



Cymorth i Ferched Cymru
Welsh Women's Aid

Annual Membership Report: Data from specialist services in Wales 2023/24

Period 01/04/2023 – 31/03/2024

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

After working at the front lines of the pandemic, individuals and specialist services are now entering a new period of uncertainty defined by rising energy prices and other costs of living, affecting both their service users and staff. In order for the decades of experience and expertise of these specialist services to continue, commissioners [NH1.1] and funders must ensure they continue to receive adequate resources. This will be Welsh Women's Aid's primary focus in the coming months.

Specialist violence against women services, including domestic abuse and sexual violence specialist support for men and boys, continue to provide a vital role in communities across Wales. By nature this work is often not largely visible for safety reasons, but, as you will see in this report, they are continuing to help those who need it most. Although demand and complexity of cases has remained high post lockdowns, you will see from the data within this report that the majority of those who need help are able to access it.

For those with complex needs including intersecting discrimination, Welsh Women's Aid continues to advocate for new and increased funding alongside the innovative approaches being trialed within our membership. We hope that together we will be able to work towards a system in Wales which is truly needs-led, trauma informed, and survivor focused.

Contents

Introduction	6
National overview: 2023/24	8
About specialist services	9
Who uses specialist services?	13
1.1: Gender of survivors	13
1.2: Age	14
1.3: Disability	15
1.4: Race and ethnicity	15
1.5 Religion or belief	17
1.6 Sexual orientation	18
1.7: Pregnancy and maternity	18
1.8: Language	18
1.9: Relationship to perpetrator	19
Refuge-based support services	20
2.1: Referrals and access to services	20
2.2: Survivors unable to be supported	21
2.3: Referral sources and location	22
2.4: Children of survivors in refuge-based support	24
2.5: Gender of primary perpetrator	25
2.6: Types of abuse	25
2.7: Support needs	26
2.8: Multi-agency risk assessment conference (MARAC) referrals	27
2.9: No Recourse to Public Funds: Refuge-based support	28
2.10: Moving on from specialist support	28
Community-based support services	30
3.1: Referrals and access to service	30
3.2: Children and young people service provision	31
3.3: Gender of the primary perpetrator	31
3.4: Types of abuse disclosed	31
3.5: Support needs	33
3.6: Safeguarding and Multi-agency Risk Assessment Conference (MARAC)	33
Referrals	

Sexual violence services	35
4.1: Referrals and access to service	35
4.2: Referral sources	35
4.3: Gender of the primary perpetrator	36
4.4: Types of abuse disclosed	36
4.5: Support needs	37
Sexual exploitation services	39
5.1: Referrals and access to service	39
5.2: Referral sources	39
5.3: Gender of the primary perpetrator	40
5.4: Role of perpetrator	40
5.5: Types of work	41
5.6: Types of abuse disclosed	41
5.7: Support needs	42
Live Fear Free Helpline	44
6.1: Call volume	44
6.2: Caller information	45
6.3: Supporting children and young people	46
6.4: Signposting and referrals to other agencies	47
6.5: User feedback	48
6.6: Survivor and concerned other feedback	48
6.7: Other agency feedback	49
Appendices	50

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 2023/24 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.

Specifically, the data sources that inform this report are:

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

Quarterly monitoring data

At the end of each quarter in 2023/24, 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: 2023/24



The Live Fear Free Helpline received 18,058 contacts.

20,461 survivors were referred to local specialist services during this financial year.

Refuge-based support services



629 survivors benefitted from refuge-based support services.

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

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

Community-based support services



8,953 survivors were supported by community-based support services.

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

1,984 children and young people, were supported directly, this period.

Sexual violence-based support services



2,161 survivors were supported by sexual violence-based support services.

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

Sexual exploitation-based support services



208 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.

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.



Domestic abuse/ VAWDASV community outreach support

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



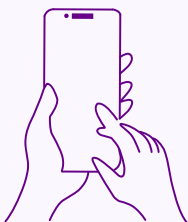
Prevention work in local communities through community engagement and supporting champions to speak out against violence; education of children, young people and adults; supporting survivors to engage in service improvement; delivering empowerment programmes (e.g. employability and anti-poverty work) 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 self-referrals, 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 anti-discriminatory 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.

1.1: Gender of survivors

The gender of survivors was collected for 99% (n=9,172^[4]) of all survivors (n=9,275) who engaged with specialist services in the financial year 2023/24. Across the specialist services, 92% (n=8,432) survivors identified as a woman whilst survivors who identified as a man represented 7% (n=655) of the data. The following table demonstrates a breakdown of the data by service type.

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+.

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

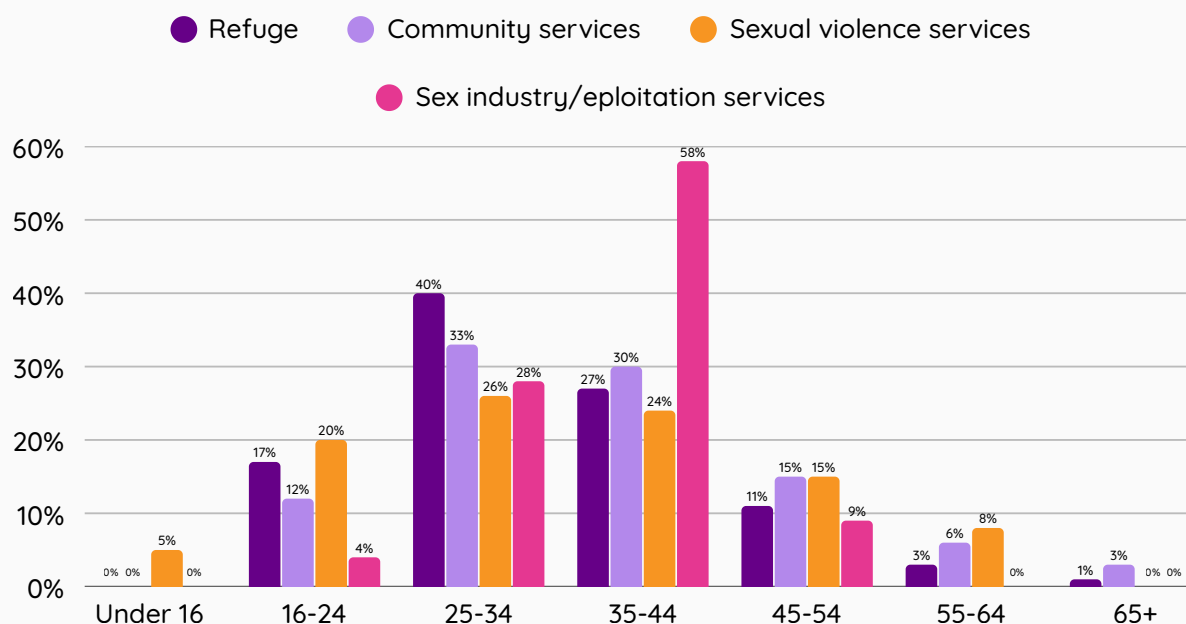
Table 1: Gender of survivors in specialist support services

	Refuge-based support		Community-based support		Dedicated sexual violence support		Dedicated sexual exploitation support		Total (n=12,883)
Survivor identifies as a trans person	0	0%	19	0%	11	1%	1	1%	0%
Survivor identifies as a woman	454	97%	7,044	92%	853	87%	81	99%	92%
Survivor identifies as a man	13	3%	533	7%	109	11%	0	0%	7%
Survivor identifies as non-binary	0	0%	6	0%	9	1%	0	0%	0%
Survivor identifies as any other gender	0	0%	0	0%	0	0%	0	0%	0%
Survivor prefers not to disclose	0	0%	39	1%	0	0%	0	0%	0%
Total sample	467		7,641		982		82		
Data unavailable	0		101		2		0		

1.2: Age

The data on age was available for 89% (n=8,299) of the survivors accessing specialist support services (n=9,275). The most prevalent age category of survivors accessing support services this financial year were between the ages of 25-34 (n=2,743, 33%). This aligns with the data provided in the previous financial year (2022/23). Of the 8,299 survivors whose age was recorded, 12% (n=1,037) were aged 16-24 whilst 1% (n=57) were aged 16 or under. This financial year, 3% (n=243) of survivors were aged 65 or over.

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 27% (n=2,499) disclosed a disability, with the highest proportion (n=43, 52%) accessing sexual exploitation-based support services. Of note, it is likely that these figures are an underestimation as not all organisations are able to collate this data. Research[5] 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]

1.4: Race and ethnicity

Data on ethnicity was available for 81% (n=7,529) of survivors. Of these, White: British, was the most prevalent ethnicity of survivors (n=6,876, 91%), followed by White: Other (n=232, 3%). Of note, just 9% (n=653) of survivors identified as a race or ethnicity other than White British. A full breakdown of ethnicity has been provided in Table 2.

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

www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/compendium/focusonviolentcrimeandsexualoffences/yearendingmarch2015/chapter4intimatepersonalviolenceandpartnerabuse#heavily-victimised-groups-of-partner-abuse (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

Table 2: Ethnic backgrounds of survivors engaging with services following referral^[7]

	Refuge-based support		Community-based support		Dedicated sexual violence support		Dedicated sexual exploitation support	
Asian or Asian British or Asian Welsh: Bangladeshi	16	4%	11	0%	25	4%	0	0%
Asian or Asian British Asian Welsh: Chinese	0	0%	9	0%	0	0%	0	0%
Asian or Asian British Asian Welsh: Indian	2	0%	11	0%	2	0%	0	0%
Asian or Asian British Asian Welsh: Pakistani	6	1%	13	0%	0	0%	0	0%
Asian or Asian British Asian Welsh: Other Asian	10	2%	30	0%	0	0%	0	0%
Black, Black British, Black Welsh: Black African	7	2%	27	0%	4	1%	0	0%
Black, Black British, Black Welsh: Caribbean	1	0%	5	0%	0	0%	1	2%
Black, Black British, Black Welsh: Other Black	2	0%	8	0%	0	0%	0	0%
Mixed/multiple ethnic group: White and Asian	2	0%	6	0%	2	0%	0	0%
Mixed/multiple ethnic group: White and Black African	0	0%	9	0%	0	0%	0	0%
Mixed/multiple ethnic group: White and Black Caribbean	2	0%	24	0%	5	1%	1	2%
Mixed/multiple ethnic group: Other mixed or multiple ethnic groups	6	1%	38	1%	4	1%	1	2%
Other Ethnic Group: Arab	3	1%	10	0%	0	0%	0	0%
Other Ethnic Group: Any other ethnic group	5	1%	34	1%	6	1%	0	0%
White: British (Welsh/ English/ Scottish/Northern Irish)	362	81%	5,931	92%	532	90%	51	77%
White: Irish	1	0%	29	0%	1	0%	11	17%

⁷ Due to rounding errors, the total percentages may not equate to 100%

Table 2: Ethnic backgrounds of survivors engaging with services following referral[8]

	Refuge-based support		Community-based support		Dedicated sexual violence support		Dedicated sexual exploitation support	
White: Gypsy or Irish traveller	7	2%	15	0%	2	0%	0	0%
White: Roma	1	0%	6	0%	0	0%	0	0%
White: Other	15	3%	210	3%	6	1%	1	2%
Total sample	448	100%	6,426	100%	589	100%	66	100%
Data unavailable	19		1,316		395		16	

1.5: Religion or belief

Of the 5,019 (54%) survivors who disclosed their religion or belief, 78% (n=3,906) were recorded as having no religion. The most prevalent categories of religion were 'Christianity (all denominations)' which accounted for 17% (n=849) of survivors, followed by Islam which represented 1% of survivors (n=61).

