Putting Relationships First

The case for relationship-centred communities, organisations and systems

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The Relationships Project

At The Relationships Project we believe that everything works better when relationships are valued; people are happier and healthier, and businesses and services are more effective and efficient. That's why it's our mission is to make it easier for every organisation, service and individual to put relationships at the heart of what they do.

WELCOME TO THE CASE MAKER

Using the Case Maker

The Case Maker **combines key facts with compelling stories**, equipping relationship-centred practitioners from across the field to make a compelling - perhaps even irrefutable - case for relationship-centred practice (RCP) to sceptical board members, managers, colleagues or commissioners.

Use it to...

Deepen your own understanding of how putting relationships first can make a difference in a range of contexts and scales

Develop your own narrative for why relationships matter in your organisation, service or community by mixing and matching the evidence presented using the DIY Case Maker

Start a discussion and build awareness of relationship-centred practice by sharing real life examples and reflective prompts with your peers

IF YOU WANT TO CHANGE THE WORLD, START WITH RELATIONSHIPS

Good relationships are the foundations on which all else is built - effective education, just policing, stable childhoods, thriving communities, compassionate care, a fair economy, responsible government, flourishing business, even longer lives.

This Case Maker assembles the evidence base for putting relationships first, describing why relationships matter, what great relationship-centred practice looks like, and how it could make an impact in your context.

Compelling evidence summaries and statistics sit side by side with vibrant real-world stories of relational work from across sectors and contexts. There are voices in these pages from the worlds of social care, public health, the arts, prison rehabilitation, community organising, social integration, deathcare and education.

Few people argue that relationships don't matter. But many feel they don't have the time, capacity or permission to prioritise them.

In so many contexts, relationships are squeezed out and their transformative potential is overlooked. There is perhaps a fear that starting with relationships will make work less effective or efficient.

Evidence suggests that the reverse is true: relationship-centred practice can be more effective and efficient, more meaningful and sustainable, and more enjoyable and enriching for those involved in it.

Putting relationships first is not just warmer and more human, it often leads to completely different plans and decisions, based on a more robust, reality-based understanding of challenges and what it will actually take to address them.

Designing relationship-centred communities, organisations and systems can be life-changing, even life-saving.

This is a resource for everyone who needs to make the case for putting relationships first, whether it's to their commissioners, their funders, their managers, their trustees – or even to themselves.

What we mean when we talk about relationships

One of the challenges of thinking about and talking about relationships lies in the breadth of the term. Within that one word - 'relationship' - exists a huge range of different things. We talk about the relationship we have with ourselves, with the natural world, with our spouses, with food or exercise, with our friends, with our bank. The list goes on.

In the Case Maker, we are focusing on human to human relationships within the context of communities, organisations and services.

Too often, relationships in these contexts are overlooked or underestimated; seen as a nice-to-have or a 'frilly extra', rather than as the basis on which all else is achieved.

Good relationships look different in different contexts and situations. A good relationship with a teacher is different from a good relationship with the train operator.

But we think that good relationships all share some common characteristics which can be usefully highlighted through a comparison with transactions.

There are three distinctions to be made:

- First, there is the difference between a relationship and a transaction. One is not intrinsically preferable to the other. It all depends on the context.

- Second, there is nothing inevitably bad about a transaction. If the train ticket is supplied promptly and fairly it was a reciprocal exchange and a good transaction.

- Third, relationships aren't always good. They can be abusive, controlling or extractive. Just as there are good and bad transactions, there are also good and bad relationships.

This leads us to suggest some defining, and some common, characteristics for good relationships and good transactions.

What we mean by relationship-centred practice

Relationship-centred practice puts relationships first. It unlocks potential and meets need by positioning meaningful and effective relationships as the first order goal, both an end in itself and the means by which other goals will be achieved (like better health, stronger communities, greater job satisfaction).

Relational working is more than an instinct; it is a craft and we need to learn how to do it well, and how to create the conditions in which it can become embedded.

Relationship-centred practice is most obviously associated with a set of behaviours - active listening, patience, empathy, active collaboration - and with 'frontline' roles - like healthcare practitioners, social workers, community development officers. But these behaviours are unlocked and enabled - or constricted and disabled - by the conditions in which we operate.
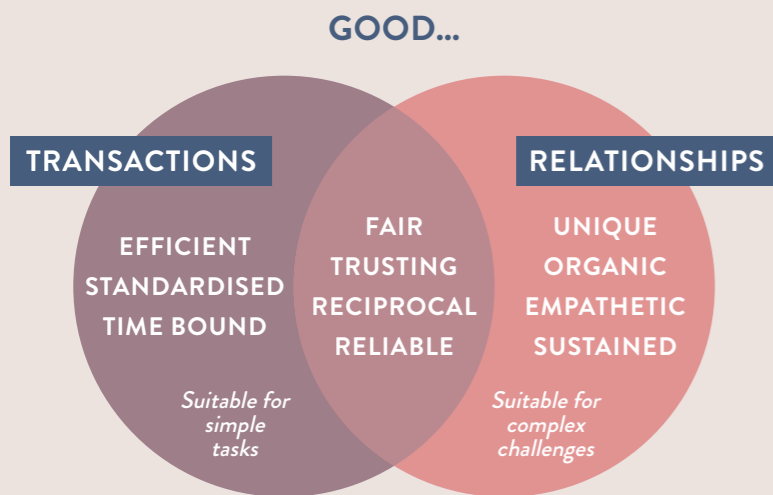
For relationship-centred practice to become widely embedded, we all need the knowledge and skills to build relationships, and we need to be supported by processes, protocols and norms which liberate relational work. Whether you are a frontline practitioner, a manager, a designer, a planner, a policymaker, a board member, a funder, a commissioner or a service user, you have a role to play in nurturing and embedding relationship-centred practice.

For more on relationship-centred practice, head to our website.

Later on you'll meet:

- A funeral director disrupting the deathcare industry by centring empathy and care

- A social worker attending a gig to make a connection with their young person

- A prison rehabilitation charity building relationships to bridge the gap between prison and life outside

Characteristics of good relationships and good transactions

GOOD...

TRANSACTIONS

EFFICIENT
STANDARDISED
TIME BOUND

Suitable for simple tasks

FAIR
TRUSTING
RECIPROCAL
RELIABLE

RELATIONSHIPS

UNIQUE
ORGANIC
EMPATHETIC
SUSTAINED

Suitable for complex challenges

- A good relationship is unique and fair. It's unscripted, organic and empathetic. It develops over time as value is created and carried forward from one interaction to the next. A good relationship may be an end in itself, not defined by task

- A good transaction follows a standard course, it is efficient and fair. It is likely to be focused on a specific task, time limited and with a clear and explicit purpose

- Good relationships and good transactions are equally trusting, reciprocal and reliable

The layers of relationship-centred practice

The external conditions:
The economic, social and cultural context in which we operate

The organisational conditions:
The surrounding conditions which either liberate or obstruct RCP

The knowledge and skills:
The capabilities needed to help us build good relationships in different situations

The behaviours:
The things we do and the ways that we behave which nurture good relationships

The principles:
The values based ideas that underpin RCP

STATISTICS

Better relationships, better outcomes

life expectancy

148 studies examining mortality rates across all age groups, genders and ethnicities show that strong connection increases the likelihood of surviving in any given year by more than 50% (Holt-Lunstad et al, 2010)

reoffending rates

Studies have consistently found that prisoners who maintain close contact with their family members while incarcerated have better post-release outcomes and lower recidivism rates (Friedmann, 2014)

disaster survival

The death rate following the 2011 Japan tsunami was up to ten times lower where social connection was strongest, and this was more significant than the height of the sea wall and the height of the wave (Aldrich, 2023)

hospital admissions

In Frome, work on building social networks has led to a 14% reduction in hospital admissions, compared to a national increase of 28%, resulting in a 21% reduction in costs (Abel et al, 2018)

cancer recovery

A longitudinal study of 2,835 women with breast cancer found that those with a network of good relationships were four times more likely to survive than those without (Kroenke et al, 2006)

waiting times

Great Yarmouth Council has reduced waiting lists by 95% by moving away from a standardised model to one in which the council hold individual conversations (The Guardian, 10th April 2018)

medical compliance

A review of 1,000 abstracts and 280 manuscripts found that when healthcare providers demonstrate compassion, medication adherence increases by 80% and healthcare spending reduces by 51% (Trzeciak and Mazzarelli, 2019)

burnout rates

8/10 studies included in a systematic review found a negative association between burnout and empathy, indicating that empathy helps reduce burnout rates amongst healthcare professionals (Wilkinson et al, 2017)

And many more...

THE IMPACT OF INVESTING IN RELATIONSHIPS

Professor Robert Waldinger leads the Harvard Study of Adult Development, the largest and longest of its kind. He says:

> "To say that human beings require warm relationships is no touchy-feely idea. It is hard fact. We need nutrition, we need exercise, we need purpose, and we need each other."
>
> – Professor Robert Waldinger

Good relationships are good for us, we feel better, we live longer and we contribute more.

There is no task in adult life, public or personal, which is not done better with an enhanced understanding of relational skills - how to collaborate, how to manage bias and power and parity of esteem, how to forgive, negotiate difference and resolve conflict. Everything works better when we do these things well. Take health for instance...

Julianne Holt-Lunstad (2010), for example, reviewed 148 studies from across the world, with a combined total of 300,000+ participants. She examined mortality rates across all age groups, genders, and ethnicities.

Strong connection, Holt-Lunstad concluded, increased the likelihood of surviving in any given year by more than 50%.

The converse is also widely recognised: social isolation increases the risk of dementia by 50%; stroke by 32%; and heart disease by 29% (Centers for Disease Control and Prevention, 2023).

The relationship between clinicians and patients is particularly critical. Trzeciak and Mazzarelli (2019) found that when healthcare providers demonstrate compassion, medication adherence increases by up to 80% and healthcare spending reduces by up to 51%. A large-scale study from Norway identified a reduction of up to 25% in mortality among patients for whom there was long-term continuity of care (Hetlevik et al, 2022).

Good relationships between those who deliver services, not just with those they serve, can also be hugely important for the patient. One negative example of this is the poor relationships within the cardiac services of St George's Hospital in Tooting, London.

Complex heart operations were moved out of the hospital in September 2018 after a leaked document revealed a 'toxic' row had contributed to an above average death rate. The Care Quality Commission (CQC) noted that "consultant surgeons mistrusted each other, as well as cardiologists, anaesthetists and senior leaders" (BBC News, 6th December 2018).

In Frome the future has arrived already. Here, targeted work on building social networks has reduced hospital admissions by 14% at a time when national numbers were increasing by 28%. There are similar projects elsewhere but most are relatively small scale and outside the mainstream.

This is particularly surprising given that the approach is not only effective but also *cost* effective: the work in Frome resulted in a 21% reduction in health care costs (Abel et al, 2018).

And, of course, relationships aren't only important when we are sick. Studies have consistently found, for example, that prisoners who maintain close contact with their family members while incarcerated have better post-release outcomes and lower recidivism rates (Friedmann, 2014).

Greater Yarmouth Council reduced housing waiting lists by 95% by moving away from a standardised model to one where the council holds individual conversations with those with housing requirements (The Guardian, 10th April 2018).

Harnessing the power of relationships and relational practice consistently, across silos and sectors, is better for everyone.

Putting relationships first

There is an important difference between valuing good relationships and putting relationships first. We often speak to leaders and managers who say, "I get that relationships are important but my top priority is... something else." Head teachers, for example, who cite exam results or school attendance rates as their primary consideration.

We say those outcomes will never be achieved unless and until relationships work well – child to child, child to teacher, teacher to family.

As the examples in this Case Maker show, successful practice results from putting relationships first, not because they are more important than anything else, but because everything else builds on those foundations.

This is an approach that we see powerfully vindicated even in the toughest circumstances, perhaps especially in the toughest circumstances.

Professor Daniel Aldrich studies the impact of disasters. Following the Japanese tsunami in 2011 he found the strength of social capital was more significant in determining the level of fatalities than the height of the seawall or the height of the wave - the social infrastructure even more important than the physical (Aldrich and Sawada, 2015).

This seems barely believable at first glance but when we unpick the stories we find neighbours who know who needs help to leave home, who is least likely to hear an alarm, who has transport or shelter on high ground. It's obvious really. Just as it is obvious that it would be those same communities that recovered and rebuilt fastest and most effectively.

The influence of relationships on our ability to cope effectively with disaster and the capacity to recover well emerge repeatedly in studies from around the world. Aldrich concludes: "...these consistent findings should drive home to policy makers everywhere the critical importance of close ties," (Aldrich, 2023).

We often hear about the nurse or the teacher or the receptionist who 'went the extra mile'. It is a generous compliment but the stories in this Case Maker are about more than kind people being good to one another, important though that is. They are about the careful development of relationship-centred practice, intentionally, consistently and systematically prioritised – the first mile, not the extra one.

