

BRIEFING REPORT

REVIEW OF ORGANISATIONAL STATEMENTS

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INTRODUCTION

Women working to support women in the welfare sphere: psychosocial challenges is a research project exploring the the psychosocial wellbeing and personal welfare of women workers in organisations offering services, support and advocacy to women and girls who may be socially isolated, economically marginalised and disadvantaged. A particular aim of the study is to capture how the COVID-19 pandemic may be exacerbating pre-existing challenges upon the professional and personal lives of the workers, and the efficacy of the services that they provide. Funded by the Nuffield Foundation, the research is a collaboration between a team from the University of Glasgow, the University of Cambridge, and the University of Massachusetts, Dartmouth.

As part of the research, a review was conducted to analyse organisational statements and reports, with the aim of understanding how organisations experienced, and adapted to the pandemic. This briefing outlines the key findings and is based upon a full report.¹

ORGANISATIONAL STATEMENTS AND REPORTS REVIEW - METHODS

Between October and December 2021, a desk-based mapping exercise took place to identify UK organisations who work with marginalised, disadvantaged or socially isolated women and girls in a wide variety of ways (see <http://womensupportingwomen.uk/our-blog/>). Organisations were filtered according to their target audience and mission, with 535 being selected for inclusion. Their websites and Twitter feeds were examined for statements, blog posts or reports which had content relating

¹ The full report gives further details of the themes, including organisational examples and quotations.

to Covid-19. Statements and or reports were included from 231 organisations: 200 statements and 33 reports.² They were analysed thematically.

The timeframe within which the statements and reports had been produced was from March 2020 to December 2021, meaning that they reflect a range of perspectives, news, changes and challenges. The statements tended to be aimed predominantly at clients and partners, often providing practical information about how services could be accessed, and changes being made due to the pandemic. The reports usually reflected longer time periods, and contained more detailed information, reporting upon organisation adaptation to the pandemic, achievements, challenges and learning.

