

North Kensington Self-Care:

Community Conversation Major Themes

Digital Divide:

Digital service uptake was often lower than it could be because of an inability of service users to access services digitally. This was perceived to be occurring either as a result of service users not having access to computers or other appropriate technology, or not possessing a necessary level of knowledge and ability to use it, with some services not possible digitally anyway. Access to enough data or any data was also highlighted as an issue.

Some providers felt pushed into phone groups so that service users without tech could participate, which was felt to be expensive and inefficient, as well as dividing the service user base further.

Mental Health

Most attendees described their services users as experiencing considerably increased stress and anxiety as a result of the pace of changes, a lack of clear or consistent information and financial hardship, fear of lockdown ending and going outside, as well as a fear of a 2nd wave of Covid-19.

Social isolation is impacting low mood and depression in many service users, particularly those who were attending in person services previously and among young people kept inside by parents.

VCS Staff Wellbeing

The mental health of staff working in local VCS organisations, particularly small ones was also of concern. Staff are under increasing pressure to support all their clients through hardships (& during C19 interpret government guidelines) and struggling to cope, with no opportunities to take breaks and home working increasing isolation.

People suggested that sharing information and skills between groups would be really helpful and encourage more collaboration.

Long Term Health Conditions

A number of people have said a lot of their clients have been sedentary for over four months and this is exacerbating their long term conditions especially high blood pressure, heart disease and diabetes. Nutrition was also mentioned as an issue or knowing what to eat or how to adapt regular meals to be healthier.

Struggles with Returning to Normal:

There is a reluctance towards a return to normality among the community, partly due to fear of infection described above, but also an increasing reliance on the temporary support services with anticipated challenges in winding those services down. Families were also struggling to keep up with education for the young people in their households and reluctant to allow them to return to school.

There was a high focus on the emotional issues of getting people out of the house, including anxiety and fear of infection and a second wave. Attempts to orient some services to improve this are being made, such as escorting people to banks etc.

Information

A lack of access to the right information including government guidelines, Covid-19 updates and accessing essential services (such as benefits, Universal credit etc) was also a predominant issue.

Misinformation was considered a problem, with community concerns around things like 5G conspiracies, false covid-19 rumours and others affecting trust in statutory services. Real experiences were also affecting this, such as DNR forms in hospitals.

Struggles to access consistent or clear information about what is safe and what the current government guidelines are were also an issue. People said it would be helpful to have a place where they can ask questions and then feedback to their clients as they never know all the answers.

Solutions:

Several potential solutions were discussed, with a particular focus on identifying readily accessible public spaces big enough to begin safely restarting certain services. Ideas included utilising wifi-enabled public benches for community chats and support sessions, to provide for service users without tech access or ability.

Increased training and support for staff was discussed in depth as well. Training needs included increased self-care skills such as resilience, coping abilities and stress management, as well as skills to improve impact with service users, such as health coaching, motivation, behaviour change and conflict resolution training.

Utilising more joined up working was also suggested, with encouragement for supporting innovative community ideas, centralised referral points, as well as clear records of training and trained staff available to increase signposting capacity and cross provider working.