**Sarah Botterill:** Welcome to the latest AbilityNet LIVE! webinar.

Today we are going to be exploring mental health, how you can say, look after your mental health, whether you're at home. we're all spending a lot of time at home, you might be on furlough, you might be having to study from home. You might be looking after somebody else who is studying from home. , so we have got some amazing speakers today. I'm really delighted to be joined by such great calibre speakers.

I'll introduce you properly to them all in a second.

So, I'll just do a little bit of introduction and some housekeeping.

Live captions are popping up at the bottom of the screen. There is a Q and A window to ask questions and my colleague Mark is keeping an eye on those for us.

Please do pop any questions in the Q and A window, which you should see at the bottom of the screen, and we will be making a recording the slides and a transcript available after today and you'll be notified via email.

Slides in particular will have links which has been provided by the speakers and lots and lots of signposting there.

And we'll also be sending you a feedback form for any follow-up questions and feedback.

Just what we're going to be looking at today, a brief introduction to ability net and how we help. I'll just be telling you a little bit more about AbilityNet LIVE! and setting the scene with some statistics around mental health.

…and then I'll be introducing you to Dominique [[Dr Dominique Thompson](https://buzzconsulting.co.uk/about)], who's going to talk about young people and mental health.

Then we'll be passing over to Atif [[Atif Choudhury, Diversity and Ability](https://diversityandability.com/team/atif-choudhury/)], and he can cover a lot of ground in a short space of time, but I know he will also be touching on young people and mentoring around that.

Then we will be meeting Chloe, and she will be bringing the personal perspective from her [blog](https://chloetear.co.uk/), but also works with Scope around online forums and safeguarding, and we'll be talking about issues to do with online and mental health in particular.

Then I'm delighted to be joined by Vicki [Shaw], who is a BACP-qualified counselor, and she'll be bringing her own perspective there.

The Silver Line with Paul; we'll also be hearing, um, about a brand-new helpline that has been launched by British Red Cross. So that's a whistle stop tour of what you can expect.

So AbilityNet’s mission is a digital world accessible to all supporting people at home, at work and in education. And as we've touched on, a lot those things or happening in the home at the moment. So we're living in interesting times.

We have a network of volunteers who normally would provide support in the home to people [offering] face-to-face advice. You can still call us free on our helpline, and you can also access online support through, [My computer, My way](https://mcmw.abilitynet.org.uk/), [My Study, My Way](https://abilitynet.org.uk/HE-services/my-study-my-way), and by a series of [free factsheets](https://abilitynet.org.uk/free-resources/abilitynet-factsheets) or do have a look at those resources after the webinar as well.

In terms of the difference that we make to clients, we know that it has a big impact on them.

We can see from the statistics, they feel more knowledgeable, they feel more independent, they feel less isolated. Isolation can have a big impact on mental health, and it's something that we're all learning to adjust to at the moment.

So, it's not so much about the technology, it's about the impact that technology can have on building a bridge to make those connections for people.

You can find out about future [AbilityNet LIVE! webinars](https://abilitynet.org.uk/news-blogs/abilitynet-live-free-events-about-technology-and-disability), and I've put a link in there.

So please do watch out for future webinars coming up as part of this series as well. In terms of statistics mental health is something that many of us will experience. So, according to Mind, one in four people in the UK will experience a mental health problem each year; one in six people are experiencing a common mental health problem, anxiety and depression, in any week (figures also from Mind), and those numbers are growing.

So it's expected that there'll be 2 million more adults with mental health problems by 2030, and at this time that we're living in is, it's a really challenging time. And, it's been pressure on people in all sorts of areas, including mental health, in terms of older people and people living with disabilities.

It's important to recognize that those anxiety ratings, or mental health and emotional issues are higher among disabled people, and that's something that's present all the time. I know something that Vicki is going to talk about a bit later is mental health and wellbeing and disabled people.

…and a common issue is loneliness. And you can see that the number of disabled people who report feeling lonely is four times that of non-disabled people. So there's a lot of talk at the moment about the impact of…but it's important that we recognize that mental health issues are something that are present for a significant proportion of the population all the time.

So I'm just going to introduce our first poll now, and it would just be good to find out a bit about the people who have joined us today. So I'll just launch the poll, and this is to find out a little bit about how the people who are joining us are feeling. So just to find out whether you have been experiencing anxiety, depression, problem sleeping, we've heard on the news that that seems to be something that's becoming more common.

Loneliness, social isolation, none of the above or other.

Um, so I'll just give a few seconds. It'd just be interesting to see, you know, what, where are you all today? How are you all today?

So just share those results so we can see that lots of people are experiencing. Anxiety at this time. So 58% of people, also, lots of people are experiencing difficulty sleeping; some issues there with depression and low mood irritability. Um, we're all living in a world seems to have shrunk, I think, hasn't it?

So just introduce you now to Dominique. Dominique, are you there? You put yourself on mute. Thanks so much for joining us today. Um, I wouldn't do your CV justice, I don't think so. Perhaps you'd just like to introduce yourself and tell us briefly about yourself and your work.