Table 3: Religion or belief of survivors engaging with services following referral[8]

	Refuge-based support		Community-based support		Dedicated Sexual Violence support		Dedicated sexual exploitation support		Total
No religion	300	76%	3,405	79%	172	67%	29	81%	78%
Buddhist	2	1%	14	0%	3	1%	0	0%	0%
Christian (all denominations)	52	13%	728	17%	64	25%	5	14%	17%
Hindu	1	0%	6	0%	2	1%	0	0%	0%
Jewish	0	0%	0	0%	2	1%	0	0%	0%
Muslim	21	5%	36	1%	2	1%	2	6%	1%
Sikh	1	0%	2	0%	0	0%	0	0%	0%
Other	20	5%	138	3%	12	5%	0	0%	3%
Total sample	397	100%	4,329	100%	257	100%	36	100%	
Data unavailable	70		3,413		727		46		

8 Due to rounding errors, the total percentages may not equate to 100%

1.6: Sexual orientation

Sexual orientation was disclosed by 6,912 survivors which represents 75% of all survivors accessing support services in this financial year (2023/24). Of the 6,912 survivors, 94% (n=6,500) 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[9]

	Refuge-based support		Community-based support		Dedicated sexual violence support		Dedicated sexual exploitation support		Total
Bisexual	17	4%	143	2%	24	6%	5	8%	3%
Gay	2	0%	39	1%	3	1%	0	0%	1%
Heterosexual	382	90%	5,702	95%	357	90%	59	92%	94%
Lesbian	22	5%	113	2%	5	1%	0	0%	2%
Other	2	0%	28	0%	9	2%	0	0%	1%
Total sample	425	100%	6,025	100%	389	100%	64	100%	
Data unavailable	42		1,717		586		18		

1.7: Pregnancy and maternity

Of the 9,275 survivors who disclosed that they were female, 3% (n=320) were pregnant when accessing support services. When each service was viewed in isolation, 6% (n=25) of survivors accessing refuge-based support services, 4% (n=284) of survivors accessing community-based support services, 2% (n=9) of survivors accessing sexual-violence based support services and 2% (n=2) accessing dedicated sexual exploitation services were pregnant. In addition, within this reporting period, 3% (n=272) of females were reported to have had a child in the previous 12 months.

1.8: Language

In this reporting period, where language was recorded (n=7,922, 85%), 3% (n=263) of survivors disclosed that their first language was Welsh. Notably, for 4% (n=293) of survivors, their first language was neither English nor Welsh.

9 Due to rounding errors, the total percentages may not equate to 100%

1.9: Relationship to perpetrator

In this financial year, where data was recorded (n=6,956, 75%), most perpetrators were categorised as an ex-partner (n=4,780, 69%) followed by current partners (n=1,596, 23%).

Table 5: Relationship to Perpetrator

	Refuge-based support		Community-based support		Dedicated sexual violence support		Dedicated sexual exploitation support		Total
Current Partner	84	18%	1,472	24%	31	9%	9	18%	23%
Ex-Partner	328	71%	4,203	69%	228	65%	21	43%	69%
Son	2	0%	219	4%	2	1%	0	0%	3%
Daughter	1	0%	48	1%	0	0%	1	2%	1%
Father	15	3%	92	2%	21	6%	0	0%	2%
Mother	14	3%	63	1%	2	1%	0	0%	1%
Step-Father	1	0%	20	0%	16	5%	0	0%	1%
Step-Mother	0	0%	1	0%	0	0%	0	0%	0%
Other Male	9	2%	135	2%	55	16%	19	39%	3%
Other Female	3	1%	58	1%	2	1%	0	0%	1%
Total sample	463	100%	6,092	100%	352	100%	49	100%	100%
Data unavailable	21		1,650		632		33		

Refuge-based support services

2.1: Referrals and access to services

In this financial year, 629^[10] survivors were supported by refuge-based support services, 97% (n=609) of whom identified as a woman. Of the 1,445 survivors who were referred into the service during this financial year, 32% (n=467) were supported by a service whilst 48% (n=688) 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	Trans man	Non-binary	Data missing	Total
Total survivors supported in refuge-based services in 2023/24	609	19	0	1	0	629
No. of new referrals received in period ^[11]	1,322	96	2	0	25	1,445
No. of survivors referred and engaged with service	454	13	0	0	0	467
Survivors not able to be supported by service	642	46	0	0	0	688
No. of survivors who did not accept support from service	177	28	0	0	0	205
No. of survivors on the waiting list at the end of Q4	1	0	0	0	0	1

Figure 2: Engagement with refuge-based support services across Wales^[12]



¹⁰ Total supported calculated using total supported figure in Q1, then all new starters from Q2, Q3 and Q4 to prevent double counting.

¹¹ Figures will not add up to 1,445 as new starters may have come from a referral received in the previous financial year.

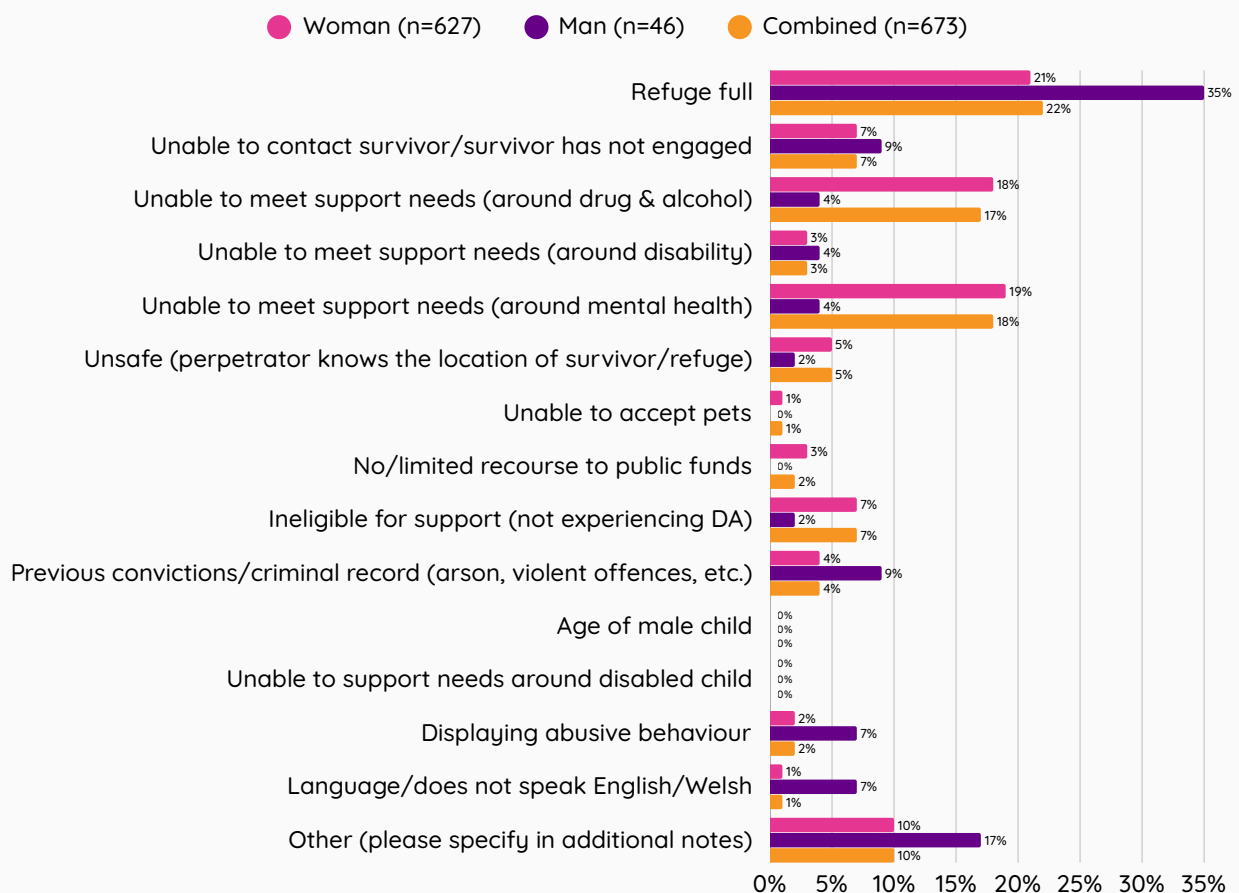
¹² Figure 2 is based on 1,445 referrals; the discrepancy is due to referrals placed on waiting lists across the financial year and therefore does not match the total number of new referrals received in this financial quarter.

2.2: Survivors unable to be supported

Survivors who could not supported by the refuge

In this financial year, 48% (n=688) of all new referrals were refused refuge-based support services. Where refusal reason was recorded (n=673, 98%), a shortage of refuge space was the most prevalent reason for refusal (n=149, 22%), which is congruent with the data provided in the previous financial year. Mental health-related support needs contributed to 18% of refusals (n=120), while an additional 17% (n=112) were unable to be supported due to needs associated with drug and alcohol use.

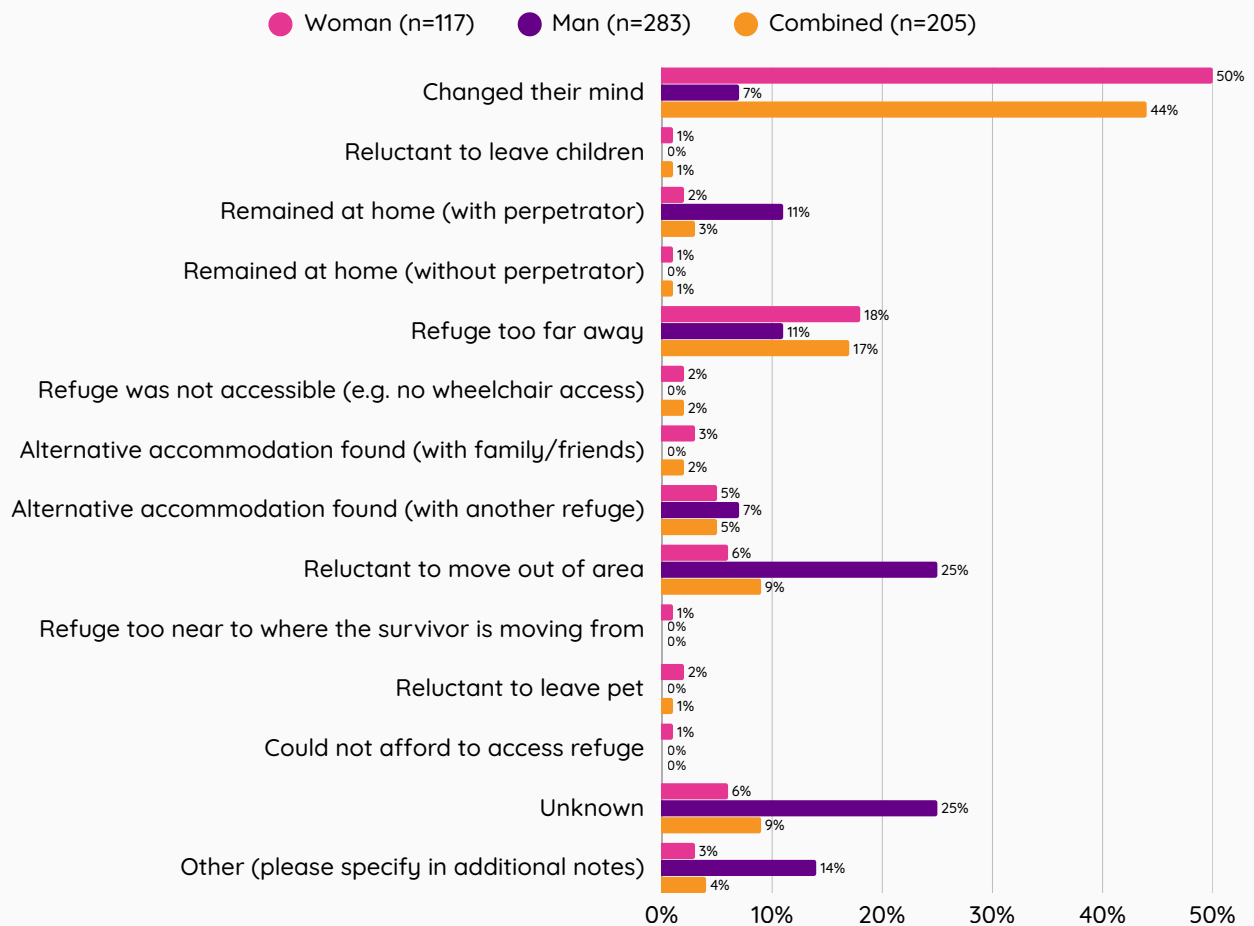
Figure 3: Reason survivors were not able to be supported by services in Wales



Survivors who did not accept support following referral

In this financial year, 14% (n=205) of all survivors referred (n=1,445) to refuge-based support services did not accept support, of which the reason was recorded for 100% (n=205). The most prevalent reason documented was 'a change of mind' (n=90, 44%). Of note, 17% (n=35) of the survivors refused as the refuge were too far away and 1% (n=3) 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

