

# Evaluation of the Rhea Project: Final Report

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# Contents

1. Introduction .....	2
2. Overview of the evaluation .....	5
3. Operating Model .....	10
4. The support model and Theory of Change .....	15
5. The interaction between the operating and support models.....	19
6. Finances – costs and benefits .....	20
7. Impacts.....	25
8. Key challenges and learning .....	36
9. Issues regarding replication .....	39
10. Conclusions.....	42
Appendix 1: Detailed calculations of income and property costs .....	44
References .....	46

# 1. Introduction

This section outlines the wider context of the pilot and introduces the partnerships involved, explaining the relationship between Commonweal Housing (Commonweal) and Solace Women's Aid (Solace) and between Solace and the London Borough of Southwark Housing Department (Southwark Housing Solutions). It provides an overview of the Rhea project and the stakeholders' interests in the pilot.

## 1.1 Context

The Office for National Statistics, in its November, 2019 Domestic abuse in England and Wales overview<sup>ii</sup> reports that an estimated 1.6 million women experienced domestic abuse in the year up to end March 2019. This represents a steady state from the previous year and is widely recognised to have worsened over the time of Covid-19 related lockdown in 2020.

The UK Government Domestic Abuse Bill 2019<sup>iii</sup> places a legal duty on councils to offer secure homes for people fleeing domestic violence and their children. The Victims Commissioner has called for children living with domestic abuse to be classified as victims of crime<sup>iv</sup> rather than unaffected observers of domestic abuse situations. That this needs to be said is an indictment of the current response by the system. Despite the clear need and legal obligation, the system is not functioning to meet need and housing pathways are a fundamental part of the problem<sup>v</sup> (Nowhere to Turn report, Women's Aid, 2018).



**I didn't want to be in Refuge and anyway I couldn't be because of my son's age. So, Rhea really saved us actually. I don't know how we would have got out together if not, and I wouldn't have left him there.**



There is, therefore, a timely opportunity (albeit long overdue) for local areas to look at this societal problem in new ways. The Rhea Project is an innovative and

important example of how Local Authorities can work in partnership with the third sector in order to address their legal duty using a systems approach.

## 1.2 The partnership

Solace exists to end the harm done through Violence Against Women and Girls. Its aim is to work to prevent violence and abuse as well as providing services to meet the needs of survivors, particularly women and girls. It does this by providing a range of support, advice, signposting and campaigning services. It works from the values of holistic approaches and empowerment, in order to promote independent lives, free from abuse. Whilst the Rhea project is available to male survivors, this report is written from the perspective of female survivors, in recognition of those receiving the services throughout the evaluation period and that domestic abuse is primarily a gender-based crime and a part of VAWG.

Commonweal, the housing provider, supports piloting of innovative projects that address social injustice and where a housing element is one part of addressing this for individuals. These pilots are supported by Commonweal as 'action learning' projects. This is with a view to identifying, exploring and where appropriate promoting replicability in other areas and similar situations.

Solace work closely with Southwark Housing Solutions to promote effective practice within the Housing Department in meeting the needs of women escaping from domestic abuse and other VAWG. Southwark Housing Solutions is the first Local Authority housing department to be accredited by the Domestic Violence Housing Alliance.

Through this partnership the needs of survivors meeting the project criteria are met through a systems approach

## 1.3 Overview of the Rhea Project

The Rhea Project was established as a partnership between Solace and Commonweal, to pilot good quality, temporary housing with tailored support for survivors of domestic abuse and other VAWG. Close working between Solace and Southwark Housing Solutions is key to improving the timeliness and appropriateness of referrals in, and move on from, the service.

The project is innovative in that it combines three areas of progressive practice. Firstly, it provides a bespoke, home-based support to survivors, which distinguishes it from other projects. Secondly, the emphasis on close working links with Southwark



Housing seeks to maximise opportunities for timely move-on to long-term secure accommodation appropriate to need. Thirdly, the project also meets a gap in pre-existing provision in Southwark, in terms of its target group. It does this by providing supported independent accommodation to survivors of domestic abuse and VAWG who have children, including older male children who may not be accepted in other forms of domestic abuse residential provision. Its value base represents that of Solace in that it works to promote independence through holistic and person centred support, with a focus on empowerment.

“ **It’s set me up, coming here. It’s given me space and a way of getting something permanent.** ”

Rhea combines the aims of the three partner organisations into shared outcomes. It supports the aims of Solace by promoting independence of survivors, through holistic and person-centred support, with a focus on empowerment. In line with Commonwealth’s aims, it is an opportunity to pilot a new way of tackling a common and significant social and housing problem, to evaluate and test the potential for replicability elsewhere. It meets the aims of Southwark Housing Solutions to meet the housing needs of vulnerable groups. Southwark Housing Solutions recognises that survivors of domestic abuse are a key group within the homeless population, so to not provide a working solution for them would be to overlook a key vulnerable population cohort.



## 2. Overview of the evaluation

This section gives an overview of the aims and method used in the evaluation. This mixed methods evaluation focuses on formative learning as well as identifying impact and issues that may be relevant to replication. This section also includes a demographic overview of survivors who have been placed in Rhea Housing over the period covered by the evaluation.

### 2.1 The aims of the evaluation

The aims of this evaluation were:

- To identify a Theory of Change for the project.
- To identify relevant qualitative and quantitative data to support analysis of cost and benefit, value, challenges or barriers to success, referencing these against the Theory of Change.
- To provide formative feedback and recommendations to maximise the potential of the project for success.
- To make recommendations regarding potential for replicability and, if replicable, to define the key elements necessary.
- To be of use to various stakeholders working (directly or indirectly) with survivors of domestic abuse to share key learning from the project.

### 2.2 The method

The evaluation method was mixed, combining qualitative and quantitative data collection and analysis.

A first phase consisted of initial discussions with managers and lead staff in Commonweal and Solace to establish the context for the project and the needs it sought to meet. This was followed by a Theory of Change workshop with relevant managers and staff from Commonweal and Solace (see Appendix A for more details). An initial review of academic and grey literature was undertaken to establish policy context and any broader evidence base relevant to the evaluation context and findings. Findings from all of the above were collated and analysed to establish relevant benchmarks and to agree an evaluation framework.

Following this first phase, a series of semi-structured interviews were conducted with survivors being supported by Rhea, as well as key professional stakeholders. All survivors who had been supported through Rhea were contacted by the Rhea manager and asked if they would be willing to be interviewed for the evaluation. Twelve of these gave Rhea consent for the evaluators to contact them with further information and all of these were followed up. Of this twelve, nine agreed to be interviewed following discussion of the nature and use of the interview data. They were interviewed at different stages of their journey, but all had been in the Rhea project for a minimum of three months at the time of interview.

Key Workers and Managers of Rhea and the Head of Housing Solutions at Southwark Housing Solutions were interviewed in the first year of the evaluation period. They were re-interviewed again in the final three months of the evaluation period. These interviews were semi-structured and designed to gather the experiences of interviewees of the project implementation and any changes they had made subsequent to initial arrangements.

Alongside the data from the interviews, analysis was undertaken of data provided by Solace for January 1st 2018 to December 31st 2019. This data showed a record of demographics, support activity and impact for 17 survivors who received Rhea housing and support. The analysis of support activity data is outlined below in sections **3. Operating model** and **4. Support model**. Analysis of the data that relates to impact was cross referenced with the Theory of Change to show levels and type of impact. This is presented in section **7. Impact on Survivors and Children**.

Financial data was provided by Rhea for the period 1st January 2018 to 31st December 2019. This has been used to inform findings on cost and value reported in 6. Finances and Cost Benefit.

All of the information gathered has been used to identify value, benefits and challenges for the pilot and to inform the project development and considerations of replicability.

## 2.3 Demographic details of survivors

Demographic information was recorded by Solace for the 17 survivors who received a Rhea service during the period 1st January 2018 to 31st December 2019. Selected demographics are reported in the tables and text to follow.

### Gender and sexual orientation

All of the 17 survivors receiving a service from Rhea were female and all defined their sexual orientation as heterosexual.

