



# **Back in Control 2 (BIC2) Project Evaluation**

## **Part 4 Report**



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## 1. Introduction

This fourth and final report presents quantitative findings from an evaluation of the Back in Control (BiC) project, which supports adults affected by labour exploitation and modern slavery in Sunderland (Tyne and Wear) and the surrounding area. The evaluation is conducted by the University of Sunderland's Public Health Team, within the Faculty of Health Sciences and Wellbeing, and assesses the effectiveness of project interventions in delivering measurable outcomes for clients, including engagement with services, improvements in wellbeing, stability, and empowerment.

The BiC project builds on an earlier initiative and focuses on supporting adults from minoritised communities who have experienced exploitation. It provides holistic, person-centred support, combining counselling, health and wellbeing interventions, guidance on accessing benefits and entitlements, immigration advice, and volunteering opportunities. The project takes a multidisciplinary approach, working with statutory services, community organisations, and grassroots groups to address diverse client needs. It also utilises community intelligence to identify potential cases of exploitation, prevent re-exploitation, and strengthen connections between survivors and local communities. Through this integrated approach, the project aims to improve wellbeing, stability, financial security, and empowerment for those it serves.

Previous evaluation reports have contributed to understanding the project's development and impact. The first report (Harvey-Golding & Payne, 2024) outlined the project's aims and early findings based on monitoring data and initial interviews with clients and stakeholders. The second report (Harvey-Golding & Payne, 2025a) analysed client interviews to develop a Theory of Change, illustrating how project activities support recovery, empowerment, and wellbeing. The third report (Harvey-Golding & Payne, 2025b) explored stakeholder perspectives, highlighting strengths, identifying gaps in provision, and providing recommendations to enhance support for survivors.

This final report focuses specifically on quantitative monitoring data and client surveys collected between 2022 and 2025 at registration and follow-up. It examines measurable outcomes, including client engagement and progress across wellbeing, stability, and other key indicators, and situates these findings within the wider social and policy context of modern slavery and labour exploitation. The results are intended to guide future practice, inform policy development, and strengthen strategies for supporting survivors.

## 2. Methodology

The evaluation of the Back in Control 2 (BiC) project was commissioned by ICOS to assess the delivery, effectiveness, and sustainability of the intervention in supporting survivors of modern slavery and labour exploitation in the UK. A key aim of the evaluation is to identify programme strengths and challenges and generate learning to inform future provision and funding. This report focuses specifically on the quantitative component of the evaluation, presenting findings from monitoring data and client surveys collected between 2022 and 2025. The broader evaluation methodology, including qualitative approaches and the overall evaluation design, is described in detail in the first interim report (Harvey-Golding & Payne 2024).

### 2.1. Aim and Objectives

The overarching evaluation aims and objectives are detailed in the first interim report. The primary aim of this component of the evaluation was to examine the trends and changes in client outcomes over time (between 2022 and 2025) by assessing the impact of BiC services on wellbeing, service engagement, and identified needs. The objectives underpinning this aim were:

- I. To collect baseline demographic, wellbeing, engagement, and needs data from clients at the point of registration.
- II. To administer follow-up surveys at three- to six-month intervals to measure change across the same domains.
- III. To analyse patterns of improvement, stability, or decline in mental and physical wellbeing, service engagement, and perceived needs.
- IV. To assess the extent to which BiC services contribute to meeting client needs and enhancing overall wellbeing.
- V. To generate evidence that can inform service development, delivery, and strategic planning.

### 2.2. Research Design

For this component of the evaluation, a quantitative repeated measures design was employed to capture change over time within the same cohort of participants. At registration, BiC clients were invited to complete a structured survey that established baseline data across key domains including demographic characteristics, mental and physical wellbeing, service engagement, and perceived needs. These domains were selected as they reflect

core indicators of client stability and progress and are directly aligned with the service's objectives of improving health, enhancing engagement with support systems, and addressing unmet needs.

The same measures were intended to be administered at follow-up intervals of approximately three to six months after enrolment and at programme exit, to allow comparison between baseline and subsequent time points. In practice, follow-up timing was adapted to accommodate client circumstances, resulting in variable intervals between assessments. This flexible approach enabled the capture of individual trajectories while respecting clients' safety, consent, and wellbeing, and still allowed meaningful analysis of changes over time despite the practical challenges of data collection.

### **2.3. Sampling and Recruitment**

The evaluation adopted a total population sampling approach to include all BiC clients who engaged with the service between 2022 and 2025. Data collection was planned at three time points for each client: baseline (first registration), follow-ups approximately every three to six months, and at programme exit. This purposive approach was chosen to capture the full client population relevant to the evaluation and to reduce sampling bias by ensuring broad coverage of service users.

Implementation of this plan was led by ICOS, the project's frontline delivery partner. ICOS staff embedded monitoring in routine casework, administering the BiC outcome survey and wellbeing measures at registration, during scheduled reviews, and at exit where appropriate. Collecting data through the delivery partner allowed monitoring to be aligned with clients' support needs and enabled staff to approach data collection sensitively and conveniently as part of ongoing casework.

However, practical realities influenced how closely practice matched the planned schedule. BiC clients are victims and survivors of modern slavery and labour exploitation, many of whom face unstable housing, fluctuating health and legal circumstances, and limited or intermittent access to communication. Ensuring that data collection respected client safety, consent, and wellbeing often required flexible timing, with follow-ups conducted opportunistically rather than at fixed three-to six-month intervals.

These operational factors shaped the timing and completeness of follow-up data but did not undermine the overall sampling strategy. By recording all available baseline, follow-up and exit information from the full client population, the evaluation still captures a broad and realistic picture of client trajectories. The dataset therefore reflects both the diversity of



service users' experiences and the ethical and logistical constraints of monitoring outcomes among a highly vulnerable population.

## 2.4. Data Collection Methods and Measures

Quantitative data were collected by ICOS as part of ongoing BiC project monitoring. Surveys were administered at baseline, during follow-ups, and at programme exit, with timing adapted as needed to accommodate clients' safety, consent, and availability. Data were gathered across three main domains to provide a comprehensive picture of outcomes:

- I. **Client demographics**, including age, gender, nationality, ethnicity, first and second languages, immigration status, and employment status.
- II. **BiC Outcome Survey**, measuring progress against project objectives, with clients rating agreement with statements (1–10) relating to personal safety, housing and financial stability, independent living, readiness for work, English proficiency, and awareness of legal employment options.
- III. **Short Warwick–Edinburgh Mental Wellbeing Scale (SWEMWBS)**, assessing wellbeing across domains such as meaning, social relationships, and positive emotions, with responses rated on a five-point scale from 1 (“None of the time”) to 5 (“All of the time”).

These tools enabled consistent, structured measurements of changes in clients' wellbeing, stability, and self-reliance over time.

## 2.5. Data Analysis

Quantitative data, including demographic information, outcome survey results, and SWEMWBS scores, were imported into Excel and JASP for analysis. Descriptive statistics (frequencies, percentages, and means) were used to summarise trends across baseline and follow-up data, providing an overview of client progress over time.

Follow-up data were organised according to the number of months since baseline to account for differences in timing and dataset completeness. To allow for analysis with a relatively small and uneven sample, data were grouped into two time periods: a) baseline to follow-up at 3–12 months, and b) baseline to follow-up at 13–24 months. Sub-group analysis by gender was conducted for the 3-to-12-month group, but not for the 13-to-24-month group due to the small sub-sample size.

To examine whether observed differences represented statistically significant change, paired sample t-tests were conducted comparing baseline and follow-up scores within each group. Significance was set at  $p < 0.05$  with 95% confidence intervals reported. Analyses were based on all valid paired responses, ensuring maximum inclusion while reflecting the realities of working with a vulnerable and mobile client group.

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### 2.5.1. Data Attrition

Although a total of 92 clients engaged with BiC between 2022 and 2025, smaller analytic samples were available for the BiC Outcomes Survey ( $n = 48$ ) and the Wellbeing Survey ( $n = 49$ ). This attrition reflected both practical and organisational factors affecting the completeness and structure of the dataset. Some newer clients were excluded because their follow-up periods were less than three months, falling outside the timeframe required for meaningful comparison. In addition, several records contained incomplete datasets where missing information extended beyond a few items, preventing reliable inclusion in quantitative analysis. A small number of statistical outliers were also removed where responses were implausible or inconsistent with the wider dataset, to preserve the validity of mean-based comparisons.

These reductions were not unexpected given the complex and often unstable circumstances of BiC participants and the ethical, logistical, and organisational challenges of monitoring outcomes among survivors of modern slavery and labour exploitation. The final analytic samples therefore represent the most complete, accurate, and ethically sound data available, providing a robust and credible basis for assessing trends and changes in client outcomes over time.

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### 2.5.2. Data Limitations

As with many evaluations involving highly vulnerable and transient populations, several limitations should be considered when interpreting the findings. The primary limitation relates to the incompleteness of follow-up data and the resulting variation in sample sizes across survey measures and time periods. Attrition was influenced by a combination of factors, including client mobility and engagement, and differences in follow-up timing due to ethical and practical constraints.

While every effort was made to maximise inclusion and ensure data accuracy, missing data and small sub-samples, particularly at longer follow-up intervals, mean that the results should be interpreted as indicative rather than definitive. The reduced number of paired

responses limits the ability to detect smaller effect sizes and may restrict the generalisability of findings to the wider BiC client population.

Nevertheless, the dataset remains a strong and credible representation of client experiences and progress within the BiC programme. The analyses provide valuable insights into overall trends, key areas of improvement, and ongoing needs, offering a reliable evidence base for future service development, delivery, and strategic planning.

## 3. Results

The results presented in this section summarise the outcomes of the BiC project based on data collected from all clients between baseline and follow-up surveys. Analyses include demographic characteristics, changes in wellbeing, service engagement, and client-perceived outcomes as captured through the *BiC Outcome Survey* and the *SWEMWBS*. Both descriptive and inferential statistics were used to examine trends over time and to assess whether observed changes between baseline and follow-ups were statistically significant. Findings are structured to highlight overall patterns, as well as specific areas of improvement or ongoing need, providing a comprehensive view of client progress throughout their engagement with the programme.

### 3.1. BiC Client Demographics

Between 2022 and 2025, BiC supported 92 individuals affected by modern slavery and labour exploitation, reflecting a diverse client population across gender, age, ethnicity, language, immigration, and employment status. The following section summarises key demographic characteristics, including age and gender distribution, countries of origin and ethnic identities, primary and secondary languages, immigration status, and current working status, providing an overview of the population accessing BiC's services.

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#### 3.1.1. Gender and Age

Between 2022 and 2025, BiC supported 92 victims and survivors of modern slavery and labour exploitation. Of these, 58% (n=53) were male and 42% (n=39) female, ranging in age from 18 to 72. The largest group were aged 35–44 (34%; n=31), followed by 25–34 (24%; n=22). Smaller proportions were 45–54 (14%; n=13), 55–64 (14%; n=13), 18–24 (9%; n=8), and 65+ (5%; n=5). (Figure 1)

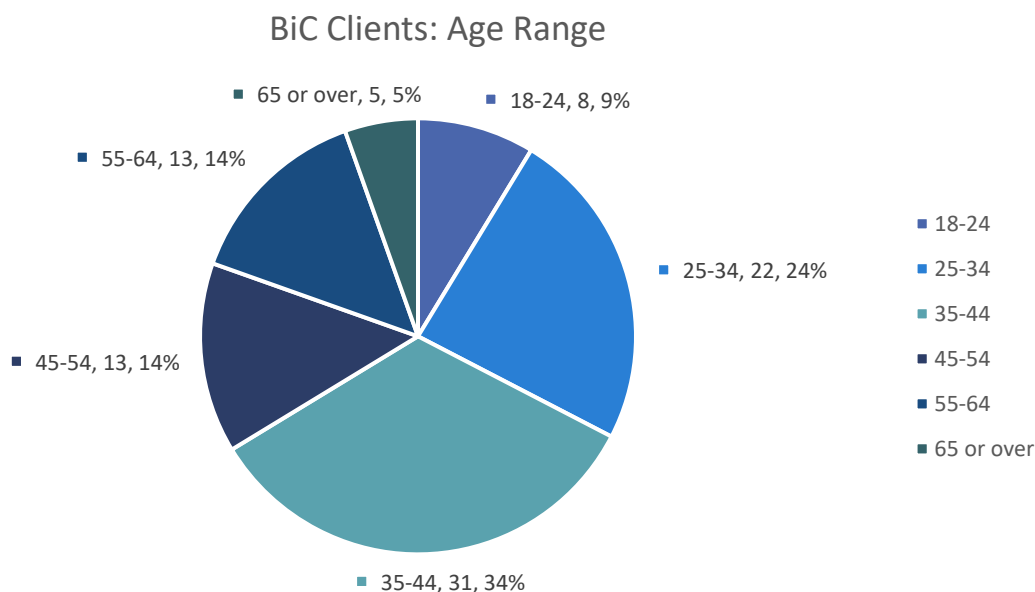


Figure 1: Age distribution of BiC clients, showing the number of clients, age ranges, and corresponding percentages.

Of the 89 clients who disclosed their country of origin, over half (54%; n=48) were from Eastern and Central Europe, most commonly Poland (54%; n=26), with others from Slovakia, Bulgaria, Ukraine, Albania, Lithuania, Czech Republic, Hungary, Romania, and Latvia. Sub-Saharan Africa accounted for 31% (n=28), half of whom were from Sudan (n=14), with others from Nigeria, Eritrea, Sierra Leone, South Sudan, Tanzania, and Togo. The remaining 15% were from the Middle East/West Asia (4%; n=4: Iraq, Kuwait, Syria, Yemen), East and South East Asia (3%; n=3: Vietnam, China), North Africa (3%; n=3: Algeria, Morocco), Southern Mediterranean (2%; n=2: Italy), and South Asia (1%; n=1: Pakistan). (Figure 2)

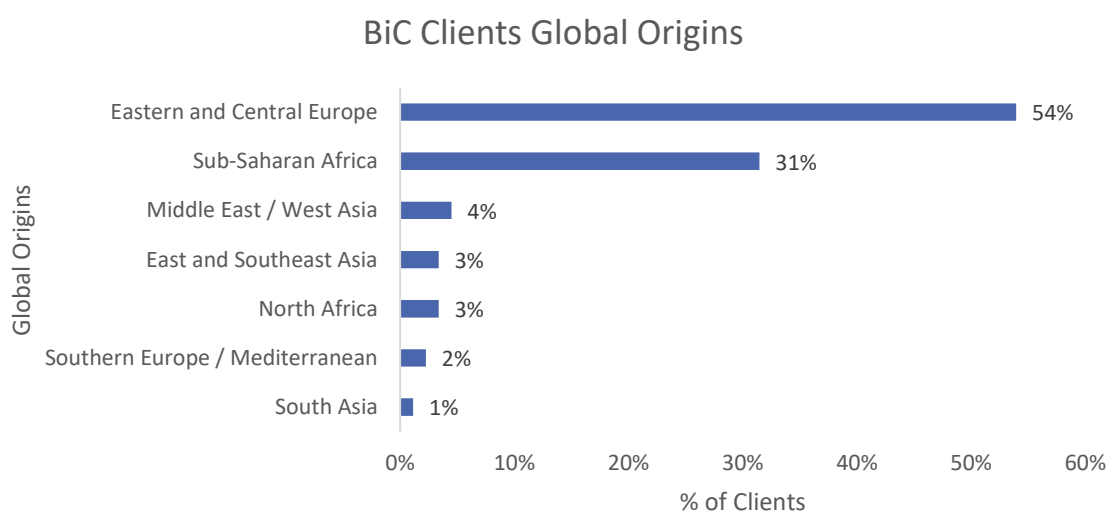


Figure 2: Global origins of BiC clients, showing regional categories and corresponding percentages of total clients.

