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Ministry of Housing,
Communities &
Local Government

Measuring Outcomes of Safe Accommodation

A Rapid Evidence Review

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List of acronyms and abbreviations

LA – Local Authority

MHCLG – Ministry of Housing, Communities and Local Government

NGO – Non-Governmental Organisation

RER – Rapid Evidence Review

Executive summary

Introduction

This rapid evidence review was commissioned by the Ministry of Housing, Communities and Local Government (MHCLG) to review what outcomes are currently measured to assess the impact of support provided to victim-survivors in safe accommodation, and to explore the barriers and facilitators to implementing a shared outcomes framework. The review was carried out between October 2025 and March 2026 by Dr Annie Bunce (City St George's, University of London), Dr Katie Smith and Dr Estela Capelas Barbosa (University of Bristol). It was conducted as part of a broader project examining victim-survivor outcomes under Part 4 of the Domestic Abuse Act 2021, which places a statutory duty on local authorities in England to ensure the provision of appropriate, tailored support within safe accommodation for victim-survivors of domestic abuse and their children.

Safe accommodation includes a range of settings such as refuge accommodation, specialist and dispersed accommodation, sanctuary schemes and move-on housing. This review focuses specifically on this context, building on a recently published scoping review of outcomes used to evaluate domestic and sexual violence and abuse services more broadly (Carlisle et al., 2024). It is intended to be read alongside the main project report.

Methodology

The review constitutes a targeted update and extension of a recently published scoping review, with the original searches updated to include studies published from June 2022 onwards. The scope was amended to restrict the focus to forms of supported safe accommodation as defined by the Domestic Abuse Act 2021, and to map identified outcomes onto the Domestic Violence and Abuse Core Outcomes Set (DVA-COS). An additional screening process was also applied, to identify barriers and facilitators to implementing a shared outcomes framework.

Seven academic databases were searched alongside three grey literature databases and 164 organisational websites. To be included, papers were required to be UK-specific, published in English and focused on interventions delivered within safe accommodation. For the outcomes element of the review, papers were only included if they reported empirically measured outcomes (i.e., outcomes based on data collected and analysed by the authors, rather than purely theoretical, proposed, or assumed outcomes). Studies reporting outcomes qualitatively or describing/discussing outcomes without measuring them were excluded.

Once the academic and grey literature databases were combined and deduplicated, the searches produced 17 reports measuring outcomes of safe accommodation and 23 discussing barriers and facilitators to implementing a shared outcomes framework. Most of the barriers and facilitators evidence came from grey literature

produced by non-governmental organisations, reflecting the fact that much relevant knowledge in this area is held by practitioners and sector bodies rather than captured in academic publications.

Results

Across the 17 reports meeting the inclusion criteria, outcomes clustered around three core domains: safety, wellbeing, and empowerment, which map broadly onto the Domestic Violence and Abuse Core Outcomes Set. Safety outcomes were the most frequently reported, followed by mental health and psychological wellbeing, while empowerment outcomes such as independence and confidence appeared less consistently. Service-level indicators such as length of stay and move-on destinations were also widely reported but fall outside existing frameworks. While outcomes broadly clustered around three core domains (safety, wellbeing and empowerment), there was considerable variation in the specific outcomes used within each domain across studies, making it difficult to compare services or draw firm conclusions about the overall impact of support in safe accommodation.

Five themes were identified across the 23 reports discussing barriers and facilitators to developing a shared outcomes framework. Data collection and monitoring systems across services and local authorities are frequently incompatible and many organisations, particularly smaller and specialist providers, lack dedicated staff for monitoring and evaluation. No standard methodology currently exists for measuring outcomes in this context, though there is strong appetite among commissioners and local authorities for shared guidance, which would require buy-in from service providers. Competitive commissioning and structural funding inequalities can marginalise smaller and by-and-for organisations, making them less likely to be involved in co-designing monitoring frameworks. Yet, co-design is associated with better quality data, meaning these organisations are often excluded from the very processes most likely to produce useful outcomes. Competitive commissioning and structural funding inequalities can marginalise smaller and by-and-for organisations, reducing their opportunity to shape shared monitoring frameworks and outcome measures. This is significant because co-design with specialist providers is associated with more relevant, higher-quality data, excluding these organisations risks overlooking valuable expertise and weakening the usefulness of the measures developed. Finally, quantitative frameworks often struggle to capture the relational and longitudinal aspects of recovery, and the non-linear nature of the healing process means that single point in time measures can present a misleading picture of progress.

Discussion

This review found that outcomes in safe accommodation broadly cluster around three core domains (safety, wellbeing and empowerment), suggesting some convergence in how impact is conceptualised. However, outcomes are measured inconsistently across services, with considerable variation in what is captured and how. Furthermore, significant barriers remain to implementing a shared outcomes framework. Developing a consistent approach to outcome measurement could strengthen accountability and support learning across areas. However, any national

framework would need to be supported by appropriate data systems, training and analytical capacity to avoid placing additional burden on frontline staff and further disadvantaging smaller organisations, particularly by-and-for organisations.

Frameworks should also allow for the capture of relational and subjective aspects of recovery not easily measured through conventional quantitative indicators. Future research should therefore focus on further development and validation of measurement tools suitable in the context of safe accommodation, with particular attention to the relevance/meaningfulness of outcomes for victim-survivors from marginalised communities, including those with no recourse to public funds and those accessing specialist by-and-for services. Once validated outcome measures accounting for all perspectives are available, research should prioritise robust evaluation designs- the specifics of which would depend on what an agreed outcomes framework was focused on achieving (e.g. understanding differences in recovery pathways, or differences for population sub-groups)- examining both short-term and longer-term outcomes of support in safe accommodation for victim-survivors and their children.

1. Introduction

This rapid evidence review was commissioned by the Ministry of Housing, Communities and Local Government (MHCLG) and managed by Verian as part of a broader commission on victim survivor outcomes from support in safe accommodation in the context of Part 4 of the Domestic Abuse Act 2021 for support in safe accommodation (known as the DA Duty; hereon referred to as ‘the duty’). This review was conducted alongside a larger piece, which aimed to reach consensus between victim-survivors, specialist service providers and local authorities on what outcomes should be measured for people using safe accommodation in England. As such, this report should be considered complimentary to the full report on the consensus building process. It was carried out between October 2025 and March 2026 by Dr Annie Bunce (City St George’s, University of London), Dr Katie Smith and Dr Estela Capelas Barbosa (University of Bristol). The findings are intended to strengthen the evidence base for national and local policy and inform the development of an initial set of principles or areas to consider, in order to guide the implementation of the prioritised outcomes in safe accommodation and link to parallel work on trauma-informed guidelines.

The focus of the review is on the outcomes used to assess the impact of support for victim-survivors and their children provided in the context of safe accommodation rather than outcome measurement tools or instruments. We have also reviewed the barriers to and facilitators of implementing a shared outcomes framework.

A targeted review of the literature was carried out using the formal definitions of ‘support’ and ‘safe accommodation’, focused on empirical evidence. The review aimed to identify outcomes and outcome domains used to assess the impact of safe accommodation, charting and summarising the most commonly reported outcomes. It also aimed to identify the barriers and facilitators to implementing a shared outcomes framework, providing a narrative synthesis. Together, synthesising the available evidence on existing practice and identifying progress made towards, and challenges associated with, developing a consistent approach or nationally agreed framework for measuring and quantifying the outcomes experienced by victim-survivors - adults and children - who receive support while living in safe accommodation. As well as identifying remaining evidence gaps and areas of uncertainty and contention.

The aim of the wider project, of which this review is one component, is to assess whether it is feasible to establish a shared outcomes framework to measure the outcomes of support in safe accommodation that is meaningful to key stakeholders: local authorities (LAs) as main commissioning bodies, victim-survivors as assurance that their voices have been heard, and service providers as a way to demonstrate the quality and value of their work. The current review informs the wider project by shedding light into the current state of knowledge.

1.1 Context

Safe accommodation refers to safe, time limited accommodation for anyone escaping domestic abuse and includes a range of settings such as refuge accommodation, specialist and dispersed accommodation, sanctuary schemes, and move-on or second-stage housing. In the short-term, support in safe accommodation provides immediate safety for victim-survivors fleeing domestic abuse, and improved wellbeing, confidence and stability, and, in the longer-term the aim is for victim-survivors to be free from abuse and empowered to rebuild their lives. Safe accommodation services differ from community-based domestic abuse services in that they are designed to support victim-survivors at high risk who require immediate rehousing or access to sanctuary schemes (where physical security measures are added to the home, alongside provision of domestic abuse support).

The demand for safe accommodation for those experiencing domestic abuse persistently outweighs supply (Women's Aid, 2025a). The most recent national estimates from the Crime Survey for England and Wales showed that 3.8 million people aged 16 years and over experienced domestic abuse in year ending March 2025: 2.2 million females and 1.5 million males (ONS, 2025a, 2025b). Due to multiple intersecting barriers to disclosure of domestic abuse, we know this is an underestimate (Manzur et al., 2024). Women's Aid hold the largest national database on domestic abuse, 'On Track', the most recent analysis of which estimated that 60.1% of referrals into refuge services were rejected over the past year, with the most common reason being that the refuge service did not have the capacity to support the client (45.7% of rejected referrals) (Women's Aid, 2025b). Management Information (MI) for domestic abuse support services commissioned within safe accommodation, used to monitor the implementation of the Duty, also shows that capacity constraints are the most common reason that households are unable to be supported in safe accommodation (MHLGC, 2025b).

There is a shortage of safe accommodation and barriers to access for marginalised groups such as those with no recourse to public funds (NRPF), or complex mental health and/or substance use need and/or disability access. In the context of an ongoing housing crisis, this may mean that some people experiencing domestic abuse have to decide between living with an abuser or being made homeless (Refuge, 2025, Macdonald et al., 2020, Women's Aid, 2025b).

The introduction of the Domestic Abuse Act in England and Wales in 2021 led to significant shifts in the provision of safe accommodation for those experiencing domestic abuse. Most notably Part 4 of the act, which introduced a strategic duty of support for local authorities (LAs) in England. This duty requires Tier 1 LAs to ensure the provision of appropriate, tailored support within safe accommodation for victims of domestic abuse and their children, as victims in their own right, and requires Tier 2 LAs to cooperate with the Tier 1 LA in achieving this. The core aim is to ensure that victim-survivors, including children, can access holistic support services in safe accommodation when needed. Each relevant LA must assess the need for accommodation-based support in its area, promoting a coordinated and needs-led approach to service provision. The Ministry of Housing, Communities and Local Government (MHCLG) is responsible for monitoring delivery against Part 4 of the Domestic Abuse Act (2021). While the collation and analysis of annual monitoring

data from LAs (e.g. number and characteristics of survivors supported, types of accommodation provided, and nature of support delivered) provide insight into the scale and scope of provision (MHLGC, 2025b), they do not capture the full extent of demand, nor do they reveal the outcomes for those receiving support (Cunnington and Wild, 2025), limiting the extent to which the impact of the duty can be understood.

The recent independent evaluation of the duty by the MHCLG (2025a) highlighted the need for consensus around outcome measurement in the context of safe accommodation, with LAs themselves unclear on which outcomes to measure. The evaluation included a review of the outcomes and impacts of support provided to adult and child victim-survivors, which concluded that the absence of a shared national outcomes framework hampers the ability to compare services, track victim-survivor journeys across LA areas and evidence the experiences of diverse cohorts affected by domestic abuse (Cunnington and Wild, 2025).

