Co-Production. How we facilitated the My Networks scoping project.

These are additional notes on the My Networks Scoping Project. These include an overview of our ethics and methods and learning points encountered during the project. Particular attention is given to what we put in place, or learning around, what supported and enabled the co-production and the co-design of the My Networks project.

Important moves made that promoted co-production

Below is a description of the methods that we employed whilst facilitating the My Network Project. These points are non-exhaustive but pay particular attention to moves that promoted and enabled the co-production of the scoping exercise and our community response to what is going on locally.

Identifying Epistemological Stances

I spent time reflecting upon the context, upon investments, my background and current situation, upon any blind spots or biases that I might be bringing to the table throughout the facilitating of this project. I tried to become aware of any ways that these biases might impact upon a clear view of the problem, how conversations could be framed by them and how directions that were taken or decisions that were made could be swayed by these prejudices. I tried as fully as possible to be mindful of what I brought to the journey. I made certain to be rigorous about identifying such investments so that I could respond to or account for them throughout the project.

I will not go into details about my reflective journalling or my personal growth throughout this journey, as I don't believe that would not be interesting, useful or appropriate. I do however want to mention, by way of example, how I attempted to account for my positionality in a few important regards. With my opinions about mental health challenges, my conceptual biases, and the effects of my recent relapse and anxiety upon the outset of this scoping project.

I am aware that I have received much training in the 'recovery model' whilst working for Mind for 15 years between the ages of 23 and 38. I was taken by this way of looking at mental health challenges and during this long period working for Mind I inadvertently adopted various aspects of recovery model thinking, language, and practice. This continues to inform, frame, and influence my perspective today and is something that I have to take into account when speaking to people who might see things differently. I don't think we can be free from such perspectives (neither should we be) but it is important to become aware of how our passions, beliefs, hopes or fears can inadvertently frame an enquiry or get in the way of us really listening and hearing what people are saying is important to them.

‘Just because something works for me does not mean it will necessarily be helpful to my neighbour’. This is something I have always tried to keep in mind, something I first came to recognise many years ago whilst working alongside multifaith mental health chaplaincy services with people of different faiths and beliefs, who were at risk of spiritual exploitation. The importance of mental health services and supports not evangelising what people *should* do, or prescribing how people *should* see the world, as a pre-condition on receiving any support from them, is an all too common practice that I have challenged for many years.

In recent years I have become more drawn towards, and accepting of, critical and community psychology, but from a very early age I tried to learn all I possibly could more from existential literature or approaches to mental distress. I have remained fascinated with what these ways of looking at mental health can teach us about how to manage mental health difficulties. I have been very wary of developmental psychology over the years and have explored madness more through living beside people experiencing mental health difficulties or through the works of poets, philosophers, psychotherapists, cultural theorists, visionary writers and outsider artists than through the lenses of psychology and psychiatry.

By no means all, but many of the existential ways of talking about anxiety and mental health difficulties do still make sense to me: they have helped me over the years. I am passionate about this and as a result I am extra careful not to impose these views upon others.

For this reason, and because of an awareness of these overarching concerns and potential biases of mine, I made extra effort to ensure that I spoke to and included the views of mental health clinicians and medical practitioners throughout the duration of our scoping exercise. I also made sure to speak to people who saw what they were going through as a mental ‘illness’ or ‘disorder’. I wanted to include all perspectives equally when facilitating the project and when drawing this final report together, not just remain in an echo chamber around my own viewpoints.

I was careful not to use academic jargon too much throughout the scoping project or refer to academic literature in the report for fear of distracting from its use-value, alienating participants or distributing power in unhelpful ways. I studied action research methods and approaches as part of an Arts, Health, and Wellbeing Masters degree from 2010-2012 so although I do have only a distant academic grounding in such methods I felt that I still had to be mindful of importing some of the jargon and esoteric language I'd encountered when first learning about these ideas.

I went on to study with the Institute of Narrative Therapy whilst building Mind mental health recovery centres in Sandwell and High Wycombe. This is where I first tentatively (and loosely) applied participatory action research ideas and ethics, particularly whilst working with African LGBTQI, Tamil and Muslim communities and with individuals recovering from psychosis. During this time, I benefited from and learned much whilst receiving management supervision from an experienced critical social worker from Wycombe Mind and separate narrative supervision from someone who had been part of setting up the Institute of Narrative Therapy. Both of these relationships, and the conversations that we had over a three year period, continue to influence me to this day.