Of the 85 clients who reported their ethnicity, just over half identified as 'White Other' (51%; n=43) and a third as 'Black African' (33%; n=28). The remaining 16% included 'White Gypsy or Irish Traveller' (4%; n=3), 'Asian Other' (4%; n=3), 'Chinese' (2%; n=2), 'Other' (2%; n=2), 'Arab' (2%; n=2), 'White British' (1%; n=1), and 'Black Other' (1%; n=1). (See Figure 3)

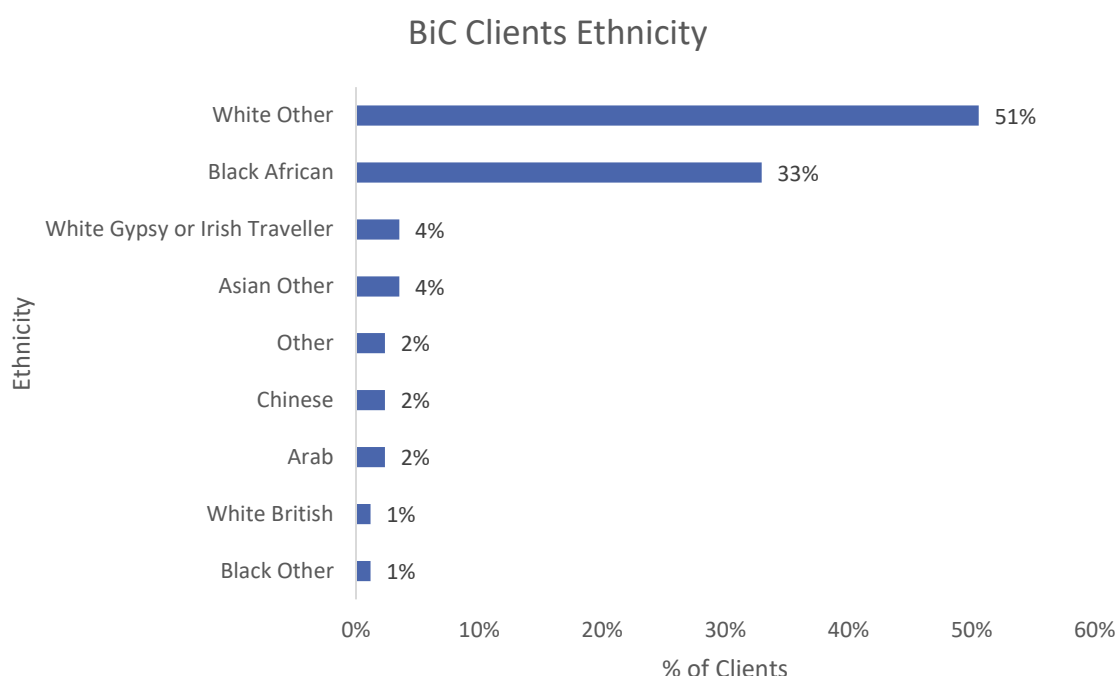


Figure 3: Ethnic distribution of BiC clients, showing the percentage of clients by ethnicity.

### 3.1.2. Main and Second Languages

A total of 90 clients reported their main language. The largest group spoke Polish (31%; n=28) as their first language, followed by Arabic (20%; n=18). Smaller groups included Slovak (7%; n=6) and English (6%; n=5). First languages spoken by 4% of clients each were Bulgarian, Tigrinya, and Ukrainian (n=4 each), while Igbo accounted for 3% (n=3).

Several first languages were reported by 2% of clients each, including Italian, Lithuanian, and Vietnamese (n=2 each). A further 11 first languages were each spoken by 1% of clients, including Albanian, Mandarin Chinese, Czech, French, Hungarian, Kurdish, Pashto, Romanian, Russian, Swahili, and Other. (Figure 4)

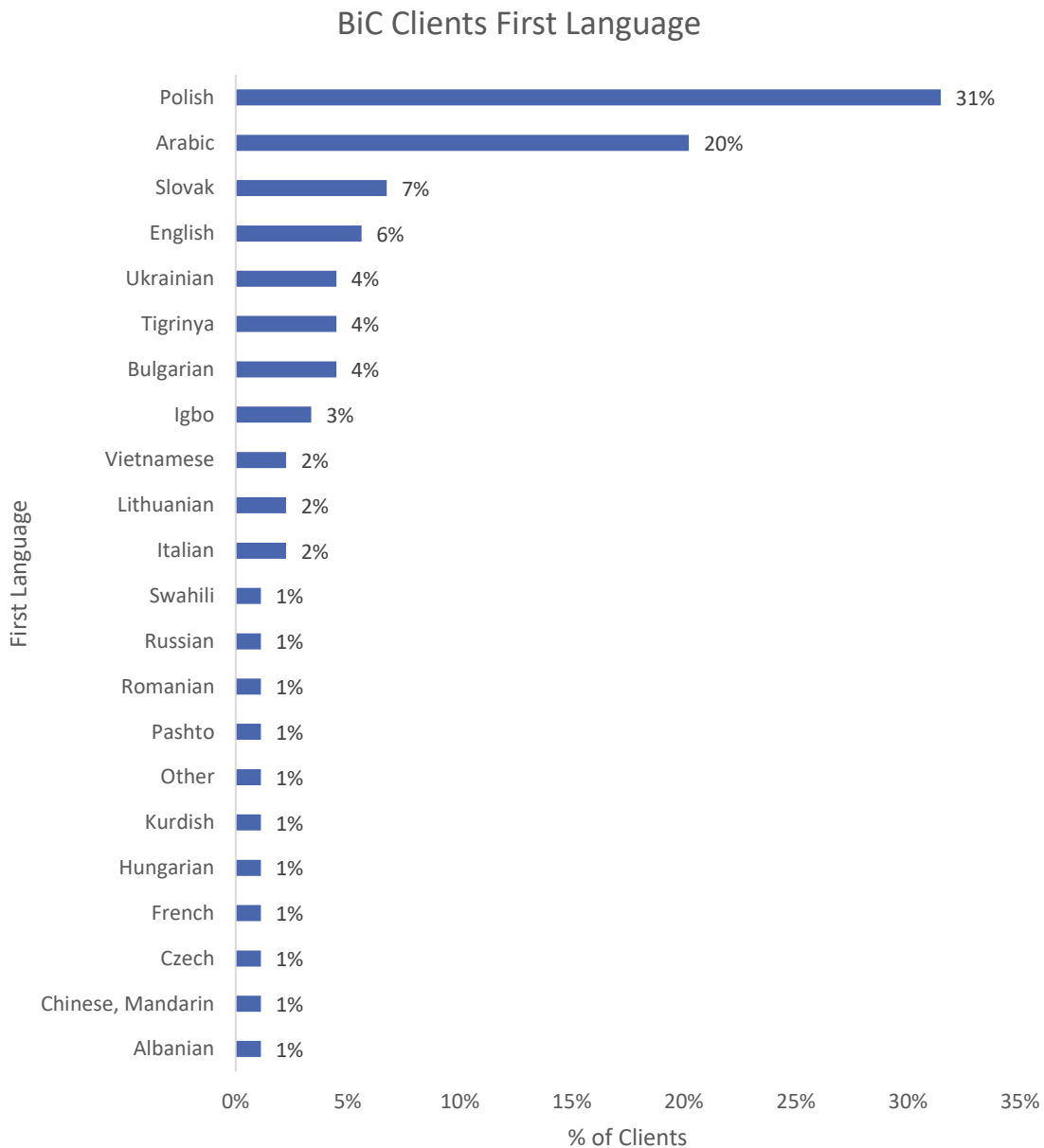


Figure 4: Second language of BiC clients, showing languages spoken and corresponding percentages of total clients.

A total of 38 clients reported a second language. The majority spoke English as a second language (68%; n=26), making it by far the most common. Small proportions reported Arabic, Polish, Roma, and Russian (5% each; n=2) as their second language. A further four languages, including Cantonese, French, Latvian, and Romanian, were each reported by 3% of clients (n=1). (See Figure 5)

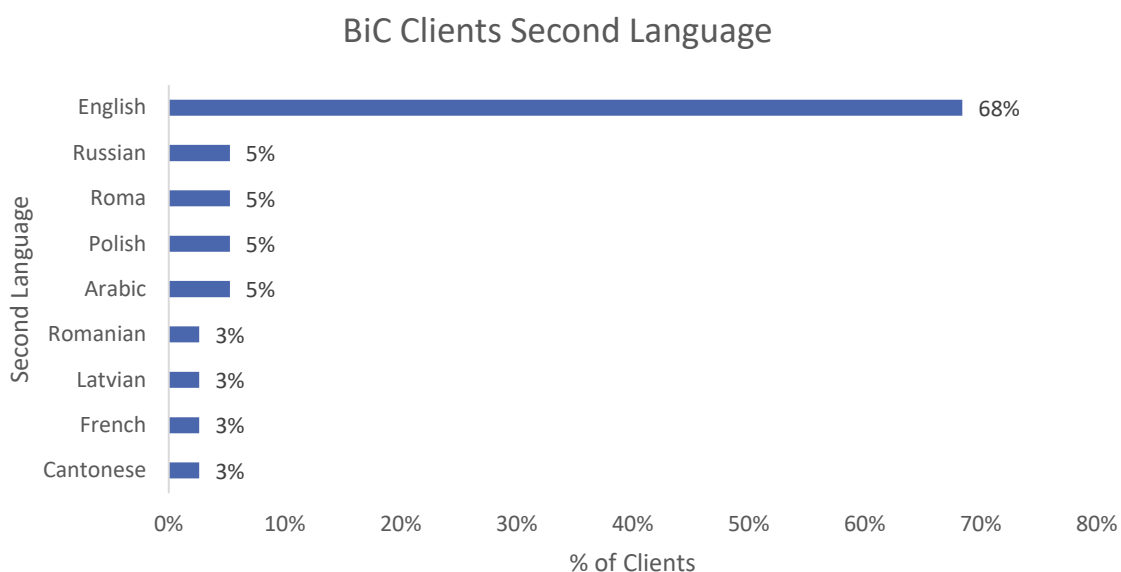


Figure 5: Second language of BiC clients, showing languages spoken and corresponding percentages of total clients.

### 3.1.3. Immigration Status

Out of 90 clients, the largest group were EU nationals, EEA or Swiss citizens with settlement status (30%; n=27). The next largest groups were refugees (20%; n=18) and asylum seekers (19%; n=17). Smaller groups included EEA Members (10%; n=9), those recorded as Other (9%; n=8), and EU nationals, EEA or Swiss citizens with pre-settlement status (8%; n=7). The smallest group were clients with a visa (4%; n=4). (Figure 6)

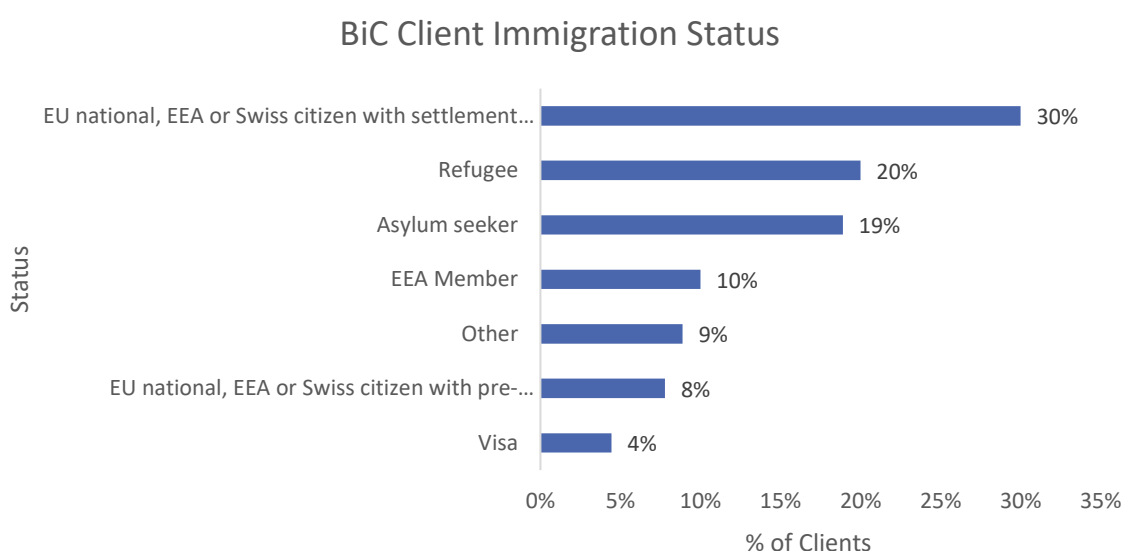


Figure 6: Immigration status of BiC clients, showing categories of legal status and corresponding percentages of total clients.

### 3.1.4. Working Status

Out of 87 clients, the largest group were unemployed (38%; n=33), followed by those with no right to work (18%; n=16). A smaller proportion were in paid work or employed (both 13%; n=11 each), while 7% (n=6) were currently not working and 3% (n=3) economically inactive. Very few clients reported being in education (2%; n=2), self-employed (2%; n=2), or retired (1%; n=1), with another 2% (n=2) categorised as 'other'. (Figure 7)

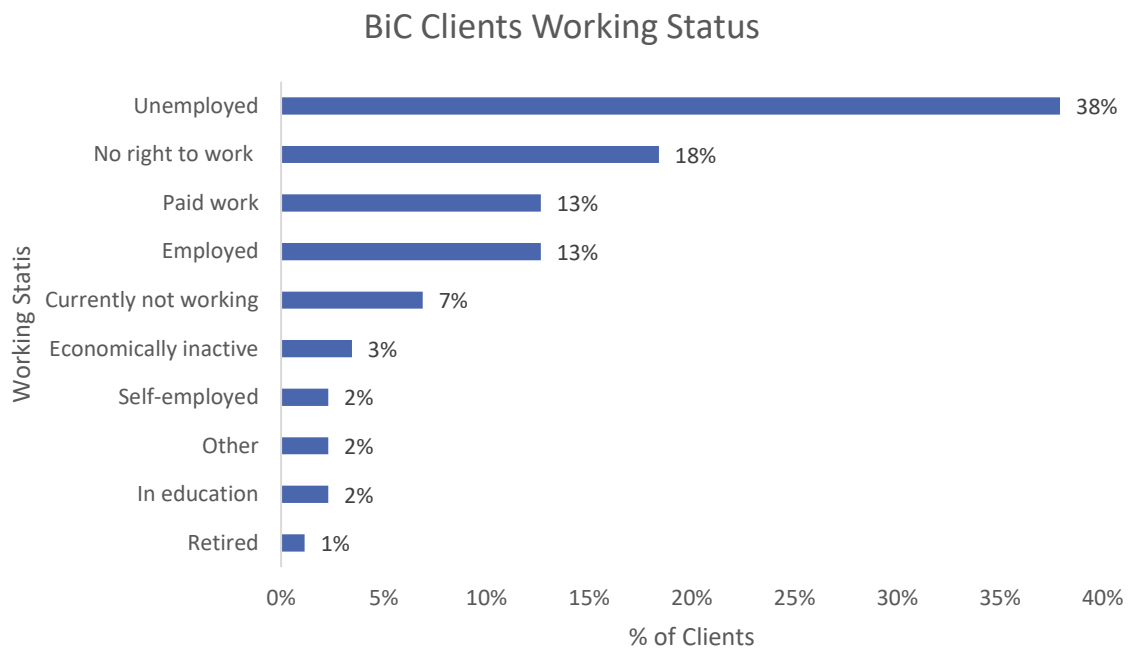


Figure 7: Working status of BiC clients, showing employment categories and corresponding percentages of total clients.

