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From Pillar to Post: Understanding the victimisation of women and children who experience domestic violence in an age of austerity

Introduction

The dismantling of the welfare state across the UK (and indeed a number of other Western industrialised democracies, such as Canada and the U.S.) and the reductions to welfare provisions and entitlements, are having a detrimental impact on women's equality and safety (Weis and Fine, 2000; Morrow, Hankivsky, and Varcoe, 2004; Vacchelli *et al.*, 2015). Towers and Walby (2012) argue that the recent cuts to welfare provisions in the UK, particularly for women's services, could lead to increased levels of violence for women and girls (*c.f.* Laville, 2014). While the UK Coalition government has stated that they are making violence against women and girls a priority (Home Office, 2011), they have failed to provide adequate funding resources to ensure that services are in place to protect women, with substantial cuts made to domestic violence refuges and other women's services across England between 2009/10 and 2012/13 (Bennhold, 2012), and concordant cuts to the police and the criminal justice system (Johnson, 2012)¹. Equally problematic has been the variation in funding for domestic violence services at a local level as a result of Coalition introduction of a localism agenda that 'combines the rhetoric of devolution of power to local government with significant cuts to local government funding' (Bowstead, 2015: 328). While ring-fenced funding (from 2003-2009) through the Supporting People Programme had helped to increase service provision and capacity to assist victims of domestic violence, the Coalition Government's approach to local commissioning has made domestic violence services, in particular refuges, vulnerable (Bowstead, 2015)². The cumulative lack of ring-fenced funding over the past ten years has helped to erode support services for domestic violence (Ishkanian, 2014), and has given rise to a situation where practitioners on the ground working in local authorities and third sector organisations to serve women who have experienced domestic violence are making do not only with limited resources, but also an incoherent policy approach.

This paper makes the argument that female victims of domestic abuse experience violence on two levels: first, at the intimate/personal level through their relationship with an abuser and, second, at a structural level, through the state failing to provide adequate protection and provision for women who have experienced violence in intimate relationships (Ishkanian, 2014; Neville and Sanders-McDonagh, 2014; Sokoloff & Dupont, 2005). Women who are also mothers (the focus of this paper) experience an additional layer of violence because of the shortage of, and now cuts to, specialist services that address their experiences of domestic violence *as mothers* by honouring and strengthening their relationships with their children. We maintain that the state's cuts to welfare provisions for victims of domestic violence amounts to state-sanctioned violence, which has an especially traumatic impact on those less resilient to such violence: women living in deprivation, many of whom are also mothers (Weis and Fine, 2000; Morrow *et al.*, 2004; Vacchelli *et al.*, 2015).

Using a specific example of post-violence community services delivered to both the children of women who have experienced domestic violence and the women themselves, this paper draws on empirical research carried out in 2010-2011 with London-based third sector and public sector organizations delivering the Against Violence and Abuse (AVA) Project 'Community Group Programme' (CGP). We argue that the lack of services for women involved in, or exiting, a violent

¹ While the 2015 election saw all parties promising to make violence against women (including domestic violence specifically) a priority, the 2015 Conservative Government is set to make further cuts across all public services as outlined in the Summer 2015 budget, with a continued focus on localism as a policy practice, and a specific target on welfare and support programmes (HM Treasury, 2015).

relationship can amount to state-sanctioned violence, if funding is withheld, or indeed, stretched to breaking point. Against a backdrop of provisions at a national level for these kinds of programmes being scaled back, we examine the effect this is having on practitioners based in third sector and local authority organisations seeking to deliver an innovative programme providing critical psycho-educational resources and group support for children and their mothers who had experienced domestic violence. We look at the impact and salience of the programme for the children and women who took part, and explore the difficulties that the facilitators and coordinators had with regards to running the programme, particularly in relation to obtaining secure and continuous funding. We argue that despite the clear need for, and success of, the programme the precariousness of the CGP reflects the broader insecurity of funding in this sector. Critically and finally, we then argue that this is the result of national-level state-sanctioned violence, with women and children, and particularly those living in poverty, the victims of this assault.

