**DRAFT**

**Intergenerational National Network**

Meeting on 6 October 2016 at PKAVS, Perth

**Present**

Anne Connor Outside the Box

Donna Murray Trail Care and Wellbeing Cooperative

Nick Cooke Scottish Pilgrim Routes Forum

Fiona Matthews Alzheimer Scotland

Ashleigh Mustard Strathmore Centre for Youth Development

Aaron Conner Strathmore Centre for Youth Development

Gail Cassidy Volunteer Centre East Ayrshire

David Sinclair Flourish House

Rebecca McKechnie Flourish House

Ruth Gould Aberdeen City Council

Andy Moir Perth City Council

Pat Scrutton Intergenerational National Network

**Apologies**

Mary Rasmussen

Marie Cunningham

Geraldine McGivern

Leonora Montgomery

Ros Parkyn

Ruth Mantle

Chris Dunhill

Kate Maclean

Liz Forsyth

Sue Northrop

Alan Stevenson

Anne Campbell

Anne Horn

Victoria MacRae

Angela Dias

Ann Roberts

Kainde Manji

Ruth Cape

Lorna Dunbar

**1. Welcome**

Pat welcomed everyone to the Intergenerational National Network, and to Perth. She thanked Outside the Box and PKAVS for hosting the meeting. The Network is run ‘barefoot’, and is dependent on member organisations offering a venue and tea and coffee. Lunch is welcome, but optional, as participants can be invited to bring lunch with them if they would like to stay on for some informal networking.

**2. Happiness habits – community-led support for older people’s mental health and wellbeing**

2.1 Outside the Box

Anne Connor began by introducing Outside the Box. It is a voluntary

organisation which was established in 2004 to provide community development

support . They believe that smaller organisations can often do things which

bigger organisations can’t. They also find that one piece of work often leads to

another.

They work with any group of people anywhere to help them to make progress

on things they want to take forward. In particular, they work with people and

issues which tend to fall between formal systems. The co-production approach

and associated skills are an important element of the work, creating and

supporting links between community groups and public services.

2.2 Mums Supporting Mums

Mums Supporting Mums was a peer support programme. It was particularly

intended for mums who are experiencing or at risk of post-natal depression or

not-so-good mental health. It ran in Scottish Borders, South Lanarkshire and

parts of Dumfries and Galloway (all rural areas).

It was based on the finding that 30% of mothers were living with sub-optimal

wellbeing, as a result of factors such as: social isolation; losing contact with

friends; tiredness; money worries, etc.

The role of Health Visitors was important, but the core of the work was peer

support from other mums.

Everyone was made to feel welcome, even if they were struggling; groups were

set up to be ‘wellbeing-friendly’.

There were in all nine sources of funding!

Within six months, 16 local groups were established. They ranged in size, with

the smallest simply comprising two mums!

165 parents took part. Most were mums, but there were a few dads and grans,

and one grandpa. Between them they cared for over 200 babies and toddlers.

There were a number of outputs, including:

* seven tips to help other groups get started and to keep these ones going;
* an employment resource;
* a film; and
* a report about the groups and their impact.

Activities included buggy walks; conversations; and cups of tea. The groups also offered opportunities for the babies and toddlers to interact with other children.

Some groups met in coffee shops, which became more family friendly, often experienced a growth in custom as a result, and felt more part of their local community. Others met in church halls and community halls.

It was suggested that libraries would also provide appropriate venues.

Anne showed some photographs of some of the groups.

She then shared some quotes.

* “Since attending the group my confidence has increased and with the encouragement from other mums I have now started my own business. I would have never thought this possible before.”
* “Having the health visitor visit the group means I don’t have to struggle to get to the surgery on the bus, as she is happy to meet me there and check the wee one’s weight and progress.”
* “It is easier now to walk into a room with new people. I’ve a lot more confidence in myself.”
* “Best thing I did was go to group even though I was very nervous.”
* “Feel more confident about now bringing up little one.”
* “Before the group there was nothing to bring mums together. It's helped rid the feeling of isolation.”
* “My wee boy loves Tuesdays. We get up and out the house early to attend the group and usually stay out all day, go for walks and meet others for coffee. He always sleeps well on a Tuesday night.”
* “My wee boy just loves it. He loves meeting all the other babies and children. There are no other children around us at home so this is perfect for him.”
* “The local cafe is now seen as very family friendly. People stay on longer after the group finishes. They go back at other times during the week. Other people have heard about the cafe through our promotion of the project.”
* “I feel more part of the community. This is a great place to live!”

