Influential factors for Violence against Women and Girls

Evidence synthesis

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Contents

Explanatory Note

The content of this document contains sensitive, potentially triggering themes from the outset, including but not limited to violence, trauma, sexual abuse, and suicide. We appreciate that this may lead to negative emotional responses, and readers are advised to prioritise their emotional wellbeing when reading this document.

The open-source data available for some influential factors included in this document is limited, which restricted the depth to which some factors could be explored in relation to violence against women and girls (VAWG). This was particularly evident in the protective role of some factors. While certain risk factors, for example negative engagement with education have clear converse protective factors, such as supportive educational environments, this is not true for all influential factors.

In addition, much of the literature discusses domestic abuse, rather than violence against women and girls as a whole or other specific types of VAWG, for example online crimes or exploitation. Furthermore, the evidence available for the influential factors for victimisation compared to perpetration of violence against women and girls varied dependent on the factor being explored, highlighting gaps in the evidence base.

It is important to mention that the public health approach focuses on the reduction of risk factors and promotion of protective factors to tackle violence, including violence against women and girls. Part of this includes addressing individual factors that can increase a person's risk of the perpetration or victimisation of violence, in our exploration of these individual factors we have tried to avoid the use of any victim-blaming language. None of the influential factors explored, for example the increased risk faced by women and girls from ethnic minority backgrounds, are the fault of the women and girls who experience violence and it is critical to remember that their experience is perpetuated by structural, social and economic factors.

Introduction

The aim of this document is to offer insight and increase understanding of factors that influence violence against women and girls by:

- Collating and reviewing appropriate evidence,
- Providing a contextual summary of several risk and protective factors, and
- Highlighting knowledge gaps

This document should be read in conjunction with the Violence Against Women and Girls Evidence Synthesis, which provides a greater understanding of the offences and behaviours that constitute violence against women and girls. This document can also be read alongside the wider Influential Factors document that explores the factors that influence serious violence more broadly.

Risk and Protective Factors

In this document, we refer to the influential factors for violence against women and girls; these can also be referred to as risk and protective factors. Risk factors are associated with a higher likelihood of engaging with or experiencing violence and exploitation. Protective factors are the inverse, whereby they can reduce the likelihood of engaging with or experiencing violence and exploitation.

Some risk and protective factors can be conceptualised as being on different ends of the same continuum, for example economic stress within relationships has been identified as a risk factor for violence against women and girls, and conversely, women's economic empowerment, for example secure employment, has been identified as a protective factor against violence.

It is important to note that neither risk or protective factors directly cause or prevent any form of violence. Having a risk factor does not predict involvement in violence and it is not a predisposition, as such we refer to these collectively as influential factors for violence.

Understanding influential factors

A crucial part of reducing violence against women and girls, helping women and girls feel safe as well as improving general health and wellbeing is understanding the influential factors. At its most fundamental level, the Violence Reduction Partnership (VRP) aims to reduce the frequency and intensity of violence risk factors whilst promoting protective factors.

The VRP use the four-level socio-ecological model (individual, relationship, community, and societal) to better understand violence and the effect of potential prevention strategies. It allows an understanding of the range of factors that put people at risk for violence or protect them from experiencing or perpetrating violence. The socio-ecological model emphasises that single risk factors do not directly cause violence, instead it is the interaction amongst different

risk factors that influence the level of risk. An interpretation of the socio-ecological model applied to violence against women and girls can be found below.

Societal	Community	Relationship	Individual
• Poverty • Economic, social, and gender inequalities • Masculinity linked to aggression and dominance • Weak legal and criminal justice system • Perpetrators not prosecuted • Employment opportunities • Public policies • Societal and cultural norms that support violence • Discriminatory family law	• High unemployment • High population density • Social isolation • Lack of information • Inadequate victim care • Schools and workplaces not addressing VAWG • Poor safety in public spaces • Challenging traditional gender roles • Victim-blaming • Community violence	• Family dysfunction • Intergenerational violence • Poor parenting practices • Parental conflict • Peers who engage in violence • Low socio-economic status • Socio-economic stress • Family honour • Poor communication	• Gender, age, and education • A family history of violence • Witnessing violence against women and girls • Victim of childhood abuse or neglect • Economic disadvantage • Unemployment • Mental health problems • Alcohol and substance misuse • Disabilities • Sex work • Refugee status

Table 1 - Risk and Protective Factors of Violence Against Women and Girls

The influential factors discussed in this document traverse through the four levels of the socio-ecological model and explore how these interact and intersect with one another.

Violence Against Women and Girls

One in four women have been raped or sexually assaulted as an adult (Rape Crisis England and Wales, 2026), and every three days a woman is killed by a man in the UK (Femicide Census, 2025). Rape Crisis estimates that 6.3 million women in England and Wales have been raped or sexually assaulted since the age of 16 (Rape Crisis England and Wales, 2026).

The term Violence Against Women and Girls (VAWG) encapsulates a wide range of abuses and behaviours, the commonality of which is that they disproportionately affect women and girls. Crimes against women and girls include rape, other sexual offences, domestic abuse, stalking, 'honour-based' abuse, and image-based abuse amongst many others.

Domestic abuse currently accounts for around 15% of all recorded crime and provides the context in which other crimes including coercive control, sexual offences and rape occur. It is

also a key driver for stalking and harassment. The proliferation and availability of technology has provided increased methods, forms, and systems through which VAWG offences can be committed.

The impact of violence against women and girls is significant and long-lasting, the most prominent impacts of VAWG (Gov.uk, 2021) include:

- **A detrimental effect on mental health:** this can be short or long-term and can include anger, frustration, decreased self-esteem, depression, anxiety, post-traumatic stress disorder, and loss of identity.
- **Physical harm**: victims of violence against women and girls have poorer physical health outcomes, have been found to engage in poorer health behaviours such as smoking, and some crimes can result in long-term physical health complications.
- **Negative employment, educational and financial impacts:** experiencing violence can impact on victim and survivors' educational attainment, employment, and income prospects due to absence from school or work or being unable to find or keep employment. Sustained domestic abuse has been linked to a lack of financial independence.
- **Homelessness:** domestic abuse can lead to homelessness either due to a victim losing their income or having to flee to escape an abusive situation.
- **A negative impact on children and family:** exposure to domestic abuse can impact on children's educational attainment and mental health and increase the risk of them engaging in risky behaviour, for example substance misuse and increase their vulnerability to being involved in further crime.
- **Making women feel less safe:** research has found that only 24% of women feel very safe walking alone after dark, compared to 46% of men.

Gender as an influential factor

Gender functions as an influential factor in that women experience higher rates of domestic and sexual violence victimisation and are more likely to be coerced and experience fear, than men. Gender is interlinked with other societal factors, such as peer relationships, mental health, and economic opportunity. As this document focuses on the influential factors for violence against women and girls, gender will not be explored as a standalone factor.

The perpetuation of gender stereotypes influences experiences of violence, as a victim or perpetrator. Gender stereotypes and the patriarchy contribute to poor mental health in children and young adults, higher male suicide rates, low self-esteem in girls, and enable a culture of toxic masculinity and violence against women to continue unchecked (Pemberton, 2017). Gender stereotyped behaviour in early childhood predicts physical aggression in adolescence (Kung et al., 2017) and is linked to domestic abuse (McCarthy et al., 2018).

Intimate partner violence both results from and perpetuates societal stereotypes of gender. These stereotypes reinforce inequity, placing power with men, encouraging social norms,

unfair distribution of resources, and internalised misogynistic beliefs. Perpetration of intimate partner violence by men is linked to masculine ideology which relies on masculinity being defined as strength, control, and sexual dominance which can be demonstrated through violence towards women and girls (McCarthy et al., 2018). This is further enforced by experiencing other risk factors, for example growing up in an abusive household where aggression and violence are normalised.

Cultural practices and norms can also influence gender-based violence. Violent behaviours become normalised when there are shared beliefs that violent behaviour is both typical and appropriate. Certain cultural practices have been present in communities for so long that they become accepted, for example forced marriage and female genital mutilation (Alexander-Scott et al., 2016). These acts of violence can result in isolation, limited career opportunities, and financial dependence, which further increase the likelihood of experiencing violence and exploitation.

Rape culture is an extreme characteristic of gender stereotypes where sexual violence is treated as the norm and victim-survivors are blamed for their own assaults (Taub, 2014). Norms within rape culture protect rapists, promote impunity, and shame victims, treating rape as a problem to be solved through improving the behaviour of potential victims rather than potential rapists. Rape myths trivialise incidents of sexual assaults and are associated with sexual aggression, sexual assault perpetration, and rape proclivity. Research has showed that the acceptance of rape myths predicted rape proclivity in college men (O'Connor, 2021).

Misogyny, defined as a hatred, dislike, or mistrust of women, is prevalent throughout society. Experiencing misogyny has long-term impacts on victims with many altering their future behaviour, for example avoiding the area or only going out with others. Misogynistic attitudes are related to stereotypical views of gender roles and those who hold these are more tolerant of the impact of domestic abuse (Women's Aid, 2022). Concerns have been rising in recent years over the prevalence of misogynistic views and behaviours amongst school students, including at primary school. The impact of misogyny on young girls and boys will be explored throughout the document.

Misogynistic attitudes are also becoming increasingly prevalent online with the rise of social media and online forums. These attitudes are touted by involuntary celibate, 'incel', communities, the ideology of these communities contributes to a sense of isolation resulting in increased frustration and jealousy of others (Van Brunt & Taylor, 2021). This sub-culture is perpetuated by online anti-woman communities described as the "manosphere", where incels exhibit extremely violent and hostile views towards women. Engaging with these beliefs online can influence offline behaviour and reiterate misogynistic views. The impacts of social media, technology and artificial intelligence (AI) will be explored as an influential factor for violence against women and girls.

Trauma & Resilience

Trauma can be defined as a lasting emotional response that often results from living through a distressing event (CAMH, 2026). Early trauma and childhood trauma have been identified as factors influencing serious violence and exploitation (Crest Advisory, 2021). Adverse Childhood Experiences refer to potentially traumatic events that have occurred during childhood (Centre for Disease Control & Prevention, 2026). There are 10 adverse childhood experiences:

- Physical Abuse
- Sexual Abuse
- Emotional Abuse
- Physical Neglect
- Emotional Neglect
- Mental Illness

- Incarcerated household member
- Domestic Abuse
- Substance Use
- Divorce or Parental Separation

Population studies have observed a relationship between exposure to adverse childhood experiences and future violence, whether as a victim, a perpetrator, or both. A nationally representative study of almost 4,000 participants in England found that respondents with four or more adverse childhood experiences were seven times more likely to have been a victim of violence in the past year, and eight times more likely to have committed a violent act than those with no adverse childhood experiences (Bellis et al., 2014). Whilst this study did not explore the relationship between adverse childhood experiences and violence against women and girls specifically, it highlights how trauma operates as an influential factor for violence.

It has been suggested that there could be intergenerational effects of experiencing trauma, particularly in terms of domestic abuse. Witnessing or experiencing violence as a child can significantly increase the risk of victimisation or perpetration of domestic violence as an adult (Guedes & Mikton, 2013). A study of women accessing domestic violence services in Ireland indicated that adverse childhood experiences have a significant presence among women service users (Morton et al., 2022). 58% of service users experienced two or more adverse childhood experiences in their childhood and 33% experienced four or more. Briere's (2002) self-trauma model posits that experiencing interpersonal trauma as a child can impair a person's capacity to establish and maintain stable and healthy relationships in adulthood.

Growing up around domestic abuse can have long-term negative impacts on the health and wellbeing of children. Being raised in environments where violence and abuse are frequent can normalise this behaviour, thus making it difficult for children to establish and maintain healthy relationships in adulthood (Safelives, 2026). Social learning theory has been used to contextualise the intergenerational transmission of violence victimisation and perpetration within families (Messinger, 2017). Children are socialised into accepting violence as part of their lived experience, and this may lead to the perpetration of violence in their romantic relationships in adulthood or normalising their own victimisation as an adult. However, this is not inevitable and many children who experience adverse childhood experiences lead productive and healthy lives.

Experiencing adverse childhood experiences can also increase the likelihood of men perpetrating violence against women in girls in later life. A meta-analysis of adverse childhood experiences and intimate partner violence found that higher numbers of adverse childhood experiences were significantly associated with greater intimate partner violence perpetration for men (Zhu et al., 2024). One study found that boys were 45 times more likely to have

engaged in dating violence as adolescents when they had been sexually assaulted by a family member during their childhood (Duke et al., 2010).

Experiencing child sexual abuse has been found to be a strong predictor of adult sexual victimisation and perpetration. Child sexual abuse results in negative psychological, social, and physiological outcomes that are risk factors for rape and intimate partner violence, thus victims of child sexual abuse are particularly vulnerable to future sexual violence. A study found that out of all 10 adverse childhood experiences, child sexual abuse was the largest single risk factor for adult sexual violence, followed by emotional abuse, and emotional neglect. Women who report experiencing child sexual abuse are over three times more likely to experience sexual violence in adulthood, than someone who did not experience child sexual abuse (Ports et al., 2016). It has also been evidenced that the majority of children aged 5 to 18 years old who display harmful sexual behaviour have previously been sexually abused or experienced other types of trauma or neglect (Chromy, 2007). However, it is crucial to remember that most children who experience sexual abuse do not go on to abuse others, emphasising how influential factors are not deterministic.

Women are more likely than men to use substances to cope with the trauma that results from experiencing violence. The combination of adverse childhood experiences and substance use places women at further risk for future domestic violence and sexual abuse. Substance abuse as an influential factor for violence against women and girls is explored here. For men, experiencing post-traumatic stress disorder (PTSD) mediates the relationship between sexual abuse and intimate partner violence. Research (Gilbar et al., 2020) has found that physical neglect, as an adverse childhood experience, in particular can lead to PTSD and then on to the perpetration of severe intimate partner violence. It has been suggested that experiencing trauma in childhood can lead to a sense of powerlessness and this increases men's need for power over others, heightening the risk for domestic abuse perpetration (Voith et al., 2018). These findings indicate that programmes working with perpetrators to address abusive behaviours should include a focus on childhood experiences and the resulting effects, for example PTSD (Brown et al., 2015).

As well as the trauma of adverse childhood experiences, experiencing violence as an adult woman can result in trauma that causes long-lasting harm. Even if women are able to leave abusive partners, they remain at a high, and it could be argued increased, risk of violence and homicide post-separation. One UK study found that 90% of women reported experiencing post-separation abuse (Sharp-Jeffs et al., 2018). Furthermore, 32% of UK femicide cases included in the 2022 Femicide Report that were committed by an intimate partner, occurred post-separation (Femicide Census, 2025). Continued abuse post-separation means trauma also continues. Experiencing trauma can lead to "*hyperarousal, avoidance and intrusive symbols of past violence, all of which can also be symptoms of PTSD*" (Hulley et al., 2022). However, it has been argued that over-diagnosis of PTSD pathologises victim-survivors and does not fully acknowledge the negative effects trauma can cause for those experiencing

domestic abuse. Continuous Traumatic Stress (CTS) has been suggested as an alternative concept for understanding the impact of trauma on victim-survivors of domestic abuse. CTS assesses the impact of living in contexts of *ongoing* violence, emphasising the importance of context and the complexity of differentiating between a real or perceived threat. Research (Hulley et al., 2022) with 52 UK-based women who had experienced domestic abuse found that it was rare that these women had only experienced one violent relationship. Instead, violence was chronic and for some this had been the case since childhood and had continued post-separation from intimate partners. Almost a third of women had witnessed parental domestic abuse or directly experienced abuse and neglect as children. Women described ongoing harassment and threats after leaving their partners which created anxieties that came to dominate their lives.

When referencing trauma, it is important to discuss resilience also. Resilience is defined as the capacity to successfully adapt and recover even after a traumatic experience (Wilder Research, 2014). This can be enhanced by strengthening protective factors. For victim-survivors of violence against women and girls, resilience has been described as 'coming back', denoting a slower process of adaptation, discovery, and acceptance of a new life after trauma. The study that explored Continuous Traumatic Stress also examined the strength and resilience displayed by victim-survivors (Hulley et al., 2022). Women described feeling the need to 'regain control' of their lives and adapt to new circumstances even when this was a challenging process. Often victim-survivors resilience was not bolstered through the presence of external protection, for example the criminal justice system or support services, highlighting a need for policy and practice to understand and address the complexity of post-separation trauma.

Inequalities

Social inequalities refer to the unequal distribution of and unequal access to resources and opportunities. As such, individuals and social groups have differing systematic advantages and disadvantages in life chances, living conditions, opportunity structures, and life outcomes (Suter, 2014). People are also known to be sensitive to and influenced by their social environment through social cohesion, trust, segregation, crime and safety (Muggah, 2020). Life chances and opportunities can be significantly influenced by where people live, the circumstances they grow up in, and personal characteristics such as their race, ethnicity and disability status. Similarly, our geography, or where we live, determines which jobs and incomes are available, and often reflect socio-economic inequalities embedded within and across regions. Stigma, discrimination and lack of opportunities within or between areas can lead to barriers in accessing support services or reporting violence to the police. These inequalities are rooted in and has significant costs for the wider economy and society.

Violence against women and girls in all its forms is both a cause and a consequence of women's inequality. Compounding inequalities are also present and pervasive. Inequality and violence against women and girls traverse several influential factors including age, deprivation, race, employment, education, health and social division. These structural and social inequalities can also be drivers or catalysts for perpetration of criminality and violence, or they can increase an individual's vulnerability to being subjected to violence.

Inequalities can reproduce and subsequently widen across generations. This can also be seen in the transmission of generational trauma, substance use and social attitudes (Betthäuser, 2017; Meulewaeter et al., 2019). Sexist beliefs, gender biases, and misogynistic behaviours can pass from one generation to the next, often subconsciously, through parenting and social conditioning (Barni et al., 2022). However, they can be overtly expressed which can lead to normalisation of negative attitudes and actions towards women. Unlearning these behaviours involves identifying and challenging deep-seated biases.

As denoted by Women's Aid (2025) it is particularly important to recognise that men do not experience domestic abuse as part of embedded, structural inequalities against their sex. For women domestic abuse and other crimes which disproportionately affect women are rooted in inequalities between women and men. Sexism and misogyny *"serve to excuse men's abusive behaviour in intimate relationships and create barriers to female survivors being believed and supported to leave abusive men"* (Women's Aid, 2026, p.22). Other forms of inequality such as racism, ageism, ableism and women who self-define as LGBT+ also intersect with gender inequality to affect and compound a woman's experiences of domestic abuse. This can determine people's ability to access building blocks such as jobs, education and income, as well as impact their health. The 2025 UK Government's Freedom from Violence and Abuse strategy noted how it's a "*shameful truth that some of the most alarming*

health inequalities are those faced by victims and survivors of domestic abuse and sexual violence".

