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**Calderdale Women's Centre**  
**Evaluation Project**

**Evaluation Report**

**November 2005**

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## **Acknowledgments**

Our thanks to all the women – the users, workers and volunteers of Calderdale Women’s Centre – who filled in questionnaires, agreed to be interviewed, met with us, answered our e-mails and phone calls, and shared their experiences with us.

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## **SECTION 1: EVALUATING CALDERDALE WOMEN'S CENTRE**

### **Introduction**

Women's Centres are an important legacy from the feminist movement of the 1970s. During the years before the Conservative election victory in 1979, the political and fiscal climate, particularly at local government level, enabled the establishment of women's centres (or well-women centres) in many UK towns and cities. During the 1980s, funding for these centres became increasingly difficult to attain or maintain and, by the end of that decade, many had closed or reduced their capacity to a bare minimum of mainly voluntary services.

Calderdale Women's Centre (CWC) grew directly from the Calderdale Well-Woman's Centre, which was based in Harrison House on Harrison Road and had survived the adverse climate for such centres to still be providing mainly volunteer and health-related services into the new millennium. CWC has developed and expanded its services during a period when few other surviving centres have been able to do so, mainly as a result of assiduous and forward-thinking funding applications and partnership working, particularly with health, local authority and law enforcement agencies. In 2004 – 2005, the Centre received funding from 15 separate sources, the amounts ranging from £5,000 per year from Calderdale Teenage Pregnancy Strategy to £986,000 over 5 years from the New Opportunities Fund (NOF).

In 2003, the Centre moved into larger premises in the centre of Halifax after securing the grant from the NOF, and at the same time, the number and range of employed personnel was increased. Volunteer workers (of which there were 54 during 2004/05) add a great deal of value to the work of the Centre overall, and play a key role in some CWC services, notably the Drop-in and the Counselling Service. Calderdale Women's Centre is thought to be the largest women's centre in the UK at the present time.

The Centre provides a range of services, most of which are linked to its specific short or medium term funding arrangements with various agencies. Current services focus on counselling services, learning and skills and a broad and complex range of support for women and children experiencing domestic violence. There is also a non-specific daily drop-in, free pregnancy testing, a crèche to support Centre activities, and outreach activity in both the St. John's area and Todmorden. A busy Advice and Guidance Service closed due to the end of its funding contract in June 2005.

Activity in all service areas is subject to the ebb and flow of funding and many paid posts are part-time and short-term. Nonetheless, there is a relatively constant availability of support for women in Calderdale in Halifax town centre during the working week. As a result, there is a huge throughput of users: there were *at least* 8,000 usages of the Centre by women and children in 2004-2005 (figures based on CWC Annual Report 2004-2005). As will be seen later in this report, some usage is short-term and/or light whilst other women use the services intensively and/or over longer periods of time.

## **The Evaluation Project**

This evaluation was carried out from May to November 2005 by two researchers from the University of Huddersfield following a tender process initiated by the CWC. The aims of the project were:

1. To investigate the extent to which current services and support meet the needs and expectations of service users.
2. To investigate the extent to which current services and support meet the needs and expectations of volunteers.
3. To explore how the service impacts on the wellbeing of service users and volunteers.
4. To explore how the service enhances sign posting to other agencies, uptake of other services and awareness of rights and opportunities.
5. To make recommendations based on data on how service development may improve the experience of service users and volunteers.

## **Methods of data collection**

The main methods of data collection agreed in the tender contract were a questionnaire to be followed by semi-structured interviews.

In order to develop and administer these appropriately, the researchers interviewed all CWC heads of service and read relevant reports and documents in order to understand the range of activity and the organisation, its culture and ways of working. They also spent time in the Centre to supplement the knowledge gleaned from these sources by first hand experience of the CWC. Definitions (e.g. of users, volunteers, student placements and paid workers) were agreed (see Glossary of Terms).

The issues of accessing a full range of users (e.g. geographical location, ethnicity and language, literacy, safety of women around domestic violence issues) were discussed

and plans formulated accordingly e.g. CWC outreach workers ensured distribution to women in their areas, and both an Asian worker and volunteer took time to help women whose first language is not English to complete the questionnaire, if they so wished.

A number of briefing sessions were held with staff and volunteers to clarify the project, and posters placed in all areas of the Centre to keep users abreast of what the project was doing (these were changed on a monthly basis – see Section 6).

The draft report was sent to the CWC Heads of Services in October 2005 and a reflective discussion held with them the following week to enable their understanding of the data and insights deriving from that to inform this final report.

### **Ethical issues**

The University of Huddersfield's School of Human and Health Sciences Research Ethics Panel gave approval for the methods chosen, tools used and information produced for users. Anonymity for those completing questionnaires and giving interviews was a key issue, as well as the safety of respondents with respect to domestic abuse. Those respondents agreeing to be interviewed were given the option of how they could be contacted (letter, phone, mobile, e-mail) and where and how they wanted to be interviewed (in person, by telephone, by e-mail). A few details in the interview section have been altered to protect anonymity, though the meaning of what was said has been preserved.

Respondents were able to leave any part of the questionnaire blank (and some did so) and interviewees were told that they could choose not to answer any question they preferred not to (none did). Those who had initially volunteered to be interviewed were able to change their mind when invitations were sent or they were telephoned. The two researchers carried out all interviews and only they knew the identities of those they interviewed.

## **SECTION 2: THE QUESTIONNAIRE AND ANALYSIS**

The questionnaire was developed following interviews with all heads of service at Calderdale Women's Centre (CWC) during May 2005. The aim of these interviews was to understand the range of services provided by CWC, and heads of services' perceptions of the impact and interactions of these with other services and agencies. The questionnaire was developed from these interviews. It was distributed to all heads of services for comments and content amended accordingly. It was then piloted with 6 users of the various CWC services and further changes made to wording and order to ensure ease of completion and minimise repetition. The questionnaire is included in Section 6.

From June 2005, 250 questionnaires were distributed either directly by the individual CWC services to their clients (by post or in person), or informally by leaving them in public areas in the Centre and by volunteers at Drop-ins. Most questionnaires were distributed through the latter means.

A series of notices were put up around the Centre to tell users about the survey and to encourage them to take a questionnaire to complete. A collection box was left in the entrance area for completed questionnaires to be posted in and stamped addressed envelopes were also provided, giving users a choice of how they could return them.

Return was initially slow and the questionnaires left in the CWC were often covered with magazines, or their backs used for writing notes, and the self-addressed envelopes were detached and disappeared. The researchers made regular visits to the CWC during June and July to ensure the questionnaires were visible, complete and intact, and to talk to users and volunteers encouraging them to complete and return them. This led to a steady return of completed questionnaires during July and August.

By September 2005, 59 (24% of those distributed or left in public areas of CWC) completed questionnaires had been returned and the data collected is presented in the rest of this section (pages 9 - 25). This return rate is well within that expected from questionnaires (Parahoo, 1997), especially given that most of these were simply left for people to take and complete rather than being directly mailed or given out. It is difficult to know how representative the respondents are of the wider population which uses the CWC, but the data collected appears to show a broad range of respondents in terms of age, ethnicity, service use, length of use, and area of abode.

## **Part 1: CWC services.**

### **1. How did you find out about Calderdale Women's Centre (CWC)?**

Friend/family	13	(22%)
Other CWC user	5	(8%)
Health professional	14	(24%)
Police/probation service	9	(15%)
Leaflet/poster	6	(10%)
Citizen's Advice Bureau	1	(2%)
Age Concern	0	(0%)
Social worker	2	(3%)
Other (please state)	12	(20%)
TOTAL	62	

(Above percentages are of 59 respondents<sup>1</sup>)

**Comment:** 4 users mentioned more than one source and 1 gave no answer. The other sources of initial information were a newspaper advertisement for a course, the YMCA, a youth worker, Calderdale College tutor, a solicitor, Children's Services, a school newsletter, and working as a Millennium Volunteer. Four respondents who ticked "other" did not specify any source.

The close working relationship between CWC and local health services appears to be extremely beneficial and may warrant further specific evaluation and development.

### **2. How long have you been coming to/using Calderdale Women's Centre?**

Less than 3 months	15	(26%)
Between 3 months and 1 year	20	(34%)
Between 1 and 3 years	18	(31%)
More than 3 years	4	(7%)
TOTAL	57	

(Above percentages are of 57 respondents)

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<sup>1</sup> All percentages presented are to nearest whole figure.

