

The Impact of the Pandemic on Direct Support Organisations



It's no secret: the pandemic has exacerbated inequalities.

We started to hear about a double impact: marginalised people in the UK needed more support, but the pandemic was making it more difficult for UK-based direct support organisations to provide their usual services.



As internationally-focused advocacy organisations, we also feel that we have a responsibility to stay deeply linked to local needs. As two London-based organisations, we decided to start in our own backyard.



Funded by the Greater London Authority, CFFP UK and Women in Foreign Policy developed a short survey to gather information about:

How the pandemic affected the ability of direct support organisations to provide their services.

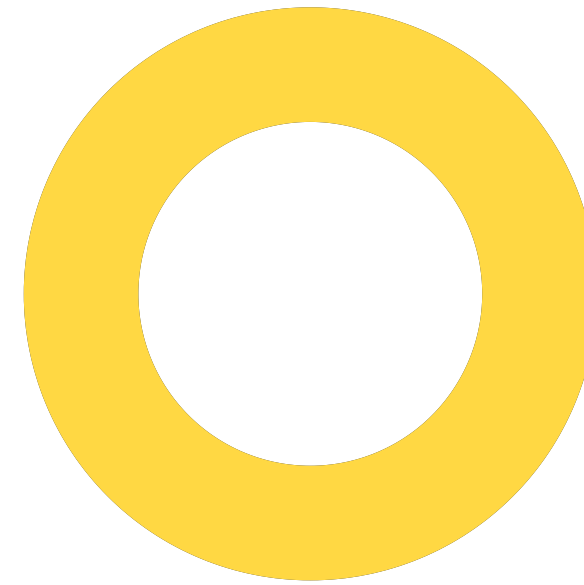
How the mental health of direct support workers has been impacted.

What direct support organisations need to be more resilient for future catastrophes.

Who we surveyed.



**77% of respondents
work in entirely women-
run organisations.**



**100% of respondents
work for London-based
organisations.**

Areas of focus for survey respondents.

**Domestic
Abuse**

**Housing &
Homelessness**

Poverty

Refugees

Loneliness

**Benefits &
Universal
Credit**

**Support
with home-
schooling**

**No
recourse to
public funds
(NRPF)**

**Pregnancy
support**

**Foodbank
support**

Key finding #1: More people need more help.

1

- 77% of respondents reported an increase in service users during the pandemic reflecting:
 - An increase in domestic violence support, an increase in poverty, and a need for more mental health services.
 - An increase in requests for digital resources, training, and equipment like laptops and tablets.
 - Reports that some service users were also scared to leave their houses due to language barriers.



Access to direct services and face to face support was reduced or unavailable.

- Respondents reported that the pandemic put a strain on staff availability, capacity, and resources.
- Providing face-to-face support/direct services was impossible at some points during rolling lockdowns.
- Emergency pandemic funding was hindered by finding experienced candidates and an inability to train staff face-to-face.



The service gap was bridged by staff working increased hours and using their own equipment and resources.

- Nearly all respondents reported that staff had to use their own laptops and mobiles for work before funding for digital resources was secured (for some).
- Staff had to extend working hours to operate helplines in the absence of face-to-face support.
- Staff had to work creatively to develop new ways of working including setting up a 'tele-befriending' service.



"Negative experiences include that our work is mainly providing emotional support to expectant parents who have received difficult news in their pregnancy, which is very hard to do from home in small flats/bedrooms. It's been hard to maintain a line between personal/professional. It's been challenging to not be able to have a quick conversation or debrief after helpline calls. It's also increased anxiety and decreased motivation for many as it felt like we lost all the fun/social parts of our work and productivity was the only thing left."

Key finding #2: Funding challenges and transitioning to digital service provision increased pressure during the pandemic.

