Social connections mapping in refugee integration support: Family Reunion Integration Service

This report summarises the 14 month extension project seeking to test and refine the Social Connections Mapping Tool (SCMT) questionnaire as a holistic tool to support refugee integration casework delivery. Led by Queen Margaret University, working in partnership with British Red Cross and Barnardo's and funded by the Asylum, Migration and Integration Fund (AMIF).

Bryony Nisbet

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Executive Summary

1.1 Project background

This report presents findings from the extension phase of the Family Reunion Integration Service, a partnership project between British Red Cross, Queen Margaret University and Barnardo's. Originally funded by the Asylum, Migration and Integration Fund to run from January 2019 to September 2020, the project was extended to March 2022 with the aim to test the effectiveness of using the Social Connections Mapping Tool (SCMT) questionnaire as a practical tool to help measure, assess and review refugee families' existing social connections.

The SCMT questionnaire is part of a wider social connections approach to integration developed by members of the Migration, Integration and Social Connections research group from Queen Margaret University. The social connections approach employs mixed-method relational methodologies to gain a better understanding of the social relationships that people draw upon to promote their own wellbeing (see Strang and Quinn 2019) and achieve functional integration outcomes including sustainable housing and employment. The questionnaire is used to map refugees' and asylum seekers' social connections and to establish a sense of the frequency and reciprocity of interactions, helping to gain a sense of quantity and quality of their social networks.

During the first phase of the Family Reunion Integration Service, the Queen Margaret University research team (Baillot et al. 2020) worked with project partners to design and implement exploratory research activities designed to understand how relationships with the social environment influence people's integration journey. The aims of the first phase were twofold: 1) to gain an understanding of participants' awareness of the availability of social resources that facilitate integration, and 2) to compare patterns of participants' social relationships that influence integration at the level of the individual (i.e. women, men, adolescents / sponsors, spouses, dependants) and the household (i.e. the family unit) and identify salient explanatory attributes (e.g. country of origin; place of settlement).

Findings from the first phase suggested that the SCMT questionnaire needed to be directly integrated into casework interventions and used as a tool for practice wherever possible. The Queen Margaret University research team alongside the partners agreed that this may offer more meaningful and consistent engagement with the SCMT questionnaire. This, in the longer term, has the potential to develop the SCMT questionnaire as a valuable tool for practice.

The collaborative process of embedding the SCMT questionnaire as a tool for practice in this extension period was thus guided by the following questions:

1. What is the value to projects and to project beneficiaries in using the SCMT questionnaire to assess and review social connections?

2. At which stage of work with project beneficiaries would the SCMT questionnaire provide the most relevant and useful insights?

3. Who is the SCMT questionnaire most useful to and for what purposes?

4. How might the usefulness of the SCMT questionnaire be maximised in light of the above?

5. Can the SCMT questionnaire support more sustainable and holistic integration planning, beyond the initial 'emergency phase'?

To this end, further workshops were held with caseworkers, volunteers and managers of local teams during the extension period, with the aim of developing existing lists of relevant and locally specific social connections as a key part of the SCMT questionnaire's incorporation into casework. These identified the connections that now form the basis of the anonymous questionnaire allowing beneficiaries (with the support of practitioners) to explore together the levels of contact, trust, and reciprocity in their social connections – be they individuals or organisations.

Figure 1. Extension phase activity timeline
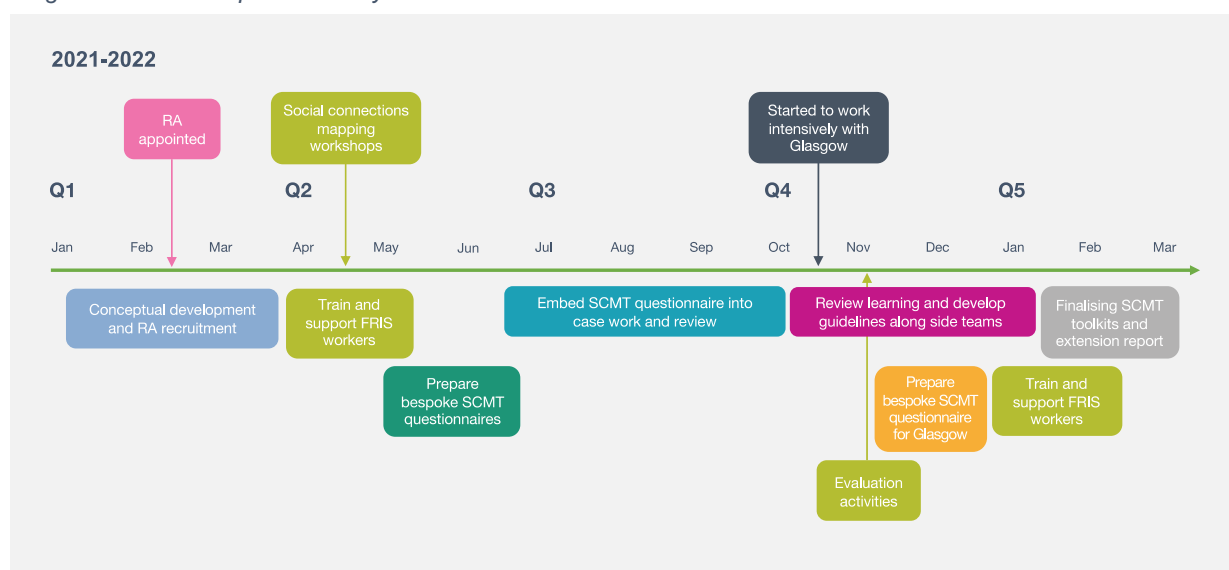
1.2 Key findings

Workload and casework priorities

Feedback obtained from review meetings and the evaluation survey focused predominantly on low response rates and challenges that the teams were facing to embed the SCMT questionnaire into case work practice. The main theme when reflecting on the low response rates was worker capacity and time to facilitate the use of the SCMT questionnaire when supporting people whose lives were often dominated by practical and systemic issues (e.g. housing, school registration, access to healthcare, finances and employment, etc.) relating to an external, hostile, ever changing policy environment. Feedback indicated that urgent casework needs often have to take priority over completing the SCMT questionnaire. As FRIS sites were responding to periods of crisis for families, introducing particular social connection activities or facilitating person centred conversations surrounding elements of integration can be challenging at this stage.

3.1 COVID-19 restrictions

The Family Reunion Integration Service, on the most part, had to be delivered remotely which meant that opportunities for organic interactions and building a natural rapport with beneficiaries regarding integration were more difficult. Immediate casework issues had to be prioritised as systems became more difficult to navigate for beneficiaries and case workers with services temporarily closing or moving online. With many experiencing digital exclusion

and poverty, people were unable to access the support or resources they needed which created a reliance on Family Reunion Integration Service workers. In autumn, when services resumed some face-to-face support, there was an increase in SCMT questionnaire responses which allowed for more opportunities to discuss with Social Connections Coordinators and volunteers how best to facilitate conversations relating to the maps and answers and receive further feedback on the usability of the SCMT questionnaire.

