

DIGNITY

Dignity: A Journal on Sexual Exploitation and Violence

Volume 5 | Issue 3

Article 3

12-2020

"My Head Was Like a Washing Machine on Spin": (Improving) Women's Experiences of Accessing Support


Jo Neale

University of Bedfordshire, UK, jo.neale@beds.ac.uk

Kathryn Hodges

St Mary's University, UK, kathrynesmehodges@gmail.com

Follow this and additional works at: <https://digitalcommons.uri.edu/dignity>

 Part of the [Community Psychology Commons](#), [Counseling Commons](#), [Counseling Psychology Commons](#), [Domestic and Intimate Partner Violence Commons](#), [Gender and Sexuality Commons](#), [Other Public Affairs, Public Policy and Public Administration Commons](#), [School Psychology Commons](#), [Social Justice Commons](#), [Social Welfare Commons](#), and the [Social Work Commons](#)

Recommended Citation

Neale, Jo and Hodges, Kathryn (2020) ""My Head Was Like a Washing Machine on Spin": (Improving) Women's Experiences of Accessing Support," *Dignity: A Journal on Sexual Exploitation and Violence*: Vol. 5: Iss. 3, Article 3.

DOI: [10.23860/dignity.2020.05.03.03](https://doi.org/10.23860/dignity.2020.05.03.03)

Available at: <https://digitalcommons.uri.edu/dignity/vol5/iss3/3><https://digitalcommons.uri.edu/dignity/vol5/iss3/3>

This Research and Scholarly Article is brought to you for free and open access by DigitalCommons@URI. It has been accepted for inclusion in Dignity: A Journal on Sexual Exploitation and Violence by an authorized editor of DigitalCommons@URI. For more information, please contact digitalcommons@etal.uri.edu.

"My Head Was Like a Washing Machine on Spin": (Improving) Women's Experiences of Accessing Support

Abstract

This paper draws on data collected as part of two larger studies to set out the differences, according to women seeking support, between the feminist responses of the specialist women's sector and the issues-led responses of other agencies. The first study examined the processes by which women enter, endure, and exit relationships with abusive men. The second study explored the barriers to help-seeking for those accessing a service for women involved in prostitution. Taking a feminist poststructuralist approach, the authors point to the gendered nature, both of the experiences that propel women toward help-seeking and of the responses they receive from agencies. They note the current socio-economic context within which those experiences and responses are set and the importance, for women, of the specialist women's sector. Data were collected via narrative-style interviews with twenty-five women with lived experience of the issues being explored.

Many women noted that, when initially seeking support from agencies, they had either been offered no service or inappropriate services. They spoke of being required to engage with multiple services, constantly retelling their stories, and the competing and conflicting demands made of them by professionals. These accounts were contrasted with the service they received from the specialist women's sector.

The findings are presented in terms of their meaning for and impact upon women accessing professional support. The implications for practice are discussed: the case for professionals' proactive sourcing/using information about women's services operating in their locality; the importance of effective communication, both within and between agencies; and the shared benefits of working alongside the specialist women's sector.

Keywords

UK, domestic abuse, homelessness, narrative approaches, substance abuse, prostitution, support agencies, women's experiences of agencies, gender and social support

Creative Commons License



This work is licensed under a [Creative Commons Attribution-Noncommercial-No Derivative Works 4.0 License](https://creativecommons.org/licenses/by-nc-nd/4.0/).

Acknowledgements

The authors express our deep gratitude to the women who participated in the two studies. We recognize the significance of what we were asking them to do and the emotional costs of revisiting their experiences. We appreciate the time and energy that they so generously gave. Without their contribution, the studies would not have been possible. We would also like to thank colleagues in the agencies within which we worked for supporting our studies by putting us in contact with participants. Dignity thanks the following people for their time and expertise to review this article: Jenny Westerstrand, director of Roks, the National Organization for Women's Shelters and Young Women's Shelters, Sweden; and Inge Kleine, professor and activist, Germany.

"MY HEAD WAS LIKE A WASHING MACHINE ON SPIN": (IMPROVING) WOMEN'S EXPERIENCES OF ACCESSING SUPPORT

Jo Neale

University of Bedfordshire, UK

Kathryn Hodges

St. Mary's University, UK

ABSTRACT

This paper draws on data collected as part of two larger studies to set out the differences, according to women seeking support, between the feminist responses of the specialist women's sector and the issues-led responses of other agencies. The first study examined the processes by which women enter, endure, and exit relationships with abusive men. The second study explored the barriers to help-seeking for those accessing a service for women involved in prostitution. Taking a feminist poststructuralist approach, the authors point to the gendered nature, both of the experiences that propel women toward help-seeking and of the responses they receive from agencies. They note the current socio-economic context within which those experiences and responses are set and the importance, for women, of the specialist women's sector. Data were collected via narrative-style interviews with twenty-five women with lived experience of the issues being explored.

Many women noted that, when initially seeking support from agencies, they had either been offered no service or inappropriate services. They spoke of being required to engage with multiple services, constantly retelling their stories, and the competing and conflicting demands made of them by professionals. These accounts were contrasted with the service they received from the specialist women's sector.

The findings are presented in terms of their meaning for and impact upon women accessing professional support. The implications for practice are discussed: the case for professionals' proactive sourcing/using information about women's services operating in their locality; the importance of effective communication, both within and between agencies; and the shared benefits of working alongside the specialist women's sector.

KEYWORDS

domestic violence, homelessness, narrative approaches, substance abuse, prostitution, support agencies, women's experiences of agencies, gender, and social support

THIS PAPER DRAWS ON DATA COLLECTED as part of two larger studies to set out some of the issues women face when seeking support from agencies. The first study, conducted by the first author, Jo Neale, examined the processes by which women enter, endure, and exit relationships with abusive men. The second study, conducted by the second author, Kathryn Hodges, explored the intersecting experiences of women accessing a service for women involved in prostitution. The paper aims to provide an intersectional analysis of the differences, according to women seeking support, between the feminist responses of the specialist women's sector and the issues-led responses of other agencies. The authors begin by pointing to the gendered nature of

the experiences that propel women toward help-seeking and the responses they receive from agencies. They note the current socio-economic context within which those experiences and responses are set and the importance, for women, of the specialist women's sector. They then describe their theoretical approach, the populations sampled, and their data collection methods and analysis. Drawing on the subsets of data relating to women's help-seeking, they set out their findings. These findings are then discussed in terms of their meaning for women accessing professional support and the implications for practice.

