BME Women’s Group

A report by Voices Of eXperience (VOX)

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Abbreviations:

BME: Black and Minority Ethnic
CD: Community Development
ME: Minority Ethnic
MH: Mental Health
VOX: Voices of eXperience

Synopsis:
The beginning of the programme involved a combination of perspectives such as health promotion, community involvement and development, with the community development principles and values having highest priority. Values like ‘equality and anti-discrimination’, ‘social justice’, ‘working and learning together’, ‘community empowerment’ and ‘collective action’ have shaped all aspects of the work and fulfilled the outcomes of the project.

It is important to remember people from ME backgrounds are not homogenous as they come from different countries with various experiences, which impact on their health and well-being (Burnett et al., 2001). Glasgow is home to many ME communities and one of the primary principles of NHS Greater Glasgow is to reduce avoidable and systematic inequalities in health (NHS Health Scotland, 2004). Mental health appears to be the biggest health issue affecting BME group (Mental Health Act Commission 2001; Friedli et al 2002). Many studies have documented prevalence of trauma, stress and depression within members of BME communities (Khan, 2010). This highlights the need for tackling mental health problems within ME communities (Goldberg and Huxley, 1992). Moreover, adopting a community development approach means ensuring that the issues and priorities are identified by the communities themselves and that people and organizations are encouraged to work together to address shared concerns through collective activity (Gilchrist and Taylor 2011).

Hence the idea that BME Women’s Group project could help women suffering from stress, anxiety, depression, stigma and isolation and could promote inclusion guided BME Women’s Group Project.
**Introduction:**

This paper intends to give an overview and analysis of BME Women’s Group Project and its process. BME Women’s Group Project was an attempt to identify and work with women from Minority Ethnic (ME) backgrounds based on people’s mental health and wellbeing.

For the purpose of outlining the development of the project, brief background information is given followed by the aim and objectives of the project. An outline and analysis of the process of running the project will be given with respect to what, why and how we ran the project. Finally, the outcome of this project, followed by challenges, barriers and tensions that existed within this sphere of work and exploration of possible ways forward will be elucidated.

**Background information about Voices of eXperience (VOX):**

VOX is a service user-led National Mental Health organisation that works in partnership with mental health and associated services, with the aim of assisting people who have mental health problems. The support provided by VOX is to make sure that the voices of those with mental health problems are heard and that they get the assistance and necessary services to make positive changes in their lives and the wider society.

To provide a sustainable and meaningful model for mainstreaming equalities work and learning opportunity from a range of diversity group VOX has developed BME Women’s group project. The project was based on identifying a group of women from BME backgrounds, raise awareness about MH issues and enhance overall wellbeing amongst them. Achieving such directed the project to define specific aim and objectives in connectedness of Community Development principles and values.
**Aim and objectives of BME Women's Group:**

The aim of the project in general was to identify and work with diverse women from Minority Ethnic backgrounds, invite them to join an informal activity sessions and to facilitate engagement amongst them in conversations / discussions and other relevant activities, through VOX and to help BME women to have a voice in MH and feel they have heard more than before.

This was to help women to participate in social affairs, identify issues affecting their lives and their mental health and wellbeing, and exchange experiences/information/ideas. Moreover, through the process and the sessions helping them to raise their awareness and increase their knowledge on mental health issues and understand the impact of such issues on their overall health and wellbeing. The idea was that as well as the group improving their own mental health and wellbeing, they could also find out more about available services or groups/organisations for continued help and support.

It should be reiterated that to achieve the aim and objectives of this project the use of CD principles and values as well as various theories shaped the process of running the project.

**Analysing process of running the project by applying different theories and the Community Development values:**

The project commenced with cooperation between VOX, one service user led organisation and one BME organisation. Mental Health Network chosen as a service user group/organisation and Amina (the Muslim Women Resources Centre) chosen as a BME organisation. To start the project, high quality trainings organised for interest participants from diverse backgrounds. The trainings were about “Asset-based Approaches and Community Development”, An Introduction to Research and Evaluation” and
"Understanding Mental Health". Trained people made the core part of the project. Community leader was chosen from diversity network (core group) and employed after trainings, to develop action plan and to lead the project.