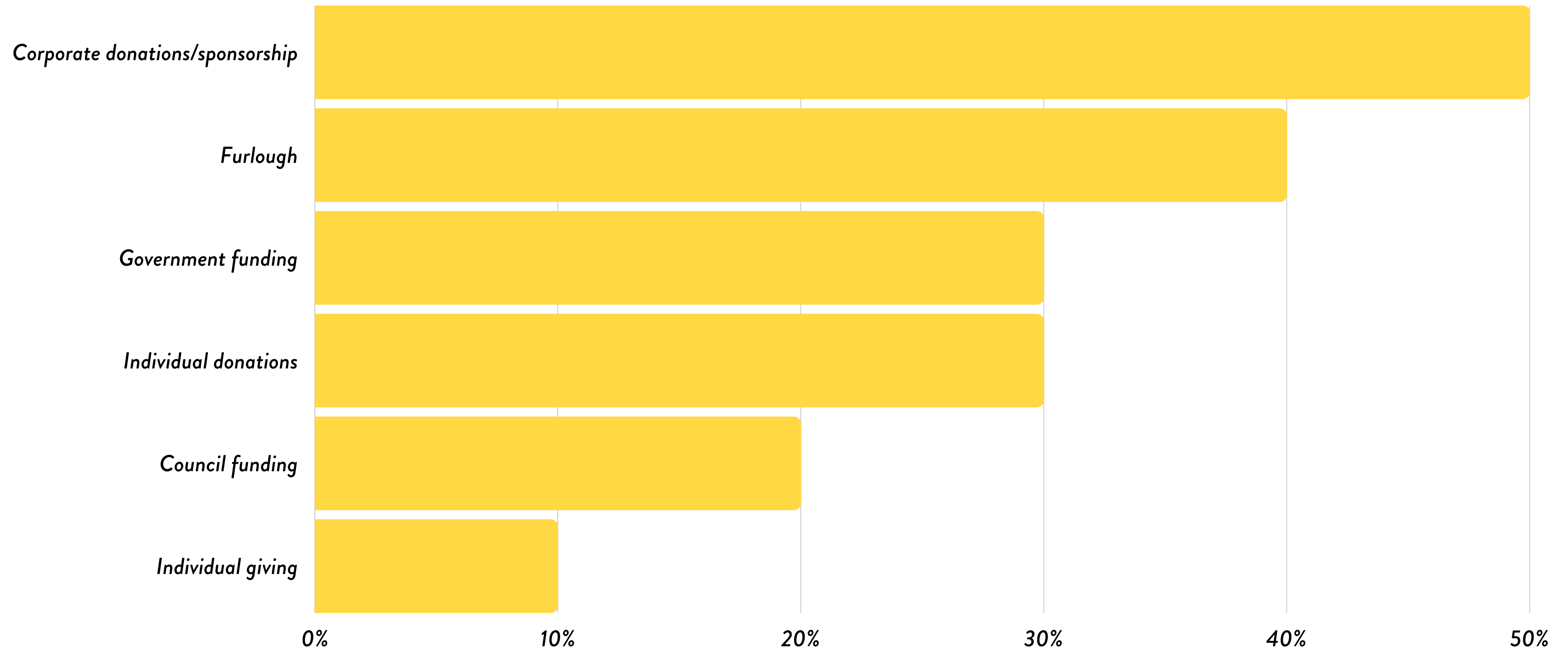
Funding opportunities were limited but some organisations secured emergency funding to deliver frontline services during the pandemic.

Some organisations had to increase their fundraising efforts to ensure they could continue to pay staff and deliver services and resources.

