

Alex Swift (Interviewer)

Croseo, welcome. I'm here with Charlotte Waite from platform Wales. Hello Charlotte. How are you?

Charlotte Waite (Platform)

I'm good. Thank you. Nice to be here.

Alex Swift (Interviewer)

Do you want to explain a little bit about what platform is and the work you do there?

Charlotte Waite (Platform)

So, platform is a mental health and social change charity based in Wales. We used to be a traditional service provider for mental health support services called Gofal. And we had a change of heart in recognizing and starting to question and reflect on what our purpose was in supporting people with mental health issues in the community, and recognizing that some of the way which we behave are not always really congruent with what we think good wellbeing should be and how that support should be delivered. We had a rebrand and a change of heart to become a mental health and social change charity, with the emphasis really on creating a different understanding of how we all understand distress and wellbeing and how we should all respond to that.

Alex Swift (Interviewer)

I'm interested in this description of mental health as a pandemic within a pandemic. Some defend the term by saying that we need to treat mental health with the seriousness of any other public health issue. While others say that the term risks stigmatizing something that's completely normal and understandable. What's your view on how useful the description of 'pandemic within a pandemic' is?

Charlotte Waite (Platform)

It's important that we recognize the enormity of the trauma that everybody is experiencing. So, collective trauma on a global scale, collective trauma on a national scale in our communities, in our households, within us all. So, if that's helpful for people to recognize that as a pandemic, then that's helpful. I suppose, where we don't find it helpful is if what it means and what we can see happening is more people are being prescribed antidepressants than they ever were before. And that there somehow needs to be a great medicalization of everybody's very natural feelings as a response to the trauma that we're all living through. I don't think it's about denying that the rates of

distress are rising because of course they are, but it's about how we respond to that, I think is the most important. And actually we could make things worse, I think for each other and for the health of the nation, if where we end up is trying to funnel everybody through existing mental health medicalized provision to try and access some kind of magic panacea on the other side of that, some pill that will make you better. Whereas, I hope what it offers is a real opportunity for us to have a conversation about mental health that we were beginning to have before. Absolutely, made huge strides in Wales, time to change Wales, the push on us understanding mental health and mental wellbeing within the context of our lives is not a new push in Wales. I mean, the ACE's research has been fundamental in that that what you've experienced in childhood will impact you throughout your life and will have health implications and outcomes for you. What the pandemic I think has also helpfully highlighted though, is that your environment coupled with your life experience will impact how resilience enable you are to deal with what's happening to you. So I think public services have definitely felt this awareness for themselves, both for the staff working in their services and the people that they're trying to support that whilst we have all experienced the same pandemic, we have all experienced it very differently, depending on the environments in which we live.

Alex Swift (Interviewer)

I think that point you made about medicalization versus having a wider conversation is really interesting because, speaking from a personal perspective for a second, I'm on the autism spectrum, you know, there's a debate surrounding that isn't there? About the sort of medicalized view or looking at issues like autism vs. Sort of recognizing it as a difference rather than a disability.

Charlotte Waite (Platform)

Yeah, and I've learned so much, and still got so much to learn on this myself. Whilst medical labels and diagnoses for some people are absolutely helpful and I'd never want to take those away from anybody. And if they're receiving a service that's helpful for them then of course, that's brilliant. I think it's about thinking though, that it's not only that way that we need to understand our differences and the compassionate mental health movement, particularly around hearing voices and people who experience distress in different ways in their bodies and me learning from them really about how they navigate their lives, living with that different view of their world and how distress is manifesting in their body and how what they want is compassion, understanding and

people to be comfortable enough to sit with that distress and hold it in a way that's very accepting, feels massively liberating for those people that I met. So yeah, I've still got loads to learn through that, but it just made so much sense to me that all of us taking more time to understand how we all experience life and why seems to actually, I completely understand how that can often feel too time consuming, too complex, too overwhelming for you, particularly if your fielding a service for which there is a rationed amount that you can give out. So that's why we've ended up in these models. I get it. I'm not naïve to the reasons, and where these motivations for wanting to fix people come from are often good places of wanting to help people feel better the fastest way. So, we'll assess you, we'll refer you, we'll prescribe you and then you'll go away. Whereas what the evidence tells us is that's not how people experience services very helpfully. That's not how people feel better from their lives. What helps people feel better is being able to regulate and understand themselves and connections with people, either in services or out of services that help them understand themselves and their world.

