

The Health and Social Care ALLIANCE Scotland

Self Management Fund

2019-2021

**third sector response to
the impact of COVID**

November 2020



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Background

In response to the COVID-19 pandemic of 2020, The Health and Social Care ALLIANCE Scotland [The ALLIANCE] gave currently funded self management projects the opportunity to apply for a 6 month extension with the option of up to an additional £5,000 funding.

The following 48 projects applied and were successful:



- | | |
|--|---|
| Alcohol and Drugs Action | Leuchie House |
| Alzheimer Scotland | LGBT Health and Wellbeing |
| Anam Cara | Mental Health Foundation |
| Argyll & the Isles Coast & Countryside Trust (ACT) | MS Society Scotland |
| Befrienders Highland Limited | Multiple Sclerosis Therapy Centre Lothian |
| Bipolar Scotland | National Rheumatoid Arthritis Society |
| Braveheart Association | Options in Life |
| Cancer Support Scotland | Pain Association Scotland |
| Carers Link East Dunbartonshire | Pain Concern |
| Carers of West Lothian | PAMIS |
| Carers Scotland | Parkinson's UK Scotland |
| Centrestage Communities Limited | Penumbra |
| Clackmannanshire Citizens Advice Bureau | Perth Autism Support |
| Clydesdale Community Initiatives | Pillar Kincardine |
| CVO East Ayrshire | Recovery Enterprises Scotland |
| Deaf Links | Rowan Alba |
| Dunblane Development Trust | Scottish Union of Supported Employment (SUSE) |
| Eczema Outreach Support | Spina Bifida Hydrocephalus Scotland |
| Fife Employment Access Trust (FEAT) | Stirlingshire VE & Clackmannanshire TSI |
| Fife Voluntary Action (FVA) | Support in Mind Scotland |
| Health in Mind | The Moira Anderson Foundation |
| Hearing Link | Voluntary Action South Ayrshire (VASA) |
| Highland Children's Forum | Wellbeing Scotland |
| Impact Arts | West Dunbartonshire CVS |

The ALLIANCE was aware that these applications contain valuable intelligence about how the pandemic has affected people living with long term health conditions and how the third sector has responded to the challenges of delivering support during this time. Evaluation Support Scotland [ESS] was already supporting funded self management projects to gather and share their learning. The ALLIANCE therefore asked ESS to analyse the application forms for emerging themes, as presented in this report.



Process

Applications

Self management projects that wanted to apply for the 6 month extension (with the option of an up to £5,000 additional budget), were asked to submit the following information:

1. The **impact** of **COVID-19 and lockdown** on the original project plan
2. i) **New needs** of the people who would have benefitted from original project and how these have been identified. What **additional** and/or **alternative** services would be provided. and/or:
 - ii) The **reasons** the original project outcomes could not be met with the existing grant and/ or within the existing timescale. How this would be **rectified**.

Analysis

The Fund Manager asked ESS to look for information that could help to answer the following 4 questions:

- ? What impact has COVID had on **people with long term conditions**? Are their needs different as a result? Or do they have the same needs but at a greater level?
- ? What impact has COVID had on **self management projects**?
- ? How have self management projects **adapted** to COVID and lockdown?
- ? What do projects **need now** in order to continue to support people? What are they planning to do as we move out of lockdown? What are their contingency plans?

People at the Centre

The Cabinet Secretary has invited the ALLIANCE as a member of the Mobilisation Recovery Group to lead engagement work with people in Scotland. The aim is to ensure a wide person centred focus from the outset of NHS remobilisation, recovery and renewal efforts. In order to identify any relevant evidence included in these applications, it was agreed that the following topics would also be considered during analysis:

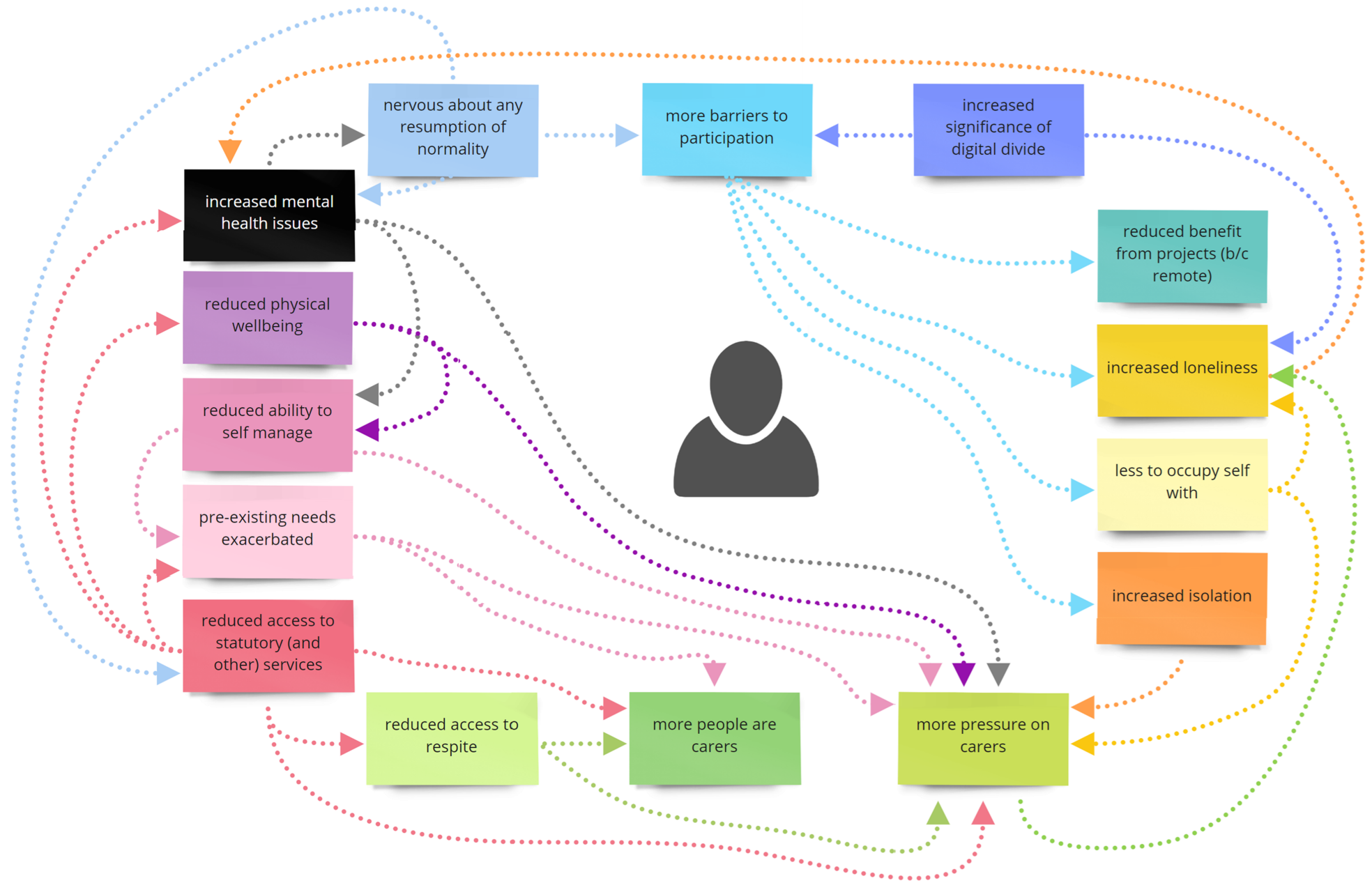
- ◆ Community resilience
- ◆ Health Inequality Challenges and Solutions
- ◆ Experiences of (including any lack of access to):
 - ◇ healthcare services,
 - ◇ health in the community
 - ◇ preventative healthcare

