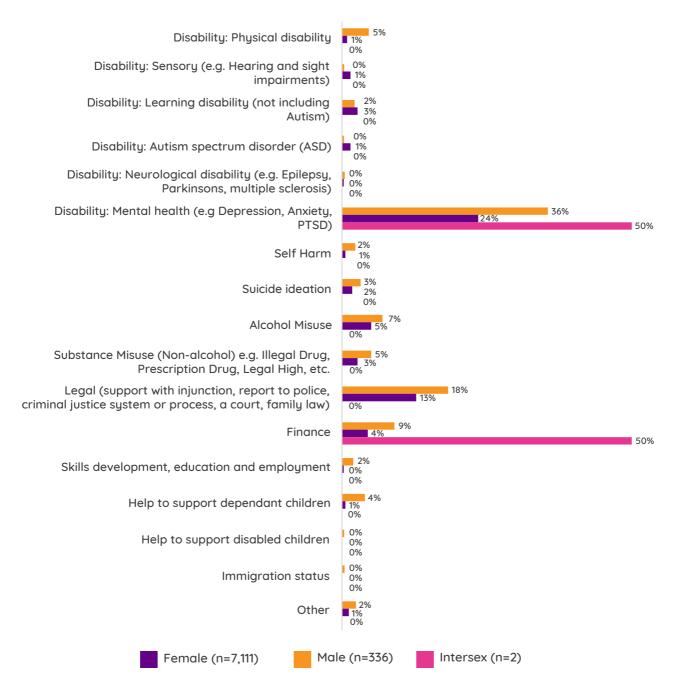


3.5: Support needs

Additional support needs were recorded for 66% (n = 5,501) of all survivors accessing community-based support services this financial year (n = 8,337). As in the last financial year, services reported that the highest support need for survivors was that of a disability related to mental health, which was disclosed by 50% (n = 2,741) of survivors. This was followed by the need for legal support, which was disclosed by 21% (n = 1,166) of survivors and financial support, which was disclosed by 12% (n = 665) of survivors this year. This data aligns with the findings of the previous financial year.

¹⁹ Discrepancy of 8 survivors due to survivors for whom sex was not recorded.

Figure 14: Additional support needs in community-based support services



3.6: Safeguarding and Multi-agency Risk Assessment Conference (MARAC) Referrals

Survivors who are assessed as being at a high risk of being subjected to significant harm and/or homicide from perpetrators of domestic abuse are referred from specialist services to a multi-agency risk assessment conference (MARAC). This is a meeting attended by key agencies to discuss options to increase the safety of the survivor. In 2022/23, 353 referrals were made to a MARAC, whilst 1167 survivors were discussed at a MARAC. While MARAC referrals can be made by community

based VAWDASV services, referrals can also originate from other organisations, meaning survivors are discussed at meetings without being directly referred by the service.

Sexual Violence services

4.1: Referrals and access to service

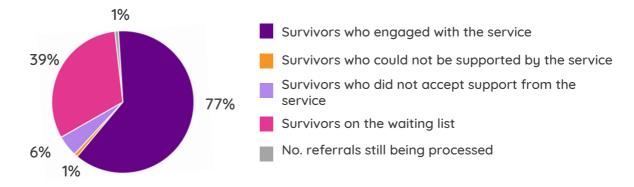
Referral data obtained from our dedicated sexual violence support services revealed that a total of 1,015 survivors²⁰ were supported across the 2022/23 financial year. Of the 1,015 survivors, 90% (n = 910) were female, 9% (n = 95) were male, and for <1% (n = 10) of survivors, their sex was not recorded. The primary reason for refusal by a specialist organisation was "survivor has not engaged" (n=8, 62%).

Table 13:

Survivors referred to and accessing sexual violence support

	Female	Male	Other	Data missing	Total
Total survivors supported in this financial year 2022/23	910	95	0	10	1,015
No. of new referrals received in this period	862	96	5	8	971
No. of survivors referred and engaged with service	666	76	0	10	752
Survivors not able to be supported by service	9	3	1	0	13
No. of survivors who did not accept support	55	5	1	0	61
No. of survivors on the waiting list at the end of Quarter 4	339	33	0	3	375
No. referrals still being processed at the end of Quarter 4	11	0	0	0	11

Figure 15: Engagement with dedicated sexual violence services²¹



20 Total supported calculated with total supported figure in Q1, then all new starters from Q2, Q3 and Q4 to prevent double counting.

