

East & Midlothian  
Individual &  
Collective  
Advocacy

**CAPS**

Independent Advocacy

supportive

compassionate

helpful

voice

listen

trust

professional

# ABOUT CAPS

CAPS is an **Independent Advocacy Organisation** which provides **Individual Advocacy** to people from **East Lothian and Midlothian** who have mental health issues or are using drugs and alcohol.

We also provide advocacy for children and young people experiencing the Children's Hearings process in these areas.

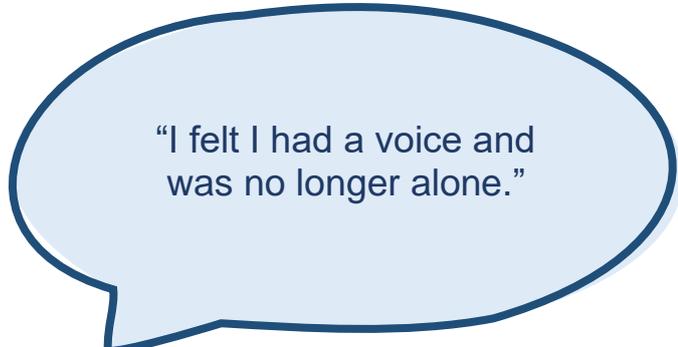
We provide **collective advocacy** to groups of people **across Lothian** with mental health issues so they can come together and **voice their experiences to bring about change for others or improvements in services.**

The main purpose of CAPS' work is therefore to assist people, through advocacy, as individuals or as members of a group, to **set their own agenda, make their wishes known and to have a say** in how they live and what services they use. Visit our website for more details [www.capsadvocacy.org](http://www.capsadvocacy.org)

We are set up so that the organisation and its staff are as **free as possible from any conflicts of interest.** We **are independent from the people who fund us** and those who provide other services to the people we work with. CAPS is a member of the Scottish Independent Advocacy Alliance (SIAA), and **we adhere to the Principles and Standards of Independent Advocacy.** CAPS was established in 1991.



"They couldn't ignore me anymore because [my advocacy worker] was there."



"I felt I had a voice and was no longer alone."



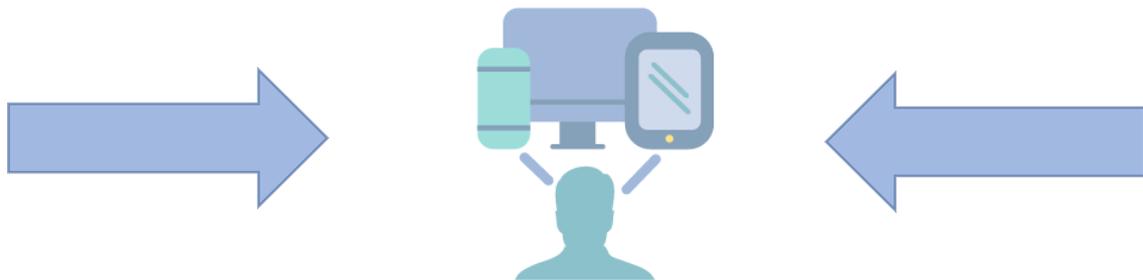
"CAPS is a fantastic organisation. They helped me to put my case forward."

# Facts and Figures

## Mental Health Individual Advocacy 2021 - 2022

	East Lothian	Midlothian	Overall
Accepted Referrals	195	189	384
Active Issues	231	227	458
People using service	144	137	281
First time users	112	116	228
Closed cases	195	195	390

