Researcher BN: Right. Lovely, so I wanted to start by kind of talking about (name of organisation) and how you came access it, what you do there, kind of what you're relation is to it?

SU2: Erm, so (name of organisation) I’m trying to think when I first started actually erm, I've got people that I know that work there and also volunteer there. So we, like I live in quite a small community, and you realise that a lot of people know each other.

Researcher BN: Yeah (laughs).

SU2: So I think, if I remember correctly, I think it was sort of during the pandemic. Erm, and I'm a childminder, so everything kind of like just you know, your world got incredibly small. Erm, I couldn't network anymore erm, when I did have children I was very isolated again erm, because of COVID. And I think at the time one of my friends had a little one and was, sort of said I'm going to this fantastic group, anyone want to come along? So I started sort of hearing the, the, the name of (name of organisation) erm, so I thought right at I'd, I’d give it a shot and, and sort of see what the playgroup was like. Erm, and then attended, and I found that I didn't know that much about the (organisation) so there was a play worker there, erm, I think she was one of the senior members of staff. Erm, and it was such a quiet group, and she sort of sat me down and she told me everything they did, what (name of organisation) was about, the other sort of support networks that was there. I think there was even forms to tick and fill out, erm, just to see

Researcher BN: Ah right.

SU2: ..if you would be interested in it. So this was a while ago and I'm trying to remember correctly but erm, yeah so I got a really good insight into what the, the sort of structure was, erm and it was really quite new to me. Erm, I’d used (name of organisation) before but actually part of research there as well. So my, I’ve, I've studied and my background was research, so when I hear participants, I'm like yeah, I'll come and help.

Researcher BN: (laughs) ah right!

SU2: You know, I, I think it's really important to get, get that so, erm, yeah, and, and for me, I had just gone through a divorce, erm, my financial being self-employed, not making any money, erm, my situation completely changed as well. Erm, I'd never been on benefits before, so I had to access that. I didn't actually realise it was entitled to until I got support during like a divorce and financial sort of health, and the guy was like I think you should be on support here. So I thought tapped into that, but again, and I've got dyslexia as well so got help throughout school and uni and stuff like that. Erm, so trying to sometimes navigate the system, it can be, I think it can be tricky anyways. Erm, and they kind of like sort of pointed me in the direction of people that worked there, that could help. Erm, so I've, I've used that service. I think it was something to do with Council tax, to see what support was there.

Researcher BN: OK.

SU2: Erm, and they sat with me at the computer, looked at what was coming in, going out. Another service I used was the, erm, sorry I'm totally jumping, how I found, how you found out about (name of organisation) and I'm totally just sort of like (laughs)

Researcher BN: Ah it’s alright!

SU2: ..going ahead with like the story of it.

Researcher BN: It’s alright! Go for it.

SU2: And erm, so yes they’ve got a, a erm, like almost a shop but it's subsidised,

Researcher BN: Yeah.

SU2: ..where you paid £4.00 and you can use that. Erm, and I've been, you know, when I need to I've been using that. And it's, you know, there is that community feel, erm and the cafe as well sometimes we'll go to.

Researcher BN: Yeah.

SU2: So that's how I've accessed (name of organisation) and, and sort of really, really enjoy it.

Researcher BN: Yeah. Oh great. So is it, and you go the playgroup regularly as well?

SU2: I try to, recently over the summer I actually hurt my back. I've never had back problems, ended up in A&E,

Researcher BN: Wow.

SU2: Erm, and, and have not been able to sort of put the kids in the buggies to take them. It's getting better but I popped into the shop recently and I, I thought, like the staff I know first names, erm, they ask me how I am, and, hence the reason they gave me your information when I popped in,

Researcher BN: Ah okay.

SU2: ..and they were like we haven’t seen you for a while, so I just obviously they explained my situation, erm, and, and looking forward to going back.

Researcher BN: Yeah. Oh great. So you mentioned you talk to the staff quite a bit, what do those conversations tend to consist of, is there any sort of theme in what you talk about or is it just anything and everything?

SU2: I think kind of everyday life. You know, how, how things are, people going away, if they’re sick, just sort of life in general really.

Researcher BN: Yeah.

SU2: Erm, I think I probably like used it a little bit more to, to almost offload a little bit, because you know they are there to support, and they kind of know my personal situation. So I, I feel like there's a place that I can trust, although I do have to be careful because I am a childminder, so I've gotta keep it to that, it's hard because it's such a small community,

Researcher BN: Yeah.

SU2: ..erm, and I know actually one of the little boys I look after, I took him there and one of the workers there was like ah, I know his mum and, you know, erm, you've just gotta be really kind of professional with what you do say, erm, and kind of keep it as, as sort of okay as much as you can. But obviously, I'm also a person that's sometimes needs help as well. So,

Researcher BN: Yeah.

SU2: ..you know, you’ve just gotta sort of like, try and be as appropriate as you can (laughs).

Researcher BN: Yeah. (laughs) And do you, do you speak to them regularly, and how long do the kind of chats tend to last?