**Comment:** Two users gave no answer. The answers to this question suggest that a steady flow of new users access the CWC and that use continues over the medium to long-term. The nature of this use can be seen in the responses to Q.5.

### 3. What was your reason for FIRST coming to/using Calderdale Women’s Centre?

For advice or information about something	12	(20%)
For training or to attend a class	8	(14%)
For counselling	17	(29%)
To attend the drop-in	11	(19%)
For a pregnancy test	0	(0%)
To attend a meeting	3	(5%)
For an open day or event	1	(2%)
For help around domestic violence	14	(24%)
To volunteer	7	(12%)
For a student placement	0	(0%)
Other (please state)	2	(3%)
TOTAL	75	

(Above percentages are of 59 respondents)

**Comment:** 9 respondents gave more than one answer. The other reasons mentioned were “to find sanity” and “to have a look around”.

The answers suggest that the main service areas engage women to a similar degree. Open Days and special events appear not to be important in bringing in new users, rather the first access is for a specific purpose, particularly for help and support (e.g. domestic violence, counselling).

More extensive publicising of the pregnancy testing service may bring younger women to the CWC in the future. On the other hand, users of this service may not have completed questionnaires as they only use that service. Centre staff commented that these contacts are very short lasting and users rarely return. Evaluation work by Calderdale Teenage Pregnancy Strategy around this service may elucidate this point.

There may also be scope for bringing more women to the Centre for courses. Issues of marketing were frequently mentioned in both questionnaires and interviews and are discussed more fully in Section 4.

#### 4. How do you normally travel to Calderdale Women's Centre?

Car	21	(34%)
Bus	22	(36%)
Walk	17	(28%)
Train	1	(2%)
TOTAL	61	

(Above percentages are of 61 travel modes)

Mainly phone contact or outreach group                      9 (15% of 59 respondents)

**Comment:** There appeared to be no difference in how users reached either the Silver Street Centre or outreach activities. Some users vary between using the bus and walking to Silver Street. The distance from the Halifax train station compared with its proximity to many major bus routes probably accounts for the relative unpopularity of trains as a means of transport. Some telephone users had no travel method as they did not use the Centre other than through telephone contact.

**5. Please tick all the services you have used since coming to/using Calderdale Women's Centre**

Advice and Guidance	29	(49%)
Learning and Skills	11	(19%)
Domestic Violence Support Service	15	(25%)
Drop-in	24	(41%)
Counselling	23	(39%)
Crèche	8	(14%)
Volunteering	6	(10%)
Pregnancy testing	2	(3%)
Other (please state)	10	(17%)
TOTAL	128	

(Above percentages are of 59 respondents)

**Comment:** The 59 respondents gave a total of 128 uses of services, again fairly evenly distributed over the main service areas, though Learning and Skills may be used less often than other services. The Advice and Guidance Service had ceased just prior to the distribution of the questionnaire due to the end of its funding contract and it is unclear how this will impact on use of the CWC and its other services, given that users presumably will still want to access advice and information.

The other services mentioned were a jumble sale, the CWC Annual General meeting, Women in Mind (listed by two respondents), to run a group, the Ebenezer group, the book club, help with funding for parent groups, Domestic Violence Group Work and support in court.

**6. How often do you use the Calderdale Women's Centre?**

Daily	2	(4%)
2 or 3 times a week	8	(14%)
Weekly	34	(61%)
Monthly	4	(7%)
3 or 4 times a year	0	(0%)
Occasionally	8	(14%)
TOTAL	56	

(Above percentages are of 56 respondents)

**Comment:** Three respondents gave no answer. One weekly user had telephone contact only. One user had used the Centre once only. Two occasional users stated that they had initially used the Centre on a weekly basis.

Most users appear to access the CWC on a regular basis though irregular or occasional users are less likely to have completed a questionnaire.

### 7. Is your use of Calderdale Women's Centre

Increasing	32	(62%)
Decreasing	12	(23%)
TOTAL	44	

(Above percentages are of 52 respondents)

**Comment:** 7 (13%) respondents said that their use was the same and 7 gave no answer. One said that the course she was doing had run out of funding, otherwise her use would be the same, and another said she would like to increase her use in the future.

The answers may suggest that once many users have accessed the CWC, they do engage with the broad range of services on offer.

## 8. Has the Calderdale Women's Centre helped you to

Get further training or education	14	(24%)
Get more help from The Benefits Agency/Job Centre	10	(17%)
Get more help from the housing department/housing association	10	(17%)
Get better legal advice	17	(29%)
Deal better with domestic violence	15	(25%)
Feel more supported	44	(75%)
Get better care for or help with your children	4	(7%)
Get a job	1	(2%)
Deal with your health needs/access health services	9	(15%)
Feel less depressed	30	(51%)
Meet more people	19	(32%)
Speak English more easily	1	(2%)
Become more confident	26	(44%)
Get more involved in the work of The Women's Centre	12	(20%)
Other (see comments below)	22	(37%)
TOTAL	234	

(Above percentages are of 59 respondents)

**Comment:** the 59 respondents gave a total of 234 outcomes, some of which are specific and practical but many of which are personal and less easy to define, but important in terms of individual well-being and personal development. The role of the CWC (and similar community-based initiatives) in the prevention and alleviation of depression is important to the individuals concerned and also to other agencies, particularly the health services. Likewise, the development of confidence and feeling of being supported, whilst difficult to quantify, is known to be associated with improved health and well-being, and more effective use of other services (Oakley, 1993).

The respondents ticking "other" made many comments in answering this question to demonstrate the impact that the CWC has had on their lives:

*Came for Confidence Building/Assertiveness training after bout of depression and ill health and leaving teaching. Went on to become volunteer at Drop-In and with Advice and Guidance.*

*I feel more confident in myself, due to doing this computer course, because it means I have to come out of my house and attend something educational, rather than locking myself away.*

*Has enabled other women in the group I facilitate to access other support etc.*

*Helped get back my confidence and therefore helped me get back into work.*

*It's helped me with problems I had and helped me how to deal with them. I would not have known what to do if I had not had not known about the care.*

*It has helped me move on with my life and have had some good legal advice.*

*I found counselling very helpful when I was experiencing personal problems. I now have to attend the hospital due to closure of counselling at The Women's Centre.<sup>2</sup>*

*The counselling has helped.*

*Supported and helped me at the most difficult periods of my life, when others either would not or could not take the time. I owe them a great deal, am immensely grateful.*

*It's a safe haven in my chaotic world. It's all been nothing but helpful.*

*Self-esteem.*

*Feel more confident and able to deal better with issues going on with my life.*

*Helped me get Income Support after my husband died so I could support my children.*

*Just knowing they were there and I could ask them anything. Lots of ideas for dealing with life's problems. Lots of help, guidance, support for both myself and my children (especially my teenage daughter).*

*Staff have been very friendly and helpful and understanding.*

*I feel supported and wanted.*

*Good information and helped me to decide what I needed to do with regards to legal advice.*

*I think it's helping me make right decisions in my life.*

*Sort my head out – feel a sense of hope in dealing with mental health problems and past issues.*

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<sup>2</sup> There has been no closure of counselling services at CWC and it is likely that this comment refers to the end of the client's contracted number of counselling sessions at the Centre. The number of sessions is negotiated at the outset but can be changed on review with the client as counselling proceeds.

*Mixing with others of different ethnic backgrounds.*

*Helped through counselling.*

*It has helped with computer skills for me.*

*Calderdale Women's Centre was the first important step up the ladder which enabled me to approach further educational classes. The Centre was a great deal for helping me to regain my confidence and obtaining information. Counselling was also excellent service for which I had a fantastic counsellor. She was very good!*

*I have been supported in court with preparation of court documents, which I could not do alone. I have been emotionally supported and helped to get my life back on track and deal with a very difficult ongoing situation. I cannot fault any of their work with me, just to know they are there gives me the confidence to keep dealing with this situation and I feel lucky to have such support available to me.*

*Having such fantastic support in Todmorden has been a godsend to me. I have had more help than I could have hoped for, and I do not know how I could have coped with my situation without their help.*

*I had a look around with other people and the boss of it. I'd like to do an art group two mornings a week.*

*Arranged support for me at home – supporting, listening, counselling, postnatal support.*

*Helps me maintain contact with a group of like-minded people who understand and tolerate me.*

*Just keep those doors open and keep offering the help and support you do, so others may benefit as I have done.*

*It is a great friendly, warm place to come and meet other women who have been under the same situation as yourself. You get more support from Calderdale Women's Centre than the police, more understanding. Good place to be at times like this. It's great, should be more centres like it.*

*I cannot find fault or any improvement that, from my experience of coming for counselling, can be made better.*

**9. Has the Calderdale Women’s Centre helped you**

More than you hoped	35	(65%)
As much as you wanted	18	(33%)
Less than you needed	1	(2%)
TOTAL	54	

(Above percentages are of 54 respondents)

**Comment:** 5 respondents gave no answer. The responses suggest that the CWC meets the needs of its users well and exceeds expectations for many. This issue, one of the key aims of the evaluation, was covered in the interviews and is discussed again in Section 3.

