

Transcribed by: 1st Class Secretarial Services

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[REDACTED]

I: Has that come up saying it's recording? Yes, it has now...

R1: Yes.

I: There's a bit of a lag on my side, brilliant. Organisation name, you can tell me that one?

R1: InTouch Foundation.

I: And location?

R1: Bradford.

I: In terms of the work and services that are provided, would you prefer Osman to answer that one?

R1: Yes.

I: I'll just put a mark there. Pre-COVID...I'll work through it and if there's questions that you think we can...you can't answer then we can...

R1: So I think just the whole section around I think it would probably be better for him to go into it. He's a lot more passionate about it and it's his baby so I don't want to take it away from him.

I: No, that's absolutely fine. We'll work through see how it goes and then we can get him to come and start as well. Can you say what normal provisional services looked like before COVID?

R1: They were primarily focusing on working with the homeless and they had vans that were set up, where they were literally in the town centres, they had one in Bradford, Bradford town centre, Keighley. Huddersfield also had come about and they were serving people from the van, whoever wanted to be fed I suppose on the day.

I: That was food was it?

R1: Yeah.

I: What do you provide? In terms of period products what do you provide as well?

R1: In terms of period products what we have is we have a period poverty pack, hygiene pack that we've created. Within the packs we have sanitary towels which is a first, we have shower gel or soap, we have shampoo, we have deodorant, hand sanitisers, toothbrush and toothpaste as a minimum of what is included in the packs.

- I: When did you start doing those packs?
- R1: So they officially launched only in December of this year I believe, of this year.
- I: The one just gone, December 2020?
- R1: Yeah.
- I: What...?
- R1: It started out...if I can just give a bit of background, this was something that was being flagged up repeatedly, so whether it was national literature or regional literature, it was the whole thing around period poverty and how unfortunately many people are not able to afford the products. There was also lots of conversations that I was having in my direct one to one work. So previously I'm a community development worker and I would be meeting women regularly, so at least three/four women a day that I would meeting, that were suffering from their mental health. Now as you know mental health it includes so many wider determinants and one of the things that was flagged up is lack of finances or very limited finances. And I think it was coming out that women were needing these products, but they were also almost embarrassed to ask for these products.

So food is something that many people were thankfully many organisations were able to deliver and they were delivering. But if you look at it in terms of when people are struggling with finances, are they going to want to spend their money on...especially if they've got families, women, if they've got families, if they've got children to feed, got bills to pay, food is high on the list. Now in terms of their own personal hygiene and things that would probably be moved a little bit lower down. I remember coming across some women and it was like, well I'd rather be buying chips for example for my children with the money than buying sanitary towels, where I could just use some tissue paper or they were using tissue paper or they were using paper towels and things like that, which were causing them discomfort.

Again it came up repeatedly around the stigma around periods, people not being able to ask for these products. People very physically needing them, they'd say I haven't been able to have a shower or I'm worried about this, I'm worried about this, but not really finding the words to talk about period poverty specifically. That's why we've come up with it I suppose, why we wanted to do something about it. Another reason why this is...I remember when the initial whole thing around COVID had hit and the stockpiling that was going on. But I remember me actually going to find sanitary towels for myself and I couldn't find them anywhere. It was literally...I remember thinking what in the world am I going to do? I obviously have the luxury in terms of I had the car, if there were maybe a little bit more expensive than what I was used to. I could go out and purchase them and I was going to...I think I went to three different places just to find them. But I had to travel out to be able to find them because I don't normally have a whole selection

waiting there, buy as and when you need. But when I needed them they weren't available.

And then it got us thinking well if I can't find them in this period and I have the luxury of going out, I don't have children, I have a car, I don't have any responsibilities, babysitting and things like that, then I'm okay, but there's so many women that will have these problems, same problems but they're not able to access them. It was very much like okay there's two things with this, firstly about people having...I think when it comes to hygiene and things like people feeling as though they smell or they're dirty and things like that. There's that dignity that's involved in it or lack of dignity, if people are feeling a certain kind of way. And then there's also that stigma I'm asking things that I can't really ask for these things. Just in my experience I feel as though maybe food is a little bit easier to ask for, rather than white goods or physical things like sanitary towels because it's hush hush topic isn't it. I don't know if that answers the question?