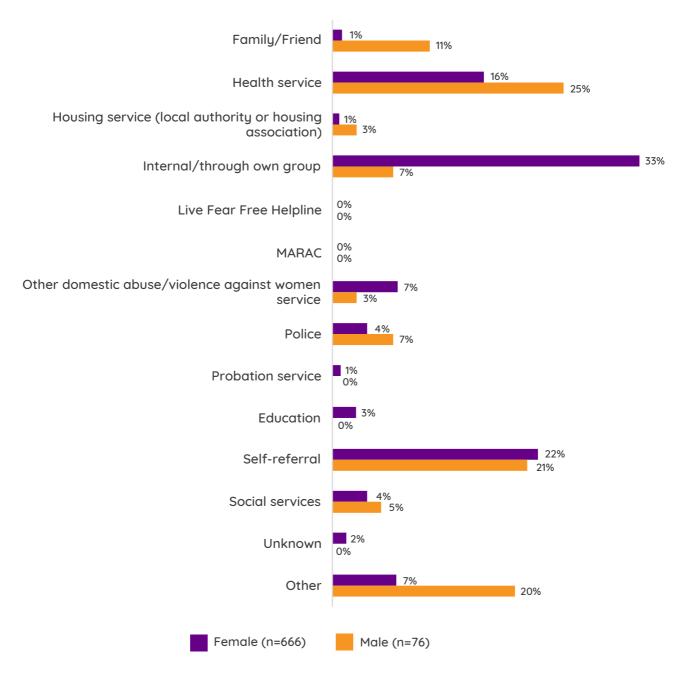
21 Figure 15 is based on 1,212 referrals; the discrepancy is due to referrals placed on waiting lists across the financial year.

4.2: Referral sources

Referral sources

In this financial year, the source of referral was recorded for 99% (n = 742) of survivors who accessed sexual violence services (total n = 752). Of the 752 survivors, internal referrals were the primary referral source disclosed (n=226, 30%). This was followed by self-referral (n=164, 22%) and the health service (n=128, 17%). In congruence with the previous financial year, there were no referrals made through a MARAC.

Figure 16:



Referral sources to sexual violence services in Wales

4.3: Sex of the primary perpetrator

The sex of the primary perpetrator was recorded for 62% (n = 466) of all survivors who accessed sexual violence services this financial year (n = 752). Of the 420 female survivors where the sex of the perpetrator had been recorded, 98% (n = 412) were male and the remaining 2% (n = 8) were female. For male survivors (n = 46), 91% (n = 42) of the perpetrators were male and the remaining 9% (n = 4) were female.

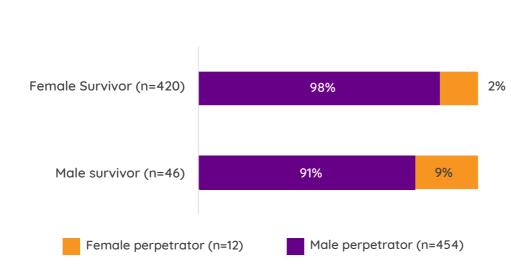
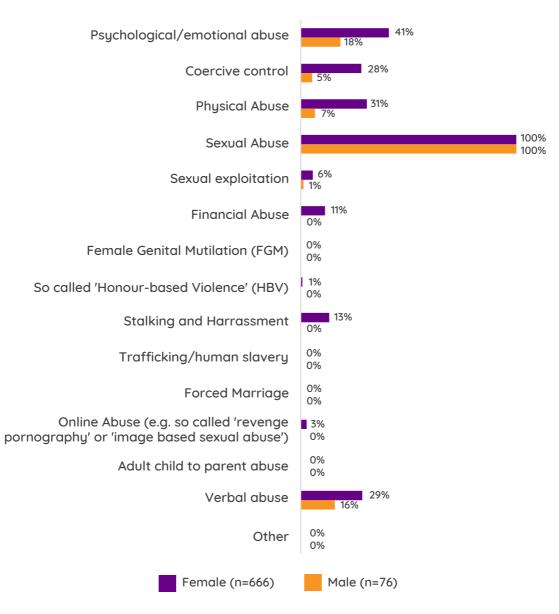


Figure 17: Sex of the primary perpetrator

4.4: Types of abuse disclosed

The type of abuse experienced by survivors in this financial year was recorded for 99% (n = 744) of survivors who engaged with sexual violence-based support services this financial year (total n = 752). As in the last financial year, sexual abuse remained the most prevalent form of abuse disclosed by survivors (100%, n = 744), followed by psychological/emotional abuse (38%, n = 286), and then physical abuse (28%, n = 209).