Alex Swift (Interviewer)

One way of looking at this issue that you've talked about is the light and dark side of emotional literacy. On the one hand, EQ provides the ability to better understand your emotions and that of others. And on the other, you might have increased sensitivity or more volatile emotional reactions. Can you explain that dichotomy in more detail and answer how people might go about achieving a healthy, emotional balance?

Charlotte Waite (Platform)

Yeah, so, you know, if I knew the answer to that, I would probably have a book out or be close to God, but I am inspired actually by, and this is why we wanted to ask people about their experience of the pandemic, was because what we were noticing quite naturally is that people are expressing themselves much more in feelings terms because they're so much closer to the surface. So, the notion of a work self and a home self is being blurred hugely by what's happening to us. And to me, that's exciting because it's bringing the human back into human services. There is an opportunity then for us to be led much more by feelings. The Carnegie trust wrote a report a while ago about kindness in public policy and really raised the dichotomy, which is like what you're asking. This rational and relational dichotomy that exists in anybody delivering a helping public service or in a community, or at all, but if you're delivering a service, there's always this divide between the rational and the relational. So, there's human me and the reason I want to be a helper or work in helping services is because I am compassionate and caring and want to give and have great emotional literacy and warmth and reserves and want to give something. On the other hand, my services are not infinite. Services must be rationed. Therefore, we only want to give them to the

people who need them the most. And so, develops a whole raft of layers, bureaucracy, hierarchy, and processes, some of which is necessary to keep us safe. You know, it's about risk assessing, but there's that dichotomy. And then you've seen that be blown apart by what's happened through Corona virus. People felt permission to try things, take risks, be themselves because they felt from inside of them 'this is the right thing for me to do'. And so, people could move to doing what matters from a very feeling place rather than because a new strategy has come out that takes you through a great five point plan about doing things. The downside, as you alluded to there is how do we manage this within ourselves? We've all experienced, I'm here now talking to you, both my children are on their screens doing homeschooling. So, I know I'm carrying this anxiety within me, as I'm speaking to you about, are they okay? Should I go and check them? How long they've been on screen? You know, my partner's out of work, no prospect of work coming his way. I'm carrying anxiety about him.

I'm worrying about my friend, who's ill. We're all carrying this anxiety with us daily. Some of us worse than others as we spoke about before, depending on our circumstances. And I think what we, what we saw through lessons from lockdown is that there really is a divide within services. Those services that are happy to say 'this is difficult. What we're sitting with is uncertainty here'. So that doesn't mean we know all the answers and we're going to be comfortable to sit with that. So, we're going to help you sit with those feelings. I'm not saying it's easy, but it's not perhaps as difficult as people think it is. It is about offering opportunities for human connection. But for those to be purposeful, how do we help people bring their whole selves to work? Well, we do that through good reflective supervision and having workforces that are skilled to be able to hold those spaces for one another.

Alex Swift (Interviewer)

So, it's about empathy as opposed to a tick box exercise?

Charlotte Waite (Platform)

Yeah, everybody knows that though. So, I think the challenge is to just be a bit honest with ourselves, about how comfortable actually are we at doing that stuff and to think about, you know, remember that you can never not communicate. You're always communicating, your behavior will always be communicating. So, if your policy is the one that you're going by, which is if you feel distressed, go through the employee support program, just that in itself is not communicating compassion and care. It is you ticking off something so that you feel that you've got that there for people, but it doesn't really communicate safety to people. It doesn't really communicate that vulnerabilities okay here. That's the point, I think, vulnerability being okay. That once you allow people the freedom to be themselves, and so there's moments when they're safe to fail, they're

safe to be vulnerable, they're safe to cry, they're safe to have a s**t day that you have less of that than you do when you, when you have less empathic structures in your organisation.