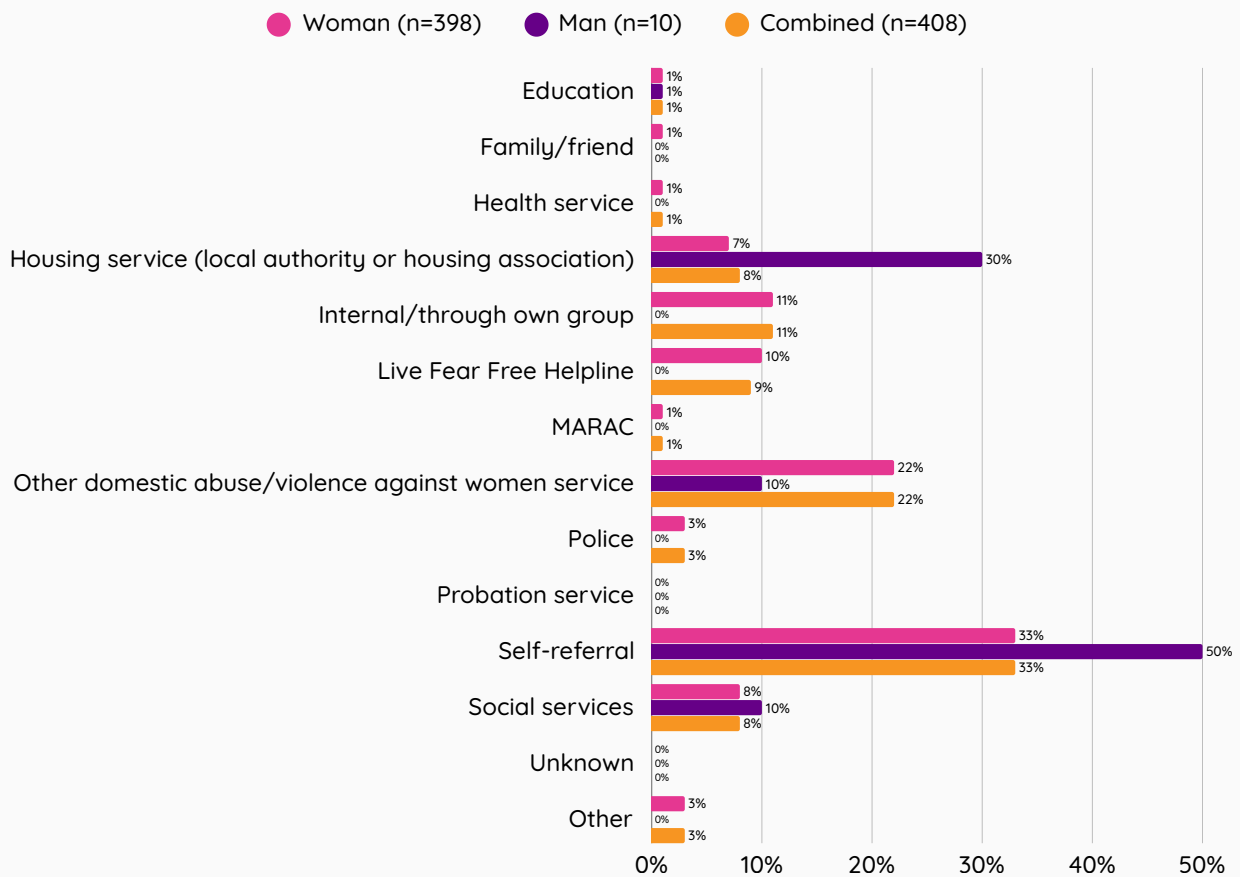


2.3: Referral sources and location

Referral sources

The data on the referral source was collected for 87% (n=408) of all survivors (n=467) accessing support this financial year. Self-referrals (n=136, 33%) and 'other VAWDASV services' (n=89, 22%) 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.

Figure 5: Referral sources for survivors in Wales



Location

Specialist services in Wales provided information on the referral areas of 87% (n=404) of all survivors (n=467) 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=205, 51%) 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).

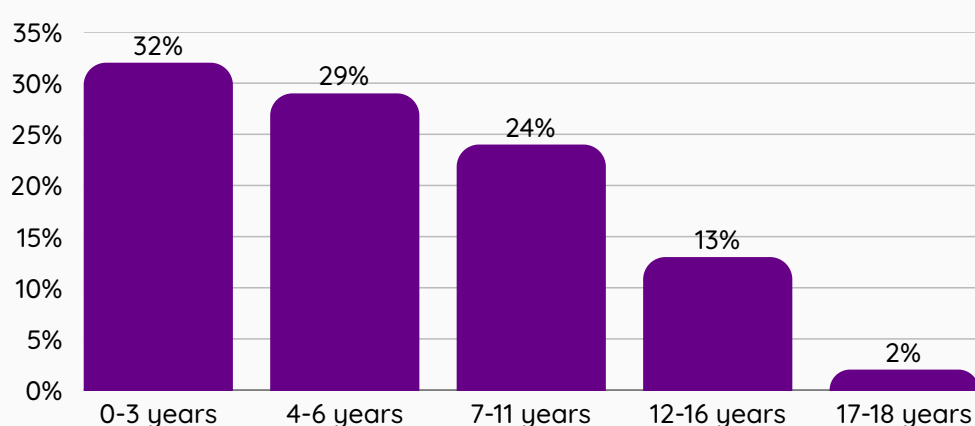
Table 7: Local referral area of survivors who engaged with refuge-based support services

	Female	Male	Total	
Own local authority	126	3	129	32%
Another local authority area in Wales	202	3	205	51%
Another local authority area in UK	63	4	67	17%
Outside of the UK	3	0	3	1%
Data unavailable	60	3	63	

2.4: Children of survivors in refuge-based support

In a change from previous reports, WWA now collects data on the number of new children entering the refuge each quarter. This approach helps avoid double-counting and arguably provides a more precise snapshot of new arrivals. However, it does mean the total figure may be an underestimate, as it does not account for children who remain in the refuge across multiple quarters. Sixty-six percent (n= 307) of all survivors supported in this financial year (n=467) had children who either lived with them at the refuge (n=237, 51%) or elsewhere (n=70, 15%). Subsequently, it can be purported that refuge-based support services directly supported 545 children in refuge. Where data was recorded (n=497), the most prevalent age of children who were in the refuge, was between 0-3 years of age (n=158, 32%).

Figure 6: The average age of children in refuge



In addition to the average of 527 children supported by refuge-based support services in a quarter, there was also 54 children who did not live with survivors in the refuge.

2.5: Gender of primary perpetrator

The gender of the primary perpetrator was recorded for 99.9% (n=466) of all survivors (n=467) who engaged with specialist services in this financial year. Of the 466 survivors where the gender of the primary perpetrator was recorded, 92% (n=430) of the perpetrators were men whilst 8% (n=35) of perpetrators were women. A further breakdown revealed that perpetrators who identified as a man were involved in 94% (n=427) of disclosures by survivors who identified as a woman (n=453).

Table 8: Sex of primary perpetrator

	Survivor (Woman)	Survivor (Man)	Total	
Perpetrator (Man)	427	3	430	92%
Perpetrator (Woman)	25	10	35	8%
Perpetrator (Trans man)	1	0	1	<1%
Data unavailable	1	0	1	

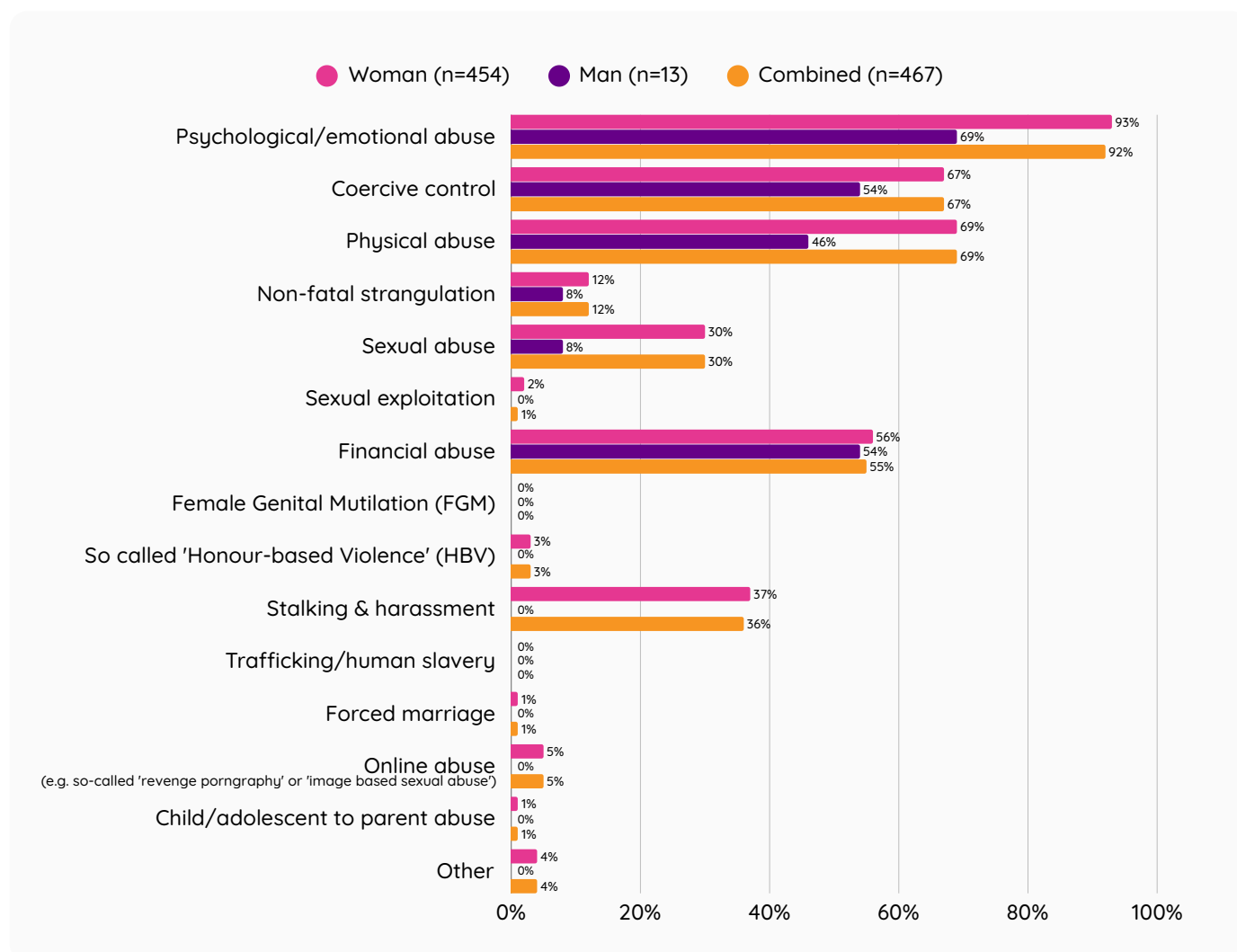
2.6: Types of abuse

Notably, survivors were likely to experience an average of three forms of abuse^[13]. Psychological/emotional abuse (n=429, 92%) and physical abuse (n=311, 69%) were the two most prevalent forms of abuse experienced by survivors (n=467). A substantial proportion of survivors were also experiencing financial abuse (n=259, 55%). Furthermore, 36% (n=170) 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=23) of survivors had experienced online abuse and 12% (n=56) had experienced non-fatal strangulation.

Figure 7: Abuse types experienced by survivors in refuge-based support

¹³ Total number of abuse types divided by total number of survivors included in the dataset.