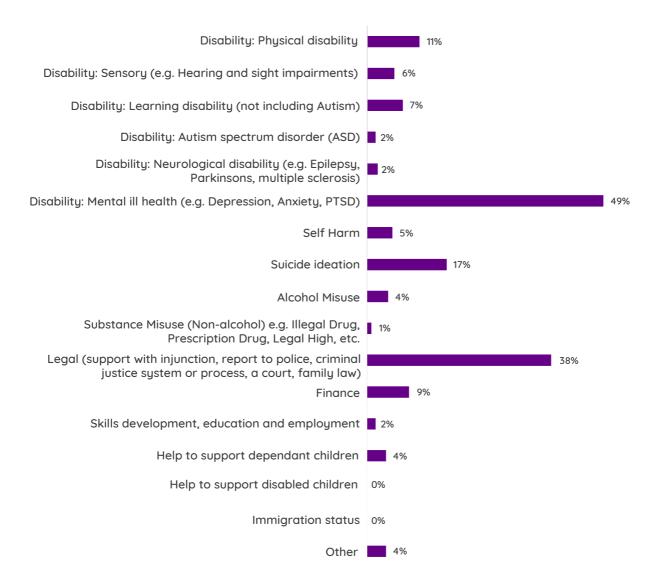
Figure 18: Types of abuse disclosed by survivors



4.5: Support needs

Data pertaining to the additional support needs of survivors was recorded for 77% (n = 580) of all survivors who engaged with sexual violence-based support services this year (n = 752). Mental health support remained the most prevalent additional support need disclosed by survivors in this reporting period (66%, n = 380), followed by legal support (33%, n = 193) and self-harm (24%, n = 140). In line with the findings from previous financial years, the proportion of survivors with additional support needs surrounding suicidal ideation was highest for those who were accessing sexual violence-based support services (23%) in comparison to refuge (7%), community-based support services (4%) and sexual exploitation services (22%). Comparatively, for self-harm, the highest proportion of survivors accessed dedicated sexual exploitation services (35%).

Figure 19: Additional support needs of survivors



Sexual Exploitation services

5.1: Referrals and access to service

Referral data obtained from our dedicated sexual violence support services revealed that a total of 187 survivors²² were supported across the 2022/23 financial year. Of the 187 survivors, 99% (n = 186) were female, 1% (n = 1) were male. The primary reason why a survivor chose not to accept support was due to survivor not engaging (n=4, 50%).

Table 14:

Survivors referred to and accessing dedicated exploitation services

	Female	Male	Other	Data missing	Total
Total survivors supported in this financial year 2022/23	186	1	0	0	187
No. of new referrals received in this period	96	0	0	0	96
No. of survivors referred and engaged with service	88	0	0	0	88
Survivors not able to be supported by service	0	0	0	0	0
No. of survivors who did not accept support	8	0	0	0	8
No. of survivors on the waiting list at the end of Quarter 4	0	0	0	0	0
No. referrals still being processed at the end of Quarter 4	0	0	0	0	0

Figure 20: Engagement with dedicated sexual exploitation services



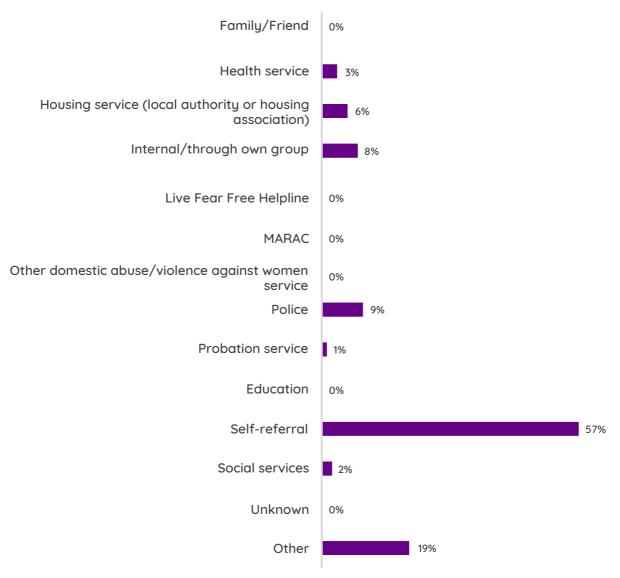
22 Total supported calculated with total supported figure in Q1, then all new starters from Q2, Q3 and Q4 to prevent double counting.