The crossovers in the two study samples provide the rationale for writing this paper. Being forced to have sex with other men, both in the context of prostitution and outside it, can be a part of abusive relationships (Matolcsi, 2020) and women's routes into prostitution are commonly preceded and shaped by abusive heterosexual relationships (AVA and Agenda, 2019; Roe-Sepowitz et al., 2012). The accounts of the participants are in line with these findings. A participant in Study 1 talked about having been forced by her husband, as part of the abuse, to have sex with other men, and most women in Study 2 noted that domestic violence and abuse (DVA) had shaped their routes into selling sex. Beyond this, the two samples share that they are all women in the UK, exploited and abused by men, seeking support to escape that oppression.

Although there are subtle differences between the two projects regarding the authors' research questions and the populations of women sampled, their theoretical and methodological similarities allow the two datasets to be blended for this paper. Each author's perspective is that gendered power relations within a patriarchal socio-political system restrict *all* women's choices and access to support/justice. Through this lens, DVA is understood to be a process by which freedom is taken away from women within the context of an intimate relationship. Prostitution is seen as incongruent with a gender-equal society and as a form of systemic and systematic violence against women that requires, in addition to valid exit support, a systematic and trauma-informed response. Both studies are feminist, qualitative, in-depth explorations of women subjected to male abuse. A strength of this paper is that it evidences the universality of women's experiences of gendered oppression.

The Context for the Studies

While anyone can experience exploitation and abuse, women make up by far the largest proportion of victims in the UK (DoH, 2017; Hester, 2013; Myhill, 2015; Smith et al., 2010). Furthermore, how they experience abuse is gendered (Sillito, 2012; Stark, 2009; Westmarland & Hester, 2007). Compared to male victims of DVA, women are more likely to be injured, more likely to be frightened, more likely to be repeatedly abused, and more likely to be murdered (Corradi & Stöckl, 2014; Smith et al., 2012). Male perpetrators are far more likely than female abusers to abuse post-separation (Hester et al., 2007); indeed, this is the most common high-risk situation for female DVA victims (Campbell et al., 2007, Humphreys & Thiara, 2002; Lees, 2000). Women exploited and abused via the selling of sex are most likely to have been coerced into prostitution by men. The majority of commercial sexual exchanges involve men buying women's services (Coy, 2016b), who experience disproportionate levels of violence and abuse, preceding their entry into prostitution and within it (Coy, 2016a). Both DVA (Study 1) and prostitution (Study 2) have distinct gender asymmetry in terms of perpetrators (men) and the abused/victimized (women). Therefore, specialist services that recognize and respond appropriately to the needs of abused and exploited women are vital. As the Women's Resource Centre (2013) notes:

Though often seen as "niche" by service providers, they provide cost effective, often life-saving support on a shoe string. They deliver a range of social and economic benefits over the short and long term for vulnerable and marginalised women and girls (WRC, 2013).

All agencies with which women come into contact are obliged to provide a person-centered, integrated service [The National Institute for Health and Care Excellence (NICE, 2016) Domestic Violence and Abuse Quality Standard; and the Home Office's (2016) Violence Against Women and Girls Statement of Expectations]. However, because of the current strain on public services and the fact that there is no effective monitoring of agencies' adherence to these guidelines (Jacob, 2017), women do not always receive the level or quality of service to which they have a right.

In terms of DVA alone (the only sector for which there is recent and robust data), a conservative estimate of the UK's economic cost is £66bn/year (Oliver et al., 2019). Despite the high costs, and despite reliable research evidence showing the effectiveness of specialist services (Scott & Frost, 2019) and that independent advocacy is what women want (Bates et al., 2018), over the last two decades, there has been a noticeable shift in the specialist women's sector in the UK. What was once a significant source of support for individual women experiencing abuse (and a political movement for social change) has been reduced to, apart from a few notable exceptions, the provision of depoliticized and clinicalized specialist women's services (Lehrner and Allen, 2009, McDonald, 2005).

In the more recent climate of swinging budget cuts (Grierson, 2018) and the move toward competitive funding for women's centers, refuges, and other women's services, the basic feminist principles that, from the 1970s, underpinned the UK women's sector have largely been eroded. These changes in the commissioning environment have forced some women's organizations to merge and others to close altogether (Coy et al., 2009; Heady et al., 2011). The demands of local authority funders for more heavily regulated voluntary sector services and high "outputs" (measured in terms of the numbers of women *receiving* a service, rather than its quality) have compromised those services' ability to respond appropriately to the range and complexity of needs with which women present (Warrington, 2003). This has led to a greater reliance on statutory services.¹ However, after nearly a decade of substantial reductions in central government funding and the resulting rise in demand for key services, those agencies are struggling to provide anything beyond their statutory responsibilities (HCPAC, 2018; Kentish, 2017). These cuts and changes have, in turn, increased the demand on the specialist women's sector (APPGSV, 2018; Reis, 2018). In the vicious circle created by these changes, women are paying the price.

The operating conditions of the various services provide the context within which the two studies were conducted. In this paper, the authors pull out one of the themes common to both datasets—that of the differences, according to women seeking support, between the feminist responses of the specialist women's sector and the issues-led responses of other agencies. The next section sets out the theoretical approach(es) and method(s) of data collection and analysis.

¹ Services that are paid for and provided by the government (for example, social services and the National Health Service).

METHODS

Two significant aims for feminist researchers are: to challenge the dominant representations of violence against women and girls that reproduce systemic gender inequality; and privilege the voices of those previously silenced. Both authors resist and argue for an alternative to the traditional view in which the “problem” is located within individuals (i.e., certain people perpetrate, invite another to perpetrate, or do not do enough to prevent/resist abuse of women). They suggest this leads to: the pathologization of both the perpetrators and their victims; and a stunting simplification of the problem(s) and the solution(s); and narrows the range of understanding. Instead, they argue that traditional approaches block the view of the structural inequalities that restrict women’s “space for action” (Kelly, 2005), thus limiting their choices. Therefore, the authors take a comprehensive, less individualized, and more systemic approach to evaluating the various services.

While the foci of the two studies and the populations sampled were slightly different, the theoretical lenses, ethical stance, and data collection methods were broadly similar. Both authors had adopted a feminist poststructuralist approach, which challenges the notion of universal categories such as “woman” and emphasizes the contingent nature of identity. It draws on the concept of intersectionality (Crenshaw, 2012) to explain people’s experiences and, particularly, women’s experiences; that is how identities such as, for example, gender, ethnicity, nationality, race, age, sexuality and physicality, and the relative power that women possess within those identities, intersect to shape their experiences. From this perspective, each woman will experience abuse uniquely due to her specific characteristics and context. However, most feminist poststructuralists argue that women’s lives are shaped by power relations that are embedded within a social construction of gender (Foucault, 1998, Shields, 2016); thus, gender is centrally implicated in the patterns of disadvantage that extend across different social groups (Wendt and Zannettino, 2015).

