

Project Evaluation

Arachne Greek Cypriot Women's Group

**Building and sustaining bridges of inclusion
June 2015 to May 2018**



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Introduction

1.1. Arachne Greek Cypriot Women's Group

Arachne Greek Cypriot Women's Group is a voluntary organisation and registered charity established in 1984. Arachne aims to improve the quality of life and well-being of Londoners and their families. Historically the organisation has worked primarily with Greek Cypriot and Greek women, though it is expanding its audience.

Arachne provides a range of support services including; drop-in advice and information sessions, adult education classes, employment and training, health and youth programmes and recreational/cultural activities. They encourage women's active participation in determining policies that affect their lives. The staff and volunteer team has a variety of relevant skills, knowledge and experience and come from a wide range of backgrounds. The organisation holds the Quality Advice Standard Mark and is an accredited centre for OCR (Oxford Cambridge and RSA examinations), City and Guilds, NOCN (National Open College Network) and The Virtual College for online courses.

1.2. Evaluating the project

Arachne commissioned Healthwatch Islington as an independent organisation to evaluate the project 'Building and sustaining bridges of inclusion'. Healthwatch Islington works in partnership with others to influence health and social care services in Islington, and North London. Although the project runs for three years, this evaluation has taken place 2.5 years in to the project.

Arachne had already developed a monitoring and evaluation framework for this project. We agreed with Arachne to use this same framework for ease of comparison where possible.

We sought to understand beneficiary needs, and the impact of social and economic policy. We looked at Arachne's ability to reach the vulnerable, to respond to changing demands, and to manage partnerships with other relevant bodies.

1.3. Methodology

Healthwatch Islington received data from Arachne on the numbers of beneficiaries, the activities they had taken part in and the benefits they had gained. Quantitative data was pulled from the database in April 2018.

We arranged interviews with beneficiaries and stakeholders in focus groups and some one-to-one structured interviews conducted over the phone to reach a range of participants. Several participants asked to email their response because of other commitments. We used a range of methods to enable a range of beneficiaries to be able to take part. We were not able to sample participants, rather those who were willing and able to take part were included.

Focus groups for beneficiaries were run with an interpreter and phone calls were offered in English or Greek. Thorough notes were transcribed during the discussions and these were then analysed. We used a mixture of quantitative and qualitative questions about people's experiences. An example of the survey questions follow in the appendices.

We held interviews with stakeholders rather than a focus group because it was difficult to get people together in one place. Stakeholders included statutory, academic and voluntary sector partners.

1.4. Aims of the 'Building and sustaining bridges of inclusion' project

The 'Building and sustaining bridges of inclusion' project was set up to support beneficiaries to become more active citizens by building sustainable bridges of inclusion into employment, training, welfare rights and health education so reducing poverty, isolation and dependency.

The project aimed to add to existing services or fill any gaps by:

- ▶ Providing a specialist service for Greek and Greek Cypriot women,
- ▶ Increasing access to services by providing advice, information, advocacy, interpretation and translation,
- ▶ Improving employability by providing skills training such as Personal Development Education, English for Speakers of Other Languages, and various computer courses,
- ▶ Increasing health awareness by inviting various specialised health organisations to run workshops and information sessions in order to provide information, increase awareness and promote communication between organisations and individuals,
- ▶ Improve health and well-being by providing creative workshops where clients can learn new skills and improve their mental well-being,
- ▶ Working collaboratively with service providers to meet need.

1.5. Context

During the two and a half years of service delivery to date (at the time of producing this report), a number of key policy changes have impacted on the lives of beneficiaries and therefore on the support needed from Arachne.

Fundamental changes to the welfare system. In particular, changes to benefits, such as the introduction of Personal Independence Payments and the 'Bedroom Tax' have resulted in new queries and re-assessments for a number of residents. Arachne faced greater numbers of appeals, and the appeals process is a lengthy one.

The majority of Arachne beneficiaries are women. The Women's Budget Group which scrutinises the gender impact of government policy has highlighted the more adverse effect of benefit changes and austerity on women, and in particular women from poorer households. Arachne beneficiaries are likely to fall in to this group.

The changing nature of Greek and Greek Cypriot migration. Staff and service users referred to the changing make up of beneficiaries. Whilst most are still from the Greek/ Greek Cypriot community, more are now economic migrants from other countries and also women born, or resident, in the UK who come from a variety of different ethnic backgrounds. Arachne noticed an increase in recent migrants needing assistance in year two and an increasing number of beneficiaries needing help to find work (or support to access employment related benefits) also in year two. Two beneficiaries noted that this is apparent in English classes for example, where longer-term residents of the UK may find it easier to understand English because their children have grown up here and speak the language.

Financial crisis in Greece. This has meant that some of the more recently arrived beneficiaries have needed urgent support with a range of needs including housing, finance and school admissions.

Unique status of the organisation. Several respondents noted that there is no other organisation in London which provides the same range of services as Arachne supporting vulnerable, isolated and less privileged members of the Greek/Greek Cypriot community. Arachne makes its services accessible to people from all backgrounds and due to some of the issues listed above there is an increased demand for the kind of services they offer. One of the reasons for the increase is that clients have to re-apply and be regularly re-assessed for Personal Independence Payments, which wasn't the case for some benefits such as Disability Living Allowance.

Impact and Social Return on Investment

Table 1. Experience of beneficiaries:

Year two		Year three		End of project	
Aim	Actual	Aim	To date	Aim	To date
100	164	100	no data yet	300	325
200	228	200	no data yet	600	459
200	228	200	no data yet	600	459
Aim	Actual	Aim	To date	Aim	To date
60	111	60	no data yet	180	186
50	111	50	no data yet	150	167
100	83	100	no data yet	300	177
Aim	Actual	Aim	To date	Aim	To date
100	231	100	no data yet	300	476
100	181	100	no data yet	300	306
133	231	133	no data yet	400	476
Aim	Actual	Aim	To date	Aim	Actual
80	107	80	no data yet	240	231
80	107	80	no data yet	240	231
100	107	100	no data yet	300	231

2.1. Beneficiaries

During the period 1 June 2015 to 22 January 2018, 1097 clients used the services on offer at Arachne. Most clients used more than one of the services on offer, maybe arriving for advice and then taking on training and volunteering for example.