I: Yeah, it does. You said that it's coming up time and time again, is that in your work with Mind, so from a mental health angle, that was where you were starting to hear about it?

R1: It wasn't just...I've just recently started at Mind, so it wasn't coming up in the work at Mind but it was coming up at my previous employment. It was also coming up quite a lot through the Women's Health Network. So other organisations, other people were also speaking about the stigmas attached to periods, the stigmas that's attached to menopause. And also about the lack of support that's out there. Because I remember as well trying to find packages for some people that I was working with, food was thankfully almost readily available, there was a little bit of time when COVID initially hit and there was a bit of a backlog I suppose, where people just couldn't...I couldn't get things out fast enough. But they couldn't find them and they had to...they'd whisper I need some sanitary towels and I need some paracetamol and I can't find this and I can't find that. Exactly, right, well clearly it's high on the agenda.

It's coming up through the women's health network, coming up through my personal work in mental health. Also just general personal experiences of stigma, of period poverty all coming out, like I've just explained with the whole trying to find something.

I: Were there particular groups of women that were...that you noticed were affected by this?

R1: Because my work at the time was primarily around South Asian women or BAME women, I noticed a bit of extra stigma, but it could just be they were the people that I was interacting with a lot more. There were limited or fewer white women or non BAME women that I did come across, but I felt they were a little bit more open about I need this, I need that. Whereas those ethnic minorities were a little bit more reluctant to ask for that help.

- I: Do you think there's a cultural element there then?
- R1: Potentially but I also think it comes into the wider thing because even [REDACTED] will probably tell you when he comes along now, even in terms of when the van went out, serving food, most of the people that would come for that provision were white working class. So there might have just been a general stigma or a general reluctance around those ethnic minority communities going to access these services in such an open way.
- I: How do you distribute the packs that you've told me about, the period poverty packs?
- R1: So it's very much done through organisations in the sense that we have asked or requested organisations...it's sent out across all voluntary organisations that we know of, across Bradford and Keighley and saying that we are offering these packs. And if you let us know how many you need, how many packs you need we can deliver to you once a month and if you can then go out and distribute them amongst your members or people that you work with. Now that was done I think for, the main reason I think it was also because we want to retain that dignity of people that we're working with. Are they going to want to ring up an organisation that they don't really know of and ask for this? Because these conversations normally happen in community settings, they'll happen with community workers, people that already have that kind of relationship with, [inaudible 00:09:25] organisations.
- That was one of the main reasons why we did it in that kind of way. It has been a pilot study and thankfully or I'm not sure if we can say thankfully, we've had a massive influx of people wanting these packs or requesting them. Which shows to me how much need there really is. It was a pilot study pending more funding so hopefully we can acquire more funding and we can be sending out even more packs to people that need them...
- I: Where did the funding come from?
- R1: So the pilot study, like I say, it did come from InTouch. We haven't accessed any external funding as of yet, again because it's a pilot and it was new and we wanted to see...we kind of knew there's scope for it, we know in terms of experiences. but in terms of applying for funding you always need this whole evidence base don't you and numbers, and all the rest. So it's just how it works.
- I: Do you rely on donations or charitable contributions?
- R1: Yes, we are a charity. So InTouch Foundation they are a charity and it is a completely volunteer led organisation, there isn't any member that is a part of InTouch that actually charges for their services so to speak, it's completely done on a voluntary basis.