And, again as these stories demonstrate, this is something we can all do. Most obviously perhaps the nurse or the teacher, but also the urban planner, the police officer, the next door neighbour.

Think of your place - your neighbourhood, organisation or workplace, wherever you might find yourself. Imagine if relationships were the central operating principle, a constant golden thread joining people to place, services to people, people to one another. What could you change today? What could you change with others in the months ahead? And how could you make the case for putting relationships first? We hope the stories that follow offer inspiration.

STORIES

A NOTE ON THESE STORIES

Each story in the Case Maker is an exciting, thought-provoking example of what happens when we put relationships first.

Together, they represent different scales, sectors, geographies and types of organisation: from business to community group to charity to large state institution.

They are not templates to follow, but rather accounts of some of the relational work that has inspired us. Between them they exemplify many of the key themes, practices and possibilities in relational working, as well as many common barriers and challenges.

We are hugely grateful to everyone who took part and for the generous, humble, candid spirit in which they shared their stories. Nobody we spoke to held up their work as perfect; on the contrary, they were quick to share challenges they'd faced and lessons they were learning.

We hope these stories provoke thoughts, spark ideas and push the boundaries of what you think is possible. At the end of each story you'll find a series of five prompt questions to help you reflect on key themes and how they might apply in your own context.

How did we create these stories?

We joined forces with author and social researcher Matt Lloyd-Rose to identify people and organisations with stories of relationship-centred practice. Our aim was to give a sense of how relational work looks at different scales and in different contexts.

Matt conducted desk research and interviews with people closely involved with each story, asking them to describe the role of relationships in the work they do. Interviewees reviewed their stories to check they were fair and accurate before they were finalised.

I don't work in any of these sectors. Are these relevant for me?

Sometimes the most exciting ideas come from sectors and contexts other than our own. We hope you find inspiration and provocation in all of these stories, regardless of whether they reflect the specific work you do.

Several of these look hyperlocal and small scale. Can they affect wider systems and structures?

All of these stories feature intimate, human examples and show the day-to-day realities of relational work. At the same time, they all connect to, and have big implications for, wider systems and structures. We hear stories from the NHS, a Local Authority Social Care department, and a charity embedded in the prison system.

Other stories might appear separate from wider structures, at a glance. Look closer, though, and you'll see how they influence surrounding systems. We hear from pioneering charities who are modelling relational ways of addressing entrenched social issues – and relieving the pressure on stretched local services in the process. We hear from a trailblazing community project, enabled by the radical devolution of funding and decision-making of a large funding body.

There are implications in these stories for organisations and services operating at all scales. Our systems are the sum of the small things that happen within them; the quality of relationships matters and is magnified, for better or worse, across the full extent of the systems we work in. The bottom line is that putting relationships first can be transformational.

For those who prefer listening to reading, audio recordings by Emily Blad are available on our website.

FEATURING...
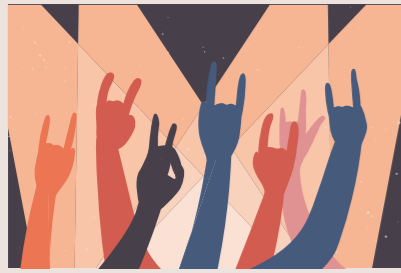
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NHS Palliative Care | p. 51

Pursuing results through relationships in a large, complex system

Grapevine

Addressing entrenched social issues relationally not reactively*

A few years ago, Coventry's Taylor Swift fans had no way of finding one another.

Now they meet once a fortnight as the West Midland Swifties, a group of fifty devoted enthusiasts. They listen to records and discuss the latest developments in Taylor's meteoric career.

West Midland Swifties emerged from Grapevine's Help & Connect initiative for adults with autism and learning disabilities.

But isn't a Taylor Swift fan club a slightly strange outcome for a community charity?

Starting with a dream

Grapevine exists to help people experiencing isolation, poverty and disadvantage in Coventry and Warwickshire.

One such person was Jackie, who is autistic, lived alone and had been repeatedly harassed by young people in her community. She felt so unsafe where she lived that she tried not to leave the house, even to pop to the shops. Jackie stayed at home and spent most of her life on her computer.

How do you support someone when they've reached this point? Do you send meals around to their house? Or work with the young people

so they leave them alone? Instead of focusing on Jackie's problems, a Connector from Grapevine asked her what her dream was.

Jackie's dream was to hang out with other people who love Taylor Swift.

Collaboration station

At first, Jackie and her connector went looking for local fan groups but couldn't find any. "You've identified something that's missing round here," her connector said. "So let's grow it."

Jackie went to one of Grapevine's Collaboration Stations – sessions where people present ideas and find potential collaborators – and shared her vision for the West Midland Swifties. Two other attendees were keen to get involved. All of a sudden Jackie was leading the development of a new community group alongside people who shared her passion.

Bit by bit, the group grew. They found a venue for their meet-ups. The members got to know one another and invited other local fans.

Now the group is thriving and Jackie has friends who look out for her and visit her house. She comes and goes and is much less vulnerable and isolated.

Cementing the why

What's striking about this story is the way that, instead of reacting to the issues Jackie was experiencing, Grapevine began with her passions and dreams. A passion for Taylor Swift might not seem like much of a seed to work with, but Jackie's connector spotted it and nurtured it.

"A lot of the people we work with," says Naomi Madden, Grapevine's Director of Projects, "their lives have remained unchanged for many, many years. Their experience of relationships is one of rejection."

This is why, instead of arriving with a laundry list of practical steps to address their

challenges, Grapevine ask people to share their dreams and start from there instead. "No laundry list is going to make a person feel brave enough to face their challenges," says Naomi. "We really cement the why – *why are we doing this?* It's that dream that gets them on board."

Following a dream supports individuals to step into new spaces and find meaningful local relationships. And ultimately it's the relationships that do the work.

"The issues Jackie came to us with diminished as a result of her relationships," Naomi says. **Her life is happier, healthier and better connected.**

People know her for her passions and interests, not for her needs.

The long story

Jackie's story illustrates Grapevine's confidence that good relationships can and do resolve intractable-seeming social issues. "If people have human connections and relationships, they are healthier, safer and less likely to fall into crisis," says Naomi.

"We know that works. Ordinary human relationships and connections, that grow with individuals as their lives grow, are better able to respond to individual human need than any system possibly could."

Interventions and services, "the things people see as help," Naomi says, "are time limited and assessment based. They're not there for the long story. Human connection is the thing that is there for the long story."

Grapevine go beyond a service delivery relationship, focusing instead on building a sustainable network of authentic, reciprocal relationships around each individual they support.

Beyond inclusion

A significant outcome of Jackie's contact with Grapevine is that she's not simply included and accepted by her community, she's now a leader within it; she is shaping it and bringing other people together. This is because 'inclusion' is not Grapevine's aim.

"We go beyond being inclusive," Naomi says. **"We want people to feel purpose and leadership. The roles that make up our community, we want them to be part of that."**

This emphasis on developing purpose and leadership, rather than swooping in to solve people's problems, reflects Grapevine's view of their work as 'building community power' rather than 'community development'. "With community development, people come in and do the work, and it's good and it's needed, but it ends," says Mel Smith, Grapevine's Deputy CEO. "And when it ends, are people empowered enough to continue it and sort things out for themselves?"

Grapevine's Change Maker University fosters this community power and leadership, along with the webs of relationships to embed and sustain the changes people want to make.

Walking alongside communities

For Mel, one of the biggest challenges is working within a wider system that views people as 'recipients' of services and, in the process, habituates communities to the idea "that they don't have the power to do stuff."

By building good relationships with local services, Grapevine is trying to change the wider

system, using their relational work as a model and "a form of experiential learning for people working in that system," says Mel. "We're trying to take people who think they can't behave this way on the same journey."

This includes "getting people out of the boardroom to walk alongside local people." On Grapevine's Walk and Talks, people working in local services go for a walk around the city with some of the people they're serving, hearing their stories and ideas along the way.

Creating meaningful ways to listen to local people is a core part of Grapevine's work, whether that involves setting up a temporary park in a busy civic space or spending a lot of time on buses. "We wanted to speak to older people," says Mel, "and we knew a lot of older people take public transport. So we did a listening campaign sitting on local buses."

Relationships rather than fixes

In everything they do, Grapevine start with relationships rather than fixes.

Naomi describes the radically different outcomes this can produce. "We supported someone who was hoarding," she says. "Social services referred her to us. Her house was full of stuff. It was a fire hazard and, still, she was constantly getting stuff delivered and would never get rid of anything. What's more, her bins were overflowing with rubbish and packaging, but she never put the bins out. So her front yard was also full of stuff – and the neighbours didn't like that at all."

"The thing is," Naomi says, "she was agoraphobic: so fearful that she wouldn't put her bin out on the street. And so one of the first things our team member did was to talk to her neighbours, and say: 'look, if she hasn't put the bin out, can you help her?'"

"That was a bit of a turning point. It shifted from the neighbours waiting for services to solve that

problem, to thinking: 'actually we can help solve that problem'. Eventually we introduced her to a couple of her neighbours and then, one day, without warning, she put the bin out herself."

"Now, it doesn't sound like much, but that was a huge step. And then, every week, she gradually started clearing the stuff. Alongside that, people on her street started saying hello to her, which all of a sudden opened up the possibility of friendship, feeling part of a neighbourhood. She started to go out a bit – not far, but she started leaving the house. And eventually she cleared it. It took ages, but she cleared the house. And if the hoarding starts to happen again, hopefully the people who first come to support will be her neighbours."

"If you look at that problem on paper," says Naomi. "Your first point wouldn't be to go to the neighbours, you'd get a skip. And that's the difference with a relational approach."

"How are social services supposed to fix all these problems?" she asks. "We use the power of relationships to tackle big social issues."

Note: Identifying details have been changed and, to further protect people's identities, some characters in this story are composites of multiple individuals.

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- What difference does a relationships first approach make in this example?
- How might a relationships first approach impact surrounding services and systems?
- How does having good relationships relate to knotty social issues like isolation, exclusion and mental ill health?

APPLYING THE LEARNING

- How might you address a challenge differently in your place with and without putting relationships first?
- What would it mean for you to think in terms of the 'long story' in your context?

Image source: Grapevine

Gateshead Community Bridgebuiders

Transforming and connecting communities through devolved decision-making

Working relationally sounds lovely. The idea of it is warm, relaxed, cosy. But the reality can be more uncomfortable.

"We have a very relational way of working," says Christine Frazer, one of Gateshead's Community Bridgebuilders. "And it freaks people out."

"In the first six months in the job, each of us had a wobble: 'am I any good at this? Can I be any good at this?' There's no boss going: 'you got four out of ten, now your target is to get six out of ten.'"

Relationship-centred practice may sound comfy and cosy; in reality, it can be challenging and uncomfortable, especially if we are used to more rigid, prescriptive work environments.

Relational work can be much more open-ended, dynamic and surprising.

Gateshead's Community Bridgebuilder programme grew out of the Lankelly Chase Foundation's decision to devolve money and decision making to the local level in the place-based work they are funding. "They recognized that a group of people in London weren't best placed to make decisions about the North East of England," says Andy Crosbie, Director of Collective Impact Agency, a local community interest company.

"I set up a team based on relationships I held in the borough and we had a series of conversations. But when we discussed what to do with the money, I was shocked that the conversation didn't yield anything terribly interesting. It made me think: 'we don't have the right people around this table yet.'"

Asking the people in the know

That moment was the catalyst for locating and recruiting the Gateshead Community Bridgebuilders: people with lived experience, who are "deeply embedded in marginalised communities, trusted by that community, and already active in building community there."

Finding the Bridgebuilders involved "talking to the main existing community weavers," says Christine, "like the heads of community centres. It was about the people in the know identifying people."

Andy and his team met with a group of interested people and explained the Bridgebuilder role: working alongside the community to identify the change they want to see and how they want to spend the funds. "We were apologetic," says Andy. "We said: 'we know this is vague, but that's kind of the point.' And the response was: 'this is amazing; you're going to let us fill in the blanks. We've never been given that opportunity before.'"

To apply, prospective Bridgebuilders were invited to respond to three questions in the medium and language of their choice. "Afterwards," says Andy, "one of our Bridgebuilders said: 'if you'd asked me for a CV, I wouldn't have applied.'"

Seven Community Bridgebuilders were recruited. Each is hosted by an organisation that works with and in their community. "So I'm based here at Bensham Grove Community Centre," says Christine. "I'm working with the community at Teams and Dunston and a lot of people from my community pass through here, work here, socialise here. So it makes sense that I'm on the ground in the space, living and working where the enquiry is happening."

Hyper-local decision making

Bridgebuilders have the time and freedom to nurture and expand their network of local relationships.

For Christine, being alongside the community and engaging existing local groups is a big part of the role. "We developed a methodology," she says. "We'd chat to a local group and say: 'you've got two thousand pounds. You can spend it on anything that's legal, safe and will improve the community. You can't give it all to one person.' Then we walk alongside them as they spend that money."