These findings support an established body of evidence on the challenges of evaluating impact in the DA sector more broadly (Luzon et al., 2025, Bunce et al., 2023, 2024), and the need for consistent outcome measurement and reporting (Hameed et al., 2020, Livings et al., 2023, Weeks et al., 2024). This literature persistently highlights the issue of variability in outcomes measured and measurement tools used, which makes synthesising findings on the effectiveness of interventions such as via meta-analysis less feasible (Carlisle et al., 2024, 2025, Howarth et al., 2016). It also makes studies difficult to compare and means outcomes do not necessarily reflect survivor or service provider priorities (Powell et al., 2022a). A recently published scoping review of outcomes used to evaluate UK-based domestic and sexual violence and abuse (DSVA) support interventions mapped a total number of 426 outcome measures across 80 studies, only 4 of which included provision of safe accommodation (within a multi-service context). From the 426 outcome measures, 287 were unique and, of these, only 19.9% were used by more than one report (Bunce and Carlisle, 2025). The vast amount of outcomes identified in the scoping review meant that a subsequent systematic review of the effectiveness of DSVAs support was restricted to the four most commonly reported outcomes, which related to victim-survivor safety and wellbeing, and did not include any studies that measured the effectiveness of safe accommodation (Carlisle et al., 2025).

The absence of studies focused on safe accommodation in reviews of the domestic abuse intervention literature more generally reflects that, to date, there has been limited published evidence about the type, quality and effectiveness of support provided to individuals and families living in safe accommodation, with most studies from the USA (Yakubovich et al., 2022). Recent findings from a doctoral study completed by one of the team members are a notable exception, demonstrating improvements in wellbeing during a refuge stay, with differences identified across different support needs and demographics (Smith, 2025). The research also highlighted how demographics and support needs influence trajectories of refuge access, wellbeing during a refuge stay, planned and unplanned departures, and likelihood of returning to the perpetrator.

Within the published literature, even where the same outcomes are being measured using the same tool or instrument, inconsistencies in how robustly outcome data are reported (i.e. that studies are often methodologically flawed) can prevent findings from being synthesised using techniques such as meta-analysis (Carlisle et al., 2025, Lutzman et al, 2019). Increased consensus around which outcomes to measure, and how to measure them robustly enough that they can be used to inform policy and improve practice across the UK, combined with guidance for LAs that is specific to safe accommodation services (given the different context to community-based services), will strengthen the evidence base around outcomes in safe accommodation, ensure that LAs are making evidence informed decisions – with needs assessments, commissioning and strategies informed by understanding –and enable learning across contexts.

Work is already underway in this area, which the current review and wider project build on. Powell and colleagues (2022a) developed consensus regarding a core outcome set and associated measures that can be used as a minimum standard by which to evaluate child and family focussed interventions and support for adults and children using domestic abuse services. The children and family-based Domestic Violence and Abuse Core Outcome Set was developed with input from survivors, service providers and commissioners, as well as researchers, and is designed to be used across family and child-focused interventions and services including safe accommodation. The final five outcomes included in the Domestic Violence and Abuse Core Outcomes Set were: child emotional health and well-being; caregiver emotional health and well-being; family relationships; freedom to go about daily life, and feelings of safety. Notably, this does not include outcomes by which to evaluate impact for adults receiving support in their own right, as opposed to as a component of child or family focussed interventions.

Outcome measures developed from core outcome sets can and should be more nuanced to the specific foci of the service or intervention (Bunce and Carlisle, 2025). Any outcome frameworks that are developed should consider their appropriateness and relevance for minoritised populations, such as male victim-survivors, global majority populations or those from the LGBT+ community, and be adaptable to the different target populations of various services (Carlisle et al., 2025). The Domestic Violence and Abuse Core Outcomes Set aimed to provide a minimum set of outcomes that should be measured by any outcome-oriented study, with additional outcomes included as needed to capture intervention-specific impacts (Bains et al., 2026).

The uptake of core outcome sets in practice is low, due to barriers such as lack of infrastructure for data collection, challenges in follow up of victim-survivors and lack of clarity of timelines for data collection and lack of guidance on how to measure outcomes that are identified as priorities (Bunce et al., 2023, Bains et al., 2026). One widely used instrument in England and Wales that has been mapped to the Domestic Violence and Abuse Core Outcomes Set is The Warwick Edinburgh Mental Wellbeing Scale. It has strong psychometric properties and is generally well received by service providers and survivors as a measure of health and wellbeing in the context of domestic abuse (Clark et al., 2023, Harewell et al., 2025, Bains et al., 2026). The short version forms the basis of Women's Aid's outcomes monitoring form, the Personal Outcomes and Wellbeing Record, adapted slightly to make it

more trauma-informed by adding a question around feeling safe and removing one about feeling useful. This adapted version has not been psychometrically validated, as is often the case for outcome measurement instruments developed in the domestic abuse field (e.g. Allen et al., 2021).

Measures also tend to prioritise 'hard' indicators of outcomes such as safety, for example installing a home alarm system or making a safety plan, rather than capturing survivors' perceptions of safety more broadly (Yakubovich et al., 2022). Research with adult and child survivors of domestic abuse, and service providers, suggests a preference for strengths-based as opposed to common deficit-focused outcome measurement instruments, which capture important contextual outcomes relevant to rebuilding their lives after domestic abuse, such as family relationships and mental health (Powell et al., 2022b, Power et al., 2024).

To address this, work was commissioned following the development of the Domestic Violence and Abuse Core Outcomes Set to identify and reach consensus on which outcome measurement instruments are most appropriate and map most directly onto the three remaining outcomes of family relationships, feelings of safety, and freedom to go about daily life (Bains et al., 2026). In total, 239 outcome measurement instruments were initially identified and reduced to 17 through a systematic appraisal process; these were then subjected to a rating process of acceptability and feasibility and eight outcome measurement instruments were taken forward to a final consensus workshop. The four-stage process resulted in the identification and provisional recommendation of two subscales, "relationships" and "feeling supported", from the newly developed Children and Families Against Domestic Abuse (CAFADA) Wellbeing and Safety Tool (CAFADA et al., n.d.) to capture the outcomes of *family relationships* and *feelings of safety*, respectively. No suitable outcome measurement instruments was recommended for *freedom to go about daily life*.

The current review aims to add to the current state of knowledge, by building on previous work and focusing specifically on the context of safe accommodation.

1.2 Review objectives

To extend the existing evidence base, and, particularly, to extend on research evaluating the safe accommodation duty and exploring the feasibility of a shared outcomes framework, the objectives of this review were:

1. To identify and provide a visual overview of any outcome domains and measures relevant to the context of support in safe accommodation for adult victims of domestic abuse reported in peer-review or grey literature;
2. To map outcome domains identified to current Domestic Violence and Abuse Core Outcomes Set to identify overlaps and areas of divergence;
3. Identify and provide a narrative synthesis of practical challenges, barriers, and constraints, and also facilitators, to implementing a shared outcome measurement framework in relation to support in safe accommodation.

This review will provide an up-to-date synthesis of outcomes and domains relevant to support in safe accommodation specifically, preventing duplication and ensuring alignment with existing evidence.

1.3 Definitions

The definitions used to develop the search strategies and analysis were drawn from the Domestic Abuse Act (2021) and the specific guidance related to Part 4. 'Safe accommodation' is defined in statutory guidance as accommodation which is safe for persons who are, or are at risk of being, victims of domestic abuse, including:

a) refuge accommodation; single gender or single sex accommodation with on-site, specialist support for both adult and child victim-survivors. Refuges generally operate with security measures and are at undisclosed locations which are not publicly available to ensure the safety of residents.

b) specialist safe accommodation; single gender or single sex accommodation offered alongside dedicated support which is designed specifically for people who share a protected characteristic and/or have additional needs. This includes 'by and for' services where residents "see themselves reflected in staffing, management and governance structures" (MHCLG, 2021).

c) dispersed accommodation; accommodation that is safe ("secure and dedicated to support victim-survivors of domestic abuse" (MHCLG, 2021)) and self-contained rather than in a communal or shared setting. This includes properties in the community where individuals can live independently with access to visiting specialist support. Where more than two units share any part of the accommodation, it must be single gender or single sex.

d) sanctuary schemes; provide enhanced physical security measures to a property or perimeter of the property to enable people to remain in their own homes (including local authority and private registered providers of social housing), where it is safe to do so.

e) move-on or second-stage accommodation: temporary accommodation provided as transitional accommodation for adults and children moving out of other safe accommodation settings such as refuge to more permanent housing.

Move-on or second-stage accommodation includes other accommodation designated by the local authority, registered social landlord or registered charity as domestic abuse emergency accommodation (MHCLG, 2021; see also Home Office, 2022).

1.4 Research questions

The review addressed three research questions:

1. What outcomes appear in existing literature as having been used to evaluate adult-focused support in safe accommodation?

2. What multi-level (e.g. practical, cultural etc.) challenges and barriers hinder the adoption and implementation of a shared outcome framework in the context of delivering the duty (i.e. across service providers and local authorities)?
3. What potential solutions or facilitators/enablers could support the adoption and use of a shared outcome framework?

2. Methodology

This desk review constitutes an update and targeted extension of a recently published scoping review of outcomes used to evaluate UK-based domestic and sexual violence support interventions. That review, conducted by some of the academic team, mapped 426 outcome measures across 80 studies and highlighted the diversity and inconsistency of outcomes in current evaluations (Carlisle et al., 2024). For this project, searches were updated to include studies published since June 2022 (the cut-off of the search period for the Carlisle review) and the scope was amended in four ways. First, the review was restricted to forms of supported safe accommodation. Second, while the primary focus remains on the UK, if fewer than 15 relevant reports were identified in the UK, the scope would be extended to include studies from comparable European contexts. Third, identified outcomes were mapped to domains from the Domestic Violence and Abuse Core Outcome Set. Fourth, additional screening of included studies was conducted, to identify barriers and facilitators to implementing a shared outcomes framework.

2.1 Search process

The review involved searching academic literature databases, grey literature databases and a range of organisational websites. Seven academic databases were searched: Medline, Embase, PsycInfo, Social Policy and Practice, the International Bibliography of the Social Sciences (IBSS), Sociological Abstracts, and the Social Sciences Citation Index (SSCI). The original scoping review searched eight databases; however institutional access was not possible for the Applied Social Sciences Index and Abstracts (ASSIA) database.

Grey literature was searched across three databases. EThOS, which experienced a cyber-attack in October 2023 and remains under reconstruction, was replaced by a search of the British Library catalogue using the advanced search function filtered to theses (as advised on the EThOS homepage). The National Grey Literature Collection and VAWNet were also searched. The original scoping review included an additional grey literature database, Social Care Online, which has since been subsumed into the Social Policy and Practice database and was therefore captured within the academic database searches.

In addition, searches were conducted across a list of 164 organisational websites. Of these, 156 websites were those searched in the original review, and eight additional websites were identified in consultation with MHCLG. The approach to searching varied according to the structure of each website. Where a search bar was available, the terms 'safe accommodation', 'outcome', 'evaluation' and 'report' were entered, for websites not specific to domestic abuse, the additional terms 'domestic abuse' and 'domestic violence' were also searched. Where websites were organised into sections, relevant menu headings were browsed manually; these included, but were not limited to, reports, impact, annual reports, news, publications, and research. The full list of websites searched and the number of reports identified from each is available in Appendix 1.

2.2 Eligibility

The key inclusion criteria were that papers were:

1. UK-specific, or, where fewer than 15 UK studies were identified, from comparable European contexts.
2. In English.
3. Published from June 2022 onwards
4. Relating to domestic abuse and/or sexual violence.
5. Focused on interventions delivered within safe accommodation, as defined by the Domestic Abuse Act 2021.