Things to bear in mind

The information supplied by projects was not written with the intention of sharing learning for thematic analysis. There are therefore a few important caveats to this evidence:

- ◆ Where it is helpful, the **number of comments** relating to a particular theme is included, but these figures can only be **indicative**. The same themes might also be relevant for other projects but not mentioned.
- ◆ This report attempts to represent the **variety of experiences** referenced. However, with the possible exception of those topics that projects were explicitly asked to address it should not be assumed that these are necessarily the most typical experiences.
- ◆ Very little information emerged about **community resilience** but there is some within other themes.
- ◆ It seems particularly unlikely that the few pieces of evidence that relate to **Health Inequalities** will be representative of the scale of the issue (p18-19).

Impact of COVID on INDIVIDUALS projects work with



increased mental health issues

examples

Those we support are experiencing extremely heightened stress, anxiety, fear, worry and uncertainty, compounded by sustained periods of acute isolation.
Cancer Support Scotland

The pandemic was having a huge effect on clients' mental wellbeing. 95% live alone and 70% have no support network.
Rowan Alba

There is a high incidence of depression among the population we support. Lock down, isolation and fears of Covid-19 are adding additional vulnerabilities to their mental health.
Spina Bifida Hydrocephalus Scotland

We have seen a spike in the number of people discussing mental health and we have had some serious concerns around this.
Impact Arts

we have seen a rise in stress, anxiety, low mood and behaviours associated with mania.
Bipolar Scotland

we have seen an increase of more than 150% in the need for one to one support regarding anxiety
Perth Autism Support

The coordinator has noticed a marked difference with many carers over the last month or so, with many experiencing low mood, exhaustion and fatigue. ... An overall feeling of 'hopelessness' and no end in sight for services or support being re-started.
Befrienders Highland

There is an increased risk for people living in Care Homes and for people who need carers in their own home. As a result of these increased risks, people contacting [us] were most anxious and concerned.
Parkinson's UK

Mental health is fluctuating quite dramatically – as each phase of the lockdown has been implemented we have identified this through our conversations. People were experiencing low moods and frustration, to the point of tears in a number of cases.
Impact Arts

Anxiety not only in those seeking support or maintaining their recovery is high as well as in staff members having difficulty adapting to new ways of working and engaging in supporting the former.
Alcohol and Drugs Action

cont...

34 comments from
20 organisations

examples of increased mental health issues (cont)

One client described their life to their volunteer as a 'sculpture that was being chiselled away at and one day was just smashed. (Rowan Alba)

we have seen a significant decrease in the mental health of the young adults we support. **Perth Autism Support**

We also know through our work at Health in Mind and from wider community links and research that Covid-19 has had a negative impact on people's mental health and wellbeing. **Health in Mind**

Some young people find it incredibly stressful to undertake any school activities at home, usually because home is seen as their sanctuary from school, one young person describes switching her school brain off when she gets home as the school environment is so stressful for her. To then ask an autistic young person to bring something they find stressful in to their safe place is very overwhelming. **Perth Autism Support**

There is now concern in communities by individuals, recognised groups, third sector organisations and health practitioners that mental health is a growing problem with people experiencing set-backs during lockdown, becoming more isolated or experiencing difficulty in maintaining relationships. **Stirlingshire VE & Clackmannanshire TSI**

We have found that, unfortunately, the pandemic has left many individuals in fear and with high stress levels. While many people struggle to cope with the constant news of the spread and effects of COVID-19 on their media channels, they do not have adequate forms of social support to manage this stress as a result of lockdowns and self-isolation. **Braveheart Association**

Increased feelings of anxiety and fear due to the introduction of mandatory face coverings and visors in public and enclosed spaces. Coupled with social distancing measures, this makes communication increasingly difficult and in turn creates increased anxiety and uncertainty during everyday tasks such as shopping or attending healthcare appointments **Hearing Link**

We have consulted local food banks and they have reported high increases in people suffering from mental health problems using their services. **Clackmannanshire CAB**

We have... seen a week on week rise of young people reaching crisis with their anxiety and emotional regulation which has had a profound effect on the whole household and is something that will not suddenly improve. **Perth Autism Support**

nervous about any resumption of normality

Many of the volunteers were keen to continue isolating so grateful for not being required to be present. **Pillar Kincardine**

Our CMHT colleagues report that we can expect to see much more anxiety around getting back out of doors and mixing with other people. **ACT**

[Young people] are:

- ◊ scared to go "back to life" in case they get the virus or pass the virus on
- ◊ anxious about not only wearing face masks but how to cope with seeing other people wear them and the communication barriers this creates for them
- ◊ worried about having to go back in to school as they don't know what to expect and having to deal with the social and academic demands again
- ◊ lacking motivation to leave the house as the rules are too confusing and "what is the point".