To develop action plan, face to face meetings and round table discussions (focus group) were deployed between community leader, core group and other interest people and the points made by participants were monitored. This helped the first step of work in order to make an action plan, gain access to relevant people who have or have had a mental health problem and to start having 6 sessions (focus group) with ME women to raise their awareness about MH issues and to take a step forward in recovery.

Networking was used as an effective way of meeting diverse needs, whether in relation to practice development or by providing mutual support for ‘collective action’ (Community Development Foundation, 2004, p25). In addition, Considering the key value of ‘equality and anti-discrimination’ and ‘social justice’ as well as John Dewey’s (1938) theory of a community being built up of common experience, this cooperation helped to make it possible in terms of providing access to needed resources (BME women) and to shape the group of BEM women by inviting those interest women from ME background to join the group and to share their voices and experiences together over informal meetings and through group activities.

Not only did networking assist with directing the aims of the project in respect of identifying a targeted group, but also helped capacity-build within network members, as capacity building is a concept that helps bring new resources to community organisations in the form of partnership, sustainability and equal opportunities (Skinner, 1997, p8).

I should stress that networking has assisted the project with practical exchange of information, contacts, and has helped address arrangement and accountability to network members (Community Development Foundation, 2004, p25) in assisting people to collaborate and come together.
The work with BME women continued by becoming more engaged with the group members and building up trust between the group members, as “Trust and co-operation are the crucial elements of social capital.” (Henderson, Thomas, 2002, p4). Consequently this helped the group members to relax, feel welcomed and part of the group. This concurs with the emphasis on community development values, promoting ‘participation’ (University of Glasgow, cdx information) and respecting each other’s ideas in the course of the project.

For this purpose, Initial ground rules was prepared to give the group members a better idea as to the importance of respecting each other’s idea as a basis for doing group work, as John Dewey (1859-1952) would describe as strength of companionship and collective activity. The group members were given a chance to add more rules if they wanted to do so over the sessions. The ground rules were prepared as visual and written rules (both) and displayed on a flip chart. This was a ‘structural approach’ (Sheehy, 2007, p2) aim to focus on determining relationship among the group members and also to provide ‘equal opportunity’ for everybody to become engaged and take part in group activities, for example for those who had literacy problem. Moreover, considering Freire’s participatory approach (cited in Rod Purcell, 2005, p 219) to circulate the process of respecting each other’s idea among the group members. Also, considering community development principles and values, this was to encourage all group members to feel inclusive in the project and in the process of ‘working and learning together’ as well as progressing the work in a peaceful, safe and respectful environment. The intention was to create a more just, inclusive and respectful group through the process of engagement with group members.

The work continued in different sessions by utilising various group activities as tools to achieve the aim of the project. Through the process, screening film, wooden cubes called ‘Blocking out stress building a healthy mind’, mask, art material, photographs, play dough,
poster making and many other activities were used which provided the opportunity for interaction and discussion with group members followed by reflection and action to plan for the next step of work. The sessions designed to help the group members to understand the impact of different issues on their overall health and wellbeing as well as working for change by encouraging them to focus on their personality and how they could help themselves as a first step in seeking help towards improving wellbeing. Therefore, the designed activities provided an opportunity for the group members to think profoundly about themselves, the issues affecting their lives, having a better understanding of their needs and the impact of these issues on their health, and consequently reflecting on their views and ideas in a piece of art. Thus, the use of ‘art activity’ as a tool helped engagement of group members in creative art activities through organised sessions.

