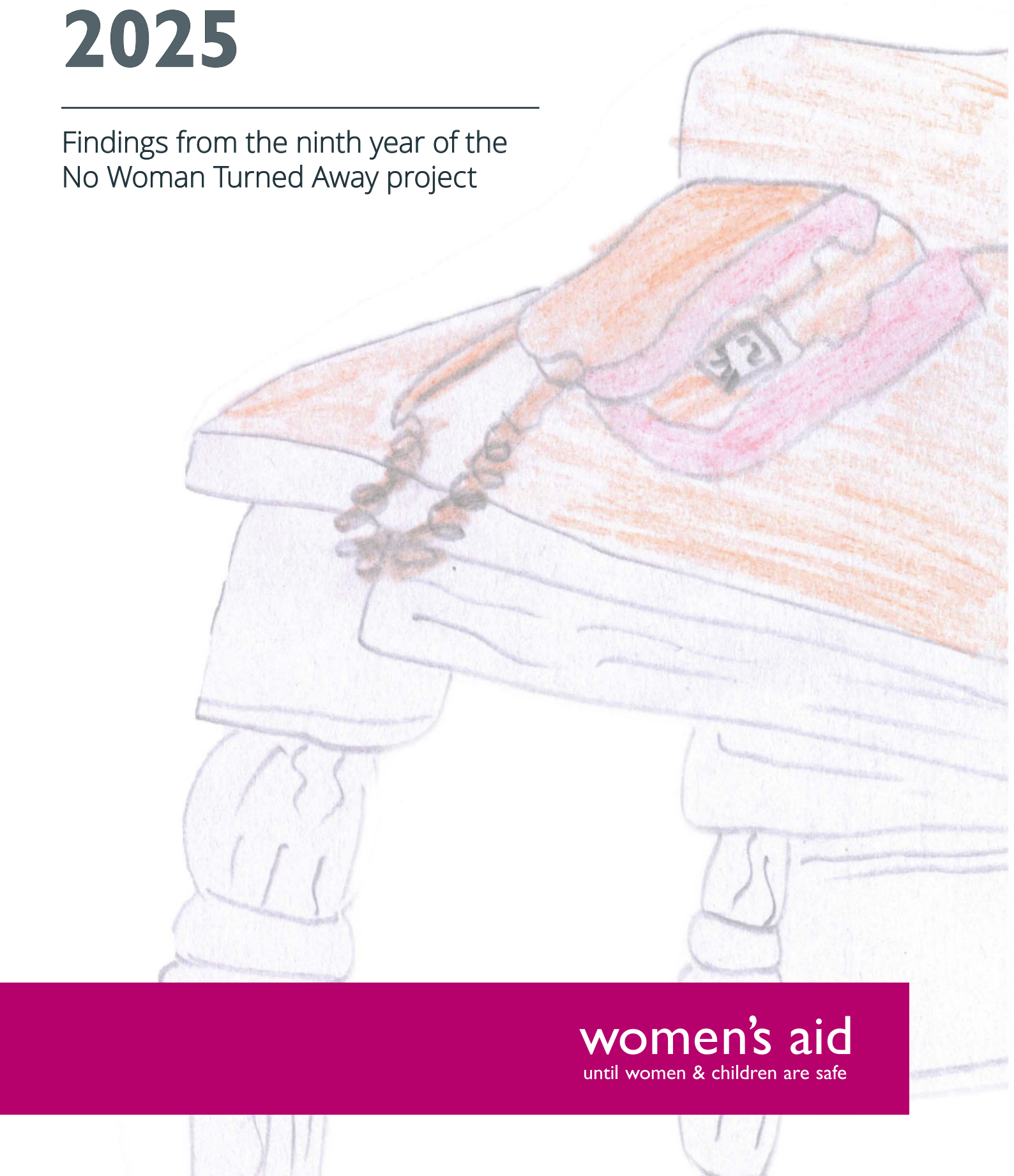
NOWHERE TO TURN 2025

Findings from the ninth year of the
No Woman Turned Away project



women's aid
until women & children are safe

Author

Jessica Street
Research and Evaluation, Women's Aid Federation of England (WA)

Published by: Women's Aid Federation of England, PO Box 3245, Bristol, BS2 2EH.

© Women's Aid 2025

Acknowledgments

We would like to express our deepest gratitude to the women who were supported by the No Woman Turned Away (NWTA) project and who provided the data and case studies that this report draws on. Thank you to the survivor who participated in an interview and bravely shared her experiences, whose insights have been invaluable in informing this report. Thank you to the two local domestic abuse services who shared their experiences of supporting survivors and working with the NWTA project.

Thank you to the NWTA specialist practitioners for the vital support they deliver to survivors, and for their expertise and insights in informing this report. Thank you to Women's Aid's wider direct services team for their invaluable contribution to the NWTA project. With thanks to the research and evaluation team and to colleagues across Women's Aid for their input and support with this report.

We are extremely grateful to the Ministry of Housing, Communities and Local Government (MHCLG) for continuing to fund the NWTA project. This funding has provided vital support for women who face structural inequalities and barriers to accessing safe accommodation, and detailed monitoring of the journeys of survivors seeking safety from domestic abuse.

Please cite this report as:
Women's Aid. (2025) *Nowhere To Turn, 2025: Findings from the ninth year of the No Woman Turned Away project.* Bristol: Women's Aid.

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

We are a federation of 183 organisations which provide over 300 local lifesaving services to women and children across the country. We provide expert training, qualifications and consultancy to a range of agencies and professionals working with survivors or commissioning domestic abuse services and award a National Quality Mark for services which meet our quality standards.

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

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

Women's Aid Federation of England is a registered charity in England & Wales (1054154) and a company limited by guarantee in England & Wales (3171880).

Contents

Foreword 4

Executive summary 6

Glossary 10

Introduction and methodology 13

Part 1: How effective is the NWTA project in supporting survivors to mitigate and navigate barriers to accessing refuge and other safe accommodation? 16

1.1: About the survivors supported by the NWTA project 16

1.2: The role of the No Woman Turned Away project within the domestic abuse sector 21

1.3 Outcomes of support for survivors 29

1.4 The NWTA practitioners played a significant role in supporting survivors with NRPF to secure accommodation outcomes 36

Part 2: What do the findings tell us about the specific experiences of and barriers faced by survivors with insecure immigration status in accessing safe accommodation? 38

2.1 Experiences and outcomes of migrant survivors with NRPF 38

2.2 Statutory children's services and barriers to safe accommodation 42

2.3 The MVDAC has replaced the DDVC, with significant implications 45

Recommendations 48

Conclusion 52

References 53

Appendices 55

Foreword

Farah Nazeer
CEO, Women's Aid

Every year, Women's Aid's Nowhere to Turn report sets out the harrowing experiences of women and children survivors at the sharpest edge of the national emergency of domestic abuse.

The report draws on insights from our unique No Woman Turned Away (NWTA) project, which provides a lifeline for women and children who have often been failed by other agencies and authorities to flee abuse and access safety. The project delivers one-to-one support to survivors who face additional barriers and structural inequalities in fleeing abuse and rebuilding their lives. It is a critical component in the national framework of domestic abuse services and is utilised by many local services across the country, including many of Women's Aid's own members. The number of women supported by the project increased by an astonishing 67.6% in 2024, highlighting the concerning gap in statutory support available to marginalised women and children in these life-threatening situations.

Our 2025 report continues to explore the evolving barriers and structural inequalities faced by marginalised survivors. These barriers are wide-ranging and include a wholly inadequate level of funding for refuges and community-based support services; unsafe responses from statutory services; and hostile immigration policies that hinder survivors' access to safety. In the context of this government's welcome commitment to halve violence against women and girls (VAWG) over the next decade, it is vital that these barriers to safety and support are understood and addressed if we are truly to see a step change in the prevalence and impact of VAWG in this country.

First, we have found that there is a major shortage of refuge spaces which can accommodate women with diverse support needs. For nearly a quarter (23.7%) of survivors supported by NWTA in 2024, no suitable refuge vacancies were available on at least one occasion when practitioners searched the UK VAWG directory of services.

Barriers to accessing refuge mean that women and children face increased risk of further abuse and hardship – this is not conducive to meeting this government's express commitment of

halving VAWG in a decade. Almost one-quarter (24.0%) of women who struggled to access safe accommodation experienced further abuse from the perpetrator, 13.2% of women did not have money to pay for essentials, and a staggering 8.8% of women slept rough, up from 2.9% the previous year. Support from the NWTA project enabled almost half (48.0%) of women to access a safe place to stay and over half of women (55.4%) felt safer by the end of support.

The percentage of women supported by the NWTA project who have no recourse to public funds (NRPF) has increased year-on-year since 2020, with over half (50.6%) of survivors supported in 2024 having NRPF. This year's report explores the expansive barriers faced by these women and their children. This includes the impact of the changed process around accessing benefits for migrant survivors – replacing the Destitute Domestic Violence Concession (DDVC) with the Migrant Victims of Domestic Abuse Concession (MVDAC). This has led to more refuges declining referrals for survivors with the concession.

The introduction of the flawed MVDAC process, coupled with the national shortage of legal aid solicitors and free immigration advice services, is creating a perfect storm for survivors with NRPF. Accessing immigration advice from a qualified professional is essential for migrant survivors. However, as our report highlights, this is out of reach for many for these women, who were frequently forced to accept immigration advice from unqualified professionals. This advice was often inaccurate and for some women, these professionals also submitted immigration applications on their behalf without accessing regulated advice. This can have serious and irreversible implications on survivors' immigration status and ability to access to financial support.

This report lays bare the reality that statutory services are frequently failing to meet their duty to support survivors and the NWTA practitioners play a key role in holding these services to account. Over two-thirds (67.4%) of inadequate and unsafe responses to survivors recorded by Women's Aid's direct services were regarding statutory services, highlighting an urgent need for specialist and mandatory training. Despite the Domestic Abuse Act (2021) recognising children as victims in their own right, for 61.5% of families with no recourse to public funds (NRPF), children's services failed to provide adequate support including accommodation. Concerningly, this report provides clear evidence that the actions of children's services are putting women and children with NRPF at increased risk of abuse. NWTA practitioners are often picking up the pieces, playing a key role in informing survivors of their rights and, sometimes with the support of solicitors, ensuring that statutory services meet their legal duties.

This report shows us that there are significant failings from statutory services and the MVDAC process that are acting as barriers for women and children trying to flee abuse. Whilst we welcome the government's commitment to halving VAWG in a decade this report shows that much remains to be done. These findings, alongside the recommendations of this report, are crucial to ensuring women, especially those with no recourse to public funds, can get the support they need when they need it. I hope you find this report informative and encourage you to look beyond it at the resources Women's Aid has available, such as training courses to encourage conversation with young people, promote their understanding of healthy relationships and of course encourage critical thinking.

Executive summary

The NWTA project supports survivors to navigate barriers to fleeing abuse and accessing safe accommodation by working directly with survivors and collaborating with, supporting and challenging other services. This report evaluates the NWTA project in 2024 and utilises insights from the project to inform research on the experiences of survivors facing additional barriers to accessing safety and support. This year's report includes an in-depth exploration of the experiences of survivors with insecure immigration status, the impacts of the Migrant Victims of Domestic Abuse Concession (MVDAC) and the vital need for improved responses from statutory services.

67 Women's Aid member services referred survivors to the NWTA project in 2024.

39 (58.2%) of these services were **'new referrers'** and had not made referrals in 2023.

342 women engaged with and completed support from the NWTA project in 2024, a 67.6% increase compared with 2023.

Women received a range of support from the specialist practitioners including:

Survivors had a range of support needs and the percentage of women with no recourse to public funds (NRPF) has increased year-on-year since 2020.

The most common reasons for referral were:

51.5% NRPF (an increase of 6.4 percentage points from 2023)

37.1% mental health support needs

19.6% substance use support needs

15.5% language or cultural support needs

15.2% one or more disabilities

This year's report also recorded the barriers experienced by women with a **disabled child** and women who had made a **recent suicide attempt**.

There is a significant shortage of refuge spaces able to accommodate women with diverse characteristics, circumstances and support needs.

For **23.7%** of women, the NWTA practitioners searched Routes to Support **at least once** to try to find a suitable refuge vacancy and **none were available**.

Women experienced further abuse and hardship while waiting for refuge.

28.4% spent time **sofa-surfing**, up from **17.2%** in 2023.

24.0% experienced **further abuse** from the perpetrator.

7.0% experienced abuse from (an) **additional** perpetrator(s).

13.2% did not have **enough money** to pay for essentials.

13.2% were **scared** to go outside.

8.8% slept rough, up from **2.9%** in 2023.

Statutory services often failed to meet their legal duty to support survivors and the NWTA practitioners played a key role in holding these services to account.

Over two-thirds (67.4%) of inadequate and unsafe responses to survivors recorded by Women's Aid direct services were regarding **statutory services**.

24.7% of failings recorded were regarding **police**, including failure to arrest perpetrators and giving advice which put survivors at further risk.

81.8% of failings recorded about local authority safeguarding teams were regarding **children's services**.

The NWTA practitioners inform women of their rights and, sometimes with the support of solicitors, ensure statutory services meet their legal duties.

By the end of support, 60.5% of women had at least one positive outcome.

Almost half (48.0%) of women had a new housing outcome including:

refuge (22.5%)

emergency accommodation (18.7%)

private rental (4.4%)

Over half of women (55.4%) felt **safer**.

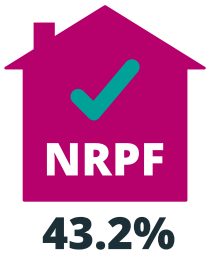
The MVDAC replaced the DDVC[1] in 2024, increasing the risks for survivors and exacerbating barriers to accessing refuge.

Changes to the concession made dependants on their partner's student or worker visa eligible for the MVDAC but not the DA Rule. These survivors are at risk of having no further immigration route when the MVDAC expires. It is crucial that survivors access immigration advice before making an application, but many are unaware of this or unable to access advice.

Refuge workers are now more uncertain whether survivors with the concession can apply for the DA Rule. This has led to **more refuges declining referrals for survivors with the concession** or requesting a solicitor is in place to make a further immigration application and/or the survivor is already accessing benefits.

There is a **national shortage of legal aid solicitors and free immigration advice services**. The NWTA practitioners successfully signposted or referred many survivors to immigration advice; however, less than half (47.4%) accessed advice by case closure, highlighting that significant barriers remain even with specialist support.

Professionals who are not regulated to provide immigration advice gave advice to 29 survivors and for a quarter (24.1%) of these, the advice was inaccurate. Non-regulated professionals submitted immigration applications on behalf of 12 survivors. This is illegal and has serious implications on survivors' immigration options.



43.2%

The NWTA team delivered support which directly contributed to accommodation outcomes for 43.2% of survivors with NRPF.

For 61.5% of families with NRPF, **children's services failed to provide adequate support** including failure to fund accommodation. For 35.7% of families where children's services funded accommodation, the accommodation was unsuitable.

For at least nine women with NRPF, the **actions of children's services put them at increased risk of abuse.**

1 The Migrant Victims of Domestic Abuse Concession (MVDAC) replaced the Destitute Domestic Violence Concession (DDVC) in 2024. The MVDAC allows survivors who have leave to enter or remain in the UK as a partner to gain temporary leave to remain in their own right and access to public funds if their relationship has broken down due to domestic abuse. Under the MVDAC, dependent partners of a migrant in the UK on a worker or student visa and people with pre-settled status based on their partner as a family member or joining family member, were made eligible for the concession.

RECOMMENDATIONS

The NWTA project supports Women's Aid to identify emerging issues from across the country and identify appropriate recommendations to address these issues.

Statutory agencies:

1. All statutory service staff working with survivors should receive training developed and delivered by specialist domestic abuse organisations. Training should align to the legal definition of domestic abuse, be refreshed regularly and respond to the full breadth of survivors' needs including survivors with insecure immigration status.
2. Commissioners should undertake mandatory, regular training, developed and delivered by specialist organisations, on commissioning survivor-centred support.
3. The impact of this training should be evaluated to ensure statutory services meet their legal duties to survivors.

Local domestic abuse services:

1. Ensure frontline workers access training on supporting women with insecure immigration status.
2. Ensure frontline workers support survivors to access immigration advice from a qualified professional and only give advice themselves where they are qualified and regulated to do so.
3. Develop funding pots to support women with NRPF while they receive support to access public funds.
4. Where appropriate and possible, refer survivors to 'by and for' services.
5. Refer women to the NWTA project and work together with the NWTA practitioners to support women.

Ministry of Housing, Communities and Local Government:

1. Continue to work with Women's Aid to develop and resource the NWTA project and support the implementation of recommendations from the Nowhere to Turn reports.
2. Implement reforms to the oversight of the statutory duty to ensure it is delivered in line with statutory guidance, delivers value for money and meets unmet need.
3. Consider commissioning a mapping exercise on the availability of legal advisors.

HM Treasury:

1. Invest a minimum of £502 million per year for specialist domestic abuse services in England. £150 million should be ring-fenced for 'by and for' services, £222m for refuge services and £280m statutory funding for community-based support services.
2. Introduce a children and young people (CYP) Support Fund of £46 million.

Home Office:

1. Abolish the NRPF condition for all survivors. Extend the eligibility of the MVDAC and DA Rule to all survivors and extend the MVDAC from three to six months.
2. Fund training on supporting survivors with insecure immigration status for staff at statutory services and local domestic abuse services.
3. Ensure Home Office immigration officials receive training on domestic abuse and sexual violence, delivered by specialist services.
4. Guarantee multi-year funding for the Flexible Fund beyond 2026.
5. Build on the pilot of Raneem's Law to ensure that survivors are protected and perpetrators are held to account.
6. Implement a firewall between immigration enforcement and statutory services.

Ministry of Justice:

1. Reinstate legal aid for alleged perpetrators and all survivors and ensure that there are sufficient legal aid solicitors to meet demand including immigration solicitors.
2. Ensure funding for VAWG funds and programmes are protected and increased in line with demand, population changes and inflation.