I tried to bring forward, recall, and use this background. When I started thinking about doing the My Networks project I had been unwell for several years, during which time I felt that I had become very disconnected from my practice. I also felt, like many others, very de-skilled after the pandemic. With Barnwood Trusts encouragement and support I was able to reconnect with these useful knowledges. I began to draw again upon what I had learnt in my 'prior life'. Much of this had been spent in therapeutic communities, facilitating recovery related training, arts collectives, and supporting others to set up self help groups for Mind. Things came back to me that I didn't know that I had forgotten until I began to remember them again. As a result, I felt myself becoming more confident as the project unfolded. I particularly began to become much more confident introducing conversations about mental health difficulties in ways that created safe spaces for participants to speak into. This gradual building up of my confidence to be able to do the project required time, this time was enabled by Barnwood Trust and FVAF. This was just one way that the strategic partnership was a crucial in enabling the My Networks project to happen at all.

Developing Critical friends

We felt that it was important to develop a Focus Group Facilitation Team of 'critical friends'. Ours came to consist of myself (Simon Price), Penny Hulbert

(Barnwood Trust), and Mike Swambo (Sedbury Space, York University PhD candidate). The idea behind this group was that we would facilitate most of the focus groups together, critically reflect upon sessions and support each other throughout. We hoped that by working in a team of three we could triangulate and protect against ‘tangents’ from any one of our individual perspectives’.

Through reflection together we tried to consider issues around power and ‘positionality’. We supported each other to avoid fixed positions or rigid stances whilst engaging in the project and did this through a general triangulation of our perspectives. We ‘critical friends’, acknowledged the partiality of our perspectives as researchers, and our situatedness in the issues discussed throughout the scoping exercise. We did this so that we in the facilitation group could account for this when making decisions and having conversations with focus group attendees. The humility of admitting this partiality, and the humility of curiosity, I believe, helped to build trust amongst many of us involved in the project.

Developing a Steering Group

To further our approach, it was decided that we needed a steering group to guide the action research process, to plan and work together as co-researchers, and to act as an extended group of ‘critical friends’. The steering group and ‘critical friends’ cross-checked findings together, plurally (Mc’Niff 2014); whilst jointly deciding upon next actions throughout the project.

Throughout the ‘My Networks’ conversations we tried to maintain a decentred and ‘many voiced’ co-researching practice. Through triangulation, reflection, critical enquiry, and open discussions between critical friends and steering group members, we tried to make all that we were doing as transparent, open and as accessible as possible.

The steering group and other community participants were invited to steer, comment upon, and bear witness to the rigour of the scoping exercise, its safety, our focus, and the methodology that we were using. We encouraged the Forest of Dean community participants to join together to help us ‘build a community response’. We invited people to help us to explore, from as broad a range of people as possible, what was happening, and what was needed to support people’s mental health better across the Forest.

The steering group comprised of members of the local community with lived experience of serious mental health difficulties or who have expertise in supporting others with such difficulties. Together we directed the project and tried to make sense of what we were finding. This mix of people guided and influenced the research design and implementation; ultimately, they 'steered' a response to whatever we found was happening or needed to happen.

The steering group was drawn together from interested parties, who believed that action was required to better support mental health in the forest. In building the steering group we primarily looked to involve individuals with lived experience of mental health difficulties but the steering group was (and still is) open to all from the Forest of Deans communities.

In my personal and professional experience many mental health and social care professionals have been on their own journeys with mental health difficulties. I have also found that many people with lived experience of mental health difficulties have great technical insight and expertise about what works best for them. These knowledges and insights all had to be heard in a community project such as this. This awareness of marginalised voices, and this refusal to discriminate against professionals with lived experience of mental health challenges, meant that a refreshingly different, unique, and collaborative tone and energy in our conversations developed from very early on.

Deciding upon a Statement of Intent

The steering group decided together what we were going to do throughout the scoping project. An example of this was by agreeing upon a statement of intent for our enquiry and our purposes.