**10. Which Calderdale Women’s Centre service have you found most helpful?**

Counselling	13	(26%)
Advice and Guidance <sup>3</sup>	10	(20%)
Domestic Violence Support	9	(18%)
Drop-in	8	(16%)
Learning and Skills	4	(8%)
Todmorden outreach	2	(4%)
Volunteering	2	(4%)
Women in Mind	1	(2%)
Location of CWC	1	(2%)
TOTAL	50	

(Above percentages are of 50 respondents)

**Comment:** 9 respondents gave no answer. One specifically mentioned the DV drop-in.

One added:

*“Everything was great that the Women’s Centre offered. Please find funding to enable them to continue the invaluable work.”*

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<sup>3</sup> The Advice and Guidance Service closed as this project began (see p.50).

## 11. Which Calderdale Women's Centre service have you found least helpful?

48 (81%) respondents stated that all were helpful or none were unhelpful.

Two said they found the Drop-in least helpful and one said "legal advice". Two said counselling, but one qualified this by saying it was too far to travel and the other by saying because it was limited (see footnote). One said the Centre isn't open for long enough hours and staff are not always available.

One made the following comment:

*Not receiving information unless you actually seek it. If you don't know about a service you're not likely to ask for it. Unless you actually visit the Centre regularly, you don't know what's going on and miss things you'd like to attend etc. Visiting regularly isn't always an option and you couldn't be ringing around everywhere to enquire what's happening.*

Another commented:

*Limited counselling meets minimum requirements in your needs emotionally and socially. There's a big waiting list so that's why the help was at the minimum as it was a limited period of time.<sup>4</sup>*

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<sup>4</sup> Again, it is important to note that the number of counselling sessions are negotiated at the outset of counselling and can be reviewed with the client later in the process. See Section 4 for further discussion.

## **Part 2: Demographic details.**

### **12. Postcodes of respondents<sup>5</sup>:**

HX1	14	24%
HX2	7	12%
HX3	10	17%
HX4	2	3%
HX5	3	5%
HX6	6	10%
HX7	2	3%
HD6	3	5%
BD12	1	2%
OL14	5	8%
Unstated	6	10%
<b>TOTAL</b>	<b>59</b>	

### **13. Age of respondents**

16 – 19	2	3%
20 – 29	14	24%
30 – 39	21	36%
40 – 49	12	20%
50 – 59	4	7%
60 – 69	3	5%
70 or over	1	2%
Unstated	2	3%
<b>TOTAL</b>	<b>59</b>	

One respondent added that her 14-year-old daughter also used the Centre. There may be considerable potential in increasing the awareness amongst older women of the Centre and the services it offers. Conversely older women may want different activities and services to those currently offered (this group of users is discussed in more detail later in this section).

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<sup>5</sup> All postcodes in 12 above are in Calderdale apart from BD12.

**14. Ethnic background of respondents (respondents were asked to state this in their own words)**

White British/English/UK	23	39%
British/English	16	27%
Pakistani	6	10%
White	5	8%
Asian/ South Asian	4	7%
British Muslim	1	2%
White non-British	1	2%
Unstated	3	5%
<b>TOTAL</b>	<b>59</b>	

**15. Caring responsibilities of respondents:**

Child/children	35	59%
None	18	31%
Another adult	4	7%
Both children and adult	1	2%
Unstated	1	2%
<b>TOTAL</b>	<b>59</b>	

**16. Sexual orientation of respondents:**

Heterosexual	52	88%
Bisexual	1	2%
Lesbian	1	2%
Unstated	5	8%
<b>TOTAL</b>	<b>59</b>	

Assuming that those who did not answer this were not all lesbian, this was a surprising finding. Whilst Calderdale may have other support networks for lesbians, these figures *may* indicate that the CWC is not catering for the needs of lesbians. Dialogue with relevant groups could be helpful in clarifying this.

### 17. Disability issues of respondents:

14 (24%) respondents stated that they were registered disabled and/or on Incapacity Benefit. 7 (12%) said this related to mental health issues. Specifically mentioned were depression, “breakdown”, bi-polar disorder, anxiety and panic attacks. Other disabilities mentioned were heart disease, a muscular disorder and diabetes.

### 18. Work and benefits position of respondents:

On IS/JSA <sup>6</sup>	23	39%
Part-time work	13	22%
Retired	6	10%
Full-time work	6	10%
None of above	5	8%
Other	4	7% (carer, student, maternity leave, DLA)
Unstated	2	3%
<b>TOTAL</b>	<b>59</b>	

Whilst those in full-time work are unlikely to be able to access the CWC often (and hence complete questionnaires), it is clear that a large number of users are in receipt of benefits. This may prove a direction for service development and partnership working, particularly with Lone Parent Advisors, given the high percentage of users who are caring for children and the increasingly complex system of tax credits and childcare allowances that now exists.

Whilst full-time workers may find it difficult to access CWC services, they may want to do so. Evening or Saturday opening or activities would benefit this group of women.

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<sup>6</sup> Income Support/Jobseekers' Allowance

**19. Qualifications:**

Yes	38	64%	
No	16	27%	(2 were going to college later in the year)
Unstated	5	8%	
TOTAL	59		

**Respondents were asked to list those of which they are most proud (all are listed below in loose groupings but no order) and reveal the very broad skills and knowledge backgrounds of users:**

HND Counselling (x 3), RSA certificate in counselling, Certificate in Life Coaching, Psychosocial interventions, Level 3 BSL, BTEC Deaf People and the Community, my diving certificates, Food Health and Hygiene Certificate (x 3), Cert HE, GCSE Maths (x 2), 8 O-levels (x 2), O-levels, 6 GCSEs, 4 GCSEs, AS English Lit, A-levels, First Aid (x 2), BTEC National, Driving licence, Access to Health and Social Care (x 3), Hairdressing (x 2), Catering, Ordination certificate, NVQ Level 3 Business Administration (x 2), GNVQ Intermediate Business , NVQ level 2 Business, Diploma in Management Studies, OU Professional Certificate in Management, DES Assessor, Art & Design (x 2), Art Therapy, HND Fine Art, Classroom Assistant, Diploma in Playgroup Practice, English ESOL, Computer skills (x 3), European Computer Driving Licence (x 2), First level IT courses, MA Women's Studies (x 2), BA Politics, BA (Hons) English, Media Studies degree, BSc (Hons) Maths with QTS, Civil and Structural Engineering degree, PG Cert. Research Methodology, State Enrolled Nurse, State Registered Nurse (x 2), BSc (Hons) Midwifery, Registered Midwife, Psychiatric Nurse, BSc (Hons) Community Healthcare Nursing (Health Visiting), NNEB (Nursery Nursing), Diploma in Physiotherapy, Various social care qualifications, Shorthand, RSA English (x 2), Guilds in English, Maths and Health, City & Guilds Community Care, Civil Service A & B with Distinction, Drugs Awareness.

**Those who have no qualifications were asked which qualification they would most like to gain (again ALL are listed):**

Art, Maths, English.  
Anything that will help me gain a rewarding job.  
Would like to be able to help abused women.  
Anything would be good.  
Would like to train as a midwife.  
NVQs in Nursing  
Computers  
Swimming  
English skills  
Social care/working with people  
Beauty  
Business Admin Level 2  
English and Maths  
NVQ 1 Law

**Comment:** Whilst some of these relate to basic skills in Maths, English and Computing, careers in health and social care are an area of interest for a number of respondents. Particular attention to disseminating information on college courses and careers in these areas in the Centre and at open days and events may be beneficial.

## 20. Respondents' ideas for improving CWC and its services.

26 specific suggestions were made in the questionnaires and **all** are listed below. Further suggestions were made during the interviews and these are included in Section 3 and are discussed at greater length in Section 4.