Christine describes how that approach played out with a local men's group: former servicemen, experiencing PTSD. "It took me six months to get an invite," she says, "because I'm a woman. I sat outside their community centre door sometimes until one day, one of them invited me in: 'y'alreet, do you want a cup of tea?'" Christine explained the process and invited them to get involved.

"The guys spent a bit of the money on a local trip," she says. "They went to the dodgems and had a McDonalds and discussed how to spend the rest of the money." The group decided to buy a defibrillator and first aid training for everyone involved with their community centre. "Next thing was getting a bin for dog muck outside," says Christine.

Devolving funding and decision making to local groups both relied on and reinforced existing relationships, providing a shared focus and catalysing conversations about the change they want to see in their area. The concrete hyper-local outcomes were important, but as important were the spreading and deepening webs of relationships within and across communities as the sense of common purpose began to grow and snowball.

The men's group used their next pot of funding to train as mental health first aiders, "so they could become that support to an extent in their community. And that led to the most incredible local WhatsApp group, who organise a yearly Blues Buster festival in January and throw a great big party. The men's group are helping people to feel safe and happy to talk about mental health."

Now they're thriving. "The bonds have deepened," says Christine. "Their trajectory is onwards and upwards with a new voice and a new power to know that they can make decisions on their own."

This example gives a sense of the gradual way that the impact of the Bridgebuilders' work unfolds: identifying existing webs of relationships, building on them, working alongside people, supporting groups to feel greater agency and make meaningful decisions, then weaving the efforts of different local groups together.

Part of the power of this approach is the way that Bridgebuilders can create connections and share learning between their communities. For example, the community mental health training

that began in Teams and Dunston has since been spread by other Bridgebuilders into their own communities. Elsewhere Bridgebuilders have run events together, like an Inclusive Christmas celebration, dreamed up by Hakan Akarli, a Bridgebuilder in the local Turkish community. Two other Bridgebuilders, Fozia Haider and Afroz Qureshi, who are both working with Muslim women and the local South Asian diaspora, joined forces to set up a swimming group for women from minoritised communities.

Individual efforts can be amplified and multiplied by Bridgebuilders in other communities. Connections and relationships can be forged between groups that might not ordinarily intersect.

The Bridgebuilder approach is very different from more traditional models of outside agencies stepping in to meet local needs.

Expanding the web

Although relationships are not reliant on money, the devolved funding in Gateshead shows the way that money can be used to deepen and spread local relationships and to break down barriers to social integration.

"A little bit of money in the community can really make a difference," says Chris O'Toole, the manager of Bensham Grove Community Centre, where Christine is based. "But it's about listening to the community themselves. For example, we've been able to put aside money for women wearing the hijab to take a taxi to the community centre, because they feel vulnerable travelling on buses. That enables them to meet up regularly. Just being able to pay for transport makes a huge difference."

As a result of Christine's work there has been an

increase in both the number of groups involved with the community centre, and the number of people from existing groups. "Like the Turkish community," Chris says, "who were never involved before but are now really engaged. It's widened the scope of what we do and the relationships we have as a community."

Chris describes the way that the web of local relationships is getting both wider and thicker. "There's lots of little tentacles that get created and that we build on. I couldn't explain to you how all of these tentacles mesh together. It's about how people know each other: 'oh, I know such and such. Oh, he's got one of them.' It's great but it's very difficult to pin down."

In a time of increasing polarisation, building trusting relationships across communities is more important than ever.

Through the Bridgebuilders' combined work, communities who might not see themselves as having much in common, come together in shared spaces around a shared purpose.

It can be easy to romanticise this kind of work, but it presents its own challenges. "It's not all hearts and flowers," says Chris. "There's competition for funding. People have very strong opinions about what should and shouldn't happen."

Openness and unlearning

For Christine, the sheer openness of this kind of relational working is its biggest challenge.

She came from a much more structured job. "That job was frustrating," she says, "but I was held in a system, in a box, and I was safe, because there was no wiggle room at all." As a Bridgebuilder, she says, "not having 'do this on a

Thursday' or 'fill in this spreadsheet in that way', I got really disillusioned and I felt very lonely in my working life. I felt like everybody around me fitted and I didn't. I'd go to a conference and have that conversation: 'who are you and what do you do?' And I'd be like: 'I'm a Community Bridgebuilder. I kind of work it out as I go along.' That didn't sit well with an awful lot of people and didn't sit well with me. I had this torment inside: 'am I doing this well?'"

How do you know if you're doing this work well?

"You can't measure love," says Christine, "and you can't measure kindness and understanding – and that's something we deal with in spades here. So how do we prove it's working? We write anecdotes, we look at the amount of people we're supporting. So we have evidence and we have understanding – but we're kind of working outside existing systems."

Relational work often skirts existing systems, which are not designed to be relational.

The importance of a project like this is not just the difference it makes on the ground, but the model it offers the wider system and the permission it grants to others who want to work through relationships.

"We've received criticism about the openness of this way of working," says Andy. "It's so countercultural. People are so used to being told what to do, what good looks like, and being measured to within an inch of their life. There's a process of unlearning needed – and this is one of the core bits where relationships are paramount."

Good decisions and good relationships

Why all the emphasis on relationships in the first place? Isn't the issue Lankelly Chase identified

an information problem, not a relational problem? If decision makers had better local insights, couldn't they take the right decisions and administer funds?

This way of thinking misses the fact that community change is a dynamic process that cannot be imposed on people without their support, participation and leadership. "Relationships have to be the start of any decision-making body," says Christine. "Because you can't make good decisions without good relationships."

If a key challenge for communities is feeling voiceless, disempowered and disconnected, interventions that don't involve building voice, power and connection risk exacerbating the very challenges they hope to address.

Relational system-level change

This might look like an example of hyper-local, small-scale change. In fact, it is a radical reimagining of system-level change, with normal procedures flipped on their head. This could have been a prescriptive, arms-length operation. Instead the funder put their faith in local, relational decision making. Through handing over money and decision-making power to communities, the Bridgebuilder approach aims to "encourage people to become more civic minded," says Christine, and equip them "to make change within their community."

Devolved decision making requires local groups to come together in different ways, to have different conversations and build different capacities. The process of shared decision making is as significant as the changes on which money is spent.

The next step for the Bridgebuilders is to keep developing the networks of relationships. "This is very much the start of a web," Christine says. "The dream is that we get more Bridgebuilders from other marginalised communities. We're missing a youth focused Bridgebuilder; there are spaces, places, communities we've not yet reached."

"Hopefully as time passes that web gets larger," she continues. "We're not just creating something to be done in a three-month period – this is about investing in communities for the next ten, twenty years."

A full list of Gateshead Bridgebuilders can be found on our website.

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- What kinds of relationships and relational work might devolving money and power make possible?

- What could count as meaningful evidence of the impact of this kind of work?

- How might healthy scrutiny and accountability look within more open-ended relational work?

APPLYING THE LEARNING

- What reflections does this story give you for your own context?

- What could you see as the challenges of this kind of relational practice in your own work?

Switchback

Transforming the lives of prison leavers through reliable relationships*

In prison, people get 'gate happy' when they have a release date. "There's an energy in the prison," says Alice Dawnay, co-founder of Switchback.

"Big talk about all the drugs and all the girls and all the cars; the younger men boast they'll be a billionaire footballer or win a TV talent show. Everybody knows it's a massive lie. But the officers and everyone play into it."

"By contrast, we come in and say: 'the day you get released the most likely story is that some of your possessions are missing; the friends who said they would collect you don't show up; it's raining and you don't know how to get back to London.' And the men laugh, because they recognise that picture, even if everyone's spent all this time saying it's going to be rainbows and happy days."

"Once we've established that, we can have a real conversation about what will happen," Alice says, "and that honesty will become the foundation of a trusting relationship."

Both sides of the gate

"When we first started in 2007," says Alice, "we were trying to do something quite radical – to provide something everyone knows you need in order to change your life: a long-term relationship with somebody who cares, which is flexible but boundaried enough to hold you through that transition."

Switchback mentors work with young men before and after their release from prison to support them to live differently.

"They're people who've been let down time and time again with relationships," Alice says.

"Relationships aren't something they can rely on. We set out to flip the script in that regard and offer a reliable relationship."

"Resettlement organisations tend to have a prisons team and a community team," says Alice, "which will be connected, but it's not the same person. We wanted to be there both sides of the prison gate."

"The premise is that if you are a young man in that situation, very often you've pretty much given up on yourself," Alice says. "You might have committed acts of serious violence and done things you can't really do if you care about other people or yourself. We seek to remedy that through a relationship where somebody really cares and, through which, these young men can begin to care about themselves again."

The relationships are "very much at the heart of the work." In a sense, they are the work.

Breaking vicious cycles

There are many practical and emotional challenges on leaving prison.

The mentor-trainee relationship provides a backdrop and a container for these challenges - a point of stability in an unstable period and, for some, a space to experience and practise having a caring, reliable relationship.

Practical outcomes flow from relational outcomes. Through being encouraged and challenged within a trusting relationship, the young men achieve practical goals like opening a bank account, getting ID and finding employment. Mentors support with these practical matters, but just as importantly they support trainees to work on attitudes, values, behaviours and relationships.

The results are striking. Many young men released from prison reoffend within a year of their release. For Switchback trainees this figure is 8%, compared to a national average of 49%. This is a staggering difference. Eighty percent of Switchback trainees move into long-term employment. They are breaking notoriously stubborn cycles.

A mutual decision

A distinctive feature of Switchback's model is that their trainees have to actively opt in to their support. They don't apply, they aren't chosen, they aren't persuaded. Instead there's a shared commitment by both mentor and trainee. "It's always a mutual decision," says Annabel Holmes, a current mentor. "We both have to agree it's the right thing."

"A lot of people expect to just sign up and that's it, after a very short conversation," says Annabel. "They're like: 'oh yeah, sign me up for that.' But I'll say: 'we don't make quick decisions. If you're interested, have a think about it, we can decide together that it's the right thing.'"

The decision has to be active and intentional. "Having the mutual decision, knowing they've made a choice to be there, enables the men to have more agency," says Annabel.

Taking it slow

"I get a list of guys who are eligible for the support, approach them and explain what we do," says Annabel. "If they don't want it or don't think they need it, I leave it there. If someone is curious

or interested, I start building a relationship."

Time to build relationships is designed in. "I'll go into the prison once a week over three months," says Annabel. "I take it slow, get to know their situation, what kind of goals they have when they get out, what's been difficult in the past, what stability means to them, and how we can ensure the support we're offering will help them get there."

There is something countercultural about this spaciousness. The idea of giving things the time they need, rather than the time you have, will sound radical and luxurious to many frontline workers.

Can they afford to give each individual this much attention?

Flexing to individual needs

Switchback's model flexes to individuals and their needs, enabling mentors to begin where trainees are and adjust their time and support accordingly.

"One guy I worked with was very nervous coming to Switchback," says Annabel. "It took a few attempts to get him into the office."

"He'd had a very difficult upbringing, and had a hard time trusting people, so a lot of my work with him was centred around building rapport and safety. When he felt overwhelmed, I'd let him take a breather, and we'd go again, to try and show him I wasn't going anywhere, while still giving him time to feel comfortable. It was challenging at times, but I had to remind myself he was only trying to do what he could to keep himself safe."

"When it came to the end of his time on the programme, he'd grown so much. At the end of the intensive twelve weeks, we do

a final action plan, where we celebrate the journey, give them a printout of all of their achievements, and a card and gift. I wasn't sure if he was going to come, but he did and it was great. He was so taken aback by the thought we'd put into it. And now he's working and doing really well."

Annabel's relationship with her trainee enabled multiple outcomes – one of which was practising how to build and maintain relationships.

For Annabel, part of the relational skill is being able to keep an emotional distance. "It takes a lot of reflection," she says. "I have to look at what I am seeing as part of a bigger picture, taking into account all of that person's past experiences. I have to step out of it so it doesn't just become reaction, reaction, reaction."

Good endings

Practising how to build and maintain relationships also involves practising how to give relationships a good ending.

"Many of the young men we work with have no experience of relationships ending well or feeling in control of how those endings happen," says Alice. "Every single one of them has experienced the traumatic ending inherent in being sent down to prison from court. Traumatic endings to relationships are very familiar to those who've been in care in particular."

The time-bound relationship with Switchback offers the chance to break that pattern and bring a relationship to a positive, careful conclusion.

To do this, mentors help trainees to prepare for the end of that relationship from early on in the process, so it doesn't come as a shock or leave them feeling let down. Key to this is helping trainees build up other relationships which will endure.

Doing what you say

Sometimes mentors initiate this ending mid-process. A distinctive feature of Switchback is the conditionality of the relationship between mentor and trainee – and their openness to ending relationships if a trainee consistently does other than they say they're going to do.

"There's unconditional positive regard," says Alice. "It doesn't matter what they've done, we're working with them on who they have the potential to be. But the relationship is conditional on them wanting to make a big change in their life. If they stop wanting that, we have a conversation about stopping that relationship."