The nature and scope of domestic violence

Domestic abuse causes serious harm, and constitutes a considerable proportion of overall crime. It costs the UK an estimated 15.7 billion pounds a year (ONS, 2013). Women's Aid estimates that 1.2 million UK women experienced domestic violence in 2013, and that one in four women will suffer it in their lifetime (Women's Aid, 2013). Police forces interviewed by Her Majesty's Inspectorate of Constabulary (HMIC) stated that crime relating to domestic abuse constitutes some eight percent of all recorded crime in their areas, and one third of their recorded assaults and injuries (HMIC, 2014). In the UK domestic violence statistics indicate that women are overwhelmingly the victims of violence in the home. The authors of this paper accept and recognize that domestic violence can and does happen to men, and this is likely to be underreported by male victims. The Office of National Statistics (2013) suggests that in 2012/2013, 7.1% of women and 4.4% of men reported having experienced some type of domestic abuse in the last year, equivalent to an estimated 1.2 million female victims of domestic abuse and 700,000 male victims. Statistics from the British Crime Survey (Home Office, 2010) show that 73% of the victims of domestic violence are female. recent Home Office figures suggest that women are nearly 5 times more likely to be killed by their partner, ex-partner, or lover compared to men (Smith *et al.*, 2010)³.

It is no surprise, then, that tackling domestic violence has become a core issue for the current government, as laid out in the *Call To End Violence Against Women and Girls* paper (Home Office, 2010) and the accompanying (updated) Action Plan published early in 2014, which clearly states that the government is committed to “nothing less than the elimination of violence against women and girls” (Home Office, 2014a:7). In support of this, central government has committed more than £40 million to reduce violence against women and girls over a five-year period from 2010-2015 (Home Office, 2014b), which includes a range of service provisions including rape crisis and support services, LGBT sexual violence support services, and other issues that might impact women – including domestic violence. In real terms this figure represents a significant cut in spending in relation to the previous Labour Government. Provisions for non-statutory or ‘discretionary’ services

³ Most of the resources available to prevent DV and to deal with the aftermath focuses on female victims, and usually emphasizes the gendered nature of abuse. Most refuges in the UK, for example, are for women only. This excludes not only male victims of DV, who may well be fathers or carers, but also teenage sons of women, who are often refused entry to domestic violence shelters. It is outside the remit of this paper to comment substantively on whether and how this situation might be addressed. Most of the funding available to engage abused partners is largely available to women. Indeed, it could well be argued that fathers who experience DV, either in the context of a homo- or a heterosexual relationship – may face greater difficulties in accessing appropriate services. We feel that this issue warrants further attention, as there is little empirical evidence to document the difficulties fathers-as-victims experience, and the impact it may have on their identities as fathers.

(e.g. domestic violence refuges), have no guaranteed ring-fenced funding, and while much of the policy agenda is set nationally, decisions about allocation and provision are made at the local level, leading to what Ishkanian has described as a “discord between the national policy framework and local implementation” (Ishkanian, 2014:341). Recent research carried out by Neville and Sanders-McDonagh (2014) on domestic homicide cases across one police force area points to the discrepancy in funding allocations for different services in different areas, with some services able to fund key services easily, while other services struggle to stay afloat. Multi-Agency Risk Assessment Conferences (MARACs)⁴ in particular were highlighted in the report as problematic, as in situations where there is a lack of funding to ensure that a coordinator is present and available for key meetings, communication between services is stymied. This has a considerable negative impact on the ability of service providers to respond effectively to high risk cases, and to implement structured and practical safety plans for women and children in potentially (or actual) violent situations. Furthermore, the report suggests that at a local level the degree of joined up thinking between services for women and other related services (e.g. children's services) varies considerably, with violence and abuse against women and children often falling between child and adult social work services and no one agency taking holistic responsibility for a family's safety - this problem is compounded by complex and irregular funding provisions.

Towers & Walby (2012:3) have argued that public spending cuts are having “a dramatic and uneven impact across localities” and observe that there has been a marked loss of specialist services within the field. Obviously cuts in provision are not unique to the field of domestic violence (according to Kane & Allen (2011) the voluntary sector as a whole stands to lose £2.8 billion in government funds from 2011 to 2016), but nevertheless, the effect has been pronounced. Over five and a half million pounds in cuts was made to domestic violence refuges⁵ and other ‘discretionary’ women's services across England between 2009/10 and 2012/13 (Bennhold, 2012), which has had a dramatic impact on the ability of such services to offer help and support to women who have been involved in domestic violence, including, in some cases, refuges having to turn women away (Coy, Kelly, and Foord, 2009; Topping, 2012). The loss of trained staff is also a potentially crippling blow to women’s services, with Polly Neate (2014), chief executive of Women's Aid, issuing a strong warning about the abrupt, far-reaching and irretrievable loss of institutional memory that such cuts are creating.

