



#Women
Demand Better

Women Demand Better Mental Health

The impact of abuse, trauma and the Covid-19 pandemic on women's mental health

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About Advance

Advance, a national charity founded in 1998, **empowers women and girls to lead safe, violence-free and equal lives**, so that they can actively engage and flourish in society. Advance, led by and for women, supports those experiencing domestic abuse to be safe and lead the lives they choose, and those in contact with the criminal justice or at risk of offending to break the cycle, keeping families together.

Advance's whole system approach is aligned with **our values of collaboration and innovation**, partnering with other statutory and non-statutory providers, to develop and deliver specialist **community-based services in a Coordinated Community Response**. We focus on systemic change to meet women's needs and improve access to services across the whole system, enabling consistency and continuity of support throughout their journeys.

Through its women's centres and advocates, Advance delivers holistic, trauma-informed, specialist support and advocacy and group interventions centred on each woman's needs. In 2020, Advance reached out to **more than 6,000 women and girls** directly.

Since its inception, Advance has led the way: the charity's innovations include the role of the Independent Domestic Violence Advocate (IDVA) model in 2005, the Whole Justice Approach through a co-location model within police stations in 2000, and Domestic Abuse Specialist Courts in 2002.

Since then, Advance has developed pioneering best-practice models to improve systemic response and outcomes for women in the community. Examples include its Minerva Model for those in contact with the criminal justice system and the Whole Housing Model for survivors of domestic abuse.

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Statement: Women Demand Better Mental Health Support as we rebuild our communities, post-pandemic

Looking forward to a post-pandemic world, both national and local Governments have pledged to Build Back Better. But we ask: **better for whom? Better how?** And, crucially, **who gets to decide what's 'better'?** In such a crowded space, during a global transition, it may only be the loudest voices that benefit.

We believe that 'better' must mean better for those whose voices – marginalised for far too long – may have been silenced further by lockdown. Those voices have, disproportionately, belonged to women, who have borne the brunt of the past twelve months.

Women affected by abuse and trauma are the silent victims of the COVID-19 pandemic and they are being ignored.

With social distancing and three national lockdowns in the UK since March 2020, women and children have been more isolated than ever, finding it difficult to access support. Women and children being abused were locked down at home, often with their abusers, becoming increasingly unsafe and unable to leave or to get help. Many women were in custody with short-term sentences away from their children and worried about their families. Those released from prison often had nowhere to go, with no health or financial support, and unable to reunite with their children.

Poverty and digital inequality made difficult and unsafe situations even more so. Women and their families lacked essentials such as food, clothing, hygiene items and medication, and had no phones or access to wi-fi to contact Advance and other services for help throughout the crisis.

A year on since the start of the COVID-19 pandemic, the **lives of women have been disproportionately affected**. Women have taken on increased family and home-schooling responsibilities, many doing so while working. For many, what started as a health crisis has turned into an economic crisis, with more women than men suffering the loss of their employment, income and housing.

It is not surprising that the mental health of the women we support, who often experience multiple disadvantages and high levels of need, has been acutely impacted. Women have reported to Advance significant increases in anxiety and depression, suicidal thoughts and self-harm.

Our evidence shows:

- Up to 62% of women experiencing domestic abuse were self-isolating with the perpetrator and 50% have had increased contact with their abuser during the first lockdown, increasing anxiety about their and their children's safety;
- 37% of women survivors of domestic abuse and 79% of women in contact with the criminal justice system reported mental health needs in the year to March 2021;
- 52% of women in contact with the justice system reported increased support needs for mental health and 28% reported increased risk of self-harm during the first lockdown;
- Women reported facing higher criteria for accessing mental health and safeguarding support, with 42% of women reporting difficulty accessing mental health services, leaving them feeling unsupported and even forgotten;
- On average, women required three to four times the amount of support from Advance's advocates compared to pre-pandemic levels, often due to increasing mental health needs;
- Women reported difficulty and additional barriers to contacting statutory services for support, as well as delays in accessing housing and the legal system;

- Women have also reported difficulties in accessing essentials such as food and clothing, and worsening financial issues, increasing their levels of anxiety and ill mental health.

Sadly, Advance has also identified **an increase in women's deaths by suicide and overdose**, with eight deaths in London in the year to March 2021, compared to one death each year in the previous years.

Due to the restrictions and social distancing rules, **statutory and voluntary services had to reduce face-to-face support and access to community centres**. Advance also adapted its services, supporting women remotely with limited access to face-to-face support and its women's centres. Our frontline staff supporting women in community settings - such as hospitals, housing offices, police stations and probation offices - could no longer do so, as access was restricted.