In 2022 to 2024, life expectancy at birth in the most deprived areas of England was 78.3 years for females, compared with 86.4 years in the least deprived areas (ONS, 2026). When considering healthy life expectancy at birth, which is the expected number of years spent in "good" health, in the most deprived areas of England was and 48.2 years (62% of life) for females whereas in the least deprived areas, healthy life expectancy was 68.5 years (accounting 79% of life) for females. These are stark differences which reflect the inequality and inequity faced by women based on where they live. As will be discussed in this document, the consequences and impacts of poorer health will be examined as these also contribute to the risk of violence towards women and girls.

Violence does not affect everyone equally, the structural factors which shape society have to be considered and acted upon. Between 2011 and 2021, the female ethnic minority population of England increased by 42%, from 5.4 million to 7.7 million people (ONS, 2023). Women from ethnic minority groups face intersectional barriers across their life course in relation to statutory services and can encounter overlapping forms of disadvantage and discrimination. This in turn can restrict their ability to recognise, report or receive support for their experiences of violence. It is imperative to improve access to and delivery of personalised, culturally competent and equitable provision, as well as translation and interpretation services to ensure all women and their needs can be supported.

The 2025/26 Snapshot report by the End Violence Against Women Coalition highlighted the weaponisation of VAWG for anti-migrant and racist agendas. These discourses have become mainstreamed and have caused great harm both to local communities and to survivors. The Coalition have called upon the Government to challenge this weaponisation of migration and promote an accurate picture of violence against women and girls, holding those who spread misinformation to account.

To address violence against women and girls, there must also be greater understanding of invisible power relations and how they shape inequality. There has to be a resolute focus on tackling inequalities, including those driven by racism and discrimination which requires shared responsibility and collective action. This action needs long term investment and commitment and without secure continued funding, the very services best placed to respond to survivors facing intersecting inequalities are placed at greatest risk (Women's Aid, 2026).

Deprivation and poverty

Deprivation and poverty can often be used interchangeably but there are distinctions between them. Deprivation refers to a general lack of resources and opportunities meaning

unmet needs. Whereas, poverty can be viewed as an outcome of deprivation, such as not having adequate money to get by because of limited resources and opportunities (Ministry of Housing, Communities and Local Government, 2019).

The importance of resource distribution and power imbalances must be considered in order to tackle VAWG. Deprivation and poverty alongside domestic abuse can be cyclical, whereby people living in poverty are more likely to experience domestic abuse, and domestic abuse may lead to poverty, with poverty reducing the ability to escape a domestic abuse relationship (VISION Consortium, 2023). Nonetheless, women and men of any socioeconomic background can be a victim or perpetrator of violence and abuse.

Deprivation has been found to increase risk of domestic abuse towards women (Yakubovich et al., 2020). The research, led by the University of Oxford, found that women who had lived in the most deprived neighbourhoods for longer durations in their childhoods were 36% more likely to experience any intimate partner violence (IPV) between ages 18 to 21. They also experienced this violence more frequently than women who had spent less or no time living in more deprived neighbourhoods. Material deprivation has been associated with a higher risk of violence-related injury for adolescent girls aged 11 to 17 compared with adolescent boys in South Wales (Nasr et al., 2016). In England, research funded by the Joseph Roundtree Foundation reported that among women in poverty, 38% have experienced violence and abuse, compared with 27% of women not in poverty (Joseph Roundtree Foundation, 2016). The association between abuse and poverty was also shown to be somewhat stronger in women than men. One in twenty women in poverty had a weapon used against them, compared with one in a hundred women not in poverty. Women in poverty were also twice as likely as other women to have been raped either as children or adults.

A Scottish study of 5000 children examined how poverty and other factors, such as age and education, impacted women's experience of domestic abuse and the effects on their children (Skafida, 2023). It was found that 20% of mums in the lowest income group (incomes of less than £12,000) experienced domestic abuse compared to 7% in the highest income group. Mums in the lowest income group also experienced more types of abuse (physical violence, sexual abuse and coercive control) and more often, compared to those on the highest incomes (13% compared to 3%). When considering age, 19% of mums aged under 20 had experienced abuse, compared to 8% among mothers aged 40 years or older when their child was born. Further analysis showed that among the youngest mums living on the lowest incomes, one in three reported experiencing domestic abuse. Mums living in poverty but with degree level educational qualifications were more likely to report experiencing domestic abuse than women in similar circumstances but with fewer educational qualifications.

In 2022, a survey conducted by Women's Aid found 96% of respondents had seen a negative impact on the amount of money available to them as a result of cost-of-living increases (Women's Aid, 2022). Two thirds of survivors reported that perpetrators were using the cost-of-living increase and concerns about financial hardship as a tool for coercive control.

Financial disadvantage presents as an additional barrier and can prevent women from leaving an abusive relationship or it can make it harder for them to leave. Financial dependence and worries about money can leave women feeling isolated and provide additional struggles when rebuilding their lives post separation.

Young women are more likely to be in poverty than older women, with 49% of the women identified by Agenda Alliance and the Joseph Roundtree Foundation (2016) as being in poverty were aged 16 to 34, compared to 21% not in poverty. Women in poverty are also more likely than women not in poverty to belong to a minority ethnic group and to rent their home rather than being the owner occupier. This highlights the importance of viewing deprivation and poverty with an intersectional lens to ensure the distinct and varying needs of all women are considered and acted upon.

As mentioned, Black and Minority Ethnic women experience considerably higher rates of poverty than white women in the UK. Evidence suggests that on numerous socio-economic measures, women from Indian and Chinese groups compare favourably with other ethnic groups including White British. Whereas women from Pakistani, Bangladeshi and Black groups are most affected by socio-economic adversity and poverty (King's Fund, 2025). It is vital to note that women from ethnic minority groups are not a homogenous group, and their experiences and needs differ significantly between and within ethnic groups. There is a wider societal context in which deprivation and structural racism can reinforce inequalities among ethnic minority women including for example, in education, housing and employment (King's Fund, 2025). These each will be discussed in turn to examine their influence in the perpetration and risk of violence against women and girls.

Poverty and deprivation can affect the health of women. Unemployment, poor quality work and insufficient income are associated with poor long-term mental health and physical health complications. As discussed later in this document, mental health is an additional influential factor for both perpetration and victimisation of violence against women and girls as it can increase risk but also be a consequence of violence. The influence of suicide and bereavement will also be reviewed in this document as evidence suggests that those in the most deprived areas were found to be 3 times more likely to suffer death by suicide (Children and Young People's Centre for Justice, 2022).

Women in poverty experiencing abuse have far fewer opportunities to leave abusive relationships and are more vulnerable while in them. Employment opportunities, working arrangements, income, financial savings, and housing insecurity can all influence and restrict a woman's ability to end a relationship. Similarly, it is necessary to recognise that poverty and gender are closely related, and that the routes into and out of poverty across the life course disproportionately affect women (Bennett & Daly, 2014). Caring responsibilities, family structure and lower earnings can also compound women's experiences of poverty and experiences of violence.

Deprivation and poverty may increase the likelihood of an individual perpetrating violence towards women. Alcohol consumption and drug use, unemployment, and low academic attainment have been shown to be associated with experiencing poverty and deprivation. Growing up in poverty has been noted to increase the likelihood of exposure to childhood abuse and neglect (Gibbs et al, 2020). These in turn are also influential factors for perpetration of violence and while deprivation is not a direct cause of violence, it can create conditions which impacts the acceptance, severity and frequency of violence.

Research exploring the interaction between poverty and VAWG perpetration specifically is minimal, especially in a UK based context. As such there are limitations of existing data sources in this area. A large proportion of research examining links between poverty and VAWG is international meaning its generalisability to a UK context is difficult and unsuitable. Research has also tended to focus on how poverty can heighten a woman's vulnerability and risk of victimisation or how experiencing and fleeing violence can lead to experience of poverty. This is an obvious knowledge gap and provides an opportunity for longitudinal cohort studies examining perpetrators' experiences of poverty prior and during perpetration.

Contemporary research has highlighted that perceptions of poverty, notably feeling worse off than peers can also increase risk, particularly for engaging in behaviours such as bullying (YEF, 2025) which in turn has been linked to intimate partner violence in later relationships. While this evidence is largely unsubstantiated, the YEF suggests future research on subjective experiences of deprivation could also be worthwhile.

Previous evidence has inferred that men living in poor neighbourhoods who experience higher levels of stress and social powerlessness, would be more likely to affirm their male identity and display negative behaviours, including violence against female partners (Cano and Vivian, 2001; Strauss, Gilles, & Suzanne, 2006). Masculinity has been associated with dominance, control and emotional stoicism (Young et al., 2024). While in the criminal justice system the constructions of masculinity affect young men and boys' behaviour, decision making and engagement with interventions. It has been viewed that these ideals persist in ways that create identity conflicts for boys and men. Societal expectations of toughness and invulnerability can coincide with the pressures of adolescence, poverty and marginalisation. This can result in harmful behaviours such as violence, coercive control and sexual offending (King-Hill, 2026).

In order to address violence against women and girls it is imperative to understand the nuanced ways in which poverty and deprivation are associated with vulnerability, both in terms of perpetration and victimisation. It should be acknowledged that available evidence provides an association between poverty and violence against women and girls but does not provide evidence on causation. This is due to the difficulty in isolating the effects of poverty from its possible causes and consequences (YEF, 2025). Therefore, we need to continue to understand the scale of poverty which women face, the nature of their experiences, and how

the life chances of women experiencing both poverty and extensive violence and abuse differ from the rest of the population.

Race and Ethnicity

Not all women experience domestic abuse in the same way or are at similar levels of risk. In the year ending March 2025, a higher proportion of Black and mixed-race women experienced domestic abuse, 12.8% and 10% respectively, compared to 9% of White women (Gov.uk, 2025). Women from ethnic minority backgrounds are also over-represented in domestic homicide rates. From April 2022 to March 2023, 22% of female victims of domestic homicide were from minoritised ethnic backgrounds, despite making up only 18% of the general population (Gov.uk, 2024). Women from ethnic minority backgrounds are also at increased risk of particular forms of violence against women and girls, including forced marriage, [1], and female genital mutilation. Race and ethnicity in and of itself does not make women from these communities more prone to experiencing violence but rather shapes women's experiences through social and structural inequalities, leading to longer, more severe abuse, greater isolation and reduced access to support). Structural factors, including poverty, racism, and state policies, which themselves are influential factors for serious violence, create a 'conducive context' that facilitates violence in domestic settings (Kelly, 2007). Race intersects with other influential factors to create compounded vulnerability which, when met with cultural insensitivity from professionals, place women from ethnic minorities at increased risk from violence. Women's Aid, 2021). Structural factors, including poverty, racism, and state policies, which themselves are influential factors for serious violence, create a 'conducive context' that facilitates violence in domestic settings (Kelly, 2007). Race intersects with other influential factors to create compounded vulnerability which, when met with cultural insensitivity from professionals, place women from ethnic minorities at increased risk from violence.

Women and girls from ethnic minority backgrounds appear to be at an increased risk of certain types of economic abuse. Economic abuse is any behaviour that has a substantial adverse effect on a person's ability to acquire, use, or maintain money or other property, or to obtain goods and services. Surviving Economic Abuse (2025) reported that women from Black, Asian and other ethnic minority backgrounds were more than two times as likely to experience economic abuse than White women (24% compared to 11%). 20% of Black, Asian and Ethnic Minority women had experienced any form of economic restriction (limiting the victim-survivors access to and use of financial or material resources), compared to 9% of all UK women. They are particularly vulnerable to having perpetrators control access to their personal bank accounts and being deprived of personal belongings. Women from an ethnic minority background were also more likely to experience being prevented from having log in details for their online accounts and being forced to get married for the abusers' financial benefit. The harms caused by experiencing economic abuse disproportionately impact Black,

[1] Honour-based abuse is described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or “honour”

Asian, and Ethnic Minority women. 31% of mixed-race women reported having insufficient money to cover heating, electricity, food, clothes or other essential items or bills compared to 17% of White women. 51% of Black women said the abuser's economic abuse made them feel afraid or fearful compared to 35% of White women. These disparities reflect how racism, marginalisation, and structural barriers such as poverty can compound economic abuse (Surviving Economic Abuse, 2025).

As noted earlier, women from ethnic minority backgrounds are at an increased risk of particular forms of violence against women and girls, including forced marriage and honour-based abuse. The Forced Marriage Unit reported in 2024 that 65% of cases were from women from South Asian countries (Gov.uk, 2024) and 97% of contacts to Karma Nirvana, the honour-based abuse helpline, were women from Black, Asian, and ethnic minority backgrounds (Karma Nirvana, 2025). Honour-based abuse is frequently viewed as a 'cultural' problem rather than a form of violence against women and girls. Whilst perpetrators of honour-based abuse do use conservative and patriarchal interpretations of culture and religion as justification, this framing posits honour-based abuse outside of common understandings of domestic abuse and reinforces racist stereotypes. As a result, police and other professionals are reluctant to intervene to safeguard victims leaving ethnic minority women less protected (Siddiqui, 2014).

Gypsy, Roma and Traveller women may be particularly at risk from domestic abuse due to gender roles holding high importance in their communities. Women are expected to behave in a manner that places the family and home at the centre of their value system whilst men are responsible for supporting the family financially (Cemlyn et al., 2009). These gender roles interact with risk factors for violence against women and girls as Gypsy, Roma, and Traveller women have limited access to education or employment. Whilst Gypsy, Roma, and Traveller communities are close knit and supportive, this can also act as a barrier to seeking help for domestic abuse as women fear they may be socially ostracised and isolated.

Violence against women and girls exacerbates the health inequity already experienced by women from ethnic minority backgrounds, thus reinforcing their vulnerability to continued and extensive abuse. Significant ethnic inequities exist in access to and the experience and outcomes of mental health support. Women from ethnic minority backgrounds experience mental ill health at higher rather than White women (Agenda Alliance, 2019). This, combined with evidence that women in mental health services are six times more likely to experience domestic violence highlights the disproportionate risk Black, Asian, and Ethnic Minority women face (Oram et al., 2022).

Victim-survivors from ethnic minority backgrounds also face unique and additional barriers to accessing support before, during, and after experiences of violence against women and girls. Data from Refuge showed that Black women are less likely to be referred by police to their services for support (Refuge, 2021). Between March 2020 and June 2021, Black women were 14% less likely to be referred for support by police than white survivors of domestic

abuse. This relates to the notion of the 'ideal victim'. The 'ideal victim' is constructed from the assumptions attached to the label of 'victim', which allows for a hierarchy to be constructed socially and then perpetuated through societal systems supported by the media (Carrabine et al., 2004). White individuals are one of the groups who most easily fit the label of the 'ideal victim' in that, even when they are victims of violence against women and girls, they often still conform to the gendered stereotypes of femininity, being warm and caring (Budgeon, 2014). In contrast, women from ethnic minority backgrounds, and Black women especially, are often denied the label of the 'ideal victim', more frequently being framed by the media as criminal and less deserving.

Racism or fear of being viewed as racist has been identified within services as a reason for inaction when it comes to safeguarding women from an ethnic minority background who are experiencing violence. Siddiqui (2014, p.17) observed agencies, including social services, failing to treat forced marriage as a form of violence because *"they wanted to be culturally sensitive and feared allegations of racism".* In addition, an assumption that, as these are cultural issues, they should be resolved with mediation rather than protection, places ethnic minority women at further risk. For example, by *"police and social services pursuing a policy of non-intervention, including becoming involved in formal or informal mediation to reconcile women with their husbands/families rather than providing safe exit options"* (Siddiqui, 2014, p.19). This reluctance to intervene creates a 'double bind' for ethnic minority women, whereby they face patriarchal control and abuse within their communities, and racist neglect or stereotyping from society and services leading to further distrust and heightened risk.

As with domestic abuse, female victim-survivors of exploitation who are from an ethnic minority background also face barriers when reporting their experiences. There is an assumption that exploitation primarily, or exclusively, affects White British girls, *"resulting in a lack of referrals, interventions, or criminal justice involvement for Black, Asian, Minority and Ethnic girls and young women"* (The Commission on Young Lives, 2023, p.10). This assumption is rooted in the concept of 'adultification' (which is explored in detail here). In cases of exploitation, girls from an ethnic minority background are stereotyped as 'dramatic' or 'aggressive' and viewed as more resilient, thus less deserving of support and intervention.

Research into the barriers to disclosing child sexual abuse and accessing services for girls from ethnic minority communities found that the gender expectations around 'purity' in these cultures prevent disclosure to maintain honour and avoid shame. For example, expectations around sexual 'purity' cause South Asian girls experiencing child sexual abuse to feel shame that they may be blamed for the abuse which prevents disclosure. There is evidence of sexually abused children or young people being removed from their community and forced into marriage in order to prevent them from disclosing previous abuse (Ali, Butt, & Phillips, 2021). Furthermore, statutory agencies can display culturally insensitive attitudes towards people from Black, Asian, and Ethnic Minority backgrounds when disclosing sexual abuse. Professionals working in these services reported that children who are from different ethnic

minorities are not always seen as being victims and believed that the response to White children would be different. Again, this can be linked to the concept of 'adultification' with professionals commenting that *"there's sort of an assumption of young Black girls' sexuality and [a different one for] Pakistani girls. There are assumptions made about their sexual choices and sexual behaviours, even though they're both young people … racist assumptions which are held about both groups*" (Ali, Butt, & Phillips, 2021, p.38). These narratives about the sexuality of different ethnic groups prevents the provision of holistic and culturally appropriate support services (Ali, Butt, & Phillips, 2021). These cultural expectations, institutional adultification, and racist stereotypes create conditions where violence is more easily perpetrated and less likely to be addressed for girls from Black, Asian, and ethnic minority backgrounds.

"By and for" services are best placed to address the barriers to support faced by women and girls from Black, Asian, and Ethnic Minority backgrounds (Asante, 2024). Dedicated by and for services *"adopt a flexible, holistic approach, tailoring support to meet the distinct intersectional needs of Black and minoritized women"* (Lowe et al., 2025, p.11). This flexible tailored response can be achieved by responding to language needs and understanding the value of community engagement to bolster social support as a protective factor (Lowe et al., 2025). "By and for" services have been described as '*essential*' in enabling Black and ethnic minority women to leave abusive relationships and rebuild their lives in a way that lasts (Anitha et al., 2009).