The table below shows date and time of the focus group sessions as well as different types of activities and their purposes over each session:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
<th>Number of Participants</th>
<th>Activity</th>
<th>Purpose of Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.06.2013</td>
<td>10 - 11:30</td>
<td>General MH Awareness raising session</td>
<td>23</td>
<td>Screening film - Beyond Prejudice DVD followed by questions and answers</td>
<td>To challenge stigma - The film and consequent discussion was to develop participation and to challenge group member’s perceptions of stigma in relation to MH. This was to transform group member’s perspectives and to help the group participants to tackle the stigma. To put group members in the position of thinking about themselves, their values and compare their own experiences with others and feeling less isolated by knowing that others experience similar feelings.</td>
</tr>
<tr>
<td>19.06.2013</td>
<td>10 - 11:30</td>
<td>Stress and Anxiety</td>
<td>7</td>
<td>Support blocks-wooden cubes called “Blocking out stress building”</td>
<td>NHS tool - Encouraging participants to take part in group activities, voicing their issues through explaining their experiences. This activity</td>
</tr>
<tr>
<td>Date</td>
<td>Time</td>
<td>Session Type</td>
<td>Session Details</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>26.06.2013</td>
<td>10 - 11:30</td>
<td>Identity</td>
<td>Mask To think about their identity. How they see themselves? How other people see them (what they think)? The session designed to improve self-esteem and self-efficacy. The activity designed to help people to understand that identity is all the things that distinguish us from other people. It’s what makes us unique and individual. So why do we all try to be the same?! Despite appearance we are all still so different, our age, gender, family, friends, memories and nationalities build up our own individual identities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.07.2013</td>
<td>10 - 11:30</td>
<td>Depression</td>
<td>Depression-self-test and Play dough Make something depressive and destroy it afterwards. To help the women to understand that they can reduce depression themselves.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.07.2013</td>
<td>10 - 11:30</td>
<td>Stigma and Discrimination</td>
<td>Photo language - Poster and Making greeting card To identify issues affects BME women’s life- make a circle of discrimination in women’s life, using photographs and think about how women would cope with them (find a solution). Make a greeting card to celebrate diversity and cultural differences – improve women’s confidence.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.07.2013</td>
<td>11:30 - 1:30</td>
<td>Mood and Food</td>
<td>Photo language - Poster To promote participation and to become more engaged with group members and to identify issues affecting women’s health. ‘Photo language’ as described being</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Through group dialogues came out the experiences of poverty, war, forced marriage, weather, faith, death and bereavement, family, isolation, unemployment, etc, all of which have impact on ME women’s mental health and wellbeing. The experience of discrimination was one of the other issues relating to aspects of identity such as gender and ethnicity that contributes to mental health problems, which are then exacerbated by mental health stigma (Pilgrim and Rogers 1999) leading to mental instability.

So, the next step of the work was to make a unified piece of art within the group to exhibit over the Art and Film Festival and to celebrate the achievements of the group after these 6
sessions. Therefore 2 sessions planned to make the work possible and the group equipped with different art materials such as glue, fabric, ribbon etc. over the sessions. Followed by group’s interest the decision made to shape the ‘River Of Life’. River of life is a visual narrative method that helps people to tell stories of the past, present and the future. The group used it to understand and reflect on the past and imagine the future of the project and used it to build a shared view compiled of different and perhaps differing perspectives. The activity was an encouragement tool for group members to think about themselves and how their issues affect their emotional wellbeing. Art work and creative development provided opportunity for the group members to express themselves individually within a unified structure.