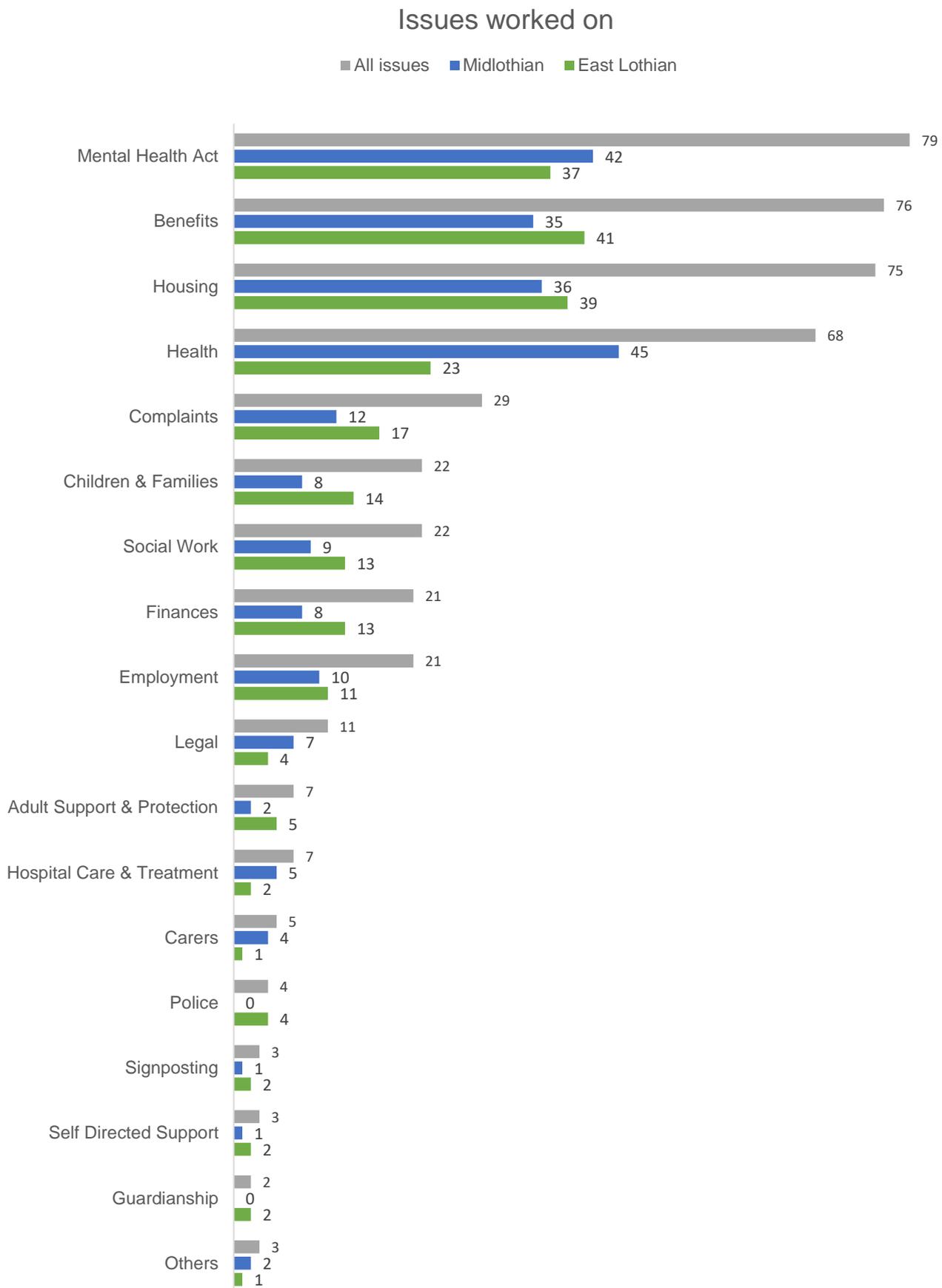
These are the figures for our mental health advocacy service between April 2021 March 2022. These show that referral numbers are now starting to recover after being limited by Covid restrictions. With restrictions lifting across services from the pandemic our advocacy workers have been able to increase contact in a variety of ways with advocacy partners and moreover other services have begun to reopen again which has made it easier for our advocacy workers to support people with their issues.



However, the issues that people have been presenting to CAPS with over the last year have changed significantly since pre-pandemic. Although issues around benefits still remain high, other issues like housing, health & complaints have increased notably across both East & Midlothian.



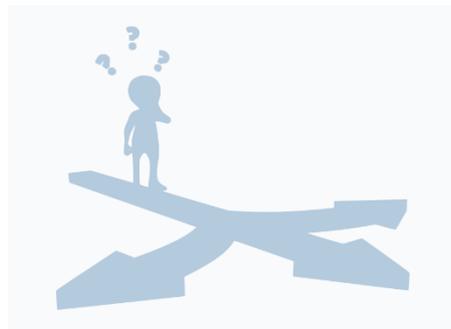
# What did we support people with?