KEY DEMOGRAPHICS OF ORGANISATIONS INCLUDED IN THE REVIEW

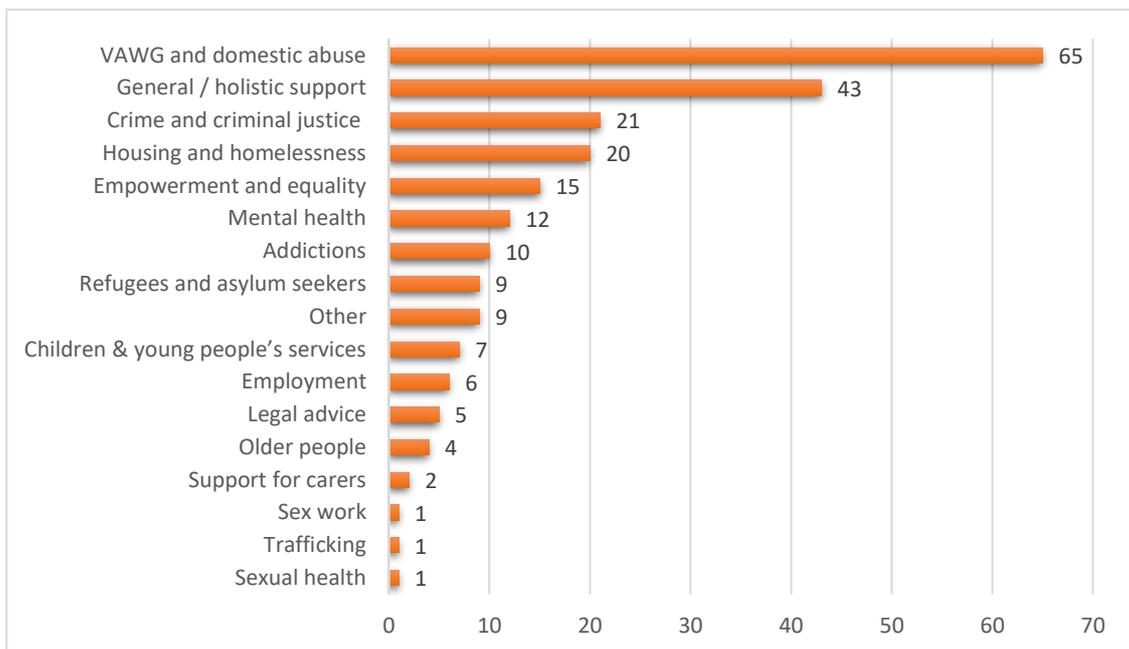


Figure 1: Nature of services

Whilst many organisations address more than one issue, the main focuses of the organisations can be seen in Figure 1. Figures 2 and 3 indicate the main geographical location and scope of the organisations. Some worked specifically with protected characteristic groups only: 87 worked with women only; 14 worked with black and minority ethnic groups; 7 with people living with disabilities; and 2 with LGBTQ+ people.

² Two organisations had both a statement and a report analysed.

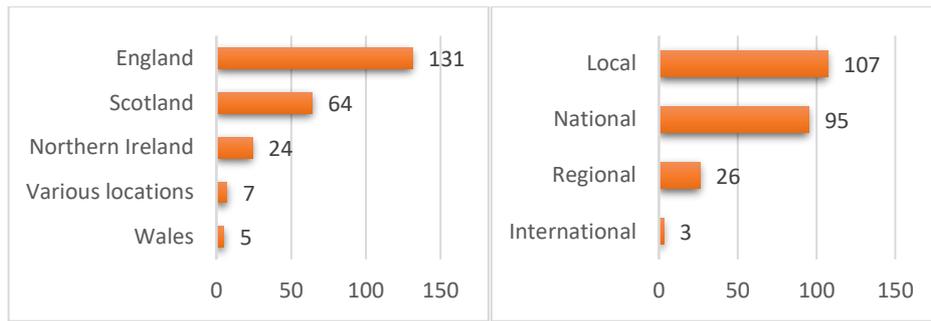


Figure 2: Location of services

Figure 3: Geographical scope of services

Key Themes

The content of the statements and reports were analysed, and key themes drawn out. These were placed into three different levels: individual, organisational and structural, although it is recognised that these overlap and intersect. ‘Individual level’ refers to factors experienced by, related to, or aimed at individuals rather than organisations. ‘Organisational level’ refers to factors or findings related to, or changes made or experienced by organisations. These do have impact at the individual level and are affected by factors at the structural level, but they are predominantly visible at the level of the organisation. ‘Structural level’ refers to aspects of the overarching societal systems, institutions, hierarchies and norms and patterns that shape and impose controls upon society, in turn impacting upon organisations and individuals.

Individual

Advice/information on Covid-19 and signposting

A common use of the statements and reports was the provision of information, advice and guidance about COVID-19 to their client groups.

As well as advice on health, this included other issues potentially affected by the pandemic such as visas and asylum issues; mental health; safety for those experiencing abuse; criminal justice issues; addictions; wellbeing; finances; and employment rights. Organisational contact details were often provided to ensure clients could contact them despite reduced face-to-face engagement. Signposting was common, often to national helplines/organisations and emergency numbers, but also to smaller local services. For some, signposting had become harder, with many usual referral agencies closed or working reduced hours. Organisations acknowledged that digital poverty, rendered more visible during the pandemic, could impede women’s access to crucial information.

Support for access to services

Information about increasing access to services during the pandemic was given, usually relating to digital inclusion, including the provision of laptops, tablets, data, internet access, and digital skills training.

Ways of increasing access to services during the pandemic were described, usually related to digital inclusion, including the provision of equipment, internet access and digital skills training. Some receiving grants specifically for such initiatives. Other ways of increasing access included providing mobile numbers for women to text if they felt unsafe in making calls, arranging 'safe' contact times, and money for phone top-ups.