2.2. Impact for beneficiaries

The over-arching aims of the work were to improve beneficiaries access to training, volunteering and employment; to reduce social isolation, to offer health-related support and to provide information and advice on rights and entitlements to services (see Table 1 on the previous page).

Arachne had committed to ensure that certain numbers of participants reported improvements against a range of indicators. Not all beneficiaries completed feedback forms, the organisation exceeded the targets set in the original proposal in all areas except clients moving on to volunteering roles or paid work. In part, this could be because this client group was particularly hard to follow up, and because of time-lags between offering support and following up. 'Anything I need help with, the first thing I do is come to Arachne'

Beneficiaries were accessing employment and training support, health and well-being activities and information and advice services. Most had experience of using more than one type of service, finding Arachne for one reason, but then gaining support for other issues they needed help with. Some beneficiaries reported only having used Arachne's services for a few weeks or months and were usually using only one type of service.

2.2.1. Employment, training and volunteering

Beneficiaries who have reported going into employment accessed a wide range of jobs including; public relations, waitressing, marketing, cleaning, sales assistants, nursing, caring, teaching and teaching assistant roles. From the conversations we had with beneficiaries and stakeholders it seemed that one of the real values of Arachne's approach is that they empower beneficiaries. They remind them of what they can achieve, restore their self-confidence, put them in contact with people or organisations who can help them help themselves. The team at Arachne show the beneficiaries what is possible, encouraging them to consider their options and not to give up. Where appropriate they encourage participants to share their skills with other beneficiaries.

Arachne offers a range of courses, including accredited and non-accredited to increase employment skills; ESOL, IT, CV writing, interview skills, and creative classes such as cooking, jewellery-making, sewing, felt-making and decoupage, as well as drama therapy (for building confidence) and sign language skills.

Beneficiaries noted that there was a lot of flexibility in the approach, and that staff made time to give one-to-one support where needed. Beneficiaries attending the centre for any service are given information about courses on offer as a way of encouraging them to meet new people and build confidence.

The AIMS (Accessibility Information Management System) database that Arachne uses has a system for calculating benefits or salary gained by clients. The database captures how much the client will gain and how regularly, from one-off to weekly to monthly. It then calculates how much the client will gain from the date of entry of the data until the end of the same financial year.

Staff have not always entered financial amounts gained from employment into the project database. In the main, this was because this client group was particularly hard to follow up with. A sample of thirty five clients for whom financial information was available showed a combined generated income of £536,485. The amount gained across the project will of course be higher (244 beneficiaries had gained voluntary work experience or employment at the time of producing this report).

Table 2. Money gained by a sample of 35 beneficiaries moving on to employment:

Benefit	Number of clients	Total amount gained for clients	Amount gained (annual equivalent)
Gained employment	35	£147,329.68	£536,485.36

There was limited feedback from beneficiaries who had gone on to employment in the database. However what was recorded was positive.

‘Thanks to Arachne helping me with my CV and giving me so much information and support, I have found a full-time job as a dental nurse. After completing Power Point Level 1 and Job Seeking skills Level 1 at Arachne I have gained confidence and acquired new skills and am now on the Dental Nursing NEBDN Diploma Level 3 at Waterloo Academy and I am now pursuing the career of my dreams.’

Feedback from Arachne beneficiary

Table 3. Feedback from the employment and training focus group:

Please say what best describes your opinion according to the following:	Strongly agree	Agree	Disagree	Strongly disagree	Other
I gained new / improved existing skills by gaining qualifications	11				
I progressed into further training or education	10				1
I gained voluntary work experience or gained employment	2				9*
I have developed social links and gained new or improved existing skills	11				
By using the services I made new friends	11				
By using the services I have increased in self-confidence and self-esteem	11				
Arachne enabled me to be more involved in my community and become more independent	11				

14 respondents attended this focus group. Three respondents were unable to stay for the whole session. Respondents tended to ‘Strongly agree’ to each question. This was true of all three focus groups. It was clear that service users felt a strong sense of loyalty towards the organisation. The employment and training focus group was held in the evening and was attended by a number of service users who did not have any activity in the centre that day, and did not necessarily live locally. Nevertheless, they had made the effort to come in to give positive feedback.

*Although some respondents said they were interested in gaining employment, others said they had retired, and/or were not looking for work. The courses that Arachne provide are not only directed at those seeking employment. In particular, the more elderly clients are encouraged to attend any classes or workshops as this group are felt to be at high risk of isolation, loneliness, and the knock on effects of these conditions on their health and well-being.

Focus group discussions on employment, training and volunteering

Respondents in the employment and training focus group and those spoken to in the case studies had gained a great deal from the courses they had undertaken at Arachne. Although only two in the group had taken up paid employment, others described how they had now been applying for jobs with support from Arachne or had been able to change their jobs to something that suited them better. Several reported not going on to employment because they were retired and not looking for work.

Several respondents noted that attending the classes and workshops on offer had opened their horizons. The support had given them career ideas that had not occurred to them before but would also offer the kind of flexibility needed to fit around other commitments including childcare, and caring for partners or family members. For example, one respondent was now considering setting up their own craft-making business and another was considering a role which included out-reach work as office-work left her unfulfilled. A further respondent was inspired to take up teaching having supported some of the classes on offer as a volunteer, and another to look for a teaching assistant role after taking up sign language classes. It was clear that Arachne offers a really person-centred service, tailored to the needs and aspirations of beneficiaries as individuals.

All respondents talked about how taking part in the course increased their confidence, and self-esteem. 'They make you see what is possible. It opened my horizons and because of that I want to start my own business'. This confidence came not only from the very supportive environment of Arachne, but also from the support shown by others attending, the diverse mix of people and the recognition that each individual had different strengths and so they could support each other in different ways.

