Social Recovery Taskforce Women's Workstream Recovering from Covid-19 Facilitation Pack

Contents

- 1. Background
- 2. Can you help?
- 3. Running your Workshop
- 4. Health
- 5. Positive Covid Tests
- 6. Responsibilities
- 7. Economic Hardship
- 8. Violence Against Women
- 9. Priority Groups
- 10. Power Sharing and Decision Making
- 11. Women with Children
- 12. Returning Information
- 13. Appendices

1. Background

The Women's Stream of the Social Recovery Taskforce is working to develop an action plan to improve health outcomes and tackle inequalities experienced by women. We know women have been disproportionately affected by the pandemic and that existing inequalities have deepened. The action plan will seek to reduce inequalities and improve health outcomes for women and girls across the lifespan by identifying changes required to mitigate the various impacts of Covid 19 and potential future pandemics.

The Action Plan will be informed by existing research, including COVID-19 Micro Briefing 2, it laid out evidence re the unequal social and economic burden of the pandemic on women. The evidence focussed on seven themes: (1) pandemic attitudes and impacts to mental health (2) essential workers (3) unpaid, informal care and household duties (4) economic hardship (5) violence against women (6) priority groups, and (7) power and decision-making. The initial priority for the Women's Recovery Plan will be to ensure that this evidence informs the City's strategic health, social, economic growth and recovery structures.

We want to ensure any plan meets the diversity of needs of women across Glasgow City and, with the above themes in mind, we are keen to speak to women to hear about what matters to them. Your information will inform the action plan for the women's work stream.

The Women's Workstream will be developing recommendations for Glasgow City Council and partners to address women's needs coming out of covid and to avoid similar challenges during any future crisis.

2. Can you help?

We are asking workers across Glasgow to speak to the women they support in groups and ask them about their experiences during covid.

We realise how busy everyone is so below is an outline of a workshop that you can use as part of your programme. This may be a one off group session to welcome women back to your service, or it may be one session in a course or programme of workshops.

We would appreciate any feedback from the women and have included an Information Feedback Sheet, (see Appendix 1) for guidance on collating the information women contribute. Please complete the Worksheet and return to Glasgow Women's Voluntary Sector Network, c/o Wise Women, 120 Sydney Street, Glasgow, G31 1JF or email to <u>GWVSN@wisewomen.org.uk</u>. All information will contribute to recommendations to Glasgow partners on how to address women's needs following covid.

3. Running your workshop

We are aware of the level of skills and groupwork that is taking place in Glasgow. Below are discussion points that would guide you to include questions that we hope to address in the Women's Workstream. If you already have a group that would like to contribute you can organise your discussion in a way that is familiar to your group and the facilitators.

If you do not normally run groups we have included a suggested session outline below.

Venue – if in person. It would be much better to hold in person sessions where possible. This allows you to ensure confidentiality and allows women to work together to identify some of the challenges they have experienced and any solutions they can identify.

Platform: Zoom

Target number of delegates: venue dependent & risk assessed

Staff Support: Facilitation, note taking.

Session outline:

-		
10am	Welcome and Introductions	 Introduce the topic through an icebreaker to get women chatting. You can find examples of icebreakers online. https://teambuilding.com/blog/icebreaker- games
10.05	Background on Women's Stream and Lived Experience collated via e.g. women's voluntary sector network & wider orgs/groups	 Purpose of Women's Stream Progress of women's stream Purpose of session
10.20	Discussion	 Choose one or two of the topics below, that are relevant to your group. Where possible split the group into smaller groups to encourage everyone to take part. If possible get participants to record their discussion on flipcharts, noting any suggestions that are made. Facilitators to manage discussion Display flipcharts on walls or on the floor during the break to allow everyone to read them.
11.20	Comfort break	
11.40	Discussion	 Make sure everyone has had a chance to read the flipcharts. Facilitator asks for any comments or thoughts based on what was identified by the groups.

		 Facilitator notes on flipchart. All flipcharts continue to be displayed. Facilitator gives everyone 10 small round stickers each and asks them to indicate which comments / suggestions should be passed to the workstream. Women can put 1 sticker at 10 different comments / suggestions or can put any number at the ones they choose.
12:30	Close	 Facilitator clarifies the top 5 comments / suggestions that will be forwarded to the Workstream. Facilitator shares how the information will be used & next steps

Before commencing your group discussion always refer to your policy and procedures, including risk assessments.