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Alex Swift (Interviewer)

I'm here with Mike Vigar from HMP parc. Hello Mike. You run a quite innovative and different scheme that focuses on the mental health of prison residents called the Barber Network. Do you want to explain what the project is and how it came about?

Mike Vigar (HMP Parc)

Sure, no problem. So, it's quite a simple concept really. Men in prison get their hair cut quite regularly. And we recognize that residents in prison also suffer with mental ill health and struggle with their wellbeing. So, what we've done with the barber network is create a kind of more barber looking space. So, we've created a barber shop with all the Barber materials that you would expect with signs on the door with your kind of cabinets and barber chairs. And we've given the barbers in the barber network training in basic mental health first aid, so that they can kind of listen to the issues that some of our residents have got. They're there to listen. They're there to provide kind of low-level advice and, and signpost people to the services that are available in the prison. So, it's quite a simple concept really. People come to the barbershop, they get the haircut, but they have a chance to kind of offload to somebody that they know is going to listen.

Alex Swift (Interviewer)

So, in terms of the response, was initial reception by prison staff and residents positive to start off, or have you sort of had to convince anyone over on the idea?

Mike Vigar (HMP Parc)

I think generally people have been positive. It's a simple concept from a prison point of view, we offer the barbering service anyway, so residents are regularly getting their haircut by their fellow residents. There's always a kind of natural anxiety in prison around allowing kind of that interaction to happen in a more closed environment, because usually it would just happen out on the wing. But I think everybody understands particularly with the difficulties that we've had with COVID that any services that promote mental health, wellbeing support is going to be good for the prison. And in terms of the residents it's been well received from the start, really any project like this that they see as kind of different or innovative is an opportunity for them to engage in something. We've been keen to emphasize the opportunity that they've got in terms of getting some skills and experiencing low level counseling and support. And, you know, people are employed as barbers in

the prison. You know, it's a good opportunity for them to do that in a more structured way. They learn some valuable skills and support their fellow residents in the process.

Alex Swift (Interviewer)

I think that sounds supportive. One criticism you might hear, especially from members of the public, is that the idea doesn't fit in with what they see as the traditional function of the prison service. What's your view on those criticisms?

Mike Vigar (HMP Parc)

I guess you're always going to have a portion of society that feels that prison should be more focused on punishment. To some extent, I think there's ample research to suggest that that's not an effective way of kind of reducing re-offending and, you know, for me personally, and for lots of the people that work at HMP park, we're all natural rehabilitations and we view the purpose of prison as giving people the skills and opportunities to kind of develop more pro-social crime-free lifestyles. So, you know, everything that we do at Parc and across the prison service that is kind of new and innovative and designed to support individuals and give them more opportunities for kind of self-betterment. It's clear to us that it's an important thing to kind of like promote positive engagement and give people the opportunities to change. I think it's really important to recognize that people living in prison do suffer mental ill health more significantly because of the surroundings that they're in. So, you know, it's widely reported across national media about the levels of self-harm in prisons and the kind of concern around that. So any service that tries to kind of address that and promotes positive conversations around mental health and encourages men, particularly to address there, you know, to talk about mental health and kind of address their feelings and open up is only a good thing as far as I can see.

Alex Swift (Interviewer)

As, you know, Barbers have long held the role as being unofficial psychiatrists almost. People who men can express their worries and doubts to without fear of being judged. Considering the kind of people who are living in prison, explain why you think this is a particularly important idea for residents.