- To make the building and services accessible to the deaf community.
- Don't close the Advice and Guidance<sup>7</sup>.
- Try to put Advice and Guidance service back on – so helpful and always willing to listen.
- Get computer with Internet and a TV.
- Would like to have more time in lessons for computer or at least an extra session during week.
- Open longer hours and more staff.
- Open more hours and need more staff.
- Open more hours and weekends, Saturdays.
- Open more hours.
- Open more.
- Drop-in services more available – I mean more of them, daily am and pm.
- Could be painted in brighter colours.
- Full-time receptionist would be useful – seems to have been many volunteer vacancies, otherwise an incredibly helpful, friendly service.
- Education.
- I think they do very well as they are but as per usual could do with more funding.
- I would have attended the centre more often if there were regular opening hours i.e. 10 – 2, 11 – 3 every day instead of different hours on different days. I don't go to the Centre often enough to know the opening hours, even though

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<sup>7</sup> The Advice and Guidance Service closed as this project began (see p.50).

I have them written down. I have called to find it closed, or about to close, on numerous occasions. (I just happened to be in town and felt a need or desire to call in.) I've only recently found out about some of the activities etc. Perhaps we could receive information about events/courses etc by post, as members? (Membership fees could be increased to take account of the extra cost to the Centre.)

- I think they provide an excellent, friendly service that does not need improving. I just hope their funding continues so they can.
- I hope outreach will become better available to all, the outreach to people who can't make it into Halifax is a real help.
- To be able to use crèche when you attend appointments to solicitors if a support worker is with you.
- Have more loos. Put it in the paper so people can go to it. Start groups at 10.30 am.
- It took several visits and some weeks to have my Passport to Leisure renewed because no-one was available to do it. I awaited a phone call for about two weeks by which time the renewal date had long gone. I also had problems similarly in renewing my membership!
- I have had a very positive experience of the service and have heard very positive feedback from women referred onto the service. I have no specific ideas about services can be improved, but wonder how widely women are aware the services exist.
- More in Todmorden so no need to travel to Halifax.
- I would really like the counselling to be carried on. I feel unsure whom to approach now, without some of the support I received.
- Counselling as you only have a limited number of weeks so there doesn't give you much time to open up and express yourself thoroughly.
- Not knowing how I can be involved and how to volunteer.

### **Part 3: Looking at specific groups of women**

#### **1. Older women**

Only 4 (7%) respondents gave their ages as over 60. All described themselves as British or White British. None was registered disabled or on Incapacity Benefit and all 4 described themselves as retired. A friend or family member had told 3 of these about the CWC. All 4 had initially come to the CWC to attend a class or training and only one had used any other CWC service (Advice and Guidance and Book Club). All 4 had accessed computer-training courses and 3 had been helped by the CWC to get further education and training. This group all reported that Learning and Skills was the most helpful service in CWC and evaluated their experience positively.

These responses, although small in number, may indicate a widespread need or desire for IT training amongst older women who have not had such training before that CWC is well placed to meet. However, the needs of older Asian women were not represented in responses to the questionnaire and may not accord with the above.

#### **2. Women with disabilities**

14 (24%) respondents stated that they were registered as disabled and/or on Incapacity Benefit. They were spread across all age groups from 16 to 59. All described themselves as white or British or English.

Only 4 had been told about the Centre by a health professional. 4 had initially attended for counseling, 3 had first come to the Drop-in and 2 had come to a class/training, 2 for advice and 1 for help around DV. There was no discernable pattern to their use of the Centre; rather they appear to use the range of services on an individual basis. 12 use the CWC on a weekly or more frequent basis. 9 reported that the CWC helped them feel less depressed and all evaluated the service positively.

### **3. Women from ethnic minorities**

10 (17%) women identified themselves as Pakistani or Asian. 7 come from the HX1 postcode area. All are aged between 20 and 39 and 9 care for children. 4 had found out about the CWC from a friend or family member and 2 from the police/probation service. 5 had initially used the CWC for help around domestic violence and a further 2 had sought help with DV since using the CWC. 8 used the Centre weekly or more frequently and all described their use as increasing.

Only 2 of this group of women were in part-time work and 6 reported that they had no qualifications or certificates. 5 of these stated that they wanted to get some qualifications.

No older Pakistani or Asian women responded to the questionnaire and it is unknown how their needs may be similar to or differ from those of younger women from the same community.

### **4. Crèche users**

8 (14%) respondents reported using the crèche. All 8 were “heavy users” of the Centre – between them they had used 24 CWC services *excluding* the crèche – and 6 reported their use as increasing. All apart from one used the Centre weekly or more often. Most were in their 30s but one was under 20, and two were disabled or on Incapacity Benefit.

5 of these respondents had been told about CWC by the police or probation service and one by a social worker. Six of them had accessed the Domestic Violence Support Service. 6 were in receipt of Income Support or Jobseekers Allowance. It is therefore likely that the crèche underpins access to CWC services for some of the most vulnerable users

### **SECTION 3: THE INTERVIEWS**

25 respondents to the questionnaire completed an ancillary form to say they were willing to be interviewed at a later date. Nine of these did not reply to letters or e-mails sent (respondents had been chosen to select their favoured form of communication). It proved impossible to contact five who wished to be telephoned, and we decided to desist from trying after three weeks. This drop-out rate was disappointing but some users have complex and difficult circumstances, which made us unwilling to pursue their initial offer to be interviewed if they did not respond at this second stage.

The remaining 11 interviews were arranged during September and October 2005. Interviewees were able to choose face-to-face, telephone or e-mail interviews. Four were face-to-face and seven were telephone interviews.

The interview was designed to be short and focused on the aims of the project. The purpose of the interviews was to enhance insight into and understanding of how Calderdale Women's Centre had met users' needs and expectations and impacted upon them, by hearing different women tell their stories of that experience. (The interview schedule is included in Section 6.)

No interview was taped as this was thought an unnecessary intrusion on participants, given that the interview was designed to last no more than 10 to 15 minutes, and the researchers had previous experience of writing real time responses. The researchers wrote down the women's responses verbatim as fully as possible and typed them up immediately after the interview. If an interviewee had no comment on a particular question, this was passed over. No probing for details of the interviewees' circumstances or why they used the Centre was made: it was satisfaction and feedback we wanted to concentrate on.

The interview responses are given on the following pages. A few details (but no meanings) have been changed to preserve anonymity.

### **Interview 1 (CWC user).**

I have never been to The Women's Centre; I have only used it on the telephone. I wanted some advice about a personal problem and someone to talk to who understood my situation. My daughter had gone off the rails and I needed advice on how to deal with it, like information about groups for parents and support. In the end I had a nervous breakdown. I thought that if I deal with my daughter I will be able to help myself.

My doctor told me to go the CAB and they told me about the Women's Centre. It met my needs but only on a short-term basis as the service (Advice & Guidance) shut three weeks after I first contacted them. I had a wonderful girl, she was absolutely fantastic. But it closed so there was only a small amount of benefit. I used it on a short-term basis and I was upset when it ended. The service I got was excellent, absolutely excellent. It is important it should have kept going for people like me.

They didn't suggest any other agencies to me. Now I see a psychiatrist twice a week; I went back to my GP after it (A & G) shut and he referred me. Advice & Guidance should be started again for 100s of people who need advice on all sorts of areas. I wasn't with it long so it is hard to say how it could be improved, it helped me at the time for the short period it was still open.

It is such a shame when they have to close something like that; women go through such a lot in this day and age. My daughter would have benefited too, especially around contraception advice. It isn't just one thing that women need help with, it's many things.

## **Interview 2 (Volunteer).**

I am a volunteer at the Women's Centre. I wanted the experience of communicating and becoming a good listener, to understand women's problems and give them support. I am going to university so I needed to do a volunteer job in some related area; I am going to do [related area of study].

It has met those needs. I was left on my own to do one-to-one work, I was left like I was a boss. It made me realise what my qualities were, that I could handle situations.

I have found out about the Asian Women's Drop-in near Holy Trinity School but I think that it may have had to close now, I'm not sure. I would be able to signpost other women to that.

I am more aware of rights and opportunities through attending meetings. For example, solicitors, your right to say "no". I am more able to help women gain courage to say "no" especially in relation to marriage, relationships, custody, abuse. I have had training and I wanted to move to work in the domestic violence service but they never got back to me.

The problems with the Women's Centre are that women can't smoke. I think that means that some women won't come in if they're going through a bad patch. Young teenagers especially should have a room to smoke in, I know of lots who haven't come back when they found they couldn't smoke in the Women's Centre.