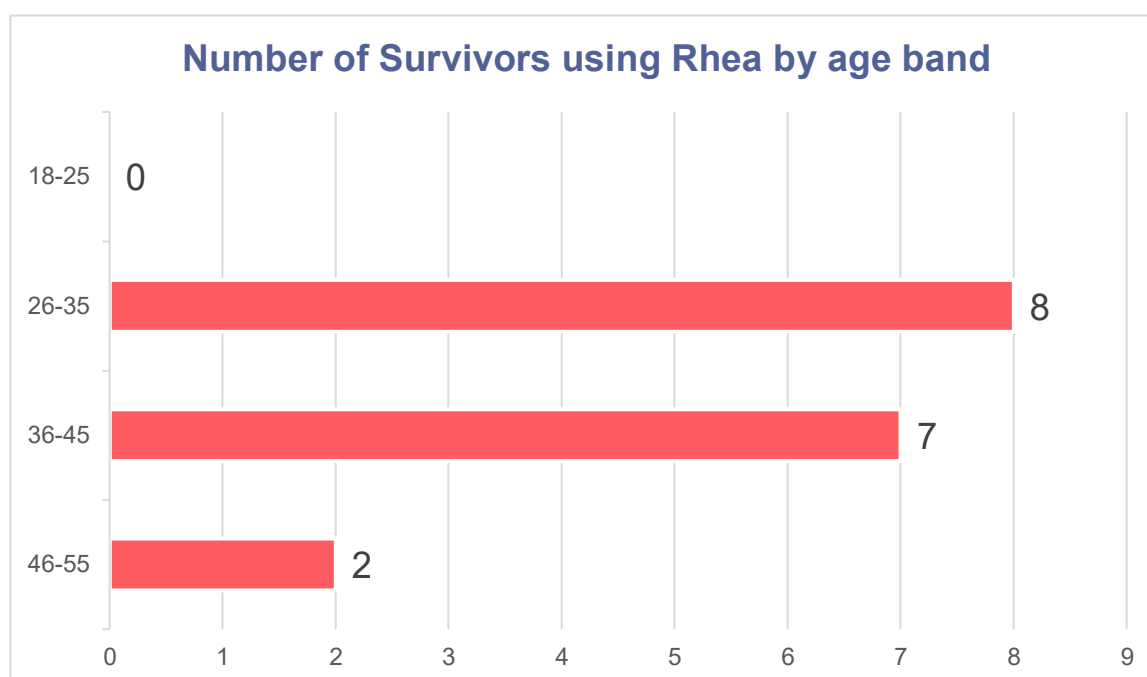
### Disability and mental health diagnosis

None of the 17 survivors reported having a disability, whether physical or learning disability. None reported any diagnosed mental health condition.

### Age

Figure 1 below shows the number of survivors in four age bands that span 18 years to 55 years. It shows that the majority of survivors (15 out of 17) were in the two middle age bands that span 26 to 45 years.

**Figure 1: showing the number of survivors using the Rhea project 1st January 2018 to 31st December 2019 across age bands (N=17)**





## Ethnicity, race and Immigration status

Figure 2 below shows the number of survivors using the Rhea project across ethnic categories. It shows that the vast majority of survivors were from Black and Minority Ethnic (BAME) groups, with only one survivor recorded as White British.

Figure 2: showing the number of survivors using Rhea 1st January 2018 to 31st December 2019 across ethnic categories (N=17)

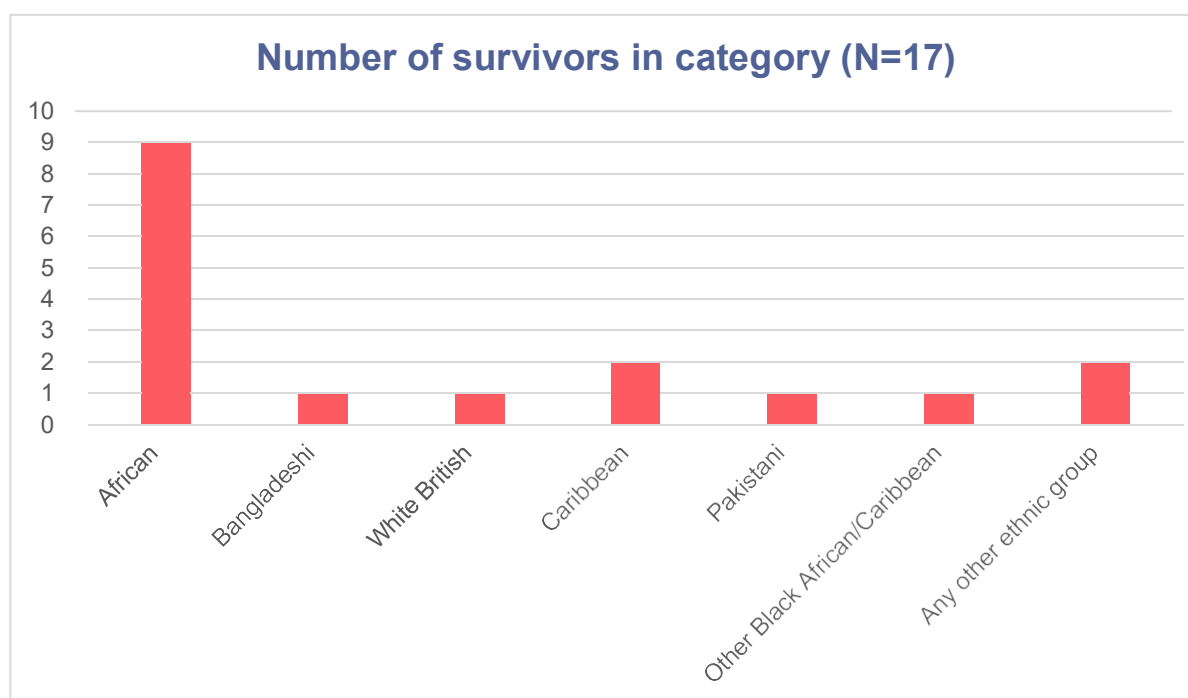
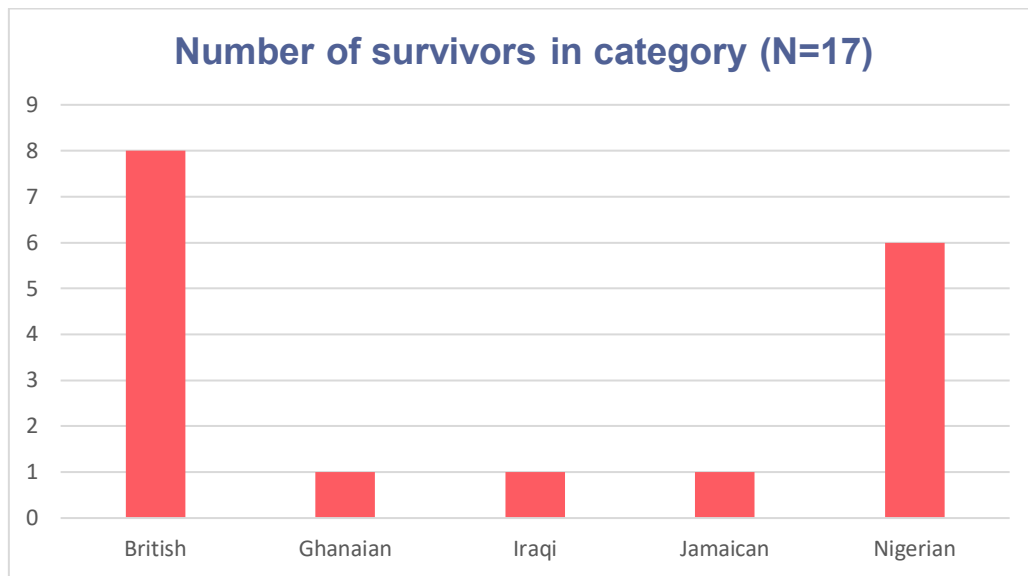


Figure 3 below shows the number of survivors across categories of nationality. It shows that just under half (8 out of 17) survivors were British. Six survivors were Nigerian. The remaining three survivors were Ghanaian, Iraqi and Jamaican.

Figure 3: showing the number of survivors using the Rhea project 1st January 2018 to 31st December 2019 across nationality categories (N=17)



## 3. Operating Model

### 3.1 Overview of operating model

The operating model was developed in collaboration between the three partners. Commonweal has provided 8 furnished units of accommodation of 2 or 3 bedrooms to Solace for their use at a subsidised rent, enabling Solace to pilot the delivery model. The properties are geographically spread across London boroughs to allow survivors to be placed out of area for their own safety if necessary. The Rhea Project is based on the premise that this is a key element in supporting survivors who have experienced domestic abuse or other form of VAWG to rebuild their lives. A key element of the operating model, therefore, is that the housing provision is safe, furnished and of high quality. Repairs on the properties are provided by Solace. A summary of the operating model is represented overleaf by Figure 1.

### 3.2 Who the project is for

The project effectively fills a gap in provision for survivors who need low to medium support. This can be defined as a lower level of support than a refuge, but a higher level of support than an advocacy project.

Exclusion criteria for the project are:

- Survivors unwilling to engage with the support package
- Survivors who do not have dependent children
- Level of needs is too high (e.g. complex needs, mental health issues, substance misuse)
- Uncertain immigration status
- Risk of them being found by the perpetrator, which also includes an assessment of risk to staff
- Levels of risk related to the children's schools (e.g. risk of children being followed home from school)
- Previous evictions