## 3.2. BiC Outcomes Survey

This section presents findings from the BiC Outcome Survey, which assessed client progress across key domains including safety, housing and financial stability, independent living, employment readiness, English language proficiency, and awareness of legal employment options. Analyses compare baseline and follow-up data to examine changes over time, with results organised into two follow-up periods including: 3-to-12-months after registration and 13-to-24-months after registration. Due to small and variable sample sizes, significance testing was conducted only where sufficient paired data were available, and subgroup analysis by gender (male and female clients) was limited to the 3-to-12-month group. The results therefore reflect both measurable trends in client outcomes and the



practical constraints of collecting longitudinal data within a highly vulnerable and mobile population.

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### 3.2.1. BiC Outcomes (3-12 Months)

A total of 48 BiC clients, who completed outcome surveys at both baseline (registration) and follow-up within their first year of support (3–12 months), were included in the analyses (Table 1, Figure 8). Overall, mean scores showed small to moderate improvements. The largest increase was in feeling safe in the current situation, rising from  $M = 6.7$  to  $M = 7.7$ . Smaller increases were observed in housing situation, 6.5 to 6.9; seeking help in crisis, 6.8 to 7.6; finding legal employment, 5.6 to 6.7; independence, 6.9 to 7.0; and readiness for work, 6.1 to 6.2. English language skills declined slightly, 4.9 to 4.5, while financial situation remained unchanged. Ratings for current employer decreased from 5.7 to 4.9; however, this measure was based on a small subsample ( $n = 18$  at baseline,  $n = 9$  at follow-up), so even one or two lower ratings could substantially shift the mean. This decrease should be interpreted cautiously, as it may reflect normal variation or changes in individual employment circumstances.

Measures of variability and precision for the full sample ( $n = 48$ ) are presented in Table 1. Standard deviations (SDs) <sup>1</sup> ranged from 2.4 to 3.8 across wellbeing measures, indicating moderate variation among participants. Standard errors (SEs) <sup>2</sup> ranged from 0.3 to 0.8, suggesting reasonably precise mean estimates. Measures with smaller sample sizes, such as current employer and readiness for work, showed higher SEs reflecting greater uncertainty due to the reduced number of respondents. Overall, variation and precision were consistent across the two time points, indicating that observed changes in mean scores reflect genuine, though modest, improvements in wellbeing during the first year of support.

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<sup>1</sup> SD indicates how much responses varied, with higher values showing greater variability and lower values indicating more similar responses.

<sup>2</sup> SE reflects the precision of the mean score, with smaller SEs suggesting greater confidence that the mean represents the true group average.

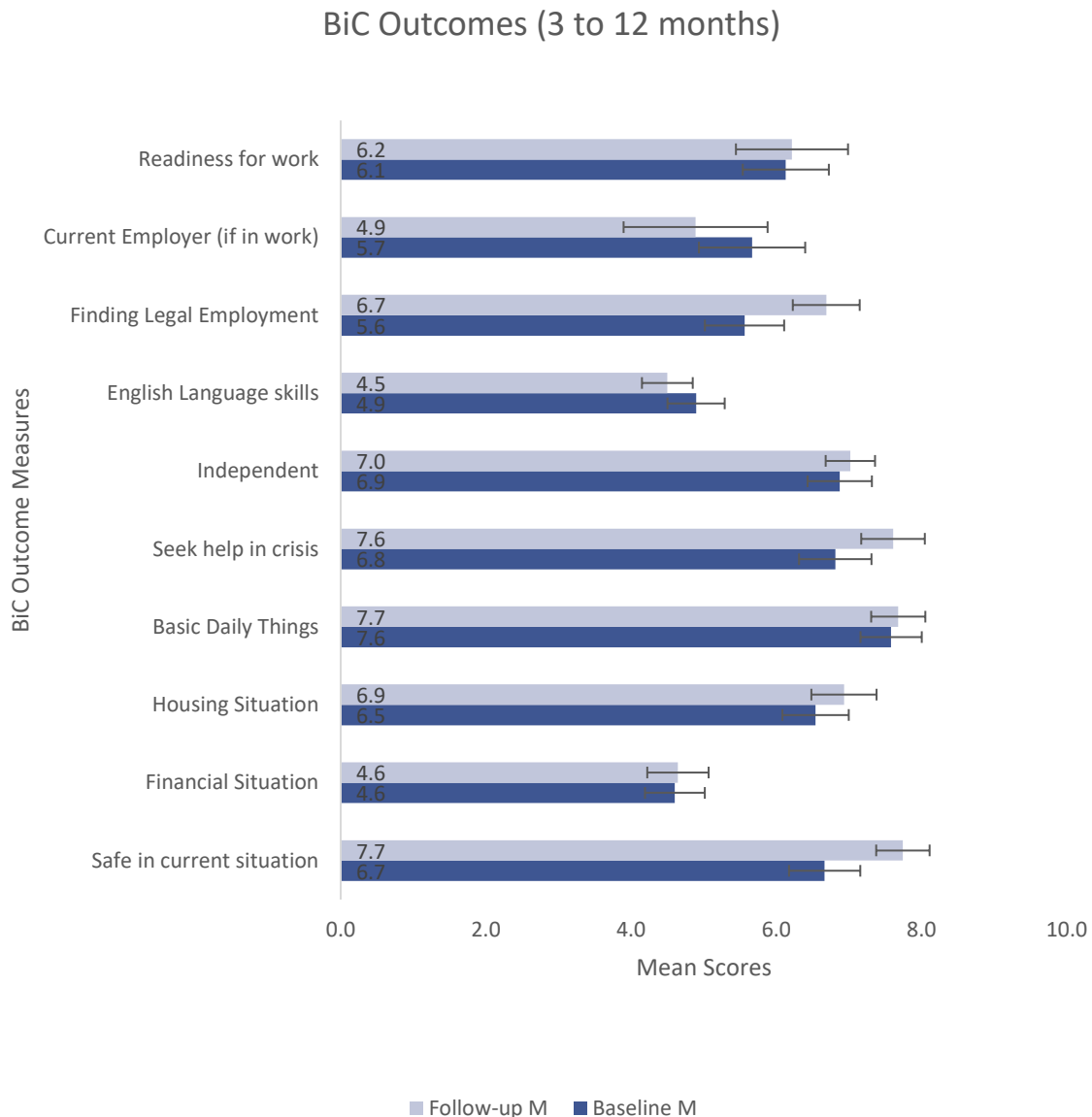


Figure 8: BiC client outcomes at baseline and 3–12-month follow-up, showing mean scores with standard error bars.

To assess whether the descriptive trends represented statistically significant changes over time, paired-sample t-tests were conducted for each BiC Outcome (Table 1). Results revealed a significant improvement in clients' sense of safety in their current situation ( $p = .03$ ) and knowledge about how to find legal employment ( $p = .05$ ). Positive, though non-significant, increases were also observed in clients' knowledge of who to ask for help in a crisis ( $p = .15$ ) and perceived housing situation ( $p = .36$ ). Other outcomes, including financial situation, ability to manage daily activities, perceived independence, English language ability, satisfaction with current employment, and readiness to look for work, showed little or no change ( $p > .05$ ). Overall, while only a few areas reached statistical significance, the pattern of results suggests gradual progress in safety, awareness, and aspects of independence among BiC clients during their first year of support.

Table 1: BiC client wellbeing outcomes at baseline and 3–12-month follow-up, showing mean scores with standard deviations, standard errors, and significance levels. \*  $p < .05$ .

| Wellbeing Measures   | Baseline n, M (SD, SE) | Follow-up n, M (SD, SE) | t(df)       | p    |
|--|------------------------|-------------------------|-------------|------|
| <b>Safety</b> “On a scale from 1 (very unsafe) to 10 (very safe), how safe do you feel in your current situation?”   | 48, 6.7 (3.4, 0.5)     | 47, 7.7 (2.5, 0.4)      | -2.308 (46) | .03* |
| <b>Finances</b> “On a scale from 1 (very bad) to 10 (very good), how would you describe your current financial situation?”                                     | 48, 4.6 (2.9, 0.4)     | 48, 4.6 (2.9, 0.4)      | -0.089 (47) | .93  |
| <b>Housing</b> “On a scale from 1 (very bad) to 10 (very good), how would you describe your current housing situation?”  | 48, 6.5 (3.2, 0.5)     | 45, 6.9 (3.0, 0.4)      | -0.935 (44) | .36  |
| <b>Basic daily things</b> “On a scale from 1 (nothing) to 10 (everything), please indicate your perceived level of ability to manage basic daily activities.”  | 48, 7.6 (2.9, 0.4)     | 47, 7.7 (2.6, 0.4)      | -0.358 (46) | .72  |
| <b>Seek help in crisis</b> “On a scale from 1 (I don’t know) to 10 (full knowledge), please indicate how much you know about who to ask for help in a crisis.” | 48, 6.8 (3.5, 0.5)     | 46, 7.6 (3.0, 0.4)      | -1.460 (46) | .15  |
| <b>Independence</b> “On a scale from 1 (not independent) to 10 (fully independent), please indicate your perceived level of independence.”                     | 48, 6.9 (3.1, 0.4)     | 48, 7.0 (2.4, 0.3)      | -0.287 (47) | .78  |
| <b>English language</b> “On a scale from 1 (not good) to 10 (very good), please indicate your English language ability.”                                       | 48, 4.9 (2.7, 0.4)     | 48, 4.5 (2.4, 0.4)      | 1.137 (46)  | .26  |
| <b>Legal employment</b> “On a scale from 1 (no knowledge) to 10 (full knowledge), please indicate how much you know about how to find legal employment.”       | 48, 5.6 (3.8, 0.5)     | 45, 6.7 (3.1, 0.5)      | -2.008 (44) | .05* |
| <b>Current employer</b> “If currently employed, rate your satisfaction with your current employer.”  | 18, 5.7 (3.1, 0.7)     | 9, 4.9 (3.0, 1.0)       | 1.482 (46)  | .18  |
| <b>Readiness for work</b> “On a scale from 1 (not ready at all) to 10 (very ready), please rate your readiness to look for work.”                              | 38, 6.1 (3.7, 0.6)     | 23, 6.2 (3.7, 0.8)      | -0.373 (46) | .71  |

Note. Means are presented with standard deviations (SD) and standard errors (SE) in parentheses. p values < .05 are marked with an asterisk (\*). Higher scores indicate greater wellbeing.

### 3.2.2. BiC Outcomes (3-12 Months) Male Clients

For the male subsample (n = 24 at baseline, with follow-up sample sizes ranging from 16 to 24 depending on the measure), the descriptive trends presented in Figure 9 and Table 2

indicate a mixed pattern of changes in mean scores between baseline and 3-to-12-month follow-ups. The largest increases were observed for finding legal employment (5.2 to 6.2) and seeking help in crisis (6.8 to 7.7). Safety in current situation also showed a moderate increase (7.0 to 7.7), while smaller increases were observed for readiness for work (6.0 to 6.4), housing situation (6.3 to 6.5), independence (6.9 to 7.0), and basic daily things (7.9 to 8.0). Two domains showed slight decreases including: financial situation (4.5 to 4.3) and English language skills (4.9 to 4.4). Overall, the descriptive data suggest that, on average, male clients experienced modest improvements across several wellbeing domains, particularly in employment-related areas and perceptions of safety, with minimal change or small declines in others.

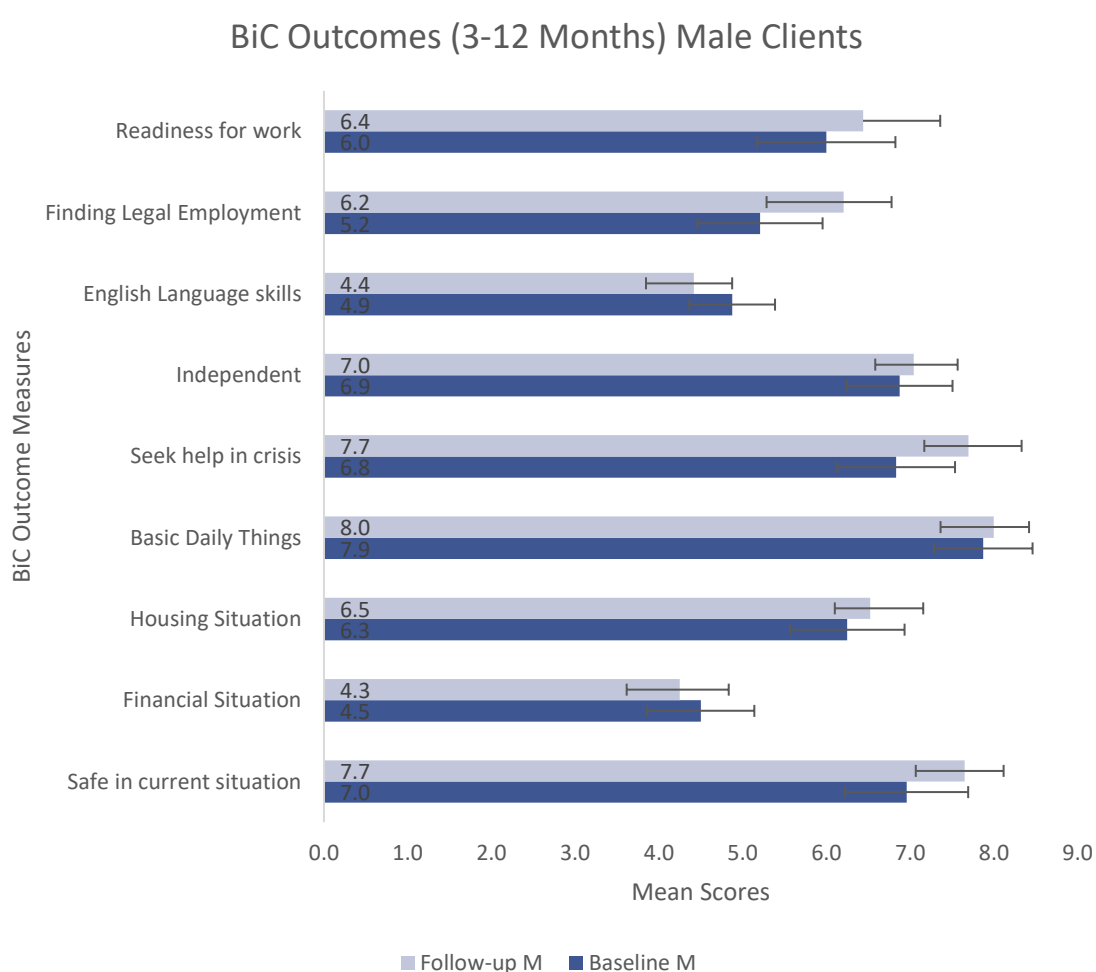


Figure 9: BiC male client outcomes at baseline and 3–12-month follow-up, showing mean scores with standard error bars.