When the pandemic is discussed in this paper we are referring to the period March 2020 – March 2022. We recognise that the pandemic is still relevant, however we are collating information from women for the period where services and support were restricted.

Discussion Prompts:

Below are excerpts from micro briefing we would find it useful to hear women's thoughts on. There is absolutely no expectation to answer all questions however some may serve as useful prompts for discussion (some prompts still to be agreed). They are arranged by the specific themes highlighted in micro briefing and Women's Stream priority areas.

4. Health

Pandemic attitudes and impact on mental health: Evidence suggests that the mental health impacts of the pandemic are worse for women than men.

- How has the pandemic affected your mental health?
- Did you seek support? If so, what was your experience?
- What would have helped make a difference?

5. Positive Covid test:

Research has shown that women were more likely to contract covid, although men were more likely to die from the virus.

- If you contracted Covid during a lockdown did you access any additional support?
- If you had responsibility for the care of others what happened whilst you were meant to be isolating? Emphasise there is no judgement if women felt they had to continue to support relatives. It is better we know this than not. No action can be taken if women broke isolation. All contributions should be anonymous.
- Was there anything in particular that was very difficult during this period?
- Have you experienced long Covid symptoms? If yes what support are you getting for this?

6. Responsibilities

Essential Workers: Women are more likely to be essential workers in the health, care, education and retail sectors - facing higher exposure to COVID-19, increased stress and difficulty reconciling work, family life and care responsibilities.

What would be helpful for women juggling work and/or various caring responsibilities?

- Are you an essential worker?
- Was your workplace supportive of your needs during the pandemic, e.g. supportive during isolation, recognising childcare issues etc?
- What would have helped?

Unpaid informal care and household tasks: 58% of all carers in the UK are women, and women undertake more intensive informal care roles. The closure of many workplaces and schools during lockdowns has significantly increased the levels of unpaid work for women. Unequal increases in unpaid care, combined with women taking on substantially more home schooling responsibility than men has resulted in higher levels of psychological distress for women. The combination of these issues may lead to reduced productivity among mothers working from home which could reduce their career progression and pay, reinforcing long standing employment inequalities.

- If you have caring responsibilities for people outside your household, what support did they receive during lockdown?
- If you share your house with others, did you all have to stay at home during lockdown? What impact did this have on you?
- Who in your household undertook the majority of the household tasks, childcare and home schooling, if anyone?
- Has there been a long term impact on relationships in your household that you feel is a direct result of the lockdowns?

7. Economic Hardship:

Evidence shows that the economic impact of the pandemic is having longer lasting effects for women. Certain essential roles within society, such as domestic workers,

are comprised almost entirely of women (95% of domestic workers across Europe are women) within precarious roles which are highly vulnerable to economic shocks. Many domestic workers are migrants and are undeclared workers in the informal economy, possessing no or little knowledge of their rights and how to seek support during the pandemic.

- Did you have a change of employment during the pandemic period?
- Did your income change during this period?
- If you claimed benefits for the first time during this period how helpful were the Benefits Agency Workers? Did you get support from elsewhere?
- Was your financial situation better, worse or the same during this period?
- Did you have to use additional support, such as foodbanks? How did you access these?

8. Violence Against Women:

A 60% increase in emergency calls from women subjected to violence by their intimate partner has been reported in the World Health Organization (WHO) Europe member states. The pandemic has presented several new barriers for women seeking help. Violence support services were often closed or operating at reduced capacity.

We are keen to hear about women's experiences, however we are aware that discussing violence against women is a sensitive subject and facilitators should have access to information on services to signpost women to appropriate organisations if needed (see Appendix 2).

We would ask generic services, such as youth projects, women's groups etc, to consider their relationship with participants and to encourage general conversation with women about violence against women, without having to disclose their personal experiences.

If your organisation is a specialist violence against women service you may have the opportunity to collate more personal experiences.