Sarah, Switchback's Acting Head of Delivery, echoes this: "If the gap between what someone does and what they say they want keeps widening, then we have a frank conversation about whether Switchback is the right thing for them at this time."

Part of the role of the mentor is to model and coach reliability. "At Switchback there's only one rule, across staff, trainees and everybody," Alice says, "and that is: do what you say you're going to do. That's the core of how we work with anybody."

In this way, Switchback mentors hold trainees to their own stated intentions. "The way we challenge people," says Sarah, "is just to say: 'you told me that you wanted this. You said you'd meet me in the council office every day. We'll do that. You said you'd bring in your passport so we can send it off to housing. Let's do that.'"

"If I see a difference between someone's actions and their words," says Annabel, "I'm not going to judge it, but I'm going to point that out."

Being yourself with boundaries

Prisoners come into contact with many different services and charities. "Most of the external agencies come to see you with a clipboard and ask you the same question that seventy-two people have already asked you that month," says Alice. "Whereas we come in, put the form down and say: 'how are you? What's going on?' And it's like: 'oh, hang on, this feels more like a human being. I don't have to give this person the *right answer*.' They're surprised into having a more real relationship."

Mentors are trained how to be themselves, without having to share a lot of personal information. Relationships are "incredibly boundaried," Alice says. "Switchback mentors are quite unusual in how highly boundaried they are. We've done a lot of training on how to build strong relationships whilst maintaining boundaries."

"Once you start a relationship like that you realise you don't need to tell people where you live or what football team you support in order to build rapport," Alice says. "You can be yourself without giving anything about yourself away."

Positionality and power

As well as being themselves, mentors need to be aware of themselves.

"Effective relational work requires a strong sense of self and positionality in society," says Sarah. "You need to know and understand and reflect on your position and power in that relationship."

"It's important in my work to recognise I am a white middle-class woman," says Sarah, "and to ask myself: for a man who has been to prison, what does it feel like to work with me and someone who looks like me? I have to be

mindful of who I am and who I'm talking to and that there are certain things I won't know about or ever experience."

"People come to charities for support," Sarah continues, "and acknowledging that there's a power imbalance in that relationship is imperative." The intrinsic power imbalance is one reason Sarah believes it's crucial there are people with lived experience on Switchback's team. "Building and delivering a service without people's lived experience could be quite harmful," she says. "You could be missing out a big part of the work in supporting someone."

Sarah describes how her relational work has changed across her time at Switchback. "My empathy looks different now," she says. "When I started it came from a place of: 'oh no, this is so horrible, poor you.' Now I approach it with a much more stepped-back lens of: 'what do you want? And how can you support yourself?' It's thinking about how to navigate that without trying to teach someone to live like a white middle-class person."

"There's been a positive shift over the years in understanding that, whilst we do really meaningful work, there is a limit to change if society doesn't change," Sarah says. "The way we hold conversations now is more about acknowledging that some things are out of the men's control (such as being stopped and searched through being stereotyped) and being real about how hard and frustrating that can feel."

The stuff we all need

Switchback deliberately flies in the face of existing logics and expectations around funding and timescales.

"When we set it up," says Alice, "we wanted to work the way you would if you didn't have to worry about where the next funding was coming from, or the way this has been done before: if you were providing properly meaningful support focussed on individual need and ambition for young men leaving prison; if you were going to aim for excellence, being honest and unencumbered by funding or justice system structures. We were just like: 'no, we're going to tell the truth about what these guys are up against and why this needs to happen.'"

"Our fundraising is relational as well," she continues. "The funders, like the prison-leavers, respond to the honesty. They recognise that they're not being fed a line. It matters to us that it's meaningful."

"Funders come to the training café or come to events and meet the trainees and chat with them. Everyone feels very connected. Ultimately nothing at Switchback works if it isn't human: that's our first value."

"When we talk to funders, we're upfront about how this is going to be expensive because it's about humans and complexity. We talk about not seeking government funding that would demand high-volume and light touch. Our work is the opposite: narrow and deep. If that means small caseloads, but massive ripple effects in families and communities, then that's the way we'll do it."

Emerging from prison can be highly destabilising. Every aspect of life is off balance. Having to sort out work, accommodation, finances, health and relationships all at once could overwhelm anyone. "We believe that people need what people need," says Alice. "It's not: 'because I'm a prisoner, or an *ex-offender*, or had a childhood in care, or did this awful deed that I need something special or different.' What these guys need is what we all need, it's the same stuff."

To bring life back into balance, what they need, above all, are reliable, trusting, caring relationships.

Note: some names in this story have been changed

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- What stands out for you about the relational practice here?

- How do you feel about the conditional nature of the relationships in this story? What effect might those conditions have within this relational work?

- Why is a consideration of positionality and power so important for this relationship-centred practice?

APPLYING THE LEARNING

- How and where do boundaries play a role in relationships in your context?

- How do you reflect on positionality and power in relational work in your context?

Image source: Switchback

Xenia

Building social integration through mutual learning and meeting as equals

It's hard to chat. I'm terrible at chatting to people at parties," says Makena, an organiser at Xenia. "A lot of people give up on relationships because they're not good at that bit, the small talk part. They want to fast forward to the part where they know each other."

Xenia brings together women from different backgrounds to connect, share experiences and learn from one another. It began as a community group in Hackney and has since become a charity, recently working alongside local women in Sheffield to set up a new group there.

The heart of Xenia's work is a weekly get-together.

All levels of English are welcome and there's an emphasis on welcoming women who have recently arrived in the community.

"When Xenia was set up, there were a lot of conversations in the media about the need for people to integrate," says Makena. "But at the same time, there were a lot of cuts in the provision that had been there." Xenia evolved out of that moment.

"We sought to bring women from across the community together because there was no space for their voices," Makena says. "Through community comes inclusion, understanding,

sharing and learning. We provide childcare, pay people's travel if needed, and meet at a time that we thought might suit people. Any woman can come to Xenia; you don't have to sign up, you don't have to make contact beforehand."

Love for strangers

There is a Xenia session every Saturday morning. "If you're new to Xenia, you arrive at the venue and you come in and see some other people are already there," says Makena. "And that's one of the most important moments."

"It's so important to show people a warm welcome. Xenia means the love for strangers in Greek and really showing this love when someone walks in is core. Equally if someone hasn't been for a while, the only thing that happens is they'll be welcomed even more."

Women of all ages, cultures, socio-economic backgrounds and immigration status come to Xenia. It's a space where local relationships can form, across and beyond the confines of existing communities or social groups. It's an incubator of social connection and integration.

The value of repetition

There's a different theme each week, but the format of Xenia sessions is always the same.

"Everyone will sit down, whoever's facilitating will open, and we'll explain what Xenia is and some guidelines for speaking and listening," says Makena. Doing this every week is "repetitive, but it's important. It creates a sense of calm and familiarity. We remind everyone of our values: the idea that everyone has something to teach and everyone has something to learn, and that

all women are welcome. Then we go round and everyone will say their name and something relating to the topic of the week."

This consistency embeds Xenia's relational norms and creates a safe, stable structure within which relationships can form, even when diverse perspectives and disagreements surface.

Shared questions

"One session the topic was women's rights," says Makena. "That's quite a big topic, which a lot of people have thoughts on. It's important at the beginning that everyone gets to speak regardless of their level of English, so the first thing we said was just our name and the name of another important woman in our lives, maybe our mother, sister or friend, so we had the names of other women in the room."

After its opening, the session unfolds, with the facilitator offering a sequence of questions and moving people into groups with a mixed level of language ability. "The initial question is straightforward," says Makena. "In this case it might be 'talk about a woman you admire' and people might say Rosa Parks, Michelle Obama, my next-door neighbour, my grandma… Then the groups come back together and share, before taking the next, slightly more complex question back to their group."

The format is simple, but carefully considered. The movement in and out of groups provides space for those with more limited English to seek clarification. Instructions and ideas can be repeated and re-explained. The session themes are chosen to be relatable, but also to "have some depth and meaning, to get beyond 'what are you doing on the weekend?'"

"Sometimes there's also a creative activity," says Makena, "or some objects, or a bit of reading.

Image source: Xenia

Sometimes there's a video, or a visitor who comes in and runs part of the session: an artist, maybe, or someone from a local service."

Shared questions and shared activities take the pressure off making small talk. More natural, organic friendships can arise.

Mutual learning and non-hierarchical organisation

If this all sounds a bit like a coffee morning or a community English class, it's not. What makes Xenia distinctive is their commitment to creating a space where women, regardless of their English level, meet as equals and are all invited to share their own understanding and knowledge. The organisation takes this principle into its governance too, working non-hierarchically throughout.

"We set things up so that everyone learns from everyone else, whatever the topic," says Makena, "as a way of levelling some of those assumed hierarchies of the volunteer and the beneficiary, the teacher and the students, the people who can speak fluent English and those who are learning." Participants can progress from participant to facilitator to supporting on the organising team, but the structure remains flat. "There's no teacher," says Makena. "Instead one person facilitates the group. That rotates and all they do is set the questions."

The commitment to mutual learning and non-hierarchical organisation is important. Xenia is about community, but it's also about education and empowerment: supporting women to form genuinely reciprocal relationships and "find their voice in a small, safe setting."

Safe spaces to disagree

Xenia's sessions combine structure and space. "It's not a free for all," says Makena. "The facilitator outlines the session plan, and that is structured and held, but within that things happen that you can't control."

"I went to one session," she continues, "and the topic was 'learning'. That doesn't sound very contentious, but of course you can't control what happens in a session and people really talk about what is on their mind. That week we ended up talking about the war in Gaza, other wars in our various home countries, HIV Aids, what happens when we die…"

"That was a really emotional session, but it also revealed how much trust had been built in the group. We disagreed on some of the topics, but there was an acknowledgement of how much we all have in common. It was a session that got me thinking about how important it is to have safe spaces to talk about things we don't agree on, with people who don't necessarily share our perspective. That's rare."

"There are lots of safe spaces where people will have the same background or viewpoint or affiliation – but they can become exclusionary. We try to create a safe space that's not a safe space where everyone's the same."

"We're not trying to create a space where no one's ever challenged in their thinking."

Xenia's values of welcome and hospitality are core to keeping the space safe. "Occasionally we have to remind people of them," Makena says.

The result is an environment where meaningful, trusting relationships can form between people who might hold opposing views - a significant outcome in the current climate.

Just being there

"An important part of any friendship or relationship is being reliable," says Makena. "One of the best things about Xenia is the regularity. We've missed very few sessions;

we've missed ones that are literally on Christmas day. Apart from that we'll try and run sessions every week. That's such a key ingredient of community work and relationship building – just being there."

Growing while keeping the essence

Xenia was founded in 2016. Now it's growing. "When we started off we were just a group of local people," says Makena. "Now we're a proper charity. But we try and maintain those standards of not having hierarchies within the working team."

"That's the learning at the moment: how do we keep this non-hierarchical approach as we grow? It's not straightforward."

The organisation has a keen sense of the essence it's trying to preserve. "If I look around at the start of a Xenia session, that's how I want the world to be," says Makena. "There's a real diversity of people all being welcomed in one space, all engaged in conversation, connecting and sharing and learning from one another."

"So many people tell us: this is my sisterhood, this is my family."

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- Why do you think the structure and regularity of get togethers is so important in this example?

- How does a focus on building relationships enable mutual learning in this example? And vice versa?

- How can a charity at this stage preserve their essence as they spread and scale?

APPLYING THE LEARNING

- How and where is there space for mutual learning or non-hierarchical approaches in your context?

- How and where do you create safe spaces for disagreement within the work you do?

Poppy's

Bringing a more flexible, relational approach to the deathcare sector

A family decided that they wanted to visit their dead grandmother the day before her funeral. They gathered in the Poppy's Friends and Family Room and sat together around her coffin.

"When they arrived, they had this huge tin of scones with them," says Sarah Bax, Office Manager at Poppy's. "They said: 'ah, she loved a cream tea.' So I ran back to the kettle and brought this enormous brew over. And it was just the most normal thing, seeing them chatting over her coffin, eating scones, drinking tea."

At the end of the family's visit they decided they didn't need a full funeral. "They said: 'we're not going to come. We're done. This was perfect.' So there was no ceremony, no service. They changed all their plans at the last minute."

Sarah describes this as an example of "a moment when a family realises they're in charge."

Redressing the power imbalance

This story gives a sense of the flexible, relational approach taken by Poppy's, a South London business founded by Poppy Mardall. It wasn't

difficult to make tea and cancel the ceremony; what's striking is that doing so even felt like an option, in the context of a sector where there is often a rigid, impersonal approach.

Deathcare is big business. We may not think about it much of the time, may not look twice at the high street funeral parlour, but it is a large mainstream industry that we all interact with from time to time. There is never a dip in demand and there are big profits to be made - especially if the public don't know what they want or what it should cost.

