

## **“Fostering Community Resilience through the Online Intergenerational Crochet Communitas during the COVID-19 Pandemic – A Case Study of the work undertaken by Athlone Family Resource Centre”.**

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### Abstract

The challenge of becoming more resilient through profound social change faced by the pandemic is ever present. The crumbling of social norms can present unique opportunity for practitioners to reframe how we think and approach our practice. The exploration of the intersection between participation in the arts and the concept of community resilience within the field of family support and social care given the current climate is more pertinent than ever. This paper explores the benefits of participation in the Athlone Family Resource Centres “Community Wellness Blanket” action which was an initiative funded under the Keep Well Campaign.

A private peer-led social group was established on the Facebook social media platform. The group would have a time-limited format of a 12week period to allow participants to contribute to a specific community development action. Members of the public were invited to voluntarily join the group. Their consent to participate was registered within the group and anonymity of members was guaranteed. Members of the group could post comments, videos and could interact with others for the duration of the project through the group format. The Athlone FRC Coordinator and a member of staff acted as facilitators for the group.

Preliminary instructions were provided to group members and they were requested to create one or more crochet squares, a leaf, flower, or butterfly. These individual creations could then be posted to the Athlone FRC office. The Facebook group contained a series of educational videos to teach basic crochet skills to those without previous experience and to teach more advanced members varying crochet patterns and techniques. At the end of the twelve-week timeframe, the individual items would be sewn together by a member of staff to create a patchwork quilt. This quilt would become a visual representation of how community could remain connected and resilient during the pandemic lockdown, and how it could blanket community members in a sense of well-being in a time of crisis.

In total 164 individuals became members of a peer-led social support group over the 12-week life cycle of the project; 60 artists contributed to the creation of 5 wellness blankets; 45 exit interviews took place, and two focus groups took place. All transcripts from the research process were subjected to thematic analysis and the assigned indicative coding method held a theory and data drive framework.

Findings from the evaluation process highlights the widespread impact of Covid-19 has led to feelings of isolation, loneliness and disconnection from peers or family. Benefits of participation in the project have been cited as a recognised increase in social capital and sense of agency. The project’s ability to provide a sense of escapism and contribute to the formation of new hobbies were also recognised. Finally, it was evident that group members had a felt sense of social cohesion and purpose.

The need for organisations and practitioners to design novel forms of engagement to address such issues is pressing. Creativity and imagination are required to find suitable solutions for

diverse problems. Creative approaches to practice work within the intersection of synergy between the creative flow, the community, and the practitioner. Multi-faceted artwork has the capacity to express the complex character of a culture; participation in the creative process has scope to cultivate a sense of social cohesion, identity, and connectedness.

### Introduction

Coping is described as “the set of cognitive and emotional efforts assuring the overtaking of external and/or internal specific constraints challenging or exceeding the usual resources of an individual” (Lazarus & Folkman, 1984). The coping process is dependent upon the assessment of risks and dangers, and the evaluation of internal and external vulnerability and capability (Vinay et al, 2000). Beyond coping, resilience is the ability to overcome the impact of adversity and constraints. Resilience is developed out of coping by making sense of a situation using optimism (Cyrulnik, 1999), imagination and creativity (Guedeney, 1998), flexibility and change of usual behaviours (Rowland, 1989)

Community resilience is an “adaptive capacity”. Society’s capability to draw on its individual, collective, and institutional resources and competence to cope with, adapt to, and develop from the demands, challenges and changes encountered before, during and after a disaster (Daly, 2009). Fundamentally, community resilience reflects the notions of unity and solidarity, which assist an individual or community to persist through times of adversity, crisis, and uncertain futures. Nassim Nicholas Taleb notes that human ecology is antifragile and possesses the uncanny ability adapt - the more resistance we face the more resilient we become. The concept of community resilience within the field of family support and social care given the current climate is more pertinent than ever.

The global crisis caused by Covid-19 has created profound change whereby society now oscillates between normalcy and crisis. Victor Turner’s theory of *communitas* purports that change occurs in cycles via universal catalysts. We now bear witness to great social transformation - long established mores which have shaped individual, social, and professional experiences have become obsolete and in the face of uncertainty we have had to find new ways to interact. Brooks et al., (2020) and Xiao et al., (2020) notes that the pandemic landscape has had, and will continue to have, a serious impact on individuals and communities across the world. Collectively, we face a changing landscape which impacts directly on various aspects of their lives, such as family life, employment, health (Gangopadhyaya and Garrett, 2020; Xiao et al., 2020). This accumulation of multiple stress sources holds the capacity to create decreased feelings of wellbeing and increased feelings of psychological distress. In the face of uncertainty, what we can be certain of is that new ways of organizing global society will emerge.