5.2: Referral sources

Referral sources

In this financial year, the source of referral was recorded for 100% (n = 88) of survivors who accessed dedicated sexual exploitation services (total n = 88). Of the 88 survivors, self-referrals were the primary referral source disclosed (n=50, 57%). This was followed by the police (n=8, 9%) and then internal referrals (n=7, 8%).

Table 21: Referral sources to sexual exploitation services in Wales



5.3: Sex of the primary perpetrator

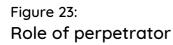
The sex of the primary perpetrator was recorded for 99% (n = 87) of all survivors who accessed dedicated sexual exploitation services this financial year (n = 88). Of the 87 female survivors where the sex of the perpetrator had been recorded, 95% (n = 83) were male and the remaining 5% (n = 4) were female.

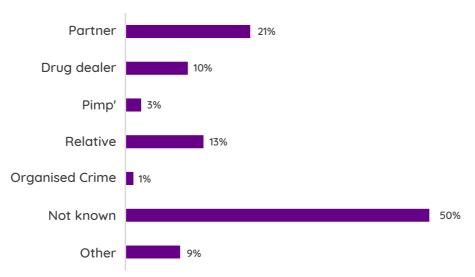
Figure 22: Sex of the primary perpetrator



5.4: Role of perpetrator

The role of the perpetrator was recorded for 89% (n=78) of all survivors accessing dedicated exploitation services this financial year. The largest proportion of survivors chose not to disclose the role of their perpetrator (n=39, 50%). Twenty one percent of survivors (n=16) stated that the perpetrator was a partner, for 13% (n=10) of survivors the perpetrator was a relative and for 10% (n=8) the perpetrator was a drug dealer.





5.5: Types of work

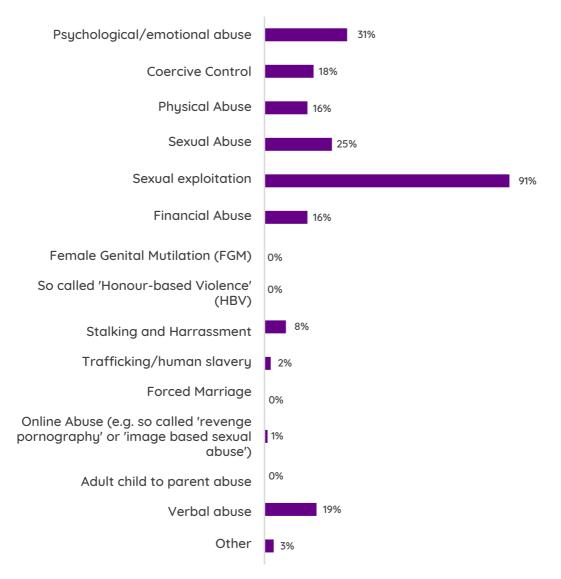
In relation to sexual-exploitation, survivors were asked to disclose the type of work. Street based work was the most prominent type of work disclosed (n=65, 88%) followed by home based (n=4, 5%), , brother/parlour (n=2, 3%), webcamming (n=1, 1%), and text/call services (n=1, 1%).

5.6: Types of abuse disclosed

The type of abuse experienced by survivors in this financial year was recorded for all survivors who engaged with sexual violence-based support services this financial year (total n = 88). Sexual exploitation (n=80, 91%) and psychological/emotional abuse (n=27, 31%) were the two most prevalent types of abuse disclosed by survivors of sexual exploitation.