Mike Vigar (HMP Parc)

So, you know, I think as you've said that role of the barber, that kind of conversation as you're cutting someone's hair, that casual idea around, the kind of shared concept of giving people the opportunity to open up while undertaking a normal day routine works quite well. And it's a really good way to kind of promote people talking. It's particularly something that is relevant in terms of male population. You know, all the data suggests that males are kind of more at risk of suicide and

self-harm, and that it's kind of an ever increasing issue, even from a non-prison perspective, there's this whole angle around the fact that men and mental health is an emerging issue that absolutely needs to be addressed. And from a prison perspective, you know, that's kind of multiplied by, you know, five, 10 times, because it is a really difficult experience living in prison and people need to be given opportunities to open up and kind of speak and be listened to because self-harm rates in prison are high, suicide rates in prison are high. And I think the point with prison is that it is just an environment where any kind of like issues around health, wellbeing, stress, anxiety, are just kind of multiplied exponentially. So we need to provide services that meet that, we need to give residents the opportunity to talk and open up, and we need to create a space for men in prison, you know, for all residents in prisons to open up and talk about mental health.

Alex Swift (Interviewer)

Obviously COVID has made it very difficult to deliver the service this year, but with the work you have been able to do, what's the initial response to the service been like?

Mike Vigar (HMP Parc)

It's been really, positive. There's a real excitement around the project. You know, even from the point of view of platform, delivering their four day training course to our peer mentor barbers, our residents, that will be the barbers in the barbershop, you know, huge kind of level of excitement from them, just because of the kind of time that's been invested in them and the opportunity for them to become trained in something that, you know, for them feels like a really tangible skill that they can use for the foreseeable future. That's just been a fantastic buzz around the prison because they feel invested in, they feel ready to support their kind of peers and you know, seeing the barbershop itself kind of develop as a physical space on the residential unit that it's based on straight away, there's a level of excitement because people can feel something's happening on the unit and it's there and it's ready to go. So we haven't really been able to do much of the actual barbering simply because of the restrictions around Covid, but the feedback that we've had from everybody so far has been nothing but positive and people are really keen to see it in full swing being able to access it frequently.

Alex Swift (Interviewer)

That's great to hear, just to finish off, I want to talk a little bit about where do you plan to take the idea in the future, and do you plan to sort of roll this idea out to other prisons in the long term?

Mike Vigar (HMP Parc)

So already we've decided that we're going to expand it to another residential unit in prison. You know, like I said, at the start, everybody in prison gets their hair cut regularly by their fellow

resident. So, it's a no brainer from that perspective to expand the skills and give other people the opportunity to deliver that kind of counseling support. So yeah, you know, we're keen to expand it. We just need to think about how we get people trained. You know, how we train more peer mentor barbers with that specific kind of low-level mental health, first aid qualification, and we've engaged platform in ongoing supervision. So that from a safeguarding perspective, the residents that are delivering the barber room have that opportunity to speak to someone from a kind of clinical perspective, but then, you know, we've got absolutely no qualms about sharing our learning with the wider prison service and encouraging them to follow suit. I think any service that promotes men in prison talking about mental health through kind of everyday conversations is important.

Alex Swift (Interviewer)

Something that platform have been very keen to emphasise is the importance of kindness in public services and elsewhere. The Future Generations Commissioner for Wales has recently called on the Welsh government to instill kindness at every area of policy. Can you explain specifically why you think the punitive approach is wrong and what a kinder approach to public services might look like?

Charlotte Waite (Platform)

How I came to this is through the adverse childhood experiences research. So, I'm sure people who are listening to this get this, but when you think about things like this. So I used to be in charge of some homeless hostels for young people, and they were young people who had been in the care system and had been in out of County placements that were very expensive up to like four to 6,000 pounds a week for these secure placements, because these young people were deemed to be that vulnerable terms like complex needs, really meeting that high threshold of need for care and supervision that they were being paid for these very high placements. So, then they reached their 18th birthday. They need to come back to the local area. And essentially, I'm sorry to say that funding is running out because that time with children's services is coming to an end, they're coming back.

