

Tackling Domestic Abuse in Supported Housing Toolkit

Authors: **Catherine Glew**,
St Mungo's with Helen Greig, National Housing Federation

St Mungo's vision is that everyone has a place to call home and can fulfil their hopes and ambitions. As a homelessness charity and housing association St Mungo's clients are at the heart of their work. St Mungo's provide a bed and support to more than 2,850 people a night who are either homeless or at risk, and work to prevent homelessness. St Mungo's support men and women through more than 300 projects including emergency, hostel and supportive housing projects, advice services and specialist physical health, mental health, skills and work services. St Mungo's work across London and the south of England, as well as managing major homelessness sector partnership projects such as StreetLink and the Combined Homelessness and Information Network (CHAIN). St Mungo's influence and campaign nationally to help people to rebuild their lives.

The National Housing Federation (NHF) is the voice of housing associations in England. With almost 800 housing association members, providing homes for around six million people, the NHF is at the forefront of tackling the nation's housing crisis. The NHF's vision is for a country where everyone can live in a good quality home they can afford. The NHF works with their members to make this vision a reality – delivering ambitious programmes that lead to lasting, positive change.

Purpose of this toolkit

This section sets out the role of supported and sheltered housing in providing accommodation for victim/survivors of domestic abuse. It particularly focuses on homelessness accommodation settings including shelters or hostels and supported housing. It offers guidance for housing providers and commissioners who are working to improve their response to domestic abuse in these settings and in line with Domestic Abuse Housing Alliance (DAHA) standards.

Introduction

Supported housing exists to ensure that people with additional support needs can lead healthy and fulfilling lives within their own homes and communities. Supported housing services provide a safe and secure home alongside a range of support and care services and home adaptations that help people to live independently.¹

Supported housing can be a long-term housing option, or it may be provided for a shorter period to help people get ready to live independently in other types of accommodation.

For example, supported housing can support:

- Homeless people with complex and multiple needs make the transition from life on the street to a settled home, education, training or employment,
- People with mental health needs to stabilise their lives, recover and live more independently,
- Ex-servicemen and women to find a stable home, including support for those with mental health and physical disability needs,
- People with a disability, particularly learning disabilities, in the longer term to maximise their independence and exercise choice and control over their lives,
- Older people to maintain their independence, for example in sheltered or extra-care housing schemes.

Specialist domestic abuse refuge services offer accommodation and support for victim/survivors, mainly women. They are delivered by expert services whose core business is to deliver domestic abuse support. For this reason, refuges are considered separately from other forms of supported housing. For more information about refuges, see the Refuge Services toolkit.

Why address domestic abuse in supported accommodation settings?

Victim/survivors of domestic abuse and their families are on a spectrum of need and require a range of different housing options. Supported housing provides an option for victim/survivors who have care and support needs in addition to their experiences of domestic abuse, and who may be unable to live safely and independently in housing of other tenure types.

Women-only supported housing is a valuable option for women with care and support needs who have experienced domestic abuse from male perpetrators, and who face the risk of being further victimised or re-traumatised in mixed services.

The care and support needs being addressed in supported housing may include physical and mental health problems, limited mobility, learning disabilities, social care needs, and drug and alcohol issues. The presence of other care and support needs may make domestic abuse more

difficult to detect. Housing providers have a duty to recognise and respond to domestic abuse in order to safeguard their residents.

There is limited data indicating how many victim/survivors of domestic abuse are living in supported housing, with underreporting likely. For example, Homeless Link data reports that 6% of residents in homelessness accommodation are women affected by sexual or domestic violence.ⁱⁱ However, a broader review suggests that the experience of domestic violence and abuse is in fact near-universal among women who become homeless.ⁱⁱⁱ

Needs relating to domestic abuse

Some people may be referred into supported housing with a known history of domestic abuse. Supported housing can help victim/survivors to live with the long-term effects of domestic abuse, including physical disability and mental health problems.

Many other supported housing residents are at elevated risk of domestic abuse because of their care and support needs and face additional barriers to accessing services. For example:

- People with mental health needs were more likely than others to have experienced physical and sexual abuse as well as harassment, stalking and jealous or controlling behaviour.^{iv}
- Older people are hugely underrepresented in domestic abuse services, and domestic abuse among older adults is less likely to be recognised by professionals.^v

Disabled women are twice as likely as women who are not disabled to experience domestic abuse. They are also likely to experience abuse over a longer period and to have more severe injuries as a result of the violence.^{vi} Perpetrators may use a victim/survivor's disability as part of their abusive tactics, particularly when they are also their carer. This could include withholding care, being neglectful or abusive in their duties, or controlling benefit payments relating to the disability. Victim/survivors may also be physically dependent on their abuser.