Perth Autism Support

examples

Many find the 'new normal' : masks, social distancing, sanitising - difficult to cope with. They worry that the stigma they experienced because of their alcohol related behaviour will have got worse since Covid, with people seeing them as a 'public health risk.' **Rowan Alba**

some clients are now reluctant to leave the house, fearful about social contact and entering public spaces, and feeling anxious.

MS Therapy Centre Lothian

We are conscious that members may continue to isolate beyond full lifting of restrictions **Impact Arts**

[People with ARBD] do not want to use public transport and need volunteers to go with them to help navigate the new ways of doing things post lockdown and stay safe. **Rowan Alba**

leaving the house is difficult: pre-existing social anxieties developed from ARBD are being exacerbated by worries about going out during the pandemic, especially for people who haven't left the house since March... They do not want to use public transport and need volunteers to go with them to help navigate the new ways of doing things post lockdown and stay safe. **Rowan Alba**

We have identified people who are more comfortable with remote rather than face-to-face delivery initially **ACT**

12 comments from 8 organisations

more barriers to participation

[planned to get people outdoors locally] Many of our participants have been shielding or are in particularly at-risk categories due to long-term health conditions **ACT**

many clients and volunteers are... having difficulty adapting to a new way of interacting within group settings. **Alcohol & Drugs Action**

Nurse engagement has been difficult due to the pressures placed on them due to COVID – as such we are no longer receiving referrals into the project **MS Society Scotland**

it is proving difficult to engage the MS community particularly the shielding group... [THEY] have fed back that they are unlikely to participate in face to face events until the middle of 2021 due to concerns about the risks to their own health **MS Society Scotland**

examples

There are also barriers for telephone conference calls such as being hard of hearing and English not being their first language. Many of the group were shielding during lockdown, so no physical contact was possible. **Befrienders Highland**

Approximately 50% of our original cohort had been lost as they had experienced a change of circumstances and they felt they had a great deal going on within their workplaces, so this made our project unattractive. **SUSE**

many carers have been overwhelmed during this period and unable to consider activities like training, or taking on any extra responsibilities. **Carers Scotland**

Our drop-in services have been stopped as all the outreach centres we use have been closed... Our ability to engage with people via local community support agencies has also been affected and we are only currently getting referrals from Homestart and the Carers Centre. **Clackmannanshire CAB**

As face to face opportunities increase there is increased difficulty in members being able to engage either due to reduced transport links or due to anxiety of infection from public transport. Many of the more rural members relied on school busses to be able to access groups and public access to these had been withdrawn to minimise spread of the virus leaving many of the members cut off from face to face supports. **Pillar Kincardine**

It was not possible to match befrienders with service users while many were shielding. **Dunblane Development Trust**

Becoming involved in carer representation has... been furthest from their minds. **Carers Link East Dunbartonshire**

13 comments from 10 organisations

increased significance of digital divide

Although [carer groups] have been resurrected as virtual groups, numbers are naturally lower. **Carers Link East Dunbartonshire**

Efforts made to connect those without internet facility were met with reluctance from members who voiced reticence over appearing online. **Pillar Kincardine**

Lots of the people we support do not have access to the internet. **Parkinson's UK**

Increasing numbers of people have used, or learned to use technology to communicate with friends and family as well as to access services, including health and care services. **Voluntary Action South Ayrshire**

examples

The majority of Carers are older, have no internet access, cannot use electronic devices, or are reluctant to try Zoom. **Befrienders Highland**

We are aware that many more may not be able to access online support. **Bipolar Scotland**

this virtual service model has proved for the majority both positive and beneficial, however, we recognise that technology can also present many barriers – accessibility, skills, finance. **MS Therapy Centre Midlothian**

We also need to take into consideration the technical capabilities of carers to participate in online training. Will we be excluding any carers who can only take part in a face-to-face session? **Carers Scotland**

many clients and volunteers are struggling with achieving connectivity (both hardware and internet). **Alcohol and Drugs Action**

reduced benefit from projects (because remote)

digital delivery presents potential barriers to building trust and a sense of safety within each cohort which are essential to the programme. **Cancer Support Scotland**

this has presented issues for several who lack the IT infrastructure at home to access the internet. **FEAT**

For people with ARBD who experience substantial cognitive impairment online forums are extremely challenging to manage and facilitate and would not be a good substitute. **Penumbra**

examples

We have continued to provide support by phone, email and other remote means; but for some families this has further impacted on their isolation at a time of particular stress. **Support in Mind Scotland**

The main thread and opinion of the group is without a doubt, the benefit of face-to-face contact and support. **Befrienders Highland**

17 comments from 16 organisations

increased loneliness

examples

older men living alone who have been proudly independent... but who have struggled terribly with the isolation that shielding and lockdown has wrought. **Centrestage Communities**

our guests... are seriously at risk of loneliness and limited care **Leuchie House**

reduced social interactions with family members, friends, and their communities (eg Lipreading and deaf groups) for extended periods. **Hearing Link**

they are desperate for social interaction. Asked to photograph something that makes them feel safe in lockdown, many clients took a picture of the TV or radio. They like feeling someone else is in the room with them. **Rowan Alba**

less to occupy self with

examples

The Botanic Gardens helped us deliver seeds and pots to clients... "I have now got a window box with basil in it and it might sound silly but I look forward to looking and seeing if its grown. Makes me feel like I am winning and not losing. I'm still part of something." **Rowan Alba**

[People have told us] their normal coping mechanisms would involve keeping busy with work, hobbies, peer support groups, social activities and maintaining as much sense of 'normality' as they are able to. Naturally, COVID has made it exceptionally difficult, if not impossible, for anyone to rely on these methods. **Cancer Support Scotland**

increased isolation

examples

isolation and disconnect **FVA**

With enforced isolation there is a heightened risk for vulnerable families. **Spina Bifida Hydrocephalus Scotland**

the vast majority [of carers] would welcome some face-to-face contact. **Befrienders Highland**

Social isolation is a significant factor within the autistic community and this has been further impacted by the pandemic. **Perth Autism Support**

Profound isolation... The lack of social connectivity for the LGBT community is particularly acute, with many people living alone or in unsafe situations where they are unable to express their gender identity or sexuality. **LGBT Health and Wellbeing**

we have identified a need for regular connection. **Anam Cara**

9 comments from 6 organisations

more pressure on carers

families having to manage all care... impacting on emotional and physical wellbeing of all involved. **Spina Bifida Hydrocephalus Scotland**

