



Personal Outcomes Stories during COVID: Phase 2 understanding from experience

Your name, role and organisation:

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What has continued to help keep a focus on what matters for people during the pandemic?

Wellbeing

We still do some face to face work with families. I feel like I spend more time with individual families than previously. Most of the team (20 of us) have continued garden/walking visits as well as telephone/teams support

People who have poor mental health often blame themselves or their domestic situation for that. In this instance, the pandemic is totally out of their control and people need to be reminded they are reacting to this in a very human way. It is completely understandable if mental health takes a dip or a different turn in recovery. It is important to support people to focus on what they can control. Two key things that we are paying closer attention to are access to tech and poverty.

1. Technology.

- a) Providing connection through offering devices to parents and children has helped. Parents are then able to access social media, news, education and learning, advice, health support, and attend social teams video meetings.
- b) Many peer support and recovery groups are now online, which in the initial phase excluded many parents/carers.

2. Action on poverty –

- Accessing money and rights advice has been central to my recent work – the harsh impact of being isolated at home, made redundant and/or struggling to pay utility bills, replace broken furniture and appliances has greatly increased. Bringing essential food supplies weekly or twice weekly has connected me to families in new ways.
- Many families are deep in arrears for electricity and gas. They haven't understood DWP rules and are facing compliance interviews and adjudication
- I find myself playing advocate, writing funding applications for emergency essentials, 'encouraging and utilising excellent neighbourly support networks to ensure something happens'
- Our service mainly focuses on emotional wellbeing for 8 to 18 year olds. However the pandemic has revealed a need at grassroots level for wider family support and community development.

Are there changes that seem to be lasting longer term and are there things that have slid back to old ways of doing things?

After a break in referrals as soon as the first national lockdown was lifted, we saw a massive increase in referrals from GP's. There is pressure to develop new ways of working to respond to demand

Demand for food bank delivery grows. I see people needing this support weekly and not just an occasional delivery in a crisis. I would like to see more shopping vouchers to give people fresh ingredients to cook with or a small local shop for cheap fresh items as the food bank items are all non-perishables. Originally we also had a Humanitarian Food Hub to pick up from. This distributed fresh fruit, veg and eggs. This was disbanded at the end of July. People loved it.

We continue to create resilience packs, activity gift boxes for children and parents every few months, which are delivered regularly. We send out regular postcards which are always well received.

We are beginning to offer a regular Thursday evening interactive webinar for families to explore wellbeing, anxiety and brain development in adolescence amongst other issues. Numbers for this have increased from a small group during lockdown of between 4 and 6 to sometimes over 25 parents wishing to take part.

What difference has this made to people?

I think people have a little more confidence in asking about different types of help. Many ask can they learn some of the coping strategies I teach their children. I usually ask the children to teach their parents but still offer a listening ear at a local café or park.

As an organisation, I feel the Chief Executive and management have been really helpful in telling people *"to do what you can when you can."* We openly share a collective exhaustion and groundhog day feeling at times but people are very keen to support you to self-care and take time out. I feel wholly supported and 'held' by most of my team and the executive.

I think as an organisation, we are constantly evolving to support people's outcomes and by doing so demonstrating that it is ok to show vulnerability and essential as humans to share our need for basic human needs and rights but also need for connection and kindness. For the first time in over 30 years practice I think I have actually cried "with" family members on a number of occasions, previously I might have thought this was unprofessional now I think its human, it's sad and cruel what you are having to cope with . Why wouldn't I cry with you.

Phone support - text and phone calls/video calls are great for keeping in touch but the most powerful support and most difficult conversations I have had, have been face to face in people's closes, gardens, swing park, car park

How did this make you feel?

It confirms my belief that relationships are the key to unlocking people's needs, strengths and vulnerabilities.

No matter how excellent and complex an online app is, I am not sure it will replace human to human story telling

Reflecting on your experiences what have you learned?

Good relationships and trust are everything.

I've learned that just as we make assumptions about families at times, families also need to see that you can also make mistakes, laugh, cry, clean a loo, peel a tattie, grow a sunflower, bleach a bin or move a wardrobe.

I need to plan in more regular short breaks using my annual leave

What difference has it made to you to tell your story as part of this project?

It has given me some time and space and parameters in which to reflect on my changing practice. Within our team we have reflective practice sessions in small groups, fortnightly team meetings and supervision. Whilst this is far more than say teachers have in school = to tell my current story without interruption has been useful in helping me process some of the trauma I have witnessed through offering a higher level of contact than previously