For more information on the NWTA project, please visit the Women's Aid website.

Copies of all editions of the Nowhere to Turn report series can be downloaded for free online.

For information on training delivered by Women's Aid, please see our website or email us.

Glossary

Asylum: People must apply for asylum if they need to stay in the UK as a refugee. To be eligible for asylum, applicants must have left their country and be unable to go back because of fear of persecution due to race, religion, nationality, political opinion, or membership of a particular social group and must be unable to live safely in any part of their home country. Asylum applicants may be entitled to housing and money, access to state education for their children and healthcare from the National Health Service (NHS).

Biometric residence permit (BRP): Used to confirm a person's identity and includes immigration status, conditions of stay, and whether a person can access public funds. BRP cards have been replaced by eVisas, an online immigration status record.

Community care solicitors: Solicitors who work to ensure that people can access the legal support they need including to challenge incorrect or illegal decisions made by public services such as social care and the NHS. This can include challenging incorrect assessments or refusal to provide accommodation and care.

Destitute: A person is considered to be destitute if they do not have the financial means to meet their basic needs.

Destitute Domestic Violence Concession (DDVC): Gave temporary permission to stay in the UK and access public funds if a person's relationship broke down because of domestic abuse and they were on certain types of partner or spousal visas. In 2024, the Migrant Victims of Domestic Abuse Concession (MVDAC) replaced the DDVC.

Domestic Abuse (DA) Rule (Appendix Victim of Domestic Abuse – VDA – of the Immigration Rules): People on certain types of visas can apply for permission to settle in the UK permanently if their relationship has broken down because of domestic abuse. Applications are called a SET(DV), and decisions are usually made within six months but can take longer. The applicant must have, or have last been granted, leave to enter or remain in the UK under a specific visa category. The applicant must pay a specified fee unless they do not have enough money to support themselves, in which case they can apply for a fee waiver.

EU Settlement Scheme (EUSS): People from an EU country, Switzerland, Norway, Iceland or Liechtenstein, may be able to apply to the EUSS to continue living in the UK. Individuals are given either pre-settled status, or settled status if they have lived in the UK continuously for five years. People with pre-settled or settled status have the right to work in the UK, enrol in education, and may be able to access public funds if eligible. However, people with pre-settled status must demonstrate that they have a qualifying 'right to reside' to access benefits.

Fee waiver: The Home Office charges a fee for most applications for permission to enter or stay in the UK. If a person cannot afford to pay the fee, they can apply for a fee waiver. Only applications that allow people to access their rights under the European Convention on Human Rights can apply for a fee waiver.

Home Office: The lead government department for immigration and passports, drugs policy, crime, fire, counter-terrorism and police. The Home Office is the government department responsible for deciding which foreign nationals can remain in the UK, and the conditions upon which they can stay.

Human rights claim: A type of immigration application that a person can make if they believe that to remove them from the UK or refuse them entry to the UK would be unlawful under section 6 of the Human Rights Act 1998.

Immigration status: The type of permission people have (or do not have) to stay in the UK. For example, asylum seeker, student visa holder, and indefinite leave to remain.

Indefinite leave to remain (ILR): Gives permission to stay in the UK with no time limit.

This can be revoked if the person commits a serious crime, or can be lost if the person leaves and stays outside the UK for more than two years.

Judicial review: A type of court proceeding where a judge decides whether a decision or action made by a public body, such as a local authority, was lawful.

Leave to remain: Permission to stay in the UK. Sometimes this has a time limit and/or conditions on what a person is entitled to in the UK including access to benefits.

Leave to remain as a parent (family visa): Individuals may be eligible for limited leave to remain if they have a genuine parental relationship with a child. The child must be living in the UK and have a particular type of immigration status including (but not limited to) having British citizenship or be settled in the UK.

Legal aid: When a person needs support from a legal professional but is not able to pay, they may be able to get free advice or representation.

Limited leave to remain (LLR): Permission to stay in the UK for a specified limited period.

Local authority: Local authorities are responsible for the day-to-day running of public services in a local area including housing and social services.

Migrant Victims of Domestic Abuse Concession (MVDAC): The MVDAC replaced the Destitute Domestic Violence Concession (DDVC) in 2024. The MVDAC allows survivors who have leave to enter or remain in the UK as a partner to gain temporary (three-months) leave to remain in their own right and access to public funds if their relationship has broken down due to domestic abuse. During this period, the individual must apply for indefinite leave to remain under the Domestic Abuse (DA) Rule (if eligible), apply for another type of permission or make arrangements to leave the UK. Under the MVDAC, dependent partners of a migrant in the UK with permission on a worker or student visa and people with pre-settled status based on their partner as either a family member or a joining family member, were made eligible for the concession.

No recourse to public funds (NRPF): If a person's permission to live in the UK includes the condition 'no recourse to public funds' then that person is not able to claim most state benefits.

Outreach service: A type of domestic abuse service which is not offered in the project's building and does not have a set number of spaces. The support is broad and not focused on accommodation and survivors can access these services in community centres, other venues or the survivor's home.

Public funds: Certain benefits including homelessness assistance and social housing.

Refuge: Accommodation and support for survivors experiencing domestic abuse which is tied to that accommodation. Residents receive a planned programme of therapeutic and practical support from staff and access peer support from other residents.

SET(DV) application: Under the DA Rule, individuals on certain types of visas can apply for permission to settle in the UK permanently if their relationship has broken down because of domestic abuse. This application is called a SET ('Settlement') (DV).

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

Survivor: Women's Aid uses the term 'survivor' rather than 'victim' as it speaks to the strength of people experiencing domestic abuse, is less criminal justice focused and more empowering.

Visa: A visa is any grant of leave to enter or remain. Historically they were issued as stamps/vignettes in passports, paper 'immigration status documents' or biometric residence permits. Visas are now issued electronically under the eVisa scheme.

Key findings from the **No Woman Turned Away** project in 2024

342 women engaged and completed support between 1st January and 31st December 2024, a **67.6% increase** compared with 2023.

173 had **no recourse to public funds**[2].

173 were from **Black and minoritised backgrounds,** an **increase** of **8.4%.**

32.5% had **disabilities,** up from **28.4%** in **2023.**

The percentage of women with NRPF has **increased year-on-year** since 2020, with an increase of **6.4 percentage points** in 2024 compared with 2023.

Women experienced further abuse and hardship while waiting for refuge.

82 experienced **further abuse** from the perpetrator(s) (24.0%).

24 experienced abuse from (an) **additional** perpetrator(s) (7.0%).

30 women **slept rough** (8.8%), up from 2.9% the previous year.

45 did not have **enough money** to pay for essentials (13.2%).

45 were **scared** to go outside (13.2%).

97 spent time **sofa-surfing** (28.4%), a large increase from 17.2% in 2023.

Statutory services often failed to meet their legal duty to support survivors and gave unregulated immigration advice.

67.4% of inappropriate responses to survivors recorded by Women's Aid direct services were regarding **statutory services**.

For **51.7%** of survivors who received **unregulated immigration advice**, the advice was given **by a statutory service**.

Outcomes of support from the NWTA project.

164 women (48.0%) had a new housing outcome.

77 women (22.5%) were accommodated in a **refuge.**

64 women (18.7%) were accommodated in other **emergency accommodation.**

2 176 (51.5%) women had NRPF as a referral reason. However, three of these women did turn out to have access to public funds.

Introduction and methodology

This report explores the journeys and experiences of survivors of domestic abuse who face additional barriers and structural inequalities to accessing refuge or other safe accommodation. The report also evaluates the No Woman Turned Away (NWTA) project's contributions to survivors accessing safe accommodation and examines its role within the national framework of domestic abuse services in England. This year's report includes an in-depth exploration of the experiences of survivors with insecure immigration status and considers the roles, actions and impacts of the services involved in supporting these survivors.

Aims and objectives of the NWTA project

The No Woman Turned Away (NWTA) project has been funded by the Ministry of Housing, Communities and Local Government (MHCLG) since 2016 and provides dedicated support to survivors facing structural inequalities[3] and barriers to accessing refuge and other safe accommodation. The NWTA project employs specialist domestic abuse practitioners who provide telephone, text and email support to survivors. The project also employs a senior specialist practitioner[4] and a research and evaluation officer. NWTA is part of Women's Aid's direct services team which delivers frontline support to survivors, family and friends of survivors, and professionals who support survivors.

Positioned within a national domestic abuse organisation and as part of a federation of local services across England, the NWTA team utilise their unique position to establish referral pathways and raise awareness of the project. This position also supports NWTA to gather data on the experiences of survivors on a national scale to gain important insights into national patterns and themes on barriers to accessing safe accommodation and support in a way other services are not able to. Via the Nowhere to Turn report series and our other work, Women's Aid's research and evaluation team work with the NWTA practitioners to utilise these insights to inform the development of policy and practice to address these barriers.

The women supported by the NWTA project often face extremely high barriers to accessing safety, and the NWTA practitioners play a vital role in working alongside, informing and challenging other services to ensure women and their children access the support they desperately need.

3 Structural inequality describes inequality in opportunity, treatment or status for some groups of people which is embedded in social structures such as health, education and justice and which reflect and reinforce ingrained prejudices. The impact on individuals can include restricted opportunities and choices and the creation of barriers to accessing services.

4 Thank you to the Sara Charlton Foundation and OKA for providing funding for the senior specialist domestic abuse practitioner.

AIM

To improve outcomes and reduce future harms for survivors of domestic abuse facing additional barriers to accessing refuge and other safe accommodation after fleeing domestic abuse.

OBJECTIVES:

- To advocate for survivors and successfully refer them into refuge services.
- To support survivors who are unable to access refuge to access longer-term housing or local authority emergency accommodation.
- To support survivors to achieve a range of other outcomes to aid their recovery from domestic abuse.
- To understand and identify, through the experiences of staff and service users of the NWTA project, emerging barriers and trends which impact survivors seeking refuge and other safe accommodation.
- To advocate with institutional stakeholders to recognise the importance of addressing barriers to support and take action to reduce these barriers.

RESEARCH QUESTIONS:

Through the following research questions, this report explores if and how the NWTA project has met these objectives during the year 2024:

1. How effective is the NWTA project in supporting survivors to mitigate and navigate the barriers they experience to accessing refuge and other safe accommodation?

- What are the barriers that survivors experience to accessing refuge and other safe accommodation and how are these impacted by policy?
- To what extent does support from the NWTA project result in survivors securing access to safe accommodation?
- To what extent are survivors supported to achieve a range of other outcomes to aid their recovery from domestic abuse?

2. What do the experiences of practitioners working on the NWTA project and the survivors they support tell us about:

- The specific experiences of and barriers faced by survivors with insecure immigration status in accessing safe accommodation?
- The impact of the Migrant Victims of Domestic Abuse Concession (MVDAC) (which replaced the Destitute Domestic Violence Concession (DDVC)), on survivors' journeys to accessing safe accommodation?

Data sources used in this report

1. Quantitative data collected by the NWTA specialist practitioners:

The quantitative data presented in this report was recorded by the NWTA specialist practitioners in Women's Aid's case management and outcomes measurement system, On Track[5]. Data covers the period 1st January 2024 – 31st December 2024 and was collected on demographics, support needs, experiences of abuse, barriers to accessing safe accommodation, and outcomes.

The quantitative data in Part 2 of this report was collected by reading the On Track case files for survivors who had no recourse to public funds (NRPF) at the point of referral to NWTA. This information was used to write a case study of each survivor's journey[6] and fill in quantitative data fields on accessing immigration advice, making immigration applications, accessing accommodation, accommodation funding, and experiences with statutory services. Data for 173 survivors was included in the final data set[7] for Part 2.

2. Qualitative data collected through interviews:

An interview with a survivor supported by the NWTA project[8]

One survivor who accessed support from the NWTA project was recruited and interviewed for this report. The interview explored the survivor's journey between fleeing abuse and accessing safe accommodation and topics included accessing immigration advice and making immigration applications; support accessed from local domestic abuse services and statutory services; and the survivor's experience accessing support from NWTA. The pseudonym 'Sarvani' has been used for this survivor.

Interviews with two domestic abuse support workers from referring organisations

The support workers were recruited from two different Women's Aid member organisations who made referrals to NWTA in 2024 and who had worked together with the NWTA practitioners to support survivors. One of the support workers delivers community-based support at a specialist 'by and for' service supporting Black and minoritised survivors. The other support worker is based in a refuge service and had referred survivors to NWTA who had initially accessed refuge or temporary accommodation but were no longer able to stay. The interviews explored the workers' experiences of supporting survivors facing additional barriers to refuge and survivors with insecure immigration status in particular, working with statutory services, and making referrals to and working with the NWTA project.

An interview with a NWTA specialist practitioner

An interview with a NWTA specialist practitioner explored their experiences of supporting survivors, with a focus on survivors with insecure immigration status. The interview also explored working with local domestic abuse services, working with and challenging statutory services, and improvements that could be made to the NWTA project.

Copies of all editions of *Nowhere To Turn* can be downloaded for free on our website.

5 All survivors whose data is used in this report gave consent to this being used for the purposes of research and fundraising.

6 It is important to note that we do not know what happened to survivors after their case with NWTA was closed including any further immigration applications submitted or accommodation accessed.

7 Three of the 176 survivors who completed support in 2024 and had NRPF as a referral reason did turn out to be entitled to public funds and were therefore not included in the data in Part 2 of the report.

8 This survivor completed support in January 2025. However, the majority of support from NWTA was delivered in 2024. The On Track data used in this report does not include data on the survivor interviewed.

PART 1

How effective is the NWTA project in supporting survivors to mitigate and navigate barriers to accessing refuge and other safe accommodation?

Part 1 of this report considers the first research question and explores how the NWTA project acts as tertiary prevention and support for survivors of domestic abuse by improving outcomes and reducing future harms. It also explores how the project is able to improve survivors' experiences of accessing statutory services.

1.1: About the survivors supported by the NWTA project

The NWTA project works with a unique cohort of women defined by the barriers they experience rather than their characteristics. This enables the project to support survivors who are marginalised at the point of fleeing and gather vital insights into the systemic barriers they face. For this reason, when we look at the numbers and characteristics of survivors referred to NWTA we are not looking at changes in prevalence of domestic abuse but in the numbers of survivors subject to systemic barriers.

More survivors were supported by the NWTA project in 2024

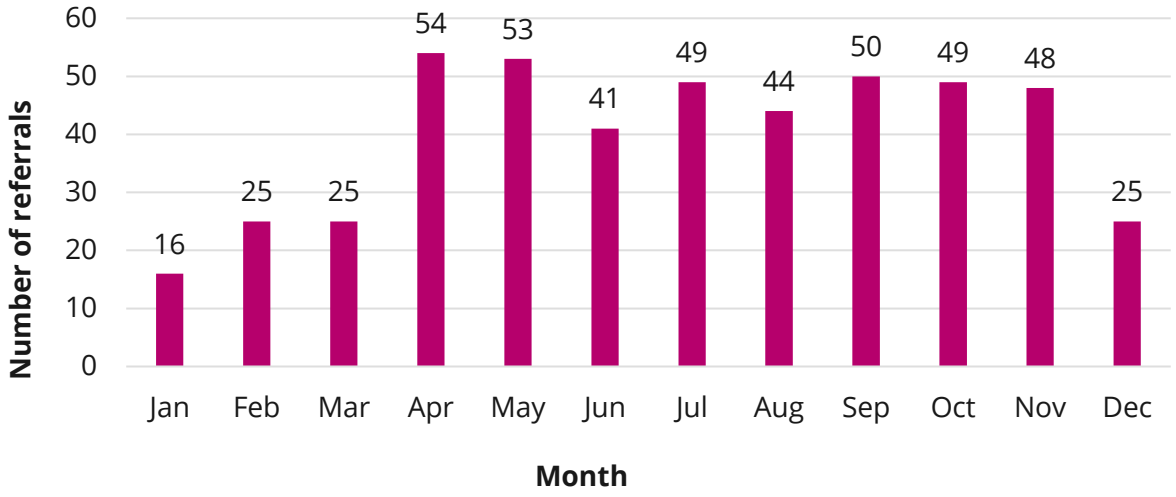
A total of 479 referrals were made to the NWTA project in 2024, a 41.7% increase compared with 2023. Of these, 71.0% of referrals were accepted. Of the referrals which were not accepted, the NWTA practitioners provided initial support to 78.8% survivors, via direct contact with women (34.3%) and/or with the referrer (77.7%) including emotional support, referral to and information about other services, and information about survivors' rights and options.

Graph 1 shows a significant increase in monthly referrals to the NWTA project from April 2024, following activities to increase awareness of NWTA. These activities included streamlining the referral process; the senior specialist practitioner chairing a panel at the Women's Aid National Conference in 2024; a series of social media posts on the NTWA project; and contacting local domestic abuse services to remind staff of the project. Referral numbers then decreased in December when the project closed over the winter break.

In 2024, Women's Aid member services made 57.0% of referrals to the project. These were made by 67 individual member services, 58.2% (39) of which were 'new referrers' (services that referred in 2024 but not in 2023). Women's Aid direct services made 18.6% of referrals, other domestic abuse and Violence Against Women and Girls (VAWG) services made 13.4% of referrals and agreed partner organisations such as the British Red Cross made 3.3% of referrals. Statutory services and other services made 7.7% of referrals.