With regards to the scoping of outcomes, papers were only included if they reported empirically measured outcomes, or measures of outcomes, of safe accommodation for adult victim-survivors. Unlike the original scoping review, which mapped outcomes regardless of how they were measured, this review applied an additional inclusion criterion (6) requiring that outcomes were empirically measured (i.e., outcomes based on data collected and analysed by the authors, rather than purely theoretical, proposed, or assumed outcomes). This means that studies reporting on outcomes qualitatively, for example, through interviews or focus groups, were excluded, as were studies that described intended or theorised outcomes without measuring them. Studies using validated outcome measures were therefore more likely to meet this criterion, though the use of validated tools was not itself a requirement for inclusion.

Lastly, for the additional scoping of barriers and facilitators, papers were required to mention/discuss barriers and/or facilitators to implementing a shared outcomes framework (criterion 7).

2.3 Search strategy

For academic database searches, the search strategy was developed from the original scoping review, retaining terms relevant to safe accommodation and removing those relating to other service types (e.g. floating support). Furthermore, a few additional accommodation-specific terms were added, informed by statutory definitions and in consultation with MHCLG. All safe accommodation-specific terms were searched in combination with the terms domestic abuse, domestic violence, sexual abuse, and sexual violence. Search terms spanned three components: geography, violence and abuse, and safe accommodation. Table 2.1 sets out the academic database search terms used.

Table 2.1: Academic database search terms

Geography	Violence and abuse	Safe accommodation
United Kingdom; England; Scotland; Wales; Northern Ireland; NHS; British; GB	Domestic violence; domestic abuse; sexual violence; sexual abuse; intimate partner violence; gender-based violence; rape; stalking; forced marriage; female genital mutilation; sex trafficking; controlling behaviour; coercion; child maltreatment; sexual harassment; sexual assault; sexual coercion	Refuge / refuges; emergency shelter; resettlement; supportive housing; safe house; sanctuary / sanctuaries; shelter; dispersed accommodation; safe accommodation; second stage accommodation; shared accommodation; self- contained; temporary accommodation / temporary housing; supported housing / supported accommodation; by-and-for service

As grey literature searches cannot be as detailed, the original search strategy for grey literature included broader terms than those used for academic databases. An initial search of all three grey literature databases using these broader terms made clear, from a scan of the records returned, that nothing relevant to safe accommodation was being identified. Given this early indication, and the time-consuming nature of searching grey compared to academic databases, the decision was taken to restrict the grey literature database searches to the updated, accommodation-specific terms set out in Table 2.1, developed in consultation with MHCLG. These were combined with the terms domestic abuse and domestic violence; sexual abuse and sexual violence were removed as they fall outside the remit of safe accommodation. Table 2.2 sets out the grey literature search terms used.

Table 2.2: Academic database search terms

Violence and abuse	Safe accommodation
Domestic violence; domestic abuse	Refuge; accommodation; shelter; temporary housing; supported housing; by-and- for service

2.4 Screening and assessment

Two screening and assessment processes were applied to the papers that met inclusion criteria one to five set out above. One examined inclusion criterion six relating to outcomes of safe accommodation, and the other examined criterion seven relating to barriers and facilitators of implementing a shared outcomes framework.

Given the anticipation that relatively few reports would meet all inclusion criteria, a broad approach to interpretation was taken throughout both screening processes. Specifically, we applied an inclusive definition of what constitutes an outcome, incorporating process outcomes (e.g. length of support) alongside impact outcomes (e.g. improvements in wellbeing). Where it came to barriers and facilitators, relevant material was included where it alluded to the broader themes of the criterion, even where it did not refer explicitly to shared outcomes frameworks. For example, when reports discussed challenges around data sharing or approaches to data collection more broadly.

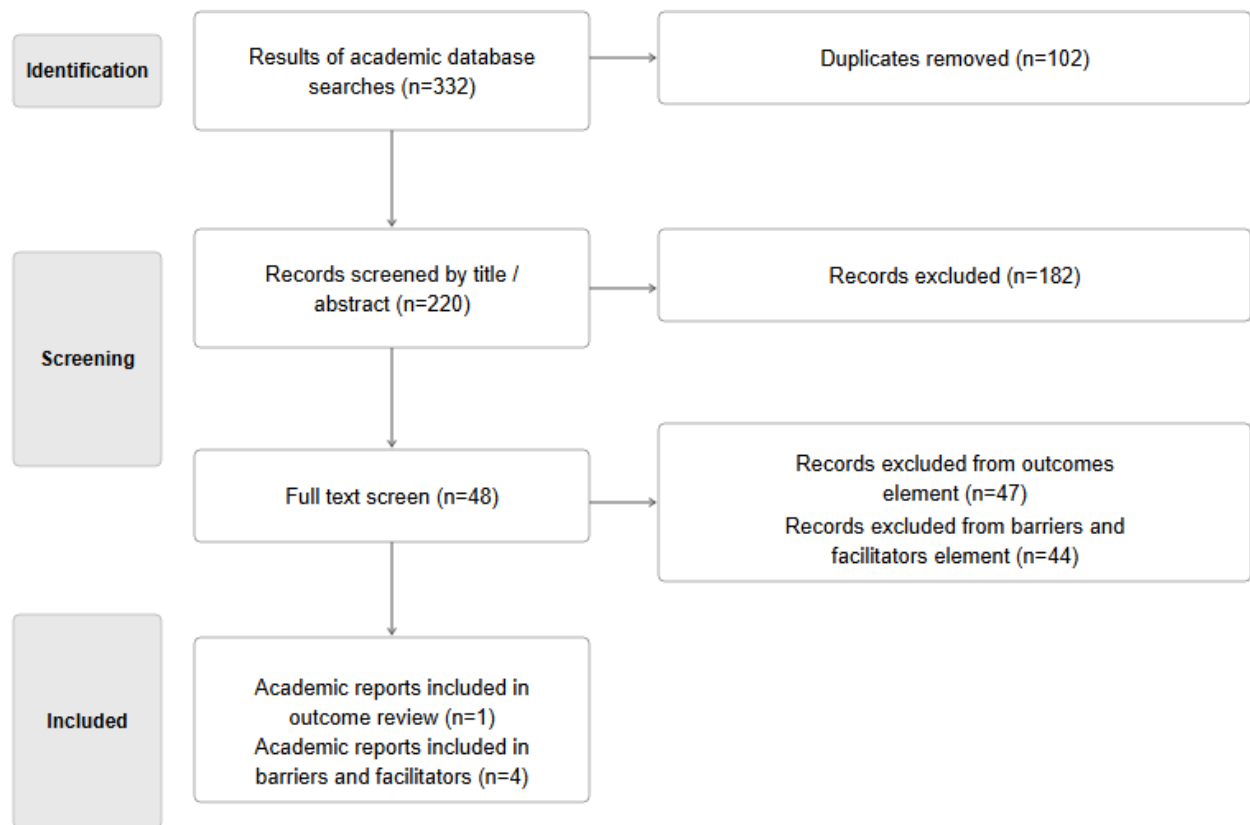
2.4.1 Academic databases

The academic database searches produced 322 results (see Figure 2.1). A two-step de-duplication process was applied: 101 duplicates were removed in Zotero (reference management software), and one further duplicate was identified and removed in Rayyan (systematic review software for screening), leaving 220 unique results. Titles and abstracts were then screened against the eligibility criteria, reducing the results to 48.

For the outcomes element of the desk review, 47 records were excluded on the basis that they did not measure outcomes of safe accommodation. One paper was included.

For the barriers and facilitators element of the desk review, 44 records were excluded on the basis that they did not discuss barriers and/or facilitators to implementing a shared outcomes framework. Four reports were included.

Figure 2.1 Academic literature search flowchart

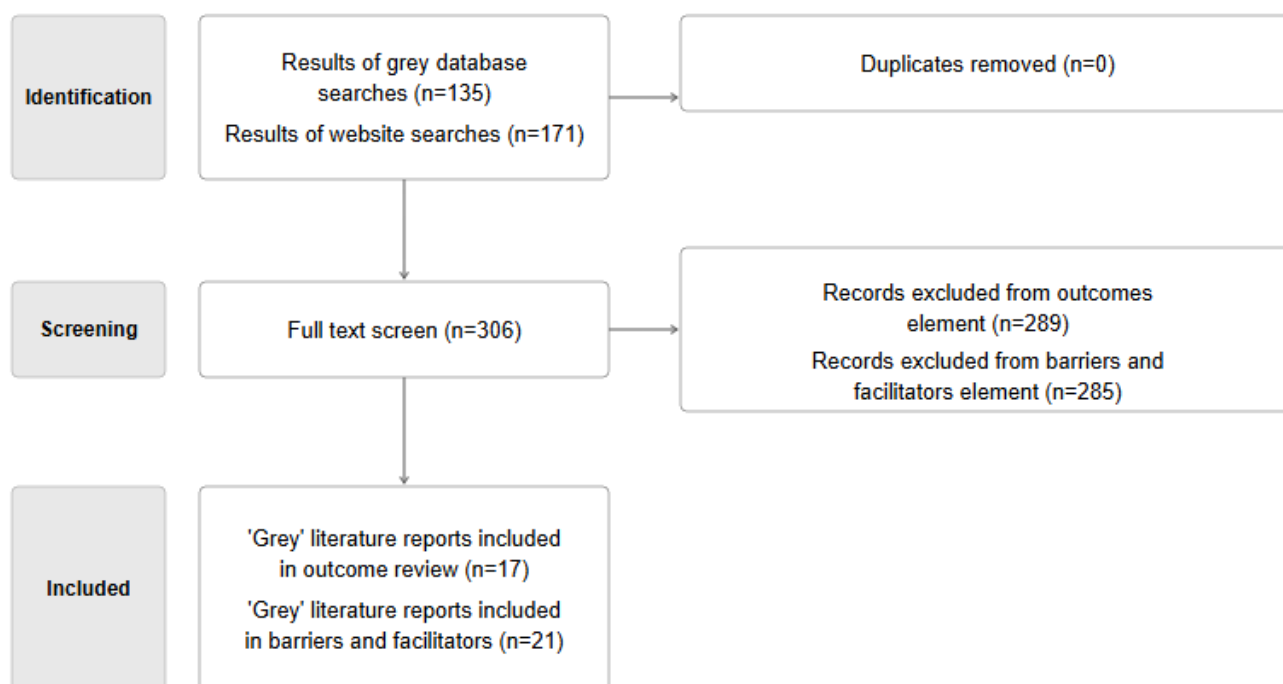


2.4.2 Grey literature databases and websites

Under the revised grey literature search strategy, a total of 135 records were returned across the three databases: seven from EThOS; 23 from the National Grey Literature Collection, and 105 from VAWNet. A two-stage screening was not possible due to the format of the grey literature, most of which did not have an abstract. This necessitated full-text screening of all records. As show in Figure 2.2, all 135 records were screened out as either originating from outside the UK or not relevant to safe accommodation (for outcomes) or shared outcomes frameworks relating to domestic violence and abuse (for barriers/facilitators). The website searches identified 171 relevant reports, all of which also required full-text screening.

Together, screening of the academic and grey literature produced 17 reports measuring outcomes of safe accommodation, and 23 discussing barriers and facilitators to implementing a shared outcomes framework. One of the reports in the outcomes category and two of the reports in the barriers and facilitators category were grey literature reports that were identified via the Social Policy and Practice database and were therefore duplicated in the academic and grey literature searches. Five reports were included in both the outcomes and the barriers and facilitators categories because they measured outcomes of safe accommodation *and* discussed barriers/facilitators implementing a shared measurement framework.

Figure 2.2 Grey literature search flowchart



2.5 Analysis

Data from included reports were extracted into two structured spreadsheets (one for the outcomes sample and one for the barriers and facilitators sample) each capturing key study characteristics such as study type and type of safe accommodation, alongside the specific outcomes or barriers and facilitators identified. A thematic synthesis approach was then applied: outcomes were mapped deductively onto the three domains, while barriers and facilitators were coded inductively to capture emergent patterns. Where outcomes did not map cleanly onto existing Domestic Violence and Abuse Core Outcomes Set domains, such as service-level process measures, these were noted separately.

