

DOMESTIC ABUSE WORKFORCE PROGRAMMES: EVIDENCE CONSIDERATIONS

We know that effectively supporting children and families affected by domestic abuse requires the right conditions, with workforce that is skilled, confident and supported. We explored the existing evidence base on workforce development on domestic abuse, alongside other scoping activities. We found several programme features that appear promising across the evidence base. We also identified important gaps in our understanding of what works, for whom and in what contexts, particularly for marginalised groups, with a focus on minoritised ethnic families.

Our scoping has led us to two complementary strands of work: an impact evaluation of a workforce development programme and evaluation capacity building for a By-and-For organisation delivering a workforce development programme.

What programme features have been shown to be promising?

There is a well-established evidence base on professional development, much of which has been based within the education sector. The Education Endowment Foundation (EEF) commissioned an extensive evidence synthesis, which underpinned a [guidance report](#) highlighting what makes effective professional development within schools (EEF, 2021). The key recommendations of the report are;

- When designing and selecting professional development, **focus on the mechanisms**
- Ensure that professional development **effectively builds knowledge, motivates staff, develops teaching techniques, and embeds practice**
- Implement professional development programmes with care, **taking into consideration the context and needs** of the school.

Considering these principles in the context of workforce development on domestic abuse, programmes are likely to be effective when designed around clear mechanisms of change, taking into account the complex contexts in which practitioners work.

Workforce development on domestic abuse

Evidence suggests that effective training programmes for professionals focus on strengthening **practical skills and confidence**. Specific gaps in confidence and skills include working with perpetrators, supporting children affected by domestic abuse, awareness of children with disabilities who might be experiencing domestic abuse, and meeting the needs of diverse



communities (Westwood et al., 2024, pp. 10-11). Research highlights the importance of equipping practitioners to respond effectively to **intersecting needs**, such as understanding the additional barriers that minoritised ethnic survivors may face in disclosing abuse, with qualitative evidence indicating a need for tailored content on people's specific needs (Bracewell et al., 2024, pg. 13)

There is value in **including specialist knowledge and lived experience in the design and delivery** of workforce development programme. Harnessing survivors' perspectives is valued by practitioners and appears to strengthen their learning and ability to respond to domestic abuse (Westwood et al., 2024, pg.12). Drawing on expertise from the specialist sector enhances the perceived authenticity and credibility of workforce training programmes (Bracewell et al., 2024, pg. 16; Turner et al., 2015, pg. 19)

One-off training is not enough when seeking to embed change (Turner et al., 2015, pg. 35). Ongoing development after training is important to help people keep and use what they have learned about supporting survivors (Robinson et al., 2025, pg. 30; Bracewell et al., 2024, pg. 14). This should be integrated **both within the training design and how the programme is offered over time**. Some examples include scaffolding training across different roles and career stages; offering refresher or booster sessions; and providing regular opportunities for applying learnings (Bracewell et al., 2024, pp. 14-15; Robinson et al., 2025, pg. 31; Turner et al., 2015, pp. 38-31; Westwood et al., 2024, pg. 10).

Workforce training is more likely to be sustained and translated into practice when **surrounded by wider change within organisations and across the system**, rather than being delivered in isolation (Bracewell et al., 2024; Turner et al., 2015). This can include building and maintaining partnerships with local specialist domestic abuse services; introducing and embedding domestic abuse champions within teams; and working collaboratively to embed consistent practice changed across the wider (multi-agency) system (Bracewell et al., 2024; Westwood et al., 2024, pg. 10; Turner et al., 2015)

Importantly, research also points to the importance **of integrating wellbeing considerations within workforce development** through reflective spaces and structures (Robinson et al., 2025; Westwood et al., 2024, pg. 11). This is because responding to domestic abuse can give rise to wellbeing challenges, which affect practitioners themselves and their practical and emotional capacity to support survivors.

Strengthening the evidence base

There is a need for more rigorous testing of workforce interventions (Westwood et al., 2024, pg. 75). We would like to see experimental designs, evaluating well-defined programmes, utilising common outcome measures, and incorporating a longer-term follow-up (Turner et al., 2015, pp. 30-31). Additionally, there is space for further research to evaluate the impact of different modes of workforce development delivery, including in-person, online and hybrid approaches (Westwood et al., 2024, pg. 75).

Further evidence is needed on the implementation and impact of whole-organisation approaches to workforce development (Bracewell et al., 2024, pg. 17). This includes whether workforce intervention effects translate into improved outcomes for children and families affected by



domestic abuse (Turner et al., 2015, pp. 30-31). Incorporating the experiences of survivors engaging with services is also an area for development in future evaluations (Bracewell et al., 2024, pg. 17). There is scope to further understand how workforce development leads practitioners to respond to diverse and specific needs, particularly those of marginalised communities (Bracewell et al., 2024, pg. 17).

Supporting minoritised ethnic survivors

Evidence consistently shows that domestic abuse is experienced and responded to in unequal ways, with identity and circumstance shaping survivors' needs and outcomes (Lowe et al., 2025). Black and minoritised women often require culturally and contextually specific support; however, these needs are frequently unmet due to workforce limitations. Meta-syntheses highlight deficits in culturally competent provision, describing services as "ineffective", "inadequate" or "culturally irrelevant" for minoritised communities (Hulley et al., 2023; Green et al., 2024). The Domestic Abuse Commissioner (DAC) reports that non-specialist services often struggle to understand the complexity of minoritised survivors' experiences, while people report better outcomes where survivors access By-and-For provision: 78% of minoritised survivors accessing such services reported feeling safer, compared with 48% accessing other services (DAC, 2022).

While By-and-For Organisations cannot meet these needs alone, they are well-placed to inform and deliver workforce training that addresses gaps in practice across the wider statutory and voluntary sector (Thiara & Harrison, 2021; DAC, 2022). However, there remains limited evidence on whether, how and why domestic abuse workforce training led by By-and-For Organisations is effective, including due to systemic barriers to evaluation capacity.

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