Disability

An estimated 16.8 million people in the UK had a disability in 2023/24, roughly 25% of the total population (Stiebahl et al., 2025). Disability prevalence estimates are higher for women at 25% compared to 22% of men and this is evident across all age groups. Research from the Crime Survey for England and Wales indicates that disabled women are more likely to report experiencing domestic abuse. It is estimated that around 14.5% of disabled women experience domestic abuse, compared with 7.7% of non-disabled people (Gov.uk, 2025). The length and severity of abuse is also heightened for disabled women. Data from SafeLives (2017) shows that disabled victims typically endured abuse for an average of 3.3 years before accessing support, compared to 2.3 years for non-disabled victims. Disabled victims had also attended A&E as a result of their abuse more than non-disabled victims, 1.7 times in the previous 12 months compared to 1.3. In addition, the relationship between disability and violence is reciprocal, women and girls with disabilities are at increased risk of experiencing violence, while violence can lead to new or more severe disabilities. International studies have shown that as disabilities progressively worsen or support needs increase, the risk of sexual assault, physical assault, and domestic abuse increases (Hague et al., 2007).

Three primary explanations have been posed for the increased risk of violence generally amongst disabled people (Victim Support, 2016). 1) Disabled people are targeted because they are perceived by the perpetrator to be more vulnerable, 2) there is hostility directed towards disabled people in the form of hate crime or the perpetrator wanting to gain control, and 3) other personal, social, and situational factors, for example poverty, further increases disabled people's vulnerability to becoming a victim of crime.

The risk of violence against women and girls for disabled women can be exacerbated by the social context. The social model of disability does not consider disability itself to be an impairment, arguing instead that the structure of society prevents disabled people from participating fully in society. Under this model, women who are dependent on others for care and support are vulnerable to caregivers using their power to exploit and abuse (Namatovu et al., 2018). Violence against women and girls with disabilities functions to isolate them from family and friends and prevent them from seeking help. As well as care, disabled women can be dependent on their abusive partners for housing or financial security as well, further increasing their exposure to abuse.

The greater dependence of disabled women on their partner who also acts as their caregiver allows women's disabilities to be used as part of the abuse. Impairment-specific abuse has been evidenced with perpetrators denying victims access to wheelchairs and other mobility aids leaving them stranded or unable to access facilities (Thiara et al., 2011). Abuse of disabled women can also include deliberate neglect through the denial of medicines or hygiene products. Women and girls with disabilities also appear to be at an increased risk of types of economic abuse. Disabled women are nearly twice as likely to experience economic abuse

than non-disabled women (23% vs 13%). Withholding child support, stopping access to entitled benefits, and depriving victims of personal belongings were experienced by disabled women at a disproportionately higher rate than non-disabled women (Surviving Economic Abuse, 2025). Experiencing economic abuse furthers the dependence disabled women have on their perpetrators hindering their ability to leave the abusive relationship.

Disability also interacts with other factors that influence violence against women and girls, including employment and education. Some disabilities prevent women from undertaking paid employment placing them at an economic disadvantage, thus leaving them more vulnerable to entering and remaining in abusive relationships. Disabled women also tend to have a lower education level, and education acts as a protective factor for violence against women and girls. From July 2020 to June 2021, 24.9% of disabled people had a degree as their highest qualification, compared with 42.7% of non-disabled people (Stiebahl et al., 2025). In light of this, school-based education and improving disabled women's economic empowerment can reduce vulnerability to violence (Public Health England, 2015).

Disabled women experience distinct gender roles and socialisation which can influence their vulnerability to becoming a victim of violence. Societies have, throughout history, controlled the sexuality of disabled women through institutionalisation, forced sterilisation, and marriage restrictions (Namatovu et al., 2018). Disabled women have less education about sexuality, sexual and reproductive health, and are sheltered from exposure to discussions around sexuality by family, schools, and services (Public Health England, 2015). As a result, disabled women are vulnerable to violence against women and girls because they may struggle to recognise, define, or describe abuse especially when it is often *"dressed up as 'caring'"* (Thiara et al., 2011, p.763). Furthermore, there is a dominant construct of disabled women as asexual, passive, and undesirable, resulting in many victims *"believing, and being made to feel, that they were undeserving of a relationship and should be grateful"* (Thiara et al., 2011, p.764).

Victim-survivors who are disabled face additional barriers to disclosing abuse and accessing support. There is a lack of information and education available for support services to understand the needs of disabled women experiencing violence against women and girls (Walter et al., 2024). Domestic violence services for disabled women are minimal, and even when they are available, they are often inaccessible. In 2015, only 49% of domestic abuse services were fully accessible by wheelchair, 38% offered some form of specialised services to disabled women, 17% had services for visually impaired women, and only 13% of refuges were able to provide access to temporary personal care assistants (Public Health England, 2015). Disabled women also fear that they won't be believed by support services, police, or the criminal justice system and this can prevent them from disclosing or reporting experiences of violence and abuse. The perception of disabled women as lacking credibility, a notion that is reinforced by perpetrators, significantly diminishes their likelihood of reporting experiences of violence (Gjecaj, Traustadóttir, & Rice, 2025). The fear of disbelief, structural barriers, and

lack of understanding from services functions to create a culture of silence perpetuating the isolation of disabled women where they are pressured not to disclose abuse, thus normalising abuse for many disabled women (Walter et al., 2024) and furthering their vulnerability and risk.

Neurodiversity

Neurodiversity refers to the natural differences between how people's brains work and process information (Revolving Doors, 2022). Neurodiversity includes conditions such as autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), dyslexia, dyscalculia, dyspraxia, and Tourette's syndrome.

Evidence suggests that across all forms of domestic abuse, neurodivergent adults were roughly two to three times more likely to experience abuse from a partner compared to neurotypical adults (Griffiths et al., 2019). It has also been shown that when a neurodivergent young person experiences one case of victimisation, they are more likely to experience further victimisation that same year (Pfeffer, 2016). One study found that 49-80% of autistic people report having experienced violence and abuse within their personal relationships (Fox, 2025). Neurodivergent children may be particularly at risk of some forms of violence against women and girls, including sexual exploitation. It was reported in 2019 that 9.3% of sexually exploited children had a learning disability or developmental condition (Hallett et al., 2019).

Neurodivergent women are increasingly vulnerable to experiencing coercive control within relationships. Autistic women reported feeling vulnerable to coercive tactics because they had an internalized sense that by being autistic they always "got things wrong", thus interpreting the perpetrators behaviour to be "right" (Douglas & Sedgewick, 2024). Perpetrators also reportedly abused their autistic partners by using the fact that the victim was autistic against them. For example, deliberately triggering meltdowns so the perpetrator could portray the autistic victim as 'unreasonable' or using the victims misunderstanding of social interactions to convince them their behaviours were not abusive (Douglas & Sedgewick, 2024). Coercive tactics tap into autistic women's self-doubt about their social ability, for example one autistic women reported how her perpetrator would say *"you're not understanding, your friends don't actually like you. You just don't realise"* (Pearson et al., 2024, p.15). These tactics allow the perpetrator to control the narrative of the relationship contributing to a sense of helplessness in the victim.

Neurodivergent women can struggle to identify harmful and abusive behaviour in partners. 79% of autistic women who took part in a UK study reported experiencing some form of domestic abuse, rape or sexual assault, compared to 26% of the neurotypical women taking part (Sedgewick et al., 2019). The autistic women highlighted struggling to *read others,* causing confusion when the outcomes of their partners behaviour were not what they had predicted. They also reported struggling to believe people could do something other than what they literally said. In addition, neurodivergent women who have experienced multiple instances of violence commonly feel they are at fault, internalising and normalising this as a feature of being autistic (Gibbs & Pellicano, 2023).

Non-verbal women or those with profound disabilities are especially vulnerable to violence as they may be physically unable to give consent or report violence when it occurs (Tomsa et al., 2021). In cases of child sexual exploitation and abuse, the victim being unable to communicate experiences of violence can cause perpetrators to purposefully target non-verbal girls (Libster et al., 2022).

"Masking", behaviours neurodivergent people engage in to hide that they are neurodivergent, can also take the form of compliance for autistic women when they experience violence and abuse (Pearson et al., 2022). For women this can result in them suppressing their real selves and own needs to meet the needs of others, and 'fawning' can be used to avoid conflict, making them increasingly vulnerable to violence and exploitation (Psychology Today, 2024).

Neurodivergent women and girls can face barriers when reporting experiences of violence against women and girls. Mistrust and negativity towards the police and Criminal Justice System was evident, rooted in feeling unbelieved/unheard, feeling excluded from important discussions, and being treated with suspicion or hostility (Allnock & Soares, 2025). Mainstream statutory services are not specialised for neurodivergent victim-survivors with practitioners often not receiving training or reinforcing stereotypes about neurodiversity and sexuality that prevents them from effectively identifying neurodivergent women and girls as victims (Chaudhry & McGuinness, 2025).

Neurodiversity intersects with other influential factors for violence against women and girls, including employment and mental health. Neurodivergent women face barriers to employment which may result in them facing poverty and financial difficulty, further increasing their risk of exploitation and violence as a result of their dependency on a perpetrator (Tint et al., 2022). Autistic people display higher rates of social isolation and job precarity, especially because of un/underemployment and homelessness. These factors can leave neurodivergent women feeling a lack of agency or ability to make choices about their own lives.

A comorbidity between neurodivergence and post-traumatic stress disorder has been identified. Women with PTSD are at higher risk of experiencing further interpersonal trauma or experiencing trauma for a longer period. Considering 61% of neurodivergent children experience bullying, this may suggest a cycle of interpersonal violence in adulthood and subsequent PTSD (Bustinza et al., 2022). Research with autistic women found that they are more likely to experience PTSD following violence, and this is associated with future anxiety, social isolation, mental health difficulties, and increased severity of autistic traits (Pearson et al., 2022). The trauma responses that arise from experiencing violence against women and girls can create an additional barrier to support, with research finding that professionals struggle to distinguish between trauma responses and the characteristics of neurodiversity which often mimic or obscure each other (Allnock & Soares, 2025). As a result, some neurodivergent girls who had experienced sexual exploitation reported being retraumatised

by their engagement with services that failed to recognise their needs and make appropriate adjustments.

Positive relationships have been identified as a protective factor that reduces an individual's vulnerability to violence against women and girls (Douglas & Sedgewick, 2024). Neurodivergent women have reported lacking friendships, meaning they miss out on the protective advice or intervention that these relationships can offer. The lack of support from friends means neurodivergent women are more reliant on their abusive partner as their prominent relationship further normalising abusive behaviour.

Lack of sexual knowledge is a significant predictor of sexual violence generally, and actual knowledge partially mediates that risk (Joyal et al., 2021). Neurodivergent girls often do not receive adequate relationship and sex education (RSE), with many only learning about the biology and mechanisms of sex, rather than healthy relationships or consent and abusive behaviours. Relationship and sex education comes from both education establishments and parents/carers. Research found that caregivers of autistic children frequently omit essential information about sex and relationships, including how to say no, not pressure others to have sex, and how to use contraception effectively (Solomon et al., 2019). The lack of high-quality RSE leaves neurodivergent girls and women uneducated as to what are appropriate behaviours (Hannah & Stagg, 2016), and has been shown to be a factor increasing their vulnerability to sexual assault and intimate partner violence (Brown-Lavoie et al., 2014). A neurodiversity-specific sex education curriculum has been suggested as a way of increasing the knowledge of neurodivergent women and girls to effectively safeguarding them and reduce their vulnerability to abuse. Education should include parents and caregivers as well as teachers/practitioners and be rooted in the lived experiences of neurodivergent survivors (Solomon et al., 2019).

Mental health

Experiences of violence against women and girls can be the cause of mental ill health, and those experiences can exacerbate existing mental health issues. Not receiving appropriate support for unmet needs can in itself be retraumatising and deepen mental health issues (Scottish Government, 2021).

In the landscape of a high and rising mental health crisis facing young people, girls and young women are the hardest hit (Agenda Alliance and Centre for Young Lives, 2025). Young women

experience the highest rates of common mental health disorders like anxiety and depression (Abel & Newbigging, 2018). The World Health Organization (2002) identified the power differential between women and men and their access to resources in society and in the home, alongside sexual and domestic violence, as profoundly shaping women's mental health and the global disparities in their wellbeing.

While boys and young men are more likely to die by suicide, girls and young women experience the highest rates of self-harm, suicidal ideation and suicide attempts (Samaritans, 2021). Rates of self-harm and suicidal behaviour are higher for women in minority ethnic communities than for White women (Bhui, 2007). Family-based problems, including domestic abuse, community pressures, acculturative stress, discrimination and barriers to help seeking have been previously noted as important precipitating factors (Montesinos et al., 2012; Abel & Newbigging, 2018).

A Scottish study exploring poverty, social inequality and domestic abuse examined how domestic abuse affected the social and emotional development of children aged 6 to 13 (Skafida, 2023). It was apparent that children of mums who had experienced domestic abuse generally had poorer scores on different measures of social and emotional development. These children also had higher scores for 'externalising behaviours' such as disobedience, temper tantrums, hyperactivity, stealing or fighting. The perpetration of domestic abuse against mums was associated with more frequent parental use of physical punishment of children. In homes where the mum's abusive partner had been present in children's lives since birth, 26% of children (predicted probability) had been smacked at age 2 by the mum's abusive partner compared to 16% of children where an abusive partner was not continuously present since birth (Skafida, 2023). There is a significant body of evidence which has demonstrated that exposure to childhood maltreatment at any stage of development can have long-lasting consequences including an increased risk of psychiatric and mental health outcomes (Lippard & Nemeroff, 2019).

The Royal College of Psychiatrists women's survey (2024) heard from 515 respondents, of which 82% were female. The majority of respondents (59%) said violence and abuse contributed to mental illness in their female patients, closely followed by relationship issues (49%), often caused by coercive behaviour, and home and family pressures (48%). Isolation or loneliness was also listed as a common challenge facing female patients (24%), but these were noted as being made significantly worse if they were experiencing abuse. The leads for Women and Mental Health at the Royal College reiterated the importance of identifying and responding to trauma in attempts to reduce the likelihood of women and girls developing mental illness.

The mental health of women can also be heavily influenced by the social construction of gender roles and expectations. Women are more likely than men to be in part-time, low skilled, high strain jobs and low paid work alongside increasing care responsibilities (UK Household Longitudinal Study, 2025). These factors in turn can restrict or prevent a woman

from potentially leaving an abusive relationship and they can limit her options in rebuilding her life post separation, through lack of financial autonomy or limited social networks. These external factors, alongside experience of abuse and violence, can worsen a woman's mental health. Anxiety, depression, and sleep difficulties are common mental health needs reported by women experiencing domestic abuse. Alongside lack of trust in the police, previous contact with the criminal justice system and issues with harmful substance use, mental health issues can also hinder disclosure to the police or support organisations (Centre for Women's Justice, 2026).

Women may experience serious mental health struggles as a result of domestic abuse. Children, pets or family members may be targeted or weaponised as a control tactic. Animals can be threatened or harmed directly to cause not only distress to the animal but to cause equal or greater distress to the victim. Psychological violence by threatening a pet can be used by perpetrators to instil fear and compliance. This exposure to threats or actual abuse to an animal can have significant long-term mental health impacts on adult and child victim-survivors (NCDV, 2025).

Data from the Adult Psychiatric Morbidity Survey Symptoms was analysed as part of the Hidden Harm report by Scott and McManus (2016). The analysis showed 54% of women deemed to have experience of extensive physical and sexual violence and 36% of women who have experienced "extensive physical violence" meet the diagnostic criteria for at least one common mental disorder. Posttraumatic stress disorder (PTSD) was also strongly linked with experience of violence and abuse, with 78% of women in the extensive physical and sexual violence group having experienced life-threatening trauma, and 16% screening positive for PTSD. Over a third (36%) of women in the extensive physical and sexual violence group had made a suicide attempt, and a fifth (22%) self-harmed and 9% had spent time on a mental health ward (Scott & McManus, 2016). National data shows similar results. Of the women who were victims of rape or assault by penetration (including attempts) since the age of 16 years, the crime survey for England and Wales for the year ending March 2017 and year ending March 2020 combined estimated 63% reported mental or emotional problems and 10% reported that they had tried to kill themselves as a result (ONS, 2021). Evidence has also consistently shown that increasing severity of intimate partner violence is associated with worse mental health especially anxiety and PTSD, even after controlling for confounding factors (Lacey, 2013; Ferrari et al., 2016).

Gendered societal pressures on girls' appearance and behaviour, including overt experiences of sexism and harassment, have been associated with girls and young women's poor mental health (Agenda Alliance and Centre for Young Lives, 2025). A study by the Young Women's Trust (2017) found that young women aged 16-30 who experience sexism were five times more likely to suffer from clinical depression. Mental health needs to be viewed through an intersectional lens as Black and Black British women are more likely to experience a common mental health problem (29%) compared to White British women (21%) and non-British White

women (16%) (NHS England, 2017). As discussed within the document, adultification and care experience can lead to social expectations and attitudes towards young Black women and care leavers, which can influence mental health and have long term consequences. These experiences can further intensify structural inequalities and racism.

Research shows that nurses, midwives and healthcare support workers are even more likely to experience domestic abuse than the general population and rarely feel able to seek support (Dheensa et al., 2022). Nurses and midwives are also the two most female dominated professions working in the NHS in England (Royal College of Nursing, 2026). These findings presented by Dheensa (2022) were echoed by the preliminary findings shared by Gregory (2026) as part of the NAMED[2] study. A survey was conducted in 2025 and garnered 204 responses from nurses, midwives and healthcare support workers. Of the respondents, 96% were female, and 98% of respondents said they had experienced psychological and emotional abuse from a partner, ex-partner or family member, with 37% experiencing this in the past 12 months. The survey also depicted that 75% had experienced physical violence and abuse, 74% had experienced financial and economic abuse and 56% had experienced sexual violence and abuse. A qualitative study by Donovan et al (2021) found that the internalised stigma of abuse affected people's sense of identity and belonging as a health professional and caused social and professional isolation. This was noted as having a detrimental impact on mental health and productivity at work.

In a 2026 report by the Centre for Women's Justice (CWJ) research participants identified high levels of disbelief within the police and the wider criminal justice system in relation to women who report domestic abuse, including coercive control, particularly where the victim-survivor is herself suspected of offending (Hope & Williams, 2025). This was heightened when some perpetrators made counter allegations that specifically exploited women's vulnerabilities such as poor mental health. Not only was this a way to undermine a victim's credibility but to also extend the perpetrators control over them. A participant within the CWJ study spoke of a situation in which mental health medication was purposely altered by a perpetrator which led to a victim becoming involved in criminal activity. This highlights the need for police investigations to consider coercive control before they take the decision to arrest and potentially criminalise victim-survivors. Attention should also be placed on taking a trauma-informed approach whereby any aggression displayed by a woman towards the police may be a response to trauma or unmet mental health needs and should be responded to in an appropriate manner.