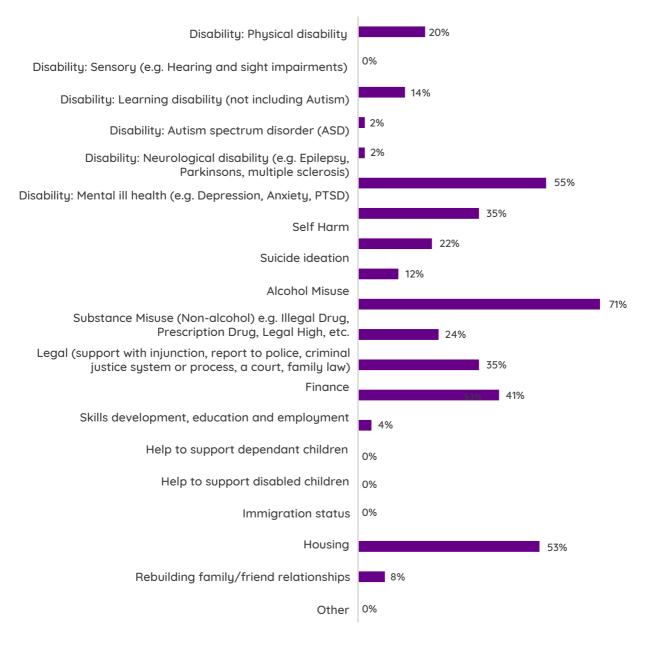




5.7: Support needs

Data pertaining to the additional support needs of survivors was recorded for 58% (n = 51) of all survivors who engaged with sexual violence-based support services this year (n = 88). Substance misuse (non-alcohol) was the most prevalent additional support need disclosed by survivors across the financial year (n=36, 71%), followed by additional support needs associated with mental health (n=28, 55%) and housing (n=27, 53%).

Figure 25: Additional support needs of survivors



Appendices

Appendix 1: A table to demonstrate which organisations contributed data to this report

	Organisation	Service	Ref	uge-ba	Refuge-based service	e	Comn	Community-based service	ased se	rvice	Dedi	cated Si Se	Dedicated Sexual Violence Service	lence	Dedic	ated Se) Se	Dedicated Sexual Exploitation Service	loitatio
			δ	8	63	\$	δ	8	8	8	δ	8	8	ş	δ	8	8	\$
	Aberconwy Domestic Abuse Service	Aberconwy Domestic Abuse Service	Q	YES	YES	YES	Q	YES	YES	YES								
2	BAWSO	BAWSO			Q	Q			Q	Q			Q	Q				
×.	Vale DAS	Vales Das	YES	YES	YES	YES	YES	YES	YES	YES								
		Calan DVS - Ammanford	YES	YES	YES	YES	YES	YES	YES	YES								
4	Calan DVS	Calan DVS - Neath Port Talbot	YES	YES	YES	YES	YES	YES	YES	YES	Q	YES	YES	YES				
		Calan DVS- South Powys	YES	YES	Q	YES	YES	YES	QN	YES	Q	YES	Q	Q				
2	Cardiff Women's Aid	Cardiff Women's Aid	Q	Q	Q	Q	Q	Q	Q	Q								
0	Carmarthen Domestic Abuse Services	Carmarthen Domestic Abuse Services	YES	YES	YES	YES	YES	YES	YES	YES	Q	YES	YES	YES				
Č N	Clwyd Alyn Housing Association (CAHA) Women's Aid	CAHA Women's Aid	YES	YES	Q	Q	YES	YES	Q	Q								
_		Cyfannol Women's Aid (Monmouthshire)	YES	YES	YES	YES	YES	YES	YES	YES								
		Cyfannol Women's Aid (Torfaen)	YES	YES	YES	YES	YES	YES	YES	YES								
00	Cyfannol Women's Aid	Cyfannol Women's Aid (Horizons)									Q	YES	YES	YES	YES	YES	YES	YES
		Cyfannol Women's Aid (Blaenau Gwent)	Q	YES	YES	YES	Q	YES	YES	YES								
		Cyfannol Women's Aid (Newport)	YES	YES	YES	YES	YES	YES	YES									
6	DASU North Wales	DASU North Wales	Q	YES	YES	Q	Q	Q	YES	Q								
10	Gorwel	Gorwel	YES	YES	QN	YES	QN	YES	QN	YES								
1	Montgomeryshire Family Crisis Centre	Montgomeryshire Family Crisis Centre	YES	YES	YES	YES	YES	YES	YES	YES								
12	RASASC North Wales	RASASC North Wales									Q	Q	YES	YES				
13	Rhondda Cynon Taff Women's Aid	RCT Women's Aid	YES	YES	YES	YES	YES	YES	YES	YES								
14	Safer Merthyr	Safer Merthyr					YES	YES	YES	YES								
15	Safer Wales	Safer Wales																
16	Stepping Stones North Wales	Stepping Stones North Wales									Q	QN	N	Q				
17	Swansea Women's Aid	Swansea Women's Aid	QN	YES	YES	YES	YES	YES	YES	YES					Q	YES	YES	YES
18	Threshold DAS	Threshold DAS (Llanelli)	YES	YES	YES	YES												
19	Thrive Women's Aid	Thrive Women's Aid	Q	ON	NO	Q	QN	QN	No	QN	Q	Q	Q	Q				
20	West Wales Women's Aid	West Wales Women's Aid	YES	YES	YES	YES	YES	YES	YES	YES								