In the face of the adversity and trauma which the global pandemic has generated, it is useful for organisations to reflect up key core principles of trauma-informed care such as safety, trustworthiness and transparency, collaboration, empowerment, choice, and intersectionality into practice, to better respond to the needs of individuals and communities within our society. Through this lens, practitioners become cognizant of service users physical and emotional safety needs. Organisations build trust among stakeholder such as funders, staff and community members and maintain transparency in their policies and procedures.

The Report on Social Implications of Covid-19 in Ireland (Department of Taoiseach, 2020) has sets out a diverse range of issues which are currently impressing upon the general population. It acknowledges the pandemic has significantly impacted upon mental health and wellbeing,

experiences of social isolation, lack of social interaction, financial stresses, prevalence of domestic violence and a range of child protection and welfare issues. Creative approaches to social care are now more than ever required to engage innovatively with those who are most vulnerable and have been most affected by the pandemic. A series of coordinated government responses such as the Community Mental Health Support, the Community Call and In This Together Well-being Initiatives are currently underway to address the sense of disenfranchisement and isolation created by the pandemic landscape. The task at hand presently for practitioners at the cold face is to recognise the lived experience of service users and generate an awareness of how identity characteristics such as race, gender, sexual orientation, privileges, or oppression shape an individual behaviour and world view.

### Context for the Study

The National Family Resource Centre (FRC) programme emerged in the late 1990's as a government response to addressing disadvantage, poverty and to support the functioning of the family unit. At present 124 FRCs existing across Ireland, with most located within or supporting communities experiencing significant socio-economic disadvantage. The FRC programme is core funded by Tusla Child and Family Agency and is managed under the working remit of The Department of Children, Equality, Disability, Integration and Youth.

Athlone FRC aims to create a community where people from Athlone town and the surrounding rural areas can actively engage in all elements of family and community life; develop resilience and manage life challenges effectively. This is achieved through a strategic partnership approach with community, voluntary and statutory partners committed to affecting change and challenging social injustices. It serves a population of approximately 15,951, comprising of a large urban area, within which five RAPID areas of socio-economic disadvantage are located. Additionally, there are several smaller rural areas which circle the outskirts of Athlone towns urban perimeter.

Athlone FRC adopts a 'cradle to grave' approach which enables us to remain close to our service users throughout their lifetime. The FRC works with a diverse population group which includes children, individuals, families, and older people affected by a wide range of societal issues such as unemployment, poverty, homelessness, rural isolation, social isolation, mental health, substance misuse and declining physical health due to illness or aging. Additionally, we support members of the Travelling and Roma Communities and newly emerging migrant communities located in Athlone town and the surrounding rural areas. The emergence of Covid19 has required Athlone FRC to identify innovative and creative methods of engaging with services users during these unprecedented times.

### Approach

#### **Participants**

Participants were not asked to state their age for the purpose of the study; however, it is estimated that participants age range was from early-twenties to mid-seventies. Most participants were female mothers, grandmothers, and primary carers of family members. Approximately one third of participants lived in Athlone town, the majority of those were from rural communities across the County Westmeath geographical location. The established peer-led social group developed for the project was not treated as a gateway to accessing additional supports within the Family Resource Centre. Rather, it was the intention to create a middle connecting layer between diverse social networks who could maintain a reciprocal relationship for the duration of the project.

## Method

The method used for data collection was represented by semi-structured exit interviews and focus groups. Individuals were asked to identify how they had heard about the project; what was their motivation for getting involved in the project; how did they feel about being part of the project; and if they would consider becoming involved in similar initiatives in the future. Interviews usually lasted between fifteen and thirty minutes and were afterward transcribed verbatim for the purpose of analysis. In total 164 individuals became members of a peer-led social support group over the 12-week life cycle of the project; 60 artists contributed to the project; 45 interviews took place, and two focus groups took place. After the interview, all transcripts were subjected to thematic analysis and the application of an inductive coding system held a theory and data drive framework.

