

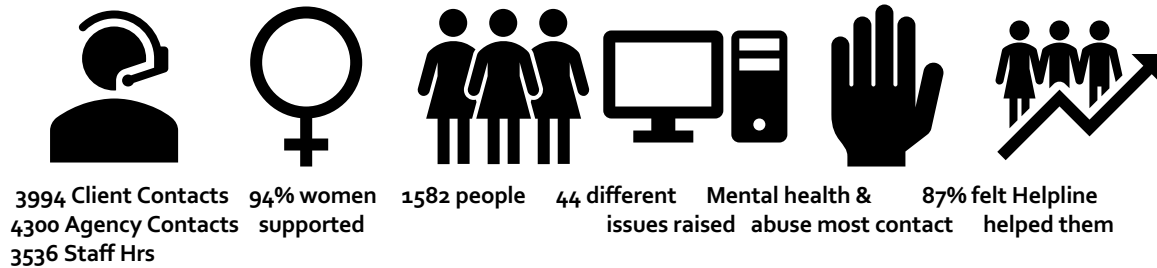
# Muslim Women's Network (UK) Helpline Evaluation Report 2021



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## MWN Helpline Evaluation 2021

### Executive Summary:



Established in 2015, the Muslim Women's Network UK (MWN UK) Helpline is a faith and culturally sensitive service offering confidential and non-judgemental support. They provide a chronically underserved population of service users a wraparound service that includes information, guidance, casework services and referrals to statutory and health agencies. MWN also collaborates with other organisations and agencies such as the police, social services, health services and other charities, acting as a socio-cultural and religious resource and hub. In 2021, the Helpline dealt with the effects of an on-going pandemic on both service users and staff alike, continuing to provide impactful and efficient support. While we are aware that this is an overwhelmingly positive report, it is because the organisation provides an exceptional service. In addition to the Helpline's effective adaptations over the evaluation period, there have also been challenges that limited the level of performance and impact possible. The evaluator was provided full access to case studies, safeguarding reviews and testimonials for an in-depth overview of service user feedback. The staff were interviewed confidentially with multiple prompts to provide a full range of feedback. The evaluator was provided full access to case studies, safeguarding reviews and testimonials for an in-depth overview of service user feedback. The staff were interviewed confidentially with multiple prompts to provide a full range of feedback. The MWN Helpline are a team of domain experts providing domain specific expertise tailored to service user needs. What they can do, no one else can.

### Evaluation Findings:

- **Makes an incredible impact for service users:** In 2021, out of 1582 service users, 87% reported feeling better informed. The majority of service users have complex issues involving mental health and various forms of abuse.
  - Helpline is a safe, non-judgemental and confidential space to seek information, support and advocacy.
  - Clients feel seen, heard and believed, the majority for the first time.
  - Uses a cultural and faith sensitive approach to build up service users' capacity.
  - Over a third of clients felt more confident in either challenging or leaving abusive situations.
1. **Provides a bespoke package of services:** Unlike most helplines, the MWN Helpline goes beyond sign-posting clients to other services, seamlessly doing the work of multiple charities and service providers in one service.
    - MWN is an effective liaison between Muslim women and public, statutory and charity organisations
    - MWN fills a public services gap that disadvantages a large section of society, worsened by Covid-19.
    - Connects client to the police, social services, benefits provision, places in refuge and social housing.
    - Acts as an effective safeguarding organisation, with the Safeguarding Lead overlooking case actions.
    - Helpline casework and recording procedures are industry standard to create actionable cases for services.
    - Qualifying clients referred to MWN's free Counselling Service for sustained mental health support.
    - Hardship grants are available to provide financial aid.
  2. **Sustained organisational learning and digital adaptation:** As an organisation, they are adept at scaling, learning and adapting to contextual requirements, continuing to operate and deliver their services efficiently and effectively.
    - In 2021, MWN built on remote working during 2020 to improve case management and efficiency.
    - Evaluation is embedded practice with on-going communication between staff and management.
    - MWN instituted new modes of contact, e.g. web chat and ensured staff capacity to respond.
    - Updated staff resources, service user protocols and internal guidelines.
    - Extensively upgraded Helpline data bases and added analytical tools enabling real time analysis.

- Improved online procedures are easily navigable, including an internal staff messaging system.
  - Completely paperless case system to minimise environmental impact and increase efficiency.
  - Developed domestic abuse application called Amal (Will go live in 2023)
3. **Increased staff capacity building and high staff satisfaction:** The Helpline's greatest strength is high staff satisfaction and dedication, with a management focus on pro-active support and staff wellbeing.
    - Many staff praised the empathetic leadership of the Management Team.
    - An up-to-date training programme, with a focus on effective recruitment and robust operational systems.
    - Staff are keen to develop professionally with management support.
    - A trauma informed approach that prioritises staff wellbeing and reflective practice.
    - Supportive organisational culture that discourages overwork and prioritises communication.
  5. **Limited Capacity to Respond to Demand:** The demand from service users has risen fivefold since the Helpline started and the type and complexity of cases continues to increase.
    - MWN's major limitation is the inability to meet client demand due to limited staff and resource capacity.
  6. **Lack of sustained and longitudinal funding endangers sustained service delivery and growth:** The operational burden of seeking, securing, managing and sustaining funding has grown immense.
    - Effective service delivery is endangered without sustained long-term financial support.
    - Lack of funds impedes strategic planning, staff retention and advocacy and policy change.
    - Re-applying for grants every year is uncertain and labour intensive. Many available grants rule out small, minority targeted organisations with limited internal capacity like MWN.
    - Majority of funders rule out repeat funding to the same organisations, even if they utilise grants efficiently and effectively.
    - MWN are caught between wanting to increase capacity and needing higher levels of funding to maintain upgraded capacity.

## Key Recommendations:

1. **Improving Service Provision:**
  - Increase connectivity with local agencies and support organisations to better support clients.
  - Add Additional Support Staff to 5 days a week due to increasing web and text-based contacts.
  - Accredited staff as IDVA and ISVA to formally provide a faith and culturally sensitive DV support service.
  - Review Feedback and Testimonial structure to better capture client feedback.
2. **Increasing Organisational Impact:**
  - Employ Data & Research Officer to better use MWN's programme data for advocacy and policy change across the government and charity sector.
  - Research trends in service user issues, update resources and digital friendly content from in-house data.
3. **Strengthening organisational capacity and staff development:**
  - Increase number of staff to facilitate cover when short-staffed.
  - Add Arabic speaking staff member to widen language provision.
  - Recruit regularly twice a year to maximise resource allocation for training and on-the-job training.
  - Allow hybrid working for Helpline support staff in line with other staff.
  - Continue prioritising staff mental health, including regularising Close the Door trainings and Away Days.
4. **Prioritise strategic planning and scaling up funding:**
  - Develop a funding plan that identifies key areas of a) maintaining performance and b) focused expansion.
  - Apply for more funding that is casework specific to be able to support more and varied cases.
  - Increase outreach, but only if there is the capacity to respond to the following increase in demand.
5. **Advocate for targeted government support:**
  - A new government fund for organisations addressing specific issues and minoritized populations.
  - Fund should require robust programme performance, but have a simplified application process and reporting/maintenance requirements.
  - Advise a matching fund if the organisation can show 50% of operating funds raised.

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## MWN Helpline Case Study: A Bespoke Support, Referral and Advice Service

### Siblings Abdullah & Salma

*"I was helpless and barely hanging on when I contacted MWNUK. It was the only charity helpline that was culturally and religiously sensitive. Since I also experienced spiritual abuse, it was difficult for me to mention my abuse to others who would not understand. I didn't expect much but I was astounded by the amount of support I received. I accessed support for 8 months. My caseworker continued to provide support that was religiously and culturally sensitive (I couldn't get this from any other agencies). I am now receiving all of the benefits I am entitled to, in temporary accommodation and am safe. I am able to make sense of the abuse that happened to me, and come to an understanding that I did not, and still do not, deserve to be treated badly. I was given counselling and the sessions helped me slowly come to terms with my disability and homelessness. I am more confident within myself and assertive. The staff were so supportive and guided me through what I needed to do in order to get myself better. I would recommend MWNUK to anyone who is suffering, every member of staff that engaged with me was brilliant".*  
(Salma, Service User)

**Abdullah:** Male, 22 years old, Muslim, British Bangladeshi, East England, domestic and child abuse, mental health issues, social anxiety, depression

**Salma:** Female, 19 years old, Muslim, British Bangladeshi, East England, domestic and child abuse, disability, autoimmune disease, Cushing Syndrome, social anxiety, chronic fatigue syndrome, fibromyalgia.

**Background:** Both siblings are victims of psychological, domestic and child abuse from their parents. Due to parental control, mental and physical health problems, they are cut off from support. After an altercation during which the police are called, they are placed in a local hotel by the council. Both siblings had signs of Post-traumatic Stress Disorder (PTSD), trauma and suicidal ideation. They contacted MWN directly seeking help.

**MWN Response and Support:** Both siblings require intensive psychological and practical support over email, phone and text, as well as a range of referrals to a range of agencies.

- Both provided with case work and Helpline support, allocated Case Worker & Counsellor (Salma) and Helpline Worker (Abdullah) according to their needs.
- Hardship financial support for both to buy clothes, personal items, food, clothes, travel, etc.
- Provided referrals and liaised with housing, professionals, local council and social services resulting in their move to a two-bed council house.
- Practical support to apply for benefits, expenses, etc.
- Counselling for both (once moved into their new house) emotional support, out of hours signposting for help.
- Safeguarding services and adult social care referrals (declined).
- Help to apply for a non-molestation order against parents for 12 months which was granted.
- Signposted both to local community groups for their continued support and wellbeing.
- Supported both Salma and Abdullah during times of suicidal ideation, including actively researching ways to end their life and undertaking attempts.
- MWN provided welfare checks, safe-guarding and safe space that was trauma-informed.
- Referral to Social Services for their younger 2 siblings and escalated complaints to the Local Authority Designated Officer (LADO) regarding their mum who worked with children.
- Provision of tools and skills training to manage their day to day living, e.g., money management, utilities, etc
- Provision of food hamper for Christmas period.
- Specific emotional support for Abdullah who had started attending college, went back to work at a supermarket and had a more active outside life and felt that he should be a full-time carer for his sister rather than pursue his own goals. Helpline was able to help him have difficult conversations with her and assure her of his continued support.

#### Outcomes:

1. Both service users moved to safety and provided safety advice
2. Clients supported emotionally and practically with a trauma informed approach for each individual
3. Clients felt listened to and safe
4. Both reported improved mental health and lack of suicidal ideation
5. Referred to and liaised with professionals, and advocated for service users in meetings
6. Empowered with knowledge to make informed decisions regarding their lives and future
7. Helped to navigate social security systems, accessing benefits, local council, rights. Etc.
8. Both service users were able to take next steps (college, return to work, work on improving mental health, etc).

## Section 1: Helpline Overview & Evaluation Goals

Established in 2015, the Muslim Women's Network UK (MWN UK) Helpline is a faith and culturally sensitive service offering confidential and non-judgemental support. The offer services users' information, guidance, casework services and referrals to statutory and health agencies. Where required, it acts as a safeguarding organisation for service users at risk, provides those requiring counselling access to MWN's free Counselling Service and provides hardship funds. It delivers wrap-around support to an ethnic and religious population chronically underserved by mainstream services. MWN also collaborates with other organisations and agencies such as the police, social services, health services and other charities, acting as a socio-cultural and religious resource and hub.

MWN provides a unique wraparound service:

- Helpline → Advice, information, resources, referrals to services and a case worker
- Counselling → Empathetic & non-judgemental talking therapy
- Helpline → Client can reach out again for help if necessary

In keeping with one of its key missions, MWN uses the Helpline's wealth of information regarding the lived experience of Muslim women and girls in their campaigning and advocacy work towards systemic change. The disproportionate impact of the Covid-19 pandemic on women as well as minority and racialised populations in the UK has brought into sharp focus the need for policies and services aimed at them. These annual evaluations help MWN identify the current and emerging challenges facing Muslim women and advocate for changes in legislation, policy and public services. They also help identify both good practices and challenges in service provision for the target demographic.

In 2021, the Helpline team faced an on-going increase in contacts from service users, while maintaining an excellent level of service across a multiplicity of contact formats. They continued to provide high quality safeguarding services, receive excellent service user feedback and build staff capacity within the organisation.

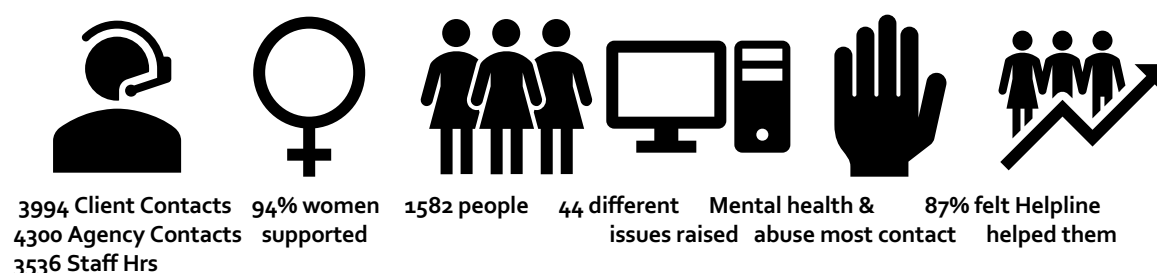
Using demographic data, client feedback, case studies and staff interviews, this evaluation does the following:

- Highlights the Helpline's major adaptations and success during its 8 years of operation.
- Focuses on the Helpline's transformation into a bespoke service that can combine information, access to resources, casework and referrals.
- Evaluates the Helpline's reach, impact on service users and organisational performance and development in 2021. It also identifies the current key challenges and limitations.
- Provides recommendations regarding improvements in service delivery, organisational capacity building and widening impact.

