

Likewise in depth



The issues we seek to address

Likewise was founded in 1988 as the Holy Cross Centre Trust, to support the marginalised, socially excluded communities around Kings Cross. The simple vision at the start was to address the need for companionship, support and a place to meet to have essential human contact. The intention was to create a community space for all people to be safe to be themselves, where nobody attempted to 'work for' clients, rather to be alongside them.

The threads of working alongside people in an informal environment, prioritising relationships, being human, and creating a meeting place for people experiencing mental ill health and social exclusion are all continued by Likewise today. Our clients range in age from 18 to 80+, with an average of 42-44 (the average age of a mental health diagnosis in Camden is 37) and are in line with NHS Camden's serious mental illness demographic data, with most also experiencing multiple, complex issues. The percentage of people with a serious mental illness is almost 83% higher in the most deprived population quintile compared to the least.

An increasing proportion of our clients have particularly complex needs. As we have become renowned for our capacity to work with complex clients in a way that other services cannot, we receive increasing numbers of referrals from mental health teams and psychiatrists who know that we can build strong relationships with clients that have struggled to engage elsewhere in the system.

We believe that public services aimed at addressing mental health and other complex issues are fundamentally flawed and ineffective because the approach is fragmented and dehumanising. Services are focussed on achieving a predetermined target outcome for a specific issue, rather than taking a holistic approach to looking at the complex reality of people's lives. A review of 30 years of evidence around New Public Management (NPM is the prevailing public service model) practice declared: "So what do we have to show for three decades or so of NPM reforms? The short answer seems to be: higher costs and more complaints" Hood and Dixon (2015).

In the desire to fix people, the social care sector often focuses on clients' problems in order to solve them. Through our work in our community, we have found that the stigma associated with various personal and social problems can be incredibly alienating. When that is exacerbated and highlighted by particular services that are only for the 'problem' people, it is the difference of those people rather than their sameness which is being emphasised within that community. Any sense of belonging can become dictated and bounded by their particular 'problem' rather than through connection to any broader community and the empowerment this generates.

In most services, a professional who is seen as the 'expert' decides what a good outcome represents, and invests in the solutions to help bring it about, but we recognise that it is the client who is the expert in their own context and life. We think that creating a cohesive, resilient and empowered community which looks at the person first, outcome second, is the only way to achieve genuinely sustainable and preventative change.

LIKEWISE – LEARNING, DOING AND BELONGING

Our solution was – and is – to work differently. We see people in their fullness, providing them with a sense of acceptance and belonging, maintaining a learning mentality to ensure we stay open to the complexity of individuals and their situations, and think in terms of a pragmatic and flexible 'doing' that is defined by the complexities of our clients' lives rather than any specific remit or rigid 'solution.' We put relationships before outcomes, in the process actually enabling more

positive outcomes to emerge. And we emphasise the importance of emotional intelligence, recognising and reflecting on the role of our own feelings and how this plays out in the work, allowing for the kind of neutrality and openness that enables better decision-making, flexibility, and genuinely person-centred care. We have a unique workplace culture with tools that allow these principles to flourish at the frontline, and as a result are able to support our clients to make the changes in their lives that matter to them. We're committed to learning and growing together, championing the evolution of organisational culture, mental health services and social care to be more human, adaptable and responsive to people's lives.

During the pandemic, like many charities, we shifted as much of our support online as possible and adapted to meet our clients' needs in different ways. We co-created the Support and Connect service, bringing together local VCS (Voluntary and Community Sector) and clinical services to respond to the pandemic and build a more joined-up support service. Our award-winning success in this has led to us working much more closely with the local NHS and mental health services in trying to transform local mental health services to create a more human and connected experience for local people living with mental ill health.

"Likewise have been a crucial part of our Covid response, and the way you have come together in partnership with the Council, Camden and Islington NHS Foundation Trust and other voluntary and community sector organisations has been exemplary."

Jenny Rowlands

Chief Executive, London Borough of Camden

Our proposal



There are two overall aims to our work:

- To help people finding life difficult (emotionally and practically) to better navigate it, feeling a sense of acceptance and belonging.
- To influence change in the health and care system so that organisations and services become more human, adaptable and responsive to people's lives.

As we explain, our work results in a wide range of outcomes depending on what is important to each of our clients.

Common themes include developing and maintaining positive relationships (with friends, family, clinical and statutory services) and accessing the right support from the right professionals; being heard and understood; maintaining a healthy and safe home environment; improving health outcomes (e.g. better management of chronic conditions); managing finances better; self-care; crisis management; and making a meaningful contribution to the local community.