The cuts to funding, especially in the wider context of the global financial crisis and the corresponding reduction in public donations (Clark *et al.*, 2012), means that specialist services that have the capacity to work with and support victims of DV are in crisis. Jones (2012) found that two-fifths of organisations working with victims of sexual and domestic abuse interviewed in her study ($n=37$) had made staff redundant in the previous 12 months, while 28 per cent had cut essential services such as outreach and children's workers in order to keep refuge beds open. The domestic violence charity Refuge stated in 2012 that it was worried it might face closure, with CEO Sandra Horley explaining that, in nearly three decades of working for Refuge, “I have never been so worried about our future” (in Pearce, 2012).

It is clear that such a reduction in resources available to women and children who have experienced domestic violence is going to impact greatly on those who have historically relied on third sector support. The impact of domestic violence, on women in particular, has been well documented by feminist and public health researchers from the 1960s onwards (Counts, Brown, and Campbell 1992;

⁴ Multi-Agency Risk Assessment Conferences (MARACs) are regular local meetings where information about high risk domestic abuse victims (those at risk of murder or serious harm) is shared between local agencies.

⁵ Bowstead (2015) points out that refuges and non-statutory service provisions at a local authority level are particularly vulnerable to cuts because this type of service can be constructed as ‘discretionary’. Fitzgerland and Lupton (2014) argue that in London at least, it is these ‘discretionary’ services that have been hit hard as a result of the funding cuts.

Dobash and Dobash 1979; Osofsky, 1999; Pagelow 1984). As well as the personal, physical, and psychological effects of violence and abuse, for those women who are also mothers, intimate partner violence within a family context can damage their sense of identity as a woman *and* as a mother. Wilcox (2006) observes that domestic violence in heterosexual relationships is often targeted not only at the woman but also at the ‘mother–child’ relationship. Abrahams (2010) argues that in these situations domestic violence can impact on women’s confidence to be a ‘good enough’ mother and their ability to relate to their children. The need for programmes that can address both of these issues is therefore readily apparent, although they have not always been forthcoming.

Domestic violence and children: understanding the impacts

Estimations for the prevalence of domestic violence as it affects children vary. Department of Health estimates from 2002 (DoH, 2002) suggest that as many as 750,000 children a year in the UK witness domestic violence. In 2009 (Lord Lamming, 2009; cited in Cleaver, Unell, and Aldgate, 2011) data on the 11 million children in the United Kingdom suggested that 200,000 of those lived in households where there is a known risk of violence. Estimates from Women’s Aid report 23,500 children as living in a refuge with their mothers (Women’s Aid; cited in Humphreys, 2006:22) and 95,960 children being supported by Women’s Aid domestic services (Women’s Aid; cited in Cleaver *et al.*, 2011:43).

Early research on the impact that domestic violence has on children (e.g. Anderson and Cramer-Benjamin, 1999) suggested that children could be affected directly by domestic violence through its impact on their physical and emotional well-being, their behaviour, social skills, and educational attainment. Indirectly, their parents’ preoccupations make them less available to their children and can compromise the parent-child relationship. Furthermore, the witnessing of the abuse of their mother (or father) can leave children confused and unable to deal with their feelings about what is happening (Anderson & Cramer-Benjamin, 1999:6). More recently, it has been recognized that the impact of multiple problems in the family (e.g. domestic violence *and* mental health and/or substance misuse or learning disabilities) are most likely to have a detrimental impact on children (Cleaver *et al.*, 2011). Violence in the family can contribute to lack of parental attunement to a child’s physical and emotional needs (Adams, 2006; Cleaver *et al.*, 2011;) and can have consequences for a child’s relationship with both parents (Holt, Buckley, and Wheelan, 2008). Furthermore, there is considerable evidence to suggest that violence in adult relationships poses an increased risk of a parent abusing their child (e.g. Volpe, 1996).

More recently there has been increasing awareness that understanding children’s voices in relation to their experiences of domestic violence is important, and a recognition of the potential dangers of having children’s safety subsumed within mother’s safety. This can tend to obscure the separate needs of children who experience domestic violence; children’s needs are not always the same as those of their mothers (Bagshaw and Chung, 2001; Powell and Murray, 2008). Furthermore, listening to children’s experiences allows for a more nuanced understanding of both risks and protective strategies that children themselves employ to safeguard their own physical, cognitive and emotional well-being (Mullender *et al.*, 2002). At the same time, longitudinal research into women’s experiences of rebuilding their lives after domestic violence draws our attention to the vital role that social support and solidarity play in the journey of re-owning their lives (Abrahams, 2010).