Migrant women without settled immigration status are known to be exposed to higher rates of domestic abuse and sexual violence, including cultural forms of harm, psychological abuse, domestic servitude and so-called 'honour-based' abuse (McIlwaine et al., 2019). Due to the No Recourse to Public Funds (NRPF) rule migrant women are also more likely to face homelessness and destitution, sexual and economic exploitation and associated mental

[2] Nursing And Midwifery Professionals' Experiences of Domestic abuse (NAMED)

health problems. Perpetrators can induce and maintain the fear of deportation for women without settled status. This dependence can make disclosure and separation from the perpetrator extremely difficult for migrant women. Women may experience worsening mental health issues due to living in isolation, enforced silence and fear. Research also suggests that because of ongoing abuse and social-environmental conditions women can hold internalised discriminative attitudes whereby they accept and internalise stigmatising messages and stereotyping about their abilities and lack of worth (Poya, 2021). This negative reinforcement can increase the likelihood of experiencing poor mental health. Migrant women are required to navigate hostile environments, characterised by dehumanising language and anti-migrant systems which limits their access to safety, support, and justice in terms of their experiences of violence and unmet needs such as mental health (Adisa, 2025).

Young men and boys within the criminal justice system have internalised damaging ideals that equate masculinity with control and aggression. These reinforced constructions of masculinity restrict emotional expression, contributing to poor mental health, substance misuse and reluctance to seek help, further increasing risk and complicating engagement. This intersects with future offending and rehabilitation (Kimmel, 2014). External factors such as substance use may mask underlying mental health struggles and further drive offending behaviour and negative portrayals of masculinity in a cyclical motion. As such there are calls for probation and youth justice practitioners to continue to better understand the interplay between masculinity and mental health with punitive model's risking an exacerbation of shame and reinforcing harmful norms (King-Hill, 2026). Trauma-informed interventions which seek to reframe masculinity and embed participation can enable practitioners to disrupt cycles of harm and support boys and young men in developing healthier identities (King-Hill, 2025). This in turn will attempt to address the root causes of VAWG offending rather than focusing solely on the symptoms.

Extreme misogyny is closely linked to poor mental health outcomes (Fleming, 2018). Young men and boys may be consuming harmful content daily, shaping attitudes toward girls and women, relationships and violence (The Children's Society, 2026). Women can also be represented as weak and manipulative which can convince boys that men must always be in control and dominance should be exerted. Incel forums have been noted as featuring discussions of depression, loneliness and suicidal ideation, however these issues are reframed as women's fault rather than addressed through help-seeking (Speckhard & Ellenberg, 2022). This externalisation of blame fosters resentment and legitimises violence as a means of reclaiming power. For some, misogynistic ideology becomes a coping mechanism for feelings of worthlessness with forums and online platforms acting as a sense of community and belonging.

For individuals who have experienced child sexual abuse, evidence suggests girls are more likely to internalise their distress and can become withdrawn, anxious, depressed and experience more somatic disorders. Boys may exhibit externalising behaviour, which is

hypermasculine and angry, engage in risky sexual behaviour, and have more suicide attempts (Evans, 2019). Sexually abused males often encounter disbelief and may feel shame associated with cultural norms of masculinity with boys being more likely than girls to resort to criminal activity as a response to sexual abuse.

Women are more likely than men to face external risk factors to mental health (Poya, 2021). These factors can include male violence, patriarchal family or community control, traditional harmful practices, sexual or labour exploitation, caring responsibilities, reduced social networks, unemployment and poverty. These risks are often interlinked and amount to compounded and prolonged conditions of discrimination and violence.

Adultification

Adultification refers to the perception that children are older than their actual age and are more mature than their age or current developmental stage (Epstein, Blake & González, 2017). This perception of maturity can result in children being seen as needing less nurturing, comfort, or protection than their actual age requires. Behaviours usually considered an aspect of childhood development including poor emotional regulation, making mistakes, and uncertainty, are instead seen as acts of aggression, incompetence or defiance (Todmia, 2025). As such, children do not receive equitable empathy and care and are denied their childhood experiences.

Adultified children can often receive harsher discipline, less emotional support and the standard protections usually afforded to children. Highlighted by the Children's Commissioner (2023) Black children are up to six times more likely to be strip searched when compared to national population figures while White children were around half as likely to be searched. A prominent, yet not isolated example is the case of child Q, a 15-year-old girl who was forcibly strip-searched in school while on her period without an appropriate adult present in December 2020. The safeguarding review found that a disciplinary response was taken in relation to a suspicion of drugs instead of Child Q's safety and welfare being the priority (CHSCP, 2022). The review concluded that adultification bias was a likely influencing factor in the two Metropolitan police officers' decision.

A consequence of adultification may be racialised anger bias whereby the emotions of Black children are viewed as angry when they are not displaying anger in any higher rates than White children (Cooke & Halberstadt, 2021). Similarly, Owens (2023) found the same behaviours seen as *'a bad day'* in White children were perceived as disrespectful or aggressive in Black children. In addition, Black children can be viewed as less innocent than their White peers meaning adultification can result in different outcomes experienced in schools, by statutory organisations, the criminal justice system and healthcare. In regard to schooling, Demi, 2019 denotes how Black children are more likely to be disciplined, suspended, or excluded than their White peers. Miller (2025) powerfully describes this racialised bias as 'metaphorically' and 'literally' denying the developmentally appropriate leniency typically extended to white children.

It is also important to consider the positioning of adultification within family violence. In a Southeastern US based study, Haselschwerdt and Tunkle (2025) identified five distinct yet interrelated ways in which young adults with domestic violence exposure histories experienced adultification. The findings showed adultification as a type of boundary infringement that places children in adult-like roles. Young adults recalled intervening to protect mothers from violence, serving as mothers' emotional support system, shielding siblings from violence and conflict, caring for siblings' daily needs, and managing parents' health and well-being. The researchers found that young adults who were exposed to

coercive controlling violence described more extensive adultification. The potential implication is the vulnerability of the child being overlooked, leaving them at more risk and the child left to assume a forced sense of independence (Davis, 2022). While this evidence brings to the forefront an important lens, adultification in a domestic violence context remains understudied.

Adultification can also be the result of girls not portraying or meeting society's hegemonic femininity standards. Sexism also exacerbates the impact of this discrimination on Black girls and young women with researchers calling for further study of the social construction of Black girlhood (Curtis et al., 2022). Exploration of how societal and cultural beliefs may serve as mechanisms to perpetuate adultification of young Black girls is required. The perception of increased maturity can also result in black girls receiving more punitive responses to behaviour as they are expected to 'know better' when a safeguarding response may have been more appropriate (Graham, 2023). Gendered judgements can combine with discrimination against minoritised girls and women to reinforce these damaging cycles (Fitzpatrick et al., 2022).

Adultification bias has been found in US based studies examining Black girls' reports of sexual harassment and bullying, as these experiences were often minimised or disregarded by school personnel (Harris & Kruger, 2020). Black girls' experiences of sexual harassment or assault can be ignored as there is a perception they are more knowledgeable about sex and adult topics. In turn this can bias officials to attribute blame and culpability to victims and can criminalise them for their own victimisation (Epstein et al., 2017).

Research has also highlighted how Black girls' mental health is impacted by the hyper sexualisation of their bodies. Girls experience regular comments on their clothing, appearance and body types, with these narratives sexually objectifying them. Adultification bias has been implicated in the lack of appropriate responses to sexual abuse of Black girls. The assumption that Black girls have greater sexual maturity and knowledge can lead professionals to minimise the nature and impact of the sexual abuse they have experienced. Consequently, their experiences are not viewed as serious enough to warrant action. In addition, Black women and girls are more likely to be criminalised and deemed as complicit in violence towards them and therefore less likely to be seen as legitimate 'victims' of sexual violence (Thiara and Roy 2020; Graham, 2023).

While exploring the adultification, health and wellbeing of young Black females, Brissett et al (2025) reports how girls will socially withdraw and become isolated in attempts to reduce scrutiny and surveillance. The reduction in psychological safety caused by adultification is evident. Heightened vigilance was noted as a form of self-protection and self-harm was described by participants as a coping mechanism in response to the adultification they experienced. The harmful perceptions generated through racial stereotypes and adultification can negatively impact the ways educators, social workers, police, and mental health professionals respond to Black girls in crisis (Meheux & Miller, 2025).

Relationships

The relationships in a person's life can be factors that either increase or reduce the risk of experiencing violence and exploitation, as a victim or perpetrator.

Secure and connected family relationships characterised by warmth, support, and positive role modelling of behaviours have been found to protect against violence perpetration for both boys and girls (Resnick et al., 2004). Girls who reported strong connections and pro-social norms within their families had lower levels of both violence perpetration and victimisation, even when these girls were considered to be at high risk of violence (Shlafer et al., 2013).

Research has found that having just one loving and consistent relationship with an adult can have a protective effect for children who have witnessed domestic abuse growing up (Allnock & Miller, 2013). In addition, parenting that utilises discipline effectively, encourages open communication, negotiates conflict, and acknowledges children's activities has been linked to reduced risks of domestic abuse in adulthood (Vézina et al., 2011). Growing up in non-violent, safe environments builds resilience and increases self-esteem, equipping women to identify abusive behaviours and thus reducing victimisation to violence.

Having positive social relationships with friends and peers can also act as a protective factor. Supportive peer relationships can reduce the likelihood of experiencing emotional and sexual abuse within intimate relationships in older adolescence (O'Donnell et al., 2023), with one study showing supportive friendships reduced the risk of later emotional abuse by 36%. Peer relationships also reduced the likelihood of experiencing sexual harassment (Swami et al., 2024).

An examination of protective factors for adolescent sexual violence found that those who did not perpetrate sexual violence in high school experienced higher empathy, parental monitoring, school belonging and social support over time compared to perpetrators of sexual violence (Basile et al., 2018). This highlights the importance of positive relationships including with parents, peers, and the wider community.

Positive relationships can also be essential for women and girls following experiences of violence. Tactics of violence against women and girls often focus on isolating victims from their friends, family, and other support systems. As such, social support for survivors can limit the adverse mental health impacts of experiencing violence (Krauss et al., 2016). Warm and caring relationships can foster effective coping strategies and bolster the wellbeing of victim-survivors building their resilience to experiences of abuse (Howell et al., 2017).

Relationships where negative attitudes towards women or acceptance of domestic violence are present have been found to be significantly associated with both victimisation and

perpetration of domestic abuse. Misogynistic views have been identified as the strongest risk factor for domestic abuse perpetration in the UK male population (Clemmow et al., 2023).

Young boys who endorse rape myths, for example that women and girls are to blame for sexual violence because they lead men and boys on, or validate victim blaming discourses, are more at risk of perpetrating abuse in their intimate relationships (Reyes et al., 2016). It can be argued that being exposed to or holding traditional beliefs around gender norms is associated with hegemonic masculinity (active, controlling, and superior) and femininity (passive, vulnerable and inferior) reinforces violence against women and girls (Connell, 1987). Misogynistic beliefs, including sexual entitlement, operates as a driver and a context that can escalate harassment into assault and normalise coercive control in relationships (Kirkman et al., 2025).

It is well documented that egalitarian relationships have lower rates of conflict and domestic abuse. In comparison, couples where the male partner takes a dominant role are almost twice as likely to experience conflict and violence, compared to more equal couples (Coleman & Strauss, 1986). In relationships where economic resources are unequal or imbalanced the prevalence of domestic abuse is increased (Fox et al., 2002). In addition, lower quality relationships, typified by low relationship satisfaction and problems within the relationship, is associated with perpetration and victimisation of coercive control and psychological abuse (Sarno et al., 2023).

The nature of relationships can also influence the risk of violence against women and girls. Ex-partners remain a risk to victim-survivors, with separation increasing the risk of victimisation. Leaving a relationship increases the risk of homicide for women, with the Femicide Census (2022) finding that 40% of women killed by a current or former partner had tried to or were separated at the time of the killing.

It is estimated that one in six children in the UK is likely to live with domestic abuse at some time in childhood (Radford et al., 2013). Experiencing domestic abuse in the household can have harmful impacts for children that may increase their vulnerability to further violence against women and girls in the future. The intergenerational transmission of domestic abuse has been evidenced in a number of studies. Exposure to domestic violence in childhood was identified as the most common risk factor for subsequent perpetration and victimisation by an intimate partner in adulthood for both women and men (Radford et al., 2019).

A number of theories have been proposed to explain the intergenerational transmission of domestic abuse. Social learning theory posits that children who witness domestic abuse view this as an acceptable way to cope with relationship problems and conflict, especially if this behaviour is modelled by the parent with whom they identify, often fathers for sons. This can be used to explain why most perpetrators of violence against women and girls are male, whilst most victims are female. Some adult women adopt the strategy of 'learned helplessness' (Walker, 1993), feeling there is no escape from their abuse. Girls who viewed their mothers

exhibiting this behaviour are at greater risk of being victims of domestic abuse as adults (Renner & Slack, 2006). Social cognitive theory explores the emotional and thought processes that underpin domestic abuse, arguing that maladaptive behaviours and understandings arise for children who live with domestic abuse (Jouriles et al., 2012). Growing up with domestic abuse can influence a person's perceptions of threat and their response to it, resulting in a heightened sense of threat and disproportionately aggressive response, suggesting that men who witness domestic abuse as children may be more vulnerable to becoming a perpetrator of violence against women and girls.

For boys witnessing domestic abuse in childhood results in externalising symptoms, including aggression, and for girls internalising symptoms, for example anxiety and depression (Radford et al., 2019). Children who witness domestic abuse during their childhood are at increased risk of suicide and self-harming behaviours, substance misuse, and school exclusion (Jaffe et al., 2012). All of these are influential factors for becoming a victim or perpetrator of violence against women and girls.

Loneliness is often a consequence experienced by young people exposed to domestic abuse in childhood, which can increase the risk of poor mental and physical health, and in turn increase vulnerability to future violence (Thoresen et al., 2018). Loneliness was more pronounced in children who also experienced deprivation, family substance misuse, and mental ill health, highlighting the interplay between the influential factors for violence against women and girls (Barnes et al., 2022). Women who experienced domestic abuse in their household as children and then in their intimate relationships as adults connected their feelings of loneliness to experiencing an abusive relationship and increasing their vulnerability to further abuse (Barnes et al., 2022).

Increasing attention has been paid to violence against girls in adolescent relationships. The impacts of intimate partner abuse for girls can be extensive and long-lasting. Recent research with over 10,000 children found that half of children in relationships say they've experienced violent or controlling behaviours (YEF, 2024).

A review of the mental health impacts of abuse found that girls under 18 reported greater adverse health outcomes, including depression and eating disorders, compared to boys (Barter et al., 2016). Sexual harassment from peers is associated with more negative outcomes for girls, including low self-esteem and confidence, self-harm, and mental ill health (Boivin et al., 2014), which in turn may be associated with increased vulnerability to experiencing violence in romantic relationships. Sexual victimisation, in the form of sexual aggression or harassment, are also associated with negative health outcomes, including binge drinking, substance misuse, unprotected sex, and mental health difficulties (Champion et al, 2004; Choudhary et al., 2012). The negative health consequences of experiencing violence in relationships in adolescence are also influential factors for further victimisation of violence against women and girls, thus furthering the risks girls face of violence.

Peer relationships can also influence behaviours within romantic relationships. Adolescents who bully their peers may also act similarly to their intimate partners (Park & Kim, 2018). An association has been evidenced between being physically, psychologically or cyber bullied by peers and an increased risk of abuse for young people aged 12-16 (Gracia-Leiva et al., 2019). Aggressive peer groups have been found to be significantly associated with the perpetration of emotional violence for both boys and girls (Barter er al., 2022). An explanation for this could be that young people whose peer groups act aggressively may try to mimic these behavioural and attitudinal norms, including in their intimate relationships.

Interventions focused on building (and re-building) positive behaviours have been identified as successfully addressing the risks heightened by negative relationship factors. Research into perpetrator programmes identified that fathers' relationships with their children can be a central motivating factor for attending a programme. Fatherhood influenced the men's motivation to take part, mostly because they wanted to regain or secure contact with their children (Stanley et al., 2012) and become a 'better dad'. They showed a strong sense of responsibility in their roles as fathers, despite their harmful behaviour. Perpetrator programmes that explicitly use men's role as fathers as a motivation for behaviour change have been shown to have positive effects on behaviour. Caring Dads, a UK based programme, was found to reduce domestic abuse incidents, improve fathers' interactions with their children, and reduce parenting stress (McConnell et al., 2017). Children and partners also reported positive changes in the perpetrator's behaviour and parenting.

Bystander interventions have often been explored in relation to adult behaviour but can be effective when taught to adolescent girls and boys. Girls who have experienced sexual victimisation themselves engage in more prosocial bystander behaviour, compared to those who have not been victims of VAWG (Banyard et al., 2020). This association between personal victimisation and bystander behaviour is influenced by social context. For women who have experienced violence this will influence their personal and social values. However, research has found that men and boys who perceived their peers to be more accepting of violence were less willing to intervene when witnessing a potentially sexually violent situation regardless of their personal feelings towards sexual violence (Brown & Messman-Moore, 2010). This highlights how influential peer relationships are in the perpetration of violence against women and girls.

Neglect

In April 2026, the Child Safeguarding Practice Review Panel published a thematic analysis examining multi-agency responses to child neglect in cases of serious harm or death in England. In their analysis of 100 rapid reviews and 34 child safeguarding practice reviews, several key challenges were identified, including the 'normalisation' of neglect. Neglect is the most common form of child maltreatment in England and can often co-occur with other harms. While distinct, poverty and neglect are intertwined and practitioners struggled to differentiate between structural hardship and parental omission. This can lead to a reluctance to name neglect which may mask harm, delay risk identification and reduce professional curiosity. Nonetheless, neglect was also found all across socio-economic groups and could be linked to high parental expectations, emotional unavailability or limited supervision (Bernard, 2019).

The cumulative nature of neglect leads to long-term developmental, emotional, and social consequences. Prolonged neglect increases the risk of mental health disorders, poor educational attainment, and social exclusion, each in turn can increase an individual's risk of perpetrating or victimisation of violence against women and girls.

The National Centre for Social Research's (NatCen) (2026) literature review identified a complex interplay of individual, familial, and systemic factors for neglect including, child-level risks such as disability and perceived behavioural problems. Parental risks were also highlighted including mental illness, substance use, domestic violence, and a history of childhood abuse. NatCen found protective factors in response to experiences of neglect including child resilience, such as high self-esteem and availability of peer support, positive kinship care and wider community level support.