There are three strands to our work that are interconnected and support these aims:

1. **1-to-1 support:** Embracing the complex reality of people's lives, we provide 1-to-1 emotional and practical support to around 260 people, at home and in the community.
2. **Learning programme:** An experiential learning programme, supporting around 160 volunteers and placement students to make an immediate contribution in our community centre and 1-to-1 work, whilst equipping them with the emotional intelligence, skills and experience needed to better manage their own wellbeing, meet difference with acceptance in their personal networks and become leaders and influencers in the social care system.
3. **Community programme:** Our community hub in Swiss Cottage offers a safe space for people (200+ in the year pre-Covid) to explore a range of wellbeing activities and events, whilst creating opportunity for connection, relationship, belonging, support and the coming together of a genuinely diverse and vibrant local community.

1-TO-1 SUPPORT

In 2020-21, we provided 5,272 hours of support, working with around 264 clients, which we expect to increase this year due to rising referral numbers. Feedback shows 90+% of people were satisfied with the service, 100% felt they had a good relationship with their key worker, and 80+% felt they had achieved what they wanted to achieve in the service, with 70+% feeling they were increasing their wellbeing / better managing their mental health.

"Um, now, I just accept that sometimes things are bad, I get unwell, sometimes I feel really anxious, sometimes I feel depressed, I know I'm gonna come out of it with support. I can work through it. That's made a big difference, it really has. In fact, I have not been in the Crisis House for nearly two years. So that is really a big step for me."

On top of this, qualitative analysis provided a range of outcomes – sustained employment; voluntary opportunities; support through crisis (with two people suggesting they would not be alive without the service); improving relationships with clinical teams; bringing 'colour and purpose' into

people's lives; and, most resoundingly, the fact that people felt someone was consistently there for them. In the often complex and unpredictable changes that come with both mental illness and life in general, the 'touchstone' we have provided has been key to both cope with crisis and take advantage of opportunity. Throughout interviews and feedback forms, many outcomes were unpredictable but instrumental to change and appreciated by clients, for example:

- Being able to walk the dog alone after four years of either being indoors or being accompanied;
- Going on the tube after decades of avoiding it;
- Being able to clean parts of a house after years of hoarding;
- Being able to stop feeling the need to 'please' people so much and start taking control of their care;
- Being able to sit and talk in a coffee shop despite being 'petrified,' after years of feeling 'trapped' indoors;
- Being able to attend Narcotics Anonymous;
- Staying out of the hospital or Crisis House for the longest period of time in the last decade;
- Confidence; optimism and positivity; friendship.

'Cara' recounted how her visits are usually similar – she and her key worker go shopping together and have a chat. However, as someone who hadn't left the house in three years, this was a significant outcome – 'just getting out' was what mattered to her. It also became apparent that further significant outcomes emerged. Through these visits she had come to get to know the staff at her local shop and was even informed when some of them were leaving so she could say goodbye. The impact of these

small, community interactions have recently been found to be significant for wellbeing and belonging. On another occasion, she and her key worker had chanced upon a poster for a writing course – they talked about it, visited together, and Cara is now on her third course at the same community centre. These outcomes were not planned, but emerged through the relationship and played a vital role in Cara's sense of wellbeing.



This support is provided through our Pod model, with each Pod having approximately 25 clients, supported by a Pod Leader and two support workers (staff), two student placements and four volunteers. Each of these clients will have varying packages of support, ranging from a couple of hours a week up to 8-10 hours, depending on their needs. The Pod Leader works with each client, undertaking the initial assessment, building a relationship and creating a support plan with them. The Pod Leader then gradually introduces others to the relationship, who will start to conduct some of the 1-to-1 visits, with appropriate safeguarding training, procedures and policies in place.

First and foremost, people need to feel accepted for who they are and a sense of belonging to their community. We think this comes through creating relationships, and spaces where people feel safe to be themselves. These relationships and spaces are underpinned by a mutuality of acceptance, learning and doing together. When you are valued as you are, risk, change, and failure become safer – regardless of struggle or mistake, you remain valued and loved. This safety means these difficulties are not things to be afraid or ashamed of, and so can be springboards for change. Everyone involved in a pod – the pod leader, volunteers, clients – is considered a learner, which fundamentally changes the dynamic of the relationship. There is no expert servicing a passive, needy recipient, but rather two learners both engaged in shared experiences in which both are learning and contributing.