**Dr Dominique Thompson:** Sure. Thank you.

Thank you so much for having me. I'm a GP by background. I spent nearly 20 years looking after university students specifically and have a particular interest in mental health. So young people, mental health is, is my interest. And then since leaving clinical practice. About two and a half years ago. I have written quite a few books, some for young people, specifically just short guides on anxiety, depression, and that sort of thing.

And one book for parents, parents with teenagers called how to grow a grownup. And I've also contributed to some academic books on mental health. And I've done TEDx talks and I give lots of talks about mental health and young people.

**Sarah Botterill:** Fantastic. And thanks for joining us.

So in terms of young people, what do you think are some of the specific challenges that they will be experiencing during this period of lockdown?

**Dr Dominique Thompson:** Sure. I mean, the thing for young people that we have to remember is that at this stage in their life, making friends with other people, bonding with other people outside their family is pretty much one of the key drivers. And so the tension they might be feeling at the moment, not being able to do that so well, uh, will be quite stressful for them.

So they'll be feeling the impact of isolation or being cut off from their social group really difficult. And the other big thing for them at the moment is they are worrying about their futures. They are worrying about that education. They're anxious about money or getting a job. And what will happen for their generation.

They've been called the Corona 20, 20, , generation that, I mean, there are real issues for them around their future.

So, I mean, there will be other specific challenges, but those are big.

**Sarah Botterill:** Mm. And you've touched on this issue, I think, which I know is one of your passions around uncertainty and young people. Can you tell us a bit more about that and some of the challenges and why that's an issue for this particular, the Corona generation, I don't want to call them that.

**Dr Dominique Thompson:** I know it's difficult, isn't it? So uncertainty is something that we've, uh, had to get used to over the last couple of months, but it's a real issue for us all, but for this generation in particular, because they are a generation that is used to getting fast answers. If they want to know something, they go to Google, Siri, Alexa, and they can get an answer. And as far as they're concerned, they get that answer quickly. And for them it's, you know, maybe not, but it's right first time.

So, they're not very good at dealing with uncertainty with the, “I don't knows” of life. I'll give you an example. If they would come to see me as a GP and they maybe had something like tummy pain, I might do some tests. I might see them a couple of times, and at the end of the day we would say, do you know what.

It's okay. It's nothing serious. We've done all the tests. We found out that it's nothing to worry about, but I can't tell you exactly what caused the tummy pain. It's now gone and you know, several weeks of pills, they would not be happy with that in the same way as perhaps someone with more life experience might say, okay, I understand that there are some things in life we don't have the answer to, but it's okay.

And it's that level of uncertainty that at the moment is proving really particularly stressful for young people. So that mismatch between. In parts of their lives, having all the answers, being able to find the answer straight away and at the moment, not knowing what's going to happen next week, let alone in September when you know they might go to Uni or they might go into work or they might try and find a job or go back to school.

It’s the not knowing that is really, really hard for them to handle.

And just very briefly, I know you've kindly written a blog for our website, but can you just give us a couple of very brief tips on I guess coping with that uncertainty?

**Dr Dominique Thompson:** Sure. I mean, um, I would say the phrase take back control, but it's been a bit hijacked.

But the point is that whilst there are many things that we cannot control at the moment. I use another phrase, which is plan what you can. So decide on the things that you have in your control and it might only be what you're going to have for lunch, or it might be where you're going to do your daily exercise or what you're going to watch on TV, but you plan what you can.

You take the control over the stuff that matters to you. And that you can feel good about deciding day-to-day.

So that's definitely a really useful thing to remember, and I do think it's important that we all remind ourselves that this situation, this difficulty, this really difficult time. We had time that we're living through will not last forever.

So to remember that there will be an end to this.

And then if you can, and not everybody feels up to doing this, but if you can look for some of those silver linings, for want of a better phrase, some of the little upsides to the current situation.

For me, it's wearing trousers with an elasticated waist that I don't wear at work.

But you know, it's about looking for the little upsides where we can, and only if you can.

**Sarah Botterill:** Okay. That's fantastic. And, um, do you have just one piece of advice for parents who are also sick at home with, um, maybe older children? How can they carry on growing their grown up in these strange times?

**Dr Dominique Thompson:** Yeah, sure. I mean, living with a lockdown teen and I have done. I’ve written a free blog if people want to read the more details. But I would say as a parent, remember them living at home, trapped with you is going against every evolutionary bone in their body.

They are driven from inside to want to be separating from you emotionally and physically, perhaps, but to develop their self-identity.

To be going with their friends and exploring the world.

So they may not even be aware of just how much pressure and tension and stress that creates inside them. So try to be tolerant of that. Try to understand that if they are grumpy. They may not even be aware of why they just want to be in their room and don't talk to me.

It's because they're driven from a very basic biological point of view to be separating from you and developing with their friends, you know, new interest and your life. So just trying to be tolerant, trying to be around if they want to talk to you. Um, if they don't want to join you walking with you on the daily exercise, let them walk behind you with their headphones on.

**Sarah Botterill:** That's fantastic. Thank you ever so much, um, for sharing that advice. Um, there are some useful resources that you've, um, passed on here. So, um, as I said, the slides will be shared afterwards and there'd be all sorts of advice in this slide deck, so please do follow up afterwards.