People are still finding it very difficult to access the services they need since Covid. The demand on services has increased and a significant proportion of enquiries to our service stem from people not being able to communicate with core services in health and housing.



This has also led to a spike in enquiries for complaints to services. With furlough now gone and tightening economic circumstances, we have also seen an increase in referrals around employment and money matters.



Another change is that people coming to CAPS for assistance are, on average, younger than before Covid. This may be suggesting that during the pandemic older people felt less comfortable accessing advocacy digitally.

Due to the nature of enquiries, for example, complaints procedures, the average time to bring a case to closing has also gone up across both counties.

Whilst there have been challenges to our advocacy work, the pandemic has also created possibilities to work with people in different ways. This means that we are now able to offer a wider variety of ways for our advocacy partners to connect with us. Our advocacy workers are now able to offer video calls with advocacy partners, as well as in person appointments and telephone calls.



Whilst the online environment was a necessity during lockdown it has been a successful way for many of the people we work with to interact with us and we are so pleased to be able to continue offering this as an option for people!

# Bringing our work together

Over the past year, CAPS Individual and Collective Advocacy across East Lothian and Midlothian have been working closely together to strengthen the voices of more people who use our service and helping to have the issues that are important to them raised at decision making level.



CAPS understands that whilst the offer of collective advocacy is open to everyone across both counties who identifies as having mental health issues, there are sometimes reasons why people are unable or choose not to be involved in traditional collective advocacy activities. This has meant that although we know many people are experiencing similar issues with services, these experiences are often not raised within the traditional collective advocacy local authority wide groups.

To challenge this CAPS have employed a three way strategy to capture and share as many voices as possible:

- Collective Advocacy Development Worker attendance at Individual Advocacy team meetings to gather anonymised information on emerging issues identified by the individual advocacy workers to feed back to planning meetings
- Where suitable, individual advocacy workers now offer the opportunity to our advocacy partners to speak with the Collective Advocacy Development Worker to share their stories about issues they have experienced to enable the worker to gather people's experiences to feed back to planning meetings
- Create joint reports that highlight the qualitative issues that are present and any work or resolutions that have been achieved by this collaborative work.



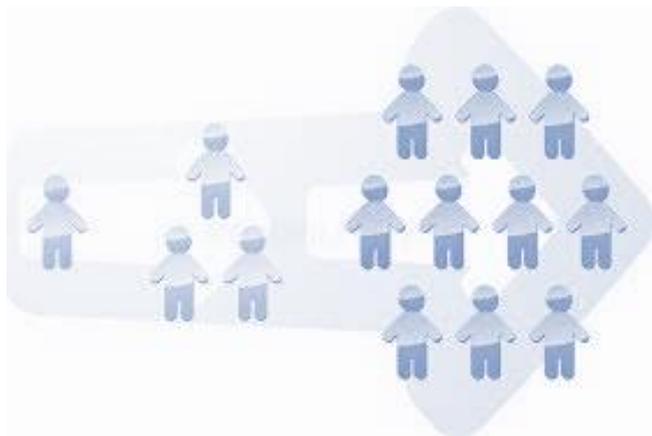
# Achievements

Whilst the work connecting Individual and Collective Advocacy is relatively new, we have already seen successes and possibilities!

**Access to GPs:** From one of these referrals, we were able to highlight an ongoing issue with accessibility to some GP practices. We met with the local GP representative who was able to raise this point with the practice and CAPS will now be campaigning for others to come forward who have similar experiences to provide evidence to effect change.



**Housing:** The team highlighted that a common issue our advocacy partners were having was difficulty getting in touch with housing teams. Our collective advocacy worker was able to raise these experiences at planning meetings and go on to connect with housing managers to look at the issues that people have around communication. From this we have been able to begin planning how advocacy workers can work better with housing to navigate access for the people they work with.



These are both great first examples of how this collaborative way of working between the teams can reach more people, gather more opinions and amplify more voices!