As using art is a way of respecting persons and their ideas and work (Rich, 1968, p128), so employing art activity at sessions had a ‘positive’ impact on the feelings of the group members and ‘transformed’ their perspective (Gauntlett, 2010) as they created their own art and craft which not only had value for them but also had meaning for others. This was a way of enhancing self-confidence as members created something through personal thinking and reflecting that they could share it with the wider community. John Martin Rich (1968, p127) has stated “to speak of art is to speak of the activity of the person in creating works of art. The artist attempts to objectify his feelings, attitudes, and convictions through his work rather than explicitly aiming to create beauty”. Therefore, the process of creating art and subsequent discussions helped the participants to feel less isolated and enhanced their feeling of importance. According to Freire and Horton (1990, p145) the process of participation in producing something leads to “participate in the development of themselves”. This is because, they get the chance to express themselves about issues affecting them, building on their experiences, as well as having a chance to produce something that they could share with the wider community. In terms of CD values, this is ‘working and learning together’ and ‘community empowerment’. John Martin Rich (1968,
p136-7) points out “one effects of art is to place the individual and the community in a context of greater unity” which leads to ‘collective action’ (CD value). On the other hand, Carl Rogers (1967, p119) has described art activity as having therapy interaction, rather than verbal content discussion. He also says that events can have ‘meaning’, be ‘explored’ and ‘symbolized’, and these concrete implicit meaning can be affected and changed by interaction. Art therapy is a way of exploring personality difficulties that lie in the ‘pre-conceptual’ meaning of experience. This theory best fits the known fact, since Penelope Campling (1999, p 117) described this creative art as a way to “develop a culture of openness of communication and empowerment”. Dewey (1938) argued that “an understanding of the aesthetic experience underlies the understanding of the nature of experience itself” which leads to understanding of issues. Moreover, it is inevitable that the power of art is communication of the particular and the isolated into a relational and unified perspective. Since each artistic average has its own value, no work of art is inherently superior to another (Rich, 1968, p136) and this is a case of vital equality.

It should be noted that through art activity and over various sessions the subject of ‘stress’ was the main focus of group discussion. It should also be pointed out that gender inequality increases the likelihood of experiencing stress and mental instability (Rogers and Pilgrim, 2003). A number of psycho-social dimensions of gender and poverty contribute to these effects, including being unable to participate in the life of the community, experiencing a lack of control of life choices and a lack of social capital (Thompson et al, 2007) which leads to living with chronic stress which has impact on people’s mental impairment (Thompson, 2002, p24) and can have a detrimental effect on social relationships (Wilkinson 1996, 2005). This could be due to discrimination and oppression particularly as a result of being so labelled and stereotyped (Thompson, 2001, p 153) - for instance in the case of the BME Women’s group, members being of Pakistani
community or other Muslim groups.

WHO (1986) has pointed out “a state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community”. This is a fact since a community development worker’s role is to promote empowerment and initiate an enabling process through which individuals and communities can take control over their lives and their environment (Rappaport, 1984).

It should be noted that, the whole project was based on the group members’ needs and interests and to find out what was important for the group members and what they wanted to achieve as the project progressed. Evaluating each session at the end helped to find out about the needs of the group members and to get a better idea of how to direct the project and also to reassure the members about the effectiveness and usefulness of their ideas and suggestions with emphasis on having cooperative and supportive environment. This helped the project to have several positive outcomes.

The outcomes of the project:

Group activities shaped the whole aspect of the women’s group and fulfilled the expected outcomes of the project.

These sessions were processes of listening, observation, reflection, action, evaluation and planning for the next step of work and the formation of the women’s group had numerous positive outcomes.

Regarding the BME Women’s group, the meetings had a social component and were a suitable means of identifying issues affecting the members as well as sharing information and making positive contribution towards change in group members’ emotional wellbeing. The issue of wellbeing came through in the process of group activities/art activities and as their views were listened to with due consideration to diversity and human rights. The
The project provided an opportunity to move from individualistic health education to a community development-led health promotion. It helped in building their confidence & self-esteem, reducing women’s isolation, building a social and support network, raising awareness about mental wellbeing and the services and resources available to BME women.

The project also made a difference to the VOX and its wider membership network. For instance, the project had aspects that informed the VOX’s members through the updates in the diversity newsletter about what issues may specifically affect BME women’s mental health and helped raise awareness through some of the artistic work that group members had produced.

The group members’ achievements shared with wider communities in Glasgow over the Art and Film Festival.

The project helped to develop partnership between VOX and other community organisations, especially with minority ethnic women. The project helped to gain access to new interest women form ME background to voluntarily help further development of the project. These are seen as the strength of the project.