SU2: Erm, it all depends on how busy it is, so, erm, I think when it's quiet they quite enjoy a chat to sort of pass the time and to, to sort of see how you are. So sometimes like if I'm there and the kids are busy, I could have like, you know, quite a brief encounter with them, just sort of small talk, how you doing. But if, if we're out and about and, and we're sort of sitting next to each other and we're having a little chat, erm, it could, it could be maybe for about 15, 20 minutes.

Researcher BN: Yeah, alright. And does that, you say kind of you know them on first name basis, does that mean you kind of see the same people regularly?

SU2: Yeah, it's consistent erm,

Researcher BN: Right.

SU2: ..it’s the same staff that I see, and the, the people that go there are quite consistent as well. So I've sort of got a group, erm and actually there is a mum who lives so close to me, we got chatting at the group, erm, and it, we just got on really well, and being a childminder especially after COVID, like my groups have disappeared a bit, and it's really nice to kind of be, be in those groups erm, just for the kids as well as a bit of, you know, you feel, it's like your work colleagues don’t you, you kind of you need that. Erm, so we've crossed like paths, I bumped into her actually when I just popped in and said hello, they were in the cafe. And I just said, you know, here's my number, do you wanna be my friend? (laughs) And she was really keen, so we’ve been messaging and, and so we’ll probably, because she lives on basically the same street as me.

Researcher BN: Ah that's nice.

SU2: Erm, so we will hopefully meet up, so that's quite nice. Creating a network again.

Researcher BN: Yeah, it’s like the social element as well.

SU2: Mm-hmm.

Researcher BN: Yeah, ah that's good. And so what about, when you’re talking to the staff, do you ever talk about kind of health behaviours, like physical activity, smoking, diet, alcohol, do, do they ever come up?

SU2: Erm, I mean, I think especially being predominantly women that go to the groups there’s always sort of talk of weights, you know. Erm, or what, what they're eating, or sometimes even just drinking like caffeine. Everyone seems to be quite tired.

Researcher BN: (laughs) Aww.

SU2: So they’re also like, I've had three cups of coffee now, and, it's quite often about caffeine to be honest with you, because people are so tired. Obviously lack of sleep. I think with people there’s stress about work. So trying because although, you know, I'm a childminder and I’ve got my routine, but even still like trying to juggle my son, erm, son’s care, and with work and life, like I can still, even though he's, he's older than a lot of the children that go there, I can still sort of relate. So a lot of it is trying to find work that, that's sort of, they could fit it around the children.

Researcher BN: Yeah.

SU2: Erm, because obviously your children, some are breast fed as well and it's like also being able to leave them, so the, you know, when you talk about health there’s probably a bit of stress associated there with, with sort of separating from little ones and whether they work and whether they don't.

Researcher BN: Yeah.

SU2: Erm and which jobs are out there to kind of suit, because not all of them are like myself in a relationship with, you know, where they you know, they can easily, or, or even have cars as well, where they can sort of ping from one place to the next really.

Researcher BN: Yeah. So is that with the staff or with other mams you kind of talk about caffeine and sleep and stress?

SU2: Erm, there's one older senior member of staff, so I think her children are older, but she can sort of relate and sort of, you know, she'll, she'll, she'll sort of reflect on things from when hers were little. Erm, and there's another member of staff there doing apprentice, and she is, she's sort of like struggling with her two and fitting it in work, and so it can be both staff and, and the, the people that use it as well.

Researcher BN: Yeah. Ah so it sounds, are those kind of conversations quite two-way then, do you kind of hear about the staff’s..?

SU2: Yeah I think you do,

Researcher BN: Yeah.

SU2: ..yeah, definitely I would say it's two way. But I think that also builds a good level of trust as well, sort of, you know, they share it with you and can empathise and, and have their own journey going on and, and you can do the same. And there's some people that use the service that just, you know, won't participate in that, they can be quite quiet, erm, and just focus on the children, but it's just, it's just whatever really suits each individual.

Researcher BN: Yeah. And who, who tends to initiate that, those conversations about health?

SU2: Who tends to initiate conversations I’m trying to think, usually I, sorry I’m trying to think

Researcher BN: It’s alright.

SU2: ..because usually I have little one’s that I’m totally preoccupied by. I think quite often it's, it's, it's usually the sort of the sleep deprived parents, whether it's a mam or whether it’s people that are there and, and, or a member of staff that's got two young’uns, it's usually the ones that have young children are the ones that, sort of suffer a little bit more.

Researcher BN: Yeah.

SU2: See erm, I find that quite a few of them smoke there as well. Erm, I used to smoke before having my little one, erm, just on, on like, the odd, say, let’s say a social smoker. But I did smoke back then I stopped afterwards. So erm yeah, there's probably, they’ll go out for cigarettes, but I don't think they’re that worried about the health implications of it.

Researcher BN: Uhumm.

SU2: And no body says ah I, I better give up kind of thing. Erm, but that's again, that's their choice. And I think, I think where it is, it, it, you know, everyone goes out for cigarettes together, and it's like solidarity, and one will look after the kids, and they'll just chat and enjoy, you know, enjoy a smoke,

Researcher BN: Yeah.

SU2: ..and a bit of a chillout time. And I say, I think they see it as a benefit rather than anything else.