Not all respondents were looking for work (some were already retired). However, they used the courses on offer to improve their English and IT skills. Several had only started attending the centre when they were widowed. This support increased their confidence and their independence, and enabled their civic engagement. Combatting loneliness and isolation in the elderly is one of Arachne's priorities, and this engagement helps to keep elderly service users mentally and physically healthy.

Throughout the conversations with service users and partner organisations they emphasised the flexibility of the Arachne approach. For a beneficiary who had struggled with the IT classes staff encouraged her to stay on at the end of sessions for one-to-one support, for another who had a child they allowed her to bring her child with her so she would not be excluded, and for others juggling various responsibilities, if they missed a class they were offered one-to-one support so they could join back in the following week. Respondents also talked about developing the confidence to ask for help that they needed.

Case study one: Getting started with finding a job

'I felt unsafe and vulnerable specially regarding my job seeking and my new career here in the UK. I went to visit Arachne and my life literally changed. They helped me find me my first job. It was not really what I was asking for, but I was able to support myself and paid my rent. At the same time, they went through with me how to improve myself, they reviewed and helped me rewrite my CV and generally made me feel secure to search and find a better job. I was trained with mock interviews and constant questions and practice during my job seeking skills course and computer skills course.

'So I realised how the system works in the UK and I managed to find the perfect job for me. In fact, Arachne introduced me to my new manager and linked me with the service I now work with. I also attended free drama therapy sessions which provide the ultimate change to my life as I stopped feeling fear about new challenges, I recognised and realised my own strength, I felt empowered and ready to deal with all new prospects. I don't really know what I would have done without Arachne's help probably sent wrong CV and take negative answers. I don't feel stressed and unhappy anymore but I feel confident and already settled and I have already submit my Qualified Teacher Status application as I feel ready to take my next step.

'My next plan is to attend courses and educational programmes in order to improve myself as a person and a professional. I feel confident and part of the British society and I am really excited about that. I truly and wholeheartedly thank you all.'

Case Study two: Enhancing skills to improve employment prospects

'I first contacted Arachne when I returned [to London]. Being new to Islington and London I wanted to become part of the community. Staff suggested that I join the English group to help out as I have teaching experience. Joining the class was great. It got me involved in the community, I felt useful and welcomed and enhanced my skills. From this I was asked if I wanted to run a short (six week) interview/job seeking course for people struggling to find work as I have many years experience in business and HR. This worked out well and we made good contacts with the local job centre.

'I am now teaching English with a local refugee charity. Arachne helped me to develop my English teaching skills and have confidence to reach into other parts of the community.'

Case study three: Volunteering to build skills and confidence

'I have had the opportunity to volunteer as an adviser worker within Arachne, giving benefits advice, representing clients upon authorities, assisting in organising informational and training workshops and also as a Volunteer Coordinator. Arachne also assisted me, providing training courses for me such as Law and Volunteering, Organising and Managing Volunteers, and various volunteer development courses on managing volunteers.

'Arachne helped me to develop professionally and personally as well. As a professional, I've enriched my skill set, my working experience, and got acquainted with the benefits claims regime, the regulatory system of charities within England and Wales. I've gained solid experience advising a wide and diverse range of clients, within a multicultural environment.

'I don't think I would have been volunteering if I hadn't been introduced to Arachne, as I've never thought of volunteering before and Arachne was the organisation that "taught" me about volunteering. My confidence has definitely improved as a professional for all the reasons above but also having the opportunity to work with exceptional and supportive colleagues.'

2.2.2. Health and well-being

Health and well-being services on offer included: Health events, networking activities, Keep Fit, Choir, Iconography, Greek Dance, Health advice, Oral History Project, Carers' group, Good Neighbour scheme, Interpreting & Advocacy.

Respondents in the discussions on employment and welfare support also reported improved well-being due to increases in self-esteem or a reduction in anxiety. This was also emphasised in the interviews with partner organisations.

Several respondents across each of the groups referred to the walking group. With one noting that if the weather was really bad they still went for a walk but round a museum or similar instead of outdoors.

Respondents reported improving their health through regular exercise (particularly the walking group) and activities such as drama therapy. We didn't speak to anyone who had accessed support to give up smoking, though this is a subject that Arachne said they had broached with specific individuals, and is a subject that they continue to pursue. There were very varied examples of how beneficiaries had been helped and many wanted to give examples of friends of theirs who had also been helped by the centre.

Respondents had found the interventions at Arachne very positive and particularly talked about the wealth of opportunity open to them at the centre.

'You know someone is there for you'.

Focus group discussions on health and well-being

Respondents emphasised the improved well-being gained by attending the centre, meeting new people in a welcoming environment. Several respondents in focus groups had started attending the centre when their partner died and they had been cut off and totally isolated. 'I came when I lost my husband and they were very friendly, completely over the top with how much they help' but service users were made to feel welcome and encouraged to attend and explore their interests. The centre had helped them get back on their feet, whether they had arrived for benefits advice, for classes or for health-related activities. Many respondents also commented that the wide range of services available meant that there was 'something for everyone'.

Respondents spoke of how attending the centre had helped them connect with others and feel more confident in themselves. This was supported by the stories shared by partner organisations who described the positive mood of participants and the life-changing impact for beneficiaries of their service collaborating with Arachne.

Respondents in the focus group emphasised how much they trusted Arachne staff and could open up to them in a way that they could not open up to others. This in turn, they realised, made it easier for Arachne to know how to help them. One respondent stated that she could talk to Arachne's 'angels' about things that she still couldn't discuss with her psychiatrist. Focus group attendees joked that they trusted Arachne 'as much as the priest at confession'.

Respondents valued being able to do what was of interest to them, and at their own pace.

'They help you find your spirit. You belong here. Make friends. You can speak your own language. They are there for you. I've had an operation and can't walk properly yet but you can come here for exercise and they make it gentle for you. You can do what you want at your own pace and you've got privacy.'