4.1 Utilising volunteers

A frequent answer to easing the time pressures of facilitating the use of the SCMT questionnaire was to seek support from volunteers, including peer/befriending volunteers and volunteer interpreters. This was more feasible in some sites over others due to challenges finding appropriate times to review progress, provide training or obtaining feedback given differing shift patterns and volunteer availability for such activities.

1.3   Recommendations

The extension phase has shown there is recognised value to projects in using the SCMT questionnaire to assess and review social connections. However, this is met with challenges. Key potential recommendations for facilitating the use of the SCMT questionnaire are identified:

- Project partners recognise the importance in assessing the quality and quantity of social connections. The tool can be more easily integrated near the beginning of their time (within 3-4 weeks) being supported by Family Reunion Integration Service and nearing the end of their time (12 weeks). However, careful consideration should be sought in relation to resource availability and services can adapt the frequency of use for their own service specifications.

- For volunteers with lived experience of family reunion and the asylum process, completing the SCMT questionnaire and discussing their maps with a caseworker would have been beneficial in learning more about certain organisations (e.g. Health Advocacy) and referral pathways earlier on in their integration journeys to help them to reach their personal integration goals quicker.

- As identified by Family Reunion Integration Service staff members, the SCMT questionnaire is most useful specifically in relation to monitoring and evaluating social connectedness at the beginning and at the end of the beneficiaries' support and informing when it is appropriate to end the support.

- The SCMT questionnaire can not only be used in one-to-one service delivery, but can be used in a group setting to monitor group progress and help build trust and contact with individuals and organisations in the wider community – further emphasizing the importance that integration is a two-way process.

- To support usability, the SCMT questionnaire can be used in conjunction with a toolkit including a User Guide that is easily translated into key languages.

- Mapping social connections may be more appropriate at the later stages of integration when there is more time and opportunity to develop social connections. Resource allocation and urgent casework priorities undermined attempts to embed the SCMT questionnaire in the core delivery of services; positioning it as *additional to*, rather than *part of* service delivery.
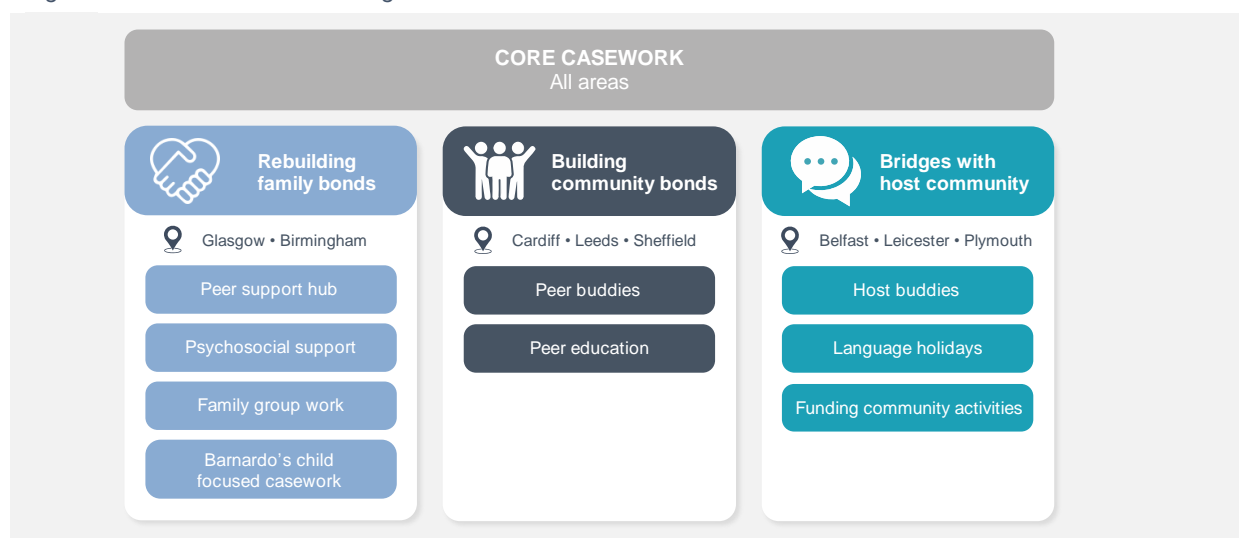
Introduction

2.1   Family Reunion Integration Service

The Family Reunion Integration Service (hereafter FRIS) is a partnership project between British Red Cross (BRC), Queen Margaret University (QMU) and Barnardo's, originally funded by the Asylum, Migration and Integration Fund (AMIF) to run from January 2019 to September 2020 and thereafter extended to March 2022. Initially delivered in Glasgow, Cardiff, Belfast, Birmingham, Leicester, Leeds, Sheffield and Plymouth and later expanded to include Manchester and London, the service supports people who have been granted refugee status through the UK asylum process, and who subsequently applied under family reunion rules[1] for their spouse and dependent children to join them in the UK. The service has two main objectives;

1. To ensure, through provision of casework services, that reunited families are able to access their rights to housing, education, health services and financial support.
2. To support families to build social connections through family-focused activities and interventions.

This emphasis on social connections is drawn directly from Ager and Strang's (2008; see also Strang and Ager 2010) framework for understanding integration that also forms the core of UK integration policy (Ndofor-Tah et al. 2019). This relational approach to integration focuses on the resources available to beneficiaries, through bonding, bridging and linking relationships, that conduce integration. In addition to the BRC's provision of a core casework service (see figure 1) of up to 12 weeks, local offices delivered a series of programmes aimed at expanding beneficiary social networks such that they are able to draw upon a wider range of bonding or bridging ties (see the BRC report: 'Together at last - supporting refugee families to reunite in the UK' for more details [2]). Additional child-focused services were delivered in Birmingham and Glasgow through the partnership with Barnardo's.

Figure 2. FRIS core casework diagram

CORE CASEWORK
All areas

Rebuilding family bonds
Glasgow • Birmingham
Peer support hub
Psychosocial support
Family group work
Barnardo's child focused casework

Building community bonds
Cardiff • Leeds • Sheffield
Peer buddies
Peer education

Bridges with host community
Belfast • Leicester • Plymouth
Host buddies
Language holidays
Funding community activities

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[1] https://www.gov.uk/settlement-refugee-or-humanitarian-protection/family-reunion

[2] together-at-last---supporting-refugee-families-who-reunite-in-the-uk.pdf (redcross.org.uk)

2.2   Main research: 'Pathways and Potentialities'

From January 2019 to September 2020, the QMU research team (Baillot et al. 2020) worked with project partners to design and implement exploratory research activities according to the question "how do one's relationships with the social environment influence one's integration journey?" with the following research objectives:

- To gain an understanding of participants' awareness of the availability of social resources that facilitate integration by:

  - Mapping the development of participants' social connections over time (specifically bonds, bridges and links);

  - Mapping participants' trust in these social connections over time;

  - Mapping the extent to which relationships between participants and identified social connections are reciprocal.