So Atif, I’ll pass over to you, if you can pop yourself off mute.

Just tell us a little bit about yourself, tell us about Diversity and Ability and why you launched it.

**Atif Choudhury:** Okay. Thanks. Hello, everybody. So my name is Atif.

I'm one of the founders of D&A, which is a social enterprise called Diversity and Ability.

You know, the time, I'll just be as brief as I can, but essentially it was designed to utilize the lived experiences of more marginalized learners.

Often we see tokenistic signing off or user experience dialogues, but we don't actually have enough lived experiences being drawn upon to actually teach.

So the idea was to look at the technology and see where it's working and what technologies haven't worked well enough.

What has been, what has been the human centered solution to it to make it more meaningful and who needs it to be great rather than who sells it.

And so what I want to do is, yeah, kind of build a small army of end users who have lived experiences of disablement and to teach the technology that they needed to be better than for themselves.

We've supported over 20,000 people in higher education, mostly and in the workplace. And we campaign a lot on the disability employment gap, disability pay gap, but also, fundamentally, to make these tools accessible to more people.

And tell us a little bit in the context of that, I guess, and those tools, you know, I know you've focused a lot on people who are learning. What about the consequences of learning in isolation, particularly for people who may fall into that category, has got those lived experiences. What are some of the learning challenges that they might be facing at the moment?

**Atif:** It is a critical question, really. It's as relevant as it's ever been. It's always been there, but it's just COVID-19 has exposed the brutality of it, I suppose.

In terms of learning isolation, I mean, I've tried to find what we mean by that is going to be folks who aren't necessarily able to communicate very well, how they thrive; they may survive, but they don't necessarily five and lots of structures that we're in at the moment.

What we're seeing is a lot of folks, we do a lot of work on digital justice for yourself on digital inclusion for people who can't access the technology, be it cause they're not in the workplace or they're not in higher education, but ironically they had the strongest need in terms of impact.

So that's going to be exacerbated at the moment. You're going to see folks who. In terms of learning isolation, you're going to face long-term literacy, digital literacy, but also physical illiteracy. Whilst we've seen some really good steps with where we're seeing folks being put into hotels, well, we're not necessarily seeing is how do we get people to know what support mechanisms are out there when they're in the hotel.

So for example, where I live in Brighton, and this may well be the first time ever that people in Brighton could potentially starve. And that sounds quite extreme, but historically there are access points and there are places where people are doing lots of good mutual aid stuff, but if you are in a hotel and you don't actually know where the support mechanisms are or you don't read, then you're isolated.

You're, you're dependent on asking hotel staff to know where things are. The future of literacy isn't really based on reading or writing anymore. It's about whether we can access the internet. And can we press buttons that will read to us or press buttons and allow us to challenge there is that, I mean, I don't do universal credit in terms of learning and isolation has come along and said you need to get online. We don't care if you're not online or you don't read. You just need to get online or to access your welfare. If that wasn't really tragic before the covid, it is because covid is where the saying is, you are isolated unless you're part of a family, unless you're part of a community, unless you're accessible.

And if you were in a hotel, for example, as I say, and you've been a rough sleeper, you're certainly isolated. And how do people reach you?

**Sarah Botterill:** I know we have a shared passion ability now annual sales in terms of the role of tech there, and it can be a real powerful driver in terms of bridging that gap. So, what are some of the positives that you're observing in terms of technology helping to reduce that social isolation and connect people at this time?

Yeah. I mean, I guess there's the question of balance really. I think I really love to talk about the wonder of the technology cause that's essentially what we do. And it's my happy space, I suppose. I mean we're seeing a change in the mental health and the applications and problems using applications on technology and the way that it's a growth industry that's never been seen before; you know, right down to stress management, therapy, mood.

Some really good software that the NHS is really showcasing, and that technology can change a lot of folks lives but the revolution for it to be really meaningful is going to need a human centered approach that isn't about collecting data.

It's going to be about people connecting, you know, algorithms tell them how to feel. That's a real challenge because we're in an age where that technology can be so agile. We're in a balance right now where we need humans to participate and to talk and to teach.

**Sarah Botterill:** The human element touches on the mentorship. Can you just tell us about the mentorship that you provide and how you're continuing to provide mentorship.

I guess in terms of the mentors, looking at how many people with the lived experiences can reach each other to say, this is what's quite difficult working online is sometimes it's what's not said is sometimes what we're doing now is zooming, but sometimes it's picking up how do we. How do we read between the lines? What are the intonations of what we say? How do say some autistic learners who struggle with nonverbal social cues? And how does the internet do that? So we're doing a lot of workshops around this for the workplace in higher education to make sure that remote support is as meaningful as possible.

We've done hundreds of them for higher education and universities as well as frontline anti homeless workers.

We're part of that mentorship is right now, particularly in spirit of COVID, and what's happening is looking at folks who would have had access to work equipment in their offices and then saying, what technologies, if they can't get to their office, what technologies can we implement?

Well, open source versions might be there, or how do we get that to be included so they can use it? It's very difficult for a lot of people who haven't got the physical equipment that they did have in the office, in their home, or the ergonomics are different. So, these are challenges that were, I guess, then she took him through the mentoring.