One partner who had referred numerous clients to Arachne for health support including interpreting at local hospitals noted that these beneficiaries 'feed back that they've got the support they need. Volunteers go with them to hospitals to support them when needed, which reduces the stress of the visit and gives them moral support'. Focus group attendees also confirmed that support was provided with reading appointment letters or requesting support from healthcare professionals. For example, despite a good level of English one respondent hadn't been able to articulate her needs in her GP appointment, but a letter from Arachne had requested a referral to an appropriate specialist on her behalf and got her access to the treatment she needed.

In year two and three Arachne brought other partners in to the centre for example, clinicians to talk about diabetes management, and a low-vision specialist from a local centre. They also considered how to best meet the needs of carers.

Table 4. Feedback from health and well-being focus group:

Please say what best describes your opinion according to the following:	Strongly agree	Agree	Disagree	Strongly disagree	Other*
I have improved my physical health and psychological wellbeing by participating at Arachne's activities	14				
I have improved my health by participating Arachne's regular health related activities e.g. stop smoking, exercise, healthy eating	14				
Arachne enabled me to reduce anxiety and stress	13				1
Arachne enabled me to reduce my reliance on medication and/or develop better coping strategies	4				10
By using the services I made new friends and became more active	14				
I have developed social links and gained new or improved existing skills	14				
By using the services I have increased in self-confidence and self-esteem	14				
Arachne enabled me to be more involved in my community and become more independent	14				
Arachne enabled me to access the support of a range of local services	14				

*One respondent did not report feeling less anxious 'because I already feel very relaxed' and only those who took medication reported improvements in how they were able to manage this.

Comments from Arachne's database showed that for some the support was as simple as 'meeting new friends and chatting about the old days over delicious food and coffee'.

For others the impact was really empowering, with different interventions building on each other.

'I found the nutrition sessions very informative and learnt a lot about keeping healthier especially in relation to my health conditions. The Walking for Fitness sessions have made me feel much happier. I have made new friends and visited places that I have never been to before and this has greatly improved my quality of life.'

Feedback from Arachne beneficiary

Case study four: Finding appropriate care when you don't know how things work

(Redacted to protect anonymity) A client whose partner had a long-term and deteriorating mental health need was struggling to provide the necessary support alone. After speaking to Arachne the client was made aware of support that could be available and Arachne supported the client to access this. The client is no longer dealing with the issue alone. 'If I had not found Arachne it would be terrible for the reasons mentioned. I am satisfied and grateful for their support and currently in a very difficult place psychologically'.

Case study five: Supporting clients to access their entitlements

'When we go to see specialists in Whittington Hospital, we sometimes end feeling very frustrated. My wife needs surgery and we have been waiting for it for a very long time. In the meantime she suffers a lot, she can hardly sleep at night, and I can hardly sleep either, because I have to take care of her and I am worried in case she has a fall. When we need help with the doctors we go to Arachne, and the ladies there help us by phoning or emailing the hospital on our behalf.

'Where we live now we need to climb 15 steps, my wife is disabled, it is very difficult for her to enter or exit the house, we still wait for the council to find a more appropriate flat for us.

'The bitter truth is I cannot imagine how we would have survived without them. They are a blessing to us. I felt completely stuck.'

Case study six: Partner organisation. Oral history and cuisine.

'It was a piece of work about culinary heritage and recording this. Arachne are the only organisation doing something like this, they offer a real sense of belonging, you can really feel the presence of this community centre.

'We hosted discussions on Mediterranean diet and how to adapt ingredients when you are in a different country, and then it linked with the oral histories and has grown to include making videos. It was a creative process for the women.

'Did people's well-being improve? I'm very, very confident of this. They developed a broader understanding of diet both in terms of calorific intake and their heritage. Did participants self-esteem increase? Well I can say I saw happy faces. They enjoyed being there.

'It wasn't possible to tell whether participants were from all protected characteristics (as some are not visible and this didn't come up in our conversations) but the people working there created a friendly and supportive atmosphere. Once people reach this place they feel relieved. I can't give details really but I saw people with limited English (90% of them - and they were given access to English classes), and I saw people who had hearing loss or visual impairment.

'Arachne made us more aware of the needs of the beneficiaries. All of our training took place at Arachne's offices. We realised our team hadn't thought about people with disabilities, but Arachne asked us, do you know your audience? This was very positive for our work, especially as we wanted to produce some documentaries. They made us think for example about how to communicate clearly - we'll be using subtitles. And for the training they made us consider newly arrived people and how it would be helpful to meet them at the tube station. They are really good at thinking of the details. Arachne uses resources well. They divide the people, the staff and volunteers' time well. They're flexible, I started working on one project and then started developing new ideas. They started offering me a bit of help and now the project is flourishing.'

2.2.3. Information and advice

Arachne provide a wide range of advice on benefits and entitlements to statutory services, predominantly health services, but also social care and housing. They also provide support to complete forms for a range of applications from benefits to passports to university applications.

Table 5. Benefits received (between 1st June 2015 and 22nd January 2018):

Benefit	Amount gained for clients (annual equivalent)
Overpayment (excluded from total, see overleaf)*	-25.00
Income Support	3,177.20
Jobseekers Allowance (IB)	5,972.20
Housing Benefit	8,340.97
Council Tax Benefit	220.34
Incapacity Benefit	5,701.80
Disability Living Allowance	19,328.40
Disability Living Allowance - Care	10,122.90
Personal Independence Payments	254,635.22
Personal Independence Payments (mobility component)	13,208.25
Attendance Allowance	118,117.20
Carer's Allowance	6,800.10
Pension	30,353.92
Pension Credit	47,313.20
Retirement Pension	6,055.00
Child Benefit	7,982.84
Child Tax Credit	12,654.96
Working Tax Credit	13,398.84
Employment and Support Allowance	63,361.14
Cold Weather Payment	200.00
Total	£626,944.48

The database that Arachne uses has a system for calculating benefits or salary gained by clients. The database captures how much the client will gain and how regularly, from one-off to weekly to monthly. It then calculates how much the client will gain from the date of entry of the data until the end of the same financial year.

*One client was actually receiving more benefit than they were due, but Arachne were able to support the client to make a case for paying this back in small affordable payments rather than a lump sum.