- I: Where do they get the products from, do you purchase them, do people donate them, is it a mixture?
- R1: So there's been a mix. So we've had donations from Asda in Keighley, they thankfully gave a big donation of different kind of products. We had individuals who also purchased and delivered products to us. And then donations we could then go out and purchase them as well. We've been quite blessed in the fact that people have wanted to help and have seen the need, and have donated items to us.
- I: What are the needs of service users at the moment?
- R1: You see there's so many different needs of service users, the hygiene packs are obviously very popular, but there's also the need for food but culturally appropriate food I find as well. A method in which all organisations work to retain that dignity of individuals and of people that they need.
- I: You've mentioned that it's a pilot project, so it started in December and it's been a smaller thing, and that's come from internal funding. Are you looking then to try and get external funding to larger...to make it bigger or what's next?
- R1: Definitely, I hope so. Hopefully we can put in some more funding, we can also have somewhere to put all of this stuff that we have as well, because we've had people requesting around 60 packs, 70 packs, so we obviously need to place them somewhere to make them up essentially before putting them elsewhere. So there's that need as well. Hopefully we will be applying for more funding, getting that funding and then be able to provide a service to more people.
- I: Have you had...
- R1: And...
- I: Sorry, go on.
- R1: The ideal wish is that they wouldn't need to apply for funding and we wouldn't need to upscale and do lots more, but unfortunately I think with the state of the financial sector at the moment and the jobs, and COVID, and lockdown that doesn't seem to be ending. There will be a lot more...and also I think it's interesting to know as well that there was...I know there was the whole period with tampon tax was abolished and there was also free sanitary towels and things that were delivered through schools. So schools do have access to free sanitary towels which you can then give out to the students. Now schools now they're open again but they were closed for however months and it's a mammoth task for teachers themselves to adapt to the home schooling. The data poverty that was existing or does exist within Bradford and across services. They have so much to deal with, it's easy to imagine how maybe that could go a little bit further down the line. Or it can also be that even though girls might know it's available in school,

imagine speaking to your teacher or somehow messaging your teacher oh I need some sanitary products. So even though schools did have them because they were closed for so many months or because the bubbles keep bursting and all the unfortunate things that keep happening with the actual illness, and lockdown, even though they're available that they're not available.

I don't...and this isn't a criticism but it's more the schools have so much deal with as it is, handle it all. So we're doing independent drops offs or allowing students to come in to pick up these packs. And if students are even able to come in do they have the resources to come in? Does that make sense? If you want to come along to the school and pick them up, you can do, but let's just get say that there's a female that has lost a job...not lost her job, her parents have lost their job. They have very limited funding in the first place, is she then likely to hop on a bus if it's not free, which I don't think it is for anyone, I haven't been on a bus in a long time, to go to school, to pick these up. Are the parents going to want the child in...when there's this whole fear of catching COVID, becoming ill with COVID to get onto a bus as well, to go down. Are they going to have the time because right now, now the clocks are turning back, but it was getting dark a lot earlier.

If they have lessons from nine till three, three o'clock, four o'clock it was getting dark. Is a young girl, ethnic minority or not, likely to jump onto a bus or walk down to the school even if it's in walking distance to pick up these sanitary towels? Probably not. They would unfortunately need some kind of doorstep delivery or very easy pick up. Which is why also why we use other BCS organisations who already have connections with the communities, with the people that are most in need. Because they're allowed to have it I'd say flagged up almost in the sense that we all have our own caseload, we know who needs that little bit of extra support and who, even though they might not say it, would benefit from this.

I: What sort of organisations do you work with?

R1: It's all voluntary organisations within Bradford at the moment. So we'd have people like Mind, Sharing Voices. I don't want to name any...[inaudible 00:15:59] naming people [inaudible 00:16:00]. I think [redacted] might be able to tell us exactly who has requested them. But, yeah, so it's different voluntary organisations within Bradford.

I: Is this the only initiative you know locally that addresses period poverty?

R1: Yes. Bear with me one second, I've just got a message saying that he can't find the link. So let me just email that across, bear with me one second.

I: No problem.

R1: Sorry, I've just sent it.