*Table 1 – Thematic Analysis utilising inductive coding system.*

<p><b>Theme</b> – Impact of Pandemic</p> <p><b>Subtheme</b> – Social Isolation</p> <ul style="list-style-type: none"> <li>• Impact of Social Distancing</li> <li>• Impact of Lockdown Restrictions</li> <li>• Lack of connection to friends and family</li> </ul> <p><b>Subtheme</b> – Anxiety</p> <ul style="list-style-type: none"> <li>• Uncertain future</li> <li>• Fear of infection</li> <li>• Worry for family and friends.</li> </ul>	<p><b>Theme</b> – Reasons for Participation in project</p> <p><b>Subtheme</b> – Sense of contributing to community.</p> <ul style="list-style-type: none"> <li>• Contributing skills to help others less experience in the group.</li> <li>• Contributing skills to develop a tangible object for the community.</li> </ul> <p><b>Subtheme</b> – Boredom</p> <ul style="list-style-type: none"> <li>• Mundane nature of lockdown</li> <li>• Trying to pass time in the evenings.</li> <li>• Something positive to focus.</li> </ul> <p><b>Subtheme</b> – Increase Social Capital</p> <ul style="list-style-type: none"> <li>• Sense of connection to others</li> <li>• Trust, safety, cooperation, and reciprocity within the group.</li> </ul>	<p><b>Theme</b> – Impact of the Project on Participants</p> <p><b>Subtheme</b> – Development of new skill</p> <ul style="list-style-type: none"> <li>• Learning to Crochet</li> <li>• Learning Advanced Crochet methods</li> <li>• Peer Mentoring</li> <li>• Intergenerational Learning</li> </ul> <p><b>Subtheme</b> – Increased sense of connection</p> <ul style="list-style-type: none"> <li>• Online connection to others with similar interest</li> <li>• Meeting new people</li> </ul> <p><b>Subtheme</b> – sense of agency and control</p> <ul style="list-style-type: none"> <li>• Escapism (avoidant, active, passive)</li> <li>• Established evening crafting routine.</li> <li>• Passing of skills to next generation</li> </ul>	<p><b>Theme</b> – Project Outcomes</p> <p><b>Subtheme</b> – Spin Off Initiatives</p> <ul style="list-style-type: none"> <li>• One Million Stars Project</li> </ul> <p><b>Subtheme</b> – Tangible cultural artefact created of community's resilience in challenging times.</p> <ul style="list-style-type: none"> <li>• 5 Blankets Developed.</li> <li>• Community Exhibitions held</li> </ul>
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## Procedure

A private peer-led social group was established on the Facebook social media platform. The Community Wellness Blanket Project had a 12-week lifecycle and an 8-week research evaluation phase. A two-week advertisement and promotional campaign took place through

local media and Facebook to inform members of the public about the purpose of the project and how to register their interest in participating in the community action. A private Facebook group was created online within the Athlone FRC Facebook Page. This group was monitored and controlled by the Athlone FRC Coordinator for the projects 12-week lifecycle. Members of the public who wished to become involved in the project, would register their request with the Athlone FRC Coordinator, who then permitted the individual access to the private Facebook group. Their consent to participate was registered within the group and anonymity of members was guaranteed.

Within the Athlone FRC Community Wellness Blanket Online Peer Support Group, there was an educational learning section for group members. This section had five learning units which contained instructions on how to crochet from a beginner to advanced crochet standard. Members could discuss their progress or ask questions under each of these units. The Athlone FRC Coordinator and those who were experienced with crochet could act as peer mentors offering advice and guidance to those following these learning units. Members of the group were also free to share images of their progress within the confines of the private Facebook group. Members of the group were not allowed to share personal information, promote external businesses or information that was not relevant to the community action within this private Facebook platform. Although posts were monitored frequently for content which did not fit the community ethos, members respected these guidelines and no such violations to the group format and contract occurred.

Members of the group who did not have access to crochet materials for the project could request a 'Starter Packs' from the Athlone FRC Coordinator. These packs contained a crochet needle, four yarns of different colours and a crochet pattern demonstrating how to create a basic 'Granny Square' for the project. Staff of the Athlone FRC distributed these packs to participants residing within Athlone town and the surrounding rural areas and posted them to those residing in other counties across Ireland who wished to become involved in the project.