Increased concern about client groups

Increased concern for clients was a key theme, with fears and knowledge of how the pandemic could worsen the situations that their clients experience.

Increased concern for clients was a key theme, with descriptions of the pandemic worsening their situations, but with reduced ability to access help. A key fear was of lockdown increasing isolation, risk and control for those experiencing domestic abuse. Reduced move-on options was another key theme, affecting various groups and often resulting in prolonged stays in unsuitable accommodation. Economic impacts and increased financial difficulty were raised frequently, including financial impacts exacerbating domestic abuse, with calls for government assistance. The unequal impact of the pandemic upon certain groups was raised, specifically women and girls from black and minority ethnic backgrounds, and those living with disabilities or long-term health conditions. Relating to all concerns was their impact upon mental health.

Organisational

Increased demand for services

Increased demand for services was clear, including increases in: online contact where domestic abuse survivors were unable to make calls; requests for refuge bed space; and demand for employment support. Impacts upon organisations included having to make difficult decisions very quickly, long waiting lists, and intense, long working hours. For some, the additional Covid-related needs of existing clients added to the workload. For others, the switch to digital services was so

successful that workloads dramatically increased. Several domestic abuse organisations saw initial reductions in service demand, however, over time, particularly as the first lockdown eased, demand surged.

Changes to service delivery

Most organisations reported changes to service delivery, predominantly moves from face-to-face services to online, telephone and messaging services.

Some contacted clients to check preferred method of communication, with factors such as safety, or digital access influencing their choices. As social distancing measures changed throughout the pandemic, so did modes of service delivery, with blended or hybrid services arranged. Some services were put on hold, due to funding or difficulty of conducting activities remotely. Organisations who continued with their normal modes of operation, such as emergency accommodation and food banks, did so in line with Covid-19 safety measures, which could be challenging. Some changes were viewed as positive, resulting in more effective ways of working, for example, moving services online often increased accessibility for training courses and support groups. Challenges included digital exclusion, and the functioning of relationship-based practice online.

New services/initiatives

New and creative ways of supporting client groups through the challenges of the pandemic and lockdowns were detailed by many organisations, including: provision of resource and activity packs; welfare and financial packages; creation of community zines and newsletters; new ways of contacting services, such as a 'chat bot' in a domestic abuse service; new online courses and qualifications; and podcasts/webinars.

Plans to retain new/adapted services

A common theme was the identification of particularly effective new or adapted services, that organisations planned to retain.

This was often because of increased accessibility and uptake, or through the identification of a safer or more appropriate mode of delivery. Improved digital skills for some groups were described as a positive consequence of the pandemic. Covid-19 specific funds meant that some organisations developed and trialled successful new initiatives for which they planned to seek further funding.

There were wider sectoral and societal impacts of changes to service delivery, for example, increased sharing of evidence and good practice with the sector and for policy purposes.

Collaborations

Covid-19 prompted new collaborations between organisations in order to better address emerging challenges.

These had different purposes, including campaigning for better governmental responses; improving client safety; accessing funding and resources; and improving or increasing services, as well as avoiding service duplication.

Staffing and impacts upon staff

Some organisations had placed staff on furlough. Others described the redeployment of their staff, often because of illness, self-isolation, or changed service delivery - and the need to ensure that they were adequately trained and supported for their new roles. Volunteering workforces were impacted, with both increases and decreases in numbers described, due to changes in activities conducted during the pandemic.

A wide range of concerns about the impact of the pandemic upon staff were detailed.

Practical concerns included infection risk, and physical implications of home working such as equipment, office space, digital access and security. Emotional impacts included balancing home working with childcare, and working extended hours, for example to reach domestic abuse clients at safe times.