Secondly, change requires courageous conversations that are direct, human and light. We are proactive in naming the elephant in the room, playing with healthy conflict and bringing to the surface that which people are tempted to avoid, all in order to normalise more challenging and uncomfortable experiences, reducing the fear associated with them. Thirdly we have to be curious about what is below the surface, and in

the wider context of a situation or person's life. We always ask 'what else might be going on here?'. Fourthly we acknowledge that we all have something to learn and something to teach. We all have needs and we all have something to offer.

When trusting, accepting relationships are established, people are better able to start doing. They can take the kind of action that brings purpose, meaning, and a sense of growth and achievement. The activities and outcomes are not specified in advance – as is typical of many services – whatever is done is a direct result of who that person is, and we work hard to make sure we take the fullness of a person into account and respond to the diversity of the people we work with.

Doing is also pragmatic – where we can do something, we will. Many people have told us how this is often not the case in the services they interact with due to rules, bureaucracy, or tightly-defined practice. We want to support people to take advantage of opportunity in all its diversity – if that means changing a lightbulb, attending a karate group, or a spontaneous singalong in the middle of a meeting, we do what we can to let it happen.

Our flexible role is seen as particularly valuable given the range and complexity of services clients are accessing. Every client interviewed in our evaluation referenced engagement with at least one of psychologists, psychiatrists, care co-ordinators or paid carers. As such, the value for a majority of interviewees was not simply the service itself, but the way it complemented, compensated for, or built on other services.

LEARNING PROGRAMME

Volunteers and placement students are given front-line experience, alongside formal training, comprehensive support and learning structures to develop the skills, emotional intelligence and values needed to engage with difference in society in an inclusive, accepting and relational way.

Last year, we worked with 188 volunteers who provided 2,000 days of service. They varied from long-term mental health service users dipping their toes into the world of contribution and volunteering, through to placement students working with us for 3-5 days per week over 8-12 months on a formal learning trajectory. During the Covid-19 lockdown we had 13 creative therapies students and we currently have 20 placement year students. Our diverse group of volunteers and placement students have mostly come to us with two common aspirations of their own; to contribute and to learn.

Our volunteers and placement students are involved in 1-to-1 work with clients, where they can offer a different dynamic and reduce dependency on the Pod Leader. Crucially their involvement, allows the people we work with the opportunity to re-define themselves in a new relationship where they can contribute to a student's learning, opening the possibility for enhancing self-worth.

Our volunteers and placement students also contribute to our Community Hub, providing a wealth of accessible wellbeing activity – walking, baking, reiki, writing and more – and filling a gap in service provision in Camden through our Creative Therapy Programme, which in the first six months of 2021 has seen over 60 referrals into 1-to-1 and group, Art, Dance Movement and Dramatherapy, provided by our trainee Creative Therapists.

There are three levels of outcome from the programme:

1. A level of engagement with self.
Individuals with more understanding of their own wellbeing, development of self-awareness and emotional intelligence.
2. Engagement with people in our community. Meeting difference with acceptance, seeing exclusion and making the move to include, being less afraid and moving beyond our bubbles.
3. As a professional in the sector approaching supporting people in a more relational and accepting way.

Looking forwards, we are exploring a number of potential opportunities to build on the Learning Programme as an embodiment of our 'people alongside people' and 'co-learning' ethos:

- We'd like to expand beyond the core of psychology students on our placements to reach more multi-disciplinary practitioners in the sector, including graduates, undergraduates of other subjects (e.g. in social work, nursing, community development)
- We'd like our Creative Therapy Programme to become a year-round, established offer for both students and people accessing this service alike
- We are exploring an income generating training and consultancy offer that would share our knowledge and skills in organisational learning culture and working practice with individuals/organisations in the social care sector and beyond.

COMMUNITY PROGRAMME

From its foundation in 1988 as the Holy Cross Centre Trust, Likewise has been a place of innovation in bringing people together, a community meeting place serving its locality, a place where people can come for support, companionship and feel safe to be themselves.

Over the last few years, Likewise has been running a Community Hub largely based around two session structures, an inherited mental health focussed day session and a Global Café serving our international and refugee community, plus an array of small group activities and therapeutic offerings serving the people attending the day centre and our 1-to-1 support. In 2019-20, we delivered 400+ community sessions and 18 regular community activities, with support from 188 volunteers.