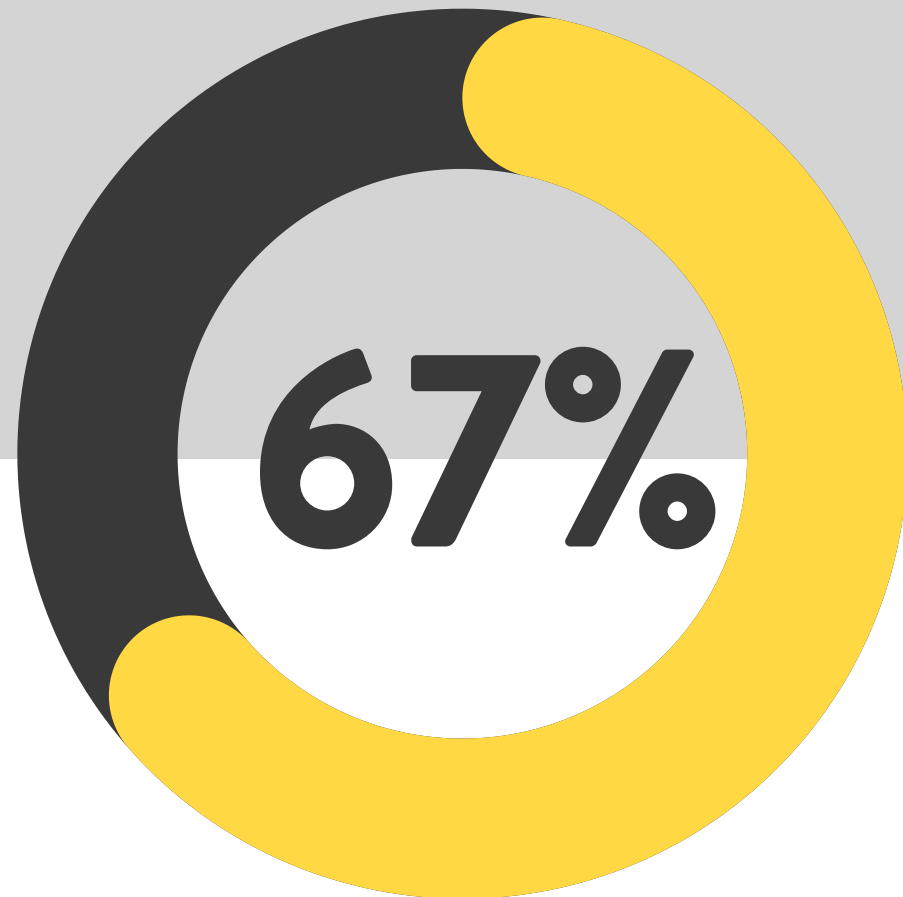
Others reported funding challenges around laptops, internet access, and subscriptions (e.g., Zoom, Teams) when transitioning to digital service provision.

Furlough and other forms of funding helped bridge some financial gaps.

2



Resources were already strained before the pandemic.



Two thirds of respondents reported that access to resources and money was already a problem before the pandemic.

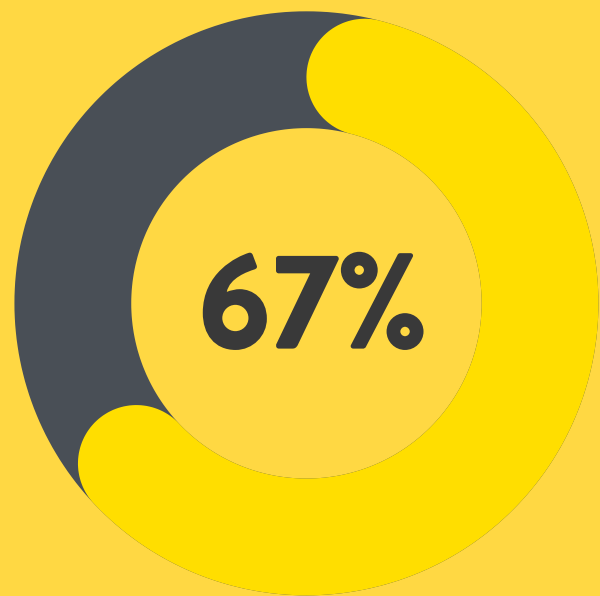
"The pandemic highlighted the fact that we cannot continue to operate in such an unequal society. News focused on the middle class who were forced to use food banks, which distracts from the people who rely on them everyday. The cycle of poverty in the UK is something that many people spend their entire lives in."

Key finding #3: Staff and volunteers feel stressed, anxious, and isolated.

