

Manchester Action on Street Health



Report of External Evaluation of MASH Services

July 2013



Evaluation conducted by:
Sarah Forster
Organisational Development Consultant

E-mail: post@saf4.net
Tel: 0161 446 2188



MASH External Evaluation Executive Summary June 2013

MASH is a charity which has been providing a range of confidential and non-judgemental services to women working in the sex industry in Greater Manchester since 1991. It provides services through the MASH Centre in central Manchester and through outreach work. The external evaluation has been carried out to gain views from stakeholders in order to assess outcomes being achieved by MASH, the effectiveness of the agency's work being funded by the Big Lottery, and to provide learning to guide the shape of services in the future. The evaluation has obtained views of MASH from 49 service users, 12 people in external organisations and 43 staff (including trustees, volunteers, paid staff and sessional staff).

MASH Outcomes

MASH is achieving its core outcomes for women. The evidence shows that MASH is increasing women's health; increasing women's well being; empowering women to make choices and increasing women's safety. The extent to which this happens is strongest for health, but all outcomes have significant achievement. MASH's own monitoring of outcomes will evidence this further for individual women.

Evidence suggests MASH is also achieving on its outcome for the wider community - to influence policy and practice changes in other agencies working with the client group. It is also achieving some unintended outcomes of an increased sense of community among sex workers and increased number of friendships and ability to make friends for women.

MASH Impact

Through its work MASH has an impact in the following areas: reduction of crime and disorder; increasing education of women, especially for increasing employment prospects; reducing numbers of troubled families; and increased community cohesion.

MASH Services

From the wide range of stakeholder views, the MASH service model has been found to be: holistic – focussed on women's needs; accessible to the service user group; expert in working with the service user group of women; developmental; grounded in partnership working; and non-bureaucratic. Staff have been found to be: non-judgmental; warm/friendly; skilled and knowledgeable.

Stakeholders have proven the need for MASH services – both Centre based and outreach, and they judged MASH to meet service user needs very well. The MASH Centre is able to provide much greater depth to outcomes achieved than outreach work, due to greater ability to engage service users over a period of time. Services are provided predominantly

to people currently in sex work, and there are also a small number of service users who have left sex work and need support.

The MASH Centre has many benefits which attract service users: easy, convenient location; a single static location for variety of services; a welcoming, supportive, warm atmosphere with access to food and drink; a “safe haven”. This then facilitates MASH developing trust with service users, achieving longer term outcomes, and building relationships between other organisations and service users.

MASH is unique in the North West in offering this range of services. The use of paid staff, sessional workers and volunteers for providing services works well.

Whilst there is potential for development of services, no major issues of concern have been raised; many of the suggestions made are dependent on MASH priorities and funding.

Learning

There is a core set of services for the MASH Centre of drop-in, health/nurse, case work, counselling and sessional activities. The range of activities can be varied with time, according to demand and resources available. There is potential to also deliver these services from other bases, should funding allow.

The volunteer body is a diverse and skilled group. It is essential for MASH to maintain focus on volunteer development and training. There is potential to develop the use of volunteers in providing activities at the MASH Centre.

The MASH outcomes evaluation framework can be verified and developed using the information from the evaluation. There is scope for the additional outcomes of building a sense of community for sex workers and volunteering to be included in the future

Conclusions

In summary, the findings of the evaluation validate MASH for both the outcomes it achieves and its holistic service model. The worth of the MASH Centre has been well proven, especially for the opportunity it provides to achieve higher level and longer term outcomes. MASH is providing the sex workers of Manchester with a vital set of services which enhance their lives in many ways.

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1 Introduction

Manchester Action on Street Health (MASH) has undertaken this evaluation as part of the requirements of its funding from the Big Lottery Fund. This funding is now in its fourth year. This evaluation has been undertaken to complement the evaluation work MASH does internally, and particularly to gain qualitative data from a variety of stakeholders, as much of what the project has already collected is quantitative in nature. The aims of the evaluation are to gain stakeholder views to:

- assess the outcomes being achieved by MASH's work
- assess the effectiveness of the Big Lottery funded work: the MASH Centre building, drop-in services, sessional work, volunteer development, health work and education work.
- provide learning to guide the shape of services in the future

Big Lottery also funds MASH to do criminal justice work, which MASH has decided to evaluate separately, due to the specialist nature of this work.

This report gives details of the evaluation findings about the way MASH provides services, the outcomes it achieves, and key issues for the future.

In the report, quotations are used to illustrate the findings and are given in italics and quotation marks. It should also be noted that the phrase 'staff' is used to represent the trustees, paid staff, sessional workers and volunteers of MASH unless differentiation is needed.

2 Brief description of MASH

2.1 Services

MASH is a charity which has been providing a range of confidential and non-judgemental services to women working in the sex industry in Greater Manchester since 1991. MASH services are open to female sex workers and women who are at risk of entering into sex work. The women accessing the service have all had different experiences and lifestyles that led them to sex work, and need help to survive those and look to the future. Many women who work on the streets have been so damaged by their life experiences that they need intensive support. They are also a very marginalised and isolated group, and face issues of stigma and discrimination.

MASH originally operated out of an outreach van, visiting women working on the street and in saunas. In 2010, MASH moved into the MASH Centre in the city centre district of Manchester, which opens for a variety of afternoon and evenings sessions across the week. The Centre provides a range of services including drop-in, sexual health clinic, needle exchange, therapeutic services and life skills support. MASH staff also offer long

term casework support and address issues such as drug addiction, housing and money problems.

Outreach services continue for women working on the streets and indoors, and include sexual health services, needle exchange, safety services and refreshments. The Criminal Justice Worker supports women who have any involvement in the criminal justice system, whether as perpetrator or victim, and works from the Centre and with women in Styal Prison in Cheshire.

MASH has a professional paid staff team of 10 (many are part-time), supported by 40 to 60 volunteers (numbers vary). There are also sessional workers who deliver specific sessions at the MASH Centre (such as art, drama, picture framing).

MASH is well established within the Manchester area and has partnership links with many statutory and non-statutory agencies, as well as being a member of key multi-agency groups.

2.2 Core outcomes

Over the past year, MASH has been focussing on outcomes evaluation of its services, and has identified its core outcomes as:

For women:

- To improve women's health
- To improve women's well being
- To empower women to make choices
- To increase women's safety

For the wider community:

- To influence policy and practice changes in other agencies working with our clients group
- To influence a more positive view in society of our clients

MASH has an evaluation framework for its work. Indicators have been identified for each of its outcomes and monitoring data related to these is regularly collected. Many of the monitoring processes for these indicators are in place, and the remainder are currently in development.

3 Evaluation Methodology

The evaluation has focused predominantly on the services provided by MASH at its Centre on Fairfield St, Manchester. However, inclusion of the outreach work was essential, in order to provide better understanding of the Centre.