- To compare patterns of participants' social relationships that influence integration at the level of the individual (i.e. women, men, adolescents / sponsors, spouses, dependants) and the household (i.e. the family unit) and identify salient explanatory attributes (e.g. country of origin; place of settlement).

A mixed-method research design was deployed for this research, comprising participatory social connections workshops in all eight BRC local offices with a total of 61 participants; the dissemination of a Social Connections Mapping Tool (hereafter SCMT) questionnaire informed by the workshops, completed by 52 beneficiaries; and remote interviews with 13 families in two local offices (comprising a total of 29 individual participants: 21 adults and eight young people).

Initial research findings

Through this initial research phase, five key stages were identified in the process of developing connections and, through these, progressing along a personal integration pathway (see figure 2). It was found that while connectedness, and so integration, generally increase over time, this process is not linear. Instead, it can be disrupted, halted or accelerated by the presence or absence of trusting relationships and life events. The five stages which emerged were:

1. Consolidating trusting relationships and re-establishing a sense of safety and security in the home
2. Fostering new connections
3. Embedding into the local area
4. Participating in the wider community
5. Contributing to wider UK society

The research suggested that the specific circumstances and priorities of reunited families shaped how they negotiated/navigated the five stages of this process of integration. For a more comprehensive and detailed engagement with the initial research, see Baillot et al. (2020).

Figure 3. The Connections Continuum – the role of connections in integration

Time

Integration Outcomes – finance, housing, education

Contributing to wider society

Participating in the wider community

Embedding into the local area

Fostering new connections

Consolidating trusted relationships

Everyday practices of sociability, work, study, consumption and leisure
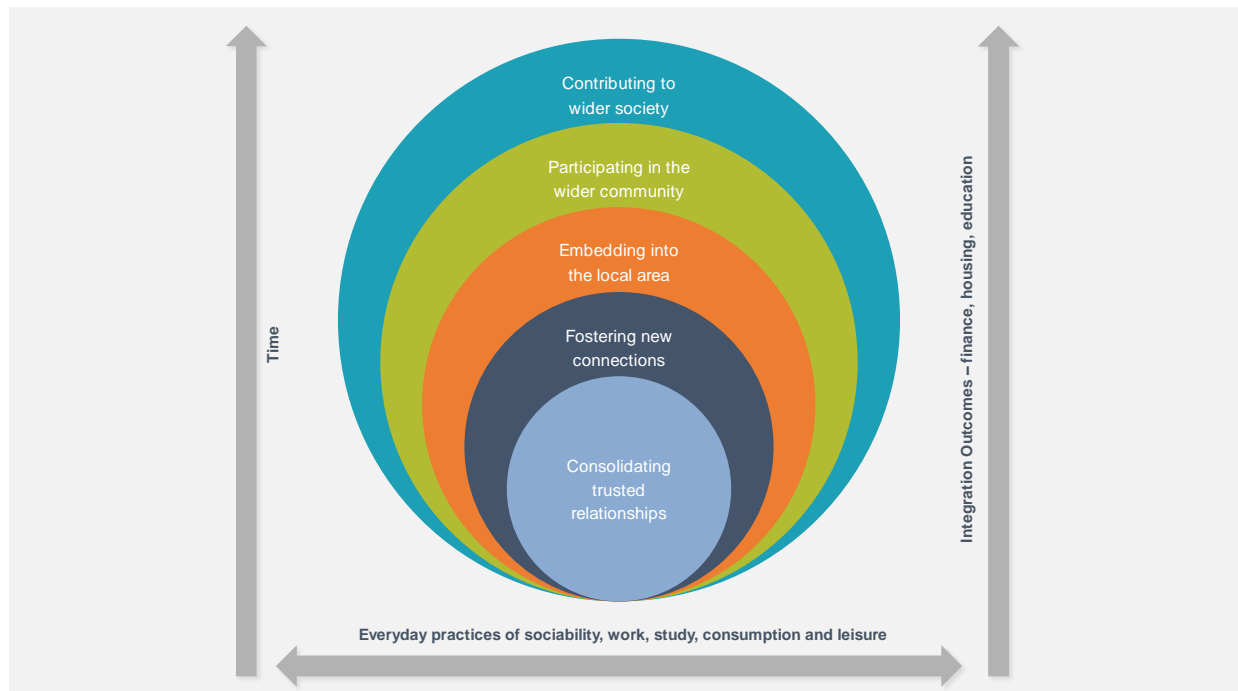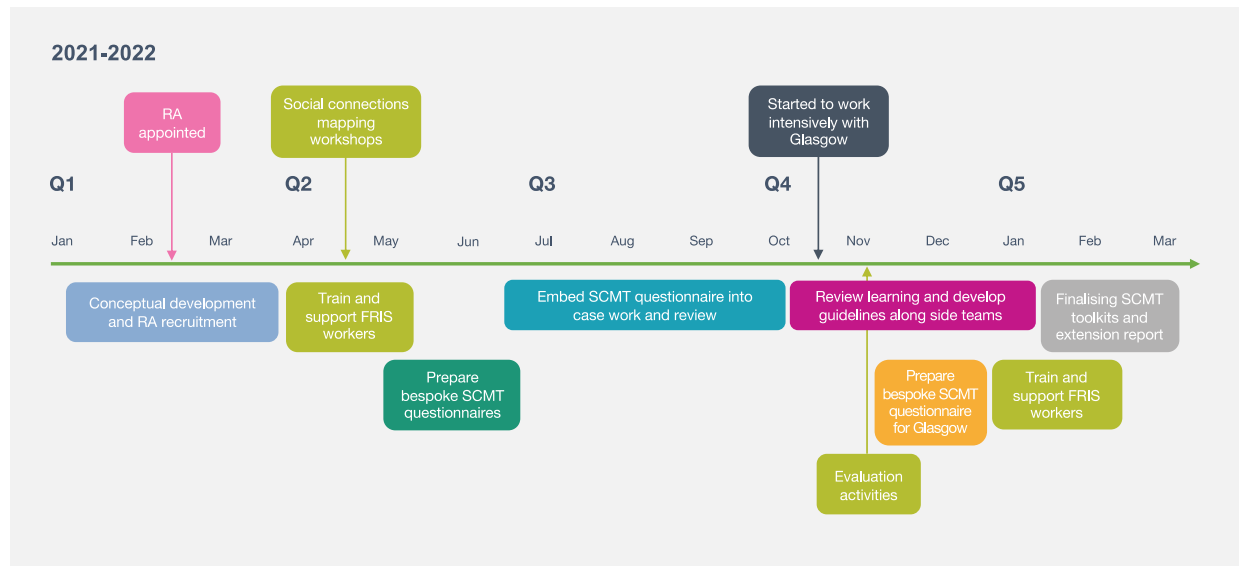
2.3   Extension period

A core commitment of the initial development of the social connections framework for understanding integration was towards mid-level theory in "an explicit attempt to bridge between … theorisation and local programmatic practice" (Strang and Ager 2010: 591). The aim was to contribute by rendering both theories and practices of integration more accessible to one another. To this end, primary learning from the first period of research in using the SCMT questionnaire, is that it needed to be directly integrated into casework interventions and used as a tool for practice wherever possible. The QMU research team alongside the partners agreed that this may offer more meaningful and consistent engagement with the SCMT questionnaire. This, in the longer term, has the potential to develop the SCMT questionnaire as a valuable tool for practice.