## 3.3 Referral and assessment arrangements

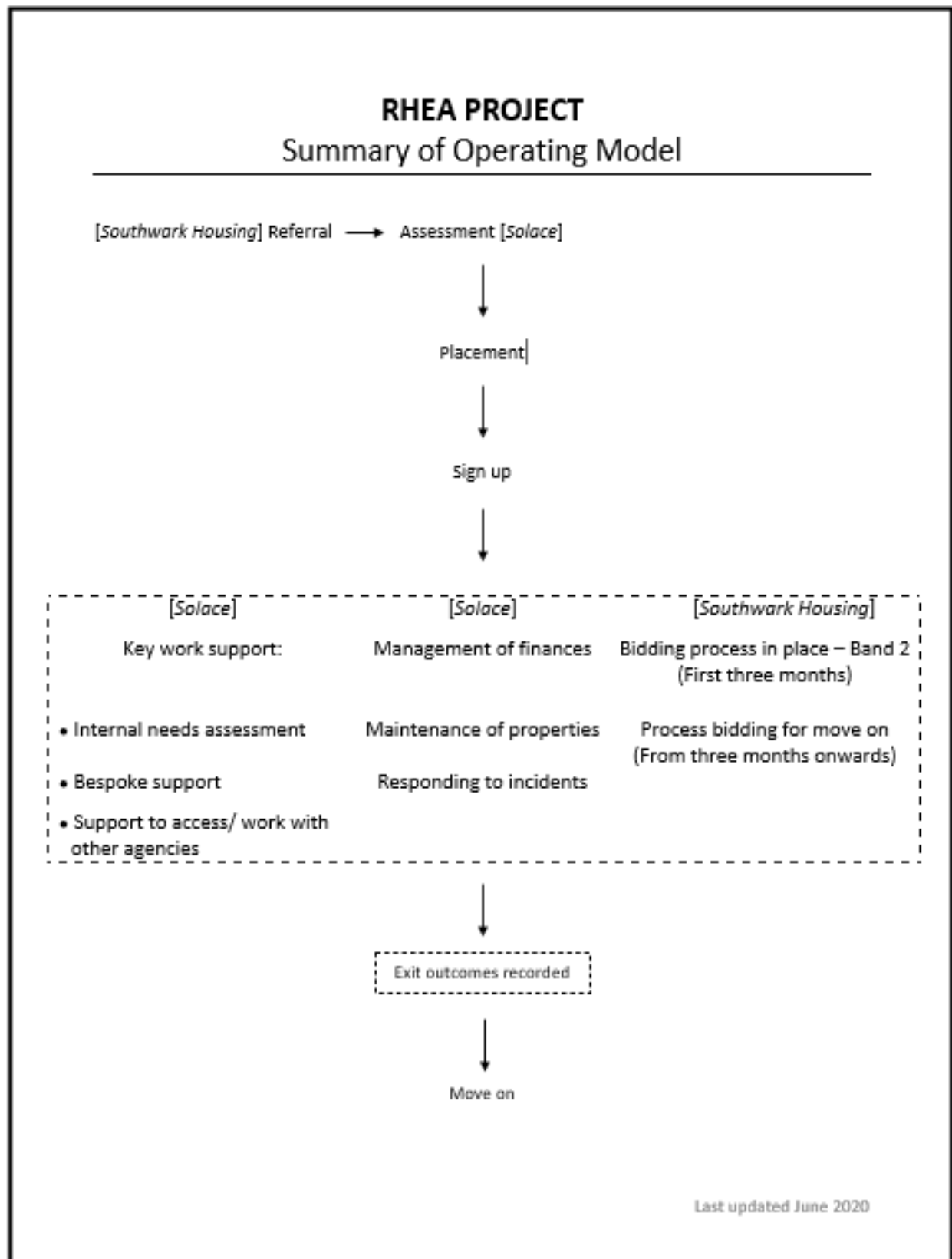
Survivors are identified and referred via Southwark Housing Solutions. Initially assessments were previously conducted by Southwark Housing staff but a refinement of the approach meant that they are now done by a Solace staff member who is both located and embedded within the Southwark Housing Team. Following placement with the Rhea project, Southwark Housing Solutions process the bidding for move on. A key function of Rhea has been to raise the profile and response within Southwark Housing to domestic abuse and VAWG issues, both for Rhea survivors and in general.

Rhea staff, employed by Solace but sited in Southwark Housing, provide management, assessment and support. Their presence within Southwark Housing is seen by the Project Manager to be essential to building relationships with Housing Assessment and Allocation staff and to the ability to provide an 'on the spot' assessment and needs led response. Good communication with case workers, placements team, managers, income team are important for the delivery of the referral and assessment process and the ongoing support of the service users.





Figure 1: Summary of Operating Model for Rhea Project



## 3.4 Ongoing support arrangements

Following acceptance into the project, the Rhea Key Worker provides holistic support to survivors. This is delivered face to face by visits to the properties. It includes practical advice around such issues as children gaining places in new schools, helping with benefits forms, as well as emotional support, for example encouragement and sometimes accompanying women to appointments with key agencies. All support is delivered within an empowerment model whereby women are encouraged to recognise and build their own skills and confidence in preparation for move on. Additionally, Rhea staff are available for out of hours contact by phone in the case of emergencies. They oversee the physical maintenance of the properties. They also manage the project finances and the ongoing relationships with key partners, in particular Commonweal and Southwark Housing.

## 3.5 Arrangements for move on

All survivors receiving this package now receive a Band 2 housing allocation. This means that a full application on move on is not required, which speeds up this process. At the commencement of Rhea, the operating model was that survivors would get their band allocation in the first 3 months of their stay with Rhea. The subsequent six months was then available for bidding for move on properties with a further month being available as a buffer to allow for any time slippage. One issue which arose however was that the women were not always proactively bidding. This could have been for a range of reasons such as unrealistic expectations about which properties they were eligible for, or them feeling comfortable in the Rhea property and not wanting to move on. This was causing a log jam with women not moving on as scheduled and hence not freeing up Rhea properties for new referrals. To counter this, the Rhea manager has implemented a revised process for new admissions. A bidding number is requested on admission and at three months the Key Worker checks that this is in place. At six months the Key Worker checks that the survivor is actively bidding for a move on property and at nine months she will investigate any reasons for a move on property not being in place. At this point, Rhea inform the survivor that a 56-day notice period will be issued at the 12-month review if there is no movement.

This process is clarified to the survivor when she moves into Rhea. Should the 56-day notice be implemented, the survivor would then go into temporary accommodation provided by Southwark Housing Solutions. This new system therefore clarifies expectations to the survivor and provides a system for checking if there are any operational issues occurring in the bidding process. In this way, it prevents a 'log jam' in the availability of Rhea properties and puts the onus on Southwark Housing Solutions to provide suitable move on properties.

The Rhea Key Worker plays a key role in ensuring that survivors move on from the property and from Rhea support in a timely way, to avoid them becoming dependent on the service and, to enable placement of new referrals. Ongoing low-level support is available through wider Solace services. There is evidence to support this model in the academic literature for the UK and countries that are comparable in terms need and social systems.

“

**My son says that it gave him a calm place to live, stability and structure to get our lives back, and move on from a secure position.**

”



## 4. The support model and Theory of Change

This section sets out Rhea's support package and the Theory of Change. The aims of the support model are directly reflected in the Theory of Change which was co-developed in a facilitated workshop for key staff and managers in Solace and Commonweal. The Theory of Change development was undertaken to enable the project to fully articulate the links between the support package components.

### 4.1 Theory of Change

The Theory of Change sets out the intentions of the project, what it is trying to achieve and how.

Commonweal, the housing provider, supports piloting of innovative projects that address an identified social injustice (in this case, domestic abuse and VAWG and the factors surrounding this) and where a housing element is key to addressing this on an individual basis. This is with a view to identifying and exploring replicability in other areas and similar situations.

The long-term outcomes in the image overleaf Figure 2. show those which are intended to be achieved for and by the women by the time they complete their time with Rhea. Empowerment is central to this and as such the Project delivers in a very person centred way: women are supported to make their own decisions and take back control of their own lives. This is vital for a client group who has experienced disempowerment, intimidation and abuse.

Although both the long term and intermediate outcomes are represented diagrammatically in separate shapes, they are on the whole interdependent. For example, for a woman to be able to manage her own tenancy after the Rhea Project, she will need to feel empowered, and will need to be supported to find courage and ambition along this path.

The outcome of safety is shown as initial immediate safety when entering the Project, and then shifting to feeling safe as a longer-term outcome. This is intrinsically linked to sustained accommodation as it reduces the need and risk of returning to an abusive relationship. Supporting the women to develop a sense of agency is fundamental, however, in order to reduce any likelihood of their return to the abusive relationship or repeat of patterns in forming other abusive relationships.

Where the Rhea Project differs from a project based purely on accommodation is the



consistent support which women are given and the link with Southwark Housing to provide long-term secure accommodation in a timely way. The support and possibility of secure housing provides the women with space to focus on goals and actions for improving their own wellbeing and that of their children (having dependent children is one of the admission criteria). The initial good quality housing boosts emotional wellbeing for the first few months, and gives the women space to hope and dream, confidence and courage to continue. It generates self-belief and self-worth. It creates positive cycles, some results of which may not be seen until years down the line. What Rhea does is create the environment and conditions for this to take place.