### 1.1 Methodology:

This evaluation uses quantitative client and programme data from 2021 and previous years, as well as in-depth qualitative client feedback and consultations with MWN management and staff. It also conducted an extensive review of internal Helpline protocol, assessment, training and safeguarding documents. The approach combines outcomes and process-based evaluation methodology to examine both project outcomes and internal procedures. It was conducted between September-November 2022. All interviewees were asked to verbally consent to the conversation being digitally recorded and stored after the evaluator had explained data collection, storage and analysis protocols. The overall findings have been analysed to identify common themes. Initials have been changed and quote attributions randomised to protect client and counsellor privacy.

**MWN Helpline: What it is, who and where are its Service Users and what are their reasons for calling?**



**Figure 1: MWN Helpline Aims:**

- Sufficiently resourced
- Robust safeguarding procedures
- Integrated data collection process
- Operated by highly trained staff
- Respond to complex issues holistically
- Use data to identify best practices, challenges and limitations
- Advocate for changes in legislation, policy and service provision

The MWN Helpline was set up in January 2015 with the purpose of providing service users with information, support, guidance and referrals in a confidential and non-judgemental way (Figure 1). The service also operates on the basis of anonymity, if required, and is committed to treating all service users equally. It was initially aimed at Muslim women, and even though this is still the vast majority of service users, others have availed of the service. The Helpline has supported Asian women of other faiths; men and boys who need help themselves or are concerned for women and girls they know and also some minors/youth.

**1.2 Operation:** Due to the complex nature of service users' needs, the Helpline does not limit what callers can request help with. For the

vast majority of service users, the Helpline will be their first port of call. The Helpline operates 5 days a week between 10 am – 4 pm. Service users are able to contact the Helpline via telephone, email, webchat and text message. Many staff members are bilingual, with services being provided in Urdu, Punjabi, Mirpuri, Potwari, Hindko, Hindi and Bengali. Interpreters are available for additional linguistic support.

**Figure 2. How do clients find the MWN Helpline?**

Internet Search	65.2%
Referred by another organisation	12.9%
Have called Helpline previously	12.2%
Family/Friend	3.8%
Other (MWN staff, colleague, flyer, etc)	5.9%
	-----
	100.0%

**1.3 Funding:** Since inception the Helpline has been resourced by a combination of funders. In 2021 had a total operating budget of £180,000. This was mainly funded by the National Lottery Reaching Communities Fund, with a substantial contribution from Comic Relief and funding for casework support from The Henry Smith Charity.

#### Helpline Contacts 2021

Total Number of Contacts: 3994

42.4% initial contacts phone

25.4% initial contact email

14.4% initial contact leaving message

8.8% initial contact webchat

7.7% initial contacts by text/Whatsapp\*

Total Number of Time: 3536.5 hours

72.5% service users calling for themselves

12% professionals/third sector calling for clients

5.7% enquiring for family member

3.2% professionals/third sector calling for information

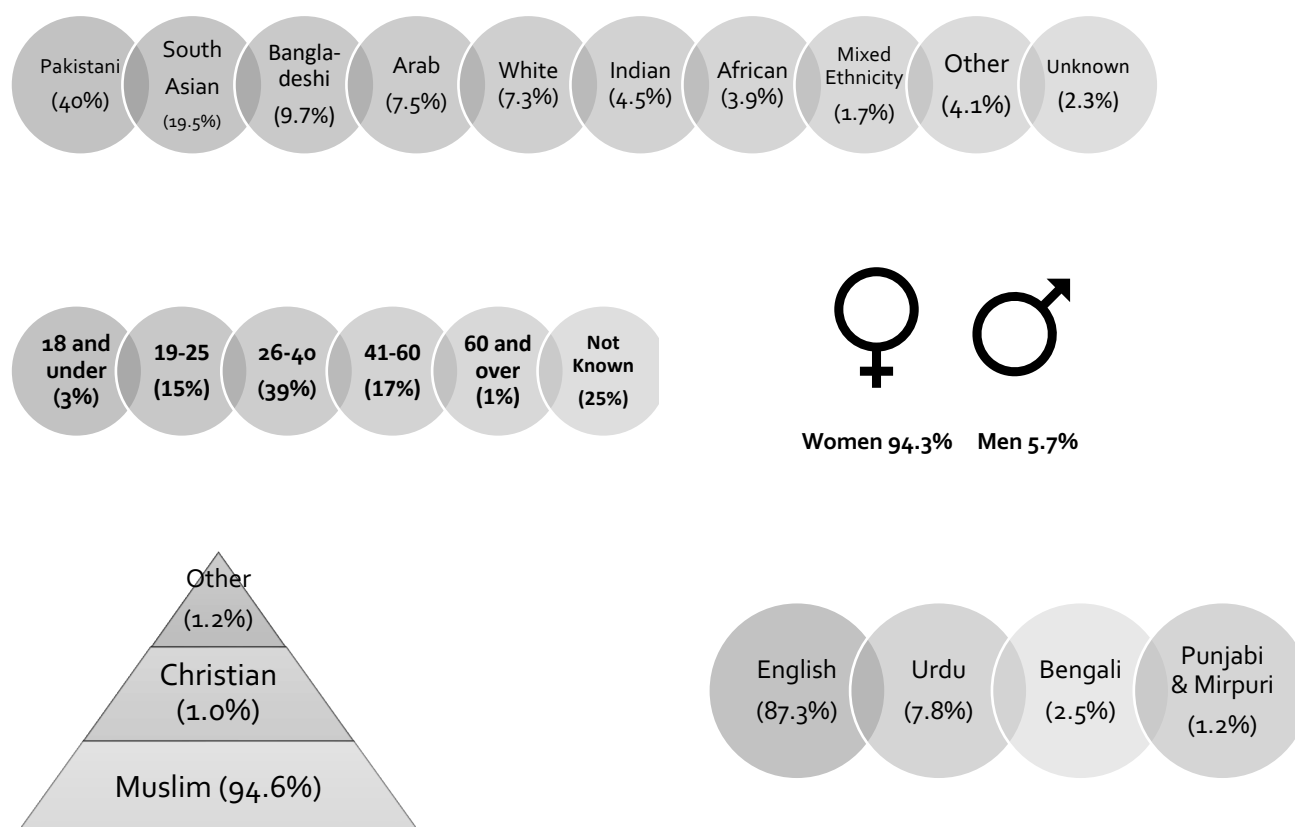
\*Due to rounding the percentages don't add up to 100%

**1.4 Growing Text-based Demand:** Over the course of the Helpline's operation, the staff have noted a shift towards email and text-based contacts. This uptick was particularly noticeable in 2020, with 38% of initial contacts being made via text-based methods, peaking in March when lockdown was imposed. In 2021, there was the same number of initial contacts made by calls as text-based methods (see above). In recognition of the increasing client demand for text-based services, Helpline management have hired and trained Additional Support Staff whose sole responsibility is to respond to texts, emails and webchats. This has made a huge difference in reducing the workload for the other case work and support staff, who can focus on responding to and following up on calls and more complex cases.



### 1.5 Helpline Service User Profile 2021: A quick glance at Helpline clients is presented below (Figure 3)

Figure 3. Helpline Client Demographics



As expected, service users are overwhelmingly Muslim and female, with nearly 40% aged between 26-40 years old. This is to be expected as the majority of them find the Helpline via a web search that leads them to MWN. 15% of the service users are 19-25 years old, and 17% are between 40-60. For the 35% whose marital status was recorded, over half were married abroad. A quarter of them only had a *nikkah* (religious) marriage in the UK, which meant that they were in marriages that are not legally recognised. The other women were in legally recognised marriages because they had both a religious and civil marriage in the UK (20%) or they had been married abroad (55%). As the legal status of marriage affects their legal rights, the helpline staff often have to help service users to understand them. The majority of those who avail of the service are at the time of life most impacted by marriage, relationships and familial disharmony. This is also the age where there the greatest pressures on Muslim women to conform to cultural and familial expectations (Bhardwaj 2001<sup>1</sup>; Gunasinghe, Hatch, and Lawrence 2019<sup>2</sup>). The majority of service users (one-fifth) are from the West Midlands, the locality that MWN is based in (Figure 4). Birmingham is the local authority with the largest Muslim population (280,000 in 2022). A very close second, 18.5% are from London, where there is also a large Muslim population. The clients are most likely to be of Pakistani heritage, which is the largest Muslim ethnic group in the West Midlands area and in the U.K. In addition, 82% of the clients are British, 8% specified that they have insecure immigration status. While 87.3% of the client were English speakers, 8% preferred to speak in Urdu. Mirpuri, Punjabi, Bengali and Arabic are the other service user languages. The helpline also utilises Language Line for help with interpreting, which was most commonly used for Arabic indicating the need for an Arabic speaker on the helpline. Language Line was also used for Italian, Spanish, French and Turkish speaking service users. Also, 6% of those making contact describe themselves as having a mental or physical disability. The majority of clients were British citizens (82%), although 8% had insecure immigration status.

<sup>1</sup> Bhardwaj, Anita. 2001. 'Growing Up Young, Asian and Female in Britain: A Report on Self-Harm and Suicide'. *Feminist Review* 68: 52-67.

<sup>2</sup> Gunasinghe, Cerisse, Stephani L. Hatch, and Jane Lawrence. 2019. 'Young Muslim Pakistani Women's Lived Experiences of Izzat, Mental Health, and Well-Being'. *Qualitative Health Research* 29(5): 747-57.

**Figure 4: Location of Helpline Service Users\***



\* **N.B.:** In 2021, the percentage of users from an **unknown location** was **17.2%**. In previous evaluations, the number of users whose location is unknown has not been reported, so comparisons between years will have to be adjusted.

**1.6 Reasons for Contact:** Service users contact the Helpline requesting support on a wide range of complex issues (Figure 5). The majority of contacts are on issues of mental health (41%) and domestic or intimate partner abuse (34%). For those calling with mental health issues, the most common issues were depression and anxiety, though some service users struggled with isolation and/or suicidal ideation.

**Figure 5: Top 10 Contact Issues**

Mental Health Feelings  
Domestic Abuse  
Divorce  
Housing / Homelessness  
Relationships  
Money / Finance  
Marriage  
Isolation / Loneliness  
Children / Custody  
Suicide / Self-harm

The most concerning trends have been the rise in clients experiencing coercive control, tech abuse and growing numbers of children at risk of abuse. Coercive control is behaviour that creates an unequal power dynamic in a relationship. It manifests in humiliation, threats and intimidation. In 2019, coercive control was an issue for only 2% of clients. It rose to 17% in 2020 and to 20% in 2021. The rise in part may also be explained by improved recording on the helpline and more awareness by women of recognising the signs. The increase in domestic violence and demand for domestic violence services during the pandemic has been well documented. The domestic violence charity Refuge reported a 61% increase in logged calls and contacts and a sevenfold increase in visits to specialist domestic violence websites between April 2020 and February 2021 (Refuge 2021).<sup>3</sup> They reported that 72% of these were from women, with many reporting coercive control in addition to physical or mental abuse. The Helpline line has seen a rise in service users seeking help with tech abuse, which rose from 1% in 2019 to 5% in 2020 and 2021. This is the use of technology to perpetrate abuse, stalking,

harassment and coercive control. It can take many forms, but cases of intimate image abuse or “revenge porn” are on the rise in the UK generally (UK Safer Internet Centre, 2021).<sup>4</sup> The staff has taken on research and training in these areas to better support service users. 2020-21 also saw a rise in calls regarding problems in relationships, homelessness and financial hardships. This was caused by Covid-19 pandemic which saw households struggle and demand for local welfare support services rise by 219% (London Councils, 2020).<sup>5</sup>

**1.7 Complexity of Cases:** Clients with multiple issues are common: 29% of service users have one issue, 47% have two main issues, and 25% have three or more. Helpline staff report that an initial call or contact tends to be focused on rapport-building. Once the service user has been able to “offload” their issues, Helpline staff can help them prioritise. They then create support plans to provide resources and support for the most pressing issues. During 2020-21, lockdown and the pressure of being constantly home with both nuclear and extended family members meant that service users did not have access to friends and support outside the home. This was reflected in the complexity and persistence of the issues they presented with.

<sup>3</sup> Refuge. 2021. ‘A Year of Lockdown: Refuge Releases New Figures Showing Dramatic Increase in Activity’. Presented at the London. <https://refuge.org.uk/news/a-year-of-lockdown/> (May 9, 2022).

<sup>4</sup> U.K. Safer Internet Centre, 2021. “Intimate Image Abuse: An Evolving Landscape.” <https://swgfl.org.uk/research/intimate-image-abuse-an-evolving-landscape/>

<sup>5</sup> London Councils, 2020. “Covid-19 triggers 219% increase in demand for local welfare assistance in London”. <https://www.londoncouncils.gov.uk/press-release/22-october-2020/covid-19-triggers-219-increase-demand-local-welfare-assistance-london>

**1.8 Time Spent on Cases:** During 2021, the time spent on cases increased by 13.5% over 2020, due the ongoing effects of the Covid-19 pandemic. The total time spent on cases was 3536.5 hours. The initial time spent on service user contacts was 611.5 hours. Additional time spent on the contact including provision of information, resources and casework was 2925 hours.