The key thing is we're making wellness action plans as part of the mentoring. So where you've got workplaces and social justice care, looking at what we need to do to make sure that people are connected, that we have so many people as we're touching on today, who are working online for the first time, or learning online for the first time, and as touched on earlier, but dominate really living in processing online.

So wellness action plans have a big role in setting support mechanisms together. Looking at what assisted technology can really help. What interaction really helps? How do we measure? How do we measure when we're feeling bad, when often we don't realize it until after we've felt better?

**Sarah Botterill:** I know there's so much that you could talk about, but there are some amazing links on your website, and I've listed some of them here.

So, as you've mentioned, and you've touched on their support for people who are studying for employers, for employees. And there are some key links here, and I know there's a couple of blogs that you just wanted to draw people's attention to. So as, as before, those links are all embedded into [00:24:00] the, um, slide deck, um, and people can have a read around on your website after, so that's fantastic.

Thank you. Um, so I just move on and introduce Chloe, if that's okay.

Hi. So, um, welcome Chloe. You have a kind of dual role on our webinar today cause you're representing Scope, but I know you also have your own blog and you’re a disability blogger. So just tell us about Scope first, and your role with them particularly to do with the online community.

**Chloe Tear, Scope and Disability Blogger:** So, my name's Chloe and I have been working full time for Scope for about a year now. My role is based on their [online forum](https://community.scope.org.uk/), which is basically a place for disabled people and their families to engage with each other, get in, get support, and just build friendships that, you know, are much very needed.

**Sarah Botterill:** I think that's come up from both of our previous speakers has needs, that social connection that we are all craving, and that's something that be provided via that online channel. Are you seeing, topics of conversation to do with mental health? Has that increased on the forums?

**Chloe Tear:** I think we do get quite a lot of mental health queries in general with those being an anonymous forum.

It does lend itself to that. And I think it is really good that we are giving people the space to discuss those topics. Since COVID-19 we have had a spiking, people feeling anxious, but also not being able to access things, which in turn will affect their mental health. So even if it's not direct posts, you know, members are feeling a bit left behind.

**Sarah Botterill:** And you've mentioned anonymity as a plus side, that freedom that, that brings. And what else would you say is good about the forums in terms of a place for discussing issues around mental health? What makes that a good channel, that online channel do you think?

**Chloe Tear:** I think because we have regular members and because we have such a broad spectrum of knowledge and support and experiences. We kind of all come together with the, you know, the mutual understanding of disability, whether that's you're a carer or you're disabled yourself. And I think that mutual understanding is a great platform to kind of to just be yourself or you know, you can say, I'm struggling.

] What can I do? But we also have the like more relaxed parts of the forum. Oh, we have games. Yeah. We say, what you having fatigue, um, you know, asking each other questions, quizzes. We try and keep it engaging and relaxed as well so we're supporting people's mental health and their disabilities, but we're also giving people a space to socialize, which is even more important at the moment.

**Sarah Botterill:** I think what previous speakers have said in that lived experience and bringing communities together that you talked about as well. We hear a lot about the negative elements of being online and things like social media. And I know part of your role is around safeguarding.

So do you have any tips that you can share for people who may be looking online or to those types of forums for mental health support at the moment.

**Chloe Tear:** Yeah. You know, I think reaching out is really important. Um, and as moderator and someone who does have to safe guard concerns, we get on the platform, we, there is a very fine line between letting people discuss what they want to and also it not being triggering for other people.

So I, if you wanted to discuss mental health, and you're all a forum that openly accept that, that's amazing. Be aware of your own mental health when reading the people's responses. You know, it's amazing if you can offer support and guidance to others, but being aware of your own mental health and the impact you have.

**Sarah Botterill:** I think for you blogging about your own experiences is something that has helped others, but I just say a little bit about how that's helped you as well.

**Chloe Tear:** Yeah, so I've been writing a blog for seven years, which is kind of separate to working. I started during my GCSEs. And I initially followed my education journey up until I graduate uni. I wrote about what it was like to have cerebral palsy and to be partially sighted. And to me, a lot of it was processing the changes that were happening as I was a young person.

You know, I wasn't taking the normal steps. My friends were, they were becoming more independent. I was becoming more dependent.

You know, I think during that life stage, if you are disabled, the balance between you and your peers becomes more evident because they are on and gain independence and that isn't necessarily feasible within the same capacity.

You know? Of course we can be independent and that often is with, which is altered independence, which is, they're just as important. Um, but in terms of helping my mental health, just being able to write whatever comes to mind, get things out on paper, just to kind of document any changes I've had. You know, I started to lose my sight, the beginning of university.

Um, so it's still something that is really new to me, and I think being able to put results is out there. That I needed a lifetime. You know, the I needed when I was in high school, for example. The fact that I can now create that and for that to be available to somebody else when it wasn't me. It is also really good for my mental health in terms of just being able to be productive and great resources.

**Sarah Botterill:** That's fantastic. Thank you. And I've embedded a link into the slide here. Um, and you do explore those themes again. Um, some of the ones that Dominique touched on, that uncertainty and that change, which is something that, you know, we're all kind of going through a national experience, but you shared your very personal experiences there.