Preliminary instructions were provided to group members and they were requested to create one or more crochet squares, a leaf, flower, or butterfly. These individual creations could then be posted to the Athlone FRC office. The Facebook group contained a series of educational videos to teach basic crochet skills to those without previous experience and to teach more advanced members varying crochet patterns and techniques. At the end of the twelve-week timeframe, the individual items would be sewn together by a member of staff to create a crochet blanket. This blanket would become a visual representation of how community could remain connected and resilient during the pandemic lockdown, and how it could blanket community members in a sense of well-being in a time of crisis. The blanket would go on public display in a variety of locations across County Westmeath and was one of several 'Keep Well' and 'Switching Off' Initiatives designed by Athlone FRC which was funded by Westmeath County Council under the Covid-19 Emergency Resilience Fund.

#### Impact of the Project on Participants

##### **Extending Social Capital and Cohesion**

There is extensive evidence that individuals and communities are more resilient when people are connected through strong social networks (Patel et al, 2017; Walker, 2015, Blood, 2017). Fisher (2016) notes that strong social networks hold the capacity to protect against the impact of stressors. James and Cutts (2012) highlight that living in mutually supportive communities increases an individual's sense of agency, well-being, and connectedness. Social support and quality of social capital has also been found to be associated with better mental health and



wellbeing during outbreak situations throughout the world (Tam et al., 2004; Pan et al., 2005; Rabelo et al., 2016; Xiao et al., 2020). All participants spoke of feeling a sense of connectedness to other group members and community despite adhering to L5 Public Health guidelines relating to the pandemic:

*"Its been great. I didn't know anyone before I got involved and now I've met new friends through the group. I loved seeing everyone posting pictures of their granny squares to the group and encouraging each other. It really felt like we were all friends helping each other along"* (Nancy).

Research conducted by Matarasso (1997) highlights how 'self-determination', 'image and identity', 'community empowerment' and 'social cohesion' are felt outcomes from participating in arts programmes. He suggests that bringing people together in a partnership approach fosters co-operation and promotes understanding of different cultures. Evans (2003) noted in her Australian study of the 'Say It Loud Project' that CCD approaches are catalysis for generating social capital. An invisible unifying force was also witnessed within the Community Wellness Blanket Project:

*"I loved the idea of getting involved in a project that would benefit the community and that I could do safely from my home..... The group was set up great. It had lots of information about why we were doing the project and what the group rules were. I liked that they put in lots of videos to help the ones that could not crochet to get involved..... Everyone was helping each other and praising each other's work"* (Liz).

### **Positive Self Concept and Sense of Agency**

Self-esteem can be defined as an evaluation of one's self-concept, which is heavily dependent on reflected appraisals, social comparisons, and self-attributions (Rosenberg, Schooler, & Schoenbach, 1989). "While the acquisition of certain soft outcomes may seem insignificant, but for certain individuals the leap forward in achieving these outcomes is immense. A consideration of distance travelled is very important in contextualising beneficiaries' achievements." (Dewson et al 2000, p2-3). The powerful impact of participation in the Community Wellness Blanket Project was felt from an intergenerational perspective with one participant. In particular, the project offered an opportunity for greater parental presence and teaching a new craft to their daughter:

*"I was delighted to get involved. Haven't crocheted in years. Took a while to get into the swing of things but once I got going there was no stopping me. I'm delighted 'cause my daughter was watching me for a few nights and then asked if she could learn. So we've ended up sitting together and making them. We've both loved it and spending time together. Great to know I've taught her something isn't it..."* (Anne Marie).

### **Addressing Loneliness and Isolation**

While there can be positive social effects of distancing for some people who are learning new ways to interact online or reconnecting with friends and family, not everyone is as fortunate. Measures introduced to curb the spread of the COVID-19 virus, including physical distancing, and self-isolation particularly affected those over 70 who were 'cocooning'; disrupting daily routines and social interactions with friends and family.

Social isolation is defined as the objective state of having few social relationships or infrequent social contact with others while loneliness is a subjective feeling of being isolated. Social

isolation and loneliness are serious yet underestimated public health risks that affect a significant portion of the older adult population.