**1.9 Referrals:** The Helpline works intensively with service users who have additional barriers to accessing support or are in situations where safeguarding is a concern. Barriers for clients can be linguistic, cultural, religious, physical or mental health and vulnerability. A Helpline caseworker takes on the case, preparing a support plan that may include assessing and managing risk, as well as liaising with statutory agencies such as the police and social care to provide services and protection. They may also help access benefits and health care, and act as a liaison for schools and third sector organisations. This is explored further in subsequent section.

**1.10 Staff:** The Helpline is operated by a Manager and staff whose roles cover attending to calls and text-based contacts, as well as casework and referrals (see **Figure 6**). Over 80% of staff time is spent directly assisting service users. Management works a full week, but due to the intense nature of responding to service users, other staff members do not work more than 2 days a week. At least two staff members work each shift responding to contacts. Volunteers' hours are also limited to one shift (7 hours) per week. All staff members log each contact and follow up actions into the Helpline dashboard following a detailed set of procedures, flagging safeguarding issues immediately. Each shift begins and ends with a check-in during which the Manager and staff on shift update each other on cases. The Manager also does a wellbeing check on staff members. During 2021, the entire staff of 10 part-time staff worked remotely and check-ins and all staff interaction happened over WhatsApp and Zoom

**Figure 6: MWN Helpline Roles**

**Helpline Support Worker** – taking incoming calls, making outbound calls to professionals, service users, making assessments, referrals to social services and police, managing risk and assessing risk, signposting, welfare checks, writing safeguarding reports & breach of confidentiality logs, going through hardship, casework and counselling triage, writing assessments. On busy days also responding to emails, text and webchat.

**Additional Support** – responding to (non-verbal) emails, text, webchat, hardship triage and following up on paperwork, updating assessments, updating safeguarding reports, managing risk, making assessments, supporting helpline call handlers during busy periods.

**Volunteer** – Supporting paid helpline staff with researching support, resources, signposting, writing emails, text, webchat and researching support and resources & supporting caseworkers, helpline support workers, additional support with tasks and more.

**Caseworker** – provide 1:1 intense and holistic support package for women who have additional barriers to accessing right support at the right time. Barriers can be language, cultural, mental or physical health, vulnerability. Writing reports, support plans, assessing and managing risk, liaising with professionals and third sector to access benefits, GP, schools, social care, protection.

## Section 2: MWN Helpline Successes:

### Meaningful Impact via a Bespoke Service

Out of 1582 total cases in 2021:

- 87% better informed of resources and choices available
- 60% service users felt listened to
- 2 out of 3 service users with mental health concerns felt heard
- One-third of service users more able to cope with their problems
- Clients felt more able to challenge and leave abusive situations
- Provides access to confidential and non-judgmental tailored information & support
- Caseworkers provide bespoke referrals to statutory agencies, advocacy, practical and emotional support
- Robust safeguarding practices to protect clients
- MWN filling in gaps in social service provision due to Covid-19 related closures
- Mental health support via MWN counselling
- Follow up and provision of support as long as the client requires it

The MWN Helpline was initially set up as a faith and culturally sensitive service providing information, support and signposting to other services. Over the past seven years, the service has evolved significantly to become the only charity of its kind in the UK working with and providing a frontline service to Muslim women and girls. It is a service that makes a tangible difference to its client's lives and offers support that goes far beyond signposting. Multiple reports have highlighted how current policing, social services, health and mental health provision in the UK fail minority and racialised populations (Baker, 2021<sup>6</sup>; MWN 2019<sup>7</sup>).

**2.1 Measuring impact:** The very complex, long-term and deeply embedded nature of service user issues makes measuring impact complicated, and often impossible. MWN works to change the language around impact by presenting the complexities of client needs. Any impact measurement will be incomplete due to the difficulty of quantifying nuanced changes in people's lives and mental states. Currently the Helpline's impact on service users is measured via queries made by staff at the close of a case. To assess longer term impacts, staff conduct follow up client calls and surveys, which are recorded via feedback forms, case studies and testimonials. This section uses all of the above to explore the Helpline's impact and the unique value of its tailored approach to services

#### Immediate Impact of Helpline:

*"We get it ...many of have lived it, but we also have the required training to provide the right resources and help in meaningful way." – MWN Caseworker*

The availability of a faith and culturally sensitive service staffed by Muslim women who are ethnically, religiously and culturally similar to service users makes a huge difference. Helpline staff are experts in their service users and understand them wholly. Clients feel listened to, that they have been offered a range of resources and that the Helpline supported them at a crisis point. It offers a suite of services embedded in deep knowledge of the service user's context, while not being non-judgemental in approach. For many this is the first and only service they feel comfortable with, and Helpline staff feel they are the first line of communication and defence for their service users. The majority of service users are not aware of their rights, nor the services and resources that they can access for help. Their issues are complex and many are further complicated by social norms specific to ethnicity or religion. Mainstream service providers are often ignorant to the norms and contexts that shape this population. Helpline services are available in a language that the caller is comfortable in, or with an interpreter. Service users can use a format that is most convenient to the service user's circumstances: calls, web chat, text and email. Service users report that they are more likely to feel comfortable seeking help from and listening to staff who share a religious and cultural context. The Helpline helps a wide range, from those who just want information on to make more informed decisions to those who are in imminent danger and require safeguarding and follow up actions. As reported by some clients in this evaluation,

<sup>6</sup> Baker, Carl. 2021. *Mental Health Statistics (England)*. House of Commons.

<https://researchbriefings.files.parliament.uk/documents/SNo6988/SNo6988.pdf> (April 5, 2022).

<sup>7</sup> Muslim Women's Network (2019) *Muslim Women's Experiences of the Criminal Justice System* by Shaista Gohir, OBE.

[https://www.mwnuk.co.uk/go\\_files/resources/Muslim\\_Women\\_and\\_Criminal\\_Justice\\_FINAL.pdf](https://www.mwnuk.co.uk/go_files/resources/Muslim_Women_and_Criminal_Justice_FINAL.pdf)

their identity as Muslims equipped them with great inner strength in the face of adversity and the Helpline recognises and supports this. There is nothing else like this service, and it makes a huge difference to those who avail of its services.

**Figure 7:**

<b>Client Outcomes</b>		<b>MWN Helpline Short-term Impact 2021*</b>
87% better informed of resources available	✓	Clients provided with information and advice. Directed to statutory, public, financial, charities and specialist services that they are not aware of.
60% felt listened to	✓	Client able to talk through/describe their problems. Felt that staff were attentive, supportive and non-judgemental.
34 % more confident to deal with problems	✓	Client able to articulate next steps and decisions, feel supported to take these. Aware that they can contact service again if needed.
19% better informed of Islamic rights	✓	Some clients request an Islamic perspective on issues such as divorce, sexuality, abortion, etc. This is provided, including different interpretations.
12% helped at or just before crisis point	✓	Clients helped when at high risk of violence, honour-based crimes, neglect, self-harm, abuse, forced marriage, homelessness, etc or already in a crisis involving one or more of the above.
12% received other services due to referral	✓	Client is directly supported by police, social services, refuge, women's group, legal aid, another charity, etc due to MWN referral.
11% felt mental health improved due to MWN counselling	✓	Client is provided access to free MWN counselling and reported improved mental health and wellbeing as a result.
10% more informed of legal rights	✓	Client made aware of legislation and legal aid on their issues, e.g. coercive control, harassment, injunctions, discrimination, civil marriage and divorce laws, etc.
10% helped with interpretation services	✓	Clients who need an interpreter aided in interacting with agencies and professionals to ensure their needs are met.
8% felt less isolated	✓	Client feels less alone after speaking to staff and via support from local groups recommended by Helpline.
5% more able to challenge and leave abusive situations	✓	Client takes decides or takes action to challenge, leave or stop an abusive situation, e.g. move out, get perpetrator to move out, refuse forced marriage, etc.
4% supported regarding self-harm and suicidal ideation	✓	Clients in imminent danger of self-harm/suicide are reported to the police, mental health services and provided with a fast-track counselling referral. Safeguarding cases are followed up and kept open as long as needed.
5% received practical support	✓	Clients supported by welfare checks on phone and in-person to make sure they are well.

\*Please see Appendix A for details of impacts recorded.

The Helpline's impact is even more important in a context where service users report feeling unable or unwilling to approach mainstream services. Research shows that minority and racialised populations, especially women, are less likely to approach mainstream health and statutory organisations (Memon, et al 2016o).<sup>8</sup> They are subject to a complex web of socio-cultural and structural barriers to help seeking. These can include cultural barriers, previous experiences of racism, as well fear of ignorance, judgement and misunderstanding (Attum, 2022).<sup>9</sup> Multiple reports

<sup>8</sup> Memon A, Taylor K, Mohebbati LM, et al (2016). Perceived barriers to accessing mental health services among black and minority ethnic (BME) communities: a qualitative study in Southeast England *BMJ Open* 2016;6:e012337. doi: 10.1136/bmjopen-2016-012337

<sup>9</sup> Attum B, Hafiz S, Malik A, et al. (2023) Cultural Competence in the Care of Muslim Patients and Their Families. [Updated 2023 Feb 8]. In: *StatPearls*. Treasure Island (FL): StatPearls Publishing; Jan. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK499933/>

have highlighted how current health and mental health provision in the UK have failed minority and racialised populations (Baker, 2021).<sup>10</sup>

## 2.2 Longer-Term Impact: Service User Issues & Case Studies

The majority of contacts to the Helpline require information and guidance towards resources. This can be dealt with during the initial call or contact, or with a follow up call or text-based response. It can be difficult to gauge the long-term impacts of the Helpline for service users. However, the Helpline have developed built-in strategies for ongoing evaluation in more complex cases. For cases that require multiple service user interactions or casework, the staff have developed a testimonial system that gathers feedback on how the service user is doing and how their issue was handled by MWN (see Appendix B). In addition, the management team hold quarterly Safeguarding Reviews with the entire staff that focus on challenges, learning and best practices. They implement the feedback gathered from these two tools to improve case work and general performance. This section examines Helpline responses and impacts on issues most reported by service users: mental health, domestic abuse, divorce and the ongoing effects of the Covid-19 pandemic. Due the lack of space, other contact issues cannot be explored in detail.

**A. Covid-19 Ongoing Impacts:** The 2020 Helpline evaluation noted in detail how the Covid 19 pandemic had a huge impact on both service users and staff. This impact continued to deepen in 2021, especially for service users. While the number of beneficiaries rose by only 0.3% in 2020 over 2019, the hours spent on service user contacts doubled. Caller's issues increased in complexity and required more staff hours. In 2021, the number of beneficiaries rose by a quarter to 1582 people. This increase is accounted for by the continuing stress imposed by the pandemic and intermittent lockdowns. For service users, testimonial data has highlights some of the impacts:

- Greater stress and anxiety
- Increased risk of domestic violence
- Coercive control (both from partners and family)
- Increased familial tension
- Concerns about financial security
- Social isolation & feeling trapped

Lockdown has been especially challenging for those who are at risk of or undergoing abuse and violence within their homes. Figures have shown increased reports of domestic violence, intimate partner violence and child abuse during this period (Refuge, 2021).<sup>11</sup> For many women contacting the Helpline, having their children at home from school, caring for extended family members and partners has taken a huge mental and physical toll. For young people, the pressures of remote learning and being away from their peer groups was incredibly difficult, with nearly two-thirds expressing concern about the impact of the pandemic on their mental health (British Science Association, 2020).<sup>12</sup> The inability to develop an independent life and express autonomy from their family has also had long lasting impacts on mental health and wellbeing. The following case studies demonstrate some of the above issues, while the subsequent sections on mental health, domestic abuse and divorce also reflect the influence of the pandemic.

### Covid-19 Case Study: Aqsa

(Female, Bangladeshi, 51-60, Muslim, British, Yorkshire and Humberside)

*"There was no need to wait for an appointment, especially when I was desperate for advice"*

**Background:** Aqsa's 23-year-old daughter suffers from obsessive compulsive disorder (OCD) and has previously had Cognitive Behavioural Therapy (CBT). The young woman has no support network other than her mother and was reliant on her for everything. Aqsa was very concerned as her condition and general mental health deteriorated during Covid-19. Aqsa needed help and advice as to how best support her daughter as the latter wanted to move away from campus accommodation.

**Support:** MWN listened to Aqsa's concerns and provided concrete ways Aqsa could support her daughter better, including time spent together, non-judgemental conversations and focusing on who her daughter actually is instead of comparing her to others.

<sup>10</sup> Baker, Carl. 2021. *Mental Health Statistics (England)*. House of Commons.

<https://researchbriefings.files.parliament.uk/documents/SNo6988/SNo6988.pdf> (April 5, 2022).

<sup>11</sup> Refuge. 2021. 'A Year of Lockdown: Refuge Releases New Figures Showing Dramatic Increase in Activity'. Presented at the London. <https://refuge.org.uk/news/a-year-of-lockdown/> (May 9, 2022).

<sup>12</sup> British Science Association (2020). *The forgotten generation: The hidden impacts of Covid-19 on young people*.