The most frequent comment was about the increase in confidence that they had experienced.

The project in South Lanarkshire has expanded, due to the support of the very

active local partner, a voluntary organization, and is also involving more dads.

The other two areas also continued for a year or two, with a lot of support from

Health Visitors, but it has been more difficult with turnover in groups, and public

sector partners which struggled with funding.

Conversations about introducing the model in other areas have proved

problematic because of the difficulty of deciding where the responsibility should

lie: with children and families; mental health; or maternal care.

2.3 Flourishing Borders

Outside the Box is now building on the learning from this approach in its work

with older people.

The focus of Flourishing Borders is on raising awareness about mental health

and wellbeing, and on self-management. This is about both people with long-

standing mental health issues who are now ageing; and people who are

encountering mental health problems as they age.

They are linking with community groups as a way in. There will be small local

sessions, with spin-off activities. And people will be encouraged.

There is a significant gap in mental health services and resources for people who

are aged 65 and who do not have dementia. They are unwilling to visit their G.P.s

because they fear they will be offered pills which will ‘turn them into zombies’.

An initial grant application did not receive any interest. Then they started talking

about ‘happiness habits’.

At one session, at a men’s shed, one man said, ‘I am saying this for the first time.

I have to confess I have depression’.

The groups are about conversation; about support; and about enjoyable

activities. Already there are knitting and ukulele groups.

2.4 Food Buddies

This programme is also about peer support, and about reducing isolation, with a

specific focus on food.

There are two projects.

The one in Scottish Borders is funded by the Life Changes Trust and has a focus

on dementia.

The one in Falkirk has a more general focus on social isolation. It grew in part

out of another project with a focus on older people and alcohol, which raised

concerns about older people drinking too much and not eating properly.

Two year ago, during Mental Health Awareness week, they published tips on

happiness habits, which talked about being positive about the future; but also

positive about the past.

David noted that, for some people, their mental health can improve in later life.

2.5 Rural Wisdom

This is a new programme about older people shaping their own rural

communities. It moves the focus from the individual onto the community.

They plan to support the development of lots of peer support and other local

activities in a few demonstration areas, including Perth and Kinross.

In addition to this, there will be opportunities for wider networking and sharing

of learning and ideas.

If Outside the Box are successful in attracting a Big Lottery grant, they will also

be working with partners in Wales and the rest of the UK.

The focus is on support; but, more importantly, on how supporting people

enables them to contribute to their communities.

2.6 Other examples

**Healthy Valleys** runs **Community Health Matters**. They aim to reduce feelings

of isolation and loneliness for people of all ages living in rural communities in

South Lanarkshire. They offer individual support as well as the possibility of

doing things with other people. Because it covers a wide age range, there are also

opportunities to develop intergenerational friendships. Contact is made through

Community Hubs and through a GP practice (social prescribing). They also

support local communities to develop new groups and activities: promoting

wellbeing in the villages; developing and promoting volunteering opportunities;

and thereby bringing more benefits to the whole community.

Healthy Valleys also have a project called **ReConnect**. This offers short term

support for older people who are socially isolated, often as a result of their

mental wellbeing. It helps them to make connections with friends and activities

in their local communities. These often result in intergenerational friendships

between volunteers and older people, and in spin-off activities in the community.

As well as offering support when it is needed, the project also aims to prevent or

at least reduce further problems.

One older person said, ‘I used to shake like a leaf when I went out, I don’t any

more, I feel a lot more confident, I’m enjoying life again.’

To find out more, the address for Healthy Valleys is: [www.healthyvalleys.org.uk](http://www.healthyvalleys.org.uk).

In conclusion, Anne added that the lessons from the Mums project is to start where people are, and to offer people space to talk.

2.7 Discussion

Nick asked whether local churches had been involved. Anne replied that they had; one of the mums’ groups met in a church hall. And, in terms of the work with older people, many people who attend church are also proactive in their own communities.

Gail asked about how they went about reaching the mums, and whether that included posters in village shops. Anne responded that there were a variety of channels, including Health Visitors; GPs; schools and nurseries; friends and family, as well as local information.

Fiona asked about transport. Anne replied that, for the mums, meetings were either on bus routes, or the mums shared lifts. They also had a closed FaceBook page through which they could talk to each other. For the older people, this is a question of what is available locally, including the possibility of shared lifts and costs, but they are aware of transport as a problem in this context.