2.6 Critical assessment

For each included record, the following information was compiled in an Excel spreadsheet: title; year; authors; type of paper (academic / grey literature) and relevance to the outcome domains or to barriers and facilitators (see Appendix 2).

Reports produced by non-governmental organisations (NGOs), which dominate the grey literature pool/evidence base, occupy a different position in the traditional evidence hierarchy to peer-reviewed academic publications, in that they do not always undergo formal ethics approval or independent peer review. Nonetheless, this should not be taken as a straightforward indicator of quality, as many NGO reports are created or co-created with academics and strive to offer a robust analysis of their topic. Beyond questions of methodological quality, NGO-produced literature makes a distinct contribution, as these reports frequently draw on the direct

experiences of victim-survivors and the frontline practitioners supporting them, and are often produced by, or in close partnership with, organisations working specifically with underrepresented and minoritised communities, many of which are small and underfunded so don't have the luxury of engaging with academics. Incorporating this body of evidence is therefore not simply a matter of supplementing the academic literature; it offers a unique and valuable perspective that enriches the research and makes it more representative of the services operating in this space.

3. Results

This chapter presents findings from the desk review across the two elements of the review. The first section reports on outcomes identified from the 17 reports meeting the relevant inclusion criteria, organised by domain and mapped where possible to the Domestic Violence and Abuse Core Outcome Set. The second section synthesises evidence on barriers and facilitators to implementing a shared outcomes framework for domestic abuse safe accommodation, drawing on the 23 reports meeting the relevant inclusion criteria.

3.1 Outcomes measured in safe accommodation

The table below presents the outcomes identified from two sources: (1) the one paper meeting our inclusion criteria outlined above, and (2) outcomes from two papers included in the original scoping review conducted by Carlisle et al. (2024) that relate to outcomes of support in safe accommodation.

We have reported outcomes organised into four relevant domains: safety, wellbeing, empowerment and other. In relation to safety, evidence suggests that access to safe accommodation is associated with reduced exposure to further abuse and violence, improved physical safety, and greater stability during periods of acute risk. Safe accommodation is also linked to improvements in wellbeing, including reductions in anxiety and distress, and provides an environment that supports recovery, emotional regulation, and engagement with support services. Furthermore, provision of safe accommodation can enhance survivors' sense of autonomy and empowerment by enabling informed decision-making, facilitating access to legal, financial and advocacy support, and supporting longer-term independence. Finally, there may be additional outcomes that do not fall into these three domains.

Table 3.1 presents a summary of outcome measures identified across the evidence base, organised by domain and subdomain. The safety domain is the most extensively evidenced, with subdomains spanning living circumstances, presence and severity of abuse, escalation of abuse, perception of safety, risk assessment, and financial and legal safety. Wellbeing outcomes cluster around mental health, physical health, psychological wellbeing, and sense of home and belonging, while empowerment measures focus on independence and autonomy, self-esteem and confidence, employment, and recovery. The other domain captures service-level metrics such as length of stay and move-on destinations, which, while not direct outcome measures, are widely reported across the evidence base. The full list of outcomes can be found in Appendix 3.

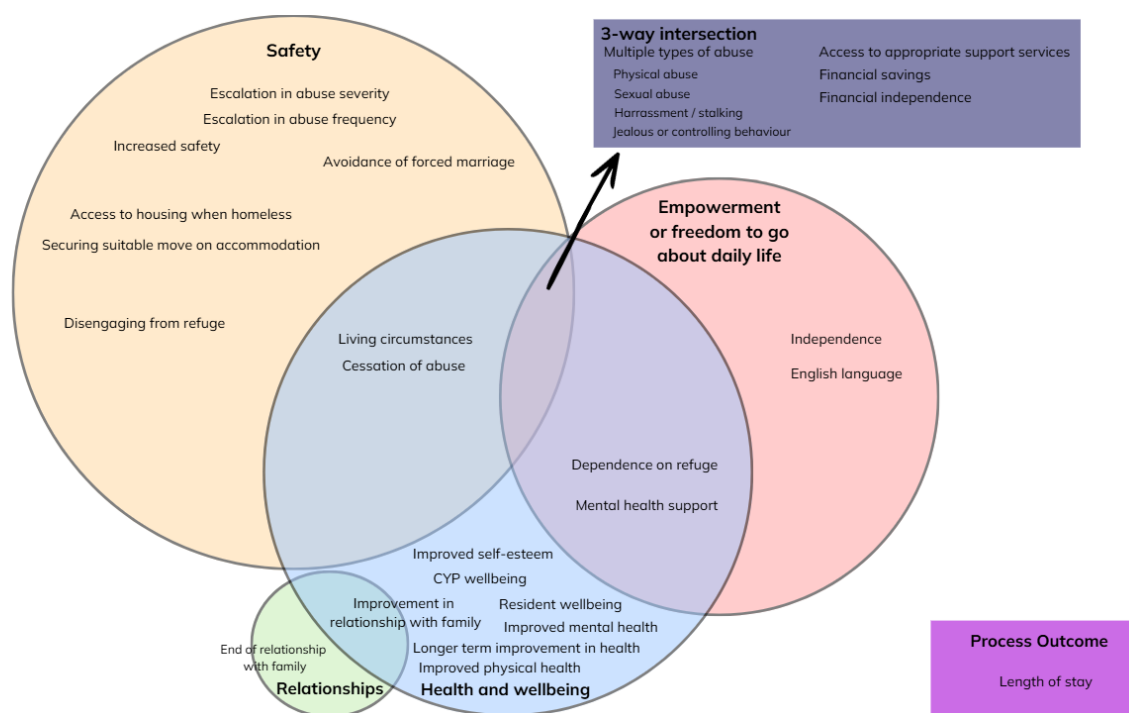
Table 3.1: Outcomes measured in safe accommodation

Domain	Subdomain	Number of outcomes	Number of sources
Safety	Living circumstances	4	4
Safety	Presence of abuse	6	1
Safety	Severity of abuse	6	1
Safety	Escalation of abuse	4	1
Safety	Perception of safety	7	7
Safety	Risk assessment	2	2
Safety	Legal and immigration safety	2	2
Safety	Financial safety	3	2
Safety TOTAL		34	11
Wellbeing	Social wellbeing	2	1
Wellbeing	Psychological wellbeing	2	2
Wellbeing	Physical health	2	1
Wellbeing	Mental health	7	6
Wellbeing	General wellbeing	4	4
Wellbeing	Children and young people	1	1
Wellbeing	Access to services	1	1
Wellbeing	Sense of home and belonging	5	3
Wellbeing	Out of scope	1	1
Wellbeing TOTAL		25	9
Empowerment	Independence and autonomy	7	5
Empowerment	Skills and education	1	1
Empowerment	Parenting capacity	1	1
Empowerment	Self-esteem and confidence	3	3
Empowerment	Social networks and support	2	2
Empowerment	Access to services	3	3
Empowerment	Recovery and healing	3	3
Empowerment	Employment and economic empowerment	2	2
Empowerment TOTAL		22	8
Other	Length of stay	14	8
Other	Service exit and move-on	12	9
Other	Service characteristics	5	4
Other TOTAL		31	12

The number of sources cited per subdomain varies considerably, reflecting uneven attention across the field. Mental health and perception of safety are among the most consistently measured subdomains, drawing on multiple independent sources, while others, such as parenting capacity, children and young people's wellbeing, and legal and immigration safety, are evidenced by only one or two sources. This variation suggests that while there is reasonable consensus around certain core outcomes, particularly those related to safety and psychological wellbeing, significant gaps remain in how comprehensively some dimensions of recovery and empowerment are captured and reported.

Figure 3.1 illustrates the extent to which the outcomes identified in this review map onto the domains of the Domestic Violence and Abuse Core Outcomes Set. While there is considerable overlap between the two frameworks, particularly in relation to safety and wellbeing, the figure also highlights areas where the outcomes measured in the safe accommodation evidence base diverge from, or extend beyond, the Domestic Violence and Abuse Core Outcomes Set domains. Notably, service-level process outcomes such as length of stay and move-on destinations, sit largely outside the current framework, reflecting the operational focus of much safe accommodation reporting. Conversely, some Domestic Violence and Abuse Core Outcomes Set domains are sparsely represented in the safe accommodation evidence base, pointing to gaps in current measurement practice.

Figure 3.1: Venn diagram showing themes of outcomes measured in safe accommodation mapped to domains in Domestic Violence and Abuse Core Outcomes Set



Some of the outcomes could be linked to more than one domain. Particularly, the experiences of abuse (e.g. physical abuse, sexual abuse) relate to all three main domains identified in this review. Figure 3.2 shows the frequency with which different outcome domains combinations are identified across the data. The most common pattern is the three-way intersection of Safety, Wellbeing and Empowerment, which features in eight instances, indicating that most literature addresses these themes in combination. Safety only and Wellbeing only each appear seven times, suggesting these are also prominent as standalone foci. Paired combinations such as Safety and Wellbeing, Wellbeing and Empowerment, and Wellbeing and Relationships occur in just two instances each, while Relationships only and Process outcomes each appear once, reflecting their relative rarity across the dataset.

3.2 Barriers and facilitators to a shared outcomes framework

Twenty-three reports discussed barriers and facilitators to implementing a shared outcomes framework for domestic abuse safe accommodation. The majority were grey literature reports produced by non-governmental organisations, reflecting the fact that much of the relevant knowledge in this area is held by practitioners and sector bodies rather than captured in academic literature. The evidence was synthesised thematically, resulting in five themes: data systems and infrastructure; staffing and capacity; outcomes frameworks and standards; commissioning and governance; and measuring relational, longitudinal and non-linear outcomes. Table 3.2 summarises the number of barriers and facilitators identified within each theme and the number of sources from which they were drawn. Appendices 4 and 5 provide lists of barriers and facilitators, respectively, by theme. The themes are discussed in turn below.

Table 3.2: Barriers and facilitators by theme

Theme	Barriers		Facilitators	
	Number of barriers identified	Number of sources	Number of facilitators identified	Number of sources
Data systems and infrastructure	15	10	11	9
Staffing and capacity	6	6	4	3
Outcomes frameworks and standards	4	2	4	4
Commissioning and governance	16	10	8	6
Measuring relational, longitudinal and non-linear outcomes	3	1	2	1
Total	44	17	29	17

3.2.1 Data systems and infrastructure

A recurring theme across the evidence base concerns the infrastructure underpinning data collection, the case management systems, databases, and monitoring tools that services use to record and report on outcomes. Where such infrastructure is well-developed, it can provide significant benefit, for example Women's Aid's On Track system, used by over 100 local services, contributes to the largest national dataset on survivors accessing domestic abuse services, enabling a picture of outcomes and referral patterns that would otherwise be impossible to construct (Women's Aid, 2024; End Violence Against Women et al., 2025). Smaller organisations have similarly benefited from investment in dedicated monitoring and evaluation software and IT systems, enabling more systematic data capture and reporting (ROSA, 2024b; 2025). However, the evidence also highlights substantial infrastructure-related barriers. Monitoring systems across services and local authorities are frequently incompatible, making it difficult to track clients who move across boundaries or to aggregate data meaningfully (DLUHC, 2023). Data sharing restrictions further limit what can be recorded and compared, and where organisations collect demographic and equalities data inconsistently, the potential of disaggregated datasets is significantly reduced (Lewis, 2024; NWC and WAFNI, 2024). The absence of a common data infrastructure is a foundational challenge that cuts across many of the other barriers discussed below.