- The table below shows the other positive outcomes of the project according to the evaluation at the end of each session:

<table>
<thead>
<tr>
<th>Session Number</th>
<th>Activity</th>
<th>Positive Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 1</td>
<td>Screening film - Beyond Prejudice DVD</td>
<td>Developed more participation and support the group members in “working and learning together” and “collective action”, the film followed by discussions and interactions helped to challenge group members’ perceptions of stigma in relation to mental health. Attempted to put group members in a position of thinking about themselves, their values and compare their own experiences with others and feel less isolated by learning that others experience similar feelings.</td>
</tr>
<tr>
<td>Session 2</td>
<td>Support blocks-wooden cubes called ‘Blocking out stress building a healthy mind’</td>
<td>The workshop helped the group members to recognise the physical and mental /emotional symptoms of stress through discussing the causes of stress, and realise that excessive stress could lead to instability and nervous break-down. It helped participants to have a sense of relief by having discussed stress in their lives. It also helped them to explore possible solutions to some of their problems and raised their awareness as to how to get help if required. In this respect, information pack provided regarding available services.</td>
</tr>
</tbody>
</table>
In terms of community development values, this workshop represented a process of “collective action” as well as “community empowerment” by helping group members to identify ways of reducing stress in their lives or coping with it through enhanced feeling of confidence and self-esteem.

<table>
<thead>
<tr>
<th>Session 3</th>
<th>Mask</th>
<th>An opportunity for the group members to think profoundly about themselves, the issues affecting their personality, having a better understanding of their needs and the impact of these issues on their health, and consequently reflecting on their views and ideas in a piece of art. The session designed to improve self-esteem and self-confidence. The activity designed to help people to understand that identity is all the things that distinguish us from other people. It’s what makes us unique and individual. So why do we all try to be the same?! Despite appearance we are all still so different, our age, gender, family, friends, memories and nationalities build up our own individual identities.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 4</td>
<td>Depression self-test and Play dough</td>
<td>Helped women to think about themselves, reduce depression, feel less isolated and enhanced their feeling of importance.</td>
</tr>
</tbody>
</table>
| Session 5 | Photo language - Poster and Making greeting card | Helped the group members to participate in group activity and to become more engaged with other group members and to identify issues affecting their health. 'Photo language' as described being a 'non-threatening' way of voicing people’s issues, helped VOX to find out about different subjects and factors that affect ME people’s mental health. It was also an opportunity for the members to think about their choice and what was importance for them to talk about.

Using photo language and consequently sharing knowledge, experiences, stories, etc. among participants was a way of “working and learning together”. It was also a way of opening conversation to empower individuals to achieve their full potentials as stated by Carl Rogers (1983). Through discussions, the members were given the opportunity to take turns to talk and to put forward their points of view, which gave them the opportunity to achieve their full potential.

The session helped women to break stigma and get them talking. |
| Session 6 | Photo language - Poster | Learning opportunity for group members. Think about their life style. Using art activity as having therapy interaction, rather than verbal content discussion. |
| Art sessions | River of Life | Art work and creative development provided an opportunity for group members to express themselves individually within a unified structure, so employing art activity at sessions had a ‘positive’ impact on the feelings of the group members and ‘transformed’ their perspective as they created their own art and craft which not only had value for them but also had meaning for others. This was a way of enhancing self-confidence as members created something through personal thinking and reflecting that they could share it with the wider community. |

Project’s scope has expanded by providing more support through sessions with other BME groups, due to their interest.

The table below shows date and time of the sessions as well as different utilised activities.
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
<th>Number of Participants</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>20.06.2013</td>
<td>1:30 - 2:30</td>
<td>General MH Awareness raising session</td>
<td>18</td>
<td>Screening film - Beyond Prejudice DVD</td>
</tr>
<tr>
<td>27.06.2013</td>
<td>1:30 - 2:30</td>
<td>Stress and Anxiety</td>
<td>16</td>
<td>Support blocks-wooden cubes called ‘Blocking out stress building a healthy mind’</td>
</tr>
<tr>
<td>24.07.2013</td>
<td>1 - 2:30</td>
<td>General MH Awareness raising session</td>
<td>14</td>
<td>Screening film - Beyond Prejudice DVD</td>
</tr>
<tr>
<td>29.08.2013</td>
<td>1:20 – 2:30 pm</td>
<td>Future work</td>
<td>14</td>
<td>Discussion</td>
</tr>
</tbody>
</table>

**The challenges and lessons learnt:**

The first challenge was involving the core group (community leaders). Out of five people only one or two members have been supportive, but not always, due to some personal issues. However during the running period of the project, some participants became interested in working voluntarily for the project over the next year / years which could be counted as a positive outcome.