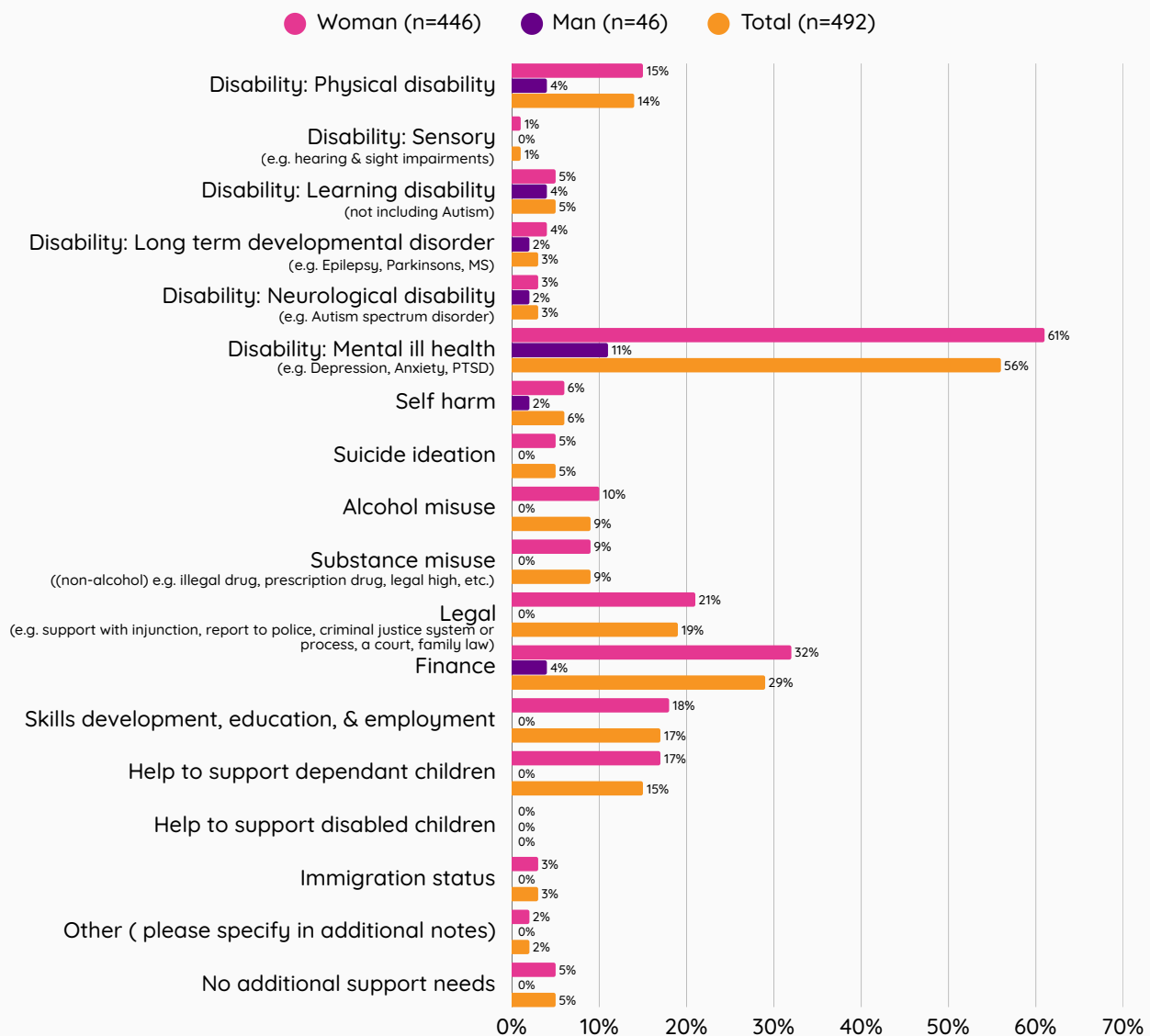
Figure 7: Abuse types experienced by survivors in refuge-based support



2.7: Support needs

There are many survivors accessing refuge-based support services who have additional support needs (Figure 8); 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=277, 56%) and finances (n=144, 29%) were the two additional support needs which were the most prevalent in this financial year. Of note, 14% (n=69) of the survivors who disclosed additional support needs (n=492) 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 8: 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, 155 referrals were made to 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, 48% (n=10) 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[14]. 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[15].

2.10: Moving on from specialist support

Length of stay

In this financial year, 463 survivors ceased support with refuge-based support services, of which, data was available for 90% (n=417) of survivors. Table 9 displays the length of time spent in refuge. Of the 417 survivors whose length of stay was recorded, the most prevalent length of stay was 6 months or less (n=290, 70%).

Table 9: Length of stay for survivors who left the service

	Woman		Man		Non-binary		Total survivors	
6 days or less	53	13%	0	0%	0	0%	53	13%
1 - 2 weeks	28	7%	2	33%	0	0%	30	7%
2 - 3 weeks	25	6%	0	0%	0	0%	25	6%
3 - 4 weeks	30	7%	0	0%	0	0%	30	7%
1 - 2 months	45	11%	0	0%	0	0%	45	11%
2 - 3 months	42	10%	1	17%	0	0%	43	10%
3 - 4 months	31	8%	2	33%	0	0%	33	8%
4 - 5 months	31	8%	0	0%	0	0%	31	7%
5 - 6 months	34	8%	0	0%	0	0%	34	8%
6 - 12 months	62	15%	1	17%	0	0%	63	15%
More than 12 months	29	7%	0	0%	1	100%	30	7%
Total	410		6		1		417	
Data unavailable	44		2		0		46	

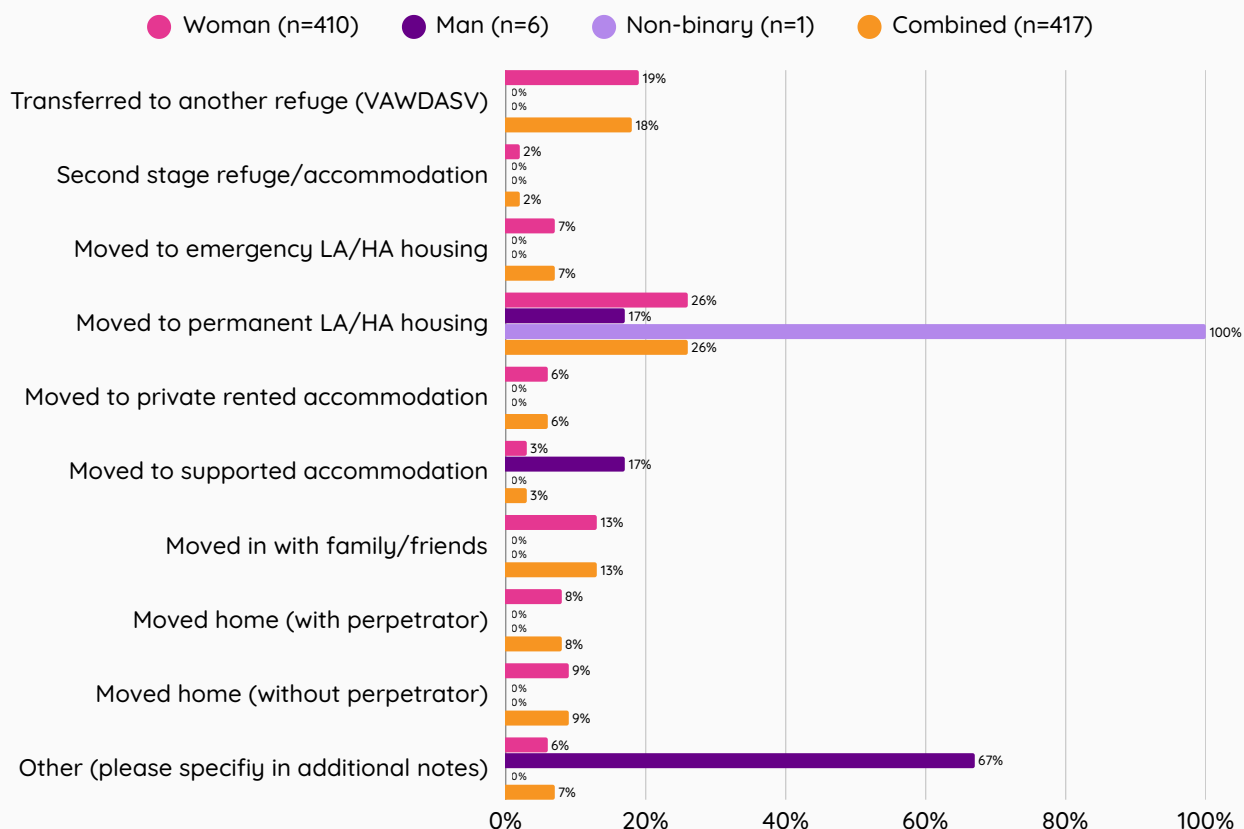
14 Scottish Women's Rights Centre, Covid-19 and Support [Website], <https://www.scottishwomensrightscentre.org.uk/news/covid-19coronavirus-info/domestic-abuse-during-covid-19coronavirus-what-can-i-do/>. [Accessed 26/08/2021]

15 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>.

Move-on reason

The move-on reason was recorded for 90% (n=417) of survivors in this reporting period. Of the 417 survivors whose reason for ceasing refuge was recorded, 26% (n=108) moved to permanent local authority/housing authority homes, 18% (n=77) were transferred to another refuge and 13% (n=55) moved in with family or friend.

Figure 9: Reason for ceasing refuge-based support



Community-based support services

3.1: Referrals and access to service

Community-based support services in Wales supported 8,953^[16] survivors in the community, 91% (n = 8,143) of whom identified as a woman. 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 11,184 new referrals received in this period. According to the data provided by the national membership of services, 7,742 (69%) survivors engaged with the service whilst 203 (2%) survivors were refused space.

Table 10: Survivors referred to and accessing community-based support^[17]

	Woman	Man	Trans woman	Trans man	Non-binary	Other	Data missing	Total
Total survivors supported in community-based services in 2023/24	8,143	646	15	4	6	39	100	8,953
No. of new referrals received in this period	10,242	758	17	4	7	20	136	11,184
No. of survivors referred and engaged with service	7,044	533	15	4	6	39	101	7,742
Survivors not able to be supported by service	167	31	0	0	0	0	5	203
No. of survivors who did not accept support from service	2,464	301	4	3	0	0	14	2,786
No. of survivors on the waiting list at the end of Quarter 4	289	6	0	0	0	0	0	295
No. of new referrals still being processed at end of Quarter 4	60	2	0	0	0	0	0	62

¹⁶ Total supported calculated using total supported figure in Q1, then all new starters from Q2, Q3 and Q4 to prevent double counting.

¹⁷ Inconsistency of 96 referrals in Table 11 as we are only looking at the waiting list and referrals being processed in Q4 only. An improvement has been made to the reporting template for 2024–25.

3.2: Children and young people service provision

The national membership of services directly supported 4,209 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[18], 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”[19].

This financial year, 2,418 children were supported through awareness raising sessions.

Table 11: Support delivered to children and young people

	Number supported
No. of children directly supported (either one to one or in family sessions)	4,209
Total children supported this quarter through awareness raising (e.g. in schools)	2,418

3.3: Gender of the primary perpetrator

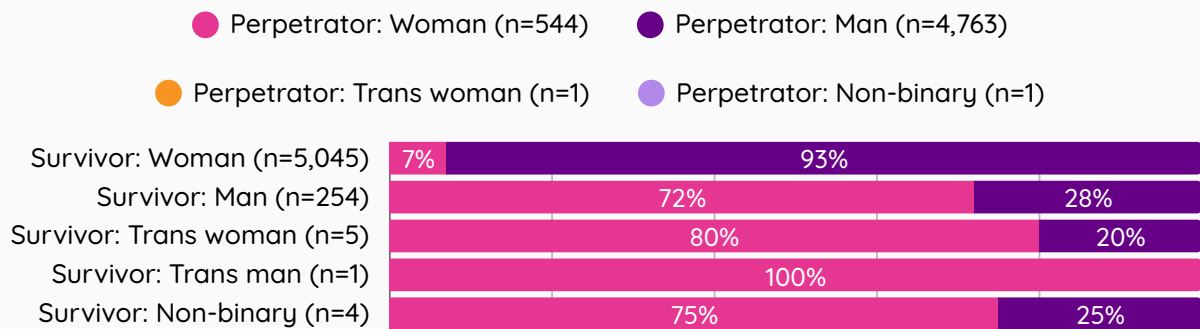
The gender of the primary perpetrator was recorded for 69% (n = 5,309) of survivors who accessed support services this financial year (total n = 7,742). Of these, 90% (n = 4,763) of perpetrators were identified as men, highlighting the gendered nature of VAWDASV.

For survivors who identified as women (n = 5,045), 93% (n = 4,689) reported perpetrators who identified as men, while 7% (n = 354) identified as women. Among survivors who identified as men (n = 254), 72% had perpetrators who identified as women, while 28% (n = 71) identified as men.

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

19 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).