MASH has a number of systems in place for monitoring its work, including:

- Care Path system (for NHS/local authority) which provides quantitative data about many aspects of the services.
- Outcomes Star (for Alcohol Recovery) which provides data about outcomes for individual women undergoing case work

Reporting of these systems is carried out by MASH separately.

The evaluation methodology was created to collect mainly qualitative data and provide those involved with the project with a structured way of contributing their experiences, perceptions and reflections. Questions were targeted to gain information about outcomes for women and the wider community and about how MASH provides its services.

The process has involved:

- Review of project documents including reports to funders
- Internet survey of staff – trustees, paid staff, sessional workers and volunteers of MASH – 43 responses completed.
- Semi-structured meeting with trustee group (4 trustees present).
- Face to face survey of services users – carried out by the evaluator and by MASH staff at the centre and during outreach visits – 49 responses completed.
- Telephone or face to face interviews with 12 people in key organisations who have worked with MASH.

A summary of the profile of respondents to the service user, external organisations and staff surveys is given in Appendix 1.

The surveys were done without baseline data being available for comparison. However the inclusion of a wide range of stakeholders gives validity to the findings of the work.

The survey has been completed by a representative sample of MASH Centre service users. The outreach survey with service users was done on one evening and the sample of people who have not used the MASH Centre is small (11 women). Monitoring being done by MASH will provide more extensive data about the outreach outcomes.

For the staff and service user surveys, questions were not compulsory, so people were able to answer only where they felt able. Where statistics are quoted in the report, the numbers of respondents are also given for clarity.

The data for service users has often been split within the report into those people using the MASH Centre and those who do not, as there are significant differences in the responses and the outcomes. This point is discussed further in section 7.1.

4 Services user numbers 2012-13

Numbers of potential service users are variable and difficult to quantify. MASH believes that the service has reached the majority of women working on the street or in saunas.

Figures have been obtained from the MASH monitoring data. Over the past year, MASH has seen a total of 480 women:

- 55% work off street (e.g. in saunas) many of whom received support from the nurse doing sexual health outreach
- 45% work on the streets

For the MASH Centre, there have been a total of 230 individual women accessing services:

- 75% are street workers.
- Women using the Centre may attend drop-in only, but the vast majority access other services too.
- 117 women have received individual case work with a MASH worker.

The sessional services mainly had between 16 and 45 individual service users for the year, with frequency of use that can be graded according to MASH statistics as:

- Art; Computers/self-study
- Picture framing; Complementary therapy; Education;
- Occupational therapy; Drama
- Counselling
- Self-esteem (3 service users)

5 Outcomes of MASH

5.1 Assessing outcomes

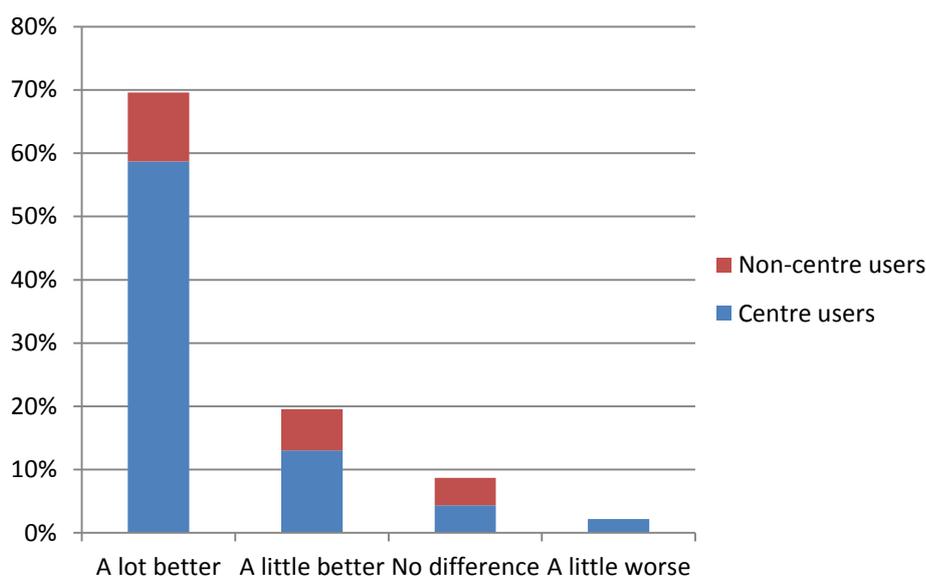
MASH has a number of monitoring methods in place and in development to allow the evidencing and assessment of outcomes for its work, especially outcomes for individual women. This evaluation has gathered evidence from stakeholders for a broad overview of the outcomes being achieved by MASH.

5.2 MASH Outcome 1 - To improve women's health

This outcome covers a broad range of health issues including sexual health, general health, drug and alcohol use.

a. Service user views

Views from service users show that that out of the women who answered (46), the vast majority – 90% - have perceived an improvement in their health and for 70% they feel it is much better.



Areas of life that women commented on in improvements in health include: drug use, alcohol use, sexual health, housing, and food.

'I am now class A and benzo free for nearly 4 years' Service user

I was homeless, used to use all day and all night. Sex work from sun up to sun down. I now have a flat and only use once every 2 weeks.' Service user

'They have fed me, got me a prescription. Basically they're helping me with a lot'. Service user

'The sexual health checks at MASH improve my mental well being a lot. Other sexual health clinics ask too many questions.' Service user

b. External stakeholder views

Areas that external organisations gave comments on improvements in health include: sexual health, reduction in drug and alcohol use, attending drug treatment, general health, and early treatment of health issues.

'Detecting and treating sexual infections. The nurse links with other agencies to do shared care. The amount of infection picked up since nurse went full time is phenomenal.'

NHS

c. Staff views

Areas that staff (32) gave comments on improvements in health include: sexual health, levels of engagement, drug and alcohol use. Staff particularly thought MASH very effective in the areas of sexual health and addressing drug and alcohol use.

'Have known of several occasions where MASH nurse has treated a range of STIs, discreetly and quickly. Case workers help women access drug treatment and this is vital for the service users.'

Volunteer

'Nurse outreach to saunas means women who may never otherwise access health services do, especially non-British women.'