Many [of our carers] have been traumatised by either not being able to contact loved ones in care homes or from losses that cannot be grieved as 'normal'. The majority have been shielding and most caring without any additional supports – either through service cancellations or themselves stopping services out of fear. **Carers Link East Dunbartonshire**

Many carers have continued caring for their loved ones throughout the turbulence but without the support from friends, families and other networks they may have previously had – possibly also on top of trying to balance work and home-schooling. **Cancer Support Scotland**

We often find families find it easier to physically lift the person they care for than use equipment and we recognised that this would have a drastic effect on carers who'd now be making these movements on a much more regular basis. **PAMIS**

examples

carers find it increasingly difficult to cope **Anam Cara**

our carers were finding themselves looking after their relative... 24/7 with no breaks and limited external support. **PAMIS**

They are concerned with easing of Lockdown, and are worried about what happens to the cared for person if they become ill. **Carers of West Lothian**

more people are carers

The Carers Week 2020 Research Report... highlighted the fact that there was a rise in the number of unpaid carers during COVID-19... an increase from 1 in 6 to 1 in 4... 227,000 more workers are now juggling work and unpaid care since COVID-19. **Pain Association Scotland**

many carers have had to deal with the strain of trying to cope singlehandedly with their caring role, or have been shielding with their loved ones. **Carers Scotland**

Parents have reported... They are struggling to motivate and engage their young people. They are concerned how they are going to get their young person to leave the house to return to school. **Perth Autism Support**

11 comments from 10 organisations

11 comments from 10 organisations

reduced access to respite

examples

we took the decision to temporarily close for respite in March 2020 **Leuchie House**

All respite, day care and group support services were cancelled, and the amount of homecare support has been severely restricted or not available at all. **Befrienders Highland**

more and more of our older folks spoke of their fears and worries for the future... as families and individuals struggled with the pressures of isolation, poverty, poor mental health and little respite. **Centrestage Communities**

[Carers] told us they are tired, and have no chance for respite.
Carers of West Lothian

having to manage all care without any respite
**Spina Bifida
Hydrocephalus Scotland**

We know through our regular calls to these folks just how lonely, isolated and anxious they feel not being able to attend Centrestage for their regular activities, which took place daily for many, also allowing respite for their wider families and carers. **Centrestage Communities**

reduced ability to self manage

examples

The psychological impact of this pandemic has the potential to leave many people living with LTCs with little hope of improving their health outcomes, thereby decreasing adherence and perhaps eroding self-management skills and health gains made prior to the pandemic. **Braveheart Association**

We anticipate that many will require additional time to re-establish positive routines and recovery plans.
Clydesdale Community Initiatives

During the height of the COVID crisis people in Scotland who have MS: to prevent the transmission of COVID-19, a large proportion of them have been asked to be particularly stringent in socially isolating themselves. This meant they lacked access to the daily support they need to live well with MS and manage these new restrictions. **MS Society Scotland**

The pandemic has clearly set back the progress of participants, many of whom have been particularly adversely affected. **Braveheart Association**

pre-existing needs exacerbated

examples

many have experienced high levels of stress, which is a proven cause of eczema flares. **Eczema Outreach Support**

Our pre-opening client survey highlighted that many had experienced some level of symptom/condition deterioration. Limiting their ability to travel or access transport, even to the level of becoming housebound. For some, their fatigue levels have been compounded by reduced activity levels, no access to therapies and the changes in routine. **Multiple Sclerosis Therapy Centre Lothian**

Access to fresh food may be limited leading to changes in diet, which can affect a number of health outcomes including cognition. Nutrition, exercise, cognitive training, and management of metabolic and vascular risk factors are all important for maintaining good health. **Braveheart Association**

Poor Moving and Handling techniques existed prior to COVID-19, but this current situation has exacerbated the problem with families now taking on more of this physical role at home. **PAMIS**

reduced physical wellbeing

examples

For many people with cancer, their treatment puts them at higher risk from COVID. **Cancer Support Scotland**

Reduced physical activity levels and other lifestyle factors: One consequence of quarantine measures is a decrease in physical activity levels in many individuals. The closure of gyms, swimming pools, and exercise clubs in addition to laws limiting access to outdoor space and free movement inevitably reduce opportunities to exercise. This is of particular importance to people living with a LTC, where physical activity is essential for controlling symptoms and risk factors such as obesity, hypertension, and elevated glucose levels. Exercise is also important for reducing falls, and fall-related injuries. **Braveheart Association**

Home-isolation is also likely to lead to a reduced number of hours spent outdoors, which may affect vitamin D levels....a well-recognised problem in ethnic minority groups. This can have relevant health consequences as low levels of vitamin D are associated with numerous LTC and a higher prevalence of multimorbidity. **Braveheart Association**

