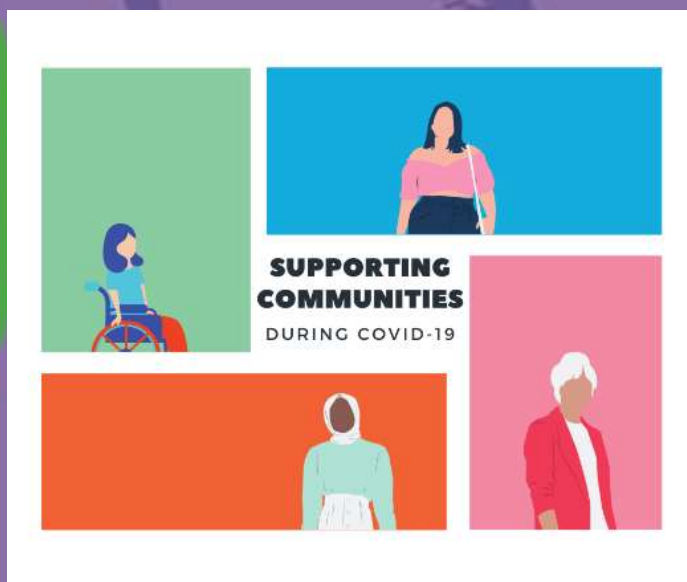


June 2020

# Impact of Covid-19 on the Women's Community Sector Survey Results



## Introduction

Established in 1973, the National Women's Council of Ireland (NWCi) is the leading national women's membership organisation in Ireland. NWCi seeks full equality between men and women and we draw our mandate from a membership of over 190 groups and organisations across a diversity of backgrounds, sectors and locations. Many of our members are from the Community & Voluntary Sectors.

This work is kindly supported by the Department of Rural and Community Development through the Scheme to Support National Organisations (SSNO) administered through Pobal.

## Womens Community Sector

The women's sector in Ireland, through women's community education and community development processes, has long been a response to structural inequalities, under investment and social exclusion. Women's community organisations enable women to participate, they provide advice and counselling, peer support, access points for education and training and they help women experiencing domestic violence. The development and support for the sector is essential to the wellbeing of society and is an important part of the wider women's movement in Ireland today.

Ensuring that the voices of women are heard in decision making and that their participation is supported and resourced at local level is key to tackling gender inequalities from the ground up. The role of women's groups is crucial in supporting the participation and activism of women from different backgrounds into political and public life. A well-resourced and independent women's community sector will ensure that women most distant from decision making processes can engage meaningfully.

These are a diverse range of organisations and groups. There are a number of funded programmes delivered through Local Development Companies and Family Resource Centres that engage with women. The National Collective of Community Based Womens Networks (NCCWN) is one legal national entity with 17 branches throughout the country supporting women. There are voluntary umbrella organisations including the Irish Country Womens Association. There are local, regional and national networks that support and work with women from minority ethnic backgrounds, Traveller and Roma women, disabled women, women in rural communities, older women, lone parents, and women experiencing homelessness, mental health issues, domestic violence and addiction. There are many informal, women's groups operating on a voluntary basis around the country.

The funding comes from a variety of sources including; a range of government departments, Local Authority funding, Philanthropic funding, EU grants, Education and Training Board, fundraising and social enterprise activities. During the current crisis, organisations should be facilitated to redirect funds to where they are needed to respond to organisational gaps in IT systems and building staff capacity, responding to emerging needs and increasing demands. Flexibility is also required in relation to meeting yearly targets.

In wider society, there is a need to increase investment to provide effective and sustainable public services and infrastructure for all. Ireland has a devastating housing crisis, a two tier, struggling health system and underdeveloped care provision disproportionately relying on the underpaid work of women. The impact of these inequalities fall most heavily on women in our society and on those most marginalised. Our collective response to the Covid 19 pandemic shows that Irish people are deeply committed to caring for each other and concerned for the well-being of all. It is important for our recovery from this crisis, that this commitment is reflected back in sustainable core funding and support for advocacy, analysis and collective action for women's community organisations.

The Covid 19 pandemic and the response by women's community organisations clearly shows the importance of their role. Many of our member organisations have responded in innovative ways to a multitude of complex and increasing needs including the welfare of staff. Their work during Covid-19 has included reaching out to combat social isolation and mental health distress, moving programmes and supports online, organising and delivering vital supplies to many families across the country and providing emotional support to women. They have contributed to local planning and development of responses in a robust and effective manner in partnership with state agencies.