Advance, like all women's services across the country, were over-subscribed and under-funded prior to the pandemic. The **unprecedented increase in demand during the pandemic has meant our staff have needed to provide significantly more support**, both emotional and practical, to women facing multiple disadvantages. Advance's frontline workers have worked tirelessly alongside our partners to adapt our services and minimise disruption. Every day, we are inspired by those we support, their strength and resilience against often impossible odds.

The pandemic lifted the lid on these issues. It showed us a world in which **access to community-based services for women facing abuse and trauma was severely limited**. And the impact has been dire. These services are not 'nice to have' – without them, women are suffering in silence and many feel they have no choice but to end their lives. Women's deaths are being missed; **they are the silent deaths of women suffering because of COVID-19** and the parallel epidemic of ill mental health.

As we rebuild our community, post-pandemic, it would be a false economy to go back to basics and a tragic injustice to set women back even further, following decades of progress.

Women demand better.

We call for better mental health support for women experiencing abuse and trauma:

- **Trauma-informed, longer-term specialist services funded** for women and children experiencing abuse and trauma, who are domestic abuse survivors and/or in contact with the justice system;
- **Mental health support funded for all women and children** experiencing abuse and trauma, who are domestic abuse survivors and/or those in contact with the justice system;
- **Access to women-only safe spaces and community-based support** for all women and children, in addition to accommodation-based support, and instead of investment in more prison spaces, to end the post-code lottery and ensure we are meeting the needs of survivors nationally;
- **A Government review of women's deaths resulting from self-harm**, including suicides and overdoses, focused on those in contact with statutory services, those who are survivors of domestic abuse and/or in contact with the criminal justice system;
- **Further research into the impact of the pandemic on safeguarding and best-practice** for those affected by abuse and trauma, including access to statutory and support services, identifying safeguarding risks and responses within social distancing restrictions.

As the Domestic Abuse Bill is granted Royal Assent and Probation Services are being reformed in 2021, we call on the Government, policy makers and commissioners for fully-funded provision of vital specialist, community-based services for all women and children.

No-one should be left behind. Women demand better.

1. Women's Abuse, Trauma and Mental Health Review

1.1 Women and Girls' Mental Health Needs in England

Women are more likely than men to experience mental health issues, such as depression and PTSD (post-traumatic stress disorder) and self-harm, and this has worsened over the last decade ⁽¹⁾. A 2014 NHS survey found **one in five women had mental health needs** (compared to one in eight men) ⁽²⁾.

These needs were more prominent in young women, with one in four of 16- to 25-year-olds (25%) with symptoms of common mental health disorders, such as depression and anxiety, compared to 17% of all adults and 20.7% of all women ⁽²⁾. Figures are especially high for young women (aged 16 to 34) in deprived households (Agenda, 2020) ⁽³⁾. In 2018, **one in five young women reported recent self-harm ⁽⁴⁾ which, along with suicidal ideation, had been growing** at an alarming rate within this group ⁽²⁾.

In 2019, the ONS found that rates of **suicide in women in England had been growing in the last decade to 5.2 deaths per 100,000** from 4.6 deaths in 2017. Among 10- to 24-year-old girls and young women, despite having a low number of deaths overall, 'the rate had increased significantly since 2012 to its highest level with 3.1 deaths per 100,000' (ONS, 2019) ⁽⁵⁾.

Women disproportionately suffer violence and abuse (ONS, 2020) compared to men, including

- domestic abuse (1 in 4 women suffer in their lifetime), sexual violence, stalking and harassment
- higher rates of prosecution, conviction and imprisonment (for mainly non-violence offences),

leading to trauma and ill mental health, including higher rates of self-harm and suicide.

1.2 Impact of Domestic Abuse on Women's Mental Health

Domestic abuse not only costs the UK economy a staggering amount (£66 billion a year as reported by Home office in 2019⁽¹¹⁾), it also has wider detrimental social costs, which have been exacerbated by the pandemic.

Domestic abuse has been shown to have an adverse effect on a woman's mental health, leaving some women to feel they have no other choice but to take their own lives. A 2018 study by Refuge and Warwick University found a correlation between suicidality and concurrent abuse of all forms within domestic abuse survivors surveyed ⁽⁶⁾. A 2012 research identified women who had experienced **domestic abuse or violence to have shown a 'three times increase in the likelihood of depressive disorders**, four times increase in the likelihood of anxiety disorders, and a seven times increase in the likelihood of post-traumatic stress disorder (PTSD)' ⁽⁷⁾.

