



AN EVALUATION of DAHA ACCREDITATION Final Report

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Most of all, this research would not have been possible without the survivors of domestic abuse who kindly agreed to share their experiences and opinions with us.

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Disclaimer

The views presented in the report are not necessarily those of DAHA, STADV, Guinness, Gentoo or the University of York. Responsibility for any errors rests with the authors.

The language used to describe domestic abuse is in the process of change. Where official statistics, legal definitions and other references specifically employ the term 'domestic violence' rather than domestic abuse, this terminology is retained. However, the Domestic Abuse Act 2021¹ defines domestic abuse as violent or threatening behaviour; controlling or coercive behaviour; economic abuse; psychological and emotional or other abuse, which is a wider and more accurate description of the range of abuse experienced in the home than 'domestic violence'. The authors wish to highlight both the implied narrowness of using the term 'domestic violence' and that, as is reflected in the 2021 legislation, our use of language in relation to domestic abuse is changing.

1 <https://www.legislation.gov.uk/ukpga/2021/17/part/1/enacted>

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Summary

- DAHA Accreditation and membership enables housing providers to develop enhanced systems for detecting and responding to domestic abuse.
- The DAHA Accreditation process was seen as enhancing existing systems and procedures for detecting and responding to domestic abuse.
- Women who had experienced domestic abuse and been assisted by two housing providers with DAHA Accreditation generally reported a sense of safety, were pleased with the support they had received and often reported an increased sense of self confidence.
- Housing providers reported a sense that their systems for effectively responding to domestic abuse had been enhanced by DAHA Accreditation, there was a greater sense that they knew what to do and that what they were doing was effective.
- Many costs can be associated with domestic abuse for housing providers, including rent arrears (linked to economic abuse) and disruption and noise that can be misinterpreted as ‘anti-social’ or ‘nuisance’ behaviour. By putting proper monitoring, referral and services in place to understand where domestic abuse was occurring and respond more effectively to it, housing provider operating costs were reduced.
- The risks of homelessness, which for lone women and lone women parents with dependent children is strongly associated with domestic abuse, are reduced through DAHA Accreditation. Early detection may mean someone can keep a home they might have otherwise lost because of issues like rent arrears resulting from economic abuse. Someone may also be able to stay in their own home as coordinated services create physical safety combined with perpetrator management (sanctuary schemes and similar models).
- Risks to life, health and wellbeing can be reduced by DAHA Accreditation enabling someone to keep their home or to move quickly and safely to another settled home when that is necessary.
- The financial costs of domestic abuse to society are huge. With lost productivity and public expenditure combined, a systematic estimate produced for the Home Office estimated annual costs at some £66 billion in England and Wales for the financial year 2016/17 (please see Section 5).
- The costs of DAHA Accreditation vary by the size of the housing provider and how it chooses to implement the changes to its services and systems, but are generally low. The cost of the Accreditation process itself is very low.
- London faces unique challenges centred on housing supply and governance which are highlighted throughout this report. DAHA Accreditation has nevertheless generated the same benefits for the Capital as reported above.
- Other stakeholders viewed DAHA and the Accreditation process in a good light, though it was reported that DAHA Accreditation was occurring in a context in which far more resources to be devoted to addressing domestic abuse.s that they knew how to use when they found it.

Introduction

This report presents the results of an independent evaluation of Domestic Abuse Housing Alliance (DAHA²) Accreditation by the Centre for Housing Policy at the University of York. DAHA Accreditation is an innovative intervention designed to help housing providers detect and respond to domestic abuse more effectively.

This report presents a three-year longitudinal University of York evaluation and provides:

- A brief introduction to DAHA
- An overview of the accreditation process
- A description of the experience of attaining accreditation for housing providers
- An examination of cost effectiveness
- An exploration of the accreditation for survivors of domestic abuse.

The report draws on qualitative and quantitative data, collected with free and informed consent, which were fully anonymised for the purposes of the analysis presented in this report. The study looked at the experiences of two social landlords. Gentoo, a social landlord based in Sunderland and Guinness, providing homes across London and the South-East are at differing stages of the accreditation process. Guinness went through DAHA Accreditation in 2020 whereas Gentoo was one of the first social landlords in England to undertake DAHA Accreditation in 2014 and has also recently achieved its second accreditation status in 2019.

This final report is based on 26 one-to-one in-depth interviews with survivors of abuse assisted through DAHA accreditation, a survivor focus group, 16 one-to-one in-depth interviews with housing provider staff (a mix of CEO's, victim support officers and their managers, data / cost analysts, heads of maintenance and heads of domestic abuse services) from across both case study sites. Additionally, six current and former senior members of DAHA were interviewed, including its founders. A variety of stakeholders from across the domestic abuse and housing sectors also contributed to the research.

DAHA collected additional anonymised data from six housing providers alongside their standard administrative data to facilitate the authors to produce a cost benefit analysis. No individually identifiable data were shared by DAHA with the authors. The original planned methodology had to be revised due to the COVID-19 pandemic and associated restrictions that were in place during the last fifteen months of the research. This meant that focus group numbers were reduced, and the majority of interviews undertaken were conducted via telephone or online video communication apps. Approval for the research design and methods was provided through the University of York's ethical review process.

This final report is divided into seven sections:

- 1 Background** – provides some information on the context in which DAHA Accreditation operates, highlighting the many challenges we face as a society stemming from domestic abuse.
- 2 The Domestic Abuse Housing Alliance** – describes the development of DAHA Accreditation and the ethos behind the approach.
- 3 Survivor Experience of DAHA Accreditation** – examines the experiences and opinions of people who have been assisted in dealing with domestic abuse by their housing provider using DAHA Accreditation systems and approaches.
- 4 DAHA Accreditation and Housing Providers** – explores the experiences of DAHA Accreditation among housing providers and their views on the approach.
- 5 The Financial Benefits of DAHA Accreditation** – this section of the report looks at the societal, economic and public expenditure costs of domestic abuse, the financial costs that can arise for housing providers and for statutory homelessness systems, including prevention and relief under the Homelessness Reduction Act.
- 6 Moving towards Strategic Integration** – this section considers views on the current and future roles for DAHA Accreditation.
- 7 Conclusions** – the final section of the report discusses the key experiences and lessons from the three year evaluation of DAHA Accreditation.

The report explores shared issues and experiences, but each section also highlights specific experiences in relation to the use of DAHA Accreditation in London. The report draws across the results of all the research conducted over the last three years and therefore contains some material that was also presented and discussed in Bretherton, J. and Pleace N. (2020) *DAHA Accreditation: An Evaluation, Interim Report*.³

³ https://eprints.whiterose.ac.uk/168944/6/DAHA_Interim_Evaluation_Report_2020_2.pdf

1 Background

The scale of domestic abuse

Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial and emotional abuse (Home Office, 2013)⁴

Domestic abuse is a widespread social evil in contemporary UK society, one that has been highlighted and also possibly exacerbated by the COVID-19 pandemic. The Domestic Abuse Act 2021 defines abuse as encompassing:

- violent or threatening behaviour;
- controlling or coercive behaviour;
- economic abuse; and psychological, emotional or other abuse.⁵

As this report explores below, the human, social and economic cost of abuse is gigantic, undermining mental and physical health, social cohesion, quality of life and economic productivity in British society.

- For the 12-month period to year ending March 2020 figures from the Office for National Statistics (ONS) show that in England and Wales an estimated 2.3 million adults aged 16 to 74 experienced domestic abuse:
 - 1.6 million women (70% of the total); and,
 - 757,000 men.⁶
- In 74% of the domestic abuse-related crimes recorded by the Police in the year ending March 2020, the victim was female. For the year ending March 2020, 80% of domestic violence occurred in or around the home.⁷

4 <https://www.gov.uk/government/publications/new-government-domestic-violence-and-abuse-definition/circular-0032013-newgovernment-domestic-violence-and-abuse-definition>

5 <https://www.legislation.gov.uk/ukpga/2021/17/part/1/enacted>

6 www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwalesoverview/november2020

7 www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwalesoverview/november2020

Homelessness and domestic abuse

The links between women's homelessness and domestic abuse have long been recognised, with the original 1977 homelessness legislation making specific provision by ensuring that women, children and others at risk of 'domestic violence' were recognised as in 'priority need' under the homelessness law.⁸ It is important to note that our use of language in relation to domestic abuse is undergoing change, domestic abuse, as defined in the most recent legislation (The Domestic Abuse Act 2021) encompasses violent or threatening behaviour; controlling or coercive behaviour; economic abuse; psychological and emotional or other abuse, which is a wider and, importantly, much more accurate description of the range of abuse experienced in the home than 'domestic violence'.

However, the terminology 'domestic violence' remains in use in relation to some official statistics, the ways in which some services are described (for example, Independent Domestic Violence Advisors, IDVAs) and in law. Where the term 'domestic violence' is still employed in this technical sense, it has been retained, but the authors wish to draw attention to both the narrowness of this terminology and, again, highlight that our use of language in relation to domestic abuse is changing.⁹

As the homelessness laws have diverged in the UK, with separate and distinct legislative arrangements existing in Wales, Northern Ireland, England and Scotland, this original emphasis on protecting women and others at risk of domestic abuse has remained. In England, the Domestic Abuse Act 2021 created automatic priority need for people experiencing or at risk of domestic abuse, enhancing the protections offered under the homelessness laws.¹⁰

'Firefighting' and the limits of existing systems

Longstanding challenges have been present since the first attempts to establish better systems for reducing domestic abuse and to better manage situations in which domestic abuse is a potential and actual trigger event for homelessness.

- Systems have, until relatively recently, been largely reactive. The routes for a woman, woman with children or a male who is experiencing or at risk of domestic abuse centred on four main possible trajectories, all of which were primarily designed to respond once domestic abuse has occurred:
 - Child protection services and systems for children and young people.
 - Refuge services, a model offering a place of sanctuary and support, dating back to the 1960s and earlier.
 - Homelessness services that are able to offer supported and safe environments, e.g. women's only hostels, fixed site supported housing and floating support/housing-led (and later Housing First services) offering support following resettlement in ordinary housing.
 - The statutory homelessness system, as designed in 1977, offers 'priority need' to someone at risk of, or experiencing, domestic abuse (the original law referred to 'domestic violence') which can include the capacity to move to another local authority area without requiring the usual local connection to that area. In England, this legal provision remains, alongside the greater emphasis in homelessness prevention introduced in the 2017 Homelessness Reduction Act.

8 Jones, A. (1999) *Out of Sight, Out of Mind: The Experiences of Homeless Women*, London: Crisis; Mayock, P., Sheridan, S. and Parker, S. (2015) 'It's just like we're going around in circles and going back to the same thing: The dynamics of women's unresolved homelessness', *Housing Studies*, 30, 6, 877-900; Mayock, P. and Bretherton, J. (eds.) (2016) *Women's Homelessness in Europe*, London: Palgrave Macmillan; Bretherton, J. (2017) 'Homelessness and gender reconsidered', *European Journal of Homelessness* 11, 1, 1-22; Bretherton, J. and Pleace, N. (2018) *Women and Rough Sleeping: A Critical Review of Current Research and Methodology*, London: St Mungo's; Broll, R., and Huey, L. (2020). "Every Time I Try to Get Out, I Get Pushed Back": The Role of Violent Victimization in Women's Experience of Multiple Episodes of Homelessness. *Journal of Interpersonal Violence*, 35(17-18), 3379-3404.

9 Please also see the disclaimer at the front of this report.

10 https://www.legislation.gov.uk/ukpga/2021/17/pdfs/ukpga_20210017_en.pdf

- These services have not always been well coordinated. Transitions between refuges and homelessness services and systems can be difficult to orchestrate, particularly in relation to securing safe, adequate, settled and affordable homes in a timely way, with mounting evidence of recurrent and sustained homelessness among lone adult women linked to frequent experience of domestic abuse.¹¹ The management of the housing and support needs of young people leaving the care system is a longstanding issue, with young people who have experienced domestic abuse and entered the care system being disproportionately likely to experience homelessness. There are associations between having been a looked after child and the risk of sexual exploitation and abuse as a young adult.¹² More generally, there is longstanding evidence of people who have experienced domestic abuse becoming 'stuck' in refuge and supported housing services because of a shortage of move-on accommodation and housing.¹³
 - Coordinated data collection and data sharing around domestic abuse has often proved difficult. Whether or not domestic abuse is recognised as an issue can depend on the trajectory someone takes through systems. For example, a lone woman or woman with children might be recorded as experiencing 'domestic abuse', rather than 'homelessness'. By contrast, the same woman might be defined and counted as 'homeless because of domestic abuse' if she seeks relief, prevention or settled housing through the statutory homelessness system. It is also possible she may not have her experience of domestic abuse recorded at all, if, for example, she receives prevention, relief and/or was found to be in priority need by an English local authority because of the presence of dependent children.¹⁴
- Limited data, in the sense of what is collected and how effectively it is coordinated, reflect the wider disconnect between different system elements that are designed to respond when someone experiences domestic abuse that threatens their health, their wellbeing - or their life – and they have to leave their existing home.
- There has been uneven implementation of preventative strategies and approaches to domestic abuse in general and, in particular, in relation to attempts to prevent experience of domestic abuse, or the threat of domestic abuse, acting as a trigger for homelessness. Innovations such as sanctuary scheme¹⁵ approaches, designed to actively prevent homelessness by enabling someone experiencing or at risk of domestic abuse to remain in their own home, have been rolled out on an uneven basis. Funding has been uneven, implementation has not been encouraged by clear national guidance and practice has varied. There have also been logistical and legal issues in effectively integrating sanctuary schemes into integrated domestic abuse strategies.
 - A wider issue exists in relation to the loss of coordinating strategic guidance at national level a decade ago, under the Supporting People programme¹⁶, which was replaced with a 'localism' approach that placed key strategic decisions in local authority hands, creating marked inconsistencies in the standard and integration of homelessness strategies, which includes effective coordination with domestic abuse services and strategy.¹⁷

11 Bretherton, J. (2020) *Women's Experiences of Homelessness: A Longitudinal Study* Social Policy and Society 19(2), pp. 255–270

12 Dixon, J & Baker, C (2012) The housing experiences of young people leaving care in England: what helps?, *Developing Practice: The Child, Youth and Family Work Journal*, no. 32, pp. 26-34; Gill, A. and Daw, E.(2017) *From care to where? Care leavers' access to accommodation* London: Centrepoin.

13 Quilgars, D. and Pleace, N. (2010) *Meeting the needs of households at risk of domestic violence in England: The role of accommodation and housing-related support services* London: MHCLG.

14 Pleace, N. (2016) *Exclusion by Definition: The Under-Representation of Women in European Homelessness Statistics* in Mayock, P. and Bretherton, J. *Women's Homelessness in Europe*, London: Palgrave Macmillan, pp. 105-126.

15 Jones, A., Bretherton, J., Bowles, R. and Croucher, K. (2010) *The Effectiveness of Schemes to Enable Households at Risk of Domestic Violence to Remain in Their Own Homes*, London: Communities and Local Government

16 <https://commonslibrary.parliament.uk/research-briefings/rp12-40/>

17 Fitzpatrick, S. et al. (2020) *Localism and homelessness: a decade of disaster in England* blogs.lse.ac.uk/politicsandpolicy/localism-andhomelessness

- Resourcing to enable integrated responses to domestic abuse and the reduction of homelessness associated with domestic abuse has often been both erratic and limited. These longstanding problems and challenges have been exacerbated by sustained cuts to budgets for many domestic abuse and homelessness services over the last decade.¹⁸ The innovations and improved protections included in the Homelessness Reduction Act (HRA) in England potentially enhance the means available to local authorities to react to risks of homelessness linked to domestic abuse, but issues with sufficiency of funding to properly implement the HRA have been reported.¹⁹

There is considerable work to still be done in enhancing understanding of the intersectionality of domestic abuse and housing in how interventions, service responses and strategies are designed and delivered. The ‘fire-fighting’ model that was designed to step in once domestic abuse has been detected or reported to the Police, at which point the human costs, the financial costs and the risk of homelessness will often have reached high levels, requires enhancement in order to ensure that capacity to prevent both domestic abuse and the risk of subsequent homelessness is greatly increased.

Enhancing preventative responses to homelessness associated with domestic abuse

Enhancement to preventative systems is one way in which existing strategies and services can be improved. Emergency accommodation, the services provided by refuges and some homelessness and supported housing services, is also a vital part of a balanced, integrated response to domestic abuse and the risk of homelessness being triggered by domestic abuse. Refuges retain a vital role, because there will be circumstances when women at risk of violence and abuse have to leave a risky or dangerous situation immediately, requiring instant and secure shelter, and this option needs to be available to local authorities to effectively discharge their duties to prevent and relieve homelessness under the HRA.

In the UK, several housing and homelessness organisations including the National Housing Federation²⁰, Homeless Link²¹, Crisis²² and at European level, FEANTSA²³, alongside major domestic abuse service providers like Women’s Aid²⁴, have sought the development of a more holistic and effective response to domestic abuse and find ways of reducing homelessness triggered by domestic abuse. Academic research has become increasingly concerned with the scale and extent of women’s homelessness, as well as the experience of long-term and repeatedly homeless women whose lives can often involve traumatic experiences associated with domestic abuse, sexual exploitation and violence²⁵ and has encouraged the increasing attention being focused on women’s homelessness.²⁶

18 Whitehead, H. (2021) One in five refuge services get no local authority funding, research finds <https://www.civilsociety.co.uk/news/one-in-five-refuge-services-not-commissioned-by-a-local-authority.html> ; St Mungo’s (2019) *St Mungo’s Home for Good campaign briefing: fixing funding for homelessness services* <https://www.mungos.org/publication/fixing-funding-for-homelessness-services-summary>

19 Boobis, S. et al (2020) *A foot in the door: Experiences of the Homelessness Reduction Act* London: Crisis.

20 <https://www.housing.org.uk/news-and-blogs/news/our-recent-work-on-domestic-abuse/>

21 <https://www.homeless.org.uk/homeless-link’s-tampon-tax-fund-grants-programme>

22 <https://www.crisis.org.uk/ending-homelessness/womens-homelessness-matters/>

23 <https://www.feantsa.org/en/project/2019/01/03/women-and-homelessness?bcParent=418>

24 <https://www.womensaid.org.uk/the-survivors-handbook/housing-advice/>

25 <http://womenshomelessness.org>

26 Mayock, P. and Bretherton, J. (Eds) (2016) *Women’s Homelessness in Europe*, London: Palgrave Macmillan.

DAHA's Whole Housing Approach Toolkit (DAHA, 2020)²⁷ reflects the kind of thinking that has been happening in the domestic abuse, housing and homelessness sectors at a wider level.

There is a reappraisal of many of the conventions in how women's homelessness associated with domestic abuse has been responded to, beyond raising questions about a shift towards more preventative practice, the nature of some existing systems has been critically assessed. Refuge services are and will remain vital, but there can be issues with resource levels and with design and operation, ranging from the suitability of buildings that may in some instances have been used for many years, through to some practices around meeting the needs of women who have older, dependent male children with them and the nature of support offered by some services. Refuge places have also been reported as highly inadequate relative to need in many areas by ONS (see Section 5)²⁸.

Refuge services have faced sustained and increasing cuts to their funding despite reported increases in demand, in 2018-2019 it was reported that 64% of referrals made to a refuge were declined.²⁹

Statutory homelessness systems have also been unable to provide efficient and effective solutions to homelessness associated with domestic abuse, primarily because of difficulties in securing adequate, affordable and settled housing. Shortages in social housing supply have also been associated with increasingly harsh (and increasingly legally challenged) interpretations of whether or not a statutory duty is present.³⁰

Numbers in temporary accommodation have escalated, including among lone homeless women and, particularly, women-headed families where at least some homelessness has been triggered by domestic abuse. In 2019, the average number of children in households that were homeless, or at risk of homelessness, and placed in temporary accommodation by local authorities was some 3008% higher than the rough sleeper count in England.³¹ Waits in temporary accommodation for settled housing can be long and, from a financial perspective, expensive for the public purse, with annual expenditure running into tens of millions while families and other households wait for their homelessness to be resolved with a route into settled housing (see Section 5). Beyond this, an inequality of access to the statutory homelessness systems to people at risk of domestic abuse, in the specific sense of being found in 'priority need' and eligible for settled housing, along with other lone adults defined as vulnerable has been a longstanding issue³².

27 https://www.dahalliance.org.uk/media/10650/4_-wha-refuge-services.pdf

28 <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimservicesenglandandwales/november2020#domestic-abuse-victim-services-data>

29 Women's Aid (2020) *The Domestic Abuse Report 2020: The Annual Audit*. Bristol: Women's Aid.

30 Carr, H. and Hunter, C. (2008) Managing vulnerability: homelessness law and the interplay of the social, the political and the technical. *Journal of Social Welfare and Family Law*, 30(4), pp.293-307.