3.2.2 Staffing and capacity

The capacity of organisations to dedicate staff time to monitoring and evaluation is a significant determinant of data quality. Where dedicated monitoring and evaluation staff exist, whether in-house leads, data analysts, or externally commissioned consultants, the evidence suggests marked improvements in the systematic and strategic use of data (Ashiana, no date; Bates et al., 2025; ROSA, 2024a). Conversely, the absence of such capacity is widespread, particularly among small and specialist providers, for example over 90% of Imkaan member organisations have no staff dedicated to monitoring and evaluation (End Violence Against Women et al., 2025). The administrative burden of recording outcomes, including unsuccessful referrals, falls disproportionately on frontline staff in services already operating under significant pressure, and is not always treated as a priority when capacity is stretched (Women's Aid, 2024; 2025). This dynamic creates a structural disadvantage for smaller, often 'by and for' organisations, whose evidence base may appear weaker not because their outcomes are poorer, but because they have fewer resources to document them.

3.2.3 Outcomes frameworks and standards

The review confirms the initial concerns regarding a broad lack of consensus around how outcomes of support in domestic abuse safe accommodation should be defined and measured. No established standard methodology exists, and the range of tools and frameworks in use across services is wide and varied (DLUHC, 2023; MHCLG, 2025). This is identified both as a barrier, because incomparable data limits strategic understanding; and as an opportunity because there is strong appetite among local authority staff and commissioners for shared guidance on outcome measurement (MHCLG, 2025), and well-developed frameworks such as On Track, which was co-

produced with survivors, services and academics, demonstrate that consensus is achievable (End Violence Against Women, 2025). A particular gap in existing frameworks concerns outcomes for children and young people in safe accommodation: local authorities have largely not developed clear children's outcomes frameworks as part of their local strategies, and service providers vary considerably in whether and how they collect data on child outcomes, with younger children presenting particular methodological challenges (MHCLG, 2025).

3.2.4 Commissioning and governance

The relationship between commissioners and service providers shapes both what is measured, and how honestly challenges are reported. Competitive commissioning creates power imbalances that can discourage services from being candid about difficulties, and short consultation timeframes and rigid application processes can marginalise the views of smaller organisations (London Councils, 2023; Women's Resource Centre, 2022; Solace, 2022a). At the same time, the evidence highlights what works: commissioners who co-design monitoring frameworks with services, who consult meaningfully with providers and survivors, and who take a collaborative rather than transactional approach, are associated with better quality data and more relevant outcome measures (London Councils, 2023; Women's Aid, 2024). Local authorities also tend to make limited use of the outcomes data that service providers do collect, and providers rarely share it proactively, which is a missed opportunity for building a shared evidence base (MHCLG, 2025). Structural inequalities in funding, which consistently disadvantage Black and minoritised organisations, compound these governance challenges by limiting the capacity of 'by and for' services to invest in evidence generation (Women's Resource Centre, 2022).

3.2.5 Measuring relational, longitudinal and non-linear outcomes

A thread running through much of the evidence concerns the difficulty of measuring outcomes that are relational, gradual, longitudinal or subjective in nature, sometimes referred to as 'softer' outcomes. Quantitative reporting frameworks may capture access to accommodation, for instance, but not the quality or safety of that accommodation, or her sense of belonging within it (Solace, 2022b). Services using trauma-informed and relational models, which are associated with positive outcomes for survivors, can struggle to demonstrate their impact within frameworks that prioritise measurable end-points, and the non-linear nature of recovery means that a single point-in-time measure may present a misleading picture of progress (Solace, 2022b). The evidence suggests that qualitative data and case studies, and longitudinal tracking of outcomes over time, offer more sensitive approaches to capturing individual journeys, though these methods require investment and are not always valued or resourced within commissioning frameworks (Solace, 2022a; 2022b).

4. Discussion

This rapid evidence review identified a relatively small and fragmented evidence base on outcomes measured in the context of safe accommodation for victim-survivors of domestic abuse. Across the 17 reports identified, outcomes clustered mainly around three core domains: safety, wellbeing, and empowerment, which can be respectively mapped to safety, health and wellbeing and freedom to go about daily life in the children and family-based Domestic Violence and Abuse Core Outcome Set. The review also identified two outcomes referring to relationships, the final domain of the Domestic Violence and Abuse Core Outcomes Set. Safety-related outcomes, particularly perceived safety, reduction in abuse, and improvements in living circumstances, were the most frequently reported, while wellbeing outcomes such as mental health and psychological wellbeing were also commonly measured. Empowerment outcomes, including independence, autonomy, and confidence, appeared less consistently but were nonetheless important in the context of support in safe accommodation. In addition, service-level indicators such as length of stay and move-on destinations were widely reported yet fall largely outside existing conceptual frameworks such as the Domestic Violence and Abuse Core Outcomes Set.

The review also identified substantial barriers to implementing a shared outcomes framework for support in safe accommodation, including limitations in data systems and infrastructure, insufficient monitoring and evaluation capacity within services, a lack of consensus around outcome definitions and measures, governance challenges in commissioning relationships, and difficulties in measuring more relational or 'softer' outcomes associated with recovery. Facilitators of implementing shared outcomes frameworks identified in this review included monitoring and evaluation software and case management systems, dedicated monitoring and evaluation staff, commissioners working collaboratively with service providers and survivors and co-designing monitoring frameworks, and use of qualitative data and longitudinal measurement of outcomes.

This rapid evidence review has its own strengths and limitations. A key strength of this review is its targeted focus on support in safe accommodation within the context of the Domestic Abuse Act (2021) duty. While previous reviews have examined outcomes across a wide range of domestic and sexual violence and abuse (DSVA) services, few have examined outcomes specifically within supported safe accommodation settings. By building on an existing scoping review (Carlisle et al., 2024) and updating the search to include recent literature, the review was able to provide an efficient synthesis of emerging evidence while maintaining methodological transparency. Another strength is the inclusion of grey literature and reports produced by sector organisations. In the field of domestic abuse, much practice-based knowledge is generated outside academic peer-reviewed literature, and incorporating these sources allows the review to capture insights grounded in service delivery and survivor experience that might otherwise be overlooked.

However, several limitations should be acknowledged. First, the number of empirical studies measuring outcomes of support in safe accommodation was extremely small, although this is consistent with previous reviews looking at DVSA services more

widely. Only one newly identified academic peer-reviewed paper met the strict inclusion criteria, highlighting the limited research focus on this service context. As a result, the review relied partly on outcomes identified in earlier literature and, more importantly, on grey literature reports. While including grey literature enhanced the richness of the data set, it also meant that the review ended up being a much bigger task than anticipated, leading to additional time constraints (see also Hock et al., 2023). Second, the review required outcomes to be empirically measured and qualitative studies exploring survivor experiences without formal measurement were excluded. While this criterion strengthened the focus on measurable outcomes, it may have excluded evidence that captures important dimensions of victim-survivor improvements in safety, wellbeing and empowerment as well as recovery and potentially novel and survivor-centred outcomes that are not traditionally measured quantitatively.

Third, the rapid evidence review methodology, while appropriate for the short timelines of this project, necessarily involved pragmatic decisions in search scope and screening (particularly with regards to grey literature) that may have led to some relevant literature being missed, although systematic search methods were used in an attempt to mitigate this. Finally, the heterogeneity of study designs and reporting practices limited the ability to assess methodological quality systematically or to draw strong conclusions about use or measurement of outcomes, meaning no risk of bias assessment was conducted as part of this study.

In terms of implications for policy and practice, our findings suggest that, while safe accommodation services are associated with improvements in safety, wellbeing, and empowerment, the evidence base remains insufficiently developed to support systematic comparison of services or robust national monitoring. Particularly, the relatively smaller number of outcomes relating to empowerment or freedom to go about daily life may reflect the focus of safe accommodation services on responding to immediate crises and ensuring physical safety. However, greater attention to measuring outcomes associated with longer-term recovery and independence would help services and policymakers better understand the sustained impact of provision.

From a policy perspective, the absence of a shared outcomes framework limits the ability of central government and local authorities to quantitatively assess whether the duty is achieving its intended impact. Local authorities are currently required to report on service provision and demand but have limited capacity to measure outcomes experienced by survivors and would like more guidance on how to do so (MHCLG, 2025). Developing a consistent approach to outcome measurement could therefore strengthen accountability and support learning across areas.

However, the barriers identified in this review indicate that introducing a shared framework will require careful consideration of implementation challenges. Data infrastructure varies widely across services, and many organisations lack dedicated monitoring and evaluation capacity. Smaller and specialist 'by and for' services appear particularly disadvantaged in this regard, reflecting broader inequalities in funding and resources across the domestic abuse sector (Women's Resource Centre, 2022). Any national framework will therefore need to be supported by appropriate data systems, training, and analytical capacity to ensure that services

and local authorities can implement it without placing additional administrative burdens on frontline staff.

Another important implication concerns the measurement of relational and subjective outcomes. Recovery from domestic abuse is often non-linear and involves changes in confidence, autonomy, and social relationships that may not be captured by conventional quantitative indicators or standardised tools and instruments. Frameworks that rely solely on measurable end-point outcomes risk overlooking these highly meaningful dimensions of victim-survivor experience.

Finally, this review has highlighted several important gaps in the evidence base. Most notably, there remains a striking lack of rigorous empirical research evaluating the outcomes of safe accommodation support services, with most of the available evidence from the United States (see also Yakobovich et al., 2022). Future research should therefore focus on further development and validation of measurement tools suitable in the context of safe accommodation, with particular attention to the relevance/meaningfulness of outcomes for victim-survivors from marginalised communities, including those with no recourse to public funds and those accessing specialist by-and-for services. Once validated outcome measures accounting for all perspectives are available, studies should prioritise robust evaluation designs examining both short-term and longer-term outcomes of support in safe accommodation for victim-survivors and their children, including freedom from violence, safety, housing and economic security, improved health and wellbeing, relationships with others and empowerment. Longitudinal research could provide valuable insight into the sustainability of improvements in safety, wellbeing, and empowerment after leaving safe accommodation.

Further research is also needed to develop and validate outcome measurement instruments that are appropriate for the safe accommodation context. While some measures used in the domestic abuse field, such as wellbeing scales, have strong psychometric properties, many tools currently used by services have not been formally validated. Furthermore, coordination between research teams is needed to avoid duplication and ensure data collection is harmonised between stakeholders. Finally, research that tests the reliability and acceptability of such measures across diverse survivor populations would support more consistent and meaningful data collection.

Additionally, future research should consider victim-survivors from marginalised communities, including those with no recourse to public funds or those accessing specialist 'by and for' services. Understanding how outcomes differ across these groups is essential for ensuring that the safe accommodation duty supports equitable access and recovery.

Overall, strengthening the evidence base around outcomes of support in safe accommodation will be critical for enabling local authorities, policymakers, and service providers to provide effective support for survivors. This will require improved understanding of what works, for whom, and under what conditions.

5. Conclusion

This rapid evidence review examined the outcomes currently used to assess the impact of support provided in safe accommodation for victim-survivors of domestic abuse, and the evidence base underpinning their measurement. The available literature indicates that support in safe accommodation is associated with improvements in safety, wellbeing, and, to a lesser extent, empowerment. However, the limited evidence base remains fragmented, with considerable variation in the outcomes measured. This lack of consistency limits the ability to compare services, monitor outcomes systematically, and build a stronger national evidence base on the impact of support provided under the Domestic Abuse Act (2021) duty.

The review also identified several barriers to implementing a shared outcomes framework, including limitations in data systems, resource constraints within services, and challenges in measuring longer-term or relational aspects of recovery. At the same time, there are clear facilitators of implementing such a framework, including appetite among local authorities/commissioners for greater consistency in how outcomes are defined and measured, use of/access to/availability of monitoring and evaluation software/case management systems and dedicated monitoring and evaluation staff, commissioners working collaboratively with service providers and survivors to co-design monitoring frameworks, and use of qualitative data and longitudinal measurement of outcomes.