Some of the topics we would like to hear more about are;

- Did you or someone you know try to access violence against women services during the pandemic? What service, if any, were you offered, e.g. was it face to face or online, did you access accommodation services, such as refuge?
- If you or someone you know previously accessed violence against women services, did this change during the pandemic? What changed? Has it returned to your original service?
- If you or someone you know could not access the violence against women service you required, did you seek support from another organisation? Which, if any, alternative service did you access?
- What changes in violence do you think are required post covid?

9. Priority Groups:

Within the UK there are approximately 2.9 million lone parents, around 90% of whom are women. Proportions of people from Black, Asian and minority ethnic (BAME) backgrounds and people with disabilities are higher among lone parent families compared to couple families. Lone parent or guardian families have experienced some of the worst social and economic impacts of the pandemic including high levels of social isolation. A range of studies describe how lone mothers (or lone female guardians) report the, at times overwhelming, strain of coping on their own with reduced or insecure income, ongoing work commitments, home schooling and additional childcare, increased household duties and reduced support from family and friends amid restrictions.

We would appreciate it if you could complete the attached Monitoring Form, (see Appendix 3), to help us ensure we hear from women in all protected characteristic groups.

10. Power and decision making:

During the pandemic many of the services and support that communities require had to be closed down. This was particularly true in the initial stages of the pandemic.

We would like to know how involved women were in the decision-making at this point and subsequently later on in the pandemic response;

- Were you consulted on the closure of the services you were using during the first lockdown?
- Did you know who to approach if you were unhappy with the decision? Did anyone inform you of this?
- Do you now have access to those or alternative services? When were you able to access them again? Are these services the same or have there been changes, e.g. are they now online, have they reopened to full capacity?
- If they have changed were you consulted on how / why this would happen?
 Did you feel you had a choice? Are you aware of who you can contact to request a reintroduction of the service?

11. Women with Children.

We are aware that women had the majority responsibility for unpaid care and home schooling. The University College of London found that women spent twice as much time as men on home schooling and were twice as likely to have given up work to care for children during the pandemic. 53% of women interviewed by the Office of National Statistics reported their wellbeing was negatively affected by home schooling responsibilities. All of this was on top of women already having the majority responsibility for feeding, dressing and washing children.

We would like to know more about women in Glasgow's experience of caring for children during the pandemic, including home schooling. Some of the topics you may wish to cover are;

- Did schooling / childcare for your child/ren change?
- Were you consulted about this?
- Who in your household dealt with home schooling, organising alternative childcare etc?
- Do you feel you fully understand the changes that took place in your child's school / childcare?
- Did you try to access services for your child/ren, e.g. additional tutoring, mental health support? Did you succeed?

12. Returning Information

We would like to thank you in advance for contributing to the Women's Workstream's aim to collate information on women's experiences during the pandemic. All of the information will contribute to our recommendations to Glasgow about moving forward after covid.

Please return the information to Glasgow Women's Voluntary Sector Network, c/o Wise Women, 120 Sydney Street, Glasgow, G31 1JF or email the information to GWVSN@wisewomen.org.uk.

Information Feedback Sheet

Please complete a sheet for each topic. We realise people are extremely busy and any information is extremely helpful. Notes taken during the session will helpful. These can be sent in paper form, photographed and emailed or retyped.

Please return the information to info@wisewomen.org.uk

Group Details				
Name of Group: Date of Session: Number of participants: Does this group meet regularly? Yes Contact for facilitator:	No			

Discussion point covered:							
Feedback from women (please summarise feedback, highlighting particular issues and / or solutions women raised.)							

Any information used will be protect the anonymity of women and groups. If we have any questions would your group be open to us contacting them to clarify points and / or ask for additional information? Yes No

Violence Against Women Services Glasgow

Glasgow has a variety of services to support women who are / have experienced violence and abuse. Below we have included all the specialist services in the area, however if you believe someone is at direct risk of violence you should contact the police immediately. If you believe someone is at risk of ongoing violence, abuse and / or coercive control you can refer them to services below.

Also refer to your organisation's policies and procedures, particularly in relation to a woman who may be recognised as a vulnerable person.