As such, specialised services for children and young people who have experienced domestic violence, either directly or vicariously through adult relationships, are vital. A report published by CAADA in 2014 presents findings from over 900 cases of children who have been exposed to domestic violence and shows that children’s health and well-being improves significantly after interventions/support from specialist services. A longitudinal study of children in the UK (Sousa *et al.*, 2011) explores the

effects of child-abuse and children's exposure to domestic violence, and suggests that finding ways of preventing domestic violence, through psycho-education for example, could reduce the risk of antisocial behavior in adolescence, as could strengthening parent-child attachments. Both studies make clear that children exposed to domestic violence can benefit from tailored programmes and specialist services, highlighting the importance of strengthening parent-child relationships in relation to children's well-being (references with page numbers?).

While organizations like Refuge and Women's Aid both recognize the importance of providing this kind of support for children and young people, a recent report from Women's Aid (Taylor, 2013) reveals a reduction of children's services across the country, with the South West of England losing nearly 30% of children's services, and the Midlands and the South East both losing roughly 20%. Furthermore, the social investment discourses (Lister, 2006) of childhood which have dominated policy making in the last 15 years have played a role in overshadowing parental, and especially mothers', welfare. As such, arguments made by feminist theorists (Mullender, 2004; Women's Budget Group, 2005; Thorne, 1987) for approaches to social issues, such as domestic violence, poverty and citizenship, that honour the relationship between mothers and their children continue to be relevant and important, especially in light of legislation and service provision that persists in viewing problems from a population perspective (adult and child services) and splitting engagement with mothers and children. Ignoring these important relationships adds a further layer to the structural violence experienced by women as the state becomes implicated in severing intimate and primary solidarities.⁶

Honouring relationships: The Community Group Programme and its evaluation

The idea of working with and strengthening the relationship between children and their mothers is a key theoretical component of the Community Group Programme (CGP). The CGP is a psycho-educational group work model for children (and their mothers) who have experienced domestic violence (Sudermann, Marshall, and Loosely, 2000). The programme emerged out of research and clinical practice in London, Ontario, Canada, in the 1980s and 1990s following observations that no local provisions existed for supporting children affected by domestic violence (Loosley, Drouillard, Ritchie & Abercromby, 2006; Jaffe, Wolfe, and Wilson, 1990). Echoing theoretical arguments about preserving and strengthening child-mother relationships, the groups are designed to aid children in processing their experiences of witnessing domestic violence in a supportive environment. Children are encouraged to recognise, name, and explore the multiplicity of feelings surrounding incidences of domestic abuse they have witnessed, and are given opportunities to respond to these feelings in creative ways, in a safe space facilitated by professionals and, in the company of peers who have had similar experiences. A parallel series of groups with mothers assists women in supporting their children with coming to terms with their experiences. The programme is focused on rebuilding lives after experiences of domestic violence and is run exclusively with children and mothers who have left the violent relationship. However, while occurring temporally *after* incidence of violence were in past, written into the programme pedagogy was a mindfulness of the dynamics of domestic violence which can often be recursive both within the same relationship and across different relationships. In this way the programme also functioned, and was described, as a preventative programme giving women and children conceptual and emotional tools to identify patterns of violence and to protect themselves from those.

The arguments developed in this paper draw on the evaluation study of the London roll-out of the

⁶ See the Domestic Violence and Victims Act 2004, which has introduced the clause that where parents let a vulnerable person (often a child) be a victim of violence, the co-parent can be held responsible

CGPs that was conducted by the authors (NAMES OF AUTHORS, 2012⁷). In the UK, awareness of North American integrated group interventions for family members who have experience domestic violence dates back to the early 1990s (Mullender and Morley, 1994). In 2004, under the leadership of Linda Finn, the Community Group Programme was piloted in the south London Borough of Sutton. The programme ran successfully in Sutton for eight years, coming to the awareness of the London-based charity 'The AVA Project' (<http://www.avaproject.org.uk/>). Following the success of the programme in Sutton, CGP was identified for wider implementation in the Mayor of London's second domestic violence strategy (reference?). In 2009 AVA secured funding for three years from Comic Relief (a national donor charity that raises awareness and funds programmes that tackle poverty and social justice nationally and internationally). AVA rolled-out the programme across 32 London boroughs. From 2009 until 2012 the organization trained professionals in coordinating and facilitating mother and children groups, as well as providing continued post-training support to professionals in the form of networking events, and email and telephone support and consultation. At the time of writing the final evaluation report (2012) 11 boroughs were running groups, of which 5 had a track record of doing so for more than 18 months⁸. Five were preparing or planning to run groups, and 3 boroughs provided alternative services for children, but were in consultation with AVA about introducing the programme. In addition, Scottish Women's Aid have also been running the same programme in Scotland since 2011, and national interest in the programme is developing, with AVA now offering training outside of London.