In most cases, the causal effects of domestic abuse on the development of mental health disorders and the severity and/or duration of abuse can be found to be linked heavily with the severity of depressive symptoms ⁽⁸⁾. In some cases, pre-existing mental illness increases a woman's vulnerability to domestic abuse, as perpetrators may exploit symptoms and fear around a survivor's health (SafeLives, 2019) ⁽⁹⁾.

A woman's journey to support is seldom smooth; on average domestic abuse survivors attempt to leave their partner 2.1 times before accessing help. 'A Cry for Health' Report found that 85% of survivors sought help from professionals without success a year prior to finally receiving the effective support to tackle their abuse (SafeLives, 2016⁽¹⁰⁾). **Women with mental health problems attempt to leave their partner on average three times before they are able to** (SafeLives, 2019) ⁽⁹⁾. If a woman decides to leave her abuser, she is often also leaving her home and her support base. She is likely to be in contact with

multiple agencies regarding her accommodation, her children, her health, and the courts. All of this can be overwhelming and traumatic, and result in further barriers to recovery. **When women are left without effective support, it can have serious adverse effects on their mental health.**

The link between mental health and domestic abuse is further exacerbated for women experiencing disadvantages and with intersectional needs. **Black and minoritised women face additional barriers to accessing support** and as noted in *A Roof, Not A Home* report by Latin American Women's Aid (LAWA), can experience re-victimisation, 'not only in terms of poor welfare, housing provisions and structural sexism but is also compounded by intersecting structures of oppressions based on race, immigration status, language barrier, class and/or disability' ⁽¹²⁾.

A woman's **immigration status is often not only a barrier to accessing support, but also a perpetrator's tactic to maintain control and continue the abuse.** Accessing support can often be a long and arduous process. As noted by Women's Aid, when migrant women are trying to access a refuge, they can be faced with multiple challenges including mental health support needs, having to break ties to their local area, having no recourse to public funds and language barriers ⁽¹³⁾. Too often, women report being let down by statutory services, leading to unsafe situations such as homelessness or sofa surfing, hunger, and ill mental health.

Women with disabilities are twice as likely to experience abuse in their lifetime and often their abuse continues for longer. Women with disability are also significantly more likely to report abuse by more than one perpetrator throughout a lifetime and are twice as likely to have planned or attempted suicide (SaveLives, 2017) ⁽¹⁴⁾.

1.3 Contact with the Criminal Justice System and Women's Mental Health

Women in contact with the criminal justice system often face multiple disadvantages and needs, such as poverty, gender-based abuse and violence, homelessness and problematic substance use that adversely affect their mental health and are barriers in getting support.

Women represent 5% of the total prison population in the UK. Although three out of four women have committed non-violent offences (including tv licensing fines, motoring offences and shoplifting), they are more likely to be prosecuted, convicted and sentenced to prison than men, with most sentences less than 12 months. **Such short-term prison sentences are more likely to result in reoffending**, whereas community support has been found to be more effective in breaking the cycle of a 'revolving door' according to the Ministry of Justice's Female Offender Strategy 2018 ⁽¹⁸⁾.

Imprisonment of women only builds trauma upon trauma; the Ministry of Justice reported **self-harm incidents were at 3,207 per 1,000 among female prisoners (9.3 incidents per woman self-harming)** compared to 661 incidents per 1,000 among male prisoners (4.4 incidents per man self-harming) ⁽¹⁷⁾. In the 2019/20 Prisoner Survey by the Ministry of Justice (2020) ⁽²³⁾ a significantly higher percentage of **women reported 'self-declared mental health problems**, physical disability, having drug and alcohol problems, money worries and housing worries' compared to men surveyed. In 2016, HM Chief Inspector of Prisons ⁽²⁴⁾ found that **65% of women said they had ill mental health**, compared with 42% of men in prison.

Advance's work with a thousand women in the criminal justice system per year, supported by research (Bartlett and Hollins, 2018) ⁽¹⁹⁾, evidences that both imprisonment and the conditions of confinement have gender dimensions. A woman's route to crime is often related to coercive or problematic relationships (Corston, J. 2007) ⁽¹⁵⁾, including taking the blame for a partner's crime. Prison Reform Trust reported **57% of women in prison are victims of domestic abuse as adults** ⁽¹⁶⁾, which is

substantiated by Advance's work where more than three out of four women report experiencing gender-based male violence, including domestic abuse, sexual violence, child abuse and exploitation. Women report strong links between this experience of abuse and their offending, as reported by Prison Reform's Trust 'There's a reason we are in trouble' (2017) and Advance's 'A Place to Go Like this' (2020).