For the male subsample ( $n = 16\text{--}24$  across measures; Table 2), SDs ranged from 2.1 to 3.8, indicating moderate individual differences among participants. SEs ranged from 0.4 to 0.9, suggesting reasonably precise mean estimates, with higher SEs in measures with smaller sample sizes (e.g., readiness for work) reflecting greater uncertainty in the mean due to

fewer respondents. The smaller overall male subsample also means these estimates are less stable and should be interpreted with caution, as they are less generalisable than those from the full sample. Lower SEs for measures such as basic daily tasks and safety in current situation indicate relatively consistent responses. These results suggest that while average outcomes show some positive trends, there is variation in experiences and outcomes within the male sub-sample.

Table 2: BiC male client wellbeing outcomes at baseline and 3–12-month follow-up, showing mean scores with standard deviations, standard errors, and significance levels.  $p < .05$ .

| BiC Outcome Measure       | Baseline n, M<br>(SD, SE) | Follow-up n, M<br>(SD, SE) | t(df)       | P   |
|---------------------------|---------------------------|----------------------------|-------------|-----|
| Safe in current situation | 24, 7.0 (3.6, 0.7)        | 23, 7.7 (2.2, 0.5)         | -1.116 (22) | .28 |
| Financial Situation       | 24, 4.5 (3.1, 0.6)        | 24, 4.3 (2.9, 0.6)         | 0.45 (23)   | .66 |
| Housing Situation         | 24, 6.3 (3.4, 0.7)        | 23, 6.5 (3.0, 0.6)         | -0.154 (22) | .88 |
| Basic Daily Tasks         | 24, 7.9 (2.9, 0.6)        | 24, 8.0 (2.1, 0.4)         | -0.203 (23) | .84 |
| Seek help in crisis       | 24, 6.8 (3.4, 0.7)        | 23, 7.7 (3.1, 0.6)         | -0.912 (22) | .37 |
| Independence              | 24, 6.9 (3.1, 0.6)        | 24, 7.0 (2.6, 0.5)         | -0.226 (23) | .82 |
| English Language skills   | 24, 4.9 (2.5, 0.5)        | 24, 4.4 (2.2, 0.5)         | -0.917 (22) | .37 |
| Finding Legal Employment  | 24, 5.2 (3.7, 0.7)        | 24, 6.2 (2.8, 0.6)         | -1.457 (22) | .16 |
| Readiness for work        | 21, 6.0 (3.8, 0.8)        | 16, 6.4 (3.7, 0.9)         | -0.405 (22) | .69 |

Note. Means are presented with standard deviations (SD) and standard errors (SE) in parentheses.  $p$  values  $< .05$  are marked with an asterisk (\*). Higher scores indicate greater wellbeing.

Inferential analyses using paired-sample  $t$ -tests (see Table 2) indicated that none of the observed changes between baseline and follow-up were statistically significant at the  $p < .05$  level. The smallest  $p$ -value was .16 for finding legal employment, with all other outcomes ranging from .28 to .88. The relatively small follow-up sample sizes for some measures, particularly readiness for work ( $n = 16$ ), likely reduced statistical power and increased uncertainty around the estimates. As a result, while the descriptive data indicate some positive movement in key wellbeing domains, these changes should be interpreted cautiously and regarded as indicative rather than conclusive evidence of improvement over time within the male client sub-sample.

### 3.2.2.1. Comparison of Male Outcomes with Total Sample Patterns

When comparing the male subsample with the overall BiC client group, similar patterns of change were observed across wellbeing outcomes, although the size and significance of improvements differed. In the full sample, significant gains occurred in feeling safe ( $p = .03$ ) and knowledge of finding legal employment ( $p = .05$ ). Male clients also showed increases in these domains, with mean scores for safety rising from 7.0 to 7.7 ( $p = .28$ ) and for employment knowledge from 5.2 to 6.2 ( $p = .16$ ). This suggests that the positive shifts identified at the whole-sample level were not as pronounced within the male sub-sample. Overall, the male subsample followed the same general pattern as the total sample but with more modest changes and no statistically significant shifts. The smaller male sub-sample ( $n = 24$ ) also reduces statistical power, meaning non-significant results may reflect limited sensitivity rather than an absence of real change.

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### 3.2.3. BiC Outcomes (3-12 Months) Female Clients

As shown in Table 3 and illustrated in Figure 10, mean scores for female clients ( $n = 24$  at baseline, with follow-up sample sizes ranging from 7 to 24 depending on the measure) at baseline and at 3 to 12-month follow-up demonstrated positive trends across several outcome measures. The most pronounced improvement was observed for safe in current situation, which increased from 6.4 at baseline to 7.8 at follow-up. Higher scores were also observed for finding legal employment (from 5.9 to 7.2), housing situation (from 6.8 to 7.4), and seeking help in crisis (from 6.8 to 7.5). Independence showed a slight increase (6.9 to 7.0), while basic daily living remained stable (7.3 at both time points). Some declines were evident for readiness for work (6.3 to 5.7, follow-up  $n = 7$ ), current employer (if in work) (5.5 to 4.3, follow-up  $n = 8$ ), and English language skills (4.9 to 4.6). Given the small follow-up sample sizes for readiness for work and current employer, these trends should be interpreted with caution. Overall, the descriptive data indicate modest improvements in several wellbeing domains and minor reductions in certain employment-related areas for female BiC clients during the first year.

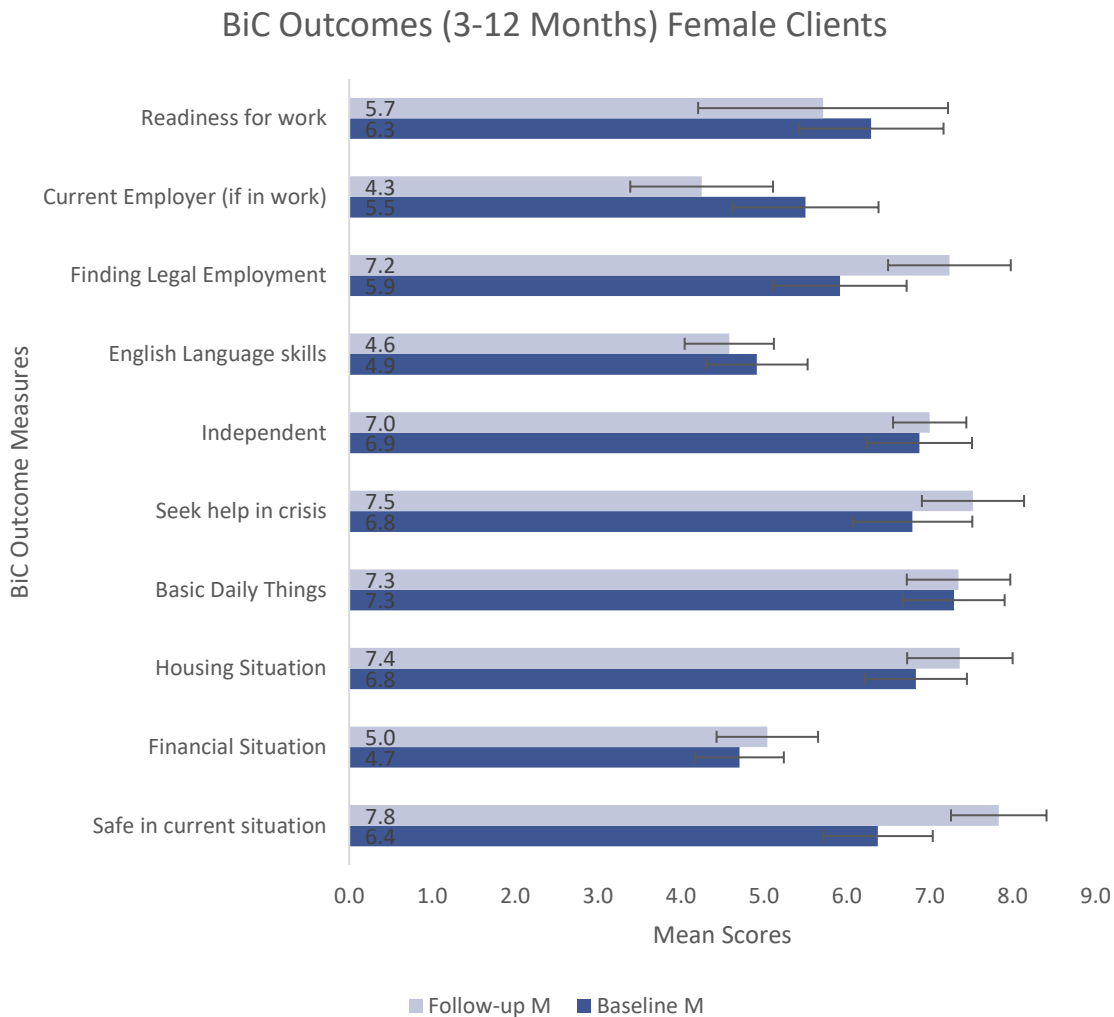


Figure 10: BiC female client outcomes at baseline and 3–12-month follow-up, showing mean scores with standard error bars.

As detailed in Table 3, standard deviations (SDs) ranged from 2.2 to 4.0, indicating moderate variability in client responses, with some measures (e.g., readiness for work) showing slightly higher individual differences. SDs were comparable between baseline and follow-up for most outcomes, suggesting that the degree of variation among participants was relatively consistent over time. Standard errors (SEs) ranged from 0.4 to 1.5, indicating reasonably precise mean estimates for most measures, while higher SEs reflect considerable uncertainty due to small subgroup sample sizes. Lower SEs for measures such as independence and basic daily tasks indicate relatively consistent responses. Overall, the follow-up estimates were based on data of comparable quality to baseline, though the smaller sample sizes in some measures mean these estimates should be interpreted with caution.

Table 3: BiC female client wellbeing outcomes at baseline and 3–12-month follow-up, showing mean scores with standard deviations, standard errors, and significance levels.  $p < .05$ .

| BiC Outcome Measure           | Baseline n, M<br>(SD, SE) | Follow-up n, M<br>(SD, SE) | t(df)      | p    |
|-------------------------------|---------------------------|----------------------------|------------|------|
| Safe in current situation     | 24, 6.4 (3.2, 0.7)        | 24, 7.8 (2.8, 0.6)         | -2.15 (23) | .04* |
| Financial Situation           | 24, 4.7 (2.6, 0.5)        | 24, 5.0 (3.0, 0.6)         | -0.44 (23) | .67  |
| Housing Situation             | 24, 6.8 (3.0, 0.6)        | 22, 7.4 (3.0, 0.6)         | -1.58 (21) | .13  |
| Basic Daily Tasks             | 24, 7.3 (3.0, 0.6)        | 23, 7.3 (3.0, 0.6)         | -0.30 (22) | .76  |
| Seek help in crisis           | 24, 6.8 (3.5, 0.7)        | 23, 7.5 (3.0, 0.6)         | -1.16 (22) | .26  |
| Independence                  | 24, 6.9 (3.1, 0.6)        | 24, 7.0 (2.2, 0.4)         | -0.17 (22) | .86  |
| English Language skills       | 24, 4.9 (3.0, 0.6)        | 24, 4.6 (2.6, 0.5)         | 0.67 (22)  | .51  |
| Finding Legal Employment      | 24, 5.9 (3.9, 0.8)        | 21, 7.2 (3.4, 0.7)         | -1.37 (22) | .19  |
| Current Employer (if in work) | 12, 5.5 (3.1, 0.9)        | 8, 4.3 (2.4, 0.9)          | 1.50 (22)  | .18  |
| Readiness for work            | 17, 6.3 (3.6, 0.9)        | 7, 5.7 (4.0, 1.5)          | 0.00 (22)  | 1.00 |

Note. Means are presented with standard deviations (SD) and standard errors (SE) in parentheses.  $p$  values  $< .05$  are marked with an asterisk (\*). Higher scores indicate greater wellbeing.

Inferential analyses using paired-sample  $t$ -tests (see Table 3) indicated that only one outcome, safety in the current situation, showed a statistically significant improvement ( $p = .04$ ). All other outcomes were not statistically significant, with  $p$ -values ranging from .13 to 1.00. Relatively small follow-up sample sizes for some measures, particularly readiness for work ( $n = 7$ ) and current employer ( $n = 8$ ), likely reduced statistical power and increased uncertainty around the estimates. As a result, while the descriptive data suggest some positive movement in key wellbeing domains, these changes should be interpreted cautiously and regarded as indicative rather than conclusive evidence of improvement over time within the female sub-sample.

### 3.2.3.1. Comparison of Female Outcomes with Male and Total Sample Patterns

The female sub-sample showed broadly similar patterns of change to the male sub-sample and main sample, with slightly larger improvements in feeling safe in their current situation and knowledge about finding legal employment (Figures 8–10, Tables 1–3). Changes in housing situation and knowledge of who to ask for help in a crisis were small and consistent



across groups, while managing daily tasks and perceived independence showed minimal change. Small decreases in readiness for work and satisfaction with current employer were observed for females, contrasting with slight increases for males and stability in the main sample. Smaller sub-sample sizes ( $n = 24$ ) and reduced responses for some measures likely limited statistical power, whereas the larger main sample ( $n = 48$ ) provided more precise estimates, indicating that differences in significance largely reflect sample size and response variability rather than meaningful differences in programme impact.

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#### 3.2.4. BiC Outcomes (13-24 Months)

A total of 18 BiC clients completed both baseline and 13–24-month follow-up wellbeing measures, although follow-up sample sizes varied slightly across individual outcomes. The measure current employer (if in work) is presented in Table 4 and Figure 11 for completeness but was excluded from descriptive trends due to the very small follow-up sample ( $n = 2$ ). Across the remaining measures, overall mean scores demonstrated improvements between baseline and follow-up, improvements across several areas of clients' circumstances and capabilities (Table 4 and Figure 11). The largest increases were observed in financial situation (3.1 to 5.9), housing situation (5.4 to 7.4), seeking help in a crisis (5.9 to 8.1), and feeling safe in current situation (6.2 to 8.1). Moderate improvements were evident in independence (6.2 to 7.4), finding legal employment (5.6 to 7.2), and English language skills (4.8 to 5.9), while small decreases were recorded for readiness for work (6.8 to 6.6) and basic daily tasks (7.6 to 7.4).