So, they're landing in homeless hostels. So, these young people then landed in homeless hostels with staff who were being paid 16, 17,000 pound a year on 24/7 shifts having to keep those young people safe. And I just felt really huge humility that workers who were often dealing then with, you know, very high-risk situations. So, in one of the hostels that I worked in, we had young people prostituting themselves. We had everybody using drugs everybody using legal highs, there was a child sexual exploitation going on. There were gangs involved in the local area bothering service all the time. So, then you've got this staff team who are having to deal with those levels of risk. And of course, then what they were doing was having to sanction. 'You Can't behave like that here. If you behave like that here, you put all the other young people in the service at risk.

You're putting yourself at too much risk. I'm going to need to end the police. I'm going to need to warn you, and I'm going to need to evict you' I'm sure it will be news to you. You know, these young people have often been moved around multiple times in their lives, and this was not shocking to them. In fact, it was expected a lot of the time. And in fact, I felt like it was their motivation because this is a language that they understood. They understand being rejected. They understand being thrown out. They understand that world, what they don't understand is somebody who would ever say 'it doesn't matter what you do or what you say. We understand that how your behaving is a symptom of everything that's happened to you in your life. And, is a trauma response to feeling disregulated. You're feeling threatened, you're feeling under siege.

So, a real empathic and trauma informed approach. Some of those ways of behaving are survival tools often. Often, this is how I have learned to survive my distress and my trauma. And it just became obvious to me that the environment in which we were expecting these young people to live and presumably thrive was counterproductive to that. So, a kind of sanctions system - locked doors, fobs, plastic tub chairs, Magnolia walls. Back to my point earlier about you can never not communicate. You're not really communicating aspiration. You're not communicating compassion. You're communicating I'm warehousing you, and you will do it the way I tell you to do it. So, this notion of psychologically informed environments came to my attention and has never left my thinking. So, if you come through the homelessness door and you want to say you're homeless, you will probably be met by a glass screen, which somebody will talk to you through.

So what is that communicating to you? So I just think there's some really hard questions to ourselves about if we are in the business of helping people, whatever our business, whether you're the DWP or whether you're a GP surgery, you need to be thinking about what you're communicating to people at all times. Because if you start your interaction with people through the way the building smells the way the building looks, the way you're greeted as you go through the door, the kinds of questions that you ask people. People go round and round services, all of their lives because of the punitive way that we do services. We shut doors down on people who are forced to come back to us again and again, because the service they've been offered or refused has not met their needs. Failure demand is so much of what we end up spending our resources on in public services

And I truly believe if we only created more psychologically informed ways of doing things. So that would mean brave things, absolutely. Kindness is radical. In this sense, it would mean that you have permission, for example, as a worker, to step outside your assessment form and do what matters to the person sat in front of you, because that makes it more likely that they're going to have a great day. They're going to not come back to your service again, they're going to get what they want. And crucially, in terms of becoming a trauma aware nation, every interaction is an opportunity to change somebody's brain pathways. Literally you will change their brain pathways

and their belief about the world and about services, which is important, is a positive one. We start to trust people more. We start to feel like humans are there to connect with us. Not that there is this divide between us and them, those with those without, I just think there's so much potential of this tiny little kindness test that feels sort of innocuous, but actually it can be small scale changes that could actually lead to very large gains.

Alex Swift (Interviewer)

On a similar note, something else platform talk about is this idea of heroic versus compassionate leadership. The difference between leadership that seeks to understand people vs. The type of leadership that relies on law and order or punishment. Can you clarify the differences between the two approaches and say, what approaches you think leaders should be taking to keep people safe mentally?

Charlotte Waite (Platform)

There's a role for both type of leader. The command control leader, you know, is the leader who makes most of the decisions. So you'll know this leader, if you're feeling micromanaged and if you're feeling like there's has to be multiple sign-offs for any decision that you want to make or project that you want to get through, if you feel like there's slow processes around you trying to affect change or do any kind of creative work, but you also might know this leader because you feel safe and held because actually the boundaries are really clear, you all know where you are. This person is decisive, which is helpful for people feeling a sense of security and safety. On the other hand, then is a leader who is sort of aware of where the power lies and goes out of their way really, because they see that's what their role as a leader is, to disperse that power.