Lord Farmer's review found that **prison can be extremely difficult for women as it leads to the separation from children in their care as their primary care-giver**, into foster care or potentially unstable kinship care situations. Being moved far from home to prison can also cut women off from any support services or communities they have known and increase isolation. Distance and long commutes, the associated costs and concerns that prisons are unsuitable environments for children all effect women's ability to maintain close relationships which is important for their mental health as well as the reduction in future offending (Lord Farmer, 2017) ⁽²⁰⁾.

Women's mental health can be affected by both physical and psychological changes during and after pregnancy ⁽²¹⁾. Women who have given birth in prison, and those who enter the system as **new mothers, who must be separated from their children** will often experience trauma, separation anxiety and extreme worry and as a result mothers in prison often require additional mental health support (Prison Reform Trust, 2017) and **'unless and until women are reassured about their children, they are unable to make progress in other areas'** (Lord Farmer Review, 2017) ⁽²⁰⁾. Advance's 2020 report 'A Place to Go Like This' ⁽²²⁾ on women who are mothers, victims of abuse and offending, found that a women's imprisonment also has long term effects on her children including their education, health and wellbeing, and the likelihood of the children offending themselves; also evidenced by Lord Farmer's review.

Many women in prison and those with a conviction in the community experience co-occurring issues of mental illness and substance and/or alcohol misuse, widely known as a 'dual diagnosis'. In recent years, growing development in **research has indicated that women with a 'dual diagnosis' were being passed between different services and, as a result, falling through the cracks** – this is also evidenced by the women supported by Advance's Minerva service. Women are often unable to access mental health support until they stop problematic alcohol or substance use, and this leaves them without support for their experience of trauma and abuse which is linked to their ill mental health.

The issues women face do not end when they leave prison, including having a criminal record. Once released, or in the community, women often 'face several immediate challenges including securing accommodation, employment or financial support, healthcare, and, for many, substance use treatment, mental health support, child support services and help to exit and be protected from domestically violent or exploitative relationships' (Richie, 2001) ⁽²⁵⁾. Without vital community support, including long-term support to overcome trauma and ill mental health, women continue to suffer, leading to high levels of self-harm and suicide.

2. Women's Mental Health and the COVID-19 Pandemic Review

2.1 Impact of COVID-19 Pandemic on Women and Girls

For many, the implications of lockdown and restrictions due to the pandemic since March 2020 have been deeply worrying. **The restrictions have affected women disproportionately and amplified gender gaps and inequalities** that already exist in the UK.

Women increased the number of hours devoted to care more than men did, with an additional burden on working mothers ⁽²⁶⁾. **Women are a third more likely to be employed in sectors shut down over the first national lockdown**, and are therefore at higher risk of job loss ⁽²⁷⁾. Mothers in the UK were 1.5 times more likely than fathers to have either quit or lost their job during the lockdown ⁽²⁸⁾. Women are more likely to work in the public sector, to be a frontline worker or have unstable employment or to be a sole parent.

Financial insecurity had already been higher in women and has only been made worse by the pandemic ⁽²⁹⁾. Advance's survey in July 2020 of women supported by our services during the first lockdown of April to June 2020 ⁽³⁰⁾ found that

- **35% identified finances, debts, and benefits as their top need**, suggesting that COVID had significantly affected women's financial security.
- 64% faced digital exclusion with no access to Wi-Fi or a phone
- 48% lacked essentials such as food and hygiene products
- **60% reported a negative impact from COVID-19 on their health** and wellbeing

with clear links between inequality, poverty, and mental health, all of which have been exacerbated by lockdown restrictions.

The pandemic had further detrimental effects on minoritised women, including higher risk of infection due to the type of employment as, highlighted by the The Fawcett Society, they are more likely to work in health or care, and pointing to existing social-economic and racial inequalities in society. Research also found that **minoritised women were more likely to report worries about finances and feeding their children**, and 'life satisfaction and happiness' were lower among this group during COVID ⁽³¹⁾.

A separate report by the Fawcett Society also highlights that **almost 60% of women living with a disability found isolation difficult to cope** with compared to 41% non-disabled women, just over half reported high anxiety ⁽³²⁾.

2.2 Domestic Abuse and COVID-19 Impact on Women's Mental Health

For women and children where home is not always safe, lockdown has had adverse effects on their mental health. Social distancing restrictions have led to increased isolation, higher risk of harm and without opportunity of a brief escape through work or school.

