



Evaluation of Data Jan-Dec 2020

MARCH 2021

Muslim Women's Network UK

TABLE OF CONTENTS

FOREWORD	3
MWN HELPLINE EVALUATION 2020	4
SUMMARY 2020: ADJUSTING TO THE CHALLENGE OF A GLOBAL PANDEMIC	6
OVERVIEW OF MWN HELPLINE SERVICE	9
MAKING A DIFFERENCE: THE IMPACT OF THE MWN HELPLINE	13
MENTAL HEALTH ISSUES	20
DOMESTIC ABUSE	25
DIVORCE	29
COLLABORATION- MULTI-AGENCY	32
MWN HELPLINE TEAM MANAGEMENT	36
ORGANISATIONAL IMPROVEMENTS	48
LEARNING FOR THE FUTURE	51
RECOMMENDATIONS FOR ACTION	52
APPENDIX	54
1. Impact Made 2020	
2. Issues Addressed with Service Users	
3. Testimonial Form 2020	
DATA SUMMARY	63

FOREWORD

As we entered our 6th year of operating the MWN Helpline in 2020, we were expecting to continue building on the success of the previous years, increasing the numbers and impact of our volunteers, and investing in more staff training on the issues that we were finding most challenging to handle as a Helpline team.

By the end of February 2020 it was clear to us as a management team that the growing threat of the Covid19 pandemic would mean fundamental changes to how we operated the Helpline. We started planning to move our team to remote working in early March and prepared ourselves to handle the consequences of a global pandemic. We managed to ensure a consistent service throughout the pandemic and our team did a remarkable job in making the transition from working in a shared office space to working remotely from their homes.

This evaluation report therefore reflects both the challenges of Covid and our organisation moving into the next stage of our organisational development. This report has provided a focus on some of the main issues that we have addressed on the MWN Helpline and explored these in greater detail. It also has an overview of how we were able to adapt our service so quickly in response to the challenges of the pandemic.

I want to thank our Helpline manager and team for the way that they have positively responded to the challenges of 2020. They have all gone above the expectations we had of them and have worked tirelessly to ensure that our service users have been able to access the service by phone (or increasingly by text-based services)

We are grateful for this opportunity to reflect and review our practice, to identify the patterns and trends and to highlight the ways that we can continue to improve our practice for the years ahead.



Faeza Vaid MBE
Executive Director

MWN HELPLINE EVALUATION 2020

Established in 2015 by the Muslim Women's Network UK (MWNUK), the MWN Helpline is a national specialist faith and culturally sensitive service which provides information, advice, support, and referrals. Individuals can make contact via telephone, email, webchat, and text. The MWN Helpline is staffed 5 days a week between 10.00 and 16.00 by a team of well-trained employees and volunteers providing a confidential and non-judgemental service to each service user. Many of the staff are bi-lingual, which means that the MWN Helpline can provide advice in English, as well as Urdu, Punjabi, Mirpuri, Potwari, Hindko, and Bengali more easily. Where additional languages are needed, an interpretation service is used.

The MWN Helpline provides a contemporary source of the lived experience of Muslim women and girls which MWNUK can use in wider campaigning and advocacy work. The annual evaluation process and reports have supported the team to identify trends and challenges that need to be discussed and addressed in wider forums. This has helped MWNUK to act as advocates for the individuals concerned and to drive for changes in policy and practice to prevent these issues becoming widespread/to bring about systemic change.

The Covid-19 pandemic 2020 has made this year a particularly challenging year for both Helpline users and team members. The team have had to react quickly to maintain a consistent level of service provision and respond to the changing needs of service users during this global pandemic, whilst working from home. This report provides an overview of the main services provided, the main issues and impact of the MWN Helpline on the lives of the service users and provides insight into the running of the organisation. The objective of this evaluation report is to provide the team, the MWNUK Board, MWNUK supporters and funders insights about the services provided, the difference that these services made, some of the challenges and the learning for the future.

Data Collection Methods

The process for the report involves the collection of data from the case recording system and a comparison with previous years. This is supplemented with qualitative data collected from the following sources:

- **Focus Group Sessions** - 3 focus groups were facilitated, involving employees and volunteers, and providing an opportunity for individuals to provide reflection on the successes and challenges of the year.
- **Management Team Interviews** - 2 interviews were conducted with the MWN Helpline Manager and with the Executive Director to explore strategic decision making, training and supervision support and changes in policy.
- **Staff/Volunteer Survey** - an online employee engagement survey was provided in January 2021 and the results compared with a similar survey conducted with the team in January 2020.
- **Covid Review** - in June 2020, the team members all completed an evaluative survey which provided them with the space to capture their reactions to the changes to the MWN Helpline service caused by the Covid restrictions (this was done with the expectation that by January 2021 when we start the evaluative review the service would have returned onsite, and the memories of lockdown would no longer be as fresh)
- **Testimonials and Case Studies** -the MWN Helpline team conducted telephone interviews with service users to ask for testimonials and use a questionnaire to collect their views about their experience of the Helpline. These documents are collated and provide valuable service user insights. The team manager also provides case study summaries which demonstrate the way that the team have made a difference to individuals and explores in detail any safeguarding issues.
- The report is written by an independent evaluator, Christine Bell from Centre for Facilitation.

"I pray that MWNUK grow bigger and better to empower the women who sometimes can't find their voice." - Service User 2020

Funders

The MWN Helpline has been funded during 2020 with grant support from The National Lottery Reaching Communities Fund, and Comic Relief with case worker support from the Henry Smith Charity. Additional funds were provided in 2020 by the Home Office and West Midlands Police Crime Commissioner to adapt the service to remote working and respond to the extra demand during the Covid 19 Pandemic. These funds included contributions to support the purchase of equipment and for additional counselling resources. Contributions were also made by three family foundations to support the provision of counselling, hardship fund and helpline activities during the pandemic.

SUMMARY 2020: ADJUSTING TO THE CHALLENGE OF A GLOBAL PANDEMIC

2020 will be remembered globally as the year when Covid 19 impacted on the lives of us all. This evaluation report will reflect the way the global pandemic affected the working practices of the MWN Helpline team and the lives of the service users.

2020 will have a long term emotional, physical, and financial impact on the lives of both service users and team members. The pandemic has been particularly brutal in its impact on the communities that the MWN Helpline staff come from and that they seek to serve. As a recent report “Overexposed and Under protected” observes; BAME communities in the UK:

“are more likely to be working outside their home, more likely to be using public transport, more likely to be working in key worker roles, less likely to be protected with PPE and more likely to live in multigenerational, overcrowded housing, so much less able to self-isolate and shield.”
Report by Runnymede August 2020¹

Throughout the pandemic the MWN Helpline team have worked hard to support their communities and have shown remarkable resilience. They have supported each other from their remote working locations through this year with care and compassion that is reflected in high levels of employee engagement and positive feedback from service users.

Significant Adaptations in 2020

During 2020 organisations had to respond to the constantly changing situation and evolve their practices. These are the five main adaptations that MWN Helpline team made so that they could operate safely and could respond to the needs of their service users and to continue to improve the service delivering and evaluation.

1. Implementing Remote Working

The MWN Helpline has always operated from a central office location. Moving employees to remote working was disruptive but essential to ensure their safety during the pandemic. Action was taken quickly and decisively, with minimal impact on the service delivery. The team have only positive comments about the way that this transition was handled:

¹ <https://www.runnymedetrust.org/uploads/Runnymede%20Covid19%20Survey%20report%20v2.pdf>

“MWNUK handled the lockdown really well. Right from the beginning they were clear about what was happening and how they would handle it. They have been transparent in how they would like us to work from home, as well as being well organised. They have also had regular check in with staff to ensure they are all comfortable.” Covid Staff Survey

2. Providing Time and Space for Service Users to Share

The MWN Helpline was established as an initial point of contact and signposting service. It was assumed that contacts would be relatively short and with a clear action plan provided. This was sometimes challenging for the team to put into practice and the contact times started to increase and therefore there were concerns that the team were becoming over-stretched.

By 2019 the team re-focused on managing service users in a more concise manner so that there were more opportunities for others to be supported and to reduce the risks of service users become overly dependent on the service. However, during the pandemic it quickly became apparent that service users needed more time and space to share their concerns and were seeking a greater level of emotional support. Understanding the impact Covid-19 was having on people’s lives meant that the team adapted in the short term to this need by providing service users the time and space that they needed to ‘offload’.

“We have spent longer talking to service users, this has been helpful as many of them have wanted to just offload what they were feeling, and by doing so we have provided emotional support.” Covid Staff Survey

3. Making More Use of Text Based Contact Methods

The team recognised that the Covid restrictions meant that service users were often unable to find the privacy that they needed to talk to a member of the team. Previously they may have been able to make a call whilst taking a child to school or going to the shops but during the pandemic they were isolated in their homes, often with the person who was abusive towards them.

While a phone call is often the more effective and efficient way to provide support to a service user, MWN Helpline has always also provided support via text, email, and webchat., Use of these modes increased during 2020 to **35%** of contacts from **21%** in 2019. This shift in approach meant that many service users could make contact outside of the Helpline opening times and make contact when it was safer for them to do so, and thereafter expect a response during the opening hours.

4. Providing Consistent Support to Vulnerable People

During a period when many service providers had to limit their hours, or in some situations had to close their service, the MWN Helpline team continue to provide a consistent 5 day a week service between 10am-4pm.

"I feel privileged that I can offer support and advice to vulnerable service users during these unprecedented times." Covid Staff Survey

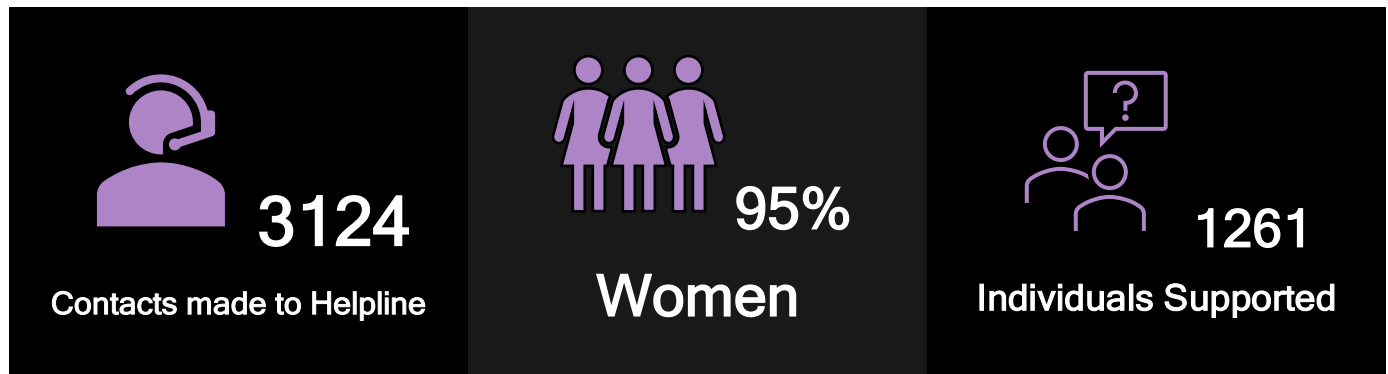
The MWN Helpline team engaged proactively with external agencies to ensure vulnerable service users were protected, and there was an increase in the number of referrals made directly to either the police or social services from **5%** of all cases in 2019 to **8%** in 2020. The team invested time in supporting service users to navigate their way around the limited range options so that they could move to places where they were at less risk of harm and provided a consistent source of contact when vulnerable service users were moved across different regional boundaries.

5. Making Use of Data to Review Service Delivery

From the establishment of the MWN Helpline the collection of data from service users has been important to measure the impact of the Helpline. Data collection has significantly improved in 2020 and consequently the data now provides an accurate overview of the different services users, their needs, and the impact of the helpline on them.

In 2020 there has been a shift towards using this data more strategically to assess the levels of service demand and to identify any changes in the types of issues being addressed. There were regular management meetings to review the data and to predict likely service needs over the next period. This strategic approach supports the management team to plan staffing and training so that the team are responsive to any changes in service demand and to adapt to the needs of service users.

OVERVIEW OF MWN HELPLINE SERVICE



Who Contacts the Helpline

In 2020 there were a total on **3124** inbound contacts made to the MWN Helpline and a total of 1261 individual service users were supported. **95%** of service users are women, and 5% are men calling for direct help themselves, often because they were seeking a culturally sensitive and/or faith based non-judgemental service. Almost all service users had a faith background, mainly Muslim (**96%**²) and 2.5% had other faith backgrounds including Christian, Hindu, and Sikh. A small number of service users (**5%**) have a disability.

45% of service users come from a Pakistani ethnic background and **87%** of calls are conducted in English. The team can speak several additional languages and many calls were also handled in Bengali and Urdu. This year the team have also more actively captured immigration status and 8 in 10 service users³ are British citizens. It is noted that **1 in 10** service users had an insecure immigration status and this can often be an additional factor which can make them more vulnerable to domestic abuse and financial hardship.

² % of 1208 Service users where faith was specified

³ % of 1210 service users where immigration status was known

In 2020 **8 out of 10⁴** service users were under 40, a figure which is consistent with previous years. **32%** are in the age group 31 - 40 and **5%** of service users are 18 or younger.