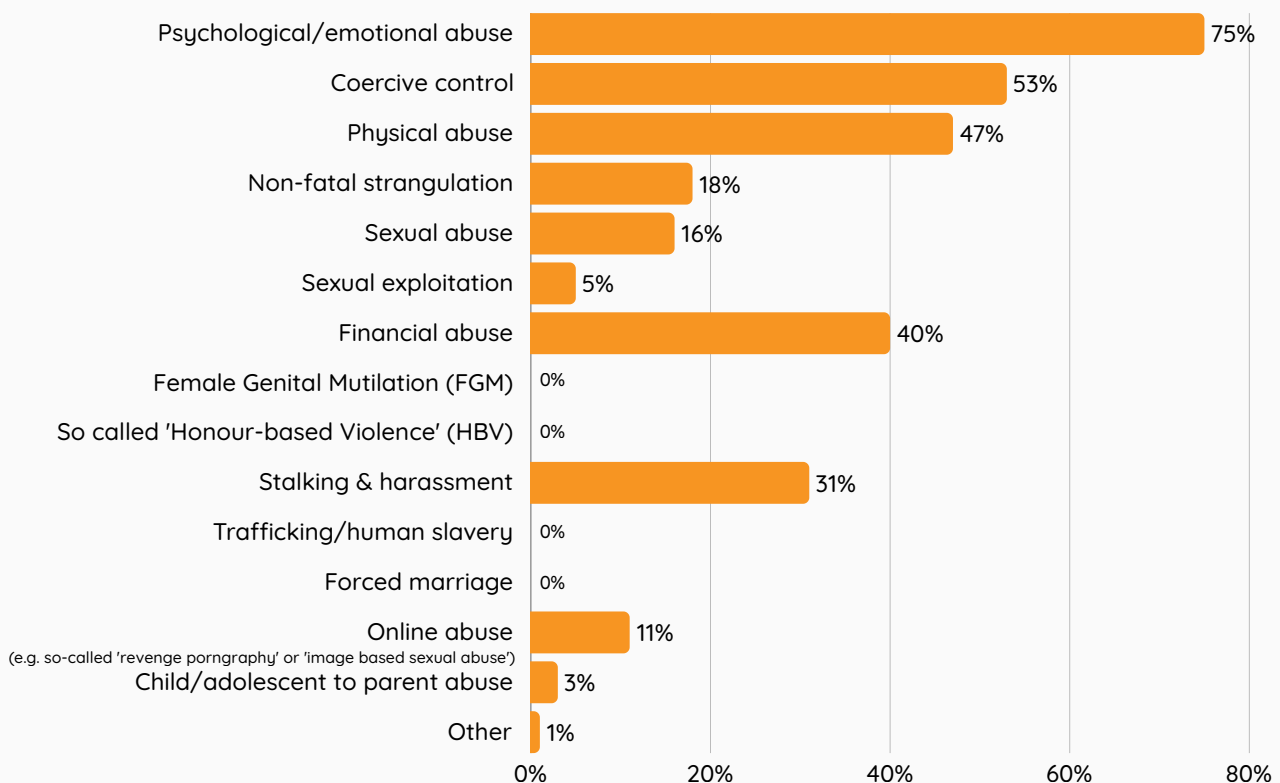
Figure 12: Sex of the primary perpetrator



3.4: Types of abuse disclosed

The abuse experienced by survivors was recorded for 75% (n = 5,794) of all new survivors who engaged with community-based support services this financial year (total n = 7,742). This financial year, psychological abuse (n = 4,370, 75%), coercive control (n=3,064, 53%) and physical abuse (n = 2,698, 47%) were the three most prevalent forms of abuse. Notably, financial abuse was experienced by 40% (n=2,292) of survivors.

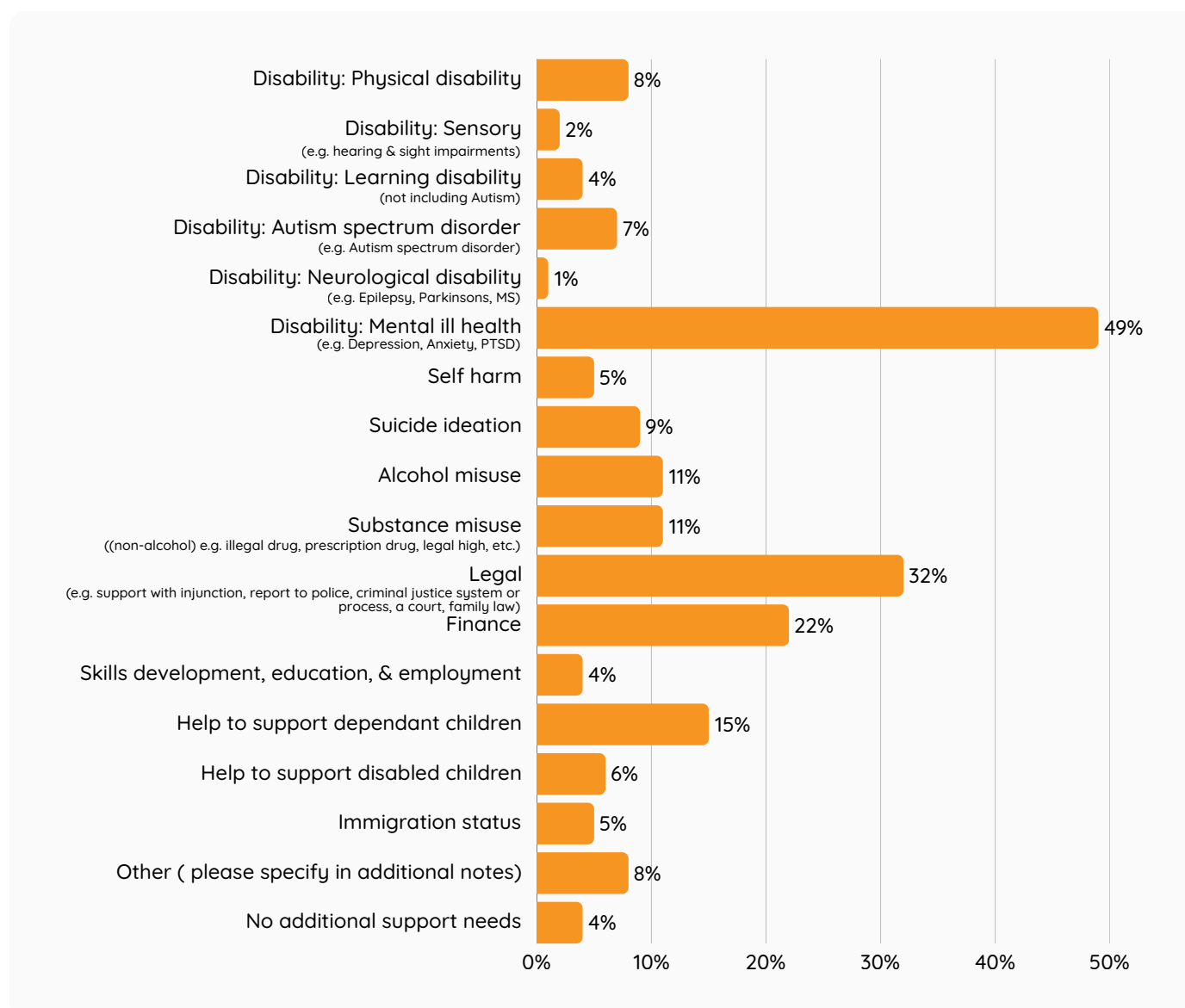
Figure 13: Abuse types experienced by survivors accessing community-based support services



3.5: Support needs

Additional support needs were recorded for 74% (n = 5,741) of all survivors accessing community-based support services this financial year (n = 7,742). 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 49% (n = 2,798) of survivors. This was followed by the need for legal support, which was disclosed by 32% (n = 1,852) of survivors and financial support, which was disclosed by 22% (n = 1,286) of survivors this year. This data aligns with the findings of the previous financial year.

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 2023/24, 663 referrals were made to a MARAC, whilst 1,612 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 2,161 survivors^[20] were supported across the 2023/24 financial year. Of the 2,161 survivors, 87% (n = 1,886) identified as a woman. Of the 1,517 referrals received this financial year, 65% (n=984) of survivors engaged with the service whilst 2% (n=35) we refused support by the service. The primary reason for refusal by a specialist organisation was “survivor has not engaged” (n=13, 37%).

Table 12: Survivors referred to and accessing sexual violence support

	Woman	Man	Trans woman	Trans man	Non-binary	Data missing	Total
Total survivors supported in 2023/24	1,886	234	3	18	117	3	2,161
No. of new referrals received in this period	1,313	169	4	16	11	0	1,517
No. of survivors referred and engaged with service	853	109	1	10	9	2	984
Survivors not able to be supported by service	31	4	0	0	0	0	35
No. of survivors who did not accept support from service	210	24	1	0	0	0	235
No. of survivors on the waiting list at the end of Quarter 4	205	18	0	1	1	0	226
No. of new referrals still being processed at end of Quarter 4	85	17	2	1	1	0	106

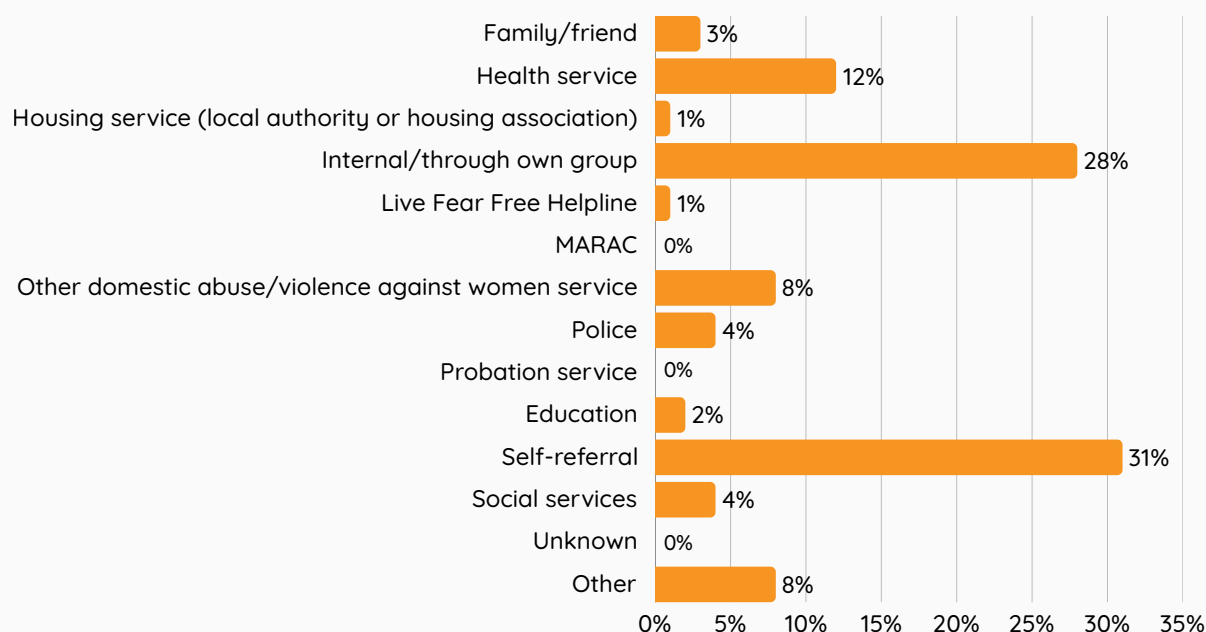
4.2: Referral sources

Referral sources

In this financial year, the source of referral was recorded for 86% (n = 848) of survivors who accessed sexual violence services (total n = 984). Of the 848 survivors, self-referrals were the primary referral source disclosed (n=260, 31%). This was followed by internal referrals (n=238, 28%) and the health service (n=103, 12%).