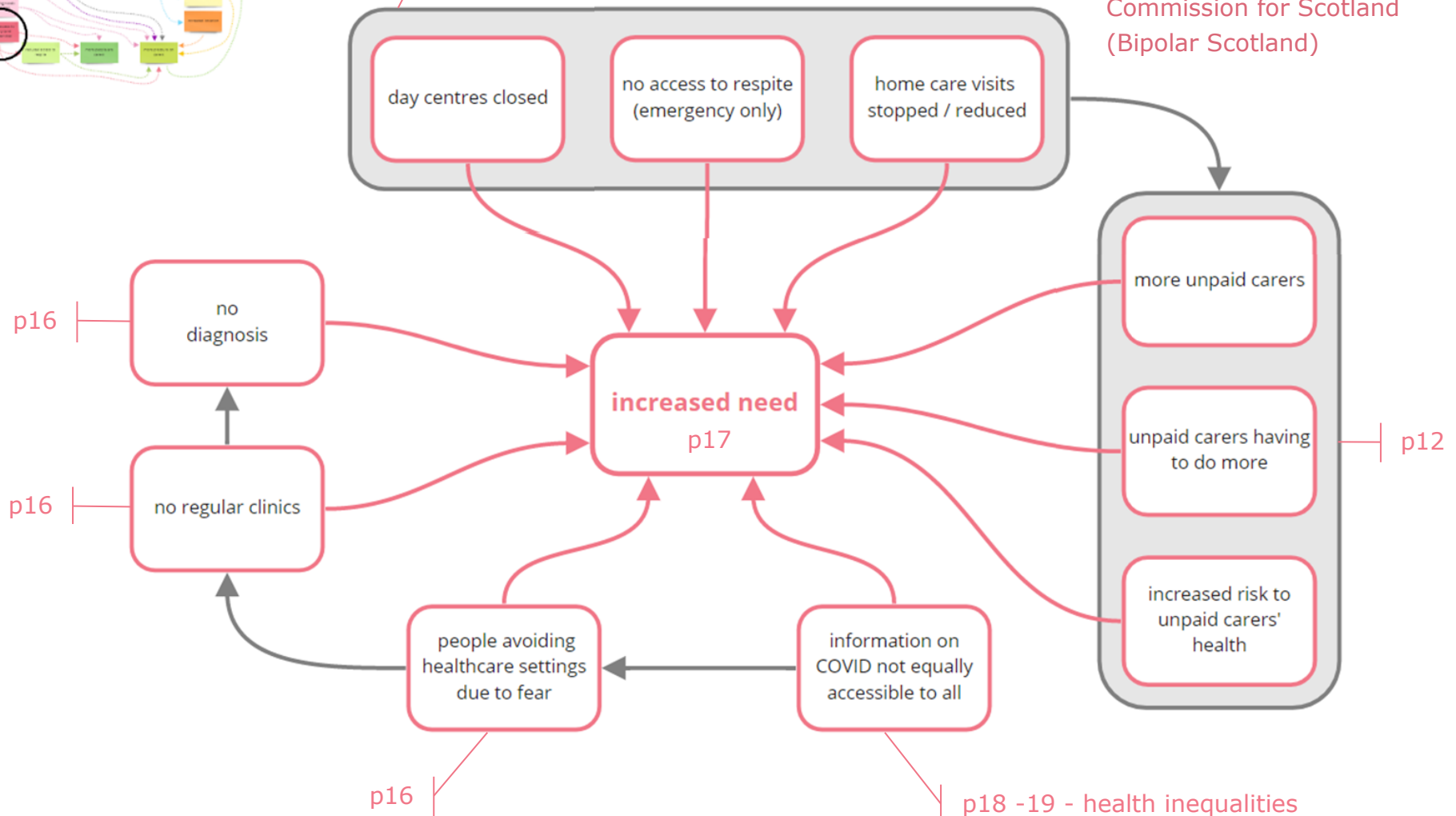
A number of members have latterly begun displaying signs of early dementia, this appears to be a result of lack of routine and structure. **Impact Arts**

Reduced access to statutory (and other) services [detail]



p11 - people with long term conditions
 p12 - carers
 p13 - respite

"The groups are doing a brilliant job in supporting people in the absence of statutory services."
 Kathleen Taylor, Mental Welfare Commission for Scotland (Bipolar Scotland)



reduced access to statutory (and other) services

examples

no diagnosis

People... were not able to access NHS services timely for a diagnosis of dementia and the post diagnostic pathways **Alzheimer Scotland**

Due to a suspension of face to face neurological clinics there were no new diagnosis of MS being made **MS Society Scotland**

Individuals taking longer to... be diagnosed with hearing loss... because of restricted access to health and social care services **Hearing Link**

avoiding healthcare due to fear

dangerous life choices e.g. taking other people's medication as they didn't want to go to the doctor; unsupervised home detox, ignoring serious health conditions such as diabetes or infections "I'm not going to hospital and catching that Covid." 40% ended up in hospital as a result of leaving a condition too long. **Rowan Alba**

reluctant to seek care due to fears of infection in healthcare settings. **Braveheart Association**

no regular clinics

We are running [our online groups]... every 2 weeks rather than monthly due to demand and the increased need for support... Many have had their NHS support cancelled. **Bipolar Scotland**

we were inundated with those wishing to access our service when many of the current services which they usually access had ceased or temporarily suspended. **Pain Association Scotland**

clinical trials have been put on hold. **Cancer Support Scotland**

usual dermatology care has been much reduced, which can lead to the worsening of their eczema. **Eczema Outreach Support**

the MS nursing teams capacity was even lower as the team was pulled into supporting general services... All clinics... have been suspended. **MS Society Scotland**

Routine health appointments have been cancelled and NHS reactions to emergency situations delayed. For some of our service users those planned operations and non-surgical interventions were set to offer better quality of life and easier ways to self-care. **Spina Bifida Hydrocephalus Scotland**

Not knowing how and where to get [hearing aids] fixed, resulting in many people losing their ability to communicate effectively. **Hearing Link**

Safeguarding- we have had calls from education, health and social care professionals who are now relying on our support staff to keep in contact with vulnerable families who may 'fall off the radar' due to school and community centre closures. **Spina Bifida Hydrocephalus Scotland**

**23 comments from
13 organisations**

increased need

examples

related to reduced access to other services

A number of previously hidden individuals with ARBD were also referred to us by Alcohol Liaison Nurses and Community NHS hubs. Our client numbers increased by 25%. **Rowan Alba**

the individuals we support usually have low income and many are already on the poverty line. There are concerns regarding increased household costs of food, heating, lighting etc. as schools and community centres are closed. **Spina Bifida Hydrocephalus Scotland**

when people with PMLD have a break from their service, where they are receiving input that allows change of position, physio programmes etc, to being homebased, their body can see a physical change. This is often seen as muscle tightening due to lack of stretching, which can be painful, development of pressure sores and other issues if. **PAMIS**

The current burden of COVID-19 exacerbates how people are able to self-manage their conditions due to physical distancing, isolation, and complications in accessing healthcare services. **Braveheart Association**

Having almost 6 months of being at home with their Carer with no other means of support has meant many cared-for people have grown more reliant on their Carer. **Befrienders Highland**

related to the pandemic in general

We were quickly receiving referrals for food provision. **Centrestage Communities**

[because café shut] a new set of challenges in managing mental health and maintaining recovery. A group of people now increasingly vulnerable and being on the margins.