Age Group	Numbers Recorded	%
Under 16	13	1%
16-18	34	4%
19-21	66	7%
22-25	161	17%
26-30	159	17%
31-40	304	32%
41-50	137	15%
51-60	60	6%
Over 60	7	1%
TOTAL	941	100%

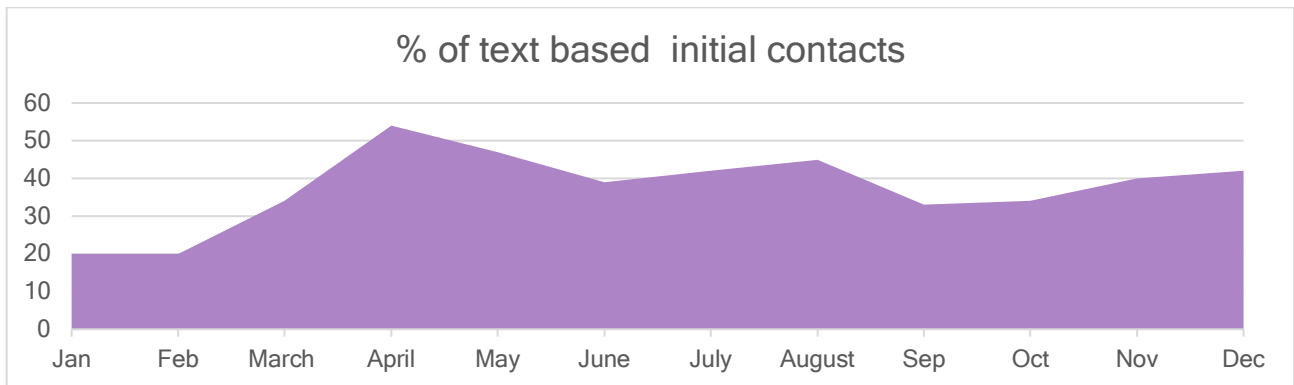
The MWN Helpline is accessed across the UK with 1 in 2 callers (where location is known) living in London and West Midlands. This year has seen a slight growth in calls from the East of England and from the North East and a slight reduction from the North West. 1 in 25 calls are made by service users who are living outside of the UK.

How people make contact

The team have observed a shift over the last five years towards text-based contacts and this year **38%** of initial contacts were made using a text-based service: Mobile phone text, Email or Webchat. By comparison in 2018 just **21%** of initial contacts were made using text-based methods. What was also noticeable was that in 2019 the webchat was rarely used, with just 1% of contact made using this method. During 2020 this increased to 8% of contacts. It is likely that more contacts were attempted but because the team members were engaged on other calls, they may not have responded immediately to webchats which meant that these contacts were sometimes abandoned.

Looking at the monthly proportion of initial contacts made by text-based methods there is a clear spike in March to over half of the contacts being made in this way. This spike correlates to the imposition of the first national lockdown on 23rd March 2020.

⁴ % of the 941 service users where age was recorded.



The MWN Helpline team observed that lockdown affected the normal opportunities to have private conversations, either away from home or whilst the household were out at work.

The team adapted their normal protocols to respond to these new circumstances:

“They were trapped at home not able to go to shops and schools, there was no space for them to have that conversation with us...Previously we would have responded by trying to move them onto a voice call, but we recognised that there were issues with privacy, so we continued the conversation using webchat/text”.

As a result of more people making contact using text-based methods the team have successfully secured funding to develop a domestic abuse app which would be a less obvious place for controlling partners/family to check and provide a safer way to message the team and access information about rights and support available. It is anticipated that this will be launched in June 2021. The team could also consider having a specialist worker to handle webchat and emails whilst other workers can focus on the phone contacts.

Why people make contact?

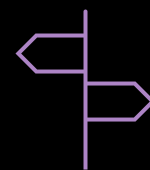


43

Different issues raised by service users



Mental Health and Domestic Abuse most frequently raised issues



96%

Of contacts reported that their contact with MWN had made a difference to them

Contact is made with the MWN Helpline from people looking for support and advice. During 2020 there were **43** issues raised in contacts with service users. The five most frequently raised issues were:

- Mental Health Feelings - 40% of calls⁵
- Domestic Abuse - 37%
- Divorce - 19%
- Housing/Homelessness - 16%
- Faith/Spirituality - 13%

Most service users (96%) report that the contact with the MWN Helpline made a positive impact. This included being more aware of support that is available, feeling listened to, feeling more confident to deal with problems or more informed about their Islamic rights.

Staffing Summary

The MWN Helpline team were fully staffed throughout 2020 with a total of 3509 hours worked between a staff team of 7 part-time workers to ensure coverage for the operational hours of the MWN Helpline (10.00 - 16.00 on Mondays - Friday) and for the briefing and debriefing time (9.15-10.00/16.00-16.30) by a minimum of two workers.

In addition the MWN Helpline is supported by a full time Helpline manager, volunteers, and caseworkers (14 hours a month January to October and 28 hours a month from November 2020). During 2020 the MWN Helpline manager became involved in front line service, responding to emails, texts and calls due to the high volume of contacts during lockdown. An additional 490 hours were worked by Helpline staff to cover the requirements of the MWN Helpline, and these hours were covered with overtime payments. Over 80% of MWN Helpline worker time is spent on direct work with service users and addressing their needs.

⁵ The numbers add up to more than 100% because up to 3 issues may be raised by each service user and captured on the database.

MAKING A DIFFERENCE: THE IMPACT OF THE MWN HELPLINE

The MWN Helpline was established to provide a faith and culturally sensitive service that would be able to offer information, advice, and signposting to other services. There are three strategic outcomes for the service.

1. **Muslim women will have better life chances** due to accessing the advice/information/support and by reporting/leaving abusive situations.
2. **The mental well-being of Muslim women will improve**, becoming healthier and more active due to accessing advice/support and counselling that will enable them to make choices that will improve the quality of their mental health and reduce the likelihood of self-harm.
3. **Stakeholders will become better informed about abuses faced by Muslim women** through shared learning from the helpline, enabling collective working to build stronger communities.

At the close of each call the MWN Helpline workers will record the different impacts that the call made to the service user (up to three impacts are recorded). This assessment is based on comments made by the service user and on Helpline worker's assessment of the impact of the call. In addition follow up calls are made to a selection of service users to assess the longer-term impact, and these are included in the testimonies and case studies used throughout this report.

Initial Impact Assessment

The table below shows the impact of the MWN Helpline intervention on service users compared to last year and shows consistency in the main impacts of the service. The main impact for **3 out of 5** service users (60%) is that they feel better informed about the support that is available to them.

1 in 2 service users reported benefiting from the opportunity to talk through their problems and to be listened to in an emotionally supportive manner. There is a slight increase in the numbers of calls registering this impact in 2020 and the team observed that during this year service users appreciated having more time,

"They needed patience and empathy and to be allowed to tell their story. Service users felt someone was listening to them, they were not alone and there was help and support if they wanted it." – Covid Survey

Impact on the Service User ⁶	2020	2019
Better Informed of support available	60%	51%
Felt listened to	53%	46%
More confident to deal with problems	28%	29.3%
Better informed of their Islamic rights	17%	21.7%
Given help by other support services due to our referral	10%	10.1%

More detailed explanations of each impact statement can be found in [Appendix 1](#)

Longer Term Impact Assessment

The MWN Helpline was established as an initial assessment and signposting service. This means that most contacts are dealt with during the initial call or a short subsequent follow up call. This can make it challenging to assess the longer-term impact of the service on the lives of its service users. Initially the only longer-term impact assessments came from feedback initiated by service users who contacted the MWN Helpline to update the team about the (usually) successful resolution of their situation. Since 2019 the management team have introduced a structured approach to assessing impact and allocate cases each month that are appropriate for a follow up impact assessment. A testimonial form has been developed ([Appendix 3](#)) to collect this information in a structured way with consent from service users.

The management team hold safeguarding case review discussions on a quarterly basis. The meeting notes capture any cases or learning insights which need to be shared with the wider Helpline team and highlights any points which should be part of the annual evaluation review. Evaluation is no longer an annual activity but is embedded into the working structure of the team.

Impact of the Pandemic on Calls

Since March 2020 6% of the issues raised by service users related directly to Covid. Examples of Covid issues included the impact of the lockdown on mental health or concerns about being unable to visit vulnerable family members. Other calls may not have

⁶ The figures show the percentage of total service users where this impact was recorded. For many service users there will be several impacts that are reported and so the percentages will add up to more than 100.

explicitly mentioned Covid, but the pandemic has had an impact on areas such as financial security - an issue that was only mentioned in **3%** of calls in 2019 but in 2020 **12%** of calls were concerning financial issues.

It is also recognised that the Covid19 restrictions have increased the social isolation experienced by many and has limited the escape routes available for service users who are in situations where they are at risk of domestic abuse. Service providers in this sector are warning of an increase in demand as lockdown eases, as the Office for National Statistics observes:

“There has generally been an increase in demand for domestic abuse victim services during the coronavirus pandemic, **particularly affecting helplines as lockdown measures eased**; this does not necessarily indicate an increase in the number of victims, but perhaps an increase in the severity of abuse being experienced, and a lack of available coping mechanisms such as the ability to leave the home to escape the abuse or attend counselling.”⁷

Covid19 restrictions have had an impact on family life and on boundaries. For some households this has increased the tension between family members because they are no longer able to “escape” from each other by going to school or work. One service user made contact to share her frustration with her grown up daughters who were rude to her and argumentative with each other. Another contact was from a younger woman who was having to work from home due to the Covid restrictions and this made the abuse she had been experiencing for years from her family intolerable because she no longer could leave the household to go to work. She felt trapped because of the limitations of options available for her to move out and live independently. The intensity of lockdown made these existing family tensions feel overwhelming.

Lockdown has made life challenging for younger people, who would normally be able to develop their own independent life and express their autonomy outside of their household. The highlighted case study demonstrates the challenge young people have experienced when parents have imposed controls on them to keep the household safe (particularly in multi-generational households, where more caution may be required because of the significant risks to vulnerable family members).

7

<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabuseduringthecoronaviruscovid19pandemicenglandandwales/november2020>

FAMILY BOUNDARIES AND COVID

Yasmina, a 21-year-old woman who was living at home, reported physical abuse from her father and she was restricted by her parents from leaving the house.

Safeguarding procedures were put in place and the case was escalated when Yasmina failed to respond to requests to make contact. When contact was finally established, Yasmina acknowledged that the accusations were false. She admitted that she was stressed about being restricted to the home and not being able to see her friends (which her father was doing to comply with national lockdown requirements and not as a form of coercive control).

The MWN Helpline team discussed this case and similar example in their team meetings and as a result agreed that they would ask more clarifying questions when accusations are made about strict boundaries being imposed to force family members to stay at home, particularly considering Covid restrictions. While in some cases this could be a situation of coercive control but in other situations it may be an appropriate action by families to comply with Covid19 requirements.

Complexity of Calls

68% of calls to the MWN Helpline are complex and involve more than one issue, and 22% of calls involve three or more issues.

Helpline workers observed that their initial contact with a service user will often be about building rapport and providing the space for the service user to “off load” the many issues that are causing concern. Service users are often overwhelmed by the perceived

COMPLEX NEEDS

Rasheeda married and moved to UK in 2019. In 2020 her husband died from Covid19, and she had no family in the UK and spoke no English. Her husband's adult children were abusing her and trying to gain control of their father's assets. Rasheeda's daughter was in Pakistan and contacted the Helpline about her concerns. The police intervened, removing the stepchildren. Rasheeda then discovered drugs and guns in her house and contacted the Helpline who asked the police to investigate. MWN provided emotional and practical support to Rasheeda to help her deal with her loss and to adapt to living in the UK.

“Thank you for your support to my mother in her time of extreme distress and need”.

complexity of their situation and cannot find a way to get started on finding a solution. It has been harder for many service users this year because they have been unable to get support from friends and family members outside of their household because of Covid restrictions and have been left alone with their thoughts until they call the helpline.

The team works with the service user to prioritise the issues and support them to navigate their way through to reach a resolution on all or some of the issues that they are facing.

Time Spent on Queries

In the 2018 evaluation there was a concern that the amount of time spent on individual queries had increased and that the MWN Helpline was going beyond its remit of an initial contact/signposting service. During 2019 the new full time Helpline Manager worked with the team to assess how the time spent with each individual service user could be reduced. There were some changes made, including a reduction in follow up welfare checks and by reminding the team that the MWN Helpline was established to provide initial support and signposting and was not designed to provide longer term case working. The interventions were effective and in 2019 the team were able to handle a rise in service users and were spending time more efficiently so that the time for each service user returned to the levels that could be managed.

In 2020 the number of individual service users and the time spent on initial queries is consistent with previous years. However there has been a **132%** increase in the time that is being spent on additional enquiries. This validates the feedback from the team that in 2020 the work has felt more intense, and they have been working harder even though the volume of calls has not dramatically increased.

	2020	2019	% change from 2019
Total Contacts Made to Helpline	3124	3133	+0.2%
Number of Individual Service Users	1261	1247	+1.1%
Amount of Time Spent (Hours)			
Initial Time Spent on Enquiries	573.75	528.75	+8.5%
Additional Time on Enquiries	2544	1092	+132.9%
Total Time Spent (initial and additional)	3117.75	1620.75	+92%
Time spent on each service user	2.47	1.29	+84.6%

Investigating further there seem to be two main reasons for this increase in time spent on each case:

1. The global pandemic created an additional level of anxiety and grief for service users at a time when they were often isolated due to lockdown requirements from their usual social contacts. The team observed that they were needing to spend more time on each call to allow service users to share their wider experiences in addition to the reason that they had made initial contact.
2. Many of the usual agencies that MWNUK would refer service users to were either closed or working reduced hours due to Covid19 restrictions. This made it more challenging to appropriately signpost or to make a referral to another organisation and therefore more time was spent on supporting the service user and exploring other possible options.

COMPLEXITY IN A TIME OF COVID19

Khalid called to ask for support and guidance about his marriage. He did not know his wife had bi-polar or was heavily in debt before he married and feels this was deliberately hidden. She had invited homeless people to their home and had reported him to the police for abuse. Although he continued to live with her out of concern for her welfare, he wanted to know what alternative options were available to support his wife, if he decided to leave the relationship.

There had been no contact with his wife's family since the marriage and the professional care offered to his wife had not been appropriate, relying on him to be a full-time carer. Due to Covid19 business closures he was also made redundant which was impacting on his mental health.

The MWN Helpline provided a safe space for him to share, advised him on support options available for his wife, and the process of complaining to the NHS about the treatment plan for his wife if he wanted to. The team supported him to feel confident to seek help and consider his own health and wellbeing, and options in the situation.

"I found MWN Helpline staff very sympathetic, friendly and warm...being able to speak with people who were sincerely trying to help me at a very difficult and lonely time in my life. I hope and wish that the MWN Helpline prosper, flourish... and grow a reputation that is recognised at a much greater level".

Issues Addressed by the Helpline

At the close of each contact the MWN Helpline Support Worker will assess it and record in the case record up to 3 issues that were raised. Over the last five years the list of categories has been updated to reflect current issues. This year an additional category was added to cover concerns or queries relating to Covid19.