Findings from the evaluation suggest that women and children had an overwhelmingly positive experience of the project. Mothers reported feeling supported and safe in the groups, where they could talk to other women who had experienced similar issues, both in terms of domestic violence and in coping with the aftermath of helping their children deal with difficult emotions. They particularly noted that the CGP had helped them re-establish relationships with their child (or children), often adding that hearing the stories from the other mothers in their group was helpful for them. For many of the mothers, living in the aftermath of domestic violence meant that they had become intensely self-reliant, to the point where they were isolated from support networks, making it difficult for them to accept or seek out external support. Women interviewed noted the specialist nature of the service being delivered as part of the CGP, making it clear that having a specialist service that was equipped to deal with issues related to domestic violence and childcare was a key reason the groups were so successful (NAMES OF AUTHORS, 2012: 7-8).

The children interviewed were equally enthusiastic about their experience of the CGP, to the extent that many of them expressed sadness when the groups came to an end. Children felt able to explore their feelings in the safety of the groups, particularly when it came to dealing with anger. The spaces of the CGP proved to be a positive environment for them and helped with self-esteem through relevant child-centred activities. Children also felt safe to share their stories in a supportive group, where they reporting feeling heard, believed and validated; the confidentiality created in these spaces was highly valued. Children felt less isolated through telling and sharing their stories with others who had similar experiences and, in particular, they highlighted how the groups helped them to talk more openly with their mothers and how much they valued this newfound improved communication (NAMES OF AUTHORS, 2012).

Despite the gains experienced by women and their children as a result of their participation in the groups, and the importance of this kind of support in making sure women with children are able to re-

⁷ Full findings of the evaluation are available here: WEBSITE LINK WILL BE PROVIDED

⁸ Email communications with AVA in July of 2015 about the status of the groups revealed that funding for the project had run out and there was no clear oversight about which groups were still running and in what capacity.

engage with the community after leaving a violent relationship, there was a continued and sustained lack of secure funding across most of the boroughs engaged with the programme. This made it difficult for coordinators of the CGP to organize at the best of times and impossible at the worst.

Interviews with coordinators and facilitators took place in the Autumn of 2010 - six months into the Coalition government's implementation of austerity policies and the first round of cuts. From the 32 London boroughs involved in the training, four were able to report running groups beyond a piloting stage and another four had been able to pilot the programme. From the remaining 24 boroughs we were able to contact, 11 reported intending to run groups and the remaining 13 London boroughs were either unable to run groups despite attending training or did not have the resources to send anyone to train or had no one appointed who could lead on the programme and therefore no one attend training. In some boroughs it was not possible to make contact with a relevant member of staff. Of the 19 interviews we carried out with staff responsible for championing the programme in their organisation (in boroughs with established groups, piloting groups and intending to pilot) lack of funding was highlighted as *the* key impediment to running and sustaining groups long term, a reality that was also echoed in facilitator interviews. This was despite numerous interview probes to explore 'big society' strategies for running local services (e.g. localism and mutualism) (*c.f.* Watt, 2010). Coordinators and facilitators were hampered by a lack of financial resources, and the absence of a steady source of funding made it impossible to run the CGP sustainably. In those four boroughs that managed to create anything approximating a reliable service, coordinators and facilitators shared experiences of doing far more work than they were paid for, cancelling groups, begging favours, and scrounging together small pots of money to make the programme viable. Sometimes a lack of staff meant that programmes would not run, even when there was a need and a viable group. One coordinator highlighted particular problems with ensuring there were enough people to cover the running of the groups, and many coordinators felt unsupported in terms of being able to call on trained staff to assist in delivering the sessions. For many areas, a lack of sustained funding was a problem, even after an adequate number of staff had been trained. Even when money had been put into the initial stages of the programme set-up and training, if there was not a commitment to allocate ring-fenced funding for a reasonable amount of time, then the programmes often did not – could not - run.

Equally, facilitators (who should theoretically not have to deal with funding or worry about funding issues) also highlighted funding as a key priority in terms of making sure the CGP was able to run. This was in part because some coordinators were also facilitating projects as well, but also in part because the lack of funding meant that these issues impacted *everyone* who was involved in the process of delivering group projects. The loss of many public sector jobs in the UK austerity measures exacerbated this situation, leaving the pool of people qualified to deliver the CGP smaller and smaller⁹.