31 4,266 people were reported living rough in the count conducted in the Autumn of 2019, compared to (on 31st December 2019) 62,580 households in temporary accommodation (or 70.8% of the total households in temporary accommodation) included dependent children, a total of 128,340 children source: MHCLG <https://www.gov.uk/government/statistics/statutory-homelessness-in-england-october-todecember-2019>

32 Bretherton, J., Hunter, C. and Johnsen, S. (2013) "You can judge them on how they look": Homelessness officers, medical evidence and decision-making in England', *European Journal of Homelessness* 7, 1, 69-92; Mayock, P., Parker, S. and Sheridan, S. (2015) *Women, Homelessness and Service Provision*. Dublin: Simon Communities of Ireland.

The challenges in London

While London has, in relative terms, higher provision of some services such as refuges than is the case for some other areas of England, (see Section 5)³³, some of the challenges outlined above are particularly acute in the Capital. Extreme pressures on affordable and social housing supply mean that use of temporary accommodation by local authorities (the London boroughs) is proportionately much higher than is the case elsewhere in England. In late 2019, when the last figures assembled before the pandemic began to take hold were collected, MHCLG reported that there were 16.6 households living in temporary accommodation per 1,000 households in London, compared with 1.5 in temporary accommodation per 1,000 households in the rest of England.³⁴ There were 60,720 households in temporary accommodation in London in March 2020, representing 67% of the national total for England (90,000 households in total).³⁵

London boroughs also accounted for a disproportionate number of ‘main duty’ homelessness acceptances, i.e. households found to be in priority need and eligible for temporary accommodation, usually until a settled housing solution can be found.³⁶

London contains a high proportion of the social housing in England, some 785,000 units which represents approximately 19% of the four million or so units managed by local authorities and housing associations/registered providers in England (16.5% of national housing stock).³⁷ In London, social housing contains a high proportion of people living on low incomes and having to rely on benefits, a recent report from the GLA notes:

There are large differences in the income distribution of households in social rented accommodation and in private rented accommodation. 35% of London social tenants are in the bottom fifth of the national household income distribution and only 16% are in the top two fifths. In contrast, 58% of private tenants are in the top two fifths of the national household income distribution and only 14% are in the bottom fifth.³⁸

Social tenants in London are more likely to report being in arrears than private rented sector tenants and social landlords operating in the Capital can be dealing with managing areas in which social problems, including spatial concentration of poverty, anti-social behaviour and crime, alongside social, economic and environmental degradation, are acute. Pressures on social landlords, on the homelessness system and on other services, while they can be considerable elsewhere, do not exist at the same scale as is encountered in London.

Reducing pressures on systems by reducing homelessness that is ‘triggered’ by domestic abuse would help manage the considerable pressures on resources being experienced by the boroughs, social landlords and other stakeholders operating in the Capital. Pressure on social housing supply and to use that social housing to meet the needs of people experiencing homelessness is very high, and housing options teams (implementing the homelessness legislation) are extremely stretched, by lessening the extent to which domestic abuse is a cause of homelessness, these various systems across London would be under less strain.

33 <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimservicesenglandandwales/november2020#domestic-abuse-victim-services-data>

34 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/886421/Statutory_homelessness_release_Oct-Dec_2019.pdf

35 Source: MHCLG: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/910409/Statutory_homelessness_release_Jan-Mar_2020.pdf

36 Technically, the main housing duty is a duty to provide temporary accommodation until such time as the duty is ended, either by an offer of settled accommodation or for another specified reason. Settled housing can be social housing with a secure or assured tenancy, but it can be private rented sector housing with an assured shorthold tenancy, see: https://england.shelter.org.uk/professional_resources/legal/homelessness_applications/local_authority_homelessness_duties/local_authority_main_housing_duty

37 <https://www.gov.uk/government/statistical-data-sets/live-tables-on-dwelling-stock-including-vacants>

38 GLA Housing and Land (2020) *Housing in London in 2020: The evidence base for the London Housing Strategy* London: GLA P.21.

2 DAHA Accreditation

Overview

Reducing the pressure on existing systems and reducing use of those systems which can have mixed outcomes by promoting effective prevention and relief is at the core of the reforms to the existing statutory system introduced by the HRA in England.³⁹ There is a general consensus that enhancing prevention is essential to developing an effective, integrated response to women's homelessness⁴⁰ and that preventing homelessness associated with domestic abuse is a key element within a successful approach. Men who are at risk of homelessness due to domestic abuse, while a smaller population can also be assisted through enhanced prevention, a key part of which is early detection.

Stopping the loss of someone's home due to domestic abuse, through the enhancement of early detection and prevention is an important part of an integrated strategy that minimises both the human and financial costs of homelessness linked to domestic abuse.

As is discussed in Section 5, the human and financial costs that can be associated with domestic abuse can be extremely high, creating a need to look at different ways to approach the challenge of preventing and thus reducing domestic abuse in England and the wider UK.

DAHA Accreditation is designed to enable housing providers to detect and respond to domestic abuse earlier and with greater efficiency, the goal of DAHA Accreditation is to help to build new and better responses to domestic abuse within housing management and at strategic level. If housing providers adopt DAHA Accreditation there should be the potential to help manage the human and financial costs of domestic abuse by providing a more effective early response. Housing providers might also avoid the risks associated with undertaking inappropriate and costly evictions, such as seeking eviction of a household that is not paying the rent, without recognising that an abusive relationship is actually the cause of the arrears (see Section 5).

Many of the potential benefits of DAHA Accreditation centre on enabling women and women with children, as well as the smaller numbers of men who lose their homes through domestic abuse, to keep their own homes. If a home can be retained, so can social networks and access to services and employment, so that 'firefighting' responses that might have ultimately resulted in a move to another area, perhaps disrupting children's education, continuity of care from NHS and social care services, employment, further and higher education and training, can be avoided. The wider social risks, to someone's life chances, to their potential economic and social contributions being undermined or ended by domestic abuse, can be reduced if more effective early detection and prevention is in place (see Section 5).

³⁹ Boobis, S. et al (2020) *A foot in the door: Experiences of the Homelessness Reduction Act* London: Crisis.

⁴⁰ Bretherton, J. and Mayock, P. (2021) *Women's Homelessness: European Evidence Review* Brussels: FEANTSA.

Origin and Ethos

The Domestic Abuse Housing Alliance (DAHA) was established in 2014 through collaboration between Standing Together, Peabody and Gentoo⁴¹. DAHA Accreditation is a system designed to enhance the response of housing providers to domestic abuse, organised around a preventative approach with an emphasis on early detection and rapid response.

DAHA was established on the basis that housing is the primary barrier for women attempting to leave abusive situations. This barrier operates on two levels. First, the lack of anywhere else to go and, in abusive situations, inability to access any financial resources (economic abuse) to find an alternative home can mean that finding a route away from abuse and threats can be difficult, especially where there is also a lack of information about domestic abuse services and those services that are available are overtaxed and not necessarily accessible. Second, leaving home means leaving connections, where there are children it means disrupting education, it can also mean that employment, further/higher education or training cannot be maintained and that links with friends, family and community supports are broken or damaged.

This creates a need to both maintain an existing home where possible, so that a woman does not lose her home because of domestic abuse she is experiencing or at risk of and, where the situation necessitates it, that she has a clear, safe and supported route to another, safe, adequate and affordable home. Early detection facilitates the pursuit of the first goal, helping to reduce homelessness that is triggered by escalating domestic abuse by stopping the escalation from occurring, staff training, information and the right systems can also support the second goal, because there is a clear, effective and established route to alternative housing in place.

DAHA describes its mission in the following terms:

The Domestic Abuse Housing Alliance's (DAHA) mission is to improve the housing sector's response to domestic abuse through the introduction and adoption of an established set of standards and an accreditation process.⁴²

DAHA is a partnership between Standing Together Against Domestic Abuse (Standing Together)⁴³, a national domestic abuse charity, Peabody⁴⁴, one of London's oldest and largest social landlords and Gentoo⁴⁵ a major social landlord in Sunderland, an urban area in the North East of England. DAHA Accreditation has become increasingly widespread since the formation of the alliance, the first local authority social landlord, Southwark, a London borough, joining in 2018⁴⁶. At the time of writing this report,

DAHA has 25 housing providers⁴⁷ accredited nationally and this number continues to grow. Collectively, these housing providers had a stock of over 230,000 homes in management. A further 77 housing providers were pursuing accreditation with an additional 46 having accessed the DAHA Accreditation Toolkit, with a view to pursuing accreditation.

DAHA had also established resources designed to work with private rented sector landlords. This is a potentially significant step, as in many areas the scale of the private rented sector matches or exceeds the scale of social and affordable housing under the management of housing associations/registered providers and local authorities (see sections 4 and 6).

41 <https://www.dahalliance.org.uk/about-us/meet-the-team/>

42 DAHA website: <https://www.dahalliance.org.uk/about-us/who-we-are-why-we-do-it/>

43 <https://www.standingtogether.org.uk>

44 <https://www.peabody.org.uk/home>

45 <https://www.gentoo.org.uk/for-customers/>

46 <https://www.southwark.gov.uk/news/2018/oct/southwark-council-s-housing-solutions-service-first-in-country-to-receive-accreditation-by-the-domestic-abuse-housing-alliance>

47 Registered providers of social housing, including housing associations, transfer (LSVT, local stock voluntary transfer) associations, armslength management organisations (ALMOs) and councils which retain management of a social housing stock.

The ethos of DAHA Accreditation is described in the following terms:

As Members of DAHA you share our mission to improve the housing sector's response to domestic abuse and vision that the housing sector gives the right response to domestic abuse every time. You accept our principles that are the foundation of all that we do:

Non-judgement: DAHA Members create an enabling environment where survivors know they will be listened to, wanting people and families to thrive. This is achieved by creating an enabling environment where survivors can disclose abuse without judgement, knowing they will be believed, listened to, and heard.

Being person-centred: How you do the work is as important as what you do. DAHA Members aim to work with empathy, integrity, and transparency, committing to empower staff to build their knowledge, skills, and confidence to identify and respond to domestic abuse in the most appropriate way that puts the survivor at the heart of the intervention and support.

Amplifying survivor voices: Valuing feedback from people with lived experience of domestic abuse DAHA Members seek to learn from survivors, both staff and tenants and work to amplify their voices to inform development and improvement of practice.

Intersectionality: Domestic abuse is different for everyone and will never be all of one person's experience. Domestic abuse is rarely the whole of a person's experience and DAHA Members recognise that people may be disadvantaged by multiple oppressions such as race, gender, sexuality, abilities. Members promise to take an intersectional approach recognising a person's unique experience based on the intersection of all relevant grounds.

Safety: Creating safe homes and communities where perpetrators are held to account for their behaviour. DAHA Members recognise that the safety of those who are experiencing domestic abuse is paramount and that safe intervention starts by talking to them and asking them what they need and want to happen. Perpetrators will be held to account for their behaviour with the safety of those who have experienced domestic abuse from them a priority consideration in any intervention.

Working towards a Coordinated Community Response (CCR): Committing to working together to end domestic abuse. DAHA Members will be part of a coordinated community response to domestic abuse by working collaboratively with local agencies to share information and to meet the needs of the individuals and families experiencing domestic abuse. DAHA Members will communicate and build meaningful relationships with tenants, with colleagues and with those who have specialist knowledge, experience, and powers to assist them in keeping families safe and well.⁴⁸

In 2020, the approach was summarised by a senior member of DAHA in the following terms:

DAHA is trying to achieve earlier intervention. This includes the earlier detection of households where domestic abuse is occurring. Housing providers offer a key insight into people's homes...they have access to people's homes, and they might be the first to kind of spot the signs; and so the benefit to households would be that you have a professional who's able to help the survivor in that instance potentially understand and recognise what's happening to them is domestic abuse.

Membership

DAHA membership and accreditation is offered at three levels at the time of writing:

- Affiliated Membership⁴⁹, which provides access to the DAHA online toolkit with information on DAHA's accreditation standard and what is expected from accreditation.
- Accreditation Membership⁵⁰ (working towards full membership) which provides access to guidance on implementing DAHA's accreditation standards through an online 'enhanced toolkit' and a 'Getting Started' pack including the DAHA Accreditation Assessment Spreadsheet, alongside support from a DAHA Accreditation Manager.
- Accredited Membership (full membership, for housing providers who undertake DAHA Accreditation) which gives the housing provider the public status of an organisation that is formally recognised as following DAHA Accreditation policy and practice.

Annual fees vary with the size of the organisation and the level of membership, ranging from £500 to £4,000 (approximately) in 2020/21. The detail of DAHA Accreditation is not reproduced here as DAHA is reliant on the fees from member organisations to remain operational, but can be summarised as systems for early detection and rapid response to domestic abuse. One example is training a housing provider's repair staff to recognise and report potential signs of domestic abuse, as they might encounter what may be evidence of abuse when entering a home to do a repair. Another example is training housing management staff to recognise when issues that might on the surface be seen as something else, particularly nuisance behaviour like noise or a household going into rent arrears, are in fact signs of domestic abuse.

Operationally, the DAHA Accreditation process has eight priority areas:

- Policies & Procedures
- Case Management
- Risk Management
- Inclusivity & Accessibility
- Perpetrator Management
- Partnership Working
- Training
- Publicity and Awareness

Accreditation is an internally organised process that DAHA supports through a mixture of online resources and direct support. Housing providers are expected to form an internal steering group that reviews existing practice, training needs, data collection and analysis and modifications that may be required to existing practice. In instances where systems need to be altered, but not replaced, a housing provider might use DAHA Accreditation to modify existing systems and staff training, but not pursue extensive changes to staffing or logistics. Accreditation sets baseline standards and expectations but is customisable in the sense that it can be adapted to the specific needs of a housing provider's tenants. In other cases, a decision might be taken to undertake administrative changes and take on additional staffing in order to achieve DAHA Accreditation. Once Accreditation is achieved, following an assessment visit, it is renewable every three years.

⁴⁹ <https://www.dahalliance.org.uk/what-we-do/daha-membership/>

⁵⁰ <https://www.dahalliance.org.uk/what-we-do/accreditation-for-housing-providers/>

The Whole Housing Approach

DAHA Accreditation is linked to a wider ambition termed the Whole Housing Approach.⁵¹ The Whole Housing Approach is summarised by DAHA in the following terms (see also Section 5):

The Whole Housing Approach (WHA) endeavours to improve the housing options and outcomes for people experiencing domestic abuse so that they can achieve stable housing, live safely and overcome the abuse and its harmful impacts.

Its mission is to:

Improve access to safe and stable housing across all housing tenure types (social, private rented and private ownership). It considers the need for move on options from refuges, supported accommodation and any other type of temporary accommodation; and,

Ensure access to a range of housing options and initiatives tailored for domestic abuse to give choice for people experiencing domestic abuse to relocate or remain in their existing accommodation.

Its key aims are to:

Create earlier identification and intervention for domestic abuse through mobilising social and private landlords and key institutions involved in private ownership.

Reduce the number of people who are made homeless as a result of domestic abuse.

Increase tenancy sustainment options so that people experiencing domestic abuse can remain safely in their home when it is their choice to do so or do not lose their tenancy status if they relocate. This includes social housing landlords taking action to remove perpetrators from properties through enforcement and positive engagement activities.⁵²

DAHA Accreditation can function as a component within this model, providing early warning, prevention and rapid response to domestic abuse and the associated risk of homelessness. The Whole Housing Approach is a proposal for an integrated domestic abuse housing strategy, encompassing emergency accommodation, supported housing and general housing.

⁵¹ <https://www.dahalliance.org.uk/what-we-do/whole-housing-approach/what-is-the-whole-housing-approach/>

⁵² Source: DAHA, <https://www.dahalliance.org.uk/what-we-do/whole-housing-approach/>

3 Survivor Experiences

Introduction

Understanding the lived experience of people who had experienced domestic abuse and been supported by housing providers with DAHA Accreditation was an important component of the research. Participation was entirely anonymous, with requests for interview being disseminated through the support and cooperation of DAHA Accredited housing providers (Gentoo and Guinness). A semi-structured interview approach was used, allowing the women⁵³ to shape the discussion, prioritising the issues and experiences that were important to them, rather than being expected to follow and respond to a predetermined set of questions from an interviewer.⁵⁴ The women were also told that they should not feel that they had to answer any questions that they might not wish to respond to, nor talk about subjects that made them uncomfortable.

The research coincided with the global pandemic, which meant the originally planned face-to-face interviews with women with lived experience of domestic abuse were often not possible, so that a mix of telephone, smartphone apps and teleconferencing software had to be used. The logistics of arranging interviews proved challenging, not least because the research team were reliant on support from housing providers that were in the midst of trying to manage the consequences of COVID-19, minimising risks for their tenants, protecting their staff and putting systems in place should a high proportion of their staff become ill and unable to work.

While remotely conducted interviews did prove feasible and provide a means by which to understand how women had experienced housing provider systems that had been modified by DAHA Accreditation, some of the usual tools available to a qualitative interviewer, particularly building a connection through face-to-face interaction, were not available. It is important to note that while these interviews were with women who had experience of DAHA Accredited systems, they did not necessarily have any direct awareness of DAHA or what those systems were supposed to do. Alongside this, DAHA Accreditation was not introduced into a vacuum, the housing providers had domestic abuse protocols and practices in place, which they chose to augment through Accreditation, so the experiences described here should not be read as something that should be compared against a total absence of services and systems prior to Accreditation being achieved.

The requirements needed to achieve DAHA Accreditation, including training, attendance at DAHA workshops and subsequent assessments, meant that there should have been both an increased understanding and awareness of the needs of survivors and enhanced services in place. A series of qualitative in-depth interviews and a focus group with survivors of abuse and abuse were conducted. All the participants were women and they lived or had lived in housing provided by the case study housing providers with DAHA Accreditation, Gentoo and Guinness. These interviews and the focus group discussed the experience of survivors who had been supported when they experienced domestic abuse, exploring how they accessed support, the types of support received and the impacts of that support.⁵⁵

53 All the participants who agreed to an interview were women.

54 Interviews with women were all carried out by Dr Joanne Bretherton

55 All quotes in this chapter are verbatim from survivors of violence abuse from both Guinness Partnership and Gentoo housing providers. No source information is given in order to retain anonymity.

Accessing Support

Experiences in accessing support varied. Sometimes a referral came from the Police or an external domestic abuse service, in other instances services were triggered by staff working for the housing provider or were the result of a woman seeking help for herself.

Responses were usually described as fast and as effective by the women, both in the sense of how quickly the housing provider got in touch and then how quickly a response was delivered.

It didn't take very long. Literally, it was like probably - from getting that [referral] put into the higher rank to get a house, I would probably say about four weeks [interviewed 2021].

So it was, it was within that same week; that was the Monday, I think it was within that same week obviously [interviewed 2019/20].

They've been really helpful, actually. They've done target hardening and stuff to get different locks and stuff in the house, supported me with locks and lock changes and getting stuff for me so that it's - getting my stuff back [interviewed 2021].

It wasn't long at all; it was within the next few days [interviewed 2019/20].

It was pretty [much] more or less straightaway, Somebody said, 'Someone will be in touch with you,' and then she rang and just from then on I've just had her whenever, really [interviewed 2021].

Awareness that a housing provider might have a role in protecting someone experiencing or at risk of abuse varied. There was not always clear knowledge about the nature and extent of support that could be made available. For example, knowledge that a home could be made secure so that someone could remain living there in a way that was safe from a perpetrator/offender, which also included protocols around the management of perpetrators, or that a housing provider could and would rapidly move someone at risk of domestic abuse, was not universal. For some women, the scale and quality of the support they received from their housing provider came as something of a surprise and they were impressed with the quality of the assistance they received.

[housing provider worker] offered us a few different services. I just speak to [sw], because [sw] said, 'You do this, this and this,' and she give us quite a few options but I said, 'I'm getting everything I need from you.' I pick up the phone and contact her anytime, within her working hours. If I ring her after working hours, she'll contact us back the next day and everything in regards to when [ex-partner] was in court and everything. If it wasn't for [sw] to keep us updated, I don't think I would have heard anything. She was liaising with the court and she found out more information than what anybody actually told us [interviewed 2021].

I really didn't know where it all come from, it was just all of a sudden I had so much support, and I don't even know really in fact like what happened, but I think it initially was kind of prompted by the Police... the Police come, took a statement, and then I got a phone call from [housing provider] and they kind of basically, I don't know, kinda said they were gonna give me support, and I broke down on the phone speaking to them, and it was kind of like "Right, we're sending someone out to talk to you." And that's where I met [housing provider worker]; and it just carried, went from there... Very quickly, it must have been within days [interviewed 2019/20].

Stigma and judgemental behaviour can be among the experiences of people who have lived experience of domestic abuse and can be a deterrent to seeking help. DAHA Accreditation is built around the idea that housing providers should provide an enabling environment where survivors know they will be listened to and believed and this was generally reported to be the case.

...[housing provider worker] were really good. They're very understanding and very nice to talk to [interviewed 2021].

Absolutely brilliant. There was, there was no judgement, nothing like that, it was just like basically what can we do for you?...she was really understanding, she wasn't judgemental and it was just like, it was like talking to a friend [interviewed 2019/20].

As already noted, there was often low awareness among the women interviewed about the range and nature of support that was available. When the services were reached, the experience was often positive, as is described below, but women were often not aware

I just thought it was just you pay your rent and that's it [interviewed 2021].

I wasn't even aware that [housing provider] had a service on like that, it was, obviously Social Services did become involved and it was through them, they had mentioned it. So obviously I, I didn't know that, I, I didn't even know that I could get moved, I thought I was stuck with that house [interviewed 2019/20].