There should be better rooms for one-to-one work downstairs. You have to take them all the way upstairs. If they are disabled what do you do? There is a lift but they might be claustrophobic.

There should be a changing bench, women have to change babies on the floor.

Also if you are on your own, you can't do any one-to-one work. There needs to be two of you really.

The Drop-in and the crèche are very good, they cater for people well. The Centre is very good, I wish more women knew about it, white and Asian. I've done it by word-of-mouth, lots I've told have been down there. They could deliver leaflets but partners could be a problem. Asian women are looking for somewhere; posters in GPs' surgeries would be good in Urdu and English.

### **Interview 3 (CWC user).**

I came across the Women's Centre by chance, I didn't know anything about it, it was years ago. I was visiting [another agency] beneath them in the old building.

I had counselling and was very pleased with it, but I have no yardstick to measure it by, but I was pleased with the counsellor and it helped me. Otherwise the Women's Centre hasn't had any impact on me really.

I am a member and I went to a General Meeting and heard a lot about other agencies and services but when I tried to follow this up, no-one answered my call, no-one from the Women's Centre ever got back to me though they said they would. It was a query about benefits. Also it took about 6 weeks to get my Passport to Leisure renewed, it takes ages to find someone who knows about it or to get someone to help.

Messages don't get passed on (gave example). It should be run in a more professional manner, some of the volunteers aren't serious. There should be more discipline and organisation like in other services. You shouldn't be forgotten about. They should write things down properly, they aren't reliable or dependable.

I went to a talk in the drop-in area and there was a lot of noise and interruptions and I felt sorry for the speaker who had come a long way to give the talk. Some people there could have benefited from the talk but it was it was a free-for-all. They should be more alert to women. The atmosphere is not always conducive to my needs.

I want to see things improve, it has huge potential. I maintain my membership. There are lots of rules and regulations (gave example). They shouldn't speak to women in the manner they do, it makes you wonder if you are welcome. Are they running it for their own benefit? The volunteers think they run the place, there is no need to speak like prison officers.

#### **Interview 4 (CWC user).**

I wanted advice on where to go, on what to do to get out of the situation I was in. I wanted practical help about housing, benefits, but also support. I got what I wanted. My husband had a severe mental illness, it was really bad and I didn't know what to do. I went to the doctor but that was no help, but I was seeing a smoking cessation advisor and she advised me to come to the Women's Centre.

After that my husband went to the GP and was diagnosed with a mental illness and got a lot of treatment after that.

The Women's Centre got all the information for me; I didn't get anything from the GP or my husband's counsellor. I got advice about what to do, whom to get in touch with, outreach for families. I can't explain to you how it was, it was the last straw and I didn't know where to go. I turned up in floods of tears and got lots of help, information for my family, material to read. The only help I've had has been from here, and the only support I've had. If I hadn't had support from here, I don't know where I'd be.

He's off work, I have him 24 hours a day but here's a place I can come to sit quietly, talk it over, talk over what has happened that week. I can't sit at home and have any peace. I can go to [outreach drop-in] and have a chat. I take my friend, she likes it too. Or there is one-to-one counselling another day.

It helped me, in fact gave me support before I fell off the edge. I went once to see my husband's GP and counsellor but they don't recognise how I am. But [CWC worker] understands how it is for me. The support enables me to get through it. I would have gone, left him by now. He has been ill for all our married life but we didn't know and I had the children. This is the first time I have said I am going. The Women's Centre just gives me support, until I feel comfortable with whatever decision I make.

They have put me in touch with outreach for families at [local mental health hospital] and information on housing and a solicitor. I know they would go with me to a solicitor or the doctor if I wanted.

I think there should be a drop-in centre in Todmorden, a permanent building instead of borrowing rooms. Also they aren't always open at the Women's Centre and you can bet it is always shut on the day you really need it; it should open every day. In Todmorden lots of people have financial problems, and they could be helped more if there was a building.

I had never heard of it before the smoking person told me. There are no notices in the doctors where they should be, it isn't publicised enough. If I hadn't been trying to give up smoking, I would not have known. It gave me support so I could give him support.

### **Interview 5 (Non-user).**

I only go to The Women's Centre because a group I go to has moved there. I don't really use it. There is various information and stuff in the sitting room bit but I have never followed any of it up. I haven't used their services. I would like there to be more education there, especially Access courses. All sorts of Access courses. I just want to learn more.

### **Interview 6 (Volunteer).**

I am a volunteer. I wanted to give to the community, I work in a church, you can get isolated. I wanted to reach into the community; a friend suggested a local women's prison and they suggested Calderdale Women's Centre. I didn't know there was a Women's Centre!

I wanted to expand as a person, to know Halifax better and the needs of the people in Halifax. It is meeting my needs and expectations. The Drop-in can be slow but if you get one person, it is interesting. I love the training, I like learning. You meet a variety of people doing the training and I like getting to know them.

I am getting to meet people I never normally meet and am using my skills as a [co-existent profession]. I am definitely more aware of other agencies, like housing, Homestart, the Advocacy service. I can take this information back into my church and give physical as well as spiritual help.

I have set up a business as [related profession] and it is making me have more ideas about that, about centring on women. It is solidifying what I am already doing. I am seeing the skills I have are useful, I can test out asking the right sorts of questions.

The Drop-in has been reduced; I would like to see women be able to drop-in more, make themselves a cup of tea, sit and chat themselves. I think the creative stuff will be good, therapeutic stuff like knitting, healthy eating. But it needs to be advertised well like in doctors' surgeries, places where women go and plenty of leaflets here [CWC]. Also at Laura Mitchell clinic, get others to promote it more, tell women about it when they are in crisis, wherever women are going to run to.....churches, the police.

There is no private space downstairs, it was too tiny and had no window so couldn't be used because of health and safety. You can go through the door [upstairs] but it is a bit daunting.

#### **Interview 7 (CWC user).**

I go to the Women's Centre in Halifax. I first went for support and I got it. It was very professional, better than I thought it would be. It improved the situation for me and my sense of well-being. What the Women's Centre does, it does very well; they make the most of what they have.

They have an adequate range of services and opening times, it says volumes for the Centre that they do. I have a tight window of opportunity to use it but I manage to okay.

Even though it's a charity, it is like going to a private office, it is so well organised and professional. This is unique in my experience for a charity. It is hard to qualify in words: because of its name and because it is a charity, it is easy for people to make assumptions about it. But what is so unique is that it is so superior in terms of quality, flexibility and support. It does more than you would expect for a charity. It is as good as any professional organisation.

However the only reason I found out about it was because of a friend, so anyone new to the area doesn't have the information that it's there, or what it does. I was only aware when I went there. They need a marketing plan.

I am considering volunteering there once my current situation is sorted. There are so many options. The Women's Centre has a very unique capability of making their practice so much more than it might be perceived to be. Normally if you go somewhere for support, they put you in a box, but it has so much more class than that. It is welcoming, professional; I've never seen anything like it. They have really got it together for women.

#### **Interview 8 (CWC user).**

I have been to the Centre in Halifax once but I normally use the Todmorden service. When I went initially I wanted legal advice and help. I got this; the woman even came with me to a solicitor as well. She also put me in touch with parent and toddler groups. I helped with what I needed at the time. When I first went, I was in a pretty bad way but they helped a lot.

What they are doing is very good; I can't think they need to improve. The woman, who dealt with my situation, was someone who was good to talk to. You need that when you want support.

I hope the service in Todmorden continues. It would help if it were more publicised. I only know about it from a magazine my daughter brought back from school. If I hadn't had a daughter at school, I would never have known about it.

### **Interview 9 (CWC user).**

I stumbled upon it by accident and the health visitor had also recommended it. I went because I needed help with domestic violence, mental health issues, child protection issues, and financial issues. This happened three and a half years ago.

I was worried about housing and my child and the Centre helped with a whole range of issues. It helped particularly with confidence building, dealing with other agencies, especially income support and entitlements. There was a mix-up and they helped me sort it out. I was worried that my ex might take money out of my account and there was divorce proceedings going on. The Centre provided a one-point contact.

The Centre has helped me become more confident. I was tied to the house and my social network had been eroded away. I am now better able to cope. The Centre helped me come to terms with what had happened. Dealing with forms was especially useful. They also keep in touch with me, which is really good. My son has [learning difficulties] and they helped me with this. I couldn't see the wood for the trees. I've calmed down a lot now.