Researcher BN: Ah okay. Interesting. And so when you kind of talk about, if your talking about stress or caffeine or sleep even, does it tend to be in kind of a group setting with other mams and staff, or is it one to one?

SU2: Oooh I would say, quite often one to one, but sometimes when there's a sort of, some people sort of chatting, erm, that it can sort of be maybe sort of three or four other erm people there, but it, the group, the groups are so quiet,

Researcher BN: Ah okay.

SU2: And they’re not busy when I go, because when I go in the morning, there’s not a huge amount of people there, so it's nice, I would say, on a busy day, five.

Researcher BN: Ah right.

SU2: On a quiet day sometimes two, three erm, but again it, it might, I, I go in the morning so it might, it might increase after that,

Researcher BN: Yeah.

SU2: And I think like because I go and sometimes I only go for an hour, you can see the register and there’s obviously been a sort of nice flow of people coming and going. So I think it just varies.

Researcher BN: Uhumm. And do you think that the kind of group size effects how you feel about talking about health and lifestyle in any way?

SU2: I mean, I suppose, if there is people that you see regular, and you've got a sort of bond with them and you, you're chatting to them, I think you then sort of are able to talk about more personal things. But if there is people there that, you know, you don't know as well, I think it's sort of, it's just more sort of broad small chat.

Researcher BN: Mmm, yeah. And do you think it's an approp-, would you say it's an appropriate environment to talk about health and lifestyle behaviors with staff?

SU2: I, I, I think so. Erm, but you've got to remember that when you're in a room with people, whether it's sort of like a couple of other people that, you know, you, you know, but not hugely well, that people will always sort of, you always, I don't know, are conscious of who's there and how much do you actually put out there. So I think, people will always hold back because you're in a room setting. You know, it's not a one to one.

Researcher BN: Right.

SU2: Erm, from, from my perspective,

Researcher BN: Yeah.

SU2: ..erm, I, I would say people are very, probably would be quite controlled in what they say, just naturally, because there's, there's so many people you’re, you're just sort of under observation.

Researcher BN: Yeah. And so what about, you know, if you ever access the erm, it the subscription supermarket or the little,

SU2: Yeah. Uhuhh.

Researcher BN: Yeah because I've been in and I've seen where it is. If it was kind of one to one there do you still feel because of other people around, does that affect things, or is it different in that setting?

SU2: I, I would say again, yeah, it's, it's a bit busy. It's a cafe. There's people coming and going. Erm, I, I would say you again you are quite observ-, you know, you're, you're there, people can hear you. So I think, I think, you can be like, oh I'm tired today or I've hurt my back, you know, and it's, you kind of like, you, you know, you probably play a bit of it down as well because, they're not there to offer you a therapy session, really, they're just there to kind of, you know, check in, how you doing, you sort of, you know, you tell, tell them what's happening in life and that's it really.

Researcher BN: Right, yeah.

SU2: There is always that kind of ah I'm pleased you’re doing well or, it's lovely to see you and, you know there’s that good sense of community really.

Researcher BN: Yeah, ah that's good. And so what about kind of the wider determinants of health if you like. So you’ve kind of mentioned the kind of chat you had about Council tax, but kind of employment, housing, finance, erm even mental health, do you ever have conversations with staff about those kinds of things?

SU2: I probably have, like absolutely with pandemic it's been horrendous, erm, obviously going through a divorce and everything is, it's definitely opened up my eyes to an experience that I've, nev-, you know, I, I was, as a kid, we didn't have much money, but as an adult, I've always been quite comfortable, never had to worry. Erm, and then it definitely, but I am resourceful, and I, and I will go to places to try and help myself. Erm, but it's exhausting, it's, I’ve found it is honestly, you know, I'm not working as much. It is starting to pick up. But just trying to keep on top of it and even have my son at the time like home school him. Erm, it was mentally and physically exhausting, and I think, I think professionals and users, like people that attended, were, were incredibly stressed, it was just a horrible time and a lot of them have young children as well so. And trying to sort of balance out erm, you can see people are stressed. You can, some of them I'm aware erm, do take antidepressants. Erm, which is really sad because I'm older, I'm, I'm 39 and a lot of them are younger than me. So I do feel like quite erm, not maternal to them, but I do feel like I, you know, trying to sort of check they’re alright and, erm, and just be there, but I suppose because I am a bit older I do, I have that kind of like I just wanna know that they're okay, that sort of thing. Erm, and, and some of them will sort of tell me, you know. But it's, it's, they don't go into detail. It's, it's very much sort of matter of a fact, erm.

Researcher BN: Right.

SU1: And it’s just, it's sad. It's really sad to see that, that underneath it all you know, there is, there is problems. Erm, and, and just financially, just, thing, things going up, erm, I do think some of them definitely struggle.

Researcher BN: Yeah. So is yeah, that's conversations with other mams and who tends, is that you the tends to initiate those kind of conversations or them?

SU2: Er, I wouldn't, I would never ask if anyone was on medication or anything like that,

Researcher BN: Well yeah (laughs)

SU2: ..so I would never, it’s not, if they want to tell me that I would listen and that's how it goes. I would never ask, like, are you on medication (laughs) you know what I mean? It's just not one of those things. But obviously some of them feel able enough to tell me. Erm, and erm, but it's, it's not really made, made a thing off.

