

Consequence 1: Accessing technology:

Impact:

Many of the women are isolated and/or living with people they do not have relationships/communication with. Not being able to access technology limits their social interactions even further. Many of the women have pre-existing mental health conditions which are being triggered by having limited social interactions.

For women with children, they have struggled to access materials for schooling. They have had to try and access school materials using smart phones (as opposed to laptops/computers). Their limited English language proficiency has resulted in not always understanding how to engage with the material and to 'home school' their children. Additionally, many women have had no formal education, so are unable to support with 'home schooling'.

Reasons:

Not having access to internet/wifi

Not knowing how to use technology like smart phones and other

Limited English language proficiency so not being able to engage with many resources available online, or understanding how to use

'Evidence':

We have had numerous donations from independent funders for smart phones/tablets. A school has partnered with us to allow us to temporarily borrow their tablets whilst the children are not in school

Fundraising page specifically stating need for internet packages/bundles

Staff and volunteer contact logs/casenotes show the time required to support women to understand how to use technology and how to access Ella's daily community Zoom calls

We have seen an increase in number of safeguarding concerns/mental health crises whereby we have had to contact the appropriate statutory services to manage the incidents.

Consequence 2: Having to stay inside:

Impact:

Many women report feeling being trapped and locked in, which is something they experienced during their exploitation. These feelings are triggering, resulting in the women's mental health to deteriorate and symptoms to worsen. In many cases, women appear to have 'gone backwards' in regard to their mental health.

Reasons:

Not being able to access therapeutic activities/therapy

Having limited social interaction

Limited access to exercise (particularly in overcrowded areas or where they are responsible for children/dependents)

Limited/different emotional support through Ella's caseworker and wider community (as must be virtual, which is further limited if a woman is unable or not confident in using technology)

'Evidence':

Women's statements as recorded in staff/volunteers contact logs and casenotes:

"I am trapped in a house and it is as if I am trapped in XXX. I cannot stay here."

"I feel like I have gone backward." - It has been especially hard for X because she had a routine, seeing her GP, attending exercise classes, to therapy, to her place of worship. It has been particularly hard to not be able to go to her place of worship.

"This has made me feel like I'm being locked away all over again"

The women have reported going backwards with the progress they feel they have made with their mental health.

Our caseworkers and volunteer befrienders are needing to spend a lot more time offering emotional support. Often their caseworker or befriender are the only people they speak to throughout the week. Our caseworkers are finding they have much less time for 'casework'. Evidenced in the teams contact logs.

Other service users, who are limited in English language proficiency, are unable to communicate how they are feeling, often reporting 'I'm fine, I'm fine'. When our caseworkers have visited them in person (only where contact is necessary); our caseworkers find that the women do have a lot to share, often presenting important letters with deadlines close to being missed, or presenting challenging mental health symptoms. The women find it easier to communicate when someone is in front of them; when they can use other ways to communicate (or communicate that they need access to a phone interpreter).

Again: we have seen an increase in number of safeguarding concerns/mental health crises whereby we have had to contact the appropriate statutory services to manage the incidents.