Study 1:

Aim: To explore the processes by which women enter, endure, and exit relationships with abusive men.

Participants: Fourteen women, with a wide range of characteristics in terms of age, ethnicity, physicality, socio-economic status, and the length of time elapsed since their experiences of abuse, recruited via specialist women’s sector agencies in England, snowballing, and via the author’s professional networks.

Study 2:

Aim: To understand, from women experiencing multiple oppressions and support needs, the choices and decisions they make when engaging with helping services.

Participants: Eleven women who accessed a center (situated in a large English city) supporting women involved in prostitution. Over half had been born outside the UK, and one had no recourse to public funds.

Fieldwork for the studies was carried out in 2011- 2012 (Study 1) and 2015 (Study 2), so within the current period of “austerity” measures following the 2008 financial crisis. Pseudonyms for participants are used throughout. (Ethical approval for these projects was given by the Research Ethics Committees of (Study 1) the University of Bedfordshire and (Study 2) Anglia Ruskin University.)

In each study, participants provided informed, written consent. The data were collected via one-to-one, face to face, narrative style interviews with women with lived experience of the explored issues. In this method, and in line with a feminist approach, the interviewee is positioned as a "storyteller" and is responsible for clarifying the meaning of what is being said (Greenspan, 1998). The story is seen as a co-construction between the interviewee and the interviewer but, when presenting findings, participants' voices in the form of quotations are foregrounded (Oakley, 1981). This approach, rather than one that imposes an a priori researcher-led focus on the interview, allows participants to disclose the aspects of their experiences that are most meaningful *for them*. Both sets of interviews were transcribed, coded, and analyzed using Braun and Clarke's (2006, 2013) thematic analysis method (TA). Each author chose this method with the same intent: to provide a voice for women and to challenge the dominant individualizing and pathologizing discourses of (in Study 1) DVA and (in Study 2) prostitution.

One of the more significant themes to have emerged from each of the two datasets is how services can hinder or facilitate women's attempts to improve their circumstances. There are many accounts in participants' stories of beneficial interventions by the agencies with which they came into contact. However, the impact of these is easily undermined by other, less considered, responses. In the next section, we explore the responses from agencies that served to frustrate or facilitate women's attempts to regain control of their lives and move toward safety.

FINDINGS

Here we set out women's accounts of responses from the agencies with which they came into contact. When they began seeking help, participants in both studies were dealing with a range of complex issues. In Study 1, women struggled with escaping the abuse, keeping their children safe from the perpetrator, financial worries, housing concerns, and psychological trauma resulting from the abuse. In Study 2, women were trying to manage their childcare responsibilities, financial difficulties, accessing safe and secure accommodation, problematic substance use, immigration concerns, and emotional problems stemming from experiences of rape and physical violence, childhood abuse, and neglect. All the women were experiencing high levels of loss and grief.

Through an intersectional lens, each individual's experiences can be viewed as unique. What they share, however, is their perceptions of the responses they received from professionals. Participants' perceptions are addressed in terms of: inadequacies in the services offered to women; managing multiple encounters with professionals; juggling competing demands; trustworthiness; the impact on their emotional state and sense of self; and what women appreciated from services.

Findings for each of these aspects of women's experiences are presented with quotes from the interviews as illustrations of the points made. The narrow focus/limit of most individual agencies led to some women being turned away with no help offered, others being offered a service that did not meet their immediate needs, and all struggling to meet the demands made of them by services. We discuss what this meant for women in terms of its impact on their ability to move forward and compare it with the feminist, more holistic approach adopted by agencies within the specialist women's sector.

Inadequacies in the Services Offered to Women

Many of the women we spoke to had, when initially seeking support, either been offered no service or inappropriate services. Leonie is an example of the former, who had managed to leave her violent ex-husband. Children's social services, having received a referral from the police, telephoned her to check on her child's welfare. Even though she was continuing to receive abusive messages from him, including several threats to kill, the social worker assessed her child as no longer at risk and closed her case. Ruth had asked her GP for help concerning her violent and abusive husband. She recalled, with disappointment, his response:

...the GP sort of listened and sympathised, but more or less said, what can I do kind of thing (Ruth, Study 1).

Anne, who had mental health problems and a history of problematic substance use (PSU), had received a similar response from a women-only homeless day center manager. She was attempting to leave her very violent partner and had approached the manager for help:

...she didn't want to know... She was saying to me that she's there to support people that come in for showers and mostly drug addiction, and she doesn't really deal with domestic violence (Anne, Study 2).

Marcia and Freya, who had also approached their GPs for help to escape DVA, were referred for counseling. Marcia expressed her frustration at this response. What she needed, and had asked for, was practical advice and support to enable her to exit the relationship. Of the counseling service, she said:

...they don't give advice but, actually, what the hell are you going there for?
...no, actually, I don't want to just sit here and have a moan; I want to know what to do. (Marcia, Study 1).

Freya was similarly unimpressed by the counseling that she was offered. It consisted of six, one-hour sessions in which the counselor simply "asked probing questions." Given the extent of the practical and emotional issues with which she was struggling at the time, she stated that this was nowhere near long enough—and risked making her feel even worse:

just skimming the surface, opening up, and then nowhere to put it (Freya, Study 1).

She continued:

I didn't think it was helping me very much, you know? Talking with staff at Women's Aid helped me more ((laughs)) (Freya, Study 1).

Managing Multiple Encounters with Professionals

Participants spoke of their frustration and, often, desperation at being required to engage with a number of different services. Constantly having to retell their stories to professionals featured in most of the narratives.

Sandy had experienced childhood neglect and, at the time of her interview, was unemployed and homeless. Her account of repeatedly having to speak about traumatizing experiences was echoed by participants in both studies. Here, she explains that she had already met with one social worker, as part of an Initial Assessment of her children's needs and was then required to attend a follow up meeting with another social worker from the same department. She said:

I had a meeting with this girl and she was asking me questions that I've already answered in my assessment which should have, if she'd have read my assessment she'd have known that, and repeating herself, and not listening to what I am saying (Sandy, Study 2).

Despite having lived and worked in the UK legally for almost 20 years, more recent changes to Government immigration policy had meant that Storm was no longer able to work, unentitled to state benefits, and faced deportation to a country that had not been her home since she was a child. Without an income, she had been unable to support herself, and had become homeless. Like Sandy, Storm was frustrated and upset by professionals' repeated requests for the same information. She, however, suggested a solution:

I'm tired of talking about it...I need one of these (pointing to voice recorder) so I can record. Next time someone asks me, what we'll do is, I'll talk about it all, I'll leave the pauses here and there so I can add bits if I need to, and when they say, "Why are you homeless?" "There you go, let's go and have a cigarette, back in a minute," you know what I mean (Storm, Study 2).