Researcher BN: Yeah. And do you talk about kind of health and lifestyle, anything else to do with health and lifestyle with the other mams when you're at, like, the playgroup, for example?

SU2: Erm, the yeah, I mean there's been a few times mentioned smoking, some, some of the, especially the older, older mums who have maybe sort of smoked in the past and have sort of said about how they’ve stopped. Erm, lifestyle wise, healthy lifestyle. I think, I think, goes, they sell cakes there, so I think especially the people that are, are tired. They’ll, they'll go for caffeine and cake as a,

Researcher BN: Yeah (laughs).

SU2: ..they’ll, they'll sometimes all have that ah, I need a bit of cake or, you know, there's that guilty element of it, that, that they obviously are aware that it'll impact on their health, but we'll still do it. And it's kind of like it's just seen as a bit of sense of humour, but it's obviously related to their health where they do feel guilty. And I'm, I’ve probably done it myself. Erm, I'm trying to think else sort of health wise. Being, I think just being tired (laughs)

Researcher BN: Yeah (laughs).

SU2: Yeah.

Researcher BN: Aww. And so, with the kind of employment and housing conversations with staff, erm, did that, did that happen regularly, and who would tend to initiate those? Was that the staff or you?

SU2: I think after finding out what they offered, I would go and ask, so you could like, in passing there would be, you'd be at a play group and you'd sort of, so I would sometimes, actually even me, I didn't want people to initially sort of know my story.

Researcher BN: Uhumm.

SU2: Erm, so I would sometimes sort of like if it was like a little quiet corner, I would speak to one of the members of staff and see is there any point, is there any time where I could get a bit of support with the, you know, certain things, erm like you say Council tax was one. And, they would then organise it for me.

Researcher BN: OK.

SU2: And also while I went for a job, er, application, form, erm, and that was working in the community, and the, the one of the, the, the sort of main managers that worked there, I spoke to him about it, and just sort of got a bit of, bit of advice, but again that is, that is me asking, asking for help really.

Researcher BN: Yeah.

SU2: But I have to say at the very start, like they pinpointed what, what was there. So I kind of had a really good insight into what, what was there.

Researcher BN: Yeah, ah that's good. So would you say, erm, kind of the outcome as being positive when you’ve initiated a chats about, those kind of things?

SU2: It’s been really positive actually and actually when we started going through, when we went through all my incomes and outgoings, it was so low I had more going out than it did in income, and it was the staff who initiated and said here’s a, here’s a grant, like a food grant. And I think it was something of about £75 just so I could go and, you know, get food and that was, that was them who would have initiated that. So I think if they see what's going on, erm, they can then initiate what, what can, what can help.

Researcher BN: Yeah.

SU2: But even my bad back recently, I was off work and I, I phoned because I didn't, I’ve never, never had to sort of understand being self-employed and being off on sick. So at that point, I went to Citizens Advice and got a bit of, a bit of help from them. So again, I feel like although it's exhausting sometimes having to keep on top of everything, I suppose, I suppose me as an individual, I will go and ask for help.

Researcher BN: Yeah. So was that independent to (name of organisation) that you accessed..?

SU2: It is, yeah it is.

Researcher BN: ..Citizen’s advice, it wasn’t through them?

SU2: No, but I think and, and to be honest with you, I was, I couldn't really get out and about very well. So I you know, I'm sure I could pick up the phone at some point and call them. Erm, but I just knew Citizens Advice was probably like more specialized in, in erm, in, in sort of self-employment.

Researcher BN: Yeah.

SU2: But I, I, I kind of see (name of organisation) as a safety net, and to be honest with you, where I live is, is, is, is quite a deprived area. Erm, and we were at the play park today with the, with the children, like I had my son and I had the little boy I was looking after. And this woman came and spoke to me. And she had a little one there, erm, and she was like, she, she initiated it with me aswell, she was like, erm, ohh I’ve got no, something about money, I've got 17 pence to my name. And I was like, oh no, I'm so sorry. And she was, I was like erm, she was like ah but I’m getting paid at such and such, and was like okay, she was like I’ve hardly got any nappies, and I don't know ‘cause she saw, I had like a one year old there and I wondered if she sort of like, you know, she, I was, she thought that was he was my son. And like, you can empath-, again, you can relate, can't you?

Researcher BN: Yeah.

SU2: And I just, and I said to her, I was like have you ever heard of (name of organisation)? And she was like no, and I explained where it was, she says, she says, I says if you're really short, they would just give you nappies. I said if you even go in the toilets there's, there's nappies and there's sanitary products there, like honestly. So I, if I, if I see people, and my, my friend’s a physiotherapist at the, so I've been referred to her at a local doctors. And she said she's finding that, obviously she has to keep it really discreet, and won’t, she says she's fighting people in a lot of hardship, and it's affecting their physical and mental health, especially in the being a physiotherapist.

Researcher BN: Yeah.

SU2: And there's now a wellbeing officer there. And I even her as a professional I says please, like use (name of organisation), you know, and explained that to her. So, I do try and sort of advocate it as much as I can to people, because it is, it's such a, such a good source to go to.