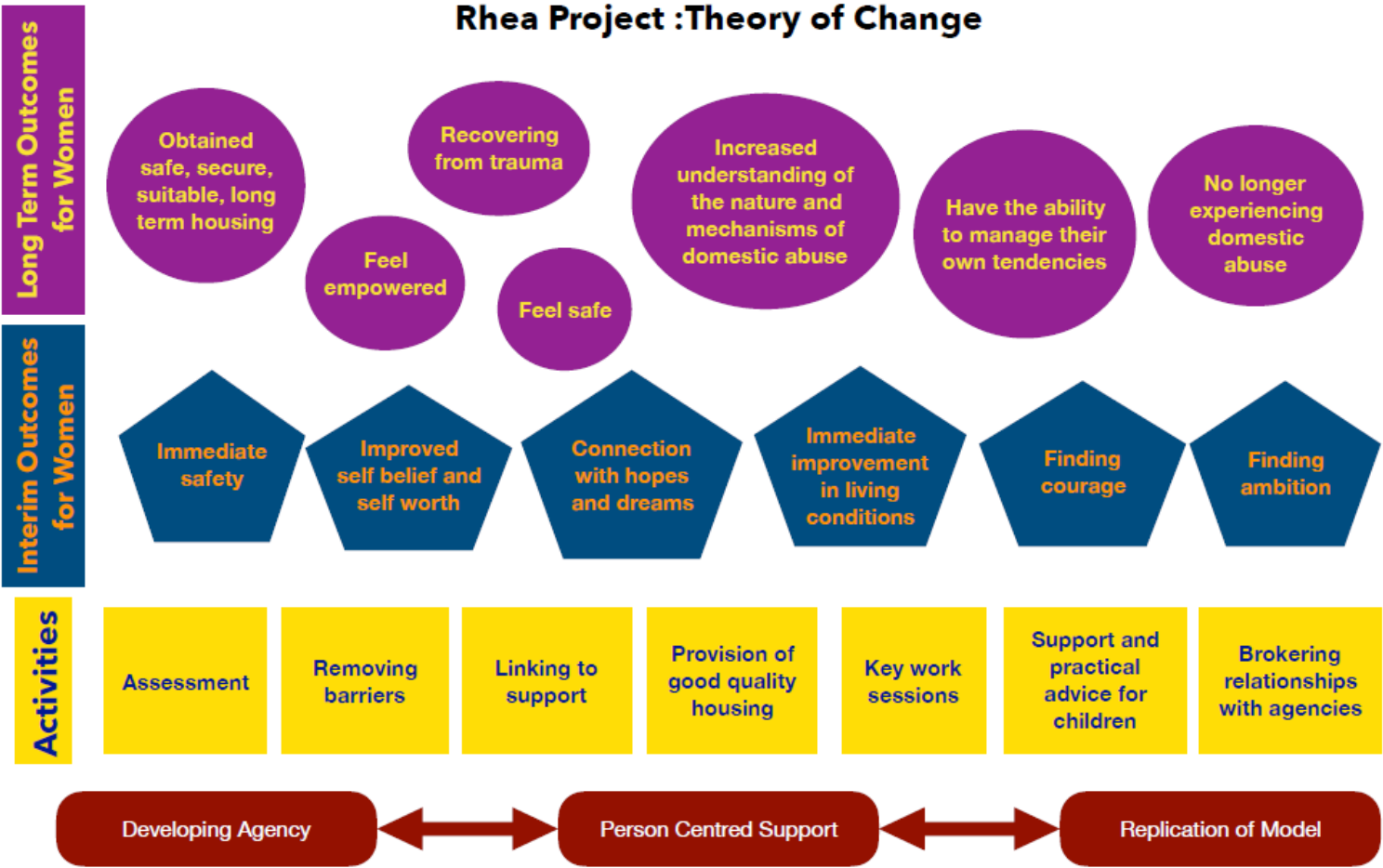
On assessment, women are screened to ensure that they are ready for the level of support that Rhea provides. This support is intensive at the beginning of their stay and then tapers as time goes by and as the women become more confident.

There is evidence to support this theory in the academic literature for the UK and countries that are comparable in terms need and social systems. Such literature has consistently found that women need access to immediate, secure and safe housing options in order to flee domestic abuse.<sup>vi</sup> They also need longer term housing provision in order to move on in their lives and avoid return to abusive situations.<sup>vii</sup> It has been found that women in hostels crave privacy, social inclusion and freedom to come and go, which can be more easily obtained in self-contained, high quality accommodation such as that provided by Commonweal.<sup>viii</sup>

Furthermore, social support has been found to be key to progression and long-term sustainability of the safety of women and their children.<sup>ix</sup> One study shows that women suffering domestic violence who had lower social support were at increased risk of attempting suicide.<sup>x</sup> In contrast, higher social support has been found to predict lower depression, higher overall quality of life, and reduced risk of re-abuse up to 2 years following a shelter stay.<sup>xi</sup> A specific focus on empowerment has been shown to impact on the long-term outcomes for women themselves<sup>xii</sup> and for their capacity to care for and protect their children.<sup>xiii</sup> This is particularly marked for women with additional needs (e.g. disability, recent immigrant or refugee status).<sup>xiv</sup>

The Rhea Project is a pilot and the evaluation was therefore conducted against this Theory of Change. This was both to facilitate identification of any necessary service improvements and also to identify whether it is replicable as a model and, if so, define the key elements necessary to replication.

Figure 2: Diagram of Theory of Change for Rhea Project



## 4.2 Support Model

The support package is provided by Solace in the form of a key worker who visits the survivors in their own properties to provide them with person centred services, using an empowerment approach to promote independence. Direct support for children of survivors is not directly provided, although positive 'spin-off' outcomes for children are hoped for. This support is achieved by regular home-based key work sessions and interim contact as appropriate. The capacity for this support worker is four days per week, which has been increased from three days per week since the Project's inception. This is now considered to be a suitable level of resource for the number and dispersal of properties. The support worker has instigated a system of a rotating a day of visits, a day of phone calls and two days admin/follow up work per week.

Support activities identified in the Theory of Change were:

- Assessment (which normally need to be immediate, responsive and highly needs led).
- Removing barriers to wellbeing/independence (benefits, language, access to education or training support).
- Linking to and making best use of, other support systems and services, including brokering relationships with other agencies.
- Other bespoke emotional and personal development support identified through a person-centred approach.
- Support and practical advice on parenting and resolving issues relating to children (for example, regarding school engagement or relationships between the child and the perpetrator).

Since the development of the Theory of Change at the beginning of the evaluation, Rhea have focused on implementing a Trauma Informed Approach, which focuses on emotional as well as physical safety. It aims to promote recovery and minimise risk of re-traumatisation through interventions.<sup>xv</sup> The staff and managers feel that this has contributed significantly to the positive outcomes demonstrated.

**Along with my own family and friends  
my key worker got me through. If you  
were just plopped here, that would be  
much harder to cope, to not go to work.**

Solace is also contracted separately to provide rolling training to staff within the Southwark Housing Team in order to build their capacity to more fully understand the issues pertaining to domestic abuse and other forms of VAWG and to respond in a supportive way.

## **5. The interaction between the operating and support models**

The interaction of the operating model and the support model is key to the functioning and effectiveness of the service. This is based on the expectation that initial housing and the possibility of secure long-term housing provides the survivors with space to focus on goals and actions for improving their own well-being and that of their children. The service is also based on the expectation that high quality of the housing conditions boosts emotional wellbeing for the first few months, and gives the survivors space to hope and dream, confidence and courage to continue in their journey towards independence and freedom from domestic abuse; that it generates self-belief and self-worth and creates positive cycles, some results of which may not be realised until years down the line.



## 6. Finances – costs and benefits

This section summarises the financial model for Rhea, showing the income and providing a breakdown of costs for the project over the calendar years of 2018 and 2019. Appendix 1 gives further information on the calculations made to reach an average income per property over cost and a break-even occupancy rate.

### 6.1 Introduction

The Rhea operating model is based on the lease by Commonweal to Solace of high quality and well-maintained properties on a subsidised lease. Two of these properties are three bedroom and the rest are two-bedroom properties. Solace are paid by Southwark Council via Housing Benefit allocations on a nightly rate. The difference between the income received in Housing Benefit and the rent paid by Solace to Commonweal enables the employment of a Key Worker and covers costs of management and support functions. This maximises the cost-effectiveness of the pilot. This arrangement is, however, contextual and it is important to recognise that the availability of below market rate, high quality housing stock (and opportunities for grant funding to cover or subsidise support costs) will differ across areas, time and political and economic contexts. This is an issue for replicability, discussed further in **9. Issues regarding replication**. Given this, the cost benefit analysis below shows that joint working to establish a working funding structure for such a project has potential to reap significant cost saving.

### 6.2 Income and costs

This section outlines the financial model for the project. Figures are shown as an example of what can be achieved against costs. We recognise that in replication areas will use different specific financial models and that costs may differ slightly across these areas and models.

The calculations fully outlined in Appendix 1 conclude that the income received per year was £136,286 in the calendar year 2018 and £143,074 in the calendar year 2019.

Table 1 below shows a breakdown of all identified costs for the Rhea project for the calendar years 1st January to 31st December 2018 and 2019. Property costs are broken down into rent and diverse property on-costs such as Council tax and service charges, utilities and maintenance.

**Table 1: Costs for Rhea project for years 1st January to 31st December 2018 and 2019, respectively**

<b>Staff costs</b>	<b>2018</b>		<b>2019</b>	
Key worker post (inc salary, NI, pension)		£17,134		£21,410
Cost of line management and direct support (Proportion of time spent, includes data analyst cost)		£6,152		£7,390
<b>Other costs</b>				
Travel & IT costs		£1,886		£2,148
License fee		£91		£93
Other staff costs (Recruitment, DBS, Training etc)		£391		£405
<b>Property costs</b>				
Rent paid to Commonweal	£57,118		£61,610	
Property x (unnamed for safety) 23/3/18 - 31/3/18 Rent	£152			
Council Tax, Service Charge	£4,703		£2,856	
Utilities (electricity, gas, water)	£9,233		£15,211	
Repairs, maintenance, renewals, replacements, equipment service, boiler servicing	£10,096		£11,797	
Cleaning, gardening	£1,043		£3,397	
TV License, Health & Safety	£1,241		£1,695	
		£83,587		£96,566
<b>Central cost allocation</b>		£15,832		£18,698
(Proportionate contribution to cost of infrastructure e.g. Finance, HR, Governance & Communications)				
<b>Total costs</b>		<b>£125,073</b>		<b>£146,710</b>
<b>Income over /under cost</b>		<b>£11,213</b>		<b>-£3,636</b>

The Key Worker was initially employed for 3.5 days per week (0.7 FTE); this was subsequently increased to 4 days per week (0.8FTE). Her work covers support for survivors in all eight properties. It is useful to note here that a Key Worker could potentially support more survivors in more properties if properties were less geographically dispersed, as travel time would be lessened. The location of the properties is however important in terms of being geographically removed and hence protected from the women's perpetrators – this safety is paramount. In terms of replication closer positioning of properties should only be considered if safety can also be assured. Whilst some limited cover may be provided by the Solace Independent Domestic Abuse Advisor (IDVA) worker (e.g. in covering priority needs during sickness or Annual Leave), this is minimal and costings relating to this have not been included in calculations.