"Our sector has become so uncaring and dishonest and opaque," Poppy says. "The dead become these corpse objects in body bags and the living become these weepy people who get patronised."

For Poppy, the taboos around death and dying have led to a situation where families are doubly vulnerable after the death of someone close to them: shattered by grief and ripe for exploitation by funeral businesses. "People have basically no expectations and no power when the time comes," says Poppy. They are often told what they should want, what they should do and what they should pay, rather than being supported to understand and enact their own needs and wishes. "The funeral sector goes wrong when we think we own the body and we own the experience," Poppy says. "We have so much potential power it's almost scary."

Being a relational funeral business is not just about being warm and humane with families; it's about redressing an imbalance of power and equipping families to feel in control.

A link in a chain of support

"Grief and death are among the few things we will all go through," says Poppy. Given this fact, it is strange how hidden and unknown the

deathcare industry is, and how low and undefined our expectations of it can be.

The death of someone close to us can "upend our physical and mental health," says Poppy, "in the short term and even permanently." The care and support we experience in that moment matter enormously.

A funeral director is one "link in a long chain of support that should be normal and accessible to everyone," Poppy says, a smooth trajectory between different institutions and services "where you barely notice you're moving from one support moment to the next." But this isn't the reality and the taboos and low expectations remain.

Open day at the mortuary

To challenge taboos around death and build relationships with the local community, Poppy's run regular open days. "We bring the public into the mortuary," Poppy says, "which is such a wildly taboo thing to do."

"An older couple might visit and be like: 'this is coming, we want to face it together.' Or some younger millennials might come, who are just open-minded and progressive."

Mortuaries are often bland buildings that don't announce themselves. People pass them without realising what they are. Poppy's mortuary is a Victorian burial chapel in the middle of Lambeth Cemetery, with tall windows and a high vaulted ceiling. Light pours in on the coffins and refrigerators. At any given moment, someone might be lining a coffin, engraving a name plate or getting a dead client dressed and ready for a funeral.

The open days are an example of the way that commercial sense and a relational approach can go hand in hand.

Poppy's build a relationship with their community

in an open, generous way, providing an insight into a social function that is normally hidden. And because they're transparent and trusted, people are more likely to choose Poppy's.

A relational approach to dead clients

"Our whole team is involved with the mortuary," says Sarah. "There's no segregation; I'm the Office Manager, yet I'm over there all of the time."

At Poppy's, the relational approach extends beyond their living clients to the individuals they care for after their death. It's easy to imagine what it means to be respectful towards the dead, or drily reverential towards them, but what does it mean to take a relational approach to someone after they have died?

"I love washing the hair of people who have died," says Sarah. "That's my favourite thing."

In these moments, rather than mimicking interactions from another stage of care, the relational approach involves an ongoing appreciation for each person as a human being.

"I don't pretend to know the person," says Sarah. "I don't chat to people or try to fabricate a narrative that feeds me. More likely I'm thinking that I've spoken to their mum on the phone, and that they've probably done amazing things with their life."

Modelling this relational approach can itself break down taboos and help families feel the permission to interact the way they want to with their loved one.

"There's real care in the way we move people here, the way we turn them to get dressed, the way we wash their hair," says Sarah. "What I love is when families are with us and they're watching and they say: 'I want to do it as well.'"

Human and professional

"The nature of our work is that we are with you for a maximum of six weeks," says Poppy. "The relationship is quite short term and quite intense. We are a group of people who rise up in your life. You probably don't forget us, but you probably don't want to see us until you need us again." The Poppy's team aim to be the "grounded, boundaried adults people need in that moment."

Boundaries are important when working in a context with so much trauma and emotion. "We're completely human with you," says Poppy, but being relational doesn't mean anything goes.

As for great midwives or teachers or social workers, the professional and the human co-exist and map onto one another.

"We occasionally get people calling us because they're worried or stressed," says Sarah. "We'll give them time, but we'll be clear that if there's nothing to sort or solve about a specific question, then we will come back to them. We are not therapists and we would never venture into that territory. Giving people clear boundaries actually makes them feel safer and can help the process."

Likewise the team make clear that they cannot resolve disputes and need families to work together to make decisions. "We have no problem stepping out of meetings if people are upset with each other," Sarah says. "I just say I'm going to print something and that gives them a moment to pause and catch their breath."

"We're alongside people during a difficult period, we're not in it with them," she continues. "We're right by their side to get them through this initial period in a way they feel proud of themselves for."

Talking about difficult things

Clear boundaries are accompanied by a commitment to honesty and transparency. This involves talking openly about difficult things – death and care for the dying, but also another social taboo: money. "We always talk about money the first time we speak to a family," Poppy says, noting how 'refreshing' people find this in a sector where pricing is often opaque and inflated.

The team also commit to sharing the information families want about the person who has died - something it can sometimes be hard to access, especially if a death is violent or unexpected. Information and visits are withheld by some mortuaries, leaving families confused and frustrated. Finding someone who will be open and honest can be a huge relief.

Sarah describes a situation where a man's body was in very poor condition, but the family still wanted to visit. "We never say no, whatever the condition," she says, "but we always explain very clearly what to expect and what the person looks like." In this case, Sarah had prepared a script and shared information with the man's sister gradually, asking at regular intervals whether she wanted more detail. "I didn't hide anything," Sarah says, "and the relief she felt! She said she'd been begging the coroners to tell her what her brother looked like, but they wouldn't let her visit and they wouldn't send photos. And now, suddenly, she had control and ownership."

The man's sister decided to visit him and she was able to recognise a few details and say: "Ah, this is him."

Staying human and open-hearted

It is not uncommon for behind-the-scenes work in mortuaries to be permeated by dark humour – not necessarily out of disrespect, but as a way of dissociating from the difficult realities of the job. At Poppy's, all team members stay close to that reality.

"It's not our sadness," says Sarah, "but it's okay to feel sad. We name it and allow ourselves to have reactions."

There is an art to staying well in such an emotionally charged environment.

"We know that the hero model doesn't work," says Poppy. "How do we stay in service in a way that means we can be sustainable? How do we stay human and open hearted without suffocating amidst other people's anxiety and terror?"

The team sit in one office together, in the gatehouse of Lambeth Cemetery. They can hear if someone else is having a difficult phone call. They check in with each other when someone gets back from a funeral. They take time out to talk or to walk around the cemetery.

"We have our hands on the backs of our living clients," says Poppy, "and we need people's hands on our backs and they need people's hands on their backs."

There have to be 'concentric rings of support', layers of relationships through which the intensity of the work can be distributed and diffused, and everyone involved can feel supported, heard and held.

Structure and space

Although the experience for clients at Poppy's is structured and boundaried, there is space for them to work out and express their unique hopes and needs. The service for families is consistent – but consistently open and responsive. As such, the outcomes can look radically different.

If the norm in the sector is to funnel families down standard, pre-defined pathways, the relational approach at Poppy's throws things wide open, encouraging and celebrating the diversity of people's wishes.

On one call, a family mentioned that their dead relative would probably love to have arrived at his funeral in an old London bus. The team didn't promise anything, but they went away and managed to organise a double decker bus to take the coffin and the mourners to a natural burial ground.

"If it's legal and it's possible, we'll do it," says Poppy. Within the team, there's a willingness to be surprised and an emphasis on trying to find a way through for each family. "That's why the people who work with me come to work," Poppy says. "They're not looking for generic service delivery." She talks about being in service to their clients, rather than offering them a service.

Managed, controlled flexibility

The team aim for "managed, controlled flexibility," Poppy says: a quality required recently when an older woman woke up ill on the morning of her husband's funeral and called to say she wouldn't be able to attend.

Instead of proceeding without her, the Funeral Director, Hannah, made some calls and, within half an hour, had changed plans. Rather than gathering at the church, the congregation, the coffin and the vicar met at the woman's house. The funeral service took place in her living room.

"That quick change, that ability to even think we can do this, is incredibly human," says Sarah, "but it was done very professionally. It wasn't like: 'let's chance it and have a go.'"

Decorating a coffin

"I came in one day to find a family decorating a coffin," Poppy says. "We have this room where families can do that, and there's often glue and glitter on the floor. On this occasion, a dead woman's grandchildren were there and they had all drawn octopuses on the coffin. It was just covered in these joyful, multi-coloured drawings of octopuses."

A colleague asked them, "Did your granny really love octopuses?" And a child said, "No, someone drew an octopus, so then we all drew octopuses."

Poppy gives this as an example of the kind of thing that can happen "if we can shed that sense of what we should be doing" and instead be real and human, and even playful, in a space that is often formal and uptight.

Here, instead of being expected to be quiet and sombre, a group of children were celebrating their grandmother with noise and joy and fun.

MAIA

Connecting artists and communities to spark radical imagination

In 1974, scientists sent an interstellar radio message: one of humankind's first attempts to make contact with other lifeforms. The message contains information about humans, the solar system, DNA, the elements, and could theoretically be picked up by any beings who intercept it. As long as they have a radio.

In 2023, MAIA, a Black and women-led organisation in Birmingham, made a recording at a community event and sent their own message to the stars. Their broadcast will travel through space for millions of years, transmitting information about radical imagination, the transformative power of art, and life in the West Midlands to remote corners of our galaxy and beyond.

MAIA was founded ten years ago by Amahra Spence and Amber Caldwell, two practising artists and cultural workers, in response to the challenging conditions for artists. "We were struggling to sustain a creative career anywhere that wasn't London," says Amber. "So we set up MAIA to address that and build a community of artists and nurture relationships. We wanted to do something positive together: to try and transform things, interrogate things. You can't have that collective energy unless there are relationships to begin with."

MAIA grew out of relationships between artists in Birmingham and, says Amahra, "a shared commitment to mobilise that collective energy into collective action." A decade later it sent a message from its local community into outer space. What happened?

Making space

Space is a big deal for MAIA - and not just the starry kind. Acknowledging the politics of space is key to MAIA's mission to resource a movement of cultural workers engaging in radical imagination.

"In 2015," says Amahra, "we turned our attention to the physical spaces needed to sustain the lives, practices, connections and cultures abundant in our community, and to the question of who has access to spaces to imagine and build, and on what basis."

"Dream work takes a kind of spaciousness that needs attention and resourcing," she continues, "and so many in our community are navigating multiple layers of crisis in the day-to-day."

"Displacement, poverty, housing insecurity, climate breakdown - they stem from a set of interconnected, violently extractive relationships and they affect our capacity to imagine. We're addressing this crisis of relationship collectively and coming together to build spaces rooted in generative relationships and affirming life as the starting point instead."

Bit by bit, MAIA developed from a peer-support arts project to an organisation engaging culture as a strategy for justice and transformation. In 2020, they set up their first prototype space, which they call YARD: a townhouse in Ladywood, where they create resources and programmes that channel the power of the arts and Black imagination, and into which they invite their local community.

Culture as strategy

Art, for MAIA, is one of the most powerful vehicles for forging relationships and unlocking imagination.

"Even now, art is seen as an extra to fluff up a thing," Amber says. "Whereas at MAIA, we look at culture as strategy. Art can be something that can create transformation."

MAIA exists to transform systems and structures in the here and now. It does that through resourcing and mobilising artists and their local community to come together and engage in radical collective imagining.

Their message to space was masterminded by the artist Daniel Oduntan, as part of a recent programme of events called '(Returning to) Black Frequencies'. Before the broadcast, attendees were asked:

> If we had the opportunity to put something out into the universe, what advice or guidance would we give to our future kin?
>
> And what are we taking from our ancestors to try and organise now?

A prompt that deep, and a target as broad as the universe, can spark big ideas. But what was the point of it all? Does the universe really need their advice?

In part, the broadcast was a tribute to Black creators who made their own TV and radio and broadcast it to their communities on pirate frequencies. And in part, it was an audacious, playful and mind-expanding catalyst for collective imagining.

The act of thinking big, and creating something outlandish, is a powerful way to build trusting, meaningful relationships and expand the sense of what it's possible to do and achieve together. More than that, Amahra says, it develops "the personal, structural and sustained capacities needed for transformation, influenced by the methodology of Healing Justice London."

Bricks and mortar

Having a self-sustaining, community-owned space is hugely important for MAIA's work, giving them independence from the funding decisions of the state or corporate bodies. YARD gives them a base for "building up community and enabling people to connect with and support one another," says Laura Holmes, their Finance and HR Lead.

Infrastructure and physical space are intrinsic to MAIA's artistic and relational practice. "It's amazing being in a room when an artist is talking to an elder in the community, or when there are young people coming in and they're having a conversation with a local organisation," says Amber.

"There's a huge need for that communal space to be together and organise together and practise ways of being together." Physical spaces become organic enablers of relationships.

The MAIA team is currently creating ABUELOS, "a relational infrastructure in the form of a hotel," explains Amahra, "that demonstrates what happens if we embed care and radical hospitality in every layer, from its programme and operations, to its architecture and economic model, to its financing and governance."

Over the last 7 years, MAIA have been slowly designing it with their local community and the wider ecosystem around them.