Women surveyed by Advance ⁽³⁰⁾ reported that **the increased isolation has made accessing emotional and practical support even more difficult**. Those experiencing abuse were locked down at home, often with their abuser: according to a 2020 Women's Aid survey, one-third of women reported that their abusers had started using 'lockdown restrictions or the COVID-19 virus and its consequences as part of the abuse' ⁽³³⁾. The survey also found that **48% of women felt they couldn't leave or get away because**

of the pandemic, while 67% felt they had no one to turn to ⁽³³⁾. Many survivors had also noted that the lockdown restrictions triggered memories of past abuse and trauma.

A *Cry for Health* report by SafeLives ⁽³⁵⁾, found that A&E staff ‘missed opportunities to intervene’ and after having an embedded and visible independent domestic violence advisor (IDVA) in the hospital setting, nine out of ten survivors of abuse said they felt safer. However, **COVID-19 have made access to domestic abuse support through IDVAs in hospitals and statutory health settings all but impossible**, increasing missed opportunities to support women experiencing domestic abuse and mental health needs.

Women often report a fear of social services because of their ‘perceived power to remove children’⁽²²⁾, and this can prevent women from feeling able to disclose abuse or issues around their mental health. At times, a woman’s parenting will become the focus, rather than providing support around issues such as abuse, mental health problems or substance misuse. **Access to support for women and their families through Social Care was also impacted** during the pandemic and co-locations of Advance’s IDVAs with Family and Children’s Services were not possible due to social distancing restrictions.

COVID-19 has increased the risk of domestic abuse and has exacerbated existing inequalities already impacting marginalised women. As noted by Imkaan, for black and minoritised women, the risk of violence is often racialised, and barriers for women who do not speak English, have a disability, or experience mental health issues have grown exponentially. Imkaan also noted that minoritised women reported that they are finding it harder to contact domestic abuse services, and those who are, are **displaying ‘higher rates of self-harm, anxiety, and distress’** ⁽³⁴⁾.

Women living with a disability are already twice as likely to experience domestic abuse and, as noted by the Fawcett society ⁽³²⁾, just under half reported that lockdown caused a strain on their relationship compared to 30.7% of non-disabled women.

2.3 Criminal Justice System and COVID-19 Impact on Women’s Mental Health

The pandemic has highlighted gender disparities within the criminal justice system both in prisons and in the community. COVID-19 has added a further health dimension to prison life, as women involved in offending are often more likely to have underlying health issues ⁽³⁷⁾, with **79% women supported by Advance reporting mental health issues**, 61% of women report problematic substance use and 55% report domestic abuse.

Many women in prison have had their routines changed exponentially during the last year, including a lack of contact with their children, as all face-to-face visits stopped. In some cases, as noted by The Inspectorate of Prisons, **women hadn’t seen their children for two months**, including over video ⁽³⁶⁾. Women who were vulnerable to COVID-19 or had symptoms or were new to custody were also isolated from the rest of the prison population and, in some cases, at the beginning of lockdown, **‘with no time in the open air and a shower only every three days’** as noted by the HM Chief Inspector of Prisons ⁽³⁶⁾.

There was also an 8% increase in self-harm incidents within female prisons in the 12 months to September 2020. In the final three months of 2020, the number of **self-harm incidents rose by 24%**. ⁽³⁸⁾. While additional welfare and checks had been implemented accordingly, in the prisons inspected, lockdown had reduced access to support from various agencies, leaving women with the highest level of need with further risk ⁽³⁶⁾.

For women on early release, it is a requirement that they have accommodation which can often be difficult to achieve. However, **obtaining accommodation was made harder by restrictions, resulting in**

delays of early prison releases, with women remaining in prison and away from their children and families during the crisis

Women being released from prison, whether on early release or at the end of their prison sentence, faced additional barriers ⁽³⁹⁾, including increased risk to COVID-19 due to underlying health problems noted previously, as well as poverty and homelessness. Women being released often had no guarantee of accommodation or an income. In one prison, **42% of women had been released homeless or to very temporary or emergency accommodation** in the six months prior the 2020 HM Chief Inspector of Prisons review ⁽³⁶⁾. A lack of safe accommodation is one of the key drivers in perpetuating a woman's cycle of offending, as well as cycles of abuse: without a home to call her own, a woman is often forced into unsafe situations, homelessness, and abuse.