Low Levels of Support with Women's Concurrent Needs, and Conflicting Demands of Agencies

Participants spoke of badly orchestrated and/or lack of support regarding their concurrent needs, and conflicting demands made, by statutory agencies. These issues made it harder, rather than easier, to meet the requirements made of them by those agencies.

Angela was grieving the recent death of one of her children, and Jane had experienced DVA from two previous partners. Both had received convictions for minor offences related to their problematic substance use and were being monitored by Community Rehabilitation Companies (CRCs).² Each noted the lack of support from statutory services. For example, Angela talked about her contact with her probation officer thus:

Sometimes I used to turn up there and it was like, "Hi how are you and how you feeling, here's your next appointment" and that was it...although I was homeless my probation officer didn't do nothing, all she kept saying was

² CRCs are private-sector suppliers of Probation and Prison-based rehabilitative services for offenders in England and Wales.

probation hasn't got the resources to provide you with housing, ... there's nothing I can do, but make sure you turn up for your next appointment or I'll breach you (Angela, Study 2).

Several women spoke about the competing demands made of them by some support agencies. Storm, for example, was put in contact with a service providing accommodation to women with no recourse to public funds. The only way to access the service, situated a considerable distance from the city center, was to arrive on its doorstep at 4pm. With no money for fares, that meant a considerable walk. If, on her arrival, the hostel was full, she would be turned away without food or a bed for that night. The time taken to walk back again meant that she would be too late to get a meal from the city center services for people who are street homeless. Exasperated, she said:

You've got no food. You've got no recourse, you've got no penny to your name... how does that make sense? (Storm, Study 2).

Both Sandy and Storm had been offered hostel accommodation in places that they felt would have made their lives more, rather than less, difficult. Sandy mentioned that, before she had become unemployed and homeless, she had been forced by a service provider to move from a centrally located hostel, to another more than 15 miles away from her place of employment:

...how they expected me to get from (the hostel) to my job every day of the week I do not know and they forced me and they pushed me and I said I can't do this, this is too much for me (Sandy, Study 2).

This, together with other difficulties she was experiencing, eventually led to her losing her job and becoming homeless. For Storm, the implications of refusing 'help' were similarly serious:

I chose to be on the streets, rather than be sent to Glasgow, I don't know anyone there (Storm, Study 2).

Trustworthiness

The issue of professionals' reliability featured in most women's narratives, and many recounted occasions on which they had felt let down by them. They spoke of being threatened with sanctions if they failed to meet the demands of agencies, whilst the professionals' lapses in integrity and reliability went unchallenged—often with serious consequences for the women.

Jasmine, for example, had experienced difficulties with her mental health, and was living in temporary accommodation. She had talked to a hostel support worker about her aspirations of returning to education, and recalled:

I said I want to go back to college, ...and she was like, oh would you like me to meet you there and that, so I thought all right then, so I goes ok, we'll arrange a date to meet her, she didn't turn up (Jasmine, Study 2).

For Storm, the implications of being let down were potentially more serious. Referring to her application for asylum, she commented:

I had my hearing on a Monday the judge kindly told me he was going on vacation so that's going to delay my case. Where am I now? On the street. I have to wait another month or two for a decision. ...I know in my mind, I'm thinking if I get kicked and die out there so I'm saying... you're just left to fend for yourself (Storm, Study 2).

Leonie and Kirsten, like most of the women in study 1, were experiencing post-separation abuse from their violent husbands. Leonie had tried to enlist the help of children's services social workers. Apart from making an initial telephone call, prompted by a referral from the police, they had not contacted her. She said:

...they promised to come and visit me, but they never came. ...I tried to get in touch, but they keep telling me that the person with the case went on a vacation, and would be back, ...so since then I haven't spoken to any social worker (Leonie, Study 1).

Kirsten had had rather more contact with her children's social worker and was critical of what she considered to be her lack of professionalism. She explained:

I've seen my social worker blatantly lie, I've seen the judge, in you know in cross examination they've stopped the person cross examining her and say hang on a minute you've just contradicted yourself, and has caught her out lying (Kirsten, Study 1).

She went on to note the importance of good professional practice:

You're talking about someone's family, this isn't just numbers and quotas you've got to fill, this is someone's family (Kirsten, Study 1).

Impact on Women's Emotional State and Sense of Self

Women spoke about the impact of the above responses on their already compromised emotional state. Colette, for example, noted how hard it had been for her to manage anything more than the basic routines of her life. She said:

Over the past few years, I've been of the state of mind of where, you know what, if I get my knickers on the right way round, and I get my kids to school, fantastic (Colette, Study 1).

The demands made of women by agencies were often perceived by them to be overwhelming. They became physically and emotionally exhausted in trying to meet them and felt that this had contributed to their feelings of failure in moving on with their lives. Jane, for example, spoke about her struggle to participate in a drug rehabilitation program:

They are very good, but I lasted about 10 days, I couldn't do it any more...because they give you so much to do that you couldn't, can't even breathe... it's like three appointments a day...I was like on the bus here there here there, every day, ...I was just a mess, my head was like a washing machine on spin (Jane, Study 2).

Ruth was attempting to escape her husband's abuse while, at the same time, trying to hold down a job and care for her baby. She spoke of her exhaustion and lack of

progress, and the extent to which the agencies working on her case had contributed to this. She had been frustrated with their seeming inability to work together, and said:

...and all the different agencies seem to sort of um work in a slightly different way and, you know, you'd ring up three weeks later and say, "I haven't heard", and they'd say, "Oh dear, well Mrs. so and so has been on leave and she didn't speak to so and so", and "Somebody else didn't pass the message on", and "Oh well I'm afraid you know they've given you the wrong information here, you're not entitled to that at all", and um "Have you spoken to so and so?" and yet more forms to fill in (Ruth, Study 1).

In addition to their feelings of being overwhelmed by the demands made of them, most participants talked about being judged negatively by many of the professionals with whom they came into contact. For some, this was perceived from professionals' communication style and body language:

The way like they used to speak to you like it's just, like the vibe I used to get off her, do know, and when she would speak to me she'd never look me in the eye or just wee things like that (Anne, Study 2).

For others, it was demonstrated by a lack of empathy:

...people just don't get it they really, especially if you've got an intelligent woman they're you know, (my solicitor) just really didn't get, I'm sure she must have thought you have to be a complete moron to live that life (Colette, Study 1).