Analysis of the UK's Twins Early Development Study showed childhood maltreatment to elevate the risk of IPV victimisation through its impacts on personality and mental health development (Pezzoli et al., 2026). Naughton et al (2017) reported on the internalising features of neglected adolescents. They found that neglect was associated with alcohol related problems, substance misuse, delinquency for boys and teenage pregnancy. The review found that neglected boys showed greater school engagement than neglected girls and they highlighted an association between dating violence victimisation and neglect. These findings support the previous hypotheses which suggest that girls became more depressed and withdrawn and as such become less involved with school (Tyler et al., 2008). This furthers the correlations found between neglect with peer victimisation, bullying, gang affiliation, and sexual assault (Indias, Arruabarrena, & De Paúl, 2019).

Research has shown that child neglect and domestic abuse often co-occur within families (Radford et al., 2011). In a systematic review examining childhood socioeconomic position

and adverse childhood experience Walsh et al (2019) reported that in Australia, children who experienced poverty were three times more likely to experience abuse, neglect, or be witness to domestic violence compared with those who had not experienced poverty. Evidence infers children who experience domestic violence in the home are also at higher risk of continuing the cycle of abuse as adults, either by perpetrating domestic abuse or being victims themselves (Harrison, 2021). Fang and Corso (2007) found that for males, child sexual abuse was a predictor of IPV perpetration in young adults, whereas for female, child physical abuse and neglect were predictors of IPV exposure (Herrenkohl et al., 2022).

In April 2026, the Child Safeguarding Practice Review Panel published its 2024-2025 annual report on serious child safeguarding incidents in England. Reviews showed that many children were living with multiple, interconnected challenges, with factors such as neglect, domestic abuse, parental mental health difficulties, substance use, poverty and housing insecurity present in their lives. These challenges often overlapped and persisted over time, increasing a child's vulnerability to harm.

Between 1 April 2024 and 31 March 2025, 274 Serious Incident Notifications and rapid reviews were submitted for serious incidents where abuse and/or neglect was known or suspected. Analysis of the data showed:

- There was an even split between boys (138) and girls (136), which differs from previous years where boys made up slightly larger proportion.
- Compared to the child population in England, children from Black/African/ Caribbean/Black British ethnicities and those with Mixed/ Multiple ethnicities continue to be overrepresented in reviews.
- The proportion of deaths by suicide was higher for girls at 22% compared to 12% for boys.
- A higher proportion of girls (30%) experienced intra- and extrafamilial child sexual abuse than boys (11%) whereas a higher proportion of boys (58%) experienced intra- and extrafamilial non-fatal assault than girls (27%).
- 60% of incidents of serious harm related to girls and 60% of deaths reported relate to boys.
- During 2024-25, over half (51%) of the children in focus were reported to have experienced domestic abuse in their lives. In 28% of these reviews there was also a history of intergenerational abuse.

Care Experience

'Care experience' is an umbrella term that relates to anyone who has been looked after by the local authority at any point, for any length of time as a child (MoJ, 2026). There were 81,770 children looked after (CLA) reported by local authorities as of the 31 March 2025, of which 56% male and 44% female (Department for Education, 2025). Children from Mixed ethnic groups were over-represented and children from Asian ethnic groups were under-represented in the numbers of CLA compared to the overall child population. Children of White ethnicity accounted for 71% of CLA, 11% were Mixed or Multiple ethnic groups, 8% Black, African, Caribbean or Black British, 5% were Asian or Asian British, 4% other ethnicities, and ethnicity was not known or not yet recorded for 1%. The majority of all CLA are looked after due to a primary need of abuse or neglect.

The Department for Education (2026) published statistics on the stability of children in care in March 2025 in England. The statistics focused on placement, school and professional support. Figures showed 10% of children in care in 2025 experienced high placement instability, 8% experienced high school instability and 24% of children experienced high social worker instability, with children under one experiencing the highest social worker instability. Data obtained by the national charity, Become (2025) through Freedom of Information (FOI) requests, showed that 34% of children in care in years 10-13 had to move home, 12% had to move school or college, 30% were moved or had to leave care during their A-level exam period with 13% moved during their GCSE exam period. In addition, 16% of children in care were moved more than 20 miles during years 10 and 11 which can further contribute to their ability to do well in school but also social isolation and loneliness.

All children's homes must be registered with Ofsted to ensure that they are regularly inspected to meet minimum standards and have appropriate adults working within them. Many homes are currently unregistered and being run on a commercial, cost-driven basis. Ofsted reported that in 2024/25, they had opened 870 investigations into what they discovered were 680 unregistered settings. Despite unregistered homes being illegal, researchers at Anglia Ruskin University (2026) highlight how these homes are used by numerous local authorities across England and Wales. This was previously highlighted by the BBC (2019), with children as young as 11 being housed in unregulated homes. Several investigative reports into the placements of children led to a government ban on the use of unregulated children's homes in England (BBC, 2026). The researchers at A.R.U shared concerns about the increased risk of exploitation facing children because of being placed in unregistered children's homes. Findings reported that in severe cases organised crime groups and criminal networks had infiltrated unregistered homes through staff and had groomed vulnerable children.

Due to the lack of regulatory oversight and accountability, police and wider services have limited knowledge of the young people being housed in unregistered homes and their

safeguarding needs. Children's circumstances are often only discovered after the homes are identified through serious incidents or when children are reported missing. The location of unregistered homes can also contribute to heightened vulnerability as placements can result in children being moved into neighbourhoods charactered by greater exposure to crime and violence (A.R.U, 2026). Children are being placed in locations and environments where substance use, coercion and serious violence can intersect. As reiterated throughout the report, the authors reaffirm that this should be considered an issue of national safeguarding importance.

The researchers also shared insight into the complexities and sensitivities that exist within the context of unregistered children's homes. Across the data, it was illustrated that there is limited and uneven training among staff. The staff training deficiencies were attributed to an incident in which a 12-year-old girl was sexually assaulted in a home and the staff were unable to recognise and respond to the risks. Participants also expressed perceptions of the residential staffs' misogynistic attitudes towards women's roles and violence towards women and girls' violence (A.R.U, 2026).

Shaw and colleagues (2026) explore the disconnect between the needs, expectations and perceptions of care-experienced girls and the care, safeguarding and support they receive. The authors highlight the intersectional stigma faced by girls relating to their care experience as well as gendered and racialised judgements. These experiences create situations whereby girls are viewed as 'less-than-ideal' victims meaning critical moments for intervention are missed (Brown, 2019). Care-experienced girls are also more likely to be subjected to victim blaming through preconceived ideas, adultification and negative judgements. Shaw et al, further contributes to the growing evidence base as the victimisation of care-experienced girls and women may be minimised or ignored.

Previous research observed that multiple moves within care were profoundly destabilising and this impacted care experienced girls' capacities to develop trusting relationships with others, especially those in positions of authority, and feel settled (Coy, 2009). The findings, drawn from life story interviews with 14 young women, described how the absence of stability and sense of belonging led to different avenues in which they became vulnerable to sexual exploitation through sex work. These findings were reiterated by Hallett (2016) as the mainly female study sample (8 female, 1 male) aligned experiences of care and being looked after with the problem of Child Sexual Exploitation. In addition, one young woman described an abusive relationship as providing some stability and security in which she craved. Vicarious trauma is also present for care-experienced women as they have highlighted the long-lasting sensory impact of hearing the abuse of other children in their care home (Our Care, Our Say, 2021).

Care experienced women have described backgrounds of abuse, serious violence and trauma, and had multiple experiences of victimisation throughout their lives. Violence and abuse at home was the most common reason reported for entering the care system (Fitzpatrick et al.,

2022). Many children in care will have adverse childhood experiences, which may have been further exacerbated by their experiences in care. While examining the over-representation of care-experienced girls and women in the youth and criminal justice system, Fitzpatrick and colleagues spoke with 54 care-experienced girls and women aged between 16 and 58. Of these, 29 participants reported being sexually abused as a child. It is widely recognised that the offences in which children in residential care are sexually abused are likely underreported. Of the participants spoken to by Fitzpatrick et al, 34 reported leaving mainstream school early. Participants also described how violence perpetrated by boyfriends whilst in their teenage years was frequently overlooked by staff in the children's homes where they lived. Women also described their behaviour and actions going unchallenged and overlooked, such as involvement in criminal activity. On the surface they abided by house or placement rules despite there being signs of exploitation and criminality. This negligence can contribute to girls and young women becoming involved in serious criminal and violence offences as a victim, perpetrator or witness (Fitzpatrick et al., 2022). It can also increase their need for belonging and a sense of security, heightening their risk of exploitation further.

Katz et al (2020) argues that due to high rates of parental maltreatment, children and young people in foster care are considered more vulnerable to intimate partner violence. In their US based longitudinal study, they found that approximately 21% of their young foster care cohort were involved in some type of IPV at age 23 or 24, with bidirectional violence the most commonly reported form.

Children in care also experience '[3]' and the perception of being 'streetwise' which contributes to further judgemental attitudes, low expectations and inadequate safeguarding (Shaw, 2014). Similarly, children may be perceived as lacking the innocence of other children and these negative attitudes can be internalised making them feel inferior and tainted as being troublesome. There is the perpetuation of gendered judgements of over-sexualised and troublesome girls in care, which links to the adultification of Black girls and young women (Agenda & AYJ, 2021). The operation of the care system can perpetuate stigma rather than empowerment, leaving girls and young women susceptible to exploitation and violence in attempts to find affection, care, acceptance and achievement (Robinson et al., 2018).

Care-experienced individuals often have to live independently at a much earlier age than their non-care experienced peers, without the same support networks, meaning they have to "*rapidly mature in order to adjust and survive*" (Department for Education, 2023; Young Justice Advisors, 2022). Data from March 2025 showed 36% of 18-year-old care leavers were living in semi-independent transitional accommodation and 36% of 19–21-year-olds were living independently (Department for Education, 2025). Not having control over who enters a property can increase an individual's risk of violence and exploitation. An example of this is cuckooing whereby people take over a person's home and use the property to facilitate

[3] 'Othering' refers to the process of labelling, treating, or viewing children in care as fundamentally different, deficient, or separate from their peers

exploitation (West Yorkshire Police, 2024). False pretences, befriending, [4]' agreements, sexual relationships and drug debts can be used to enter an individual's property. Young people living alone for the first time, whether that be care leavers or former students, can also be key targets for cuckooing perpetrators (Bainbridge et al, 2024). For care leavers the need for belonging, relationships). Women's involvement has been described to be linked with domestic abuse, cuckooing and transactional sexual arrangements, suggesting removal of agency and coercive control are inherent in the exchanges (National Crime Agency, 2016). Findings from research suggests specific vulnerabilities of young women are recognised and harnessed to prey on them and enable a cuckooing situation (Spicer et al., 2020).Shaw and Quinn, 2025). Consent should be considered when discussing women's involvement with county lines (Barry and Kougiali, 2025). Women's involvement has been described to be linked with domestic abuse, cuckooing and transactional sexual arrangements, suggesting removal of agency and coercive control are inherent in the exchanges (National Crime Agency, 2016). Findings from research suggests specific vulnerabilities of young women are recognised and harnessed to prey on them and enable a cuckooing situation (Spicer et al., 2020).

[4] 'Reciprocal renting' agreements is when offenders of cuckooing trade favours, drugs, cash or apparent companionship with a vulnerable tenant in exchange for a place to operate

Housing and homelessness

Pathways into homelessness are multifactorial and often reflect structural, societal, and individual vulnerabilities (Gaetz et al., 2016). Domestic and family violence is a leading cause of women's homelessness across their life course (Baker et al., 2010). Research suggests that men's service needs, in relation to domestic abuse, are different. Men are less likely to relocate, less likely to have children accompany them, and more likely to have additional support needs (Bowstead, 2017).

Women who have experienced violence can face cumulative multiple disadvantage. Violence can cause homelessness directly but also indirectly. Their housing needs can be coupled with other support needs including substance use and mental health. Trauma associated with violence in a woman's childhood or adulthood can lead to trauma-coping behaviours such as drug and alcohol use which can make it difficult for women to sustain their homes (Bimpson, Greene & Reeve, 2021). Women's experiences of housing insecurity and/or homelessness can be compounded by racism, homophobia, transphobia and ableism, which further intensify exclusion for the most marginalised women (Wright et al., 2026).

Women who have experienced extensive physical violence from a partner are far more likely than women without such experiences to live in rented accommodation and have lower household incomes (Scott & McManus, 2016). Women may also be prevented from leaving abusive relationships due to the fear of homelessness due to lack of ownership or tenancy rights which can be held solely by the perpetrator, either from the start of the relationship or through coercion. Even when women have ownership rights and financial assets, the costs associated with legal matters, lost income or cost of caring for children can deplete resources in turn affecting women's ability to retain housing.

Research shows that women have faced such severe threat that they abandoned their home in favour of sleeping rough, viewing the streets as offering them greater safety than their homes (McMordie et al., 2025). Furthermore, precarious and unstable accommodation, as well as lengthy processes after leaving an abusive relationship can also limit a woman's ability to recover and rebuild her and often her children's lives (Solace Women's Aid, 2023). This can prolong periods of unsettlement and uncertainty, thus demonstrating the importance of secure and appropriate housing in helping women end violent relationships and build a renewed sense of stability and safety.

Whilst twenty years ago, the findings presented by Reeve, Casey and Goudie (2006) are still imperative. The survey of 144 single homeless women across 19 towns and cities in England found that over 20% had left their last stable home to escape violence, rising to 40% for women aged 41-50. This is still the case for many women escaping domestic abuse, as it often means leaving their home with many perpetrators of domestic abuse remaining in the family home whilst the victim and any children move frequently between temporary and unsuitable

housing (Solace Women's Aid, 2023). This is often in another local authority area to put a safe distance between themselves and their perpetrators. The emergency nature of many survivors' experiences may also mean that survivors are not always given the time to look at available options. Not only can this be disempowering, but it can be isolating and massively reduce a woman's social network and support system. It can also pose huge disruptions to employment, access to schools and childcare arrangements (Bimpson, 2021). Similarly, temporary accommodation may not be suitable and may not feel physically safe due to lacking features such as CCTV and security systems to prevent unauthorised entry (ONS, 2025). This can have a considerable negative impact on well-being, mental health and emotional safety of women and their children.

Rough sleepers and those in temporary accommodation are subject to elevated levels of violence with McCoy (2017) reporting that 28% of homeless people had experienced physical harm whilst homeless or in temporary accommodation with an additional 19% of women and 5% of men having experienced sexual assault whilst in temporary accommodation. Women's rough sleeping is hidden, transient and intermittent. The 2025 Women's Rough Sleeping Census does however highlight the fear and hyper-vigilance experienced by women rough sleeping with participants describing being too afraid to sleep during the night due to previous experiences of being assaulted and harassed. Sexual violence was noted in the census as a recurring feature of women's homelessness, with participants describing rape, assault, harassment and pressure to exchange sex for safety/ survival. Research by Lopez and Smith (2021) found that women experience increased vulnerability and exploitation when in mixed-sex temporary accommodation with many women reported experienced sexual violence, being harassed by male residents, theft and other crimes. Feeling unsafe whilst in temporary accommodation was also noted by Solace Women's Aid (2025) as 50% of survivors interviewed felt unsafe in their temporary accommodation.

An important consideration of that is age and how exposure to and experience of violence can influence the trajectory and opportunities within girls and young women's lives. Experience of physical violence was evident in a 2026 systematic review and meta-analysis of adverse childhood experience prevalence in children and young people experiencing homelessness. Gehrenbeck and colleagues (2026) found a high burden of abuse, with pooled estimates for physical and sexual abuse markedly higher than general-population estimates. The trends can also be seen in adult women. Analysis of data from the Adult Psychiatric Morbidity Survey in 2016 showed one in five women (21%) in the extensive physical and sexual violence group reported having been homeless at some point in their lives. The analysis could not attribute causation between the violence and homelessness period; however, it also showed 1 per cent of women who have no experience of violence end up homeless, compared with 20 per cent who have experienced violence (Scott & McManus, 2016).

Solace Women's Aid (2023) found that 37% of Solace staff who responded to a survey said housing departments had required proof of physical violence in most or all homelessness

applications their clients have made over the last three months. This further disadvantages women as onus is often placed on them to provide 'evidence' but also overtly questions their experience and integrity. For women who have experienced emotional or financial abuse as well as coercive control, evidential proof is not always available in physical forms. This further perpetuates harmful narratives that domestic abuse is primarily physical when this is largely not a reflection of reality.

Fear of homelessness can and does prevent women from leaving abusive relationships. Economic abuse or coercion can limit the economic and social resources that might otherwise assist women to attain sustainable housing post separation (Sanders et al., 2015). Violence can also erode family and wider social networks who could be sources of emotional, housing, and financial support (Wendt et al., 2024). Women's capacity to address their housing insecurity post separation can also be severely restricted by the impacts of violence on employment. Similarly, mental health deterioration and subsequent substance use as a result of violence can contribute to job loss and in turn impact rental opportunities. The lack of housing post separation can result in women feeling they have little choice but to accept accommodation that is inappropriate, unsafe, or far away from informal support networks and formal support (Blunden & Flanagan, 2021).

Compared to the Council of Europe's recommendation, there is a 22.2% shortfall in the number of bedspaces across the country (Women's Aid, 2024). Since 2016 Women's Aid have used On Track data to report on the national demand for refuge services in their Annual Audit reports. Data from the 2022-23 financial year showed that lack of capacity to support the survivor contributed to 40.6% of unsuccessful referrals to refuge services. Capacity does mean available bedspace but also having sufficient resources to meet the support needs of the women attempting to access the service (Women's Aid, 2024). Mental health, drug and/or alcohol need, disability or family size can be cited reasons for not having the support capacity. Some refuges have an age limit for male children of 14 years meaning women with older male children cannot access a refuge service (SafeLives, 2018). In the same period, Women's Aid found 35.4% of unsuccessful referrals to be due to the survivor not accepting the refuge space. This can be for a multitude of reasons including location of the refuge, either being too far from social networks and caring responsibilities or too close to the perpetrator. Pre-existing knowledge or preconceptions of what to expect from accommodation after leaving domestic abuse can affect how survivors feel about accessing refuge or accommodation services. It is important to note how women may also be experiencing coercive control or have recourse to public funds and therefore unable to afford the refuge.

Women have noted avoiding mixed-gender homelessness provision due to fear of violence. These situations can re-traumatise women as well as increase their risk of further abuse and substance use (AVA & Agenda, 2019). In some instances, women would rather sofa surf or sleep rough if they do not have access to single-sex housing. Unsafe crisis accommodation, rough sleeping, and couch surfing can however leave women and their families vulnerable to

sexual and physical abuse (Barnes et al., 2021). 'Hidden' forms of homelessness, such as 'sofa surfing', are very widely reported by women with experience of homelessness (Bimpson, Greene & Reeve, 2021). Sofa surfing can increase the risk of harm and exploitation as well as strain interpersonal relationships and limit the privacy of women. Women have reported feeling unsafe around hosts, being too frightened to sleep, or feeling uncomfortably obliged to the host for a place to stay (McMordie et al., 2025).