"We aim to co-produce, and guide the development of a whole community response to the specific mental health issues experienced by communities across the FoD."

The first step was to understand more about what those specific issues were, what was already happening, and what needed to happen in the future to better support people's mental health in the Forest. The steering group was pivotal in deciding upon the language we would use during our journey together. We agreed to try and stick to terms such as ‘checking in with each other’ rather than ‘supervision’, establishing ‘a community response’ rather than ‘building a service’. Participants defined the focus groups and emphasized the need to recognise the diversity across the Forest’s communities, acting on their insights to help us draw groups of people together.

The mental health steering group also began to look at what we would want as a culture and value base for any community response. What, for example, would any response have to have in place if it were to guarantee ‘safety’ to those accessing or referring into it? What is our ethical ‘bottom line’? What would we want from a service to be reassured that we could recommend it to a friend or a loved one).

Formulating the Questions

The steering group decided upon the questions that we were going to use throughout the My Networks project:

- What do you think is happening with people’s mental health now, in the Forest of Dean?
- What are the concerns and problems that you are encountering?
- What do you think could be done about this?
- What can we do together to create a whole community response to this?
- If you are a professional working locally, then what would you like to see put in place to help to support you in your role?

Data Collection

Participant Recruitment

We used ‘Purposive Sampling’ to recruit participants. The Steering Group decided how and who we would invite to answer these questions, to capture as broad a range of people as possible, with diverse ‘lived experiences’ of various aspects of recovery from mental health difficulties, geographically and demographically. The steering group members, crucially, helped to identify and bring together different groups of people from different lived expertise’s, and with individual insights who could constructively engage with these questions, have something to say on this topic, or have something they would like to be included in the scoping exercises findings.

The most appropriate, and pragmatic, methods of data collection decided upon were to be Focus Groups; a written survey; and 1 to 1 conversations (primarily to include the views of individuals who did not feel able to engage with either of these other two ways of saying).

The main Thematic Analysis findings presented in this report are derived from the qualitative data collected via the focus groups and 1 to 1 conversations.

The survey findings are presented separately as an Appendix.

The Steering Group decided upon what groups of individuals we should speak to, which included a broad range of carers and individuals with lived experience, these were from both professional settings and from the wider community. We tried to engage people ‘thematically around lived experiences’ but inadvertently this meant that we managed to engage people from a wide geographical spread also, from Newent down to Sedbury. We feel that we managed to develop a wide geographical and demographic reach of perspectives from across the Forest. From our earliest conversations we discussed how diverse the Forest is, and best described what we were doing as engaging ‘communities’, plurally.

Focus Groups

For each Focus Group we identified a ‘lead’ from the Steering Group or our shared wider contacts who could help us to engage these groups of individuals and be our link to help us to engage that specific demographic. As experts by experience and knowledgeable connected community members, the focus group leads from the steering group, decided how to engage the decided target groups and who to liaise with to build the list of focus group participants for each group. Their good relations, trusted positions in the Forest communities and positive links helped enormously to get the right people together for the focus groups and 1 to 1 conversations at this point in our journey.

We discussed with each Focus Group ‘lead’, liaising with the potential group participants where possible, to work out with each where would be the best place for us to facilitate each Focus Group. We offered Main Place, Coleford, as an accessible venue. Main Place has good facilities and has three rooms of different sizes available that could be booked depending upon the needs of the individual group. A number of Focus Group 'leads' and groups took us up on this offer but some groups felt more comfortable speaking either at their own place of work, online or at the project or group premises with which they were most familiar. We were as flexible as we could be in what venues we held the groups at. This was to try to encourage involvement and to increase the likelihood that each participant felt as safe as they could be; were comfortable enough to share their perspectives.

This smaller group of critical friends fed back into the steering group all progress at each meeting and invited co-design and contributions from it throughout.

Each Focus Group was attended by at least two of the team of 'critical friends', most by all three of us. The facilitators' (myself, Mike and Penny) depended upon the client group, the expected size of the group and each facilitators availabilities. Penny and Mike were enormous helps at encouraging me and building my confidence, in dialogue with others in these early phases of our journey.