Women felt that, inevitably, this affected the standard of service with which they were provided and, thus, their sense of self-worth. Angela expressed her frustration about the way women were blamed by professionals for their circumstances. She said:

...why don't you stop and think about what that person has been through to make them like, it could be domestic abuse, could be sexual abuse, ...they weren't born like that, and they didn't say when they was at school that when I grow up I want to be a drug addict or homeless. Don't be so quick to judge and tarnish people (Angela, Study 2).

What Women Appreciated from Specialist Women's Services and What They Missed in Others

Most participants noted that, outside the specialist women's sector, women were not a priority for agencies. They felt that homeless hostels, and drug and alcohol services tended to be dominated by the demands of male clients:

I mean come on.... we're definitely not priority and everyone knows that (Sandy, Study 2).

and Judy suggested that women tend to be ignored because:

...women don't kick off as much, or scream so much (Judy, Study 2).

For women with children, the focus for professionals' intervention was felt to be their children rather than themselves. As mentioned earlier, Leonie had managed to leave her violent ex-husband, though she had continued to receive abusive messages from him, including several threats to kill. She spoke of her inability to get the police to protect her:

...because they said it wasn't physical, ...and they told me to change my email, and change my phone (Leonie, Study 1).

As noted earlier, Freya stated that she had derived far more benefit from her conversations with staff at Women's Aid than from those with the NHS counsellor. She described her contact with the refuge service as: "brilliant experience right from the off." When asked what the former had been able to provide over and above that offered by the latter, she responded:

Compassion? Humanity? ...I mean when you're working in a profession like that I understand you have to protect yourself, you have to have certain barriers in place to not let it get to you, but with her I really felt like she was very detached, and Women's Aid, you feel like people feel outrage on your behalf, and they bring that across, and I got more back from them as well, ...practical support, and emotional support, yeah, and I didn't get that at all from the (counsellor) (Freya, Study 1).

Reflecting on their experiences of contact with specialist women's agencies, participants noted feeling listened to, respected and supported – in both practical and emotional terms:

I can unload and tell them how I really feel about what's going on in my life, and in confidence, and know that it wouldn't be gossiped about (Angela, Study 2).

...you see something happening, like you get housed or there is somebody there for you, or you get the clothes you need. ... I'm not saying you don't have to do no work for it, but you get what you need (Judy, Study 2).

Megan came with me to my court case, on Monday... She volunteered, you know she said to me can I send a statement, a witness statement about you? And I said are you sure? No, no, I want to, so she did. Then she asked to come.... I said you don't have to and she said, then she offered to pay... so, that's someone who cares; she didn't have to do all of that (Storm, Study 2).

One woman, in reflecting on her journey from abuse to safety, summed up the views of most participants. Simone had grown up on a large social housing estate in an area with high levels of violent crime and deprivation. She was close to her family, and derived significant support from her relationship with them, but had moved a considerable distance to escape her violent and abusive, drug-addicted partner. She described going into a refuge, in an unfamiliar town, as 'really scary' because:

... it's almost like going into the unknown, 'cos I'm not taking my family, like my sisters, my you know my stability is not coming with me (Simone, Study 1).

Once she had settled, however, she quickly came to appreciate the benefits provided by the specialist women's service:

I didn't have that paranoia first of all, was all gone, the rushing around from place to place, ...that I could just stop, refuge just allowed me to just stop, and I really needed that, stop and think, collect yourself, spend time with the children, talk to the children, do you know what I mean? (Simone, Study 1).

Later, and with the support of the staff, Simone and her children were rehoused, and she explored opportunities to return to studying:

It allowed me to start to do things like that that I don't know if I would have done if I'd stayed in (city) (Simone, Study 1).

Reflecting on the difference between her previous existence, the life she had built since leaving it behind, and the refuge staff's part in that, she commented:

... it's almost like there was a big mess, back there, and you know as a result of the refuge, it's almost like that's the bridge to getting away from that mess and coming in to this new, wonderful place ((both laughing)), ...I have more power, more control, more say than I had before, I'm not just existing and being shunted around, ...without the refuge, I don't know where I'd be to be quite honest, I don't know what would have happened, because I wouldn't have been able to get away (Simone, Study 1).

DISCUSSION OF FINDINGS IN THE CONTEXT OF EXISTING STUDIES

The current demand for, and reduced budgets of, services has increased the pressure on health and social care agencies to "do more with less." This pressure has led to an emphasis, particularly in the statutory sector, on specific needs and short-term goals (HCPAC, 2018, Kentish, 2017) rather than holistic approaches to long term recovery. The feminist poststructuralist approach of the studies allows for an intersectional analysis of participants' experiences of help-seeking. It acknowledges women's unique experiences whilst, at the same time, enabling an examination of the shared aspects of those experiences. The findings presented in this paper are in line with existing research on women's help-seeking.

None of the women whose voices are heard in this paper had unrealistic expectations of the professionals with whom they came in to contact. What they sought, and had a right to expect (Home Office, 2016, NICE, 2016), was support to regain control of their lives. Some professionals had either failed to offer any form of help or had limited women's options only to those provided by their own agency (regardless of whether or not, in the circumstances, that option was appropriate). These responses are, at the very least, unhelpful; at worst, they are dangerous. Women will have experienced many incidents of abuse before asking for help (WAFE, 2014), and many are repeatedly failed by agencies when they seek support (AVA and Agenda, 2019). When agencies miss an opportunity to intervene effectively, women are at risk of returning to the exploitation and abuse from which they are attempting to escape (Hodges and Burch, 2019; Matthews et al., 2014; WAFE, 2017). Women seeking support to escape

abuse do not typically approach specialist services directly (AVA & Agenda, 2019; Lewis et al., 2018). It is therefore crucial that everyone with whom they come into contact, including non-specialist staff in general practice surgeries and other agencies, know how to respond appropriately, which agencies in their locality (women's centers, hostels, refuges, etc.) can provide specialist support, and that there is reliable and effective cooperation between agencies.

Much has been written about the ways in which women are "revictimized" by the agencies from which they are seeking help, and the negative impact this has on women's willingness to engage with them (Abrahams, 2007; Rodriguez, 2016). Participants from both studies talked about the challenge of managing the demands of the different services. They expressed frustration at constantly having to retell their stories to professionals who had not appraised themselves of the information that women had already provided, and exasperation at being caught between the conflicting policies and practices of the agencies. For women who were already fragile, due to the experiences that had brought them into contact with services, they felt monitored rather than supported. The messages they took from these encounters was that they were not a priority for services. The effect of these policies and practices was to overload them with (often, mutually incompatible) tasks and increase their perceived risk of returning to their previous lives.