The SCMT questionnaire is part of a wider social connections approach to integration. The social connections approach employs mixed-method relational methodologies to gain a better understanding of the social relationships that people draw upon to promote their own wellbeing (see Strang and Quinn 2019) and achieve functional integration outcomes including sustainable housing and employment. Informed by insights generated during the initial project period, further workshops were held with caseworkers, volunteers and managers of local teams during the extension period, with the aim of developing existing lists of relevant and locally specific social connections as a key part of the SCMT questionnaire's incorporation into casework. These identified the connections that now form the basis of the anonymous questionnaire allowing beneficiaries (with the support of practitioners) to explore together the levels of contact, trust, and reciprocity in their social connections – be they individuals or organisations.

The extension phase of QMU's work with FRIS tested the effectiveness of using the SCMT questionnaire as a practical tool to help measure, assess and review refugee families' existing social connections. It focused on working closely with selected FRIS sites to build on and

share our collective learning on *how* best to embed use of the QMU SCMT questionnaire as a practical service delivery tool, within the existing project delivery model. Therefore, the extension phase aimed to embed the SCMT questionnaire into practitioners' work with adult members of reunited refugee families in Birmingham, Cardiff and latterly the Glasgow FRIS sites to enhance casework delivery and integration planning (see below figure 3 for a visual timeline).

Figure 4. Extension phase activity timeline

Approaches to embedding the QMU SCMT questionnaire as *a tool for practice*:

The collaborative process of embedding SCMT questionnaire as a tool for practice in this extension period was guided by the following questions:

1. What is the value to projects and to project beneficiaries in using the SCMT questionnaire to assess and review social connections?

2. At which stage of work with project beneficiaries would the SCMT questionnaire provide the most relevant and useful insights?

3. Who is the SCMT questionnaire most useful to and for what purposes?

4. How might the usefulness of the SCMT questionnaire be maximised in light of the above?

5. Can the SCMT questionnaire support more sustainable and holistic integration planning, beyond the initial 'emergency phase'?

These led to significant redevelopments and improvements in the SCMT questionnaire, most notably around its unique ability to produce visual maps of refugees' social connections (figure 4). Having previously provided a visualisation of the connections trusted most by participants, the maps were redeveloped to also represent those connections that beneficiaries trusted least. This and other improvements to the SCMT questionnaire were informed by what practitioners identified as most useful in the casework context. In this way, insights generated through ongoing SCMT data collection were improved and further tailored to beneficiary and practitioner needs.

Figure 5. Glasgow example SCMT map (completed as part of training by a Social Connections Coordinator)

Testing and refining

3.1   Initial objectives

The research team refined and agreed the scope of work to embed the SCMT questionnaire into daily service provision offered by the BRC during the extension phase (initially until end September 2021 and subsequently extended a further six months). With the lead partner, it was agreed that the QMU team would:

1. Work intensively with the Cardiff and Birmingham (and later Glasgow) FRIS offices to build on and share collective learning on *how* best to embed and benefit from the deployment of the SCMT questionnaire as a practical service delivery tool within the existing project delivery model.

2. Offer ongoing technical support to those FRIS sites who wish to continue to independently use, test and refine their project specific SCMT questionnaires, as a tool for practice.

Cardiff and Birmingham were selected as sites that could provide comparable insight and learning between England and one of the UK's devolved nations. The team were nonetheless mindful of the need to consider the structural and demographic differences that shape devolved and non-devolved contexts. Monthly meetings were set up with the FRIS Practice Development Officers to develop a dissemination plan to share learning internally within the FRIS partner consortium and with external stakeholders.

Collaboration with the Birmingham and Cardiff teams focused on embedding the SCMT questionnaire in their respective projects. Insights from previous work were presented and discussed with practitioners. This enabled researchers and practitioners to collaboratively identify the casework value of using the SCMT questionnaire with FRIS beneficiaries. This was an opportunity for staff to ask questions and consider the cost benefits of taking part in piloting use of the SCMT questionnaire as a tool to support service delivery. In October 2021, the QMU research team and FRIS Glasgow agreed to consider different capacities for piloting use of the SCMT questionnaire as a tool to support service delivery within the context of their group activities and thereafter, the SCMT questionnaire was then used and tested as part of social hub group work at that site.

3.2   Research and support activities

Participatory workshops

The QMU research team facilitated participatory workshops with Birmingham, Cardiff and Glasgow project staff to integrate the SCMT questionnaire into person-centred integration planning. The workshops aimed to:

- Consolidate relationships with casework teams.

- Reflect on the purpose and benefits of the social connections mapping approach.

- Identify opportunities for using the SCMT questionnaire to support practitioner casework and beneficiary integration journeys: when, how and with whom they might best test it out.

Staff were invited to complete the same SCMT questionnaire disseminated to beneficiaries during the initial research phase. Each person was sent their own individual map following completion. At the workshops, the QMU research team sought practitioner feedback on their experiences of using the SCMT questionnaire and identified specific points in the integration planning process where the SCMT would provide the most benefit as a tool to support practice. It was decided for both Cardiff and Birmingham FRIS sites that two time points would be appropriate: 4 weeks after initial assessment and at the end of FRIS support (12 weeks). For Glasgow it would be used at the beginning of their 9 week block of group work and at the end.

The bespoke SCMT questionnaires were then finalised and disseminated for use. Changes to the questionnaires included a reduced number of demographic questions, an updated connections list (including contemporary services and organisations available in the local, national and international context), new timescales, reworded questions and more translations (five languages in total). SCMT questionnaire guidance documents were also produced to facilitate partner engagement with the tool (see annex).

Social Connections Coordinators

Each FRIS team assigned up to two case workers to take on the role of 'Social Connections Coordinators' who were responsible for coordinating the work associated with embedding the tool in casework delivery. These staff members were then registered as Project Owners into the back end of the SCMT questionnaires and trained in creating and sending out individual questionnaire links. Following the development of the bespoke SCMT questionnaires and associated training, the research team agreed to provide fortnightly one-to-one support sessions (where appropriate and possible) to the assigned Social Connections Coordinators. These sessions continuously reviewed and assessed progress, data trends, successes, and challenges as well as providing a forum for discussion around modes of delivery and the provision of further support needed to facilitate use of the SCMT questionnaire.