At each focus group we had the questions that we were considering (decided upon by the steering group) either written on a flipchart at the front of the room and/or on the Information Sheet given to each participant. We facilitated the sessions by attempting to bring the conversation back to the questions, however we still encouraged individual insights that fell outside of these if they related to the broader topic of 'mental health support in the Forest of Dean.' Our conversations 'spidered' beyond the initial frame and this was encouraged; throughout I tried to keep in mind that the frame that I was using was provisional.

We focused on creating a safe space for the Focus Groups and invited participants to bring their 'perspectives and wisdom' to the sessions where we provided refreshments and snacks. Those who felt that they could not say all that they wanted to in the focus groups or felt unable to attend a focus group, were invited to talk with myself one to one, in a place of their own choosing (in the community), at a time that and in a way that was most comfortable for them.

Out of the target groups of 'lived experiences' that the steering group felt we needed to speak to, only two groups that we approached didn't get back in touch or respond to us. Overall, the eagerness to be involved in the conversation and the scoping exercise, the community response from early on and the energy for helping to set something up was astonishing.

Attendance at the focus groups consisted of:

- Open groups of Experts by Experience who have experienced mental health difficulties and attempted to access support locally
- Police Officers and PCSO’s
- Carers
- Youth Workers and volunteers
- Forest of Dean District Council staff
- Young People connected to the Kickstart schemes
- Rewild Project community members
- Local Housing Association Staff
- Older persons wellbeing group
- Staff from Recovery and Assertive Outreach teams
- Individuals who support people with mental health difficulties through faith settings and faith based community support.
- Women’s wellbeing focus group
- Young Parents and Home Start project workers and volunteers.
- Dementia carers.
- Arts and health professionals and volunteers
- Online forum discussions and breakout groups in meetings such as the Know Your Patch Forum and The Forest Health Forum
- We also received written feedback from a Focus Group meeting that the Forest of Dean Youth Association held, considering the same questions that we had asked other groups.

I also spoke during this time, on ‘walk and talks’, with many people from the Forest Communities who had lived and/or professional experience of mental health difficulties. I invited people to walk in a place that had been important to them during the pandemic, on a walk that had grown to mean much to them. These walks were open to all, to attempt to include individuals who could not attend a focus group.

Thematic Analysis

To make sense of the data, I drew on Braun and Clarke's (2006) model of Thematic Analysis.

Thematic analysis was chosen as the questions developed by the steering group did not suggest a previously held hypothesis to be tested, nor was it our aim to generate a theory: rather, we were co-producing through CBPAR, and as such, an accessible and theoretically flexible method of analysis was considered much more appropriate. This was in order to understand what participants brought up as meaningful to them during the focus groups and 1 to 1 conversations.

Due to the volume of interviews and focus groups it would not pragmatically have been feasible to record and transcribe all the data. Therefore, the approach taken was for a Focus Group Facilitation Team member and 'critical friend' (Penny Hulbert) to take detailed notes during each session. Penny captured verbatim quotes in context and drew upon her skills as a medical secretary to generate accurate and thorough documentation throughout. This was crucial to ensure continuity, accuracy, and fidelity to the individual forest voices; and to help them to be captured and heard against all that was happening and being said.

I read and re-read the data set multiple times, to familiarize myself with the data. Coding was 'data-driven', in that codes were elicited semantically, directly from the data. When the coding phase had been completed, codes were reviewed multiple times to ensure accuracy and continuity. After this phase was complete, broad patterns were identified, followed by broad themes emerging from these patterns. Multiple thematic maps were developed to assist during this phase. Finally, themes were reviewed and defined, as part of a recursive ongoing process of moving back and forth from the data set and the analysis, before producing the final findings.

An inductive approach was taken, in which the themes developed were closely related to the data, and what people were actually saying (rather than being based on pre-existing knowledge or research about the topic). The epistemological standpoint (discussed in more depth earlier in this report) holds the contextual assumption that individuals assign meaning to their experiences as situated within a broader social context; in this vein, I have attempted to make sense of participants' accounts, and present the findings, without taking an interpretative approach. To this end, I am hoping more to 'describe' than 'explain' the findings of the focus groups and 1 to 1 conversations. The themes, therefore, are as close as possible to the experiences, views, and 'situated-ness' of participants as possible. Consequently, many quotations are drawn upon.