In addition to the punishing demands made of women, standards of trustworthiness seemed to operate differently, depending on whether it was that of the women or the professionals with whom they were in contact. Participants spoke of being threatened with sanctions if they failed to adhere to the demands of agencies, whilst the professionals' lapses in integrity and reliability went unchallenged – often with serious consequences for the women.

The pressure on the public sector to focus on specific needs and short-term goals has resulted in a shift toward agencies being "complacently professionalized" (Hester, 2015). Management's increasing focus on closing cases quickly, or what Neate (2017) refers to as "job done delusion," has come at the expense of women's recovery. Neale (2018) suggests that frontline workers in public sector agencies use "cognitive masks" (Ash, 2011) as a way of rationing scarce services. Shutting out the broader facets of the cases with which they are dealing, and focusing on specific needs and short-term goals, allows professionals to manage the practical and emotional pressures of doing this work. For women, however, this can frustrate their attempts to escape abuse and regain control of their lives. She notes the tension between working in 'silos' (health, housing, social work, criminal justice, etc.) and the need to recognize that women are in contact with a wide range of agencies. She suggests that:

...a chain is only as strong as its weakest link. When contemplating their chances of escaping the abuse, (women) do not evaluate one service in isolation; they' stress test' the entire chain and, if it fails, care little about where exactly it does so (Neale, 2018, p. 421).

Participants in both studies were clear that only within the specialist women's sector did they feel that they were considered a priority, and these views are supported by previous research. In criminal justice, problematic substance use (PSU) and homelessness settings, services are built around the needs of men, and gender differences are ignored (AVA and Agenda, 2019, Fitz-Gibbon and Walklate, 2018). Women have been shown to have different treatment needs for PSU to those of men (Tang et al., 2012), and to have improved outcomes when accessing women-only PSU

programs (Prendergast et al., 2011, Valeri et al., 2018). Data collection methods in homelessness and rough sleeping studies render most women's experiences invisible (Bretherton and Pleace, 2018). In social work, women of working age tend only to be visible if they have dependent children. Then, it is their children who are the main focus of concern, and women are constructed as 'failing parents' (Broadhurst et al., 2015, Callaghan, 2015, Humphreys and Absler, 2011, Robbins and Cook, 2018). Thus, in anything other than the women's sector, women tend to 'disappear' – either because they are not men, or because they are not children.

Women know that agencies are fallible; this, they accept. Discord and disengagement stem from individual practitioners' reluctance to acknowledge that fallibility and to work alongside women and the organizations advocating for them. Whilst professionals may view women as "not engaging," women believe those professionals to be unable to keep them safe (Rogerson, 2015). Accord and progress are achieved when professionals do things with, rather than to, women. Although the more recent pressures of short-term funding have had an effect, the ethos within the specialist women's sector reflects this feminist approach. Keeping clients at the center of their service, they recognize the interdependence of all the agencies involved in supporting women, and value the skills, knowledge, and statutory powers that other agencies bring.

The benefits that participants derived from specialist women's agencies included feeling listened to, understood, respected, and supported. That, together with the time and space they were afforded to gather their thoughts, process their experiences and, where needed, seek further help, enabled them to work through their problems and plan for a future free from abuse. Given the economic and social costs to the UK of violence against women, specialist services should not be provided "on a shoe string" (WRC, 2013), but properly resourced. Women's advocacy services must be restored and underpinned by a secure and sustainable specialist women's sector. The package of care provided by statutory sector agencies must be made more accessible, with meaningful cooperation with specialist women's services being an integral part of that package.

CONCLUSION

The aim of this paper was to examine some of the issues faced by female victims of men's violence and abuse when seeking support to regain control of their lives. Although drawn from two separate datasets, the small sample sizes limit the extent to which conclusions can be generalized to a wider population. However, the findings are in line with previous research. Participants' accounts suggest that, despite national guidelines on person-centered care (Home Office, 2016, NICE, 2016), women with multiple and complex needs are often poorly served by agencies outside the specialist women's sector. In order to improve women's chances of regaining control of their lives and achieving safety, three issues need to be considered by practitioners and managers. Firstly, professionals' ignorance of, or reluctance to signpost to, other agencies results in women not being offered the services that they need. Practitioners need to be proactive in sourcing, and using, information about specialist women's services operating in their locality. Secondly, within and between agencies, weaknesses in information-sharing force women to repeatedly revisit traumatizing experiences and further damage their already fragile self-esteem. It also leads to fragmented services, with gaps and contradictions that make navigation between them difficult and, sometimes, dangerous. More effective communication within and between agencies

would reduce the need for repetition and enable women to fully engage with those required. Finally, the benefits of women-only, client-centered services are that, rather than having a "head like a washing machine on spin" (Jane, Study 2), women are provided with the time, space and support to hand wash each laundry item individually, in an order that takes account of both their and others' priorities. Women's advocacy services must be restored, underpinned by a secure and sustainable specialist women's sector, and more closely integrated into the package of care provided by statutory agencies. As the Women's Resource Centre (2013) notes:

The funding climate for both the statutory and women's sector is hostile and fiercely competitive. It is vital that both sectors work together to ensure the survival of the women's sector—supporting women and communities in need and challenging discrimination (WRC, 2013).

ACKNOWLEDGMENTS

The authors express our deep gratitude to the women who participated in the two studies. We recognize the significance of what we were asking them to do and the emotional costs of revisiting their experiences. We appreciate the time and energy that they so generously gave. Without their contribution, the studies would not have been possible. We would also like to thank colleagues in the agencies within which we worked for supporting our studies by putting us in contact with participants. *Dignity* thanks the following people for their time and expertise to review this article: Jenny Westerstrand, director of Roks, the National Organization for Women's Shelters and Young Women's Shelters, Sweden; and Inge Kleine, professor and activist, Germany.

AUTHOR BIOGRAPHIES

Jo Neale, Ph.D., [<https://orcid.org/0000-0002-0755-8088>] is a Senior Research Fellow in the Institute of Applied Social Research at the University of Bedfordshire, UK. She has worked on research projects across a wide range of disciplines (education, health, social care). She is particularly interested in the relationship between psychology and "culture" (i.e., how one's attitudes and behaviors are influenced by "culture," and vice versa). Her research has explored this theme in relation to violence against women.

Kathryn Hodges, Ph.D., [<https://orcid.org/0000-0002-7683-9123>] is an independent researcher, consultant, trainer, and Visiting Research Fellow at St. Mary's University Centre for the Study of Modern Slavery (London). She has had a varied career in social care practice and higher education. She is a registered social worker with much of her practice career spent leading substance use services.