[https://www.britishtscienceassociation.org/news/the-forgotten-generation-the-impacts-of-covid-19-on-young-people?gclid=CjoKCCQIA1ZGcBhCoARIsAGQokkrvLJoZPIKqD-DQOC1uznAvmT3c8S\\_WeKCvDT4ogSLHclmoFiJQ3AaAuTGEALw\\_wcB](https://www.britishtscienceassociation.org/news/the-forgotten-generation-the-impacts-of-covid-19-on-young-people?gclid=CjoKCCQIA1ZGcBhCoARIsAGQokkrvLJoZPIKqD-DQOC1uznAvmT3c8S_WeKCvDT4ogSLHclmoFiJQ3AaAuTGEALw_wcB)

## B. Mental Health:

Out of 1582 clients:

- 1 in 2 clients called regarding mental health concerns
- 2 out of three clients felt listened to
- 87% of clients felt better informed of resources available
- 1 in 10 clients benefitted from counselling after referral to MWN Counselling Service
- Limited Counselling Service capacity a concern for staff
- Pandemic lead to limited alternative services for clients
- Helpline staff implemented best practices around mental health assessment and triage
- Religion and culture specific viewpoints on caring for mental health relayed to clients

MWN Helpline staff expressed frustration that the MWN Counselling Service did not have the capacity to deal with the number of mental health referrals received. In 2021, the waiting list reached 18 weeks and had to be closed. It was re-opened in May 2022. One of the key recommendations from both the Counselling Evaluation and Helpline Evaluation 2020 is to acquire the funding required to expand counselling capacity.

**Mental health among Muslim women in the UK:** Research among community service providers, voluntary organisations and religious leaders in the UK on the issues Muslims sought help for highlighted anxiety, depression, domestic violence, conduct disorders and sexual and identity issues (Maynard 2008). While more recent studies are needed, previous work

Pakistani and Bangladeshi women show higher levels of depression compared to other South Asian groups (Fazil and Cochrane 2003).<sup>13</sup> Previous studies have highlighted higher levels of suicidal ideation amongst Muslim women in the UK are 2.5 times higher than those from other ethnic groups, with younger women being more vulnerable (Bhugra and Desai 2002).<sup>14</sup> More recently members of the South Asian and Muslim communities, including Members of Parliament (MPs) have expressed concern regarding rising rates of suicide in their localities (BBC, 2018).<sup>15</sup> Within some Muslim communities, multigenerational family residences with in-laws and extended relatives are common, making autonomy and decision-making difficult for women. The notion of preserving izzat (family honour and prestige) pressures Muslim women into hiding their psychological distress from both family members and other social contacts (Gunasinghe, Hatch, and Lawrence 2019).<sup>16</sup> The Covid-19 pandemic has disproportionately impacted those from minority and racialised communities. It has significantly impacted the mental health of women from these backgrounds who are suffering from the increased risk of Covid, the impact of multiple bereavements and a lack of support from extended family and community members.

**Increasing mental health & wellbeing contacts from service users:** In 2021, mental health concerns were the main issues for 54%, or 1 in 2 clients contacting the Helpline. This is similar to the figures for 2020, and builds on the trend for increased contacts regarding mental health over the past seven years. In 2015, these contacts accounted for one-fifth of all cases, growing to one-third in 2018. There was also a slight rise in those who called regarding self-harm and suicidal ideation, with those issues making up 5% of contacts in 2021 as compared to 3% in 2020 and previous years. The figures for those calling regarding isolation stayed the same in 2021 as compared to the past year. Helpline staff continued to keep abreast of the unfolding mental health crisis across the UK in 2021, keenly aware that the Covid-19 pandemic exacerbated its impact. Helpline clients struggled with loss and bereavement of close relatives, increasing financial hardships and recovering from Covid infections.

**MWN Impact:** The most important service provided by the Helpline was a safe, non-judgemental and confidential listening service. In 2021, 1 in 2 service users felt listened to when they called the Helpline. Additionally, 87% felt that they were more aware of resources, information and different approaches to their problems. 1 in 10 service users

<sup>13</sup> Fazil, Qulsom, and Cochrane. 2003. 'The Prevalence of Depression in Pakistani Women Living in the West Midlands'. *Pakistani Journal of Women's Studies* 10: 21–30.

<sup>14</sup> Bhugra, Dinesh, and Manisha Desai. 2002. 'Attempted Suicide in South Asian Women'. *Advances in Psychiatric Treatment* 8(6): 418–23.

<sup>15</sup> BBC (2018). *Why UK Asians need to talk more about suicide*. Sima Kotecha. 18 June. <https://www.bbc.co.uk/news/uk-44499478>

<sup>16</sup> Gunasinghe, Cerisse, Stephani L. Hatch, and Jane Lawrence. 2019. 'Young Muslim Pakistani Women's Lived Experiences of Izzat, Mental Health, and Well-Being'. *Qualitative Health Research* 29(5): 747–57.

benefitted from receiving counselling from an MWN Counselling Service referral, and some clients were referred to other agencies. The lack of internal MWN counselling capacity was a concern for Helpline staff. As evidenced in the time use data, the staff's experiences during 2020 made them more effective and efficient in dealing with service user's mental health concerns. Further training in mental health support would benefit all frontline Helpline staff.

#### Mental Health Case Study: Sofna

(Female, British Bangladeshi, 26-30, Muslim, London)

*"The support provided to me definitely helped alleviate my low mood and stress levels, it was great."*

**Background:** Sofna, a mother of three with learning difficulties had recently left an abusive marriage and was still experiencing financial abuse and coercion. As a result, she struggled with intense anxiety and depression.

**Support:** The Helpline conducted regular welfare checks and assigned her a Counsellor who provide regular sessions. Additionally, she was also supported via the Hardship Funds.

#### Mental Health Case Study: Kaamla

(Female, British Bangladeshi, early 20s, London)

*"Staff were very supportive, very kind and very sympathetic"*

**Background:** Kaamla's mother texted the helpline needing support for depression triggered by a stalker who had followed and harassed Kaamla throughout college and university. Kaamla's condition prevented her from progressing in her university work and general life tasks. The Helpline was able to speak directly to Kaamla, who expressed that she *"a counsellor of a similar faith and background to understand my concerns"*.

**Support:** Kaamla's case was fast-tracked on the Counselling waitlist due to the impact of her depression. Four days after her mother contacted the MWN Helpline, Kaamla began her first counselling session and completed a set of sessions.

### C. Domestic Abuse:

Out of 1582 clients:

- 1 in 3 clients report experiencing domestic abuse in 2021 (total number of clients)
- 1 in 2 clients report abuse of some kind
- One-third of cases perpetrator is husband
- 1 in 5 clients report experiencing coercive control
- Rise in clients experiencing stalking and harassment from 1% to 4% between 2020 and 2021
- 5% of clients experiencing tech abuse
- Helpline providing confidential space to report
- Dedicated caseworker as long as required in IDVA/ISVA roles
- Safeguarding protocols to help prevent harm
- Clients more informed of Islamic and legal rights
- Clients more able to challenge abusive situations
- Clients trust Helpline and able to contact repeatedly
- Referring to police, agencies and refuge as required
- Clients more able to leave abusive situations
- Staff undertook training regarding new forms of abuse
- MWN launched a web page highlighting often-ignored minority ethnic victims of femicide (<https://www.mwnuk.co.uk/say-her-name>)

Charities and agencies working in the area have all reported worsening levels of abuse against women. 2021 saw a raised national awareness of femicide with at least 141 women being killed by men, an increase over the past two years



(EVAWG, 2022).<sup>17</sup> In 2021, black and minoritized female victims of both homicide and domestic abuse rose disproportionately since the start of the pandemic. For all different types of violence and abuse, prosecution rates were at some of their lowest in 2021.<sup>18</sup> Home Office figures state that half of all homicides were intimate partner deaths (49%), with the majority of victims women (85%) and the majority of perpetrators men (80%) (Home Office, 2022).<sup>19</sup> The Covid-19 pandemic had a negative impact on violence against women, with domestic abuse reported to police rising by 6%. 2021 saw sexual offences recorded by police at their highest on record, rising 12% since 2020. For the MWN Helpline, in 2021 5% of cases were related to sexual assault, reflecting the high barriers to disclosure such as the lack of support from families, feelings of shame and dishonour. Victim Support reports that over half of survey respondents had to report an instance of domestic abuse at least twice before any action was taken (2019).<sup>20</sup>

Previous research has corroborated high levels of gender-based violence, domestic abuse and relationship issues among South Asian, and especially Muslim women. For women, there is incredible pressure from both the family and wider community to adhere to traditional gender roles, especially after marriage (Thompson and Bhugra 2000).<sup>21</sup> Within some Muslim communities, multigenerational family residences with in-laws and extended relatives are common, making autonomy and decision-making difficult for women. These living arrangements and being away from families of origin who may even be in another country can become lonely and isolated.

**Domestic abuse worsening for service users:** Domestic abuse has consistently been the second most commonly reported Helpline service user issue, with 1 in 3 service users experiencing it. During the Covid-19 pandemic, domestic abuse cases rose from 32% of clients in 2019 to 37% in 2020 an increase of 15.6%. Correspondingly, the abuse charity Refuge saw a 25% rise in domestic violence cases in the same period (Refuge, 2021).<sup>22</sup> In 2021, 34% of contacts were related to domestic abuse. Nearly half (45%) of all service users experienced some kind of abuse, including sexual assault, rape, historical child sexual abuse, coercive control, honour-based violence or intimate image abuse. In 31% of cases, the perpetrator was the client's husband and in 6% of cases it was the client's parents. 2021 saw an increase in cases of coercive control, with 1 in 5 clients experiencing it. This was up 3% since 2020, and increased 18% since 2019. Abusers are increasingly using modern technology to stalk, harass and intimidate victims. Intimate image and tech abuse also increased from 1% of cases to 5% of cases in 2021. The presence of abusers, children and family in the home constantly during lockdown meant that a lot of potential service users were unable to report abuse. Helpline staff noted that late night text-based contacts were more common for those in abusive situations.

**MWN Response:** The most important response from the Helpline is to provide a confidential and non-judgemental safe space for victims to talk. Domestic violence cases are complex, often having housing, financial and safeguarding aspects. Due to MWN Helpline's robust in-house training, Helpline caseworkers can also act as independent domestic violence advisers (IDVA) and/or independent sexual violence adviser (ISVA) to assess risk and create safety and support plans. The Helpline provides the services user with a variety of options so that they are better informed. They are also able to provide referrals to social services, inform the police on behalf of the client, housing provision, local welfare services, etc. In such cases, the Helpline will assign a caseworker so that the service user has a single and consistent point of contact. An evaluation of client testimonials show that domestic abuse cases can often result in victims staying with or returning to the perpetrators. Helpline staff have to support clients in a way that builds trust and does not alienate or shame them if they decide to stay. The goal is to maintain the relationship so that the client can make contact if needed. Client feedback has shown that the longer term and one-on-one relationships built by case workers have resulted in clients feeling supported and more capable. This depth of support and continuity of care is vital in appropriately helping victims of domestic abuse.

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<sup>17</sup> End Violence Against Girls and Women (2022) *Violence Against Women and Girls: A Snapshot Report 2021-22*. <https://www.endviolenceagainstwomen.org.uk/wp-content/uploads/EVAW-snapshot-report-FINAL-020322.pdf>

<sup>18</sup> Ibid.

<sup>19</sup> UK Home Office (2022). *Violence against women and girls national statement of expectations*. July 27. <https://www.gov.uk/government/publications/violence-against-women-and-girls-national-statement-of-expectations-and-commissioning-toolkit/violence-against-women-and-girls-national-statement-of-expectations-accessible>

<sup>20</sup> Victim Support (2019). *Trapped: How barriers to escaping an abusive relationship should be addressed by policy and practice*. Dinisman, Tamar & Moroz, Ania. [https://www.victimsupport.org.uk/wp-content/uploads/2021/03/Victim-Support\\_Trapped\\_Domestic-Abuse-Report\\_Web\\_Final.pdf](https://www.victimsupport.org.uk/wp-content/uploads/2021/03/Victim-Support_Trapped_Domestic-Abuse-Report_Web_Final.pdf)

<sup>21</sup> Thompson, Neil, and Dinesh Bhugra. 2000. 'Rates of Deliberate Self-Harm in Asians: Findings and Models'. *International Review of Psychiatry* 12(1): 37-43.

<sup>22</sup> Refuge. 2021. 'A Year of Lockdown: Refuge Releases New Figures Showing Dramatic Increase in Activity'. <https://refuge.org.uk/news/a-year-of-lockdown/> (May 9, 2022).

**Domestic Violence Case Study: Laiba**  
(Female, 50s, British Pakistani, North West England)

*"I was supported by my helpline support worker who was extremely well informed. Although she wasn't a counsellor, I felt she had those skills. I valued not just the Islamic perspective but the support that came with it. Helpline supported me very well compared to mainstream services and I was happy that my helpline support worker signposted me to other organisations where required. I appreciated the fact that after you finished supporting me, you shared some Islamic prayers that really helped me. I would definitely recommend the MWN Helpline and I have already told several work colleagues about MWN. This has made a huge difference to my life and I will definitely get in touch again for counselling."*

**Background:** Laiba had endured more than 24 years of physical, psychological and sexual abuse from her husband, enduring years of marital rape. She contacted the Helpline wanting to know the Islamic stance on whether she had to endure sexual relations with him. Laiba felt caught between faith beliefs and cultural expectations at the cost of her own safety.

**Support:** Laiba felt a strong rapport with the Helpline staff member who took her call and decided to continue being supported by her even though she qualified for a Case Worker. The Helpline initiated safeguarding practices, provided ongoing information and support. She was informed of the options she had to leave, involve the police and given religious and culturally specific advice. Laiba decided to report her husband for physical and sexual assault, resulting in his arrest and eviction from the home. She changed the locks and put safeguards in place, supported by her children and the Helpline.