The Daisy Project

Provides an integrated domestic abuse advocacy and support service. Tel: 0141 634 4053 Email: office@thedaisyproject.org.uk Web: <u>https://thedaisyproject.co.uk</u>

Glasgow and Clyde Rape Crisis

Provides a free and confidential support service to women and girls who have experienced rape, sexual assault, or sexual abuse. Tel: 08088 00 00 14 Email: info@rapecrisiscentre-glasgow.co.uk Web: https://www.glasgowclyderapecrisis.org.uk

Glasgow East Women's Aid

We provide therapeutic work with women on an individual basis and through Group work. Tel: 0141 781 0230 Email: info@gewa.org.uk

Web: https://www.gewa.org.uk

Glasgow Women's Aid

We have been supporting women, children and young people who are experiencing Domestic Abuse for over 35 years. Tel: 0141 553 2022 Email: <u>getsupport@glasgowwomensaid.org.uk</u>

Web: <u>https://glasgowwomensaid.org.uk</u>

Hemat Gryffe Women's Aid

We support women who experience domestic abuse at the hands of their husbands, partners, and/or extended family members. Tel: 0141 353 0859 Email: <u>womensaid@hematgryffe.org.uk</u> Web: https://www.hematgryffe.org.uk

Routes Out of Prostitution

Routes Out offers support to women who sell sex. The service is part of Community Safety Glasgow which aims to increase safety for people across Glasgow. Tel: 0141 276 0737 Email: <u>CommSafetyRoutesOut@glasgow.gov.uk</u> Web: www.routesout.org

SAY Women

SAY Women offers safe semi-supported accommodation and emotional support for young women aged 16 to 25 who are survivors of sexual abuse, rape or sexual assault and who are homeless, or threatened with homelessness. Tel: 0141 552 5803 Email: enquiries@say-women.org.uk Web: <u>https://www.say-women.co.uk</u>

Wise Women

Wise Women address women's fears and experiences of crime and violence through the provision of Personal Safety and Confidence Building courses and workshops Tel: 0141 370 0739 Email: <u>Info@wisewomen.org.uk</u> Web: <u>https://www.wisewomen.org.uk</u>

Monitoring Form

Women's Workstream Facilitation Pack Monitoring Form

We are asking the questions below to ensure that we are collating information about the diversity of women contributing to the Women's Action Plan. You cannot be identified from the information provided on this form.

1. If you do not want to complete this form please tick this box \Box

2. Please tick one of the following boxes to tell us your sex:

Female	Male	Prefer not to say

3. Do you consider yourself to be trans or have a trans history?

Yes	No	Prefer not to say

4. Please tick one of the following boxes to tell us your age group:

Under 16	16 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 to 74	75 +
Prefer not to say							

5. How would you describe your race / ethnic group? (same categories as 2011 Census in Scotland)

	Scottish	English	Welsh	Northern Irish	British
White					
	Irish Gypsy / Traveller		Polish	Other	
Mixed or multiple					
ethnic group	Please sp	ecify:			
Asian,	Pakistani	Indian	Indian	Bangladeshi	Chinese
Asian Scottish					
Asian British					
Black,	African	Caribbean	Black	Other	
Black Scottish,					
Black British					
Other Ethnic		ecify:			
Background		eeny:			
Prefer not to say					

Church of Scotland	Roman Catholic	Other Christian Specify (if wish to)	Muslim	Sikh	Buddhist
Jewish	Hindu D	Other religion Specify (if wish to)	No religion	Atheist	Prefer not to say:

The social model of Disability defines Disability as a long-term limitation of a person's physical, mental or sensory function and that disabled people are disabled by society and not their impairment.

7. Do you have a physical or mental health condition or illness lasting, or expected to last 12 months or more?

□ Yes □ No □ Prefer not to say

Does this condition or illness affect you in any of the following areas?

Vision (for example blindness or partial sight) Hearing (for example deafness or partial hearing) Mobility (for example walking short distances or climbing stairs) Dexterity (for example lifting or carrying objects, using a keyboard) Learning or understanding or concentrating Memory Memory
Mental health 🗆 Stamina or breathing or fatigue 🗆
Socially or behaviourally (for example associated with autism spectrum disorder (ASD) which includes Asperger's, or attention deficit hyperactivity disorder (ADHD) Other (please specify) None of the above Prefer not to say

8. How would you describe your sexual orientation?

Heterosexual	Lesbian	Gay	Bi	Other	Prefer not to
			Sexual		say