RECOMMENDED CITATION

Neale, Jo & Hodges, Kathryn. (2020). "My head was like a washing machine on spin": (Improving) women's experiences accessing support. *Dignity: A Journal of Sexual Exploitation and Violence*. Vol. 5, Issue 3, Article 3. <https://doi.org/10.23860/dignity.2020.05.03.03> Available at <http://digitalcommons.uri.edu/dignity/vol5/iss3/3>

REFERENCES

Abrahams, H. (2007). *Supporting women after domestic violence: Loss, trauma, and recovery*. London: Jessica Kingsley.

- APPGSV. (2018). *Funding and commissioning of sexual violence and abuse services*. 2018. London: All Party Parliamentary Group on Sexual Violence.
- Ash, A. (2011). A cognitive mask? Camouflaging dilemmas in street-level Policy Implementation to Safeguard Older People from Abuse. *British Journal of Social Work*, 43(1), 99-115. <https://doi.org/10.1093/bjsw/bcr161>.
- AVA & Agenda. (2019). *Breaking down the barriers: Findings of the National Commission on Domestic and Sexual Violence and Multiple Disadvantage*. London: AVA and Agenda.
- Bates, L., Lilley, S. J. & Hester, M. (2018). *Policy Evidence Summary 3: Specialist advocacy for domestic and sexual violence*. Bristol: University of Bristol.
- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101. <http://dx.doi.org/10.1191/1478088706qp063oa>.
- Braun, V. & Clarke, V. (2013). *Successful qualitative research*. London: Sage.
- Bretherton, J. & Pleace, N. (2018). *Women and rough sleeping*. York: University of York.
- Broadhurst, K., Alrouh, B., Yeend, E., Harwin, J., Shaw, M., Pilling, M., Mason, C. & Kershaw, S. (2015). Connecting events in time to identify a hidden population: Birth mothers and their children in recurrent care proceedings in England. *British Journal of Social Work*, 45(8), 2241-2260. <https://doi.org/10.1093/bjsw/bcv130>.
- Callaghan, J. (2015). Mothers and children? Representations of mothers in research on children's outcomes in domestic violence. *Psychology of Women Section Review*, 17, 13-20. https://www.academia.edu/12412212/Mothers_and_Children_Representations_of_mothers_in_research_on_children_s_outcomes_in_domestic_violence?auto=download.
- Campbell, J. C., Glass, N., Sharps, P. W., Laughon, K. & Bloom, T. (2007). Intimate partner homicide: Review and implications of research and policy. *Trauma, Violence, & Abuse*, 8(3), 246-269. <https://doi.org/10.1177/1524838007303505>.
- Corradi, C. & Stöckl, H. (2014). Intimate partner homicide in 10 European countries: Statistical data and policy development in a cross-national perspective. *European Journal of Criminology*, 11(5), 601-618. <https://doi.org/10.1177/1477370814539438>.
- Coy, M. (2016a). Joining the dots on sexual exploitation of children and women: A way forward for UK policy responses. *Critical Social Policy*, 36(4), 572-591. <http://doi.org/10.1177/0261018316638460>.
- Coy, M. (2016b). *Prostitution, harm, and gender inequality: Theory, research, and policy*. Abingdon, Oxon: Routledge.
- Coy, M., Kelly, L. & Foord, J. (2009). *Map of gaps 2: The postcode lottery of violence against women support services in Britain*. London: End Violence Against Women.
- Crenshaw, K. W. (2012). From private violence to mass incarceration: Thinking intersectionally about women, race, and social control. *UCLA Law Review*, 59(6), 1418-1472. <https://escholarship.org/uc/item/7mp3k6m3>.
- DoH (2017). *Responding to domestic abuse: A resource for health professionals*. London: Department of Health.
- Fitz-Gibbon, K. & Walklate, S. (2018). *Gender, crime, and criminal Justice*. London: Routledge.
- Foucault, M. (1998). *The history of sexuality: The will to knowledge*. London: Penguin.
- Greenspan, H. (1998). *On listening to holocaust survivors: Recounting and life history*. Westport, CT: Praeger.

- Grierson, J. (2018). Council funding for women's refuges cut by nearly £7m since 2010. *The Guardian* [Online]. Available: <https://www.theguardian.com/society/2018/mar/23/council-funding-womens-refuges-cut-since-2010-england-wales-scotland>.
- HCPAC (2018). *Financial sustainability of local authorities: Fiftieth report of session 2017-19*. London: House of Commons Public Accounts Committee.
- Heady, L., Kail, A. & Yeowart, C. (2011). *Understanding the stability and sustainability of the violence against women voluntary sector*. London: Government Equalities Office.
- Hester, M. (2013). Who does what to whom? Gender and domestic violence perpetrators in English police records. *European Journal of Criminology*, 10(5), 623-637. <https://doi.org/10.1177/1477370813479078>.
- Hester, M. (2015). The three planet model: Contradictions in approaches to women and children's safety in contexts of domestic violence. *Working with Women and Children Experiencing Domestic Abuse: Messages from Research*. London: Making Research Count.
- Hester, M., Pearson, C. & Harwin, N. (2007). *Making an impact: children and domestic violence: a reader (Second Edition)*. London: Jessica Kingsley.
- Hodges, K. & Burch, S. (2019). Multiple and intersecting experiences of women in prostitution: Improving women's access to helping services. *Dignity: A Journal on Sexual Exploitation and Violence*. <https://doi.org/10.23860/dignity.2019.04.02.03>.
- Home Office. (2016). *Violence Against Women and Girls: National Statement of Expectations*. London: Home Office.
- Humphreys, C. & Absler, D. (2011). History repeating: Child protection responses to domestic violence. *Child & Family Social Work*, 16(4), 464-473. <https://doi.org/10.1111/j.1365-2206.2011.00761.x>.
- Humphreys, C. & Thiara, R. K. (2002). *Routes to safety: Protection issues facing abused women and children and the role of outreach services*. Bristol: Women's Aid Federation of England.
- Jacob, S. (2017). Strengthening the collective response: Safeguarding victims, reducing risk and securing justice. *9th Annual Domestic Violence Symposium: Safeguarding Victims, Reducing Risk and Changing Norms*. London: Public Policy Exchange.
- Kelly, L. (2005). How violence is constitutive of women's inequality and the implications for equalities work. *Equality and Diversity Forum Seminar*. London.
- Kentish, B. (2017). Councils forced to use emergency cash to pay for social care as funding shortfall grows. *Independent* [Online]. Available: <https://www.independent.co.uk/news/uk/politics/councils-cash-reserves-social-care-funding-crisis-health-budget-a8074911.html> [Accessed 1 December 2018].
- Lees, S. (2000). Marital rape and marital murder. In: Hanmer, J. & Itzin, C. (eds.) *Home Truths about Domestic Violence: Feminist Influences on Policy and Practice*. London: Routledge.
- Lehrner, A. & Allen, N. E. (2009). Still a movement after all these years? Current tensions in the domestic violence movement. *Violence Against Women*, 15(6), 656-677. <https://doi.org/10.1177/1077801209332185>.
- Lewis, N., Moore, T., Feder, G., Macleod, J. & Whiting, P. (2018). Use of emergency contraception among women with experience of domestic violence and abuse: a systematic review. *BMC Women's Health*, 18(156). <https://doi.org/10.1186/s12905-018-0652-7>.
- Matolcsi, A. (2020). Unwanted sex with third parties in domestic abuse relationships and its impact on help-seeking and justice. *Journal of Gender-Based Violence*, xx(xx), 1-15. <https://doi.org/10.1332/239868020X15791778136368>.