I wouldn't have dared go to the police before but I do now with the help of the Women's Centre. I would also never have thought of going to Social Services but I do now. The same for solicitors. The Centre also calls income support for me. The educational programmes have helped and I take part in them. Sure Start have helped with my son and put me in touch with Learn Direct.

### **Interview 10 (CWC user).**

I went for computer studying. I was hoping it would help me use the one at home. I only had keyboard skills and some e-mailing before then. I could play Patience on it and things like that but was afraid I might crash it if I pressed the wrong key. I managed to improve my skills, all round on it really, but I don't use it any more than before.

I didn't really get involved in anything else at the Centre but everyone was friendly. I got friendly with two other people, younger women, but we lost touch. They didn't really tell us about what else was available apart from Learn Direct, but nothing else.

I would like to do other courses, a language maybe. I think older ladies would like that sort of thing. It would be good to have a get-together for older women where they help others, listen and chat. It would be good to have it specific for older women: you could have a befriending thing where you go on a bus ride together and help people get out more. Some women have been a bit under the thumb of their husband, and you could help them begin to get out on the bus and that sort of thing.

Everyone I came up against there were very friendly, they didn't differentiate because of my age.

### **Interview 11 (Volunteer).**

I was doing counselling training and I needed a placement, and I wanted a contrast to my other placement, which was mainly bereavement. I wanted to broaden out with issues and meet different people. I'd had some contact with domestic violence issues and was interested in that area. I was aware that the Women's Centre was here but not what it did. I did use Harrison Road<sup>8</sup> once myself many years earlier for breastfeeding issues, but finding out about the Women's Centre this time was really word-of-mouth, someone said, "try the Women's Centre". I have been a volunteer here for 18 months now.

The placement met my needs and I still counsel here. It has broadened my horizons. I enjoy quite a comfortable lifestyle and now I appreciate that more, my family and the support I have. I am touched by the stories I have heard here.

I haven't used the knowledge I have gained here on the outside really but I could pass on information about things if anything came up. Knowing the valuable support there is here could help me with the counselling work I do outside of the Centre and with my friends.

The Centre is a good place for people to come if they need help with services or agencies, like substance misuse. If they don't know themselves they always know someone who knows someone. The Drop-in service is brilliant for things like that, and pregnancy testing.

I haven't really made as much use of the training opportunities here as I could have done. But volunteering here has clarified for me that bereavement counselling is the area I am passionate about, and I have been involved in that here.

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<sup>8</sup> See above p. 3.

The outside of the building is a bit forbidding, it is sort of stark and I find the whole doorstep and doorbell thing difficult, I always find myself looking round. It isn't private. I think the entrance improvements that have begun will be good.

Also it is such a massive building, a brilliant asset but everything is very spread out. I am often here on a [specific day] and there are also people on the top floor but you'd never know. I think they should swap around the levels, put training on the top floor and move the Domestic Violence service down. There is a lot of activity on that top floor but you can just be totally unaware of it when you are on the lower floors.

They have a brilliant induction programme, I really enjoyed it and got to know a lot of the other volunteers. That was really how I got to find out about the building, they sent us on a sort of quiz-search.

The Drop-in isn't being used so much. It used to have more of a buzz but now it is broken into coffee and information sessions and I wonder if that has put people off. The Counselling section works very well, there is good support and monthly meetings which are very helpful. I think it is excellent that the Centre exists.

## **SECTION 4: DISCUSSION AND RECOMMENDATIONS**

### **Discussion**

It is apparent from both the responses to the questionnaire and the interviews that Calderdale Women's Centre meets a wide range of needs through a complex service delivery. Overall there is evidence that it provides an excellent service to both its users and volunteers. The CWC has a large throughput of users and has successfully attracted women from ethnic minorities both as users and volunteers.

Nearly all respondents to the questionnaire and those who were interviewed reported that their needs and expectations were met and that they were satisfied or more than satisfied with the service offered. This was true for both users and volunteers. There is evidence of a wide range of positive outcomes for users, and the Centre plays a key role in public service provision in Calderdale, particularly in the areas of domestic abuse, counselling, and building general well-being and community capacity amongst women living through challenging life events (see responses to Question 8).

The CWC's arena of work is complex and challenging and its mode of operation consequently sophisticated. It combines highly professional with very informal approaches in order to meet the range of emotional, legal, social, practical, immediate and long term needs of the women who walk through its doors. Paid staff, many of who are part-time, and volunteers work together to deliver a range of services and activities for a very diverse clientele.

Funding streams are frequently short-term and project-orientated. However whilst funders may focus on particular areas of work, users' experience of the Centre is more holistic, with many moving between different services over time, according to need. This holistic experience appears, from the data presented in this report, to be most crucial in enabling women with complex problems and needs to be able to address those needs and to move their lives forward. Interview 9 is a good example

of this and further evidence is apparent in the responses to the questionnaire, particularly question 8. Looking at CWC services in isolation, rather than the CWC *service* as a whole, omits consideration of the role that the interface between the services and women's use of them over time has in terms of important outcomes for users (see responses to Question 5 of questionnaire).

The data gathered during this project and presented in sections 2 and 3 above, also point to a number of areas for further service development and form the basis for the recommendations that follow.

## **Recommendations**

### **1. Marketing**

Many respondents reported that they had heard about the CWC fortuitously and that they had been unaware of the CWC and/or what it did until then. Only 10% (Q. 1) had found out about it by through a leaflet or poster. The majority had found out about the Centre by word-of-mouth, either from a professional they were in contact with or a friend or family member. Interviews 2, 4 and 6 also talk about the need for greater publicity. There was also evidence about some lack of internal signposting from one service to another (Interviews 1 and 10 and the responses to Question 11).

#### **Recommendation 1: Improve marketing and publicity.**

*1.1. Display posters in churches, mosques, GPs' surgeries and other public buildings.*

*1.2. Mail (or e-mail) a regular, possibly quarterly, newsletter to members and other agencies. (Membership fees would probably have to increase to cover the cost of this but membership numbers may increase because users would know they would*

*receive regular mailings. Consideration could also be given to agency memberships).*

*1.3. Improve internal signposting by decreasing the amount of notices on walls and notice boards, grouping notices in themes, and ensuring displayed notices are removed when defunct and are easily readable.*

*1.4. Consider having a post box in reception with cards where users/visitors could request information about another service and leave their preferred contact details. Something similar could be included when evaluating individual services with clients at the end of a user-episode.*

*1.5. Review training around signposting to other services and agencies for staff and volunteers. Ensure there is an up-to-date directory in reception of who to contact for miscellaneous internal services such as Passport to Leisure renewals and the C-Card scheme.*

## **2. Database and information gathering**

The Centre recently commissioned an audit of its IT systems, which reported earlier this year (Siddall, 2005). We would endorse the recommendations of that report, particularly those which pertain to a contact database, a website, and a service user database that would also record contact with the Centre. Obviously many safeguards would have to be built into such a database, but it would have many benefits in terms of recording throughput and recording the holistic uptake of services by many users that the data presented here points towards. This would not only enable mail shots to be targeted appropriately, but would also enable better reporting on the interconnections between different CWC services.

Currently, partly to do with funding requirements but also to do with separate recording systems, data collection does not reflect the breadth and complexity of

CWC activity and usage adequately. This may enable key partners and funding bodies to make more informed decisions about their support of the Centre and for a more holistic approach to funding to be developed. It would also help to target service development such as outreach work and targeted marketing. For example, the limited data gathered in this project suggests there *may* be less use of the Centre by women living in HX4, HX5 and HX7. A database such as that suggested would facilitate better understanding of issues such as geographical access.

**Recommendation 2: Improve data collection and analysis.**

*2.1. Enact the recommendations of the Siddall report with regard to a contact database, a website, and a service user and usage database. (This is not to say that we consider other recommendations from that report of lesser importance, only that they are less directly linked to this evaluation's findings.)*

*2.2. Consider visiting other organisations with complex service provision and usage but well-developed clientele databases, such as the Calderdale Sure Start Local Programmes.*

**3. Multi-agency working around learning, skills and returning to work**

The Centre has close links with many other agencies and works in partnership with both the West Yorkshire Police and the Calderdale Primary Care Trust. Amongst its various activities, the CWC has a careers counselling service, run in conjunction with Careers for Adults, as part of the CWC Learning and Skills section. The findings presented here show that a large number of users are in receipt of Income Support or Jobseekers' Allowance, and are also caring for children. The respondents also had an astonishingly wide range of qualifications, and those who didn't have any qualifications reported a desire to get both qualifications and to have a career (see responses to Questions 18 and 19). Asian respondents in particular expressed needs in this area.