**3. The Care and Wellbeing Co-operative**

Donna Murray Trail spoke about the work of the Care and Wellbeing Co-

operative. This began with nine members two years ago, and, with support from

Perth and Kinross Council, has now grown to 23. Members are small businesses;

sole traders; and micro-enterprises, all of whom provide care and support. SDS

was not being used much in rural areas, and their aim is to create opportunities

for local people to have choice and control; to be able to stay in the community in

which they choose to live.

It can be quite lonely being a sole trader; and difficult to provide cover. The co-

operative model offered an answer to both. They obtained funding from the SDS

innovation fund, and Donna now works half-time for the co-op as well as half-

time running her own business, caring for young children and older people.

Members offer services including: care at home; befriending; yoga; independent

living solutions for older people; biodynamic gardening; wellbeing walks;

photography; creative writing; movement psychotherapy; swimming; massage,

etc. It is not just about helping people with tasks such as dressing and

medication; it is about keeping well in one’s own community; about being able to

walk or fish; about talking and listening about wellbeing.

The co-op is strongly value-based. They aim to be: person-centred; caring; local;

confidential; fair; professional; inclusive; and innovative.

Growbiz, which is a community-based enterprise support service covering

Eastern and Highland Perthshire, provides support.

The area they cover is very rural, with a population of 20,000 living in small

settlements. Many people retire to this area, and, as a result, they have a higher

percentage of older people than the national average. The population of people

aged 75 plus is predicted to rise by 89% between now and 2035.

They operate in a complex policy environment, which includes: the Health and

Social Care Partnership Strategic and Joint Commissioning Plan;

care integration; the Perth and Kinross community plan; self-directed support

(SDS); public sector reform; locality agreements; procurement; the Community

Empowerment act; and national health and wellbeing outcomes. Within this

context, their primary focus is on prevention.

While supporting health and social care integration, they are also concerned

about its impact on people.

There appears to be little promotion of SDS in very rural areas; most private providers don’t deliver in rural areas; and budgets are significantly reduced. This results in increased pressure on families.

The Co-op aims to make a difference, and to do this by supporting communities to do it for themselves.

There are many challenges: regulation and legislation; encouraging social work and health colleagues to use micro-enterprises; the fact that systems are set up for services, not for people; and a context of diminishing resources and increasing need.

However, there are also many opportunities. They have local assets and resourceful people. They can offer more innovative and more personalized services, and thus more choice. They can be responsive and provide the things that people want. They offer value for money, and help to achieve local outcomes. And they have a clear focus on wellbeing and on the community.

They recently undertook a GP wellbeing project, which they offered free to ten patients. They gathered evidence over three months, and found that both GP visits and prescriptions were reduced.

They also offer support to staff in terms of their own wellbeing, and might in the future offer this to private providers.

They are still very new, and still in a learning phase, but they hope that, as they grow, they will be able to do even more.

They are part of the SDS Innovation Fund Network, which is evaluated by Inspiring Scotland.

3.1 Discussion

Anne added that SDS forms present a problem which ‘gets in the way’. There is work underway to simplify them. There is also an issue in that each local authority is working in a different way. Donna agreed that there is a real issue with things being set up to work for services rather than people.

Andy agreed that there is a need to make the money flows more flexible. The system is creaking. It is difficult to continue to provide a good service while simultaneously allowing some creativity and flexibility.

Donna added that procurement and commissioning currently shape the market; we need to redefine the market. There is also an issue about people’s pride and determination making them unwilling to accept services, sometimes until it is too late.

Anne said that peer support can be very important; the question is how to get the best of both this and the more professional side, so that they become complementary. It is also about people being part of their local communities; living in real, intergenerational neighbourhoods; and doing things for each other.

Donna added that young people can often be very entrepreneurial.

**4. Information sharing**

4.1 Strathmore Centre for Youth Development

Ashleigh reported that the Centre offers a drop-in facility. She has been in post since April, and has a remit to develop intergenerational projects. One element is helping older people to increase their skills in technology. They also have a community garden, and a community café. On Mondays, they receive unsold food from Tesco and have a pot luck meal in the café.

4.2 Perth and Kinross Council

Andy is responsible for a participatory budgeting project in Perth, Rattray and Crieff, as part of which each area has £23,000 to spend. They hold open days to engage with local people. The focus is on small projects.