These factors create additional barriers for victim/survivors to seek help and access specialist domestic abuse services. Women's Aid data shows that it can be difficult for a woman to access a refuge space if she has access needs related to her disability as there is a small number of refuges that can accommodate wheelchair access and women with limited mobility.^{vii}

Some victims of domestic abuse may lack capacity to make decisions for themselves and consent to sex and relationships. The Mental Capacity Act 2005 offers a framework for people who need additional support. The Association of Directors of Adult Social Services (ADASS) guidance on adult safeguarding and domestic abuse offers practice guidance:

'A principle of the Mental Capacity Act is that a person only has full capacity if they have access to all the relevant information about the decision they are making – in this case the decision/s about what, if anything, to do about the risk of abuse they are facing. All victims should be given information about their options whether or not they appear to want them at this time. The person at risk must be given time to understand accessible information about the options open to them. This should include specialist domestic abuse services and explore housing options such as Sanctuary Schemes and places of safety, as well as legal options such as restraining orders, and information about actions that the police can take such as Domestic Violence Protection Orders.' ^{viii}

The guidance recognises that creating conditions where victim/survivors feel safe can take time and recommends domestic abuse advocates as an additional resource.

Assessing capacity in cases of domestic abuse is challenging and requires specialist knowledge and skills. Supported housing staff are not expected to conduct an assessment under the Mental Capacity Act, but they should be prepared to request this from the local authority if they think it is needed - for example, if a woman with learning disability started a relationship with another resident and staff are unsure if she has capacity to consent.

The Spotlight series from SafeLives focuses on hidden victim/survivors of domestic abuse, including many supported housing client groups. Read the Spotlight series on the SafeLives website:

[Domestic abuse and mental health](#)

[Homelessness and domestic abuse](#)

[Disabled people and domestic abuse](#)

[Older people and domestic abuse](#)

Improving the response to domestic abuse in supported housing

Because there is a lack of adequately funded refuge provision, victims/survivors who face multiple forms of discrimination and disadvantage can often face barriers to accessing refuge services. Supported housing offers a safe environment that meets care and support needs and can effectively safeguard against domestic abuse.

Supported housing providers have opportunities to get to know their residents in ways that are not always possible in a general needs setting. Through the provision of support and care services, supported housing staff can establish a trusting relationship with residents, providing a unique opportunity to recognise and respond to domestic abuse that would otherwise be hidden.

Supported housing services also hold responsibility for safeguarding residents with care and support needs. The statutory guidance accompanying the Care Act 2014 includes domestic violence as a named type of abuse. Recognising and responding to domestic abuse is a key part of safeguarding practice.

These opportunities and responsibilities mean that providers and commissioners should consider how their approach to domestic abuse may differ in supported housing to their work in general needs settings. Supported housing services, staff and victim/survivors face a number of distinct challenges that may benefit from a tailored approach.

Responding to perpetrators

There are a number of challenges facing supported housing providers responding to perpetrators of domestic abuse with care and support needs. However, as in all work with perpetrators, the priority should be the safety and preference of the victim/survivor.

If the perpetrator and victim/survivor are living in the same service it may be appropriate to separate them, taking into account the wishes of the victim/survivor. This may include transferring or evicting the perpetrator or offering the victim/survivor alternative accommodation, if preferred.

Thorough consideration must be given to the risks and consequences of separating or deciding not to separate clients, including the risk of serious harm to the victim/survivor in either case. In homelessness accommodation, providers should consider whether if separated a victim/survivor is likely to abandon accommodation to remain with the perpetrator, and whether the perpetrator may become street homeless following an eviction and pose a risk to others.

Perpetrators of domestic abuse rarely harm just one victim. Most perpetrators will abuse more than one victim especially if they do not engage with professional support to change their behaviour. Supported housing providers should bear in mind that available interventions and services for perpetrators of domestic abuse may not be suitable for those with care and support needs and contact their local Respect accredited perpetrator service for advice.

Where mutual allegations of abuse are made, it is important to gain a realistic understanding of power and control dynamics within the relationship and identify which party is at higher risk of serious harm. If it is unclear who is the primary perpetrator, professionals can seek specialist advice from Respect by contacting their helpline on 0808 802 4040.