The NWTA specialist practitioners supported 361 women, 342 of whom completed support, a 67.6% increase compared with 2023. Eight women exited the service twice (i.e., there were 350 exits altogether). **The quantitative data and case studies relate to the 342 women who completed support.**

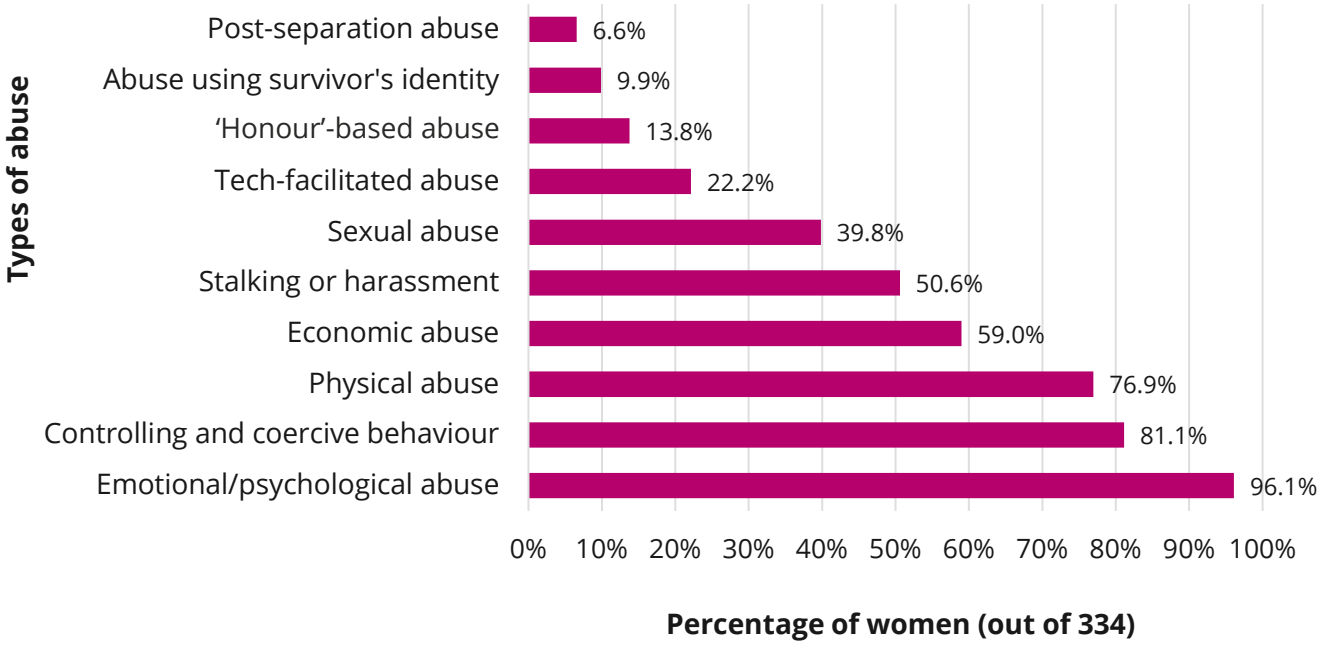
Graph 1: Referrals by month 2024



Survivors' experiences of abuse

Women experienced many types of abuse, mostly by male intimate partners. Over nine out of 10 (91.3%) perpetrators were men, and at least 80.7% of perpetrators were a current or former intimate partner[9]. For 13.5% of women, more than one perpetrator was recorded. The average length of time women experienced abuse for was four and a half years (54 months). The majority of women experienced emotional/psychological abuse (96.1%), coercive and controlling behaviour (81.1%) and physical abuse (76.9%) (**Graph 2**).

Graph 2: Types of abuse perpetrated against women supported in 2024[10]



9 For six perpetrators recorded in On Track, their relationship to the survivor was not recorded and the percentage of perpetrators who were the survivor's current or former intimate partner may therefore be higher.

10 This data is based on 334 women whose experiences of abuse were recorded in On Track.

Of the 321 survivors who experienced emotional/ psychological abuse, the perpetrator(s) made threats to kill 141 (43.9%) women. Perpetrators also threatened to kill a child or other family member and used gaslighting[11], verbal abuse and malicious reporting. For 44.0% (113) of survivors who experienced physical abuse, the perpetrator(s) used non-fatal strangulation. Other types of physical abuse included assault, drugging or spiking, false imprisonment and non-fatal suffocation. Of the women who experienced sexual abuse, 39.1% (52) experienced rape.

Twenty-two per cent (74) of survivors experienced abuse facilitated by technology including cyber-harassment and stalking and image-based abuse.

The NWTA practitioners support women with a range of characteristics, circumstances and support needs

Table 1 outlines the characteristics, circumstances and support needs of women supported in 2024. Over half of women (51.5%) had no recourse to public funds (NRPF). The percentage of women

Table 1: Characteristics, circumstances and support needs of women supported by the NWTA project (based on reason for referral)*

	Number of women	Percentage of women (out of 342)
Women with no recourse to public funds (NRPF)[12]	176	51.5%
Women with mental health support needs	127	37.1%
Women with substance use support needs	67	19.6%
Women with language or cultural support needs[13]	53	15.5%
Women with a disability	52	15.2%
Women who were tied to their local area[14]	32	9.4%
Women with an offending history	29	8.5%
Women with a disabled child	26	7.6%
Women previously evicted from refuge	17	5.0%
Women with four or more dependent children	16	4.7%
Women with (an) older male child(ren) (over 14 years)	12	3.5%

*Many women had more than one of the listed characteristics, circumstances or support needs.

11 Gaslighting includes making survivors question their own perception of events, for example questioning their memory of incidents and falsely accusing them of lying.

12 No recourse to public funds (NRPF) means no entitlement to the majority of welfare benefits. This is based on the reason for referral. Sometimes women who are referred on the basis of NRPF do turn out to be entitled to benefits and in 2024, three of the 176 survivors did turn out to have recourse to public funds.

13 This includes women who require an interpreter and/ or would prefer or be supported in a specialist 'by and for' refuge.

14 This means women who want to stay in the local area due to circumstances such as children's schools or medical care.

with NRPF has increased year-on-year since 2020, with an increase of 6.4 percentage points in 2024. The percentage of women with most other characteristics and circumstances listed in **Table 1** also increased in 2024 compared with the previous year. The highest increases were women with language or cultural support needs (8.6 percentage points), an offending history (5.6 percentage points) and mental health support needs (4.3 percentage points).

Almost one third of women (32.5%) had at least one disability and 15.2% of women faced barriers to accessing accommodation related to a disability. This includes mental health disabilities, physical disabilities, learning disabilities, long-term health conditions, and hearing disabilities[15]. Refuge vacancies suitable for wheelchair users dropped from 1.0% of vacancies in 2022-23 to just 0.7% of vacancies in 2023-24 (Women's Aid, 2025).

In recognition that some women with a disabled child experience barriers to accessing refuge (rather than or in addition to women themselves being disabled), this support need was added as a referral reason in the NWTA On Track system. In 2024, 7.6% of women had a disabled child and experienced barriers to accessing refuge. Children had physical disabilities, learning disabilities and neurodivergence including autism and ADHD.

Survivors' journeys into places of safety

Survivors often had difficult and dangerous journeys to accessing safe accommodation. Many experienced further abuse and hardship and stayed in a range of unsuitable places and spaces (**Table 2**).

Table 2: Where women stayed and what they experienced while waiting for a refuge space*

	Number of women	Percentage of women (out of 342)
Spent time in other emergency accommodation	122	35.7%
Spent time sofa surfing	97	28.4%
Experienced further abuse from the perpetrator(s)	82	24.0%
Was scared to go outside	45	13.2%
Did not have enough money to pay for essentials	45	13.2%
Spent time sleeping rough	30	8.8%
Spent time as an inpatient/overnight in hospital	25	7.3%
Experienced abuse from one or more additional perpetrator(s)	24	7.0%
Paid to stay in a hostel/B&B/hotel	12	3.5%
Spent time in mixed sex accommodation	11	3.2%
Called the police out to respond to an incident	9	2.6%
Was physically injured as a result of an assault by the perpetrator(s)	4	1.2%

*Some women spent time in more than one of these places and/or had more than one of these experiences while waiting for a refuge space.

15 A breakdown of women's disabilities can be found in Appendix A5.

Almost one quarter of women (24.0%) experienced further abuse from the perpetrator(s)

Women are most at risk when planning to leave the perpetrator(s) or have recently fled (Femicide Census, 2020). Twenty-four women (7.0%) experienced abuse from (an) additional perpetrator(s) including the primary perpetrator's relatives and men that women sofa surfed with. Four women (1.2%) were physically injured from an assault by the perpetrator(s). Forty-five women (13.2%) were scared to go outside and nine women (2.6%) called the police out to respond to an incident.

A large proportion (59.0%) of women experienced economic abuse and 13.2% of women did not have enough money to pay for essentials

As explored in our report on survivors' experiences of financial hardship (Women's Aid, 2022), women need essentials such as food and transportation to plan and flee abuse. Many women relied on food banks or vouchers from local domestic abuse services after fleeing. The most common reason that women applied for the Home Office Emergency Fund (now the Flexible Fund), which supports survivors with one-off payments, was that they were unable to purchase essential goods for themself and/or their child(ren) (Women's Aid, 2023a). This type of funding is vital to support women to flee abuse and meet their basic needs.

Many women were placed in unsuitable temporary accommodation

Over one-third (35.7%) of women stayed in emergency accommodation, which does not provide the safety and support from domestic abuse professionals needed to recover from abuse. Some women were placed in emergency accommodation close to the perpetrator(s) and were afraid to go outside. The support worker from the local 'by and for' domestic abuse service explained how a woman and child they recently supported were placed in a hotel close to the risk area:

> **"The local council put [the survivor] in a hotel, which was literally a corner away from the perpetrator's house… She was made to leave the following day and at 10am, she was standing outside the hotel waiting for the police to come pick her up. That wasn't really safe, you know… and she had a child with her."**
>
> *- local 'by and for' service support worker*

Some women stayed in emergency accommodation with poor living conditions that lacked basic amenities such as a kitchen, a bed, or sufficient space. See our Nowhere to Turn 2024 report for a deeper exploration of the experiences of women and children staying in unsuitable emergency accommodation (Women's Aid, 2024a).

A total of 28.4% of women sofa-surfed, up from 17.2% the previous year

Previous Nowhere to Turn reports explored how sofa-surfing is often problematic, with women experiencing overcrowding, broken friendships and further abuse including abuse from men they sofa surfed with (Women's Aid, 2019; Women's Aid, 2024a). Some women who sofa-surfed in 2024 described their friends and family being afraid for their own safety, fearing the perpetrator(s) would come to their address, and some asked the survivor to leave for this reason.

Thirty women (8.8%) slept rough, a significant increase from 2.9% in 2023

These women were street homeless and vulnerable to further abuse. Women slept in unsafe places and spaces including in car parks, parks, train stations and in their car, and some women slept in police stations.

Eleven women (3.2%) stayed in mixed sex accommodation

Following abuse by male perpetrators, many women feel unsafe in mixed sex accommodation

(Women's Aid, 2024a). The government homelessness code of guidance for local authorities asks housing authorities to seek to provide single-sex accommodation where this is required and available (Gov UK, 2018). After children's services told her to apply for asylum and then stopped funding refuge, the survivor we interviewed, Sarvani[16], was moved to mixed-sex Home Office accommodation. Sarvani described being approached by multiple men who she recognised from her home city:

> **"I met some of the [nationality] people who were living in the same city where my husband [was] living... So I was afraid if they [had] any connection with my husband ... whenever I went to the eating section, they're sitting in there and they [were] asking me lots of question and I was afraid... they asked me where my husband [is], why I am in here with my baby alone."**
>
> *- Sarvani, survivor supported by NWTA*

Sarvani was unsure if the men were the perpetrator's acquaintances and was afraid they would tell him where she was. Another woman supported in 2024 had several frightening experiences in mixed-sex accommodation including a man entering her room at night. The woman was there for three weeks with no contact from support services. These experiences highlight the potential dangers and emotional impacts of mixed-sex accommodation for survivors.

1.2: The role of the No Woman Turned Away project within the domestic abuse sector

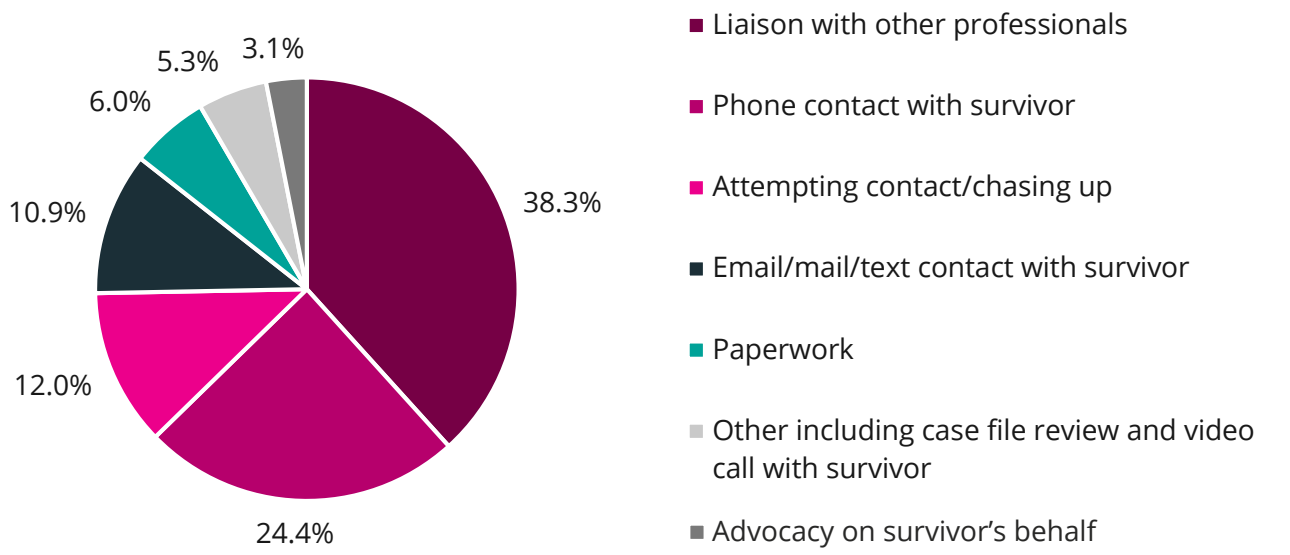
The NWTA project is a national intervention which builds on and complements Women's Aid's network of local frontline member services. The team have an enhanced understanding of this network and are able to refer to the most appropriate provider as well as explore a range of accommodation options with survivors. This support and advocacy during the search for safe accommodation and referral process/es is vital to achieving positive outcomes for survivors and is not something local services are funded to deliver. This means that the NWTA practitioners fill a significant gap in the sector and reduce unfunded work for local services.

Advocacy with other professionals

A key role of the NWTA project is advocating for other professionals to support survivors. **Graph 3 (on the next page)** shows that the largest part of the NWTA practitioners' time (38.3%) was spent liaising with other professionals, an increase of 7.4 percentage points compared with 2023. This included working with refuge staff to identify suitable vacancies, referring to local domestic abuse support, and liaising with statutory services including housing officers and social workers. This reflects the vital role that the NWTA practitioners undertake to ensure that women access the support they need.

16 This is a pseudonym.

Graph 3: The proportion of time spent providing different types of support in 2024



Survivors are often failed by statutory services and other services. In 2024, the NWTA project and wider Women's Aid direct services team recorded 89 incidents of the failings and negative responses that survivors experienced from other agencies. Over two thirds (67.4%) of incidents were regarding statutory services.

A key finding from the analysis of negative captures is that whilst statutory services and guidance attached to statutory duties exist with the intent to strengthen responses for survivors, this guidance is not always followed, resulting in further harms to women and children fleeing abuse.

Table 3: Negative captures by responsible agency

Agency	Number of negative captures recorded	Percentage of total (out of 89)
Local authority safeguarding	22	24.7%
Police	22	24.7%
Local authority housing team	13	14.6%
Housing association	4	4.5%
NHS	3	3.4%
Other	25	28.1%
Total	**89**	**100%**

Housing teams: at least 10 of the 100 women who contacted a local housing team were prevented from making a homelessness application

Since the Domestic Abuse Act (2021) and the amendment to the priority need for accommodation under the Housing Act 1996[17], local authorities must consider survivors made homeless due to domestic abuse an automatic priority. Despite this, women experienced unlawful delays in processing homelessness applications and were refused temporary accommodation. One housing team incorrectly advised a woman they needed police evidence of abuse, and another housing team refused to provide support unless further abuse occurred.

ADA'S STORY

Ada[18] had experienced coercive control, emotional and sexual abuse and was referred to the NWTA project by another VAWG service as they had been unable to refer her to refuge. Ada had a long-term health condition and received weekly hospital treatment, meaning she needed to stay in the local area. The local housing team initially refused support and then repeatedly failed to return phone calls or arrange appointments over several months. The NWTA practitioner collaborated with a local domestic abuse service to advocate for Ada to be accommodated. NWTA then sought advice from Shelter before contacting a solicitor to challenge the housing team, which eventually led to Ada accessing temporary accommodation. NWTA supported Ada to apply for housing benefit and ensured that she could access ongoing support from an outreach service.

The local 'by and for' domestic abuse support service worker described housing teams ignoring that local connection rules do not apply for survivors fleeing to another local authority:

> **"There have been instances where the client has come to, for example, [local] council, and they've been turned away because they said, 'well, you don't live here, so we don't have a duty of care' … I have to ring them over and over or send them emails and be like, you know, I need to speak to a manager because we can't leave this woman on the streets, right."**
>
> *- local 'by and for' service support worker*

This highlights the crucial role that domestic abuse workers play in advocating for local housing teams to meet their duty to survivors.

Social services often failed to adequately support survivors and their children

Under the Children Act 1989, Part III, Section 17[19], children's services have a duty to safeguard and promote the welfare of children in their area who are in need, and to promote the upbringing of these children by their families. The NWTA team supported many women with NRPF to challenge children's services when they refused to provide accommodation and subsistence support in line with this duty; see Part 2 of this report for details.

The NWTA team and the support worker from the local 'by and for' domestic abuse service reported that social services have declined referrals because survivors and/or their child(ren) were already accessing support from domestic abuse services.

17 Housing Act 1996, S. 189.

18 This is a pseudonym.

19 Children Act 1989, Part III, Section 17.

> **"Social service referrals have been declined quite a lot in my experience because, for example, it might be felt that the family is not needing social service support because there are these other agencies involved. However, we do have to challenge those decisions and explain that agencies like [local domestic abuse service] and [other local domestic abuse service] do work primarily with the mum and if it's small children we don't work with small children so social services need to be involved."**
>
> *- local 'by and for' service support worker*

Children's services have a responsibility to safeguard children and should not assume that all of a child's needs are being met by a domestic abuse service. Many domestic abuse services are not funded to support children, with only 69.6% of refuge services and 51.8% of community-based services offering a dedicated children and young people's (CYP) service in 2023-24 (Women's Aid, 2025).