I: You're the only local initiative that's addressing period poverty that you know of?

R1: I wouldn't say...bear with me one second, I'm getting a call. He's literally joining as we speak.

I: Okay.

R1: Sorry, what were we saying?

I: About other initiatives that address period poverty locally?

R1: I don't think as far as I'm aware there isn't any specific period poverty initiatives in the sense that people that are labelling it as period poverty or labelling it as hygiene packs. There would be I'm sure food banks and things that do exist that would provide them if needed, but I don't think there's any specific ones out there. I do believe this is the first which is doing a standalone period poverty initiative.

I: Was it an issue that you noticed before COVID? Because obviously you said this started in December, but it was something that came up before then?

R1: Yeah, it was something that came up before then, like I said it was quite a few months before COVID had actually hit, but it was only in I suppose in the COVID period where it had intensified. Not only food but the provision and also it was like when I was looking at where I can refer clients onto and where I can access it and things, like the hygiene packs, I couldn't find any and it would have to be contact someone and they'd have to go out and then purchase them. And we were finding there was a little bit of a delay, you can understand when someone needs sanitary towels they need it straightaway, they can't always wait. Because it goes into other things in terms of not only dignity which I've spoken about before, but also around illnesses of the person. Hang on a second. Sorry, [REDACTED] he's saying that it's not connecting, I'm not sure if he's...?

I: I don't know why, let me see if I can try and invite him again.

R1: Can I give you another email address?

I: Yeah.

R1: So it's still [REDACTED].

I: [REDACTED]

[REDACTED]

I: I don't know if it will let me.

- R1: Has it come through?
- I: I've sent a link to that email address via email to see if that's worked.
- R1: Everyone talks about how easy working from home is but then you have internet issues it never works.
- I: No Teams is really difficult particularly with our Teams I think if I set up this meeting so I can invite you externally, but now that we're in it, it doesn't let me invite external people in. I can add people internally but it doesn't seem to let me add externals in. But I have sent a link to the meeting to him so he should get that hopefully.
- R1: Have you found it? Are you on? Have you got the one that I sent you? 'Cause I sent you the forwarded invite but then I also sent you the actual invite, do you know what I mean?
- Is it useful for us to maybe get off the call and then re-join do you think,
[REDACTED]
- I: We can try.
- R1: Yeah, we'll try that. We'll get off and then we'll all get on at the same time.
- I: Yeah, bear with me one second.
- [REDACTED]
- I: Why did you choose to do it with InTouch originally?
- R1: Because I really...I've been working with InTouch for the last few years, not personally with them but I've referred quite a lot of people through InTouch, the support was pretty much instant, and the support itself was...it was fantastic. Obviously in terms of whether it was food parcels, whether it was actual vouchers so people could...vouchers for Asda for example, supermarkets, people could access their own, go out and get their own. It was a very good service and I think the ethos of the organisation as well in terms of everyone being a volunteer, in terms of no one being paid and being very passionate. Everyone who is involved is involved because they really want to because obviously they're taking time out of their day to provide the service. I think for me personally just having an organisation that really wants to help people, is the most important.
- I: Is there anything you think is important to highlight about period poverty during the pandemic that we've not talked about?
- R1: No, I think it's just such a massive area. Under tapped area in the sense that there's so much that we could do, there's so much that needs to be done, that I think people are a little bit apprehensive about doing at the

same time. So there's so much more that we should do when it's a collective thing.

I: Hi [REDACTED].

R2: Hey, how are you?

I: Hello, I'm good thank you, you're with us.

R2: I am indeed. My camera's on...

I: Yes, I can hear you. Can you see and hear us?

R2: Good. I can indeed, yeah.

I: Brilliant.

R2: I can't see [REDACTED] at the moment but...

R1: Don't say that, you're being recorded, you have to be nice.

I: I'll just go through the background questions quickly. Have you read the participant information sheet that I sent across to you?

R2: I have, yes.