Tables 5 does not reveal the full picture as it only includes data from those clients Arachne has been able to make contact and follow up with so far. In many cases decisions are still pending. More money would have been raised than shown here.

In addition, Arachne supported clients with other financial queries including overcharging for insurance or successfully claiming against insurance.

Table 6. Other financial benefits for clients:

Other financial benefits	Amount gained for clients (one off)
Water	70.00
Charitable support	1,720.00
Accommodation	2,350.35
Home insurance	3,000.00
Total	£7,140.35

Arachne also supported 84 clients with claims for Freedom Passes (free bus travel) and Blue Badges (free parking for people with a registered disability, saving them parking fees). So far, 45 of those claims have been successful. Further decisions are pending. As one client put it in the Arachne database ‘Now I have my Blue Badge and Attendance Allowance and have been given a new lease of life and my independence. I am so much happier.’

Respondents were really emphatic that the support received reduced stress. ‘You see people, you talk, you get out of the house’. There was mention of the need for help with form-filling for driving licences, pensions, tax claims, passports and benefits.

Respondents talked about the difficulty of accessing statutory services when you don’t know what exists. There was inconsistency in access to interpreting support with some hospitals offering it routinely and others not, making it hard to understand key information about health care without the help of groups like Arachne.

Table 7. Feedback from information and advice focus group:

Please say what best describes your opinion according to the following:	Strongly agree	Agree	Disagree	Strongly disagree	Other
Arachne enabled me to access the support of a range of local services	14				
Arachne enabled and assisted me to take up entitlements and/or additional benefits	12				4*
Arachne enabled me to improve my quality of life and to increase my participation in the local community	10				6**
I have developed social links and gained new or improved existing skills	16				
By using the services I have increased in self-confidence and self-esteem	16				
Arachne enabled me to reduce anxiety and stress	16				

* For some this wasn't needed

** Some felt too new to the service to comment but were optimistic that they would be helped

Respondents highlighted access barriers for people who struggled to articulate their needs.

'When you go to the GP you're not taken seriously but if you take a letter form Arachne it helps. I'd been losing my hair and went to the GP three times. I speak English but they paid no attention. The staff here write a letter explaining the problem and what actions we expect the GP to take and the psychological effect of it and asked for me to be sent to a dermatologist. I wouldn't have known that, the technical terms.'

Another respondent had needed support to challenge the decision made about their benefits. 'Arachne were crucial in solving this misunderstanding. His disability had got worse not better.' The organisation seemed able to help with a wide range of enquiries. Another respondent had arrived 15 years ago and not been to university. When their son was applying for university Arachne helped with the forms as the parent didn't know how to help.

'When you phone you know Arachne will help you with anything you ask - if they don't know how to help you they pass you on to someone who can.'

Feedback from information and advice focus group

Examples of services that beneficiaries were directed towards:

- ▶ A relatively new GP extended hours service offering early evening and weekend appointments,
- ▶ Recovery College and Camden and Islington College for training and support,
- ▶ Leaflets are always on display advertising local services,
- ▶ 'An ambulance service. I didn't know I was entitled to this',
- ▶ Other Arachne services that users hadn't previously known about.

2.3. Responding to changing demands

Internal monitoring systems

To ensure that work delivered was adapted to best meet needs, the team held monthly Management Committee meetings to monitor development of the project. Achievements were analysed and assessed for discussion at these meetings. Arachne set quarterly targets (within their annual targets) to ensure they were keeping on track.

By year two Arachne noted significant gains obtaining benefits, subsidies and hardship grants for beneficiaries. Challenging rejected Personal Independence Payments and Disability Living Allowance claims (all those appealed were fully or partially successful in year two) in many cases involved lengthy consultations with the service user to really unpick their needs. In year two they pursued 12 appeals for clients, none of whom would have pursued this on their own.

Beneficiaries' feedback

Where possible, beneficiaries are asked for their feedback on the support they have received. Feedback in the database from service users is all positive. Staff from Arachne follow up with beneficiaries to check that they had received the support needed and whether they had any comments.

Participants in training courses are asked to complete an evaluation form at the end of their training session. At present Arachne have not analysed the data as a whole, but they do analyse this data for each module to see if any improvements can be made to courses.

Most respondents in the focus groups could not recall being specifically asked for their feedback on services and how these were developed. However, all felt that their views were taken seriously and that they could talk to staff about anything, so they did state that if they wanted something specific or were unhappy with something, they would be comfortable in letting staff know.

Communication with partners referring clients

One partner noted it would be helpful for Arachne to let them know whether the clients they sent to Arachne actually attended the courses or not, so that either partner could chase up non-attendees if needed. It was acknowledged that time pressures made this difficult.

Changes made as a result of monitoring

Changes made to enhance delivery in year one included improving the organisation's IT capacity and setting up the AIMS (Accessibility Information Management System) database as a tool to better record and respond to users' needs.

In year two, based on feedback from training attendees, Arachne widened the range of courses on offer that support people in to work. For example, Health and Safety, Food Safety and Hygiene for Catering, Women into Construction, Level 1 Award in Working with Children, and interview skills. They used non-accredited courses to build beneficiaries confidence so that beneficiaries felt able to take part in the more formal accredited courses.

In year two Arachne aimed to specifically seek out those with protected characteristics such as LBT (Lesbian, Bisexual, Transgender) women, those on low income, those with disabilities, those in mixed race marriages to ensure that the organisation was reaching people with a range of vulnerabilities. However, respondents do not always complete this equality monitoring and it was not possible to track improvement.

In years two and three Arachne had hoped to extend their home visits for those who are housebound by training a team of volunteers. However, this turned out not to be practical as extensive training is required and a number of volunteers moved on to paid work. Home visits are carried out, but in general these are carried out by staff.