**Domestic Violence Case Study: Raani**  
(Female, 30s, Bangladeshi, Insecure Immigration Status, Muslim, Yorkshire and Humberside)

*"I felt so very alone and my caseworker helped with my confidence, supported me with calling professionals, explaining my needs to them as I couldn't due to language barriers. Their help showed me all the good I have in my life, what I have achieved and all that I can have again. I am still in a refuge, but I have hope."*

**Background:** MWN received a referral from a sexual violence organisation for Raani, a sufferer of domestic and psychological violence and sexual abuse. She had retracted statements made to police as her children had been threatened with harm.

**Support:** Recognising her as a high-risk service user, the Helpline provided Raani with a Bangla speaking case worker, emotional support, signposting, legal advice and appropriate advice. The case worker reported Raani's concerns re her husband harming her children to the police who arrested him. They secured her a place at a refuge and connected her to ESOL classes and employment opportunities.

#### **D. Divorce Impact:**

- In 2021, a total of 261 out of 1582 (17%) cases had divorce as an issue.
- In keeping with the proportion of cases related to divorce over the past 5 years, which varies between 17-20%.
- For those whose marital status was relevant (536 clients out of 1582), 138 (26%) only had an Islamic marriage.
- 105 (19.6%) service users had both Islamic and civil marriages.
- Majority of divorce cases had elements of physical, emotional and other types of abuse.
- Shariah Councils are discriminatory against female divorce applicants.
- Many service users require help to navigate Shariah Councils.
- Helpline advises women regarding marriage registration and UK legal requirements.

There are concerns that the marriage and divorce processes in the UK can make Muslim women particularly vulnerable. Many Muslim couples in the UK have an Islamic religious marriage ceremony (*nikkah*). However, if this is not accompanied by a civil ceremony, it is not legally recognised. If a marriage is not legally registered, women have to apply the Shariah Council to obtain a divorce and are not legally entitled to anything under UK law. In many cases, women are not aware of this and are caught when trying to get a divorce. In most cases, men find it much easier to obtain divorces under Shariah Council applications than women. Shariah councils can encourage women to remain in abusive situations and discourage divorce even in cases where it is desirable and justified (Khaleeli, 2017).<sup>23</sup>

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<sup>23</sup> Khaleeli, Homa (2017). Inside Britain's sharia councils: hardline and anti-women or a dignified way to divorce. The Guardian, 1 March. <https://www.theguardian.com/law/2017/mar/01/inside-britains-sharia-councils-hardline-and-anti-women-or-a-dignified-way-to-divorce>

**MWN Impact:** Due many women's lack of awareness about their legal rights and the status of their marriage, MWN has produced a "Muslim Marriage and Divorce" booklet.<sup>24</sup> Since its publication in 2016, it is the organisations most downloaded resource, being accessed over 44,000 times by the end of 2022. It explains rights and procedures regarding Islamic and civil marriage and divorce in an easy-to-understand manner. Sharia council processes and protocols are also detailed. The booklet is provided via text and email to many service users contacting the Helpline. The vital service that MWN performs is helping women understand their legal rights and entitlements, both from an Islamic and civil viewpoint. They keep up with developments in how Shariah Councils operate in order to best support their clients. In cases where the marriage is also legally registered, either in the UK or abroad, they can connect women seeking divorce to legal services. Most importantly, they understand the cultural complexities of marriage and divorce in the communities they serve. Feedback reports how service users were relieved that they did not have to explain the importance of marriage within their cultural and familial context and how contentious divorce could be. Helpline staff were able to support these women with sensitivity and non-judgement while helping them to leave abusive, harmful or unsatisfactory marriages.

#### **Divorce Case Study: Mrs. Khan**

(Female, 50s, British Pakistani, Yorkshire and Humberside)

*"Thank you so much for the caring and compassionate support that the Helpline support worker provided."*

**Background:** Mrs Khan contacted MWN after reading their Marriage and Divorce Booklet. After her marriage had broken down due to infidelity, her husband verbally divorced her. He also fled the country, abandoned the family and had not provided any financial support for the duration of the marriage. Mrs. Khan was struggling with her mental health and wanted to seek advice, reassurance and support that did not come from "religious men who side with my husband".

**Support:** The Helpline provided a safe, non-judgemental space and validated Mrs Khan's concerns. They re-affirmed her importance as a mother and assured her that it was not her fault her daughter was being raised in a single parent home. Mrs Khan was signposted to The Muslim Women's Advisory Council to allay her concerns regarding her rights as a single parent. She felt affirmed in her efforts for the future.

#### **Divorce & Shariah Council Case Study: Sommya**

(Female, 26-30, Indian, Muslim, Sheffield, insecure immigration status)

*"Everyone I spoke to was generous and kind, I can see they wanted to help. They gave me advice and references to contact."*

**Background:** Sommya called for advice regarding a visa application and problems with her local Shariah Council. Despite providing ample evidence of the abuse she suffered during her marriage and pregnancy, 18 months after paying the full Islamic divorce fee the Council had yet to issue her a divorce. The Council's Shaikh doubted the veracity of her claims and did not take her concerns seriously. Despite moving into a property of her own, the ongoing situation exacerbated pre-existing symptoms of anxiety and depression.

**Support:** Firstly, the Helpline provided a safe space for Sommya to talk through her problems. Secondly, it sought all of her divorce related Shariah Council documents in order to intervene and try again. The Council issued the divorce prior to MWN's intervention. Thirdly, Helpline provided references to contact specialist in visas and immigration who could help.

<sup>24</sup> Muslim Women's Network (MWNUK) (2016). *Muslim Marriage and Divorce*. [https://www.mwnuk.co.uk/go\\_files/factsheets/631720-MWNUK%20Muslim%20Marriage%20and%20Divorce%20Booklet\\_WEB.pdf](https://www.mwnuk.co.uk/go_files/factsheets/631720-MWNUK%20Muslim%20Marriage%20and%20Divorce%20Booklet_WEB.pdf)

## Section 3: Helpline Adaptations

### Bespoke Faith and Culturally Sensitive National Support & Casework Service

*"We support a client from making that difficult first call all the way to leaving the situation they are in and beyond. We work hard to understand what they need and provide that."*

*– MWN Helpline Caseworker*

Research shows that ethnic and racialised women are the underserved by the police, social services and health services. Recent studies have shown that half of ethnic minority women surveyed felt discriminated against by the police (Victim Support, 2022).<sup>25</sup> BAME women, especially Muslims, are the least likely to seek support for domestic and mental health issues (Ali, Elsayed and Awaad, 2021).<sup>26</sup> This is due to a lack of faith and culturally sensitive service provision and a lack of trust from ethnic minority communities that services will engage with them in a way that does not alienate, exclude or endanger communities. When requesting help Muslim women endure the triple burden of Islamophobia, racism and a lack of cultural competence from providers.

MWN has established and continues to maintain trust in this ignored community. Their staff is deeply embedded in the social context of the service users, and knowledgeable regarding religious and cultural precepts. Service users know and respond to this. MWN fill a gap in public services that disadvantages a large section of society. This gap has only worsened in light of the Covid-19 pandemic. MWN is an effective and efficient liaison between Muslim women who need help and public, statutory and third sector organisations. **Women who contact the Helpline feel heard, seen and empowered by the knowledge, support and advocacy they receive.**

Unlike most helplines, the MWN Helpline goes beyond sign-posting clients to information to provide a bespoke package of support than ranges from information, referrals to practical help. The Helpline identifies support needs and empowers women to decide for themselves using culturally and religiously sensitive engagement. They have developed a robust and up-to-date safeguarding process that enables them to support women, but also to make the difficult decisions regarding confidentiality and whether to contact statutory services if a client is in imminent danger. Safeguarding assessment is ongoing and effective, with strong procedures in place for when to breach confidentiality and what action to take. Their casework and recording of how a case progresses uses industry standard tools and standards, so the Helpline aids women's situations into actionable cases for services. At the same time, practical help such as such as counselling, hardship funding and following up cases with services is also provided. The Helpline will follow the case until resolution, leaving the door open for the client to make contact again.

MWN tailors this process to each individual client. No other organisation does, as it would be the work of multiple charities and service providers that MWN seamlessly combines into one service. The Helpline is the first line of defence in many complex cases

- Our USP is that we can provide faith and culturally sensitive support. We are more than a helpline; we provide short term support to those who may not have been able to seek help from another organisation.
- What makes us different is our ability to empathise with service users as well as provide support and advice which is culturally sensitive and within the framework of the law and policies in place to safeguarding vulnerable women.

The process of a case from intake to follow up and closing is explained in the tables below. **Figure 8** highlights the overall process of how a case proceeds at MWN, while **Figure 9** details the components of each type of client support. **Figure 10** reports on the percentage of client cases in which each type of support is required.

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<sup>25</sup> <sup>25</sup> Victim Support (2019). *Trapped: How barriers to escaping an abusive relationship should be addressed by policy and practice*. Dinisman, Tamar & Moroz, Ania. [https://www.victimsupport.org.uk/wp-content/uploads/2021/03/Victim-Support\\_Trapped\\_Domestic-Abuse-Report\\_Web\\_Final.pdf](https://www.victimsupport.org.uk/wp-content/uploads/2021/03/Victim-Support_Trapped_Domestic-Abuse-Report_Web_Final.pdf)

<sup>26</sup> Ali S, Elsayed D, Elahi S, Zia B, Awaad R. (2022) Predicting rejection attitudes toward utilizing formal mental health services in Muslim women in the US: Results from the Muslims' perceptions and attitudes to mental health study. *International Journal of Social Psychiatry*. 2022;68(3):662-669. doi:[10.1177/00207640211001084](https://doi.org/10.1177/00207640211001084)

**Figure 8: Case Support Procedure**

**Intake**

- |                              |   |
|------------------------------|---|
| Initial service user contact | <ul style="list-style-type: none"><li>• Call/text/webchat/WhatsApp received</li><li>• Details of taken in internal records system</li><li>• Decision that 'case' requires further support</li></ul> |
|------------------------------|---|

- |                |   |
|----------------|---|
| Staff assigned | <ul style="list-style-type: none"><li>• Caseworker assigned</li><li>• Management made aware of case</li></ul> |
|----------------|---|

- |              |  |
|--------------|--|
| Safeguarding | <ul style="list-style-type: none"><li>• Helpline Manager keeps Operations Manager Updated</li><li>• Safeguarding Lead consulted regarding action points</li><li>• Decisions on breach of confidentiality consulted</li></ul> |
|--------------|--|

**Case Management & Referral System**

- |               |  |
|---------------|--|
| 1. Assessment | <ul style="list-style-type: none"><li>• Faith and culturally sensitive support</li><li>• Trauma informed assessment</li></ul>  |
| 2. Support    | <ul style="list-style-type: none"><li>• "Heart": Empowerment via information, validation &amp; reframing</li><li>• "Lungs": Referrals &amp; active engagement to ensure clients supported</li><li>• "Limbs": Immediate practical support if required</li></ul> |
| 3. Follow up  | <ul style="list-style-type: none"><li>• No case is closed unless resolved</li><li>• Cases can close due to client disengagement</li><li>• Many attempts to contact clients before closure</li><li>• Clients always welcome to call back.</li></ul>             |

MWN aims to take the service user from the initial contact to a place where they feel confident enough to cope with their situation, make changes or leave the situation entirely. The first goal is to sensitively engage with the client to obtain the most vital information regarding safeguarding concerns and immediate needs. From there, the caseworker in tandem with other staff and management work together to provide the disparate types of help the service user needs. These are detailed in the sections below.

**3.1 Assessment & On-going Casework:**

- When a case comes in, Helpline support staff respond in a trauma-based way.
- A caseworker will handle a case from start to finish, so the client has one point of contact, can build trust and does not have explain their context over and over.
- The support will be provided in their native language if needed, e.g. Punjabi, Urdu, Mirpuri, Bengali, etc.
- Use industry standard assessment tools to evaluate level of safeguarding need, e.g. MARAC checklist.
- Identify both emotional
- Offering emotional support and empowerment to women by informing them of the range of choices they have in their current situation.
- Caseworker carries the case emotionally as well as practically.

**Safeguarding:** Safeguarding is a vital part of the service when contacts are made regarding harm or abuse to clients. 2017 and 2018 had nearly 15% of cases with a safeguarding element, but this figure has dropped. In 2021, there was a total of 59 (4%) safeguarding cases out of 1582. This was slightly less in overall percentage since 2020, when there were 67 (5%) cases out of 1261 total cases. Please see Appendix C for details of the safeguarding procedure.

The following steps ensure that the Helpline is effective in handing safeguarding cases.

**Figure 9: Top 5 Safeguarding issues**

Domestic violence  
Mental health issues  
Suicide/self-harm  
Honour based violence  
Child Abuse

- Knowing the right approach and questions for service user
- All current safeguarding cases are known to all staff
- Cohesive approach from entire team
- Write accurate, consistent notes in keeping with standards across industry
- Is an on-going process, staff updated at check-ins both at the start and end of shift
- External Safeguarding Lead (SGL) automatically alerted via email/call/text if case is escalated.
- Provide robust safeguarding rationale for breaching confidentiality, in consultation with SGL
- If imminent threat/time-sensitive report to police or social service.
- Steps and action points signed off by SGL.
- Provide client with referral to a place in a refuge or safe house.
- Check-in regularly with the staff to support them and prioritise their wellbeing.
- Quarterly Safeguarding Review to learn from best practices and understand what to do differently (see Section 4.2).