We are really excited to keep seeing this work develop and create more opportunities to highlight the issues that are important to people in places where decisions are made about services offered to them.

If you have been affected by either of the issues above and would like to discuss your experiences further, please get in touch with Ele [ele@capsadvocacy.org](mailto:ele@capsadvocacy.org)

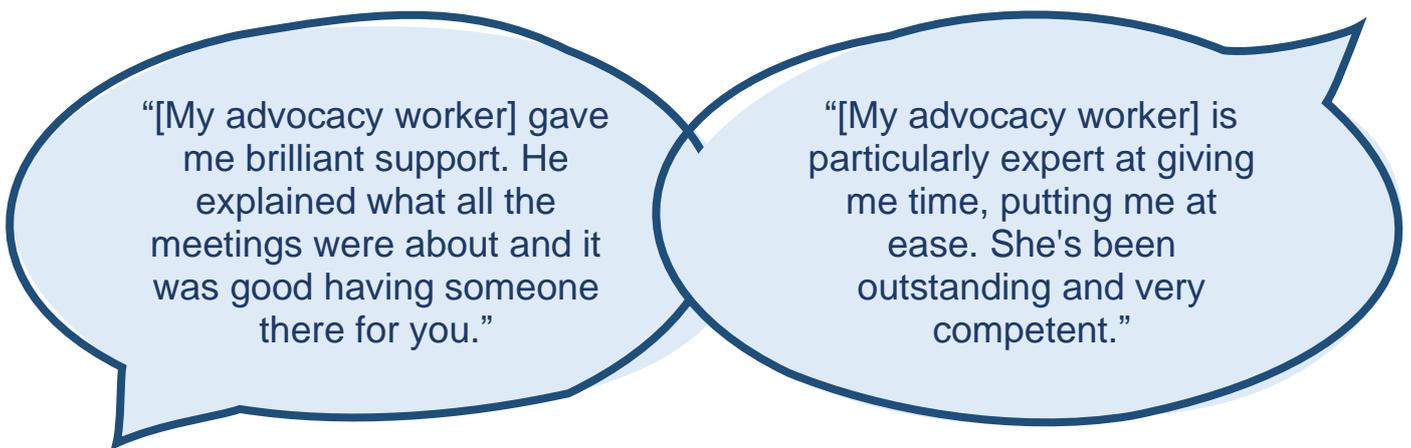
# Drug & Alcohol Individual Advocacy

As well as working with people around their mental health, CAPS also works with people who are affected by drug and alcohol use.

Our **Drug & Alcohol Advocacy service** has now been working with people for almost two years and we are about to produce our latest reports on the development and success of the service in July 2022. We have two specialist individual advocacy workers who work with people around drug and alcohol issues and this work is counted separately to our mental health work above.

Full reporting on this area of work will be available in due course but as of June 2022 we have had 58 new accepted referrals for this service so far in the current reporting year (since July 2021). We have worked with **over 50 people** on almost **70 different issues** this year. This represents over 100% growth in the number of people we worked with since the previous year and shows how important and needed the service is.

People working with our drug & alcohol advocacy workers said:



"[My advocacy worker] gave me brilliant support. He explained what all the meetings were about and it was good having someone there for you."

"[My advocacy worker] is particularly expert at giving me time, putting me at ease. She's been outstanding and very competent."

## Wider work in Individual Advocacy

Our team have also been busy raising awareness of Independent Advocacy. Awareness raising sessions have been held with community links workers and other local third sector support services. We have also worked collaboratively with other local advocacy providers to create and deliver an Advocacy in Adult Support & Protection session for Health & Social Care Partnership staff through the East & Midlothian Public Protection Office.

CAPS Individual Advocacy staff have also collectively fed into the Mental Health Law Review and we will continue to do this where opportunities present throughout the review.