Staff and volunteers took part in training around supporting volunteers (to increase the organisation's capacity to support more volunteers and therefore more clients). The organisation providing the training noted that as a result Arachne reviewed their volunteer handbook and policies:

'Lots of groups take part and plan to make changes but they [Arachne] were one of the few that fully engaged. Arachne created a Volunteer Co-ordinator role and recruited a volunteer to do that. They were also one of only a few that signed up to and used the intranet system to share ideas and information with other organisations. They used it to offer places on their training and they also advertised those through the local voluntary sector e-newsletter to ensure that places were not left empty.'

Feedback from organisation that provides training around supporting volunteers

2.4. Reaching the most vulnerable

Arachne primarily work with Greek and Greek Cypriot women, many of whom face language and cultural barriers to accessing services and engaging with the wider community. They also sought to reach people from marginalised communities including; Lesbian, Bisexual and Transgender (LBT), those with limited income, those with limited English, people experiencing domestic violence.

The numbers of clients with a disability increased from 48% in year one to 54% in year three. The percentage of Greek and Greek Cypriot clients reduced from 81% in year one to 74% in year two as the centre increased in diversity. The main increases were in 'White Other' and 'White British'.

Arachne worked to build on their positive reputation, carrying out bi-lingual promotion in community radio, press, social media. They continually sought out new partnerships to support their clients, including with voluntary sector organisations, job centres and local councils. For example, working with organisations supporting people who are homeless; organisations providing training; a nutritional therapist, occupational therapist and an adoption worker; developing a heritage project looking at food, culture and health. The connections generally seemed to focus on what was needed by clients.

In particular, but not exclusively, attendees in the English classes noted the wide range of ethnic groups represented in these sessions. Stakeholders interviewed generally spoke of the warm welcome at Arachne making the service clearly open to all. However, some partners weren't aware that people of any ethnicity could use the service, and one wondered how language needs are met if beneficiaries don't speak English or Greek (Arachne later explained that they employ a number of strategies such as identifying other clients who may also speak that language, and encouraging the use of smartphone apps and tools such as Google Translate). Although it was difficult for stakeholders to know whether all protected characteristics were represented, there was evidence from the different client groups they represented that the reach of Arachne was fairly broad and inclusive.

One partner organisation mentioned that they could not see evidence of engagement with the LBT community. Although not all participants disclose their orientation or transgender status, there were clients who had disclosed this information to staff, but not for formal recording. The organisation aims to be sensitive to the needs of LBT people, one example of this is the centre's toilets are cubicles and not separated by sex.

Respondents in the information and advice focus group mentioned that it was great to meet people who spoke their language and understood their culture, but also that it was great that the organisation was open to anyone and that they could meet people from other countries and ethnic backgrounds.

2.5. Working in partnership

We spoke to 14 partners who had worked with Arachne in some capacity over the past two and a half years to support clients. These covered statutory and voluntary sector partners. Several had only worked with Arachne to support one specific client but others had been involved for longer or on wider-reaching activities such as research or courses. All partners felt the collaboration had worked 'well' (4) or 'very well' (10). They had found the group approachable, knowledgeable, person-centred, professional and generally easy to work with.

12 felt that Arachne were doing 'very well' in meeting the needs of beneficiaries with one feeling it was too early to comment and another stating that they had met the needs well. Again, comments focused on how patient and person-centred the organisation was, the importance of interpreting, cultural awareness and commitment of staff within Arachne. 13 felt that by working together they had been very successful in achieving the desired client outcomes with one respondent feeling it was too early to say. Having their own centre was seen as a real benefit in providing a place for activities to be carried out, but also a sense of community.

'Working together helped the client maintain her independence.' (member of local council staff)

'I'm happy to refer there as I know clients are happy with support.' (partner organisation)

11 felt that Arachne were meeting the needs of vulnerable clients. Three stated they weren't sure because of limited contact, or in one case because they wondered how well LBT beneficiaries might be supported. Those who felt Arachne meet these needs well cited the needs of those on low incomes, widows, older people, isolated people with less confidence, different ethnic groups, people with limited English. Many referred to the warm welcome and inclusive atmosphere fostered at the centre.

During the project Arachne continued to build their relationships with statutory and non-statutory services. They also took part in health and social care research projects with partners to increase awareness of their communities' needs.

What worked well

Partners and beneficiaries highlighted the commitment of the staff and volunteers, and the warm, 'homely' welcome at the centre. There was praise for the level of expertise within the staff team, and how they make time for clients. There was positive feedback on how staff communicated processes to beneficiaries and partners so that all parties expectations were managed, and that the most urgent tasks were prioritised appropriately and managed by the most appropriate partner where there was partnership working.

Partner organisations felt that Arachne was well-rooted in the community (though had slightly different definitions of the community served). Both a beneficiary and a partner talked about the pace at which Arachne were able to make things happen. One partner found Arachne's non-competitive approach refreshing and felt this made it easy to work with them in partnership as they were clear about their common goals and what each partner could do for the benefit of the beneficiaries. They did feel this could be formalised. The benefit of having a community space was also noted, and that Arachne were prepared to offer this space to other partners to support the work of both parties.

Influencing partner organisations - improvements for the whole community

Four of the partners interviewed said that their practice had changed as a result of working with Arachne. These changes included a safeguarding review into supporting clients experiencing domestic violence, working in a more personalised way, considering participants' varied access needs, and desires for self-development, and improvements in local schools tailoring their support to children from migrant families.

2.6. Social return on investment - a summary of the impacts

As well as the personal financial gains to clients of finding employment and accessing benefits to which they were entitled, beneficiaries and partners reported improved well-being.

Training opportunities offered attendees a chance to meet others, share experiences, and feel connected. Clients reported these sessions have a huge impact on their confidence and their attitude to the future, making them feel that there were opportunities open to them. The flexibility of this offer was really appreciated, meaning that those who may miss a class did not fall behind.

Some partners highlighted that by working with Arachne beneficiaries received help more quickly, or received help they would otherwise have missed out on because of language and cultural barriers, with statutory services less geared up to personalised support like that offered at Arachne. For example, a client re-united with a child given up for adoption had approached adoption services years earlier for support but was only successful with the intervention of Arachne. Other clients had been completely unaware of benefits they could claim, or how to get started with looking for a job until Arachne offered them support.