The problems with the funding and running of the CGP are but one example of the lack of funding made available to groups that work with women or that provide women-specific services. There are a range of women's organizations across the capital, and the wider UK, that have received independent evaluations, suggesting the services they provide meet a real need and demonstrating their value and efficacy – many of these same evaluations also provide evidence to suggest that women-only services are under particular threat from funding cuts (New Economics Foundation, 2013; Radcliffe and

⁹ Because many of the groups drew on public sector workers from across different services (e.g. social services, children's services, domestic violence refuges), the cuts meant that job cuts across different areas in local Councils often meant trained facilitators were made redundant, or forced to pick up extra work as a result of other staff redundancies, meaning they no longer had capacity to facilitate or deliver groups.

Hunter, 2013; Taylor, 2013; Hirst and Rinne, 2012; Women's Resource Centre, 2010; Government Equalities Office, 2009; Howarth, Stimpson, Barran & Robinson, 2009).

Vacchelli, Kathrecha and Gyte (2015) argue the women's sector has been hit particularly hard as a result of the shift towards commissioning and the localism agenda. Smaller and/or more specialized third sector organizations are losing out to larger, more generic groups as they compete to deliver services. This has had a negative impact on the women's sector as a whole and the authors suggest that this results in the diminishment of specialist skills (2015: 186). They note that women's refuges in particular have been hit hard by the cuts, which obviously has an impact on the well-being of the women relying on them. However, the move towards a more 'cost-effective' model seems to be the key priority of the coalition government, even if it decimates an entire sector of specialist women's services. Vacchelli, Katrecha and Gyte note:

A government contract lost by a women's organisation to an external organisation is a loss to the sector as a whole, especially as many organisations are linked together in consortia such as VAWG (Violence Against Women and Girls). The commissioning of services by 'cost' or 'value' has fuelled accusations that it is merely an ideological front for privatisation and cost-cutting (Vacchelli, Katrecha, and Gyte, 2015:186).

The CGP evaluation findings highlight that a lack of adequate funding for domestic violence services can impact not only women/mothers, but children as well. Indeed, it is this victimization that this paper wants to specifically highlight.

Situating domestic violence as structural violence

Understanding the implications of not providing key services for women/mothers, and in this case children, who have experienced domestic violence is difficult to quantify. In a paper on the difficulties of operationalizing structural violence, Galtung and Hoivik (1971) argue that while direct violence kills quickly and is more definitively measured, structural violence kills slowly and undramatically. The WHO suggest that definitive evidence on what contributes to social determinants of health include stress, early life experiences, social exclusion, unemployment, and social support (Wilkinson and Marmot, 2003). The experiences of domestic violence have a profound impact on all of these indicators, for women, mothers, and children. There is robust evidence that suggests women (including mothers) experience health problems related to the aftermath of experiencing violence and that mental health is particularly relevant (Stark and Flitcraft, 1996; Golding, 1999; Barron, 2004). It is not unreasonable to conclude that living in a violent situation would contribute to issues such as stress and social exclusion. Problematically, however, leaving a violent situation does not necessarily result in an improvement (Abrahams, 2010; Bowstead, 2015)

Hilary Abrahams argues that in order for women to fully recover from the effects of domestic violence it is necessary for them to develop a sense of mental and physical safety. This can be achieved, especially in the initial aftermath of leaving a domestically violent situation, through the development and maintenance of supportive relationships (Abrahams, 2010). The Community Group Project provides women with that initial safe and supportive contact facilitated by professionals and other women's own experiences. Over a 12 week period fosters a space in which past relationships and their impact can be explored and understood, and cognitive and emotional tools can be developed to support women take better care of themselves. Many of the women we interviewed reported feeling that the programme had given them a renewed sense of self-confidence and the opportunity to connect with other women with similar experiences (AUTHORS, 2012).

Furthermore, women who have been in a violent relationship sometimes find their ability to parent has been affected by the violence they experienced (Abrahams, 2010). The Community Group Project

provided key elements of support for mothers around parenting, had a clear impact on many women in terms of their ability to communicate with their children and to understand the emotions that their children were experiencing. When the CGP is delivered effectively it appears able to make a difference to the psychological well-being of both mothers and their children.