Other costs reported are line management time, travel budget, a small proportion of Data Analyst time and a contribution towards central management functions and office overheads.

## 6.3 Analysis of cost-benefit

The cost and income calculations show an income generated of £11,213 over the cost of the project for the calendar year 2018 and income of £3,636 less than the cost of the project in the calendar year 2019. Over the lifetime of the pilot, the model achieved an approximate balance between cost and income. The break-even occupancy rate for the properties, based on these costs, is 89% in 2018 and 96% in 2019.

Based on these figures, in 2018 the average annual cost of rent plus support per property is £15,634, this is more than offset by the average annual income per property of £17,035, giving an average income over and above cost for the year of £1,401 per property, based on reported occupancy. This is of negligible significance in any assessment of the financial model. In 2019 the average cost per property is £18,338 and the average income per property was £17,884. Therefore, the average deficit per property for this period was £452.75.

These average costs can be contrasted to the Home & Communities Agency (HCA 2016) report that suggested supported housing across the UK costed between £8,400 and £14,000 per unit per annum. The cost of the Rhea properties is higher than this range, even without the small 2018 income over costs being included. The HCA 2016 report, however, does not specify the levels of support provided and is not based solely on family sized properties (2 and 3 bedroom houses) and inflation since 2016 will have increased annual costs. All of these factors combined may account for the difference between the Rhea housing costs and the HCA 2016 figures.

It is also important to balance the costs of the service against the impact demonstrated by the data from Solace and collecting directly through the evaluation. Costs that are slightly higher than average for supported housing noted above from HCA figures need to be weighed against the appropriateness of the accommodation and the hypothesis that higher levels of bespoke support is linked to better outcomes (and in particular, long term outcomes). The 2019 Home Office published report 'The economic and social costs of domestic abuse', whilst noting the intricacies of calculating the financial costs of domestic abuse per individual, arrives at the figure of £34,015 per annum. This figure includes the costs of physical and emotional harm; lost output; health services; support services for survivors; police resources; criminal legal costs and civil legal costs. The Rhea Project supported 17 women to remove themselves from domestic abuse or other forms of VAWG and additionally gain positive personal and family outcomes during the 2 years from 2018 and 2019. When the costs of the Rhea Project are referenced directly against this Home Office cost estimate of domestic abuse involving one individual survivor, it can be clearly seen that the equivalent saving of £1156,510 to the public purse represents excellent value for money. Furthermore, it is important to note that much of this saving is effective at Local Authority level and not just national level.

There is further justification within the research literature for this argument. For example, 2009 research by Walby on cost benefit indicates that costs of domestic violence (sic) to public budgets are inversely proportionate to levels of public investment in services.<sup>xvi</sup> Higher investment reduces costs of physical and mental health harm to survivors as well as affected children. Iyengar and Sabik (2009)<sup>xvii</sup> note the cost-effective nature of investment into domestic violence (sic) programmes, highlighting housing support in particular.

There is also an inequalities perspective which is important when considering cost-benefit. Whilst levels of domestic violence in society as a whole are high, and it is often talked about being universal in nature, poverty and other characteristics can lead to increased vulnerability to domestic violence and seemingly insurmountable barriers to escaping the situation.<sup>xviii</sup> Lack of appropriate housing that accommodates women with children is a particular example. The benefit to women who are already coping with inequitable adversity contexts can be argued to justify what is relatively little additional cost to cover high quality, bespoke support.

## 6.4 Increasing cost effectiveness

There appear to be two main elements of the service that could be adapted in future continuation or replication. Firstly, the allocation of properties that were geographically closer would reduce travel time for the Key Worker and therefore maximise benefits from that role. Provision of smaller properties (flats) would also decrease costs, as would provision of lower quality properties or unfurnished



properties. However, we strongly suggest that this would be a false economy and would potentially put at risk the positive outcomes reported in this evaluation. There are several important issues for consideration in type of property allocation. Firstly, the element of choice for survivors in where they are located is an important part of the appeal of the project, as is the quality and furnished nature of the properties. Interviews with survivors indicate that these aspects have been highly significant in creating positive impact (see below 7.2). Secondly, an assessment of likely numbers of children in placements would be necessary before deciding on smaller properties, to ensure that these could accommodate their needs. Again, interviews to date indicate that the extent to which children feel happy and settled in the new accommodation is a significant contributor to the survivor's wellbeing and ability to move forward in their lives (see below 7.2). The size and quality of properties (and up to date maintenance of the properties) is key to this. We therefore warn against an overemphasis on proximity of properties or quality of properties, with a view to reducing costs slightly, as our findings indicate that this would jeopardise outcomes and longer-term financial investment, for relatively little short term saving. In any case, our evaluation has found the project to be of high cost-benefit as the model stands.





## 7. Impacts

This section reports impact for those survivors who have received a service from Rhea. It has been based on the basis of findings of qualitative interviews undertaken by the evaluators with nine survivors which were designed specifically to assess impact against the Theory of Change. The findings from these interviews are also complemented by service data received from Solace for seventeen survivors who received services from Rhea within the data collection period, including outcome data for nine who had moved on from the project within the same period. It should be noted that this service data is standard dataset across Solace services and therefore not specific to the Rhea Theory of Change.

### 7.1 Impact on Southwark Housing system

The Rhea Project is part of Southwark Housing Solution's Whole Housing Systems Approach. This approach is embedded in policy as well as in practice, enshrined in their commitment that no woman experiencing domestic abuse and presenting to Housing will be left homeless. The positioning of Rhea within a broader departmental and council strategy is a key element of its success as it embeds the intervention within a broader framework of support as well as strengthening its role into achieving broader outcomes. This is in contrast to it being a standalone project with all of the potential fragility that this would imply. Other elements of the Whole Housing Systems Approach include a rolling programme of training for frontline housing staff (delivered by Solace), an advice and support service which includes to the LGBTQ community who have been made homeless due to domestic abuse (delivered by Stonewall) and a worker who supports women with complex needs (in particular those living on the streets, leaving prison and/or who are sexually exploited. There is now a four-bedroom property for women with complex needs to be housed immediately whilst fuller assessment is undertaken. This integrated whole systems approach is important to reaching an overarching mission of ensuring comprehensive support to women experiencing domestic abuse as it targets a range of circumstances as well as differing risk levels.

The Rhea Manager reported that the siting of the Rhea Key Worker within Southwark Housing Solutions has resulted in improved referral pathways, smoother transition, and better outcomes for survivors. This has stemmed from an improved understanding on the part of Housing staff of the aims of the project and the needs of survivors themselves. Over the timespan of the Project to date, this worker has shifted from being seen as something of an outsider to a recognised member of the wider Housing team.

The training provided by Solace for Housing Staff is, in itself, an innovative initiative that could be written up for learning to be shared across other Local Authorities.

## 7.2 Impact on survivors and children

In the timespan of January 2018 to February 2019, nine interviews were carried out with survivors who were still in Commonweal housing and receiving Rhea services. These interviews, framed around the Theory of Change, represent the primary data for survivor impact.

Outcome data is also collected by Solace as survivors enter and exit the Rhea project, through their service wide monitoring data set. Data supplied shows that there were 9 survivors who had received services and had exited the project by 31st December 2019. The data provided by Solace is anonymised and therefore it is not possible for the evaluators to cross reference in terms of identity, to verify the extent to which this is the case for individual survivors.

Despite these limitations the Solace monitoring data is worth noting as both triangulation of, and providing additional depth to, the interview data.