*"I live on my own and its so scary to think about what's going on. I've been cocooning since last March, almost a year now. Its very hard not seeing my grandchildren to give them hugs, I miss them terrible. I've loved doing this project, its helped me to feel part of something again and to know I'm working on something with other people has helped me. It helps with the loneliness" (Sarah).*

The concluding findings to cross-sectional research into the impact of COVID-19 on psychological wellbeing conducted by Groarke et al (2020), noted that rates of loneliness during the initial phase of lockdown were high. Recommendations for supportive interventions to reduce loneliness amongst those with mental health symptoms were advocated for. Interventions with the opportunity to increase social support were identified as "optimal initial targets to reduce the impact of Covid19 regulations on mental health outcomes. Kaplan et al. (2012) found that social participation activities (e.g., civic engagement, volunteering, group membership) were associated with recovery from mental health issues, greater quality of life, and greater meaning in life.

*"These restrictions have been so hard on everyone, hasn't it!. I've hated it. Really missed being around people, it's like it's never going to end. . Its been great for my mental health. Given me something to do. Helped me pass the time. I've loved feeling like I'm giving back and doing something for the community. Such a lovely idea and I'm delighted I got involved" (Nuala).*

### **Escapism**

Escapism is defined by the Merriam-Webster Dictionary (n.d.) as the "habitual diversion of the mind to purely imaginative activity or entertainment as an escape from reality or routine." Stenseng (2009) developed the Dualistic Model of Passion as a result of his investigations and noted that escapism has dual element of self-suppression and self-expansion. Characteristic of this approach is the individuals avoidance of negative emotion and thereafter an engagement of an alternative activity to preoccupy the mind. Kardopoltseva (2012) expanded Stensengs findings by studying the need for creative activities in ones life as a means for positive escapism. Igorevna (2015) notes that escapism is a subject needing further study, as this is a "universal mechanism allowing a person to escape the reality for adaptation to real life."

Escapism emerged as a centre finding from the evaluation process for the study. Participants noted the varying types of escapism being utilised over the lifecycle of the project. Evans (2001) presents four classifications of escapism: avoiding, passive, active and extreme. Examples of the first three classifications were noted by participants of the project.

#### **1. Avoiding**

*"Sick of listening to the news, its never ending. Every time you turn it on, no matter what channel you're watching it's the same thing over and over again. There's no getting away from it. I've gotten use to sitting in the evenings now beside the fire crocheting my little squares. It's really helped me to forget about what's going on outside for a little while. When I think about it I get anxious, but the crocheting has helped its given me a safe space for a while". (Anne)*

#### **2. Passive**

*“Crocheting is like second nature to me at this stage, I didn’t have to think at all... Passed the evening for me. I’d sit and watch the telly and make a few squares while I was watching it. Before I knew it I’d have a few done, you’d almost be in a trance doing it” (Karen)*

### 3. Active

*“I’m a lifelong knitter. I’d never crocheted before, but I always wanted to learn. I thought it was a great idea and what with the lockdown I’d nothing else to do really so I said I’d give it a go. I’ll definitely keep it up now. Love it, I’ve found a new hobby Instead calling myself a knitter now I can call myself a hooker!” (Veronica)*

### Implications for Practice

Burns and Cuppitt (2003) note that outcomes are “the changes, benefits, learning or other effects” that occur because of participation in a particular activity, programme, or input. Outcomes from this initiative have been identified not only at individual or family level, but within an organisational and community context also.

### **Intergenerational Learning**

Intergenerational learning (IGL) is the oldest form of learning in society and is central to social solidarity. Yet with the trend appears to be towards the professionalisation of services for children and older people, it is often forgotten that within families, we know that grandparents and grandchildren and parent/child relationships have capacity to impact on and enrich each other’s lives. An unanticipated consequence of this community development action was the emergence of instances of intergenerational learning. Ventura-Merkle and Lidoff (1983) note that intergenerational initiatives are characterised by their ability to increase cooperation, interaction, or exchange between any two generations, and which offers the sharing of knowledge, experience, and skills. In the content of this study, three instances of IGL have been recorded within parent and child relationships. All recorded instances noted the positive effects which it had had on the parent and child relationship and the sense of agency over being able to transfer skills to the next generation:

*“I had herself (daughter) sitting beside me for a few nights watching me crochet. Then she wanted to learn. Before we knew it, every evening we were spending time together with me teaching her how to crochet. Her little face, she was so proud to be creating something with me. ....I was so happy to be able to be able to teach her something and for her to have that hobbie now for the rest of her life. ....Better than having them on their tablets isn’t it?” (Michellle)*