The MWN Helpline Manager conducts regular reviews of this data throughout the year to spot any trends that might indicate a need for more training or support for the MWN Helpline team. The team are also able to use this data to quickly spot concerning trends in the lives of Muslim women and girls. This evidence base supports the wider work of MWNUK and is used to inform stakeholders about the current lived experience of Muslim women and girls to support changes to policies and procedures within governmental agencies or other public sector organisations.

In 2020 the five issues that were most frequently raised in calls were:

- Mental Health Feelings - 40% of calls⁸
- Domestic Abuse - 37%
- Divorce - 19%
- Housing/Homelessness - 16%
- Faith/Spirituality - 13%

The types of issues and the frequency have remained consistent across the last five years of the evaluation, and this year there has been an increase in the number of calls involving mental health feelings and domestic abuse.

The 3 most frequent issues will be discussed in more detail in the following sections and a full list of all the issues can be found in [Appendix 2](#)

⁸ The numbers add up to more than 100% because up to 3 issues may be raised by each service user and captured on the database.

MENTAL HEALTH ISSUES

General Context

1 in 4 people will experience a mental health problem of some kind each year in England according to Mind⁹. Incidences of mental health have been increasing across the population as a whole and there is particular concern about a rise in mental health problems for young women and women from BAME communities. In the 2014 “Survey of Mental Health and Well Being” all BAME groups reported higher rates of mental disorders than women from white ethnic groups¹⁰. Research¹¹ has consistently shown that there is *“a significantly raised risk of suicide and attempted suicide among young women (15 - 34) of South Asian descent”*, almost double the rates recorded for white British women.

The Covid19 Pandemic has impacted significantly on the physical and mental health of women and BAME communities. In May 2020 it was estimated that a third of COVID-19 patients were from BAME backgrounds, which is a disproportionate representation¹². The pandemic has also had a wider impact on BAME communities, impacting on both mortality levels and on cultural norms.

“During the pandemic ‘social distancing’ caused difficulties within a cultural context – ‘in our culture we support each other, we visit family, but we were not allowed to do that, that was very difficult...it was isolating and lonely...so difficult.’ This also included mourning and grieving in culturally appropriate manner.”¹³

The increased risk of Covid, the impact of multiple bereavements and the lack of community support have affected mental health within BAME communities in 2020. A recent research study¹⁴ noted that the during the pandemic:

“Both women –regardless of their ethnicity– and Black, Asian, and minority ethnic (BAME) men experienced a higher average increase in mental distress than White British men”.

⁹ <https://www.mind.org.uk/information-support/types-of-mental-health-problems/statistics-and-facts-about-mental-health/how-common-are-mental-health-problems/#References>

¹⁰ <https://www.ethnicity-facts-figures.service.gov.uk/health/mental-health/adults-experiencing-common-mental-disorders/latest>

¹¹ Husain MI, Waheed W, Husain N. Self-harm in British South Asian women: psychosocial correlates and strategies for prevention. *Ann Gen Psychiatry*. 2006; 5:7. Published 2006 May 22. doi:10.1186/1744-859X-5-7

¹² <https://www.bitc.org.uk/wp-content/uploads/2020/05/bitc-factsheet-bame-women-mentalhealthandcovid-19-may2020.pdf>

¹³ <https://www.gov.uk/government/publications/social-care-sector-covid-19-support-taskforce-report-on-first-phase-of-covid-19-pandemic/bame-communities-advisory-group-report-and-recommendations#part-1-report-and-recommendations>

¹⁴ <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0244419>

Mental Health Issues: Helpline Response

The most frequently raised issue in 40% of calls was the broad category of “mental health and feelings”. This could include anxiety, depression, sleep issues, low mood or other descriptions supplied by the service user during the call. In addition other mental health issues were captured in sub-categories of isolation/loneliness, suicide/self-harm and eating disorders. When all these categories are summarised together **1 in 2** cases in 2020 were recorded as relating to mental health issues.

There has been a significant increase in the number of calls relating to mental health issues to the MWN Helpline over the last 2 years, from 2 in 5 in 2018. There was a concern that the distress of the pandemic would result in an increase in calls concerning suicide and self-harm. Remarkably (and thankfully) there is no change in the number of calls related to these issues from previous years, with a stable **3%** of all calls relating to these issues.

In discussion with Helpline workers and volunteers the team reported that the pandemic had reduced options available to people for support with mental health issues.

“People could cope before because they could go out and see others. Now it is much harder to turn to friends and family members because others are in similar situation and so friends do not have the resilience they may have had before – we are all suffering” – **Helpline Workers Focus Group**

The pandemic provided reflection time for many service users, and this was sometimes the trigger to make the call to the MWN Helpline to discuss historical issues as well as issues that were of immediate concern.

“Lockdown has made many people experience loneliness, being isolated and giving them more time to think and the time to allow to think is making them think about the things they have lost.” – **Helpline Workers Focus Group**

For some service users the pandemic has meant that they have experienced many layers of grief; perhaps losing their job combined with losing a close relative and recovering from Covid infections and Long Covid symptoms.



The world’s population are in a change/loss process and by the end of December 2020 many people were focused on “just getting through the experience”. It is widely anticipated by commentators and researchers in mental health issues that as Covid restrictions lessen there will need to be time and space for post crisis healing to take place. We would anticipate an increase in calls to the MWN

Helpline referring to mental health issues. This is likely to include callers experiencing potential signs of Post-Traumatic Stress Disorder because of the loss and challenges that they have had to cope with over the pandemic period.

Impact of MWN Helpline on Mental Health Issues

For many of the service users where mental health issues are raised in the call, they need someone to listen to them and help them to talk through their distress. In the assessment of the MWN Helpline impact (see later section) **1 in 2** service users reported a benefit of calling the MWN Helpline was that they “felt listened to”.

Building Resilience and Self Advocacy

Huma is a Bengali speaking woman who had previously contacted the Helpline in 2018 when her ex-boyfriend had posted inappropriate videos and images of her online. She was devastated to discover in 2020 that there were new sexual postings about her on social media. She believed these images had been taken by a faith healer whilst she was drugged and without her consent. She had contacted the Police, but her lack of fluent English and their lack of cultural understanding meant that they did not grasp the serious consequences of these images in Muslim/Asian communities. She feared honour-based violence from family and community and the situation was causing her anxiety and depression.

The MWN Helpline assigned a Bengali speaking worker to support Huma to contact both the Revenge Porn Helpline and the Police. Huma was provided with emotional support and guidance so she could deal with problems confidently and take necessary steps for own safety. By the close of the case Huma was confident enough to contact relevant services.

Some of the calls can result in a referral to another agency and **1 in 10 service users** reported that their mental health had improved because the call had resulted in a direct referral to a counselling service¹⁵. There were **112** referrals made to counselling services (**9%**) of all cases, and more referrals could have been made, but the many of the services had limited capacity and were not accepting referrals. The limitation of the availability of counselling service both at MWN and externally has been frustrating to the MWN Helpline workers:

“We need more capacity for counselling. It is heart breaking when people ring and would benefit from counselling, but we cannot even refer them because

¹⁵ A more detailed evaluation of the MWN Counselling Service will be published in the summer of 2021.

there is no capacity in our service... people really want the faith specific MWN counselling". **Helpline Workers Focus Group**

Evaluation Summary

The MWN Helpline team have been aware of the need to develop their skills in handling mental health issues, and this was raised in the 2019 report as a future training need. The team provide an empathic response and have provided the listening ear to help service users to explore what they are feeling and to review what their options might be to improve their mental health.

During the evaluation process we explored with the team the use of the broad category "mental health and feelings". The concern was that the breadth of this term meant that we were maybe not able to identify changes in specific issues; for example were calls about issues to do with anxiety or was depression the main issue? We worked with the management team to attempt to retrospectively categorise "mental health and feelings" into subcategories. It became clear to us all that attempting to do this was neither time effective nor useful for the team. The team are not mental health clinicians and are not expected to diagnose the calls, and the categorisation of calls is determined by the way that the service user describes her situation and the labels that she chooses to use. The words chosen are more likely to be colloquial descriptions of mental health than clinical terms and it is more appropriate for the team to retain this broad categorisation. The openness of the management team to exploring the value of sub-categorisation is appreciated and we all agreed to continue using the existing recording system for 2021.

The MWN Helpline has committed to providing regular training in mental health issues for the team members to support them in handling calls involving a range of mental health issues. This is something that the team have requested and given the longer-term impact of the Covid19 Pandemic on mental health it would seem a sensible investment of time and funding.

It is recommended that additional funding is sought to expand the counselling service because this year there were insufficient places available for the needs of service users. Many commentators assessing mental health requirements post pandemic have suggested that there will be a significant rise across the population of people needing emotional support to recover from the impact of the pandemic on their health and well-being. There may be increased cases of Post-Traumatic Stress Disorder (PTSD) from

people working in caring roles or in situations where they experienced multiple bereavements. It is noted that the impact of the pandemic has been significantly hard for BAME communities and particularly on women in these communities.

DOMESTIC ABUSE

General Context

In March 2020, a national lockdown was imposed, requiring people to stay at home and to only leave home for a limited number of reasons. For women and children experiencing domestic abuse this provided conditions of stress and tension which may have escalated the existing abuse they were experiencing and made it more challenging for them to escape to safety. Women's Aid in their report "A Perfect Storm"¹⁶ reported that over 90% of the respondents to their survey reported that Covid-19 has impacted on their experience of abuse: **61%** of women reported worsening abuse, **78%** of those living with an abuser felt that they could not leave because of the pandemic and the availability of refuge spaces was reduced by **42%**. As the report concludes:

"Whilst the Covid-19 pandemic did not cause domestic abuse, it created a perfect storm of challenges for survivors and the services supporting them. The Covid-19 virus, and lockdown measures designed to fight it, gave perpetrators a tool that they quickly learnt to use for coercion, manipulation and to induce fear. This in turn exposed survivors to worsening domestic abuse, whilst restricting their access to support."

Domestic Abuse Helpline Response

Domestic abuse has always been one of the most regularly reported issues raised in calls to the MWN Helpline. This year there was a **16%** increase¹⁷ in the number of calls concerning domestic abuse, mentioned in approximately **1 in 3 calls**.

Domestic Abuse -navigating support services.

Naila had a long history of domestic abuse and after her husband tried to strangle her, she reported him to the police. As she did not want to give a statement, he was released without charge. Her friend suggested she call the Helpline for advice.

A Bengali speaking case worker supported her in pursuing a police report, gave safety advice, contacted NCDV to get an injunction and found her accommodation.

"Helpline staff did a fantastic job in supporting me, I am now separated from husband, and I feel more confident, safe and secure. The MWN staff were very kind and supportive and helped me to find out about procedures that I did not know about before"

¹⁶ <https://www.womensaid.org.uk/wp-content/uploads/2020/08/A-Perfect-Storm-August-2020-1.pdf>

¹⁷ In 2019 32% of cases related to domestic abuse and this increased to 37% in 2020 - representing a percentage increase of 16%.

Over 715 (56%) Helpline cases involved abusive relationships of some type and almost all these abusive relationships (92%) were from close family or partners. Husbands were most frequently abusive (64%) whilst parents were involved in 16% of the cases. These statistics show that the home is not a place of safety for many service users of the MWN Helpline and the national lockdown enforced their confinement in situations that were often abusive. The case studies and testimonials from 2020 provide evidence of the challenges many service users have faced from isolation within in multi-generational households, with little personal space and often with historical or current abuse happening.

Covid restrictions increased the risks of any abuse escalating, with concerns about whether service users were able to contact the MWN Helpline because they were living in densely populated accommodation under close supervision of their abuser. They also were not able to make the usual opportunities to make contact using the privacy afforded to them when taking children to school or to the park. It is highly likely that many incidences of abuse were not reported.

The webchat service that had been established at the beginning of the MWN Helpline has proved invaluable this year because it has provided an easy way for contact to be made without speech. The MWN Helpline team reported that many emails and webchats were made late at night when the MWN Helpline was closed and often women would write that they were only able to make contact at this time. The MWN Helpline team adapted their existing protocols to support women in this situation by enabling the written conversation to continue and to try and explore as much as was possible without requiring the service user to make verbal contact.

One of the growing concerns from the review of Helpline cases has been an increase in the use of coercive control. In 2019 the team started to make a record of any cases where coercive control seemed to be an issue. In 2019 2% of cases mentioned this. This year there has been a significant increase to almost 1 in 5 cases (17%) involving a form of coercive control.

The team also recorded an increase in tech abuse from 1% of cases to 5% in 2020. Modern technology provides a different way for abusers to stalk, isolate and control women using text, messaging services and social media. In some situations abusers have gained access to service users personal devices and Refuge has noted that abusers have

even hacked the devices used by children in a household¹⁸. This is a worrying trend and something that the team are aware of and will be observing during 2021.

Impact of Helpline on Domestic Abuse

Domestic abuse cases are often complex and will involve other issues such as financial concerns, housing issues and an (often) optimistic belief by the service user that the situation may resolve itself.

The MWN Helpline seeks to provide a supportive and non-judgemental approach so that service users can reach their own fully informed decision.

Domestic Abuse and Safeguarding

Leila arrived in the UK in 2020, she was scared and vulnerable as her husband was physically violent to her and she needed support from a faith and culturally sensitive perspective. The MWN Helpline were able to build a positive relationship with Leila.

Leila disclosed that her husband was forcing her to go back to Morocco and had physically abused her; she was scared he was going to continue to hurt her. She told the Helpline team that she was planning to leave her husband and later that day the team received a concerning text message from her.

After assessing her risk the team breached confidentiality and contacted the police. The police were able to locate Leila and she made a police report against her husband. The MWN Helpline continued to provide emotional support and moved her to a safe refuge.

10% of Helpline cases in 2020 had an insecure immigration status and women in this situation may endure domestic abuse because they feel that they have no other option, a

Domestic Abuse and Financial Support

Maryam was removed from her home by the police due to domestic abuse. The case worker supported her to access housing options and a solicitor. Maryam had been furloughed due to Covid and was struggling financially. The Helpline were able to supply a supporting letter which helped her to get indefinite leave to stay in the UK.

"Thank you for supporting me in this difficult situation, I did not know what to do but you...gave me mental support and advice about what to do next ...and I can now live in freedom."