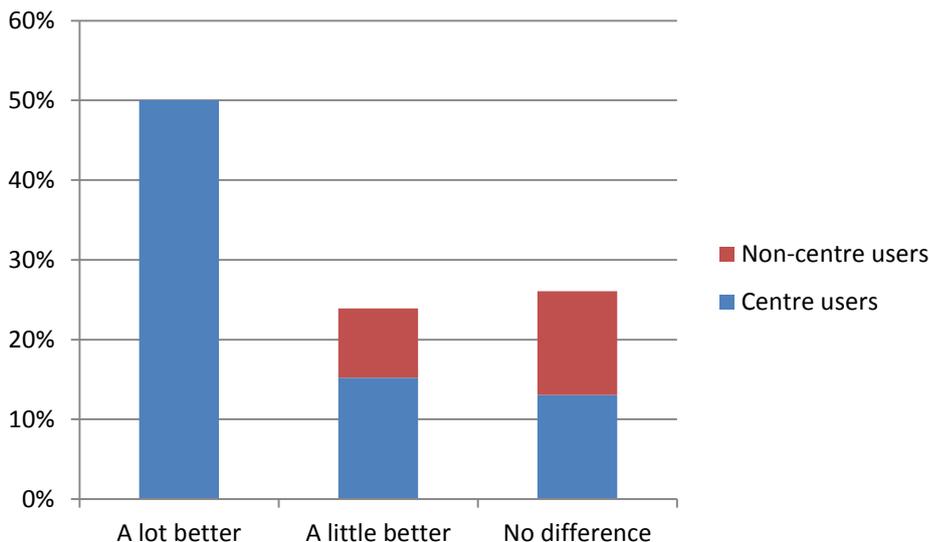
Volunteer

5.3 MASH Outcome 2 - To improve women's well being

This outcome covers emotional well-being issues including emotional health, confidence, skills and ability to cope.

a. Service user views

Views from service users show that out of women who answered (46), the majority – 64% - have perceived an improvement in their well being and for half they feel it is much better.



Areas of life that women commented on for improvements in well being include confidence, understanding self, and friendships.

'I would say my mental health is sometimes 'a lot better' as a result of Art therapy, CBT and general recognition and continuity through informal chats with staff. Receiving a personalised Christmas card made me feel valued and part of something positive.'

Service user

'I was guided by MASH to go to rehab which helped to let off emotion pressure'

Service user

b. External stakeholder views

Areas that external organisations gave comments on improvements in well being include confidence, self esteem, and sense of worth.

c. Staff views

Areas that (30) staff gave comments on improvements in well being include: confidence, self esteem, relationships, coping strategies, use of counselling, engagement in activities.

'I think MASH plays a huge part in changing women's general well being, emotional health in particular. Having someone to talk to who doesn't judge

and is accepting of you is very powerful. I believe support around emotional health is a huge step forward towards making changes and feeling better. Having someone to work through the issues with improves feelings of self-worth, which can only be a good thing! Paid staff member

'The very existence of the drop-in centre and activities it offers improves general well being, giving people the opportunity to do something they may not otherwise do. Also as a place where they can relax and know that staff/volunteers are non-judgmental and interested in their wellbeing.' Volunteer

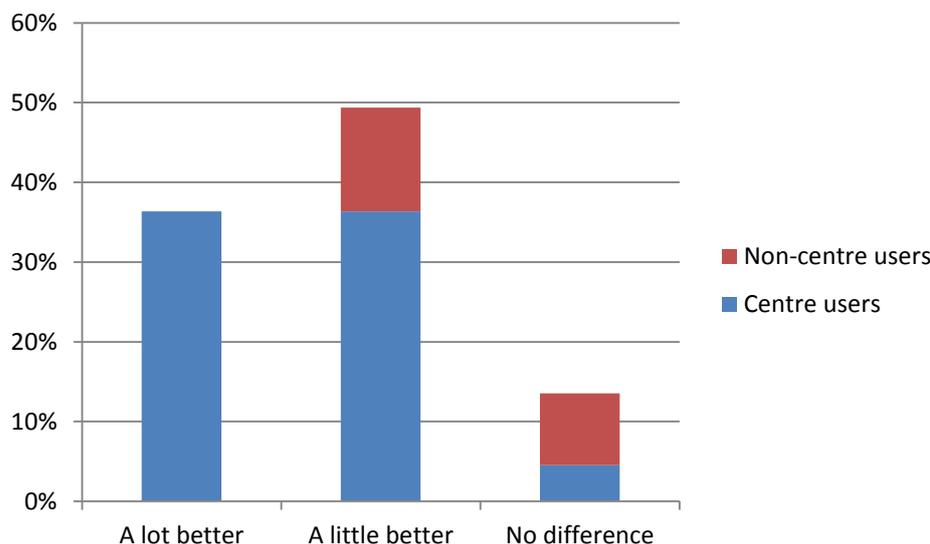
'One girl is trying to lose some weight and to look good for herself. She is encouraged as much as possible and we tell her how good she looks. Another service user is much more mobile and pain free after treatment therefore enhancing her general well being'. Sessional worker

5.4 MASH Outcome 3 - To empower women to make choices

This outcome covers the skills and ability of women to be in charge of their lives and make decisions that may change them.

a. Service user views

Views from service users show that out of the women who answered (44), the vast majority - 84% - have perceived an improvement in how in charge they feel and for nearly half they feel this is a little better.



Areas of life that women commented on for empowerment include level of progress made, changes made/being planned, better financial management, stopping sex work and alternative employment including volunteering.

'Still a work in progress but getting there slowly.' Service user

'I now see life from an adult perspective.' Service user

'They helped me finish street working two years ago and apply for 'normal' jobs. I see my life differently, it's a big change since I stopped working. I will NEVER go back to that work, it's not worth it. I did it because I didn't have any money, now I hope to get a job.'

Service user

'I am more outgoing and participate in a voluntary group.'

Service user

b. External stakeholder views

Areas that external organisations gave comments on improvements in empowerment to make choices include initial engagement of women, informing about rights and legal issues, gaining a stable lifestyle, raising aspirations, showing other work and income options, volunteering, healthy relationships, stopping criminal activity, and stopping sex work.

'People have gone from being street workers to being settled, going to college, and have exited sex work. They wouldn't have been able to without MASH.'

Lifeshare

'I know of a chaotic client who is now attending a child and parent reading group. It takes years to get to fully functioning. I have seen it happen [through MASH's work] and it's quite significant.'

Manchester Women's Aid

c. Staff views

Areas that (28) staff gave comments on improvements in empowerment to make choices include: increasing skills, changing lifestyle, reduced hours of sex working, and exiting sex work.

'The tools and information are given to the service users and they are encouraged to use the tools but it is up to the women. If they want to make the change then MASH is effective in supporting them.'

Volunteer

'It's slow but very effective seeing changes in the women over longer periods of time.'