Recovery Enterprises Scotland

Pre-Covid, 5% of our 40 clients were on our serious risk register; after lockdown this rose to 85%. **Rowan Alba**

Many people who are losing jobs are now using crisis services, we have been told that most have no or little understanding of the welfare benefit system at the UK, Scottish and local authority level. **Clackmannanshire CAB**

The problems experienced by the young people we work with stem from their disengagement from the community outside their immediate family and household. This impacts mental health, emotional wellbeing and behaviour which leads to an unhealthy and very difficult situation for them and their families... Our beneficiaries do not cope well in isolation and that has been the root cause of many of their issues. **Options in Life**

DWP have suspended sickness and disability assessments and the timeline for decisions has been extended leaving more people losing or not qualifying for benefits they are entitled to. **Clackmannanshire CAB**

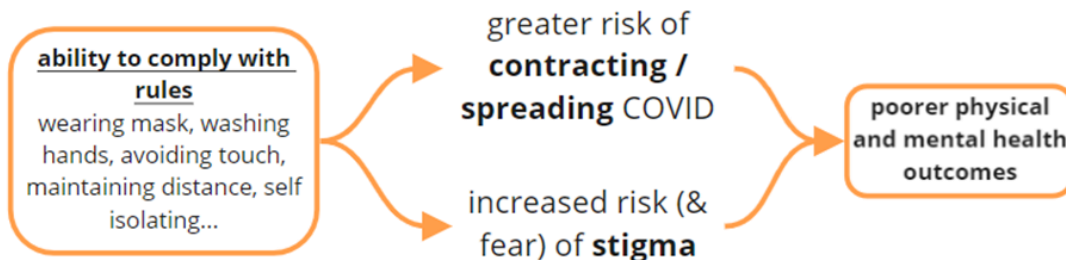
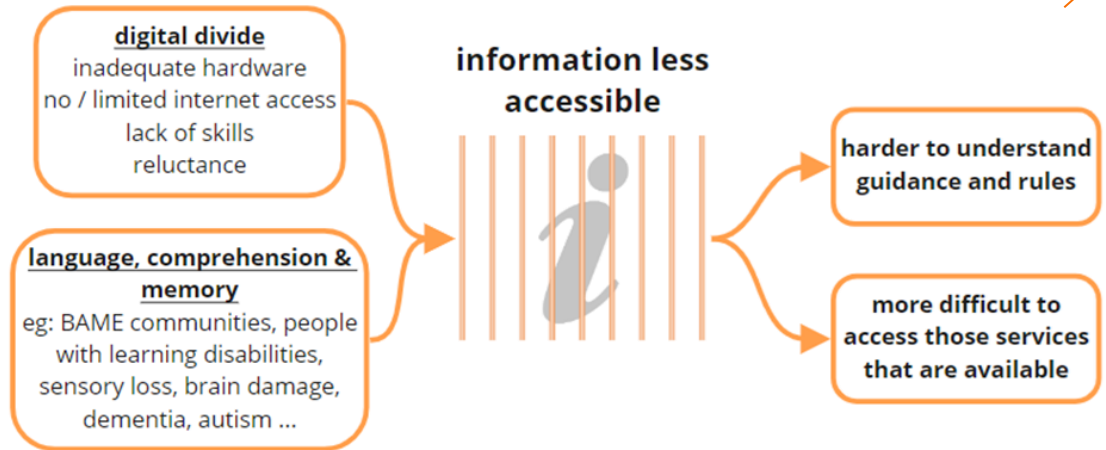
COVID and people who experience health inequalities

challenges

consequences

impact

p19 - examples



some projects described activities which may help mitigate these challenges...



NB: Projects were not specifically asked about health inequalities. These themes were identified during analysis but it is likely there are many more that projects are aware of.

information less accessible

A number [of clients with Alcohol Related Brain Damage] did not fully understand the implications of lockdown and were confused and upset that they were not meeting. **Rowan Alba**

Older adults and those with underlying health conditions particularly those from ethnic minority groups are [likely to have] reduced ability to access and understand health information, make well-informed decisions, and take optimal health-promoting actions—a skill set commonly called “health literacy”. In uncertain times like this, when the interpretation of critical and ever-changing public health messages is paramount, many vulnerable populations may be further marginalised by inadequate health communication, posing substantial risks to themselves and their communities. **Braveheart Association**

It can also be challenging for our young people to understand why they may not have been able to see friends and family or their regular support network through this time, socially distancing is challenging for all of us but can be confusing and stressful for our young people. **Perth Autism Support**

at greater risk from COVID

Early research has shown that people from Black and minority ethnic communities have been disproportionately impacted by COVID-19 and headlines such as this from the BBC on 19 June 2020 have resulted in very high levels of anxiety and worry for people- ‘Why are more people from BAME backgrounds dying from coronavirus?’ In addition, the Guardian published an article on 14 June with the headline ‘Racism contributed to disproportionate UK BAME coronavirus deaths, inquiry finds’. **Health in Mind**

increased risk (and fear) of stigma

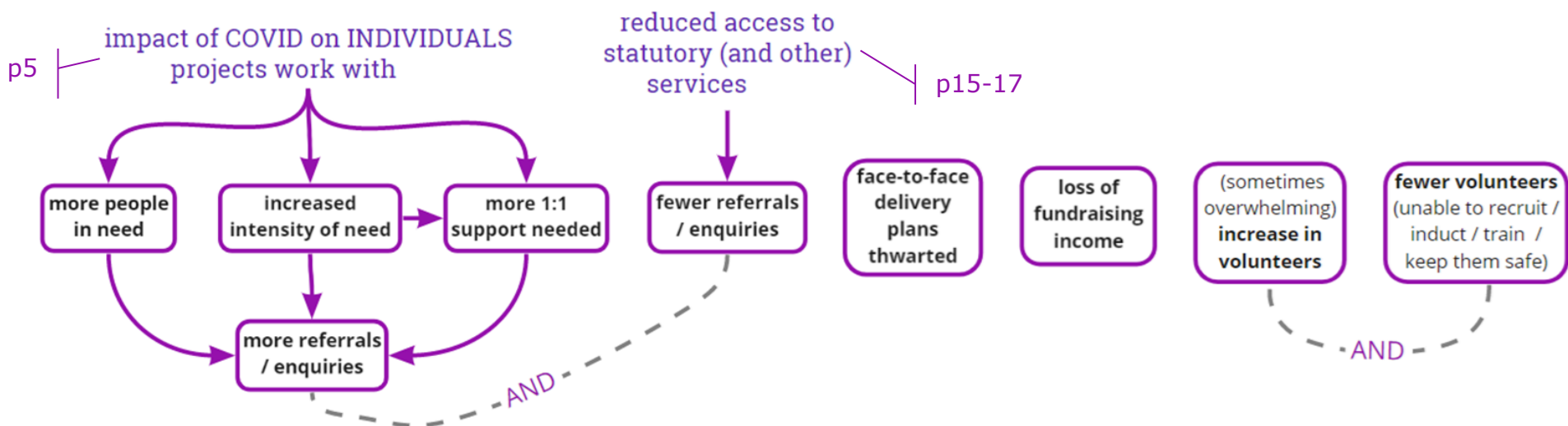
Many find the ‘new normal’ : masks, social distancing, sanitising - difficult to cope with. They worry that the stigma they experienced because of their alcohol related behaviour will have got worse since Covid, with people seeing them as a ‘public health risk.’ **Rowan Alba**