### Summary of impact in relation to the Theory of Change

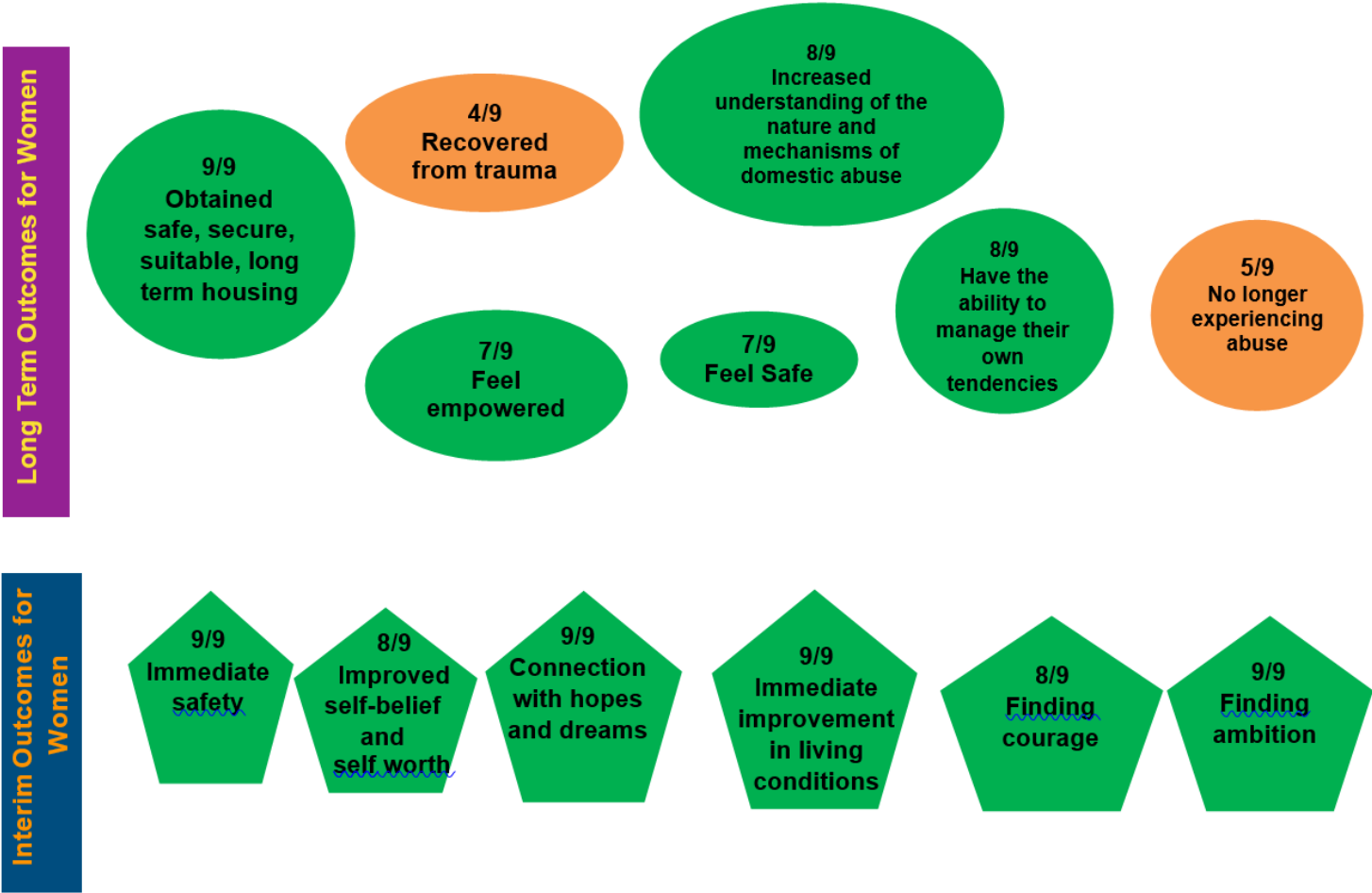
Figure 3 overleaf summarises the impacts from the project related to the Theory of Change, drawing on the combined data from the interviews and the Solace exit outcomes. It highlights the high level of interim and longer-term outcomes for survivors across all the desired outcomes within the Theory of Change. Figure 3 illustrates the strong indicators of the project's effectiveness. Furthermore, we are confident that in the cases where survivors did not report positive outcomes, there were specific contextual issues for at least some that provided a possible explanation as to why this was the case.

It is important to note that numbers given are taken from interviews (N=9) or exit data (N=9) where appropriate. These are different but overlapping groups of survivors as outlined above, due to leave dates. Where survivors have reported some change but the Theory of Change specifies total change, these reports have not been counted. For example, two survivors who reported reduced abuse have not been counted as they did not report absence of abuse.

The text to follow Figure 3 describes the detail of these outcome reports.

Figure 3: Summary of survivor impacts mapped against Theory of Change

Key: Red = 0-3 survivors reported this outcome in interviews or exit data; Amber = 4-6 reported; Green = 7-9 reported



## Emotional and psychological well-being

In interviews, self-reported improvements in emotional and psychological welfare were pronounced. Seven out of nine of those interviewed reported that they had increased significantly in confidence, which is linked to development of agency (specified in the Theory of Change). The survivors linked this increased confidence to attaining a position of immediate safety and also to the input of the Key Worker. One said that she had always been a confident and empowered person and this was not an issue for her on coming into the project. One said that the relationship with the perpetrator remained problematic, and that this continued to negatively impact on her confidence and emotional wellbeing.

The same seven interviewees reported feeling that they felt empowered as a result of their time in the project, for example:



**I feel so powerful now, so much stronger. I think a lot of it is that I was really listened to for the first time in my life, it feels like.**

**(interviewee S2)**



This finding is significant given the explicit outcome target of empowerment in the Theory of Change.

In relation to self-worth, five interviewees said that they felt better able to 'stand up for my rights' (interviewee M), relating this not just to domestic abuse issues but also to self-advocacy with Housing and other services. An additional three interviews reported that their self-worth had increased, albeit with less specific examples of how this was the case.

All nine interviewees said that they felt their time in the project had given them the space to hope and dream, a target interim outcome of the Theory of Change. All nine interviews also reported that they had specific goals for their future lives and felt positive about meeting them, reflecting the Theory of Change interim outcome of finding ambition. Four said that their goals for the future were to continue to work and develop personally and professionally. Four said that their dream was to continue to establish a safe and secure upbringing for their children and to be the best mother they could be.



In relation to finding courage, eight out of nine interviews reported ‘feeling braver’. They linked this in their examples to self-advocacy with services and with the perpetrator (when they needed to negotiate access to their joint children).

“

**I didn’t used to say boo to a goose but now I stand up for myself (and my kids) a lot more. I have realised that what I want and what I think is right is important. I used to just go along with what everyone else said but not anymore. Now, well, I’m still scared sometimes to say what I think but I do it anyway. I have to take a deep breath but I can do it.**

(Interviewee M).

”

The exit outcome data received from Solace additionally showed that four out of nine survivors reported fewer symptoms of trauma and anxiety by the time of move on. Four out of nine reported that they had developed improved coping strategies during their time in the project.



## Present and future safety

In interviews, all survivors praised the Rhea model and the importance of the independent accommodation in establishing their immediate safety. Several reported that they would have found it much harder or impossible to leave the perpetrator to go into a Refuge with their children, for example:

“

**I didn't want to be in Refuge and anyway I couldn't be because of my son's age. So, Rhea really saved us actually. I don't know how we would have got out together if not, and I wouldn't have left him there" (her son).**

(interviewee S1)

”

“

**Children are happy and that means I'm happy. It takes the stress away. I think if I hadn't come in Rhea, I might have gone back because in the Refuge I would have been scared and missed my kids**

(interviewee M)

”

Four interviewees also made a link in what they said, between immediate and longer-term safety, for example:



**Even better, I know that I can stay feeling safe as long as I don't relax too much (i.e. in boundaries with the perpetrator). I suppose it's set me up, coming here. It's given me space and a way of getting something permanent for us.**

(interviewee S2).



These findings are supported by the Solace data on Rhea exit. Here, eight out of nine survivors reported significant or some improvement in their perception of their own safety. Of these, seven reported significant improvement and one reported some improvement. The remaining survivor reported their perception of their own safety as somewhat, rather than significantly, worse. This was due to ongoing threat from the perpetrator.

Emotional or physical abuse was recorded in the Rhea exit data as ceased in five out of nine cases and in a further case there was a significant reduction recorded. For the remaining three survivors, abuse was recorded as no change for one and worse for one. One survivor did not disclose an outcome.

In relation to abuse specifically categorised by jealous, controlling behaviour, the Solace exit data shows that for five out of the nine survivors who had moved on, this perpetrator behaviour had ceased, and for a further one it has significantly reduced. Of the remaining two survivors who had moved on, no change was recorded for one and a response of 'don't know' was recorded for the other.

All nine survivors remained unreconciled to the perpetrator at move on with none of them having contact through social media.

### **Increased understanding of nature and mechanisms of domestic abuse**

This 'revolving door' issue is often cited as a 'problem' in supporting survivors fleeing from domestic abuse situations to achieve long-term, sustainable outcomes. It was an explicit longer-term outcome target identified by Solace representatives in developing the Theory of Change. As evaluators we initially wondered whether this outcome could be demonstrated. However, eight interviewees reported positive increase in awareness of controlling behaviour (and how it operates) and also reported change in terms of their attitude to involvement in controlling relationships. We have

interpreted our findings here to be positive outcomes in relation to the interim outcome target of Increased understanding of nature and mechanisms of domestic abuse represented in the Theory of Change. Moreover, three of these were particularly articulate in demonstrating a sophisticated understanding of the risk of 'slipping back' into abusive relationships. These findings are outlined in more detail below.

Eight out of nine interviewees reported that they had changed their perceptions and understanding of the issues relating to domestic abuse and felt that it was highly unlikely or unlikely that they would get 'drawn in' to abuse relationships in the future, for example:

**“ I think what’s important about that is that I understand the mindset and the games better. ”**  
(interviewee S1)

Three reported the proviso that they knew how easy it was for them to succumb to the triggers that might involve them in abusive relationships. They linked this understanding to a greater awareness of the issues that they had reached through Key Work sessions, for example:

**“ Along with my own family and friends my key worker got me through. If you were just plopped here, that would be much harder to cope, to not go back, I was quite independent, but I was always backed up. ”**  
(interviewee S1)

These three interviewees reported extreme wariness about becoming involved in any future relationship at all for the foreseeable future, but that if they did they would “be looking out for the signs” (interviewee G) of it being potentially abusive.