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

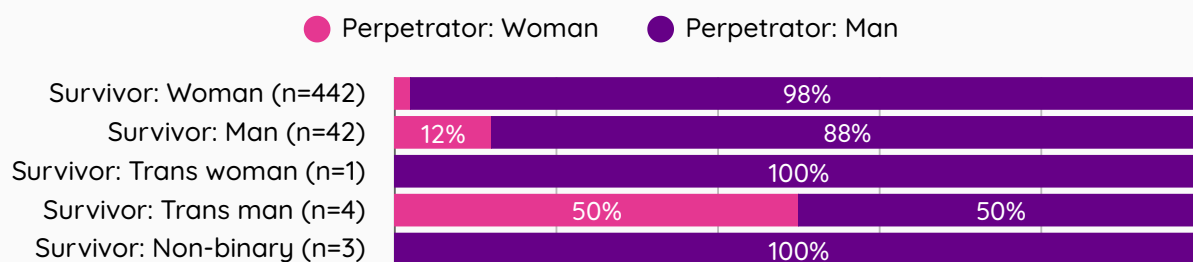
Figure 16: Referral sources to sexual violence services in Wales



4.3: Gender of the primary perpetrator

The gender of the primary perpetrator was recorded for 50% (n = 492) of all survivors who accessed sexual violence services this financial year (n = 984). Of these, 97% (n=478) of perpetrators were identified as men. For survivors who identified as a woman (n=442), 98% (n=435) reported perpetrators who identified as men.

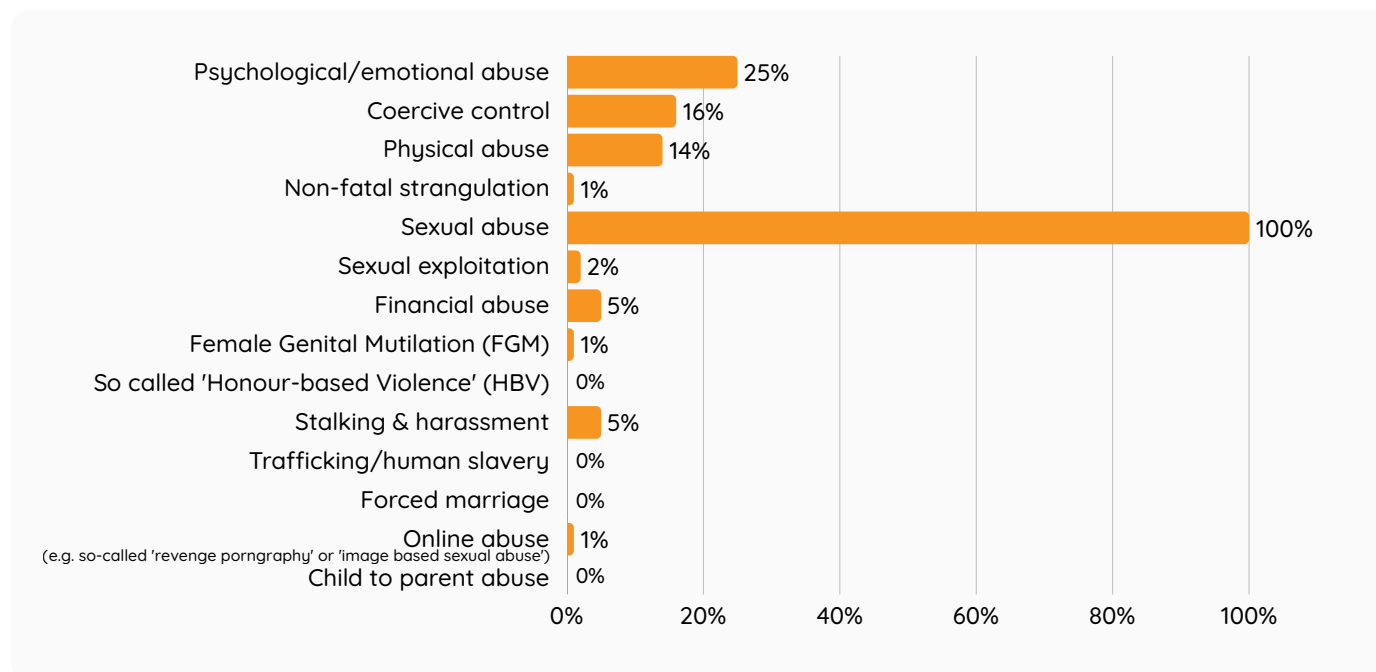
Figure 17: Gender of the primary perpetrator



4.4: Types of abuse disclosed

The type of abuse experienced by survivors in this financial year was recorded for 96% (n = 947) of survivors who engaged with sexual violence-based support services (total n = 984). Excluding sexual violence, psychological/emotional abuse was the most commonly reported type of abuse among those supported (n=241, 25%) followed by coercive control which was experienced by 16% (n=152) of survivors.

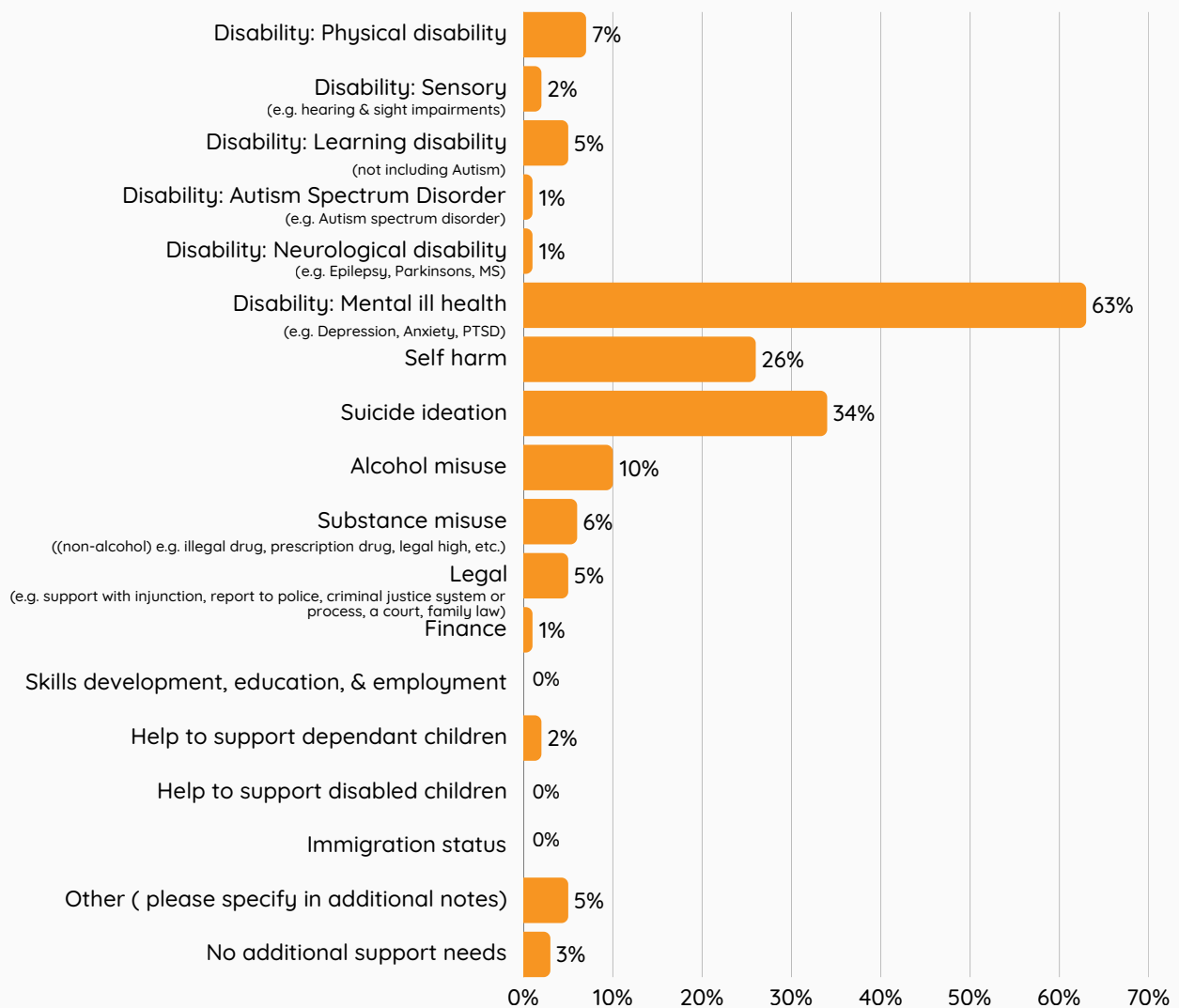
Figure 18: Types of abuse disclosed by survivors



4.5: Support needs

Data pertaining to the additional support needs of survivors was recorded for 92% (n = 910) of all survivors who engaged with sexual violence-based support services this year (n = 984). Mental health support remained the most prevalent additional support need disclosed by survivors in this reporting period (63%, n = 571), followed by support required for suicidal ideation which was experienced by 26% of survivors (n=236).

Figure 19: Additional support needs of survivors



Sexual exploitation services

5.1: Referrals and access to service

Referral data obtained from our dedicated sexual exploitation-based support services revealed that a total of 208 survivors^[21] were supported across 2023-24. There were 91 referrals made to the service, 90% (n=82) of which were supported in the financial year. Four percent (n=4) of the survivors could not be supported by the service and a further 4% (n=3) of survivors chose not to accept support.

Table 13: Survivors referred to and accessing dedicated exploitation services

	Woman	Man	Trans woman	Trans man	Non-binary	Data missing	Total
Total survivors supported in 2023/24	207	0	1	0	0	0	208
No. of new referrals received in this period	90	0	1	0	0	0	91
No. of survivors referred and engaged with service	81	0	1	0	0	0	82
Survivors not able to be supported by service	4	0	0	0	0	0	4
No. of survivors who did not accept support from service	3	0	0	0	0	0	3
No. of survivors on the waiting list at the end of Quarter 4	0	0	0	0	0	0	0
No. of new referrals still being processed at end of Quarter 4	0	0	0	0	0	0	0

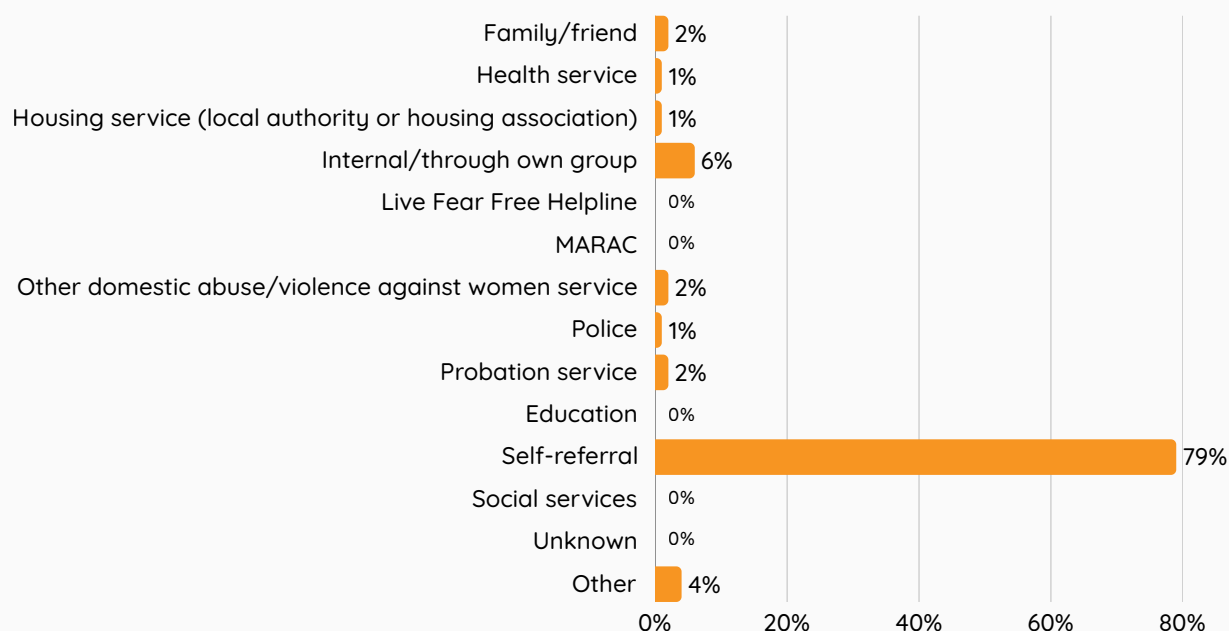
5.2: Referral sources

Referral sources

In this financial year, the source of referral was recorded for 100% (n = 82) of survivors who accessed dedicated sexual exploitation services (total n = 82). Of the 82 survivors, self-referrals were the primary referral source disclosed (n=65, 79%). This was followed by internal referrals (n=5, 6%).