(extended) shielding

Medical supplies - there are concerns regarding accessing medical supplies and daily care packages. This is a particular concern for adult service users who are now self-isolating/or their elderly carers are self-isolating and they are unable to pick up prescriptions.

Spina Bifida Hydrocephalus Scotland

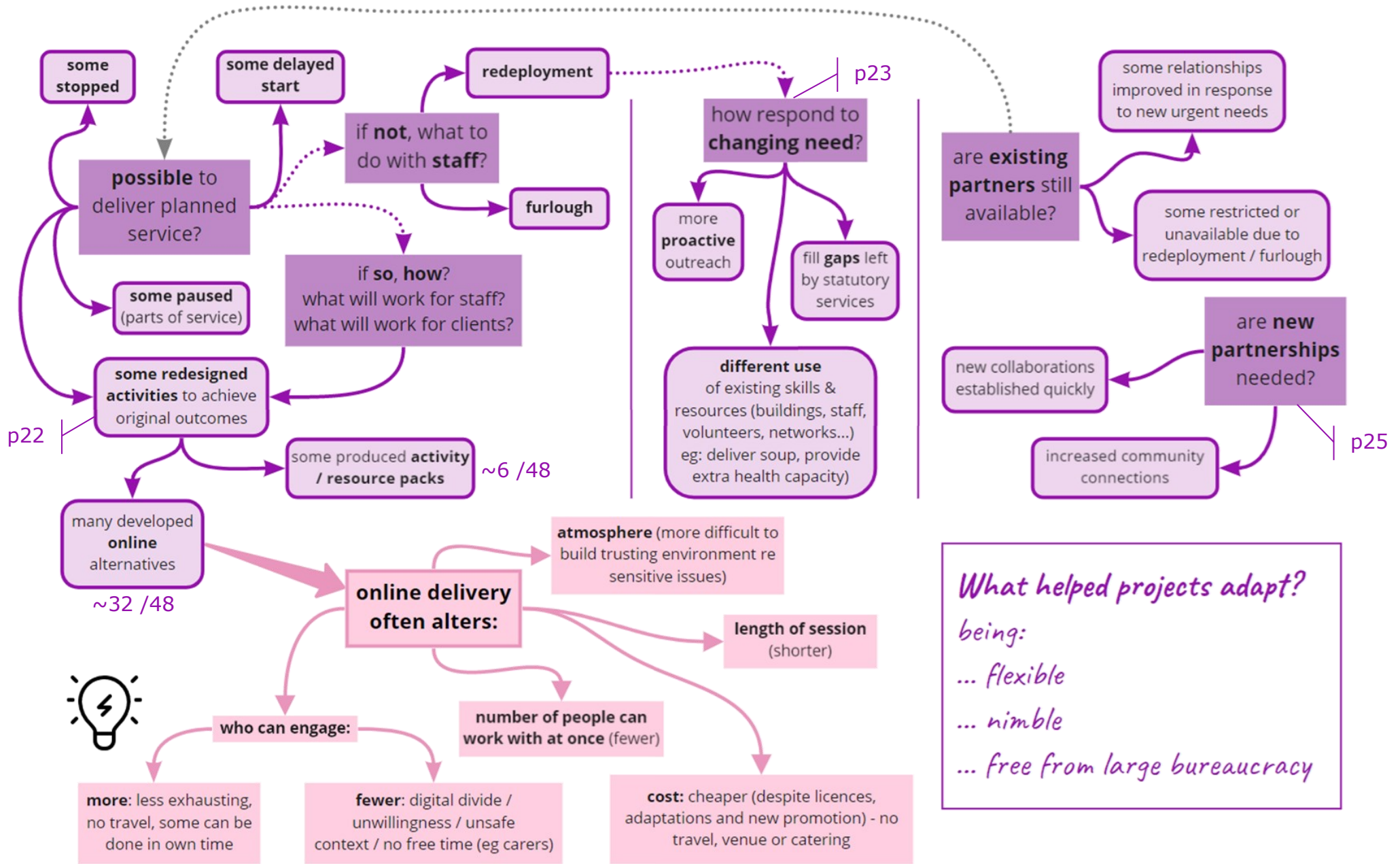
Impact of COVID on Self Management Projects



need to make rapid decisions and adapt quickly to ongoing changes



How Self Management Projects have Adapted



how projects have adapted

examples

redesigned activities

We adapted our project to continue to engage with our participants and connect them with nature by posting out regular activity packs, telephoning and providing safe online platforms for social connecting. **ACT**

Our "Here for You" service was initially delivered entirely by our staff team as an interim measure... This has now evolved to a broader service supported by 5 volunteer Wellbeing Assistants. **Cancer Support Scotland**

Deliver afternoon teas and other goodies to homes enabling people/ families to join in our peer group activities. **Carers of West Lothian**

[support] has moved online for those able to access the internet, others have had exercises posted out **FEAT**

we are also planning to enhance our overall online offering for beneficiaries and volunteers. These include adding a Live Chat function to our Helpdesk, developing the most popular / in-demand areas of our website and investing in extranet platforms and online training modules for volunteers. **Hearing Link**

Increased outreach appointments needed to reach members cut off by reduced transport links. **Pillar Kincardine**