Lockdown restrictions meant that many of the women's support networks in the community, such as friends and family, were not available to them in the same way. Libraries, which would usually allow women to access the internet, were closed. Children were not in school, making childcare even more difficult. Employment opportunities had drastically reduced and access to face-to-face support and services had ceased ⁽³⁹⁾ or were severely limited.



3. Women Supported by Advance During the Pandemic: Evidence

One year on since the start of the pandemic, Advance reached out to over 6000 women and their children in the year since the first Covid-19 lockdown. We have reviewed the quantitative and qualitative evidence in our case management database for the year ended 31 March 2021, in order to highlight the impact of the pandemic for the women supported by our services, those experiencing domestic abuse and/or in contact with the criminal justice.

Lockdown restrictions have made already difficult situations worse for the women we support across all our services. At the start of lockdown in 2020, Advance saw a **40% increase in calls to our domestic abuse helpline** in the first three months, as women faced an increased risk of harm at home during lockdown and overall **referrals for the year increased by 10%.**

At the same time, in the three months to June 2020, **there was a 37% reduction in referrals of women in contact with the criminal justice system** by Probation and other Statutory Services compared to the same period in the previous year, as established referral pathways to support services like Advance were disrupted. However, for the year to March 2021, **referrals of women increased by 13% on the previous year**, despite a reduction in women in prison and in arrests overall.

3.1 Women Experiencing Domestic Abuse and Mental Health

During the pandemic, Advance's frontline teams have **provided on average three times the amount of support for every survivor**, compared to pre-pandemic, **more often than not due to increasing mental health needs.** Partner organisations have told us that 80% of their frontline workers' time is spent emotionally supporting survivors. As a result, already over-stretched services are being pushed further, both in terms of increasing referrals and the amount of time required to support every woman.

Increasing risk of abuse and harm impacts women's mental health

A review of 20 women supported by Advance at the start of the pandemic (between 16th March and 24th April, 2020) found that 65% of survivors' circumstances had changed as a direct result of COVID-19, with

- **62% self-isolating with the perpetrators** of abuse,
- **50% having increased contact with the perpetrators** of abuse due to part-time or full-time isolation during lockdown, and

women who had made the decision to leave their abuser found that **lockdown had heightened already existing barriers to leave** and were even more worried that they would not get accommodation or financial support.

Over the last year, survivors are telling Advance that it has been **harder to contact statutory services for support** and **delays in processes including accessing housing and the legal system** (both for civil court injunctions and criminal court) is causing increased anxiety.

Survivors report that the threshold for statutory services seems to have increased and they are often not deemed as a high enough safeguarding risk in order to get support, including for mental health needs. As a result, **survivors feel unsupported and even forgotten** by the system and are turning to charities such as Advance, which were already under-resourced, for both crisis and longer-term support.

Lockdown had also led to difficulty in obtaining a range of civil protective orders, including Non-Molestation Orders, due to **the closure of family courts.** Hearings were taking place virtually, however this can be particularly challenging, especially for those survivors who are not eligible for Legal Aid and

are unrepresented. Court proceedings regarding child protection orders were often postponed, leaving women in a state of limbo. Some women who share a child or children with a perpetrator also reported to Advance that **lockdown had led to the perpetrator moving back into the family home** or led to increased contact with him.

Increasing hardship, poverty and inequality impacts women's mental health

Additional issues relating to lockdown restrictions have resulted in further hardship and adversely impacted women's mental health. The loss of employment has resulted in both isolation and financial hardship. Advance's advocates (IDVAs) report

- an **increasing demand for foodbank support** and delays to survivors accessing Universal Credit
- **challenges in accessing phones or W-Fi**, restricting access to support
- **an increase in housing needs** and services, such as securing lock changes to keep perpetrators out of the family home, have been more challenging to get than usual during this time
- survivors with No Recourse to Public Funds (NRPF) faced additional barriers to accessing safe and appropriate housing during this time, with statutory services such as Local Authority housing officers, often difficult to reach.

In the year to March 2021, of the **1,990 women engaged for one-to-one support** with our domestic abuse services of diverse ethnic groups (40% identified as White British/White, 20% as Black British/Black and 15% as Asian British/Asian and 25% Mixed/Other ethnic groups),

- **37% report mental health problems,**
- 10% had problems with substance misuse, and
- 46% of women had housing needs, an 8% increase on the previous year.

Although high, these figures are likely to be far higher as many survivors do not disclose issues such as undiagnosed mental health issues or problematic substance use. This is evident by the increased need for emotional support by Advance and a significant increase in the level of contact from drug and alcohol services, particularly during April 2020 and the first lockdown.