Almost one-quarter (24.7%) of negative captures were regarding police

Of the women supported by NWTA in 2024, 41.2% contacted the police, including nine women who called the police out to respond to an incident while waiting for safe accommodation. Negative captures included failing to arrest perpetrators, downplaying risk, failure to collect evidence and giving advice which put the survivor at further risk.

With the aim of improving police responses to domestic abuse, in 2024 the government launched the pilot of Raneem's Law with a view to embedding domestic abuse specialists in 999 control rooms across the UK. Women's Aid welcomes this; however, domestic abuse specialists should be included at all stages of the police response, to ensure survivors are protected and perpetrators are held to account[20].

Statutory services do not provide consistent responses and are failing survivors

The NWTA practitioner and both domestic abuse workers told us that responses to survivors from statutory services in different local authorities can vary significantly, including when asked to fund accommodation for survivors with NRPF:

> **"They sometimes give her, for example, two-night stay and then ask her to leave… Sometimes I've seen this stay extended to accommodate for more time so she can flee properly, whereas sometimes they've literally been told you can't stay here anymore, you need to leave tomorrow at 10am. So it really depends on… maybe who you're dealing with on that day, I guess."**
>
> *- local 'by and for' service support worker*

> **"A lady we've got in at the moment, who's from [named local authority], they're paying [refuge cost] a week, for eight months. Whereas the [other named local authority] said point blank that they would not fund. So I think it depends on your local authority… I can't imagine [other named local authority] agreeing to fund a refuge regardless of the needs of the family."**
>
> *- refuge support worker*

The refuge worker explained the impact that this 'postcode lottery' of support can have on survivors' support journeys and the unfair nature of this:

> **"Sometimes it can be very odd that you are presented with these two cases and one is getting so much financial support… but then you have other women who are also extremely needy and could do with that real high intervention and it's just not there for them."**
>
> *- refuge support worker*

20 See the Women's Aid website for further information.

A significant part of the NWTA practitioners' work is advocating for local authorities to meet their duty to fund safe accommodation[21]. The practitioner explained that sometimes statutory services will meet their duty to the survivor following advocacy work, and sometimes councils will only respond to the involvement of a solicitor.

The practitioner gave an example of one case which highlighted both the harms done to survivors because of a lack of understanding within the local authority, and how the NWTA practitioners were able to achieve a positive outcome for the survivor using the judicial review process.

> **"We obviously provide advocacy… which often has a good response from councils. But yeah, if things go wrong and still advocacy is not sufficient, we would go down the route of judicial review… In one particular case, the woman was returned to the family home without any kind of support from children's services and just went back to her husband who was really abusive and physically assaulted her when she called the police. So we challenged them. Initially they placed her in temporary accommodation which wasn't suitable and then we went down the judicial review route and she was again housed in self-contained accommodation. [With] many services it is not until they hear about judicial review, or getting a solicitor involved, would actually start supporting the survivor."**
>
> *- NWTA specialist practitioner*

The NWTA team have built relationships with solicitors who they know may have capacity to support survivors, including community care solicitors, and contact housing and immigration groups for legal advice and to ask solicitors to take cases on. The NWTA practitioner and support worker from a local 'by and for' domestic abuse service both said that, from their experience, the main reasons that statutory services are often failing to support survivors are inadequate training and a lack of resources:

> **"Some workers have not received the training they need and may disregard the complexity of the cases or the needs of the woman… I think initial training for housing officers and social workers would be very, very beneficial. I honestly feel half of the time it's just that the worker doesn't understand the risks or doesn't really understand that domestic abuse may not be only physical… Social services and specifically councils, they need to work with very limited resources… so sometimes they can try and do their best to, you know, make survivors access other forms of support or try and find ways in which they can get away with not providing accommodation or other support."**
>
> *- NWTA specialist practitioner*

21 In 2024, 38.3% of the NWTA practitioner's time was spent liaising with other professionals.

Individual support to survivors

The second largest proportion of the NWTA practitioners' time was spent being in contact with women (35.3%) (see **Graph 3** on page 22), which is integral to ensure survivors are supported and understood (Women's Aid, 2023b).

Table 4: Areas of support delivered to women in 2024*

	Number of women	Percentage of women (out of 342)
Emotional support	262	76.6%
Referral and signposting	224	65.5%
Housing	220	64.3%
Immigration	124	36.3%
Safety planning	114	33.3%
Practical support	96	28.1%
Children	72	21.1%
Risk assessment	68	19.9%
Safeguarding	66	19.3%
Mental health	63	18.4%
Finances	57	16.7%
Criminal justice	33	9.6%
Other	29	8.5%
Physical health	25	7.3%
Parenting	23	6.7%
Family law	17	5.0%
Civil justice	14	4.1%
Drugs and alcohol	12	3.5%
Offending	5	1.5%
Employment, education and training (EET)	4	1.2%
Multi-agency risk assessment conference (MARAC)	1	0.3%
Sexual health	1	0.3%

*Most women received more than one type of support.

Emotional support

As shown in **Table 4**, the majority (76.6%) of women received emotional support[22]. An empathetic and understanding response from professionals is highly valued by survivors (see Women's Aid, 2022; Thiara and Harrison, 2021) and emotional support is vital for women who have fled their home and support networks. The first aspect of support the survivor we interviewed described was emotional support:

> **"She is so nice because whenever she talked to me, she talked to me very nicely. So it was emotional support for me, she helped me emotionally. Because talking is encouragement for me… As a victim of domestic violence, we are already suffering … She tried to know what type of help I need and how she can help me, and then she [did] help me."**
>
> *- Sarvani, survivor supported by NWTA*

Signposting

The NWTA project signposted and/or referred 65.5% of women to other services to ensure their needs were met by the most appropriate professionals. This included refuge and outreach services, statutory services, and immigration advice services.

Support to access safe accommodation

As the primary focus of the NWTA project, 64.3% of survivors received support with accessing safe accommodation. This included referring to refuge vacancies; referring to local housing teams and advocating for women to access emergency or longer-term accommodation; liaising with children's services to advocate for families with NRPF to be accommodated; and exploring other options and funding sources for women with NRPF without children, such as the Southall Black Sisters no recourse fund[23].

Women referred to NWTA have experienced barriers to accessing refuge and searching for a suitable vacancy is therefore a key role of the project. The NWTA practitioners search for refuge vacancies using Routes to Support (RtS), the UK-wide violence against women and girls directory of services and refuge vacancies.

As shown in **Table 7** on page 33, many referrals to refuge were declined even when the vacancy indicated it was able to meet the survivor's needs. For other women, no suitable vacancies were listed on Routes to Support. Lack of refuge spaces which are equipped to meet survivors' support needs is a huge barrier and the NWTA practitioners carried out at least one unsuccessful refuge vacancy search for 81 (23.7%) of the women supported. For these women, the practitioners discuss the survivor's options with her and explore alternative options such as referring to a local housing team. If the survivor was in urgent need of accommodation, as the majority of women supported by NWTA are, many survivors opt to approach a local housing team rather than continue to wait for a suitable refuge space:

> **"If [survivors] have a specific barrier that makes it really difficult to access refuge, this often means that their living accommodation is going to be delayed quite substantially. So it's very often that women would say, you know what, let's just try the council and forget about refuge for now".**
>
> *- NWTA Specialist Practitioner*

The NWTA practitioner explained that the team utilises their knowledge of survivors' rights and options and networks of specialist professionals:

22 In most cases where emotional support was not delivered, the practitioner had been unable to make contact after women were referred to the project and the case was closed for this reason.

23 The Southall Black Sisters no recourse fund is made up of grants and donations to support migrant women across the UK to access crisis accommodation and support. More information is available on the Southall Black Sisters website.

> **"The team has extensive and in-depth knowledge about the barriers these women face. So things like judicial review which are not always known by local services, we're very aware of those options and we have the resources to find and put [survivors] in touch with that solicitor to support them."**
>
> *- NWTA specialist practitioner*

The NWTA team's relationships with specialist solicitors and ability to dedicate significant time to supporting women enables the project to secure accommodation outcomes. Both the local 'by and for' domestic abuse service support worker and the refuge worker explained that when they have referred a survivor to NWTA, they can focus on the woman's other support needs in the knowledge that the NWTA practitioner is working to secure accommodation:

> **"When they've picked up a case, it is a bit of an ease for me to know that someone else is looking for appropriate housing for this woman. So that allows me to focus on other safeguarding issues for the client. So to me it's quite a good relationship and is very, very helpful."**
>
> *– local 'by and for' service support worker*

> **"Refuge referrals can be very time-consuming and the success is quite low … so being able to outsource that to an organisation that specialises in it makes it a lot easier for us … that has a huge impact on our ability to support other women in the house and manage, you know, manage our own caseload."**
>
> *– refuge support worker*

The survivor we interviewed, Sarvani, described how the NWTA practitioner regularly searched for refuge vacancies and empowered Sarvani to contact refuges herself. The practitioner provided a template email for Sarvani to send to refuges, which explained how Home Office refuge funding worked. Sarvani was then able to self-refer to refuge:

> **"[The NWTA practitioner] called me and told me that she can find a refuge for me, and she also contacted lots of refuges, but unfortunately [there was] no space. But she said she will continue trying and I have to also continue trying… [The practitioner] said, 'when you find this refuge, you give to her this e-mail'. So I send this e-mail to the refuge and then they accept me to come."**
>
> *- Sarvani, survivor supported by NWTA*

The NWTA practitioners empower survivors by informing them of their rights and options and providing tools to source safe accommodation.

Supporting children's needs

The NWTA project supports survivors to meet their children's needs when they are failed by statutory services. In 2024, 136 women supported by NWTA were fleeing abuse with 284 dependent children[24]. The NWTA practitioners supported women to access accommodation and support which met the needs of their children as well as the women themselves.

Despite the Domestic Abuse Act 2021[25] enacting a change to the legal definition of domestic abuse to recognise children as victims of domestic abuse in their own right, for many women supported in 2024, statutory services failed to support their children. Over four-fifths (81.8%) of the negative captures recorded on the responses of local authority safeguarding teams were regarding social workers from children's services[26].

The children of some women supported in 2024 had to stay in unsuitable temporary

24 An additional number of women had children but were not fleeing abuse with them e.g. if their child(ren) had been taken into care or placed with the perpetrator.

25 The Domestic Abuse Act. (2021), c. 17.

26 See Appendix D1.

accommodation. An Office for National Statistics (2024) report found that temporary accommodation sometimes lacks basic amenities and offers poor living conditions which has a detrimental impact on women and children's sense of safety and recovery.

Some women supported in 2024 were forced to flee abuse without their children. For four women, none of their children were accommodated with them, and for four (other) women, only some of their children were accommodated with them.

See **Part 2.2** on page 42 for further exploration of survivors' experiences with social workers and the work of the NWTA practitioners to secure adequate support from children's services.

Table 5: Where children were placed when not fleeing abuse with the survivor

	Number of women
Woman's child(ren) temporarily sent to live with another family member	6
Permanent custody of woman's child(ren) given to another family member	5
Woman's child(ren) taken into care	4
Custody of woman's child(ren) given to the perpetrator	3

1.3 Outcomes of support for survivors

As noted earlier in the report, the cohort of survivors the NWTA project works with face additional, systemic barriers to accessing support. Compared to other national support services, the NWTA practitioners need to navigate far more barriers to achieve favourable outcomes for the survivors they support. This means that support to individual women is more time consuming and demands a higher, and more varied, level of expertise. Practitioners need to have a thorough understanding of the workings of the domestic abuse sector, the full range of statutory services, guidance and legislation relating to survivors' rights and the ability to provide emotional support to survivors in crisis.

Access to accommodation in a refuge or other safe place

The women referred to the NWTA project have at times already exhausted many housing options before referral. Following specialist support from the NWTA practitioners, almost half (48.0%) of women supported had a new housing outcome including a suitable refuge or less suitable refuge with plans to transfer (22.5%), emergency accommodation (18.7%) and private rental (4.4%). Of those with an 'Other' outcome, eight women accessed council housing or supported accommodation. The practitioners lost contact with 26.6% of women and were unable to record their location at case closure[27].

27 Some of these women did not engage with the NWTA project beyond initial contact and some received more substantial support before disengaging. The reasons women disengaged may include being unable to make further contact due to the risk of abuse escalating or feeling unable to leave the perpetrator at that time. Where safe to do so, the NWTA practitioners try to make contact three times before closing cases.

Table 6: Outcomes at the end of support from the NWTA specialist practitioners

	Number of women	Percentage women (out of 342)
Outcome unknown/lost contact	91	26.6%
Accommodated in a suitable refuge space	74	21.6%
Accommodated in emergency accommodation	64	18.7%
Other outcome	27	7.9%
Stayed put – not living with perpetrator(s) at the time of referral	27	7.9%
Accommodated in private rental	15	4.4%
Stayed put – living with friends and family	11	3.2%
Staying with friends and family	9	2.6%
Stayed put – living with perpetrator(s)	8	2.3%
Returned to perpetrator(s)	5	1.5%
Returned to country of origin	4	1.2%
Less suitable refuge with plan to transfer	3	0.9%
Sleeping rough	2	0.6%
Paying to stay in B&B, hotel or hostel	1	0.3%
Sectioned or in hospital	1	0.3%
Total	**342**	**100%**

The refuge worker we interviewed said that the women they referred to NWTA would likely have been placed in less suitable accommodation without support from the project:

> **"I do definitely think more people would have been sent to homeless [accommodation] or been put in spaces that were not the most suitable places for them… in homeless shelters or hotels, you know, potentially with men… so definitely, I think it's had an impact on the outcomes for those women"**
>
> *- refuge support worker*

The local 'by and for' domestic abuse service support worker described making referrals to NWTA for additional support when they were unable to source accommodation:

> **"One of the main things that I've referred to NWTA for is when I've felt we've exhausted all other options… If I'm like we're not getting anywhere, we're going to refer to No Woman Turned Away and then hopefully we can get it sorted from there."**
>
> *- local 'by and for' service support worker*

Addressing support needs

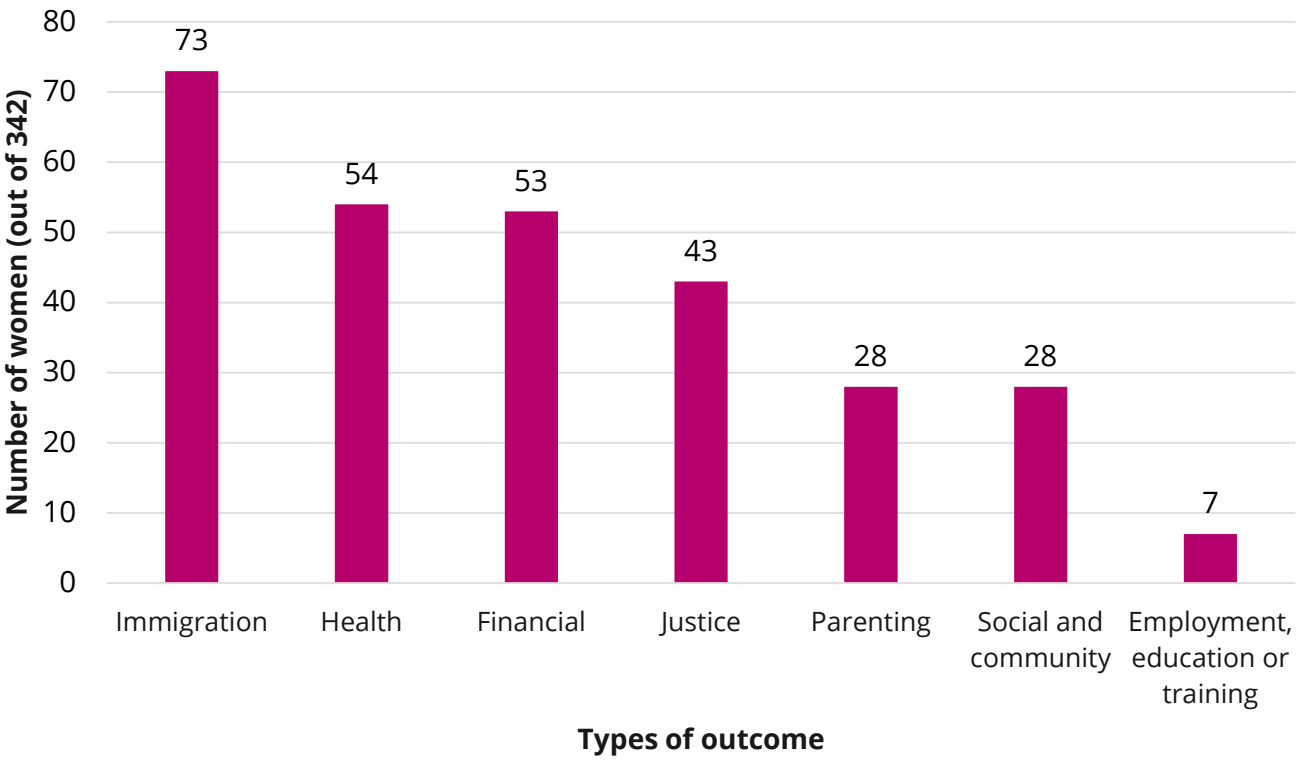
The breadth of support delivered by the NWTA practitioners resulted in a range of other outcomes, as shown in **Graph 4**.

Seventy-three women were supported to achieve immigration-related outcomes; 35.8% of women with NRPF accessed immigration advice during support from NWTA and for 43 women, their immigration status changed between referral and case closure. See **Part 2** of this report for further information on support delivered and outcomes around immigration.

Fifty-four women had positive health outcomes including accessing mental health, maternity and substance use support services. Positive financial outcomes included accessing benefit entitlements and grants and gaining access to public funds.