4.3 Aberdeen City Council Libraries

Ruth is an ‘Information Librarian’, and her remit includes health education. She works with the third sector, with schools, etc., on health and wellbeing. She organizes events, talks, etc., and this year has had a particular focus on health and nutrition. She works with people in a wide range of age groups, and often brings them together. They also have a presence in Aberdeenshire, and on the web.

4.4 Flourish House

David reported that Flourish House was founded in 1943 as part of the American ‘club house’ movement. Initially there were quite a number across Scotland, but now Flourish House is the only one left.

In Finland and Sweden, club houses are part of government.

They host students of occupational therapy; social work; community development; etc. The staffing ratio is 1: 13-15, and they support people into colleges, employment, volunteering opportunities, etc., as well as facilitating social events. Rebecca added that the philosophy on which their practice is based is about participation; open access; empowerment; and equality. They work with a range of groups. They offer literacy and numeracy classes, as well as companionship.

David has been there for 18 years.

4.5 Alzheimer Scotland

Fiona works as a Dementia Adviser for Alzheimer Scotland. Their philosophy is that no-one should face dementia alone. They promote dementia friendly communities, and have resources to support a dementia friendly Scotland. They do this in a number of ways: working with schools; identifying what is missing in communities; and talking to people who might be able to influence this.

4.6 Volunteer Centre East Ayrshire

Gail said that she discovered intergenerational practice in 2007; and it is now a passion! They have had funding from the Big Lottery and from the Education Department, among others. They also offer a befriending service. It began four years ago as a pilot, and there are now 1.5 workers. They have recently introduced group befriending. With funding from the NHS they have produced a publication on developing a befriending service using a person-centred approach.

She noted that intergenerational practice fits well in to the Curriculum for Excellence.

They are now developing a Loneliness Network (not just for older people). She quoted one person who said, “I can stand the pain; it is the loneliness I can’t stand.” East Ayrshire’s Provost’s current charitable activity is focused on loneliness.

The next project, working with their long-standing partner, Hamilton Gardens Sheltered Housing, is a reminiscence project. They will produce a ‘newsletter’, with chapters reflecting the different sessions. This is another pilot, with the intention of rolling it out to other areas.

4.7 Scottish Pilgrim Routes Forum

Nick reported that, over the past 25 years, there has been an explosion of off-road pilgrimage travel. 30 years ago perhaps a few hundred people would walk the Camino de Santiago; now there are 100,000 or more!

This is closely connected with the wellbeing of individuals and of communities.

In parallel, health professionals are increasingly encouraging people to walk. This is good for their health and good for the environment. It is also often social, and can provide spin-offs in terms of the economy of small villages and towns.

The background to the Scottish Pilgrim Routes Forum lies in the environment and in conservation.

With support from Action Participation Scotland, they meet fortnightly. The group is ecumenical; there is no need to be a practicing Christian.

The Fife Pilgrim Way runs from Culross to St. Andrews. It runs for 70 miles, and has the potential to transform the economy of communities along the way. Each route has its own steering group. This is a long-term process. Fife Council are supportive, and with funding from the Heritage Lottery, they are planning a formal opening in 2019. Community drop-in events have fostered a great deal of local interest. 700 individuals have come along, many of them contributing local historical knowledge.

The Whithorn Way runs from Glasgow, through Paisley and Ayrshire, to Whithorn.

In order for people to fully benefit from these routes, there is a need for infrastructure; accommodation; and support from local authorities and community rangers, etc.

They are encouraging people to start walking these routes now.

The Forum is not hierarchical. Routes are defined by member organisations, in collaboration.

On 21 October they will hold their annual gathering at Comrie Croft.

4.8 Outside the Box

Anne reported that Outside the Box is beginning a project about older people’s mental health and wellbeing. They are asking people to have conversations, and some of the initial ones will be in East Renfrewshire on 24 October; Falkirk on 15 November; and Inverness on 2 December.

They are inviting people from care homes and from the local communities, as well as anyone else who is interested, and there will be some focus on physical activity, including belly-dancing in care homes!

Ruth reported that the Aberdeen Mental Health and Wellbeing Network is now back up and running. This too is open to people from all walks of life, and is about people telling their own stories.

David added that they have recently done some research into stigma and discrimination. Stirling came top of the class!

**5. Date of next meeting**

Provisionally, 2 March 2017 in Aberdeen; details to follow.