The rigour of the data was maintained through the use of reflection; 'critical friends'; research support and supervision with an internal lead researcher (Laura Bolton, Barnwood) and an external Clinical Psychologist with research experience (Dr Laura Price). Rigour, triangulation; openness; and sensitivity to context was paramount.

Ethical Considerations

The focus group participants had an opportunity to think through the scoping exercise questions before each group met and were given an Information Sheet about the scoping exercise before (or at the beginning of) each session. Each participant was encouraged to read this in detail. This was to inform them of what the focus groups were about and to give them a chance, both to think through the questions beforehand, and to decide if it was something that they were happy to contribute to and give consent to being involved in. This sheet explained what the focus groups were about and how to access support if anything arose after a group that they might need to talk through. The purpose of the focus group was also repeated in a verbal preamble by the group facilitator at the opening of each group, through this verbal consent to continued involvement was sought.

We made sure to comply with FVAF's GDPR and data protection policies and procedures. All information that was documented during the focus groups was kept confidential and stored securely, it was password protected, anonymised, and anyone involved who asked for a copy of the minutes after a session was provided them in a timely fashion. In the information sheet and focus group preamble the participants were informed that minutes, and a record of the meeting, would be kept and drawn together to write a report that would give an overview of what we had found across our conversations. Participants were notified that we would try to use what they say to influence the development of a community response; that we were facilitating the scoping project to build a new service or pathway - what it would be, we didn’t yet know. We talked about and supported each other to ‘sit with uncertainty’ and not jump to quickly to solutions or concretize ‘truths’ throughout.

During the ‘My Networks’ conversations and scoping project we tried to maintain a decentred and ‘many voiced’ co-researching practice. We aimed for a polyphony and rigidity through triangulation, reflection, critical enquiry, and open discussions between critical friends, steering group members and other people from different parts of the Forests communities.

We were keen to make all that we were doing as transparent and accessible as possible. The steering group and other community participants were invited to steer, comment upon, and bear witness to the rigour of the research, our processes, and the methodology that we were using. We encouraged the Forest of Dean community participants to join together to help ‘build a response’, and support us to explore, from as broad a range of people as possible, what was already happening, and what needed to be done to better support mental health in the Forest.

Co-Production & CBPAR

Community Based Participatory Action Research (CBPAR)

I am not going to outline CBPAR any more than I already have, there are so many other online useful resources and ways into this methodology available and I encourage you to seek them out.

Please do get in touch if you would like to explore these ideas more fully, enthuse about them, or would like to discuss ways of implementing them with your own projects (Simon@fvaf.org.uk)

Community Based Participatory Action Research is an established way of co-creating solutions to community issues and concerns, and co-producing, co-designing, and co-delivering all aspects of a response to the problem with as broad a range of community participants and voices as possible.

We began exploring Community Based Participatory Action Research (CBPAR), co-research, and co-enquiry methods as a way of moving forward with understanding mental health support in the Forest. These methods and ways of practicing have an assumption of openness and uncertainty ('not knowing') built into their creative way of undertaking collaborative research. This range of ideas felt appropriate, relevant, and suited to the aims of the My Networks Scoping project. The people of the forest appeared ready and able to engage with an approach such as CBPAR, this has not always been the case with other communities and groups that I have worked with, it requires ways of being with each other that are inaccessible for more chaotic, closed or confrontational groups, a testament to those involved and all of their cohesion, openness, creativity and collaborative efforts.

"Community Based Participatory Action Research focuses upon community collaboration and community based processes and is usually a way of working with marginalised communities to respond to a problem that the community has identified."

"Often action research is involved in decolonising practices, in marginalised communities, and in supporting voices that are seldom heard" or entrusted with expertise.

"CBPAR considers power dynamics, and tries to reshape and influence the ways that knowledge is being collected and understood, and the ways that solutions are being enacted". (A Stieglitz 2021)

For more about CBPAR or Action Research Approaches take a look at:

https://hc-v6-static.s3.amazonaws.com/media/resources/tmp/cbpar.pdf

https://the-action-research-pod.captivate.fm

Co-production

It was felt, for the purposes of the My Networks scoping project, that a Community Based Participatory Action Research methodology would be helpful to provide a method for the 'co-production' of our scoping exercise, our steering group and ultimately our community response. I very much feel that by using such a well-developed 'method' we were able to avoid some of the difficulties that often-beset co-production endeavours.