Appendix 2: Methodology

Welsh Women's Aid collects data to obtain a national and regional overview of the service provision and demand for support, and to support specialist services with their regional and organisational data collection. The data contributes towards the identification of trends and patterns which will inform policy and campaign work and thus will ultimately benefit both the federations and survivors. In the absence of a robust national picture, the impact of this work is reduced.

Each quarter, in line with their partnership agreement with WWA, member services complete the WWA data collection form which are then combined annually to provide an annual overview.

Section	Information Requested
Member Overview	Contact and service details (i.e. number of units, programmes delivered, types of support etc.).
Protected Characteristics	Number of survivors in refuge and community services, broken down by protected characteristics (age, gender, religion/belief etc.)
Refuge	Data surrounding number of survivors who have accessed refuge services.
Community-Based Support	Data surrounding number of survivors who have accessed community- based services.
Sexual Violence Services	Data surrounding number of survivors who have accessed dedicated sexual violence services.

The WWA Data Collection Form (2022/23) requests data in the following sections:

The series of data requests are further broken down by 'type of survivor':

Type of survivor	Description
'Total supported'	Total supported survivors in the period, which includes survivors who started in that period and those who are in continual service from a previous period.
'Starters'	Survivors who were referred and accepted into service during that period only.
'Leavers'	Survivors who were exited from service/ceased support during that period.
'Non-starters'	Survivors who were not accepted by the service or did not accept support offered by the service.

Appendix 3: Glossary of terms

Term	Definition
MARAC:	A Multi Agency Risk Assessment Conference (MARAC) is a victim focused risk management meeting attended by all key agencies, where survivors assessed as high risk of harm from perpetrators of domestic abuse are referred and multi-agency safety plans are agreed to reduce the risk posed by the perpetrator.
Refuge unit:	One family room within a communal or self-contained refuge.
Dispersed unit:	A family room/accommodation in a separate location to the communal or self-contained refuge. Typically, where services offer support to male survivors in addition to female survivors, they would be supported separately in dispersed units.
Move-on unit:	Temporary accommodation provided by the service away from the refuge, which has a limited stay period, and is accessed following refuge-based support and prior to independent living. 'Move-on units' are typically studio flats or bedrooms in shared houses in the community where people can live independently with the ongoing support from trained resettlement advisors.

Appendix	4: Regional	and local	authoritu	areas
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Region	Local Authority		egic Boards & sub-regional rangements	
	Conwy			
	Denbighshire			
North Wales	Flintshire	North Wales V	AWDASV Strategic Board	
North Wales	Gwynedd		AwbAsv strategic bound	
	Isle of Anglesey			
	Wrexham			
	Carmarthenshire			
Mid & West Wales	Ceredigion	Mid and West Wal	as VAWDASV Strategic Board	
Hid & West Wales	Pembrokeshire	Mid and West Wales VAWDASV Strategic Board		
	Powys			
	Vale of Glamorgan	Cardiff and the Vale		
	Cardiff	region		
	Merthyr Tydfil Borough			
South Wales	Rhondda Cynon Taf	Cwm Taf region	South Wales VAWDASV Regional Collaborate Board	
	Bridgend]	Collaborate Board	
	Swansea	Wastern Bau region		
	Neath Port Talbot	Western Bay region		
	Blaenau Gwent			
	Caerphilly]		
Gwent	Monmouthshire	Gwent VAW	/DASV Strategic Board	
	Newport	1		
	Torfaen]		

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