# Individual Advocacy Outcomes Framework

## CAPS Independent Advocacy

### 1. People will be better informed about their options and rights

Themes:

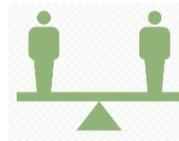
- Understanding choices and rights
- Improved agency
- Asking questions



### 2. People will be assisted to redress power imbalances

Themes:

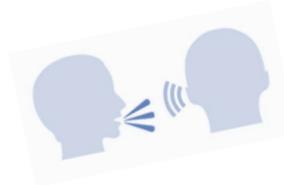
- Rights upheld



### 3. People will have their views and wishes heard

Themes:

- Needs and wishes understood
- Supported to express views
- Listened to



### 4. People will lead the work we do together

Themes:

- Putting the people we work with first
- Independence
- Confidentiality



### 5. Our work will be inclusive and accessible

Themes:

- Respect and inclusion
- Individualised support



# Feedback

This year, we have continued to evaluate our work against our CAPS Outcomes above. Evaluations have been mostly by telephone survey, but paper forms have been used where people prefer this.

In total **55** people agreed to take part. **6** had used our drug and alcohol advocacy service and **49** had been in touch with our mental health advocacy service.

32 responses were from people living in East Lothian, 23 were from Midlothian. The following pages summarise what people said about working with CAPS.

A big thank you to everyone who took part, and to our Individual Advocacy Volunteer for helping gather this important feedback on our work!

*"[CAPS] made me feel listened to. Because of that I felt I didn't have to back off because it was overwhelming."*

*"With [my advocacy worker] in my corner I was more confident about going through the assessment."*

*"I felt I had a voice and was no longer alone."*

*"I was up against a brick wall, but [my advocacy worker] got my point across and made people take notice. She helped take the weight off my mind."*

*"People were nicer if [my advocacy worker] was present. The other side would hear me. It definitely made a difference - 150%!"*

*"CAPS has been there for me all the way."*

*"I would recommend CAPS - and they have helped me to speak up for myself now."*

*"It gave me time and space to recover from all the worry and stress. I felt confident in my advocate. She never let me down."*

## CAPS Independent Advocacy helps people be better informed about their options and rights

- **95%** of respondents agreed that CAPS helped them to understand the choices they could make and **89%** of respondents agreed that CAPS helped them to be more informed about their rights specifically.
- We asked people if they felt CAPS helped them to make decisions about their health or treatment. There were 7 people who felt this question wasn't applicable to them – most likely where the issue we supported them with was something else, such as housing or benefits. Excluding these 7, **85%** of those surveyed agreed.
- **89%** of all respondents agreed that CAPS helped them to be involved in decisions that affected them.

*"[My advocacy worker] was brilliant - he helped me to understand everything."*

*"[Advocacy worker] helped me understand what was going on and was really good at pointing things out [to me]."*

*"[My advocacy worker] was a great support. I made more informed choices because of this."*

*"[My advocacy worker] was good at explaining things - he was down to earth, nice to talk to and made me feel at ease."*

*"[My advocacy worker] explained things I couldn't understand in a warm and friendly way."*

*"She had my back - I connected with her straight away - and she explained everything so that I understood all the different options. She walked the walk with me."*

*"[Advocacy worker] helped me to understand - he explained things more clearly."*

## CAPS Independent Advocacy helps people to redress power imbalances

- **86%** of people surveyed agreed CAPS helped them to speak up if there was something they didn't agree with (excluding 4 who felt this question was not applicable to them).
- **84%** felt having an advocacy worker involved gave them more power in conversations about their situation.
- We asked specifically about experiences of discrimination and whether advocacy involvement helped people feel able to challenge discrimination, if this was applicable. 10 felt this question did not apply to their situation. Excluding these 10, **82%** agreed.
- **84%** felt more confident about speaking up for their rights following advocacy involvement

"The GP listened to [advocacy worker], who spoke for me - although it shouldn't have been like that."

"They couldn't ignore me any more because [my advocacy worker] was there."

"It gave me a boost to have someone to fight for me to get what I deserved."

"[My advocacy worker] was at the meeting with me - and I felt this made everybody round the table much more careful what was said - [my advocacy worker] was on my side."

"I felt that I was able to take a much more active part because of [my advocacy worker]'s support. He helped me to feel empowered by it."

"During the ESA assessment the people were being a bit flippant and [my advocacy worker] was able to stop them. On my own, I wouldn't have been able to do this."