The NWTA practitioners referred and signposted women to a range of services. At least 52.5% went on to access support from other domestic abuse services, including refuge or community-based services, and 40.6% of women went on to access support from another type of service including immigration support services.

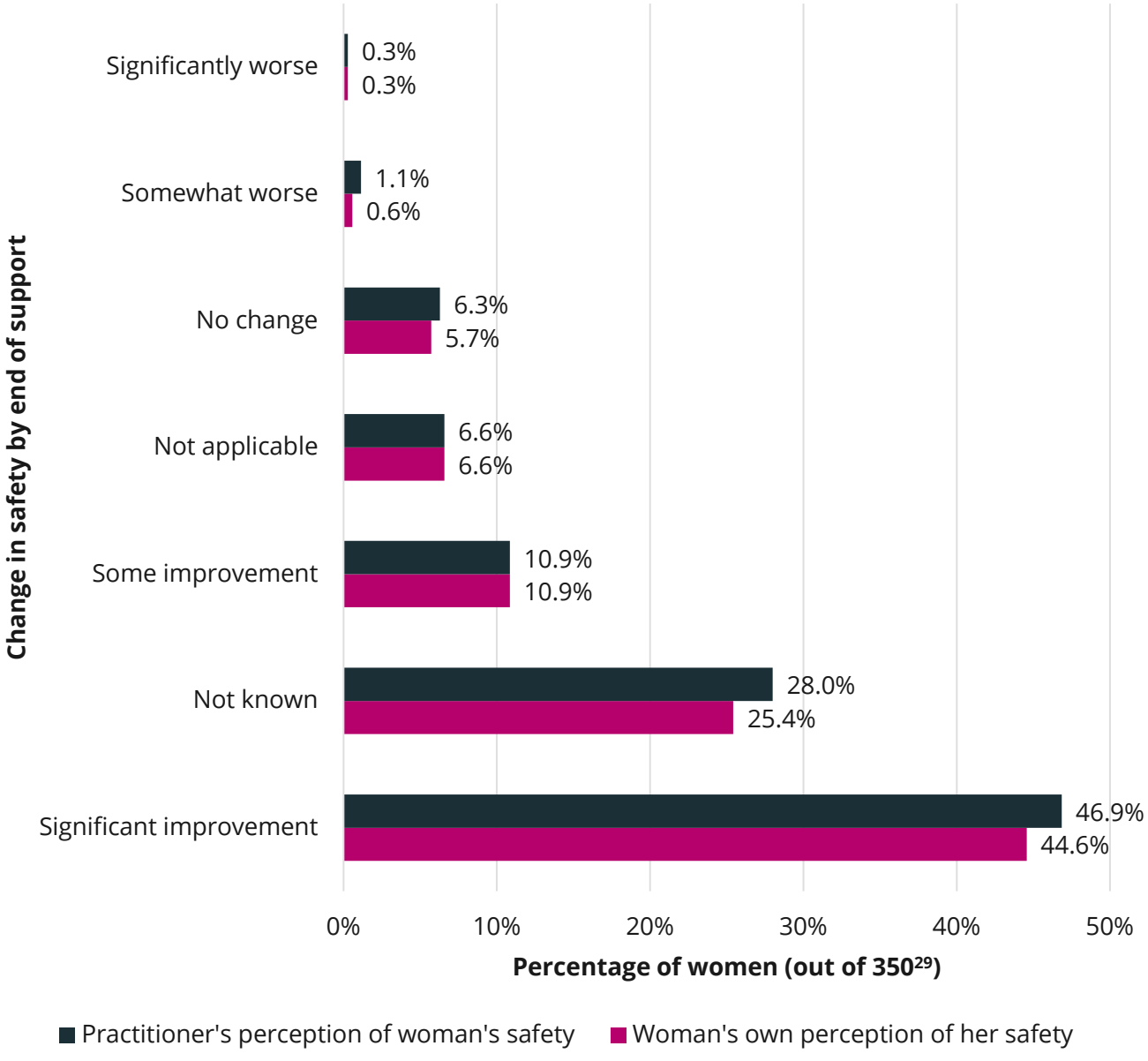
Graph 4: Additional outcomes by the end of support from NWTA in 2024



Increased safety

Practitioners estimated that (57.8%) of women were safer by case closure and over half (55.4%) of women felt their safety had improved[28].

Graph 5: Perception of safety after support from NWTA, compared to intake in 2024*



28 Of the three survivors who felt that their safety had worsened, two returned to the perpetrator(s) and one had been unable to access refuge and was then asked to leave her emergency accommodation. These cases were always closed in agreement with the women being supported.

29 This is because eight of the 342 women who completed support in 2024 exited the service twice.

Reasons for declined referrals

Many refuge referrals are declined as refuges are not equipped to accommodate women with diverse support needs. When the NWTA practitioners try to refer women to refuges that state they can or may be able to meet the survivor's support needs[30], often the referral is declined. **Table 7** below shows the number of times that survivors were refused from a vacancy, with a total of 70 women refused between one and 10 times. This is a 27.3% increase compared with 2023 (see Women's Aid, 2024a). Of these, 24 women (34.3%) were accommodated in refuge by the end of support from NWTA and 46 (65.7%) were not.

Table 7: Number of times survivors were refused from a refuge vacancy listed on Routes to Support

Number of times a survivor was refused from a refuge vacancy listed on RtS	Number of women
1	25
2	18
3	13
4	4
5	8
10	2
Not known	3
Not Applicable	4

On Track data consistently shows that over 60.0% of refuge referrals are unsuccessful, with 17.5% of referrals declined because the refuge was unable to meet the survivor's specific support need(s) (Women's Aid, 2024b). Limited funding and restrictive contracts adds to the pressures facing refuge services, making it more challenging for services to ensure they have the resources and specialist workers to meet survivors' needs.

For the NWTA project, the most common reason women were turned down from a refuge vacancy was because they had NRPF (18.6%). The proportion of vacancies able to consider a woman with NRPF remained low at 12.3% in 2023-24 (Women's Aid, 2025) and all three domestic abuse professionals we interviewed noted that lack of support for survivors with NRPF is the most common and one of the most challenging barriers to accessing safe accommodation, The local 'by and for' service support worker told us:

> **"Women who don't have recourse to public funds find it really, really hard to get into refuges... I think that's a really, really tough spot that we're put in to get them to safety."**
>
> *- Local 'by and for' service support worker*

Other common reasons women were refused from vacancies was the refuge was unable to support the survivor's needs around a disability (12.9%), mental health (11.4%), and substance use (10.0%). In 2023-24, there were just three domestic abuse services run exclusively for women with substance use and/or mental health support needs and Women's Aid's recent Domestic Abuse Report noted a decline in the number of specialist support workers for women with alcohol use, substance use, and mental health needs in refuge and community-based services in 2023-24 (Women's Aid, 2025).

30 Service listings on Routes to Support state the types of support needs that the service is able to consider.

Table 8: Reasons women were refused from a refuge vacancy listed on Routes to Support*

	Number of women	Percentage of women (out of 70)
Space no longer available	14	20.0%
Unable to accommodate woman with NRPF	13	18.6%
Unable to support needs around disability	9	12.9%
Unable to support needs around mental health	8	11.4%
Unable to support needs around substance use	7	10.0%
Space too close to danger area	5	7.1%
Unable to accommodate (an) older male child(ren) (over 14 years)	4	5.7%
Unable to accommodate woman with history of violence or arson	3	4.3%
Refuge said that domestic abuse is not recent enough	2	2.9%
Unable to accommodate woman with three or more children	2	2.9%
Refuge said that domestic abuse did not meet risk threshold	2	2.9%
Unable to support needs around language	1	1.4%
Unable to accommodate woman previously evicted from refuge	1	1.4%
Unable to support needs around offending	1	1.4%
Other	19	27.1%

*Some refuges gave more than one reason for not accepting the referral.

Inequalities in refuge provision and access impacted outcomes for some women

Many of the women referred to NWTA have already accessed support from another domestic abuse service. Despite this support, these survivors have not been able to access refuge due to the barriers they are facing. However, with specialist support from NWTA, 22.5% did go on to access refuge.

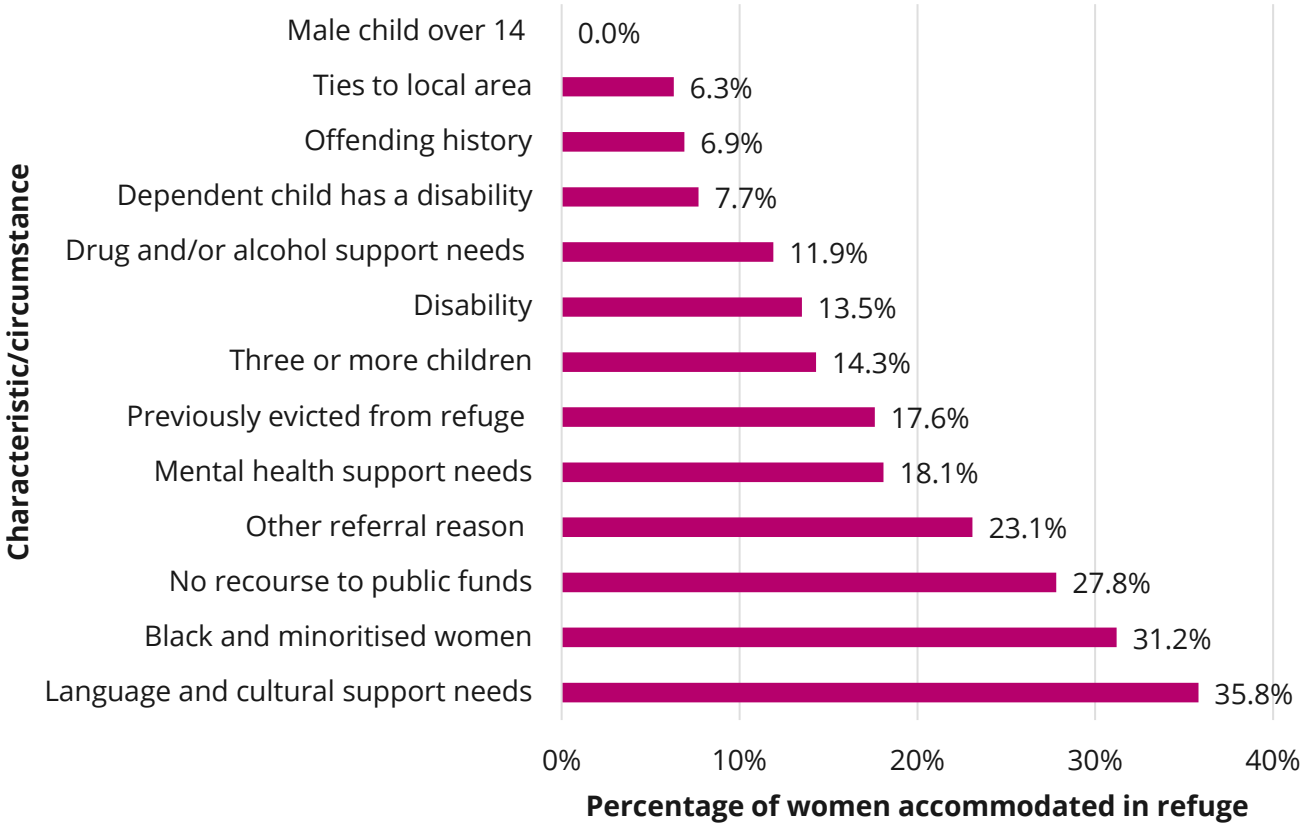
Ties to a local area

Just two out of 32 women who were tied to their local area accessed refuge by the end of support, including women who did not want to take their child(ren) out of school or were accessing medical care. Most refuges will not accept women from the local area due to the risk of coming into contact with the perpetrator(s). At over seven weeks (50 days), these women had the longest average case length, highlighting the challenge of sourcing safe accommodation for women in this circumstance.

Offending history

Just two out of 29 women with an offending history were accommodated in refuge. Research has identified strong links between women's experiences of domestic abuse and offending (Prison Reform Trust, 2017). Three in five women in prison report experiencing domestic abuse and survivors are often coerced into offending by the

Graph 6: Proportion of women with different characteristics and circumstances who were accommodated in a suitable refuge in 2024



perpetrator(s) (Women in Prison, 2024). The NWTA team has not found any refuges which are able to accept women with a history of arson and it is also common for local housing teams to refuse women with an arson conviction:

> **"Those who have a history of arson are the ones I think have one of the worst outcomes... Often refuges wouldn't consider them and councils would have specific policies around arson and what accommodation they can provide under what circumstances."**
>
> *- NWTA specialist practitioner*

Together with over 100 other organisations, Women's Aid signed a letter calling for the government to end the criminalisation of survivors who are arrested and sentenced as a result of experiencing abuse (Women in Prison, 2024).

Less than one-fifth (18.1%) of women with mental health support needs accessed refuge. Research shows that domestic abuse is a key driver of women's mental ill health. Of the 20 women who were actively suicidal and/or had made a recent suicide attempt[31], just one woman was accommodated in refuge. Suicide attempts are almost four times more common among those who experienced intimate partner abuse in the past year (McManus et al, 2022). Most refuges are not funded to provide the necessary support for these women including 24-hour staffing. In these circumstances, the NWTA practitioners try to source alternative accommodation including referring to local housing teams to arrange supported accommodation.

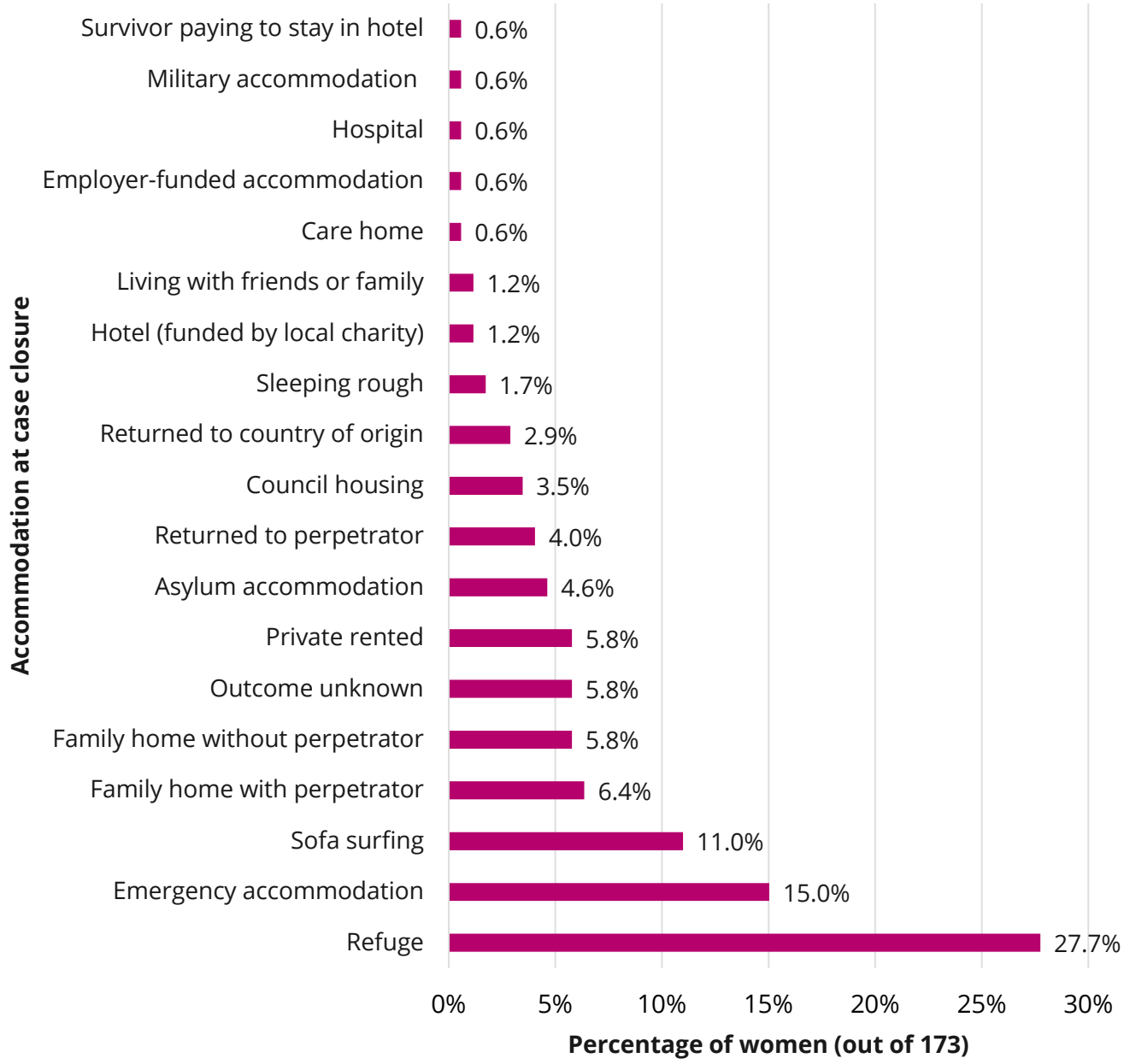
31 Most refuge services would consider a recent suicide attempt to be within the last three to six months.