- Matthews, R., Easton, H., Young, L. & Bindel, J. (2014). *Exiting prostitution: A study in female desistance*. London: Palgrave Macmillan.
- McDonald, J. (2005). Neo-liberalism and the pathologising of public issues: The displacement of feminist service models in domestic violence support services. *Australian Social Work*, 58(3), 275-284. <https://doi.org/10.1111/j.1447-0748.2005.00220.x>.
- Myhill, A. (2015). Measuring coercive control: What can we learn from national population surveys? *Violence Against Women*, 21(3), 355-375. <https://doi.org/10.1177/1077801214568032>.
- Neale, J. (2018). Abused women's perceptions of professionals' responses: valued support, or collusion with perpetrator? *Journal of Gender-Based Violence*, 2(3), 411-428. <https://doi.org/10.1332/239868018X15366982612051>.
- Neate, P. (2017). A survivor-centred response to domestic abuse. Women's Aid National Conference: Challenging Culture, Changing Behaviour, 2017 University of Warwick.
- NICE (2016). *Domestic Violence and Abuse: Quality Standard*. London: National Institute for Health and Care Excellence.
- Oakley, A. (1981). Interviewing women: A contradiction in terms. In: Roberts, H. (ed.) *Doing Feminist Research*. London: Routledge.
- Oliver, R., Alexander, B., Roe, S. & Wlasny, M. (2019). *The economic and Social costs of domestic abuse*. London: Home Office
- Prendergast, M. L., Messina, N. P., Hall, E. A. & Warda, U. S. (2011). The relative effectiveness of women-only and mixed-gender treatment for substance-abusing women. *Journal of Substance Abuse Treatment*, 40(4), 336-348. <https://doi.org/10.1016/j.jsat.2010.12.001>.
- Reis, S. (2018). *Life-Changing and Life-Saving: Funding for the women's sector* [Online]. Women's Budget Group. Available: <https://wbg.org.uk/wp-content/uploads/2018/12/WBG-Funding-Report-2.pdf> [Accessed 31 December 2018].
- Robbins, R. & Cook, K. (2018). "Don't even get us started on social workers": Domestic violence, social work, and trust—An anecdote from research. *British Journal of Social Work*, 48(6), 1664-1681. <https://doi.org/10.1093/bjsw/bcx125>.
- Rodriguez, L. (2016). *A curriculum on culturally competent practices to prevent retraumatization in diverse survivors*. Doctor of Nursing Practice (DNP), Walden University, USA. <https://scholarworks.waldenu.edu/dissertations/3202/>.
- Roe-Sepowitz, D. E., Hickie, K. E. & Cimino, A. (2012). The impact of abuse history and trauma symptoms on successful completion of a prostitution-exiting program. *Journal of Human Behavior in the Social Environment*, 22(1), 65-77. <https://doi.org/10.1080/10911359.2011.598830>.
- Rogerson, B. (2015). How a needs-led approach to MARAC cases delivers effective outcomes: The evidence. *Safe*, Winter 2015(52), 10-14.
- Scott, S. & Frost, S. (2019). Why women's centres work: An evidence briefing. Women and Girls Initiative Learning and Impact Services <https://www.tavinstitute.org/news/why-womens-centres-work-an-evidence-briefing/>
- Shields, S. A. (2016). Functionalism, Darwinism, and intersectionality: Using an intersectional perspective to reveal the appropriation of science to support the status quo. *Feminism & Psychology*, 26(3), 353-365. <https://doi.org/10.1177/0959353516655371>.
- Sillito, C. (2012). Physical health effects of intimate partner abuse. *Journal of Family Issues*, 33(11), 1520-1539. <https://doi.org/10.1177/0192513X12448742>.

- Smith, K., Flatley, J., Coleman, K., Osborne, S., Kaiza, P. & Roe, S. (2010). *Homicides, firearms offences and intimate violence 2008/09*. London: Home Office.
- Smith, K., Osborne, S., Lau, I. & Britton, A. (2012). *Homicides, Firearm offences and intimate violence 2010/11: Supplementary Volume 2 to Crime in England and Wales 2010/11*. London: Home Office.
- Stark, E. (2009). *Coercive control: How men entrap women in personal life*. Oxford: Oxford University Press.
- Tang, Z., Claus, R. E., Orwin, R. G., Kissin, W. B. & Arieira, C. (2012). Measurement of gender-sensitive treatment for women in mixed-gender substance abuse treatment programs. *Drug and Alcohol Dependence*, 123(1), 160-166. <https://doi.org/10.1016/j.drugalcdep.2011.11.003> .
- Valeri, L., Sugarman, D. E., Reilly, M. E., McHugh, R. K., Fitzmaurice, G. M. & Greenfield, S. F. (2018). Group therapy for women with substance use disorders: In-session affiliation predicts women's substance use treatment outcomes. *Journal of Substance Abuse Treatment*, 94, 60-68. <https://doi.org/10.1016/j.jsat.2018.08.008> .
- WAFE. (2014). *Why we need to save our services: Women's aid data report on specialist domestic violence services in England*. Bristol: Women's Aid Federation of England.
- WAFE. (2017). *Change that lasts* [Online]. Women's Aid Federation of England. Available: <https://www.womensaid.org.uk/our-approach-change-that-lasts> / [Accessed 14 May 2018].
- Warrington, M. (2003). Fleeing from fear: The changing role of refuges in meeting the needs of women leaving violent partners. *Capital & Class*, 27(2), 123-150. <https://doi.org/10.1177/030981680308000108>
- Wendt, S. & Zannettino, L. (2015). *Domestic violence in diverse contexts: A re-examination of gender*. Abingdon: Routledge.
- Westmarland, N. & Hester, M. (2007). *Time for change: An assessment of services for domestic abuse perpetrators in Bristol*. Bristol: University of Bristol.
- WRC (2013). *Surviving the Crisis: The impact of public spending cuts on women's voluntary and community organisations*. London: Women's Resource Centre.