Um, there's some, there's some great stuff on the blog. I would recommend it to people.

**Vicki Sherry, BACP-accredited counsellor:** Uh, I came into counseling, uh, after I came to a crossroad in my career. Um, prior to counseling, I was a police officer and, um, unexpectedly, um, I had health issues. Which basically resulted in me getting a diagnosis of multiple sclerosis. Consequently, I couldn't continue working in, in my role as a police officer from line with the public. Recently it would have been unsafe for me cause I was working as a dog handler. So, um, after I finish with the place, I had an opportunity to study counseling skills or to local college. Cutting a long story short, I did that, decided to go to university, complete my degree, et cetera. And then I set up in private practice working for myself from home.

**Sarah Botterill:** So lots of life experiences…

**Vicki:** the counselor is completely different, which is what I wanted from being a police officer.

**Sarah Botterill:** Yeah, so quite a lot of change that you've been through there, and I know you've been bringing your own lived experience into your work, and that you often work with people who may find themselves in a similar position to yourself going through a diagnosis or disabled people.

What are some of the emotional issues that come up when you're dealing with clients?

**Vicki:** There are many emotional issues that arise and often, it can be unaware to the person what they initially come for; it could then manifest into something else. But for example, we could initially start off talking about loss, whether it's a loss of a loved one, economic losses within, um, jobs, et cetera.

…equally, they can sometimes come up with unresolved issues from their past, so it could go back to childhood. Um, so have you been, excuse me, resolved from their past. What's an opportunity for them to make sense of what happened.

**Sarah Botterill:** Yeah. And some of those issues that you've touched on, again, I think, um, echoes of what lots of us are experiencing. So it may be the loss of the job or in your own experience, the inability to do the job that you were doing previously. Do you feel like, um, I guess the question is, is there stuff that we could, could learn from your experience with clients or that we could learn from your clients? Um, during this time of COVID-19?

**Vicki:** Yeah, I think, um, it's really important when it's needed to be able to ask for help from whoever, whether it be a family member or anything like that. And so, um, looking at, um, the clients when they, and come to me for help, et cetera, um, yeah, it's very different and difficult for them to ask for it.

**Sarah Botterill:** Okay. So ask for help if you need it. During this time of physical distancing, I mean, counselling is something that we typically think of as being provided face to face. So, what about the role of technology? I know, um, lots of counsellors have been adapting to do either telephone counseling or video counseling. Is that something that you're engaging with, and how have you find that. Tell us about that and what it would be like to be a client using that technology.

**Vicki:** Absolutely. I think there are different reactions from the client's point of view. I do offer both telephone and video counselling.

Video canceling especially is easier because face to face in keeping too overwhelming for clients. So, having a distance in their own home, for example, enables them to explore a bit more about the issues.

**Sarah Botterill:** So technology is helping to make canceling still accessible during this time and at any time, I guess as well, for people who are less mobile.

**Vicki:** Absolutely nothing that's important to remember because certainly for some disabled people, if they can get in touch and use technology, that still enables them to be in throne home and still have access to a counselor.

**Sarah Botterill:** That's great. Thanks. Thank you for sharing your experiences with us. Um, so I'll move on to, um, our second poll now.

So this is just to find out how people have been accessing support with mental health. So just be interesting to know whether you have rung a help line, have you access free counseling or online forums, something that you look for. To for support, whether you've received a referral via a GP, perhaps the support has come through an educational institution through support via your workplace.

Lots of workplaces [are] providing employee assistance programs and those remain available to all employees, including those who might be on furlough. So that's, um, a support line there for people. So, I just give it a few more seconds and we'll see, um, what people's experiences are of, um, accessing support, um, and the channels that you can get that through.

So just share the results now. So it looks like I'm trying to see which is the highest. So the highest is none of the above. Um, but lots of people accessing 25% of people getting support by a workplace. And as I say, that still would be available to someone if you were on furlough and people are paying for counseling. 20%. There. 18% receiving a referral via their GP. Um, 8% looking to online forums. So that would include the Scope one that, Chloe was talking about earlier. So interesting results there.

So now we're going to talk about, um, some support lines.

So I just pass over to Paul. Are you there Paul? I feel like I'm running the Eurovision here and come in. Paul, you're going to talk to us about The Silver Line. So tell us about it and the support that you're providing and who it's for.

**Paul Goulden:** Sure. Um, well the silver line is a free, confidential hotline for older people. It was set up by Esther Ranson eight years ago. Um, largely in response to her, her own bereavement and the feelings of loneliness that she observed in herself. And being there. The campaign new journalists that she issued, she took a look at, well, is there anything else available?

And when there wasn't, um, she decided to set up the silver line. Um, so typically, um, our callers are older people. They are lonely and isolated. Um, I started the role in January and one of the first things I did, we went to go and listen to some of the calls and, and typically the call the I listened to certainly, um, the, the lady found out, and basically she said, um, I just want someone to cheer me up.