Before that point, because I wasn't aware of it, because it wasn't, it, it's not advertised enough to be honest, I don't think it is, because I genuinely wasn't aware of it [interviewed 2019/20].

... I genuinely didn't know it existed, I didn't, I think I literally thought [housing provider] was just a housing association and nothing else [interviewed in 2020].

This was a limitation in women's experience with DAHA Accredited housing providers. There were, both in 2020 and 2021, multiple reports from women who had been assisted by the domestic abuse services and systems that the housing providers had put in place, but having not been aware of those services prior to referral from an external agency or a housing provider employee. Ensuring capacity, based on knowledge and understanding of the help available, to self-refer in situations where domestic abuse is being experienced or where a risk of abuse exists, is vital in systems designed to have a preventative role. A review of requirements around information dissemination and publicity might be beneficial when considering the future shape of DAHA Accreditation protocols and training.

Experience of support

Support was generally reported as being flexible, tailored to the needs and situation of each woman who needed help. The main responses were to either make existing housing secure, in combination with steps around perpetrator/offender management or facilitating a move to a safe, alternative home. Workers attached to the two housing providers were able to act as case managers or service brokers, both providing a conduit between the woman who was experiencing or at risk of abuse and the housing management functions of the provider and helping her access and use other services she might use. The detail of the support provided could vary considerably, reflecting the goals of DAHA Accreditation to encourage housing providers to offer person-centred approaches in their service provision.

Trust in the staff who provided help was generally high. The women who had received support were complimentary about the range and quality of the support that was provided.

I cannot thank them enough, they're absolutely amazing. ...she'll just pop in to see how I am or she'll give us a text or a phone call and it's like just I haven't, she's just been a friend, she really has and, but she's been so helpful with anything she can help, and she's constantly asking me if there's anything she can do [interviewed 2019/20].

Well, I don't think I could have been getting through the last year without them. ... I just feel like - I don't know - when these things happen you feel so alone. Then when you realise what's actually out there - and there's so many more things out there for people to be speaking to and accessing - but just to have the small things that I have in my life at that time has been brilliant [interviewed 2021].

Absolutely everything. ...like from my own mental state all the way through to obviously to; just basically making me feel safe, I mean from the get go they were kinda like, you know, we can, we can input more locks on your doors, we can put cameras outside. They then liaised with the Police who then put like a red marker on my name so if I ever rang they would automatically kinda send somebody out; it was just everything, everything [interviewed 2019/20].

They [housing provider worker] they have been, they have been very great, helpful with me, yes [interviewed 2021].

Assistance in dealing with the Police and Criminal Justice System was valued by the women receiving support from the two housing providers. The support offered by housing providers was sometimes compared favourably with Police responses that could seem erratic and unreliable from the point of view of some of the women. This was in a context where Police and Criminal Justice System responses to domestic abuse and sexual abuse are currently subject to widespread criticism.⁵⁶ Conversely, some respondents thought that the presence of the services encouraged and enabled by DAHA Accreditation could also be a catalyst for getting the Police involved.

...[housing provider worker has] also been in touch with the Police quite a few times cos I haven't been getting, like obviously they haven't been keeping in touch and giving me any information in regards of like bail hearings and things like that; so [support worker has] been chasing them up in regard of that as well [interviewed 2019/20].

Yes, [the availability of domestic abuse services from the housing provider] it's not like 'out there' type of thing but it's just like if something happens then they'll step in but some people - I know a lot of girls in houses very similar to me but they're scared to contact the police. They're scared to be that person who has to put a statement in, where I think if they knew the help was there from [housing provider], that might actually help them get to that point because loads of people in this situation feels like they're alone, if you know what I mean [interviewed 2021].

I mean supporting me up at the Court and everything, she [housing provider worker] was on the phone all the time and she was on her phone after and she came to see us straight after, and on the day of him getting, getting his sentencing [interviewed 2019/20].

At one point [housing provider worker] had said she'd even come with me to do a statement [interviewed 2019/20].

The situations of the women and their experiences of abuse had resulted in isolation or feelings of isolation. Many of the women who were interviewed reported that simply having someone there to talk to was the greatest form of support they had received.

It was the support, the support like, she's so lovely and so caring, that was the best thing to me. Yes, she did, it was brilliant getting the camera up and all the, the physical stuff but honestly like the emotional support that she give us was the, the best thing... [interviewed 2019/20].

I just speak to [housing provider worker] every week. We just have a little catchup and it's just nice because you can offload stuff to [housing provider worker] which I can't sometimes - which I don't want to speak to me mam about! [interviewed 2021].

Housing providers could also act as a case manager or service broker, bringing in other types of help around domestic abuse from external service providers. For example, one woman described how accessing specialist domestic abuse services, via her housing provider, had made a great difference to her life.

It's the constant support that...like I say, I can message in the middle of the night and, boom, she's there; and it was [housing provider] that first put me in touch with [specialist domestic violence service] [interviewed in 2021].

Outcomes

The most often reported outcome was a sense of safety, which was the ultimate goal of DAHA Accreditation and interventions to prevent and stop domestic abuse and the associated risk of homelessness. An emotional and psychological as well as physical sense of safety was reported by women with lived experience of domestic abuse.

...I definitely feel a hundred percent after the move... but I did feel safer, not a hundred percent safer, I felt safer after speaking to them [housing provider worker], because I knew...who I could go to... [interviewed 2019/20].

Interviewer: So overall, what difference do you think it's made, this help from [housing provider worker] to you?

Respondent: It's made me feel a lot safer where I am, to be honest with you [interviewed 2021].

if she's [housing provider worker] not gonna be at work for like a couple of days she will text me and say, look, there's an additional number there for you to phone if you need to get in touch with anyone while I'm off for this period of time. So they've always made sure there's somebody else there as support in place if they're not at work. So it's been brilliant, to be honest [interviewed 2019/20].

Women who had received support from their housing provider also reported an increased sense of self confidence. Support had boosted some women's confidence levels as a result of the change to their circumstances that had been brought about. This sense of increased confidence was sometimes linked to the positive relationship the survivor had with their housing provider worker.

...it was just more obviously after a lot of years of self-doubt being put on me by the ex-husband I feel a lot more comfortable and confident in me own skin kinda thing now and that's been due to the support obviously from [housing provider worker] [interviewed 2019/20].

I was scared of me own shadow, now...mainly through speaking with her, she made us, in all honesty she made me realise that it wasn't my fault the things that had happened...So I'm a lot more, I'm a lot more confident and I'm a lot more confident in me, in me own decisions now... [interviewed 2019/20].

A greater sense of self confidence was reported, such as having the self-assurance to take and pass driving test, or feeling more comfortable with taking decisions and organising life in general. This was explained in terms of 'moving on' from experiencing the loss of control associated with domestic abuse.

Interviewer: So did you feel like you had enough choice and control over what was going on?

Respondent: Yes, because I took control basically! [interviewed 2021].

There was also a sense from the interviews that some women thought the housing provider workers were going above and beyond what might reasonably be expected. This was part of a wider picture of being listened to, respected and quickly answered when seeking help.

Any time I need her [housing provider worker] I ring, she answers the phone, there's never a day I've rang her when I've been stressed and when things have been kicking-off, cos it's been quite heated lately, the phone calls there, she picks up, and if she misses us she'll ring us straight back [interviewed 2021].

Oh a massive, massive impact. I look forward to her visits, because she's such a nice lady and that; and like at first obviously we used to talk about, you know, talk about things that's gone on, but now I just look forward to her company, if that makes sense? [interviewed 2019/20].

Another positive finding was around the speed and quality of the response from housing providers when rehousing was required. Some of the women were impressed not only with the speed with which alternative housing offers were made, but also with the quality of the homes that were offered.

[Housing provider] give me priority banding. So it was, I was in band one; so it was a case I had to bid for a property; so I would put in to say like I was like every day and then they would contact, they contacted us pretty straightaway, I got a viewing and I accepted it and got it really, really quick [interviewed 2021].

Not all the outcomes were immediately positive and it was not always the case that when the physical threat was removed that women were able to resume normal lives or that their health and wellbeing simply returned to normal. One issue here was that the threat of domestic abuse was still occurring and solutions were being sought at the point a few of the women were interviewed.

Another was that while domestic abuse was prevented, stopped and resolved by DAHA Accredited housing providers, who had also in some instances prevented homelessness, the services could not be expected to provide a permanent solution, a perpetrator/offender could reappear after time and create another dangerous or risky situation that had to be managed. Women had also been through traumatic and terrifying experiences and could not necessarily, even with support being in place, simply 'reset' themselves, building a sense of psychological and emotional security and restoring self-esteem could take time, even if a woman had moved into a physically secure situation.

I'd be lying if I said yes, cos I don't. Noises, I mean blinds have to be closed, come evening time, you know, the front gate and the side gate; front gate's got to be shut, side gate's got to be shut. It's just any little noise I'm there. It's, and it's daft cos I don't, they don't know where I am and I know I'm more than protected and there's not just me here on my own, and again now that's different. It's, it's hard to explain [interviewed 2021].

No, and I don't have like, there's no like community safeguarding...so if you're trapped in your house you're trapped in your house and it just affects your mental health ten times more, especially when you're not opening curtains and; it's just a lot [interviewed 2021].

Moves into new homes could also mean confronting challenging situations when a woman had lost all her possessions and sometimes the possessions of the dependent child or children who was with her. Provisions to assist people with securing furniture, white goods and other household necessities when they need to replace them within the welfare system have become increasingly restrictive.

A system of Community Care Grants, which provided enough money to set up or re-establish a home with basic furniture and white goods (fridge/freezer, cooker, washing machine) became Crisis Loans, which were both less generous and had to be repaid (including when someone was reliant on benefit) and were replaced by a still less generous system of Budgeting Loans. Help in securing new furniture was not always immediate and there were issues with moving existing furniture into new homes in a few instances.

But it would have been nice if they, even just, oh do you need any white goods? You've left some stuff behind that; I couldn't, I didn't even feel safe going back to the property; and they did say "Look, we are willing to just let you leave everything there so you don't have to go back." That was great...but there wasn't any call to say is there anything you need?... Funds were really tight, but I made it work [interviewed 2019/20].

In a few instances domestic abuse had restarted or not been resolved and the situation was ongoing at the time of the interview. In these cases the outcomes were not yet clear as while help was being provided, a settled and safe solution for the women concerned had not yet been arrived at.

Yeah, I'm in the same situation again...me ex partner's been giving us hassle and he's found out where I live, so I've got to move again [interviewed 2021].

The benefits of DAHA Accreditation are not negated by continuing experiences of domestic abuse, shortfalls in services and by issues around repeat offending by perpetrators. However, it is important to bear in mind, linking to DAHA's work in relation to the Whole Housing Approach⁵⁷ (see Section 2 and Section 5), that in order for domestic abuse to be resolved it is often necessary for several agencies, not just a housing provider to coordinate effectively. Alongside the importance of effective working with the Police and Criminal Justice System, good relationships and strong working relationships with externally provided domestic abuse services, mental health, social care and NHS services is vital.

⁵⁷ <https://www.dahalliance.org.uk/what-we-do/whole-housing-approach/what-is-the-whole-housing-approach/>

The strengths of DAHA Accreditation rest in part on the quality of these connections and working relationships that are in place, but they also place potential limits on the effectiveness of DAHA Accreditation. Partnerships with other services, ranging from the Criminal Justice System to mental health, health and specialist domestic violence and abuse services are all necessary if DAHA Accreditation is going to be able to provide support, prevention and sustainable housing solutions for people at risk of domestic abuse.

London

A broad comparison between London and another area of England was possible because one of the housing providers was active in the Capital. There is some reason to expect different experiences among women at risk of domestic abuse and potential homelessness in London because of extreme pressures on affordable housing supply in general and social housing supply in particular. In essence, women who need to change their housing because of the risks arising from domestic abuse might not be able quickly to transfer from one settled home to another settled home, but will often have to stay in hotels and/or temporary accommodation before being rehoused. For larger households, for example if someone escaping domestic abuse had two or three children with them, the wait might be longer because larger, affordable and adequate housing is in particularly short supply. By one estimate, 8.3% of households in London were overcrowded in 2020, compared to 5.5% in 2000, primarily because of an increase in overcrowding among social renting households.⁵⁸

There were a few examples of women who were using DAHA Accredited services in London who had experienced stays in temporary accommodation because there had not been another settled home available to move them into. In one instance someone was still staying in temporary accommodation, but another woman had been moved into settled housing after a relatively short stay in temporary accommodation.

...but since they can't find a house quicker...I've been in the hostel, they moved me in the hostel and now they've found me house, a flat for me now, yeah [interviewed in 2021].

Generally however, the experiences of each woman using DAHA Accredited services was unique, their trajectories had little in common in terms of their specific circumstances and needs. Both the interviews conducted in London and those conducted elsewhere recorded a diverse set of experiences.

58 https://www.london.gov.uk/sites/default/files/housing_in_london_2020.pdf

4 Housing Providers

Introduction

Alongside the interviews among people with lived experience, multiple interviews were conducted with housing providers exploring the process of Accreditation, were operating Accredited services and who were going through the process of re-Accreditation. These interviews were focused on the two main partners in the research Gentoo and the Guinness Trust, the same housing providers providing housing and DAHA Accredited support services to the women whose interviews are reported in Section 3 of this report.

Staff at senior leader level, those working in frontline housing management and support workers with a role in providing direct assistance to people at risk of domestic abuse were interviewed.

This section discusses the reasons behind obtaining Accreditation, the experience of the process of achieving accreditation, the types of support being offered to residents and finally, the overall organisational impact of having achieved DAHA Accreditation.

Views of DAHA Accreditation

DAHA Accreditation was generally seen by the housing providers as providing a clear set of goals and guidance around how to respond to domestic abuse, backed by training and expert support.

...I think that's an attraction for organisations who want to do something but just are not quite sure at the minute how to do it...it really does drill down and help organisations focus on, as a housing provider, what they can do, what you can really impact on... [Gentoo staff member, interviewed 2019/20].

Over time, DAHA Accreditation was seen as having created a greater sense of consistency and process in how domestic abuse was handled by the housing providers. Staff talked about having a clearer sense of how to respond and a better picture of what the process should be when an issue arose. Staff also spoke about the process of Accreditation and subsequent implementation of the approach making them and their organisations think critically about whether their existing systems for handling domestic abuse were fit for purpose.

But I think what it really does for you, the Accreditation, is it really makes you drill down, really makes you open your eyes about what, what you think you might have...So I would say it's a really good...thing to go through because it really makes you look at every last thing you've got involved in domestic abuse and whether it's fit for purpose and whether you might need to do something else with it, you know, or whether you might need to do a little bit more in certain parts of the policies and procedures certainly [Gentoo staff member, interviewed 2021].

...my approach to a domestic abuse case is way more thorough than it would have been say a few years ago; and maybe that's because I'm doing this all the time now... Ultimately it's not that I didn't get it two years ago, but I get the process, I understand the process a lot more, and what we need to be seen to be doing. So, you know, like I say, safety plans; whether I would have done a thorough safety plan at the time but because of the [DAHA Accreditation] training there is always a safety plan on my case, and if there isn't it's because I've had confirmation from an IDVA to say that they've done it [Guinness staff member, interviewed 2021].

what we might have found a couple of years ago is that, I don't know, repairs departments may have not necessarily thought "this is urgent"; but now because everybody is aware of it, the second that you mention this is domestic abuse, target-hardening's prioritised, security measures and if there's an issue then it's escalated quicker because of the nature of it [Guinness staff member, interviewed 2021].

When the first experiments with what became DAHA Accreditation were conducted by Peabody, a large housing provider in London, in 2008, reporting of domestic abuse spiked, with much higher levels being detected. Changes to training, updated policies and procedures resulted in a 1,425% increase in reports between 2008-2016, the equivalent of 25% of the caseload of the Peabody Community Safety Team.⁵⁹ This experience of increased reporting of domestic abuse was also reported by staff in Gentoo and Guinness.

We're finding that a lot more people are reporting domestic abuse to us when they haven't reported it to any other agencies and I don't know what that, what, what that's about; I think some of them are reticent to go to the Police, obviously, some of them are very reticent to report anything in case it has an impact on their children and that sort of thing, but we seem to get quite a lot of people who will open up to us about it. We have other methods as well of finding out how, if someone is involved in that domestic abuse; so we look at repairs that have been reported... [Gentoo staff member, interviewed 2021].

...since August 2020 we've re-housed forty-six management moves due to domestic violence, with a further sixteen on the list due to move who are all under offer at the moment. And we've got, let me just double check how many outstanding ones that we've got now... it's fifty-five that we've got left that we're working through currently to get transferred [Guinness staff member, referring to national figures for Guinness Trust, interviewed 2021].

Greater consistency in processes and procedures, gains in the efficiency and effectiveness with which domestic abuse was responded to and increases in reporting of domestic abuse were reported. However, rather than creating more work or costs for the housing providers, DAHA Accreditation was broadly seen as being advantageous, because it reduced risks to rent revenue and housing management costs (see Section 5).

The advantages of better and more effective management of domestic abuse, with better outcomes for people at risk of abuse in terms of their health, wellbeing and reducing their risk of homelessness were also discussed alongside what DAHA Accreditation was seen as providing in terms of supporting more efficient housing management. Reduced nuisance, rent arrears and other time consuming and expensive results from domestic abuse not being more effectively prevented and stopped were seen as having an operational, as well as a human, dividend.

...our lifeblood is our rental income stream. So if we've got... housing officers, who are constantly distracted with complex cases, their rent, their income streams will start to decline... So if I can protect that role to maximise the group's income by providing them with the support they need it all helps with your core KPIs [key performance indicators] as well [Gentoo staff member, interviewed 2019/20].

59 Burnet, G. (2017) *Winston Churchill Fellowship – Domestic Abuse and Housing: International Practice and Perspectives* https://www.wcmt.org.uk/sites/default/files/report-documents/Burnet%20G%20Report%202016%20Final_1.pdf

A sense of shared and collective responsibility towards people at risk of domestic abuse was also reported among the staff in the housing providers. This was expressed in terms of the housing provider having a duty towards any of its tenants who experienced domestic abuse in their homes.

...we can either walk away from these people and these situations knowing that there's nowhere else for them to go, mind, or we can do something about it, and we choose to do something about it [Gentoo staff member, interviewed 2021].

[with] Accreditation you know what really victims might need now if you didn't before...and I think domestic abuse for some organisations is still a bit like that...it's a bit more about knowing what you should be doing, knowing what you can do, knowing where your resources are, knowing who's involved in domestic abuse in, in your organisation and who your leads are and who you can go to for help [Gentoo staff member, interviewed 2021].

To be honest, it, it was a bit, if I can use the word, a bit of a culture shock, because whilst I felt like I was doing a good job it made me realise that there was just so much more that needed to be learnt, there [Guinness staff member, interviewed 2019/20].

Staff members stressed the need for organisational buy-in at all levels. There was a view that DAHA Accreditation had yielded dividends in improved services, improved outcomes and benefits for the housing providers themselves because it had been a whole organisation change, rather than a tokenistic or limited effort.

You've got to have a leader, you've got to have somebody who's very senior, ideally in an executive leadership position, who understands it [DAHA Accreditation], who gets it, who's, well who is their champion, yeah, they've got to sponsor it, cos I just think if you've got people at the top who really don't get it and pay lip service to it, it's not gonna happen [Gentoo staff member, interviewed 2019/20].

Gentoo had been through a process of reaccreditation and was able to compare how that had been compared to the first exercise. As systems were in place, it was described as less daunting than the first experience of achieving DAHA Accreditation, but there was still a sense that this was not a trivial exercise.

That was easier than the first because there was, was lots of things already in place that we could, you know, we had, and we knew what they would be looking for the second time; so when they were talking about evidence from the last time I mean we, we, we had files of stuff, you know, from the first time we went in...I really didn't assume anything, I really thought, you know, this is, this is; and I found it hard, the whole process, and, and it was quite daunting.

The second time it was a little bit easier because it doesn't last quite as long but there was still that, like I say, they was making sure everything was there, making sure that anything extra that we hadn't included in the first time that we evolved since, that we had that in. So it wasn't as hard the second time, definitely not, but it was still quite a daunting process to go through [Gentoo staff member, interviewed 2021].

While some members of staff found the process of Accreditation to be quite challenging, support through the process of Accreditation was generally described as good and the training and materials as clear and accessible. There were no criticisms of the training, materials or support from staff from Gentoo and Guinness. Staff valued the experience of working with the DAHA team and viewed the process of DAHA Accreditation in a positive way.

Delivering DAHA Accredited Support

The emphasis on non-judgemental, flexible, person-centred approaches to support in DAHA Accreditation was reflected in how the staff working for Gentoo and Guinness described the domestic abuse services they were offering. Support was tailored to individual needs and staff reported that a key lesson from the DAHA Accreditation process had been that a policy of flexibility was at the core of an effective means to prevent and end domestic abuse.