Some reports described the challenges of conducting traumatic work from home and the loss of face-to-face work in relationship-based practice. The isolation and reduced support that could result from separation from colleagues and managers was raised, with some descriptions of initiatives put in place to address this. However, some benefits for staff were also noted, including: positive changes to staff communication; flexible working patterns; improved digital skills and communications; increased camaraderie amongst teams; and for some, increased confidence amongst staff who found themselves working more independently. Many reports and statements thanked staff for their work and adaptability.

Structural

Gendered impacts

With different audiences, the messaging of the reports and statements differed. Some were far more attentive to structural inequalities, often those with an explicit feminist ethos to their work, or who provided specialised services to women. These drew attention to the intersection of the pandemic with wider, pre-existing gender inequalities, exposing and compounding these, creating disproportionate burdens upon clients *and* workers. The reports and statements revealed that, for women and girls generally, gender inequalities exacerbated by the pandemic were experienced in a multitude of areas: physical and mental health, economic status, job security, formal and informal working responsibilities, and relationships with families and friends. Violence against women and girls increased concurrently. However, some reports described how these inequalities were not experienced equally by all women and girls, advocating an intersectional lens by drawing attention to the additional disadvantages experienced by marginalised groups of women and girls, including black and ethnic minoritised women, women living with disabilities, and LGBTQ+ women, who were at increased risk from both pandemics. Yet some described how the experiences of women with protected characteristics were not often included in wider responses to Covid-19, including policy and funding. Staff supporting marginalised women are more likely to themselves be women, and the double burden that these workers were shouldering was acknowledged. There were multiple dimensions to this: infection and health worries; additional caring responsibilities alongside work; precarious jobs; increased workloads; all whilst experiencing isolation from colleagues and reduced organisational support.

Access to funding/financial implications

Concerns over the sustainability of funding were shared by many organisations, who worked hard to limit the impact on their services.

Many organisations detailed financial concerns, and were working hard to limit the impacts, with spending freezes on non-essential items and recruitment; and pausing non-essential projects. Many key fundraising events were cancelled and retail shut, and instead fundraising appeals were included, ranging from general appeals to support organisational operations, to specific requests for items for clients. Applications to emergency funding sources had been successful for some, but others, often small organisations, felt excluded from mainstream emergency funding sources. The unequal nature

of the emergency funding was highlighted, with services working with women who were black and minoritised, deaf and disabled, or LGBT+ survivors especially disadvantaged. Many spoke of the need for such sources of funding to be long-term: short-term funding could help but could also place additional pressure on organisations.

Advocacy/campaigning

With the pandemic highlighting and exacerbating pre-existing issues – of inequality, disadvantage and isolation, of funding and governmental commitment, and of long overdue societal change – several organisations were campaigning around this. They emphasised that short-term, emergency funding did not replace the need for long-term sustainable funding, resources, commitment and policy. Organisations described national sectoral collaborations to encourage an effective government response.

Conclusion

The review of organisational statements and reports paints a picture of the experiences of organisations as the Covid-19 pandemic took hold, detailing challenges, opportunities and learning. In relation to the current research, the impact of increased individual, organisational and structural challenges upon both the personal welfare of the women workers, and upon the efficacy of the services they deliver could clearly be seen. The impact upon staff and volunteers of having increased concerns for those with whom they work cannot be underestimated. The review reveals how these very real fears, illustrated and matched by increased service demand and intensity of work, often sat alongside reduced ability to conduct their work; increased pressures and demands upon staff who were working from home, balancing childcare or ill or isolating; personal social and economic challenges; and often reduced organisational funding and resource.

The gendered impacts of the pandemic upon women workers, as well as the women and girls they serve, were written starkly in this collection of statements and reports, with a particular emphasis upon those already experiencing structural inequalities. We support the calls of those whose statements and reports are advocating for policy and practice responses committed to challenging and addressing the unequal gendered outcomes of the pandemic, and deep-rooted gender inequalities, particularly concerning the need for fair and well-paid employment and support for mental health and wellbeing.