## Financial well-being

In relation to financial abuse, seven of the nine survivors interviewed (still under the Rhea Project at the time) reported that they felt better able to manage their finances now than before they entered the project, for example:



**I feel I will be able to deal with benefits, money and the council more confidently in the future. I can manage my own money better now. I have learned to ask for a receipt now when I pay my bills.**

(interviewee P)



This data was supported by findings from the Rhea exit data. Seven out of nine survivors that had moved on from Rhea reported that financial abuse had ceased and a further survivor reported a significant reduction in financial abuse. The remaining survivor reported no change.

## Employment, training and education

Employment, training and education was not explicit within the Theory of Change. Despite this, within the qualitative interviews three survivors who came into Rhea with employment reported that the project had helped them to sustain their employment, despite moving further away from their workplace. Two interviewees had accessed further education during their time within Rhea, and a further three had explicit plans to access further education in the academic year to follow.

These findings are supported by Rhea exit records. These show that, although no survivors who previously did not have employment gained new employment during their time in Rhea, the four out of nine that had employment when they entered the project, reported at exit that they had been able to sustain it with the support of the project.

## Access and use of other support and external agency involvement

Four survivors in interviews reported that support from Rhea had helped them to negotiate pathways into and through other services, and that they felt more confident in liaising with other services (see above). Schools were specified by two of these interviewees and Children's Services were specified by the other two interviewees. From Solace data that included survivors still in the project as well as those who had moved on (n=17), ten showed other external agency involvement. These agencies included: Children's Services (for 7 survivors); GP (for 7 survivors); Housing (for 4 survivors); Citizens Advice Bureau (for 1 survivor); Education (for 1 survivor); Hospital (1 survivor) and 2 cases in which the agency name is not recorded.

## Outcomes for children

Whilst Rhea does not provide direct support for children, it does aim to provide basic parenting support as part of the holistic package of support for the survivor. It can also signpost parent survivors to the wider Solace parenting or children's interventions.

The findings from the interviews indicate that positive outcomes for children is a potential spin off outcome from the project, over and above the outcome targets in the Theory of Change. For example:



**It helped me understand her (the child's) perspective so that helped me understand her better. To understand that she is being manipulated by her dad and she is stuck in the middle, so to understand that she needed a bit of time and understanding. Thing is it helped me manage my expectations about her being stuck in the middle and to understand that it has impact on her as well, so that really helped.**

(interviewee M)



The data from the qualitative interviews shows that seven out of the nine survivors reported that their understanding of parenting had improved. The same seven also reported that their relationships with their children had improved. All seven reported that they felt that their children's emotional welfare had significantly improved. They all identified the removal of themselves and their children from the violent, abusive situation into a safe and appropriate place to live as the most important factor contributing to this impact. For example, interviewee S1 who said:





**My son says that it gave him a calm place to live, stability and structure to get our lives back, and move on from a secure position.**



Four interviewees reported that improvements in their own mental health and sense of control had helped to improve relationships with their children. Five also identified their better understanding of positive parenting strategies on their relationships with their children. Those who reported these impacts found it difficult to extricate what specifically had helped them to achieve these outcomes, but a universal and explicit theme was the quality of support they had had from the Rhea Key Worker as a contribution to their own emotional wellbeing, which they felt in turn had a significant impact on their own and their children's emotional and psychological wellbeing. All interviewees reporting positive changes for their children felt that these were sustainable changes, that they could build on going forward.

The same seven survivors that said that the emotional welfare of their children had improved, also reported in the interviews that their children had other positive outcomes. Three reported improved school attendance and engagement for their children, four reported better behaviour at school and/or home and two reported that they felt their children had better chances of positive outcomes as they went forward into adolescence or young adulthood. They all felt that these stemmed from improved safety, security and emotional and psychological welfare that had resulted from their experience of Rhea.

## 8. Key challenges and learning

This section outlines key challenges and learning in relation to the project. There is learning in relation to embedding changing practice into wider structures and systems, appropriate staffing levels and the nature and dispersal of the properties themselves. Much of this learning has been addressed within the evaluation period, resulting in changed practices, resourcing and systems. These are highlighted below as well as in other relevant sections of this report (in particular, sections **3. Operating Model** and **4. Support Model**).

### 8.1 Structures and systems

The relationship between Southwark Housing Solutions and Solace is an essential underpinning of the service. Excellent relationships have been established based on mutual professional respect, with the Housing Manager's view being that Solace 'bring excellence to the relationship'. He defined this in terms of them having a gender-focused approach, being solution focused and being clearly focused on the needs of the survivors. When questioned what would happen if key stakeholders in the three-way partnership left post, all felt that the ways of working in partnership were now embedded within the operational cultures and policies and so would be sustainable. All professional stakeholders reported that having a Solace staff member sited within Southwark Housing has reaped benefits. It has improved the suitability of referrals and assessments. It has also built relationships between partners so that conversations and joint working can happen in a more fluid, relational way than if workers were based on different sites. In addition, the risk assessment form used by the Solace staff member who is embedded within the Southwark Housing Team has been tightened up. These two factors together mean that referrals are now more appropriate for the criteria of the service, whereas previously some survivors placed had inappropriately high needs to be able to benefit from the project.

At the inception of Rhea referral and assessment arrangements were largely driven by the Head of Housing Solutions Service within Southwark Council. These arrangements are now part of a Whole Housing Systems Approach and as such are embedded in policy. This is vital to ensure the consistency and sustainability of this approach beyond one pioneering worker. Other aspects of the Whole Housing Approach include:

- compulsory training for 100% of service staff in domestic abuse best practice
- an outreach hub for females with complex needs and who are sleeping rough, leaving prison or working in the sex industry
- provision of advocacy and advice services by another voluntary sector organisation

As such, Rhea is part of a wider approach within Southwark Housing Solutions rather

than an isolated project. This allows Rhea to be both embedded and sustained within a broader systems approach.



**I think if I hadn't come in Rhea, I might have gone back because in the Refuge I would have been scared and missed my kids.**



## 8.2 Staffing and caseloads

A key challenge of the project has been the capacity of the Key Worker role. Rhea Managers and the previous Key Work post holder acknowledge the post should ideally be full-time, but budget restraints have prohibited this. However, time allocation has been increased during the project lifespan to 0.8 FTE. The travel distance and time between the properties presents a challenge to how much support can be provided in finite hours. However, it is important to note here that properties do need to be sufficiently dispersed to allow survivors to be accommodated in safety. In relation to replication, the exact optimum arrangement would vary from area to area and would need to be carefully assessed at a local level, with survivor safety considerations outweighing cost factors.

'Emotional labour' demands on the Key Worker are high and it has been important that the role is supported as effectively as possible to avoid burn out and high turnover. The role is highly relational and involves direct support with survivors who are trying to rebuild their lives from crisis situations. The support provided, therefore, is unlikely to be contained to office hours and 'official' working days of a part-time contract. One post holder early in the evaluation period found herself responding by phone to survivors beyond her working/paid hours. There is an out of office emergency support arrangement but, due to the trust and relationships established, survivors would usually only want to speak to her. The interviews with survivors themselves substantiate this. However, clearer expectations were later established with the residents which has considerably reduced this demand.

It is important also for replication that the caseload is balanced. Too high a number of survivors with children open to children's social work, would be an unsustainable burden on the key worker's capacity.

## 8.3 Properties

The properties provided under the pilot have been of high quality and furnished, and all stakeholders feel that this has contributed to the positive outcomes shown. Property maintenance and compliance is the responsibility of Solace and is resource intensive. This has been considerably improved by Solace having recently taken on someone with a specific remit to manage health and safety, repairs, compliance and clean-up between tenants in the properties. In addition, the Rhea Manager has now completed an overhaul of all maintenance contracts and has ensured that these are as tight as possible in terms of reliability of contractors and value for money.

Apart from property maintenance, Rhea also has a responsibility to ensure that the survivors and lone workers are safe. Solace has a lone worker policy and staff have to check in and out, which is vital but also reflects in increased time costs.

Whilst it is inappropriate in this report to specify security arrangements, it is important to note that security is always a prime consideration for housing provision for survivors. CCTV can enhance security and also allow the managing organisation to be assured that tenancy agreements are being adhered to by the survivors (that, for example, ex partners are not visiting the property).



## 9. Issues regarding replication

The findings of the evaluation indicate a strong potential for replication in other Local Authority areas. The project meets a clearly identified need and is strongly aligned with social policy and legislation. As previously identified, it represents a way of looking at the societal problem of domestic abuse and other forms of VAWG in a new way that embeds change for individual survivors in a systems approach. There is agreement across stakeholders that the project has high replication potential and as evaluators we agree with this. It has demonstrated positive outcomes that are shown to be consistent in triangulation. Although costing more than some supported housing (using HCA 2016 figures), we feel that it represents excellent value for money in the short and longer term and a substantial saving to the public purse at local and national levels. This section examines these points and other learning in more detail below.