In practice, two main options were available. The first option was along the lines of a sanctuary scheme (increasingly known as ‘target hardening’), which made someone physically secure in their existing home, working in combination with measures to manage risks from perpetrators that were still present in the area. The second option was to move rapidly away to a new home. The detail of someone’s needs was a different matter, with responses often being tailored to what someone specifically needed to remove the risk of abuse.

Sometimes the differences would be around the nature of household, there being different challenges if a woman (domestic abuse typically involves a woman, though men also experience abuse at lower rates) was on her own, compared to if she was with one or more dependent children. Needs might also vary according to the experience of abuse that someone had undergone, the nature of any violence, the controls to which they be subject to and the ways in which they had processed it. Some people might be facing issues like post-traumatic stress disorder, be dealing with addiction or mental illness or a set of high and complex support needs as a result of their abuse, while others might have more practical needs. The experience of abuse was not standardised, nor was the reaction of the people who experienced it and thus services were seen as needing to have the flexibility, willingness to listen and person-centred approach that DAHA Accreditation emphasised.

Every person’s very different; so, you know... So support can change drastically from what they originally set out to achieve, which could be immediate safeguarding, and then as things move on it could be that we’ve got to address other things... So our support completely changes, it evolves with the person as we go really [Gentoo staff member, interviewed 2019/20].

...the biggest thing I think I learned from the evaluation the first time and second time is to really listen to survivors and, and, and listen to what they want, listen to what they think; and they’ve been through... We do work now much more about a needs-based approach; so what we think might be the best thing isn’t always what they want to deal with [first]; so we’re much more flexible now; and I think that’s the biggest thing that we’ve learned [Gentoo staff member, interviewed 2021].

...every case is different. So you, so, like I mentioned before, you would, on some cases you would just do the target-hardening, so make the property secure because they’ve already split up from their ex-partner, their ex partner’s well away from the property so that, that’s enough. But then you, you have other, other customers [tenants] who their case is not more serious but it’s, you know, a bit more in-depth, and you might look to move them altogether from the property... [Guinness staff member, interviewed 2021].

I think because we treat them like that and there’s no judgements from us, as well, and that’s something that is a comment that we get all the time. None of us judge any customers. I think that comes across with the way that we speak with people. I think it’s a completely different role compared to every other agency, as well. I think that’s an absolute benefit from our point of view. I think, yes, there’s lots of reasons why having the accreditation, having the expertise, it benefits our customers and staff. They come to us, like I said, with queries. You’re problem-solving all the time, aren’t you? You’re crisis working. It’s supporting each customer for their individual needs [Gentoo staff member, interviewed 2021].

The importance of comprehensive support, which could sometimes best be provided through the services offered by the housing provider itself, but also often needed to involve support from other agencies, ranging from the Police and Criminal Justice System, through to specialist domestic abuse services, mental health, social care and NHS services. DAHA Accreditation was broadly associated with the housing providers making a more comprehensive support offer than had hitherto been in place. As was noted in Section 3, DAHA Accreditation had been introduced by two housing providers that already had procedures in place in relation to domestic abuse, it was not introduced into a vacuum in which no support had been available, but Accreditation was generally seen by staff as increasing the range and quality of support on offer.

The housing providers were able to offer immediate safeguarding, help with criminal proceedings, Police liaison, financial help and mental health support, alongside sanctuary/target hardening and help with moving when necessary.

...we don't just look at the immediate safeguarding; it could be, you know, the family, it's, you know, financial...housing, it's everything, so, because obviously domestic abuse doesn't just affect one particular area, 35 it affects everything, so we look at all of that [Gentoo staff member, interviewed 2019/20].

...we work with the safeguarding units, we attend multiagency meetings, we, you know, we'll even handhold; in some circumstances if some people are scared to report it to the Police and it really needs to be reported to the Police we would even agree to sit with them at the Police station and hold their hand just to support them...it's making sure that they understand that if they're experiencing domestic abuse or they have safeguarding issues that they can just pick up that phone and they can talk to us and that we can get somebody to work closely with them to get it resolved for them and get, you know, make sure that they're safe at all times and, and get the support in place that they need [Guinness staff member, interviewed 2019/20].

The financial consequences of abuse were a frequent issue for the support teams working for the two housing providers. Loss of control over their own and household finances could leave people who had experienced domestic abuse without any funds and sometimes saddled with serious debt that they had no role in accumulating. The housing providers had both developed hardship funds as part of the services offered in relation to domestic abuse.

...it's very, very rare that there won't be some form of issue with money...there's normally some form of issue, whether it be directly with us, but we would look at all of it [Gentoo staff member, interviewed 2019/20].

DAHA Accreditation offers an array of training for housing providers. The training needs of staff across all the services which a housing provider delivers are considered. One of the most innovative aspects being the training of repairs and maintenance teams to spot the signs where something may not be quite right in someone's home. This includes damage without an apparent explanation and odd or strange behaviour by someone in the household when a repair is being carried out. The capacity to recognise and refer potential domestic abuse was seen in positive terms.

...on their handheld, it's dead easy for them, they, all, all they have to do is there's a something not quite right box, ping that off, it comes to an email group...they will determine who's gonna lead it; if it's a safeguarding concern [we] will identify the partner agencies, whether the case is known to, up to them or not, and if it's not we'll decide how sensitive it is to take this forward, depending on what this person has seen or observed...So we make it dead easy for the repair staff, they've just got to tick something on there [Gentoo staff member, interviewed]

There were sometimes challenges in providing support. Services were not always in place, there could be waits in temporary accommodation for some people needing to move home and issues with moving people between local authority areas, especially if there were a need to change the housing provider in the process.

In common with the women who had made use of DAHA Accredited services, there was a sense that information about services could be improved. People who were experiencing or at risk of domestic abuse were thought to not always be aware that help was on offer.

I speak to these people all the time, but you, you've got to be pretty brave, haven't you, to ring up your housing association and say, look, I'm suffering from domestic violence, can you help me? Because I think if I didn't work within Guinness or within housing I wouldn't know...[Guinness staff member, interviewed 2021].

Again, it was evident that staff were sometimes supporting people whose experience of abuse was associated with high and complex needs. Prevention and reduction of domestic abuse meant it was often necessary for several agencies, not just a housing provider to coordinate effectively. Effective working with the Police and Criminal Justice System, good relationships and strong working relationships with externally provided domestic abuse services, mental health, social care and NHS services was vital. The services offered by housing providers were extensive, but while cooperation and coordination with other services could be a source of strength, difficulties could arise if those other services were not present, under-resourced or unwilling to collaborate.

...we have a lot of complex people as well so whilst we've got domestic abuse there's a lot of, of the time where mental health's involved, alcohol and drug misuse, that sort of thing; so we often find that we're dealing with very complex people anyway. So we also have a positive engagement team who look at people's mental health; and sometimes we can work in tandem with them so if a domestic abuse victim might need some extra help we can do that, but the, the VSO, the victim support officer, will be their main support. Now we have couple of IDVAs [independent domestic violence advisors]⁶⁰ on the team as well who we're lucky to have.

Challenges could also arise when other agencies were not following the same approach to domestic abuse. Less emphasis on understanding and responding to domestic abuse along the lines advocated by DAHA Accreditation could make dialogue and effective collaboration difficult.

Sometimes it also opens your eyes as well a little bit as to what you are doing and how compared to other organisations, cos I think you just assume everyone else does the same thing, but then you sometimes realise that they don't; and I think that'll be good for those organisations that don't have many policies and procedures in place, or don't have a workforce that's sort of domestic abuse trained, because it does really make you think that well if that's a normal sort of thing why aren't we there and why aren't we at that point? [Gentoo staff member, interviewed 2021].

...we will work with other authorities to get them re-housed, and that is a real frustration, and I think it's a lack of training and understanding from other agencies, particularly councils. They, they have some really harsh policies, some of them...I am saying, look, this is, you know, we're classing this as urgent but they're saying, "well we...we don't work like you" [Guinness staff member, interviewed 2021].

60 See <https://safelives.org.uk/what-is-an-idva>

London

The interviews with two housing providers, one of which was operating in London, did not suggest there were constant differences between the Capital and elsewhere in England. Again, the most likely difference centred on the difficulties in securing suitable affordable housing when it was necessary for someone to change their housing because of the risk of domestic abuse. Here there was some evidence around the kinds of pressure that could exist within London, this was less about the housing provider, Guinness Trust, that was operating in London than it was about the experience of trying to work with other housing providers that were operating in a context in which affordable housing supply was under extreme pressure.

...we'll do a reciprocal agreement which is where we will give them one of our properties if they take on, you know, as in we'll re-house somebody off their list, I mean, if they take, re-house our survivor if we've not got stock in a certain area. And, and, you know, somebody rang me back from a housing department from that council and said, you know "We've got, we've got three properties available and we've got fifteen thousand people on our waiting list." So, you know, and the words that they used to me were "I think your tenant's been spoilt by Guinness." And that really stuck with me, and I thought oh what an unusual way to think of it that you, they'd been "spoilt" because they, they were re-housed at the age of eighteen into their own flat, where in the North you don't really have that issue [Guinness staff member, interviewed 2021].

As with the wider point that DAHA Accreditation and the delivery of better prevention and better solutions to domestic abuse is reliant on effective partnerships, i.e. it instantly becomes more difficult to meet needs if one partner has no resources or will not put effort into collaboration, while engagement from the Police, Criminal Justice System, Mental Health, NHS, Social Care and domestic abuse services (as well as other housing providers) is often necessary. Experience like this in London illustrates how DAHA Accreditation will have its effectiveness reduced if the services it encourages and supports cannot operate properly because there are simply not enough housing options available.

An enhancement to housing services through DAHA Accreditation and through the wider Whole Housing Approach (see sections 2 and 5) is going to have more limited impact if those housing services are dealing with overwhelming demand relative to their resources.

Changes in ethos and culture

DAHA Accreditation was seen by many of the staff interviewed as heightening awareness of domestic abuse in an organisational sense, i.e. better and more coordinated systems, clear paths for referral and response when domestic abuse was known to have occurred or was suspected and an understanding of how to use them. There were also changes in organisational culture, reports of shifts in how individual staff members and the organisation thought and behaved in a wider sense.

I think for our organisation it's raised so much awareness...we're all made up of different departments; so, for example, we have a lettings department, we have a customer support team; and so the customer support team do a bit of work with domestic abuse, and the lettings department may have...domestic abuse coming in and we may have management leads where there's, you know, we're asking them to work with us so they're getting involved. Our customer accounts team will get involved if there's financial abuse, they may pick that up. So we've got our repairs officers out there and they're in the properties so they can see it and they can hear it. Everyone from our customer liaison officers...to surveyors, we've got our own care services, so, you know, our care teams, everybody out there, it's that amazing awareness [Guinness staff member, interviewed 2019/20].

...there's more awareness of it across the business in different departments and that's because the DAHA Accreditation has been promoted; sort of internally there's been lots and lots of articles and all sort of staff communications, so yeah, and, and I know that speaking from our company, and that's not that I'm trying to give us, you know, "oh we're fantastic", but ultimately the sense that I get from dealing with other agencies that aren't on this accredited list don't even know what DAHA is there...seems to be a much slower response...[Guinness staff member, interviewed 2021].

I think it has, yes, I do think it has encapsulated it. I think we're much more aware now of what a good organisation will look like because we've got the, those eight parts of the Accreditation and we've been through it twice. So we can, we can sort of measure ourselves against that...[Gentoo staff member, interviewed 2021].

This increased awareness of domestic abuse across housing providers is a key finding, as systems that become embedded in the culture of an organisation, alongside changing formal systems, practice and recording are likely to have a more sustained and deeper impact. One example of this was seen in a series of reviews on ‘reasonable preference’ in Scottish social housing. Regulations designed to focus the activities of social landlords on the public good, emphasising letting to households in particularly difficult circumstances and experiencing high levels of housing exclusion, as well as homelessness, were found to have been part of a sustained change in culture in social landlords that had taken place over decades. This meant enforcing the regulations had become superfluous, the social landlords were doing what they should be doing on autopilot, the regulations, alongside their own similar ideas, had become part of their organisational culture.⁶¹ Achieving this kind of shift, where DAHA Accreditation ceases to be something that is an ‘external’ idea and standard, and – as in the example of these two housing providers – starts to become part of their organisational culture is a very positive sign.

61 Bretherton, J. and Pleace, N. (2011) *Reasonable Preference in Scottish Social Housing*, Edinburgh: Scottish Government

5 Financial dimensions and costs

Introduction

This chapter of the report explores the cost effectiveness of DAHA Accreditation. The first section summarises evidence on the financial costs of domestic abuse to society, including damage to the economy and higher levels of public expenditure. The second section explains how it is possible to estimate and explore cost effectiveness. The second section, drawing on case studies produced by DAHA, summarises the ways in which Accreditation can reduce costs when used within the Whole Housing Approach. The third section uses some illustrative examples to examine the ways in which DAHA Accreditation can act as a cost effective approach to reducing domestic abuse.

The costs of domestic abuse

Overall human, social and economic costs

The human cost of domestic abuse, the psychological, physical, emotional harm, trauma and murder, is the 'cost' that as a society the UK should be most concerned with. The crime survey covering England and Wales over the period 2018/19 was used to estimate

that 5.7% of adults, some 2.4 million people, had experienced domestic abuse in the last year.⁶² In the year to March 2020, an estimated 2.3 million adults aged 16 to 74 years experienced domestic abuse in England and Wales, of whom 1.6 million were women (70%). Some changes in reporting have occurred, but increases in the rates of reported domestic abuse recorded by Police over most of England and Wales (758,941 domestic abuse related crimes) occurred in the year to March 2020.⁶³ According to some estimates, one in three women aged 16-59 will experience abuse in their lifetime and, on average, two women a week are killed by a current or former partner in England and Wales⁶⁴.

Domestic abuse has three main sets of financial costs to society:

- Costs to the economy, i.e. lost productivity and reduced economic activity because of domestic abuse.
- Costs to the public sector, by increasing the need for public and nongovernmental organisation (NGO) services supported by public spending, including refuges and other domestic violence services⁶⁵, the NHS, criminal justice system, the welfare/benefits system and the homelessness system and services.
- Loss of taxation revenue from the economic costs and a need for greater public expenditure because of the increased need for services that are provided directly, commissioned and/or supported by central (Westminster), national (Scottish and Welsh Governments and Northern Ireland Assembly) and local authorities.
- Higher expenditure in one area can also reduce the resources available for other areas.

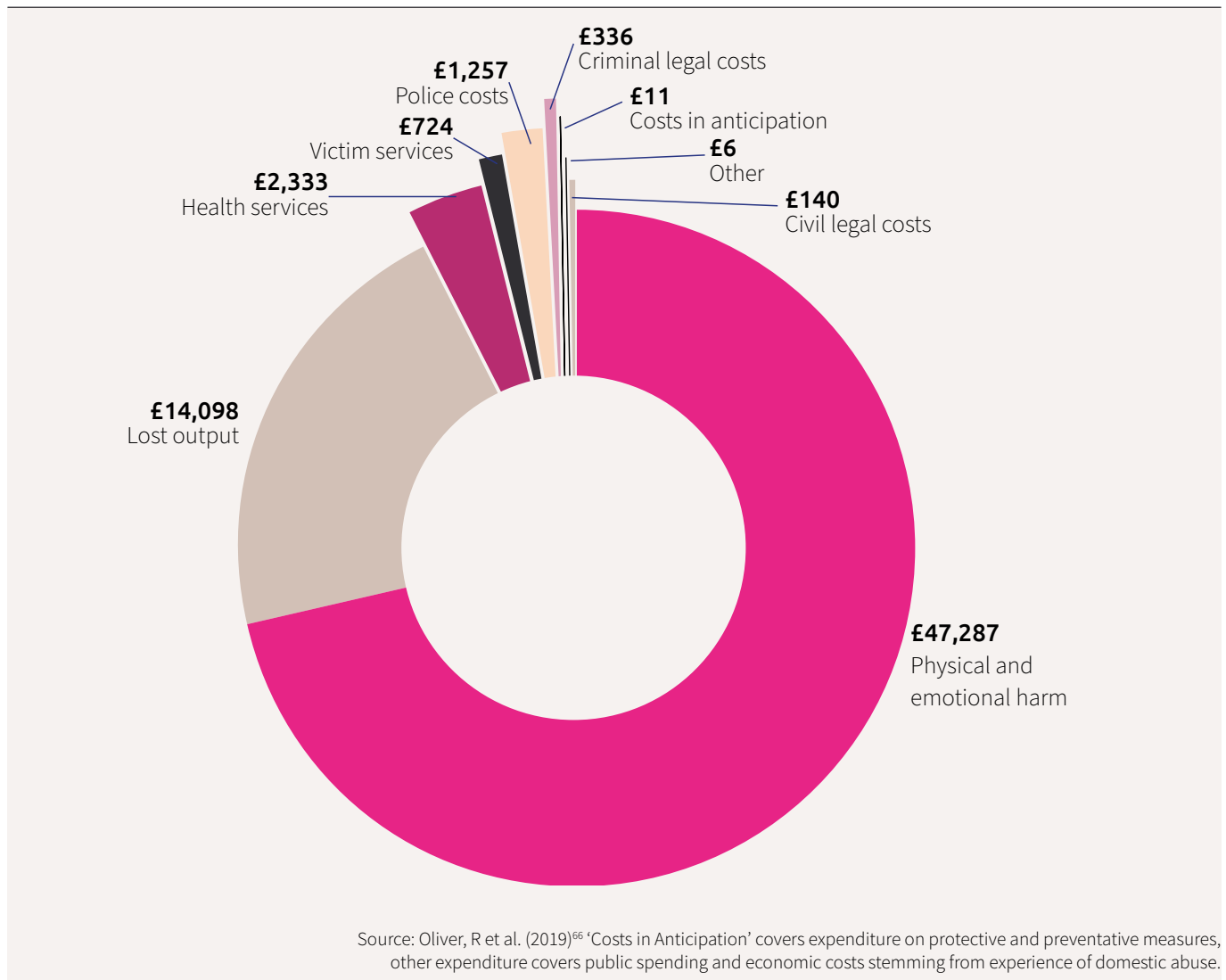
62 <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabuseprevalenceandtrendsendlandandwales/yearendingmarch2019>

63 www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwalesoverview/november2020

64 <https://www.refuge.org.uk/our-work/forms-of-violence-and-abuse/domestic-violence/domestic-violence-the-facts/>

65 Where commissioned and/or financially supported by local authorities and other public sector bodies.

Figure 1: Estimated Economic Cost of Domestic Abuse in England and Wales (£Millions) 2016/17



In 2019, research for the Home Office estimated that the economic and social costs of domestic abuse were some £66 billion in England and Wales for the financial year 2016/17 (see Figure 1). This included a financial cost being attached to the trauma experienced by people who were subject to domestic abuse, of some £47 billion, using approaches developed by Health Economics. The way this is calculated is by using some quite complex mathematics to place a financial value on the ways in which physical and emotional injuries can reduce health-related quality of life, also considering how long a woman (most frequently a woman) will take to fully recover (where recovery is possible).

This is an attempt to express the human costs in monetary terms, a (slightly unreliable) way of thinking about this is what a court might award a woman in 'damages', were the penalty for her experience of domestic abuse expressed in financial terms.

While the calculations used to express the human costs of domestic abuse in financial terms are rather abstract, i.e. they are estimations based on a set of assumptions about how to place a financial cost on trauma, other elements of the 2019 research are estimated on a different basis. For England and Wales:

- An estimated loss to the economy of £14 billion, because of lost productivity generated by domestic abuse (and corresponding losses in potential tax revenue).
- An estimated £2.3 billion in NHS expenditure.
- An estimated £1.3 billion in Police expenditure.
- An estimated £550 million in costs to social housing and homelessness services, including temporary accommodation use.
- An estimated £476 million in criminal and civil legal costs.⁶⁷

⁶⁶ Oliver, R. et al. (2019) *The economic and social costs of domestic abuse* London: The Home Office

⁶⁷ Oliver, R. et al. (2019) *The economic and social costs of domestic abuse* London: The Home Office

Breaking these figures down into a mean (average) cost per person who experienced domestic abuse, Oliver et al estimated an average cost of £34,015 per person, including all the elements shown in Figure 1 (in 2016/17).⁶⁸ Adjusting this cost for inflation, using

the Bank of England calculator⁶⁹, it was the equivalent of £36,594 in 2020 prices. Some earlier research, for example by Jarvinen et al in 2008⁷⁰ has reported similar estimates, with abuse against women (only) being estimated as costing some £20bn at 2006/7 prices (£28bn at 2020 prices). Some estimates of the financial costs of domestic abuse have been much lower, but have still reported very significant costs to the public purse and economy. Work supported by the Trust for London and Henry Smith Charity in 2009 reported an estimated £5.5bn in costs stemming from domestic abuse. Again, an element of this estimate (£1.6bn) was an attempt to express the emotional and physical harm of domestic abuse in financial terms. Total costs according to this estimate would be £7.21bn in 2020 prices, which was calculated on an estimated cost per local authority basis and covered England only.⁷¹

Using average costs from Oliver et al (2019), some of the most recent analysis available, 100 people would cost, on average, £3,659,400 (at 2020 prices) if they experienced domestic abuse. It is important to remember that this is a way of summarising the financial costs that would arise if someone experienced domestic abuse, but in reality, people experiencing domestic abuse (mainly women) would have financial costs that were often higher or lower than this average figure. Within this, the costs in terms of public expenditure and loss of productivity would be some 29%, i.e. £1,042,376 (see Figure 1). Oliver et al note:

While the £66 billion estimate of the costs of domestic abuse appear large, they are likely to be an underestimate...the physical harms are likely to be underestimated. The £66 billion estimate represents the most comprehensive estimate yet of the economic and social costs of domestic abuse. This report reinforces the need to tackle domestic abuse, ideally through preventative efforts that stop the abuse from happening in the first place. It also highlights how domestic abuse impacts on many sectors of society, suggesting that the response should be similarly wideranging.⁷²

68 Oliver, R. et al. (2019) *The economic and social costs of domestic abuse* London: The Home Office

69 <https://www.bankofengland.co.uk/monetary-policy/inflation/inflation-calculator>

70 Järvinen, J.; Kail, A. and Miller, I. (2008) *Hard knock life: Violence against women A guide for donors and funders* London: New Philanthropy Capital.