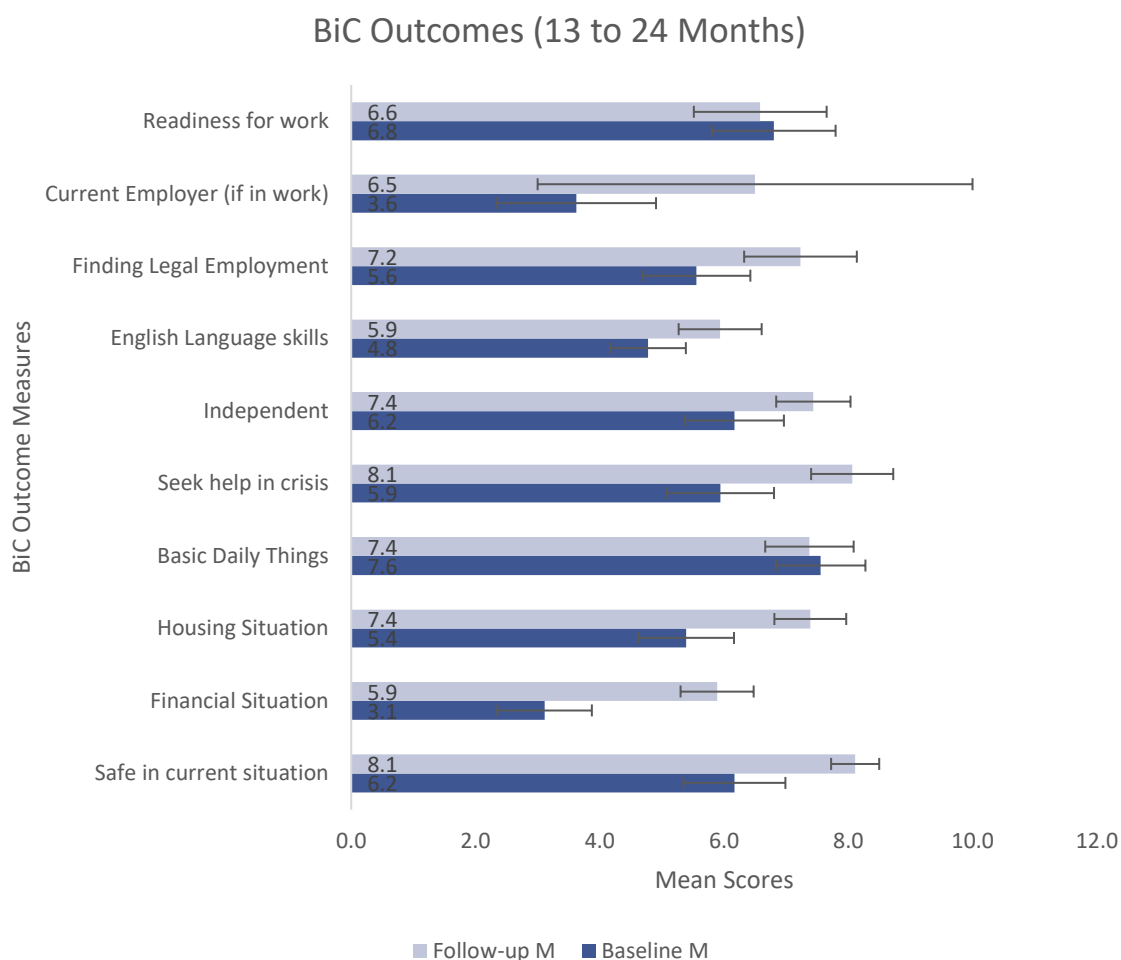


Figure 11: BiC client outcomes at baseline and 13–24-month follow-up, showing mean scores with standard error bars.<sup>3</sup>

Measures of variability and precision for the 13 to 24-month main sample are presented in Table 4. Across most outcomes, baseline SDs ranged from approximately 2.6 to 3.9, and follow-up SDs ranged from 1.6 to 3.7, broadly consistent with the ranges observed in the 3 to 12-month main and sub-sample analyses. SDs generally decreased at follow-up, suggesting that client responses became somewhat more consistent over time. SEs ranged from 0.4 to 1.3 at baseline and 0.4 to 1.1 at follow-up for most outcomes, indicating broadly comparable precision in mean estimates across time points. Measures with very small follow-up samples, particularly employment-related indicators such as readiness for work and current employer, showed larger SEs, reflecting greater uncertainty around these estimates. The SD and SE for current employer at follow-up (SD = 5.0, SE = 3.5) is exceptionally high due to the extremely limited sample ( $n = 2$ ) and should be interpreted with caution. Overall, the modest reductions in variability across most outcomes mirror patterns seen in the 3 to 12-month analyses, suggesting a broadly consistent trend towards more stable client

<sup>3</sup> The measure “Current employer (if in work)” was excluded from analysis due to a small follow-up sample ( $n = 2$ ).

circumstances over time, while recognising that small sample sizes limit the precision of some estimates.

Table 4: BiC client wellbeing outcomes at baseline and 13–24-month follow-up, showing mean scores with standard deviations, standard errors, and significance levels. \*  $p < .05$ .

| BiC Outcome Measure           | Baseline n, M (SD, SE) | Follow-up n, M (SD, SE) | t(df)       | p     |
|-------------------------------|------------------------|-------------------------|-------------|-------|
| Safe in current situation     | 18, 6.2 (3.5, 0.8)     | 18, 8.1 (1.6, 0.4)      | -2.229 (17) | .04*  |
| Financial Situation           | 18, 3.1 (3.2, 0.8)     | 18, 5.9 (2.5, 0.6)      | -3.344 (17) | .00** |
| Housing Situation             | 18, 5.4 (3.3, 0.8)     | 18, 7.4 (2.5, 0.6)      | -2.069 (17) | .05   |
| Basic Daily Tasks             | 18, 7.6 (3.1, 0.7)     | 16, 7.4 (2.8, 0.7)      | 0.082 (15)  | .94   |
| Seek help in crisis           | 18, 5.9 (3.7, 0.9)     | 16, 8.1 (2.6, 0.7)      | -2.596 (15) | .02*  |
| Independence                  | 18, 6.2 (3.4, 0.8)     | 16, 7.4 (2.4, 0.6)      | -0.928 (15) | .37   |
| English Language skills       | 18, 4.8 (2.6, 0.6)     | 16, 5.9 (2.7, 0.7)      | -2.229 (15) | .04*  |
| Finding Legal Employment      | 18, 5.6 (3.7, 0.9)     | 13, 7.2 (3.3, 0.9)      | -2.284 (12) | .04*  |
| Current Employer (if in work) | 8, 3.6 (3.6, 1.3)      | 2, 6.5 (5.0, 3.5)       | -1.571 (1)  | .36   |
| Readiness for work            | 15, 6.8 (3.9, 1.0)     | 12, 6.6 (3.7, 1.1)      | -0.194 (11) | .85   |

Note. Means are presented with standard deviations (SD) and standard errors (SE) in parentheses. p values < .05 are marked with an asterisk (\*). Higher scores indicate greater wellbeing.

Paired-samples t-tests indicated several statistically significant improvements between baseline and follow-up. Significant gains were found for feeling safe in current situation ( $p = .04$ ), financial Situation ( $p = .00$ ), housing situation ( $p = .05$ ), seeking help in a crisis ( $p = .02$ ), English language skills ( $p = .04$ ), and finding legal employment ( $p = .04$ ). No statistically significant differences were found for readiness for work, independence, or basic daily tasks. The measure current employer (if in work) was excluded from inferential analysis due to the very small follow-up sample ( $n = 2$ ). While the pattern of results indicates meaningful improvements in several key areas of wellbeing and socioeconomic stability, the small

overall sample size likely reduced statistical power, meaning that some genuine effects may not have reached significance. Conversely, significant results should be interpreted with caution, as small samples can also overestimate effect sizes. These findings therefore represent encouraging trends that warrant further investigation with a larger sample to confirm and strengthen the evidence base.

### 3.2.5. Comparison of BiC Outcomes (3-12 vs 13-24 months)

Comparing follow-up periods (Tables 1, 4, 5; Figures 8, 11) shows that most wellbeing outcomes improved during clients' first year and were further enhanced among those who remained in the programme up to two years. Safety and knowledge of finding legal employment showed significant gains at both time points, while financial situation, housing, seeking help in a crisis, and English language skills reached significance at 13–24 months. Other outcomes, including independence, basic daily tasks, readiness for work, and satisfaction with current employer, showed only small or non-significant changes. Variability tended to be lower at 13–24 months, reflecting more consistent outcomes among the smaller sample ( $n = 18$ ), though the reduced sample size limits statistical power and generalizability. Overall, early improvements were maintained and extended over time, with larger gains among participants at the later follow-up. Detailed descriptive statistics and significance values are presented in Table 5.

Table 5: Comparison of Wellbeing Outcomes Between 3–12 Month and 13–24 Month Follow-Ups<sup>4</sup>

| Wellbeing Measure           | 3-12 Months (Baseline to Follow-up M) | 13-24 Months (Baseline to Follow-up M) | p (3-12 months) | p (13-24 months) | Summary   |
|-----------------------------|---------------------------------------|--|-----------------|------------------|---|
| Safety in current situation | 6.7 to 7.7                            | 6.2 to 8.1                             | .03*            | .04*             | Significant improvement at both time points/                                |
| Financial situation         | 4.6 to 4.6                            | 3.1 to 5.9                             | .93             | .00*             | No change at 3–12 months; significant improvement at 13–24 months           |
| Housing situation           | 6.5 to 6.9                            | 5.4 to 7.4                             | .36             | .05*             | Small, non-significant increase initially; significant gain at 13–24 months |
| Basic daily things          | 7.6 to 7.7                            | 7.6 to 7.4                             | .72             | .94              | Stable across both time periods   |

<sup>4</sup> See also Figures 8 and 11; Tables 1 and 4

| Wellbeing Measure                     | 3-12 Months (Baseline to Follow-up M) | 13-24 Months (Baseline to Follow-up M) | p (3-12 months) | p (13-24 months) | Summary   |
|---------------------------------------|---------------------------------------|--|-----------------|------------------|---|
| Seeking help in a crisis              | 6.8 to 7.6                            | 5.9 to 8.1                             | .15             | .02*             | Slight improvement at 3–12 months; significant increase at 13–24 months |
| Independence                          | 6.9 to 7.0                            | 6.2 to 7.4                             | .78             | .37              | Moderate, non-significant gains across both periods                     |
| English language skills               | 4.9 to 4.5                            | 4.8 to 5.9                             | .26             | .04*             | Slight decline initially; significant improvement at 13–24 months       |
| Knowledge of finding legal employment | 5.6 to 6.7                            | 5.6 to 7.2                             | .05             | .04*             | Significant gains at both time points                                   |
| Satisfaction with current employer    | 5.7 to 4.9                            | 3.6 to 6.5                             | .18             | .36              | Mixed changes; not statistically significant                            |
| Readiness for work                    | 6.1 to 6.2                            | 6.8 to 6.6                             | .71             | .85              | Relatively stable across both periods                                   |

Note: p-values indicate statistical significance at  $p < .05$

### 3.3. BiC Client Wellbeing Outcomes (SWEMWBS)

This section presents wellbeing outcomes for BiC clients measured using the Short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS) at baseline and follow-up intervals. The analysis examines changes in seven dimensions including: wellbeing, optimism, usefulness, relaxation, problem-solving, clear thinking, social connectedness, and autonomy, as well as total wellbeing scores. Results are reported for the overall client cohort and by gender subgroups across two follow-up periods: 3 to 12 months and 13 to 24 months post-registration. Both descriptive statistics and paired-sample t-tests are used to assess the magnitude and statistical significance of changes over time, with particular attention to patterns of improvement and the consistency of outcomes across different client populations and programme durations.

#### 3.3.1. Wellbeing Outcomes (3-12 months)

A total of 49 BiC clients completed SWEMWBS wellbeing surveys at both baseline (registration) and follow-up within their first year of support (follow-up between 3 to 12 months). Descriptive analysis indicated an overall upward trend in wellbeing across all measures (Table 6, Figure 12). The mean total wellbeing score increased from 24.6 (SD = 7.4) at baseline to 25.8 (SD = 5.5) at follow-up. The largest gain was in clients' ability to make up their own minds about things, increasing from 3.7 (SD = 1.4) to 4.2 (SD = 0.9). Improvements were also observed in feeling relaxed (2.9 to 3.3), optimism about the future (3.6 to 3.9), and feeling useful (3.7 to 3.9), while smaller increases were recorded for dealing with problems well (3.3 to 3.4) and feeling close to others (3.6 to 3.7). Thinking clearly remained stable at 3.8 across both time points.



Figure 12: BiC Clients Wellbeing Outcomes (SWEMWBS) (3-12 months) Descriptive Statistical Results

As shown in Table 6, there was notable variability in individual wellbeing item scores at baseline, with standard deviations (SD) ranging from 0.9 to 1.4. Over time, SDs generally decreased, indicating a reduction in variability and that participants' responses became more similar at follow-up. The total wellbeing score also showed decreased variability, with SD falling from 7.4 to 5.5, reflecting a convergence in overall wellbeing across participants. Standard errors (SE) remained small and consistent at both time points (Table 6, Figure 12), confirming that the mean scores were estimated with high precision despite the initial differences among participants.

Table 6: BiC Clients Wellbeing Outcomes (SWEMWBS) (3-12 months) Descriptive and Inferential Statistical Results

| Wellbeing Measure                                  | Baseline <i>n</i> , M (SD, SE) | Follow-up <i>n</i> , M (SD, SE) | <i>t</i> ( <i>df</i> ) | <i>p</i>   |
|--|--------------------------------|---------------------------------|------------------------|------------|
| I've been feeling optimistic about the future      | 49, 3.6 (1.4, 0.2)             | 49, 3.9 (1.1, 0.2)              | -1.88                  | .07        |
| I've been feeling useful                           | 49, 3.7 (1.4, 0.2)             | 49, 3.9 (1.0, 0.1)              | -0.91                  | .04*       |
| I've been feeling relaxed                          | 49, 2.9 (1.3, 0.2)             | 49, 3.3 (1.1, 0.2)              | -1.83                  | .08        |
| I've been dealing with problems well               | 49, 3.3 (1.4, 0.2)             | 49, 3.4 (1.0, 0.1)              | -0.41                  | .60        |
| I've been thinking clearly                         | 49, 3.8 (1.3, 0.2)             | 49, 3.8 (1.2, 0.2)              | -0.28                  | .79        |
| I've been feeling close to other people            | 49, 3.6 (1.4, 0.2)             | 49, 3.7 (1.3, 0.2)              | -0.21                  | .84        |
| I've been able to make up my own mind about things | 49, 3.7 (1.4, 0.2)             | 49, 4.2 (1.9, 0.3)              | -2.45                  | .02*       |
| <b>Total Wellbeing Scores</b>                      | <b>49, 24.6 (7.4, 1.1)</b>     | <b>49, 25.8 (15.5, 0.8)</b>     | <b>-1.30</b>           | <b>.20</b> |

Note. Means are presented with standard deviations (SD) and standard errors (SE) in parentheses. *p* values < .05 are marked with an asterisk (\*). Higher scores indicate greater wellbeing.