Researcher BN: Ah that's great it shows you've had a really positive experience if you’re kind of recommending it to other people.

SU2: Ah it's been, honestly, it's been like, it's been so good, and they genuinely care. That's, that's the thing. And I think I found it, I was in, in like all honesty, I was embarrassed about using it. You know, I really was, because, and I think a lot of people are.

Researcher BN: Uhumm.

SU2: I think I felt a bit like I’d failed. Erm, and, and, and that I was having to ask for help, and I think that's really really sad, and they must get that a lot, and almost like having to, when I first met them like having to explain my situation, almost as if like, this is the reason why to kind of justify it. But they never felt made me feel like that, to be honest with you.

Researcher BN: Yeah.

SU2: And I think that because I have got a bit of a mixed background like, er, I don't know, I felt like a little bit of an impostor, erm, to be honest with you. But I, I suppose you just, but the thing is though the lovely thing was, that you go there and you are, you are welcomed, erm, and people don’t judge, as best, I'm sure, you know, people probably do judge (laughs), but, I er, you know, I get, I get the feeling that it is inclusive and, and I think it's becoming quite diverse, because I think people's times are changing across all, sort of, sort of, you know, you sort of have this this sort of like vision of who, who would use these services and I, and I think that it's changing, and I think, you know it’s important that it's, it's, it's accessible to all really.

Researcher BN: Yeah, yeah, definitely. And so is there anything that would help you have kind of health and lifestyle conversations with staff, anything that might assist, in terms of anything, really.

SU2: Yeah, I mean, actually just remembering when I first started, the, they were doing cookery courses, and I think they were offering free, like I free, I don’t know, sort of slow cooker or something like that, like a cooking appliance if you could attend.

Researcher BN: Oh right.

SU2: And I think that was to promote healthy cooking, like healthy eating.

Researcher BN: Uhumm.

SU2: And there's always a push on fresh veg at the shop as well, so, you know, trying to really push, making sure people have got fresh produce and, and sort of empowered to, to, to sort of be able to cook it themselves. Erm, and what was the question, say that question again, just so I’m..

Researcher BN: Is there anything that would help you to have these kinds of conversations that we've been talking about?

SU2: With regards to health?

Researcher BN: Yeah, and even the social determinants, like the wider, health determinants as well.

SU2: I think people are quite, I, I can imagine as professionals they would be quite, I mean it's, it's starting that dialogue isn't it? How, how do you start it without it, you know, insulting someone, like

Researcher BN: Yeah.

SU2: ..you've gotta make it very sort of, you know, this is here, just sort of you know, I suppose, what they can do is, I suppose what they're doing already really is, is, is providing a service where it's, you know, here have a free slow cooker and come along to this group and we're learning about, you know, we're cooking and, I think, I think, and also aswell, they make it, where they have fresh fruit all the time with, with the play groups and, and that’s, again, it's not like you must eat it, it's like here have it, it's there. I think, I think just sort of, working as a community to kind of, erm, to sort of like, show, sort of model, like healthy, healthy living, and be able to access it. The one thing I do, I go to a gym, erm and, and I've, I've always protected my gym membership. My little boy goes, he swims.

Researcher BN: Awww!

SU2: Yeah, again, you know, it doesn't matter how times have been hard, I really protect that because for me it has been a godsend for my mental health.

Researcher BN: Uhumm.

SU2: Erm, and, and yeah, sometimes like, I, I feel like oh, should I, should I be using this and still having a gym membership. (laughs) Like do you know what I mean? Like it is, I think having, we all want that, we all want to have like services where we can access, and I think having, having services, so maybe like, where they can access gym memberships if they want. So, again, where there’s, I think, I think having things that people have to commit to is very hard.

Researcher BN: Right.

SU2: Because, you know where it's, you can do this, but you've got committed to it. I think you see there people, people’s lives are inconsistent like,

Researcher BN: Uhumm.

SU2: ..for their health, whether how they're feeling on the day, how they're little ones are, work, their relationship,

Researcher BN: Uhumm.

SU2: ..can they drive, can they afford petrol that day, like it's so inconsistent, that to actually sign things up, it actually sets them up to fail sometimes because, then they beat themselves up or they feel like they're letting someone down or maybe they might go quiet because they know it's not happening, especially if you've got er mental health issues.

Researcher BN: Uhumm.

SU2: And I think that's something you've got to be aware of that people can just tap into it at their own leisure.

Researcher BN: Ah interesting. So flexibility helps do you think?

SU2: Yeah. Absolutely, I think,

Researcher BN: Yeah.

SU2: Definitely.

Researcher BN: And is there anything that would stop you from talking about health and wellbeing with staff?

SU2: I mean, I think if, if it, if they, yeah, I think, it has to be quite light. I think if they came and approached me and there was other people around me to talk about ah how’s your mental health today (SU2), and how is this, and, you know, and actually when some people are having a really shit day and you ask them how are you and you make sincerely mean that and you wanna go into detail, it can be really traumatic, like, you know, you're doing this interview with me and you're like this could be traumatic. It triggers emotions.