71 <https://www.trustforlondon.org.uk/news/domestic-violence-costs-55bn-year-england/> see also Walby, S. (2004) *The Cost of Domestic Violence* London: DTI.

72 Oliver, R. et al. (2019) *The economic and social costs of domestic abuse* London: The Home Office, p. 6.

Costs in London

Recorded levels of domestic abuse in London have increased in recent years. As has been noted elsewhere, this is thought to be related in part to improvements in recording, i.e. levels have not necessarily increased as quickly as the statistics might suggest, rather it is that actual levels of domestic abuse, including cases that were not recorded before, are now being recorded with more accuracy. During the twelve months ending in May 2017, 75,217 domestic abuse offences were recorded, rising to 94,645 in the twelve months ending April 2021.⁷³

Taking the average costs based on Oliver et al (2019):

- At 2016/17 prices, at an average of £34,015 per person experiencing domestic abuse, the total financial cost of the 75,217 reported cases in the year to May 2017 would have been some £2.55 billion.
- At 2020 prices, at an average of £36,594 per person experiencing domestic abuse, the 94,645 reported cases in the year to April 2021 would be some £3.4 billion.
- Estimated public expenditure and loss of economic productivity (i.e. not including the financial expression of the trauma and harm experienced) would have been some £741 million in the year to May 2017 (at 2016/17 prices) and some £1bn in the year to April 2021 (at 2020 prices).
- Based on the original Oliver et al (2019) estimate of £66bn, London alone would have accounted for the equivalent of 4% of all expenditure and costs associated with domestic abuse across England and Wales in 2016/17.

Some estimates have suggested that London's public expenditure on domestic abuse, the loss to its economy and the human cost for people experiencing domestic abuse is relatively higher. The 2010 estimate by Trust for London and the Henry Smith Charity suggests that London alone accounts for nearly 17% of the total financial costs of domestic abuse in England.⁷⁴ London is the only part of England and Wales that has the recommended level of 'beds' (actually usually individual rooms) in refuge services⁷⁵, according to ONS, suggesting a relatively high spend on domestic abuse services by London boroughs, compared to much of the rest of the UK.⁷⁶

Costs of domestic abuse to social landlords

The financial costs of domestic abuse for social landlords take four main forms:

- 1. Rent arrears linked to domestic abuse.** Rent arrears creates an operational problem for a social landlord because they are its main source of revenue, the money that keeps housing management running (allocations, community services, repairs and rent collection itself) and that the social landlord uses to pay off debts for the borrowing that funds the building of new homes. Lower rates of rent collection might make banks more reluctant to lend to housing associations (registered providers). A local authority with its own (council) housing stock may find it difficult to ensure maintenance and renovation goes ahead at the right pace if revenue from rents is not being collected.

73 Source: GLA/Mayor's Office <https://www.london.gov.uk/what-we-do/mayors-office-policing-and-crime-mopac/data-andstatistics/domestic-and-sexual-violence-dashboard>

74 <https://www.trustforlondon.org.uk/news/domestic-violence-costs-55bn-year-england/> see also Walby, S. (2004) *The Cost of Domestic Violence* London: DTI.

75 One family place per 10,000 population and one refuge or similar emergency shelter/supported housing service in every local administrative region (e.g. town, city or county council), based on Council of Europe endorsed recommendations in Kelly, L. and Dubois, L. (2008) *Combating violence against women: minimum standards for support services* Strasbourg: Council of Europe.

76 <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimservicesenglandandwales/november2020#domestic-abuse-victim-services-data>

2. Management of ‘nuisance’ and ‘anti-social behaviour’ linked to domestic abuse. One of the consequences of domestic abuse can be the response of neighbouring households, who can complain about nuisance and noise that result from someone living nearby experiencing domestic abuse. Some research⁷⁷ has suggested that women holding a social housing tenancy have in the past been evicted for ‘nuisance’ that was perpetrated not by them, but by an abusive former male partner, causing noise, damage or attempting to break into housing.

3. Physical damage to property linked to domestic abuse. This might be the result of attempts at forced entry by an ex-partner, damage caused during the course of abuse or attempts to commit extreme acts of violence, such as trying to set fire to a property.

4. Eviction from social housing linked to domestic abuse. has been used to address the housing management consequences of domestic abuse in the past, but social landlords have become much more conscious of the social drivers of eviction, i.e. they are reluctant to use it because of concerns about what may be causing issues like rent arrears and nuisance and social landlords also try to avoid eviction because it is expensive. For local authorities with a homelessness duty that are also landlords, eviction from social or council housing may result in expenditure on homelessness prevention and rehousing where a duty is owed under homelessness law.

Data collected by the Homes and Communities Agency (HCA) in 2015 reported an average (mean) headline social housing costs of £3,950 per unit under management (management and service charge costs, maintenance and major repairs costs) per year.⁷⁸

If a problem arises in relation to rent arrears, nuisance, property damage and/or eventual eviction, these costs can rise significantly. Taking the £3,950 per home figure, which is £4,478 in 2020 prices⁷⁹. On average, an additional £500 per housing unit (house, flat etc.) under management was reported for social housing located in highly deprived areas⁸⁰, raising the level for harder to manage homes (e.g. somewhat greater risks of rent arrears, nuisance etc.) to £4,450 in 2015 prices or £5,045 in adjusted for inflation in 2020.

Research with data from the social landlord Gentoo from 2015-2017 has estimated that 13% of all repairs are linked to domestic abuse. Gentoo has some 29,000 housing units in management. The average cost of repairs linked to domestic abuse was reported as £1,200 per household, compared to £860 for a typical household over the course of 2015-17. This meant that while the repair work linked to domestic abuse accounted for 13% of calls, it represented closer on 21% of costs.⁸¹

When housing management issues associated with domestic abuse escalate to a point where an eviction occurs, the costs can increase significantly. In 2010, Shelter estimated the cost to a local authority evicting someone from a council tenancy was typically⁸²:

- £1,119 in eviction costs
- £1,900 in rent arrears being written off
- £2,787 in costs for re-letting the property
- Around £5,806 in total, or the equivalent of £6,582 in 2020 prices.

77 Jones, A.; Pleace, N.; Quilgars, D. (2006) ‘Evaluating the Shelter Inclusion Project: a floating support service for households accused of antisocial behaviour’ in Flint, J. (Ed) *Housing, Urban Governance and Anti-Social Behaviour*, Bristol: Policy Press, pp. 179-199.

78 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/527847/Unit_cost_analysis_-_summary_report.pdf

79 Source: Bank of England inflation calculator, note that some elements of inflation may be higher than others, so this is an approximate figure.

80 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/527847/Unit_cost_analysis_-_summary_report.pdf

81 Shenai, S.; Jury-Dada, S.; McLeod, D. and Webb, M. (undated) Safe at Home: The case for a response to domestic abuse by housing providers Safe Lives https://safelives.org.uk/Safe_at_Home

82 https://england.shelter.org.uk/__data/assets/pdf_file/0003/415596/Immediate_costs_to_government_of_losing_a_home.pdf

More recent analysis⁸³, based on the 2010 Shelter research and additional data from the social landlord Gentoo covering the period 2015-2017:

- Average cost of home sitting empty for 29 days, £320
- Administrative costs, £500
- Cost of eviction, £1,200
- Average cost of repairs for reletting, £1,800
- Rent arrears write off (average), £1,900
- A total of £5,720 at 2017 prices, £6,484 at 2020 prices.

Taking a (simplified) illustrative example, if a social landlord had 45 properties a year in which domestic abuse caused management problems, of which 10 ultimately resulted in eviction:

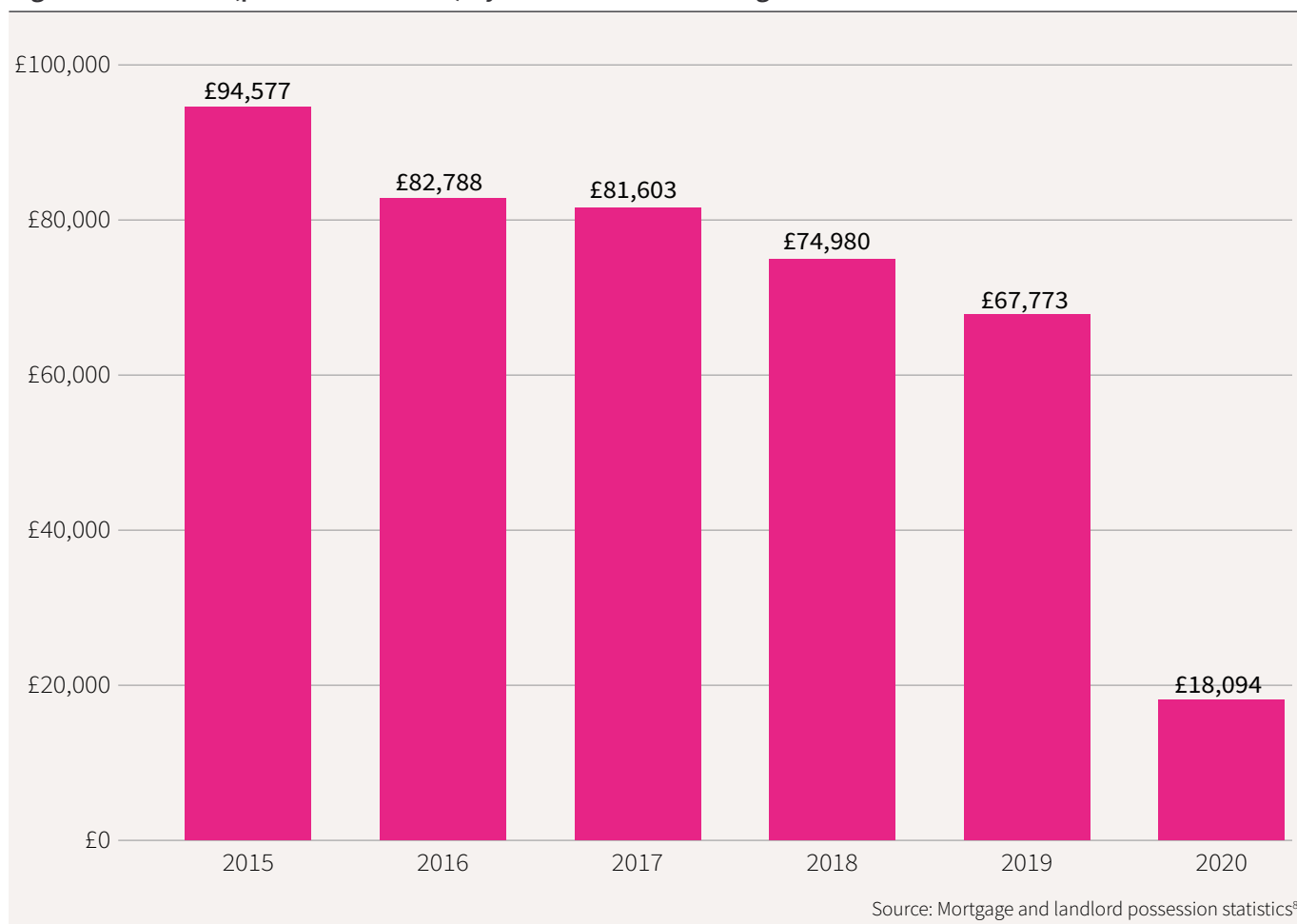
- The additional management costs (based on an additional £566 in estimated average housing management costs, a total of £5,045 per housing unit per year) would be some £25,470.

- Eviction costs would be in the range of £65,820 to £64,840 for ten homes.
- Total costs for 45 social rented homes where the tenancy was affected by domestic abuse would be some £91,290.

In reality, costs will vary widely, rather than costing £566 in extra housing management time, an individual case where rent arrears and/or property damage and/or nuisance might involve significantly more or less extra staff time. A social landlord might put more resources into a particular tenancy to try to stop an eviction and, if that eviction still goes ahead, spend yet more on housing management.

Figure 2 shows the number of social landlord possession orders (evictions sought through the courts) in recent years. Note that these figures are approximate, as they represent court actions for possession and not actual homes repossessed. It is also the case that repossessions can occur without a court order being made and that not all court orders result in eviction taking place.

Figure 2: Evictions (possession orders) by social landlords in England 2015-2020



83 Shenai, S.; Jury-Dada, S.; McLeod, D. and Webb, M. (undated) Safe at Home: The case for a response to domestic abuse by housing providers Safe Lives https://safelives.org.uk/Safe_at_Home

84 <https://www.gov.uk/government/collections/mortgage-and-landlord-possession-statistics>

Evictions in all forms, including by social landlords, fell drastically during 2020 as a result of the special measures designed to reduce risk of homelessness during the COVID-19 pandemic. Social landlord evictions have been on a downward trend as social landlords increasingly seek to avoid eviction. Taking the most recent pre-pandemic years, if it is assumed that evictions by social landlords follow the wider patterns found in homelessness data:

- Over the period from Quarter 2⁸⁵, 2018 to Quarter 4, 2020, a total of 46,940 households were found to be owed a relief duty under the homelessness in England (i.e. homelessness had occurred and they needed emergency/temporary accommodation and other assistance) because of domestic abuse.⁸⁶
- This was equivalent to an average of 12.5% of all households found to be owed a relief duty in England, with a similar median figure of 12.4%.
- In 2018, this would have been equivalent of some 9,372 households living in social rented homes who received a possession order. At an estimated cost of £6,582 per household, this would be the equivalent of some £61 million. At the lower estimate referred to above, £6,484, the cost for 12.5% of social rented evictions in 2018 would have been some £60 million.
- Levels of evictions in the social rented sector fell in 2019. However, based on a 12.5% figure and the estimated cost of £6,582 per household, the figure would still have been approaching some £56 million for 8,472 households and some £55 million based on the £6,484 estimate.

Costs for social landlords in London

Separate statistics on evictions by social landlords in London are not made available publicly, but in general terms, including the private rented sector, London has a higher rate of evictions than much of the rest of the UK. London boroughs account for nine of the ten local authorities with the highest rate of landlord claims in England and Wales.⁸⁷

During 2021, an unusual period because of the pandemic, evictions by private landlords began to exceed those by social landlords across England and Wales. London has higher costs than other regions of England and Wales. The weighting applied to London salaries means that staffing costs for social housing management services will typically be higher, with one estimate suggesting that costs in London were £1,900 more per housing unit under management compared to the lowest wage area (in terms of social housing management salaries), which was the North East.⁸⁸

The London weighting on salaries is not a fixed amount. Sometimes a small percentage is added to salary levels that would be lower elsewhere and sometimes a flat rate additional payment is made on top of a standard salary level. By some estimates, London is 20% more expensive to live in than most of the rest of the UK, London is particularly expensive in comparison with areas that have much lower house prices and rents.⁸⁹

85 The second of four quarters (periods of three months) in each calendar year, Quarter 2 2018 refers to April-June 2018.

86 Source: MHCLG Statutory Homelessness Live Tables <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

87 <https://www.gov.uk/government/statistics/mortgage-and-landlord-possession-statistics-january-to-march-2021>

88 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/527847/Unit_cost_analysis_-_summary_report.pdf (at 2015 prices)

89 Hirsch, D. (2016) *London Weighting and London costs – a fresh approach London*: Trust for London.

There is no fixed amount by which London social landlord salaries will exceed those elsewhere and in some areas of the UK, such as South Eastern England, the differences with London may be relatively small. However, it is not unreasonable to assume that salaries will tend to be somewhat higher. London social landlords may also have generally higher housing management costs in general, as both the extent and the intensity of area deprivation is higher than much of the rest of the UK, i.e. London contains relatively more poor people in poor areas, including people living in social housing. As an illustrative example:

- Taking the estimated average £4,478 cost for managing a social home (in 2020 prices) and again assuming the additional cost for managing a social rented home where there are issues with rent arrears and/or nuisance and/or property damage associated with domestic abuse, will raise that level by estimated £566 to a total of £5,045 (at 2020 prices), if it is assumed that:
 - Housing management in London is typically 5% more expensive than elsewhere in England and Wales, the additional housing management cost would be £594 per unit.
 - Housing management in London is typically 7% more expensive than elsewhere in England and Wales, the cost would increase to £605 per unit.
 - Housing management in London is typically 10% more expensive than elsewhere in England and Wales, the cost would increase to £622 per unit. o This would mean that, compared to the illustrative example given above, if a social landlord in London were to be dealing with 45 properties where domestic abuse was causing housing management issues, the additional cost would be in the range of some £27,000-£28,000, some £1,500 to £2,500 more than the £25,470 estimate for England and Wales as a whole.

Costs for social landlords in London might therefore be higher than for other social landlords. Relatively higher rates of deprivation and higher salary costs mean that social landlords operating in London may often be spending more than is the case elsewhere, with these costs potentially rising still further if domestic abuse is causing rent arrears and/or nuisance issues and/or property damage.

Costs of domestic abuse to homelessness systems

Homelessness is a highly gendered social problem in the UK. It is generally thought of in terms of being something disproportionately experienced by men. However, looking at the most populous part of the UK, England, which has around 80%⁹⁰ of total population, it can be seen that higher numbers of women experience homelessness (Table 1). During the period 2007 to 2017, 588,910 households were accepted as statutorily homeless⁹¹ by English local authorities of which 272,120 (46%) were lone parent families headed by a woman and 63,330 (11%) were lone homeless women⁹².

Data collection and the ways in which homelessness is defined changed after 2017 in England, following a policy change introduced by the Homelessness Reduction Act, which placed a greater emphasis on prevention. The data for 2018 and 2019 are summarised in Table 3. Women headed households accounted for half those to whom local authorities owed a preventative duty (they were at risk of losing their home) and 40% of households owed a relief (rapid rehousing following homelessness).

Table 2: Statutorily Homeless Households in England Headed by a Woman (2007–2017)

Year	Total acceptances	Household headed by a woman*
2007	64,970	57%
2008	57,510	57%
2009	41,780	57%
2010	42,390	57%
2011	48,510	57%
2012	53,480	57%
2013	53,210	56%
2014	53,410	57%
2015	56,500	57%
2016	59,260	56%
2017	57,890	57%

*Lone woman or lone woman parent. Refers to households owed the main duty under homelessness legislation active in this period. Source: MHCLG.

Between 2007-2017, the reason for statutory homelessness was recorded as violent relationship breakdown in 72,290 cases, some 12% of total⁹³ homelessness (Figure 3).