Paired-sample *t*-tests showed modest but meaningful improvements in wellbeing during clients' first year of support. Statistically significant increases were found in clients' ability to make up their own minds ( $p = 0.02$ ) and feelings of usefulness ( $p = 0.04$ ). Positive but non-significant trends were observed for optimism about the future ( $p = 0.07$ ) and feeling relaxed ( $p = 0.08$ ). Other measures, including dealing with problems well, thinking clearly, and feeling close to others, showed smaller, non-significant changes ( $p > 0.6$ ). The overall increase in total wellbeing ( $p = 0.2$ ) did not reach statistical significance but reflected a consistent positive direction across most domains (Table 6, Figure 12).

### 3.3.1.1. Wellbeing Outcomes for Male Clients (3-12 months)

A sub-analysis of wellbeing data from 25 male BiC clients showed generally positive trends over the first year (Figure 13; Table 7). The largest improvements were in autonomy and emotional wellbeing, with the ability to make up their own minds increasing from 3.8 (SD = 1.3) to 4.2 (SD = 1.0) and feelings of relaxation rising from 3.2 (SD = 1.2) to 3.7 (SD = 0.9). Smaller gains were observed in optimism (3.9 to 4.0), usefulness (3.8 to 3.9), and dealing

with problems (3.5 to 3.6), while closeness to others remained stable at 3.6 and clear thinking declined from 4.2 (SD = 1.0) to 3.8 (SD = 1.3). Overall wellbeing increased from 25.9 (SD = 5.6) to 26.8 (SD = 5.9), indicating modest improvements across most wellbeing indicators.

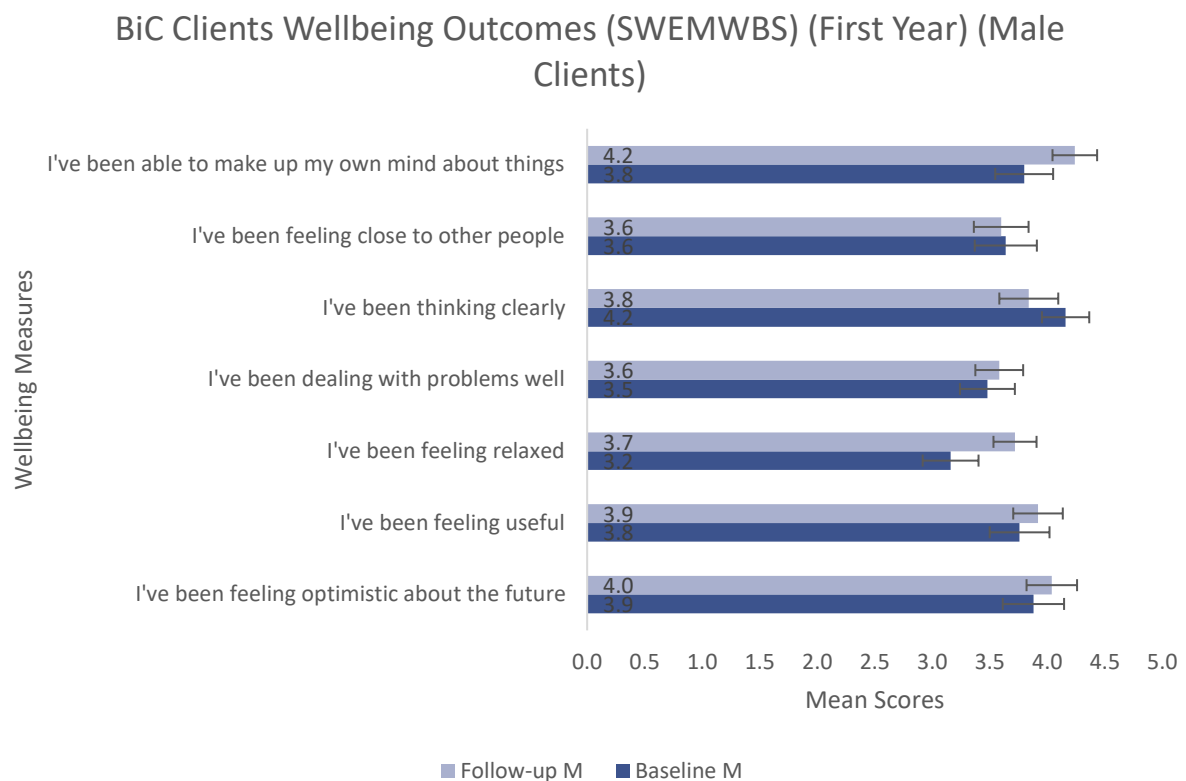


Figure 13: BiC Wellbeing Outcomes (SWEMWBS) (3-12 months) Descriptive Statistical Results for Male Clients

As shown in Table 7, standard deviations for individual wellbeing measures ranged from 0.9 to 1.4, with most decreasing from baseline to follow-up. This pattern suggests greater consistency in responses among male clients over time. The only exception was thinking clearly, which showed a small increase in variability (SD = 1.0 to 1.3). The total wellbeing score also displayed a slight rise in standard deviation (from 5.6 to 5.9), indicating modest individual differences in the extent of overall improvement. While these shifts in variability do not necessarily reflect changes in measurement reliability, they suggest more uniform perceptions of wellbeing across most items. The SE values presented in Table 7, along with the SE bars in Figure 13, are short and consistent across time points, indicating precise mean estimates and stable measurement precision.

Table 7: BiC Wellbeing Outcomes (SWEMWBS) (3-12 months) Descriptive and Inferential Statistical Results for Male Clients



| Wellbeing Measure                                  | Baseline n, M (SD, SE)     | Follow-up n, M (SD, SE)    | t(df)              | P          |
|--|----------------------------|----------------------------|--------------------|------------|
| I've been feeling optimistic about the future      | 25, 3.9 (1.3, 0.3)         | 25, 4.0 (1.1, 0.2)         | -0.848 (24)        | .41        |
| I've been feeling useful                           | 25, 3.8 (1.3, 0.3)         | 25, 3.9 (1.1, 0.2)         | -0.517 (24)        | .61        |
| I've been feeling relaxed                          | 25, 3.2 (1.2, 0.2)         | 25, 3.7 (0.9, 0.2)         | -2.221 (24)        | .04*       |
| I've been dealing with problems well               | 25, 3.5 (1.2, 0.2)         | 24, 3.6 (1.0, 0.2)         | -0.700 (24)        | .49        |
| I've been thinking clearly                         | 25, 4.2 (1.0, 0.2)         | 25, 3.8 (1.3, 0.3)         | 1.398 (24)         | .18        |
| I've been feeling close to other people            | 25, 3.6 (1.4, 0.3)         | 25, 3.6 (1.2, 0.2)         | 0.146 (24)         | .89        |
| I've been able to make up my own mind about things | 25, 3.8 (1.3, 0.3)         | 25, 4.2 (1.0, 0.2)         | -1.963 (24)        | .06        |
| <b>Total Scores</b>                                | <b>25, 25.9 (5.6, 1.1)</b> | <b>25, 26.8 (5.9, 1.2)</b> | <b>-0.961 (24)</b> | <b>.35</b> |

Note. Means are presented with standard deviations (SD) and standard errors (SE) in parentheses. p values < .05 are marked with an asterisk (\*). Higher scores indicate greater wellbeing.

Paired-samples t-tests (Table 7) showed a significant increase in relaxation,  $p = 0.04$ , and a near-significant improvement in autonomy,  $p = 0.06$ . Other measures, including optimism ( $p = 0.41$ ), usefulness ( $p = 0.61$ ), dealing with problems ( $p = 0.49$ ), closeness ( $p = 0.89$ ), and clear thinking ( $p = 0.18$ )—showed no significant change, and the total wellbeing score increase was also nonsignificant,  $p = 0.35$ . These findings indicate modest but consistent gains in emotional and cognitive wellbeing among male clients, with mean improvements typically ranging from 0.1 to 0.5 points.

When compared with the whole BiC sample (Figure 12; Table 6), similar positive trends were evident, though patterns of change varied slightly by gender. In the whole sample, autonomy increased significantly, whereas this improvement only approached significance among males ( $p = 0.06$ ). In contrast, relaxation gains were significant for males, but not for the whole sample ( $p = 0.08$ ), suggesting stronger emotional wellbeing improvements among male clients. Feelings of usefulness improved modestly across groups but reached significance only in the whole sample. Other measures remained stable, and total wellbeing rose modestly but non-significantly in both analyses. Overall, wellbeing improved across all clients, with males showing clearer gains in relaxation, and the combined sample showing stronger improvements in autonomy and usefulness.

### 3.3.1.2. Wellbeing Outcomes for Female Clients (3-12 months)

Descriptive analysis of wellbeing measures for 23 female BiC clients showed generally positive trends between baseline and follow-up within the first year (see Table 8, Figure 14).

The greatest improvement was in female clients' ability to make up their own minds, with mean scores increasing from 3.6 (SD = 1.5) at baseline to 4.1 (SD = 0.9) at follow-up. Optimism about the future also rose from 3.2 (SD = 1.4) to 3.7 (SD = 1.1). More modest gains were observed in feelings of usefulness, which increased from 3.6 (SD = 1.6) to 3.8 (SD = 0.9), clarity of thought, which rose from 3.5 (SD = 1.6) to 3.7 (SD = 1.0), closeness to others, which increased from 3.6 (SD = 1.5) to 3.7 (SD = 1.0), and relaxation, which rose from 2.6 (SD = 1.4) to 2.8 (SD = 1.1). Scores for dealing with problems decreased slightly from 3.2 (SD = 1.5) to 3.1 (SD = 0.9).

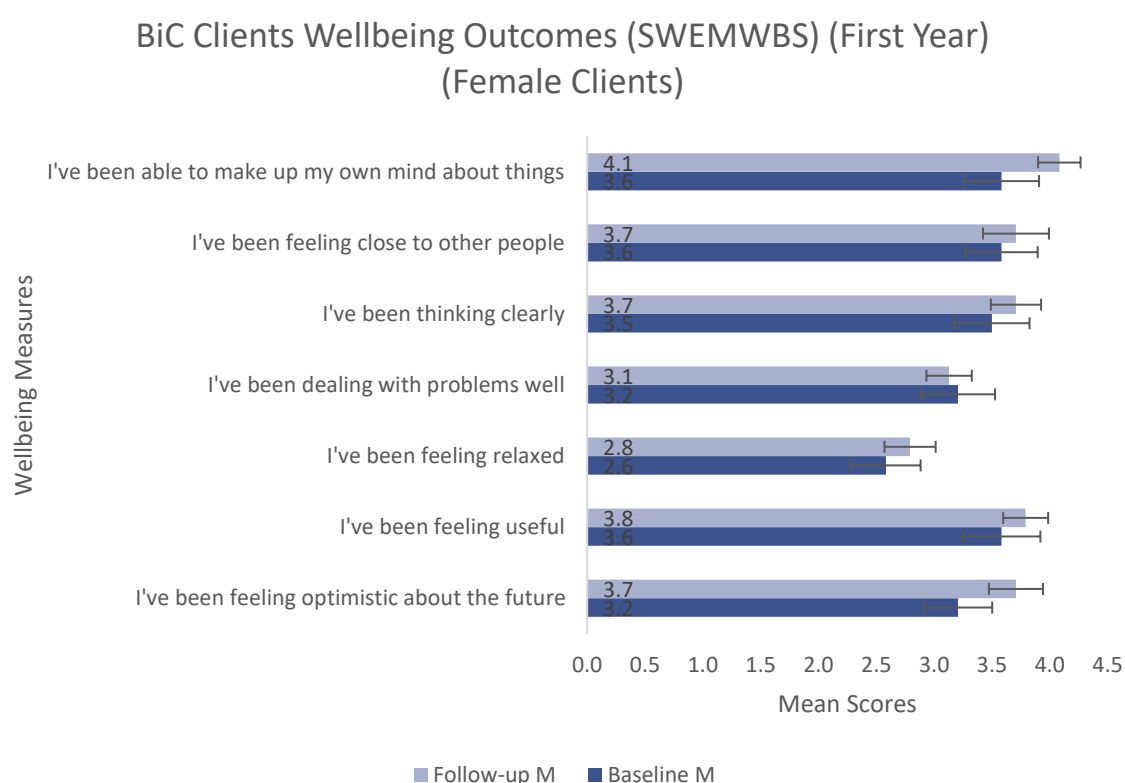


Figure 14: BiC Wellbeing Outcomes (SWEMWBS) (3-12 months) Descriptive Statistical Results for Female Clients

As shown in Table 8, SDs for individual wellbeing measures among female clients ranged from 0.9 to 1.6, with most decreasing from baseline to follow-up. This pattern indicates a reduction in variability, suggesting that female clients' responses became more consistent over time and that their reported wellbeing was more closely aligned. The total wellbeing score also showed a marked reduction in standard deviation (from 8.7 to 5.0), reflecting decreased variability and greater similarity in overall wellbeing across participants at follow-up. These reductions in variability do not necessarily indicate changes in measurement reliability but suggest more uniform perceptions of wellbeing among female clients. The SE values presented in Table 8, along with the SE bars illustrated in Figure 10, are moderate

and consistent across time points, demonstrating precise mean estimates and stable measurement precision despite the smaller subgroup size.

Table 8: BiC Wellbeing Outcomes (SWEMWBS) (3-12 months) Descriptive and Inferential Statistical Results for Female Clients

| Wellbeing Measure                                  | Baseline n, M (SD, SE) | Follow-up n, M (SD, SE) | t(df)       | P    |
|--|------------------------|-------------------------|-------------|------|
| I've been feeling optimistic about the future      | 23, 3.2 (1.4, 0.3)     | 23, 3.7 (1.1, 0.2)      | -1.696 (22) | 0.10 |
| I've been feeling useful                           | 23, 3.6 (1.6, 0.3)     | 23, 3.8 (0.9, 0.2)      | -0.794 (22) | 0.44 |
| I've been feeling relaxed                          | 23, 2.6 (1.4, 0.3)     | 23, 2.8 (1.1, 0.2)      | -0.603 (22) | 0.55 |
| I've been dealing with problems well               | 23, 3.2 (1.5, 0.3)     | 22, 3.1 (0.9, 0.2)      | 0.000 (21)  | 1.00 |
| I've been thinking clearly                         | 23, 3.5 (1.6, 0.3)     | 23, 3.7 (1.0, 0.2)      | -0.541 (22) | 0.59 |
| I've been feeling close to other people            | 23, 3.6 (1.5, 0.3)     | 23, 3.7 (1.4, 0.3)      | -0.430 (22) | 0.67 |
| I've been able to make up my own mind about things | 23, 3.6 (1.6, 0.3)     | 23, 4.1 (0.9, 0.2)      | -1.570 (22) | 0.13 |
| Total Scores                                       | 23, 23.3 (8.7, 1.8)    | 23, 24.8 (5.0, 1.0)     | -0.925 (22) | 0.36 |

Note. Values are presented as n, M (SD, SE). No comparisons reached statistical significance ( $p \geq .05$ ). Higher scores indicate greater wellbeing.

Inferential analysis using paired-sample t-tests indicated that none of the observed changes reached conventional levels of statistical significance (see Table 8). The largest effects were for increased optimism about the future ( $p = 0.10$ ) and improved ability to make up one's own mind ( $p = 0.13$ ), with all other domains showing smaller, non-significant changes (all  $p > 0.40$ ). The total wellbeing score also showed a non-significant increase ( $p = 0.36$ ). The absence of significant findings likely reflects the small sample size and higher baseline variability, which limited statistical power despite the observed positive trends.