"We'll never just make a beautiful thing and ask people to parachute into it," Amber says. "Everything we are building and designing is informed by our community. We don't have all the answers and we don't want to operate in an extractive way. It's really integral that the people who are going to be part of this are part of the design process, part of the governance, part of the exploration that we're doing."

"There's something about having spaces where people can be together where there is no price tag attached to it," says Laura. "You don't have to pay for coffee, you don't have to buy a ticket. Think about what more becomes possible when artists are gathered together and there are opportunities for people to meet and connect."

"Bricks and mortar are a bed for possibilities," says Amber. "There's work that we do as MAIA but the aim is that the people who come and are part of this then grow their own seeds of possibility."

Art school

MAIA runs regular Art School events, hosted by artists and open to the community. There is a different prompt each time and different suggested outlets for expression.

In a recent Art School, themed around carnival, the prompt was:

> How would we harness our collective energy to transform the streets of Birmingham?
>
> What would we say?
>
> What would we do?

Attendees were invited to respond through a ceremony, a chant or a manual. One group collaborated to create a song with a sound engineer. Another made a 3D block party, incorporating the things they want to see on their streets. Amber made a "manual of how we would harness our collective energy to take over the streets in a way that isn't temporary."

In these sessions, Amber says, "the conversation

about what we're making is almost more important than what is made. That's where the collective imagination happens."

Laura was struck by "the depth of sharing" at these events. "People go off to make a thing in response to a prompt and then come back to talk about it," she says.

"Some people may never have met anybody there before, but the vulnerability, the willingness to share, the depth that conversations get to is remarkable. There's something about the way that MAIA set and hold those spaces that brings out all these common experiences that you wouldn't get from a general chit chat."

The organising starts here

"We've got an expansive idea of what an artist is," says Amber. "All of our events are invitations for people to come in and test out the artist in them. The spaces we create might seem far out and utopian, but once we do that imagining we then bring it down to what we can do right now – and that is where the power is in my eyes."

Outlandish collective imagining can lead to fresher, bolder action in the here and now - and the relationships to underpin that action.

"When we've been in that process together," says Amber, "what we remember is that actually all we need is ourselves. It's not something over there; the organising starts right here in this community, right now. We can't fix the world, but once we have our community and we're in that same mindset, even the small changes are where transformation happens."

Start with the relationships

MAIA's work is deliberately open and emergent and relationality is central to this.

"That's what emergent working has to be," Laura says. "You start with the relationships and build from that."

At a recent residency, 'Accounting and the Black Imagination', the artist Janet Douglas used string to create a vast web symbolising all the new relationships and pathways that emerge through MAIA's work: the snowball effect of one interaction leading to another and another, of alternative possibilities unfolding.

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- What is the significance of physical spaces in this story?
- How do you feel about the role of arts and creativity in relational work?

APPLYING THE LEARNING

- How might relationships enable bold collective imagining in your context?
- What new possibilities might playful, creative practices open up in your relationships?
- How do you think about the connection between relationships and physical space in your context?

Three Community Groups

Tackling local issues by creating spaces and excuses to connect

Relational work happens at all scales. Here are the stories of three grassroots community groups. For these groups, relationships are both the aim and the mechanism of their work. Good relationships alleviate the issues they set out to address.

In all three, the structures are quite loose. There is no pre-determined agenda. They don't try to fix and control the outcomes. From a certain angle, this might look like a flaw. What's striking, though, is how intentional the design of these community groups is.

All three believe in the intrinsic value of creating spaces and reasons for people to gather and form relationships.

Likewise they all describe the detrimental effect of over-structuring the process. Doing so can close down the relational space at the heart of their work.

There is a paradox in these models that is easy to miss. They are intentionally non-intentional and deliberately unstructured. Their agenda is to create spaces without an agenda.

Trust is at the heart of this work: trust that bringing local people together in a carefully created space will lead to good outcomes; trust that people will collectively define the goals that matter to them. Relational work here is open and emergent.

Yet all three groups also feel anxiety about the fact that the systems around them expect more structured approaches and neater evidence of impact. They are pulled between their desire to create powerful, relational spaces and their need to tell a story that outside bodies can easily accept and understand.

Moston Social Clean-Ups

"When you're out doing something good, people literally say: 'nobody ever does anything good in this area,'" says Joe Hartley, who founded Moston Social Clean-Ups with his partner, Shau Mei, and nine-year-old daughter, Freya. "And we'll be like: 'well, we're trying. Fancy a brew?'"

Joe's family decided to start a group to bring people together and promote the integration of different local communities. They focused on litter picking, Joe says, because it's "one of the easiest things to set up and get rolling."

They advertise the clean-ups on Facebook and meet regularly in Moston Peace Gardens, a small green space just off a local high street. "Shau Mei and I will set up the gazebo and a little table," Joe says, "and Freya sorts out the brews and cake."

"We'll lay out all the bags and litter pickers and people will pop in because it looks like something's going on. People can't resist those litter pickers. They'll be like, 'you mean I get to grab things with a grabber? I've always wanted to have a go with one of those.'"

Yet despite the allure of the litter pickers it can be difficult to build trust. People are used to being sold to, surveyed or preached at in public spaces; they can be wary of interacting with strangers. Often if someone stops them, it's because they want something.

"There's a lady who always walks by with a pram," Joe says. "You could tell she was interested but she wouldn't stop. One day she sat on a bench nearby and we went over and offered her a brew. Next time she was like, 'hiya, you okay?' and slowly we could see her opening up."

"We've got no agenda," Joe says, "and that's been fantastic. We have a casual objective to clean up some green spaces, but beyond that we set up a table, have a cup of tea, and generally just try and create good vibes."

Joe mentions the suspicion that some members of the community feel towards top-down projects. "Being grassroots has been key to gaining trust," he says. "There's a bit of distrust when it comes to larger organisations, even when they do good work." Joe and Shau Mei invite other grassroots groups to come to the clean-ups so they can form connections and amplify one another's work.

Although the litter picks are highly sociable, Joe considers himself an introvert – a mode he's found surprisingly well suited to this kind of relational work. "By not wanting to be at the centre," he says, "you leave the space open."

The litter picking is meaningful, but it is also incidental. "Our idea isn't to end litter or make the place 100% tidy," says Joe. Rather the aim is to build local relationships, bridge divides, counter negative rhetoric, and seed positivity in people's minds.

"We've got no plan," Joe says. "We've got no one to feedback to. We're stopping for the winter, but next year we'll be out regularly again. Areas like ours really benefit from that consistency."

Jean's Bothy, Helensburgh

"We try and keep the outside door open at all times," says Katrina Sayer, who runs Jean's Bothy, "so it doesn't create another barrier. It takes a lot of courage for someone to come into a space like this, not knowing who's behind the door."

Jean's Bothy is a community mental health and wellbeing hub in a 1930s bungalow in Helensburgh, a town on the Firth of Clyde. People gather there for coffee, lunch, mindfulness or one of many craft workshops. It's open to anyone from the local area and people have different reasons and motivations for being there. "We have so many pathways in," Katrina says. "Some people are referred in through the mental health team or a GP, some walk in off the street, some come via family or friends."

There's a deliberate diversity to the community at Jean's Bothy. "Within services there are different budgets for learning disabilities and for mental health and this could have limited who could access Jean's bothy," Katrina says. "I was clear that we were going to open this up to the whole community and have anybody join us, no matter whether they have a mental health diagnosis, whether they've been signed off work for a couple of weeks or whether they just feel a bit low. We're open to everyone over the age of sixteen. The only other criterion we have is you have to live in the local area."

"It's really important that there's lots of different people," Katrina says.

"If you bundle together a whole group of people with similar difficulties, yes they can give each other peer support, but they're in a bubble with people with similar experiences. Where's the opportunity to mix with other individuals?"

This kind of mixing is central to the ethos and impact of Jean's Bothy. "People are allowed to be who they are. We have some people who come along to be helpful to others, but of course, through that, they're also helping themselves."

The resistance to neat categories makes Jean's Bothy distinctive and difficult to pin down. It can also create initial confusion for new members who might look around and think: 'this space isn't for me, it's for somebody like that.'

But ultimately, says Katrina, "we have such a varied type of person – all ages, backgrounds, experiences; all different levels of wealth; people who've lived their whole life here and people who've just moved in" – that people can find their place within the bothy's community without feeling like they are being labelled by being there. "None of us who work here wear our badges," says Katrina. "If a delivery person came to the door they would never know who's staff, who's a volunteer, who's a member."

Katrina didn't dream up Jean's Bothy on her own. As a Development Manager at Enable Scotland, she was tasked with developing the service in Helensburgh. "I could have come in and set up a programme that I thought was great," she says, but instead she spent "a good six to eight months just sitting talking to people about what they'd like to see in their local area and what would support their wellbeing."

What emerged was a vision for the bothy: a space that's open to all, where people can form meaningful relationships and "do whatever they need to do to feel better."

"Nothing that happens with us is really done intentionally," Katrina says. "It was very intentional to create a space this free and unintentional."

Members have agency, take decisions and follow their own distinct path. "It doesn't have to be forced', Katrina says, 'it just naturally happens." Through coming along, strengthening their local

support network, learning new skills and even taking on roles and running courses, "people can find themselves doing something or being something before they even realise it."

Make/Shift, Derbyshire

"Rather than think about relationships as something that can help us do a thing, we're thinking what things can help us build relationships," says Rachel Smith, Creative Producer of Make/Shift in Derbyshire.

Make/Shift is an initiative focused on bringing creativity into everyday life. It's still at an early stage, asking questions and finding its place. "We're still figuring out who we need to be to add the most value," says Rachel. "So we're literally just meeting a lot of people, having a lot of conversations, building relationships."

The Make/Shift team spend a day a week in a community centre, listening and getting to know people. This way of working "requires a lot of faith and trust," Rachel says. "Instead of focusing on outputs and projects, we're saying: 'if we behave like this, something good will come out of that.' Right now, it's so uncomfortable that we're not able to talk about a thing."

This uncertainty can be off-putting. Many new organisations rush through the phase of listening and building relationships because it is too uncomfortably indeterminate.

Make/Shift's investigations so far have involved uncovering what's already happening in local communities and mapping the relationships between those people and projects. This process has revealed that there's a need for something to join up existing efforts and help people "see and value what's already there." As such, rather than creating new things, Make/Shift is focusing on "connecting the things that are there."

Make/Shift use making and creativity to forge these connections. "Making together is a tool that brings people together and gets them talking," Rachel says. "Busy hands, loose mouths. If you're doing something practical, conversations can happen differently."

They host monthly socials where they invite different groups to come together.

"There's permission to build relationships without the session being intensely focused on relationships," Rachel says. "The main focus is making a thing and that distracts people and helps them lower their guard. The first session brought together leads from different mental health charities. Very quickly they were into some very deep chats. There wasn't an agenda. They were just sat down twiddling with clay; they weren't even looking at each other."

The challenge, Rachel admits, is asking people from busy services and organisations to come together for an open-ended session. "Some people haven't come," she says, "and just said they're too busy."

But when they do, powerful things can happen. "When the pressure's off, the conversation can be what it needs to be," Rachel says. "There's no sense that at the end of the conversation there has to be a set of outcomes. But sometimes it leads to exciting outcomes anyway and then people have follow-up meetings and new connections get made."

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- What difference are relationships making in these community groups? How might this be understood and articulated?

- What role did the practical activities (making, litter picking etc) play within the relational work here?

- What value might introverted leadership bring to relational ways of working?

APPLYING THE LEARNING

- What could your organisation or community learn from the emergent relational practice in these stories?

- Where and how might you create this kind of open-ended space in your context?

Image source: Jean's Bothy

Barking & Dagenham: Children's Social Services

Returning social care to its radical, relational roots

Radical. Disruptive. Activist. These may not be words we associate with local council employees. And yet, they're central to Barking & Dagenham's relational approach to social care.

"Social work has radical, relational roots," says Russ Bellenie, their Principal Social Worker. "We've lost that. We've become public officials. We need to get back to those roots."

In some ways social work is intrinsically relational.

"Who else goes into your house and asks such intense questions?" Russ asks. But having the right to ask intimate questions is not the same as having a relationship that allows you to "be a catalyst for change in a child's life."

There is a very visible power dynamic to social work. When a social worker visits, families may be frightened, uncomfortable or deferential, hostile, suspicious or withdrawn. They may have no desire to engage. Social workers may find themselves knocking on a closed door.

Trusting relationships matter. They are not just a backdrop to good social work. They are, Russ says, "a mechanism by which change is achieved." They don't just enable other interventions, "the relationship is the intervention."

Thinking like an activist

This is where being an activist comes in. Activists have a sense of agency; they believe they can have an impact in situations where people might give up. Barking & Dagenham ask their social workers to think like activists: to be creative and take responsibility for their practice, to look at each situation with fresh eyes rather than seeking comfort and familiarity in systems and formulae.