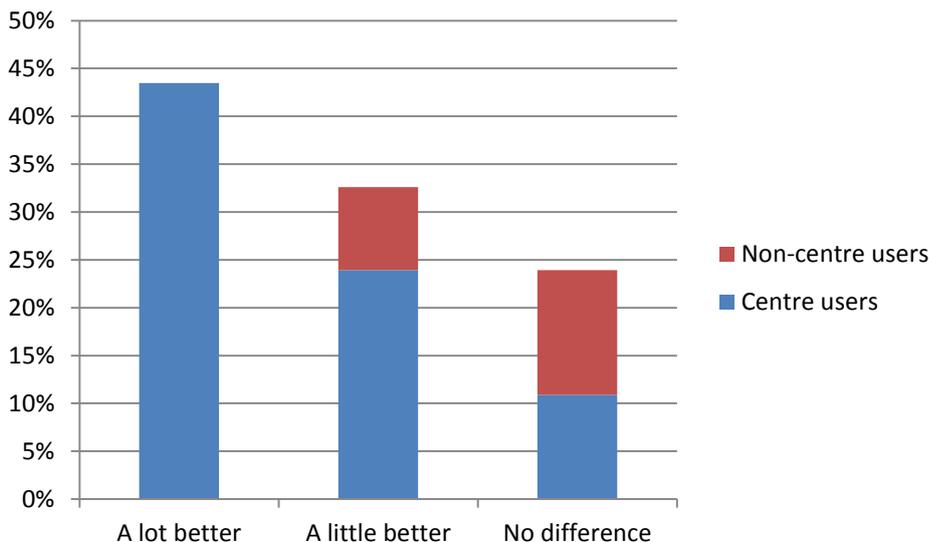
Sessional worker

5.5 MASH Outcome 4 - To increase women's safety

This outcome covers physical safety, mainly whilst women are at work.

a. Service user views

Views from service users show that out of the women who answered (46), the majority – 76% - have perceived an improvement in their safety and for 43% they feel this is a lot better.



Areas of life that women commented on for safety include safety at work, having stopped sex work, issues at the MASH centre.

It's a safe haven when there are weirdos out there. Most people are aware of this place whether they use it or not. MASH acts as a deterrent as people out there are aware it's here'

Service user

'When MASH is open there is someone to go to in case there is a dodgy punter. Also there is CCTV outside MASH building when they shut'

Service user

b. External stakeholder views

Areas that external organisations gave comments on improvements in women's safety include safe place to go, safer working practice, violence in women's lives (eg domestic violence), information sharing about safety issues, and stopping criminal behaviour.

'Lifesavers. In the absence of MASH who is going to look out for the women. They are at the most risky end of vulnerability. We can't deal with it all.'

Greater Manchester Police

'Information passing about dodgy punters leads to men being arrested and prosecuted. We're all safer.'

Manchester City Council

'Very recently we had a series of incidents in Fairfield St [near the MASH Centre] – we had a lot of interaction with those women and the case is going to trial. Those women have always been very complimentary of the services provided by MASH. I am 100% sure that had we not worked together on that particular investigation, we'd never have got anywhere near where we are now. It's a stark example of our partnership working.' Greater Manchester Police

c. Staff views

Areas that (31) staff gave comments on improvements in women's safety include: information sharing about safety issues, provision of safety equipment, and safety of the MASH centre.

'I think the dodgy punter scheme really helps to make the girls a bit more aware. Also MASH makes them realise that they don't have to accept abuse and hopefully gives them the confidence not to accept it and/or to report it when it does happen.' Volunteer

'I think sex work is always going to be a dangerous job, MASH shows that you don't deserve to be attacked and gives women an outlet to get support around it.' Volunteer

'They feel safe here. They won't talk to you on the street - they are vulnerable all the time. If they talk, they've always got one eye over your shoulder - they can tell you what's in that corner, what's in the other corner and who's behind you. Here is a step out and they can breathe out and be safe.' Trustee

5.6 MASH Outcome 5 - To influence policy and practice changes in other agencies working with our client group

This outcome was not specifically assessed within the evaluation remit. However some evidence for it was gained.

a. External stakeholder views

This group were very well placed to offer views about policy and practice. The areas that MASH is clearly influencing are:

- Practice in individual organisations providing services to the MASH service users
As described in section 5d MASH are seen as experts in the field, and agencies do look to them for support with good practice.
- Challenging perceptions of individual workers about the client group
- Challenging perceptions of agencies about the voluntary sector

'Every contact we've had with them, they are extremely professional - better than I'd expect from the voluntary sector – they challenge my perceptions. They have a good approach to staff management and HR. They always give the impression they do things properly and fairly, and are a good employer. So staff are happy as well as service users.'

NHS

- Influencing strategy for agencies, especially the police

'They have a critical relationship with the Police - help develop strategy and focus, and keep girls safe. It's good that we know that as we can give out information.'

NHS

'Sex workers are residents of Manchester just like I am, and MASH provides a service for these residents of Manchester. Our relationship with MASH gives us a way in/conduit to managing the crime and anti-social behaviour that is associated with sex workers including punters. It also allows us to contribute to addressing issues around sex worker safety, for example through environmental factors such as street lighting so the area is as safe as it can be. The good relationship between MASH, GMP and MCC means that any complaints by residents or businesses are dealt with swiftly and effectively.'

Manchester City Council

'If we didn't have a partnership between named individuals, a lot of investigations and intelligence we get that are a risk to both service users and women in general, I don't think we'd get. The flow of information is really fundamental to some of our work. Information is generally anonymised - so we can do proactive work and research work about people - so if we have an incident we've already got background work done and intelligence - so we can draw on this - real benefit - only developed in last 6 months. We're a forerunner in the country in using information this way.'

Greater Manchester Police

- Influencing strategy for the local area, especially Manchester

'The MASH multi-agency way of working and its presence on forums across the city gives the voice [of sex workers needs].'

Lifeshare

b. Staff views

Staff mainly raised issues about working effectively with the police.

'I know from working in partnership with MASH at Crime & Disorder that they were the key agency in driving women's safety. We worked in partnership with the Police to share information on dodgy punters & to plan police operations in order to maximise safety. MASH also contributed greatly to the strategic aims of the Manchester Prostitution strategy so that safety was one of the main aims.'

Sessional worker

'MASH helps to improve the relationship between the service users and the police. Service users are more likely to engage with the police if supported by MASH.'

Paid staff worker

'The police treat rape against sex workers more seriously.'

Volunteer

'Relationships built with the receptionists of saunas leading to them being better informed of the girls rights, linking girls into services (eg MASH nurses) and communicating better with police etc.'

Volunteer

5.7 Other outcomes from MASH's work

Some evidence for other outcomes has been obtained from the evaluation work as:

- Increased sense of community within the sex work community

'As women get to know each other through MASH it builds a better sense of community on the street which results in women looking taking better care of each other on the street.'

Volunteer

- Increased number of friendships and ability to make friends for women

'I have made a new friend and began to trust other people and myself more.'

Service user

'Talking to people, I like to come in, made some friends, stops loneliness.'

Service user

6 Views about the current services

This section summarises the views given by stakeholders about MASH. The sections used here to organise the views are: the attributes of MASH services; the staff; the MASH Centre; the need for services; how well MASH meet needs; other issues raised; development needs and the uniqueness of MASH.

6.1 Attributes of MASH services

The views of stakeholders about the way MASH provides its services have been summarised into the following attributes.

a. Holistic – focussed on women’s needs

The MASH services are seen to address the wide issues that service users have in their lives. Where appropriate MASH will make referrals to other agencies and support women to attend appointments at those agencies.