## Summary of survey findings

NWCI conducted a survey over three weeks in June to capture the impact of Covid-19 on these organisations during these unprecedented times. Forty-two organisations took part. We have convened a Womens community sector working group to support the sustainability of Women's Community Development Organisations to advance marginalised women's equality.

- 63% of respondents were based in an urban area and 37% were based in a rural area.
- 25% of respondents have seen a reduction in donations and earned income.
- Less than half of respondents felt that funders have been understanding about the impact of the crisis on meeting targets and outcomes.
- Half of respondents had seen an impact on staff wellbeing
- Almost all respondents have developed innovative responses to support their staff and teams
- Over half of respondents have been able to continue to deliver some regular services and programmes
- One quarter of respondents has been unable to continue to deliver regular services and programmes

## Detailed survey findings

### Impact on staff

The most prominent issue for staff was the necessity to move work on line and work from home. This issue was exacerbated by having to juggle home schooling and caring responsibilities sometimes without adequate IT systems and broadband. Lack of capacity among workers and adequate funding to move services and programmes online was also identified as an issue. Staff have felt overwhelmed at times. Some staff hours were reduced.

“Working from home has its challenges especially when people do not have childcare. People feel that they are always on duty- boundary blurred between home and work life.”

“Physical issues associated with home working, inability to work with people in the way we want to and enjoy, anxiety about the uncertainty of everything from a work planning perspective, family wellbeing, and possible financial insecurity”

In response to concerns for staff wellbeing, organisations put in place a number of measures to support their staff including;

- Regular check ins and updates
- Listening meetings
- Flexibility around delivery of work and an understanding approach around managing childcare
- Access to wellbeing programmes including counselling and holistic programmes
- Sharing resources
- Peer support including online informal chats
- Covid health and wellbeing policy developed for staff

### Uncertainty about the sustainability and viability of organisations

Prior to Covid-19, the women’s community sector was underfunded and had not recovered from the most recent period of austerity. The majority of respondents are concerned about the future sustainability of their organisations. Organisations want to open their doors again and bring people together again but need support to do this in a safe way. They anticipate greater costs in relation to signage, equipment and the need to hire spaces that can facilitate social distancing.

*“DV team working with vulnerable clients (women & children) have greater stress levels due to exacerbated physical and mental well-being of clients. All staff are generally anxious about what is going to happen, will there be jobs post covid or is the sector going to succumb to wider budget cuts”*

### Digital divide

Many respondents reported issues with the women and families they work with not having broadband or devices to facilitate their engagement and provide support online. Access to technology and IT literacy was compounded for many communities during the crisis without broadband and with financial constraints. Many women have

a lack of knowledge, access to Wi-Fi and IT hardware to enable them to engage, in some cases the use of mobile phones can make some tasks very challenging. Organisations continued to provide emotional support through phone calls, texts and letters. Wellness groups for women living in direct provision have not been able to happen online due to the lack of space and privacy in accommodation centres and access to technology. There is a concern that relationships and trust that has taken time to build will be lost without the physical and face to face contact.

### Visibility of the work of organisations

Respondents shared incidences where their work was being profiled in local and national media for example highlighting women making masks to keep people safe in local communities. Traditional media and local press have played an important role to inform women about local supports available. Organisations are using Facebook, YouTube and other social media platforms to share the work they are doing, they have also created private groups to offer an alternative of bringing women together. Some organisations were part of the Department #StillHere campaign and the Community Champion initiative.

*“Our community education group had to stop mid way through their course however, they used their new skills during lockdown to make cloth face masks which they donated to all voluntary and community organisations working with the most vulnerable and also for local nursing homes and carers.”*

### Responding to emerging needs

Local women’s groups found new ways to support women positively, including being a vital source of accurate public health information.

*“delivering new services such as food supplies and parcels to older persons and vulnerable women and families”*

*“I feel this experience should motivate us to strongly demonstrate how crucial our supports are to women and families and the most marginalised communities”*

A number of respondents are delivering new services including

- Online therapies
- Delivering resource packs to members of the community cocooning
- Delivering activity packs to children and young people
- Developing targeted vital public health information including printing and translating and making health and safety videos where mainstream health promotion materials would fail to reach
- Producing podcasts and organising webinars
- Making masks and PPE
- Carrying out surveys on the impact of Covid 19 on women’s lives

*“Most of our services have now moved online. Some of our groups have continued to meet on zoom. While people could normally drop into the centre, we now offer that*

*on zoom 5 days a week. We run regular quiz's and talks. Also while we have a facebook page for the organisation, we set up a private page where community members can interact with each other. This has proved very popular. Our services are being used more regularly by women in other parts of the country."*

### **Impact on women and families**

When asked, organisations identified a number of issues

- Loneliness and isolation  
Many groups older and younger are missing the routines, they are missing the one to one support and human contact which is challenging to replicate in a virtual space. Women living in direct provision are further isolated from the community, many are fearful for themselves and their children and spent most of the time during lockdown in their rooms.