As described above in **3. Operating Model**, the Rhea operating model is based on the lease by Commonweal to Solace of high quality, furnished and well-maintained properties at below market rate. The difference between this expenditure by Solace and the income received in Housing Benefit enables the employment of a Key Worker and covers costs of management and support functions. This maximises the cost-effectiveness of the pilot. Although this is a contextual arrangement specific to this partnership (and therefore specific to Commonweal's operating model) this should not be a barrier to replication elsewhere. High quality and furnished housing stock appear to be a critical success factor in relation to positive impact, along with the high quality and bespoke support provided. For the Rhea pilot, this housing stock has been provided at below market rate, and replication would most likely necessitate a need for funding over and above income from housing benefit. However, this still represents strong value for money as without the Commonweal accommodation, overall costs are likely to be comparable or even higher within mainstream Tenants Associations, but with no guarantee of positive outcomes. In short, the cost benefit analysis appears to show excellent value of the service, particularly in light of the positive outcomes shown by the evaluation findings.

There appear to be two main elements of the service that could potentially be considered in future continuation or replication, in order to enhance cost effectiveness. The first is in relation to maximising the time effectiveness of the Key Worker post. The allocation of properties that were geographically closer would reduce travel time for the Key Worker and therefore potentially maximise benefits from that role (conditionally on this arrangement being safe for survivors). A job share arrangement could, in theory, decrease travel time if it were split across two geographical areas. However, the risk is that this negatively impacts on the availability of the Key Work post-holder to survivors.



Provision of smaller or unfurnished properties (flats) would also decrease costs, although an assessment of likely numbers of children in placements would be necessary, to ensure that smaller housing provision could accommodate their needs. The average number of children from survivor data provided to date is two.

Rhea managers have reflected that ideally, as with most pilot projects, it would have been more cost effective for some funding to have been provided upfront in the first year, in order to allow for the organisation to set up systems and relationships. This would have avoided many of the 'teething issues' that needed to be ironed out later, for example, relationship building between Rhea staff and frontline staff at Southwark Housing Solutions. This arrangement, however, does not align with the funding model of this project. If, in any replication of the model, there was the option of finding Local Authority or Charitable Trust funding to 'pump prime' the project, it appears that this would be of benefit in 'kick-starting' systems change and improve cost-effectiveness.

Both Rhea managers and Southwark Housing Solutions representatives felt that the project can and should be replicated. Although it should be instigated by Local Authority Housing Departments, Solace manager representatives and Southwark Housing representative felt that any voluntary sector organisation who runs floating support could potentially deliver the service. However, a specialist provider would be ideal and we strongly suggest that, to be effective, any provision would require an in-depth understanding of the fundamentals in operating a floating support model such as effective risk assessment, support for lone working and the demands around property maintenance as well as the issues relating to Violence Against Women and Girls.

Residents who were interviewed were unanimous in advocating for replication. They felt that all Local Authorities should instigate a version of the Rhea model. Reasons given included clear references to long term transformation and increased empowerment and agency (for example, "because it has changed me, hopefully forever"; "I know how to look after myself now").

The experience of the Rhea pilot demonstrates that for maximum impact and sustainability, any similar project would require strong leadership within the Local Authority Housing Department to drive new ways of working forward in a setting that can often be resistant to change. More effective individualised support to Rhea residents appears to have been an invaluable enabler of the positive outcomes shown. However, the evaluation findings indicate that tangible systems change, which becomes embedded in Local Authority Housing policy and practice, is essential for long term sustainability and cost-benefit ratio. Subject to this consideration, we have no hesitation in highlighting the potential of the pilot for replication in other areas.

“

**I think it should be in every area of  
the country ... it has changed me,  
hopefully for ever.**

”



## 10. Conclusions

The Rhea project is a partnership between Southwark Housing, Commonweal and Solace Women's Aid. The project is intended as an action learning intervention, with a view to exploring and assessing replicability potential.

The aim of the pilot, and consequently the evaluation, is to identify whether a partnership between Housing and service providers through a systems approach can lead to better outcomes for women who are fleeing domestic abuse and other forms of VAWG and who have low to medium support needs.

The Theory of Change behind the intervention is that immediate access to good quality housing, combined with holistic, needs-led, home-based support, can create a safe and empowering space for women who are survivors of domestic abuse or other forms of VAWG to re-kindle their hopes and dreams for the future, increase their self-confidence and take more control over their futures leading to positive longer term outcomes.

The key findings from the evaluation show that the model has resulted in highly positive outcomes. Survivors reported significant impact in relation to the outcomes identified in the Theory of Change and other outcomes not anticipated in the Theory of Change, including positive outcomes for their children.

The evaluators were asked to make recommendations regarding the replicability of the project and the authors are convinced that the project has demonstrated very high value and cost effectiveness and could be replicated elsewhere. Replication should be based on effective partnerships within a systems model and adequate funding, as well as practical considerations as outlined to follow:

- A demonstrable commitment by the relevant Local Authority Housing Department would be critical to replication success. This should include commitment of a senior manager or strategic leader, but also needs to be integrated into a system wide approach for consistency and sustainability.
- Some Solace staff and managers have expressed the view that it may be possible for the support to be delivered by a provider that does not specialise in domestic abuse related service intervention. However, we feel it is important to emphasise our view that specialist understanding of the issues involved would be a fundamental success factor for replication. Ideally, the project partnership should include a specialist domestic abuse/VAWG provider.
- The evaluation identified some areas where costs could be reduced but there were concerns expressed that such cost restrictions might have an impact of the

safety of the women or the quality of the intervention. Given the level of cost-benefit value that the project represents we do not recommend changes in these areas.

- The provision of subsidised housing by Commonweal is a key factor in making this project financially viable. The costs could alternatively be provided by grant funding from Local Authority and/or charitable sources, or a combination. The arrangement of this partnership should not be viewed as a barrier to replication, as third sector partners can access several different types of additional funding sources. Overall, the project represents high cost-benefit value.

We view provision of high quality self-contained, affordable housing to be crucial to replication success.

We therefore strongly recommend the model for replication in other areas, subject to the considerations highlighted by the evaluation being considered and addressed. It is an excellent model for addressing this complex social need.

“

**I know I can stay feeling safe.**

”



# Appendix 1: Detailed calculations of income and property costs

The figures in Tables A1.1 and A1.2 below represent costs of properties to Rhea and income generated at full occupancy through Housing Benefit in 2018 and 2019. Table A1.1 below shows monthly costs of respective properties against the rate of income per night across the two calendar years. Table A1.2 shows the annual cost and theoretical maximum income that could be generated on each property, assuming full occupancy for 365 nights per year, across the two calendar years.

**Table A1.1: Cost of properties at reduced rent provided by Commonweal against nightly income from LB Southwark by property.**  
Covers periods 1st January to 31st December in 2018 and 2019.

	2018		2019	
Property	Monthly cost in rent paid to Commonweal	Nightly income from LB Southwark	Monthly cost in rent paid to Commonweal	Nightly income from LB Southwark
Property 1	£689.75	£45.50	£792.75	£53.50
Property 2	£515.08	£45.50	£592.00	£48.00
Property 3	£689.75	£45.50	£792.66	£53.50
Property 4	£630.24	£57	£724.22	£57.50
Property 5	£689.75	£45.50	£792.75	£53.50
Property 6	£515.09	£45.50	£515.09	£48.00
Property 7	£515.09	£45.50	£515.09	£48.00
Property 8	£515.09	£57	£515.09	£57.00

*NB: Nightly income rates are higher for Property 4 and Property 8 because they are three-bedroom properties. All others are two-bedroom properties.*



**Table A1.2: Cost per year of properties at reduced rent provided by Commonweal against calculation of yearly income at full occupancy from LB Southwark. Covers periods 1st January to 31st December in 2018 and 2019.**

	2018		2019	
Property	Annual rent paid to Commonweal (monthly charge x 12)	Max annual income from LB Southwark (nightly rate x 365)	Annual rent paid to Commonweal (monthly charge x 12)	Max annual income from LB Southwark (nightly rate x 365)
Property 1	£8,277.00	£16,607.50	£9,513.00	£19,528.00
Property 2	£6,180.96	£16,607.50	£7,104.00	£17,520.00
Property 3	£8,277.00	£16,607.50	£9,512.00	£19,528.00
Property 4	£7,562.88	£20,805.00	£8,691.00	£20,988.00
Property 5	£8,277.00	£16,607.50	£9,513.00	£19,528.00
Property 6	£6,181.08	£16,607.50	£6,181.00	£17,520.00
Property 7	£6,181.08	£16,607.50	£6,181.00	£17,520.00
Property 8	£6,181.08	£20,805	£6,181.00	£20,805.00
<b>Total</b>	<b>£57,118.08</b>	<b>£141,255.00</b>	<b>£62,876.00</b>	<b>£152,937.00</b>

Table A1.3 below shows the income that supports the project. Rhea have advised that the actual rent received for the period was £136,286 in 2018 and 143,074 in 2019. In the case of Rhea, there is no additional grant income for the project. Housing Benefit income makes up the total income. The income figure shown is net of voids and arrears.

**Table A1.3: Actual income for Rhea for the calendar year 1st January to 31st December in 2018 and 2019**

<b>Income</b>		
Housing Benefit	2018	2019
Housing Benefit income from Southwark Council (Actual value net of voids and arrears)	£136,286	£143,074
Other income	£0	£0
<b>Total Income</b>	<b>£136,286</b>	<b>£143,074</b>

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