The organisation has expanded the volunteering programme to reduce the isolation of those taking part. Many were unable to take part in paid employment because of caring commitments, but this hands on experience keeps them connected until they are able to work again.

The project budget was £121,000 a year. Arachne brought in more than this to beneficiaries in welfare benefits alone. They brought client further resources in the form of paid work, blue badges and freedom passes.

As well as making clients more aware of how to manage their own health through walking groups and cooking sessions, they raised clients awareness of a range of statutory services, and enabled clients to exercise choice when accessing these services.

The staff commitment to their clients was valued by everyone that we spoke to and evidenced through the extensive feedback in their AIMS database.

Recommendations

- ▶ **Raise Arachne's profile within the local voluntary and statutory sectors, highlighting what the organisation is working to achieve:**

Stakeholders felt this would make it easier for them to direct clients to Arachne and to make colleagues aware of Arachne's services. One stakeholder would like to invite Arachne to a staff meeting so colleagues were aware of their service, another suggested finding time to meet informally and discuss potential opportunities including funding opportunities and a third suggested the organisation needed to do more to raise its profile within the local voluntary and statutory sectors.
- ▶ **Be clearer about who can benefit from Arachne's services:**

Some partners did not know that men can ask for support and so can non- Greek/Cypriot communities. This could be emphasised more strongly, though it does take time for the message to get around. One respondent suggested changing the name from Arachne Greek Cypriot Women's Group to Arachne. It would be worth spending some time thinking about the target audience and then the name.
- ▶ **Create a more defined reception area and make external signage clearer:**

One partner suggested name badges identifying staff and volunteers could help some beneficiaries, particularly the first time they visit. It was also felt that beneficiaries should be moved in to confidential private meeting spaces more quickly, before conversations start.
- ▶ **Make time to discuss joint funding bids:**

Several partners felt it would be useful to make time to consider organisational priorities and whether joint funding bids could be explored.
- ▶ **Formalise established partnerships:**

Some partners were keen to make the positive working relationship slightly more formal. This wasn't a criticism of the organic way in which joint working had started, but recognition that in order to grow a Service Level Agreement may be helpful.
- ▶ **Consider starting any external evaluation from the start of projects**

Arachne held a lot of valuable data about the benefits of their work for their beneficiaries. However, with the many pressures of day to day work, evaluation had not always been prioritised. Considering this at the start of projects, and integrating the gathering and recording of feedback into day to day work would make evaluation easier.

Another partner wondered if the centre would be able to invest in some transport for attendees, such as a mini-bus.

Of course, we also asked beneficiaries what would make services better. They emphasised how much they appreciated staff and how happy they were with the support provided. In one focus group respondents felt it 'would be sinful to suggest any improvements when we have had such positive support'. There were high levels of satisfaction. Most wished that more courses could be provided but understood that funding was not infinite. Further comments included a suggestion to make the walking class longer than 8 weeks and it may make it easier to maintain the walking once the course ended 'once you've started to feel the benefits'.

Appendix

Stakeholder interview template

Stakeholder interview

Interview date and time

Introduction

Arachne commissioned HWI to carry out an independent review of their project: Building and sustaining bridges of inclusion. They want to evaluate the impact of their work and the processes that they used. As such they have asked to speak to key partner organisations and beneficiaries.

This feedback will help them to build an evidence base to inform the development of the project and application for continuation funding and to better understand the strengths and weaknesses of the project.

There were three areas to the work:

1. Employment and training, including ESOL, IT CV building, Sign Language, Information advice and guidance on opportunities, sewing class (this list is not exhaustive)
2. Health and well-being including health advice, Greek dance, Keep Fit, Oral History, Health events, Iconography, Carers Group, Good Neighbours Scheme, Interpreting and Advocacy for health services
3. Information and Welfare Advice including information on benefits and welfare, advice on challenging decisions, information about rights to reduced council tax, different energy suppliers, blue badges etc.

The aims of which were to: increase social, financial and civic engagement of participants, improve participants' mental and physical well-being, and to increase confidence, self-esteem and resilience.

Everything you say is confidential (unless you told us something that suggested an individual's safety was at risk). We will write up a summary of the views expressed but remove information which may identify you. The report will be shared with Arachne, potential funders and may be made publicly available.

You may not be able to answer every question.

Are you happy to take part?

Background:

Check the person's name position and the organisation they are working for but note this on a separate sheet for anonymity.

Main beneficiaries of the partner organisation:

Questions:

1. There were three areas to the work: Employment and training, Health and Information and Welfare Advice. Which of the three areas were you working with them on? (tick all that apply)

Employment and training	Health	Information and Welfare Advice

- 1.1. Were you aware of all three of these areas of work?
1.2. Would this have been helpful/ Was this helpful?
1.3. Were others in your organisation also aware of Arachne?

2. How well did Arachne meet the needs of the beneficiaries?

Very	Well	Not very

Please could you give us an example

3. How successful was the area of work project in meeting the outcomes:

increase social, financial and civic engagement of participants, improve participants' mental and physical well-being, and to increase confidence, self-esteem and resilience.

Interviewer note: Respondent may not be able to answer for all criteria. There is some overlap between categories.

Very	To some extent	Not very

Social financial and civic engagement
beneficiaries participating develop social links and gain new skills, beneficiaries gain new (or improve existing) qualifications, beneficiaries will progress into further training or education, beneficiaries will gain voluntary work experience or gain employment, beneficiaries will increase their access to services locally, beneficiaries report additional take up of benefits and welfare, beneficiaries improve their participation in local community.
(please give one or more examples)

--

Participants physical and mental well-being
Beneficiaries will improve their health by participating in health-related activities such as giving up smoking, exercise, healthy eating (especially in relation to specific conditions), beneficiaries will report less anxiety and stress, report reduction in medication or improved coping strategies
(please give one or more examples)

Participants confidence and self-esteem
beneficiaries will increase their access to services locally, beneficiaries report additional take up of benefits and welfare, beneficiaries report improved coping strategies
(please give one or more examples)

4. Was Arachne able to reach and support the most vulnerable clients?

Interviewer note: Arachne had specified that they would try to reach a diverse audience which could include: single parents, lesbians, people in racially mixed marriages, people on low incomes, people with mental or physical disabilities, people with language needs.