Technical support

Despite primarily focusing on Birmingham, Glasgow and Cardiff, the QMU research team continued to provide technical support, training and capacity-building on an ad-hoc basis to FRIS sites who wished to continue using the SCMT questionnaire independently as a tool to support their existing service delivery. A fortnightly drop in was thus organised to provide additional support to any and all partners.

Evaluation activities

Due to limited opportunities for staff to facilitate the use of SCMT questionnaire, and therefore low SCMT questionnaire response rates in Cardiff and Birmingham, an evaluation survey (using the Qualtrics platform) was developed and distributed to both FRIS teams. Complementing earlier workshops with practitioners, the surveys were designed to elicit practitioners' experiences of facilitating the use of the SCMT questionnaire and associated conversations. Informed by these findings, the QMU research team continued to refine SCMT questionnaires usability to further encourage its use as a person-centred tool to support case work delivery and improve people's experiences of completing it in the future (See evaluation survey questions in the annex). Similarly, an evaluation workshop was conducted in Glasgow with the Social Connections Coordinators.

Following the feedback obtained through these evaluation activities, the QMU research team worked in collaboration with the Social Connections Coordinators to develop a comprehensive SCMT questionnaire toolkit: User Guide, Social Connections Coordinator Guide and Worker Guide (See Annex).

5.1 Beneficiary Feedback

Whilst redeveloping the SCMT questionnaires in line with the feedback given in the workshops, the QMU research team planned to facilitate 'review groups' with beneficiaries who opted in to providing feedback via their submission of the SCMT questionnaire. The purpose of these was to test and refine the usability and content of the SCMT questionnaire from the perspective of project beneficiaries. Review groups were designed to elicit from beneficiaries a direct account of their experiences of completing it so that appropriate developments could be made to improve people's experiences of using the SCMT questionnaire in future. Informed by these insights, improvements were made to the accessibility of translations in the SCMT such that respondents could complete the SCMT questionnaire in their preferred languages at the press of a button, among others.

Low participant uptake for beneficiary review groups led the QMU research team to submit an Ethics application amendment. This amendment outlines the research team's intention to facilitate '1-1 interviews' rather than review groups with beneficiaries. However, from October to November here was a notable increase of SCMT questionnaire responses from Cardiff and Birmingham and opportunities for the case workers to discuss the answers with the beneficiaries as part of their integration planning. This was due to some support activities moving back face-to-face, rather than remote. With the increased responses we were also able to send emails to some of the respondents who had opted in to provide feedback on their experiences. Unfortunately, like the review groups, we did not have any uptake following the individual recruitment emails.

Barnardos

Following the evaluation survey feedback from FRIS Birmingham staff, an opportunity was identified to explore with Barnardos the potentialities of using the SCMT questionnaire as a focused element of their child-centred assessment process. Discussions included the incorporation of Barnardo's monitoring and evaluation requirements into the SCMT and how this might look for families and for service level reporting; the potential use of respondent data and maps as part of Barnardo's casework files; the synchronisation of demographic questions to incorporate Barnardos' initial assessment questions and further tailoring the SCMT connections lists to include specialised family- and child-centred connections. The QMU research team cross-checked the Barnardos' assessment tools with the SCMT to explore ways to cover relevant questions from the assessment tool in the SCMT questionnaire. Despite promising and productive initial conversations, a joint decision was taken that such a project would require more than the remaining short period of funding available.

Site-specific learning

Glasgow, Cardiff and Birmingham all agreed to the following extension aims in embedding the SCMT questionnaire into service delivery:

- Enhance casework delivery and integration planning.
- Help measure, assess and review refugee families' existing social connections.

- Use visual maps of refugees' social connections to facilitate discussion between caseworkers and families about their personal integration goals and how building their social networks might help them in realising these goals.
- Support FRIS families in building their social connections.

4.1   Glasgow

An additional extension aim in Glasgow was to embed the SCMT questionnaire in service delivery to:

- Support FRIS families in building their social connections. *Particularly, with the hope to support the building of trust, contact and opportunities of reciprocity with the wider community.*
- *Support the content and monitoring of the social hub group-work.*

From the individual and group maps generated, workers and FRIS families were able to identify services and organisations that the families do not have a lot of contact or trust with. This then gave the workers an opportunity to build external relationships with these organisations and invite them to the groups to speak with the group members about the kind of support they can offer (for example, with Police Scotland and associated services). A secondary aim of utilising the SCMT questionnaire in this group setting was to monitor and evaluate the effectiveness of the groups in building social connectedness within the wider community. The social hub groups run as a 14 week programme. During on the initial sessions, the Social Connections Coordinators presented and discussed theoretical frameworks on integration and social connections from a psycho-educational perspective. By using the SCMT questionnaire they were able to assess which people and organisations in which there was significant lack of contact and trust for the group.

Through an evaluation workshop conducted with the QMU research team and the Glasgow Social Connections Coordinators on the 25th of February 2022, we discussed that one of the challenges associated with facilitating the use of the SCMT questionnaire in a group setting was the inconsistent attendance, meaning that some people had the opportunity to complete a SCMT questionnaire at the beginning of the group sessions but others who missed those groups didn't get the overview of the purpose of the SCMT questionnaire so were reluctant to complete one. Whilst there was scope for some one-to-one work with the individuals who hadn't had the opportunity to complete one, this was very limited due to time and workload pressures.

It was also acknowledged that the Social Connections Coordinators hadn't yet had the opportunity to present a group map and discuss this with the group, but they plan to do this at the final 'signposting session' where they will also ask the four individuals who had completed the SCMT questionnaire initially, to complete it again to assess if there have been any increase in social connectedness, reciprocity or trust following the group work.

Other feedback included ensuring that the SCMT questionnaire design was more user friendly: visible translation options and concise questions on one page rather than on separate pages. This feedback has now been implemented and is reflected in the most recent iteration of the SCMT questionnaire. When reflecting on future opportunities to utilise the SCMT questionnaire in a group setting, the Social Connections Coordinators agreed that having a bespoke social connections session assigned only to that topic would be beneficial and that should be

complimented by a simple user guide translated into a number of languages. This has now been developed in response to this feedback.

As well as the constructive feedback and collaborative ways of working learned from the Glasgow FRIS team, it was highlighted that the team would have benefitted from testing the use of the SCMT questionnaire in a group work setting for a longer period of time. In this vein, there could have been more opportunity to use it to monitor and evaluate the groups and also to develop more of a focused session for social connections and the relationship to integration planning.