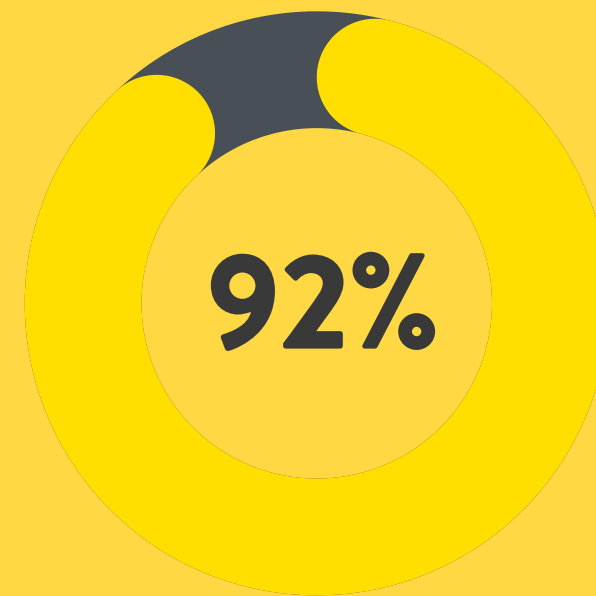
● The pandemic diminished boundaries between home and work, meaning staff and volunteers had to manage the emotional labour of their work as well as their own trauma and mental health.

● Some organisations reported the pandemic had a positive impact on staff motivation - given increases in domestic violence and other issues impacting service users, there was an increase in resolve to help.

Organisations made an effort to prioritise staff & volunteer wellbeing and mental health.



Percent of respondents felt that leaders within the organisation prioritised their personal wellbeing and offered pastoral support to their team.



Percent of respondents reported regular and clear communication between all team members via emails, calls and meetings throughout the pandemic.

Organisations made an effort to prioritise staff & volunteer wellbeing and mental health.

Respondents reported that they received support via:

●
An increase in flexible working.

●
Counselling offered at work.

●
Daily check-ins for all staff and volunteers

●
Digital resources to ensure staff are properly equipped

"I think there has been a lot of stress and anxiety, both for ourselves personally and in relation to our client base, many of whom were extremely isolated during the successive lockdowns. There has been pressure from clients to resume social activities and a lack of understanding that we were operating under nationally imposed restrictions. Some social groups met virtually but I felt great concern for face to face regulars who dropped out of sight during the virtual period, through choice or digital exclusion. It has been a very worrying time."

Adapting to change: Ensuring more support for more people.

75%

reported that despite the increase in demand and staff & volunteer challenges, they can now support more service users (marking an increase from before the pandemic).

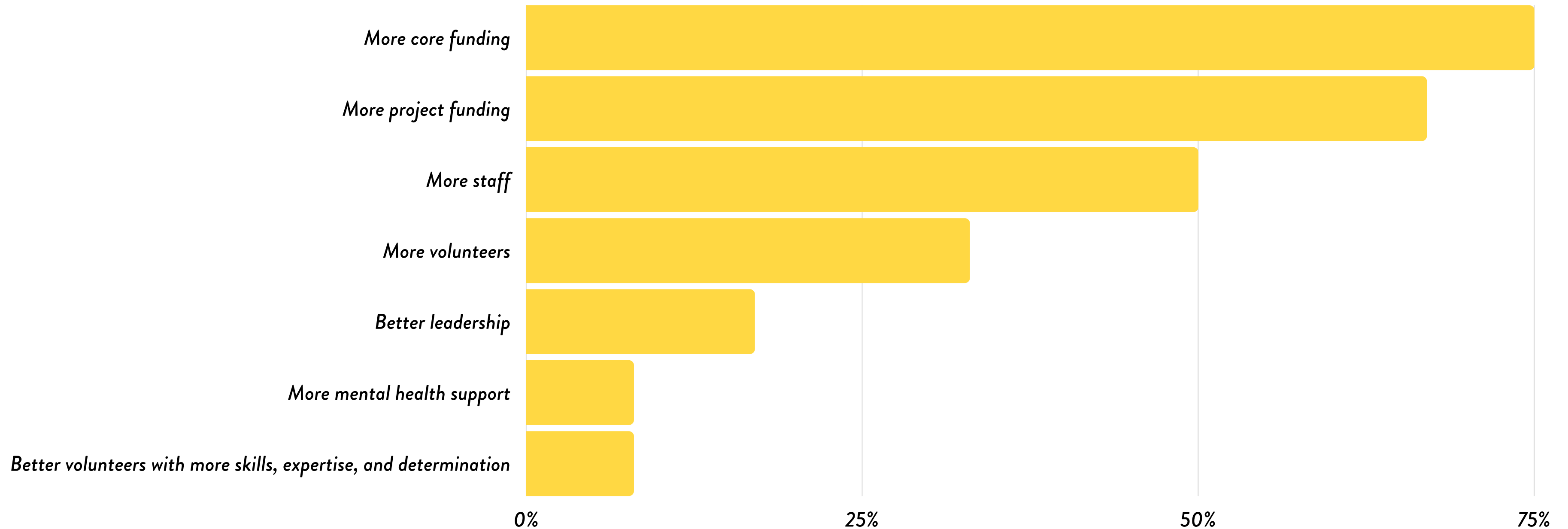
77%

reported that they feel better prepared and resilient if something like the pandemic happened again.