¹⁸ <https://www.refuge.org.uk/our-work/forms-of-violence-and-abuse/tech-abuse-2/>

belief that is often reinforced by their abuser. Women who do leave the abusive situation are often in a very vulnerable financial situation and can find the complexity of navigation the immigration system overwhelming. The support that the MWN Helpline team provides enables women to overcome their difficulties and start to move forward.

Evaluation Summary

There has been an increase in cases relating to domestic abuse and coercive control this year. Based on expert predictions it seems highly probable that as Covid19 restrictions lessen and the vaccination programme allows the return to normality “there will be a surge in high risk and high harm reports”¹⁹

The team are experienced in handling domestic abuse situations and are increasing their skills at exploring and probing the situation to ensure that they fully understand the extent



and seriousness of the abuse to make an adequate risk assessment. Further developing these assessment skills should continue to be a focus for skills development.

Several of the case study examples involve situations where the service users have decided to stay in the situation or having left will return to give “one last chance”. The team need to be sensitive so that they can communicate their concern about the risks involved in this decision and provide relevant safety advice whilst still maintaining the relationship with the service user, so they feel able to make contact again without judgement.

Domestic abuse cases are often very time intensive and complex. In the evaluation of the case studies and testimonies there is evidence that service users have benefitted from the longer-term involvement of the case worker to provide the depth of support that is needed and the continuity of care that has helped to create trust between the service user and the Helpline.

¹⁹ <https://campaignforsocialscience.org.uk/news/a-crisis-exposed-how-covid-19-is-impacting-domestic-abuse-reported-to-the-police/>

DIVORCE

The restrictions imposed during 2020 to curb the corona virus crisis have put many marriages under strain and by the summer of 2020 law firms were reporting rises in divorce inquiries of about 40% compared to previous years.²⁰

In the UK, many Muslims will have a nikah (an Islamic religious marriage ceremony) which is not recognised as legally valid marriage (if conducted in the UK), unless the couple have an additional civil ceremony. If the marriage is not legally registered, then women have no option of obtaining a civil divorce and must make an application to a Sharia Council. The process of obtaining a divorce for men is much simpler and does not involve a court or Sharia Council process.

There are concerns that the marriage and divorce processes can make some Muslim women very vulnerable, with their fate determined by others.

Although many people benefit from guidance from faith leaders, there is also some evidence which suggests that some religious bodies might be operating in ways that are discriminatory against women, including, for example, women being invited to make concessions to their husbands in order to secure a divorce²¹.

Divorce MWN Helpline Response

Service users highlight that one of the benefits to them of using the MWN Helpline is that it is uniquely placed to offer culturally sensitive, non-judgemental guidance and support.

Divorce Documentation and Process

Farah moved to the UK from Pakistan 19 years ago to get married. Her husband had severe mental health issues and was physically abusive to her and at one point set the house on fire.

Her husband gave her papers saying he had Islamically divorced her, and Farah sought help from MWN Helpline. The team contacted the Shariah council who confirmed that the documentation was false, and Farah was supported to make her own divorce application.

"My GP referred me to MWNUK, it was helpful... I am a bit more confident and less scared".

²⁰ <https://news.sky.com/story/coronavirus-law-firm-sees-40-rise-in-divorce-inquiries-during-uk-lockdown-11999307>

²¹ <https://commonslibrary.parliament.uk/research-briefings/cbp-8747/>

This is particularly relevant to concerns involving divorce and marriage because the team understand the complexities of cultural norms and legal requirements in the UK. The team can help service users to navigate the Sharia Council process and provide support and signposting where appropriate.

Helpline Impact

The most significant feedback from the case studies and testimonials relating to divorce was the importance of having someone to speak to who understood the complexities of Islamic marriage and divorce proceedings. **1 in 4** (of the 515 women where the MWN Helpline have information about marriage status) were in nikah only marriages conducted in the UK, meaning that their marriages would not be legally recognised in UK law.

The MWNUK team are experienced in supporting women to understand both the legal elements of their marriage arrangements and the cultural context of these types of marriages. In the case studies/testimonials service users share the relief they experienced

Navigating Shariah Council Divorce

Wajiha had started Islamic divorce process 8 months ago and was not seeking a reconciliation. She felt she was not being taken seriously by the Shariah Council. With the support of the Helpline team she applied for a divorce to a different Shariah Council and was able to divorce and move on with her life

"I was stuck in limbo trying to make it work and fulfil my Islamic duties. I approached the Shariah Council for help but their bias towards men's' rights were shocking.... I felt helpless and there was no light at the end of the tunnel, and I had lost faith in people around me. MWN's service was a big thing for me, they got me out of that hole (and it was nice to express what I was going through to an organisation that understood the Muslim perspective) everyone was friendly and they connected me to the right people, and I am now separated."

when they had someone who "got them" and who could help them work through the barriers so that they could move forward in their lives.

Evaluation Summary

In 2021 as the Covid restrictions lessen there is likely to be an increase in enquiries to the MWN Helpline team about divorce. One of the unique aspects of the MWN Helpline is that

they can assist in the navigation of the Sharia Councils and so it will be important that the team continue to keep up to date with any changes in legislation and practice in this area.

'I reached out to MWN for some advice around divorce having read a report they'd published. They have been great - responsive and supportive in signposting me and then following up queries. It was a relief to find an organisation of educated and experienced Muslim women who I could turn to about the lesser-known processes women must go through with Sharia councils.

This network clearly recognises the challenges these male-dominated institutions bring to women, and I believe their advocacy is vital in supporting women and inspiring changes for greater equality. "

The MWNUK Booklet "Marriage and Divorce" is a useful resource and can be easily shared from the website and via email/text. This is the most frequently downloaded resource from the MWNUK Website.

COLLABORATION- MULTI-AGENCY

The MWN Helpline exists as a first point of contact to support service users to find the right level of support, and this will often involve police and social services.

Engagement with other Agencies

During 2020 the police or social services were involved in almost **1 in 5** cases. This contact was often a referral from the agencies to MWN and these tended to be situations where there are specific faith or language issues. In some situations the service user had already initiated the contact with a statutory agency and sought to involve MWN to give them support, act as an advocate or to help them navigate statutory processes.

Police Feedback

"I would like to say a big thanks to Sammi at MWN...for assisting me recently with supporting a victim of domestic abuse and potential honour-based abuse.

The victim was very isolated by way of controlling and coercive behaviour from her husband, she neither spoke nor understood English. She had fled a violent domestic abuse incident with her two small children and was taken to emergency accommodation by police. By making her safe she was further isolated from her culture and all that she knew, and this had such an effect on her willingness to engage.

There was great frustration on her part and mine in using telephone interpreters, often information would be lost in the translation. By having support from Sammi and the victim was able to speak in her language without interpreter was very helpful. I had not used MWN before but shall recommend to other colleagues".

The team also encouraged service users to contact social services or the police and at times acted on behalf of the service user. **14%** of the 330 cases with police involvement and **30%** of the 191 cases with social services involvement were initiated by the team.

This year **8%** of all cases required the team to make an external referral to either the police or social services and this represents a **50%** increase on the level of referrals in 2019.

The reason for this is likely to be related to Covid restrictions which meant that it was harder for the team to assess whether there was a risk of harm, reduced the other support mechanisms and isolated service users in a situation where they were at increased risk of harm.

"Because the children were not at school there were less outsiders able to check on their wellbeing and to verify our concerns. We felt we needed to be on the cautious side and involve the other agencies if we had concerns" Helpline

Manager Interview

Statutory support agencies are regionally located, and this causes problems in situations such as domestic abuse where the service user will often need to relocate. An example was in the case of Hameeda who made initial contact with the MWN Helpline to get advice about the requirements for an Islamic divorce (Talaq) after she left her husband due to incidences of domestic abuse.

By the time the case was closed Hameeda, and her children had been moved to 3 different regions. The MWN Helpline was the consistent agency that was able to maintain engagement with her regardless of location. Because of this consistency the MWN Helpline became the case coordinator to make sure that the service user could get access and support regardless of her location. This helped the service user to build trust and to establish her independence.

A potential issue is the growing number of referrals where the police need additional support for BAME women, particularly where there are language issues.

“We need to be mindful that they are not passing the responsibilities for translation and language support onto us” – Helpline Manager Interview

Safeguarding Issues

A small number of cases involve safeguarding issues, and these can be both challenging and time consuming for the team. Prior to the appointment of the new Helpline manager, all cases with safeguarding concerns were logged as a safeguarding event even when the actual risk was relatively low. By introducing better classification, in 2019 the percentage of cases that deemed to have safeguarding issues dropped from **11%** to **4%**. This drop has been maintained during 2020 (rising slightly to **5%** of cases)

There was a concern that the team might increase their risk assessment ratings because remote working meant that they were having to make decisions independently. However the training and processes implemented by management have supported the team to be confident in their assessments and to only classify cases as safeguarding risks when it was justified by the agreed criteria for referral. The testimonials from team members consistently mention how they have grown in confidence in their own decision making over this year and been able to make judgement calls about the risks of cases using the guidance and information supplied to them.

Any serious safeguarding concerns are immediately highlighted to the Safeguarding Lead on the trustee team and advice sought on these. The management team/board have a

Safeguarding Review Meeting every 3 months where safeguarding cases are discussed. The insights from these reviews are then discussed with the team in team meetings, supervisions team debriefs and daily debriefs so that practice can continually improve. This is an excellent example organisation evaluation in practice, making use of the learning from experience to support service improvement. In one of the safeguarding discussions it was noted how important it was to ask clarify questions to fully check understanding and gain a complete picture of the situation.

Domestic abuse was a significant factor in raising concerns about safeguarding. **2 out of 3** safeguarding cases involved domestic abuse as an issue.

The other most frequent issues involved in safeguarding cases were mental health and feelings **(46%)**, housing/homelessness **(30%)** suicide/self-harm **(18%)** and child abuse **(15%)**

Breach of Confidentiality

Calls to the MWN Helpline are confidential and service users can talk freely about their concerns. However, there are occasions where the confidentiality agreement must be

Breaching Confidentiality: Safeguarding

Dua's friend Ben contacted MWN helpline seeking advice as he was concerned for Dua's safety and wellbeing. Dua is a victim of domestic abuse and coercive control from both parents. Ben was initially reluctant to share identifiable details due to the threat of honour-based violence. The MWN Helpline worked closely with Ben to build rapport via email and calls.

Once trust was established, Dua made contact and shared her safeguarding concerns (physical, emotional abuse, coercive control) for her two younger sisters who were teenagers. There were also concerns around the mother, who worked with children. Social services were made aware of this (breaching confidentiality) and responded quickly to move Dua and her siblings to places of safety.

The MWN Helpline followed best practice, sharing information with statutory organisations and played an instrumental role in ensuring the Dua was not placed at further risk as the situation needed to be dealt with in a faith and culturally sensitive manner due to the threat of honour-based violence from the family.

breached. This will usually happen where there is a concern about a significant risk of harm. There were just 18 cases where confidentiality had to be breached in 2020, this equates to 1% of the total caseload and is consistent with previous years.

The team have a rigorous process in place where confidentiality has been breached so that it is recorded when it happens, and a detailed review takes place after the breach to assess whether this was appropriate and identify any learning insights for the team.

MWN HELPLINE TEAM MANAGEMENT

To run an effective Helpline Service requires a dedicated team of employees, volunteers, and management. There needs to be structures in place to provide training and support for each team member and over the last five years the MWN Helpline has moved from a pilot service of support into a well-structured formalised system. This investment of effort and time has meant that the team were able to make the transition to remote working in March 2020 relatively easily.

Helpline Team – roles and hours

The MWN Helpline operates 5 days a week between 10.00 and 16.00 and requires 2 staff available to answer queries in that period working a 9.15 – 16.45 period. A total of **3,640** staffing hours are required to cover the core opening hours and the time to open and close the MWN Helpline operation. In addition to operating the MWN Helpline the team also need to attend training and meetings, and this is an average of **534** hours for the MWN Helpline team.

In 2019 the MWN Helpline team **exceeded the hours required by 179 hours** of activity. In 2020 there was a **130-hour shortfall** in being able to adequately staff the core Helpline requirements from the contracted staffing hours. This shortfall in covering the core operation and in addressing the additional time needed to handle calls has resulted in a total of **4000** hours worked, providing overtime payments to cover the additional **360** hours of activity.

The MWNUK Board have experimented with various patterns of work for the MWN Helpline team. The most effective combination is to have a full time Helpline manager to ensure continuity and for the MWN Helpline worker roles to be part time (between 1-3 days a week) Part time work both helps to reduce the risk of burnout as well as providing a flexible working option for women who may have additional caring responsibilities. Helpline working hours are between 9.15 and 16.45.

One member of staff left in March 2020 for career development reasons and their hours were distributed amongst the team, which enabled a volunteer who was covering a sabbatical to move into permanent employment status. No use was made of the government furlough scheme.

Staff Utilisation

Staff utilisation is the amount of time that the team spend on handling initial enquiries and follow up enquires with service users (excluding meetings, supervision, administration) Based on normal hours worked (excluding annual leave) the average utilisation rate is **86%** which is high, and the team may find this level difficult to sustain in the long term and may need to fund additional staff if the trend continues for longer call times.

86% is about as high as utilisation should be pushed, otherwise you will have no time for coaching after team meetings and personal breaks have been considered. – Call Centre Helper Magazine April 2019²²

The total hours of recorded sick leave in 2020 was **189** hours (3.5 days per person) which is the national average for sick leave per worker that was recorded in the UK in 2020.²³ However a major health issue meant that one member of team was absent for most of November and December. If these days are excluded there was just **6** hours per person of sick leave recorded in the period of January to October 30th substantially lower than the national average.

Pandemic Planning

The Board began planning a contingency plan for remote working in February as the data from both China and Europe indicated that it was likely that change would need to be put in place in response to the threat to employee health from Covid19. The Board benefitted from having a medical professional who was able to interpret the data that was starting to emerge. The Executive Director was also able to make use of the risks and benefits of remote working from the learning activities engaged in when the MWN Helpline was being set up (the team had visited other Helplines to explore good practice in the sector and some teams were using remote working) This analysis from 6 years ago was an invaluable resource to the team so that they could plan for how best to reduce the risks of moving the MWN Helpline team from the office to remote home working.