Developing shared guidance on outcome measurement for safe accommodation, alongside investment in data infrastructure and monitoring capacity, could support local authorities to fulfil their statutory duties and enable more meaningful learning across services. Strengthening outcome measurement will ultimately help ensure that safe accommodation provision is better able to demonstrate its impact and support improved outcomes for victim-survivors and their children.

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6. Appendices

Appendix 1. Organisational websites searched

Table 6.1 lists the organisations whose websites were searched as part of the scoping review. In total, 171 documents were screened across 164 websites. The 63 organisations from which at least one document was screened are listed below in descending order of items screened.

Table 6.1 Organisations yielding one or more screened documents, by number of items screened

Organisation	Items screened	Organisation	Items screened	Organisation	Items screened
Women's Aid	16	Galop	6	Halo Project	1
Solace Women's Aid	12	Jewish Women's Aid	6	Hourglass	1
Gov.uk	11	Welsh Women's Aid	6	Knowsley Council	1
IDAS	7	End Violence Against Women	5	Lincolnshire Rape Crisis	1
Safe Lives	8	A2Dominion	5	Newham Council	1
Refuge	5	Imkaan	4	Notts SVS Services	1
Child and Women Abuse Studies Unit	4	Asian Women's Centre	4	Preston DV Services	1
Oxford Against Cutting	4	Scottish Women's Aid	4	Rape and Sexual Abuse Support Merseyside	1
Domestic Abuse Commissioner	3	BAWSO	3	Redbridge Council	1
Resonance	3	Safer Derbyshire	3	RSVP	1
Centre for Homelessness Impact	2	Forward	2	Safe Link	1
Foundations	2	Nia Ending Violence	2	Sistah Space	1
Oasis DA Service	2	Respect	2	Somerset Integrated DA Service	1

Organisation	Items screened	Organisation	Items screened	Organisation	Items screened
Restored	2	Safer Places	2	Standing Together Against Domestic Violence	1
Southall Black Sisters	2	The Women's Centre of Excellence	2	Survive	1
UKRI Economic and Social Research Council	2	UKRI Economic and Social Research Council	2	UK Collaborative Centre for Housing Evidence	1
Women's Resource Centre	2	Yellowdoor	2	Voices	1
Ashiana	1	Black Country Women's Aid	1	Wakefield Council	1
CARA Essex	1	CRASAC	1	West Mercia Women's Aid	1
Equality and Human Rights Commission	1			WMRSASC	1
Women and Girls Network	1				

Appendix 2. Included documents

Table 6.2 lists the 17 documents included in the outcomes element of the desk review, detailing each document's author, title, publication year, document type, and the outcome domains it addresses.

Table 6.2 Included documents for outcomes element of desk review

Author	Title	Year	Type	Outcome Domains Mentioned
Bates et al.	Final Evaluation Report: Whole Housing Approach Pilot in Cheshire East	2025	Grey literature	Safety
Curiosity Society	Women in Safe Homes Fund Social Impact Report 2024/2025	2025	Grey literature	Safety; Wellbeing; Empowerment; Other
Department for Levelling Up, Housing and Communities	Annual Progress Report from the Domestic Abuse Safe Accommodation National Expert Steering Group 2022 to 2023	2024	Grey literature	Other
Department for Levelling Up, Housing and Communities	Annual Progress Report from the Domestic Abuse Safe Accommodation National Expert Steering Group 2021 to 2022	2023	Grey literature	Other
Department for Levelling Up, Housing and Communities	Respite Rooms Pilot Programme Evaluation: Final Report	2023	Grey literature	Safety; Empowerment; Other
MHCLG	Support in Domestic Abuse Safe Accommodation 2024 to 2025	2025	Grey literature	Other
Oasis	Impact Report 2024-2025	2025	Grey literature	Safety; Wellbeing
Oasis	Impact Report 2023-2024	2024	Grey literature	Safety; Wellbeing
Patron and Resonance	Women in Safe Homes Fund Social Impact Report 2023/2024	2024	Grey literature	Safety; Wellbeing; Empowerment; Other
Patron and Resonance	Women in Safe Homes Fund Social Impact Report 2022/2023	2023	Grey literature	Safety; Wellbeing; Empowerment
SafeLives	Insights Refuge England and Wales Dataset 2015-18. Adult Refugee Services	2018	Grey literature (from original scoping review)	Safety; Other
Safer Places	Our Impact 2023-2024	2024	Grey literature	Safety; Wellbeing; Empowerment
The First Step	Annual Report and Unaudited Financial Statements for the Year Ended 31st March 2022	2022	Grey literature	Other
Welsh Women's Aid	Annual Membership Report: Data from Specialist Services in Wales 2022/23	2023	Grey literature	Other
West Mercia Women's Aid	Annual Reports and Accounts Year Ended 31 March 2024	2024	Grey literature	Safety; Wellbeing; Empowerment
Women's Aid	From Safety to Stability: Access to Move-On Accommodation After Refuge	2025	Grey literature	Safety; Wellbeing; Other
Women's Resource Centre	Ashiana Network: Journey Towards Safety [link unavailable]	2011	Grey literature (from original scoping review)	Safety; Wellbeing; Empowerment

Tables 6.3a-d list the 23 documents included in the barriers and facilitators element of the desk review, organised across four sub-tables by sector (government (6.3a), local government and sector bodies (6.3b), third sector (6.3c), and academic and peer-reviewed sources (6.3d), with the key barriers and facilitators to outcome measurement identified in each.

Table 6.3a Included documents for barriers and facilitators element of desk review – Government sources

Author	Title	Year	Type	Barriers/Facilitators to Outcome Measurement
DLUHC	Respite Rooms Pilot Programme Evaluation: Final Report	2023	Grey literature	Barriers: No consensus on measuring VAWG/DA outcomes; clients moving across LA boundaries; disparate/incompatible monitoring systems; data sharing restrictions; pressures limiting cross-provider learning. Facilitators: Noted gaps in 'what works' evidence as driver for improved data collection.
Domestic Abuse Commissioner	A Patchwork of Provision: How to Meet the Needs of Victims and Survivors Across England and Wales	2022	Grey literature	Barriers: Unable to differentiate outcomes by service type (e.g. refuge vs. IDVA); limited understanding of outcomes for minoritised victims accessing non-'by and for' services.
MHCLG	Evaluation of the Domestic Abuse Duty for Support in Safe Accommodation	2025	Grey literature	Barriers: Limited knowledge of children's outcomes; varied approaches to outcome measurement; patchy LA engagement with provider data; uncertainty about how Tier 2 data is used. Facilitators: Strong appetite among LA staff for shared outcome measurement guidance; interest in providers sharing anonymised individual-level data with LAs.

Table 6.3b Included documents for barriers and facilitators element of desk review – Local government and consultation responses

Author	Title	Year	Type	Barriers/Facilitators to Outcome Measurement
London Councils	Funding for Support Services for Victims and Survivors of Violence Against Women and Girls in London	2023	Grey literature	Barriers: Power imbalance in commissioning creating barriers to honest engagement on challenges.
NWC and WAFNI	North South Co-operation to Tackle Violence Against Women Dialogue Report	2024	Grey literature	Barriers: No common definitions or joint cross-border data collection; Brexit restrictions on data sharing; lack of ethnic data collection. Facilitators: Routes to Support UK-wide database; proposals to expand cross-island data resources.
Safe Lives	Response to Scotland's Consultation on Improving Victims' Experiences of the Justice System	2022	Grey literature	Barriers: Marginalised groups obscured in national datasets due to data collection methods and service structures.

Table 6.3c Included documents for barriers and facilitators element of desk review – Third sector

Author	Title	Year	Type	Barriers/Facilitators to Outcome Measurement
Ashiana	News (part of website)	No date	Grey literature	Barriers: Difficulty gathering feedback from women in short-term advice/counselling services; limited staff time for strategic data use. Facilitators: Online case management system (Lamplight/Synthesis); dedicated M&E staff member; yearly staff training; equalities data collection.
Bates et al.	Final Evaluation Report: Whole Housing Approach Pilot in Cheshire East	2025	Grey literature	Barriers: Data capture only underway late in pilot; poor disaggregated data on protected characteristics; local authorities lack time for strategic data work. Facilitators: Dedicated Data Analyst post; incremental data improvements; core criteria and outcomes guidance from STADA.
End Violence Against Women et al	A Mission to Halve Violence Against Women and Girls (VAWG): A VAWG Sector Briefing on Metrics and Their Limitations	2025	Grey literature	Barriers: Small specialist providers lack dedicated M&E staff (over 90% of Imkaan members). Facilitators: On Track outcomes framework developed with commissioners, survivors, services and academics.
Refuge	Towards a Future Without Domestic Abuse Impact Report 24-25	2025	Grey literature	Barriers: Small specialist provider size means data compares unfavourably to sector averages on Value for Money measures.
ROSA	Rosa's Rise Fund: Interim Impact Report 2024	2024	Grey literature	Facilitators: Use of consultancy to review and improve M&E strategies; systematic and directed approach to channelling services.
ROSA	Stand With Us Fund Impact Report	2024	Grey literature	Facilitators: Investment in M&E software to capture impact, manage data and track progress.
ROSA	UK Rise Impact Report 2025	2025	Grey literature	Facilitators: Implementation of new IT systems/databases; development of M&E frameworks.
Solace	A Strategy for Ending Women's Homelessness in London: Evidence Report and Guidance	2022	Grey literature	Barriers: Stakeholders working towards different definitions of success; unrealistic targets/timeframes; commissioning practices discouraging innovative approaches; lack of capacity for new approaches. Facilitators: Gender- and trauma-informed outcomes used alongside appropriate working practices; longer funding models; partnership working.
Solace	Women's Spaces Within Homelessness Settings: Setting Up Your Services	2022	Grey literature	Barriers: Quantitative outcome reporting fails to capture quality of accommodation or perceptions of safety; relational/trauma-informed models struggle to demonstrate impact. Facilitators: 'Softer outcomes' frameworks; qualitative data and case studies; tracking outcomes over time rather than at a fixed endpoint.
Lewis	Changing the Narrative	2024	Grey literature	Barriers: Variance in how organisations collect and term demographic data limits comparability. Facilitators: NRNS project's consistent quantitative monitoring system enabling comparable data submission across organisations.
Women's Aid	From Safety to Stability: Access to Move-On Accommodation After Refuge	2025	Grey literature	Barriers: Data consent requirements. Facilitators: On Track case management system; largest national dataset (200,000+

				survivors); informs research, campaigning and policy.
Women's Aid	Unsuccessful Referrals into Refuge. Women's Aid On Track Data Briefing	2024	Grey literature	Barriers: Administrative burden of recording unsuccessful referrals; capacity limitations; dataset underestimates unmet demand. Facilitators: On Track case management system capturing demographics, referral patterns and outcomes.
Women's Aid	The Domestic Abuse Report 2024: The Annual Audit	2024	Grey literature	Barriers: Year-on-year sample composition differences limit comparisons; structural inequalities affect representation of minoritised people. Facilitators: Collaborative commissioner relationships; meaningful consultation with services and survivors.
Women's Aid	The Domestic Abuse Report 2025: The Annual Audit	2025	Grey literature	Barriers: Administrative burden of recording unsuccessful referrals; capacity limitations; On Track underestimates unmet demand.
Women's Resource Centre	Influencing the Accessibility of Tier 1 Duty for Pan-London Provision of Domestic Abuse Safe Accommodation	2022	Grey literature	Barriers: Systemic racism in funding; short consultation timeframes limiting nuanced engagement. Facilitators: Variety of engagement methods (e.g. 1-1 meetings); Consortium representation on behalf of specialist organisations.