‘Just good. Give you everything you need. Always help with dole and housing and people always listen.’ Service user

‘The service in general is really good - amazing for the women.’
Sexual Assault Referral Centre

‘It’s a holistic approach – they’ve been able to offer a hell of a lot of things for the women - to engage them. I’m impressed.’ ADS

‘They are flexible, eg have interpreters for Roma women’
Greater Manchester Police

‘We offer facilities that are about them, not just about sex work.’ Trustee

b. Accessible to the service user group

All groups questioned felt that MASH services are welcoming and accessible to the service user group of women, in a way that other services are not. This is incorporated in the values underpinning the service, the locations worked in, and the staff approach.

‘Feel more confident talking to people at MASH.’ Service user

‘No matter what, they are there for us.’ Service user

MASH are brilliant in the way they engage, very person centred, they go out of their way. Women use them when working and not working. They show them other things to do with their time, like crafts. They are good at normalising women’s behaviours.’ Manchester City Council

‘The women have complex and individual needs, and wouldn’t fit into mainstream services.’ NHS

‘There have been many occasions when the girls have expressed their appreciation.’ Volunteer

c. Expert in working with the service user group of women

MASH is recognised by external agencies as really knowing the sex work scene and the individual street workers, and is also valued by them as place of expertise for learning about good practice in working with this service user group.

'They are known throughout the country for respecting women, and deemed as one of the best sex worker projects.' Men's Room

'They're just amazing aren't they. They are a project we would recommend others go and shadow.' National Ugly Mugs

'They are women focused and challenge me in a positive way. No-one else matches MASH for quality or engagement.' Manchester City Council

'When we pick up an individual we have concerns about, they usually know them and are already doing work with them.' Greater Manchester Police

d. Developmental

External stakeholders in particular valued MASH's methodology for providing services to women, in that it starts at the point a woman is, and aims to support her in whatever small or larger changes are possible for her at that time, whether those are practical or emotional. There is also recognition that a service user might engage for a small amount of time, and then make further changes at a later date.

'The brilliant thing about MASH - being able to identify where clients are at in the cycle of change and work at that point – the work is very relevant. They offer different things to meet needs as they go around the cycle.'

Manchester Women's Aid

e. Grounded in partnership working

MASH is seen by other agencies as an expert in partnership working. It has many very secure partnership relationships, which contribute to achieving good outcomes and experiences for service users. Partners were able to state the benefit of their partnership working to both their own organisation and to MASH. Nearly all external organisations had also seen an impact from MASH's work on other agencies too.

'MASH tap into lots of people (pull people out of the woodwork) and provide a joined up service, including with statutory bodies. They work well with difficult circumstances.' NHS

'MASH are sophisticated and clever in their approach to problems. They are very good at sharing information with us using effective methods even when outside normal policy. They can have a sensible conversation with senior police officers and a good relationship with officers on the beat.' Greater Manchester Police

'There are very few services specifically for women that refer to us. MASH pick up on the frontline women who are homeless. They are very approachable and we work well together. They are good at helping women attend appointments, and having three way meetings. They are open & transparent.' NACRO

f. Non-bureaucratic

External organisations in particular were complimentary of the methods used by MASH to document work with clients and offer seamless referral to other agencies without women having to repeat very difficult information/experiences.

'Having to build trusting relationships with a chaotic person is hard. MASH start that off - trust building, understanding, history, how best to work with them. They pass on the baton to me. Women don't have to repeat things. We work informally and casually, and firm it up when we need to. Work is done without the women realising how much they've done - that saves them pain.'

Manchester City Council

6.2 Staff attributes

The descriptions given by people about the approach of MASH staff have been summarised into the following attributes.

a. Non-judgemental

This was the key factor mentioned by staff and external organisations. Service users clearly perceive this as a staff attribute, but are more likely to describe it as 'always listen', 'caring' or 'friendly'.

'I think this is vital as the subjects that arise such as rape, safety, housing, drug use, health, housing and many more are all complex and difficult. Without the non-judgmental attitudes of MASH a lot of the women would not feel able to access the vital service.'

Volunteer

b. Friendly/warm

This was the attribute most mentioned by service users as being what they like about MASH.

'All the staff genuinely care and have different skills that come together to make FANTASTIC! :-)'

Service user

'At MASH they really care about us, so they make sure they go that extra mile to help us. You don't get that in a lot of other help organisations. At MASH they don't give up helping us which makes us not give up on ourselves.'

Service user

c. Skilled and knowledgeable

Service users and external organisations value staff for their wide ranging knowledge across the issues that service users face, including homelessness, housing, drug use, alcohol use, benefits, employment and legal issues.

'I'm proper grateful especially for getting me a place to stay'

Service user

*'The staff are informed of current changes in the law regarding housing/
benefits issues.'* Service user

Service users in the main did not distinguish the volunteers from paid staff. A high proportion (about 75%) of the current volunteer team gave very useful information to the evaluation. The trustees were very positive about the volunteer group, especially about the wide ranging experiences the volunteers bring.

*'Service users are coming into contact in their everyday life with people they
wouldn't come into contact with in an easy way - like a doctor, a finance person
- it cuts barriers.'* Trustee

*'A lot of the volunteers have huge skills and links - you'd be gobsmacked if you
tried to map it - it's a strange multi-disciplinary team.'* Trustee

6.3 The MASH Centre

The MASH Centre is viewed by all stakeholders as a vital resource for effective service delivery, for service users and partners. 54% of MASH Centre service users and 75% of people from external organisations had known MASH since before the Centre opened when services were offered from its van, and were able to offer a view of the difference. In many cases this was described as 'massive' or 'huge'.

89% of MASH Centre service users gave an appraisal of the positive difference the centre makes to them. Staff, trustees and external stakeholders were equally clear about the worth of the MASH Centre. The views given have been summarised as:

- Easy, convenient location

'It is perfect, in just the right place, easy access' Service user

*It's near to the beat. For those in the streets the proximity is fantastic. They can
just nip in, before work or in-between clients - time is money. They have chaotic
lifestyles so drop-in is very important.'* NHS

- Single static location for variety of services

*'They are here and open every day, don't have to wait for a particular day.
When they had the van rotating, if you missed it you were knackered.'*

Service user

'They have everything I need all in one place.' Service user

'I wouldn't access services if not in a single location' Service user

*'The van would only be out at certain hours on certain days in a particular
location. With the centre, it is open on more days and longer hours. Now there's
more privacy. They can offer all sorts of group sessions that couldn't be offered
on a van.'* Manchester City Council

'They can come and leave all their cares and worries, and have reflexology or complementary therapy, drama, picture framing. It's about them as a person and not what they do. They have someone to get one stop advice from, and not be passed from pillar to post. They don't have to be registered with a GP - can have checks done and be texted - it's a very easy service for them to access. They get a holistic view of themselves. We do modelling, for example to show you are able to cook on a budget, and to see someone doing it – it's a really good model. They need more role models and buddy systems.' Trustee

- Welcoming, supportive, warm atmosphere with access to food and drink
 - 'Faces became familiar and a network of support can be built with a variety of people including other service users.'* Service user
 - 'You can come and chill, have a brew. They help me with my diabetes/chronic illness.'* Service user
 - 'It feels like a family home that they can visit daily. This is essential to mental health. This is what service users tell me.'* Sessional worker