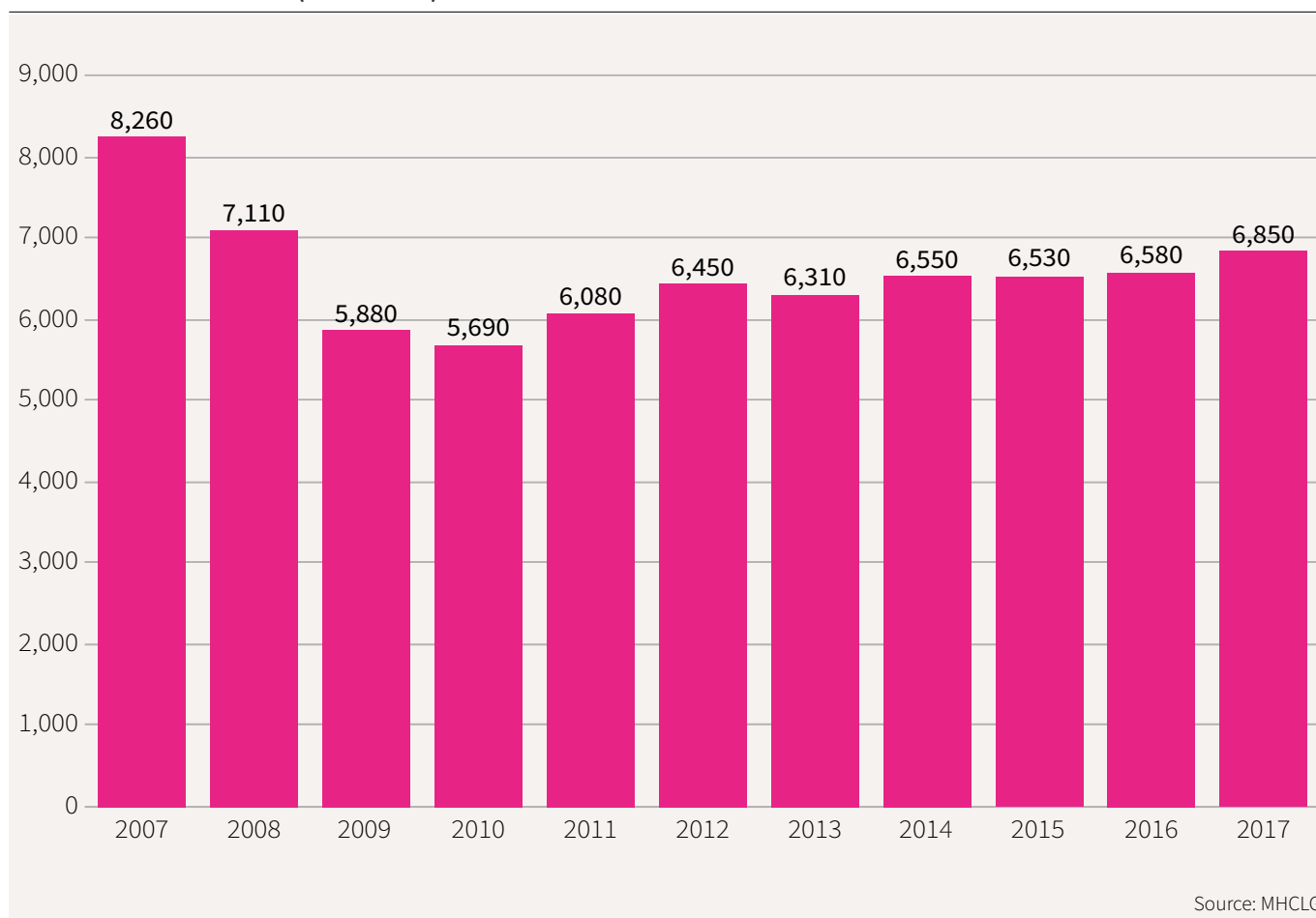
90 Percentages are rounded.

91 In priority need and owed the main duty under the terms of the previous homelessness legislation.

92 Source: MHCLG.

93 It is not possible to directly relate the data on the cause of homelessness with household composition in these data.

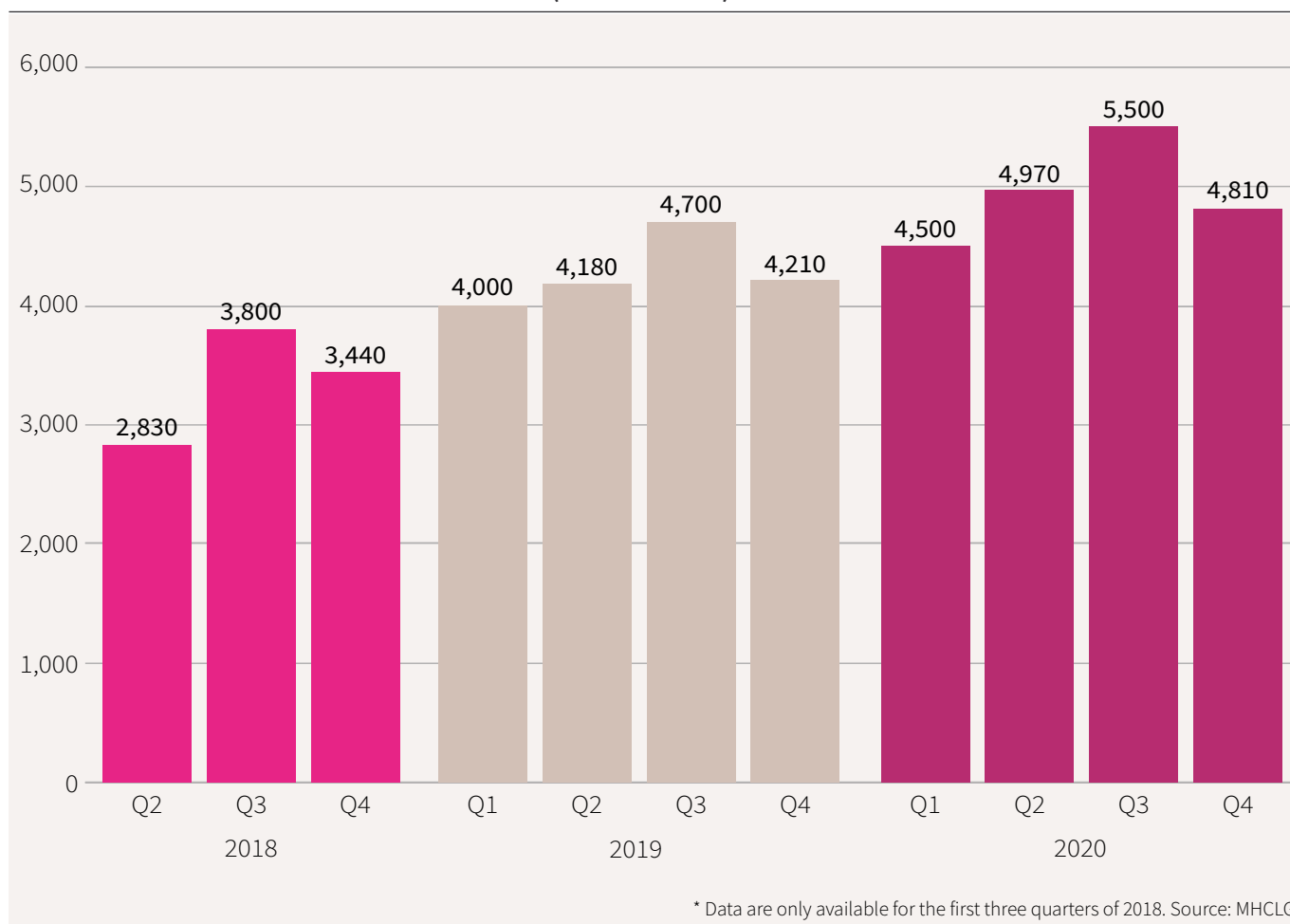
Figure 3: Statutorily Homeless Households in which Violent Relationship Breakdown was Recorded as the Cause of Homelessness (2007-2017).



Figures for the homelessness legislation introduced in 2018, the Homelessness Reduction Act, are recorded in a different way. Around one half of households owed a preventative duty (i.e. they are at risk of homelessness and are assisted to avoid eviction or other risks to existing housing) are headed by women. By contrast, around 40% of households owed a relief duty are headed by women (homelessness has occurred, which means temporary accommodation may be made available and in some instances the main duty, a right to settled housing, will be accepted).

Levels are relatively higher because the duty is now broader, so for example 149,520 households were found to be owed a preventative duty in 2019 and another 137,320 were found to be owed a relief duty, compared to 57,890 households being found to be owed the main duty in 2017, priority access to settled housing, the last year in which the old legislation was in operation. Women headed households are probably a lower overall proportion of homeless and potentially homeless households because lone parent families (usually headed by women) were the most likely to be assisted under the old homelessness laws, whereas the new legislation is much broader.

Figure 4: Homeless households owed a relief duty under the homelessness legislation where the reason for loss of home was recorded as domestic abuse (2018* to 2020)



During the period from the second quarter of 2018⁹⁴ to the final quarter of 2020, 46,940 households were recorded as being owed a relief duty under the homelessness legislation in England because of what was recorded as ‘domestic abuse’. As is shown in Figure 4, levels did not drop during the pandemic and appear to have increased slightly during the three quarters of 2020 in which it was present (data for 2021 are not yet available at the time of writing).

Data are also collected on the number of households owed a homelessness duty according to their support needs. In 2019/20, these data showed 39,990 households were in the following categories (in England):

- At risk of/has experienced sexual abuse/exploitation: 6,020 households
 - At risk of/has experienced domestic abuse: 26,790 households
 - At risk of/has experienced abuse (non-domestic abuse): 7,180 households
- A trajectory through the homelessness system does not have a fixed cost as the level of expenditure varies by the level and nature of need. Much also depends on the duration and nature of homelessness. Generally speaking, someone whose homelessness has been caused by or which is associated with domestic abuse who then goes on to experience long-term or repeated homelessness, is likely to have the highest financial cost to society and to experience the highest personal costs to their health, life chances and wellbeing.

94 The second of four quarters (periods of three months) in each calendar year, Quarter 2 2018 refers to April-June 2018.

Repeated and sustained homelessness among women is difficult to accurately quantify in England and the rest of the UK. However, the available data strongly suggests that it is often associated with experiences of abuse, violence and exploitation, both as a cause of these forms of homelessness and as traumatic experiences that occur while experiencing long-term and repeated homelessness.⁹⁵ More generally, among both women and men experiencing these forms of homelessness, support needs, which can include high rates of severe mental illness, combined with addiction and poor physical health, can often be high and complex.

Long-term and recurrent homelessness can be very expensive because it can involve someone making repeated, unsuccessful use of multiple public services, for example staying many times in a homeless hostel but never having their homelessness resolved, being repeatedly arrested and charged or having very frequent contact with NHS services like Accident and Emergency or Community Mental Health Teams. In 2016, looking at a population who had been homeless for three or more months (90 days) Pleace and Culhane noted that:

There is a policy logic to stopping someone from becoming long-term or repeatedly homeless if they are likely to cost the public purse several hundred thousand pounds more than an ordinary citizen over their life course. From this exploratory study, 86 single homeless people, some of whom were barely using services, had cost the public sector something close to £742,141 over just 90 days.⁹⁶

These costs fall largely, although not exclusively, on local authorities. Unplanned, emergency contact with NHS services, such as multiple presentations at Accident and Emergency, repeated use of ambulance services and repeated, unplanned, emergency hospital admissions and sectioning and admission under the mental health legislation can have high costs.

However, high costs can fall on local authorities, particularly where there is repeated and sustained use of supported housing and emergency or temporary accommodation funded by local government. In 2016, Pleace and Culhane estimated that £318,372 out of the £742,141 spent in 90 days on 86 people experiencing homelessness on a long-term or repeated basis was on local authority funded homelessness services (42% of total public spending).

It is important to note that, while there is evidence that the proportion of people experiencing long-term and repeated homelessness who are women, whose experience of homelessness is often characterised by abuse and exploitation, both as a cause of homelessness and while homeless⁹⁷, only a minority of homelessness takes this form, i.e. around 10% of total homelessness⁹⁸. Experiences of short term homelessness and, for many people experiences of homelessness linked to poverty and destitution, rather than to issues like drug use or severe mental illness, are much more common, including for women.⁹⁹

Putting this another way, while (pre-pandemic) annual rough sleeper counts in England have routinely counted around between 4-6,000 people sleeping rough there are around 95,000 homeless households placed in temporary accommodation by local authorities at any one point containing some 121,000 dependent children. The use of temporary accommodation is expensive, particularly in London, in 2017, the National Audit Office noted that:¹⁰⁰

In 2015-16 local authorities spent more than £1.1 billion on homelessness. More than three-quarters of this – £845 million – was spent on temporary accommodation. Three-quarters of this spending – £638 million – was funded by housing benefit, of which £585 million was recovered from the Department for Work & Pensions. Spending on temporary accommodation has increased by 39% in real terms since 2010-11. There is also a wider cost stemming from the impact of homelessness on public services such as healthcare. The Department does not have a robust estimate of this wider cost.

95 Bretherton, J. and Mayock, P. (2021) *Women's Homelessness: European Evidence Review* Brussels: FEANTSA.

96 Pleace, N. and Culhane, D.P. (2016) *Better than cure? Testing the case for enhancing prevention of single homelessness in England* London: Crisis.

97 Bretherton, J. and Pleace, N. (2018) *Women and Rough Sleeping: A Critical Review of Current Research and Methodology* London: St Mungo's;

98 Bretherton, J. and Mayock, P. (2021) *Women's Homelessness: European Evidence Review* Brussels: FEANTSA.

99 Bramley, G. and Fitzpatrick, S. (2018) Homelessness in the UK: who is most at risk? *Housing Studies*, 33(1), pp.96-116.

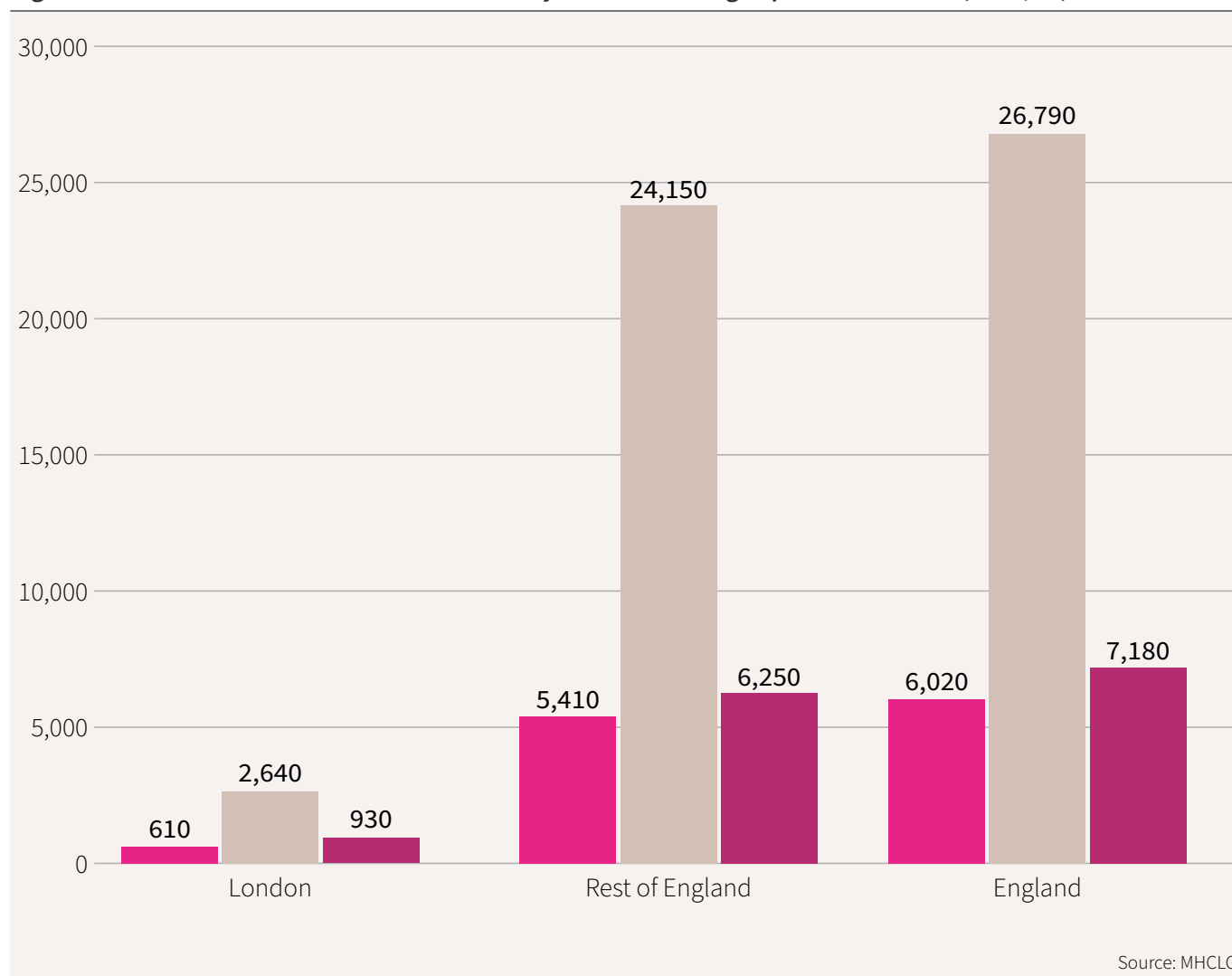
100 National Audit Office (2017) *Report by the Comptroller and Auditor General Department for Communities and Local Government: Homelessness* London: NAO, p.7.

Available evidence strongly suggests that these households were most likely to be lone women parents with one or more dependent children, of whom a considerable number would have experienced homelessness due to domestic abuse. This is difficult to quantify because the right data are not really available, but existing evidence suggests that women (and to a much lesser extent, men), whose homelessness is often - though not exclusively - triggered by domestic abuse make up a substantial proportion of the people experiencing homelessness living in temporary accommodation provided by local authorities.

Costs to homelessness systems in London

As Figure 4 illustrates, London accounted for 10% of the households recorded as owed a homelessness duty for these reasons. London boroughs recorded a duty to 10% of the households in England owed a duty because of risk/experience of sexual exploitation and 10% of the households owed a duty because of risk/experience of domestic abuse and 13% of all the households in England owed a duty because of a risk/experience of nondomestic abuse.

Figure 5: Households owed a homelessness duty at risk or having experienced abuse (2019/20)



In London, in December 2020, there were 17.1 households living in temporary accommodation per 1,000 households, compared with 1.7 households per 1,000 in the Rest of England.¹⁰¹ In December 2020, 60,680 of the 95,270 households in temporary accommodation in England were in London, i.e. some 65% of all temporary accommodation use by local authorities in England was in London.

London was also more likely to use temporary accommodation outside the administrative boundaries of an individual local authority (London borough) and the placement of people experiencing homelessness in temporary accommodation in other regions, i.e. outside Greater London.¹⁰²

¹⁰¹ Source: MHCLG https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/979393/Statutory_homelessness_release_Oct-Dec_2020.pdf

¹⁰² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/979393/Statutory_homelessness_release_

While estimating total expenditure on temporary accommodation across London presents some challenges, a 2019 report suggested that London boroughs spent a total of more than £900 million on homelessness services including temporary accommodation in 2017/18, with temporary accommodation alone accounting for about 80% of total expenditure across the city as a whole. It is not currently possible to break that down according to the proportion of people who were using temporary accommodation because of domestic abuse from the data available at present.¹⁰³

There is also some evidence that London has amongst the largest groups of people experiencing long-term and repeated homelessness associated with high and complex needs, recorded via the CHAIN database system, that logs service use by street using and street homeless populations who have complex needs.

Again, while these populations are not large, forming only a minority of people experiencing homelessness, their costs in terms of public expenditure can be high. Two populations of people who live rough (which can be on an intermittent basis) are more likely to have high and complex needs, 'returners' who have gaps in their contacts with services, or 'repeat' rough sleepers and a 'stock' population of people who have been seen living rough for two or more years continuously. In 2019/20, prior to large scale emergency accommodation provision for people sleeping rough under the 'Everyone In' COVID-19 programme, these populations were 1,296 and 2,377 in number, 3,673 across London in total, with reports that some 17% of people sleeping rough in London were women¹⁰⁴.

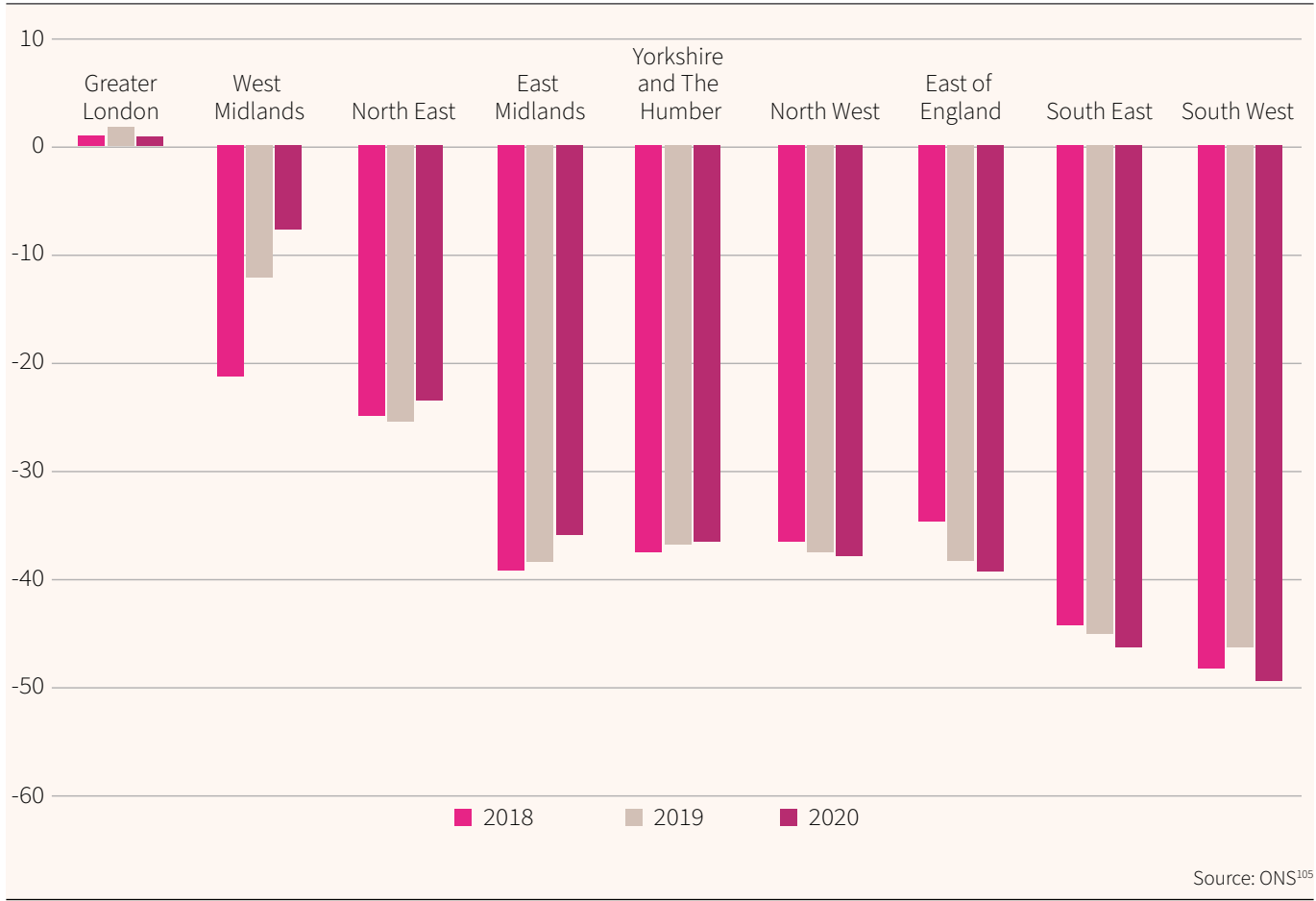
Oct-Dec_2020.pdf

103 Scanlon, K. et al (2019) *The Cost of Homelessness Services in London*. London: LSE

104 CHAIN Annual Report Greater London April 2019 - March 2020

Pressure on domestic abuse services in England and London

Figure 6: Percentage shortfall in refuge space provision in England, 2018-2020



Government statistics show that the domestic abuse sector faces high levels of need relative to resources. In November 2020, the Office for National Statistics (ONS) noted:

In the year ending March 2019, an estimated 67% of referrals of women to refuge services in England and 32% in Wales were declined, with around one-fifth due to a lack of space or capacity to support the client; this represents a slight increase in declined referrals compared with the previous year.¹⁰⁶

ONS also noted:

The number of refuge services in England has generally been decreasing since 2010, with small increases seen in 2013 and 2017. There were 294 refuge services in 2010 compared with 261 in 2020.¹⁰⁷

Possible increases in domestic abuse have been reported as a result of the COVID-19 pandemic. Domestic abuse services and systems are reported as being under higher than usual strain at the time of writing (mid 2021).