Having paused these services during Covid, we have reviewed what our Community Hub can offer to meet the needs of the emerging future, free of barriers such as cost and exclusivity. We see it as being a place to be for everyone with a range of low cost and free activities; a place to socialise or be quiet, somewhere to sit, chat, cook, dance, stretch or do nothing.

Through our learning programme, we have developed hundreds of people who, when they come across someone in an emotional crisis,

or with poor personal hygiene, or with difficult behaviours, will be able to respond very differently to how they would have prior to their time with Likewise. We want to achieve this through our Community Hub, so that people from our wider local community and our clients can spend time in the same space and learn to respond to each other as they are – with emotional intelligence, acceptance, and as a human to another human.

Through a series of trial projects with a mix of structured and informal options, we're going to open our doors in a way that ensures we are able to review and adapt based on feedback from our community. We will do this through committing to ongoing deep listening, creating a continuous feedback loop to capture the ideas, feedback and energy that exist in the community and use this as a platform to build activity and events. We plan to work in conjunction with the learning programme to build a project structure which connects placement students and community members with shared interests, meaning activity is grown organically from what is relevant to our community in that moment.

For example, someone expresses interest in running a group and we support them to get this going, or someone has an idea for something they want to do (eg. trips, baking) and we set up something to get this going, resourced in a large part by placement students and volunteers with aligned interests.

Wider impact - influencing the system

Whilst we work hard to support clients in a way that we know works, we are with them for a tiny percentage of their week. We see 1-to-1 clients for an average of two hours a week – during the other 166 hours that week, the impact of the wider health and social care system is profound. From the relentless challenges of housing to the over-stretched mental health services and the short-term nature and restrictive referral criteria of support services, we often find ourselves picking up the pieces of a sprawling, complex network.

This is why we also aim to influence the wider system and community that people live in. We see this as happening in three ways – through the ripple effect of our volunteers and students taking their learning into their professional practice, through our community events that bring people together and through our emerging work with local statutory and charity partners.

Each year, we work with hundreds of volunteers and placement students. Like all of us at Likewise, they come in with good intentions and plenty

of misperceptions. Through their experiences with us, they leave with far more openness, self-understanding, and comfort with the challenges of mental illness, behavioural differences, and emotional realities. Across Camden and London, there are now hundreds more people who, were they to meet our clients, would be accepting rather than afraid or avoidant. Even more than that, should they come across anyone seemingly 'different,' they would have a set of tools and capacities that would enable them to understand and support that person.

A similar outcome applies to our community open days, where we bring together a combination of neighbours, friends, and clients to enjoy activities, food, music, and socialising. Clients aren't distinguished, but part of the melee. We delight in these events because it feels like there is a tangible shift in our space from 'the place where mentally ill people go' to 'the place where we all get together.' Barriers are actively broken down even through these short experiences.



Finally, we have recently found a space where our ways of working emanate out and impact the local mental health and social care system more broadly – the system in which the vast majority of our clients spend many years moving in and out of. We have been able to bring in our values, build more human and productive relationships, and start to shape the way the local partners interact and deliver services. We've also found friends who want the same things we want, building alliances with brilliant people and organisations who used to be seen as competitors.

When the pandemic broke out, the opportunity to do things differently surprised us all, and the vital importance of our networks became clear. Eager to act as swiftly and potently as possible, Camden Council and the local NHS Trust brought together local charities to co-develop a rapid response. Like everyone else, we wanted to help as much as possible, and quickly got involved. The result has been hugely encouraging – we have worked closely, openly and productively with statutory and charity partners to provide vital support to over 200 more people during this crisis, and seem to have built a systemic response that has shared purpose, genuine collaboration, transparency and high functionality.

We have brought our values into this collaboration, leading challenging, honest conversations, recognising our own biases and assumptions, and building excellent relationships. This network of people and organisations has huge potential for local influence and systems change, as well as the immediate impact of providing food, medication, and emotional support to people living with mental illness in Camden at this difficult time.

We are now collaboratively leading efforts to use this as a basis for a much wider systemic change. In just six months, we moved from reluctant participant and critic of the system to fundamental shaper of it, reaching hundreds of people and winning awards for our effort.

We plan to build on this area of our work through the following two initiatives:

1. Community Mental Health transformation programme

There is a national transformation programme being rolled out across England (April-21 to March-24). We are now officially recognised as one of the key partners driving this project at a local level (Camden). As part of this work, we are co-designing and implementing new neighbourhood-based community teams that are made up of professionals from the local NHS Trust (health), local Council (Social Care) and local VCS (1-1 practical and emotional support and local community partnership development). In every interaction with partners and collective decisions, we bring with us our learning mindset and our approach to relationships.