1.4 The NWTA practitioners played a significant role in supporting survivors with NRPF to secure accommodation outcomes

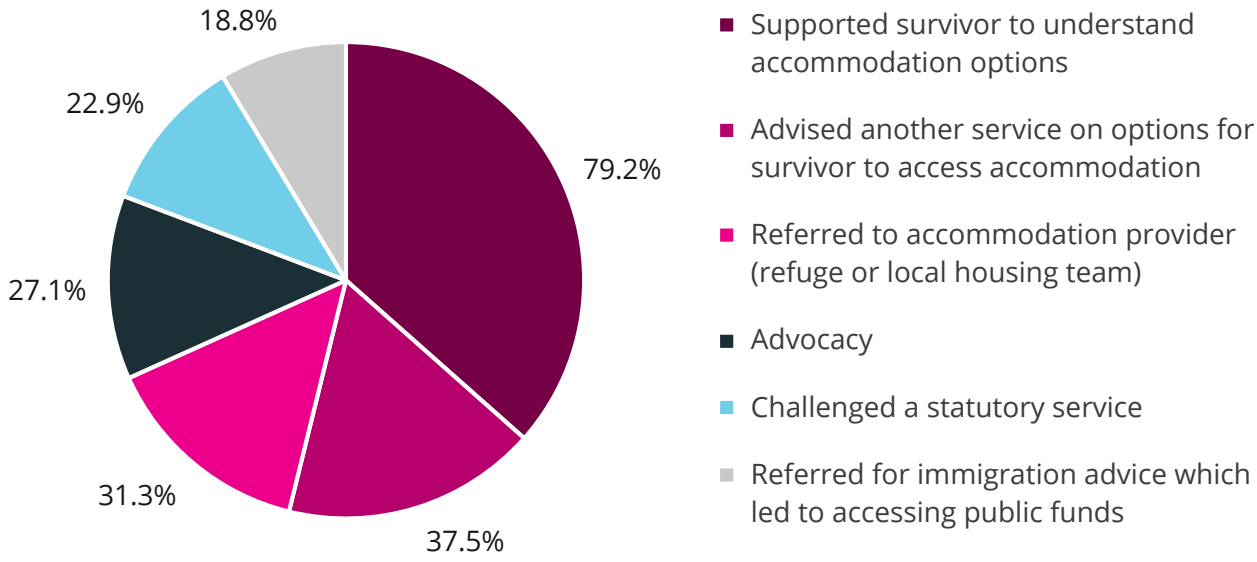
The NWTA project supports women facing a range of barriers; as we heard in section 1.1, just over half of these women had NRPF. The refuge referral process for survivors with NRPF can be particularly time consuming and additional work is needed to support these women and ensure that they are able to understand their housing options. The project is therefore a vital part of ensuring these survivors do not 'fall through the net' at the point of crisis due to systemic barriers.

By case closure, almost two thirds (64.2%) of women with NRPF had an accommodation outcome, with 27.7% accommodated in refuge. Of the 111 women with NRPF who accessed accommodation by case closure, the NWTA team delivered support

Graph 7: Accommodation at case closure for survivors with NRPF in 2024



Graph 8: Types of support from NWTA which contributed to the end accommodation outcomes of survivors with NRPF at referral to NWTA in 2024*



* Some survivors received more than one type of support which directly contributed to their end accommodation outcome.

which directly contributed to that outcome for 43.2% of survivors[32, 33].

Of the survivors with NRPF who were able to secure accommodation, the NWTA practitioners supported 79.2% of these women by helping them to understand their housing options. This included the suitability and benefits of different types of accommodation, and options around accommodation funding. For over one-third (37.5%) of women in this cohort, NWTA gave advice to another service, including local domestic abuse services and statutory services, on the options available. For example, some refuges are unaware that the Home Office has a duty to fund safe accommodation for survivors with a pending asylum claim, including refuge. The NWTA practitioners explain this to refuges and survivors and this has led to women being successfully accommodated, including the survivor we interviewed for this report.

For just under one-third (31.3%) of women with NRPF who accessed accommodation, a NWTA practitioner submitted the referral, either to a refuge or local housing team, which led to the survivor being accommodated. A NWTA practitioner conducted advocacy (27.1%) or challenged a statutory service (22.9%) for some survivors which directly contributed to them being accommodated. As explored earlier in this report and other research including Imkaan's (2023) report, statutory services often fail to support Black and minoritised survivors including women with insecure immigration status and this advocacy and challenge is therefore critical to securing accommodation. For just under one-fifth (18.8%) of women, NWTA referred or signposted to immigration advice which supported survivors to make immigration applications and access the public funds used to fund accommodation.

32 For some survivors, the support delivered by the NWTA practitioners to access accommodation is not included in this data because it did not directly contribute to the survivor's end accommodation outcome.

33 For some survivors who were living in the family home without the perpetrator, this was not the outcome they wanted, for example if there was a risk of the perpetrator returning. However, some survivors did wish to remain in the family home and NWTA helped the survivor to achieve this outcome, for example by supporting them to apply for an Occupation Order and Non-Molestation Order. Similarly, of the survivors who returned to their country of origin, for some women this was a last resort. Other women did wish to return and NWTA supported them, for example by asking children's services to fund return travel. The NWTA team's contribution to these two types of end outcome has only been included where the survivor wanted that outcome.

PART 2

What do the findings tell us about the specific experiences of and barriers faced by survivors with insecure immigration status in accessing safe accommodation?

Survivors with NRPF often face profound challenges to fleeing abuse and securing safe accommodation. In 2023-24, refuge spaces listed on RtS for women with insecure immigration status decreased from 69 to 21 spaces[34] (Women's Aid, 2025). In 2024, the Migrant Victims of Domestic Abuse Concession (MVDAC) replaced the Destitute Domestic Violence Concession (DDVC). We therefore looked to answer the research question "What do the experiences of practitioners working on the NWTA project and the survivors they support tell us about the specific experiences of and barriers faced by survivors with insecure immigration status in accessing safe accommodation and the impact of the MVDAC on survivors' journeys to accessing safe accommodation?". To answer this question, we explored the journeys and experiences of women who had NRPF at the point of referral to the NWTA project.

Part 2 evidences the plethora of barriers to accessing safety experienced by survivors with insecure immigration status and the need for systemic changes to policy and practice. All immigration-related terms included in Part 2 are listed in the Glossary on page 10.

2.1 Experiences and outcomes of migrant survivors with NRPF

Perpetrators used survivors' immigration status as part of their abuse

At least 50 women (28.9%) with NRPF experienced abuse related to their immigration status. Almost all of these women (96.0%) were on a spousal visa and their immigration status was dependent on the perpetrator. Some perpetrators lied about renewing women's visas, some destroyed immigration documents, and some threatened to contact the Home Office and cancel the survivor's visa if she fled or resisted abuse[35]. Other research also evidences perpetrators weaponising their knowledge of immigration policies and services as part of abuse (for example Gill and Anitha, 2022).

Immigration applications

Over half of survivors with NRPF submitted one or more immigration application(s). The most

34 This was largely due to one refuge service run exclusively for women with insecure immigration status having a significant number of bedspaces reassigned to a modern slavery service that the provider now delivers alongside their domestic abuse refuge (Women's Aid, 2025).

35 If someone has permission to live in the UK as a partner and their relationship ends, their permission may be cancelled by the Home Office (Rights of Women, 2024).

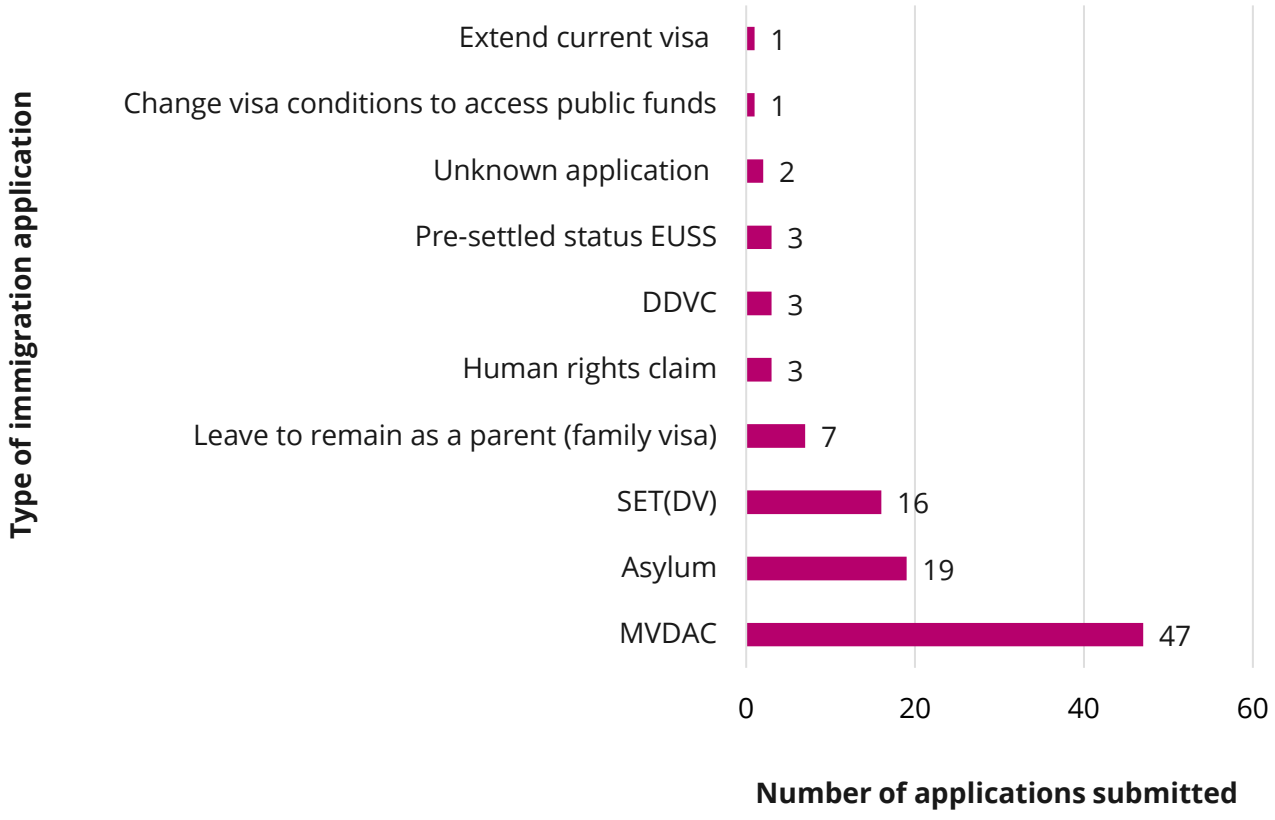
common type of application made was the Migrant Victims of Domestic Abuse Concession (MVDAC), submitted by just under half (49.0%) of women who made an application. Just under one-fifth (19.8%) of women applied for asylum[36] and the third most common application was the SET(DV) (**Graph 9**).

For 43 women, their immigration status changed between referral and case closure, and for 52 women, their first or further application since fleeing was still pending[37]. Seventeen pending applications were for asylum and 14 were for the SET(DV); both are long processes, with SET(DV) applications taking around six months (Gov UK., 2024) and asylum applications taking up to several years (Refugee Council, 2024)[38].

Funding for accommodation

Women with NRPF are not entitled to the housing benefit needed to fund refuge or local authority accommodation, which is a huge barrier to accessing safety. The NTWA practitioners supported these women to access funding from a range of sources and 59.5% of survivors with NRPF accessed accommodation funding from at least one source at some point before their case with NWTA was closed.

Graph 9: Number of each type of immigration application submitted in 2024*



* Some survivors submitted more than one type of immigration application.

36 As explored later in Part 2, it is likely that the high number of asylum applications is in part due to professionals who are not qualified to give immigration advice advising survivors to apply for asylum.

37 See Appendix E1 for a full breakdown of the number of survivors who made each type of immigration application, the percentage of applications that were successful, rejected or still pending at case closure.

38 At the end of September 2024 there were 133,409 people waiting for an initial decision on their asylum application and nearly two-thirds had been waiting for more than a year (Refugee Council, 2024).

Table 9 lists the sources of funding for the 119 women who managed to access at least one type of accommodation, including interim accommodation and the accommodation they were staying in at case closure.

A large proportion (40.5%) of women with NRPF did not access any accommodation funding, highlighting the difficulty in securing funding for women with NRPF even with specialist support. Of those who accessed funding, 13.9% accessed funding from more than one source, including six women who received funding from three or four different sources. These women and the services supporting them had to repeatedly liaise with multiple different services to secure accommodation. In addition to the strain of having to repeatedly advocate for funding, survivors with NRPF often have to keep moving between different accommodation. In the eight months since fleeing abuse, the survivor we interviewed stayed in three different refuges and asylum accommodation.

Table 9: Number of survivors who accessed funding from each source*

	Number of women	Percentage of women (out of 119)
Children's services	30	25.2%
Housing benefit via MVDAC	27	22.7%
Local domestic abuse service	14	11.8%
Police	14	11.8%
Home Office[39]	10	8.4%
Southall Black Sisters no recourse fund	9	7.6%
Unknown	8	6.7%
Local housing team (not via housing benefit)	6	5.0%
Charity (non-domestic abuse)	6	5.0%
Adult social care	5	4.2%
Housing benefit (not via MVDAC or DDVC)	4	3.4%
Survivor (e.g. through earnings or savings)	3	2.5%
Housing benefit via DDVC	2	1.7%
Employer	1	0.8%
Survivor's family or friend	1	0.8%
NHS	1	0.8%
Church	1	0.8%
Military	1	0.8%
Home Office Flexible Fund	1	0.8%

* Some survivors accessed funding from more than one source

39 Under section 95 of the Immigration and Asylum Act, in most cases, the Home Office is responsible for providing accommodation and subsistence to people with a pending asylum claim who are destitute.

Barriers to accessing immigration advice

NWTA supported survivors to overcome significant barriers to accessing immigration advice. To access legal aid, the type of immigration application must be covered under legal aid[40] and women must have no income or be on a low income. Additionally, survivors must be able to find a firm that holds a legal aid immigration and asylum contract and has capacity to take the case on[41]. There is a severe shortage of legal aid immigration solicitors in England and 63% of the population in England and Wales do not have access to an immigration and asylum legal aid provider[42] (The Law Society, 2024). A joint briefing from 71 organisations in 2024 noted government cuts to legal aid, stagnant pay rates for legal aid solicitors and poor administrative oversight of legal aid (Joint Briefing, 2024). Solicitors are paid very low fees for supporting survivors with a SET(DV) and there is no additional fee for completing the MVDAC application. Over one-fifth (20.2%) of women were unable to access immigration advice due to lack of capacity and at least 79.2% of women with NRPF were unable to pay for their own immigration advice[43], highlighting the need for free legal advice and support.

To navigate these barriers, the NWTA practitioners utilise their networks and knowledge of immigration solicitors and helplines to signpost and refer survivors. As a result, 35.8% of women accessed immigration advice during support from NWTA. However, by case closure, less than half (47.4%) of women with NRPF managed to access advice from a qualified professional. This is a huge barrier for survivors to make informed choices and take steps to regularise their immigration status.

Unregulated immigration advice

Many professionals gave unregulated immigration advice and submitted immigration applications on behalf of survivors. Immigration advice must be provided by an adviser registered with the Immigration Advice Authority (IAA)[44], a solicitor, barrister or legal executive registered with the Chartered Institute of Legal Executives. The NWTA team has observed a concerning trend of professionals who are not qualified or regulated to give immigration advice both advising survivors and submitting immigration applications on their behalf. This is illegal and can have serious and permanent consequences on the rights of survivors to access public funds and the immigration routes available to them.

For almost one-quarter (24.1%) of the 29 women who received unregulated advice, the advice was inaccurate[45]. For example, some women were told to apply for the MVDAC when they were not eligible, and others were told to apply for asylum when the likelihood of this being granted was low[46]. For over half of these women (51.7%), the advice was given by a statutory service, the majority (73.3%) of whom were from children's

40 Many immigration applications, including applying for leave to remain as the parent of a British child, are not covered under legal aid.

41 Legal aid is available for assistance with applications under the Domestic Abuse Rule (SET(DV) application). Survivors who are eligible for both the MVDAC and the SET(DV) can apply for legal aid for support with these applications. However, survivors who are applying for the MVDAC but are not eligible for the SET(DV) are not entitled to support from a legal aid solicitor to make their MVDAC application.

42 This is based on 63% of the population of England and Wales not having an immigration and asylum legal aid provider in their local authority area.

43 For 17.3% of survivors, it was not noted whether the survivor was able to afford to pay for their own immigration advice or not and it is likely that this percentage is higher.

44 The IAA regulates immigration advisers, ensuring they are fit, competent and act in their clients' best interests. The IAA was previously the Office of the Immigration Services Commissioner (OISC). More information is available on the OISC website.

45 This figure is based on survivors where we were able to confirm from case notes that the advice given was inaccurate, but this number may be higher.

46 This is based on the survivor's circumstances not meeting those required to be granted asylum.

services. For 44.8% of survivors, the advice was given by a local domestic abuse service[47]. The NWTA practitioners play a key role in informing these services of the importance of accessing immigration advice from a qualified professional.

The NWTA team recorded 12 instances of unqualified professionals submitting an immigration application on a survivor's behalf without accessing immigration advice. Around two-thirds (66.7%) of the applications were submitted by a local domestic abuse service, one-quarter (25.0%) were submitted by social workers, and one application was submitted by a police officer. One-quarter (25.0%) of women who submitted an immigration application did so without accessing advice from a qualified professional. The most common application that unqualified professionals advised women to apply for was the MVDAC. If a woman is not eligible for the MVDAC, professionals sometimes advised them to apply for asylum:

> **"As soon as a professional hears that the client would be at any form of risk in their home country, they advise to apply for asylum".**
>
> *- NWTA specialist practitioner*

The practitioner explained that this can be very problematic. Once women with children have applied for asylum, they are no longer entitled to support from children's services under Section 17 of the Children Act. Additionally, the survivor may not be granted asylum[48] and asylum applications can take several years (Refugee Council, 2024)[49], during which time applicants are unable to work or access some benefits. The survivor we interviewed explained that her social worker, without accessing immigration advice, told her she should apply for asylum:

> **"Because my social workers say I have to claim asylum, I claimed asylum and then they said, as I have claimed asylum, now [the] Home Office have to help me and [the] social worker closed my case."**
>
> *- Sarvani, survivor supported by NWTA*

Sarvani and her baby were staying in refuge funded by children's services. However, once her asylum claim was made, children's services no longer had a duty to fund accommodation. Sarvani had to leave refuge and move to asylum accommodation where no domestic abuse support was provided[50].