### **Good Practice Approaches from an Organisational Context**

Several recurrent themes are evident within literature regarding the subject matter of good practice within social care and community development discourse. Initially the ability to identify that those locally were struggling with social isolation and lack of connection was critical. The design of the project ensured that those who participated in the action were equitable partners and the project offered flexibility about the way group members could interact with participate within the Facebook Group Format. Effective project planning and the inputting of sufficient resources via the ‘Crochet Starter Packs’ ensured that a lack of access to essential resources would not become a barrier to those from marginalised communities or beginners to crochet. This created a successful participator model of partnership working across the lifecycle of the project. While the impetus for the project’s conception and design was created by the Athlone FRC Coordinator, ownership of the project’s development was transferred to the group members. The research phase of the project was crucial to



understanding the motivations and impact of the project from a participant's perspective and has assisted with informing future spin off initiatives within Athlone FRC.

### **Importance of Tangible and Symbolic Cultural Artifacts**

Artifacts are physical objects that are found that have symbolism and, in some instances, mystical properties for a culture. Artifacts and symbols act as triggers to remind people of cultural norms and mores within a society. Since the beginning of time, they have been used to bond communities together with a shared sense of purpose and achievement. In the context of this study, the authors intention was to work in partnership with the local community to create one cultural artifact which would become the symbolic representation of how a community could come together to create a beautiful object and remain resilient while engaged in social distance because of public health guidelines relating to the pandemic landscape. Over the lifecycle of the project, it was evident that the vision had resonated with people, resulting in not one but 5 community wellness blankets being created. Interestingly, not only did group members commit to the creation of the wellness blanket, it also became evident that symbolic meaning was being taken from the individual pieces which members were creating from the comfort of their own home. In one instance, a participant had offered the following explanation of her internal creative process while creating one completed crochet piece which had the image of a crescent moon in the centre of the square:

*"I started this at the beginning of the dark moon cycle and its fitting that today it's the full moon and I've completed it. This moon is a representation of all our feminine wisdom and our ability to connect to our intuition, to create beautiful objects and to be proud of our individual contributions to the world"* (Ava)

### **Conclusion**

Factors such as creative passion, dynamic interrelationships, imaginative and planned experimentation, innovative problem solving are factors which are not often easily captured through evidence-based research. As a practitioner and educator, the author shares some of her professional experience with the intention of creating safe space for reflection and discussion to seek new ways toward the creation of sustainable community projects. The existing pandemic landscape has shifted how practitioners engage with vulnerable population groups within society. Such organisations act as a protective factor to many who are experiencing complex needs, while operating on constricted funding resources. Community Development and Community Arts Actions are intrinsically linked by one common objective: the concept of empowerment and self-determination of those considered by the current hegemonic powers in the periphery of decision making and control positions. Now more than ever it is important that community-based organisation develop the means to promote evidence based cross-collaborations between professionals and communities which focus on social change, cultural explorations, and contemporary cultural productions.

The 'Community Wellness Blanket Project' aimed to provide opportunity for those who were socially isolating during the pandemic to participate in a project whereby an individual's contribution would form part of a large-scale public arts exhibition utilising the medium of crochet. This blanket has since become a visual representation of how a community could remain connected and resilient during the pandemic lockdown, and how it could blanket the local community and project participants in a sense of well-being in a time of crisis. Findings from the evaluation process highlights the widespread impact of Covid-19 has led to feelings of anxiety, isolation, loneliness and disconnection from peers or family. Benefits of participation in the project have been cited as a recognised increase in social capital and sense

of agency in a time of unprecedented societal uncertainty. The project's ability to provide a sense of escapism and contribute to the formation of new hobbies were also recognised. Finally, it was evident that group members had a felt sense of social cohesion and purpose. As the Community Wellness Blanket Initiative has demonstrated, it is possible to engage a broad cross section of society through an online platform to focus on the creation of tangible symbolic cultural artefacts which communicates the concept of community resilience and wellness during a time of great societal uncertainty.

#### Author Biography

Delores Crerar holds an MA in Family Support Studies and Diploma in Expressive Arts Therapies. She is the Coordinator of Athlone Family Resource Centre and has extensive experience working within the community development and social care sector. Her research and publication interests include the development of frameworks to support evidence base practice within the field of effective interagency practice; exploring the interface between creative and professional responses to supporting vulnerable client groups; and the development of effective models of cultural community development as a means of communicating the factors impacting on minority communities and given voice to their needs.

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