4.2 Cardiff

An additional extension aim in Cardiff was to embed the SCMT questionnaire in service delivery to:

- *Better understand the support needs of arriving female spouses in building a supportive social network, as compared to their pre-arriving male sponsors.*

The Cardiff team established a volunteer core working group, most of whom have personal experience of asylum, refugee and family reunification processes, to facilitate the use of the SCMT questionnaire. It was hoped that this would address issues including low response rates and limited case worker capacity. The QMU research team conducted various meetings in line with volunteer availability, a workshop and training sessions. The workshop aimed to:

- Build relationships with volunteers.
- Introduce/reiterate purpose of social connections and the mapping approach.
- Identify opportunities for volunteers to use the SCMT questionnaire
- Gain feedback on experiences of using the SCMT questionnaire

It was agreed that those who provide peer support with the help of volunteer interpreters to families would be best suited to introduce the SCMT questionnaire, support completing it (where needed), and have the follow up conversations about the maps. The Social Connections Coordinator was assigned to coordinate generating links and offer support to volunteers alongside the QMU research team. After the workshop, there continued to be low rates of people completing the SCMT questionnaire and the volunteers were struggling to find the time. Previous to the COVID-19 health crisis and associated lockdown restrictions, the volunteers met with the families face-to-face for half a day, however this had moved to a one hour phone call. This was often utilised to discuss more practical tasks and issues faced by the family (e.g. issues with housing, registering children to a school, etc.). The FRIS Cardiff team decided to ask the volunteers to call the families at two time points a week so that the first conversation can be about practical support and the second conversation can focus on the SCMT questionnaire and integration planning.

Due to the low response rates, lack of opportunities to discuss social connections with the families, as previously mentioned, an evaluation survey was developed to assist in capturing some learning regarding the challenges associated with embedding the SCMT into casework delivery. Initially, the Social Connections Coordinator and the QMU research team agreed to facilitate an evaluation workshop once the volunteers had more opportunities to facilitate the use of the SCMT questionnaire. However, we were unable to find a time whereby the SCMT core working group of volunteers were all present. Fortunately, the QMU research team were able to attain some feedback from the core working group through the distribution of the

evaluation survey. The survey was sent on to the Cardiff FRIS team members on the 16th of September 2021 and again on the 3rd of February 2022. There were 7 responses to this survey.

The findings indicated that the majority of the volunteers had used the SCMT questionnaire/maps to discuss social connections and that they found this to be a 'quite useful' activity. However, when asked if the FRIS families see there is personal relevance in completing the SCMT questionnaire, to support their integration journey, the majority of the volunteers said 'sometimes' in opposition to 'all the time', 'rarely' or 'not at all'. Furthermore, when asked whether the volunteers have time to facilitate the use of the SCMT questionnaire (e.g. send out links, support someone to complete the questionnaire and use maps to discuss social connections), the majority of responses indicated that they did not have time to send out the links, support someone to complete it or facilitate the conversations. Finally, when asked how confident they feel to describe social connections, introduce the SCMT questionnaire and use the completed SCMT questionnaire and/or map to discuss integration planning, the findings suggested that most people feel 'quite confident' with introducing and describing social connections and the SCMT questionnaire. Nobody indicated that they 'do not feel confident at all' in any of those processes (see figure 5).

Figure 6. Cardiff evaluation survey responses – "How confident do you feel?"

Only one person provided written feedback. They noted that in their view, the language within the SCMT questionnaire should be simplified to ensure translations do not lose their nuances and provide a consistent tone throughout the questionnaire. Actions taken as a result of this feedback were to create a simplified and easily translated user guide and script. The QMU research team also changed some terminology in the SCMT questionnaire to move away from research-based language to more user-friendly language throughout the front and back-end of the SCMT questionnaire.

From October to November, there was a steady and comparative increase in response rates and opportunities for associated conversations in comparison to the previous two months. The

volunteers surmised that this was related to increasing face-to face activities as they were able to easily support completing the SCMT questionnaire and organically discussing the answers together in relation to their integration.

In order to support the use of the SCMT questionnaire, the Cardiff team developed scripts alongside the QMU research team to ensure that there was clear communication regarding the purpose of the SCMT questionnaire with an explanation of the ways in which it may potentially support the families with integration. These scripts included verbal, email, text and prompts that were translated into three other languages and are now part of the SCMT Questionnaire Worker Guide.

4.3   Birmingham

An additional extension aim in Birmingham was to embed the SCMT questionnaire in service delivery to:

- To support case workers in assessing when it is
  appropriate to end the family's relationship with FRIS and help identify where
  they can signpost families for follow-on support and information, in line with their needs
  and goals.

Due to high case-loads and competing priorities, throughout testing there were low response rates and very limited opportunities to facilitate conversations with beneficiaries regarding their social connections. Utilising volunteers to support families to complete the SCMT questionnaire and facilitate subsequent conversations was proposed as an option to support caseworkers in testing and refining the SCMT questionnaire. While the Social Connections Coordinators discussed this with the team, no suitable volunteers were identified. Due to the low response rates, understandable lack of caseworker engagement, as previously mentioned, an evaluation survey was developed to assist in capturing some learning regarding the challenges associated with embedding the SCMT questionnaire into casework delivery. The survey was distributed to the Birmingham FRIS team members on the 18th of August and there were six response.

The findings indicated that the majority of the team had not used the SCMT questionnaire/maps to discuss social connections and therefore had not had the chance to determine the usefulness of the SCMT questionnaire and associated conversations. The majority of the team indicated that they found that families were 'sometimes' keen to fill in the SCMT questionnaire and that FRIS families 'sometimes' see there is personal relevance in completing the SCMT questionnaire, to support their integration journey. Furthermore, when asked whether the team have time to facilitate the use of the SCMT questionnaire (e.g. send out links, support someone to complete the questionnaire and use maps to discuss social connections), the majority of responses indicated that whilst they do have the time to send out the SCMT questionnaire links, where they do not have the time is to discuss the answers and the maps with the FRIS families. Finally, when asked how confident they feel to describe social connections, introduce the SCMT questionnaire and use the completed SCMT questionnaire and/or map to discuss integration planning, the findings suggested that most people feel 'very confident' with describing social connections and 'quite confident' to introduce the SCMT questionnaire (see figure 7).

Figure 7. Birmingham evaluation survey responses – "How confident do you feel?"

Describing social connections to FRIS families?

Introducing the SCMT questionnaire to FRIS families?

Using their completed SCMT questionnaire and/or map to discuss integration planning with FRIS families?