But is it realistic to expect social workers to bring an activist approach to a role with such high pressure and high risks?

Barking & Dagenham realise that one of the greatest risks they face is social work conducted without a relational approach. "If you're too bureaucratic and too formulaic," Russ says, "if you ask closed questions and act like a rigid public official, no one is going to work with you."

The pressure, the risks, the workload can lead to unambitious, box-ticking forms of social work - dissatisfying for social workers and families alike. Barking & Dagenham's relational approach is embedded in its new CARES framework, which explains how Children's Social Care practitioners are expected to work with children and families, and what they can expect from the council in return. "It aims to put the heart back into social work practice," says Russ, "and publicise that in Barking & Dagenham, social work cares, is innovative, collaborative, and hopeful."

The focus on relationships is pragmatic as well as radical: better relationships lead to better outcomes, more rewarding work, and more manageable workloads.

Hopeful disruption

How does a new approach like this take root? How do you spread and embed radical, relational practice across the stratified structures of a large council department?

To shift mindsets and support their teams to think and work creatively, Barking & Dagenham have placed artistic and cultural practices at the heart of their work, through the New Town Culture programme: an internal catalyst for disruption and imagination.

New Town Culture trains and supports the council's social workers to take a more creative, relational approach. Central to this is cultivating 'hopeful disruption': the willingness to take risks and disrupt norms in order to create possibilities for meaningful connection.

A big part of a social worker's job is getting information from young people. But as social workers know, sitting in an office, staring at a young person, with a pen poised above a notepad, tends not to be the best way to do that.

In this situation, says Marijke Steedman of New Town Culture, hopeful disruption could take the form of drawing with a young person, or listening to music and taking turns to pick songs.

It could involve a social worker deliberately swearing in a chat with a 17-year-old, to signal that she's lowering the level of formality. It might involve going for a walk with a young person and inviting them to choose the route.

Hopeful disruptions challenge expectations about what can happen in a social work space. They may not look like much, but they "shift some boundaries," says Marijke, "and shift the transactional nature of the situation."

Take listening to songs together. It's not risky, but it enables connection around something personal. A young person can get to know their social worker better. And songs that are important for young people can lead to important stories from their lives.

"Many social workers do this intuitively," Marijke says. The idea of 'hopeful disruption' gives language to an area of relational practice that might otherwise be under-appreciated or left to chance.

Breakthroughs in relationships

Russ gives the example of a social worker who was having a difficult time building a relationship with a young person. They saw that the young person's favourite band was due to play a gig in London and arranged for them to go and see it. Inviting that young person to the gig, sharing that moment of connection, was a breakthrough in that relationship and enabled the work that needed to happen.

This story falls somewhere between heartwarming and alarming. Should every social worker take children to expensive events outside normal working hours? Is that sustainable, affordable, appropriate?

A disruptive, activist approach involves spotting creative opportunities for meaningful engagement in unexpected places.

In this instance, the social worker sensed that this could be a way to build trust with a young person who had strongly resisted the relationship. They did a risk assessment, a special budget was granted, the Head of Service signed off on it. What this situation demonstrates is an ethos where this kind of unexpected move is possible and welcomed.

Sharing power

Taking a radical relational approach doesn't mean there are no boundaries. Ultimately it's about recognising that social work is a collaboration, not a unilateral process.

"Families say what annoys them is social workers being secretive," Russ says. "They turn up to hearings and they don't know what's going to be shared."

Young people and families need to co-produce and own the plan for their situation. Being secretive and non-collaborative is a way for social workers to hold onto power. "You have to name the power as soon as you get there," Russ says, and share it with families, "or the relationship may struggle to get off the ground."

Relational work at scale

How do you build a team of social workers with a relational approach?

Part of it is hiring based on relational values. Part of it is making the approach really explicit – "being granular about things that people aren't always granular about" – and providing tools, training, shadowing, modelling and coaching.

Instead of leaving the skills and techniques of relational work to chance, or treating them as something mysterious, Barking & Dagenham make them visible and explicit, teaching and

sharing them at scale, embedding them into the heart of their practice. Social workers know this is what's expected and what their managers will be looking for.

Forging, and working through, relationships is treated as a learnable, coachable skillset, at which everyone can continuously improve.

Even after putting relationships at the heart of recruitment, training and mentoring, there can still be challenges. Social workers "have to choose to work in this way," Russ says. There are occasions where a social worker doesn't buy in and their work appears "stilted and rigid", potentially leaving families feeling "done to".

Even when there is an organisation-level commitment to transformation, even when leaders have their hands on all the levers, it takes time to overcome entrenched habits and mindsets, and to recalibrate culture, norms, policies and procedures across a system.

Team around the relationship

Barking & Dagenham children's services are a striking example of an institution who have to work at scale (social care accounts for over 75% of the council's budget) but are committed to relating to the many people they support as individuals, not 'cases'.

"No one wants to be a case," says Russ. "Language like that can shut down relationships." The care Barking & Dagenham take over their language, another major feature of their CARES framework, is indicative of the way their relational approach flows through their formal structures. Social workers don't arrange for children to 'have contact with their family',

they arrange 'family time'. After a visit, instead of sending 'case notes' describing what they saw, social workers write a letter to the family. When social workers conclude their work with a family they no longer talk about 'closures'. "Now we call it a goodbye," Russ says. "A closure feels so formal and cold."

Institutions are often associated with coldness and formality. Barking & Dagenham are trying to disrupt these expectations. "Have you heard of team around the child?" Russ asks. "Instead we talk about team around the relationship."

It's a small change of wording, but it conjures a completely different image. It's another step towards making a large social institution radically relational.

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- What difference does investing in relationships make in this example?
- What barriers and challenges need navigating to work relationally in a statutory context?
- What does relational safeguarding look like?

APPLYING THE LEARNING

- What form could 'hopeful disruption' take in your context?
- What measures could you put in place to ensure that relational work is done safely?

NHS Palliative Care

Pursuing results through relationships in a large, complex system

The people I meet at the hospice will say: "It's the first time someone's listened to me as a person," says Saskie Dorman, a Palliative Care Consultant in the South West of England. "I find that so sad. It shouldn't wait until the last three weeks of someone's life until someone can feel they're seen as a person."

Sarah Yardley, a Palliative Care Consultant in London, makes a similar point: "People are often pushed to communicate by transmitting information and hoping it's received, or repeatedly checking and chasing to see if it's been received, when actually real-time dialogue would be so much better. There are so many situations where you can't help thinking: 'if only there'd been an actual conversation.'"

Relationships at scale

Sarah and Saskie both work in the National Health Service, a vast, complex system that is under considerable strain: squeezed finances, staff shortages, growing waiting lists.

What might it mean to put relationships first in a sprawling system like the NHS, made up of so many different organisations, each with their own particular culture?

Is it possible to prioritise relationships in such an over-stretched institution? How might relational work look and feel at this scale?

It might be tempting to think that a huge multifaceted entity like the NHS simply isn't suited to relational ways of working, that only strict processes and protocols could possibly allow it to function. But although scale and complexity might add challenges to relational work, Sarah cautions against thinking of the healthcare system as something unavoidably rigid and remote: "Systems don't appear out of thin air," she says. "People create the system, and people can make or break it." The NHS is made up of people and the relationships between them.

Small acts of resistance

In recent decades, says Sarah, there has been an emphasis on "trying to create systems that don't rely on people knowing each other," deliberately designing relationships out. "If you strip away to a functional, instrumental way of doing things, what's lost?" Sarah asks. "Stuff won't happen as it should without them."

Many healthcare staff agree and attempt to prioritise relationships, even as the space to do so shrinks around them.

"My working theory of the current situation," says Sarah, "is that there are quite a lot of people engaging in 'small acts of resistance': individuals or teams who refuse to stop working relationally. They're doing work to mitigate the fact that the structural stuff doesn't work, perhaps can't work." Rather than their acts of resistance being perceived as such, however, their additional efforts are simply reabsorbed by the system, coded as acts of generosity: "A lot of that gets phrased as going the extra mile," Sarah says.

Sarah points out how strange it is that putting relationships at the heart of healthcare has come to seem radical. "I don't think it should be radical," she says. "It sort of disappoints me if it is." And yet, in the NHS, "professionals feel they need permission to work relationally." Prioritising relationships has become counter-cultural.

To be relational is to be responsive to the person in front of you, not tied to a rigid process. But, Sarah says, despite rhetoric in the NHS about moving away from a blame culture, "when something goes wrong, we create more rules: it's like the box you're working in gets smaller and smaller and smaller."

The stuff that happens between people

Sarah and Saskie are examples of healthcare professionals committed to working relationally and taking structured, deliberate action to demonstrate the impact and importance of relationships in healthcare. It is perhaps no accident that they both work in Palliative Care, a field of medicine where dialogue and relational working are more prevalent.

Palliative Care involves providing care - physical, social, psychological and spiritual - for people with a serious illness that will not respond to curative treatment. It is "about understanding what matters to people," says Saskie, "helping them and those around them to understand and anticipate what may happen in the time they have left." It is not always about end-of-life care, but this is a significant

dimension of the work.

Sarah spends part of her time working in hospital and the rest researching "the role of relationships and connections in healthcare – the stuff that actually happens between people – at all levels, in all directions, across different groups and different professions."

"I like the intensity of deep and meaningful conversations and connections," says Sarah. "Those traits suit palliative care: our work is about in-depth work with a smaller volume of people."

The gap between intentions and outcomes

Palliative Care is a valuable place to examine relationships in healthcare because it's an area where the consequences of rigid, non-relational approaches can be particularly stark, at the personal and systemic level.

For individuals, it can mean discomfort and distress. For the system, it can mean increased costs, workload and strain. "Of all our lifetime healthcare costs," says Saskie, "a significant proportion is spent in the last year of our lives." It is a crucial, consequential phase for many reasons. And "for each person," says Sarah, "there is only one chance to get it right."

Based at an NHS hospice, Saskie integrates relational practice into her work and has been testing new ways of doing this with colleagues locally and across the South West of England.

"A contradiction at the heart of the current system is that staff have very good intentions," says Saskie, "but those good intentions don't always translate to good outcomes. People and families often have experiences that no one would wish for towards the end of life."

The deprioritisation of relational work in the

NHS is, in part, a product of structural issues, like "the way care is contracted and commissioned," says Saskie, "which tends to make it focused on ticking the box, rather than meeting people where they are. Regulation is another significant factor. Fear of judgement can lead organisations and individuals to put policies and protocols ahead of doing what really matters."

Ticking boxes

Saskie gives the example of Barbara, a 90-year-old woman, who was in hospital, nearing the end of her life. Procedure dictated that a photo should be taken of a pressure sore on her bottom, so she was hoisted, semi-conscious from her bed. Within two hours, Barbara had died.

A relational rather than formulaic approach might have meant Barbara having "the chance to stay at home on the last day of her life," Saskie says, "and having her husband with her when she died. It might have meant being able to rest in comfort rather than being hoisted to have a photo of her pressure sore – recognising that her dignity and comfort were more important than following the standard protocol."

As well as questioning the suitability of that decision, Saskie asks this disarming question: "When looking through healthcare records, why is it more normal to see photos of pressure ulcers on backsides than photos of faces? It was really easy to find Barbara's blood pressure and test results. It took us a lot longer to get an idea of who she was."

"It was an epiphany," says Saskie, "a painful one. I thought: I can't carry on just doing what I'm doing in this system."

Saskie tells other stories about people she has cared for in the hospice who have experienced exhausting journeys through the health service, struggling to be heard, having the same conversation on loop with different professionals.

"Those encounters made me think: just providing a beautiful last few days is not going

to change this tick-boxy, process-driven healthcare," says Saskie. "It doesn't change the fact that people go back and forth for months and end up in these distressing situations."

"The transactional, protocol-driven approach doesn't really work: it's expensive and it makes people sick."

Sarah echoes Saskie's conclusion. "Instead of trying to create systems that don't rely on people knowing each other," she says, "our energies should be focused on creating systems that facilitate relational working."

A longer conversation

As an everyday example of the difference a relational approach can make, Sarah describes an interaction with someone who refused to be discharged from hospital.

"In hospital one day I was asked to go to see a man, a patient," she says. "He was there with his son. The message said that we'd done everything we could in the hospital; it was time for him to go home, but he didn't want to leave."

"I walked up and his son said: 'are you going to be another person who says he has to go home?' So I said: 'why don't you tell me what the two of you want to talk about?'"

"Then this story unfolds. Basically, the man has a medical problem that means that, for the last three months, he's been told he could have a major bleed and die at any moment. But now the hospital teams have got to the point where they have no more interventional treatment to offer, so they've said it's time to go home. Perfectly understandably, though, he's saying: 'I'd like to spend the rest of my life in hospital, because you said I could bleed to death at any moment.' So we've created the problem, fixing this idea in his mind, then asking him to leave."