“The Board are the backbone of the MWN Helpline- their forward thinking and planning is amazing. Our manager is the glue that keeps the team together and looks after our wellbeing. Without the support and guidance from both parties working from home would have been an almighty struggle.” Staff Survey

²² <https://www.callcentrehelper.com/calculate-utilisation-140027.htm>

²³ <https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sicknessabsenceinthelabourmarket/2020>

The MWN Helpline entered 2020 with an engaged and settled team, the staff engagement survey conducted in January 2020 demonstrated that satisfaction levels were high amongst the staff team and that the management of the team was appropriate and responsive to individual needs. As the Covid crisis impacted the UK the MWN Helpline team responded positively to the challenges that were faced

“The Board and management are very lucky to have such a brilliant and dedicated Helpline team (volunteers included) as every single person is willing to go the extra mile to ensure the service we provide is always to a high standard.”
– Staff Survey

Adapting for Covid

The team were able to respond quickly to the growing risks of Covid19 and by 1st March 2020 changes were being made to reduce risks and by the 20th of March plans were in place for the MWN Helpline to move to remote working and the newly created “Working from Home Handbook” was circulated to all employees and volunteering was suspended.

The Board offered medical advice sessions via Skype with one of the Trustees, and management set up twice daily “check in” calls with the MWN Helpline manager. All staff were supported in adjusting to working from home, and regularly reassured about the importance of taking breaks during their working day. The staff have all praised the response of the Board management, and their manager to the Covid

pandemic, and appreciated the efforts that were put in place, ahead of national restrictions, to ensure that they would be able to work safely from home.

There were some GDPR concerns about remote working. The management team made sure all team members were made aware of data protection issues. The handbook provided guidance on ensuring privacy during calls and the management team implemented a regular collection service so that any confidential paperwork could be removed and securely disposed of.

OVERVIEW

Remote Working Staff Handbook March 2020

We recognise that as we all have families- little ones to elderly parents/in-laws/grandparents working from home will take some adjustment. Hopefully, this handbook will help you with this move.

1. Set up your work space
2. Set ground rules for the family
3. Ensure privacy
4. Create a work plan
5. Move and breathe
6. Ask for help if you need it
7. Competition
8. Covid-19 information / useful links

“The MWNUK team have been fantastic, the board, our helpline manager and my fellow colleagues have made WFH as enjoyable as possible, and I've never felt more part of an incredible team” Staff Survey.

The planning that was put in place meant a relatively seamless transition from working onsite to working remotely was achieved which meant that the MWN Helpline was able to provide continuity of service delivery throughout the pandemic, at a time when many other third sector and statutory services were struggling to maintain service provision.

“I have enjoyed being there for our clients when other services were not open due to lockdown/Covid. I feel at times we provided a lifeline to those who were isolated and scared.” Staff Survey

The process of adapting to remote working during a global pandemic has not been easy for employees across the world. The MWN Helpline team have found it challenging at times because they have been used to work in a physically close working environment where support was immediately available when needed from either colleagues or one of the management team.

“I've really missed working with my fellow colleagues in person. It has made me appreciate the simple things, like being able to give my colleague a reassuring smile whilst they're on a difficult call. Or having someone to talk to once you've had a complex call.” Staff Survey

Although the team did experience challenges there was recognition that the management team had done everything that was possible to support them holistically through this period.

The only practical concern raised by the team in relation to the transition to remote working was the process for transferring mobile phones between the team members, which initially was challenging but which has now been addressed through the purchase of additional handsets.

Emotionally the team felt supported, and some admit to feeling that they have thrived in the remote working environment because it has forced them to become more self-reliant and to make decisions about calls without referring to more experienced colleagues.

“I've enjoyed the challenges of Working from Home. At first it was difficult being alone and having no one to turn to for help with tough cases but being remote and alone made me rely on my own skills and knowledge. I feel this has helped me a lot in believing in myself and being confident that I alone can manage a case.” Staff Survey

Workload Management

Overall the main concern about remote working for both the management team and employees was about managing the intensity of the work. Call volumes vary each week and there is never a uniform, stable number of calls and cases. The peaks in intensity are difficult to measure. In 2020 we retrospectively charted the variation in service demand against major national events, announcements, and the holy period of Ramadan during 2020 ([Appendix 4: Demand Mapping](#)). There was no clear pattern between events and changes in demand. This makes workforce planning extremely hard and it will inevitably mean that there are times when calls will go unanswered, and cases cannot be resolved by the end of the working day.

The internal psychological drive from team members to complete work meant there was a growing tendency to continue working after their shift. Because the team were working remotely this extension of working hours was not noticeable as quickly as it might have been within the office environment. The issue was identified in a team meeting and expectations about service levels were clarified. This helped the team to focus on completing the critical work e.g. safeguarding but to hold over other actions to the next shift where it was not critical. This helped to reduce the pressure that the team members had felt under.

“In the beginning – the first 3 months, I felt under pressure and needed to get tasks completed. I think because it was not explicitly vocalised by our management that it was fine to leave things uncompleted. In our team meetings I talked about this – was reassured don’t worry if you can’t get through it”.

Focus Group



A learning point for the management team was the increased importance of verbal and written communication when working remotely and to reinforce messages so that they are fully understood and embedded into practice. The value of investment in attending to the psychological needs of the teams was highlighted and should be continued.

Remote/Flexible Working Arrangements

The strategic plan is to return to onsite working once restrictions allow and possibly after Ramadan, May 2021. Remote working has enabled the MWN Helpline Team to deliver the service during the pandemic, however longer term there are concerns about the risks of continuing to work in this way.

“The work of a Helpline support worker is emotionally intense and therefore is better to be supported and nurtured in the workplace and not from a remote location. The work is so vital and so important and the only support that really works is from each other.” Executive Director Interview

Most of the team are keen to return to working on site and although they have adapted to remote working, they have missed the support and learning opportunities of working in a shared space. However there have been many benefits to working from home and some of the team would like to continue working remotely, at least some of the time because they value the flexibility that it provides to support caring responsibilities and the concentration that is possible when working in a quiet remote location.

“I love working from home, it has given me opportunities I would not have had in the office. The hours that I work can be more flexible” Staff Survey.



Suggestions were made by the team to have the option of 1-2 shifts that could be worked remotely each week. There may be benefits organisationally of having the flexibility of remote working options. An issue to consider is that the pandemic has made us all more aware of infection control. In the past someone might have come to work with a mild cold however it is unlikely that this will be tolerated by other employees and team members mentioned how it is more comfortable to work at home when experiencing menstruation pain. Having an option to work remotely could help to reduce sickness absence as well as offering the MWN Helpline more flexibility in staffing.

Team Support and Engagement

The management team actively invest in listening to the team and responding to their ideas and suggestions.

“Our manager always appreciates and encourages us. She always values our contribution even if it insignificant.” Staff Survey

In the survey 80% of the team felt that their contribution was always valued by their manager and 20% felt that their contributions are valued most of the time.

“I feel like our helpline manager always acknowledges our hard work, whether it be by praising us or providing some constructive feedback for future case handlings. I feel appreciated and valued by management.” Staff Survey

The regular one to ones and team meetings have continued using Zoom or phone contact. A check in process was put in place for the morning and afternoon so that any concerns about cases could be shared with the team. In addition the team manager was available

for support throughout the working day if anyone had to manage a more challenging call and to support the team members to meet their personal needs,

“We had plenty of emotional support. I would send a text and Sham would call me within an hour...Sham would encourage me to take regular breaks...and it was heart-warming that Sham recognised that prayer time did not have to be taken as part of the lunch break” Focus Group.

In the survey most of the team agreed fully that they were able to talk and share regularly with their manager and other team members.

	Yes	Mostly
I have been able to talk to my manager whenever I have needed to	80% (4)	20% (1)
I have been able to talk to other members of the team whenever I have needed to	80% (4)	20% (1)
I have been able to share at regular supervision sessions with my manager	80% (4)	20 % (1)

One area of team support that will continue to require attention is the complexity of the calls. The number of calls and the issues discussed are consistent with previous years but the anecdotal evidence from Helpline employees indicates that the call content has become more complex.

“The MWN Helpline was always seen as first point of contact to signpost to others...as we have progressed our calls have changed, more about mental health issues and more time spent listening to their problems, without really giving signposting or information. All they wanted was someone to listen”. Focus Group

The employees discussed in the focus group their perception of an increase in call volume and how this compared to the actual call statistics which are regularly shared by their management team. They report feeling a great intensity to the work and the time spent on each individual case has increased, including more detailed case recording. They struggled at times with the number of calls that involve multiple issues and where there is no clear way forward.

“Sometimes it can be too much because I am hearing the same stories all the time” Focus Group.

Some of the feelings may be intensified in 2020 because of the emotional challenge of living through a pandemic and the impact of this and the lockdown restrictions on personal mobility and social contact.

“It's really draining.... I've felt really overwhelmed this year, being stuck in my room all day significantly impacted my mental health, but I recognised this and stopped over working myself.” Staff Survey



It will be important to **continue** the support that has been provided to the team and to monitor workloads to ensure team members do not feel overwhelmed and that signs of potential burnout are spotted early before they impact on mental health and wellbeing. There is a risk that some of the team will experience post-stress symptoms from the pandemic restrictions, the bereavements that they have experienced and the wider impact that the pandemic would have had on individuals and families for the team and for service users.

Recruitment and Training

In January 2020, a new intake of volunteers and employees started their induction to the Helpline. The training was completed by the end of January and by March the team were starting to prepare for a period of remote working. Due to the Covid restrictions the volunteering programme for the MWN Helpline was suspended until November 2020.

The most significant training input during the early part of 2020 was on supporting the team members to be able to work remotely. For team members who were less confident technically this was a challenge and additionally all members of the team needed to learn about how to balance work and other commitments whilst working from home.

“I had never used Zoom/Teams before so had to learn everything and patiently explain it to each person who were not always tech savvy and adjust my training to the different needs of individuals by using “share screen” and repeating the steps slowly so that each team member could work effectively remotely” – Interview Team Manager

Team meetings now have a “spotlight” session to focus on a training topic and the meetings also have direct inputs from the Executive Team and trustees (which is easier to manage now most team meetings/training are provided remotely).

The impact of the pandemic on BAME communities has meant that issues of loss and bereavement have increased for both service users and amongst the team members. In June 2020, all members of the team took part in a Bereavement training programme organised by CRUSE²⁴

²⁴ <https://www.cruse.org.uk/training/one-day-public-workshops>

Overall the team were satisfied with the level of training over 2020, 57% of employees and volunteers agreeing that there was the right amount of training for their needs. 43% of the team would have liked to have more training. It was recognised by both staff and volunteers that training took place during the daily work of the team and was not limited to externally delivery training courses and that they were encouraged to learn and reflect from the situations that they handled on the Helpline.

Delivery of training changed in 2020 so that it could be delivered remotely. This was challenging for all organisations and inevitably there were some challenges in delivering some content remotely. Although overall the quality of the training remains highly rated there is a concern that one of the team felt that the training was inadequate, and this may reflect the challenge of being able to proactively create responsive training during a time of operational challenge.



The team were asked to highlight any training topics that they would like to see covered in 2021. The list includes some refresher topics.

Training Topics Requested for 2021	
Addictions (1)	Suicide/Self Harm (1)
Forced Marriage (2)	Safeguarding (2)
Immigration (1)	Stalking and Harassment (1)
Mental Health (2)	

A suggestion was made to provide training in some of the areas that are becoming more prominent on the help line (e.g. mental health issues)

“We tend to have training on things we've already been trained on for example NCDV training on domestic abuse. But I feel we would benefit from other trainings which tackle newer issues prominent on the helpline” Survey.

A further suggestion was made that as much of the training was now delivered remotely it would be useful to make a recording of the session so that if the team member could not attend or wanted to refresh their learning, they could review the recording. A request was made for a database training pack/manual so this could be easily referred to when needed.

70% of survey respondents felt that their skills and abilities were made full use of, with 2 of the team feeling that more use could be made of their skills and abilities and there may be untapped potential there which could further strengthen the Helpline. This might include previous work experiences that the team have had working within different sectors that are related to the MWN Helpline Service Users e.g. Mental Health and making use of other skills that can support the wider work of the Helpline:

“I feel like all my skills are recognised and made use of, especially IT skills. I am asked by management to carry out additional tasks which make use of my statistical and IT skills” Survey.



The move to remote training in the sector will make it easier for the MWN Helpline team to access relevant training at a low price without the additional costs of travel and accommodation. This may help to increase satisfaction ratings for the level of training provided. The list of training topics could be reviewed with the team and scheduled into the team meeting spotlight sessions. It would also be worth discussing how better use could be made of existing skills and experiences within the team to make sure that skills are not overlooked.

Team Leadership

The MWN Helpline benefited from having a strong and united leadership team in 2020.

“For the first 6 months of the pandemic, it was full on activity, responsive to the situation. There was a lot of support from the executive team and trustees”
Helpline manager Interview.

There was a strategy put in place before the national UK lockdown which ensured that the MWN Helpline remained open and that employees were able to perform all the Helpline tasks safely from their homes. In comparison with some other larger organisations the MWN Helpline leadership team have delivered above expectations for service delivery during a pandemic.

There is evidence throughout the evaluation process that the MWN Helpline leadership team have worked hard to adapt to the challenges of remote working and have aided the

team to ensure both physical and psychological well-being. The leadership team is held in positive regard by both employees and volunteers.