So that's indicative of the calls we get through. So it's not a crisis line. Um, there's places like Samaritan's for that, but it is a emotional support. Um, a friendly ear to listen to. Um, calls normally lasted for an hour or so. Uh, and what we do as well is that if we identify any needs, then we will sign, post or refer callers on to other charities.

So for example, in October of last year, we joined, the age UK network and age UK have got, their information and advice line. So we often refer through to them, um, but also to other charities as well. If the need arises, uh, from, from what the caller presents to us.

**Sarah Botterill:** And are you seeing that the numbers have gone up during lockdown? Are you finding that people are feeling more isolated and then there's a greater need for support?

We saw a 30% increase in the number of coolers, um, that, uh, during that week that, that, uh, the lockdown was, um, announced. Yes. So there, there, there's an increased need up on almost every call.

So that's a big focus. But what are some of the issues that are coming up around that?

**Paul:** It's, it's been very interesting for us because actually for last cohort of our callers, um, the lockdown is, is almost business as usual. Um, if they've been suffering from long-term health conditions, if they've been lonely and isolated previously if they've only had the television for company, they've only seen other people because it's care has been visiting them.

Um, frankly, the lockdown isn't that much different to them. Um, so that's certainly something that's come across very strongly from our callers. But what's happened with coronavirus is that it's overlaid more feelings of anxiety. So. Worry, for example, about whether the callers are going to add sort of the carers coming in are going to be able to, um, are they, are they going to bring Corona virus in with one of the things, one of the trends that we saw that emerged about two weeks ago was, um, uh, caller's reporting that they were, um, worried about dying alone and where, and in consequence of that as well, and link to it was this idea that they were. Uh, not wanting to access the NHS because they were worried, first of all, whether or not they might expose themselves to the virus. [00:42:00] Um, but also because they were listening to the behavior and the messages, and then didn't. Didn't want to be a burden. So what you saw in the media around, uh, doctors saying that there's been a drop in calls and visits because from, from people accessing the healthcare system, we saw that reflected in our calls as well.

[00:42:18] Um, so yeah, it's, we were dealing with isolated, lonely, vulnerable people anyway. And Covid-19 is really this overlay day, a level of anxiety over that as well. Um, and I think that's something that we're seeing a lot. It's great to be talking about mental health and these issues with all of you today. Um, and there does seem to be increased awareness of, um, older people or disabled people where they're, um, could be living in isolation.

**Sarah Botterill:** What are you hoping that we can learn from this period? You know, what does the future that, like there's lots of talk about not returning to normal, but to a new normal. What are your hopes there?

So, well, I think the first thing to note is that we're, we're not going to have this VE day celebration, mass end of lockdown where we were rushing to the streets and start celebrating.

Um, this is going to be a long and drawn out process of going from where we are now to whatever we whatever becomes, as you say, the new normal and in a rather perverse way. I think that's a good thing. Because we've seen some really good examples locally, um, anecdotally, but also in the media as well, where older people have been really valued for their contribution.

Um, they've been in touch with people. They've been doing things far differently than they used to do before, sometimes using technology. So I think this sort of long tail of where we are now to where we're going to get to will mean that those, um, some of those measures that have been put in place will be embedded.

Um, they will be, they will become the normal. So it won't just end because lockdown ends along the end of lockdown. We'll talk over a long period. So therefore, all of these, you, of the way that we connect with people will become a norm in itself. And that can only be a good thing. Um, for me, I think one of the, one of the fantastic things has been the way that older people have been valued and recognized.

So we've seen captain Tom and his fantastic, uh, fundraising efforts, but they've also been. Yeah. These new ways of people connecting with older people, relatives, keeping in touch sometimes through creativity, some through quizzes and online, bingo. All of those things I think will stay with us. I think that does bode well for tackling loneliness in the future and by implication mental health.

**Sarah Botterill:** That's great. Thanks ever so much for sharing that with us. Um, so the details are there and I know there's more information on your website and also as you say, part of the, um, age UK network and this and links coming up there cause they've got a lot of, um, useful information on their site, but also some cabbage specific information as well.

So, um, Gill, thank you for your patience over to you Gill. Are you there?

**Gill Moffat, British Red Cross:** I am indeed. Thank you very much for having me. It's been fascinating listening to everybody else.

**Sarah Botterill:** Well, thanks for joining us. So, um, tell us just briefly about your role with the British Red Cross, and then I think you've got some news for us about a new support line.

**Gill:** I'm a trustee with the British red cross. I also sit on our psychosocial support team, which is a team that assists now and UK nationals caught up in situations abroad. So that might involve evacuating people from, um, Southern conflict or from a natural disaster. Most recently that's been, people caught up on cruise ships as a result of, um, covid-19.

We, we also, um, provide psychosocial support to people at the infected blood inquiries that are ongoing. Um, and on top of that, we have, as you just said, um, started a coronavirus support line with the organization, and I'm a supervisor within that support line.

**Sarah Botterill:** Great. So. There's obviously a need. We've just heard from Paul about that. Tell us why you have responded in this way. A bit more about the helpline, who can call, um, when it's available. The number is there and there's a link to the information online. But tell us a bit more about it.