So, you're sort of much more of a feeling leader, you feel what's needed and you're prepared to put in what you're feeling. You're a real listening leader. So, your taking reflection both on yourself and your own style, but also listening to your staff. You're prepared to be vulnerable. So, you're prepared to get it wrong. You're prepared to take risks and in doing so, you are prepared to allow your staff to do that. So, there's permissions through those kinds of organizations, for people to try things, get it wrong. And they're not persecuted, they're celebrated for, we tried it, we failed, but this is what we learned. You know, they believe that a failed attempt to make change is always better than inaction. Whereas a more risk averse leader might feel like we're not going to change anything because it's too scary. Those are the two different styles

And I think you know, I have experienced trying to be the leader that distributes as much autonomy as possible, to people who I'm working with. And I've had some kickback from that in recent times because of the levels of uncertainty with which we're sitting with and people saying, 'well, this just feels like too much autonomy. I feel like I'm driving everything. I'm not being really sure of the outcome and that doesn't feel safe to me'. So, it isn't to say that a command and control leadership

style or a strong leadership style or whatever you want to say, it has to be completely gone. I think it's more about leaders who have great self-awareness and the ability to reflect and take feedback so that you are aware that there's times when you've got to take this, you've got to hold this for your team right now, you need to be holding these decisions so that people can feel safe and held in this moment to do their work.

And in other moments, it's time for you to get out of the way release your staff, allow them to be creative and, and really foster that safe to fail environment. The other point to say is about outcomes, I think, and I absolutely understand the need for outcome led work. So, if we're spending public money, there must be accountability. So, we need to know that what we're spending our money on is working. But what about behavioral outcomes? What about if this is more about how we are being than it is about how we are doing if what we know is that people do better when they feel connected. So, staff in organizations do better when they feel connected, safe, held, trusted. People in communities do better when they feel connected, safe, held, trusted. So, people who are accessing services will do better. So, what about some behavioral expectations of staff rather than output expectations, rather than only having measuring tools as to how effective an intervention has been or how effective a service is, what about some behavioral expectations of staff? If we are having behavioral expectations of staff and we have a leadership team, that's able to back that up by supporting it and modeling it, then you're starting to shift the culture towards a different emphasis. This recognizes that connection and trust and human interaction is the most effective way that we can deliver this public service rather than our outputs and outcomes.

Alex Swift (Interviewer)

On your point about recovery, just to finish off, at an individual or societal level, what are some of the things that you would like to see people do differently post pandemic to look after their mental health and that of others?

Charlotte Waite (Platform)

I think there's a real temptation, and I see already, to become more polarized than we've been before in the fight to be the person, the organization, or the representative of a group that has the biggest need or the biggest axe to grind. And I'm not saying absolutely that, as I've said at the start that we haven't all been affected equally, but I have a core belief that there's more, that connects us than divides us. And so some kindness towards one another in how we navigate the months as we build back better and fight for those resources, for the people that we are representing, I think some kindness and compassion for each other in that would be, would go a long way. I think learning to forgive ourselves of however it is that we've got through this, whether that means like me, that you've, I've done all the classics, you know, eating too much, drank too much.

Not always connected with nature every day, even though I know I should not always be the best parent that I could be and feeling the guilt of that. So, I would want everybody to work on forgiving themselves of whatever it's taken you to get through this then well done for having got through a global pandemic in whatever way you have. And so, it's with that spirit really of recognizing our own vulnerabilities in getting through this that I think must carry us through to recovery. And really, and I've said it all the way through the interview. It's about connecting back to our selves. So, allowing ourselves to feel things and it would be miraculous. And I think so positive if we could just manage to maintain this level of following our gut instincts and feeling our way through things would be a revolution going forward. And one that I think would be positive for all of us.