Recommendations for commissioners and providers

Recommendations for commissioners:

- Consider whether female victim/survivors have access to **women only services or spaces** within supported housing. Many women will not feel safe to disclose domestic abuse or access support in mixed services and may face the risk of being further victimised or re-traumatised.
- When commissioning supported housing services, ensure awareness of domestic abuse is **reflected within service design**, e.g. make it a contractual requirement that the provider trains all staff on domestic abuse, including training tailored to the specific client groups
- Where **different agencies are responsible for housing management and care and support**, ensure that both partners are operating based on a shared understanding of domestic abuse and receive adequate training.
- Work in partnership with domestic abuse and disability organisations to **share learning with each other and to involve disabled victim/survivors** in service development
- Commission domestic abuse services to provide direct support to victim/survivors living in supported accommodation and consultancy support to providers, which is in line with the government's [National Statement of Expectations](#) and guidance on the actions local areas should take to ensure victims of violence against women and girls get the support they need.

Recommendations for providers:

- Ensure all staff have training on domestic abuse. Ensure that domestic abuse training provided to staff in supported housing addresses the **specific needs of their client groups** and takes a **trauma informed approach**
- Have policies and procedures in place that consider how to **assess capacity to consent** to sex and relationships
- Accommodate for **communication needs** for people with a learning disability or autism. This includes providing accessible resources on domestic abuse and suitability of using risk assessment tools, like the Domestic Abuse, Stalking and Honour Based Violence (DASH) risk indicator checklist (RIC).
- When making onward referrals be aware that victim/survivors with additional care and support needs - particularly mental health and substance use needs - **may face barriers to accessing refuges and other specialist domestic abuse services**. Specialist services have faced significant funding cuts in recent years which can limit their flexibility to work with complex cases.

- Specialist services should still be able to **provide advice to staff**, even if they are unable to work with some victim/survivors directly. Establish **working relationships with local specialist domestic abuse agencies** to support staff to assess risk and safeguard victim/survivors.
- Expect that staff may need to **advocate for victim/survivors with care and support needs** to receive support from services and the police, and that victim/survivors may need support to attend appointments with domestic abuse services rather than just a helpline number or a referral.
- Understand the **impact of regular domestic abuse disclosures on staff** supporting victim/survivors with complex cases. Managers should provide support for staff through regular supervision and consider implementing team reflective practice.

The DAHA accreditation process prompts providers to improve their organisational practice in eight priority areas. Providers should assess and provide evidence that their approach to tackling domestic abuse across these eight standards is working well in their supported housing provision and consider developing new ways of working.

Case Study - St Mungo's

St Mungo's is a homelessness charity and housing association providing a bed and support to more than 2,850 people a night in London and the south of England. In 2018, St Mungo's began working towards DAHA accreditation as a way to improve its organisational response to domestic abuse.

Many St Mungo's clients experience domestic abuse in combination with other support needs, including substance use and poor mental health. Staff reported they found domestic abuse difficult to detect and that many clients minimised their experiences of abuse, instead focussing on housing or other support needs.

St Mungo's commissioned Standing Together Against Domestic Violence to create bespoke domestic abuse training and e-learning for homelessness service staff. The training included detailed guidance on spotting signs of domestic abuse in homelessness settings and understanding the dynamics in relationships where one or both partners are using drugs and alcohol or need support with their mental health.

Further information and support

Mental health and multiple disadvantage

Toolkit from Against Violence and Abuse (AVA) addressing domestic and sexual violence, substance use and mental ill-health

<https://avaproject.org.uk/resources/complicated-matters/ava-toolkit-2018reprint/>

Disability

The DeafHope project from SignHealth provides domestic abuse support and information for Deaf people <https://www.signhealth.org.uk/our-projects/deafhope-projects/>

Respond works with children and adults with learning disabilities, autism or both who have experienced abuse or trauma <https://respond.org.uk/what-we-do/>

Older people

The Silver Project from Solace Women's Aid provides practical and emotional support for women aged 55 and over experiencing domestic abuse and sexual violence

<https://www.solacewomensaid.org/node/146>

Armed forces

Information about support for victim/survivors in the military community from the armed forces and civilian support services <https://www.gov.uk/government/collections/domestic-abuse-guidance-and-support-for-the-armed-forces-community>

References

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