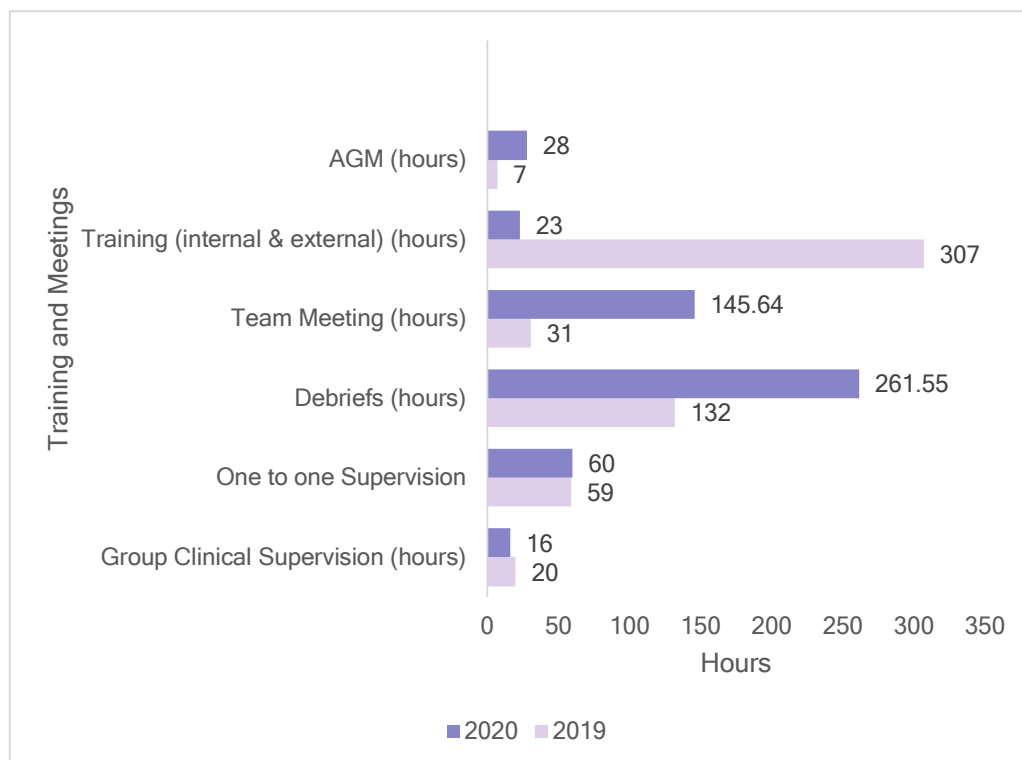
“My opinions are always listened to; management regularly hold meetings with staff to see if any issues need addressing” - Survey.

Regular team meetings have taken place throughout 2020. The meetings are now more formally organised and have an agenda with clearly identified time spots.

“Team meetings have a lot more structure to them which helps them flow and everyone is able to clearly see which agenda items applies to them” **Survey.**

The team meetings provide an opportunity to keep the team informed, to share positive feedback and to reflect on recent cases that may have been more challenging. There have also been elements of social interaction and well-being built into the team meetings to help team members to feel connected during this period of remote working.

Although there has been a reduction in formal training in comparison to 2019 there has been an increase in formal meetings and structured debrief times, which were essential to the support mechanism for the remote operation of the Helpline.



Students and Volunteers

The student placement was completed in March 2020 and the team were able to provide the student with a part time role on the team. This is a good example of career development opportunities being provided.

There were 6 volunteers recruited and trained in January 2020. It was decided to temporarily suspend volunteering from March until the end of October due to the Covid restrictions. Two volunteers recommence their work in November. They both work on the written contacts - mainly emails- from service users. Initially the volunteers would draft the email and the MWN Helpline manager would shape the response. The volunteers are now both able to take full ownership of the emails if they are covering basic requests and refer the email onto the MWN Helpline manager where the requirements are more complex. Both volunteers have provided positive feedback about their experience of working with the team:

I thoroughly enjoy my experience in volunteering for the helpline. I have learnt many skills and gained knowledge about how to handle situations in which there is immense amount of vulnerability and pressure involved. **Survey**

There is now a clear role for the volunteers which is appreciated by the rest of the team and gives the volunteers a clear sense of purpose and has enabled them to become actively engaged with the MWN Helpline service provision at a much earlier stage. The motivation/engagement levels for both volunteers are extremely high and there are no areas of concern.

"I look forward to my day of volunteering after work, even if it is only for a few hours to know I am able to make some sort of difference for both the workload/cases on the MWN helpline system, or to a service user" Survey.

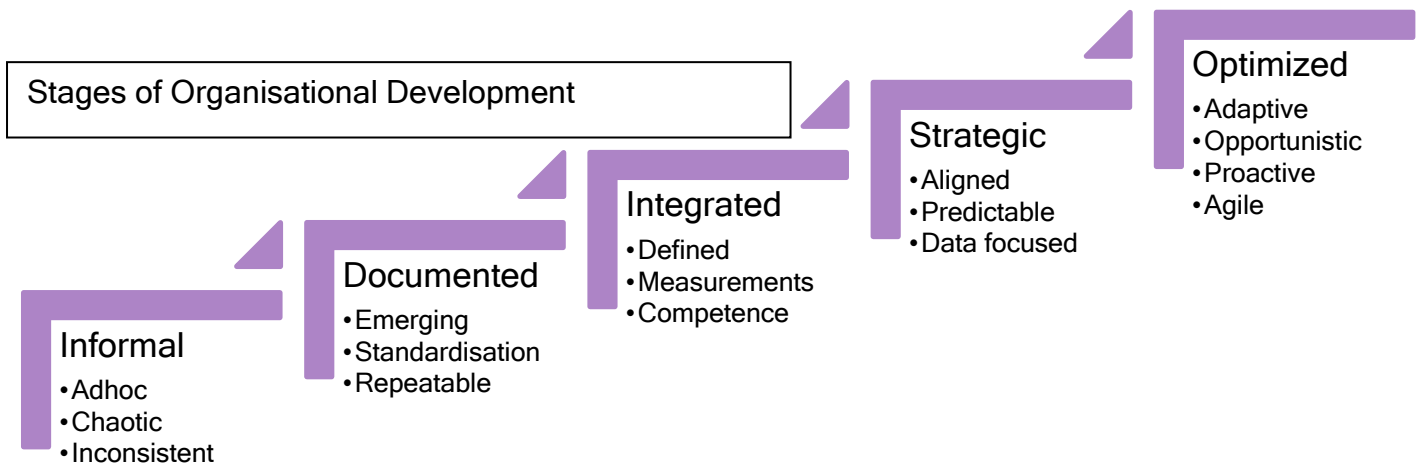
Written communication provides an effective way to train and develop new volunteers and would be a useful method for new employees. There is less urgency to the reply so that the volunteer can draft a response and get feedback before replying. The volunteers have found this a much more supportive way to start their Helpline role than handling phone calls or reading case studies/procedures and the volunteers recommended that MWN continue with this practice:



"Use the written communication area as the beginning of the volunteer journey as the calls can be so complex. In one of my early calls I was tackling a call which was so complex, and I felt out of my depth without direct supervision as the others were all on other calls. I was overwhelmed by the detail and complexity in the call." Focus Group

ORGANISATIONAL IMPROVEMENTS

Over the last five years MWN Helpline have reached organisational maturity. Based on this adapted model of the Stages of Organisational Development the MWN Helpline are operating between the strategic and optimized stages, and this has been demonstrated by the strategic approach to the challenges of the pandemic and then the ways that the team have adapted their practices so that the MWN Helpline service could be maintained.



The improvements made to the MWN Helpline over the last five years contributed to the ease with which the team could move to a remote service during 2020 and maintain a consistency of service delivery and a high level of individual support for team members.

I feel the Helpline has improved tremendously, from the information we gather by using the database and through the support we now provide. Staff Survey

During 2020 the Executive Director and Helpline Manager have been proactively reviewing Helpline data and scanning the wider horizon to identify possible trends in demands for the MWN Helpline service to support better resource planning. This analytical approach was beneficial to the leadership team because it helped the team to respond to concerns about the intensity of the work.

“Initially there was a sense that we were really busy, and the work felt really intense. The data helped us to realise the real situation and the figures did not show a huge increase in calls. There were some spikes in demand but the concern about workload was more due to the time spent on each call and the intensity of the remote working space, with the team neglecting to take regular breaks” Interview Executive Director

Case Management and Record Keeping

The case management system is audited throughout the year and any inconsistencies are noted and reminders are provided to the team to support better case recording.

“Staff are constantly reminded of accurate note-making, which enables colleagues to follow through cases effectively and with better understanding”
Staff Survey.

Accurate record keeping ensures that the team can evaluate and respond to changes in demand and in the types of issues raised by service users. The historical case records can also provide service users with evidence to support them in taking action as demonstrated in the testimony below:

Use of Helpline Records for Advocacy

“I was in an abusive marriage which I thought I could handle myself and then one incident just pushed me too far where I knew that I needed some help.

In 2019 I started divorce proceedings but never really had any proof that I was in an abusive relationship as this was not physical but more mental and emotional. I contacted MWNUK again in April 2020 who kept a record of my call in 2017 and they very kindly provided me with a statement regarding my contact with them.

I am in a much better place in my life having separated from my husband and now going through a divorce. I am a much more confident, happy person compared to the time I reached out to you. The support I received really gave me the confidence to speak out about what I went through, and I no longer am fearful of my ex-husband. Most of my friends were unaware of my situation and now I feel OK about telling them what I went through.”

Technical Support

The MWN Helpline telephone service provider was able to respond quickly once the team needed to work remotely and supplied the necessary equipment. Training in using remote tools was given and support has been provided to improve the quality of the equipment that the team are using.

“Recently laptops have been updated and checked, which has enabled efficient working and less technical difficulties when using the database and emails, webchat” Staff Survey.



The main technical problems that were raised was the limited number of mobile phone handsets. This meant that handsets were having to be sanitised and physically passed between team members and this needs urgent attention.

Another problem was the Ground Wire App which is used to link the workers with the MWN system, and this could sometimes have a poor reception. The other challenge has been the variability of the internet connections at the different home locations of the team members and if remote working is to continue then there should be an assessment made of the internet capacity at the location to approve it as appropriate/robust enough for effective remote working.

Working Environment

The main change in the working environment for 2020 was the requirement to move all team members to remote working. The team were supported with equipment to enable them to do their work effectively, including the option of office chairs, headphones, and stationery.

“Our management made it possible to work during the Pandemic without feeling the pressure to work in an unsafe environment”. Staff Survey



A new base for MWN has been located and will open in 2021 which will provide more space for the MWN Helpline and provide a more comfortable working environment. If team members continue to work remotely then workstation assessments should be conducted to ensure that the physical set up of the remote working environment is appropriate and supportive. The team have appreciated that suggestions they have made have often been implemented. There were two requests for a digital suggestion box to be established. This could be done using a digital platform like Trello.

LEARNING FOR THE FUTURE

Covid19 was an unexpected challenge and has fully tested the team, requiring a major reorganisation of how the MWN Helpline functions. The team can be incredibly proud of how they responded to this crisis from both an individual and organisational level. The changes forced by the pandemic has had several unexpected benefits for MWN Helpline.

The most notable of these are:

1. Increased confidence and self-reliance amongst the team members
2. Establishing structured and regular team communication
3. Evidence of the benefits and risks of adopting a remote working strategy.
4. Increased skills in using digital platforms and technology.
5. Further development of skills in handling text-based communication for both initial contact and to continue assessing and supporting service users who are unable to make phone contact.

Learning Insights

This year has been rich in learning for the MWN Helpline because every aspect of the service has had to adapt, and these experiences can be used to support further improvements in service delivery. These could include:

- Considering whether it is more effective to join multi-agency meeting by video conference instead of attending in person.
- Combining onsite working with some remote working to offer the team the benefits of both options and to increase the ability of the MWN Helpline to respond flexibility to changes in service demand.
- Further developing skills in handling text-based queries and explore more training opportunities to support this approach.
- Build on the culture of self-reliance so that team members feel able to make decisions independently without needing to consult managers and other team members for reassurance whilst ensuring there is sufficient supervision to keep consistency in the team decision making and risk assessments.

RECOMMENDATIONS FOR ACTION

1. Review the classification used for issues and consider providing some broad theme headers so that it is easier to pull together issues that are closely related and to cross reference these to demographics. This will help the team to identify overall trends more easily such as abusive relationship, as well as providing data about specific issues under that theme heading.
2. Amend the age information data collection field so that it is easier to identify service users who are under 18 or have an under 18 in the household (for safeguarding cases)
3. Review the testimonial form and further develop it. Consider using a simple questionnaire that could be sent via text to collect in immediate post call feedback to help identify the strengths and areas for improvement in handling queries - including text-based contacts.
4. Assessment of staff engagement monthly to quickly pick up on feelings of stress and burnout. The team could explore an easy-to-use temperature checker by adapting one of the freely available online tools²⁵ into a simple survey tool.
5. Provide a mobile phone for each individual Helpline member so that phones do not need to be passed between different workers and complete remote working assessments for new requests to work remotely. This will help to ensure that the work set up will be appropriate for MWN Helpline work requirements and for the health and wellbeing of the employee.
6. Develop the training programme for staff, including new topics that reflect the growing needs for service users for support on mental health issues, domestic abuse and issues related to divorce. Consider additional training to prepare the team for a potential increase in service users needing post crisis healing and support, this is likely to require more funding for the counselling/case working services. Develop the assessment/questioning skills of the team to support risk assessment work and assessment of needs.