Researcher BN: Uhumm.

SU2: So, hence the reason people will just totally dim everything down, so they can cope with it as well.

Researcher BN: Yeah.

SU1: Erm, so I think it's, it's, it's sort of doing it in a way where, either you have that safe space where people can come, or erm, but being too, you know, too personal about it and it, it, it's, it could, it could trigger quite a lot of like emotional stress and, or people might find to be embarrassed and not want to come.

Researcher BN: Yeah. Ah so do you think there’s sometimes the risk that it would actually do more harm, depending on the situation?

SU2: Possibly, I think, especially if, if you feel like you're being policed, er a bit, I don’t know if that makes sense. I mean, I don't know how you, you know,

Researcher BN: Yeah.

SU2: ..to be policed by, you know you, they're all very smart people and they lead their lives and they make their life choices. Erm and that a lot of them are doing their best.

Researcher BN: Uhumm.

SU2: And I just think someone sort of, I think it needs to be done in a really caring way, and a really supportive way, not in a kind of, we know what's best for you this is what you need to do, because I think that's where especially here, you'll get, you'll get people that clash like,

Researcher BN: Yeah.

SU2: ..and won’t want anything to do with it. Erm, but I think if it's done, almost like in a community way where, where everyone's involved and it's a positive outcome and people aren't policing and, and controlling. I think, I think you would probably have quite a good, good turn out and make it, make it for the elderly and the, you know all the, the age groups to access really,

Researcher BN: Yeah.

SU2: …like the total community effort.

Researcher BN: Yeah, yeah. And do you think the same applies like when we're talking about conversations with other mams, say at the playgroup, as to what might help and what might stop you? Or is there anything different that might apply in that situation?

SU2: I think a lot of the mums will, it’s almost like, I think you find that the staff that work there drip feed it into the like, it's almost like this is on, this is on, like it's almost like sort of like, they just, they just plant the seed, that's all they do, plant the seed, don't put any pressure on anyone, really kind of sell what they're doing, and then you will find that, you know, the parents that are interested in it will start asking more. There's often like leaflets you can get. Erm, and I think it works well like, you know, with that setting as well as there’s little cliques that you can see natural little cliques sort of developing in all the different, like they’ll meet for coffee, and you'll see, like the elderly, there's always that sort of group and, I think it's sort of once one person goes and is quite keen that, that, you find that others will follow kind of thing.

Researcher BN: Yeah.

SU2: But, yeah, I, I think, I think just having free reign of how you want to access it, it makes them mum, the mums feel, feel quite, well not just the mums, the parents feel, feel like, you know, it’s there if they need it, and sometimes parents go and they're just, or mums go and they're absolutely knackered.

Researcher BN: Yeah (laughs)

SU2: (laughs) Like, you know what, they’re probably not even taking in what others are saying like, they're just there to play with, like let the kids play, have a bit of a break, have a coffee.

Researcher BN: Yeah.

SU2: It’s like, to them it's, it's, it's meaningless because it just depends on what kind of day it is, so.

Researcher BN: (laughs) Yeah, I could imagine.

SU2: I’m trying not to be insulting to it, but there is days where I've rocked up and I'm like, I'm not even like in the conversation, I don’t even wanna be in the conversation, as a rude thing. So, I think it just really depends on catching people's moods.

Researcher BN: Yeah, yeah, definitely. And kind of what do you expect from staff in their role? Do you think it should cover kind of having conversations like the ones, when you say they plant the seed, do you think that's expected in their role, or do you consider that as kind of above and beyond?

SU2: I think it, I think because it's such a holistic approach, that centre offers everything, and I think that's the setup for it. You can see that it overlaps everywhere because they want to make sure that people have got the best and are, can access these services. So yeah, I think, I get that, I think erm, I've worked in children's centres, I’ve worked in places before, I kind of, you know, you know the roles and, and it's, they do it well. I think what is really important though is that people that work there want to work there. They want, they have that caring side to them, that, everyone has their good days and bad days don't get me wrong, you can't always be this perfect robot. But, erm, you, and you need to have like good interpersonal, that kind of, you, you need to be a therapist almost, you need to read the room. You need to know what people are doing, how they're feeling. That is crucial to, to it because people are sensitive erm, and erm, I think that's just really, really important in their role, to, to, to have, have good people skills.

Researcher BN: Yeah, yeah. And trusting. And so what about kind of, when the, bringing in conversations about health and lifestyle, do you think that's part of their role? In terms of what they do at (name of organisation)?

SU2: So I think like a lot of my, my, the time I spent there is, at the play groups, but yeah, I mean I, I mean my backgrounds, you know, education and, and, and you know, as a professional at work there or you know, I would, like I have a legal obligation to make sure that, you know, the Community and the children attending are erm, are promoted in sort of healthy lifestyle choices, so yeah.

Researcher BN: Yeah. So in terms of how involved do you think they should be in your health and wellbeing, where do you think the perfect level is?