- Safe haven
 - 'The Centre is a safe place on the beat and a bit of normality in the craziness'* Service user

- Build trust with service users
 - 'They feel they have ownership of the centre. It's a place which is purely for them. They know we will listen to them and give them a fair go at something, rather than judging them straight away.'* Trustee

- Provide services with longer term outcomes
 - 'It's important for women to get basic stuff (drink/biscuit) but also for education. That's very empowering. It makes them feel good about themselves so they can move on with their lives.'* National Ugly Mugs
 - 'Most of our service users have drug or alcohol issues and chaotic life styles, having a single location means higher chance for them to engage with the service and attend their appointments'* Paid staff member
 - 'I come in on Fridays sometimes, you feel a real buzz. They are being taught life skills that really help to get them back into lives that aren't so chaotic.'* Trustee

- Build relationships between other organisations and service users
 - 'A lot of the service users are very chaotic for a variety of reasons, we can find it difficult to track people down to keep on-going dialogue, we can use the MASH centre for officers to meet people.'* Greater Manchester Police

'For drug treatment services it's difficult to engage women. Working with MASH gives us opportunities to target vulnerable women from an under-represented group for targeted support. Our worker can learn by being there.' ADS

6.4 Need for services

a. Services at the MASH Centre

The numbers of service users in the financial year 2102-13 is shown in section 4. The survey responses from service users for usage of services largely echoed the breakdown there.

The service user survey asked which were the top 3 most helpful services to the service user. 37 service users responded which gave the following order:

- | | |
|---|--------|
| - Drop in | 62% |
| - Health/nurse | 57% |
| - Case work | 38% |
| - Framing; Education; Counselling | 19-24% |
| - Occupational Therapy; Complementary Therapy | 14% |
| - Art; Drama | 8-11% |

The staff survey asked staff to comment on the need for services. 38 staff responded which gave the following order for demand:

- | | |
|--|--------|
| - Drop in | 97% |
| - Health/nurse | 89% |
| - Case work | 81% |
| - Complementary Therapy, Counselling, Art | 63-74% |
| - Fairly even spread across other sessional activities | 50-58% |

b. Outreach services

The need for MASH to continue with outreach services was underlined by all groups included in the evaluation, for the following reasons:

- Some service users will not wish to access the centre even if it is close to where they work.
- Fairfield St is not the only area in Manchester where street workers operate. The other main area is Cheetham Hill.
- Indoor workers are much less likely to make use of the MASH Centre, and rely on the outreach work, especially for sexual health support. Of the 8 non-Mash Centre users who said what they like most about MASH, 75% said that it is that they come out to their workplace.

'Outreach is the most valuable for us, we get intelligence from the women that is relevant to men. They do late night/unsociable service – it meets needs.'

Men's Room

'Operationally they get it right – are committed to outreach when and where it's right.'

Greater Manchester Police

- There are other areas of Greater Manchester that would benefit from MASH services.

‘Like areas where there is zero tolerance from police and women get arrested and go back to prison very quickly – a constant unsupported cycle.’ Trustee

6.5 MASH’s ability to meet needs

Stakeholders felt overall that MASH is good at meeting the needs of service users, both individually and as a service user group. People were able to articulate evidence for how this is demonstrated.

For service users, of 39 service users who commented on potential improvements to MASH’s services, 54% did not want to offer any improvements as they didn’t believe any are necessary.

‘Excellent actually. I find it hard to believe such services exist!’ Service user

‘They cover all bases and still meet individual needs’ Service user

For staff, 72% believe the needs of service users are being met ‘very well’ and 28% believe ‘quite well’.

‘MASH is very good at working alongside clients to establish their needs and work alongside them’ Volunteer

External stakeholders were unanimous that MASH meets the needs of service users ‘very well’.

‘MASH are very pro-active and on-the-ball so they notice changes in service user situations and needs, eg periods when crack or heroin were in short supply and the subsequent rise in women drinking alcohol. MASH picks up on that and as a result will have discussions with the Community Alcohol Team to see what they can put in place to address service user needs. The impact of the recession has also been picked up and the changes in the welfare system. There has been an increase in the number of service users, coupled with punters having less money and this brings a whole host of issues. MASH are very reactive to changes like this and tailor training to frontline staff accordingly.’ Manchester City Council

‘We have good proactive guidance. MASH meet the criteria very well. They cover all aspects of the needs of sex workers through the full scale of service provision.’ National Ugly Mugs

6.6 Other issues raised

- There were differing opinions (from some staff and external organisations) about the role of MASH in supporting service users to exit sex work. This option is within the choices available to service users as they work with MASH.
- Some external organisations felt that because MASH is able to engage sex workers effectively, they relieve the pressure on other services.

'MASH mops up a lot of women that other services should support and don't, e.g. mental health services, rough sleeping. MASH do it by default.'

Men's Room

- Changes to other services in the area (e.g. the closure last year of Manchester Drug Service 'The Bridge' on Fairfield St) have also meant the stability of MASH in the area has been vital to service users and partners.

'MASH came into their own last year when all the changes happened. It's brilliant that they picked up giving support to people in the slack that was created and needs to be acknowledged.'

Manchester City Council

- Some staff and external organisations commented on the effect of the current economic climate on sex workers, both adverse terms for individuals and increasing numbers of sex workers.

'Welfare reforms are already resulting in an increase in street based prostitution. Quite a few girls can't claim benefits - they get sanctioned under the new regime and face greater hardship. In the times we're living in, prostitution is not going to go away. So the service is imperative.'

Lifeshare

- There are economic migrants working in sex work in Manchester, on the street and especially in the saunas. The majority of these women are Romanian. MASH does provide an interpreter regularly but not for all sessions.

'We have a good Romanian translator – that has helped to build the confidence of a service user. She also translated dodgy punter information.'

Trustee

6.7 Improvement areas

The overall view from stakeholders was that MASH services are very good. Of 45 service users who rated the service 64% said 'very good', 24% said 'quite good' and 11% said 'average'. For users of the MASH Centre this was 83% 'very good', 8% 'quite good' and 8% 'average'. Nothing was said by any stakeholders that raised concerns about MASH's ability to run services well.

The two areas of most concern in maintaining quality of service were:

- Two service users felt that some volunteers are judgmental.
- Three service users raised concerns about arguments or fights sometimes happening between service users at the MASH Centre

Both of these issues can potentially be addressed through MASH procedures. Other service users have observed staff challenging poor behaviour.

'Support workers will demand order if needed. It's important to make users responsible for manners/ respect.' Service user

6.7 Development areas

70% of MASH Centre service users (23 answers) and 83% of external stakeholders had such positive views of MASH services that they were unable or didn't wish to name something they don't like about them. For the service users overall 62% (39 answers) did not see the need for anything to change. Development suggestions were made by some however. Staff made the most development suggestions.