Table 6.3d Included documents for barriers and facilitators element of desk review – Academic and peer-reviewed sources

Author	Title	Year	Type	Barriers/Facilitators to Outcome Measurement
Hock et al.	Exploring the Impact of Housing Insecurity on the Health and Well-Being of Children and Young People: A Systematic Review	2023	Peer review	Barriers: Limited outcome data; complexity of synthesising qualitative evidence; children may be unwilling to discuss housing; limited physical/mental health outcome documentation in DA populations.
Idriss	Abused by the Patriarchy: Male Victims, Masculinity, 'Honor'-Based Abuse and Forced Marriages	2022	Peer review	Barriers: Sample size; case file accuracy and bias. Facilitators: Broad database coverage and long time span; data did not require male victims to participate directly.

Appendix 3. List of outcomes

Table 6.4 lists the outcome measures identified across the included documents, organised by domain and subdomain. Where the same outcome measure was reported by more than one source, these have been combined into a single row.

Table 6.4 Outcome measures identified in included documents

Domain	Subdomain	Outcome	Source
Safety	Living circumstances	Number/percentage of people living together, not living together or living together intermittently at intake and exit	Safe Lives (2018)
Safety	Living circumstances	The location of the home has been good for me	Patron and Resonance (2023, 2024); Curiosity Society (2025)
Safety	Living circumstances	Received target hardening measures	Bates et al. (2025)
Safety	Presence of abuse	Cessation of abuse: number/percentage of people reporting no abuse in the past month/since intake	Safe Lives (2018)
Safety	Presence of abuse	Physical abuse: number/percentage of people experiencing physical abuse at intake and exit	Safe Lives (2018)
Safety	Presence of abuse	Sexual abuse: number/percentage of people experiencing sexual abuse at intake and exit	Safe Lives (2018)
Safety	Presence of abuse	Harassment/stalking: number/percentage of people experiencing harassment/stalking at intake and exit	Safe Lives (2018)
Safety	Presence of abuse	Jealous and controlling behaviour: number/percentage of people experiencing jealous and controlling behaviour at intake and exit	Safe Lives (2018)
Safety	Presence of abuse	Multiple types of abuse: percentage of clients reporting multiple types of abuse at intake and exit	Safe Lives (2018)
Safety	Severity of abuse	Level of physical abuse: number/percentage experiencing high, moderate and standard physical abuse at intake and exit	Safe Lives (2018)
Safety	Severity of abuse	Level of sexual abuse: number/percentage experiencing high, moderate and standard sexual abuse at intake and exit	Safe Lives (2018)
Safety	Severity of abuse	Level of harassment/stalking: number/percentage experiencing high, moderate and standard harassment/stalking at intake and exit	Safe Lives (2018)
Safety	Severity of abuse	Level of jealous and controlling behaviour: number/percentage experiencing high, moderate and standard jealous and controlling behaviour at intake and exit	Safe Lives (2018)
Safety	Severity of abuse	Multiple types of abuse that are high: percentage of clients reporting multiple types of abuse that are high at intake and exit	Safe Lives (2018)

Safety	Severity of abuse	At least one form of abuse that is high: percentage of clients reporting at least one form of abuse that is high at intake and exit	Safe Lives (2018)
Safety	Escalation of abuse	Escalation in abuse severity: percentage of clients reporting any escalation in severity of abuse at intake and exit	Safe Lives (2018)
Safety	Escalation of abuse	Escalation in frequency of abuse: percentage of clients reporting any escalation in frequency of abuse at intake and exit	Safe Lives (2018)
Safety	Escalation of abuse	Escalation in frequency or severity of abuse: percentage of clients reporting any escalation in frequency or severity of abuse at intake and exit	Safe Lives (2018)
Safety	Escalation of abuse	At least one form of abuse that is high and escalating in frequency or severity	Safe Lives (2018)
Safety	Perception of safety	I have felt safe living here	Patron and Resonance (2023, 2024); Curiosity Society (2025)
Safety	Perception of safety	Percentage of clients with improved perception of safety	Oasis (2023-24, 2024-25)
Safety	Perception of safety	Service user satisfaction: comfortable and safe	DLUHC (2023)
Safety	Perception of safety	Personal safety	West Mercia Women's Aid (2024)
Safety	Risk assessment	Average decrease in DASH score	Safer Places (2024)
Safety	Financial security	Financial independence	Curiosity Society (2025); Women's Resource Centre (2011)
Safety	Financial security	Financial savings	Women's Resource Centre (2011)
Safety	Legal and immigration safety	Gaining secure immigration status	Curiosity Society (2025)
Safety	Legal and immigration safety	English language skills	Women's Resource Centre (2011)
Wellbeing	General wellbeing	Percentage of clients with improvement in overall wellbeing	Oasis (2023-24, 2024-25)
Wellbeing	General wellbeing	Resident wellbeing	Women's Aid (2025)
Wellbeing	General wellbeing	Health and wellbeing	West Mercia Women's Aid (2024)
Wellbeing	General wellbeing	Longer term improvement in general health	Women's Resource Centre (2011)
Wellbeing	Mental health	Improved mental health	Patron and Resonance (2023, 2024); Curiosity Society (2025); Women's Resource Centre (2011)

Wellbeing	Mental health	Average decrease in anxiety (GAD-7)	Safer Places (2024)
Wellbeing	Mental health	Average decrease in depression (PHQ-9)	Safer Places (2024)
Wellbeing	Mental health	Mental health support	Women's Aid (2025)
Wellbeing	Psychological wellbeing	Improved self-esteem	Women's Resource Centre (2011)
Wellbeing	Psychological wellbeing	Stability and resilience	West Mercia Women's Aid (2024)
Wellbeing	Physical health	Improved physical health: reduction in direct health impact of domestic violence	Women's Resource Centre (2011)
Wellbeing	Social wellbeing	Improvement in relationship with family	Women's Resource Centre (2011)
Wellbeing	Social wellbeing	Social isolation	Women's Resource Centre (2011)
Wellbeing	Sense of home and belonging	I have felt at home living here	Patron and Resonance (2023, 2024); Curiosity Society (2025)
Wellbeing	Sense of home and belonging	The home has been suitable to my needs	Patron and Resonance (2023, 2024); Curiosity Society (2025)
Wellbeing	Access to services	Access to appropriate support services	Women's Aid (2025)
Wellbeing	Children and young people	Children and young people's wellbeing	Women's Aid (2025)
Empowerment	Independence and autonomy	Independence and ability to exercise choice	Patron and Resonance (2023, 2024); Curiosity Society (2025); Women's Resource Centre (2011)
Empowerment	Independence and autonomy	This home has helped me to build my independence	Patron and Resonance (2024); Curiosity Society (2025)
Empowerment	Independence and autonomy	Dependence on refuge	Women's Aid (2025)
Empowerment	Recovery and healing	This home has helped me to recover from past experiences	Patron and Resonance (2023, 2024); Curiosity Society (2025)
Empowerment	Recovery and healing	Positive impact on wellbeing and life outcomes	Patron and Resonance (2023)
Empowerment	Self-esteem and confidence	Average increase in self-esteem (Rosenberg Self-Esteem Scale)	Safer Places (2024)
Empowerment	Self-esteem and confidence	Progress in self-confidence	Patron and Resonance (2024); Curiosity Society (2025)

Empowerment	Social networks and support	Progress in access to supportive social networks	Patron and Resonance (2024); Curiosity Society (2025)
Empowerment	Access to services	This home has helped me to access the support I needed	Patron and Resonance (2024); Curiosity Society (2025)
Empowerment	Access to services	Service user satisfaction: comfortable and safe; respite rooms helped	DLUHC (2023)
Empowerment	Employment and economic empowerment	Employment outcomes (volunteering, employment, qualifications)	Patron and Resonance (2023); Curiosity Society (2025)
Empowerment	Parenting capacity	Resourcefulness to parent	West Mercia Women's Aid (2024)
Empowerment	Skills and education	English language	Women's Resource Centre (2011)
Other	Length of stay	Length of stay in refuge	MHCLG (2025); Women's Aid (2025); Welsh Women's Aid (2023); DLUHC (2023, 2024)
Other	Length of stay	Length of stay in dispersed accommodation	MHCLG (2025); DLUHC (2024)
Other	Length of stay	Length of stay in specialist accommodation	MHCLG (2025); DLUHC (2023, 2024)
Other	Length of stay	Average tenancy length	Patron and Resonance (2023, 2024); Curiosity Society (2025)
Other	Length of stay	Service length in days	Women's Aid (2025)
Other	Length of stay	Under 1 week; 1-2 weeks; 2-4 weeks; more than 4 weeks	DLUHC (2023)
Other	Service exit and move-on	Move-on accommodation destination	Patron and Resonance (2023, 2024); Curiosity Society (2025); DLUHC (2023, 2024)
Other	Service exit and move-on	Reasons for ceasing/leaving support	MHCLG (2025); Welsh Women's Aid (2023); The First Step (2022)
Other	Service exit and move-on	Number of women moved on during the year	Patron and Resonance (2024)
Other	Service exit and move-on	Access to housing for women who were homeless	Women's Resource Centre (2011)
Other	Service exit and move-on	Move-on destinations and housing situation at follow-up	DLUHC (2023)
Other	Service characteristics	Types of support provided	DLUHC (2023)

Other	Service characteristics	Service user engagement: number of services accessed	DLUHC (2023)
Other	Service characteristics	Quality of accommodation	Patron and Resonance (2023)
Other	Service characteristics	SafeLives Insights data (refuge England and Wales 2015-18)	SafeLives (2018)
Other	Legal and immigration safety	Avoidance of forced marriage	Women's Resource Centre (2011)

Appendix 4. List of barriers by theme

Table 6.5 lists the barriers to outcome measurement identified across the included documents, organised by theme and sub-themes. Where the same barrier was reported by more than one source, these have been combined into a single row.

Table 6.5 List of barriers by theme

Theme	Sub-theme	Barrier	Source(s)
Data systems and infrastructure	Staff capacity for data/M&E	Challenging for management staff to allocate time to use data strategically beyond funder requirements.	Ashiana (no date)
Data systems and infrastructure	Capturing data from short-term/informal service users	More difficult to gather feedback from women in advice and counselling services who access support for a shorter period and are more likely to exit informally.	Ashiana (no date)
Data systems and infrastructure	Incompatible/delayed data improvements	Data improvements happened incrementally; many only came to fruition in Y3/Y4, meaning key outcome data were not available by end of pilot.	Bates et al. (2025)
Data systems and infrastructure	Consent and data contribution	Data contribution to national dataset relies on organisational and service user consent, limiting comprehensiveness.	Women's Aid (2025) Safety to Stability
Data systems and infrastructure	Undercounting of unmet demand	Not all referrals are recorded; services that are oversubscribed may not submit referrals, so the national dataset underestimates unmet demand.	Women's Aid (2024) Unsuccessful Referrals; Women's Aid (2025) Annual Audit
Data systems and infrastructure	Cross-boundary client movement	Clients may move across LA boundaries frequently, so their progress over time is not tracked by local services.	DLUHC (2023)
Data systems and infrastructure	Incompatible monitoring systems	Disparate and incompatible monitoring systems made it difficult to find and monitor a group of people and compare Respite Room users against a comparator.	DLUHC (2023)
Data systems and infrastructure	Data sharing restrictions	Limited data recorded due to data sharing restrictions.	DLUHC (2023)
Data systems and infrastructure	Incompatible cross-jurisdiction data collection	No common definitions or joint data collection cross-border between NI and ROI makes statistical comparison difficult.	NWC and WAFNI (2024)
Data systems and infrastructure	Impact of Brexit on data sharing	Brexit has restricted operational response and access to information and data sharing across the border.	NWC and WAFNI (2024)
Data systems and infrastructure	Inconsistent demographic data collection across organisations	Differences in how organisations collect and term demographic data limit the power of disaggregated datasets and cross-organisation comparisons.	Lewis (2024)
Data systems and infrastructure	Year-on-year sample composition changes	Caution needed when comparing findings across Annual Reports; differences may reflect sample composition changes rather than year-on-year change.	Women's Aid (2024) Annual Audit