SU2: I think if people use, say I used the childcare, the, the, the play groups and there was, you were there so you could make informed decisions. So you have like information saying, not only is this a playgroup, but it's there to support everyone's, you know, health, health and wellbeing. Which, when you go on the website it does, it does have that, it does say that it's there to support, you know, people’s wellbeing and health. And I think, I think as long as you, you're sort of made aware of it, and you can attend the groups with this informed, you know, knowledge that it's, it's not just gonna, they’re not just gonna leave you be and, and let you sort of play. That there's going to be elements in sort of supporting your health. And I think as long as it's done in a really caring way, again read the room, if someone’s not interested, don't push it, like you know,

Researcher BN: Yeah (laughs)

SU2: ..have a poster there if they want to access it, they can access it. And er, just do it, do it that way really. I don't think, I think as long as it's done in a really caring supportive way. And to be fair, people love the freebie, like even going there and they'll be like, oh, there's gonna be some milk, er, out of date tomorrow like, erm or, here there’s some, a surplus of vegetables and erm, or there's some healthy like children snacks, like everyone absolutely like adore, adores it because you’re like brilliant, you know. (laughs)

Researcher BN: (laughs) Yeah.

SU2: Saves us money.

Researcher BN: Yeah, definitely. Is there anything extra that you would want to see from staff?

SU2: Let me think, I think it's really hard because sometimes, I'm quite opposite, like I, I do, I love, like I, I sort of, I am quite sensitive I think that's why I work for children and I've worked in the community. I do sometimes see people that go there who aren’t, who, who just naturally seem quite like introvert.

Researcher BN: Right.

SU2: So, you know, to, to speak openly in a group, is just not what they want to do,

Researcher BN: Uhumm.

SU2: ..they don't feel comfortable about it. And they'll quite often keep themselves to themselves and make very sort of like small chat. Erm, I suppose they're the probably, the ones that are going to be quite hard to reach. So, again, I don't really have the answer to, to what, er, I just think, I just think, I think even just knowing that there's a service always there regardless, I think that, that, whether you use it or not, that gives people a bit of security.

Researcher BN: Yeah. And is there anything you would want a talk more to staff about, any kind of topics that you wish you could talk to them more about?

SU2: Erm, I’m not, I mean again like no, I, I think we kind, you've got, there’s so many different, like many different levels isn't there, like I use the, the, the staff at play, like they work with children, that's their, their role. They are there to support us so, again, you talk to them in a, in a level that you feel comfortable with. So I talk about, if I need help, I'll, I will, if it's just small chat with the kids about life. Erm, I think they will always do that, if, if I initiated something and I needed help with it, I think they would always go out of their way. I hope, I think, I've, I've never experienced not, where they would try and, try and problem solve, or they would try and point you in the right direction, to then go to that next, that next level of maybe you need a bit more support. Because I just, er yeah, I think there's always different levels of sort of like, you know, where do you, where, if you really need support or, you know like that woman that's on, on medication. She's not going to openly, she probably needs help a lot.

Researcher BN: Yeah.

SU2: Like she’s not only just gonna go into a playgroup and start asking for it, I don’t think.

Researcher BN: Yeah.

SU2: Erm it’s, it is a hard one.

Researcher BN: Yeah. No, that sounds positive though, that they, you feel that you could talk to them about anything?  
SU2: Yeah, absolutely. I feel like, like I could erm, talk to them. But again, I’m, I’m a child minder and I, and I see people that I know. And I, I do, I have to be, I have to be careful. So I do keep it very sort of controlled and professional. (laughs)

Researcher BN: So there's that barrier (laughs).

SU2: Yeah. And they see me as well. They do see me and I do, I do say to them like I have to be careful what I see and, erm, if there's been times that I have said certain things, er, I say to them, please, you know, keep it sensitive between me and you.

Researcher BN: Yeah.

SU2: And they, they are aware of it, because it can be so relaxed sometimes, where people are chatting. And I, as a, like as a childminder, I need that level of, okay, it’s small, it's all chat you know, they're there if, it's like a free dialogue. But, there is times as a childminder like I've told them things and that, it doesn't need to be just like a you know, it needs to be professional on both sides. Which I, you know, I think they're well aware of.

Researcher BN: Yeah. Ah so there’s that added layer for you, isn't there? (laughs)

SU2: Tell me about it. And like as a professional as well like, I don't want them to see my, again like my personal background. Because people can judge and will judge.

Researcher BN: Yeah.

SU2: Erm, there’s that that's part of sort of staying in a, in a small community.

Researcher BN: Yeah.

SU2: But I don’t think any of the parents I’ve ever worked with would ever judge or.

Researcher BN: Yeah. So that would kind of, do you think that would be the only thing you feel like you couldn't talk to them about, would be anything to do with..

SU2: Yeah, yeah.

Researcher BN: ..kind of the children that you mind?

SU2: Absolutely, I think so. I do, I do get the impression that, that you can talk to them, but you then you know where they are. Like if I wanted to talk to them, if I felt like, you know, there’s something like that I really needed to speak to them about my health, I would then go to a doctor. Like how, you know what I mean, you wouldn't, you, you know, the different levels of, of professions and who you, who you go to so.

Researcher BN: Yeah.