Female clients showed larger mean improvements across most wellbeing domains than males (Table 8, Figure 14) but greater baseline variability, which likely limited statistical power. Males recorded a significant increase in relaxation and a near-significant gain in autonomy, while females' total wellbeing variability decreased over time, indicating more consistent outcomes. Compared with the overall client sample (Table 8, Figure 14), female patterns mirrored programme trends, with largest gains in autonomy and optimism. Significance was reached only at the combined sample level, reflecting the smaller female subgroup and higher initial variability rather than differences in the direction or magnitude of change.

### 3.3.2. Wellbeing Outcomes (13-24 Months)

Descriptive analyses indicated continued positive trends in clients' wellbeing outcomes between baseline and the 13–24-month follow-up (see Figure 11 and Table 4). Data were available for between 28 and 30 participants, representing clients who had engaged in the BiC programme for longer periods rather than straightforward attrition from the earlier 3–12-month sample (Figure 8, Table 1). As shown in Table 4, mean scores increased across most wellbeing measures. The largest improvements were observed for being able to make up my own mind about things ( $M = 3.7$  to  $4.5$ ) and dealing with problems well ( $M = 2.8$  to  $3.5$ ). Smaller increases were recorded for thinking clearly ( $M = 3.4$  to  $3.8$ ), feeling relaxed ( $M = 2.8$  to  $3.2$ ), feeling close to other people ( $M = 3.5$  to  $3.7$ ), and feeling optimistic about the future ( $M = 3.2$  to  $3.4$ ), while feelings of usefulness remained stable ( $M = 3.5$  at both time points). The total wellbeing score increased from  $M = 22.9$  at baseline to  $M = 25.3$  at follow-up.

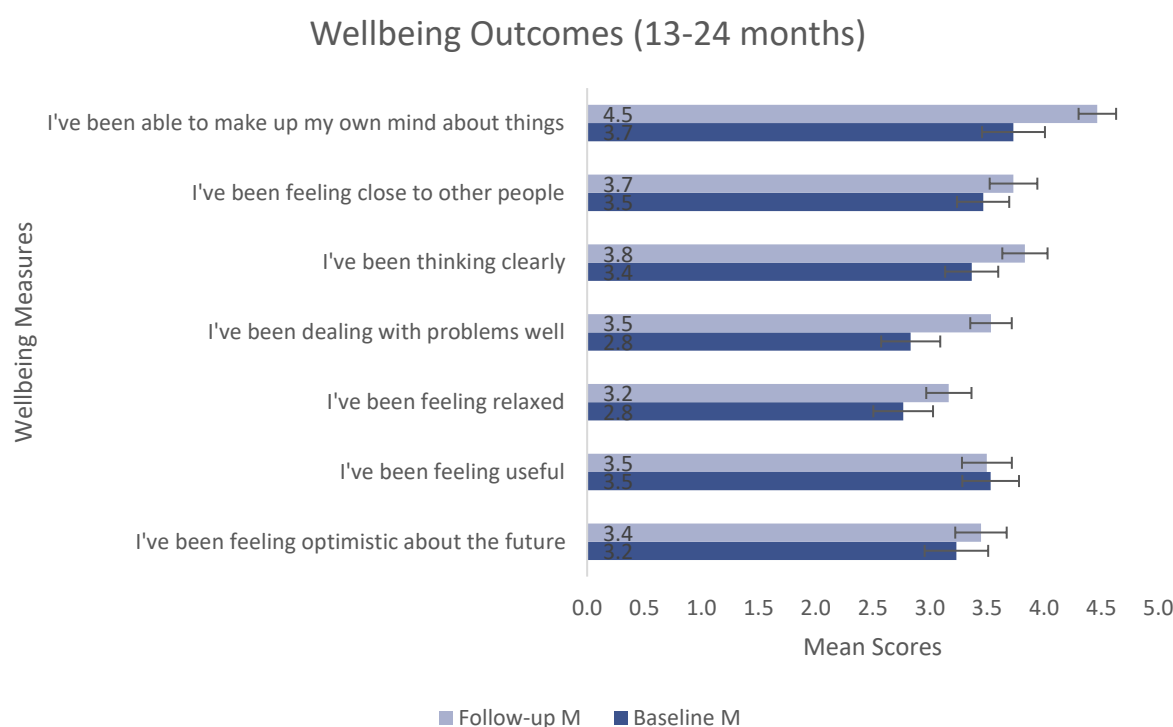


Figure 15: BiC Clients Wellbeing Outcomes (SWEMWBS) (13-24 months) Descriptive Statistical Results

As shown in Table 9 and illustrated in Figure 15, SDs for individual wellbeing measures ranged from 0.9 to 1.5, with slightly lower variability at follow-up than at baseline. This reduction in variability indicates a narrower spread of scores and greater convergence in participants' self-reported wellbeing among those who remained in the programme for longer durations. The standard errors (SE) presented in Table 9, together with the SE bars in Figure 15, were relatively small, reflecting stable mean estimates and consistent response patterns across participants rather than results driven by a few individuals. However, as

shown in Table 9, fewer participants completed the follow-up assessment, meaning that SEs are based on a smaller group. This can make variability appear reduced and the estimates seem stable, even though their precision is lower, so the findings should be interpreted with caution.

Table 9: BiC Clients Wellbeing Outcomes (SWEMWBS) (13-24 months) Descriptive and Inferential Statistical Results

| Wellbeing Measure   | Baseline n, M (SD, SE) | Follow-up n, M (SD, SE) | t(df)       | P    |
|---|------------------------|-------------------------|-------------|------|
| <b>I've been feeling optimistic about the future</b>      | 30, 3.2 (1.5, 0.3)     | 29, 3.4 (1.2, 0.2)      | -0.648 (28) | .52  |
| <b>I've been feeling useful</b>                           | 30, 3.5 (1.4, 0.2)     | 30, 3.5 (1.2, 0.2)      | 0.126 (29)  | .90  |
| <b>I've been feeling relaxed</b>                          | 30, 2.8 (1.4, 0.3)     | 30, 3.2 (1.1, 0.2)      | -1.439 (29) | .16  |
| <b>I've been dealing with problems well</b>               | 30, 2.8 (1.4, 0.3)     | 28, 3.5 (1.0, 0.2)      | -2.33 (27)  | .03* |
| <b>I've been thinking clearly</b>                         | 30, 3.4 (1.3, 0.2)     | 30, 3.8 (1.1, 0.2)      | -1.816 (29) | .08  |
| <b>I've been feeling close to other people</b>            | 30, 3.5 (1.3, 0.2)     | 30, 3.7 (1.1, 0.2)      | -1.052 (29) | .30  |
| <b>I've been able to make up my own mind about things</b> | 30, 3.7 (1.5, 0.3)     | 30, 4.5 (0.9, 0.2)      | -2.552 (29) | .02* |
| <b>Total Scores</b>                                       | 30, 22.9 (7.8, 1.4)    | 30, 25.3 (5.3, 1.0)     | -1.766 (29) | .09  |

Note. Means are presented with standard deviations (SD) and standard errors (SE) in parentheses. p values < .05 are marked with an asterisk (\*). Higher scores indicate greater wellbeing.

Inferential analyses presented in Table 9 showed statistically significant improvements in being able to make up own mind about things ( $p = .02$ ) and in dealing with problems well ( $t$  ( $p = .03$ ). Increases in thinking clearly ( $p = .08$ ) and in total wellbeing ( $p = .09$ ) approached statistical significance, while changes in optimism, relaxation, closeness to others, and feelings of usefulness were not statistically significant ( $p > .10$ ). These results indicate that, within the available sample, the most consistent long-term gains were in decision-making and problem-solving abilities.

### 3.3.3. Comparison of Wellbeing Outcomes (3-12 and 13-24 months)

Descriptive data across follow-up periods (see Figures 12 and 15; Tables 6, 9, and 10) indicate that overall wellbeing levels were largely maintained after the first year rather than showing further overall increases. Early gains were most notable in feeling useful and relaxed, while later follow-up showed improvements in coping with problems and making one's own decisions. Optimism and feeling close to others demonstrated small but consistent positive changes across both periods, and total wellbeing showed a slight upward trend, reflecting the maintenance of earlier improvements. Variability was lower at 13 to 24

months than at 3 to 12 months, suggesting greater consistency among participants who remained in the programme, although the smaller sample at later follow-up may partly account for this. Overall, these patterns indicate that early functional gains were achieved within the first year, while longer-term cognitive and coping skills were consolidated over the second year, with the smaller later sample meaning some non-significant changes should be interpreted cautiously.

Table 10: Comparison of Wellbeing Outcomes Between 3–12 Month and 13–24 Month Follow-Ups (See also Figures 8 and 11; Tables 1 and 4)

| Wellbeing Measure                   | 3-12 Months (Baseline to Follow-up M) | 13-24 Months (Baseline to Follow-up M) | p (3-12 months) | p (13-24 months) | Summary                                     |
|-------------------------------------|---------------------------------------|--|-----------------|------------------|---|
| Feeling optimistic about the future | 3.6 to 3.9                            | 3.2 to 3.4                             | .07             | .52              | Small, non-significant increases maintained |
| Feeling useful                      | 3.7 to 3.9                            | 3.5 to 3.5                             | .04             | .90              | Early improvement not maintained            |
| Feeling relaxed                     | 2.9 to 3.3                            | 2.8 to 3.2                             | .08             | .16              | Modest, non-significant increases sustained |
| Dealing with problems well          | 3.3 to 3.4                            | 2.8 to 3.5                             | .60             | .03              | Later significant improvement               |
| Thinking clearly                    | 3.8 to 3.8                            | 3.4 to 3.8                             | .79             | .08              | Stable early; slight later increase         |
| Feeling close to others             | 3.6 to 3.7                            | 3.5 to 3.7                             | .84             | .30              | Stable across both periods                  |
| Able to make up my own mind         | 3.7 to 4.2                            | 3.7 to 4.5                             | .02             | .02              | Consistent significant improvement          |
| Total wellbeing                     | 24.6 to 25.8                          | 22.9 to 25.3                           | .20             | .09              | Overall increase approaching significance   |

Note: p-values indicate statistical significance at  $p < .05$

## 4. Discussion

The Back in Control (BiC) project demonstrates measurable improvements across key domains for BiC clients affected by modern slavery and labour exploitation, including wellbeing, stability, knowledge, and empowerment. Taken together, these outcomes indicate that BiC's person-centred, holistic approach effectively supports survivors in regaining control and confidence. Moreover, evidence from wider research underscores that multi-sectoral, survivor-centred interventions are critical to addressing the structural vulnerabilities that perpetuate exploitation (Lewis et al., 2015b; Centre for Social Justice, 2020).

During interviews BiC clients reflected on the enduring impact of prior abuse, including physical, emotional, and psychological, which often leaves survivors isolated, anxious, and lacking confidence (report 2; Harvey-Golding & Payne, 2025a). They highlighted that BiC interventions, including guidance on legal systems, access to healthcare, and support for essential services, are central to rebuilding a sense of stability. This aligns with existing literature indicating that survivors require sustained, holistic support to regain agency and navigate complex legal and social systems safely (Independent Anti-Slavery Commissioner, 2025; Kalayaan, 2024).

Furthermore, interviews with BiC stakeholders similarly observed that clients' challenges extend beyond immediate abuse into housing, employment, legal status, and daily functioning (report 3; Harvey-Golding & Payne, 2025b). They underlined the importance of multi-agency, coordinated support to address both immediate and structural vulnerabilities. These observations are consistent with wider evidence showing that coordinated interventions and cross-sector partnerships are essential to reduce long-term vulnerability and promote sustainable outcomes (Independent Anti-Slavery Commissioner, 2025; Kalayaan, 2024).

### 4.1. Wellbeing and Stability

BiC clients reported significant increases in feeling safe in their current situation at both follow-ups (report 4; Tables 1, 4, 5). In contrast, financial and housing outcomes were initially modest or non-significant at 3 to 12 months but showed significant increases at 13 to 24 months, demonstrating that structural determinants of wellbeing may require sustained engagement to manifest change. Meanwhile, basic daily tasks and readiness for work remained relatively stable, suggesting either that foundational skills were already well-developed or that further targeted interventions may be needed. This is consistent with broader evidence highlighting that improvements in structural stability, such as housing and income security, often require long-term, coordinated support to consolidate gains

(Independent Anti-Slavery Commissioner, 2025; LeBaron, Howard, Thibos, & Kyritsis, 2018; Lewis, Dwyer, Hodkinson, & Waite, 2015a, 2015b).

During interviews, BiC clients described how deceptive recruitment practices, financial dependency, and legal precarity affected their stability (report 2; Harvey-Golding & Payne, 2025a). They emphasised that BiC support in accessing housing, employment advice, immigration guidance, and benefits or entitlements was pivotal in establishing a sense of security. These experiences align with literature emphasising that addressing financial and legal precarity is fundamental to reducing vulnerability to re-exploitation (Dwyer et al., 2011; Kalayaan, 2024; Lewis et al., 2015ab).

Moreover, BiC stakeholders noted that systemic barriers, such as insecure immigration status, fragmented services, and limited access to financial or housing support, continued to pose risks of re-exploitation (report 3; Harvey-Golding & Payne, 2025b). This is corroborated by broader literature highlighting welfare exclusions, restrictive migration policies, and structural vulnerabilities that survivors face (Dwyer et al., 2011; Lewis et al., 2015a, 2015b; IOM, 2019; Independent Anti-Slavery Commissioner, 2025; Kalayaan, 2024; Cockbain, Sidebottom & Bowers, 2022; LeBaron, 2021; LeBaron et al., 2018; Crane et al., 2017).

#### **4.2. Empowerment and Knowledge**

BiC clients (report 4; Tables 1, 4, 5) demonstrated consistent improvement in knowledge of legal employment pathways and the ability to make independent decisions across both follow-up periods. Although English language skills showed a slight decline at 3 to 12 months, they improved significantly at 13 to 24 months, illustrating the benefits of sustained engagement and the time required for language acquisition to support autonomy and employability. Existing literature indicates that interventions combining legal guidance, vocational support, and education (including ESOL) are critical in enabling survivors to navigate complex employment systems safely (Independent Anti-Slavery Commissioner, 2025; Kalayaan, 2024; Dwyer, Lewis, Scullion, & Waite, 2011; Lewis, Dwyer, Hodkinson, & Waite, 2015a, 2015b; UK Home Office, 2025).

During interviews BiC clients reported that educational and vocational support, language classes, and practical skills development enhanced confidence, facilitated social integration, and promoted economic independence (report 2; Harvey-Golding & Payne, 2025a). In a similar vein, BiC stakeholders highlighted that multi-agency, survivor-centred support, including legal guidance, vocational training, and social integration, was crucial in promoting empowerment (report 3; Harvey-Golding & Payne, 2025b). These observations are consistent with wider evidence showing that coordinated interventions improve survivors'



autonomy and reduce long-term vulnerability (Independent Anti-Slavery Commissioner, 2025; Kalayaan, 2024; Lewis, Dwyer, Hodkinson, & Waite, 2015a, 2015b).