²⁵ https://www.mindtools.com/pages/article/newTCS_08.htm

7. Review the time spent on follow up queries to ensure that Helpline is staying within the terms of its mission and objectives and consider whether additional hours are needed to reduce reliance of existing staff working overtime.
8. Continue to develop the MWN Helpline skills in handling text-based contacts in preparation for the launch of the new domestic abuse app in May/June 2021
9. Continue to update the information provided via the MWN Helpline website (which will be relaunched in 2021)

APPENDIX

1. Impact Made 2020

What was the Impact?	What does this mean practically?	Impact 1	Impact 2	Impact 3	TOTAL	% OF Services Users
Client felt listened to	Client was able to just talk through their problems, felt listened to and provided with emotional support as well as general advice	488	92	92	672	53%
Client Better informed of their legal rights	Made aware of: <ul style="list-style-type: none"> • Legal protection through injunctions • Legislation such as coercive control, revenge porn, harassment / stalking, discrimination, civil divorce law etc. • Free legal advice or access to legal aid • Lawyers in their area 	18	57	28	103	8%
Client Better informed of their Islamic rights	Made aware of: Select this if we inform client about the Islamic perspective including different interpretations on any issue e.g. Islamic divorce process, sexuality, abortion, dress code etc.	80	117	23	220	17%
Client Better informed of support available	Made aware of: <ul style="list-style-type: none"> • Another helpline/advice service • Public service that can help • Counselling services • Third sector services • Specialist services such as faith based / culturally sensitive services. • Financial support that can be accessed 	396	297	66	759	60%

Client given help by other support service due to our referral	<p>Where we make a direct referral and client is supported by:</p> <ul style="list-style-type: none"> • social services/ police • community / women's group • Another third sector group • refuge • counselling service • another helpline • Niche service e.g. Faith based service • Legal service 	54	50	22	126	10%
Client better informed of safety advice	<p>Made aware of:</p> <ul style="list-style-type: none"> • Contacting police • Precautions to take to protect oneself e.g. what to do if partner is abusive or at risk of forced marriage / honour-based violence etc • Other safety tips 	7	38	33	78	6%
Client more confident to deal with problems	<p>After speaking to us and with advice given client feels more confident about what to do next e.g., they may state they will / have taken certain steps or even decisions about their life.</p>	18	99	240	357	28%
Client more confident to challenge / leave abusive/ harmful situations	<p>When client decides to or takes actions to challenge (or formally report) abuse or leaves abusive situations (or makes plans to leave) e.g. move out, get perpetrator to move out, tell parents they will not have forced marriage, make complaint about discrimination etc.</p>	3	14	38	55	4%
Client helped before situation reached crisis point	<p>When our intervention leads to:</p> <ul style="list-style-type: none"> • Police doing safety/welfare check • Help with injunction • Moving client to safe accommodation (e.g. refuge or hotel or some other safe place) before situation escalates • Prevention of HBV, forced marriage, FGM or any other form of abuse e.g., child sex abuse, neglect, physical abuse etc <p>Client being referred to mental health / counselling services who are at risk of self-harm / suicide</p>	9	16	16	41	3%

Client helped at crisis point	<p>We help client who:</p> <ul style="list-style-type: none"> • Is in immediate danger of violence e.g. DV, sexual abuse, HBV, FM, FGM • Has been subjected to violence immediately prior before calling helpline • Is homeless (includes temporarily staying with friends / family after escaping domestic abuse) • Is Suicidal and has taken steps or about to take steps to endanger own life 	24	18	38	80	6%
Client moved to safety	When our intervention results in client being moved to safety e.g. to family, friend, refuge, or other temporary accommodation.	4	9	11	24	2%
Client feels less isolated	When our help makes client feel less isolated / lonely by talking to through their problems or when we find local support groups	3	45	49	97	8%
Client has improved mental health due to counselling referral	When we directly refer client to an internal or external counselling service and client is helped	38	48	31	117	9%
Prevented self-harm / suicide	<p>When client is in imminent danger of self-harm / suicide and we:</p> <ul style="list-style-type: none"> • Call police or ambulance • Make an urgent mental health / health professional referral • Make an urgent counselling referral 	7	7	22	36	3%
Client supported with interpreting	Helping client engagement with agencies and professionals when English is not their first language to ensure their needs are understood by professionals	13	23	17	53	4%
Client Supported with form filling	Helping to or filling in forms for the client e.g. benefits, housing, emergency funds etc	3	7	8	18	1%
Client Helped with accessing food bank	When we provide information on the nearest foodbank or when we contact foodbank and arrange for food to be provided	3	4	3	10	1%
Client helped with accessing courses to build skills	Support client to identify and register for courses e.g. learning English, parenting, budgeting, college courses etc.	0	0	0	0	0%

Practical and emotional support provided by welfare check and home visits	Checking up on clients via phone or via home visits if they are particularly vulnerable	32	4	4	40	3%
Attend Meetings on or behalf of client with professionals / agencies	Attending meetings at schools, meeting with social services, police, MARAC, SARCs, and other agencies,	5	7	13	25	2%
Have made no difference	When we are unable to help due to nature of enquiry or when we have insufficient information and client does not get back to us when we respond to an answer phone message, text, web chat or email	56	0	0	56	4%
Made no additional impact		0	309	507	816	65%
TOTAL IMPACTS (up to 3 per service user)					3783	

2. Issues Addressed with Service Users

Each case will be allocated a total of 3 issues that were the focus for the call. The percentage shows the proportion of total cases where this issue was raised which provides an indication of the issues that were most frequently referred to by service users.

ISSUE	PRIMARY	SECONDARY	TERTIARY	TOTAL	Percentage
Abortion / Pregnancy	15	7	6	28	2%
Addiction - Alcohol	3	0	1	4	0%
Addiction - Drugs	3	3	2	8	1%
Addiction - other	0	0	0	0	0%
Bereavement	5	6	3	14	1%
Child Abuse (neglect)	7	9	6	22	2%
Children / Custody	24	31	32	87	7%
Complaints about public services	9	9	4	22	2%
Covid- 19 - <i>new issue in 2020</i>	13	22	45	80	6%
Disability Issues	1	3	2	6	0%
Discrimination / Islamophobia	9	6	4	19	2%
Divorce	167	48	22	237	19%
Domestic Abuse	267	146	59	472	37%
Eating Disorder (self-harm)	1	1	1	3	0%
Education	4	4	3	11	1%
Elderly Issues	1	0	0	1	0%
Employment / Work	7	5	2	14	1%
Extremism	2	1	2	5	0%
Faith / Spirituality	32	88	41	161	13%
Female Genital Mutilation	1	0	0	1	0%
Forced Marriage	12	7	3	22	2%
Health (physical)	9	15	12	36	3%
Honour Based Violence	9	18	7	34	3%
Housing / Homelessness	83	78	46	207	16%
Immigration	25	26	19	70	6%
Isolation / Loneliness	13	43	41	97	8%
Jinn / Black magic	1	4	4	9	1%
LGBT	6	2	2	10	1%
Marriage	84	39	36	159	13%
Mental Health and Feelings	173	191	144	508	40%
Money / Finance	52	51	52	155	12%
Relationships	58	65	41	164	13%
Revenge Porn	6	2	1	9	1%
Sexual Abuse (Adult Survivor of child sexual abuse)	7	6	3	16	1%
Sexual Abuse (child)	1	2	3	6	0%

Sexual Assault / Rape	15	10	5	30	2%
Sexual Education / Intimacy	7	3	1	11	1%
Sexual Exploitation (Adults)	5	0	2	7	1%
Sexual Exploitation (Child)	2	0	0	2	0%
Sexual Harassment	1	0	1	2	0%
Sexual Health	1	2	0	3	0%
Stalking / Harassment	6	4	3	13	1%
Suicide / Self Harm	17	7	11	35	3%
Trafficking	1	0	0	1	0%
None (for additional issues raised)	0	283	580	863	68%
Other	31	14	9	54	4%
Unknown	65	0	0	65	5%
TOTAL	1261	1261	1261	3783	300%

3. Testimonial Form: 2020

Service User Testimony

Testimonies are a good way to gain feedback from service users. It also tells our funders about the range of support the MWN Helpline offers to support women.

MWNUK annually reviews the MWN Helpline through an independent evaluator. The information you provide about the support you received will be shared with the independent evaluator. All details will remain anonymous.

Inform the service user:

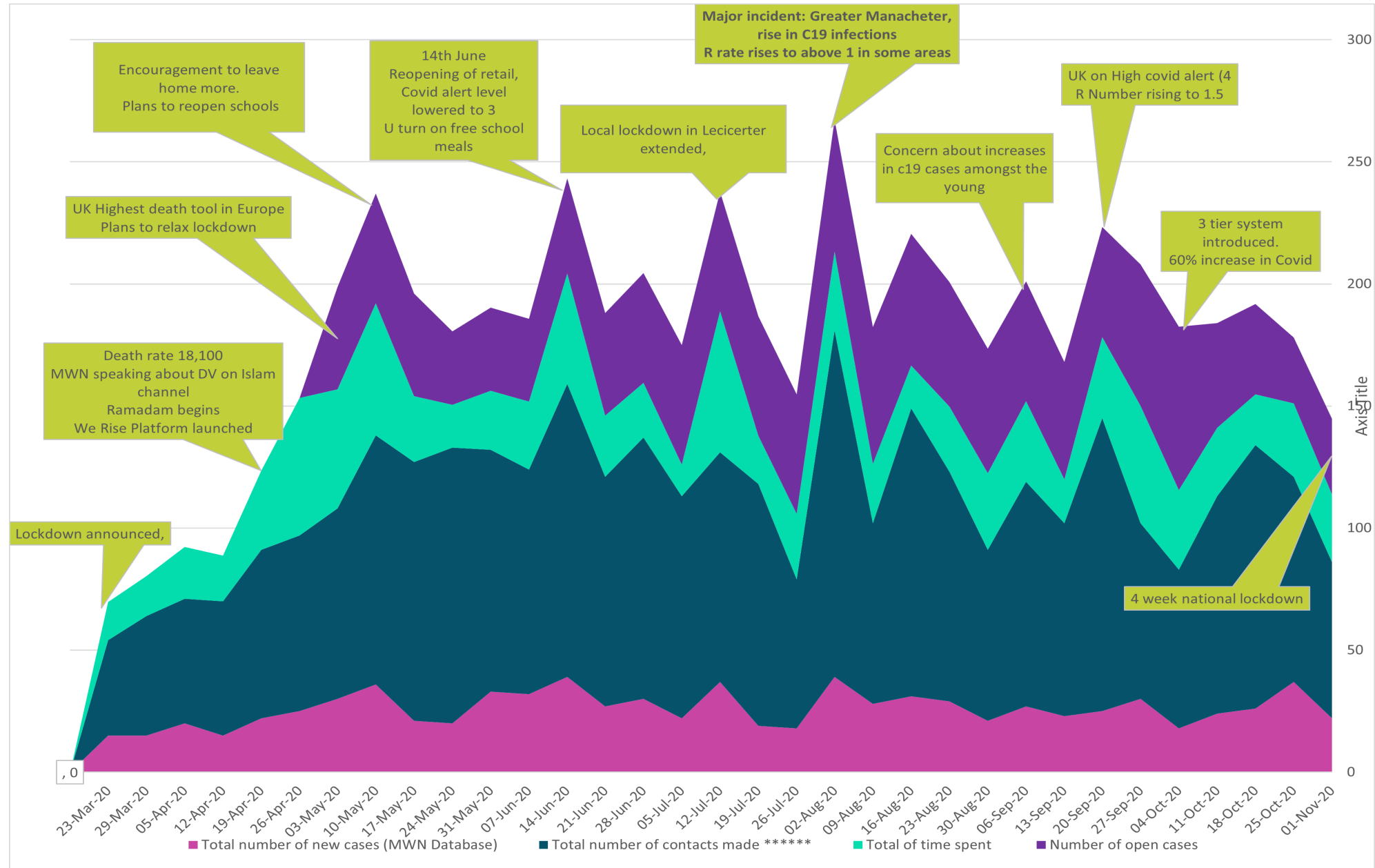
1. This testimony will take no longer than 15 minutes (depending on their answers).
2. MWNUK may use their testimony for publication on our website / reports and would ensure they remain anonymous / use alias name.
3. The information provided will help MWNUK to review and improve our service and help us apply for future funding opportunities.
4. Anything they share with us today, will not impact on any support offered.

For staff to complete prior to contacting service user:

Case number:	
Name:	
Contact Number:	
Language:	
Date of initial contact:	
Date of case closure:	
Age/DOB:	
Ethnicity:	
Religion:	
Disability:	
Immigration Status:	
Safeguarding:	
Children:	
Where did they hear about the MWN Helpline?	

1. What was the reason you contacted the MWN Helpline?
2. Did you feel the MWN Helpline provided the right advice, support and guidance that was required at that time?
3. What is the difference between when you first contacted the MWN Helpline and now?
4. What was good about the support you received by the MWN Helpline?
5. What could be different about the support that was provided by the MWN Helpline?
6. How was your experience when liaising with the MWN Helpline staff?
7. Would you recommend the MWN Helpline to your friends/family if they needed support?
8. Any other comments you would like to add?

Demand Mapping Example

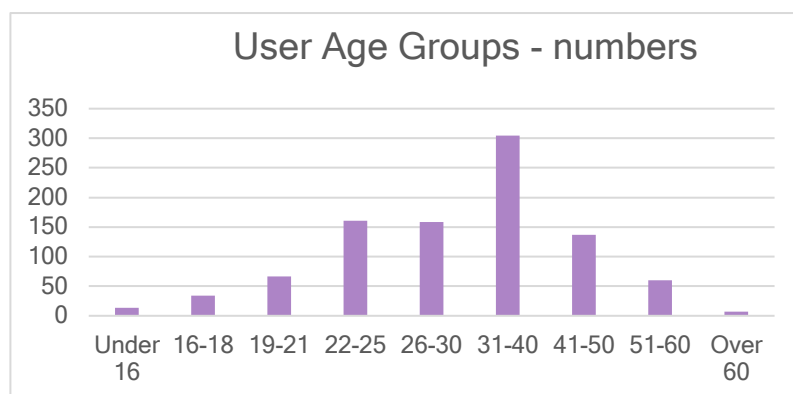


DATA SUMMARY

In some case records some demographic data is not recorded. This is often due to the nature of the contact (for example a short text based transactional contact). To ensure consistency in comparisons between future years the data is recorded as percentages of the total number of users where this data was collected.