**3.2 Referrals and Advocacy:** MWN Helpline caseworkers are committed to connecting service users to the help they need. They make and liaise on statutory referrals, as well as advocate on the client's behalf to make sure their needs are heard. Over half of the referrals are regarding abuse in some form and to social services, but MWN also connects client to benefits provision, places in refuge and social housing, various charities, etc. Due to MWN's insistence on a detailed and systematic logging and note-taking, they are able to "speak the language of" statutory services, making them effective advocates for their clients. A summary of recent referrals:

**Figure 10: Referral Summary**

Category	How Many	%
DV charity / refuge / modern day slavery / victim support / sexual violence/ ISVA / IDVA	86	32.33%
Housing (council, social housing, benefits related to housing, council tax, job centre)	14	5.26%
Education / Employment (schools, college, university, work coach, progress, advisors)	28	10.53%
Social Services (Birmingham Children's trust, social services, safeguarding team, etc)	48	18.05%
Health & Wellbeing (mental health / physical health/ NHS / therapist)	72	27.07%
Criminal Justice System (solicitors/legal aid/NCDV/police/prison)	14	5.26%
BSL interpreter	1	0.38%
Other / not specified	3	1.13%
TOTAL	266	100

**1. Referrals to Police:** One of the vital ways that the Helpline empowers women is by contacting statutory services like the police in cases of abuse, harassment, assault, etc. Many clients who contact the Helpline are reluctant to call the police for complex reasons. They are often in situations where they live with their perpetrators, are afraid of personal, familial and community repercussions of contacting the police. Reports of endemic racism, misogyny and lack of efficacy regarding abuse cases do little to engender trust between the police and minority and racialised women. In this context, the Helpline can inform clients when it's important to contact the police, and be an intermediary if the service user is unable to do it themselves.

- In 2021, 353 out of 1582 cases (22%) had police involvement.
- In 19 (5%) cases the Helpline called the police on the client's behalf.
- Comparatively, in 2020 26% of cases had police involvement and in 14% of those MWN called the police on the client's behalf.
- The rise in police involvement and MWN contact with police in 2020 can directly be linked to the rise in domestic violence during the first national Covid19 lockdown.
- Request police and/or client for Crime Reference number and Collar number of the officer

- MWN follows up 1-2 after making referral to check how the service user is.

In all safeguarding cases, the Helpline ensures that it is not just referring on. For example, if the police inform the Helpline that the client is not in their locality, MWN ensures the referral is sent the correct local force.

**2. Referrals to Social Services:** The Helpline connects clients with the services they are entitled to but are often unaware of or unable to access. In cases where there is a language barrier, caseworkers communicate client requirements. Many service users are unaware of entitlements such as benefits, financial support, etc.

- In 2021, 206 out of 1582 cases (13%) had social services involvement.
- Of these, in 17 (8%) of these MWN made a direct referral.
- In 2020, MWN made a direct referral in nearly one-third of cases (30%).
- The financial hardship, familial issues and rise in domestic abuse faced by clients due to Covid were responsible for this higher percentage.
- When social services are contacted, MWN asks for a contact person so they can follow up.
- Follow up 7 days post-referral whether the case has been escalated, referred on, actioned, etc.
- Helpline continues to support client interactions with social services to provide context and advocacy.

**3. Practical help and referrals to/from other agencies and organisations:** Some service users need a full package of support encompassing access to multiple types of resources and working across agencies. The requirements can often range from providing basic information to active engagement alongside the client with government agencies, service providers and charities. In some cases, the help required can be a place to stay if the client is in imminent danger or emergency financial help. If the client has to move localities due to abuse or other circumstances, MWN is often the only consistent service they have contact with.

In a recent case a service user and her child were relocating 3 times in 5 months due to ex-partner locating her. She moved across 3 different localities/cities on an emergency basis which meant MWN Helpline was the only consistent service across the three moves. They made sure to coordinate across the different locality councils and sectoral organisations to ensure she received the services and help.

MWN is also called on to work in tandem with agencies and third sector organisations when client's practical, cultural or faith needs are not met. This can take the form of sharing expertise in a consulting capacity, advocating on the client's behalf and/or providing ongoing support.

- In the last 18 months, referrals from professional agencies or third sector organisations made up 12% of all cases.
- Provide all aspects of support required: Referrals made to GPs, apply for benefits and disability assistance, liaise with local schools for children, complete bids for council housing, help for children via the council or children's services, etc.
- Work across localities and boroughs to make sure client does not fall between services as most are locality-based.
- Signpost and connect to legal aid and local solicitors to advise client on immigration, legal aid, family law, etc.
- Provide support letters for agencies and legal matters.
- Provide referrals to refuge placements.
- Provide access to hardship funding.

**3.3 Service User Capacity Building:** One of the most impactful things MWN does is use a cultural and faith sensitive approach to build up service users' capacity. They provide a framework to understand problems that speaks to service users' own context and beliefs. Service users are empowered to challenge difficult situations and take action regarding their problems. The Helpline arms them with vital knowledge regarding services and entitlements and how to interact with and advocate within these organisations providing these. Clients who qualify are referred to MWN's free Counselling Service for emotional support and mental health guidance.

- Helpline support and caseworkers provide emotional support in a framework that clients understand.
- They help change the discourse around client's situation, e.g. "*sabr* (perseverance/endurance) is for when you leave, not for staying in a situation that harms you".
- Provide the emotional and practical support clients need to contact police or social services to report abuse, neglect or violence.

- Educate women regarding their civil and Islamic rights, e.g. around marriage, divorce, inheritance, etc.
- Provide clients with knowledge regarding how service provision, policing, benefits, health services, charity provision, legal procedures and justice system work.
- Empower women to ask for the right help at the right time, e.g. teaching clients easy to use phrases for interacting with services and agencies, listing key information clients need to ask about,
- In 2021, MWN referred 120 out of 1582 (8%) clients to its Counselling Service.
- If the case is urgent, clients are fast-tracked and assigned a counsellor as soon as possible.
- Teach money management skills and provide access to educational courses.
- Transcribing notes in their native language so clients can summarise their case to statutory agencies.

### 3.4 Follow Up:

*"We always leave the door open for our service users and many of them call back. Some to tell us how they are, some because they need us again." – MWN Helpline Support Worker*

The Helpline closes cases when the service user has received the information and/or support that they require. This ranges from the service user being provided with access to resources all the way to being supported with practical help. The Helpline follows up cases where case workers have been assigned to provide the client with one-on-one support.

- Helpline support team or caseworker performs welfare checks via phone calls or text-based methods. If required, in person check-ins can be carried out.
- Staff connect client to faith and culturally sensitive local services where possible so they can continue to be supported.
- Ensure as smooth a transition as possible as they close the case.
- Assure client that they can always contact the Helpline again if required.

### 3.5 Case Studies:

#### Safeguarding Case Study: Unwanted Pregnancy

##### MWN Response:

- Provided on-going emotional support & safe space for client to talk through options.
- Provided faith-based advice and Islamic perspective on abortion & information about medical procedures.
- Fast tracked access to counselling.

##### Referring Agencies Response:

- Connected to midwife to discuss concerns.
- MWN Counselling Service took her on as client wanted faith and culturally sensitive approach.

##### Outcomes:

- Provision of safe and non-judgemental space allowed her to identify feelings and suicidal ideation.
- Due to counselling was talk through above feelings, and decide in a timely manner whether to terminate pregnancy or carry to full-term.

##### Positive Actions from Helpline:

- Allowing her to build rapport with specific Helpline worker so she felt safe providing information for referral and counselling.

#### Financial Hardship Case Study: Imaan (Female, British Arab, Muslim, 51-60, West Midlands)

*"Your support came at the right time ..."*

**Background:** Imaan was living in a refuge on fleeing domestic violence and had run out of money. Despite receiving Universal Credit and going to a Food Bank, Imaan was unable to adequately meet her food needs.

**Support:** MWN initially shared details of third-party organisations who offer financial aid and/or food packages. They also completed a Hardship Request, after which she was granted a £150 payment to help her current situation. A subsequent welfare check revealed that she was very appreciative of the grant as it had helped her greatly.



**LGBTQ+ Case Study: Uzma**  
(Female, British Pakistani, Muslim)

**MWN Team feedback:** *"Because of the effective team work (that you were able to facilitate) we were able to support SU and potentially saved her life."*

**Background:** Uzma called the Helpline reporting current and intentional suicidal ideation. She had had a sexual relationship with a woman and upon watching religious content online felt that this meant she would not be able to enter heaven or be forgiven by Allah. She reported complex mental health needs and active planning for suicide. She also did not have any family or friends who were able to help her.

**Support:** The Helpline provided a safe space for Uzma to talk and de-escalated her plans to die by suicide. They reassured her that her previous acts were not unforgivable and that help was at hand. She was advised to contact her community mental health team and psychiatrist. At the end of the call, Uzma wanted to reconnect with her own mental health team. MWN followed up with the team regarding updates on Uzma as she had disengaged from MWN. They confirmed that a care-coordinator was with Uzma at her home providing support.

**Technological Abuse, Domestic Violence and Sexual Exploitation Case Study: Sabaah**  
(Female, 30s, Pakistani, South East England, Insecure Immigration Status)

**Background:** MWN was contacted by Sabaah's sister as Sabaah was being physically and sexually abused by her husband. She was subject to coercive control (monitoring phone use and medication), psychological and financial abuse. She was forced to perform sex acts that were filmed for potential revenge porn. She was physically assaulted by being tied to radiators. Her husband threatened her with divorce, dishonour, repatriation to Pakistan or being put in a psychiatric institution. Sabaah suffered from extreme mental health issues, schizophrenia and bipolar disorder.

**Support:** MWN's safeguarding procedures placed Sabaah at high risk of harm. MWN contacted the police, explaining the risk of HBV, Sabaah's vulnerability and the likelihood that she might deny disclosures. The police conducted a welfare check, eventually arresting Sabaah's husband. Despite retracting disclosures, Sabaah was able to travel to Pakistan later and be supported by a psychiatrist. MWN continued to monitor the situation via welfare checks with Sabaah, her sister and the via police updates.

## Section 4: Digital Advancement, Organisational Strength & Development:

MWN has long been defined by its ability to scale according to demand and nimbly adapt to the needs of its service users. As an organisation, they are adept at learning and adapting to contextual requirements, continuing to operate and deliver their services efficiently and effectively. They have long used their effective data gathering methods to better serve their clients. In 2021, it continued the challenging work of responding to clients who were profoundly impacted by the effects of the Covid-19 crisis that started the previous year. Their ability to do so has been powered by committed staff and management. Those working centre the needs of the service users, are keen to grow in their roles and respect their fellow staff. They are led by management dedicated to learning and improving – both staff and client experience and capacity. However, given the growing demand, such effective delivery could be endangered without sustained long-term financial support that allows MWN to plan strategically, maintain performance and grow sustainably.

**4.1 Digital Advancement:** Over its past seven years of operation, subsequent evaluations have highlighted how the leadership and staff are able to recognise what service users need and respond programmatically. In 2021, during the on-going upheaval of the Covid-19 pandemic, MWB Helpline focused on using technology to vastly improve their services. This improved both the quality of service provided to clients as well as Helpline staff's ability to respond effectively to them. The following are key advancements:

- Extensively upgraded Helpline data bases
- Added analytical tools enabling real time analysis
- Improved online procedures to they are easy to navigate
- Internal staff messaging system on the database so staff can easily communicate regarding cases
- Completely paperless case system to minimise environmental impact and increase efficiency
- Integrated web chat facility to provide additional means of service user contact
- Developed domestic abuse application called Amal (Will go live in 2023)

**4.2 Learning and Adaptation:** Organisations thrive or fail on their ability to harness learning and grow from challenges. The way they respond to the needs of their beneficiaries and operational staff determines whether they are able to evolve or not. In 2021, the Helpline dealt more efficiently to an increase in demand than any previous year. The key organisational adaptations are outlined below:

- **Effective Remote Working:** For Helpline staff, 2021 saw the shift to remote working continue efficiently, as they built on protocols and experiences from 2020. The following improvements were implemented (**Figure 11**).

**Figure 11: Remote Working Improvement**

Investment in remote working	<ul style="list-style-type: none"><li>• Purchase of hardware for staff, e.g. mobiles, etc</li><li>• Improvements to internal logging and record keeping via dashboard.</li><li>• Additional security to safeguard data when working remotely</li><li>• Additional support workers for text-based contacts able to work at home</li></ul>
Refined client response process	<ul style="list-style-type: none"><li>• Staff more acquainted with Covid-19 related client issues</li><li>• More confident in response actions and smooth handling</li></ul>
Increased efficiency	<ul style="list-style-type: none"><li>• Clients needed more time to offload before getting to the reason for contact</li><li>• Number of cases increased by 25%, but number of hours spent on cases only increased by 113%</li><li>• Staff did more in less time with the same or greater case complexity</li><li>• Built on knowledge gained in 2020</li></ul>

- **Filling gaps in social service:** In 2021, social and public services that the Helpline refers clients to still had limited provision or closures (Care Quality Commission, 2021).<sup>27</sup> This meant it took longer to sign post service users and support them in using alternative options. Like many other charities, MWN's caseworkers filled in the cracks, often operating as social workers. They had to engage with clients who

<sup>27</sup> Care Quality Commission (CQC) (2021). *State of Care: Impact of the pandemic*. <https://www.cqc.org.uk/publication/state-care-202021>

were being let down by statutory services, social care, their councils and financial support providers. NHS mental health services were under incredible pressure, and this was also reflected in the increased referrals to the MWN Counselling Helpline. In 2021, the waiting list hit 18 weeks and had to be closed. Staff responded to the best of their abilities, doing above and beyond their remit in making sure service users were provided information, resources and advocacy. In many instances, staff would intercede on the client's behalf to ensure they did not fall through the cracks and/or connect them to charity organisations that could help them.