## CAPS Independent Advocacy helps people to have their views and wishes heard

- **89%** of those surveyed agreed that CAPS had helped them to express their views and wishes
- **85%** felt that because of CAPS' involvement, their views and wishes were heard and understood by others
- **87%** felt that CAPS made a difference to the way they were treated.

*"Being able to go over everything with [my advocacy worker] made it easier for me to express myself."*

*"Because of my anxiety I would struggle to communicate with other organisations - I would get angry or hang up. [My advocacy worker] had my back and empowered me to speak up for myself."*

*"[Two advocacy workers] both helped me through a really difficult time and helped me to voice things that I couldn't put into words."*

*"I have difficulty speaking up for myself - so I know I can come to CAPS for help."*

## People lead the work we do together

- **91%** said their advocacy worker asked what support they wanted, and that the advocacy worker had checked what they were doing was what the person wanted them to do.
- **87%** agreed that CAPS' independence was important to them.

*"No conflict of interests!  
And I could tell the difference."*

*"I felt that I was in control."*

# Next Steps

## New areas of work

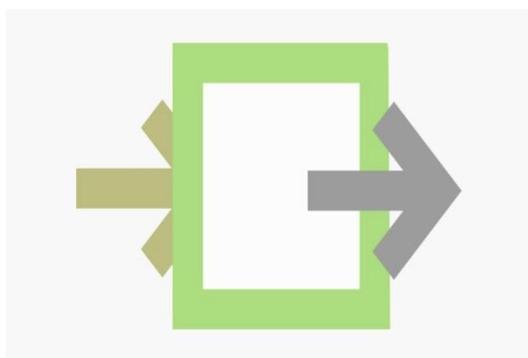
We are still growing! We have recently successfully bid to expand our age range for Individual Advocacy to work with **16 and 17 year olds** through the Community Mental Health & Wellbeing funds in both East Lothian and Midlothian.

Two of our Individual Advocacy workers are currently promoting this area of our work to other agencies. We have also received funding from NHS Lothian to specifically work with people with **eating disorders** across the whole of Lothian. We will be recruiting new staff to help take this work forward.



As the Individual Advocacy service has grown so much throughout the pandemic we are also now recruiting for additional support for our teams with a new Individual Advocacy team leader!

## Continuing Covid recovery



The pandemic has had a significant impact on how services work and therefore the issues that people we work with have experienced.

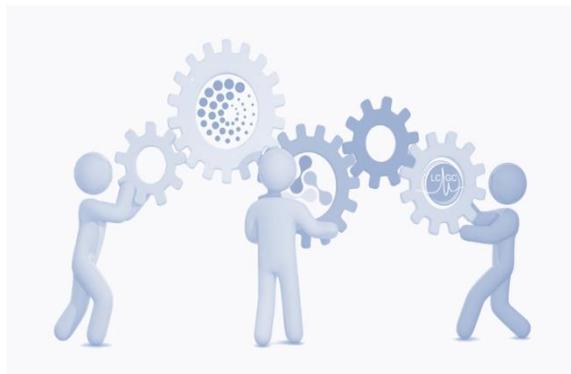
As services gradually return to different ways of working we will be watching and responding to how this will impact our work.

We have already identified the need for advocacy to be included in remote appointments, for example benefits assessments done via video call.

## Increased collaboration between Individual and Collective Advocacy

Following our initial positive progress in Midlothian we are looking forward to expanding how our two teams can work together.

We will be offering 'call outs' on trends that we identify and encouraging more individuals to share their experiences and create collective campaigns.





## ➤ Expanding input into training

CAPS Education as Advocacy programme will be developing on the recent Advocacy Awareness workshops that our Individual Advocacy team have jointly designed and delivered. We hope to be able to offer these more regularly and to a wider audience.

“CAPS offers an excellent standard of support and guidance, and staff are very compassionate.”

“CAPS were really helpful for me, and I would definitely use them again.”

“I can't overstate the support - you did a great job to help me be in control.”

“When CAPS got involved, everything changed.”

“I feel I'm getting proper medical care through having an advocate. Little things can make a huge difference - and CAPS has done that for me.”

## Contact details

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