London has relatively high expenditure on domestic abuse services, being one of the few parts of England and Wales that is reported by ONS as having the recommended level of refuge places. There have been some improvements in recent years, but as is shown in Figure 3, refuge provision is still at much lower levels than the recommended level of one place per 10,000 population.¹⁰⁸

¹⁰⁵ <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimservicesenglandandwales/november2020#domestic-abuse-victim-services-data>

¹⁰⁶ <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimservicesenglandandwales/november2020#domestic-abuse-victim-services-data>

¹⁰⁷ As above.

¹⁰⁸ One family place per 10,000 population and one refuge or similar emergency shelter/supported housing service in every local administrative region (e.g. town, city or county council), based on Council of Europe endorsed recommendations in Kelly, L. and Dubois, L. (2008) *Combating violence against women: minimum standards for support services Strasbourg*; Council of Europe.

In the South West, levels of refuge space provision were at 49.5% less than the recommended level in 2020, with the South East at 46.4% less than the recommended level. The picture in some regions was better, levels were 23.6% below the recommended level of one refuge place per 10,000 population in the West Midlands in 2020, but only London was (just) over the line at 1% higher than recommended levels (Figure 3).

DAHA Accreditation Costs and Potential Cost Benefits

...as a percentage of any organisation's spend it would be minute, and for the difference you can make, you're talking about cost benefit, you know, the cost of one of those workers...with on-costs, is £36,000 a year. What value do you place on the difference they're making? [Gentoo staff member, interviewed 2019/20].

The cost of DAHA Accreditation are, relative to the sort of costs that domestic abuse can generate for society, the economy, public spending as a whole and public spending in response to homelessness, extremely low. Variation exists, as some housing providers have opted to train existing staff and slightly modify existing systems rather than build new infrastructure or make new appointments, meaning that almost all the cost is confined to the training, which runs into the low thousands for most housing providers.

Where a housing provider makes a decision to take on new staff to support the DAHA Accreditation process, or undertakes modification or replacement of systems to support DAHA Accreditation, the costs will be higher, but again, relative to the potential expenditure associated with domestic abuse, the expenditure involved looks very low.

With assistance from DAHA, six housing providers, some of which had completed Accreditation and some of which were still in the process, were asked to provide data on their expenditure. Detailed data were generally not available, primarily because rather than creating new staffing or structures, most of the housing providers had absorbed DAHA Accreditation into their existing systems and structures, e.g. one or more job descriptions changed, but the expenditure on those posts was not subject to alteration, the housing provider was not spending more on staffing following Accreditation.

- Total costs, on the basis of having completed training and running costs for one year, were an average of £59,270 per housing provider.
- There was considerable variation, centring on whether or not additional staffing and/or significant diversion of existing staff resources had been involved in DAHA Accreditation and running the new systems for one year. At the lower end, costs for housing providers who had essentially run a training action plan to achieve Accreditation, modifying roles but not bringing new resources online, could be beneath £30,000. For those housing providers spending more, including creating new posts and modifying systems, costs could be upwards of £70,000. Expenditure above this sort of level, e.g. £100,000 plus, was unusual.
- Average spending on training was £9,975 (a median of £8,680).
- Collectively, the housing providers completing the survey had around 191,000 homes in management, the equivalent cost for DAHA Accreditation per home was a mean (average) of £5 with a median cost of £4 per home in management.

Again, depending on how DAHA Accreditation had been implemented, there was some variation in equivalent costs, ranging from under £1 per home to £12.

There is no set pathway through domestic abuse, nor through homelessness that is associated with domestic abuse¹⁰⁹ and there are important limitations in the quality and extent of data. For example, a recent attempt to systematically explore the costs of homelessness in London by the London School of Economics¹¹⁰ and the national costs of homelessness by the National Audit Office¹¹¹, were both unable to attempt to break down the costs associated specifically with domestic abuse.

109 Bretherton, J. (2020) *Women's Experiences of Homelessness: A Longitudinal Study* *Social Policy and Society* 19(2), pp. 255–270.

110 Scanlon, K. et al (2019) *The Cost of Homelessness Services in London*. London: LSE

111 National Audit Office (2017) *Report by the Comptroller and Auditor General Department for Communities and Local Government: Homelessness* London: NAO

In 2015, modelling of the ways in which homelessness might be more effectively managed through prevention, using services to stop homelessness occurring rather than reacting to homelessness after it had occurred, was used to explore modification of the homelessness laws. Based on actual experience, vignettes (illustrative models) were built to test how the human and financial

costs of homelessness might be reduced.¹¹² One of the vignettes produced for this work, which followed earlier governmental attempts to map the costs of homelessness, was based on a woman either avoiding homelessness caused by domestic abuse because of effective prevention or becoming homeless because the right mix of preventative services was not in place.

Table 3: Costing two homelessness scenarios

Scenario 1: Successful prevention	Costs
Preventative intervention by Housing Operations team ¹	£826
Sanctuary Scheme installation ²	£728
Total	£1,554
Scenario 2: Homelessness persists for 12 months	Costs
Refused assistance by Housing Operations teams (twice) ¹	£1,116
Accommodation-based service (mean support costs 10 weeks out of 52) ³	£2,350
Visits to A&E department (six) ⁴	£702
Counselling (NHS) one hour sessions (ten) ⁴	£500
Total	£4,668

Source: Pleace, N. (2015) and Crisis.

¹ Based on median unit costs reported in Acclaim Consulting (undated) Value for money in housing options and homelessness services London: Shelter ² Based on Jones, A., Bretherton, J. et al. (2010) The Effectiveness of Schemes to Enable Households at Risk of Domestic Violence to Remain in Their Own Homes. London: CLG ³ Based on operating costs shared by homelessness service providers and commissioners ⁴ Based on PSSRU Unit Costs for Health and Social Care.

DAHA Accreditation is a very low-cost intervention relative to the potential financial savings that can arise from preventing and rapidly ending domestic abuse. There can be effective savings for social landlords, on expenditure on homelessness services, for the NHS and other systems every time a case of domestic abuse is prevented or quickly ended, because lots of spending that would (probably) have happened is not actually required. Updating the figures shown in Table 3 by inflation to 2020 costs¹¹³, the 'successful prevention' scenario is £1,761 and the 'homelessness persists for 12 months' increases to £5,292.

Individual trajectories through domestic abuse and through possible homelessness will vary considerably, depending on what resources someone has available, in terms of financial, emotional, informal and formal support. In many, though not all, scenarios human and financial costs will be reduced if domestic abuse is detected early and stopped. Some financial costs will be higher if domestic abuse that would otherwise have gone unnoticed is detected and money spent to prevent it, but there may be wider financial benefits for society (for example because someone will continue to be, or become, economically productive as a result of the domestic abuse being detected and stopped).

As is illustrated in Table 3, expenditure will tend to be lower when domestic abuse is detected and stopped, compared to a situation in which it (as in this example) ultimately results in homelessness with a higher human cost and a higher financial cost.

However, DAHA Accreditation will change and reduce expenditure rather than remove it altogether and with this in mind, this section of the report now briefly explores the role and potential cost benefits of DAHA Accreditation within a Whole Housing Approach.

112 Pleace, N. (2015) *At What Cost? An estimation of the financial costs of single homelessness in the UK* London: Crisis.

113 Using the Bank of England inflation calculator.

DAHA Accreditation and the Whole Housing Approach

The Whole Housing Approach¹¹⁴ is designed to improve the housing options and outcomes for people experiencing domestic abuse. It is intended to improve access to safe and stable housing across all tenures and to provide pathways for moving into safe and stable housing from refuges, supported housing and other temporary accommodation.

Alongside this, the Approach is designed to increase the options for someone at risk of domestic abuse to remain in their own home. DAHA Accreditation is designed to function as the cornerstone of this integrated system, enabling earlier identification and intervention for domestic abuse through housing providers.

Graphic 2: The Whole Housing Approach



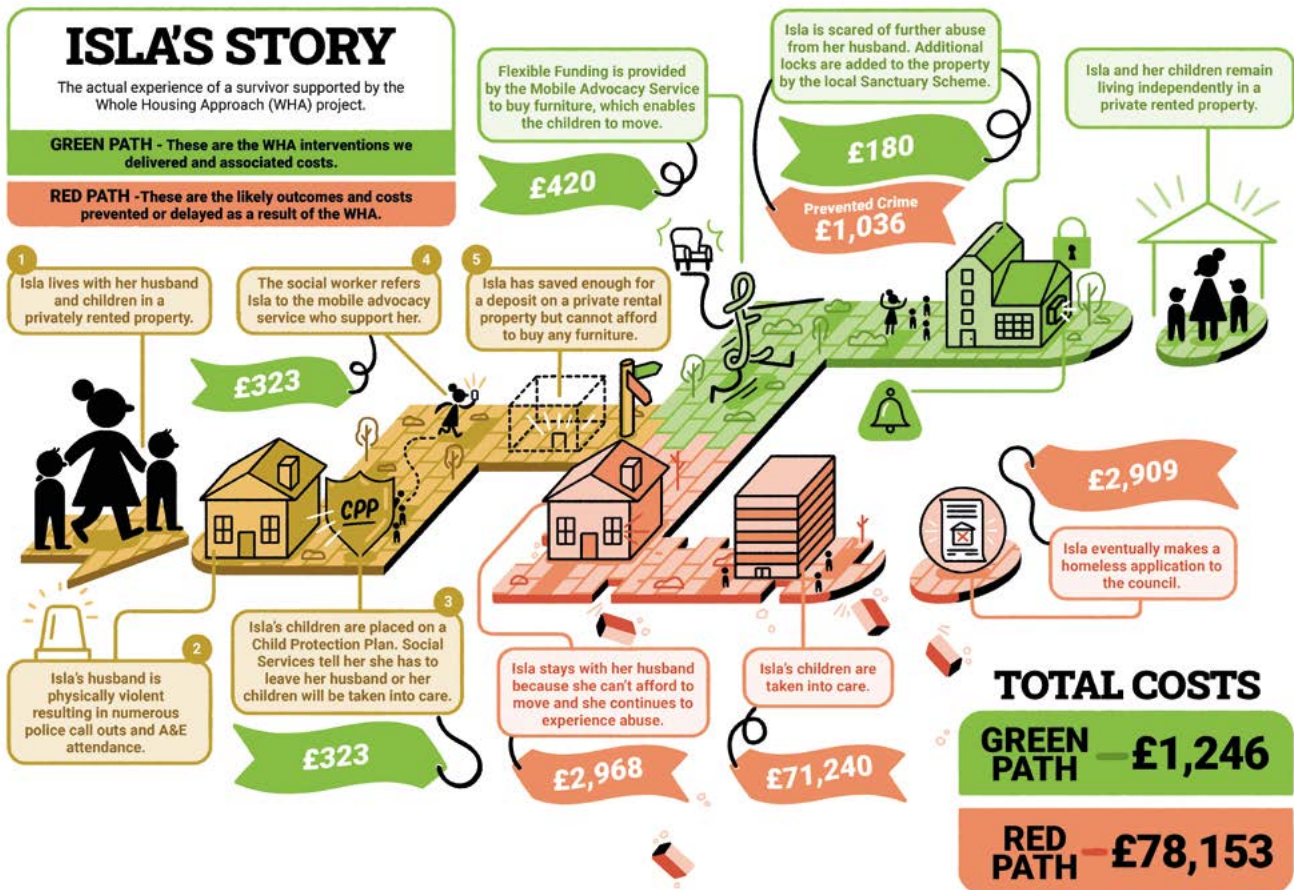
Source: DAHA.

114 https://www.dahalliance.org.uk/media/10888/p1010-st-whole-housing-project-report_final.pdf

Estimates have been produced by DAHA, based around the actual experience of women, which are reproduced for information in this report. It is important to note that these estimates were not produced by the authors, but they are included here to show the ways in which DAHA Accreditation is ultimately designed to work and

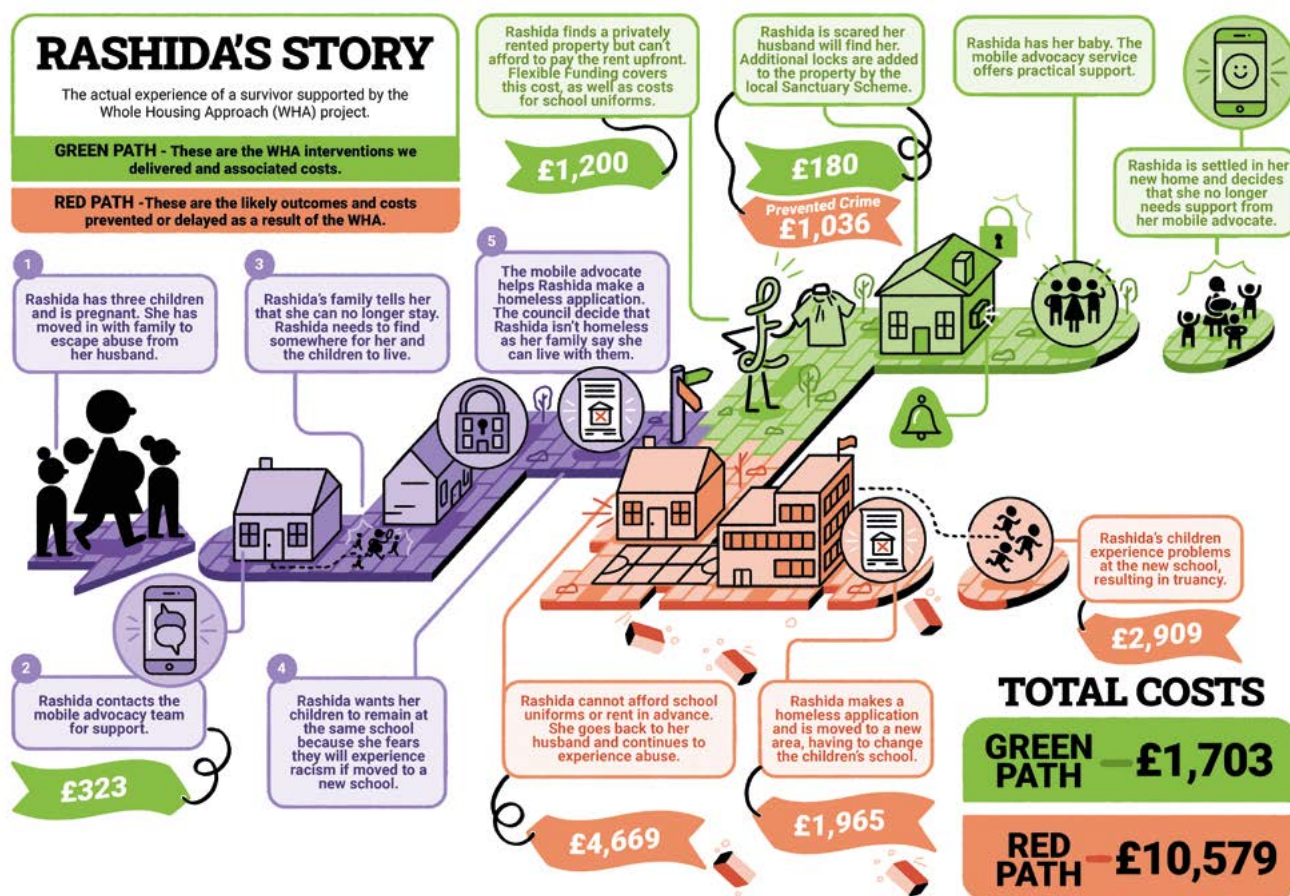
what the potential cost savings might be from moving towards a more integrated, preventative approach to domestic abuse which has the potential to deliver a range of financial benefits to the economy and the public purse.

Graphic 3: Illustrative calculation of the potential cost benefits of the Whole Housing Approach produced by DAHA



Source: DAHA

Graphic 4: Illustrative calculation of the potential cost benefits of the Whole Housing Approach produced by DAHA



Source: DAHA

6 Towards Strategic Integration

Introduction

This section considers the wider strategic integration of DAHA Accreditation into the housing sector, how this will interact with existing strategies, systems and provision for responding to domestic abuse and what opportunities and challenges lie ahead.

Interviews were conducted both within DAHA itself and with key stakeholders in the housing and domestic abuse sectors.

Future plans for DAHA Accreditation

Expanding into the private rented sector

The housing providers that have secured or shown an interest in DAHA Accreditation are mainly social landlords, whereas many people at risk of domestic abuse and increasing numbers of people living on lower incomes, who would have once had the option of living in social housing, now rent homes in the private rented sector.¹¹⁵

This aspect of promoting DAHA Accreditation is concerned with how to engage 'small business' private rented sector (PRS) landlords who might rent out a second home and manage it themselves and the more formalised elements of the private rented sector, including letting (managing) agents working with multiple PRS landlords and engaging with larger PRS landlords.

When a household or individual has to move as a result of the risks around domestic abuse, it could be that they will have to transition from social rented to private rented housing, with a corresponding increase in rent and a drop in security of tenure. DAHA also has interests in ensuring that the housing rights and wellbeing of someone moving away from domestic abuse are protected, linking back to the ideas within the Whole Housing Approach (see sections 2 and 5).

For instance, I'm working on a proposal with [letting/estate agent] who want to work with me to basically achieve a very basic version of DAHA Accreditation where they're developing policies and procedures and training around domestic abuse because they've been doing these humungous property developments in London [DAHA staff member, interviewed 2021].

DAHA is also interested in regulation and legislation related to the PRS and how this might be altered to help ensure better protections for people at risk of domestic abuse in the PRS. This included engaging with local authorities, in their regulatory and environmental health roles, to explore how their systems might also integrate elements of DAHA Accreditation.

For instance, [local authority] I'm already working with them to look at all the different areas in accreditation and what that would, what they need to do to achieve it and what changes they need to make, what they're willing to do [DAHA staff member, interviewed 2021].

There were recognised challenges in engaging in what is a diverse and complex sector, which while it does have points at which DAHA Accreditation can potentially connect, such as larger letting/estate agents and local authorities in their regulatory roles. It is also important to consider the dispersed nature of the PRS, unlike social and affordable housing developed and managed by housing associations (registered providers) and local authorities, it has no uniform, area-level management practices and structures, as much of it is small, indeed very small, businesses. The PRS is variably regulated, it contains very good practice, indifferent practice and very poor, indeed criminal practice by individual landlords, with local authorities only having limited resources to inspect properties or with which to react to reports of unacceptable landlord behaviour.¹¹⁶ Implementing a standard around domestic abuse and how to react to it represents a different set of challenges to those so far encountered by DAHA in relation to promoting Accreditation among social landlords.

115 Rugg, J. and Rhodes, R. (2018) *The Evolving Private Rented Sector: Its Contribution and Potential*, York: Centre for Housing Policy.

116 Spencer, R.; Reeve-Lewis, BN.; Rugg, J. and Barata, E. (2020) *Journeys in the Shadow Private Rented Sector*, York: Centre for Housing Policy.