The CWC had also helped 44% of respondents to feel more confident and had helped 24% get further education or training. However only one respondent reported that she had been helped to get a job as a result of her use of the CWC. This whole area of training, benefits advice and support in returning to work may be something around which the Centre could again approach other agencies to work more closely with it, particularly the Benefits Agency (BA). Whilst BA staff are increasingly specialised (e.g. around lone-parent advice, NEET etc), co-working with the CWC, such as offering “surgeries”, staffing stalls at events, inputting to CWC training, may have much to offer both agencies and their users.

In addition, the Centre has close contact with a number of women who have a stated desire to undertake basic training and offers extensive learning and skills programmes *when funding allows*. The ebb and flow of funding for Learning and Skills is not conducive to the CWC establishing itself a key centre of training in Halifax and meeting the needs of its users in this important regard.

**Recommendation 3: Continue to explore all possibilities for multi-agency working and funding.**

*3.1. Examine service provision and development around support for returning to work with particular regard to a) users with qualifications (and often past histories of careers) who have been out of the workplace for some time and who need support/training/benefits advice/childcare advice/careers counselling to return; and b) users with no qualifications who need the above plus basic skills training. Partnership working with Adult Community Education and Calderdale College outreach services may provide opportunities to develop provision for this client group.*

*3.2. The Centre, as an established agency working with some of the key target groups in Calderdale, should proactively continue to lobby and apply to training and education providers and funding bodies for more consistent funding.*

#### **4. Counselling services and working with the mental health services**

The CWC offers an extensive counselling service and is an important service provider in Calderdale. This service is staffed almost exclusively by volunteers, who are either on placements as student counsellors or who are qualified counsellors. These volunteers are inducted, co-ordinated, supported, and offered various training opportunities by the CWC. Waiting times can be long but are generally shorter than those to see a GP-based counsellor. The service is offered to women on a short-, medium- or long-term basis according to their perceived needs at the time, and are negotiable thereafter.

The quality of this service and the regard in which users hold it is attested to throughout the responses to the questionnaire. The Calderdale Primary Care Trust funds the CWC in relation to mental health services (£17,000 in 2004/05), but there is a manifest ongoing requirement that the health services ensure this service is adequately supported both financially and by appropriate inclusion in planning and referral pathways. It is clear from both the data presented in this report and in the CWC Annual Reports, that this service demonstrates excellent value, organisation and quality.

The only “criticism” made by respondents was that a few would have liked to continue counselling for longer and that its sole location in Halifax town centre was problematic for women from outlying areas of Calderdale. The former reflects some misunderstanding or miscommunication of the contracting process around counselling. The latter would require investment in terms of finance, premises, organisation and support for counsellors.

**Recommendation 4: Safeguarding the Counselling Service.**

4.1. *The CWC service be part of local mental health services strategic planning firstly, to safeguard the approximately 1,200 counselling sessions per year that the CWC provides for Calderdale women, many of whom may not access mainstream services readily; secondly, to explore development and funding of services in outlying areas of Calderdale.*

4.2. *That the Counselling Service consider how to ensure that all service users are clear about the nature of the counselling contractual agreement and how to negotiate changes to that.*

**5. Client groups**

Certain clients groups were under-represented in the responses to this survey – older women, both white and Asian, younger women, and lesbians in particular. Whilst this may be a problem with questionnaire distribution, discussions with staff, volunteers and users do suggest that service development around the needs of older women in particular is something they would like to see, and this may be an area where partnerships with health can be developed further.

**Recommendation 5: diversity of client groups.**

5.1. *That the CWC consider open days and consultation events specifically geared towards older or younger women, working in partnership with existing agencies (such as Age Concern, Connexions, Calderdale PCT) to raise awareness of services and for consultation on service development.*

5.2. *That further needs analysis takes place once the database is established.*

## **6. Facilities at Silver Street**

The Silver Street building is large with an old-fashioned lift and a somewhat bewildering number of doors and stairs. Whilst the building has a lot of potential, it is still very much “work-in-progress”. Access to the crèche area and first, second and third floors is limited for safety and security reasons. Disabled access to the higher floors is by the lift, which is a dual metal door system of a somewhat quirky nature.

The ground floor contains the entrance, reception, a toilet the Drop-in space and various display areas. Alterations to the entrance area are currently taking place. There is no real private space on the ground floor despite an obvious need for both workers and volunteers to respond to difficult and confidential issues in that area. Both users and volunteers raised the issue of ground floor facilities during this project (see Interviews 2, 3, 6 and responses to Question 20). Whilst alterations are inevitably constrained by financial considerations, lay-out and facilities should accord more with the purpose, use and development of the Drop-in and of the considerable number of women who come in to the Centre in a distressed state seeking help with difficult situations.

In many ways the entrance, reception area and ground floor in general is the showcase for the CWC but the area is often busy with a bottleneck at the reception of women signing-in, chatting and waiting to be keyed into the upper floors. Volunteers act in a receptionist capacity but can be overwhelmed at busy periods. Paid staff are generally on the other floors, particularly the third. This contributes to make access to services and the building in general quite daunting for new users in particular.

### **Recommendation 6: layout and facilities.**

6.1. *Alterations and improvements to the ground floor continue and due consideration be given to the many comments and suggestions contained in this report, namely the need for privacy, accessibility, uninterrupted group activities, appropriate responses to immediate needs and queries, and meaningful first contact.*

6.2. *That in view of the complex multi-tasking and triage work often required in the reception area, and the crucial role this plays in engaging new-users, that consideration be given to a paid and trained receptionist who could be helped and supported by volunteers.*

6.3. *That re-consideration be given to the location of paid staff and services in the building so that staff are more easily accessible to users, volunteers and visitors.*

6.4. *That opening times are clearly displayed and extended to office hours as soon as practicable.*

### **7. Outreach services**

The CWC runs a number of outreach services, currently these are on Todmorden and the St. John's area. Outreach services are particularly important for women experiencing domestic abuse and for geographically distal areas of the borough. The localisation of some important services used by women under initiatives such as Children's Centres and Sure Start local programmes are an opportunity to further develop this work, should funding enable this to happen.

The respondents who used the Todmorden outreach service were unanimously positive about it, although a number of comments were made about the lack of dedicated facilities.

**Recommendation 7: outreach services.**

*7.1. Continue to explore the opportunities to develop outreach services, and examine how Children's Centres may offer opportunities for the CWC to deliver its services in a multi-disciplinary context.*

**8. Advice and Guidance Service**

The Advice and Guidance Service (A & G) ended in June 2005 when its funding stream ceased. Both the CWC Annual Report for 2004/05 and this report provide considerable evidence that this service was well used and effective. The Advocacy Project currently being developed will pick up some of the work done by A & G. Given that this development is in its infancy, we do not make any recommendation about the former A & G area of service delivery, but wish to make note of our awareness that this was an important and helpful service for many women.

## SECTION 5: GLOSSARY OF TERMS

**Service user:** someone who uses or has used one or more of the CWC services, either at the Silver Street premises or one of the outreach services.

**Volunteer:** someone who has been accepted on to the volunteer programme at the CWC and who is *not currently* using the services. (Many volunteers are past service users.)

**Employee:** a contracted and paid member of the CWC staff.

**Heads of services:** those responsible either singly or in a job-share for co-ordinating the learning and skills, domestic violence, advice and guidance, counselling and crèche services.

## **SECTION 6: APPENDICES**

This section includes the main tools used, namely: -

- Two examples of the posters displayed in the Women's Centre during the project
- The heads of services questionnaire
- The user questionnaire
- The interview invitations
- The interview schedule



## Calderdale Women's Centre Evaluation Project



From May to November 2005, we will be finding out how well Calderdale Women's Centre helps the women who use its services. We may approach you to ask if you would fill in a questionnaire, or answer questions in person or on the telephone (you do not have to take part). We will often be in the Women's Centre over the coming months (we will have name badges with the above logo on), so please ask us about this project. You can also leave a note for us in the box on the reception desk with your contact details and we will get in touch in whatever way is convenient for you.

Ruth Deery and Deborah Hughes



## Calderdale Women's Centre Evaluation Project

September 2005

- Thank you to everyone who has returned a completed questionnaire.
- It is not too late to add your say - please fill in a questionnaire (pale orange) and send it back in the envelope attached or leave in the box at reception.
- Anyone who has agreed to be interviewed will hear from us soon.