²¹ Total supported calculated with total supported figure in Q1, then all new starters from Q2, Q3 and Q4 to prevent double counting.

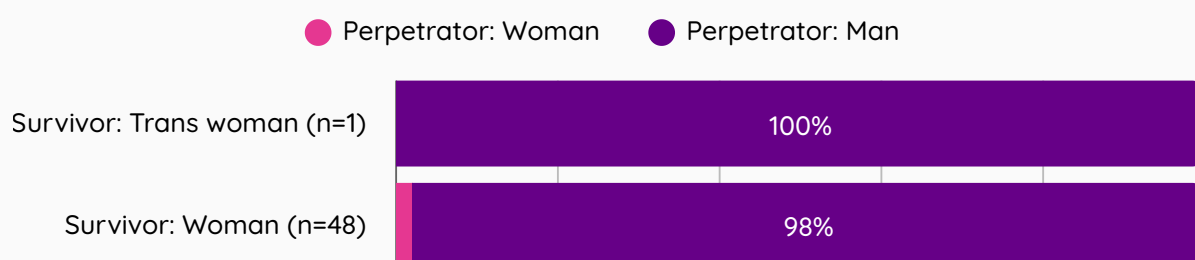
Figure 21: Referral sources to sexual exploitation services in Wales



5.3: Gender of the primary perpetrator

The gender of the primary perpetrator was recorded for 60% (n = 49) of all survivors who accessed sexual exploitation-based support services this financial year (n = 82). Of these, 98% (n=48) of perpetrators were identified as men. For survivors who identified as a woman (n=48), 98% (n=47) reported perpetrators who identified as men.

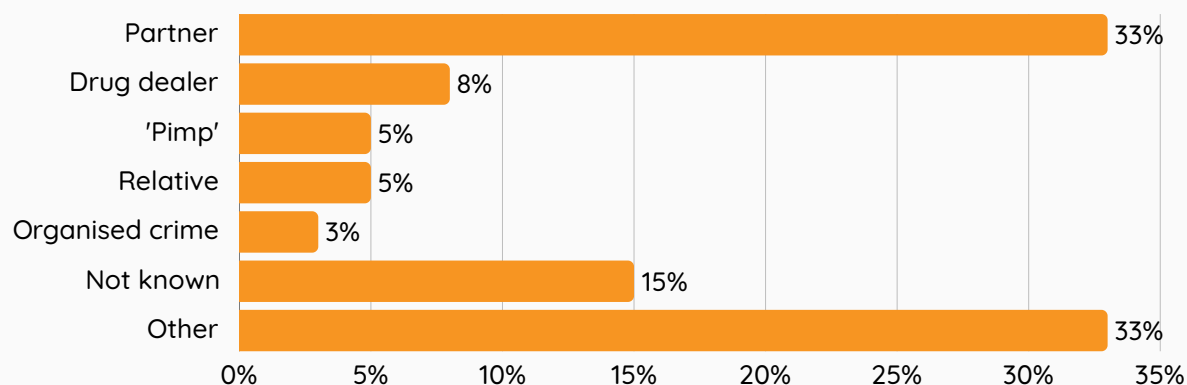
Figure 22: Gender of the primary perpetrator



5.4: Role of perpetrator

The role of the perpetrator was recorded for 49% (n=40) of all survivors accessing dedicated exploitation services this financial year. The mostly commonly identified perpetrator role was a 'partner' (n=13, 33%) followed by 'drug dealer' (n= 3, 8%). Fifteen percent (n=6) of survivors stated that their perpetrator was not known to them.

Figure 23: Role of perpetrator



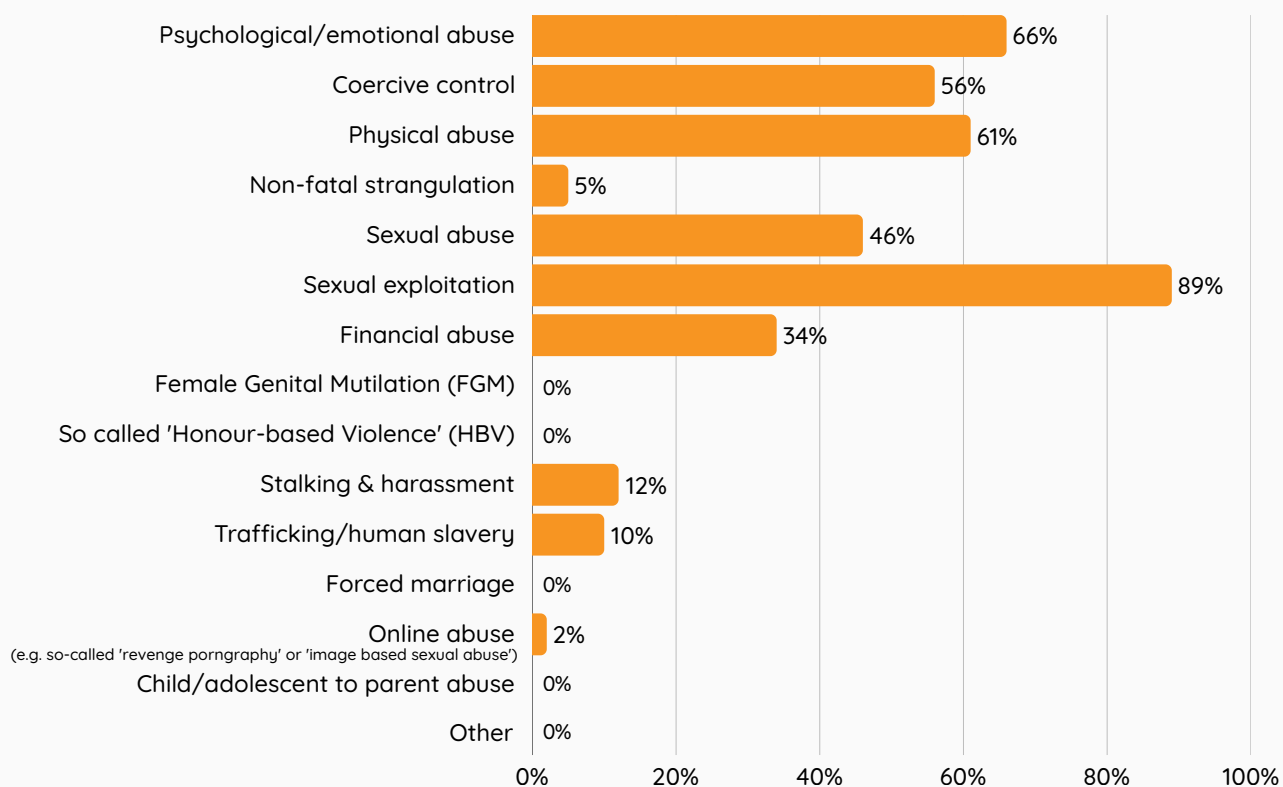
5.5: Types of work

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=70, 88%) followed by home based (n=6, 8%) and webcamming/online content (n=1, 1%). Four percent (n=3) of survivors were categorised under 'other'.

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 exploitation-based support services this financial year (total n = 82). Excluding sexual exploitation, psychological abuse/emotional abuse (n=54, 66%) and physical abuse (n=50, 61%) were the most commonly reported forms of abuse.

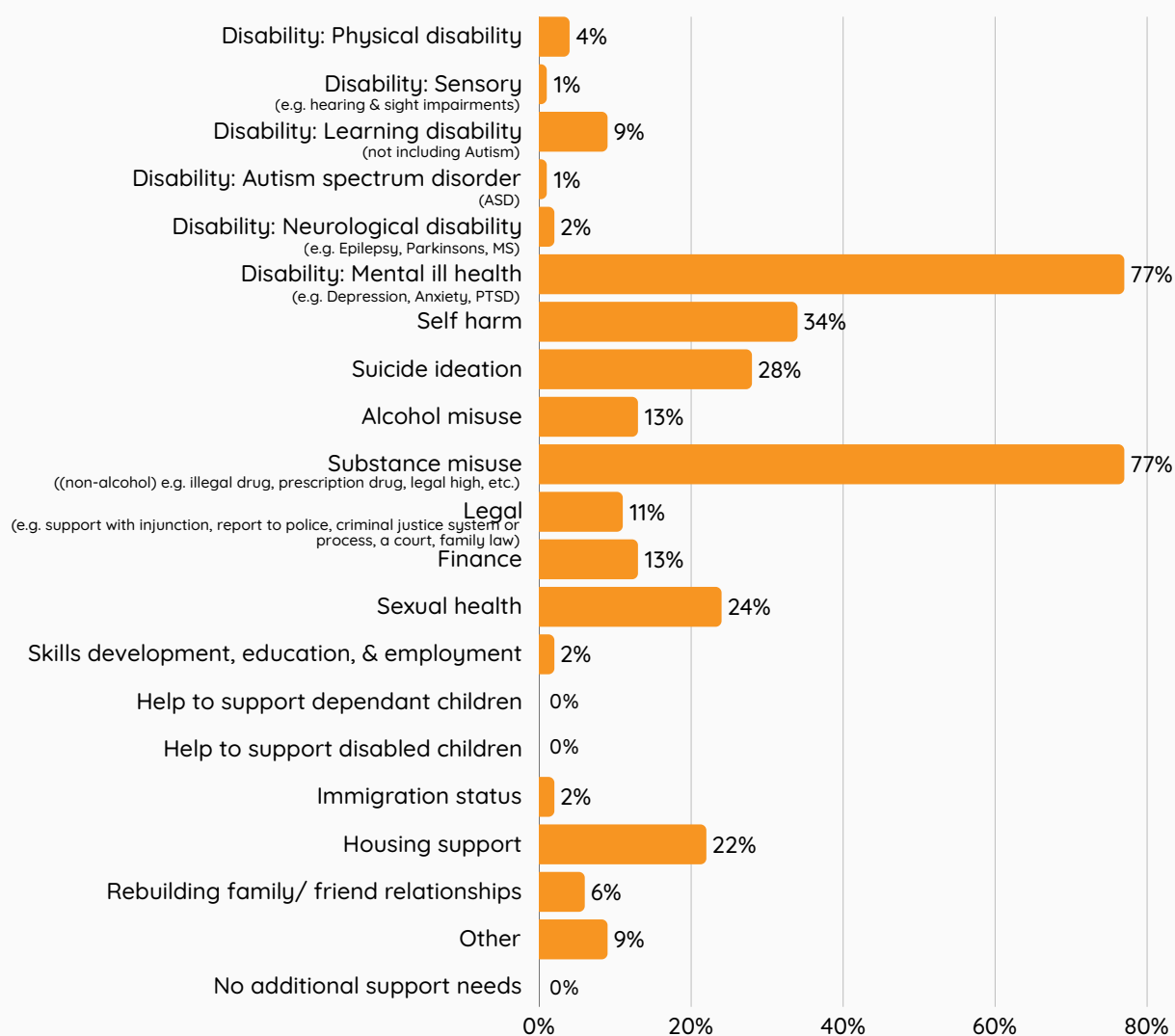
Figure 24: Types of abuse disclosed by survivors



5.7: Support needs

Data pertaining to the additional support needs of survivors was recorded for all survivors who engaged with sexual exploitation-based support services this year (n = 82). Additional support for substance misuse (non-alcohol) and mental health were the two most prevalent additional support needs disclosed by survivors across the financial year (n=63, 77%), followed by additional support needs associated with self-harm (n=28, 34%).

Figure 25: Additional support needs of survivors



Live Fear Free Helpline

Funded by the Welsh Government, the Live Fear Free Helpline was first established by Welsh Women's Aid (WWA) in 2004 as an all-Wales Domestic Abuse Helpline. The helpline is a free and confidential service which is accessible to all persons who have indirect or direct experience of domestic abuse, sexual violence, and/or violence against women. The helpline also supports concerned others, professionals, and agencies 24 hours a day, seven days a week.

6.1: Call volume

This financial year, between the 1st of April 2023 and the 31st of March 2024, the Helpline received a total of 18,058 contacts (not including voicemails): 14,349 calls, 819 emails, 2,175 webchats and 715 texts. The total incoming contact has decreased by 22%, which can be attributed to previous years experiencing inflated contacts due to the impact of the COVID-19 pandemic, as this has been the first full year without any legal restrictions.