I: Have you got any questions about the project?

R2: No, I think that's perfectly fine, it's quite evident what it is.

I: Do you give consent to participate in the study?

R2: I do, yes.

I: Do you give consent for this to be recorded?

R2: I do, yes.

I: Brilliant, thank you very much. So can you just tell me what the organisation's name is please?

R2: It is InTouch Foundation.

I: Can you tell me a bit about the work that you do and the service that you provide?

R2: So InTouch was established in...say again?

I: There's quite an echo coming back, I don't know, have you got earphones that you might be able to...?

R1: Have you got it on two different things?

R2: I haven't got it on two different things, no, I can try the earphones, just bear with me.

I: It might work better.

R2: Can you hear me?

I: Yes.

R2: Can you hear me?

I: Yeah, I can hear you. Can you hear us?

R2: Hello?

I: Hello, can you hear me?

R2: Hello? Yeah, I can hear you now, yes, can you hear me okay?

I: Yes, I think that's better, there's no echo there.

R2: Can you hear me?

I: Yes, fantastic, brilliant. Can you tell me a bit about the work that you do and the service that you provide?

R2: So InTouch Foundation was launched in December 2012, the primary aim was to work with those that are living in poverty in our local community and try and offer support services. We are a 100 per cent volunteer run organisation, so across the board management team, all the volunteers. We only have one paid member of staff and that is our driver. So we have...we work across Bradford, Huddersfield and Keighley, we have different sites and different site managers in teams across the three different cities. We provide meals as well as other support, if it's mental health support, if it's somebody just needs somebody someone to talk we have to go out and [inaudible 00:05:12]. The food is the primary aim and then from there we then add on additional services as well, so to get people together and then we'll offer other types of support.

I: Brilliant, it's breaking up a little bit, so we'll try and continue and see if it works but it keeps breaking up, so hopefully the recording will...

R2: Apologies.

I: That's okay, it's part of these times isn't it. So what does the normal provision look like before COVID?

R2: The normal provision was that we had...we have a mobile catering van, we have different teams across three different locations. We would collect and distribute food from our Bradford site and then take it across to the different areas. Teams would come together and we [inaudible 00:06:03] every Monday, Wednesday and Friday. The locations were there, people knew who we were, what time we were going to be there. We'd do it like clockwork so basically every site is exactly the same. So it's [inaudible 00:06:18] timings for everything. The van arrives at half six, quarter to seven we've set up, seven o'clock we do deliver the first meals, 25 past seven we've done the first meals, have a bit of a tidy up. We're onto the second [inaudible 00:06:35] then there's a half an hour quick clean, discussion and meeting with the different people. And then that's it and off we go. So really within an hour and [inaudible 00:06:44] our service is fully completed, because they just know exactly where we are and what time we're going to be there.

Now obviously the reason it's changed obviously because of the whole COVID situation, we had to make a decision very early on that it was too much of a high risk for our...one of the volunteers because of the whole COVID situation. And secondly the service users because we are a mobile catering service, which basically means that we will take the van wherever the requirement is. But what we didn't want to end up doing was putting [inaudible 00:07:25]. Now whether we do need to keep...to get the food, the volunteers will be mixing [inaudible 00:07:38] they're no longer support bubble, in that safety bubble. So it was just too much of a high risk for both the staff and the service users to continue business as normal. So we then changed that and offered a...sorry I'm just trying to get a charge on my laptop.

I: That's okay.

R2: So we offered a service where...have I gone again? Can you hear me?

I: I can hear you now.

R2: Hello?

I: Hello, yes, I can hear you now.

R2: Can you hear me now?

I: Yeah.