The impact of self-isolation and reduced access to other support services have increased risk of harm, homelessness, health and financial worries. Poverty and digital inequality make difficult and unsafe situations even more so, exacerbating mental health problems already experienced by survivors with increased risk of self-harm and suicide.

"Although I made the decision during lockdown to leave, my worries have kept me here. I am scared he will take the house; I am scared he will take the children abroad, I am worried I will have to leave my job as he will find me there and hurt me"

Woman supported by Advance Domestic Abuse Services

Hamza's story

Hamza*, a young woman is in her twenties, and was originally referred to Advance in 2020 by an NHS Mental Health Team. She described how she grew up suffering physical abuse as a child and into adulthood specifically from her brother and father; Hamza felt the mother also instigated a lot of the abuse. The abuse escalated five years ago, when her mother found out that she had started a relationship with a man her mother does not approve of, and instead referred to the son of a friend of hers as a potential marriage choice. Hamza is worried this could be a way to force her into a marriage that she does not want. Hamza has also raised some concerns about her partner.

During lockdown the abuse escalated as Hamza works from home. Her family would for example not accept deliveries for her, would stop her being able to download files via the house Wi-Fi, would not allow her to cook at home or use the fridge.

Hamza disclosed she **feels depressed and expressed suicidal thoughts** when the situation is at its worst. Hamza disclosed the pandemic exacerbated the circumstances and reported these thoughts were more frequent. Hamza is a full-time student and pre-pandemic used to be able to 'escape' the abusive environment. **The impact from having to work from home on her mental health and anxiety has been 'quite severe' in her words** as she now must make up excuses to leave, and there are only so many 'acceptable reasons' for the perpetrators.

Through Advance's support, Hamza has been able to access specialist counselling to support her around her mental health needs. The Advance IDVA (advocate) has also been working with her regarding safety planning, specifically around a potential forced marriage. Her advocate is also liaising with housing teams and the police on her behalf and continues to provide emotional support throughout.

Hamza says **she now has a better understanding of abuse** and, although she feels better for having access to information and dedicated support, she is not yet able and ready to leave.

"to be honest at the moment as much as I feel alone, used and hurt, I can't find it in me to want my family or him. I sort of just want to turn the page and forget about them. Completely block out everything that's happened and concentrate on myself and meeting new people for a fresh start"

Woman supported by Advance, March 2021

** her name was changed to protect her anonymity*

3.2 Women in Contact with Criminal Justice System and Mental Health

During the pandemic, Advance's frontline teams have **provided on average four times the amount of support for every women in contact with the criminal justice system**, compared to pre-pandemic, more often than not due to increasing mental health needs.

Increasing risk of self-harm and worsening mental health

Advance carried out two surveys in July 2020 of a total of 421 women supported by our Minerva services about how the first lockdown (April to June 2020) had affected them (*A Strange Empty Place*, Advance 2020). Women reported that the lockdown increased risks affecting them:

- **28% reported an increase in self-harm,**
- 27% an increase in problematic alcohol and substance use, and
- 13% an increase in abuse and exploitation.

Women told us that 60% felt the lockdown had negatively affected their health and wellbeing, with

- **52% of women said they needed support with mental health** and wellbeing, whilst
- **42% reported difficulties accessing mental health services.**

Women who did not live with their children and therefore went long periods of time without seeing them, reported feeling even more isolated and lonely. Not only has lockdown left them feeling isolated, they also tell us **the pandemic has often left them with triggered memories of past trauma or of prison.**

“I felt completely broken at times, in a constant fight or flight mode. I cried every day for about 7 weeks. I am not typically a person who would cry every day or feel lonely. I still feel anxious, but I am glad the lockdown is starting to ease and things are feeling familiar again. “

Woman supported by Advance’s Minerva Service

Increasing hardship, poverty and inequality impacts women’s mental health

Women told Advance in July 2020 (*A Strange Empty Place*) that they were lacking basic essentials and were missing vital support networks. In the first three months of lockdown to June 2020, **40% of women reported financial shortages**. Advance set up a Hardship Fund during the pandemic which enabled us to support 230 women during the year to March 2021 with essentials such as food and housing.

Women noted that their stress had increased due to lack of finances and their inability to pay bills, pay for food and, in some cases, pay for their medication. Some women even told us that a lack of finances had led them to reoffending.

In the year to March 2021, of the **922 women engaged with our Minerva services** from diverse ethnic groups (54% identified as White British/White, 22% as Black British/Black, 24% as Asian/ Mixed/ Other):

- **79% reported mental health needs**
- 61% had problematic substance use, and
- **63% of women reported housing needs, a 32% increase on the previous year.**

Women have found it even more difficult to access services that they desperately need and are struggling to juggle financial burdens, childcare and their own wellbeing, as well as complying with the requirements of their community orders.