● Very confident   ● Quite confident   ● Not very confident   ● Not confident at all
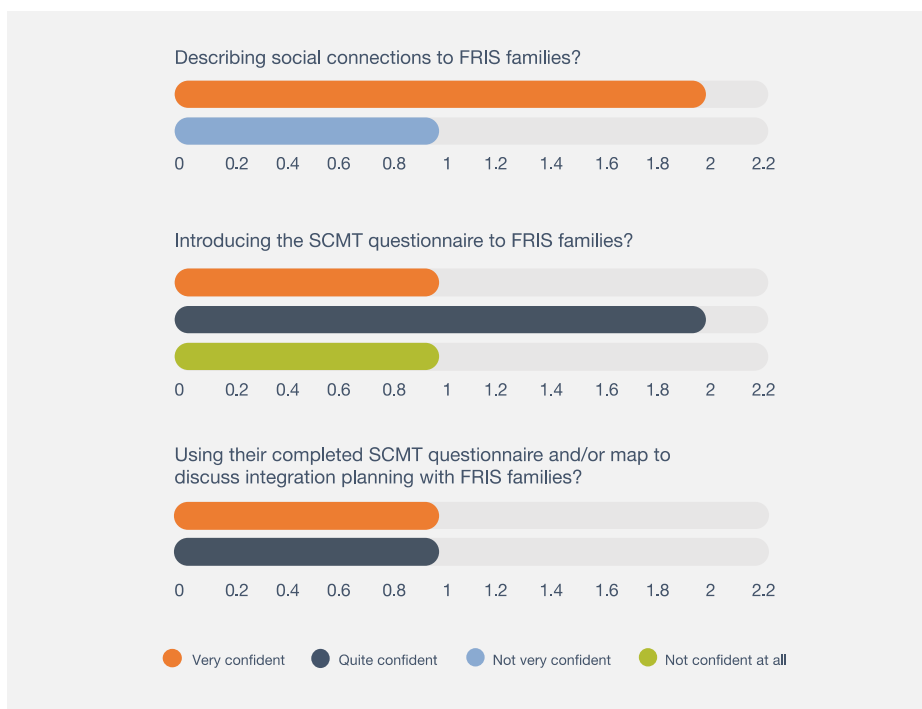
Written feedback helped to illustrate some of the main barriers when using the SCMT questionnaire in practice. This mainly highlighted the ongoing time and resources pressures faced by the team:

> **"**
>
> *With the ongoing urgent casework, there is a lack of time to explain it, support with completing it, and discussing the results and any follow up queries/info needed*
>
> *I have sent out links but have not managed to have the conversations yet even with those who may have completed it. This is because other more pressing casework emerges, with that family or with incoming families (where the earlier weeks are particularly pressurised for casework support to the family)*

Others suggested that another barrier was language and understanding the purpose of the SCMT questionnaire and how to utilise the information:

> **"**
>
> *Although I have not yet had a chance to use the SCMT questionnaire I anticipate that there may be some issues for some Service users due to language barriers. I don't think there will be a problem with actually completing the survey but rather what the families will do with the information around social connections after completion. Some people need a lot of support in understanding systems and processes and when faced with many issues to work through it may cause some confusion as it is further information for them to think about.*

Other respondents from the team suggested that time, workload and a lack of understanding regarding the purpose of the SCMT questionnaire were the main barriers. When asked what

resources or support is needed to make using the SCMT questionnaire in practice easier, it was suggested that a signposting sheet that outlined each organisational connection, the purpose and the referral pathway would be helpful for the families to have that to hand when they step back from support from FRIS. The team also indicated again that the lack of volunteer support in the team was an issue and that increasing the volunteer input would be helpful:

> **"**
>
> *If we had more volunteers able to support with it, and if we had information readily available that would help when the survey itself uncovers organisations that are unfamiliar to the service user, and we want to highlight them as a port of call for future issues.*

Along with SCMT questionnaire development and design feedback, it was established through meeting with the Social Connections Coordinators that the team would benefit from producing a 'Signposting Sheet' to compliment the list of organisational connections in Birmingham as outlined in their SCMT questionnaire. This document used in conjunction with the SCMT questionnaire helped the team to assess when it was appropriate to end support. The QMU research team and the Social Connections Coordinators also co-produced a document that outlines examples of simplified conversations that you can have with beneficiaries in relation to their maps and answers and how to relate these conversations to beneficiaries' integration goals (included in the guidance toolkit – see annex). The Social Connections Coordinators had emphasized that often FRIS workers are unable to support someone to achieve their main integration goals due to the short time period in which they are being supported. The Social Connections Coordinator used the following example: someone's goal may be to attain a degree in engineering from a British university and this individual is still in their early stages of integration, perhaps in temporary accommodation and isn't confident in communicating in English yet. Therefore, there are multiple steps for them to achieve before reaching their main goal and that social connections aren't a priority for this person. However, we discussed utilising the SMART (Doran 1981) goals framework to support with breaking down large goals into scalable, manageable, and measurable sub-goals and the relationship that social connectedness can have with each sub-goal in relation to integration planning. From here it was decided that incorporating SMART goal development into establishing integration goals and utilizing the SCMT questionnaire to support this would be of benefit and would be a sub-section of the SCMT Worker Guide.

Key learning - challenges and barriers

Workload and casework priorities

Feedback obtained from review meetings and the evaluation survey focused predominantly on low response rates and challenges that the teams were facing to embed the SCMT questionnaire into case work practice. The main theme when reflecting on the low response rates was worker capacity and time to facilitate the use of the SCMT questionnaire, when supporting people whose lives were often dominated by practical and systematic issues (e.g. housing, school registration, access to healthcare, finances and employment, etc.) relating to an external, hostile, ever changing policy environment. As FRIS supports families from their immediate arrival, these practical elements of integration needed to be prioritised. Feedback from Social Connections Coordinators also illustrated that this was a double issue as beneficiaries understandably didn't prioritise the completion of the SCMT questionnaire or the conversations about social connectedness due to the competing and more pressing aforementioned priorities relating to their integration. Moreover, whilst teams and volunteers could recognise the value in mapping social connections when discussing integration goals, this often felt inappropriate in the moment due to the practical issues experienced by families. Feedback also indicated that not only do urgent casework needs often have to take priority, but the high levels of reporting to the funders have been a significant challenge in managing to find time to facilitate the use of the SCMT questionnaire. In summary, as FRIS sites were responding to these periods of crisis for families, experience to date suggests introducing particular social connection activities or facilitating person centred conversations surrounding elements of integration was not yet a priority at this stage.

This barrier was further illustrated by the SCMT questionnaire beneficiary review activities. As previously mentioned, the SCMT questionnaire had an opt-in function at the end to give beneficiaries the opportunity to provide the QMU research team some feedback via interview or review group about their experiences of using the SCMT questionnaire with their case worker. These questions were designed to explore whether beneficiaries had an opportunity to discuss their answers/view a social connections map of their answers with their case worker, if the process helped to identify connections that were helpful to them in perusing their integration goals or to identify any people or connections that they would find helpful to connect with in the future when no longer receiving support from the British Red Cross/Barnardos. Unfortunately, despite a large percentage of the respondents opting-in to provide feedback, when emailed there was no participant uptake.