The Coalition government has recently invested £200 billion into the development of centres to provide an evidence-base for public service decision-making (Cabinet Office, 2013), suggesting that evidence-based policy was a clear priority for the UK government. Given the importance of supporting women (and children) who have left violent situations, and the clear success of the CGP and other similar programmes, beyond the lack of funding for the women's sector more generally, there is a crucial explanation as to why a successful programme that clearly meets the needs of both mothers and children in the aftermath of violence would struggle to sustain itself financially - one that is both gendered and classed. Programmes aimed at women who have experienced domestic violence, and the CGP in particular, are delivered largely to single mothers, a demographic that has been one of the worst affected by post-2010 benefit cuts in the UK. The Fawcett Society and Institute for Fiscal Studies (2012) estimate that single mothers lost an average of almost 5% of their annual income by 2015 as a result of changes in taxes and benefits under current government austerity measures. Relatedly, 2013 saw female unemployment rise to a 25 year high. While we do not know specifically if the women in our sample were welfare-dependent before/during/after their experiences of domestic violence, it can be difficult for women who experience domestic violence to manage their own finances, to maintain links with their families and their friends, and to sustain regular employment – all of which would suggest a breakdown in a violent relationship may leave women with few other sources for economic security and support other than the state. As such, it is not surprising that the toll of domestic violence means that most women, even women who may have been financially secure, will have no other recourse for support. The very nature of domestic violence makes it difficult for many women to be economically self-sufficient and economic reasons have long been posited as a reason why some women might choose to *stay* in a violent relationship (see Strube & Barbour, 1983). Following the aftermath of a violent relationship, women may often therefore seek support from the state. The police, social workers, IDVAs, refuge workers – all these are funded by the state, and indeed, are *absolutely necessary* if domestic violence is to be given the attention it warrants. Support beyond that is necessary for many women – for example, safe and secure housing, counselling and therapy, direct financial support from the state – and is the minimum required to ensure that women and their children are able to leave behind the effects of domestic violence. Morrow, Hankivsky and Varcoe (2004:359) note that "women who are survivors of physical and sexual violence are often dependent on state funded organizations and social welfare as they attempt to leave violent partners and re- establish their lives, making state funding crucial to their survival". It is this very act of dependence on the state that makes them specifically vulnerable to state-sanctioned violence in the wake of cuts to women's services (and public services more broadly). Women who have the least access to the forms of capital necessary to work through the aftermath of domestic violence are the ones most likely to be impacted. Their children, as dependents, will equally suffer.

This may result in unexpected and uneven outcomes for women who have left a violent relationship. Morrow, Hankivsky and Varcoe (2004: 374-375) note that "the far-reaching impact of reducing the support networks is being felt by women who are experiencing deeper poverty, less access to justice through the civil courts and who are often driven back into violent relationships for their own economic survival and that of their children". Given that it has long been recognised that perpetrators of domestic violence may attempt to sabotage their partner's attempts to become financially independent through education, training, or employment (Riger, Ahrens & Blickenstaff, 2000), and that domestic violence does not effect all women equally, with those experiencing economic hardship, welfare dependence, and homelessness being more at risk (Sokoloff & Dupont, 2005) it is crucial that the state supports women who find themselves in a violent situation. Women's increasing economic

independence has been credited as a contributing factor towards declining levels of domestic violence in western democracies (Farmer & Tiefenthaler, 2003) - this important step forward cannot be lost in the face of continuing austerity measures. Noting that, contrary to earlier studies, they had observed only a small proportion (10%) of women in their study citing economic reasons as behind their decision to return to a violent partner, Griffing *et al.* (2003:317, italics added) pointed out that "[it should be noted] participants were residents of a domestic violence shelter that offered a *comprehensive* array of services... and they may have felt that these programs could help them to establish their economic independence". It is crucial that women continue to receive this manner of support so they do not return themselves (and possibly their children) to a dangerous environment.

As such, if we think about social determinants of health, the implications of not providing services - services that clearly work - are readily apparent. There are clear costs for the women, mothers, and children who do not receive adequate support or care. Issues highlighted by the WHO - stress, negative early life experiences, social exclusion, unemployment, and social support - are clearly problematic for women leaving domestic violence. Failure to provide adequate support services leaves women - and in the case of the CGPS, mothers and children - in difficult situations that can have knock-on effects for their long term health and well-being. A failure to fund programmes that have a proven track record of meeting these needs will impact mothers and children - and as Galtung and Hoivik (1971) suggest, may kill them slowly, and indirectly.

Conclusions

These points around structural violence are particularly pertinent in the light of the UK Coalition government's 'Big Society' agenda¹⁰, which was at a crescendo at the point when the research was being carried out in 2009-2010. Three of the five main areas of action around the 'Big Society' agenda include: 1) Giving communities more powers, 2) Encouraging people to take an active role in their communities, and 3) Supporting co-ops, mutual, charities, and social enterprises. Responses to the agenda have been mixed (c.f. Watt, 2010). Some have questioned the impact of the scheme on social welfare (Corbett & Walker, 2013; Rodger, 2012), and more recently the government seems to have quietly abandoned the agenda altogether (Helm, 2014; Civil Society, 2015).