The Domestic Violence Indefinite Leave to Remain (DVILR) and Destitution Domestic Violence Concession (DDVC) model is noted internationally as best practice by providing both immigration status and financial support, enabling women with no recourse to public funds (NRPF) to come forward and seek help without fear. In 2024, the DDVC was expanded and renamed as the Migrant Victims of Domestic Abuse Concession extending eligibility to additional groups, including partners of those on student and work visas. However, significant gaps remain. Women on non-spousal/partner visas and undocumented women are still excluded. Women are forced to choose between remaining in abusive situations or facing destitution and possible deportation. Access to women's refuge accommodation is also restricted as many are unable to meet basic costs. This leaves women and their children at risk of homelessness, exploitation and further harm and can force them back into abusive relationships (Southall Black Sisters, 2026). For women born outside of the UK a lack of visibility of accommodation support services, limited awareness of the existence of emergency or temporary accommodation, including not knowing who to contact for help can lead to many women being unaware of their rights and what support they could be entitled to in England (ONS, 2025).

In June 2025, 12,330 children were living in accommodation with shared facilities, and 9,510 of them had been there for more than six weeks. Children and families are living without basic commodities which should offer them autonomy, better health and vital protection from harm (Children's Commissioner, 2026). In the 2024-25 serious child safeguarding incidents annual report published by Child Safeguarding Practice Review Panel, housing issues, such as temporary accommodation, overcrowding, and poor housing conditions, were also an issue in over a third (35%) of incidents overall. Similarly to financial hardship, the majority (77%) of incidents with housing issues also included neglect as a factor. More than six in ten children had experienced domestic abuse in homes affected by financial hardship (63%) and housing issues (62%).

Sex for rent is an exploitative practice which refers to a situation where someone is asked to pay for housing costs in the form of sexual favours. Housing can be used as a vehicle for sexual harassment against women, for instance when entering a new tenancy, the offer of free accommodation, reduced rent or removal of rent arrears (Shelter Scotland, 2018). Sex for rent is a social harm resulting from housing policies that disproportionately affect disadvantaged women (Waugh, 2024). These exploitative arrangements are based on equal power dynamics

and target those who believe they have no other choice in fear of becoming or remaining homeless.

Women can also become isolated and deliberately prevented from leaving the home. McMordie et al, (2025) describes how women in rural areas were especially vulnerable to control and isolation as a woman living on a farm experienced her partner deliberately blocking her movements with tractors and machinery, physically obstructing her from leaving the house. The home can also be weaponised with internal technology-based surveillance, such as Alexa's and remote monitoring apps, but women can experience extreme physical control by being confined against their will or locked into rooms (McMordie et al., 2025). Not only can violence be present within the home, but the home can also be weaponised against women and their families.

In previous decades, domestic abuse was estimated to create housing costs of £160 million per year, this is before considering account issues such as debts left by perpetrators in cases of financial abuse (Safe Lives, 2018). It is almost certain that these costs are much higher in 2026. If the medium and long-term housing needs of survivors of VAWG are not addressed there is a risk of harm to victims and increasing financial and social costs. Safe and stable accommodation can also reduce the likelihood of an individual committing a VAWG offence and can reduce rates of recidivism and the exacerbation of other vulnerabilities.

Education

Engagement in full time, quality education is a strong protective factor against the risk of a young person becoming involved in serious violence (Crest, 2021). Safe learning environments for girls are ones where the established curriculum and culture challenge violence against women and girls and gender stereotypes (Fancy & Fraser, 2014). Education and experiences of violence are interconnected, education can provide a safe place for girls experiencing abuse (Sterne & Poole, 2010), but also experiencing violence and abuse can impact on girls and young women's academic attainment which in turn increases their vulnerability to violence. Achieving a higher level of education equips women with social skills and stronger social networks, as well as future economic stability which acts as a protective factor against violence (Weitzman, 2018).

Whilst education can serve as a protective factor for violence against women and girls, girls are also at risk of experiencing violence at school and this has implications for their attendance, completion rates, and attainment. Sexual harassment and abuse at school encompasses sexist name-calling, unwanted sexual comments, being pressured to send sexual images, unwanted touching, and sexual assault (EVAW, 2023). 24% of girls in mixed sex schools said they had experiences of unwanted sexual touching in school (EVAW, 2023). It is crucial that sexual harassment and abuse are viewed as part of a continuum of violence against women and girls rooted in misogynistic views. Teachers are key role models for young people, however if they themselves hold negative gender stereotypes these can be influential on students. For example, research has found that teachers sometimes blame girls for their experiences of sexual harassment (Harris & Kruger, 2020) and 60% of girls had heard teachers using sexist language (EVAW, 2023).

Experiencing violence whilst at school can perpetuate a negative cycle that increases girls' vulnerability to violence. Sexual harassment and abuse can lead to lower school engagement, alienation from teachers, and poor academic achievement (Gruber & Fineran, 2008), all of which can increase girls' vulnerability to experiencing violence in the future. In addition, experiencing violence whilst at school causes girls to avoid male-dominated subjects and hobbies, thus limiting their future employment opportunities which can pose a risk factor for economic abuse and coercive control especially (Plan International, 2025). A quarter of girls said 'feeling safe' in school would help them to achieve their potential whilst in education (Plan International, 2025), however only 19% of girls feel completely safe at school, college, or university highlighting how fear of harassment or abuse is damaging girls' educational experience.

The influence of education can extend into adulthood and the onward education and career trajectories of young women. It has been evidenced that young women who are not in education, employment, or training (NEET) are more likely to experience violent threats and physical abuse than those who achieved a higher level of education (Haugland & Stea, 2022).

However, there are challenges identifying the NEET cohort and therefore the long-term influence of being NEET in early adulthood on experiencing violence against women and girls has not been extensively explored.

Relationships and sex education

Relationships and sex education (RSE) has been mandatory for most state schools since September 2020, and involves learning about the emotional, social and physical aspects of human development, relationships, sexuality, wellbeing, and sexual health. A key aim of RSE is to reduce harmful behaviour, including sexual violence and relationship abuse, stigma and discrimination, both online and offline and support children and young people to develop positive relationships with themselves and others.

It has been demonstrated that RSE can be an effective way of addressing the root causes of sexual and gender-based violence. Delivery should balance protective and participatory rights, acknowledge young people's agency and autonomy and support positive peer relations in order to reduce harm (Kantor et al., 2021). A review of RSE over three decades found that reduced perpetration of sexual violence immediately followed the intervention, and reduced victimisation for up to four years following (Goldfarb & Lieberman, 2021). Intervention schools when compared to control schools reported 60% less sexual violence perpetration and 60% less physical violence perpetration with a current dating partner. Furthermore, good relationship and sex education can also have positive effects on the disclosure of abuse. Children who are taught about preventing sexual abuse at school are more likely to tell an adult if they had or were currently experiencing sexual abuse (Walsh et al., 2015).

However, RSE is often not satisfactory, with the Sex Education Forum (2025) finding that 41% of young people had not learnt or not learnt enough about how to tell if a relationship is healthy, which is key in reducing the risk of violence against women and girls. Schools were also failing in teaching young people about criminal behaviour, with only 25% of students learning about deepfakes, 25% learning about the law on strangulation, and 34% learning about female genital mutilation.

RSE in schools may also be disproportionately failing particular groups of students. 38% of Lesbian, Gay, Bisexual, Trans and Queer/Questioning (LGBTQ+) students rated the RSE they had received as good or very good compared with 55% of those identifying as straight. In addition, 48% of disabled students rated their RSE as good or very good compared with 55% of those who would not consider themselves disabled (Sex Education Forum, 2025). This is of concern because women and girls with these identities are disproportionately vulnerable to experiencing violence against women and girls and effective RSE can protect against these risks.

The NSPCC found that many young people describe their school RSE experiences as too little, too late, negative, ineffective and sometimes counterproductive (NSPCC, 2023). 53.9% reported that teaching in school 'rarely' or 'never' covered what they wanted to know about

relationships, sex, and sexuality. Young people filled the gaps in their knowledge by learning from each other, considering their peers to be a vital source of support for relationship advice, including learning about sex. The lack of effective RSE within school environments has resulted in young people learning about relationships, sex, and sexuality online and they acknowledge that this results in them accessing misinformation (NSPCC, 2023). Young people also described the prevalence of gender and sexual norms encountered in real life and online, for example the feminisation of emotions, the racialisation of gendered body ideals, and the gendered sexual double standards of sexual agency and pleasure. These stereotypes underpin the normalisation of gendered and sexual violence for young people. Schools are not always effectively addressing the normalisation of violence, how this intersects with wider inequalities, and how damaging these behaviours can become (NSPCC, 2023), leaving girls vulnerable to harm, abuse, and violence.

School-led RSE can also be supported by educational programmes provided by specialist organisations. Programmes that explore attitudes associated with dating violence and understanding what constitutes an 'unhealthy' relationship have been found to reduce sexual violence by up to 17% (Gaffney et al., 2022).

The protective elements of good quality relationships and sex education must be supported within educational environments by a whole-school approach. A whole-school approach embodies institutional and policy development, awareness-raising, training and support for staff, education for pupils through the formal curriculum and informal school spaces, and early support, safeguarding and signposting to specialist services for pupils (EVAW, 2023). A zero-tolerance approach to sexual harassment and abuse must be present at schools to ensure children feel safe and able to report abuse (Girlguiding, 2021). This, combined with the appropriate safeguarding, ensures consistency in the messages given to children about what is healthy and what is harmful behaviour, helping to protect girls from violence.

Employment

The relationship between unemployment and violence has been well established (Bhalotra et al., 2021; Nordin & Almén, 2016) and is related to poverty and deprivation as explored earlier.

Secure employment can function as a protective factor for violence against women and girls, with evidence that as a woman's financial stability increases, the likelihood that she will experience domestic abuse decreases (Renzetti & Larkin, 2009). As well as providing financial resources, employment can also increase women's quality of life and self-esteem, bolstering their ability to report and leave an abusive relationship (Brush, 2003).

It has been estimated that domestic abuse specifically costs the economy in England and Wales £14 million in lost outputs. These outputs reflect both direct measures of time off work and the proxy effects of violence on productivity (Oliver et al., 2019), but do not include job losses. These outputs also do not cover all forms of violence against women and girls; most pertinently coercive control is omitted despite having clear impacts on women's engagement with employment. Therefore, the actual cost is likely to be much higher.

Experiencing violence or abuse can inhibit women's ability to work, worsening the cyclical relationship between employment and violence against women and girls. Violence against women and girls can negatively impact an employee's productivity, absenteeism, and employment prospects (Wathen et al., 2018). Women in abusive relationships often experience job losses, high job turnover, are forced to quit or are fired and this lack of stable employment has been shown to persist throughout their life. These difficulties in employment are exacerbated among women with disabilities who have experienced domestic abuse, as disabled victims are less likely to be employed than both non-disabled women who have and have not experienced domestic abuse (Renzetti & Larkin, 2009).

Recent research has highlighted the consequences of experiencing intimate partner violence on job loss and time off work in the UK (Blom & Gash, 2024). Of women who were employed when they experienced violence, 55.9% experienced controlling behaviours, 38% physical violence, 34% were threatened, 23.5% were stalked and 7.3% experienced some form of sexual violence or abuse. Of all participants (men and women) who experienced intimate partner violence, 10.5% took time off work because of the abuse they experienced and of those who took time off, 20.9% lost their job as a result of the violence/abuse.

Physical injuries and long-lasting health problems resulting from experiencing violence against women and girls can affect attendance at work, but also a woman's ability to focus and concentrate on their work tasks (Staggs et al., 2007). The impacts of violence against women and girls can be long-lasting with the combination of physical health problems, economic problems, and mental ill-health resulting in continued absenteeism, lost productivity, and job turnover. Research into the long-term impacts of intimate partner violence and job success found that women who had experienced intimate partner violence

at least five years previous reported significantly higher levels of underemployment than women who had not experienced intimate partner violence. In addition, women who had experienced violence reported significantly less job satisfaction than those who had not experienced violence (Stark, 2021).

Abusers can have a direct impact on women's employment as a common tactic of perpetrators of violence against women and girls, particularly coercive control, is isolation. Isolating victims from support systems increases their dependency on the perpetrator and employment can be a direct challenge to this. As such perpetrators can extend their abuse by limiting women from accessing an income through employment (Sanders & Schnabel, 2011). As such, workplaces do not always offer a safe place for victims away from their abuse as perpetrators may continue the abuse whilst their victim is at work; especially in cases of coercive control and stalking (Bennett et al., 2021), for example calling their workplace or following them on their commute in order to sabotage their workplace performance. One study found that 61.4% of employed women were harassed on the phone at work and 39.2% were harassed in person (Swanberg et al., 2007). Approximately half of the women subsequently reported poor performance and inability to concentrate because of this disruption to their work.

Connected to unemployment is the UK benefits system and this can be used as a tactic of domestic abuse. The Universal Credit system risks increasing women's vulnerability to financial abuse from a spouse or partner (Howard & Skipp, 2015). Universal Credit payments are usually made into one bank account rather than individual accounts, which gives more power and control to abusers reinforcing the 'male breadwinner' model (Women's Budget Group, 2018) and putting women and their children at greater risk of abuse and for longer periods. Financial autonomy incudes independence, privacy and agency, all of which can be reduced by the Universal Credit system when a relationship is abusive due to the single payment and joint account systems (Women's Budget Group, 2018), leaving women already living in poverty increasingly vulnerable to experiencing violence.

Men who experience unemployment have been shown to be at greater risk of perpetrating violence against women and girls than men in secure employment. It has been suggested that violence perpetrated by men who are unemployed could be linked to societal norms around masculinity that positions men as the providers. Employment status and financial pressures have been found to be influential in domestic homicides. In a sample of domestic homicides, where employment status was listed 72.2% of perpetrators were unemployed and 29.9% of perpetrators were directly described as experiencing financial problems (Bracewell et al., 2022). A local analysis of Domestic Homicide Reviews in West Yorkshire also found employment to be a prevalent influential factor (Isherwood, 2024). Across the sample there was a distinction between the employment status of the victims and the perpetrators, with the victims more likely to be in secure employment and perpetrators more likely to be unemployed. This created an imbalance within relationships where the perpetrators became

financially dependent on the victim through debt, bankruptcy or redundancy leading to tension within the relationships (Isherwood, 2024).

Whilst employment has been evidenced to be a protective factor for women, it has also been suggested that women's employment can lead to resource conflict in the form of 'male backlash' where women's employment results in an imbalance in power causing men to assert dominance through abuse. Research into experiences of economic abuse found that women in paid work were more likely to experience economic abuse than those not in work (Surviving Economic Abuse, 2025). 20% of employed women reported economic abuse from a current or former partner in the past year, double the rate of unemployed women. Perpetrators mobilised women's employment status as a method of abuse by disrupting their ability to work, for example preventing them from applying for jobs, having women's wages paid into accounts the perpetrator controlled, and forcing women to work for their business for little or no pay (Surviving Economic Abuse, 2025).

Victims may feel unable to disclose their experiences of violence to their employers as domestic abuse is often still perceived as a 'private' matter (Bennett et al., 2021), leading to victims being unfairly punished or disciplined at work as the negative impacts of abuse on their wellbeing and thus their work are misinterpreted. Employers have a duty of care to their employees, especially those who are suffering from forms of violence against women and girls, with Trades Union Congress (2014) arguing that *"supporting employees who are experiencing domestic violence is crucial. Without a job and a source of income, those experiencing the abuse are less likely to find a way of escaping the abusive relationships"* (p.7). This emphasises the importance of secure employment, safe workplaces, and support systems in protecting women from experiencing violence.

Substance Use

It is important to emphasise that although a woman's alcohol consumption or substance use may place her at increased risk of violence, she is in no way responsible for the violence or abuse she experiences. All culpability lies with the perpetrator.

Previous discourse has framed drug and alcohol consumption as a primary cause of violence rather than the contextual factor in which it is. A multitude of factors such as environmental, social, situational, and cultural context have distinct consequences toward substance use and its effects on individuals (Latkin et al., 2017).

Alcohol does not only represent consumption or intoxication, but it can shift the atmosphere within the home to which behaviour becomes more volatile, unpredictable, irrational, or frightening. While analysing ten years of police data from West Midlands Police (2010–2019), the authors found a statistically significant increase in alcohol-related domestic abuse cases following England football victories, with no comparable increase in non-alcohol-related domestic abuse (Trendl et al, 2021). The 2026 World Cup saw an increase in domestic abuse with 384 incidents of domestic abuse related to football recorded by 43 police forces between 11 June and 20 July 2026. While this figure does not represent the total of domestic abuse reports received during this time, only those that were recorded as football being an aggravating factor and this is likely a significant underrepresentation (NPCC, 2026; Crimestoppers, 2026).

Drawing on analysis of approximately 63,046 anonymised witness statements taken by the National Centre for Domestic Violence, it was evident that alcohol is frequently referenced, but not universally present. Alcohol may exacerbate, escalate, or expose abuse, but it does not create it. It can serve as an accelerator which may increase the severity, volatility, or frequency of violence or be used as a tactic to deny, manipulate or intensify control. This was evidenced in a 2019 study synthesising qualitative studies of substance use in intimate partner violence which found that alcohol use does not operate in isolation but is embedded within wider patterns of power, control, and entitlement (Gilchrist et al., 2018).

Abbey et al's (2022) review of sexual assault literature showed the varying effects of alcohol on cognitive functioning and how this can play a role in the interpretation of noticeable cues (Ison et al., 2024). The researchers showed that alcohol use, combined with perpetrator characteristics such as hostile masculinity and poor attitudes toward women, and sexual alcohol expectancies increased the likelihood of sexual violence. Alcohol-affected perpetrators were also more likely to use force, and women were more likely to suffer injury, and these incidents are more likely to occur in contexts where both perpetrator and victim are drinking. The authors brought attention to the complex social norms which surround alcohol and casual sex, where alcohol is widely recognised as offering "liquid courage" to facilitate consensual sex (Abbey et al., 2022). Similar to other studies examining sexual

violence, sample sizes included in the review were relatively small and had a North American focus.

Spiking is illegal and carries a 10-year sentence which can be extended if other offences such as a robbery or sexual assault take place (West Yorkshire Police, 2026). Substances may be administered to someone without their knowledge or consent, with the intent to incapacitate them and commit an act of sexual violence. Perpetrators can play a facilitative role in which they encourage excessive alcohol consumption or provide higher amounts of alcohol to the extent that the person is unable to consent to sex (Ison et al., 2024).

