# **KELLY'S STORY: USER'S GUIDE**

# **Recommended Age Range of Participants**

 We recommend that this activity is done with young people aged 13+ but it is at the discretion of the professionals who know members of their group.

## Facilitator/s

• Those who deliver this activity should have professional experience and training in youth work.

# **Time Required**

• We recommend at least an hour and 30 minutes.

# Safeguarding

- Please ensure that you read and prepare ALL the materials related to this activity **beforehand**, so that you know what safeguarding measures to put in place to support the young people who will be participating in this work.
- Ensure that there are safeguarding procedures in place for after the activity has **ended**.
- Remind group members that they are not obliged to share information about themselves if they do not wish to. They can focus on the characters in the story.
- Agree with group members how everyone will share their contributions, before starting the activity (e.g. have a group contract that includes withholding judgement and exploring opposing points of view).

# Confidentiality

- Ensure that group members understand and agree that If someone shares information
  of a concerning nature you have a responsibility to follow that concern up but that the
  young person/people involved will be notified if any action outside of the group
  discussion needs to be taken.
- Ensure there is time at the end of the session, and staff available, to allow young people to unwind and decompress informally if they want to.
- Identify exactly who young people can go to after the session if they wish to discuss any of the issues raised in the activity further.
- Provide contacts for your organisations, including your Safeguarding Lead.
- Provide up to date information about other services offering support in your local area.

# Suitable Number of Young People to Participate in the Activity

• We recommend between 5 and 8 people in a group, to allow everyone space to make meaningful contributions.





**Discuss Key Terms and Phrases Used** (the descriptions below are not definitive they are ones based on the understandings of young people who engaged in the research)

#### **Mental Health**

• 'Mental health' is a continuum. It changes depending on how a person feels, so it can be 'good' or 'bad' or somewhere in between. 'Good mental health' is where you have tools to cope, even if something really challenging happens, if you have good mental health, you can still engage in other areas of your life without feeling consumed with negative feelings. 'Bad mental' health is where the stress you are experiencing is too much to bear, it filters into other aspects of your life – it's hard to compartmentalise a negative situation. In extreme cases it can feel like everything is just too much to manage.

# **Depression**

It is more than just feeling sad. It's when you feel you can't cope with everyday things (e.g. getting out of bed, getting dressed, eating nourishing meals). You are unable to handle regular tasks like you would normally be able to do. It can be an overwhelming feeling where your energy is low, and it takes a huge amount of motivation to get through even simple things.

# **Anxiety**

This refers to situations where you feel nervousness, concern, or an apprehension that
you can't manage everyday activities. You may experience self-doubt or experience
something like butterflies all over your body. It can be hard to focus, and you may feel
like you are always on edge - like you can't sit still.

### Low mood

This refers to times when you don't feel yourself and you are indifferent about life. It is
a stage between feeling sad and feeling depressed. It's not constant - sometimes a
low mood can just wash over you like a wave, and you may not even understand why.





## **MATERIALS NEEDED**

- A copy/copies of the cartoon 'Kelly's Story'. It has been created in several formats.
   They are all different formats of the <u>same</u> story. Decide which format you are going to use to introduce the story to your group. Print off copies of the story you are going to use or set up the video. The formats available are as follows:
- A black and white PDF (recommended)
- A full colour PDF
- A video

# BLANK TEMPLATE FOR AN ALTERNATIVE ENDING TO KELLY'S STORY

 Print off enough copies of the blank template to enable the group to complete the final activity of this session in pairs.

## **SUMMARY AND AIMS OF KELLY'S STORY**

It is important that group members understand Kelly's 'backstory', they understand the aims of the activity and the context in which the story is set.





<sup>\*</sup>Print copies in landscape

#### 'KELLY'S STORY'

#### **Aims**

- To use the experiences of a fictional character, Kelly, to explore the strategies she uses to manage her depression.
- To explore some of intergenerational differences in perceptions of mental health within communities of people who are of African, African, African-Caribbean and Asian heritage.
- To identify the positive steps that Kelly, her family, friends and professionals take to
- support her and to identify additional actions she could take to gain further help.