SU2: That would, like how, you know, you talk about health. Like, if I thought I had like major health problems, I would, I would go to the doctor. I think, I think where they could really help is, is about mental health. Like I think again, it's really important to read the room, like I think, you know, they'll, they'll see people struggling. Like, people, you can see in people's appearance like, you know, if they're having a really tough time. And I think, I think although, you know, I think that's the thing they've gotta be really aware of.

Researcher BN: Right.

SU2: Erm and I suppose, that's where, I suppose they could sort of take someone to the side and just say are you OK, and have services that they might not be as specialised in it, but services that, local services that again is accessible,

Researcher BN: Uhumm.

SU2: ..that they can then point that person to because, erm, I do sort of see people’s mental like, you know, I think up here people do struggle with their mental health.

Researcher BN: Yeah. OK. Interesting. So mental health is the main thing, important thing, do you think?

SU2: Yeah, yeah. But again, I think especially there's a lot of people that are, have young children, and I think trying to balance work and young children, although it's mental health but they get through it, you know it, it is a really tough time for people.

Researcher BN: Mm-hmm.

SU2: And coming out of a pandemic as well, where it's sort of rocked the boat.

Researcher BN: Yeah.

SU2: Most people, I think people are incredibly sensitive, and it affected children that have grown up in the pandemic, so they might, you know, need additional, additional support even me as a..

Researcher BN: Yeah.

SU2: ..childminder for any roll-outs sort of, in place to try and support the children that have gone through the pandemic. Erm, and you do see, there is a report that there is developmental delays. Erm, which, which,

Researcher BN: Ah wow.

SU2: ..yeah. Yeah. So, so there’s, there’s sort of like a pattern where it's all the sort of core subjects. So it's like, you know, speech and language and social, just because they’ve not had the opportunities as you would expect so, there is the, you know, erm, offstead and like the Department of Education are rolling out, erm, sort of strategies to try and build it, but if you're, if you've got, if you've got a family that, where they, the child's not maybe been adeq-, like able to socialise as much or communicate erm, and you know, will add added pressure to, to families.

Researcher BN: Uhumm, yeah. And kind of lastly, do you think having conversations with people who work at (name of organisation), for example about health and wellbeing, do you think that would have an effect on your health and wellbeing ultimately?

SU2: I think knowing that there is a support group, that there is somewhere, I mean, you know, it's in a professional level, but you know that a lot of it's voluntary and that, that that's their role in the community to support, support you. Erm, what, say that question again just so I can answer it correctly.

Researcher BN: Do you think having those conversations about health and wellbeing will actually impact your health and wellbeing?

SU2: Yeah, yeah. Got you yeah, so yeah, just happy knowing that, that, that support network’s there. Just like having good friends, you know it is worth, it is really important that. And, and knowing that if there was like, it's not only me, but obviously I need to make sure that I'm financially OK for my son, and that I'm being supported myself, because if I tip or I'm not able to do it, and that has a knock on effect of my son, and, and you know, that, that is my main drive to make sure that we're OK, and it's my responsibility at the end of the day but, it is like it's really hard, I feel like I'm constantly spinning plates. Erm, and to be, like to, to access help, it's like, if you just had a normal job and it ticked away and you finished and you could pick, everything runs smoothly it’s like that, you know, nothing changes. But, if you're self-employed or you’ve got ill health or like my work, it, my income can go up and down especially with the pandemic, and trying to fit life around my son and it's like, it's so inconsistent so everything has, triggers stuff, as soon as you might dip in financials you then need to trigger other things and it takes time and communication, technology doesn't work. Er, it's just, it's exhausting. So,

Researcher BN: Yeah.

SU2: And, and knowing people like, even, like I’ve got dyslexia as well and knowing that someone was there to sit behind a computer with me, just, just to give me a, even as a fully grown adult, just to say, right, you know, let's do this together rather than you trying to do it yourself, because it can turn into a massive monster where you just don't want to do it. Like I've just had enough (laughs). I've had a full day with my child and I’ll I wanna do is switch off. So

Researcher BN: Yeah.

SU2: ..yeah, it's just knowing that they're there, and that they will listen. Is, is so important erm, and I think, if they're having a hard time themselves, like if they're under pressure, that might add as a barrier because you, as a person you can say actually they haven't got time for you or they, you know, they’re, they’re under pressure. So I think like with (name of organisation), I think it's really important and other services that it's sustainable, so that they are, and it's so hard because like every person's individual, every case is like, you know, and every case will need time.

Researcher BN: Yeah.

SU2: But if you go to the doctors you do this, everything's just rushed, there’s always like set times. You know you're in you're out, it's, it's quite pragmatic.

Researcher BN: Uhumm.

SU2: And you get that, but at least with this trust, there’s not that kind of element of just a service where it's just in out you know, that's the only way we can sustain it. It's definitely like, we'll take that time and I think that is really crucial to, to maintain that.

Researcher BN: Yeah, yeah, definitely. So is that, that was all the questions I had for you.

SU2: Amazing.

Researcher BN: Is there anything else you wanted to add?

SU2: Erm so yeah, what, what sort of like, with doing this research, what do you hope to sort of gain from it? What are you trying to sort of get an insight into? I’m just being nosey on my part really.

Researcher BN: (laughs) Yeah it’s fine I’ll juts stop the recording and then.