Monk and Jones (2014) carried out a retrospective analysis of all Lancashire SAFE Centre sexual assault cases between 1st May 2011 and 30th April 2012 involving individuals between the ages of 12 and 25. In total 286 cases were included and it was found that 70.6% of complainants had consumed alcohol before being assaulted. Stranger rape, which included when the victim had known the perpetrator only briefly was more common in individuals who had consumed alcohol.

Alcohol may play a role in coping with trauma for some victim-survivors, both during and after abusive relationships and should be understood in the context of harm, fear, and survival. Women may have their access to alcohol restricted or controlled with perpetrators reframing a victims alcohol consumption as an alcohol problem despite victim-survivors using alcohol as a coping mechanism for the ongoing abuse (Harris & Hodges, 2019). Alcohol-involved assaults have also been associated with unique sequences of events for women including increased self-blame, stigma, and greater alcohol use to cope (DiLillo, Gervais & McChargue, 2023). Women who may have consumed alcohol may not report their experiences to the police through lapses in memory or fear of being shamed, not believed or questioned themselves. While under the influence of alcohol or substances women may not be able to recall the events that happened to them, as such they may not contact the police until days or weeks after the event. This unfortunately may limit the quality and quantity of forensic samples that can be obtained but some samples can still be collected and tested.

Systematic reviews of research on the relationship between alcohol consumption and violence against women generally find a strong association (Devries et al., 2013; Ramsoomar et al., 2021). The majority of research has focused on alcohol consumption by men, but fewer studies have investigated the association between alcohol consumption by women and their experience of violence. Unsurprisingly, a vast number of studies have a cross-sectional design meaning cause and effect cannot be attributed and there are difficulties in confounding factors (Weatherburn et al, 2025). Where studies are available, Australian evidence suggests that women who consume large amounts of alcohol are at higher risk of being physically assaulted. There is also evidence that the risk of being assaulted increases the amount of alcohol consumed in a single sitting (Weatherburn et al, 2025). There are several theories proposed as to why alcohol may increase the risk of experiencing violence. Alcohol consumption by perpetrators and victims can tend to co-occur. Binge drinking or high alcohol

consumption with another individual may heightened the risk for aggressive or hostile behaviour which can lead to violence. It is possible that women drink heavily in the expectation of future violence and use alcohol as a suppression mechanism.

Findings from neuroscience studies have indicated long-term alcohol consumption can lead to changes in brain regions involved in self-control, decision-making, and emotional processing (Sontate et al., 2021). Alcohol and drugs can alter the mental state of individuals, including rational thinking, making individuals act differently in unpredictable or dangerous manners (Australian Government, 2017). Based on existing literature, the consumption of alcohol appears to be related to the severity of domestic abuse rather than its occurrence and it is exacerbated by an increase in consumption (Graham et al., 2011; Ferrari et al., 2016).

Research typically infers that between 25% and 50% of those who perpetrate domestic abuse have been drinking at the time of assault, although in some studies the figure is as high as 73% (Institute of Alcohol Studies, 2020). The surge in domestic abuse throughout the COVID-19 pandemic was coined as the 'shadow pandemic' (Women's Aid, 2021). In the UK, there was a 25% increase in helpline calls and roughly 150% rise in hits to the Refuge website (Bradbury-Jones & Isham, 2020). During this time, the alcohol sales in March 2020 were increased by 67% in the UK during lockdown (Finlay & Gilmore, 2020; Sontate et al., 2021).

The findings from a review of 22 international studies exploring toxicological findings in drug facilitated sexual assault (DFSA) cases suggest that a diverse range of substances are associated with DFSA. The term 'facilitate' has largely been used by researchers as it centres the actions of the perpetrator rather than the victim. Victims may partake in recreational substance consumption at social events or unknowingly consume substances. DFSA cases appeared to be opportunistic and primarily involved women in their mid-twenties with an acquaintance as the perpetrator (Skov et al., 2022). Findings were somewhat replicated in a similar review of 53 studies by Ison et al 2024. The authors included alcohol in their inclusion criteria and found that perpetrators are often known to victim-survivors, and alcohol or drug facilitated sexual violence tended to occur in private locations. Alcohol was noted as a common substance utilised in sexual violence. This is not new evidence as alcohol has been shown to increase the risk of sexual violence through multiple pathways and exacerbate existing risk factors (Abbey et al., 2001).

Alcohol and other drugs used in sexual assault can be easily accessible to perpetrators and in low doses they can be difficult to detect as they can be metabolised by the body (Garcia et al., 2021). Over the past decade, awareness of drug facilitated sexual violence has increased. In September 2020, Dominique Pelicot was arrested in France for 'upskirting' women in a local supermarket. Following a police investigation, they uncovered more than 20,000 images and videos of an unconscious and drugged Gisèle Pelicot, his wife, being sexually assaulted and raped by 72 different men over a period of 10 years. Gisèle Pelicot waived her right to anonymity and she made this decision because she realised that *she* is not the one who should feel shamed by the public finding out what happened to her, that shame belongs to

the predators who raped her whilst drugged and unconscious (Kennedy-Macfoy, 2024; Garcia, 2025).

Unfortunately, perpetrators such as Dominique Pelicot are not uncommon. In January 2026, Philip Young pled guilty at Winchester Crown Court to 48 serious sexual offences against his former wife. The offences occurred over a 13-year period this included 12 other men ranging in age from 28 to 73 (BBC, 2026). Of the offences, there were 11 counts of rape, 11 counts of administering a substance with intent to stupefy / overpower to allow sexual activity as well as 7 counts of assault by penetration (CPS, 2026).

In April 2026, a CNN investigation exposed the online 'rape academy' where men across the world were drugging their wives and partners and subjecting them to sexual violence while recording it and sharing it with others. The website had 62 million visits in February alone with the core audience being from the United States. In addition to uploading videos of them sexually assaulting their unconscious partners or holding live streams of the assault, men were also using the online platform to seek advice and gain encouragement. The investigation also revealed the scale of this heinous crime, with a pornography site having over 20,000 videos of 'sleep content'. Within these 'sleep content' videos, men would lift the closed eyelids of women to show they are sleeping or sedated, with some "eyecheck" videos surpassing 50,000 views. These perverse online sites continue to normalise and glorify violence against women as entertainment. The investigators describe the changing landscape of drug-facilitated assault with perpetrators pivoting to more 'readily available' prescription medicines that act quickly and leave little trace in the body (CNN, 2026).

Alcohol and/or drug consumption should never be used as an excuse for those who perpetrate violence and abuse against women and girls, yet its influence cannot be ignored. While evidence shows that drugs and alcohol does not cause violence, it does facilitate and exacerbate abuse and violence.

Bereavement

Bereavement is intertwined into the fabric of life and can be defined as a state of loss which is usually characterised by grief and mourning. Society tends to ascribe bereavement with death and the loss of a loved or significant person whereas grief can be attributed to several other events beyond death.

It is understood that bereavement can have an impact on numerous social determinants of health, but bereavement permeates several influential factors associated with increased risk of committing or being a victim of violence against women and girls and may have a cumulative impact for serious violence.

Links between poverty and deprivation with bereavement can operate in a number of ways. Bereavement can be a route into poverty as 2024 saw the total cost of dying increase by 1.4% to £9,797 – the highest figure ever, according to SunLife's 2025 *Cost of Dying Report.* An immediate financial impact for many bereaved partners is settling debts and paying for immediate expenses such as the funeral or cremation. This could place families into what Walter (2017) coins "funeral poverty." This can lead onto a series of events in which families are unable to afford basic necessities.

Women from deprived areas of the UK are more likely than those in less deprived areas to die during or shortly after pregnancy, and this disparity has increased in recent years (MBRRACE-UK, 2022). Research has attributed 24% of stillbirths in England to socioeconomic inequality, and reductions in the national stillbirth rate in recent years have been more marked in the least deprived areas (Jardine, 2021; MBRRACE-UK, 2021). Deaths during or shortly after a pregnancy are rare events that are considered avoidable. The 2025 MBRRACE briefing paper which discussed maternal mortality UK between 2021 and 2023 noted that women who die during or shortly after a pregnancy had multiple and complex physical and mental health, social, personal, and socio-economic problems, generally existing before conception. Each of these women had families and social networks who would be impacted by their death.

Homicide

Bereavement can be challenging and traumatic however bereavement as a result of violence or sudden causes has been associated with more severe health and wellbeing outcomes compared to other types of loss (Scott et al., 2020).

Women are more likely to be killed by someone they knew, such a partner or ex-partner, their child or a family member compared to men. In the year ending March 2025, 68% of the 111 domestic homicide victims were women. Of these 75 female victims, all but four were killed by a male suspect. For the year ending March 2025, 17% of female victims were killed by "strangulation, asphyxiation" in contrast, to 4% of male victims who were killed this way (ONS, 2026).

The impact of violence against women resulting in homicide extends far beyond the victims/survivors, affecting their families, communities, and society at large (UNRIC, 2024). The 2022 Femicide Census, which was published in September 2025, indicated that 26% of women who were killed by a man in 2022 had children of her own under 18 years old at the time of the femicide. In 4% of the 121 femicides in 2022, children witnessed the incident and are rightly viewed as victims. Whilst incredibly shocking, this is unsurprising as previous research has shown that surviving children will have often witnessed the killing of their mother (Alisic et al., 2015; 2017). This is extremely significant when supporting the bereavement and trauma experienced by these children. The bereaved children not only lose their killed parent but effectively lose the perpetrating parent through imprisonment so are bereft of the very person who, in other circumstances, would be helping them adjust to the loss (Enander et al., 2024).

The femicide census also described a number of cases where victim's and/or the perpetrator's children were also killed. This will further compound the grief experienced by family members and those who knew the bereaved. Delays weigh heavily on families and friends of those affected by femicide and can prolong their bereavement. Families are experiencing painful long waits for justice and can suffer the uncertainty of a last minute change of plea. There is also the prospect of a criminal trial where the defendant protests innocence requiring re-exposure to the often distressing details of the case or where the character of the victim is called into question (Femicide Census, 2021).

New insight was provided in April 2026 by The Domestic Homicide Project's year 5 report. Their analysis suggested that pregnancy and recent birth may elevate the risk of victim suicide following domestic abuse. These findings share similarities which that of Adhia et al (2019) as pregnancy and the postpartum period were found to be high risk not only for intimate partner homicide, but also for suspected victim suicide after domestic abuse and especially for young victims.

Following a homicide, the police investigation, coroner inquests, and criminal justice proceedings can be lengthy and intrusive which may delay or extend the grieving process (Zinzow, 2009). Criminal proceedings have been noted as re-victimising families and has been linked to greater distress symptoms (Baliko & Tuck, 2008; Lebel et al., 2024). In their 2015 systematic review, Connolly and Gordon refer to surviving family members as "co-victims" or "survivors" of homicide. Families, homes, and personal belongings may be examined as part of an investigation which may lead to families feeling scrutinised and interrogated. Research by Victim Support (2006) noted that half of those bereaved by homicide who were in employment subsequently left or lost their jobs. Attendance at a lengthy trial can impose more pressure on already delicate work situations. This can create practical problems such as financial costs for legal or housing related matters. Family and friends can also be subjected to disturbing images and details of the homicide which have been associated with post-

traumatic stress disorder (PTSD), flashbacks, and increased substance use (Nakajima et al., 2012).

Suicide

In 2024, there were 7,147 deaths registered in the UK where the cause was recorded as suicide (ONS, 2025). Suicide in England and Wales is around three times more common among men than among women (Danechi, 2026). Similar to previous years, suicide was the leading cause of death among young people aged 20 to 34 in England and Wales in 2024.

People living in the most deprived areas of England have a higher risk of suicide than those living in the least deprived areas. In the five years from 2020 to 2024, the age-standardised suicide rate for people aged between 25 and 44 in the most deprived 10% of areas in England was 14.9 per 100,000, compared with a rate of 10.6 in the least deprived 10% of areas (Danechi, 2026; Department of Health & Social Care, 2026). Previous research examining combined adversity of poverty and extensive violence and abuse in women's lives found that a fifth of women in combined adversity have thought about suicide in the past year, more than a third have made a suicide attempt at some point, and a quarter have self-harmed (McManus et al., 2016).

In a 2022 England-wide study, people with experience of intimate partner violence were more likely to live in more deprived neighbourhoods and to have also experienced many other adversities in their lives. When analysing data from the 2014 Adult Psychiatric Morbidity Survey of 7058 adults aged 16 years and above in England, McManus et al (2022) found among people who had attempted suicide in the past year, 49.7% had ever experienced IPV and 23.1% had experienced IPV in the past year (including 34.8% of women and 9.4% of men). Sexual IPV was found to be 10 times more common in women than men, and this IPV type was associated with particularly high odds of self-harm and suicidality (McManus et al., 2022).

In their review of the Domestic Homicide Project, Hoeger et al (2024) found that domestic abuse victims under the age of 25 were dying by suicide at an even higher rate than victims over 25. They attributed this to several risk factors which were present in these young victim cases including perpetrators being older than the victim, coercive and controlling behaviour, recent separation, pregnancy, and recent birth. It is evident that violence-supportive social norms provide an accepting environment for domestic abuse perpetration which further increases the risk of harm for women (Pirkis et al, 2024). The rates of suicide in domestic abuse perpetrators are also high as described by Knipe et al (2024) using data collected as part of Drive, which supports and challenges perpetrators of domestic abuse to reduce their harmful behaviours.

In April 2026, a perpetrator was held criminally responsible and convicted of culpable homicide for his wife's suicide following years of domestic abuse (Judiciary of Scotland, 2026). Previous fatal outcomes linked to domestic abuse have been categorised as individual acts, rather than perpetrator-produced harm leading to a under recognition of abusers' role in

their victims' suicide (Lesiak, 2026). However, this landmark Scottish conviction will be the first step in changing how criminal justice systems approach perpetrator-produced suicide.

The impact of social factors on a person's decision to consider suicide cannot be viewed in isolation. Many of these factors are also drivers of serious violence and violence against women and girls, such as poverty, debt, addictions, homelessness, abuse, and discrimination. Multiple and compounding experiences of violence can also coalesce and lead to self-harming and suicidal ideation.

Estimates previously provided by the World Health Organisation (2008) predicted that each suicide left 10 bereaved friends and family members, whereas recent empirically derived estimates suggest figures are more likely between 60 and 135 people (Berman, 2011; Cerel et al., 2018). This is a substantial number of people who may face the wider impacts of suicide bereavement. Literature suggests that those bereaved by suicide experience higher levels of guilt, blame, responsibility and rejection. Feelings of self-reproach, shock and abandonment can also be heightened. Social processes may also differ for those bereaved by suicide, where individuals feel more isolated, judged or stigmatised due to their loved one's suicide. Lastly, a pre-existing family environment may have contributed to the development of suicidal thoughts and coupled with the suicide may contribute to the occurrence of psychiatric conditions or mental health problems amongst the surviving family members (Jordan, 2001).

In April 2026, the Da'aro Youth Project published a report detailing how more than 50 unaccompanied asylum-seeking young people have died in the UK since 2015. Of which, at least 30 young people had died by suicide. The second-leading cause of death for unaccompanied asylum-seeking young people in the care of, or supported by, a local authority was homicide. The data gained through Freedom of Information requests notably showed that considerably more unaccompanied young people died by suicide in the two years after they left care than at any other period. Eritrean nationals were disproportionately represented, making up more than one half of all deaths by suicide. The research idented that many young people from Eritrea had experienced and witnessed acts of violence, including sexual violence, and experienced serious deprivation on their journeys to Europe and onwards to the United Kingdom. Gender was not discussed in the report, potentially highlighting a knowledge gap relating to the experiences of unaccompanied asylum-seeking girls and young women.

An estimated 46,300 dependent children (aged 0-17) are bereaved of a parent each year, this equates to 127 children newly bereaved each day (Child Bereavement UK, 2026; Child Bereavement Network, 2022). The number of children who experience the death of their father by the age of 16 is estimated to be almost twice as high as the number who are bereaved of their mother (Child Bereavement UK, 2026). The death of a parent is a traumatic and tumultuous event as these are formative years for development. As such, childhood bereavement is one of the noted adverse childhood experiences. The death of a parent can have a significant negative impact on children's self-esteem (Worden & Silverman, 1996), and

lower self-esteem has been associated with greater mental health problems in parentally bereaved children (Haine et al., 2003). It has been inferred that violent outbursts or misbehaviour could be the result of frustration in response to their bereavement and/or poor emotional regulation skills (Rocket Science 2022). Adverse childhood experiences have been found to be associated with an increased likelihood that an adolescent will perpetrate interpersonal and self-directed violence (Duke et al., 2010).

As discussed, women are more likely to be killed by someone they knew and there are increasing numbers of suicide deaths in relation to domestic abuse. Experiencing bereavement and grief can permeate all aspects of an individual's life from housing stability, financial security to social isolation. Whilst experiencing the death of a family member, friend or acquaintance is life changing, it is also important to consider other losses and how their influence can impact individuals and the wider community. Taking a person-centred approach to reducing violence against women and girls should consider the role of bereavement due to its influence on other social determinants of health and influential factors.

Social Media, Technology and Online Harms

Social media has the potential to bring benefits to users, for example forging social connections, maintaining friendships, providing education, and access to support. However, the proliferation and availability of technology and social media has provided increased methods, forms, and systems that enable violence against women and girls increasing women's vulnerability and men's perpetration. The violence committed against women and girls through social media, technology and online harms are rooted in gender inequalities and are part of the wider continuum of offline VAWG (Women Lobby, 2024).

Women are more likely than men to use the internet for social networking and younger people use social media sites at a higher rate than older people, leaving them exposed to harmful content at a formative age (European Parliament, 2023). Online gaming and virtual technologies are perceived as predominantly male activities, where females are subjugated to an inferior status, and thus become vulnerable as targets of sexual harassment in these spaces (Gray et al., 2017).

Persistent harassment

Women and girls are experiencing increasingly harmful, threatening and upsetting behaviour online and are disproportionately affected by online harms in comparison to men. Women are more likely to have been victims of intimate image abuse, cyberstalking, and cyberflashing than men (Storry & Poppleton, 2022).