Table 14: Volume of contacts received by the LFF Helpline – a two-year comparison

	Annual Totals (22-23)	Annual Totals (23-24)
Calls	14,349	18,432
Emails	819	876
Webchat	2,175	2,822
Texts	715	655
Total	18,058	23,272

The volume of outgoing contacts the LFF Helpline has been conducting has been increasing, with 11,409 calls made this year, compared to 11,076 last year. This is an increase of 3%, reflecting the increased complexity of the situation callers are requiring support with. This increase has also been highlighted in the work that our specialist service member organisations undertake.

Table 15: Monthly breakdown of the contacts received by the Helpline

	Incoming calls	Outgoing calls	Other incoming contact (including voicemails)
April	1,272	944	392
May	1,285	1,126	336
June	1,271	792	274
July	1,216	1,006	335

	Incoming calls	Outgoing calls	Other incoming contact (including voicemails)
August	1,367	1,086	343
September	1,328	878	343
October	1,356	873	335
November	1,124	875	352
December	973	945	444
January	1,175	1,092	502
February	924	846	550
March	1,058	946	521
Total	14,349	11,409	4,727

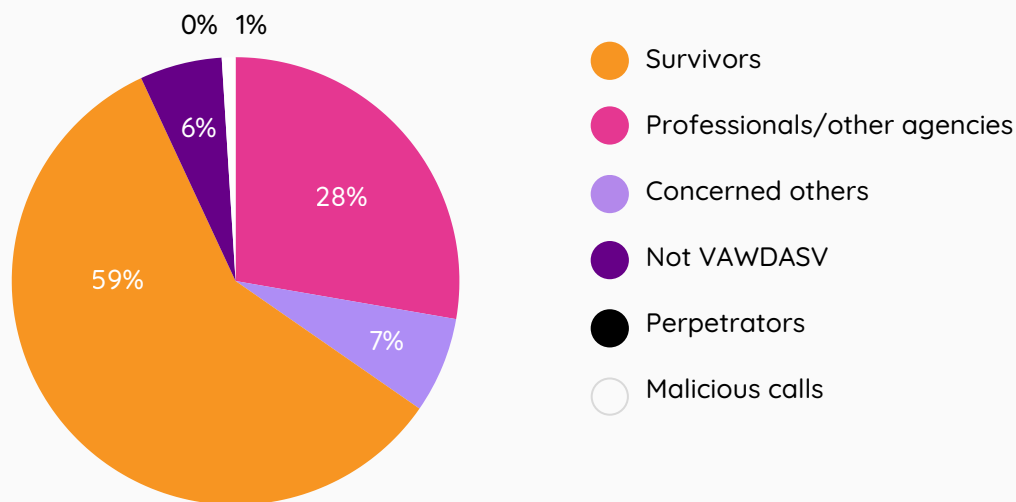
6.2: Caller information

Where possible the type of contact is recorded by the Live Fear Free Helpline. Due to the sensitive and confidential nature of the service, some callers may find it difficult to discuss their experiences and thus will end the call prior to reaching a Helpline Advocate. In other instances, the Helpline Advocates may be engaged with another call, or the lines may be disrupted by other types of calls such as testing calls from malicious and abusive callers. In 2023-24, contact type was recorded for 83% (15,731) of incoming contacts.

Of these (including voicemails):

- **59% (n=9,274)** were from survivors
- **28% (n=4,340)** were from professionals/other agencies
- **7% (n=1,094)** were from concerned others
- **6% (n= 898)** were not VAWDASV related
- **<1% (n=29)** were from perpetrators
- **1% (n=96)** were malicious calls, such as 'sex calls'

Figure 26: Type of Helpline contact



In addition 2,987 contacts recorded as No Further Action (NFA). This means that no action was needed, and that often the type of contact is not known, as it can contain diverted calls where the person didn't specify what they required. Diverted calls to the Helpline may be initially destined for the Domestic Abuse Member services and once the caller realises this then no further action may be required, although the Helpline Advocates will always offer to support.

The Helpline received 29 contacts from perpetrators of abuse. Where appropriate, perpetrators are referred to the Respect phoneline for perpetrators.

6.3: Supporting children and young people

For this financial year, 1,192 survivors reported that they had children, which was 13% of our incoming and outgoing survivor contacts. From this data (see below) it can be estimated that the LFFH indirectly supported at least 2,290* children. Due to similar demographic data input issues as above, there are limitations on this data, and it may appear lower than last years. The reduction in number could also be attributed to the problems securing refuge and Emergency Accommodation due to the Housing Crisis.

Additionally, 70 children and young people (individuals under the age of 18) called the LFF Helpline directly.

Table 16: The number of adults and estimated number of children supported

	Adult survivors	% of adults	Number of children
1 child	313	26%	313
2 children	219	18%	438
3 children	108	9%	324
4 children	38	3%	152
5 children	12	1%	60
6 children	7	<1%	42
7+ children	2	<1%	14
Not known	493	41%	947*
Total	1,192		2,290

*Calculated at 1.92 children per adult [22]

6.4: Signposting and referrals to other agencies

The Helpline made 20,461 referrals or signposts for individuals. This includes referrals made to other agencies for support for survivors relating to, for example, money related issues, child contact services, alcohol and substance misuse, male support services, NHS and mental health services. The most common option was related to refuge spaces for 28% (n = 5,684) of referrals. The next most frequent was signposting/referrals to counselling services (16%, n = 3,223), while third was to the police with 13% (n=2,474) having this option discussed with them.

Table 17: Number of referrals made to other agencies

Signposting to agencies	2023-24	% referrals
Alcohol/Substance support services	387	2%
BAWSO and other BME groups	208	1%
Benefit and money matters	193	1%
Children/family support services	417	2%
Counselling	3,223	16%
Health services	969	5%
Legal	893	4%

Signposting to agencies	2024-25	% signposts
LGBTQ+ support	50	<1%
Local authority and housing	1,359	7%
Men's support services	342	2%
Mental health services	1,420	7%
Older people support services	93	<1%
Perpetrator services and programmes	34	<1%
Police	2,474	13%
Refuge space	5,684	28%
SARC	68	<1%
Social services	944	5%
Other	1,703	8%
Total signposts	20,461	

6.5: User feedback

When possible and appropriate, Helpline Advocates will ask for feedback from service users. To encourage honest feedback, Helpline Advocates are not responsible for the collection of their own feedback. This financial year, there have been no complaints raised against the Helpline regarding the services provided.

6.6: Survivor and concerned other feedback

746 service users provided feedback to the helpline over this financial year. The feedback shows the positive outcomes of service users following contact with the LFF Helpline.

- 90% of service users reported feeling safer following intervention.
- 87% said that they felt an improvement to their emotional wellbeing.
- 95% who said that they received the required support.

The following quotes are just a few excerpts from the feedback the Helpline received this year from survivor service users:



“Thank you for all your support the last few weeks, you got me through it.”

“As an employer I feel that I now have the right words to be using with my employee, a victim of domestic abuse. This world is all new to me.”

“I was talking to a stranger but felt so relaxed. She made me feel able to tell my story honestly but in my own time. Not rushed at all.”

“Thank you so much, you have been such a help and fantastic support.”

“Extremely helpful advice, information and communication-great and easy to talk to someone as was a long time on the phone yesterday trying to get through.”

“I felt lost and was looking for confirmation that what I am going through is not ok and that’s exactly what I got. The helpline was friendly and non-judgemental which I really appreciated as I was so nervous about contacting them. They directed me to my local support service which I’m grateful for. Thank you.”

“I’ve not felt comfortable talking about the abuse my son is going through as it appears there’s less help for male victims. You made it so easy for me to talk frankly - thank you.”

“Very excellent and informative advice from the person I spoke to - so helpful. I will be able to sleep tonight as I was in a state of worry and fear. This service was excellent - can’t fault it and now I have a pathway forward to discuss with my daughter.”

6.7: Other agency feedback

In addition to the feedback provided by survivors, the Live Fear Free Helpline also collects any feedback received from other agencies, a small selection of which have been provided below for demonstrative purposes.



“Thank you for your time today. It has been really informative.”

“Thank you for checking in. It was an emotional call wasn’t it. I’m in awe of you for being so strong and supportive with these victims. I’d love to help out with anything you need in the future.”

“Just a thank you from me, so important for us to think about all the ways that a client might present. I will familiarise myself with your helpline.”

Appendices

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

	Organisation	Service	Refuge-based service				Community-based service				Dedicated sexual violence service				Dedicated sexual exploitation service			
			Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1	Aberconwy Domestic Abuse Service	Aberconwy Domestic Abuse Service	NO	YES	YES	YES	NO	YES	YES	YES								
2	BAWSO	BAWSO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
3	Vale DAS	Vales Das	YES	YES	YES	YES	YES	YES	YES	YES								
4	Calan DVS	Ammanford	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES				
		Neath Port Talbot	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES					
		South Powys	YES	YES	YES	YES	YES	YES	YES	YES	YES							
5	Cardiff Women's Aid	Cardiff Women's Aid	NO	NO	NO	NO	NO	NO	NO	NO								
6	Carmarthen Domestic Abuse Services	Carmarthen Domestic Abuse Services	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES				
7	Clwyd Alyn Housing Association (CAHA) Women's Aid	CAHA Women's Aid	YES	YES	NO	NO	NO	YES	NO	NO								
8	Cyfannol Women's Aid	Monmouthshire	YES	NO	NO	YES	YES	NO	NO	YES								
		Torfaen	YES	YES	YES		YES	YES	YES				YES				YES	
		Horizons									YES	YES	NO	YES	YES	YES	NO	YES
		Blaenau Gwent	YES	YES	YES	YES	YES	YES	YES	YES								
		Newport	NO	YES	YES	YES	NO	YES	YES	YES								

	Organisation	Service	Refuge-based service				Community-based service				Dedicated sexual violence service				Dedicated sexual exploitation service			
			Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
9	DASU North Wales	DASU North Wales	YES	NO	YES	YES	NO	NO	YES	YES								
10	Gorwel	Gorwel	NO	NO	NO	NO	NO	YES	YES	NO								
11	Montgomeryshire Family Crisis Centre	Montgomeryshire Family Crisis Centre	YES	YES	YES	YES	YES	YES	YES	YES								
12	RASASC North Wales	RASASC North Wales									YES	YES	YES	YES				
13	Rhondda Cynon Taff Women's Aid	RCT Women's Aid	YES	NO	NO	NO	YES	NO	NO	NO								
14	Safer Merthyr	Safer Merthyr					YES	YES	YES	YES								
15	Safer Wales	Safer Wales					NO	NO	NO	NO					NO	NO	NO	NO
16	Stepping Stones North Wales	Stepping Stones North Wales									NO	NO	NO	NO				
17	Swansea Women's Aid	Swansea Women's Aid	YES	YES	YES	YES	YES	YES	YES	YES					YES	YES	YES	YES
18	Threshold DAS	Threshold DAS (Llanelli)	YES	NO	NO	YES												
19	Thrive Women's Aid	Thrive Women's Aid	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO				
20	West Wales Women's Aid	West Wales Women's Aid	YES	YES	NO	YES	YES	YES	NO	YES								
			10.75	13	7.75	10	8.75	15	9.75	11	4	5	4.5	3.5	2	2	1.5	2

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.

The WWA Data Collection Form (2023/24) requests data in the following sections:

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.
Sexual exploitation based services	Data surrounding number of survivors who have accessed dedicated sexual exploitation based services.

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 authority areas

Region	Local authority	VAWDASV strategic boards & sub-regional arrangements	
North Wales	Conwy	North Wales VAWDASV Strategic Board	
	Denbighshire		
	Flintshire		
	Gwynedd		
	Isle of Anglesey		
	Wrexham		
Mid & West Wales	Carmarthenshire	Mid and West Wales VAWDASV Strategic Board	
	Ceredigion		
	Pembrokeshire		
	Powys		
South Wales	Vale of Glamorgan	Cardiff and the Vale region	South Wales VAWDASV Regional Collaborate Board
	Cardiff		
	Merthyr Tydfil Borough	Cwm Taf region	
	Rhondda Cynon Taf		
	Bridgend		
	Swansea	Western Bay region	
	Neath Port Talbot		
Gwent	Blaenau Gwent	Gwent VAWDASV Strategic Board	
	Caerphilly		
	Monmouthshire		
	Newport		
	Torfaen		

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Byw Heb Ofn Free Helpline

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call • text • live chat • email



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