Sudha's story

“ I feel anxious about the unknown, I do not fully understand what is happening. Wrapped up in too many thoughts. The house is messy. I make my own face masks. No support groups. The high street is empty. I am worried about my daughter in foster care. I am tempted to numb my mood with alcohol and other substances, but I do not want to disappoint myself by relapsing. **I have been feeling very low and isolated** from peers and professionals.

My sleep is better, but I do not eat well. Irregular mood, some days are spent creating art, mending clothes and cooking which lifts my spirits. I watch Netflix on my phone. I go out in the community for essentials, but the bus journey causes anxiety. I have regular phone calls with my daughter. Heading into the community more often and it is good to see people. I do art on my walls! I have an appetite again and I eat well.

I made it, I did not give into temptation and I am proud. Still no (Advance) groups, I miss the support. I miss my daughter. I would like routine and purpose back in my life.

The uncertain feelings remain, but I try to stay positive ”

Women supported by Advance, June 2020

3.3 Serious Harm and Suicide

Advance is particularly concerned about the increasing levels of risk of serious harm and suicide faced by women, which has been exacerbated by the pandemic. During the ten month period from March 2020 to December 2020, ten women who were current or recent past service-users of Advance have died compared to one death in each of the previous two years. Of the ten women who died,

- **eight deaths were as a result of a suicide or an overdose**, and
- two were due to health issues, as a result of long-term abuse and poor health.

All of the women who had died, aged between 29 and 48, had contact with the criminal justice system and **had reported multiple disadvantages and high levels of need, including mental health, domestic abuse**, problematic substance use and housing. Seven women were mothers and were from diverse ethnic groups (identified as White (4), Black (3), White and Black (2) and Asian (1))

All were currently engaged with multiple agencies including social services (3), health (3), housing (4), substance use recovery (4), domestic abuse (3) and Integrated Offender Management (IOMs) (2) in addition to voluntary organisations.

Women's deaths are being missed; **they are the silent deaths of women who are suffering as a direct result of impact of Covid 19 and the parallel epidemic of worsening mental health**. The whole system and community needs to improve its responses in addressing their needs and safeguard them, so that no woman feels she has no choice but to end her life.



4. Recommendations

The data collected through Advance's case management system tells one aspect of a wider story about how socio-economic and structural inequalities based on gender and other intersectionality can adversely affect women in a time of national and global crisis. The literature review tells the story about how and why women are negatively impacted, but it requires further and wider reaching research to prepare adequately for the effects that Advance anticipate that will endure and affect women's lives and mental health adversely, long after restrictions are lifted.

While voluntary organisations have successfully campaigned for significant changes to the Domestic Abuse Bill including a duty to provide accommodation-based support, vital community-based support for the seven out of ten survivors who remain in the community, including mental health services, remains limited and is a post-code lottery. Demand for such vital life-saving and life-changing support exceeded capacity before the pandemic, with funding pressures continuing after a decade of cuts. The pandemic has resulted in a funding crisis and yet, there is no sustainable long-term funding committed by the Government, both national and local, for these vital community-based services.

As we rebuild our community post-pandemic, it would be a false economy to go back to basics and an injustice to set women back even further, following decades of progress.

We call for better mental health support for women experiencing abuse and trauma

- **Trauma-informed longer-term specialist services funded** for women and children experiencing abuse and trauma, who are domestic abuse survivors and/or in contact with the justice system
- **Mental health support funded for all women and children** experiencing abuse and trauma, who are domestic abuse survivors and/or those in contact with the justice system
- **Access to women-only safe spaces and community-based support** for all women and children, in addition to accommodation-based support and instead of investment in more prison spaces, to end the post-code lottery and ensure we are meeting the needs of survivors nationally
- **A Government review of women's deaths resulting from self-harm**, including suicides and overdoses, who are in contact with statutory services, those who are survivors of domestic abuse and/or in contact with the criminal justice system
- **Further research on the impact of the pandemic on safeguarding and best-practice** for those affected by abuse and trauma, including access to statutory and support services, identifying safeguarding risk and responses within social distancing restrictions environment.

As the Domestic Abuse Bill is granted Royal Assent and Probation Services are being reformed in 2021, we call on the Government, policy-makers and commissioners for fully-funded provision of vital specialist community-based services for all women and children.

No-one should be left behind. Women demand better.

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