Our remote lockdown art project began as a way for us to continue engaging with clients who had participated in

café groups... We want to launch Stage 2 of the art project... encouraging service users to share their anxieties, ideas and self-management suggestions with others... we will collate client work into an online exhibition which we will disseminate to key health and social care providers to help increase understanding of ARBD and approaches to self-management support. **Rowan Alba**

The monthly feedback from participants (assessing their well being and self management abilities) will now be done online... We have re-designed the survey to make it more user-friendly online (using easy read principles) and we have added some graphics. **SUSE**

utilising the growth of and interest in remote ways of working, to reconnect with professionals in hospitals and secure units to provide better information and raise awareness **Support in Mind**

[We will] test the use of a digital platform to facilitate self-management programmes. In order to be inclusive the project will also test an approach to involve those people who are currently less digitally literate or digitally connected. There may be an opportunity to work in tandem with another VASA project aiming to develop digital skills in people who currently don't have such skills. **Voluntary Action South Ayrshire**

how projects have adapted

examples

response to changing need

Every participant... has received at least one phone call each week... we were also capturing information as to who was connected online... have accessed Chromebooks via the Connected Scotland Fund... We will also be providing a digital ambassador. **Centrestage Communities**

Condition specific information is sourced to support individuals who do not have access to a PC. **Dunblane Development Trust**

In response to a reduction in paid carer visits in... a soup and cake service was set up. **Dunblane Development Trust**

Our participants created a phone tree for each other who they feel need additional connections. **Impact Arts**

We converted our service by... accepting patients who were currently in NHS hospitals but who did not require intensive medical care. **Leuchie House**

We are keeping in touch with our most vulnerable guests by phone to ensure they continue to receive appropriate care. **Leuchie House**

We adapted by delivering... a workshop of understanding trauma responses during lockdown and developing coping strategies. **LGBT Health and Wellbeing**

We extended the invitation to carers Scotland-wide as it seemed the right thing to do with an increased demand. **Pain Association Scotland**

We were approached by 47 Healthcare professionals who... had limited resources and support networks to be able to refer onto. **Pain Association Scotland**

In identifying our concerns of the immediate risk to carers health through poor Moving and Handling techniques, we were able to develop and present on an NHS Education for Scotland (NES) webinar. **PAMIS**

[We will] respond to the increased need we are currently experiencing This will include working with [young people] to get them out of the house and re-engaging in the community, supporting their emotional regulation and working through the long term effects of the pandemic. **Perth Autism Support**

Through liaising with the café team, we agreed in providing a mobile food provision, with the initial location established within volunteers' neighbourhoods where vulnerable people and families being identified through unique local intelligence... we are establishing unmet needs, and raising those with services, advocating on their behalf. **Recovery Enterprises Scotland**

In response to identified needs, we launched a dedicated coronavirus hub manned by the Health & Wellbeing Nurse and Clinical Nurse Specialist. **Spina Bifida Hydrocephalus Scotland**

existing

We have consulted our partner agencies and agreed to provide remote services to their service users by way of email and telephone once they are back to some form of normality. **Clackmannanshire CAB**

our project's extensive consultation process was delayed by... the difficult access to our partners (teachers, young people, families and healthcare professionals) **Eczema Outreach Support**

our partner organisations were unable to accommodate service provision. **The Moira Anderson Foundation**

With furlough limiting our work with partners we have not been able to deliver the project in the way we originally anticipated **Carers of West Lothian**

Awareness of current and emerging resources in the community is vital and networking with partner agencies ensures that the appropriate linkages are made. **Dunblane Development Trust**

Our project was partly dependent on partnerships within Fife Health & Social Care, NHS Fife and Health & Work Support. From March 2020, all of these partners redeployed staff to Covid-19 activity and the usual mental health services were drastically curtailed. **FEAT**

Until now a key partner in the Growing Peer Support in Fife project, our H&SCP colleagues have – quite understandably - had all their time fully diverted to focussing on the emergency response. **FVA**

Partner professionals have been focused exclusively on Covid responses. **Penumbra**

Partner organisations such as FV College and NHS Health Promotion, that would have provided training closed or postponed activities. **Stirlingshire VE & Clackmannanshire TSI**

a number of the potential partner agencies were not contactable during the April – August period as they had been forced to take the decision to furlough staff **West Dunbartonshire CVS**

Statutory staff returning to their core roles will also be working through a backlog of caseload activities and their ability to attend the training and upskilling proposed in the original application will require additional time as they prioritise their workloads. **FEAT**

Allotment space made available to partner agencies, CAB etc. for booking to enable face to face contact. **Pillar Kincardine**

new

working with Mearns Coastal Healthy Living Network to supply Connecting Scotland devices to members who do not have internet access. **Pillar Kincardine**

we also managed to engage with new partners and increase our audience for the ACTivity packs. **ACT**

We plan to work more directly with the foodbank due to the massive increase in numbers of people using their service... They have also identified that they are unable to give out any information on benefits, finance, debt and signposting to local services. **Clackmannanshire CAB**

we are working with East Ayrshire Council and EAHSCP to identify solutions for wider [digital] access **Centrestage Communities**

We have been in regular Zoom meetings with Stirling Voluntary Enterprise and Stirling Council who established a Stirling Community Support group offering advice, financial support and referring individuals requiring social support. **Dunblane Development Trust**

We have developed good working relationships with those businesses which were operating and... with the local district nursing team, paid carers, and social work staff. **Dunblane Development Trust**

We delivered 150 copies of [the local hospice's] Activities, Encouragement & Inspiration Booklet which was produced to support people shielding and in isolation. **Dunblane Development Trust**

[We are] building digital awareness and connectivity... by working in partnership with local disability and support organisations such as Clyde Shopmobility and the WD Access Panel. **West Dunbartonshire CVS**

The project will also provide additional support to carer centre staff and home start staff in terms of guidance, signposting, referrals for advice and training on sickness and disability benefit. This is been requested by both organisations. **Clackmannanshire CAB**

[offering our service Scotland-wide] proved to be most welcome with the various Carers Organisations who we reached out to – Carer Positive, Carers Scotland and Carers UK. **Pain Association Scotland**

we have also been feeding clinical data gathered from the SBH Scotland Coronavirus hub into the Scottish Government Clinical Priorities and Rare Diseases teams to help them understand the impact on those with complex comorbidities and develop appropriate pathways. **Spina Bifida Hydrocephalus Scotland**

What next for Self Management Projects?