COVID-19 restrictions

The above-mentioned barriers have also been further exasperated by the COVID-19 pandemic and associated lockdown measures. The FRIS services had to be delivered remotely which meant that communication methods had to change and adapt, and the opportunities for organic interactions and building a natural rapport with beneficiaries regarding integration were more difficult. Immediate casework issues had to be prioritised as systems became more difficult to navigate for beneficiaries and case workers with services temporarily closing or moving online. With many experiencing digital exclusion and poverty, people were unable to access the support or resources they needed which created a reliance on FRIS workers. In autumn, when services resumed some face-to-face support, there was an increase in SCMT questionnaire responses which allowed for more opportunities to discuss with Social

Connections Coordinators and volunteers how best to facilitate conversations relating to the maps and answers and receive further feedback on the usability of the SCMT questionnaire.

Utilising volunteers

A frequent answer to easing the time pressures of facilitating the use of the SCMT questionnaire as suggested by Cardiff, Birmingham and Glasgow FRIS sites, was to seek support from volunteers, including peer/befriending volunteers and volunteer interpreters. As previously mentioned, Cardiff successfully recruited a core working group of volunteers to prioritise social connections mapping activities. When considering Cardiff as a test site, utilising volunteers can be a useful option for facilitating the use of the SCMT questionnaire and associated conversations relating to integration goals. However, when testing the usability of the SCMT questionnaire, this has proven to be a challenge when finding appropriate times to reviewing progress, providing training or obtaining feedback due to differing shift patterns and volunteer availability for such activities.

Conclusion

Here we return to the initial approaches of embedding the SCMT questionnaire as a tool for practice in refugee integration to elaborate on some key learning:

What is the value to projects in using the tool to assess and review social connections? And at what stage of work with project beneficiaries is it most relevant and useful?

The extension phase of this project has illustrated that the SCMT questionnaire is valuable to project partners in assessing the quality and quantity of social connections near the beginning of their time (within 3-4 weeks) being supported by FRIS and nearing the end of their time (12 weeks). Had the sites had more opportunities to facilitate its use, they have expressed that looking at the differences between the maps in their opening and closing assessments could have acted as a means to illustrate progress to the beneficiaries. Social Connections Coordinators have expressed that the SCMT questionnaire has been helpful in informing ending/closing conversations and effectively assess which services the beneficiaries/families may benefit from once FRIS has stepped back from support. Similarly, when considering the aims and objectives of the Glasgow site in using the SCMT questionnaire within the context of their social hub group work, the tool was rooted into the group sessions. This helped inform the content of the group work as the case workers were able to assess which services, organisations or people the group significantly lacked contact, trust and reciprocity with and were able to form bespoke and person-centered sessions based on the answers whilst inviting speakers from other services to help build trust and contact. Similarly, they were also able to assess the differences in how connected people felt at the beginning and the end of the 12 week group programme.

What is the value to project beneficiaries in using the tool to assess and review their social connections?

Although the research team were unable to attain any first hand feedback from beneficiaries on their experiences using the SCMT questionnaire, the workshop in Cardiff with volunteers with lived experience of the asylum process highlighted the volunteers perceptions that completing the SCMT questionnaire and discussing their maps with a caseworker could have been beneficial in learning more about certain organisations (e.g. Health Advocacy) and their referral pathways earlier on in their integration journeys to help them to reach their personal integration goals quicker.

Who is most useful to? For what purpose?

The SCMT questionnaire was originally designed to meet the data collection needs of researchers, practitioners, and policymakers. However, this testing and refining phase allowed the opportunity to explore it as a person-centred needs assessment tool, as a monitoring and evaluation tool for ongoing interventions and as an evidence-gathering tool. Due to the challenges faced when reviewing the usability of the SCMT questionnaire for beneficiaries, the usefulness of the tool was predominantly assessed in relation to service provision. As identified by FRIS staff members the SCMT questionnaire is most useful specifically in relation to monitoring and evaluating social connectedness at the beginning and the end of the beneficiaries' support and informing when it is appropriate to end the support. In light of the feedback received relating to the user-friendliness of the SCMT questionnaire for beneficiaries, the research team made multiple changes to ensure a grounded approach of identifying participants' perceptions of the resources available to them.

See below a condensed list of feedback attained from the participatory workshops which has now been implemented:

Questionnaire Specific:

- Fewer demographic questions
- More languages
- Explanation of the term 'contact'
- Explanation of the term 'reciprocity'
- Reciprocity question changed
- Timeframes changed
- Reciprocity question: clarification of meaning
- Introductions reworded
- Feedback option
- Separate consent questions
- Connections refined

SCMT design feedback:

- Colours
- Visible translation options
- Not applicable button
- Review page
- Fewer clicks
- Multiple choice for contact and reciprocity questions

Can it support more sustainable and holistic integration planning, beyond the initial 'emergency phase'?

The main barrier identified in facilitating the use of the SCMT questionnaire as a tool for practice was the immediate case work priorities. It was identified through drop-in sessions with service managers and review meetings with Social Connections Coordinators that the SCMT questionnaire would be more beneficial for services focusing primarily on resettlement rather than family reunification as there would be more time and resources for sustainable and holistic integration planning.

In conclusion, service providers and beneficiaries are firefighting in early periods of transition leaving little time to explore social connections. The SCMT questionnaire may be more appropriate at the later stages of integration when there is more time and opportunity to develop social connections. Resource allocation and urgent casework priorities undermined attempts to embed the SCMT questionnaire in the core delivery of services; positioning it as *additional to*, rather than *part of* service delivery. The future potential of the SCMT questionnaire could be for it to be embedded in the initial phase of service development and procurement as a monitoring and evaluation tool as well as a person-centred tool.

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Annex

1. Evaluation survey questions

1. How many times so far have you used the SCMT questionnaire/maps to discuss social connections?

    0 – 1 – 2 – 3 – more than 3 times

2. How useful did you find those discussions?

    Very useful - quite useful - not very useful – Not useful at all - not applicable

3. In your experience, are the FRIS families you work with keen to fill in the SCMT questionnaire?

    Most of the time – sometimes – rarely – no

4. In your experience, do the FRIS families you work with see there is personal relevance in completing the SCMT questionnaire, to support their integration journey?

    Most of the time – sometimes – rarely – no

5. Do you have time to facilitate the use of the SCMT questionnaire (e.g. send out links, support someone to complete the questionnaire and use maps to discuss social connections)?

    I have time to send out links – I have time to support the completion of the questionnaire – I have time to discuss the answers and the maps – I have no time to facilitate the use of the SCMT questionnaire

6. How confident do you feel to carry out the following?:

7. Describing social connections to FRIS families?

8. Introducing the SCMT questionnaire to FRIS families?

9. Using their completed SCMT questionnaire and/or map to discuss integration planning with FRIS families?

    Very confident – quite confident – not very confident – not confident at all

10. What are the barriers to using the SCMT questionnaire in practice?

11. What would make using the SCMT questionnaire in practice easier/what other resources or support do you need?

12. Any other comments or feedback regarding the SCMT questionnaire as a practice tool?

Annex

Queen Margaret University

EDINBURGH