**Gill:** We, the British red cross set up the, um, support line essentially to provide emotional support, you know, listening year to folk who were shielding or self-isolating as a, as, as a result of Corona virus.

What we found was that in fact, we were getting a huge number of calls from people seeking practical support. Um, and not just emotional support, so people maybe needing food and medication. Um, it was quite incredible the number of people who've managed to slip that the net there. So what we were able, what we've been able to do with that is that, um, we're potentially able to hook them up with their local authority who can often assist or with some other agencies who can assist, um, um, or, and we also have our own British red cross emergency response volunteers for doing lots of delivering parcels, collective prescriptions, dog walking, all sorts of things that they are doing at the moment. Um, what we have found is that as lockdown has gone on for longer, people are finding social isolation, increasingly challenging, but the emotional needs are greater. And that having that support line available to people, having that listening ear.

That voice that lets you have a conversation that reflects back your thoughts to you. It just, it helps you sort out your thoughts. So it's really crucial to folk. Um, at this time, it's not about doing things to people or for people. It's very much about enabling them. To find their own solution to decide what's the best option for them.

Um, you know, what's right for me is not what's right for you. And I think, you know, we, we heard from Dominique earlier, I loved your phrase, Dominique, about, um, plan what you can. It is about people having lost control. And we want people to, to be able to take back control they can, to plan what they can and to think about, you know, to consider what it is that that's making them feel stressed to acknowledge.

Um, acknowledge that and listen to the effect of that stress and anxiety on them and to find a way of managing it. You know? And, and it's about them finding a way that manages it by being able to speak to one of us on the food. It's just letting them. Verbalize those thoughts and get that hair droned all.

Um, we want them to, as, as we said, to plan what you can. We've been speaking about take back control and we want them to enable them to, to manage that stress. And, you know, we have some resources that we can signpost them to that might help with that. That's great. Thanks ever so much for that. Um, so I will just move on to our third poll here.

Thanks so much for sharing that information with us. And I just comment that our support line is open from 10 o'clock in the morning till six o'clock in the evening, seven days a week. It's open to absolutely anybody who wants to call it. And if you do fall out with those hours, you will get an answering machine, but someone will call you back.

**Sarah Botterill:** That's fantastic. Thanks. Ever so much Gill. So, I just launched our third poll here, and this is just to find out, um, if people are happy to share this information, don't, if you don't want to, um, just to find out the age of people who've joined us today. I feel we've covered a lot of ground.

We've talked about the challenges that younger people are facing, and also some of the challenges that older people are facing, but lots of shared challenges around, um, social isolation, loneliness, and the distancing.

So I just end that poll and share the results with everybody. So it looks like we've got quite a spread here now, 95 classes. So, um, Tom didn't join us today. It's a shame. Um, so we can see that 21% of you are 25 to 34, 26%, which is the highest, 35 to 44 45 to 54 year olds, 24% and 55 to 60. Four years old, 20% and then down from there to 65 to 74 year olds, 6% so thanks for sharing that information, everybody.

Okay. Um, so the rest of the slides has a whole long list of links to, um, other organizations, um, and including the people that we have spoken to you today. Um, so I'm not going to read all those out, but they're there as a resource. And there are people who can support in crisis.

I just wanted to include those links there for anybody, if they useful.

AbilityNet has lots of resources around mental health our website. So many of those are focused on studying. So we have apps that can help you focus in study; there are specific apps for anxiety that we've listed; we have a list of ways that technology can improve your mental health, factsheets on how computers can help you manage stress; and a lovely blog about the evolution of the AI therapist.

So, do look up some future resources on our website, and there's also a list of all the regular resources here, the helpline that I mentioned, links to ability net live, my computer my way and I'll fact sheets.

I don't know if we've had any, any questions come in.

**Mark Walker, Head of Marketing and Portfolio AbilityNet:** Yeah, I think probably the main question, it would be good to go back to it. Just to talk through technology tips and we've heard talk of zoom, you know, we're becoming familiar with all of the sort of conferencing software. It's hard for ability net to overstate really amazing that's been for us in the last few weeks.

Being able to use. Zoom and conference software too. I mean, we were running webinars before, but suddenly we're getting huge numbers turning up. Lots of interest in it. People are, people are using it for personal and professional use, but I wonder whether there's any other particular pieces of technology relating to mental health.

I know there are apps that people, um, could recommend. I saw that Atif has mentioned some resources on his website. Could we get a couple of top tips around the technologies that people are using that they're finding the most helpful? You know, over and above the most obvious things that we've heard about so far. Anything that really jumps out that you don't think people will necessarily be thinking of, um, that could help them with their mental health, sort of managing their time or organizing themselves, those sorts of things. It's anybody got anything to offer on that?

**Paul, The Silver Line:** Basically one of the things that The Silver Line provides as well as the helpline, um, there's something called silver circles, which is basically telephone conferencing system.

It's done over the phone. Um, and we do, this week we got some RAF veterans. We've got some seafarers organization as well. And. But just the feedback that we get off that is actually, I mean, it's almost like it's like a book club that's done over the phone and it's curated by one of our staff members. And that allows the members of the circle to actually speak to people who come from the same background as them and to share their experiences.