The main potential developmental areas raised by stakeholders are summarised below. They are dependent on MASH priorities and funding:

- Longer opening hours of the MASH centre
To include more weekend day and evening sessions
- Development of services at the MASH centre
Especially improved food offer, wider range of courses/activities, activities during evening sessions
- More outreach
Greater presence at saunas and more condoms being given out
- Continued emphasis on training for volunteers
Updating skills/knowledge
- Have service bases at other locations in Greater Manchester
- Have Eastern European worker
Including speaking language (Romanian)
- Developments in partnership working
Formalisation of some current partnerships to increase awareness of work being done and develop joint projects
- More listening to service users
To ensure user voice is more fully incorporated in leading service design
- Increased PR/Marketing
To support awareness of the service, of service user issues and for fundraising

6.8 Uniqueness of MASH

Stakeholders believe there is no other service in the Greater Manchester area (and much further beyond) that offers the same range of services as MASH.

Service users, staff and external stakeholders were able to name other services that provide a specific part only or a complementary service to the services offered by MASH, eg sexual health, drug/alcohol support, homelessness.

7 Findings about MASH

7.1 Outcomes

Outcomes achieved

For all of the core MASH outcomes for women and for one of the wider community outcomes the evidence gained from the evaluation suggests that MASH is meeting these outcomes as follow:

Increase in health: Outcome being met very well

Increase in well being: Outcome being met very well

Empower women to make choices: Outcome being met well

Increase women's safety: Outcome being met well

To influence policy and practice changes in other agencies working with our clients group: Outcome being met well

The evaluation has not attempted to gather evidence for the additional wider community outcome about society's view of service users.

Level of meeting outcome

There are significant differences in the levels of outcome being achieved for service users of the MASH Centre and those visited by outreach services. The outcomes achieved for the MASH Centre are generally of a significantly greater degree and depth than those for outreach, largely due to the greater level of engagement with services at the Centre over a period of time.

Outreach outcomes are strongest for increase in women's health.

Outcomes not achieved

Under Outcome 1, one service user stated their health was a 'little worse' as a result of using MASH services. This service user has been using MASH for 13 years, has no positive outcomes and rated MASH services as 'average'. She gave no detailed information to the survey. It is therefore not possible to make any judgement about why this outcome occurred. The service user clearly has some level of engagement with MASH but at this point feels no positive changes have occurred.

Limits of the service

MASH is realistic about the extent to which some outcomes can be achieved.

'Without access to housing and training, other forms of paid work, women are often trapped in poverty which means it's very hard for them to break out of prostitution and thus drugs, alcohol or low self-esteem.' Sessional worker

Another example of this is safety. MASH achieves well on the outcome and yet, as a service user says, '*Once MASH is shut though you're on your own.*' Whilst this is true, MASH does support safety when closed through various ways including its partnership working, use of CCTV outside the Centre and safety information and equipment given to the women.

A further example comes with health.

'I think it is the start of a journey - I am not sure MASH can take the service user through to the end. More qualified/medical people need to take that baton from us.'

Trustee

This is true of service users with deep needs. MASH does still provide good health support leading to positive outcomes for the women.

Steps towards outcomes

Some of the outcomes are interlinked. For example, empowering women to make choices may be dependent on better health and/or well being. This may account for the empowering outcome having more service users rating their progress as 'a little better' as it takes time for this to be possible (although significant numbers also said 'a lot better').

Unexpected outcomes

The unexpected outcome about friendship is included within the MASH evaluation framework as an indicator within the well being outcome. However the community outcome for sex workers is not included. This may be something that MASH develops with time.

7.2 Service Provision

Uniqueness

The service MASH provides is unique within the North West of England.

Quality

The overwhelming consensus is that MASH services are of a very good standard and are much needed by service users.

Need for services

The overwhelming consensus is that MASH services are much needed by service users and that MASH meets these needs very well.

MASH Centre

The MASH Centre is providing a vital set of services to sex workers in central Manchester.

Its core offer, as valued by service users is:

- drop-in offering refreshments, chance to socialise and safety information (which gains initial and ongoing engagement of service users)
- health services
- individual in-depth case work
- a range of other sessional services designed to engage women and build skills and confidence.

There is consensus between service users and staff about the first three items of the core offer. For other services, feedback from service users is much clearer about the hierarchy of need/usefulness for services than that from staff. The detailed survey data is available for MASH to analyse this further.

Counselling has also been considered independently from the analysis above as it is vital for supporting a small number of women in-depth. The outcomes achieved for those women accessing counselling were all at higher overall levels than the outcome levels shown in section 5. It is an essential part of the core offer for those women.

The MASH Centre continues to be used by some women when they have stopped being sex workers. It plays a preventative role in supporting them with this choice.

Outreach

Outreach is a necessary component of the range of MASH services. It is mainly valued by service users and external organisations for addressing health needs and safety needs.

Volunteers

Using volunteers to support service delivery brings the key strength of diversity to the work of MASH, as well as allowing the service to open at more times than would otherwise be possible. It does present a challenge in ensuring uniformity of approach across such a large group, as well as keeping volunteers up-to-date with current issues and external developments. This emphasises the need for ongoing volunteer development.

Service Development

Whilst there is potential for development of services, there is nothing of significance needed to ensure MASH services are of good standard and achieving outcomes, as this is already being achieved. Many of the suggestions made are dependent on MASH funding and priorities.

7.3 The impact of MASH

From the MASH outcomes, it is possible to see that the work of MASH also contributes to and so has an impact in the following areas:

Reduction of crime and disorder

Through informing service users and police about activities in the area; through informing police about potential male threats.

'Their relationship with the police has evolved over the years (from initial wariness on both sides), to the extent that now the police are keen to involve them in joint operations. So MASH are well informed about operations and explain them to the women, usually about working in certain areas at certain times, so can encourage the women to move on/come out later, so they don't end up in the criminal justice process. It's very positive and the police just don't focus on enforcement, they take a more holistic approach'

Manchester City Council

Increasing education of women, especially for increasing employment prospects

Through increasing skills of women; through linking women with volunteering opportunities, through linking with other education providers, e.g. Back on Track.

Reducing numbers of troubled families

Through increasing skills of women; through taking safeguarding action.

'They are proactive with services around vulnerability, e.g. children's services, social services - have frank exchanges about certain situations. I have had to intervene where services haven't responded as MASH would want them to.'

Greater Manchester Police

'They haven't been parented well or appropriately - so have lost skills such as parenting. You can see history repeating itself. To break that - we're making a real impact. We may not be making a difference to that person now, but maybe to that person's children or families in the long term.' Trustee

This was discussed by trustees as a 'ripple effect'.

Increased community cohesion

Through liaison with police and other businesses in the local area; through increasing sex worker sense of community.

7.4 Consultant's Observations

MASH's relationship with service users

Through the work of this evaluation, the consultant has had the opportunity to observe the work of MASH at the MASH Centre, to meet Trustees and some of the paid staff team, the sessional staff and the volunteers. She has been to three drop-in sessions, a picture framing session, and seen women coming to the Centre to access health provision.