2.2 Statutory children's services and barriers to safe accommodation

Survivors with NRPF fleeing abuse with children often experienced significant barriers to accessing safe accommodation. This section explores the journeys of the 78 women without access to public funds who were fleeing abuse with their dependent children, the failures of children's services to provide adequate support and the role of the NWTA practitioners in securing support.

Inadequate and unsafe responses from statutory services created barriers for women and children with NRPF. At some point in the journeys of at least 61.5% (48) of this cohort, children's services failed to provide adequate support and for 41 (85.4%) of these women, children's services refused to provide safe accommodation. Of these, for just 14 women (34.1%), children's services did

47 For the remaining survivors, the advice was given by another type of third sector service (one survivor) and a local church group (one survivor).

48 In the year ending June 2024, 62% of asylum applications were declined (based on initial decisions) (Gov UK, 2024).

49 At the end of September 2024 there were 133,409 people waiting for an initial decision on their asylum application and nearly two-thirds had been waiting for more than a year (Refugee Council, 2024).

50 If a survivor submits an asylum application, responsibility to fund accommodation sits with the Home Office (for applicants who are destitute).

go on to fund accommodation by case closure and for 26 women (63.4%), children's services did not go on to fund accommodation[51]. For almost half of the women where children's services refused to fund accommodation (20, 48.8%), a NWTA practitioner advocated for children's services to meet their legal duty[52]. Of the 20 survivors where NWTA engaged in direct advocacy, this resulted in children's services agreeing to fund accommodation for six women (30.0%).

The extended case study below provides an example of multiple and repeated failures of children's services to adequately support a family fleeing domestic abuse without recourse to public funds, and the work of the NWTA project and other domestic abuse services to hold children's services to account.

OLA'S STORY

Ola[53] fled to a new city with her baby and young child and initially sofa surfed before approaching the local authority. However, Ola was incorrectly advised that she needed to return to the area she fled from to access support. Upon returning, children's services funded a hotel and informed the perpetrator that Ola had returned, putting them in danger. The perpetrator made threats, and Ola was afraid to go outside. The social worker dismissed Ola's fears, saying that she could just call the police. The family were then moved out of the area to a hotel with no cooking facilities or refrigerator. Children's services did not provide subsistence funding and told Ola to ask the perpetrator for money. The perpetrator intermittently sent small amounts of money, insisting he send it directly to Ola rather than through children's services. This was re-traumatising as Ola wanted no contact from him.

The family were repeatedly asked to move at short notice. One night, the family returned to the hotel and were told their booking had been terminated. They were placed in another hotel late that night after the receptionist managed to help Ola contact the emergency social services number. The last hotel the family were placed in was in a remote area next to a motorway, without public transport links or shops.

Children's services said refuge was too expensive, **despite the hotel costing more than refuge**. The NWTA practitioner challenged children's services and sought legal advice, which led to them agreeing to fund refuge. The NWTA practitioner spent a significant amount of time finding a refuge that would accept the family. When a suitable refuge was found, children's services then refused to fund all of the costs despite the refuge reducing this amount to as low as possible and the offer fell through. The NWTA practitioner asked a community care solicitor to challenge children's services for failing to provide suitable accommodation and subsistence funding and the family were eventually accommodated in refuge.

51 For one survivor, it was unclear whether children's services went on to fund accommodation or not.

52 For the survivors where NWTA did not conduct advocacy work, the reasons for this are as follows: for three survivors, a local domestic abuse service did the advocacy work (for one of these women, NWTA supported the local service with their advocacy); three survivors did not want to engage with children's services due to previous bad experiences and fear of their children being placed with the perpetrator or taken into care; for four survivors, the MVDAC was granted and the survivor was able to access housing benefit to fund accommodation before advocacy could begin; three survivors disengaged from NWTA before advocacy could begin; one survivor was accommodated in refuge before advocacy could begin and for one survivor, children's services changed their minds and funded accommodation without advocacy.

53 This is a pseudonym.

Children's services provided unsuitable temporary accommodation

Children's services funded accommodation at some point for a total of 28 families[54] with NRPF. For 10 women (35.7%), this accommodation was a hotel and was not suitable. For six of these 10 women, NWTA advocated for children's services to provide more suitable accommodation and for five out of six women, this resulted in the family being moved to more suitable accommodation. Nine families were forced to keep moving between different hotels, often at very short notice. NWTA advocated for two of these families[55] and this resulted in one family accessing refuge.

The actions of children's services put some families at increased risk

For at least nine women with NRPF, children's services acted in a way which put them at increased risk of abuse to try and avoid having to provide funding, including:

- Asking survivors to contact the perpetrator to ask for money.
- Arranging a joint call between the survivor and the perpetrator to ask him to pay maintenance.
- Asking the perpetrator to fund the survivor's accommodation.
- Pressuring the survivor to report to the police when she did not feel safe to[56].
- Telling the survivor they should continue to live with the perpetrator or return to the perpetrator.
- Telling the survivor that the perpetrator should have more contact with the child so she could work part-time to fund accommodation.

NALA'S STORY

The NWTA project supported a survivor with NRPF who was still living with the perpetrator as she did not have enough money to flee. NWTA referred Nala[57] for immigration advice and she applied for the DDVC[58]. The NWTA practitioner asked children's services to support Nala and her child until she had access to benefits and had to repeatedly follow up before receiving a response weeks later. Children's services refused to fund accommodation despite Nala and her child experiencing ongoing abuse, and instead asked NWTA to support Nala with safety planning until the DDVC was in place.

The social worker also suggested that Nala should speak with the perpetrator about her accommodation options. NWTA emphasised that this was unsafe and reminded the social worker that Nala wanted to flee without the perpetrator knowing. Children's services also advised the survivor to report to the police in order to use this as evidence for any future SET(DV) application. However, Nala did not feel it was safe to involve the police and NWTA reminded the social worker that this was Nala's choice and her immigration solicitor would advise on the evidence needed to support immigration applications. Nala was then granted the DDVC and NWTA successfully referred the survivor and her child to a suitable refuge.

54 Children's services funded interim accommodation for 15 survivors and for 18 survivors, children's services were funding accommodation at case closure. Some of these were the same family as children's services funded both interim accommodation and accommodation at case closure.

55 For one family, advocacy work was conducted by a local domestic abuse service. For other survivors, advocacy was not conducted because the family were either granted access to public funds and children's services were therefore no longer responsible for funding accommodation, another service funded accommodation, or the survivor returned to their country of origin.

56 This was highly dangerous as the survivor was still living with the perpetrator at the time. Children's services encouraged the survivor to report to the police in order to gather evidence to support an immigration application, despite not having sought advice from a qualified immigration advisor.

57 This is a pseudonym.

58 This survivor was supported in early 2024 before the MVDAC replaced the DDVC.

2.3 The MVDAC has replaced the DDVC, with significant implications

Survivors on spousal visas whose relationships have broken down due to domestic abuse can apply for temporary (three-months) access to public funds. This application was called the Destitute Domestic Violence Concession (DDVC) until February 2024 when it was replaced by the MVDAC. One of the key changes was to make survivors on a wider range of visas eligible for the concession, including survivors who are a dependant on their partner's student or worker visa. Although it is important to acknowledge the positive impact of this for survivors who were previously ineligible, two concerning issues have emerged:

- The increased risks associated with making MVDAC applications without accessing immigration advice.
- The increased barriers to accessing refuge for survivors with the concession.

The increased risks of applying for the concession without immigration advice

When the DDVC was in place, all survivors granted the concession could apply for indefinite leave to remain via the DA Rule (SET(DV) application). However, because some survivors who are eligible for the MVDAC are not eligible for the SET(DV), a survivor could be granted the concession but have no immigration options when the MVDAC expires.

Legal aid is not available for work, student or family life-based applications and it is not permitted to apply for many types of visas from within the UK if a person's current leave was granted for six months or less or was granted outside the immigration rules (this includes the MVDAC). This severely limits immigration options for women who are granted the MVDAC but are not eligible for the DA Rule.

These women face the prospect of having to leave the UK or remain in the UK illegally without access to benefits and have been described as facing a 'cliff edge' after three months (Southall Black Sisters, 2024).

Once the MVDAC is granted, the survivor's previous visa is automatically cancelled[59]. The MVDAC can be granted within two days, giving little time for the application to be withdrawn if the survivor changes her mind. The dangers of unqualified professionals giving advice and making applications for the concession has therefore been exacerbated by the changes. The NWTA practitioner observed that many survivors are unaware that making an MVDAC application cancels out their previous visa:

> **"We had a client who applied for the MVDAC on the advice of her social worker and then returned to the perpetrator, and she wasn't aware that her spousal visa had been cancelled. So, she was in the UK for six months with no visa at all."**
>
> *- NWTA specialist practitioner*

The NWTA practitioner has also observed other services accidentally submitting the wrong immigration application, including submitting a SET(DV) instead of an MVDAC. This can exacerbate the complexities around submitting immigration applications in an already complex system and delay the survivor regularising their immigration status and gaining much-needed access to public funds.

The NWTA practitioner explained that there are very limited options for survivors to access legal support with an MVDAC application:

> **"There are some solicitors that do provide pro bono support around [the MVDAC], but these are getting less and less common**

59 For example, if a survivor has permission to live in the UK as a partner and this is due to expire in 12 months, and they are then granted the MVDAC, they will be granted permission to live in the UK for 3 months only and this will replace the 12 months permission they had under their previous partner visa (Rights of Women, 2024).

> **because obviously there's a high demand. So, we signpost to trusted solicitors for general advice on whether they would be eligible for the MVDAC, or to national helplines which are free of charge. But often it's the client who will need to submit the application themselves, with no support."**
>
> *- NWTA specialist practitioner*

The NWTA practitioner described these national helplines as being **"completely overwhelmed with demand"**. The support worker from a local 'by and for' domestic abuse service confirmed that their service had managed to partner with a law firm which supports women with MVDAC applications. However, if the firm does not have capacity, women often have to wait a long time. As the purpose of the MVDAC is to provide access to public funds at a time of crisis, this is incredibly problematic for survivors.

Changes to the concession has increased barriers to accessing refuge

Despite the MVDAC giving survivors access to the housing benefit needed to fund refuge, the NWTA team have observed an increase in refuges declining referrals for survivors with the concession for the following reasons:

- The survivor was not eligible to apply for the SET(DV).
- The short (three-month) timeframe of the MVDAC.
- The survivor did not have a solicitor to make a further immigration application.
- The survivor had not yet applied for or was not yet receiving benefits.

When the DDVC was in place, refuges were confident that most women accepted into refuge with the concession would make a SET(DV) application and continue to access public funds while awaiting the outcome[60]. However, by widening the eligibility criteria of the concession to include women who are not eligible for the SET(DV), refuge workers are less certain about further immigration options for women with the MVDAC and are therefore unsure how long they will be able to access the housing benefit needed to fund their refuge stay. As explored by Yong (2024), the changes have 'created further confusion and discrimination'.

> **"Refuges are now much more likely to refuse a woman on the MVDAC as opposed to the DDVC when they knew that they were on spousal visas and they were actually going to get indefinite leave to remain… refuges are now really uncertain about the options for survivors and much more closed to discussing anything."**
>
> *– NWTA specialist practitioner*

The NWTA team noted that this uncertainty has led to many refuges requesting that a solicitor is in place to make the SET(DV) application before accepting a referral. As accessing support from an immigration solicitor is often very difficult, even survivors who are eligible for the SET(DV) are less likely to be accepted into refuge. The NWTA practitioners also noted refuges requesting that survivors have applied for and are receiving benefits before accepting a referral. Benefit applications can take a long time to process, particularly as the survivor may not have claimed benefits previously and may not have a National Insurance number (Project 17, 2024). This is leading to huge delays in accessing refuge and the NWTA team often signpost or refer women to temporary accommodation while they try to arrange refuge. The replacement of the DDVC with the MVDAC has therefore made it less likely that survivors with the concession can access refuge and led to delays in accessing refuge.

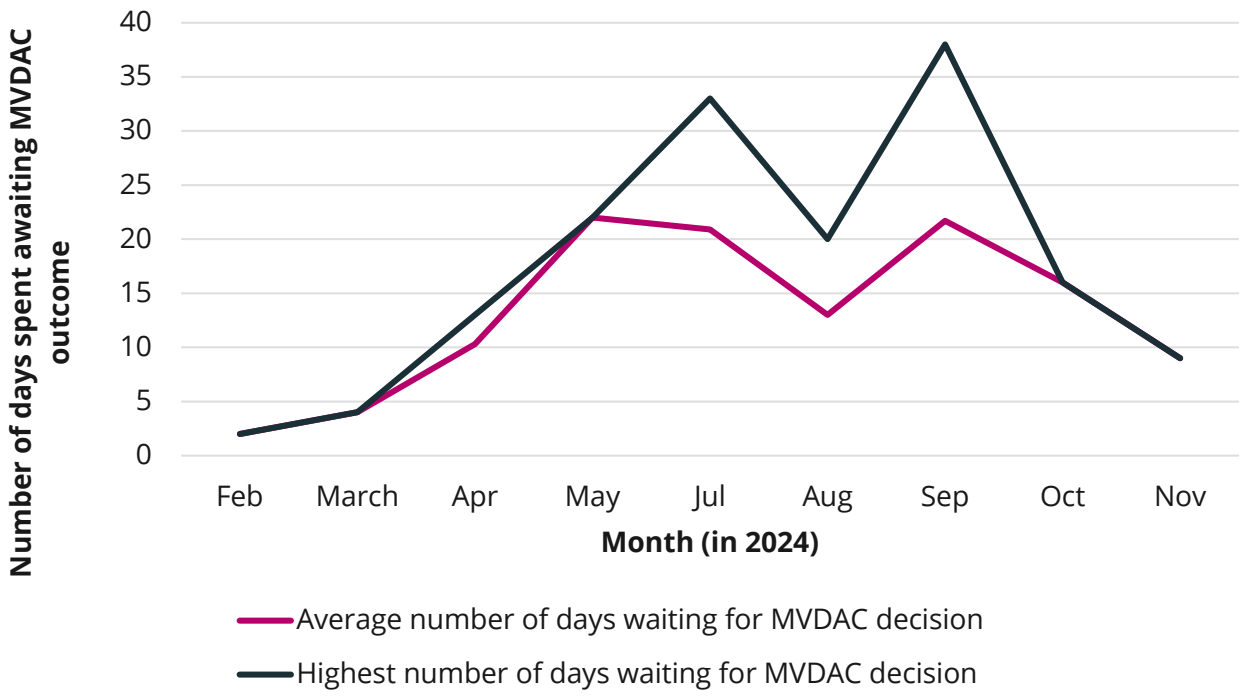
60 As long as a survivor submits their SET(DV) application before the concession expires, their entitlement to public funds continues until they receive an outcome. If the SET(DV) is not successful, the survivor can also continue to access public funds if they appeal the outcome and are waiting for a decision.

The length of time it takes to receive a decision on the MVDAC varies widely

For 22 women who applied for the MVDAC, we were able to collect data on the number of days it took to receive a decision from the Home Office. This took an average of 15.8 days; however, there was a large variation, the shortest being two days and the longest being 38 days. This is not in keeping with the Home Office's stated intention that decisions on the MVDAC should be made with 'speed' with a target for processing applications within five days (Home Office, 2025).

The unpredictable nature of how long a survivor would have to wait for an MVDAC outcome was problematic for both survivors and the services that support them, making it difficult to plan and arrange accommodation.

Graph 10: Number of days survivors spent waiting for the outcome of their MVDAC applications in 2024[61]



61 No data on the number of days survivors spent waiting for the outcome of their MVDAC application was recorded in June or December 2024. No data is included for January 2024 as the MVDAC did not replace the DDVC until February 2024.

RECOMMENDATIONS

This report evidences the need for the following changes to policy and practice to dismantle the barriers to accessing safe accommodation and support experienced by many women and children with a range of circumstances and support needs.

Recommendations for statutory agencies: to improve awareness and understanding of domestic abuse

The evidence presented in this report and previous Nowhere to Turn reports shines a light on the need to address a lack of knowledge and understanding within statutory services on domestic abuse, survivors' support needs and survivors' rights to access support. This report strongly recommends that staff in all statutory agencies working with survivors receive training developed and delivered by specialist domestic abuse organisations.

The government should use opportunities, such as upcoming legislation and the VAWG strategy, to address these gaps and drive forward improvement and consistency across agencies. Ultimately investment of time and resources in mandatory training for statutory services will improve prevention and as a result increase cost effectiveness of services and reduce harms to adult and child survivors. This will support a number of key missions of the current government.

Training should:

- Align to the legal definition of domestic abuse in the Domestic Abuse Act 2021.
- Respond to the full breadth of survivors' rights and needs and include survivors with insecure immigration status including survivors with NRPF and the MVDAC.
- Be sustained through a range of methods including an induction process for new staff, annual refresher training and regular upskilling of staff in statutory services.

Commissioners should undertake mandatory, regular and specialist training, developed and delivered by specialist organisations like Women's Aid, on how to commission survivor-centred specialist support in line with statutory guidance for the Domestic Abuse Act 2021 and the Home Office's National Statement of Expectations for VAWG Services (2022).

The impact of this training should be evaluated to ensure statutory services are meeting their duties to adult and child survivors.

The severity and frequency of gaps in support from statutory services may mask a range of complex systemic barriers faced by survivors. Once this is addressed, we will be able to take steps to understand and address other barriers to accessing safe accommodation experienced by the women supported by the NWTA project.

The No Woman Turned Away project: to ensure the project continues to evidence evolving barriers faced by survivors of domestic abuse

- Continue to develop research and evaluation activities around the NWTA project, including monitoring and adapting data collection tools.
- Carry out detailed analysis of referral pathways, reasons for referral and reasons referrals are declined, with a view to improving referral pathways into NWTA and to better understand trends in the barriers facing survivors.