Deb Hughes and Ruth Deery  
CWC Evaluation Project



## Calderdale Women's Centre Evaluation Project

Domestic Violence

Children's Services

Drop-in

Advice and Guidance

Counselling

Volunteers

Learning and Skills

Name of Team Leader:

Person giving interview if different:

Date of interview:

1. Range of current activity including outreach
2. Briefing session with team
3. Clientele (including ethnic minority, non-liberate/non-English speaking women)
4. Reasons for accessing their service
5. Attendance volume and throughput
6. Access to past users
7. Access to current users
8. Definitions; service user, volunteer, student, staff
9. Other agencies worked with/referred to
10. How is success measured



## Calderdale Women's Centre Evaluation Project

We would like your views on Calderdale Women's Centre. If you are willing, please fill in the questionnaire and send it back in the envelope. All information that you give us will be kept strictly anonymous, that is no one will be able to trace information back to you. You do not have to answer any question you don't want to - *just leave blank any question you would rather not answer.*

1. How did you find out about Calderdale Women's Centre (CWC)?  
(please tick one)

Friend/family

Other CWC user

Health professional

Police/probation service

Leaflet/poster

Citizen's Advice Bureau

Age Concern

Social worker

Other (please state) .....

2. How long have you been coming to/using Calderdale Women's Centre?

Less than 3 months

Between 3 months and 1 year

Between 1 and 3 years

More than 3 years

3. What was your reason for FIRST coming to/using Calderdale Women's Centre?

For advice or information about something

For training or to attend a class

For counselling

To attend the drop-in

For a pregnancy test

To attend a meeting

For an open day or event

For help around domestic violence

To volunteer

For a student placement

Other (please state) .....

4. How do you normally travel to Calderdale Women's Centre?

Car

Bus

Walk

Train

Mainly phone contact or outreach group

Other .....

5. Please tick all the services you have used since coming to/using Calderdale Women's Centre

Advice and Guidance

Learning and Skills

Domestic Violence Support Service

Drop-in

Counselling

Crèche

Volunteering

Pregnancy testing

Other (please state)

.....

6. How often do you use the Calderdale Women's Centre?

Daily

Weekly

Monthly

3 or 4 times a year

Occasionally

7. Is your use of Calderdale Women's Centre

Increasing

Decreasing

8. Has the Calderdale Women's Centre helped you to  
(tick all that apply)

Get further training or education

Get more help from The Benefits Agency/Job Centre

Get more help from the housing department/housing  
association

Get better legal advice

Deal better with domestic violence

Feel more supported

Get better care for or help with your children

Get a job

Deal with your health needs/access health services

Feel less depressed

Meet more people

Speak English more easily

Become more confident

Get more involved in the work of The Women's Centre

Other (please say how you feel the Calderdale Women's Centre has  
helped you).....

.....  
.....  
.....  
.....  
.....

9. Has the Calderdale Women's Centre helped you

- More than you hoped
- As much as you wanted
- Less than you needed

10. Which Calderdale Women's Centre service (see question 5) have you found most helpful (*name one*)?

.....

11. Which Calderdale Women's Centre service have you found least helpful?

.....

Can you say why you found this service the least helpful?

.....  
.....  
.....  
.....  
.....  
.....

The following section is to find out more about the women who use Calderdale Women's Centre. Again, *you do not have to answer any question you would rather not*. No information you give will be able to be traced to you personally. The purpose of this section is to ensure services meet the needs of **all** women.

**Please tick the boxes that apply to you.**

12. Please give your postcode.....

13. Age: 16 - 19	<input type="checkbox"/>	40 - 49	<input type="checkbox"/>
20 - 29	<input type="checkbox"/>	50 - 59	<input type="checkbox"/>
30 - 39	<input type="checkbox"/>	60 - 69	<input type="checkbox"/>
		70 or over	<input type="checkbox"/>

14. What is your ethnic background? (Please state in your own words)

-----

15. Do you care for a child/children?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Or another adult?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

16. Are you:

Heterosexual/straight?

Bi-sexual?

Lesbian?


17. Are you registered as being disabled and/or on Incapacity Benefit?

Yes

No

If "yes" please briefly describe nature of disability or problem: .....

18. Please tick all the boxes that apply to you:

Full time paid work

Part time paid work

Income Support/Jobseeker's Allowance

Retired

None of these

19. Do you have any qualifications or certificates?

Yes  No

If yes, can you list those that you feel most proud about (list up to three)

-----  
-----  
-----

If "no", what qualifications would you most like to gain?

-----

20. Have you any ideas for how the Calderdale Women's Centre services can be improved?

-----  
-----  
-----  
-----

Thank you for your time and contribution.



Calderdale Women's Centre  
Evaluation Project

We would like to interview women who use (or have used) the Calderdale Women's Centre in greater detail about how the Centre has affected their lives. If you are willing to be interviewed, please fill in this form, fold it, and return it in the envelope provided. If you are returning your questionnaire at the same time, we undertake to remove this paper without looking at it so that it cannot be linked to your questionnaire response. Anything you say will be kept anonymous so that it cannot be traced back to you.

Name.....

Best way(s) to contact you (circle and delete the rest):

mobile      e-mail      telephone      by letter

Your address/telephone number/e-mail:

.....  
.....  
.....



## Calderdale Women's Centre Evaluation Project

September 2005

Dear

Thank you for returning a slip saying you are willing to be interviewed about your experience of Calderdale Women's Centre.

The interviews will take no more than 30 minutes, will not be taped and anything you say will be kept anonymous. What you have to say will be very helpful to us in writing our final report.

Please complete and return the form in the envelope provided (this does not need a stamp). We will then confirm your appointment in writing.

If you would now rather not be interviewed, that is fine - simply do not return the form if you have changed your mind.

Many thanks

Ruth Deery and Deborah Hughes  
CWC Evaluation Project researchers

Name:.....

Would you prefer to be interviewed (please choose **ONE** only)

By telephone <input type="checkbox"/>
Please give your telephone number.....

In person <input type="checkbox"/>
Please state favoured venue e.g. Women's Centre.....

By e-mail <input type="checkbox"/>
Please give your e-mail address.....

Please tick which times/dates would be convenient for you (tick up to 3):

- |                                    |    |                          |    |                          |
|------------------------------------|----|--------------------------|----|--------------------------|
| Monday 3 <sup>rd</sup> October     | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Monday 10 <sup>th</sup> October    | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Tuesday 18 <sup>th</sup> October   |    |                          | pm | <input type="checkbox"/> |
| Friday 28 <sup>th</sup> October    | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Monday 31 <sup>st</sup> October    | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Wednesday 2 <sup>nd</sup> November |    |                          | pm | <input type="checkbox"/> |



## Calderdale Women's Centre Evaluation Project

### Interview Schedule

- Thank for agreeing to be interviewed.
- Remind about anonymity.
- Do not have to answer any question they would rather not.
  1. Are you mainly a user or a volunteer at the current time?  
(If a volunteer, please answer the questions mainly from that perspective but if also previously a user, you may talk about that experience too.)
  2. What were you wanting to get out of it when you first went to The Women's Centre? (What were needs/expectations? -relate to Q.3 of the questionnaire.)
  3. Were these met? (Describe how.)
  4. How has The Women's Centre improved things for you (general health/well-being/situation)? (Relate to Q.4 of questionnaire.)
  5. Has the Women's Centre helped you become more aware of any other agencies or made you use them more? Which ones?
  6. Has the Women's Centre helped you become more aware of your rights and other opportunities available to you? Can you give examples/describe these?
  7. How would you like to see Calderdale Women's Centre and its services develop in the future?
- Thank again and tell that copies of final report will be available from CWC by Christmas. If would like one sent - get name and address.

## REFERENCES AND BIBLIOGRAPHY

- Calderdale Women's Centre (2004) **Annual Report 2003 – 2004.**  
Calderdale Women's Centre
- Calderdale Women's Centre (2004) **Annual Report 2004 - 2005.**  
Calderdale Women's Centre
- Oakley, A (1993) **Essays on Women, Medicine and Health**  
Edinburgh University Press
- Parahoo, K (1997) **Nursing Research: Principles, Process and Issues**  
Macmillan
- Siddall, A (2005) **Calderdale Women's Centre: Organisation Development – Audit Report: Information Systems**
- Taillon, R (2000) **The Social and Economic Impact of Women's Centres in Greater Belfast**  
Research Report for the Women's Support Network, November 2000