However, the effects of 'Big Society' are still very much real, particularly with a focus on commissioning and localism. The UK government was quick to acknowledge the role of domestic violence organisations in the 'Big Society': in a speech delivered at the 2010 Women's Aid Conference, Home Secretary Theresa May described the women's sector as "a model of the Big Society we wish to build" (Women's Aid, 2010). May argued that such a society was one where "we all work together to address problems, conscious that the government has a role to play but that it does not have all the answers, and [recognising] the role played by charities [and] voluntary groups" (Women's Aid, 2010). However, speaking about cuts to the women's sector, Denise Marshall (cited in Gentleman, 2011), the current Chief Executive at Eaves, pointed out "to be told that we are all in this together and must make cuts like everyone else isn't right, because we didn't have enough money to begin with... Domestic violence victims don't go and storm the local town hall to demand more help.... They are invisible."

Ishkanian (2014:335) therefore argues that the Big Society agenda and its aftermath, alongside public spending cuts, is not only damaging frontline services, but is also "affecting the independence and ability of women's organisations to engage in progressive policy shaping", observing that "ever

¹⁰ The Big Society Agenda was introduced by the Prime Minister during the Coalition Government in an effort to increase civil society participation. See recent research from the Civil Exchange for more on this defunct agenda, and for a more comprehensive overview of the aims and objectives put forward by David Cameron (Civil Exchange, 2015)

shrinking pots of money and growing competition over resources within the sector have led to caution and in some instances, self-censorship, as organisations fear that vocal criticism of government policies may lead to a loss of statutory funding” (pp.341-342). She goes on to point out the dangers of the Big Society’s focus on local communities, and highlights the questions this raises as to whether national commitments to fighting domestic violence are effectively being transmitted to and addressed at the local level, stating that “minority rights, including women’s rights, may be overlooked in populist decision making at the community level” (p.340).

The austerity measures have meant that third sector and public sector services that cater for women and families who experience domestic violence have been hard hit in a variety of different ways. From a lack of start-up funding for projects, a lack of sustained funding to keep projects going, a loss of institutional knowledge, and an increased pressure on time as staff are expected to do more and more in their existing job roles to make up for redundancies, all services and organizations that worked to deliver the CGP in our study had been adversely impacted.

Domestic violence was highlighted by the Coalition government as a key issue that they plan to tackle (Home Office, 2014a, 2014b, Women’s Aid 2010), and highlighted the social and economic costs of domestic violence – so why is it that funding for services and programmes that are needed, and that clearly work, has been consistently cut? The fact that the government claims so clearly to want to engage with key issues around domestic violence and makes public declarations to this effect, would suggest that looking at evidence and research around what works best might make sense in terms of thinking strategically about how to allocate resources. And indeed, it might make sense to listen to third sector specialists who have decades of training around these issues. Groups that work with women from within the third sector have historically played a key role in putting domestic violence on the UK policy agenda (Dobash & Dobash, 1992; Lovenduski & Randall, 1993), but they continue to rely heavily on statutory funding and often lack a diverse income base (Jarvinen *et al.*, 2008; Kail, 2011; Ishkanian, 2014). The government therefore plays a key role in providing the fiscal and structural support that such organisations need if they are to continue to work with this vulnerable population, creating what Haaken (2010) has described as the ambivalent relationship between the ‘battered women’s movement’ (sic) and the state. In the UK, while the government had put domestic violence high on their agenda (Home Office 2014a, 2014b) , there has been little in terms of real attention and money given to deal with the aftermath of domestic violence, and the cuts combined with the localism agenda driven by the ‘Big society’ mantra have meant that the domestic violence services have been hard hit (Ishkanian, 2014). . There is also a clear unwillingness on the part of the government to look at what works, ignoring evidence that provides a clear picture of *how* women and children who experience domestic violence may best be supported.

We argue that failing to provide key services to women who are mothers and children/young people who need help means that they are victims of two different types of violence – not only have they suffered or witnessed domestic violence in the home, but they face structural violence from the state through the government's failure to provide sufficient support services. Further, we ask that the UK government find real ways of sustainably funding domestic violence services, look more closely at the processes that might impede both the public and third sector from successfully supporting women who have experienced violence, and look at the specific ways in which mothers and children may need additional support to reclaim their lives.

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