*"Sense of isolation for elderly and single people living alone. Missing out on social side and support of meeting others with similar medical conditions. Concerns around travel to hospital appointments. Concern around picking up COVID from visiting hospital."*

*"Some of our volunteers are of a senior age group who have felt isolated and of little value to the community"*

- Women experiencing violence.  
Social isolation measures placed women in even more vulnerable situations. Coercive control has intensified when women are at home with their abuser and do not have regular interaction with other people. Financial abuse may also intensify if women do not have access to independent income. One service said that they had no Traveller women use their service during the lockdown. This was concerning as Traveller projects were reporting an increase in domestic violence. Delivering the refuge service was challenging in relation to children being able to play together.

*"you can't go out, you must stay away from children, its your fault I'm not working".*

- Unmet health needs  
The fact that cervical check screening was not taking place was a huge concern to women.  
*"The people we provide services for are deteriorating in their condition. The clinic appointments are delayed causing stress, fear and uncertainty."*
- Financial worries and unemployment



Concern for women from minority ethnic backgrounds and how the sectors that they work in will recover. There is a lot of fear and uncertainty for the future.

*“Financial stress for some people with job losses and social welfare concerns.”*

- Compounding existing mental health issues  
Women are struggling to manage their own anxieties as well as trying to support their children and other family members who may be struggling. Ways should be explored in the future if we were to experience this type of crisis of continuing to maintain physical contact for marginalised women with substance abuse issues for example.
- Women experiencing significant inequalities including very challenging family circumstances, for example woman living with substance misuse. The lack of drop in centres has really affected women living with mental health issues and for social support as part of their routine. The lockdown removed all their physical supports and outlets from damaging home environments.
- Women parenting alone have found themselves in a very precarious situation, without the fallback of friends and family and no childcare available. Sometimes they were living in overcrowded accommodation with little space for everyday family activities.
- Women living in direct provision very fearful for their health and that of their children’s experiencing extreme isolation to try and protect themselves.
- Stress on women and families living in the border counties where there were differences in guidelines and restrictions from the two jurisdictions.
- Traveller and Roma women are one of the most impacted groups during Covid – 19. They experience chronic health conditions that put them at greater risk. They also experience poor living conditions including overcrowding and limited access to basic facilities like toilets and running water. School closures and the removal of all educational supports has widened the educational inequality gap.

*“levels of stress, mental health and VAW increased, groups vulnerable to Covid-19 due to poor levels of health, and social indicators of health eg poor / overcrowded accommodation, low literacy levels; difficulty managing 2 weeks social welfare money, unemployment, social isolation and lack of facilities to isolate, wash or have proper sanitation”*

### Space for advocacy and participation

*“ensure that community development and advocacy for women are at the forefront of policy”*

Many organisations have worked tirelessly to raise issues affecting the communities they work with decision and policy makers. There is scope to continue to build on and engage women's groups more directly and formally in recovery plans at a local level. The responses being led by women in local communities that are informed by equality and social justice principles must be valued, their decision making and participating crucial, as we chart our way out of this and ensure a just recovery.

*“There needs to be much more recognition of the work delivered at local level. The government gets exceptionally good value for money in the small budgets these community groups receive. There needs to be a better value placed on these services and the burden of work placed on the shoulders of the staff. A heightened awareness campaign would be a start to acknowledge the amount of work done by these women's groups.”*

### **Recommendations**

1. Protect core funding for the women's community sector
2. Provide additional flexible programme costs to support organisations whose income has decreased and demand has increased
  - Resource technology deficits in organisations
  - Provide resources to organisations to provide safe and secure technological supports to women and families so they do not face additional isolation as we move out of the crisis
  - Provide programme support to enable organisations to respond in new ways and to meet public health regulations
  - Supports for counselling services
3. Introduce multi-annual funding for independent community education and community development organisations working with communities experiencing poverty, inequality, discrimination and social exclusion.
4. Collecting gender and ethnicity disaggregated data across relevant services to ensure the delivery of targeted and relevant supports.
5. Ensure women's groups are participating in all local decision-making structures
6. Continue the collaborative and cooperative approaches between state agencies and women's organisations to prioritise culturally specific needs of Traveller and minority ethnic women and disabled women.

### **Contact**

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