'Kelly's Story' is based on the lived experiences of young people who participated in focus groups and peer researchers who shared their lived experience related to mental health. These young people wanted to highlight some of the barriers young Black and Asian people can face when trying to engage their parents, teachers and community leaders in conversations about mental health.

#### SUMMARY OF KELLY'S STORY

Kelly is a young woman of West African heritage who lives at home with her mum, dad and three siblings. She is studying her A Levels. Kelly has close friendships with other students at her school, particularly Rachel and 'H'. She also gets on well with her form tutor.

For the last two years Kelly has expressed to the people close to her that she sometimes gets low moods, anxiety and has had periods of depression. She has spoken to her parents about this, and they have tried to help but find it difficult to understand. They worry that Kelly is 'over sensitive' and takes things 'too much to heart'. There have been times where they have tried to explain to Kelly that as a young Black woman 'life is hard' and she needs to 'toughen up'. On other occasions they have encouraged her to trust in her faith more. Kelly's parents sometimes get frustrated that Kelly's depression can affect the whole family, and no-one is ever quite sure what to do. They love their daughter and want the best for her but don't know what support to give her other than what they are currently doing.

Kelly's best friends Rachel and 'H' have experienced low moods and depression at times in their lives too, so she goes to them a lot for comfort and reassurance.

#### READ THE ABOVE SUMMARY WITH YOUR GROUP





## READ/WATCH 'KELLY'S STORY'. SUGGESTIONS ON HOW TO DO THIS INCLUDE:

- Members of the group could be assigned characters in the story and then it could be read aloud.
- You could print out copies and ask group members to read it in pairs.
- You could watch the video format of 'Kelly's Story' as a whole group.

# AFTER GOING THROUGH KELLY'S STORY, USE THE FOLLOWING PROMPTS TO HAVE A DISCUSSION WITH YOUR GROUP

## **Discussion Points:**

- What resonated most for your group in Kelly's Story?
- Together discuss what kind of feelings are engendered by the character's initial responses to Kelly when she says she is having 'low moods' and 'not feeling great'.
- How could some of the language and actions used by the people in Kelly's life reinforce her feelings of desperation?
- Were there any points in the scenario where your group would have intervened and done things differently to that of the characters? If so, at which points who would they have spoken to and what would they have said?
- Ask your group to identify the points where Kelly does share what she is feeling. Who
  enables her to be more open and what do they do that helps?

## WHAT NEXT?

- Split your group into pairs. Give each pair a copy of the blank template.
- Ask each pair to discuss and list the positive outcomes on Kelly's mental health of turning to Rachel for help.
- Discuss the **positive outcomes** on Rachel's mental health of having this friendship with Kelly.
- Ask the pairs if they foresee any potential challenges with Kelly and Rachel's friendship and how Kelly and Rachel might overcome them.
- As young people on the outside looking in, ask each pair to discuss what further
  advice they would give <u>the adults</u> in this scenario to strengthen the support available
  to young people experiencing low moods, anxiety and depression?
- Is there a link between the ways that the adults in Kelly's family cope with their own anxiety and the ways that they are teaching Kelly to cope with her anxiety and depression?





## **DEBRIEF**

- Discuss what additional opportunities there were in this scenario to strengthen Kelly's support network.
- Discuss what your group feels your organisation could do to begin bridging the gap
  in understanding between young people and older people in terms of creating more
  understanding of issues related to mental health from an intergenerational
  perspective.
- Pinpoint the place or places where Kelly feels the greatest connection to people in the story and what enabled the moment/s to happen.
- Pinpoint the places in the scenario where Kelly felt the greatest disconnection with people and what actions/language may have caused that to happen.
- Reinforce what steps group members can take in the immediate term if they feel they need greater access to mental health support themselves.
- It's important to highlight that the intentions of all the characters in this scenario are well intentioned.
- It's also important to highlight that Kelly may well need specialist support, and note that she also benefitted when given the space to be listened to and feel seen and heard by people in her life who do not have clinical training.





<sup>&</sup>lt;sup>1</sup>We have put the terms 'good' and 'bad' in inverted commas as we realise these are generalised ways of talking about mental health but they are also common terms used to describe how we feel.