In a survey of over 3000 women, 1 in 5 had personal experience of sexual harassment on social media and 40% had experienced or witnessed sexual harassment online. Where women had personally experienced sexual harassment, this was predominantly unwelcome sexual comments or messages (79%), followed by friend invitations from strangers (59%), being sent pornographic photos or videos (48%), and unsolicited sexual propositions (36%) (SellCell, 2023). Experiences of sexual harassment in online spaces is also increasing for girls. In 2018, 65% of girls aged 11-21 said they had experienced some form of threatening or upsetting behaviour online, increasing to 81% in 2023 (Girlguiding, 2023). Exposure to harmful content online is more prevalent for certain groups of girls, including those who identify as LGBTQ+, neurodivergent girls, and disabled girls (Girlguiding, 2023), highlighting how influential factors for violence against women and girls intersect.

Unsolicited digital sexual interactions have evolved with the technologies in which they occur (Wiederhold, 2022). In recent years the metaverse, virtual reality, and haptic (touch) technology have become more available and increasingly popular, advanced by the Covid-19 pandemic which limited in-person social interactions. The metaverse refers to persistent, immersive 3D virtual spaces that users can access using avatars and virtual reality technology which simulate real-world sensory feedback (Suh & Prophet, 2018). The metaverse has been found to facilitate sexual violence with research finding that one incident of abuse and

harassment occurred every seven minutes in a metaverse platform known as VRChat (Center for Countering Digital Hate, 2021).

Image-based sexual abuse and cyberstalking

The accessibility of social media and technology has increased the tools available to perpetrators for committing violence against women and girls, leading to new forms of violence including image-based sexual abuse, cyberstalking and technology-facilitated domestic abuse. These forms of abuse share characteristics with offline violence against women and girls in the scale, speed, and impact of the violence, but it can also result in repeat perpetration as harmful content and images can be created, disseminated, and continually shared by others causing re-traumatisation of victim-survivors (O'Brien, 2024).

Girls are more likely to have sexual images of themselves shared without their consent and following the circulation, girls face far greater negative consequences than boys do. Girls are often slut shamed whilst humour is a common reaction to boys following the sharing of intimate images (Ringrose et al., 2021).

Image-based sexual abuse is being amplified by technology that enables the production of deepfakes; an artificial intelligence created or altered media e.g. images, videos, or audio recordings. Not all deepfakes are harmful or illegal, but 99% of all online deepfakes are non-consensual pornographic images depicting women (Mingeirou, Osman, & Rafin, 2023). The AI used to produce deepfakes acts as a tool that evidences a *"digital manifestation of a larger offline truth: men target women for gendered violence and abuse"* (Bates, 2025). The technology used does not require extensive technical expertise to create or publish a deepfake pornographic image meaning a huge volume of these images are being created very quickly without the consent of women and girls. Deepfake images and videos can be difficult to disprove, and as a result women and girls experience secondary victimisation as they are forced to defend themselves. Thus, being the victim of a deepfake image can have long-lasting 'offline' impacts including reputational harm and psychological trauma (Mingeirou, Osman, & Rafin, 2023). Furthermore, the proliferation and assumed acceptability of deepfakes as they are not 'real' creates a digital ecosystem that treats women's bodies as 'free' for male consumption without their consent (Akter & Ahmed, 2025).

Whilst digital spaces offer perpetrators anonymity, it can also be an extension of offline abuse, with Refuge finding that 16% of women experienced online abuse from an intimate partner or former partner (Refuge, 2022) and is often weaponised as part of a pattern of coercive and controlling behaviour. In this way image-based abuse overlaps with other forms of offline harm and increases women's vulnerability to experiencing violence and abuse.

Digital grooming

Messaging and metaverse platforms have also been identified in the grooming of children. Online services that are designed to promote connection with others through 'friending' or 'following' can also be utilised by perpetrators as an early step for grooming. These design

features result in adults being recommended to children as potential connections, enables the adding or invitations of children to group chats, and the reduction of safeguards once a connection has been made (NSPCC, 2025).

Perpetrators are able to meet children using child-friendly avatars, gaining their trust before interacting in private video chats (Gillespie, 2020). Some VR environments carry a sexual 'atmosphere' for example virtual strip clubs, and perpetrators can exploit this to normalise sexualised behaviour and coerce children into sexualised activity (NSPCC, 2023).

Algorithms

The features embedded within technology platforms contribute to the risk posed for violence against women and girls, including design elements, the speed with which information can spread, and the anonymity offered to perpetrators.

Digital spaces reinforce and intensify systemic structural gender inequalities as well as promoting harmful misogynistic views around masculinity (Women Lobby, 2024). Part of this can be attributed to the artificial intelligence and algorithms that drive social media platforms and online programmes. Only 22% of professionals in AI and data science fields are women, and as a result societal biases linked to gender roles become embedded in the design of online programmes and services, which in turn further spread and reinforce gender stereotypes (United Nations, 2023). Therefore, women are vulnerable to being exposed to further abuse and harmful content in online spaces.

Social media algorithms are influential in young men's vulnerability to perpetrating violence against women and girls online and offline due to their promotion of misogynistic views. On platforms such as TikTok misogynistic content is 'gamified', presented as entertainment using jokes and delivered in bite-size, easily accessible chunks (Saenz, 2025). This 'micro-dose' effect desensitises viewers and normalises extremist ideas (Regehr et al., 2024). Boys and young men who engage with social media to find connection are increasingly exposed to misogynistic content through their feeds recommendations (Internet Matters, 2023). Boys and young men who are lonely, isolated, or suffer from mental ill health can be drawn into more radical misogynistic content and find social connections within dedicated online communities such as the manosphere (Griffin, 2021).

Social media and online technology present a risk of perpetration of violence against women and girls as boys are the primary perpetrators of these offences and the more frequent users of online platforms. Boys spend more time on platforms such as Reddit and YouTube, and content moderation on these sites is weak, meaning harmful misogynistic content can flourish. YouTube's algorithm, for example, has been found to lure boys into the manosphere by showing misogynistic content without being prompted which becomes increasingly extreme over time, including recommendations for Incel, neo-Nazi, and white supremacist content. The algorithm fails to distinguish between the underage and adult accounts in terms of the

content it shows (Reset Australia, 2022). In addition, boys are more likely to lie about their age when trying to access online spaces increasing their exposure to harmful content (Ofcom, 2024) that influences perpetration of violence against women and girls.

Anonymity

The anonymity of users has been posited as a reason for the prevalence of online sexual abuse perpetrated by men and facilitated by the design of digital platforms. For example, Snapchat is the most common platform for child online grooming offences, and this is enabled by the platforms 'disappearing' image feature, quick adds, and lack of identity verification through 'pseudonym' usernames allowing fake accounts to engage in image-based sexual harassment (Ringrose et al., 2021).

Perpetrator anonymity also functions to deny justice for many victims of violence and abuse online. Victim-survivors are required to identify and report online abuse to service providers and police, but often perpetrators of such abuse are not identifiable (Global Partnership, 2023).

Impact

The consequences of 'virtual' violence have previously been minimised but can result in very 'real' responses, including stress, panic attacks, depression, self-isolation, and can lead to suicide. As technology continues to advance, haptic wearables such as gloves and even full body suits are further blurring the separation between the virtual and physical world (Wang et al., 2019). This overlap could result in sexual violence in the metaverse being comparable in the trauma and distress caused to victims as in the real world. Individuals experiencing sexual violence in the metaverse may exhibit similar fight or flight responses (e.g. increased heart rate) as those who experience sexual violence in real life (Wiederhold, 2022).

As well as having 'real' life physical and mental health impacts, online abuse can progress to offline abuse, especially in cases of cyberstalking and threatening behaviour. This is more commonly experienced by girls and young women, who are also more likely to know the person committing violence against them (Open University, 2024). Online violence also increases the fear women feel about their physical safety, with 41% of women globally saying experiencing online abuse made them feel their safety was threatened (Amnesty International, 2017).

As with offline sexual violence, the trauma experienced by individuals online can have long-term impacts. Women and girls who experience violence online or in the metaverse often have these experiences downplayed or dismissed. This victim-blaming can negatively impact on women and girls' help-seeking behaviours, leading to feelings of self-blame which is a critical barrier to disclosing their experiences (Shah, 2021). It has been evidenced that experiencing cyberstalking or online harassment can lead to mental ill-health with victims reporting experiencing depression, paranoia, and suicidal ideation (Stevens et al., 2021).

Social media and technology is a risk factor for violence against women and girls as the prevalence of online abuse functions to silence women and cause them to censor themselves. 76% of women who experienced abuse or harassment on a social media platform made changes to the way they use the platforms, including restricting what they post about (Amnesty International, 2017).

Social media as a protective factor

Social media and technology platforms also offer opportunities to tackle violence against women and girls and promote positive change. Online spaces can facilitate opportunities to share experiences and develop societal movements. During the Covid-19 pandemic domestic violence was the most referenced topic on Twitter in discussions about women (Al-Rawi et al, 2021). In online spaces, women use hashtags such as #manterruption, #manspreading, and #mansplaining to highlight unacceptable behaviours perpetrated by men, thus forging connection and gathering support from other women, as well as raising awareness (Lutzky et al., 2019).

Whilst often dismissed, online activism can play a key role in supporting and connecting women, with the #MeToo campaign was particularly impactful, being described as *"[enabling] mass participation, connectivity, and consciousness raising, [making it] part of the combat and battle that chips away at normative gender and sexual power relations offering new possibilities"* (Mendes & Ringrose, 2019, p.14). Similarly, the Everyone's Invited project started as an Instagram account which raised awareness of sexual abuse happening in schools was influential in encouraging the government to review children's experiences of sexual abuse and harassment (European Parliament, 2023). While there have been successful campaigns started online, the rapidity of social media and technology's expansion means it presents an ever-growing danger to women and girls experiences of violence.

Gambling

Gambling is the act of placing money, or something of value, on a random event with the intent of winning more money, or something of greater value (University of Reading, n. d.). Gambling methods can include gaming, betting, casinos, lotteries and speculation. There are also some blurred lines when it comes to gambling through online platforms that offer other forms of game currency.

Those who struggle with gambling problems are more likely to suffer from low self-esteem, stress-related disorders, anxiety and depression. Experience of abuse is also widely recognised as a source of these issues. Childhood trauma has also been identified as a significant predictor of a diagnosis of gambling disorder with physical neglect also being a notable factor (Horak et al., 2020).

Psychologists examined responses from a UK cross-sectional representative survey in 2009 with 3025 men. Analysis found that just over a quarter who had probable pathological gambling problems had witnessed violence in the home as a child. Ten per cent also reported being physically abused in childhood, and a further seven per cent said they had suffered a life-threatening injury. The study, led by the University of Lincoln, also found that 35 per cent of pathological gamblers had suffered serious money problems as adults, 29% had been convicted of a criminal offence, and almost 20% had experienced relationship breakdowns. In comparison, for non-problem gamblers the figures came in at just 12, 9, and 10 per cent respectively (Roberts et al., 2017).

Women can be disproportionately harmed by gambling-related harms from someone else's gambling, experiencing financial difficulties, relationship problems and mental health issues. It is estimated that for one individual with a gambling problem between 4 and 7 other people are negatively impacted. Men are more likely to call GamCare, the founding organisation of the UK national helpline, because of their own problem gambling. Whereas women are much more likely to call about someone else's gambling. Figures show 90% of men, as opposed to 41% of the women who contact the HelpLine, call because of their own gambling (GamCare, 2019).

Studies have found that gambling in any capacity, while not causing domestic abuse, is related to significantly increased risk of violence, including domestic abuse. A 2016 report by the University of Lincoln found that those who gamble are more likely to act violently towards their partner, with 45% of participants struggling with problem gambling having been in some form of physical fight in the last 5 years. Gambling was associated with an increased likelihood of weapons being used in acts of violence and 15% of non-problem gamblers also admitted to having had a fight while intoxicated. The study also found that pathological and problem gamblers are more likely to have hit a child, with almost 10% of pathological

gamblers and just over 6% of problem gamblers admitting to such behaviour (Roberts et al., 2016).

An Australian population study found 19.7% of problem/moderate risk gamblers and 19.3% of low-risk gamblers reported perpetrating domestic and family violence in the past 12 months, compared to 9.0% of non-problem gamblers (Dowling et al., 2018). The findings presented by Dowling et al showed that intimate partner violence perpetration increased not only with pathological gambling, but also with milder gambling problems. This was also seen by Roberts et al (2018) A large nationally representative survey of U.S. adults found that having a gambling problem tripled the likelihood of perpetrating physical intimate partner violence (IPV).

Gambling often requires substantial amounts of money to maintain the addiction. Studies highlight the prevalence of economic exploitation and abuse among women experiencing gambling-related intimate partner violence from men. Actions of perpetrators may include using the victims bank card without consent, building debts in the victim's name, restricting access to money including joint accounts. Victims may also be coerced or manipulated into criminal activity to gain money (Knowsley Safeguarding Adults Board 2024). In light of this, researchers have called for a shift in future from focusing on situational violence to also include coercive control (Hing et al., 2022).

Gambling-related IPV against women has been found to occur in the context of expressions of gender inequality, including men's attitudes and behaviours that support violence and rigid gender expectations, controlling behaviours, and relationships condoning disrespect of women (Hind et al., 2021). People impacted by gambling-related IPV face distinctive challenges, and these may be compounded by intersections with gender, generational influences and contextual factors. The characteristics of problem gambling as well as the financial, emotional and relationship stressors gambling causes was noted as intensifying the IPV. Alcohol and substance use, and co-morbid mental health issues, have been highlighted as also intensifying IPV.

Hing and colleagues (2023) explored the past experiences of older women affected by male partner violence linked to gambling. The study noted how experiences were shaped by gendered attitudes, traditional views of marriage, silence surrounding IPV, reticence to disclose the abuse, and little understanding of problem gambling. These influences deterred women from questioning their partner's gambling, and to instead keep the gambling and abuse hidden. In some instances, women who had a gambling problem felt they deserved the abuse as having a gambling problem exacerbated violence and coercive control by male partners. This was heavily influenced through gender norms which supported male authority over their female partner (Hing et al., 2023)

Evidence suggests, for many women a compulsion to gamble may be influenced by trauma, domestic abuse, and other pressures such as caring responsibilities. Therefore, gambling may

offer escapes from difficult emotional experiences. This can be a physical escape through attending a location outside of the home or a psychological escape and some women recall using gambling in hope of regaining control over their lives. Hing et al, (2022) found a self-perpetuating cycle of gambling and IPV victimisation was typically apparent, with both issues escalating over time. In the sample of 24 women who had experienced IPV, there were instances of ongoing coercive control which preceded the woman's gambling.

Parents in the Criminal Justice System

There is evidence that having parents involved with the criminal justice system is associated with perpetrating or experiencing violence in adolescence and adulthood. However, there is little understanding of how parental involvement is an influential factor for specific forms of violence, including violence against women and girls.

Having a parent in prison is an adverse childhood experience which can cause significant trauma and long-lasting negative impacts for children. As explored earlier, experience of trauma in childhood can increase the risk of boys perpetrating violence against women and girls (Zhu et al., 2024). One study found that for perpetrators of intimate partner violence having a parent in prison during childhood was twice as prevalent compared to those who had not perpetrated intimate partner violence (Roberts et al., 2011). In addition, experiencing parental involvement with the criminal justice system disrupts children's caregiving, emotional regulation, and feelings of trust influencing their behaviour in future relationships and increasing vulnerability to perpetration or victimisation of violence against women and girls.

There are intergenerational cyclical effects of parental involvement with the criminal justice system, which can influence the risk of perpetration and victimisation of violence against women and girls. Following imprisonment intimate partner violence has been found to continue and on occasions increase. In families where this occurs, children were also placed at increased risk of observing domestic abuse, which increases the risk of perpetration and victimisation in the future (Stansfield et al., 2020).

Having a parent in prison has a notable effect on aggressive behaviour displayed by boys (Geller et al., 2012), and this aggression can be exhibited through violence towards women and girls. Girls experience different impacts as a result of parental imprisonment, including earlier onset of sexual relationships and higher engagement with risky sexual behaviours (Smith et al., 2006), which can increase their vulnerability to exploitation and abuse. However, it has also been evidenced that positive interpersonal relationships act as a protective factor from future offending for children with parents who have been in prison (Luther, 2015), although this has not been directly explored in relation to violence against women and girls.

Mothers in prison have often experienced violence in their childhood, as a victim or witness, which then continued in their relationships in adulthood, including physical violence, sexual violence, psychological abuse, coercive control, economic abuse and coercion into sex work (Rogers et al., 2023). Substance use can place mothers experiencing domestic abuse at an increased risk of imprisonment, as using drugs to cope with the effects of experiencing violence can also lead women to offend (Smirnova & Gatewood Owens, 2019). Imprisonment of mothers can also be utilised by perpetrators to maintain control during their imprisonment. For example, fathers outside of prison may restrict or deny the mother contact with their

children as a means of further abusing them (Flynn, 2014). Violence can continue to be perpetrated during resettlement following prison, and experiencing domestic abuse during this period is a barrier to successful resettlement (Dominey & Gelsthorpe, 2020). Resettlement is a critical period for women leaving prison, especially those who have experienced domestic abuse, as it offers a chance to provide these women with safe and secure housing environments, so women do not have to return to their abuser (Prison Reform Trust, 2018).

Conclusion

The focus of this report has been on the factors that influence an individual's vulnerability to becoming a victim and/or perpetrator of violence against women and girls. Violence against women and girls cannot be seen in isolation from individual, relational, community, and societal factors.

Influential factors linked with violence against women and girls are not direct causes, instead a combination and accumulation of negative factors contribute to the risk, whilst a combination of positive factors may lessen the likelihood of experiencing or perpetrating violence against women and girls.

Gender inequality traverses all levels of the socio-ecological model, with patriarchal structures, misogyny, and harmful social norms normalising violence, influencing the attitudes of young boys and girls, and determining institutional responses to victims and perpetrators. However, an intersectional lens must be applied to understand the national emergency that is violence against women and girls as the overlapping inequalities women experience, including poverty, race, disability, and neurodiversity, compound risk and create distinct barriers for support.

The evidence also highlights the impact of trauma across a person's life and how early experiences of trauma relates to other influential factors to shape future vulnerability for both perpetration and victimisation. Furthermore, structural conditions such as deprivation, housing insecurity, and unequal access to services drives and sustains violence. Women and girls experiencing multiple disadvantage are more likely to encounter barriers to disclosure, disbelief from institutions, and inadequate or inaccessible support. These failures to support victims are being further exacerbated by emerging risks, including online harms and the role of digital technologies in facilitating abuse.

This exploration of the influential factors for violence against women and girls emphasises the need for a public health approach to tackling this national emergency. Effective prevention and responses must prioritise the reduction of societal inequalities, challenge harmful gender norms, including amongst children, and encourage positive environments for people to grow and learn in. This requires a coordinated and sustained commitment across all sectors to tackling violence against women and girls, through early intervention and prevention, support, and reformation, to improve outcomes for women and girls and create safe, more equitable societies.