The other challenges were:

- Child care issues and lack of funding to pay for child care over the sessions
- Approaching Ramadan which made participation difficult for women members of the group
- School holidays which prevented some women in taking part of the project
- Language barriers prevented some women in expressing themselves. Although the project was assisted with volunteer interpreters but again due to high turnout (especially for some sessions) we did not get a chance to hear everything.
- Pressure from families (kids, family, and partner) and health issues were additional barriers in front of the women which prevented them in taking part of some focus group sessions and workshops.
Conclusion and way forward:

The project used as a vehicle to provide BME women the opportunity to participate in social activities and talk about the strains, stresses and hardships in their lives as well as trying to explore the reasons behind those issues and effecting change in group members’ attitudes towards their emotional wellbeing. Various tools used to develop participation amongst group members. Through art, as a tool, women found the chance to express themselves, share information and learn from others’ experiences.

The project was another step in supporting public mental health movement, driven by community development principles, values, theories and practices. A number of principles shaped all aspects of the project including the importance of valuing different perspectives and working through enabled the voices of those who were most marginalised to be heard.

The project was taken a step further by developing partnership with ‘Amina’, a local community organisation that tackles mental health stigma and discrimination as well as Mental Health Network to further assist BME women.

The work has shown it is possible to tackle the complexities involved in the process of enabling the views and experiences of BME Community members being heard whilst ensuring the programme addresses inequalities in mental health and promotes community empowerment and social justice.

The first year of the project concluded by developing an action plan for the next year, in which two sessions organised with different groups. One with the focus group and the other one with a new group showing their interest in taking part in the project and their details were all taken.

The sessions had focused on what women would like to do and their interest for the future work, women’s idea (brain storm) about things they want to achieve out of this work and
the way we could achieve it considering SMART goals (SMART goals that are Specific, Measurable, Achievable, Realistic, and Time-bound). The other focus of the sessions was to find out about issues and barriers in front of the group members in taking part of the sessions over the first year of the project as well as asking for suggestions to overcome these barriers for future and to make the work possible.

Below is a list of some of the overall points and women’s interests for future work which were made over the session with the focus group:

- Training for group participants (focus group members) to go and to raise awareness about Mental Health issues with other communities - Approach different communities and to help other women to help themselves
- Provide leaflets/information in different languages for ethnic minorities
- Elaborate more on topics from previous sessions
- Regular promote and outreach work
- Assist young mothers with post natal depression – provide crèche
- Showing life stories to assist women in coming out with their conditions
- Go on radio and talk about women’s (group members) stories
- Have stalls (to promote work)

Points for future work out of discussion with the interest group (second session – new group):

- Sessions should provide opportunity to socialise with other community members and learn from each other
- Gain information – sessions about depression, stress, etc
- Information about criticising other’s positive or negative mental health and how can we can make changes
- Information about, if a person has depression due to his/her physical health problem, then what should he/she does?
- One all-day session instead of having shorter sessions over few weeks.
In terms of future goals and achievements out of these workshops, women would like to:

- Learn skills which would help them to find a job
- Educate other people – reach other communities to talk about MH issues
- Create workshops – similar to what we have done over the first year of the project
- More practical activities – art work
- Improve confidence to speak up and voice opinions
- Gain more knowledge through trainings
- Meet new people / new communities and share thoughts

To make our goal achievable women suggested:

- Make topics and subjects clear (Like focus group sessions over the first year)
- Sharing ideas
- Research around focused area to assess needs – to reach new communities
- Talk to both genders about MH issues (it helps to raise more awareness)
- Talk to the wider communities
References:


17. National Occupational Standards for Community Development Work 2009 LLUK


37. University of Glasgow, cdx information

38. Voices of eXperience; http://www.voxscotland.org.uk/