R2: Sorry, I'm fiddling around trying to get the charger on at the same time while we're talking because I don't want the laptop to turn off, sorry. We made the decision to close down the sites, we then moved to a different model and that was one of serving and supporting partner agencies, that already have the connections with those that are either living in poverty or those that are homeless. We then took that opinion or approach, we were working with about 25 different organisations across the district and we were providing them with the meals for them to redistribute back out again. What we

wanted to do was to...so continue the support but reduce the contact that people were having. Like I said the volunteers, we didn't want to put them at risk, why didn't we just pick up the food, we're going to deliver it several locations and then let them distribute it out to their service users. So we still ensure that there's still some form of continuation of service and that worked really well for us to be honest and we got some really good feedback from the organisations. We moved from hot food distribution to frozen meal distribution.

Basically exactly the same meal because what we wanted to do was...the problem with cooked food is you have a certain window in which you've got to distribute that food out, because it has to be a particular temperature, whether it's rice or curry or whatever it is. We then approached the manufacturer and had frozen meals, exactly the same but they were frozen meals, we would pick up them frozen, we would distribute them, drop them off to the different organisations and they will redistribute them out. That would give a, shall I say a longer shelf life for the food because you could choose to eat it straightaway or you could choose to throw it into the freezer and leave it for tomorrow or the day after, to ensure that you've got at least something that...and you didn't have to eat it straightaway. That model worked really well for us and we supported a lot of organisations and schools through that as well.

I: Where do you get the funding from?

R1: The initial approach that we took was we just go out to the general public, we have regular donors that come to us or businesses or regular businesses. We have a very good relationship with a lot of businesses in Bradford. We spoke to them about the project, what we were planning on doing and that we managed to raise about £15,000 in a couple of weeks, which ensured that we had a good 10,000 meals that we're distributing out. I also went in for some funding with Morrison's Foundation, they were really good, they turned it around for us within three days. So we got some funding out of them as well. And then more recently we've had support from Bradford Council as well with the food provision funding as well. We've done several projects, [inaudible 00:11:30] hard to reach communities or so called hard to reach communities and also schools projects as well. So providing meals for children, while they're on the school holidays.

We did the last lot and then we're just planning for next week now as well to get a couple of thousand meals out next week to children that are in need as well, to ensure that they don't go hungry.

I: Who's considered hard to reach populations?

R2: I personally don't like that term, it actually winds me up when people say hard to reach, that's why I said 'so called hard to reach.' Because I think different organisations or different agencies have a different approach and will have a different view of who they class as being hard to reach. For me it's not...you're not using the right communication tools or the right people

or community champions that are there to connect with. So once you've got that connection it's very, very easy to make one phone call and you can get information out into the heart of the community. I think when people use that term I think it's just an excuse to say we're not actually doing our job well or well enough. It should be they're not hard to reach and if you want to put a definition on what are the hard to reach people, who are they?

I don't know because I don't believe they actually exist, they're not hard to reach. You will have pockets of different communities, so the Romanian community, Central and Eastern European, African, African Caribbean, Bengali, Pakistani, you are going to get both ends of the scale, you're going to have someone or a families that are very affluent and don't struggle and you will get the extreme the other end as well. Because we're living next door to each other, so it's very difficult to define that until you actually start getting into the heart and start speaking of people.

I: Have you noticed a shift at all in the sorts of groups that you provide services for during COVID or has it been the same sorts of people and groups?

R1: No, I think there's a lot more families that are now struggling. So people that normally wouldn't come to or come to us for support are now finding themselves in that financial situation where they've got to reach out and they need that support. So, yeah, we've seen quite a big shift in our, if you want to call it client base or service user base, from those that are generally classed as being homeless and living in poverty, to those that are now suffering from poverty and living in difficult times, because of whether it's a lack of work, they've been made redundant or various other reasons. Even mental health problems is a big thing at the moment because, yeah, you can work up...we've just had this half an hour struggle of getting the laptop up and running. That's half an hour wasted that could have been used quite easily. But you will get people [inaudible 00:14:28] because of COVID.

So it doesn't have to be because of they're living in poverty, it's the knock-on effect that they're now having to work from home, their whole routine has changed, and that is now having an impact on their financial status, because they just can't get out to work or bring in an income.