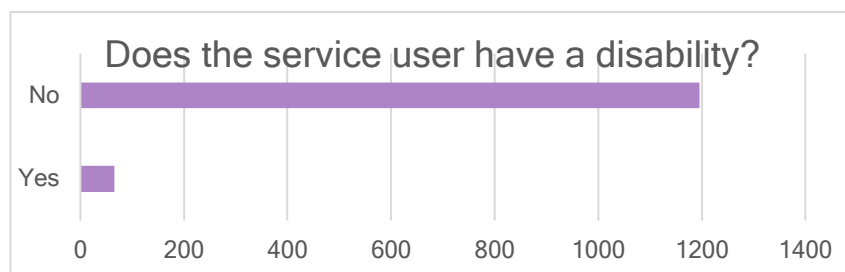
Age

AGE	RECORDED	%
Under 16	13	1%
16-18	34	4%
19-21	66	7%
22-25	161	17%
26-30	159	17%
31-40	304	32%
41-50	137	15%
51-60	60	6%
Over 60	7	1%
TOTAL	941	100%
25% (320) of cases age was not known		

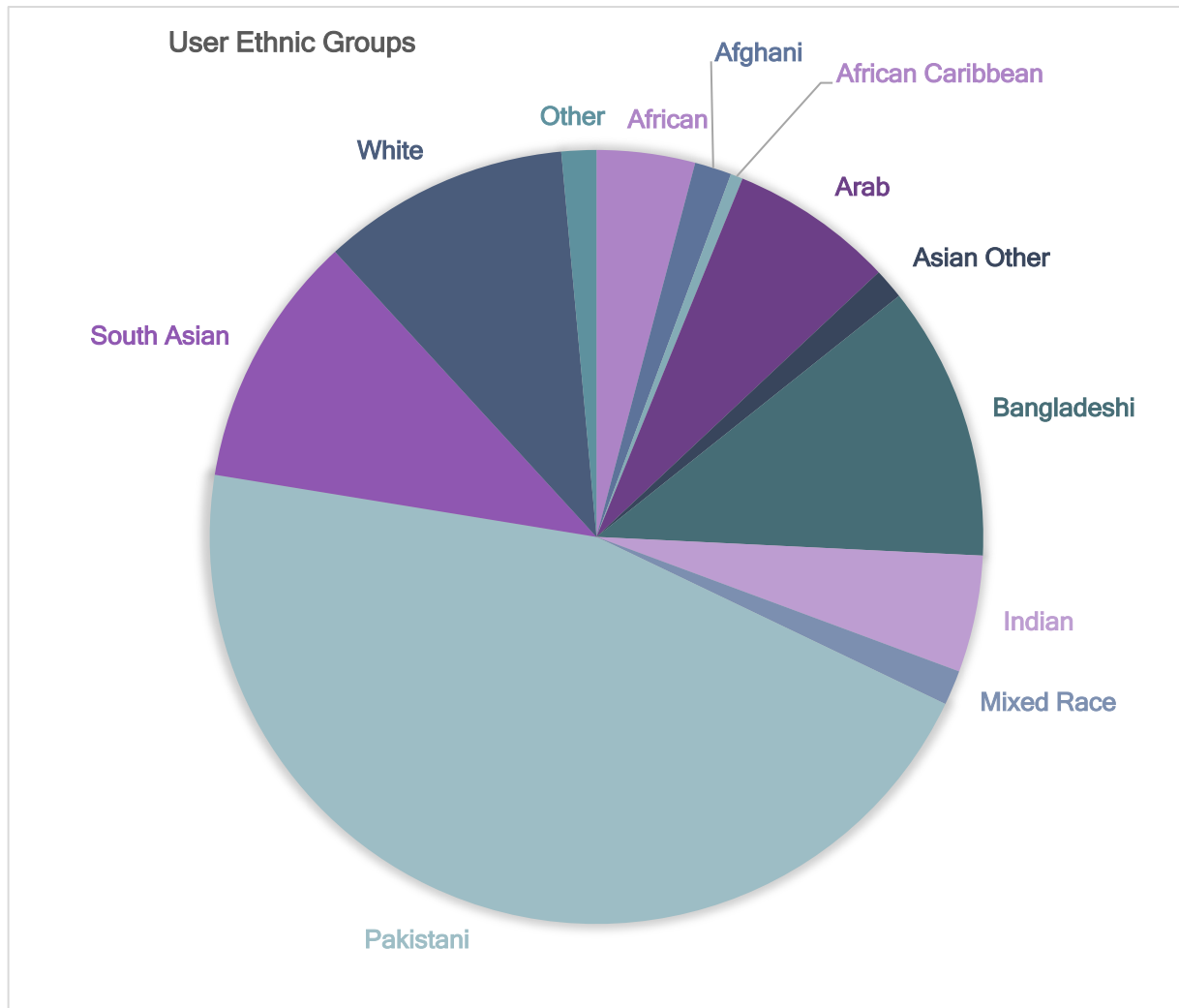


Disability

DISABILITY	RECORDED	%
Yes	65	5%
No	1195	95%
Not known	1	0%
TOTAL	1261	100%



Ethnicity



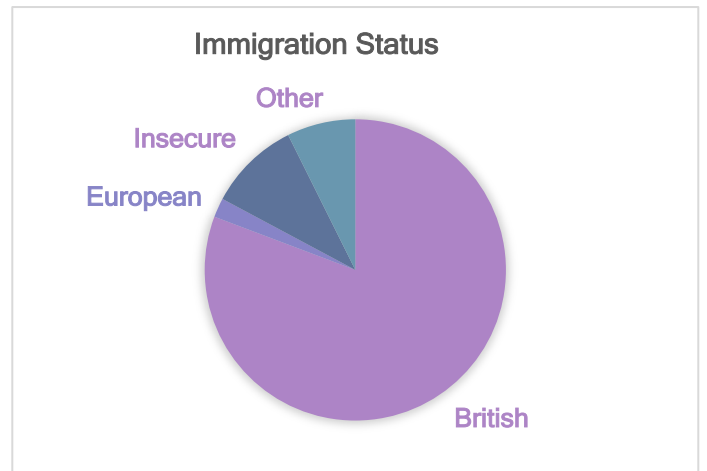
ETHNICITY	RECORDED	%
African	48	4.1
Afghani	18	1.5
African Caribbean	6	0.5
Arab	80	6.8
Asian Other	15	1.3
Bangladeshi	134	11.5
Indian	57	4.9
Mixed Race	17	1.5
Pakistani	531	45.5
South Asian	124	10.6
White	121	10.4
Other	17	1.5
TOTAL	1168	100.0
7.4% of cases (93) ethnicity was not known		

Gender

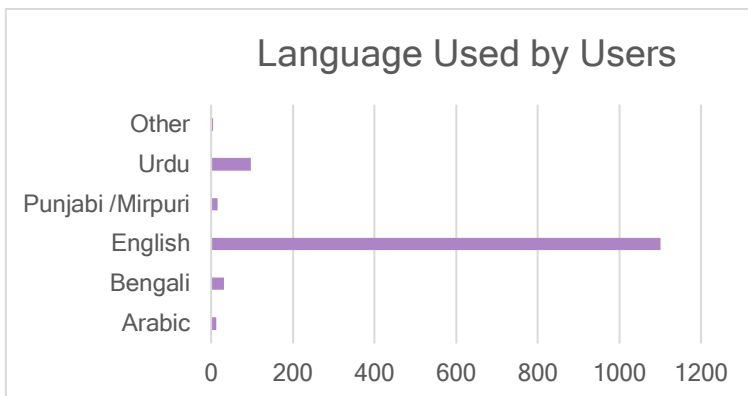
GENDER	RECORDED	%
female	1196	94.8%
male	64	5.1%
Other	1	0.1%
TOTAL	1261	100%

Immigration Status

Immigration Status	RECORDED	%
British	977	81%
European	25	2%
insecure	119	10%
other	89	7%
TOTAL	1210	100%
4% of cases (50) the immigration status was not known		

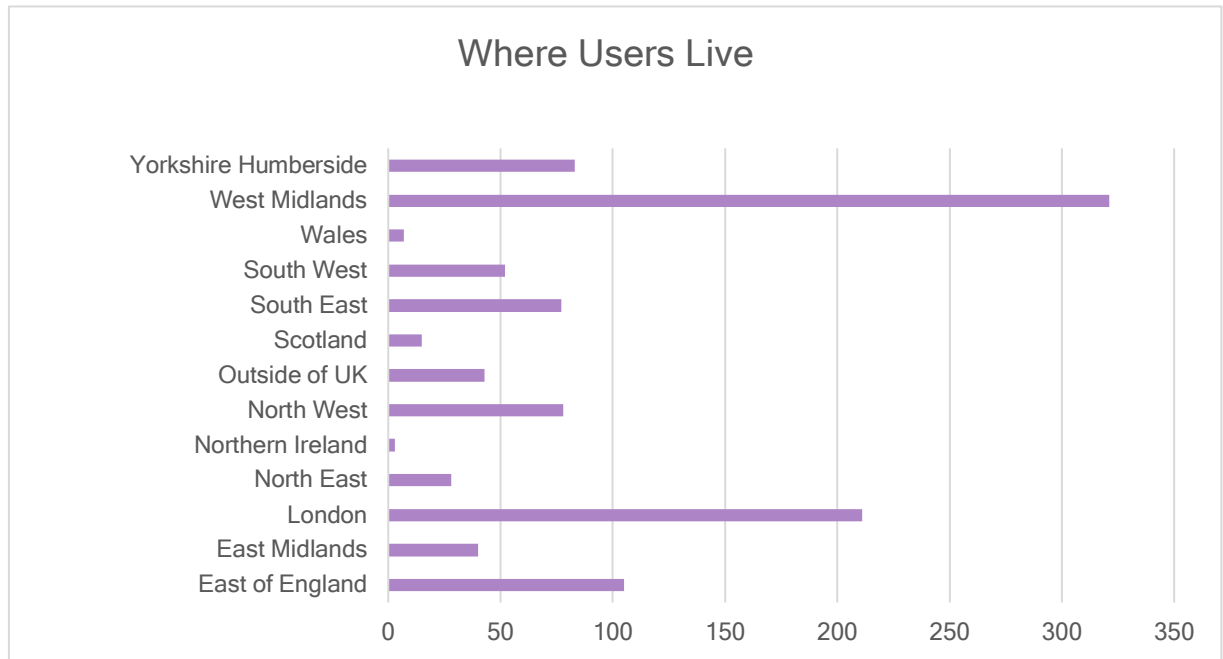


Language



LANGUAGE USED	RECORDED	%
Arabic	12	0.9
Bengali	31	2.5
English	1101	87.3
Punjabi /Mirpuri	15	1.2
Urdu	98	7.8
Other	4	0.3
TOTAL	1261	100

Location

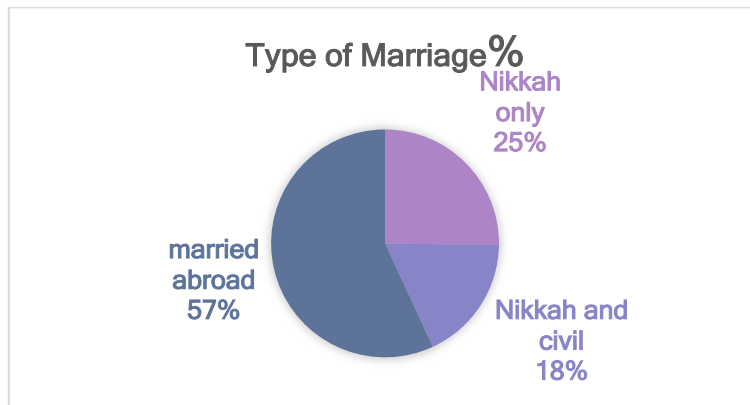


Location	Numbers	Percentage
East of England	105	10%
East Midlands	40	4%
London	211	20%
North East	28	3%
Northern Ireland	3	0%
North West	78	7%
Outside of UK	43	4%
Scotland	15	1%
South East	77	7%
South West	52	5%
Wales	7	1%
West Midlands	321	30%
Yorkshire Humberside	83	8%
Total	1063	100%
15.7% of cases (198) location was not known		

Marital Status

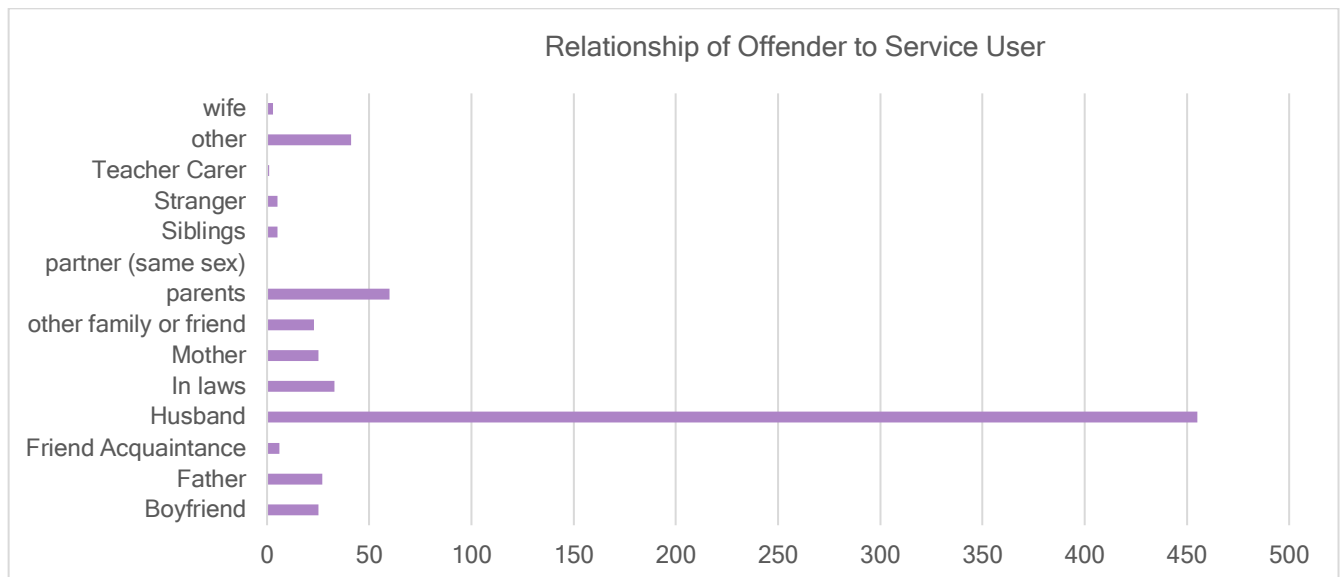
515 service users who were Muslim and married and were asked about the type of marriage.

Marital Status	RECORDED	%
Nikkah only	130	25%
Nikkah and civil	92	18%
married abroad	293	57%
515		100%



Relationship to Abuser/Offender

In 709 cases another person was mentioned to have committed an offence against the service user.



Who is the offender	RECORDED	%
Husband	455	64.2
Parents	60	8.5
Other	41	5.8
In laws	33	4.7
Father	27	3.8
Mother	25	3.5
Boyfriend	25	3.5
other family or friend	23	3.2
Friend Acquaintance	6	0.8
partner (same sex)	0	0.0
Siblings	5	0.7
Stranger	5	0.7
wife	3	0.4
Teacher Carer	1	0.1
TOTAL	709	100

Religion

	RECORDED	%
Muslim	1163	96.3%
Christian	17	1.4%
No faith	14	1.2%
Hindu	6	0.5%
Sikh	5	0.4%
Other	3	0.2%
TOTAL	1208	
4.2% of cases (53) faith was not known		