Yes	No	Not sure

Could you give examples of this?

5. Did your organisation's policy or practice change as a result of working with Arachne?

Yes	No

Please could you give an example?

6. If you worked together again is there anything you would do differently?

In particular to have a greater impact or to be more efficient? Any learning?

7. How well did you feel Arachne collaborated with your organisation?

Very well	Well	Not well

Please could you tell us a bit more

8. Is there anything else you would like to add?

A large, empty rectangular box with a thin black border, intended for the user to provide additional information or comments.

Beneficiary focus group template

Beneficiary focus group - Health and well-being

17th January

Introduction

Arachne commissioned HWI to carry out an independent review of their project: Building and Sustaining Bridges of Inclusion. They want to evaluate the impact of their work and the processes that they used. As such they have asked to speak to key partner organisations and beneficiaries.

This feedback will help them to build an evidence base to inform the development of the project and application for continuation funding and to better understand the strengths and weaknesses of the project. They want to know what worked well and anything that could be improved to help other people in future.

There were three areas to the work: Employment and training, Health and Information and Welfare Advice. You may have used more than one.

In this group we will be focussing on Health /Υγεία - Health events, networking activities, Keep Fit, Choir, Iconography, Greek Dance, Health advice, Oral History Project, Carers' group, Good Neighbour scheme, Interpreting & Advocacy etc

π.χ. εκδηλώσεις Υγείας, δραστηριότητες δικτύωσης, Γυμναστική, Χορωδία, Αγιογραφία, Ελληνικός Χορός Συμβουλές Υγείας, Πρόγραμμα Προφορικής Ιστορίας, Ομάδα Φροντιστριών, Πρόγραμμα Καλής Γειτονίας, Μετάφραση και Συνηγορία κλπ)

Everything you say is confidential (unless you told us something that suggested an individual's safety was at risk). We will write up a summary of the views expressed but remove information which may identify you. The report will be shared with Arachne, potential funders and may be made publicly available.

Note: Reassure participants that their feedback is anonymous and won't be taken personally. It's to develop services and it's OK to suggest things that could be improved.

Thank you for taking part in Arachne's services and for taking time to take part.

Are you happy to take part?

1. Which of the three areas did you get involved with? (tick all that apply)

Respondent	Employment & Training / Απασχόληση και Εκπαίδευση	Health /Υγεία	Information & Welfare advice/Πληροφορίες & Συμβουλές Πρόνοιας
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

1.1. (If applicable) Were you aware of all three projects?

1.2. (If applicable) Would this have been helpful/ Was this helpful?

2. Benefits of the support

Please say what best describes your opinion according to the following:	Strongly Agree Συμφωνώ Πολύ	Agree Συμφωνώ	Disagree Διαφωνώ	Strongly Disagree Διαφωνώ Πολύ	No response Δεν απαντώ
I have improved my physical health and psychological wellbeing by participating at Arachne's activities					
I have improved my health by participating Arachne's regular health related activities e.g. stop smoking, exercise, healthy eating					
Arachne enabled me to reduce anxiety and stress					
Arachne enabled me to reduce my reliance on medication and/or develop better coping strategies					
By using the services I made new friends and became more active.					
If you ticked 'Strongly Agree' or 'Agree', please tell us about the skills you learned If you ticked 'Disagree', please tell us what was missing, what would have helped.					
1					
2					
3					
4					
5					
6					
7					
8					

Please say what best describes your opinion according to the following:	Strongly Agree Συμφωνώ Πολύ	Agree Συμφωνώ	Disagree Διαφωνώ	Strongly Disagree Διαφωνώ Πολύ	No response Δεν απαντώ
9					
10					
11					
12					
13					
14					
15					
16					
Any themes					

Please say what best describes your opinion according to the following:	Strongly Agree Συμφωνώ Πολύ	Agree Συμφωνώ	Disagree Διαφωνώ	Strongly Disagree Διαφωνώ Πολύ	No response Δεν απαντώ
I have developed social links and gained new or improved existing skills.					
By using the services I have increased in self-confidence and self-esteem.					
Arachne enabled me to be more involved in in my community and become more independent					
Arachne enabled me to access the support of a range of local services					
Could you tell us a bit more about why you gave that answer.					
1					
2					
3					
4					
5					
6					
7					
8					
9					

10	
11	
12	
13	
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15	
16	

3. Were you involved in developing the project at all?

	Yes	No	Not sure
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

4. Were you asked for your feedback on the service?

	Yes	No	Not sure
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

Any comments on this

5. Did you see how this feedback informed the service?

	Yes	No	Not sure
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
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14			
15			
16			

Any examples

6. Was there anything that they could have done differently when supporting you?

	Yes	No	Not sure
1			
2			
3			
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11			
12			
13			
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16			

7. Were they able to direct you to other helpful organisations (or liaise with other organisations on your behalf)?

Prompt for evidence

[Empty rectangular box for notes]

8. Is there anything else you'd like to add?

[Large empty rectangular box for notes]

Equality Monitoring

Age/Ηλικία	0 - 24 years	25-64 years	65+ years	
Disability/Αναπηρία	Yes/Ναι	No/ Όχι		
Ethnicity/Εθνικότητα	Greek/Greek Cypriot	White/Any other white	Mixed/Multiple ethnic group	
	Asian / Asian UK	Black/African/Caribbean	Other ethnic group/Arab	
Other-specify				
Religion /Θρησκεία	No religion	Christian	Buddhist	Hindu
Jewish	Muslim	Sikh	Other religion	
Sexual orientation Σεξουαλικός προσανατολισμός	Heterosexual		Lesbians, gay men or bisexual people	

Beneficiary focus groups schedule

Theme	Date
Learning and development	10 January
Health and well-being	17 January
Employment	23 January

healthwatch
Islington

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