### 4.3. Social and Emotional Wellbeing

SWEMWBS results (report 4; Tables 6, 9, 10) revealed modest increases in optimism, relaxation, and social connectedness among BiC clients. Although some early improvements at 3 to 12 months were not maintained at longer-term follow-up, other domains, such as problem-solving and decision-making, showed delayed but significant gains at 13 to 24 months. Notably, the ability to make up one's own mind improved consistently across both periods, reinforcing the theme of empowerment.

Interviews with BiC clients highlighted ongoing trauma, including anxiety, trust issues, and difficulty engaging with others, emphasising that interventions addressing emotional and psychological needs were crucial to regaining a sense of control and self-worth (report 2; Harvey-Golding & Payne, 2025a). Additionally, stakeholders further observed that BiC clients often present with cumulative trauma and face multiple legal, social, and psychological barriers that affect mental health and social participation (report 3; Harvey-Golding & Payne, 2025b). These findings reflect wider literature on the importance of trauma-informed, person-centred approaches to foster empowerment and social integration (Independent Anti-Slavery Commissioner 2025; Kalayaan 2024; UK Home Office 2025; Centre for Social Justice 2020).

### 4.4. Gender Differences

Female BiC clients (report 4; Tables 3, 8) reported larger improvements in perceived safety and empowerment outcomes at 3 to 12 months, whereas male clients (Tables 2, 7) exhibited smaller or non-significant changes. Research indicates that gendered patterns of exploitation intersect with economic, social, and migration-related vulnerabilities, resulting in differentiated risks and recovery needs (Cockbain & Bowers, 2019; Cockbain, Sidebottom, & Bowers, 2022; IOM, 2019; Lewis, Dwyer, Hodkinson, & Waite, 2015a, 2015b; UNODC, 2020).

During interviews BiC Stakeholders described gendered patterns of exploitation, whereby men were more frequently subjected to labour exploitation, while women disproportionately experienced sexual exploitation, coercion, and multiple forms of abuse (report 3; Harvey-Golding & Payne, 2025b). Meanwhile, BiC clients emphasised that women's experiences were often compounded by prior domestic abuse, systemic barriers, and cultural expectations, contributing to cumulative trauma (report 2; Harvey-Golding & Payne, 2024a).

These findings align with literature emphasising the need for gender-sensitive, tailored interventions to address differentiated risks and needs (Cockbain & Bowers, 2019; Cockbain, Sidebottom, & Bowers, 2022; IOM, 2019; Lewis, Dwyer, Hodkinson, & Waite, 2015a, 2015b; UNODC, 2020; Centre for Social Justice, 2020).

#### **4.5. Prevention, Discovery, and Rescue**

BiC clients reported improvements in perceived safety and knowledge of how to access support services at both follow-ups (report 4; Tables 5, 10), indicating that they have an enhanced capacity to recognise risks and take protective action. Increases in autonomy and decision-making also suggest greater confidence in preventing re-exploitation. Whilst quantitative outcomes on direct rescue were limited, survey trends provide indirect evidence of preventative impact.

During interviews BiC stakeholders outlined ICOS's role in identifying at-risk individuals, providing rapid support, and preventing further harm (report 3; Harvey-Golding & Payne, 2025b). Similarly, BiC clients reflected that knowing how and when to seek help, alongside access to legal guidance and timely referrals, reduced vulnerability and enhanced confidence (report 2; Harvey-Golding & Payne, 2024a). These findings are consistent with wider literature highlighting the importance of early identification, multi-agency collaboration, and community intelligence in mitigating exploitation risk (Cockbain & Bowers, 2019; Cockbain, Sidebottom, & Bowers, 2022; Centre for Social Justice, 2020; Independent Anti-Slavery Commissioner, 2025; Kalayaan, 2024; LeBaron, 2021; UK Home Office, 2025).

#### **4.6. Volunteering and Engagement**

Quantitative results indicate that BiC clients' sense of autonomy, as measured by the SWEMWBS item "I've been able to make up my own mind about things," improved significantly at both 3 to 12 and 13 to 24 months (Report 4; Tables 6, 9, 10). Measures related to social connectedness, captured by "I've been feeling close to other people," remained largely stable over time, with no significant change (Report 4; Tables 6, 9, 10). These trends suggest that BiC support strengthens personal decision-making and autonomy, providing a foundation for clients' potential engagement in peer or community roles, although the surveys do not directly measure volunteering or social participation.

During interviews BiC stakeholders reported that volunteering and peer roles contributed to awareness-raising, supported newly engaged clients, and modelled positive behaviours (Report 3; Harvey-Golding & Payne, 2025b). BiC clients also described qualitative benefits of volunteering and peer engagement, including enhanced social connectedness,

empowerment, and a sense of contribution (Report 2; Harvey-Golding & Payne, 2024a). Findings are consistent with wider evidence emphasising the value of peer-led participation in promoting social capital, empowerment, and reintegration outcomes for survivors of modern slavery and labour exploitation (Kalayaan, 2024; Independent Anti-Slavery Commissioner, 2025)

#### **4.7. Limitations and Implications for Future Measurement**

Attrition and small sub-sample sizes, particularly at 13 to 24 months, limit generalisability. Irregular follow-up intervals and missing data reflect the realities of working with highly vulnerable and mobile populations. Surveys were adapted to prioritise client safety and wellbeing, producing uneven assessment intervals. Missing or incomplete responses led to necessary exclusions, which may have introduced bias if excluded clients differed from those retained.

Self-report measures may have been influenced by social desirability, trauma, language barriers, or recall issues, despite sensitive support from ICOS staff. Sub-group analyses were limited by sample size, restricting exploration of gender and other demographic differences such as immigration status or type of exploitation.

Practical and ethical constraints required flexibility and some methodological compromises. These limitations, consistent with research on hidden and mobile populations, affect precision but ensure the evaluation reflects survivors lived experiences. Despite these challenges, the findings provide a robust and credible evidence base for service learning and policy development.

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##### **4.7.1. Implications on Measurement and Evaluation**

BiC outcomes were achievable but required varying timeframes and intensity of support. Wellbeing improvements, especially safety and autonomy, appeared early and were sustained. Clients reported feeling safer and demonstrated improved decision-making at both 3 to 12 and 13 to 24 months, suggesting early safety and empowerment targets are realistic within the first year.

Structural outcomes such as financial stability, housing, and English language skills improved more slowly, showing limited early change but substantial gains with longer engagement. Employment outcomes were the most complex. Knowledge of legal employment improved, but readiness for work and satisfaction with current jobs remained stable or declined, reflecting barriers including health, immigration, trauma, and language

skills. Employment-related targets thus require the longest timeframe and multi-domain support.

Outcome targets should align with realistic timeframes. Current single-percentage targets overlook how change unfolds. Evidence suggests differentiating between:

- i. Early outcomes: safety, knowledge, autonomy
- ii. Medium-term outcomes: housing, finances, language skills
- iii. Long-term outcomes: employment, sustained independence

Early outcomes can have higher targets, while medium and long-term goals should reflect slower structural change as evidenced in this report.

Efforts to measure prevention, discovery, and rescue outcomes were the most challenging. Improvements in safety and knowledge suggest reduced re-exploitation risk, but survey data could not directly confirm prevention or rescue. Similarly, the 20% volunteering target was difficult to assess quantitatively, though gains in autonomy indicate readiness for participation. Qualitative evidence from Reports 2 and 3 demonstrates BiC's preventative impact and the value of peer support, even if not precisely captured by quantitative measures.

## 5. Recommendations

Back in Control (BiC) continues to demonstrate significant progress in supporting victims and survivors of exploitation. The quantitative evaluation confirms that its holistic, trauma-informed model produces measurable improvements in safety, stability, wellbeing, and empowerment, particularly among clients supported for 13 to 24 months. The following recommendations build directly on those in Report 3, using new quantitative evidence to strengthen and expand BiC's approach for greater impact and sustainability.

### **I. Facilitate Access to Specialist ESOL Provision**

Building on Report 3's call for stronger collaboration with ESOL providers, quantitative data show that English proficiency improves significantly only after 13 to 24 months of engagement, confirming that language development requires sustained support. BiC and ICOS should continue to integrate ESOL with wellbeing provision, ensuring flexible, trauma-informed delivery and extended timeframes.

### **II. Secure Sustainable Multi-Year Funding**

Report 3 identified the need for successor funding beyond the current five-year horizon. The quantitative data now provide clear evidence that sustained engagement yields greater gains in financial and housing stability, crisis knowledge, and English skills. BiC and ICOS can build on their delivery record by presenting this evidence to funders, demonstrating that outcomes improve markedly after one year and that multi-year investment offers the greatest return. Securing flexible successor funding beyond three to five years will ensure continuity, scalability, and long-term impact.

### **III. Continue Strengthening Multi-Agency Partnership Structures**

Building on Report 3's emphasis on the Safer Sunderland Partnership, the quantitative findings confirm that early improvements in safety and crisis knowledge underpin later stability, validating coordinated multi-agency responses. BiC and ICOS should further enhance collaboration through the SSP by strengthening systems for longitudinal tracking across agencies, ensuring timely referrals and consistent care. Early interventions should continue to prioritise safety, housing, and crisis support to create the foundations for later wellbeing and independence.

### **IV. Address the Gap in Trauma-Informed Mental Health Support**

Report 3 identified limited access to psychological care. The quantitative evidence now shows modest wellbeing gains but persistent distress in areas such as relaxation and optimism. BiC and ICOS can build on existing partnerships with NHS trusts and third-sector organisations by initiating early referrals, developing clear trauma-informed pathways, and providing advocacy and appointment support.

### **V. Strengthen Access to Immigration and Legal Support**

Building on Report 3's recognition of immigration insecurity as a core vulnerability, the quantitative evaluation shows minimal improvement in employment readiness and declining job satisfaction, indicating that unresolved legal status may hinder recovery. BiC and ICOS should deepen collaboration with legal and welfare rights providers to prioritise immigration advice early in support, as secure legal status underpins access to safe employment, housing, and entitlements, and is essential to achieving lasting stability.

### **VI. Embed Gender-Responsive and Culturally Informed Practice**

Expanding on Report 3's recommendation to strengthen culturally informed support, the quantitative data reveal gendered recovery patterns, with women achieving faster safety gains and men progressing more gradually in wellbeing. BiC and ICOS can build on this by

embedding gender-responsive and culturally competent practice through staff training, flexible delivery models, and tailored interventions such as gender-specific peer support, trauma-informed counselling, and culturally appropriate services that reflect diverse recovery needs.

## **VII. Develop Tailored Employability Pathways with Extended Support**

Building on Report 3's emphasis on employment readiness, the quantitative evidence shows that while knowledge of legal work increased, readiness and satisfaction remained static, highlighting persistent structural barriers. BiC and ICOS should strengthen and extend employability pathways integrating ESOL, vocational skills, and rights-based employment guidance alongside mental health and legal support. Long-term, phased pathways over 13 to 24 months, with volunteering or peer roles as interim steps, may support the translation of awareness into sustainable employment outcomes.

## **VIII. Strengthen Monitoring and Outcome Measurement Systems**

Report 3 called for improved data consistency. The quantitative evaluation confirmed attrition and uneven follow-up intervals that limited precision. BiC and ICOS can build on current systems by introducing standard review points at 6, 12, 18, and 24 months, improving staff training, simplifying tools, and embedding follow-up protocols in routine casework. Capturing richer contextual information will support more accurate longitudinal analysis and guide targeted, evidence-based interventions.

## **IX. Advocate for Policy and Systems Change**

Building on Report 3's focus on systemic reform, the quantitative data strengthen the case for advocacy on persistent barriers, including immigration insecurity, welfare restrictions, limited mental health provision, and precarious employment. BiC and ICOS can expand their leadership role by combining these data with survivor testimony to influence policy through the Independent Anti-Slavery Commissioner, All-Party Parliamentary Groups, and Modern Slavery Partnerships.

## 6. References

Cockbain, E., & Bowers, K. (2019) 'Human trafficking for sex, labour and domestic servitude: how do key trafficking types compare and what are their predictors?', *Crime, Law and Social Change*, 72(1), pp. 9–34. DOI: 10.1007/s10611-019-09836-7

Cockbain, E., Sidebottom, A., & Bowers, K. (2022) 'War, Displacement, and Human Trafficking and Exploitation: Findings from an Evidence-Gathering Roundtable', *Journal of Human Trafficking*, 8(4), pp. 1–24. DOI: 10.1080/23322705.2022.2128242

Centre for Social Justice (2020) *It Still Happens Here: Fighting UK Slavery in the 2020s*. London: Centre for Social Justice.

Crane, A., LeBaron, G., Allain, J., & Behbahani, L. (2017) 'Governance gaps in eradicating forced labor: From global to domestic supply chains', *Regulation & Governance*, 13(1), pp. 86–106. DOI: 10.1111/rego.12162

Dwyer, P., Lewis, H., Scullion, L., & Waite, L. (2011) *Forced Labour and UK Immigration Policy: Status Matters*. York: Joseph Rowntree Foundation.

Harvey-Golding, L., & Payne, A. (2024) *Back in Control 2 Interim Evaluation Report. Project Report 1*. University of Sunderland, SURE.

Harvey-Golding, L., & Payne, A. (2025) 'Without Them, I Don't Know What I Would Have Done' – Examining ICOS's Role in Tackling Modern-Day Slavery and Labour Exploitation. *Project Report 2*. University of Sunderland, SURE.

Independent Anti-Slavery Commissioner (2025) *Refusal to Consent: Factors Influencing the Uptake of Modern Slavery Support under the National Referral Mechanism*. London: Independent Anti-Slavery Commissioner.

International Labour Organization (ILO) (2019) *Global Estimates of Modern Slavery: Forced Labour and Forced Marriage*. Geneva: ILO.

International Organization for Migration (IOM) (2019) *Migrants and their Vulnerability to Human Trafficking, Modern Slavery and Forced Labour*. Geneva: IOM.

Kalayaan (2024) *The National Referral Mechanism: Near Breaking Point – Progress Report 2024 (One Year On)*. London: Kalayaan.

LeBaron, G. (2021) *Combating Modern Slavery: Why Labour Governance is Failing and What We Can Do About It*. Cambridge: Polity Press.

LeBaron, G., Howard, N., Thibos, C. & Kyritsis, P. (2018) *Confronting Root Causes: Forced Labour in Global Supply Chains*. New York: Open Society Foundations.

Lewis, H., Dwyer, P., Hodgkinson, S., & Waite, L. (2015a) 'Hyper-precarious lives: Migrants, work and forced labour in the Global North', *Progress in Human Geography*, 39(5), pp. 580–600. DOI: 10.1177/0309132514548303

Lewis, H., Dwyer, P., Hodgkinson, S., & Waite, L. (2015b) *Precarious Lives: Forced Labour, Exploitation and Asylum*. Bristol: Policy Press.

UK Home Office (2021) *2021 UK Annual Report on Modern Slavery*. London.

UK Home Office (2025) *Modern slavery: statutory guidance for England and Wales under s49 of the Modern Slavery Act 2015 and non-statutory guidance for Scotland and Northern Ireland*. London.

United Nations Office on Drugs and Crime (UNODC) (2020) *Global Report on Trafficking in Persons 2020*. Vienna: UNODC.

United Nations Office on Drugs and Crime (UNODC) (2024) *Global Report on Trafficking in Persons 2024*. Vienna: UNODC.