- **Improved Safeguarding Systems:** "*Safeguarding is everyone's business*" – MWN Management Staff. MWN views safeguarding as a vital part of its remit and have built-in mechanisms to record, action and support vulnerable clients. While safeguarding processes have been described in detail in previous sections (see pgs. 23-24), it bears repeating that Helpline has devoted ever greater resources to ensuring robust systems are in place. This investment continued in 2021. The Safeguarding Review implemented in 2021 was the key ingredient in enhancing the Helpline's response to clients' safeguarding needs.

The staff are encouraged to take detailed and thorough notes and share emergent safeguarding information amongst all staff. MWN has improved and streamlined the internal dashboard system of logging information, taking notes and raising actions. One of these improvements involved sending automated alerts to the Safeguarding Lead if concern threshold crossed. The Safeguarding Lead provides feedback and signs off on follow-up actions. The staff are encouraged to share any cases that might have safe guarding concerns for review.

The quarterly Safeguarding Review is an excellent way to review practice, identify best practices and improve responses for future cases. There is a thorough and serious risk assessment, consideration of agency involvement & confidentiality breach. Being able to appropriately address risk is essential in safe guarding cases and the service continues to learn how to do this better. Staff acknowledge how the reviews help them better understand the complexity of these cases and equip them for future cases. These reviews help the service assess organisational needs regarding personnel, knowledge, training, hardware (e.g., case workers having a work mobile). They are then able to plan and allocate resources accordingly.

**4.3 Organisational Capacity Building:** When interviewing MWN Helpline staff, every member noted Management's dedication to staff development and well-being. They felt that their employer was committed to creating an organisational culture defined by listening, learning and growing. This dedication to organisation capacity building can be summarised in two main categories:

- A. Staff Development and Professionalisation:** The Helpline is defined by its staff's skill, dedication and willingness to learn. For many of them, the work they do with MWN is a calling and vocation, not just a job. They see their work as vital and their efforts as having a profound impact on those they serve. The following successful adaptations have been key to organisational performance (Figure 12)

**Figure 12:  
Staff Development**

Volunteer to Paid Staff Progression Route	✓	<ul style="list-style-type: none"> <li>• Almost all staff started as volunteers and have moved into paid roles</li> <li>• Provides opportunity to gain meaningful service user experience at an early stage</li> </ul>
Industry-leading Training Programme	✓	<ul style="list-style-type: none"> <li>• Training is well-designed, comprehensive and engaging</li> <li>• All staff members surveyed were happy with the level and quality of training</li> <li>• Feminist Islamic lens, informing on laws of the UK</li> <li>• Informative of both religious and cultural context of service users</li> <li>• Staff are taken through a range of issues service users present with</li> <li>• Staff appreciate the day-to-day, and on the job training they continue to receive</li> </ul>
Prioritise Skill Expansion and Capacity Building	✓	<ul style="list-style-type: none"> <li>• Staff encouraged to apply for senior roles within organisation</li> <li>• MWN provides training, support and feedback, easing staff in as they "learn the ropes" of new role</li> <li>• Staff feel they can ask for capacity building and training</li> </ul>

		<ul style="list-style-type: none"> <li>• “They believed that I could do it, supported me while I learnt how and now here I am. I can’t believe it.” – MWN Staff</li> </ul>
Quarterly Safeguarding Reviews	✓	<ul style="list-style-type: none"> <li>• Builds staff capacity to engage with Safeguarding Cases</li> <li>• Ensures lessons are disseminated and learnt.</li> </ul>
Resource Planning for Staff Capacity Improvement	✓	<ul style="list-style-type: none"> <li>• Executive Director and Helpline Manager review data and research to identify trends in demand</li> <li>• Enables resource planning.</li> <li>• Staff kept abreast of new issue types service users are presenting</li> <li>• Training provided and new procedures put in place</li> <li>• Examples are coercive control and technological abuse</li> </ul>
Return to Work Scheme	✓	<ul style="list-style-type: none"> <li>• Recognised gap where women who left workforce due to caring responsibilities</li> <li>• Many rejected due to lack of experience by other organisations</li> <li>• MWN recruits and trains for a range of roles</li> <li>• Organisation benefits from their wealth of knowledge and life skills, key for advice and support role at Helpline</li> <li>• Builds confidence in staff and serves ignored section of potential employees</li> </ul>
Operational Systems and Case Management	✓	<ul style="list-style-type: none"> <li>• Staff happy with high level of systems improvement to suit both service users and themselves.</li> <li>• Unanimous praise for internal software, Dashboard.</li> <li>• Easy to use, efficient and “has everything we need in one place”.</li> <li>• Management incredibly responsive, updating regularly and as needed.</li> </ul>
Embedding Evaluation as Day-to-Day Practice	✓	<ul style="list-style-type: none"> <li>• Embedding evaluation into the working processes of the Helpline</li> <li>• Examples are daily/weekly check-ins, one-on-one staff reviews, monthly case study review via testimonials, etc.</li> </ul>

**B. Supportive, Faith and Culturally Sensitive Organisational Culture:** One of MWN’s core values is that it’s own organisation should embody the values that they espouse to their service users. The Helpline has an actively engaged and responsive management committed to staff wellbeing, reflective practise and responsive leadership. They have created a faith and culturally sensitive workplace and culture that provides employment for many who are left out of mainstream job market. The rights-based approach of the Helpline trains its staff to extend respect and non-judgement to all colleagues and service users, whatever their beliefs and contexts. The following figure encapsulates their approach and provides examples of implementations.

**Figure 13:**  
**Supportive Organisational Culture**

Listen & Respond to Staff Needs	✓	<ul style="list-style-type: none"> <li>• Management goes above and beyond to help the staff, both in a professional and personal capacity.</li> <li>• Staff felt supported in case work and can approach leaders for help.</li> <li>• Management have created a workplace catering to women not accommodated in mainstream work contexts</li> <li>• E.g., staff wanted a place for <i>wuzu</i> (ablutions) prior to prayers and this was actioned immediately; more mobile handsets acquired as needed.</li> </ul>
Reflective Practise	✓	<ul style="list-style-type: none"> <li>• Management decisions based on case studies and extensive data gathering/analysis.</li> <li>• Resources devoted to researching and implementing evidence backed change.</li> </ul>
Effective Team Communication	✓	<ul style="list-style-type: none"> <li>• There is excellent communication up and down the chain.</li> <li>• Productive meeting style: both for regularly scheduled and ad hoc.</li> <li>• The different parts of the Helpline talk to each other effectively.</li> <li>• The tightness &amp; size of the team ensures quick case response, e.g. safe guarding issues.</li> </ul>
Prioritise Staff Wellbeing & Mental Health	✓	<ul style="list-style-type: none"> <li>• MWN not only “talks the talk” but does the work regarding employee wellbeing.</li> <li>• A culture of overwork discouraged.</li> </ul>

		<ul style="list-style-type: none"> <li>• Staff do not work more than 2-3 days a week.</li> <li>• Management consistently implements breaks, check-ins, walks, etc to break up the work day.</li> <li>• Helpline work is emotionally difficult, but employees urged to "leave the work at work".</li> <li>• Staff provided access to training, e.g., "Close the Door" and counselling for related to working on sensitive issues.</li> <li>• Wellbeing days for staff to process and unwind.</li> </ul>
Staff-Friendly Policies	✓	<ul style="list-style-type: none"> <li>• Part-time nature of roles allows majority of staff to be able to work alongside caring/family commitments</li> <li>• Tapping into an ignored workforce</li> <li>• Management supportive when staff members suffer bereavement or personal issues</li> <li>• Allow and encourage time off for personal or health reasons.</li> <li>• Offer counselling and emotional support for staff undergoing issues themselves.</li> </ul>
High Staff Satisfaction	✓	<ul style="list-style-type: none"> <li>• Staff interviewed were satisfied with and praised with the organisational environment.</li> <li>• Many feel their work is vocational and that they are called to it.</li> <li>• The positive and supportive environment was the main reason that many staff members remained at MWN.</li> <li>• Staff felt their work had incredible impact and are very motivated.</li> </ul>
High Regard for Management	✓	<ul style="list-style-type: none"> <li>• Praise for Executive Director and Operations Manager from all Helpline Staff.</li> <li>• Seen as dedicated, inspirational and supportive to staff.</li> <li>• Leading in an effective way</li> </ul>

## Section 5: Organisational Challenges and Limitations

This evaluation has highlighted the myriad ways in which the MWN Helpline has successfully met the needs of its service users and created an organisation loved by its staff. However, no organisation is without its trials and limits. This section will outline how the Helpline is caught between the need to scale up and diversify and the ability to fund and sustain this growth. The demand for service users is rising both in number and complexity, while the operational burden of seeking, securing and operating funding increases. Their major limitation is the inability to meet the full level of client demand due to limited staff and resource capacity. The most important challenge the Helpline faces is sustaining funding in a way that is regular and does not place an increased operational burden on the organisation. However, given the growing demand, such effective delivery could be endangered without sustained long-term financial support that allows MWN to plan strategically, maintain performance and grow sustainably.

**5.1 Limited Capacity to Respond to Demand:** The number of service users has grown nearly fivefold from 335 in 2015 to 1582 in 2021. In 2021, the Helpline continued to experience high contact volumes while both staff and service users were still in the midst of the Covid-19 lockdown. This trend looks set to continue. The cost-of-living crisis added to the lingering effects of the global pandemic will no doubt continue to impact the mental health and lives of women who will not feel comfortable seeking help from mainstream institutions. The MWN Helpline will be one of the only organisations they can turn to. While the Helpline would like to provide timely and appropriate responses to all of those who contact the Helpline, they are limited in the following ways:

**Figure 14: Organisational Limitations**

Service User Demand & Workload	<ul style="list-style-type: none"> <li>• Demand for Helpline services set to increase as previous years</li> <li>• Unable to meet current demand</li> <li>• Clients need more time to “offload” and cases need more time</li> <li>• Complexity of cases is greater and takes more out of staff</li> <li>• New types of service user issues require more time</li> <li>• Arabic speaking staff member required</li> </ul>
Staff Shortages	<ul style="list-style-type: none"> <li>• Staff report frequently being short on people &amp; covering for others</li> <li>• Due to staff not working more than 2-3 days a week, there is a shortfall</li> <li>• MWN’s supportive leave policy means staff more absent than at other organisations due to personal needs</li> <li>• Puts pressure on fellow staff members</li> <li>• Not enough staff to cope with the rise in text-based contacts</li> </ul>
Remote Working	<ul style="list-style-type: none"> <li>• The staff continued to work remotely in 2021.</li> <li>• Some staff missed the camaraderie and support of working in person.</li> <li>• Now that Helpline support staff are back in person, all staff requested the ability to work remotely when needed. This option is offered to Caseworkers and other staff, some felt it was discriminatory.</li> </ul>
Staff Recruitment	<ul style="list-style-type: none"> <li>• Recruitment and training process is too resource intensive if not with a large cohort who go on to stay at MWN.</li> <li>• Does not happen at regular intervals</li> <li>• Recruitment numbers not always adequate</li> </ul>
Staff Retention	<ul style="list-style-type: none"> <li>• Some staff members need more full-time work to stay on permanently.</li> <li>• The size of the organisation limits career progression beyond Caseworker for the majority of staff. This is an issue for some.</li> <li>• Lack of remote working option for Helpline Support staff compared to other roles cited by some as unfair.</li> <li>• Some staff members requested a higher rate of remuneration given the intense nature of the work.</li> </ul>
Further Training	<ul style="list-style-type: none"> <li>• Staff request further training in issues coming up more frequently: tech abuse, coercive control, child abuse and neglect.</li> <li>• Staff requested a summary of training accessible and updated so they can refresh their learning when needed, e.g., Training Handbook.</li> </ul>
Further Use of Data	<ul style="list-style-type: none"> <li>• Key mission of MWN is to use data for advocacy</li> <li>• Limited staff mean data use for research and advocacy is not maximised</li> </ul>

- 
- Data could be disseminated in way that supports wider goals
- 

**5.2 Lack of Sustained Funding:** Even though the demand for the Helpline is increasing, it cannot continue to scale up in the current financial context. There is a tension between wanting to create capacity but also being able to manage the funding flow to sustain expanded operations and service provisions. Since its inception the MWN Helpline has been funded by donors who believe in its mission and ability to do good. Over the years, the staff have applied for and received grants from a range of donors ranging from small organisations focused on particular areas of grant making to national grant bodies disbursing millions of pounds a year. Feedback from the Executive Director and Operations Lead have highlighted how much operational time and resources it takes to find potential funders, make applications and fulfil grant-receiving criteria. The current grants and funding landscape has criteria that rules out small and BAME targeted organisations.

In an organisation of MWN's size, these are resources that could be better directed elsewhere. Considered resource allocation and long-term strategic planning are essential in organisations being able to continue scaling up, performing efficiently and increasing impact. For the past seven years, MWN has done an incredible amount with a comparatively small budget, but this is under increasing pressure.