I: What led to the period poverty initiative?

R2: Well the period poverty initiative is something that myself and [REDACTED] have talked about for quite a while. She's the spearhead on this one and has always championed that cause, so all credit due to her. But there has been a...we just put out a...it was supposed to be a pilot project just to see what type of responses we're going to get. We know people are struggling and we know people have been provided by food and other necessities, but most people don't class this as a necessity or just over say it. And because of that we thought we'll give it a try and let's see what type of response we get. So it was advertised, we pulled together just over 100-150 packs and we've had well in excess of 1000 packs been requested. And that's just

gone...that's just the organisations that have read about it or seen it. We know there's a demand there and the feedback we're getting is thank god somebody's actually tackling this, because the schools have been closed, the schools do get some funding from the government for personal hygiene packs, however because they've been closed young girls haven't had that opportunity to go into school and be able to access that service.

We know I think there's going to be an ever increasing demand because it's the last thing that people are struggling to put the food on the table. That £2.00, £3.00, £4.00 whatever it may cost to get a pack, is...they're looking at oh well it's better spent elsewhere, at least we can put food on the table. This is where I think our service is going to become...I see over the next six months, the need is going to increase, purely...and COVID has just had such a huge impact on the way people have been living and spending. And this is just one element of it. I think there will be an ever increasing demand for it, we've seen it from a small pilot project, we're now having to look for additional funding to be able to cater for the needs. I can see us doing at least 1000 packs every quarter, so 4,000 to 5,000 packs a year very, very easily. Without any major...if we do get other agencies onboard, I can see that doubling without any issues.

But like anything it's about funding, we've got to try and get that in place to ensure what we envisaged to be just a small pilot project just to test the waters, has turned into something that's quite big and would require a lot more funding to help support that and move it forward.

I: What type of organisations do you work with? Because you've said you've now shifted to a model where you're distributing to the organisation to then distribute to their client.

R2: We previously have not worked directly with schools, so we now have a consortium of schools that we're working and supporting with, from academies to general state schools and so on, and so on, we will support them. We are now working with organisations that either support people with drug related problems, alcohol related problems, so addiction problems. We've got domestic abuse. I know the community centres as well and we're also working with places of worship as well. With our range of support should we say that we've given from just a handful, has just...it's just really grown just exponentially with the onset of COVID.

We have a whole array of different organisations that we're supporting and we very rarely will turn anyone away, if they're coming to us we've always had the opinion that if you're coming to us, you need the support and who are we to turn you away. In whatever way, shape or form we will try and support you.

I: Do you think, if we can imagine a day post COVID, do you think you'll stick to this sort of model or go back to the way you were previously working?

R2: I think most organisations, whether they be charity or private organisations have had to adapt their ways of working and some of it I think has been...you tend to think a bit more efficiently now. In answer to your question I think we will adopt some of the methods that we've used during COVID and continue with that, however we will still need to continue with the original format that we were in. How long this whole COVID situation is going to last, whether it's six, 12, another year or two, we don't know. But we know that there's an ever increasing demand so we're going to have to adapt to the environment. And projects like this the hygiene packs or the poverty packs, there's going to be an ever increasing demand. That's something although we discussed it, it wasn't really high on the agenda, it's now high on the agenda because we know there's a massive demand and there's a requirement for it.

I: What barriers have you faced in trying to continue working during this time?

R2: Oh, I think it's the same barriers that many people and many organisations are facing, is that one to one connection, that sitting in the office, that being able to have the discussions. We have different volunteers across the different sites. Although they used to volunteer for InTouch to come and serve, it was also a way of them connecting with other people and that side of it I think has been lost and that's quite difficult. I think the other thing that we will now struggle with over the next six to 12 months is the re-engagement with the volunteers. Because there was always something every week where they were committed to and they wanted to do that. Over the last year because we've not been able to operate the sites, those connections have as the nature of volunteering is, that...so everybody comes into it for their own reasons, and if they're not getting that fulfilment then they might actually move onto something else.