The relationship that MASH has with the service users was observed to be a caring, yet firm one, where the immediate needs of women were quickly noticed and attended to. In addition, the staff were obviously familiar with nearly all of the women. At the same time, there are clear boundaries and procedures in place for how the service is delivered, and staff were observed ensuring these were kept. The service users were very comfortable in the drop-in room. Many of them made good use of the refreshments on offer to the extent that at times it was almost like an informal café. In addition, the service users were obviously accustomed to receiving attention from different staff, and did not appear to mind the addition of the new face of the consultant.

MASH Networks

In talking to external organisations, it was evident that the MASH volunteer network includes people who either already work in or move to work in the sector. The MASH volunteer training programme is very well regarded, and it is clear that volunteers (past and present) are informing and influencing organisations in the wider field of MASH's work. This is a positive result of the use of volunteers, which MASH may wish to develop into its evaluation framework with time, as an indicator within its influencing agencies outcome and within a separate outcome about volunteering.

Positive assessment of MASH

There was a striking and inspiring amount of very positive views about MASH, especially from service users and external organisations, to the extent that the evaluation has shown up barely any concerns about the work of MASH.

Staff offered more development suggestions than came from other perspectives, which appears to come in part from an internally driven commitment to ongoing development. That staff make suggestions is also inevitable and desirable when providing a service with both a large volunteer body and many paid and sessional staff working part time and/or in differing locations.

It is common for service users who are vulnerable and unaccustomed to receiving appropriate services to be as positive and uncomplaining as MASH service users have been. However, from observation of the MASH services, and feedback from staff and external organisations, it is clear that MASH is offering a service which is responsive to service user feedback.

8 Learning about MASH Service Delivery

There are areas for ongoing development of MASH's service which the evaluation informs as follows.

Service and activities development

The evaluation has identified the core offer of the MASH Centre as drop-in, health/nurse, case work, counselling and sessional activities. The range of activities on offer coupled with suggestions given for development of these activities indicates that these could be varied with time, according to demand and resources available. The evaluation survey data can be used by MASH to analyse activities in more detail for service user feedback and for overall outcomes achieved.

The success of the work of the MASH Centre and the presence of sex workers in other areas suggests there is potential for MASH to develop bases in locations away from the MASH Centre. These could be in partnership with other agencies established in those locations, and allow MASH to provide those services achieving longer term outcomes. This would require additional funding and staffing to implement.

Volunteer development

This is a key part of how MASH provides high quality services. It is essential for MASH to maintain focus on volunteer development and training. In addition, there is a diverse and skilled group of volunteers who wish to and can also play a more active role in providing and developing sessional activities across the whole of the MASH Centre opening hours.

Evaluation framework development

The evaluation has shown where the service users, staff and external organisations believe progress is made within each of the outcomes. These areas can be used to verify and develop indicators within MASH's outcomes evaluation framework, as well as to ensure relevant data is being captured for both Centre based and outreach services. The evaluation has also identified additional outcomes that MASH may wish to evaluate further, especially building a sense of community for sex workers and volunteering.

9 Conclusions

The evaluation has obtained views from a range of stakeholders of MASH. The findings of the evaluation validate MASH for both the outcomes it achieves and its service model. The worth of the MASH Centre has been well proven, as has MASH's uniqueness in the North West.

MASH is achieving its core outcomes for women. The evidence shows that MASH is increasing women's health; increasing women's well being; empowering women to make choices and increasing women's safety. The extent to which this happens is strongest for health, but all outcomes have significant achievement. The MASH work on outcomes will evidence this further for individual women.

Evidence suggests MASH is also achieving on its outcome for the wider community - to influence policy and practice changes in other agencies working with the client group. It is also achieving some unintended outcomes for the sex worker community and women's friendships.

Through its work MASH has an impact in the following areas: reduction of crime and disorder; increasing education of women, especially for increasing employment prospects; reducing numbers of troubled families; and increased community cohesion.

The MASH service model has been found to be: holistic – focussed on women's needs; accessible to the service user group; expert in working with the service user group of women; developmental; grounded in partnership working; and non-bureaucratic. Staff have been found to be: non-judgmental; warm/friendly; skilled and knowledgeable.

The need for MASH services has been proven – both Centre based and outreach, with the MASH Centre able to provide much greater depth to outcomes achieved than its outreach work. Services are provided predominantly to people currently in sex work, and there are also a number of service users who have left sex work and need support.

The MASH Centre has many benefits which attract service users: easy, convenient location; a single static location for variety of services; a welcoming, supportive, warm atmosphere with access to food and drink; a safe haven. This then facilitates building trust with service users, achieving longer term outcomes, and building relationships between other organisations and service users.

The evaluation has provided some learning for MASH to consider in its development, especially for the services and activities of the MASH Centre, volunteer development and the MASH outcomes evaluation framework.

In summary, MASH is providing the sex workers of Manchester with a vital set of services which enhance their lives in many ways.

Appendix 1 Profile of Survey Respondents

A Service user survey

A total of 49 respondents.

	MASH Centre Users = 38	Non Centre Users = 11
Work place type		
Street worker	47%	82%
Parlour/Sauna worker	24%	
Mixed location	8%	18%
Other non-street location	5%	
No longer sex working	16%	
Age range		
18-25	22%	55%
26-40	59%	45% (max age 28)
41-60	16%	
Over 60	3%	
Ethnic Origin		
White British	49%	11%
White		22%
BME	14%	11%
White other	37% (includes 14% Romanian, 6% Czech Republic)	45% (includes 36% Romanian)
No of years used MASH for [MASH Centre open for 3 years]		
<1	8%	45%
1-3	38%	45%
4-10	30%	9%
>10	24%	

B External Organisation Survey

A total of 12 people in 10 organisations

Statutory sector	6 people
Third sector	6 people

C Staff Survey

A total of 43 respondents

Paid staff	9 (21%)
Sessional workers	4 (9%)
Volunteers	27 (63%)
Trustees	3 (7%)

Sources of further information about sex work

- MASH Website www.mash.co.uk
- UK Network of Sex Work Projects www.uknswp.org

Acknowledgements

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- ❖ I especially wish to thank the individual women who use MASH whose views and needs it is so vital to hear.
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 - ADS (Addiction Dependency Solutions)
 - Greater Manchester Police
 - City Centre District Team
 - Serious Sexual Offences Unit
 - Lifeshare
 - Manchester City Council
 - Community Safety Partnership
 - Directorate for Families, Health and Wellbeing
 - Manchester Women's Aid
 - The Men's Room
 - NHS
 - Sexual Health Department, North Manchester General Hospital
 - St Mary's Sexual Assault & Referral Centre
 - NACRO
 - Longden House
 - UK Network of Sex Work Projects
 - National Ugly Mugs
- ❖ The paid staff, sessional workers, volunteers and trustees of MASH who are clearly passionate and committed to the service.