A reason for choosing CBPAR as our methodology was partly in response to disillusionment about work that had already been facilitated locally under the mantle of ‘Co-Production’. There was a feeling amongst some of us who were starting out upon this enquiry that co-production is too often a tokenistic ‘add on’ to already made decisions made ‘about people’ by ‘experts’.

An example of this can be seen in a conversation that affected me shortly after moving to the area. The conversation had been between mental health professionals and its sentiment still came back to me frequently. Its emphasis was upon how “If you want to get something done just get a couple of service users to back up your ideas and then show these to the commissioners”. It all seemed the wrong way around.

I believe that organisations too often turn to ‘speaking for’ rather than ‘with’ those they work with and support. There are many reasons for this, because the anxiety that accompanies sitting with uncertainty is so intense, because the trust and funding structures aren’t in place to enable initial explorations. At times it is simply due to an avoidance of the ‘messiness’ and ‘long windedness’ of collaborative enquiry, in others it is for more insidious or disturbing reasons.

Unfortunately, often organisations do not adequately consider the mood around, or baggage from, previous consultations that have been held. Complexities around power, conflicts of interest, the impact upon co-production endeavours of commissioning decisions or framings of problems all have a considerable impact. Add to this organisational rivalries or questions around independence and positionality, and it soon becomes clear that co-production is an incredibly complex process. Much like peer support, it is not something that happens inevitably with will alone or through simply bringing people together. It requires resources, not to mention considerable work, patience, cohesion, trust, and time spent from all involved.

Continuing sensitivity to the positionality of both researchers and participants and taking into account the varieties of ways that ‘the problems’ (and consequently, the ‘possible solutions’) are being articulated within plural communities, are crucial things to bear in mind when co-producing, co-designing or co-delivering projects or services.

A Heart Shaped Place (between two rivers) and The National Centre for Creative Health

A final, incredibly helpful, intervention that supported co-production on our journey, came out of a partnership with the National Centre for Creative Health and their Creative Heath Huddles programme. The NCCH supported me with guidance, encouragement, and funding so that we could facilitate a positive day that drew together elements of the communities work together. The day showcased those Forest based groups and organisations that people had said, during our scoping project, had really supported them to manage their mental health over the previous two years of Covid pandemic. At the Heart Shaped Place event we discussed the community steering group and the mental health scoping project and I fed back what people had said they would like to see in the Forest of Dean in the scoping project conversations. I fed back to the community my preliminary findings from the first 6 months of journeying on the scoping project and invited responses to what seemed to be coming through in my, at that point unpublished, report.

The day was a joyful celebration of the communities' efforts and involvement in the My Networks project and was intended as a thank you to the members of the steering group who helped me to build a picture of where we are currently at with mental health support in the Forest of Dean. It was a relaxed chance for nominated services to talk, network, find out about and try out what each other did and for anyone from the Forest of Dean communities to try out what is already going on and what is considered 'very good' at supporting mental health at the moment in the Forest. The day was a mixture of organisations holding information stalls, workshops and 'have a go' activities; a mixture of talks, stalls, arts, crafts and wellbeing taster sessions. Members of the communities were invited to come along 'build ourselves up, build a response and begin exploring together 'What Works For You?'

The National Centre for Creative Health funded an events assistant position for a young person with lived experience of mental health difficulties to help with the day. They also worked with me to recruit a visual evaluator for the day and a young person to make a film about the organisations involved, with views from young people about mental health support in the Forest weaved throughout the film. These interventions produced some beautiful pieces of art based around the day and about the project more generally.

From a co-production point of view the day enabled members from the mental health steering group to facilitate their own event, involved a number of people with lived experience of mental health difficulties to deliver an extremely positive community event and created an opportunity to draw together people from the Forest communities. With the NCCG's support we were able to build a crucial momentum for our community response and create artistic products that acted as reminders of the journey that we have been on together, in an effort to draw us together as a potential network and show what could be achieved.

Please do get in touch if you would like to explore any of these ideas more fully or would like to discuss ways of implementing them with your own projects, groups, or organisations.

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