The fact that it's moderated gives a little bit of a safety net as well. But we've, we found that the feedback off that is fantastic. And the demand for that is growing as well. So again, it's one of these ways in which technology can be used in a slightly different way than we much done already.

[00:54:29] Um, to help to help with mental health. We're certainly looking at growing our service.

**Mark:** Great. Thank you. Anybody else got any top tips technology-wise for, um, maybe for students as well? Thinking about how they're managing their time and having to do work on it…Dominique,

**Dominique:** there are obviously apps out there about managing time, but I was just going to mention, uh, two apps in particular.

One is called the student health app. It's approved by the NHS. Uh, library, um, which I was part of the team that developed it. And it is a sort of anything and everything you ever needed to know about student health, rough guide sort of thing. And the other one is called distract app. And um, that one won the BMA, um, patient awards this year.

And again, it's on the NHS app library, which is always a good way to know they've been checked. Um, and that one is to help anyone who's sort of feeling, uh, having thoughts of self harm or, or worries around that sort of thing. And they are, they are particularly good, um, apps designed with students in mind.

But for any young people really.

**Mark**: Great. Thank you. Any more? I think I'm the mental health sort of aspect of the um, app stuff. We do have things on the website, on AbilityNet website as well I should mention. Um, and what we'll do when we wrap up from today is put some links into the page for the webinar, which are just purely the link.

So we'll just list any links that have been mentioned will be dropped in there. So we'll obviously gather those from our panelists as well. Jill had something to add in that.

**Gill:** Yeah, I think people often think of red cross as first state and very much practical first aid. But we also offer, um, mental health first feed, um, uh, advice and, and courses.

So if you go onto our website, you'd also be able to get some information and it goes through that camera or framework that we use that tries to help people to just consider. Well, their situation is to help them to acknowledge that and get right through to resourcing it and enabling them to do things for themselves.

So there's lots of information there.

**Mark:** Great. Thank you. Chloe, you've got something to chip in.

**Chloe**: And then just the, um, a personal that I only found really helpful when I was in uni. It's called flora. And so you basically set time that you go into work. Like for example, it could be 10 minutes, it could be 30 minutes, and you basically can't use your phone for that amount of time. Um, which is something that a lot of us do struggle with. You know, if your phone's there, it's quite easy to just pick it up. Um, but you kind of, you grow a tree in the time that you've sat on your phone. So. It made me do my dissertation.

**Mark**: Nice. That's a nice recommendation. Yeah. Yeah. I'm also a big fan of flora is, there's a lot to be said for switching off.

Do you know? Um, and then, um, yeah, I mean, there is a lot. I mean, there's some really good stuff on it. A certain DNA site. So I've added a link on to that. But I do think, um, moods scope as well, really worth looking at as well. It's, um, self-tracking but it's very much about peer support. And that I think is really important for people who are feeling isolated.

That there are other folks who are going for it and it's not, it's happening with them rather than to them. It allows you to self track to really check in with other moods, scope users, which I think is really important.

I liked, I'm a big fan of sort of the anticipatory and that authentic dialogue that people need to have. Uh, I often, when I say things that are. Not necessarily connecting to social economics of other people's realities. Sometimes you can switch off, whereas when you're seeing stuff that's really driven by peers who could, who face a similar anxieties and similar barriers, it can be quite encouraging.

**Mark:** Cool. Thank you. Um, the other thing I would add in, um, from AbilityNet’s point of view that hasn't been mentioned, is that we have a network of over 300 volunteers. I think a lot of people do struggle with their technology for all sorts of reasons, whether that's very basic access or beyond that, uh, students struggling with technology.

Whether they're students working with technology that previously could have got support for in the university, for example. Um, we have a network of volunteers. I know other organizations do as well, but I think that part of that reduces the stress. Knowing somebody's there to ask for help.

Um, you can call our 800 number. We've mentioned various numbers today. I think part of the, the line to cross is feeling like you can get that help and ask for that help. There's lots of it out there. Um, and our volunteers in particular, I know, um, are doing an awful lot of work remotely now. They used to go into people's homes, so they're beginning to tackle a lot of these questions around loneliness and social isolation as well.

Um, so there is a lot of help out there and, uh, the technology is connecting you into those sort of networks. I think that's the way to think of it. Cool.

**Sarah Botterill:** We're going to share the video, but we will definitely be documenting all of the links and pulling them together onto the webinar page afterwards.

Fantastic. Um, so just a huge thank you from me. So as I said, this is part of a series of webinars. Um, and there's a link here where you can find out information about, um. Past webinars and recordings and the upcoming webinars that we have on offer. Um, if you found this useful and you are able to donate and help us to continue to support people by our helpline and through the volunteers and through future better lives, that would be fantastic.

Thank you. And there is a link here as well. Um, and then, uh, my biggest thank you of the day to all our panelists. Um. Yeah. Sorry, we didn't have more time for all of you, but I think we've had a really brilliant bunch of people today and I hope everybody who's joined has got as much out of it as I have.

So huge. Thank you to everyone. Um, and as Mark said, we'll be putting those additional links, um, recording and more information and everybody will receive an email which will take you there. So thanks ever so much everyone thinking.