**Figure 15: Funding Challenges**

Funding Limited & Time Bound	<ul style="list-style-type: none"> <li>• Funding cycles limit resource allocation and strategic planning.</li> <li>• Constant concern about source and amount of next funding period</li> <li>• Re-applying every few years is resource-intensive for MWN</li> <li>• No fundraising officer at the organisation.</li> </ul>
Limits to Scaling Up	<ul style="list-style-type: none"> <li>• Existing level of funding and number of funders manageable.</li> <li>• Management maintaining current grant oversight and reporting duties.</li> <li>• Once operations scale up, new size and turnover need to be maintained.</li> </ul>
Funding Landscape Limited	<ul style="list-style-type: none"> <li>• Currently available grants rule out small, minority targeted organisations with limited internal capacity and budgets.</li> <li>• Size, tender and turnover requirements rule out MWN.</li> <li>• Funders don't want to repeat fund the same organisations.</li> <li>• Creating funding coalition too difficult and resource intensive.</li> </ul>

## **Section 6: Recommendations:**

This evaluation has discussed the MWN Helpline from a service provision, impact, client and programme-focused lens. This section summarises key recommendations across key areas such as improving impact, increasing capacity to address client issues, widening the range of support for clients including referral and follow-up, as well as improving staff experience. It also addresses organisational limitations. The key to all of these improvements is to secure additional funding that is stable and renewable over the new few years. What the Helpline has and continues to achieve is remarkable, but making the service better will require being able to sustain a reliable and consistent level of funding.

### **6.1 Improving service provision (Sections 2 & 3):**

- Increase connectivity with local agencies and support organisations to improve client response also to be able to signpost clients for continued support.
- Add Additional Support Staff to 5 days a week due to increasing web and text-based contacts.
- Send staff on formal IDVA and ISVA training for accreditation so they can formally provide a faith and culturally sensitive DV advice service to clients.
- Review Feedback and Testimonial structure to better capture client feedback in a sensitive and efficient way.

### **6.2 Increasing organisational impact (Section 3, 4 & 5):**

- Employ Data & Research Officer to better use data for advocacy and policy change.

One of MWN's key goals is to advocate on behalf of Muslim women and girls in a way that impacts policy change. MWN has a wealth of data gathered from its programmes that there is no time or capacity to meaningfully analyse and feed back to politicians, civil servants, activists and fellow charities/advocacy organisations. This new role would involve researching trends in service user issues that the service users, updating resources and creating digital friendly content from impact and research.

### **6.3 Strengthening organisational capacity and staff development (Section 4 & 5):**

- Increase number of staff to facilitate cover when short-staffed.
- Add Arabic speaking staff member to widen language provision.
- Recruit regularly twice a year to maximise resource allocation for training and on-the-job training.
- Formalise training Volunteers as Additional Support from early stages to increase engagement and increase responsive capacity.
- Allow hybrid working for Helpline support staff. Staff mentioned since they have demonstrated efficiency in doing this, it should be regular practice.
- Continue prioritising staff mental health, including regularising Close the Door trainings and Away Days.

### **6.4 Prioritise strategic planning and scaling up funding (Section 5):**

- Develop a funding plan that identifies key areas of a) maintaining performance (hiring staff to meet demand) and b) focused expansion e.g. text-based support and new forms of issues with rising number of contacts.
- Apply for more funding that is casework specific to be able to support more and varied cases.
- Increase outreach, but only if there is the capacity to respond to the following increase in demand.

### **6.5 Advocate for targeted government support (Section 5):**

- Recommend and lobby for the creation of a government fund for organisations like MWN which address specific problems and/or hard to reach populations effectively. There should be a qualifying bar that requires a robust programme performance, but also a simplified application process and reporting/maintenance requirements. For example, a matching fund if the organisation can show a 50% of operating funds raised.



What Difference did we make to beneficiaries?	What does this mean practically?	Impact 1	Impact 2	Impact 3	TOTAL CLIENTS WITH THIS IMPACT	% OF CLIENTS TO WHOM WE MADE A DIFFERENCE FOR THIS INDICATOR
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	534	119	100	753	60%
Client Better informed of their legal rights	Made aware of: <ul style="list-style-type: none"> <li>• Legal protection through injunctions</li> <li>• Legislation such as coercive control, revenge porn, harassment / stalking, discrimination, civil divorce law etc.</li> <li>• Free legal advice or access to legal aid</li> <li>• Lawyers in their area</li> </ul>	44	55	21	120	10%
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.	84	121	33	238	19%
Client Better informed of support available	Made aware of: <ul style="list-style-type: none"> <li>• Another helpline / advice service</li> <li>• Public service that can help them</li> <li>• Counselling services</li> <li>• Third sector services</li> <li>• Specialist services such as faith based / culturally sensitive services.</li> <li>• Financial support that can be accessed</li> </ul>	615	404	80	1099	87%
Client given help by other support service due to our referral	Where we make a direct referral and client is supported by: <ul style="list-style-type: none"> <li>• social services</li> <li>• police</li> <li>• community / women's group</li> <li>• Another third sector group</li> <li>• refuge</li> <li>• counselling service</li> <li>• another helpline</li> <li>• Niche service e.g. Faith based service</li> <li>• Legal service e.g., pro bono / legal aid</li> </ul>	49	67	31	147	12%

<b>Client better informed of safety advice</b>	<p>Made aware of:</p> <ul style="list-style-type: none"> <li>• Contacting police</li> <li>• 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</li> <li>• Other safety tips</li> </ul>	9	56	44	109	9%	includes safety advice on MH/Suicide and having a 'safety plan'
<b>Client more confident to deal with problems</b>	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.	12	132	291	435	34%	
<b>Client more confident to challenge / leave abusive/ harmful situations</b>	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.	8	11	44	63	5%	
<b>Client helped before situation reached crisis point</b>	<p>When our intervention leads to:</p> <ul style="list-style-type: none"> <li>• Police doing safety / welfare check</li> <li>• Help with injunction</li> <li>• Moving client to safe accommodation (e.g. refuge or hotel or some other safe place) before situation escalates</li> <li>• Prevention of HBV, forced marriage, FGM or any other form of abuse e.g., child sex abuse, neglect, physical abuse etc</li> </ul> <p>Client being referred to mental health / counselling services who are at risk of self-harm / suicide</p>	14	14	34	62	5%	
<b>Client helped at crisis point</b>	<p>We help client who:</p> <ul style="list-style-type: none"> <li>• Is in immediate danger of violence e.g., DV, sexual abuse, HBV, FM, FGM</li> <li>• Has been subjected to violence immediately prior before calling helpline</li> <li>• Is homeless (includes temporarily staying with friends / family after escaping domestic abuse)</li> <li>• Is Suicidal and has taken steps or about to take steps to endanger own life</li> </ul>	17	26	50	93	7%	
<b>Client moved to safety</b>	When our intervention results in client being moved to safety e.g., to family, friend, refuge or	4	4	7	15	1%	

	other temporary accommodation.						
<b>Client feels less isolated</b>	When our help makes client feel less isolated / lonely by talking to through their problems or when we find local support groups	3	47	54	<b>104</b>	<b>8%</b>	
<b>Client has improved mental health due to counselling referral</b>	When we directly refer client to an internal or external counselling service and client is helped	56	33	44	<b>133</b>	<b>11%</b>	includes counselling referrals to MWN Counsellor
<b>Prevented self-harm / suicide</b>	When client is in imminent danger of self-harm / suicide and we: • Call police or ambulance • Make an urgent mental health / health professional referral • Make an urgent counselling referral	12	23	12	<b>47</b>	<b>4%</b>	
<b>Client supported with interpreting</b>	Helping client engagement with agencies and professionals when English isn't their first language to ensure their needs are understood by professionals	28	38	65	<b>131</b>	<b>10%</b>	excludes cases that were in English. All additional language and where we have contacted language line
<b>Client Supported with form filling</b>	Helping to or filling in forms for the client e.g., benefits, housing, emergency funds etc	1	4	4	<b>9</b>	<b>1%</b>	includes cases where service users have come back to us requesting supporting letter for either, court, police, housing
<b>Client Helped with accessing food bank</b>	When we provide information on the nearest foodbank or when we contact foodbank and arrange for food to be provided	1	1	1	<b>3</b>	<b>0%</b>	
<b>Client helped with accessing courses to build skills</b>	Support client to identify and register for courses e.g., learning English, parenting, budgeting, college courses etc.	0	0	0	<b>0</b>	<b>0%</b>	
<b>Practical and emotional support provided by welfare check and home visits</b>	Checking up on clients via phone or via home visits if they are particularly vulnerable	27	16	15	<b>58</b>	<b>5%</b>	
<b>Attend Meetings on or behalf of client with professionals / agencies</b>	Attending meetings at schools, meeting with social services, police, MARAC, SARCs, and other agencies,	10	5	5	<b>20</b>	<b>2%</b>	in 2020 this was mainly virtual attendance

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	54	0	0	54	4%	this is due to people emailing or leaving messages or webchats for us and when we return call have been helped already or do not respond
Made no additional impact		0	406	647	1053	84%	
	TOTAL	1582	1582	1582	4746	376%	percentages add up to more than 100% as adding up all impacts

## APPENDIX B

### 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 and helps identify gaps in existing service provision which can be highlighted to policy makers and public bodies.

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 15-20 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?	

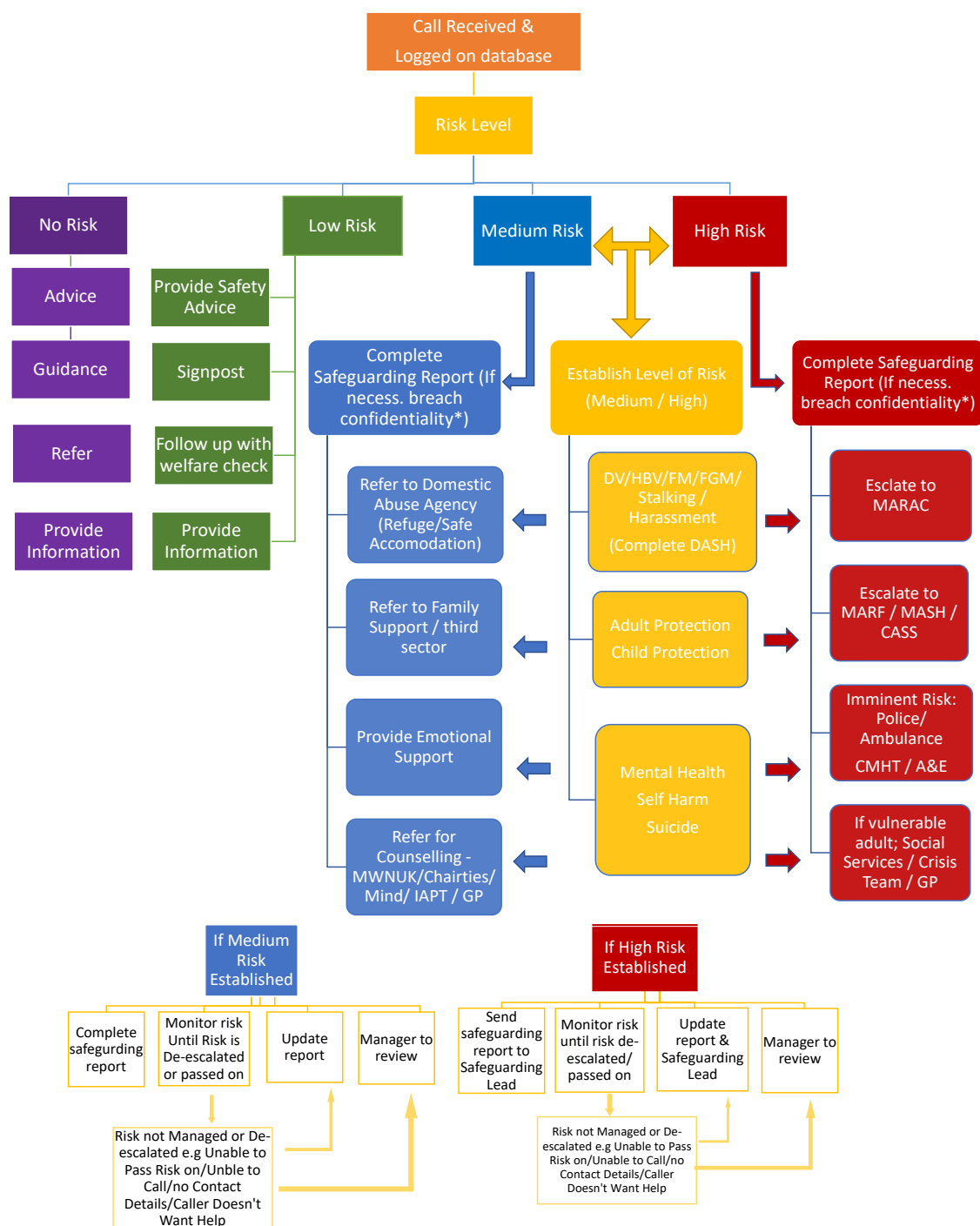
1. What was the reason you contacted the MWN Helpline?

2. Did you feel the MWN Helpline provided the right advice, support and guidance at that time?
3. What was good about the support you received?
4. What could be different or better about the support received?
5. Would you recommend the MWN Helpline to your friends/family if they needed support?
6. Are there any other comments you would like to add?

Thank you for your participation.  
END

## APPENDIX C:

### SAFEGUARDING PROCEDURE FLOW CHART



**\*CONFIDENTIALITY;** Please read this alongside our Confidentiality Policy. Where possible, confidentiality must be respected. However, where risk is deemed to be HIGH, risk may be breached. A 'Breach of Confidentiality' form must be completed.

**DATA PROTECTION;** Please read this alongside our Data Protection Policy. Where caller details are being shared with external agencies, an 'Information Sharing Protocol' form must be Followed.