Challenges remain:

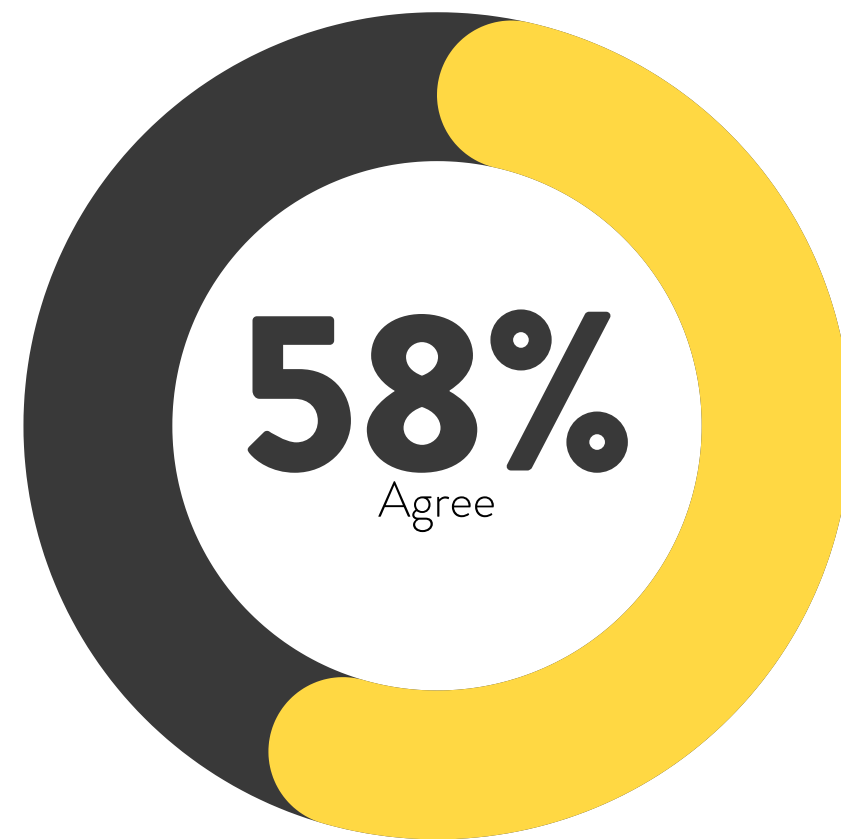
- ***Funding opportunities are limited***
- ***Staff are anxious about returning to face-to-face work due to COVID-19 and other health risks***
- ***Pressures remain for staff who are parents/caregivers***

Adapting to change: Being better prepared means securing more funding.