Expanding work in London

I think probably the lack of social housing and then going into the private rented sector is a London issue and competition over privately rented accommodation. The different...councils, having different licensing schemes, having different approaches, in the London area is very catchment orientated. Just having so many different councils with different approaches is very difficult when it comes to London. I think, like, such a mixture of deprivation and wealth, does create an issue as well [DAHA staff member, interviewed 2021].

DAHA began in London, with the pioneering work of Guddy Burnet when she was working with Peabody, the first housing organisation to explore far-reaching changes in how they monitored and responded to domestic abuse.¹¹⁷ As has been detailed and discussed elsewhere in this report, London presents unique challenges, there are pressures on affordable and, specifically, social housing supply that, while they exist at similar or even greater intensity in other parts of the UK, simply do not exist on the same scale as is the case for the Capital.

London contains spatial concentrations of inequality, sitting alongside global extremes of wealth, and available, affordable, housing for someone at risk of domestic abuse can be in areas that are highly socially and environmentally degraded. Housing is difficult to get and when it can be secured, it may not be within built environments or neighbourhoods which are a suitable for someone who has experienced domestic abuse. If someone has post-traumatic stress disorder, anxiety or other mental health problems, housing them in an environment that might be characterised by noise, nuisance and criminal behaviour, in which, for example, they feel unsafe going out at night, is not a good solution.

...we've seen a context over the last 15 years or so where it has become increasingly difficult for local authorities to meet their obligations to any homeless person or household. Particularly in London, because of factors around the availability of affordable housing, welfare reform, growing competition for private rented sector. I don't need to rehearse all of this stuff. I suppose it feels like sometimes there's a tension between that reality for council homelessness services and organisations that are, quite rightly, championing the cause and the rights of those who suffered domestic abuse [external stakeholder staff member, interviewed 2021].

Multiple layers of intersecting local and citywide government within London also create a unique context. It was seen by some respondents as inherently more complex to move London in a single policy direction, i.e. towards universal adoption of DAHA Accreditation, not just because of scale, but also because of the structure of London's governance.

I think yes, having 32, 33 local authorities...It's very unwieldy, in that they all have their own agendas politically, in terms of community, in terms of demographically, we have the conflict between the inner and the outer London boroughs. There's just so much going on in terms of the landscape, which doesn't help. So it's hard to get a cohesive or coherent London voice, let alone anything else really. It's sad, in a way, because I think that's why a lot of the Pan-London work has been so challenging [external stakeholder staff member, interviewed 2021].

While there are challenges, progress has been made and has been reported, according to one DAHA member of staff, as at mid 2021 two-thirds of London boroughs have secured or are seeking Accreditation, alongside major social landlords like Peabody and Guinness Trust that are active in the city. Benefits for housing providers and for people at risk of domestic abuse have been reported in London and are discussed both in this report and the interim report from this research.

London's diversity in ethnicity, culture and ways of living was also seen as feeding back into how DAHA Accreditation works and how it might be shaped in the future. This meant, in part, recognising the multiple potential dimensions of domestic abuse and thinking through whether specific provisions or a need to heighten awareness of particular issues will need further consideration as Accreditation evolves.

So I think when we talk about domestic abuse we tend to not think about kinda women of colour, disabled women, LGBT women; in London you have to be diverse, you have to have contact, but also in, in terms of like the people that are coming through the door from London housing providers, they, you know, they've all had to be protected characteristics; and I think that's one of the things that is positive about DAHA that there is a whole section on inclusivity and accessibility as well, which I think is important [DAHA staff member, interviewed 2021].

117 Burnet, G. (2017) Winston Churchill Fellowship – *Domestic Abuse and Housing: International Practice and Perspectives* https://www.wcmt.org.uk/sites/default/files/report-documents/Burnet%20G%20Report%202016%20Final_1.pdf

Cultural shifts, across the social housing sector, but perhaps particularly within London in the wake of the Grenfell fire, were also seen as bringing mainstream practice in social housing management closer to the broad ethos of DAHA Accreditation. Central government regulation around greater voices for tenants, alongside social landlords reviewing their own systems for giving their tenants a voice, were both potentially important here.

I think that DAHA's always been survivor first but I do think there's generally been a shift in the general social housing sector around the approach to tenants; and I, I do think maybe, you know, if the work was going forwards, but I do think Grenfell Tower played a really big part in that, I do think actually we need to be speaking to tenants, we need to be speaking to residents, they need to be involved, cos that particular event was basically because tenants were not being listened to...[DAHA staff member, interviewed 2021].

Now there's a lot more, or there will be, a lot more scrutiny on how housing associations treat their residents, in a way, because the regulator of social housing is now going to undertake a consumer regulation, not just financial regulation. So it is going to be scrutinising how housing associations listen to their residents' concerns, how they involve them in decisions that affect them as residents, and the kind of user experience. So there is, like I mentioned earlier, a specific domestic abuse angle to that consumer regulation. So accreditation can be a way to make sure that you're doing that effectively, as well [external stakeholder staff member, interviewed 2021].

Stakeholder views of DAHA Accreditation

I think in terms of DAHA, in terms of what it's done for the sector - just to go back when it incorporated, which was 2015, I think definitely homelessness and domestic [abuse] were kind of two worlds, two planets that were never meeting. I think if you look at it from that perspective, it's absolutely phenomenal. Now you have national forums, you have regional, national strategies that speak about homelessness and domestic abuse in the same breath. I think that's priceless really, when you think of the outcomes for victims and survivors [external stakeholder staff member, interviewed 2021].

There were many positives in how DAHA Accreditation was seen by stakeholders in the housing and domestic abuse sector. DAHA as seen as promoting good practice, drawing attention to the nature, extent and the needs that exist around domestic abuse and promoting the active role of housing providers can take in preventing, reducing and stopping domestic abuse and associated risks of homelessness. Within some parts of the domestic abuse sector too, DAHA was seen as heightening awareness of the centrality of housing issues and introducing better ways of approaching the management of risk, prevention of homelessness and ensuring the wellbeing of people who have experienced or at risk of domestic abuse.

I think that the main benefit is understanding that there are different ways of dealing with domestic abuse than the way that it potentially has been dealt with in the past. So knowing that there are options out there, and focussing the mind, in a way. So I found that the idea of looking at domestic abuse separately from antisocial behaviour was useful, and the encouragement to work in partnership locally, because that, I don't think necessarily has happened, or even does happen [external stakeholder staff member, interviewed 2021].

The ambition of DAHA and the goals of DAHA Accreditation, that the approach sought to be transformative in nature, was also seen in a positive light. Accreditation was not tokenistic, but, in terms of its goals, sought to change the nature and the culture of housing provider responses to domestic abuse.

There are eight standards and actually, only one of them is about supporting victims and survivors. The others, actually, if you look at them in their totality, there would be a really transformational response.

It's about prevention, it's about supporting communities, it's about making safer communities for everyone, not just people affected by domestic abuse [external stakeholder staff member, interviewed 2021].

I think that's where DAHA play a really, really important role in terms of national policy and thinking through - again, you'll be very familiar with that whole housing approach - thinking through what a whole range of options would look like [external stakeholder staff member, interviewed 2021].

The financial logic of DAHA Accreditation was also recognised. Early direction, intervention, prevention and rapid responses when domestic abuse was occurring were seen as likely having the kinds of potential financial benefits discussed in Section 5.

Whenever you look at people who are vulnerable, the further away from the crisis point they are, that you can actually intervene and offer support or alternative pathway would be cheaper. I think when people are in crisis, at that point, that's when more services will be needed. It will become more expensive. You will often have perpetrators who will have multiple victims. There's knock-on effects across education, social services, policing, court, the whole public purse... [external stakeholder staff member, interviewed 2021].

I think [Accreditation] really expanding their understanding of the issues and the social issues that their tenants face and providing a more effective and probably swifter and more efficient response to dealing with them. Obviously if you're housing a woman that's experiencing domestic abuse and you keep mistakenly labelling that and handling that as an antisocial behaviour issue you're not actually going to solve the problem. So it's cost-effective and better in the long run if your staff are able to identify domestic abuse and provide the right response first time.

I'm sure it has really significant social value benefits for housing organisations as well, it's really important for their staff because there's going to be huge numbers of their staff that are experiencing domestic abuse in their own relationships to ensure that there's certainly a clear message to their staff that we take this seriously, it's unacceptable, and we have clear policies and protocols in place for handling it [external stakeholder staff member, interviewed 2021].

While much was made of the positive achievements of DAHA and DAHA Accreditation, external stakeholders also expressed some concerns. It is important to note that these concerns were generally expressed alongside acknowledgement and praise of what DAHA and DAHA Accreditation had achieved, but as DAHA Accreditation – as is the case at the time of writing – continues to gather momentum across the social housing sector and beyond, it is important to note that there are aspects of the governance and perhaps some unforeseen consequences of Accreditation, that may need to be considered.

The first issue here was that, from small beginnings, DAHA had turned into something of a political and policy powerhouse over the course of only a few years, appearing on the agenda of the social housing sector, the homelessness sector and beyond. One further indication of this gathering strength has been the international interest in DAHA Accreditation, among the homelessness sector in Australia and Canada, and at pan-European level from FEANTSA, the European Federation of Homelessness Organisations.¹¹⁸ Here the concerns might be expressed in terms of whether DAHA and the process of Accreditation would be enhanced by a wider network, a wider alliance, and more engagement, specifically around governance and management, with the wider housing and domestic abuse sectors.

...something that I found very difficult, and I know other housing providers did, because it's almost created a kind of - its created a brilliant network but essentially, it's housed a lot of the power and decision making in a small group of hands... [external agency staff member, interviewed 2021].

Alongside this, some external stakeholders had the view that DAHA was taking up a lot of the space and air around policy debates and developments in the interface between housing provision and domestic abuse. There was a sense of being squeezed out of certain agendas and discussions because DAHA had become influential through its successful promotion of Accreditation. Effective communications had, in some instances, led DAHA into spaces that had hitherto been occupied by other agencies. One specific concern here was that DAHA was perceived as focusing on Accreditation, not that this was not seen as a worthy goal in itself, but meant that wider agendas might drop off the radar. Another concern was that DAHA's reach and influence were sometimes seen as not being matched by the resources it had available, that more staffing and other resources were needed if DAHA were going to effectively engage on such a wide-ranging basis.

Structural problems and silo-like approaches to domestic abuse were still seen as an issue by some external stakeholders. While DAHA had heightened awareness of the role and importance of housing and the ways in which housing providers could counteract domestic abuse, a disconnect between housing providers and the domestic abuse sector was still thought to be an issue by some respondents.

I think in terms of just having someone who can travel around and make those personal connections and bang the drum and amplify the voice of people have been affected by domestic abuse, I think definitely that's been done. I think in terms of strategically or in a more materialistic way, I don't know how much that's achieved, because it still feels like the two worlds [external stakeholder staff member, interviewed 2021].

The position of the domestic abuse sector, which resonated with the cuts experienced in the homelessness sector, but where the experience of managing with ever reducing resources had gone on for longer was highlighted by several respondents. The need for services was also far greater than the level of resource that was available, something that was a longstanding issue, the sector having been recorded as overwhelmed, at national level in the late 2000s.¹¹⁹

I think beyond housing more narrowly, I think there is an issue around funding for the sector. I have to say probably, having come from the homelessness sector into the domestic abuse sector, the domestic abuse sector faces some very, very unique challenges in regards to funding.

There is - most services are only operating year-to-year so it's been more difficult for them to plan, in the long term, their provision of support for survivors and I think - and with regards to housing, you're working with women that have complex needs, for example. That's incredibly challenging [external stakeholder staff member, interviewed 2021].

118 <https://www.feantsa.org/download/summer-2016-perspectives-on-women-s-homelessness1684329503268833210.pdf>

119 Quilgars, D. and Pleace, N. (2010) *Meeting the needs of households at risk of domestic violence in England: The role of accommodation and housing-related support services* London: MHCLG.

A final issue arose in this context. There was a concern that, using DAHA Accreditation, which enhanced their effectiveness and the quality of service responses to domestic abuse that some large social landlords, already active in the supported housing markets (providing housing and support funded through competition for local authority contracts), would move into the domestic abuse 'market'. Resources that had been available for specialist domestic abuse services were seen as being at risk if larger housing providers entered that sector and were able to outcompete specialist services.

Particularly now that because of austerity and all the funding cuts to local authorities, they're struggling to fund services. So a lot of the larger, more generic housing associations have the scope, they have the buildings and the budgets to run these services, at massive economies of scale as well [external stakeholder staff member, interviewed 2021].

Systems and services for responding to and preventing domestic abuse have always struggled to get sufficient resources. In common with the supported housing sector in general and homelessness services, including services for women experiencing homelessness, the refuge sector has seen significant cuts. There are reports that one in five refuge services running in November 2020, were not funded by their local authority, and that most of those that were had experienced reductions in funding¹²⁰. This is in the context of an estimated £1 billion being taken out of the homelessness sector over the past decade.¹²¹ As noted, the issues here are longstanding, research on the extent of domestic abuse service provision in England, published in 2010 reported significant shortfalls in funding, waiting lists for refuge spaces and women being turned away because there was no room¹²², as continues to be reported by ONS (see Section 5).¹²³

DAHA Accreditation needs to be seen and understood within this wider context. Full and effective responses to domestic abuse are not dependent on any single service element or particular programme, but instead rely on a range of agencies working effectively together. This is acknowledged by DAHA in the incorporation of Accreditation within the Whole Housing Approach, as wider evidence suggests that integrated approaches are likely to be more effective.

Another way of looking at this is that DAHA Accreditation should be employed to enhance and strengthen existing systems, but not as a substitution for other necessary services, i.e. DAHA Accreditation should not be implemented in ways that might take resources away from other highly necessary services. Accreditation has the potential to bolster and enhance responses to domestic abuse, reducing the human costs and reducing some of the financial costs, but Accreditation will best meet these goals by adding to the strengths of existing systems and responses.

120 Women's Aid (2021) *Fragile funding landscape: The extent of local authority commissioning in the domestic abuse refuge sector in England 2020* London: Women's Aid.

121 <https://www.mungos.org/publication/fixing-funding-for-homelessness-services-summary/>

122 Quilgars, D. and Pleace, N. (2010) *Meeting the needs of households at risk of domestic violence in England: The role of accommodation and housing-related support services* London: MHCLG.

123 <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusevictimservicesenglandandwales/november2020#domestic-abuse-victim-services-data>

The emerging lessons of COVID-19

The idea that everyone can be the eyes and ears of the housing provider, as well, like repair staff. I thought that was really good. It's not been so easy during COVID, but going in to do work, and also just having one eye on, 'Why is there a hole in the wall? Why is this door smashed?' That kind of thing. 'Could it be domestic abuse?' That's important [external stakeholder staff member, interviewed 2021].

At the time of writing, discussions of the post-pandemic world are ongoing in a context in which the duration and nature of the virus is still unclear, even as (in mid 2021) vaccination may be starting the process of slowing the spread. There is some evidence suggesting that there has been a spike in domestic abuse during lockdown, both within the UK and globally, although at the time of writing this has yet to be confirmed by official statistics, as enhancements to recording of domestic abuse offences have overlapped with the pandemic.¹²⁴ At international level, the UN has reported a 'Shadow Pandemic' of domestic abuse, which according to their estimates reflects a global increase.¹²⁵

The impacts of the pandemic at a point at which the pandemic is still in train are difficult to estimate. COVID-19 has acted as both a lens that has highlighted the different dimensions of inequality and abuse in the UK and there is the potential that it has also been an accelerant to domestic abuse and other examples of injustice and inequality. The need for DAHA Accreditation and a wider need for integrated, properly resourced domestic abuse and homelessness strategies has been underlined by the effects of the pandemic.

The pandemic has also shifted perception of what is possible. Ideas that the state was 'inefficient' in dealing with social issues have been fundamentally challenged, as is shown in the contrast between the NHS organised vaccination programme compared to cascade failures in a privately run test and trace programme. Alongside this, the idea that social problems, long defined as being too complex and too individual to solve, the key example being people sleeping rough, were suddenly all but removed, at least on a temporary basis, when the State actually directed sufficient resources at them. The idea that it was possible to clear the streets of most of the people living rough, accommodate them, then begin to house them with support would have found very little traction before March 2020. DAHA Accreditation has, similarly, shifted the ground radically and significantly in relation to what was thought possible and practical. Longstanding approaches to domestic abuse have been questioned and replaced, with often very positive results. If COVID-19 has a positive outcome in relation to domestic abuse policy and practice, it is in reconsidering the idea of what is practical and what can be achieved and the role of DAHA Accreditation within that.

Long term adaptation of Accreditation is another question and there much depends on what form or forms the pandemic takes over the coming years. Ways will be found to engage with tenants, conduct repairs and re-establish the means by which DAHA Accreditation is designed to detect and respond to domestic abuse. If the pandemic fades away relatively fast, the question of whether and to what extent DAHA Accreditation need to be COVID-proofed will not arise in the same way.

124 www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabuseduringthecoronaviruscovid19pandemicenglandandwales/november2020

125 <https://www.unwomen.org/en/news/in-focus/in-focus-gender-equality-in-covid-19-response/violence-against-women-during-covid-19>

7 Conclusions

...from a victim-survivor point of view, it's much better if the housing provider knows that they don't have to just make them homeless [external stakeholder staff member, interviewed 2021].

I think in terms of really improving the priority that housing associations and providers give to this issue, the standards that they should be meeting, the level of identification that many have reported, that they now see after DAHA Accreditation, I think that's really unique [external stakeholder staff member, interviewed 2021].

This report is not a simple and straightforwardly glowing endorsement of DAHA Accreditation, but it would have little credibility and little sense of objectivity if it reported that nothing was wrong or that nothing could be improved. No policy, model or practice emerges in a perfect form that requires no modification or re-thinking. A similar revolution in practice in the homelessness sector, Housing First, for all of the evidence around effectiveness and cost effectiveness, lost some credibility because it was sometimes described as (effectively) perfect, when as with everything else, it does have inherent limits and some room for improvement.¹²⁶

There is little bad news about DAHA Accreditation. Information and communication probably need to be enhanced and improved as there is evidence of too little knowledge of the assistance available from DAHA Accredited housing providers being reported by both people with lived experience of domestic abuse and those providing services.

Accreditation is also dependent on collaboration with key partners, including other housing providers, health, social care, mental health and specialist domestic abuse services, it will not function properly in isolation, because other agencies will often need to be involved if a woman has to move because of abuse and/or she has complex needs.

The strategic concerns raised by some external stakeholders in this policy space also need to be taken seriously, if there is even a small risk that DAHA seems both dominant and remote, or is perceived as pursuing its own agendas in ways that have negative consequences for other stakeholders. Any risk of infighting should be avoided within a sector that has much bigger problems to deal with, around getting anything like sufficient funding for domestic abuse services and dealing with the huge shortfalls in social and affordable housing supply that can only exacerbate the challenges in reducing the links between domestic abuse and homelessness. DAHA itself also needs to be properly resourced to take on what has rapidly become a national role that is significantly influencing policy across social housing sector, in local government, in central government and the homelessness sectors in Europe, Australia, Canada and beyond.

There is much to praise in what has been achieved by DAHA Accreditation and the scale and importance of what has been achieved to date must be clearly and unambiguously acknowledged. The costs of Accreditation in a financial sense are very small relative to the potential gains in reducing the human, social and economic costs of domestic abuse.

Experience of implementing DAHA Accredited services in the two housing providers who supported this research has been extremely positive and while DAHA Accreditation will not provide a perfect or permanent solution to every instance of domestic abuse, the reports from women with lived experience who have used these services were full of praise. Both social landlords and external stakeholders view DAHA Accreditation as more than paying for itself because of the potential reductions in housing management activity that was hitherto focused on processing issues that were sometimes being mislabelled as rent arrears, nuisance and property damage, while there are expected efficiency gains for social landlords and local authorities in respect of homelessness prevention.

126 Pleace, N. and Bretherton, J. (2013) The Case for Housing First in the European Union: A Critical Evaluation of Concerns about Effectiveness *European Journal of Homelessness* 7(2), pp. 21-41.

Equally importantly, there is evidence of what may be an emergent change in culture, linked to Accreditation (and in one case re-Accreditation) shifting the ways in which housing providers perceive and respond to domestic abuse. The ambitions of DAHA to extend Accreditation across housing providers and into the private rented sector could be instrumental in shifting perceptions and responses to domestic abuse going forward.

DAHA Accreditation did not happen in a vacuum. There were systems in place before it arrived and those systems did vitally important work, dating back to what still, in the current context, were remarkably progressive homelessness laws that created specific protections, centred on the right to a safe and secure home, for people at risk of domestic abuse in 1977. DAHA Accreditation has created a sense confidence at multiple levels, a new form of service response from social landlords had often helped women protect and recover their lives and support the recovery of their self-esteem and wellbeing. Housing providers were also reporting a greater degree of assurance in how to respond to domestic abuse when it arose and these ideas about standardised, person-centred services were having a wider impact across the sector as a whole. The crucial link between a secure, adequate, affordable home and preventing and reducing domestic abuse has also been placed at the heart of policy in a new way.

Standing Together Against
Domestic Abuse is a national
charity bringing communities
together to end domestic abuse.