Our issues on the board and the management team is how are we going to reengage with the volunteers now? We need to do a bit more of a marketing campaign around that to reengage and say look we're back up and running again now, come back onboard. Now we're only expecting 50 per cent of them to come back because I think the other 50 per cent will still have this subconscious fear of COVID and whether they're going to come into contact with something. So whether they've had the vaccination or not there's always that chance. I think our volunteer numbers will reduce but over time hopefully we'll start getting the momentum back again and getting that reengagement.

I: How many volunteers did you have roughly?

R2: Across the three sites about 100 volunteers, so we have...but out of those let's say if we averaged it out to about 30 per site, they wouldn't come every week, they would be I'm coming once a quarter, I'm coming...you'd get those that call that were there every week come rain or shine, they wanted to be there. And you had others that just came in and did a day, wouldn't see them for two/three months, then they'd come back again, maybe do a

few more weeks and then move on. So that is the nature of I think of volunteering anyway.

I: Is there anything that you think is important to highlight about period poverty during the pandemic?

R2: There's a massive need, it shouldn't be brushed under the carpet, there is a requirement, there is support that's required for families, for individuals, for young girls. I think for us it's that we're just trying to give this support to say you're not alone, we understand, we know that you need that support and we're here to try and help in whatever way, shape or form that we can do. And we'll try and be that vehicle for that change and highlighting the issue of period poverty and maybe other organisations will pick up on that as well and try and offer support as wide as it's possible.

R1: I just wanted to add to that. I think as well one of the challenges around what I wanted to highlight about period poverty is that I think what we're finding is that people are happy to donate things like food products or anything like that. But asking for people for donations or even broaching the topic about period poverty of hygiene packs, there's that little bit of awkwardness, I can't describe it any other way, it's like ooh. I think I don't know if that's [inaudible 00:23:53] or that's a consistent but people are less willing to donate for that kind of cause in a way potentially to not think about it or it's not important, or it's not going to apply the issue around stigma. But it would be useful if there was more of a light shone on this but also more encouragement from the community, it's very much a community feat. It's one of the things with InTouch it's a community setting, any issues that we have in community it should be the responsibility for all of us. But this one I feel it's not highlighted as much, but, yeah.

I: Brilliant. Well thank you very much for your input and contributing. I will get the recording sorted and then once it's been transcribed I'll send you both a copy of the transcript, just for you just check over and just agree to and send it back. And if you have any questions or anything just let me know. But thank you very much and it's good to see you both virtually and I'm glad you managed to join [REDACTED].

R2: Like I say I apologise for one the delay and secondly trying to get on, it was a bit of a nightmare but...

I: It happens but appreciate you managing to make it.

R2: No problem at all. Thank you very much for your patience with it all as well, so we'll look forward to receiving the transcripts.

I: Brilliant, thanks very much.

R2: Thank you very much, take care.

R1: [REDACTED] I'll see you next week I think?

I: Yeah, is it the 8th of April or 6th of April.

R1: Perfect.

I: You again.

R1: Yeah.

I: I will leave you alone eventually, [REDACTED]

R1: But, yeah, thank you. If anything that actually does come up in some work that you're doing in terms of funding or general period poverty stuff please let us know. Like I said [inaudible 00:25:30] I think he's sick of me slightly banging on about this for such a long time, but if we can get it over it will be good because then I can stop annoying him at least.

I: We're going to be doing an event for this project about just disseminating some of the initial findings from talking to organisations. We're basically interviewing people that are doing period poverty initiatives from small to larger across the UK. So we're going to be doing an event in May to get some of the information out, I'll send you an invitation to that so you can come along online, but that might be useful and find out more information and make links as well to see what others are doing and potential funding.

R2: Brilliant.

I: Thanks very much both, good bye.

R1: Thank you.

R2: Take care, bye bye.

R1: Bye.

End of transcript