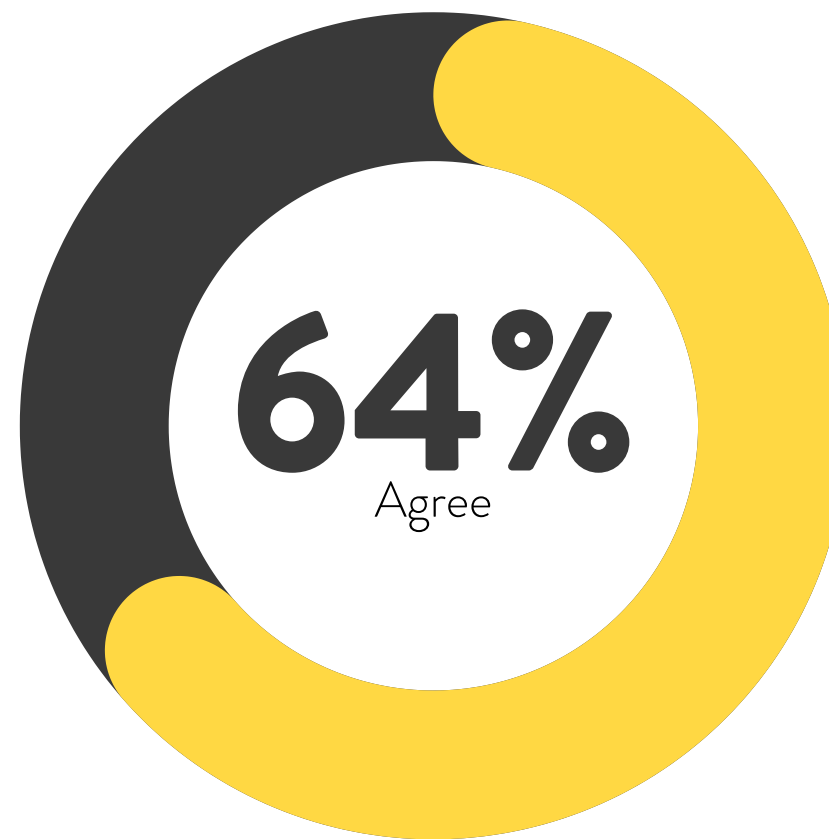


What kind of support do you want to ensure you are better prepared for the future?

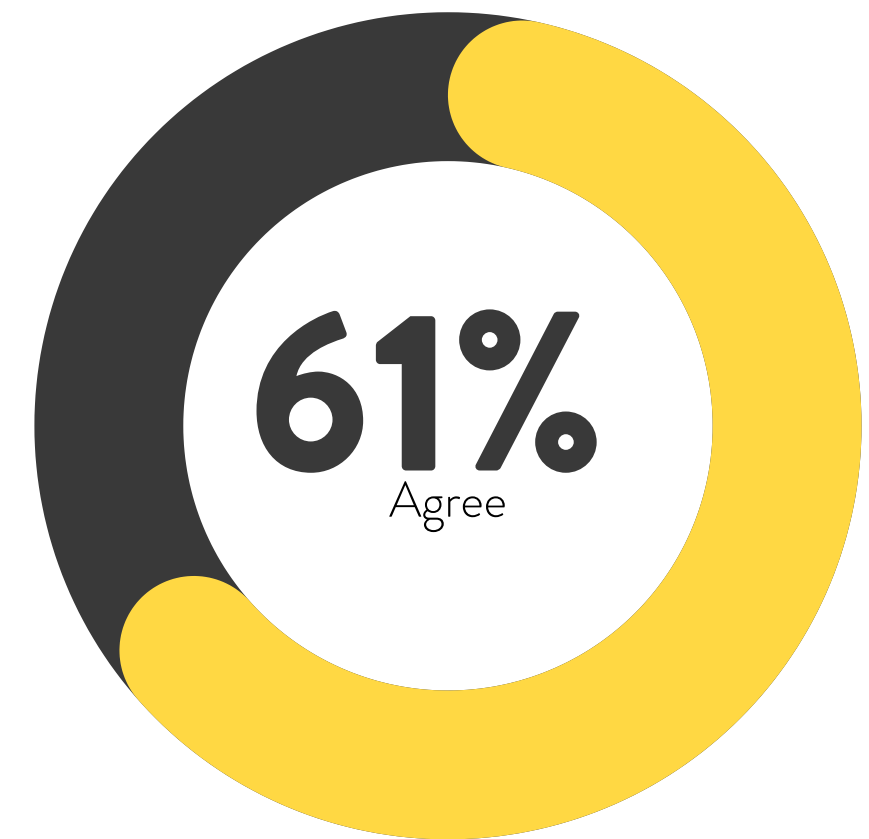
Adapting to change: Improving leadership communication, budget planning, and understanding of staffing.



Throughout the pandemic, there was a clear strategic vision and understanding of priorities filtered down from top to bottom.



Throughout the pandemic, there was clear, consistent and frequent messaging from organisational leadership.



Throughout the pandemic, organisational leadership developed plans to appropriately reallocate staffing and budget where needed.

**Learn more about the work that the Centre for
Feminist Foreign Policy UK is doing to build
back feminist after the pandemic.**

www.centreforfeministforeignpolicy.org