2. Commissioning of the Resilience Network (an Alliance of VCS mental health organisations)

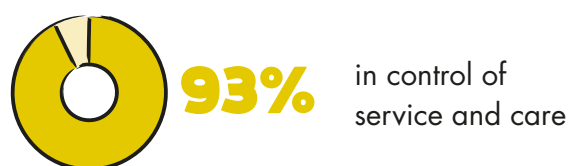
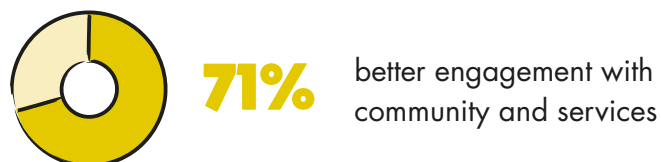
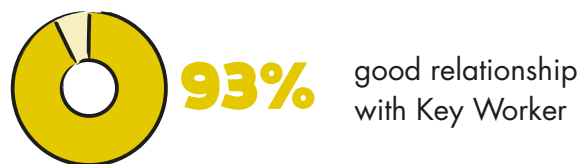
We are aiming to win the tender for a 5-year partnership commissioned by the Local Council, together with three other VCS organisations. We have been working collaboratively with commissioners to shape the scope of the partnership, and are working with VCS partners to formulate our plans for this new Alliance. Similarly to the point above, we're bringing to this partnership our set of values and approach, in order to learn with and influence both the local council and our partners in terms of organisational culture, structures and spaces that support frontline workers to manage complexity, with a human approach to relationships.

Learning and evaluation

Our evaluations focus on client outcomes, the way we work and our impact on the wider system.

Clients have told us that they are more comfortable with one-to-one engagement in evaluation/learning – we have had groups involved in the past, but as a small segment of who we are trying to support, it wasn't representative. As such, the learning from clients is ongoing, a combination of structured evaluative processes in one-to-one support and opportunistic feedback.

Examples from our 2020-21 evaluation include:



In the Support and Connect Resilience Network, we were also able to measure a 93% reduction in hospitalisations and a 45% reduction in the use of Crisis Teams by clients.

We use the WEMWBS wellbeing questionnaire both on ourselves and with clients as a tool to examine how we are feeling and engage in a process of self-reflection. Using WEMWBS with clients has also enabled us to measure the impact of our approach on wellbeing over time, with the results proving extremely encouraging with an average of +2.6 in WEMWBS measures.

We undertake qualitative semi-structured interviews with a representative sample of clients, staff and volunteers. Quantitative and qualitative data is also taken from feedback forms that are distributed to all clients who have been with us for three months or longer or are ending the 6-8 session service. A questionnaire is also delivered to volunteers and placement students currently working with us.

Learning feeds into the organisation in several ways. For example, regular whole team meetings and Pod learning spaces integrate both evaluation findings and ongoing learning; and learning from the Support and Connect service evaluation has acted as an accountability measure, worked through during operations meetings.

We're continually reaching out and building relationships with people to share our learning. This includes presenting at webinars, contributing case studies, facilitating local network meetings, and one-to-one meetings with people interested in what we do (eg. Centre for Public Impact, FLIC, Buurtzorg).

Key information

Likewise is led by Co-Directors, Matt Shepherd and Hugo Reggiani, who bring a diverse set of experiences to the organisation. With a background in psychotherapy, mental health and education, Matt has led organisations in the charity sector since 2005. After working in International Development, Hugo came to Likewise in 2015 immersing himself in delivering, developing and evolving our approach to client work before becoming Co-Director.

They are supported by a Board of four Trustees and a staff team of: Community Lead; Learning Programme Lead; Learning, Research and Evaluation Lead; six Pod Leaders; four temporary Support Workers (to be replaced in the coming months by 4-6 new Pod Leader Trainees); part-time Programme Administrator; Office and Administration Manager; and a Finance Manager.

We have a history of being recognised as pioneers of co-production. At the core of Likewise is an approach to help / support which is all about agency for clients and learning together (as opposed to active experts delivering interventions to passive recipients of help).

Money

In our latest accounts (to March 2020), our income was £732,008, expenditure was £749,295 and our unrestricted reserves were £281,643. Our draft accounts for 2020-21 show income was £937,729, expenditure was £666,900 and our unrestricted reserves were £448,212.



Likewise

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