Data systems and infrastructure	Potential bias in case file data	Case files may not be accurate and may include bias introduced by caseworkers when recording narrative accounts.	Idriss (2022)
Data systems and infrastructure	Small or unrepresentative sample sizes	Sample size may not be representative or reflective of the types of cases other organisations have encountered.	Idriss (2022)
Staffing and capacity	Language and interpretation	Women would benefit from quality face-to-face interpreting; difficulty relaying personal experiences of violence accurately.	Ashiana (no date)
Staffing and capacity	Local authority capacity for strategic data work	Local authorities typically lack the time or headspace to conduct strategic data work.	Bates et al. (2025)
Staffing and capacity	Administrative burden of recording referrals	Recording all unsuccessful referrals places a large administrative burden on support services, which is not always a priority when capacity is limited.	Women's Aid (2024) Unsuccessful Referrals; Women's Aid (2025) Annual Audit
Staffing and capacity	Lack of dedicated M&E staff in small/specialist providers	Over 90% of Imkaan members do not have staff dedicated to monitoring and evaluation, limiting data collection capacity.	End Violence Against Women et al. (2025)
Staffing and capacity	Staff capacity for learning and sharing	Significant pressures in day jobs limited scope for sharing learning across providers.	DLUHC (2023)
Outcomes frameworks and standards	No consensus on outcomes measurement	No consensus around the most appropriate way of measuring outcomes of VAWG and DA provision; no established standard methodology.	DLUHC (2023)
Outcomes frameworks and standards	Limited children's outcomes data and frameworks	LAs had limited knowledge of children's outcomes; no clear outcomes frameworks for children developed, and little evidence gathered from service providers on children's outcomes.	MHCLG (2025)
Outcomes frameworks and standards	Challenges collecting data from younger children	Collecting outcome data from younger children was particularly challenging; services gathered parental feedback instead.	MHCLG (2025)
Outcomes frameworks and standards	Varied and non-shared outcomes tools	A range of outcomes measurement tools used by service providers but not commonly shared with LAs, limiting a comprehensive picture of the duty's impact.	MHCLG (2025)
Commissioning and governance	Poor data on protected characteristics	Data remains poor around protected characteristics such as disability, nationality, and language needs; minority community needs underrepresented.	Bates et al. (2025)
Commissioning and governance	Systemic and structural inequalities in funding	Systemic discrimination in funding practices means Black and minoritised organisations consistently receive less funding, limiting capacity to evidence outcomes.	Women's Resource Centre (2022)
Commissioning and governance	Short consultation timeframes	Time pressure and strict deadlines were a barrier to organisations participating meaningfully in needs assessments and consultations.	Women's Resource Centre (2022)
Commissioning and governance	Power imbalance in commissioning	Competitive commissioning creates a power imbalance, making it hard to determine the real needs of organisations and service users and discouraging honest engagement on challenges.	London Councils (2023)

Commissioning and governance	Partnership working challenges	Different approaches and areas of expertise between providers created challenges in developing consistent approaches to support.	DLUHC (2023)
Commissioning and governance	Gaps in ethnic and court order data	Lack of comprehensive data collection on access to court orders and ethnic data limits understanding of outcomes across jurisdictions.	NWC and WAFNI (2024)
Commissioning and governance	Patchy LA use of provider monitoring data	While most service providers capture outcomes, LAs had patchy engagement with providers' monitoring and outcomes data.	MHCLG (2025)
Commissioning and governance	Uncertainty about how Tier 2 data is used	Tier 2 LAs were uncertain about how the data they shared with upper-tier authorities was used to monitor survivor outcomes.	MHCLG (2025)
Commissioning and governance	Marginalised groups obscured in national datasets	Victims and survivors from minoritised communities are often obscured in national datasets because of the way data is collected and services are set up.	Safe Lives (2022)
Commissioning and governance	Misaligned definitions of success across stakeholders	Policy makers, commissioners, service providers and clients may work towards different measures of success, inadvertently working against each other.	Solace (2022a)
Commissioning and governance	Unrealistic targets and timeframes	Unrealistic targets may set clients up to fail through pressure to take unsuitable accommodation, and cause disengagement.	Solace (2022a)
Commissioning and governance	Services cannot control supply of key outcomes	Services may have limited control over access to accommodation or mental health pathways, constraining progress towards outcomes.	Solace (2022a)
Commissioning and governance	Commissioning practices discourage innovation	Application processes can discourage use of less established approaches if they do not allow for explanation of alternative methods.	Solace (2022a)
Commissioning and governance	Structural inequalities affecting data representation	Structural inequalities and differences in representation of minoritised people in each sample affect comparability.	Women's Aid (2024) Annual Audit
Commissioning and governance	Limited understanding of outcomes for minoritised survivors in non-specialist services	Limited evidence on experiences of minoritised victims who access non 'by and for' services.	Domestic Abuse Commissioner (2022)
Commissioning and governance	Inability to disaggregate outcomes by service type	Unable to differentiate outcomes for victims accessing different types of service (e.g. 'by and for', generic, in-house), limiting understanding of what works.	Domestic Abuse Commissioner (2022)
Measuring softer outcomes	Quantitative outcomes miss quality and safety dimensions	Outcomes focusing on quantitative reports leave no space for discussion of accommodation quality or women's perceptions of safety within it.	Solace (2022b)
Measuring softer outcomes	Relational/soft outcomes hard to demonstrate	Services using a relational model can struggle to demonstrate their impact; 'softer outcomes' are often not reported.	Solace (2022b)
Measuring softer outcomes	Non-linear journeys poorly captured by endpoint measurement	People's journeys are often non-linear; relying only on outcomes achieved at a specific end point may not be representative.	Solace (2022b)
Measuring softer outcomes	Non-linear journeys poorly captured by endpoint measurement	People's journeys are often non-linear; relying only on outcomes achieved at a specific end point may not be representative.	Solace (2022b)

Appendix 5. List of facilitators by theme

Table 6.6 lists the facilitators to outcome measurement identified across the included documents, organised by theme and sub-themes.

Table 6.6 List of facilitators by theme

Theme	Sub-theme	Facilitator	Source(s)
Data systems and infrastructure	Case management systems	Online case management system (Lamplight/Synthesis) holds quality data on women using the service, including equalities data.	Ashiana (no date)
Data systems and infrastructure	Nationally linked systems	Survivors recommended nationally linked systems to track abuse patterns and histories, and improved communication and coordination between services.	Bates et al. (2025)
Data systems and infrastructure	National case management and outcomes system (On Track)	On Track used by over 100 local services; contributes to anonymised national dataset of over 200,000 survivors, providing a vital national picture on service use and outcomes.	Women's Aid (2025) Safety to Stability; Women's Aid (2024) Unsuccessful Referrals; EAW (2025) Halving VAWG
Data systems and infrastructure	Shared digital databases for service availability	Routes to Support (UK-wide) enables refuge providers to access daily statistics on available beds; expanding cross-island would improve coordination.	NWC and WAFNI (2024)
Data systems and infrastructure	Cross-border data strengthening	Strengthening data collection across the island would benefit service providers and policymakers by highlighting inconsistencies in support systems.	NWC and WAFNI (2024)
Data systems and infrastructure	Investment in M&E software	Funds invested in monitoring and evaluation software to better capture impact, manage data, track progress and report against outcomes.	ROSA (2024b)
Data systems and infrastructure	IT systems and M&E frameworks	Funding enabled implementation of new IT systems and databases, and development of monitoring and evaluation frameworks.	ROSA (2025)
Data systems and infrastructure	Consistent quantitative monitoring systems	A systematic quantitative monitoring system enabled each organisation to submit consistent data despite variance in individual data collection approaches.	Lewis (2024)
Data systems and infrastructure	Breadth and longitudinal span of database	Broad coverage and long time span of the database allowed staff to record many events across many different social settings.	Idriss (2022)
Data systems and infrastructure	Routine data collection without requiring survivor participation	Case management data did not necessitate male victims taking part in interviews, reducing burden and potential retraumatisation.	Idriss (2022)
Staffing and capacity	Dedicated M&E staff	Dedicated staff member leads on monitoring and evaluation, develops detailed monitoring reports for funders, and regularly updates the case management system.	Ashiana (no date)
Staffing and capacity	Staff training on data systems	Yearly training for staff on data input; developing a booklet to support staff.	Ashiana (no date)
Staffing and capacity	Dedicated data analyst post	A new Data Analyst post within the DA Hub drove data quality forward and enabled disaggregation of data across datasets.	Bates et al. (2025)

Staffing and capacity	External consultancy for M&E improvement	Consultancy services used to review, evaluate and improve organisational strategies for monitoring, evaluation and governance, leading to more systematic approaches.	ROSA (2024a)
Outcomes framework and standards	Core outcome standards	Core criteria and outcomes could be provided centrally, giving local authorities control over implementation while ensuring core standards are evidenced.	Bates et al. (2025)
Outcomes framework and standards	Established outcomes frameworks	Well-established On Track outcomes framework developed with commissioners, survivors, services and academics provides a comprehensive survivor-identified outcomes set.	EVAW (2025) Halving VAWG
Outcomes framework and standards	Appetite for shared outcomes guidance	Strong appetite among LA staff for guidance on shared methods for measuring adult and child survivor outcomes.	MHCLG (2025)
Outcomes framework and standards	Gender- and trauma-informed outcome frameworks	Gender-informed outcomes used alongside trauma-informed practice, smaller caseloads, specialist staff, and longer support periods supports more meaningful measurement.	Solace (2022a)
Commissioning and governance	Varied engagement methods	Different engagement mechanisms (e.g. 1-1 meetings, written responses) aided accessibility and allowed organisations to raise issues in a detailed and nuanced way.	Women's Resource Centre (2022)
Commissioning and governance	Consortium support	Consortium representation enabled organisations to engage quickly and ensured their views were represented even when timeframes were short.	Women's Resource Centre (2022)
Commissioning and governance	Co-designing outcomes monitoring	Commissioners co-designing monitoring outcomes with services to understand 'what story the service needs to tell' improves relevance and usefulness of data.	London Councils (2023)
Commissioning and governance	Appetite for shared learning	Majority of leads noted they would find it useful to share learning despite current capacity constraints.	DLUHC (2023)
Commissioning and governance	Data sharing between providers and LAs	Encouraging services to share anonymised individual-level outcomes data with LAs could build collaborative understanding and facilitate shared outcome measures.	MHCLG (2025)
Commissioning and governance	Multi-agency partnership working	Close partnership working and multi-agency client meetings (involving the client) can help achieve shared goals and support relational outcomes.	Solace (2022a)
Commissioning and governance	Incremental change in outcomes reporting	Progress towards gender-informed outcomes can be achieved through gradual inclusion of new outcomes in recommissioned projects, rather than wholesale change.	Solace (2022a)
Commissioning and governance	Collaborative commissioner relationships	Strong, collaborative commissioner relationships that involve meaningful consultation with services and survivors support better outcome measurement and reporting.	Women's Aid (2024) Annual Audit
Measuring softer outcomes	Qualitative data and case studies	Qualitative data and case studies can be more useful than quantitative data for capturing individual journeys and change.	Solace (2022b)
Measuring softer outcomes	Tracking outcomes over time	Tracking changes and outcomes over time may be more representative than	Solace (2022b)

		relying only on a single end-point measurement.	
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