Local domestic abuse services: to ensure that survivors with insecure immigration status and other support needs are adequately supported

- Ensure all frontline domestic abuse workers access training on supporting women with insecure immigration status including NRPF.
- Ensure that frontline domestic abuse workers support survivors to access immigration advice from a qualified professional before making immigration applications and ensure that workers do not give advice themselves or submit applications on behalf of survivors unless they are qualified and regulated to do so.
- Work to develop funding pots or apply for specific funding to support women with NRPF while they receive support to access public funds.
- Where appropriate and possible, refer survivors to 'by and for' services to ensure they receive specialist support. This may include but is not limited to Black and minoritised women, D/deaf and disabled women and LGBT+ survivors. If not possible due to capacity or barriers faced by the survivor, refer women to the NWTA project and, where possible, work together with the NWTA practitioners to support women.

Recommendations for the Ministry of Housing, Communities and Local Government (MHCLG): to embed learning from the NWTA project in practice

- Continue to work with Women's Aid to develop and resource the NWTA project to meet survivors' needs.
- Implement reforms to the oversight of the statutory duty on local authorities to fund support in safe accommodation, working alongside specialist partner organisations, to ensure the duty is being delivered in line with the statutory guidance for the Domestic Abuse Act 2021, and that it delivers the best value for money and meets unmet need.
- Consider commissioning a national mapping exercise to improve understanding of the availability of legal advisors, including those who are able to support survivors on MVDAC applications.

Recommendations for HM Treasury: to reduce barriers to accessing local domestic abuse services

- Invest a minimum funding settlement of £502 million per year for specialist domestic abuse services in England, including £150 million ring-fenced funding for specialist services led 'by and for' Black and minoritised women, D/deaf and disabled women and LGBT+ survivors. This proposed ring-fenced figure, recommended by the Domestic Abuse Commissioner, is the minimum level of funding required, and it is essential that 'by and for' organisations lead on both the development and evaluation of any ringfenced funding pot, as well as on further research into developing these figures. We also recommend further consultation to better understand barriers and challenges in funding and commissioning that 'by and for' services face.
- This funding settlement should include a minimum of £222m for refuge services via Part 4 of the Domestic Abuse Act 2021, combined with a minimum of £280m statutory funding for community-based support services.
- Introduce as a starting point, a children and young people (CYP) Support Fund of £46 million to ensure that, at a minimum, all specialist domestic abuse services have a dedicated CYP worker. The government should also work with Women's Aid to establish an exact figure on how much additional investment is needed to support CYP who have experienced domestic abuse, given the inconsistent provision of CYP support across the country, including working with 'by and for' agencies to lead on the development of a specific figure for 'by and for' services. This needs to include consideration of the support required by children experiencing additional inequalities and with diverse support needs, for example, as illustrated within this report, disabled children.

Recommendations for the Home Office: to reduce barriers around immigration faced by survivors of domestic abuse

- Abolish the no recourse to public funds (NRPF) condition for all survivors of domestic abuse to address the additional barriers this creates in accessing life-saving support. This should include extending the eligibility of the MVDAC and DA Rule to all survivors, regardless of their immigration status, to ensure not only survivors whose leave is dependent on a partner's can access a refuge space, financial support and housing.
- Extend the MVDAC from three to six months, to afford survivors sufficient time to flee abuse, access immigration advice and find safe accommodation.
- Equip statutory services and local domestic abuse services to better support survivors with insecure immigration status including NRPF by funding training for staff.
- Ensure that all Home Office immigration officials receive training on domestic abuse and sexual violence, delivered by specialist services, to ensure that officials who engage with survivors understand their experiences and needs.
- Put measures in place to guarantee the five working day target to process MVDAC applications and inform survivors of the outcome of their application.

Recommendations for the Home Office: to reduce barriers to fleeing domestic abuse

- Guarantee multi-year funding for the Flexible Fund beyond 2026 and ensure that this is renewed at a minimum of £2m each year, rising with inflation, population changes and demand. The fund should continue to be accessible to survivors with NRPF and disseminated via a network of specialist domestic abuse services, including non-commissioned and 'by and for' services, to ensure that the most marginalised survivors can access urgent financial support.
- Engage in longer term discussions with the Department for Work and Pensions as part of the VAWG strategy to ensure that the welfare system is adequately equipped so that survivors have the financial means to flee abuse.
- Build on the pilot of Raneem's Law to ensure that domestic abuse specialists are included at all stages of the police response, to ensure survivors are protected and perpetrators are held to account.
- Implement a firewall between immigration enforcement and statutory services, to ensure women experiencing abuse are treated as victims first and foremost.

Recommendation for the Ministry of Justice: to reduce the barriers for survivors to access legal advice and specialist support

- Reinstate legal aid for both alleged perpetrators and all survivors of domestic abuse and ensure that there are sufficient legal aid solicitors to meet demand including immigration solicitors.
- Ensure funding for VAWG funds and programmes, such as the PCC grant for IDVA/ISVA funding and domestic abuse and sexual violence services, are protected and increased in line with demand, population changes and inflation.

CONCLUSION

This report supports our understanding of the policies, systems and services that influence access to safe accommodation and support for survivors of domestic abuse with a range of characteristics, circumstances and support needs. Insufficient funding for refuges and community-based services, inadequate and unsafe responses from statutory services and the barriers imposed by immigration policies all make survivors' journeys more difficult and dangerous. The NWTA practitioners utilise their experience, skills, knowledge and networks to support women to navigate these complex barriers to flee abuse and access safety. Through direct work with survivors and by working with, challenging and supporting other services, the NWTA project plays a critical and unique role within the national network of specialist domestic abuse services in England.

As a national project, NWTA provides unique insights into the experiences of marginalised survivors across England through the use of On Track data and insights from the NWTA practitioners and local domestic abuse services who refer to the project. The significantly increased number of referrals and local services who referred to the NWTA project in 2024, along with the feedback from two local domestic abuse services interviewed for this report, demonstrates that the project is highly valued by local services. The NWTA practitioners collaborate with and support these services, utilising their unique position and expertise to achieve accommodation outcomes for survivors who may otherwise be homeless or in less suitable places or spaces.

The NWTA project saw an increase in the percentage of survivors with different characteristics and circumstances who experienced additional barriers to accessing refuge. This year's report also evidenced two additional specific support needs which most refuges are not funded to support, namely survivors with a disabled child and women who had made a recent suicide attempt and/or were actively suicidal. Many survivors continue to stay in unsuitable places and spaces after fleeing abuse, and some survivors have little choice but to remain with the perpetrator(s).

This report explored the experiences of survivors with insecure immigration status and the multitude of challenges they face including a lack of free immigration services, inadequate understanding of their rights and needs among professionals, and an unwillingness to support survivors with NRPF among statutory services. The NWTA project plays an important role in informing, reminding and challenging other services and supporting these survivors to navigate and overcome extremely high barriers to accessing the support they need.

This report evidences the need for adequate funding to enable refuge services to accommodate survivors with diverse support needs. The need for additional funding to ensure that community-based services can meet demand is also clear. All professionals who support survivors of domestic abuse must receive adequate training on the rights and options of survivors including those with insecure immigration status. All survivors without recourse to public funds, regardless of their visa type, should be able to access public funds to support them to flee and be safely accommodated. The continued funding of the NWTA project and other services which are equipped to deliver specialist support, advocate for survivors and hold services to account, is essential.

References

Centre for Women's Justice and Imkaan. (2023) *Life or Death? Preventing Domestic Homicides and Suicides of Black and Minoritised Women*.

Children Act 1989, Part III, Section 17 (HM Government 2014b).

Femicide Census. (2020) UK Femicides 2009-2018.

Gill, A.K. and Anitha, S. (2022) 'The nature of domestic violence experienced by Black and minoritised women and specialist service provision during the COVID-19 pandemic: practitioner perspectives in England and Wales.' *Journal of Gender-Based Violence*.

Gov UK. (2018) *Homelessness code of guidance for local authorities*.

Gov UK. (2024) *Indefinite leave to remain or enter (domestic violence or abuse)*.

Home Office. (2025) *Migrant Victims of Domestic Abuse Concession (formerly the destitute domestic violence concession (DDVC))*.

Housing Act. (1996), c. 189.

Joint Briefing. (2024) *Securing Access to Justice. The need for legal aid in immigration. Joint Briefing from 71 Organisations*.

McManus, S. Walby, S. Barbosa, E. Appleby, L. Brugha, T. Bebbington, P. Cook, E. Knipe, D. (2022) 'Intimate Partner Violence, Suicidality, and Self-Harm: A Probability Sample Survey of the General Population in England.' *The Lancet Psychiatry*, Volume 9, Issue 7, 574-583.

Office for National Statistics. (2024). *Women who have survived domestic abuse and their experiences of temporary safe accommodation in England: January to June 2023*.

Project 17. (2024) *The Migrant Victims of Domestic Abuse Concession (MVDAC)*.

Prison Reform Trust. (2017) *There's a reason we're in trouble: Domestic abuse as a driver to women's offending*.

Refugee Council. (2024) *Top facts from the latest statistics on refugees and people seeking asylum*.

Rights of Women. (2024) *Immigration guide Migrant Victims of Domestic Abuse Concession (MVDAC)*.

Southall Black Sisters. (2024) *Harmful Changes to Support Provisions for Migrant Victims of Domestic Abuse*.

The Domestic Abuse Act. (2021), c. 17.

The Law Society. (2024). *Immigration and asylum – legal aid deserts*.

Women in Prison. (2024) *Open Letter to the UK Government: Provide Support, End Unfair Criminalisation of Women*.

Women's Aid. (2019) *Nowhere to Turn, 2019: Findings from the third year of the No Woman Turned Away project*. Bristol: Women's Aid.

Women's Aid. (2022). *Experiences of financial hardship whilst seeking a refuge space.* Bristol: Women's Aid.

Women's Aid. (2023a) *Emergency fund evaluation report.* Bristol: Women's Aid.

Women's Aid. (2023b) *Nowhere to Turn, 2023: Findings from the seventh year of the No Woman Turned Away project*. Bristol: Women's Aid.

Women's Aid. (2024a) *Nowhere To Turn, 2024: Findings from the eighth year of the No Woman Turned Away project*. Bristol: Women's Aid.

Women's Aid. (2024b) *Unsuccessful referrals into refuge. Women's Aid On Track data briefing.*

Women's Aid. (2024c) *On Track Data Briefing 2023-24*.

Women's Aid. (2025) *The Annual Audit 2025.* Bristol: Women's Aid.

Yong, A. (2024) *Between a rock and a hard place: domestic abuse and being a migrant woman in England and Wales. Justice, Power and Resistance.*

Appendices

Appendix A: Demographics of women supported in 2024

Appendix A1: Sex

	Number of women	Percentage of women (out of 342)
Female	337	98.5%
Non-binary	1	0.3%
Not answered	4	1.2%
Total	**342**	**100.0%**

Appendix A2: Transgender

	Number of women	Percentage of women (out of 342)
No	320	93.6%
Yes	5	1.5%
Not known	9	2.6%
Not asked	8	2.3%
Total	**342**	**100.0%**

Appendix A3: Ethnicity

	Number of women	Percentage of women (out of 342)
Asian / Asian British		
Pakistani	35	10.2%
Any other Asian background	15	4.4%
Bangladeshi	14	4.1%
Indian	16	4.7%
Chinese	3	0.9%
Black / African / Caribbean / Black British		
African	51	14.9%
Caribbean	4	1.2%
Mixed / Multiple Ethnic background		
Any other Mixed / Multiple ethnic background	2	0.6%
White and Asian	1	0.3%
White and Black Caribbean	6	1.8%
Other ethnic group		
Arab	15	4.4%
Not Asked	12	3.5%
Any other ethnic group	9	2.6%
Not known	12	3.5%
Declined	1	0.3%
White		
British	114	33.3%
Any other White background	12	3.5%
Eastern European	15	4.4%
Irish	3	0.9%
Gypsy or Irish Traveller	2	0.6%
Total	**342**	**100.0%**

Appendix A4: Age

	Number of women	Percentage of women (out of 342)
16-20	9	2.6%
21-30	84	24.6%
31-39	116	33.9%
40-49	87	25.4%
50-59	13	3.8%
60-69	3	0.9%
Not known	30	8.8%
Total	**342**	**100%**

Appendix A5: Disability

	Number of women	Percentage of women (out of 342)
None	208	60.8%
Yes	111	32.5%
Not known	10	2.9%
Not asked	13	3.8%
Total	**342**	**100%**

Appendix A6: Type of disability

	Number of women	Percentage of women (out of 342)
Mental health	62	18.1%
Physical	38	11.1%
Long term health condition	40	11.7%
Learning	13	3.8%
Visual	4	1.2%
Hearing	9	2.6%
Speech impairment	1	0.3%
Total number of women with a disability	**111**	**32.5%**
Number of women with more than one disability	**43**	**12.6%**

Appendix B: Referrals

Appendix B1: Table version of Graph 1, referrals by month

	Number of referrals	Percentage of referrals (out of 479)
January	16	3.3%
February	25	5.2%
March	25	5.2%
April	54	11.3%
May	53	11.1%
June	41	8.6%
July	49	10.2%
August	44	9.2%
September	50	10.4%
October	49	10.2%
November	48	10.0%
December	25	5.2%
Total	**479**	**100%**

Appendix C: Accommodation outcomes

Appendix C1: Proportion of women with different characteristics and circumstances who were accommodated in a suitable refuge

	Number of women with this characteristic/circumstance who were accommodated in refuge
Women with language and cultural support needs	19 out of 53 (35.8%)
Women from Black and minoritised backgrounds[62]	54 out of 173 (31.2%)
Women with no recourse to public funds	49 out of 176 (27.8%)
Women with 'other' referral reason	6 out of 26 (23.1%)
Women with mental health support needs	23 out of 127 (18.1%)
Women previously evicted from refuge	3 out of 17 (17.6%)
Women with three or more children	2 out of 14 (14.3%)
Women with one or more disability	7 out of 52 (13.5%)
Women with drug and alcohol support needs	8 out of 67 (11.9%)
Women with a disabled child	2 out of 26 (7.7%)
Women with an offending history	2 out of 29 (6.9%)
Women who were tied to their local area[63]	2 out of 32 (6.3%)
Women with a male child over 14	0 out of 12 (0.0%)

62 Although this is not part of the referral criteria, we have included women from Black and minoritised backgrounds as we know about the structural barriers these women are more likely to face.

63 This means that women wanted to stay in the local area due to circumstances such as work commitments, children's schools, medical care, or support networks.

Appendix D: Negative captures

Appendix D1: Negative captures regarding local authority safeguarding teams

	Number of negative captures recorded	Percentage of total (out of 22)
Children's services	18	81.8%
Adult social care	1	4.5%
Other	1	4.5%
Unknown	2	9.1%
Total	**22**	**100%**

Appendix E: Support for survivors with insecure immigration status

Appendix E1: Number and outcomes of immigration applications*

	Number of survivors who made each type of application	Percentage of applications that were successful	Percentage of applications that were rejected	Percentage of applications pending at case closure
MVDAC	47	74.5%	6.4%	19.1%
Asylum	19	0.0%	10.5%	89.5%
SET(DV)	16	6.3%	6.3%	87.5%
Leave to remain as a parent (family visa)	7	0.0%	0.0%	100.0%
DDVC	3	33.3%	33.3%	33.3%
Human rights claim	3	33.3%	0.0%	66.7%
Pre-settled status EUSS	3	33.3%	66.7%	0.0%
Unknown application submitted	2	0.0%	50.0%	50.0%
Change the conditions of current visa to access public funds	1	100.0%	0.0%	0.0%
Extend current visa	1	0.0%	0.0%	100.0%

*Some survivors submitted more than one type of immigration application.

Appendix E2: Sources of funding for accommodation at case closure for survivors who had NRPF at referral to NWTA*

	Number of women	Percentage of women (out of 111)
Housing benefit via MVDAC	30	27.0%
Children's services	18	16.2%
Survivor (e.g. through earnings or savings)	15	13.5%
Unknown	11	9.9%
Home Office[64]	10	9.0%
Southall Black Sisters no recourse fund	7	6.3%
Housing benefit (not via MVDAC or DDVC)	6	5.4%
Local domestic abuse service	5	4.5%
Local housing team (not housing benefit)	3	2.7%
Housing benefit via DDVC	2	1.8%
Survivor's family or friend	2	1.8%
Adult social care	1	0.9%
Employer	1	0.9%
Charity (non-domestic abuse)	1	0.9%
Church	1	0.9%
Military	1	0.9%
Home Office Flexible Fund	1	0.9%

*For some survivors, more than one source was funding accommodation at case closure.

64 Under section 95 of the Immigration and Asylum Act, in most cases, the Home Office is responsible for providing accommodation and subsistence to people with a pending asylum claim who are destitute.

Appendix E3: Sources of funding for interim accommodation accessed by survivors who had NRPF at referral to NWTA*

	Number of women	Percentage of women (out of 78)
Children's services	15	19.2%
Local domestic abuse service	14	17.9%
Police	14	17.9%
Survivor (e.g. through earnings or savings)	8	10.3%
Charity (non domestic abuse)	5	6.4%
Adult social care	4	5.1%
Home Office[65]	4	5.1%
Local housing team (not housing benefit)	4	5.1%
Southall Black Sisters no recourse fund	3	3.8%
Unknown	2	2.6%
Housing benefit via MVDAC	1	1.3%
Housing benefit (not via MVDAC or DDVC)	1	1.3%
Employer	1	1.3%
Survivor's family or friend	1	1.3%
NHS	1	1.3%

*Some survivors accessed interim accommodation with more than one source of funding

65 Under section 95 of the Immigration and Asylum Act, in most cases, the Home Office is responsible for providing accommodation and subsistence to people with a pending asylum claim who are destitute.

For more information on the NWTA project, please visit the Women's Aid website.

Copies of all editions of the Nowhere to Turn report series can be downloaded for free online.

For information on training delivered by Women's Aid, please see our website or email us.

Nowhere To Turn, 2025: Findings from the ninth year of the No Woman Turned Away project

Women's Aid Federation of England, PO Box 3245, Bristol, BS2 2EH

www.womensaid.org.uk | www.loverespect.co.uk

© Women's Aid 2025

Women's Aid Federation of England is a registered charity in England & Wales (1054154)
and is a company limited by guarantee in England & Wales (3171880)