"Just by being there and listening and giving them the power, this all came out, in the way it hadn't in the routine process of: 'now you've got to leave the hospital.' We went on to have a much longer conversation, talking about quality of life and what would happen in hospital if he had a bleed and how he could be looked after at home and how we could set things up so that, you know, he didn't have a painful, terrible death."

"And in the end, we worked something out together. The son and his Dad had a better understanding of why people were saying what they were saying and the difference between hospital and home. We reached a position where we could move forwards and decisions could be made."

"His son said to me at the end: 'I hope you didn't think I was being too pushy or aggressive.' And I said: 'this is your Dad. Your role is to advocate for him, to fight for what he wants. My role is to be the doctor. You and I have to work within the parameters of our roles, but we can do it in a way that recognises each other as people and that this system is far from perfect.'"

Investing to save later

A criticism of Sarah's story might be that healthcare professionals cannot always afford to take an hour to have an extended conversation. Sarah points out, though, that this can be a wrong-headed way to think about time in a large healthcare system. "There'd been at least six ten-minute conversations already," she says. "If we viewed time collectively in healthcare, rather than individually, we'd see that taking more time now means less time later."

Everyone trying to do things as quickly as possible can lead to more time being spent overall.

"The more individually you see yourself as a resource, the more warped that gets," Sarah says.

Sarah talks about how this approach creates 'part-system efficiency' but not 'whole-system effectiveness'.

Everyone cuts and squeezes where they can, making their piece of the process seem more efficient, but the net effect is to increase demand on the system as a whole.

Prioritising relationships, Sarah suggests, involves healthcare professionals 'investing to save later', asking themselves: 'are we investing time to get things right first time?' To do this, professionals "need to know they won't be penalised for not following all the 'rules' when the right thing to do is different to the norm."

"Within policy rhetoric, there are shifts in the language," says Sarah, "from patient-centred care to person-centred care. And there's a growing emphasis on individualised or personalised care. But, at the same time, professionals are still judged on providing equality, rather than equity in healthcare."

"Equity is not created through structural standardisation," she continues. "Instead we should aim for equality of access to relational working and care so everyone has the same opportunities to get what they need."

Measuring preventative benefits

What was the value of Sarah's relational interaction with this father and son? "It's a lot easier to measure cost than value," says Sarah. "I can say that the interaction felt good, as can

the patient and his son. We can say he left the hospital, which is what everyone wanted. But the actual value still feels intangible."

"With a lot of relational working," Sarah continues, "people come back and say: 'how will we measure that it's a good use of resource?' And it's tricky. There's something seductive about costing everything. It can be good for some things, but it's a bit mechanical, a bit robotic."

It's difficult to measure time not wasted, money not spent, people not feeling disempowered, problems not recurring, issues not getting worse – even if these might be precisely the outcomes we want.

One way of framing these outcomes would be to think of them as the 'preventative benefits' of relationships. "We're very comfortable with the idea of preventative treatment for physical things, like medicines to stop things worsening or recurring," says Sarah. "We're not at all good at prevention when it comes to the more human elements of healthcare, like talking with someone in a healthcare setting."

Results through relationships

Working with colleagues in the South West, Saskie developed an initiative called Results Through Relationships to improve the quality of end-of-life care.

"If the opportunity had arisen three years earlier," Saskie says, "it would have been more of a traditional, standard project: deciding on an evidence-based intervention to improve care, implementing it and evaluating the outcomes. Instead we thought: 'let's look at things differently and really think about what this means to people.'"

As it is, Results Through Relationships "recognises that healthy outcomes are created collaboratively," says Saskie.

"None of us is an island. In any network, the nature and strength of relationships between individuals is at least as important as the nature of the individuals themselves."

"Enabling effective care becomes less about implementing interventions, and more about creating conditions in which mutuality and collaborative learning can thrive."

The 'results' part of the title is important – and runs counter to the idea that relationships are soft or supplementary. "This isn't about teams getting together, having a nice time and eating cake," says Saskie. "It's doing something meaningful, purposeful and effective." People focused on results like finances and hospital admissions are more likely to be won over, she suggests, if they can see that "healthy relationships enable those results to happen."

Doing what matters

The essence of Results Through Relationships is 'doing what matters' rather than 'doing what's expected'. Saskie describes the contrast bluntly:

"Care that focuses on tasks – doing what's expected rather than what matters – costs more overall and tends towards outcomes that no one wants."

The concept sounds simple and the advice for practitioners can be summarised as: "Ask what matters, listen to what matters and do what matters." But while this may sound

straightforward, the implications for healthcare professionals are enormous. Doing what matters can involve significant shifts in perspective, such as considering people in context rather than treating them as isolated individuals, highlighting what matters and what's strong, not just what's wrong, and anticipating rather than reacting to a crisis.

Through these and other shifts, a richer, more accurate picture of people's hopes and needs can emerge, providing a better foundation to make decisions. Out of 'fog' and 'friction' comes 'fellowship' and a 'focus on what matters'. "Often," says Saskie, "what matters to people can be summarised relatively simply."

Bespoke by default

Fundamentally, taking a relational approach in a complex system like the NHS requires healthcare professionals to embrace the fact that they're dealing with individuals with different needs, desires and circumstances, which may require different responses.

A relational response can embrace the variety of real-life situations.

Inspired by Mark Smith, Director of Public Service Reform at Gateshead Council, Saskie suggests we take a 'bespoke-by-default' approach in healthcare rather than inventing "protocols to tell us what to do in every circumstance."

This does not mean creating an unpredictable free-for-all. Rather it means expecting healthcare professionals to adapt their approach from one situation to the next and designing the surrounding structures to enable this. Being bespoke-by-default is another form of consistency: being consistently responsive rather than consistently rigid.

This can be satisfying for staff, who may feel

the relief and excitement of suddenly looking through the right end of the telescope. But it can also be uncomfortable, requiring them to let go of entrenched habits and longstanding professional identities. "Challenging long standing worldviews can feel threatening or scary," says Saskie.

Taking a bespoke-by-default approach is likely to involve trusting, training and treating colleagues differently, so that they are equipped to listen, form relationships and use their professional judgement to make the best decision with individuals, families and colleagues first time.

The benefits of this approach could be substantial: more effective, streamlined healthcare for individuals; more effective support and involvement from families; richer, more rewarding work for staff; stronger relationships and less burnout across teams; and lower pressure on the system as a whole.

Weighing risks

A bespoke-by-default approach also involves accepting that people will weigh risks differently.

"Prioritising the needs and choices of individuals or groups can create tensions with structural safety standards," says Sarah. And yet, these standards themselves are skewed, tending to weigh 'techno-clinical' risks far more highly than 'psychological, social or spiritual' risks. Even the language of risk can cloud judgement in some situations. "What would happen," asks Sarah, "if we didn't refer to choices as risks?"

Giving people more agency enables them to weigh their priorities holistically and make the choices that matter most to them.

Changing the everyday stuff

What would it take to put relationships first in the NHS? Both Sarah and Saskie mention small things healthcare professionals can do immediately to work more relationally.

"Mostly, when we talk about relational work, we're talking about different speech and action, not more," says Sarah. "It doesn't have to take longer to behave relationally. It doesn't take longer to say, 'what do I need to know in order to best help you?' than to say, 'what's wrong, why have you come here today?' As an extreme example, emergency departments deal with large volumes of people and often focus on crisis management. But you can still work relationally in A&E if you've been helped to develop the right skills and are willing to try behaving differently."

"There are other relational things you can do that don't take any time at all," she continues, "like learning your colleagues' names, viewing everyone you interact with as a colleague. My husband's a surgeon. He deals with a lot of emergency situations, but he still bothers to read and remember the theatre cleaner's name badge and say hello to them in the morning."

Saskie echoes this view. "It's about using the times and spaces we already have, changing some of the everyday stuff," she says. "Every NHS organisation has lots of meetings – it's about repurposing them, showing up in different ways. If enough of us do that, it can help to shift the culture."

"Even sending emails," she continues, "it's thinking of the person on the other end of it, trying to retain some humanity. And trying not to use email as much as conversations."

Although wider conditions have a big impact on the scope for relational work, Saskie is keen to emphasise that individuals in the healthcare system have agency.

"Everyone's got some power and agency to create behavioural and cultural change," she says. "When we talk about the whole system needing to change that can feel overwhelming and disempowering. We might as well not even try! But focusing on what we can do enables change to start. And since behaviour is reciprocal, small changes can have profound ripple effects."

Rolling in

Although few in healthcare are anti-relationships in principle, there can be resistance to prioritising them in practice. "Often when you're trying to do something," says Sarah, "people say: 'you don't understand, that's not how it works in the real world.'"

For this reason, Sarah researches, and participates in, relational practice on the ground. "I want to say: 'let's look at how it works in the real world and then go back the other way.'"

That's exactly what Saskie and her colleagues are doing in her locality: gradually changing practice and demonstrating the impact of relational work. But how can this kind of ground-up change spread and scale across a large system?

Rather than a 'roll out', Saskie proposes a 'roll in', in which other professionals proactively try a new practice, and adapt it for their context, rather than having it imposed on them from above. "You can't just say: 'this is how you do it, just do this'," Saskie says. "Context really matters." Through this form of careful horizontal transfer and collaborative learning, relational approaches can "become normal practice in more places."

Saskie is part of an End of Life Network, hosted by NHS England - South West, which shares and spreads relational ways of working. The network has grown from 30 to 600 practitioners over the last four years.

"There's still a long way to go," says Saskie, "it's not all sorted. But it definitely feels like there's momentum, a shift, a groundswell of this way of working."

QUESTIONS FOR REFLECTION

DIGGING DEEPER

- What does this story suggest about the distinct challenges of relational working in large organisations or systems?

- How might spending time on relationships actually save time and money in this example?

- How might a 'roll in', rather than 'roll out', support relational practice to scale here?

APPLYING THE LEARNING

- How could focusing on 'what matters' rather than 'what's expected' affect relational work in your context?

- How might a bespoke-by-default approach manifest in your context?

A GROWING FIELD

Mother Teresa wrote, *"I alone cannot change the world, but I can cast a stone across the waters to create many ripples."* Many stones have already been cast. The ripples are growing momentum. The future is already here.

Many more examples of relationship-centred practice can be found via the Relationships Map: a growing repository of the many brilliant individuals and organisations putting relationships first in the work that they do.

Please put your story on the Map, find kindred spirits and help to spread the word.

relationshipsproject.org/the-relationships-map

Examples from further afield

▪ **Ubuntu Leaders Academy, Portugal and beyond**
"The Ubuntu concept tells us that 'I am because you are'"

▪ **Orewa - Auckland, New Zealand**
"There can be no community without sound relationships"

▪ **The Equity Practice - Dallas TX, USA**
"Reciprocal relationships are the gateway to disrupting injustice"

▪ **National and Kapodistrian University, Greece**
"Without relational connections education cannot achieve its goals and inspire people"

▪ **Onerahi - Whangarei, New Zealand**
"The future for humanity depends on developing horizontal egalitarian relationships"

Relationship-Centred Practice around the UK

● On the Relationships Map
In the Case Maker

Scottish Refugee Council
"Relationships are at the heart of our work"

Your Life Your Story CIC
"Relationships support the community, heal wounds and amplify the collective voice"

Northumbria University
"Good relationships are critical in enabling anything over superficial and short term collaboration"

TLC: Talk, Listen, Change
"Every child and adult needs to be surrounded by a circle of safe, healthy and happy relationships"

Dwellbeing Shieldfield
"Good relationships allow us to draw on the assets and skills within our community"

Jean's Bothy **7**

Gateshead Community Bridge Builders **2**

Better Connect
"Partnership working means sustaining harmonious relationships and these facilitate social change"

Relate NI
"Healthy relationships can help us weather the storms of poverty, mental and physical health issues, employment difficulties, bereavement, caring responsibilities and whatever else life has to throw at us"

7 Moston Social Clean-Ups

4 Xenia

Brent Care Journeys
"Relationships are the bedrock from which capability can be invested and power can be redistributed"

7 Make/Shift

6 MAIA

1 Grapevine

Magpie Project
"Relationships are the number one tool in creating safety and bearing witness"

CoLab Dudley
"Relationships create the conditions for people in Dudley to reveal and fulfil their individual and collective potential"

Xenia **4**

Poppy's Funerals **5**

Switchback **3**

8 Barking & Dagenham Children's Social Services

The Social Innovation Partnership
"Any good co-design, and any meaningful research, depends on good relationships"

DEEP Cymru
"All good support is founded in and reflects meaningful and rewarding relationships"

Made Open
"Stronger connections give us the power to confront our challenges head on"

Only Connect
"Relationships determine the quality of collaborative learning and the effectiveness of social systems"

On the Map you'll also meet:

▪ A farm helping vulnerable children develop trusting relationships

▪ A palliative care consultant exploring the role of relationships in healthcare

▪ An integrated care system putting relationships first in order to solve complex challenges

▪ A support service building trusting relationships with members of the community to help them identify their goals and support needs

▪ A network of networks building a strong, sustainable civil society by facilitating the development of relationships

▪ A community of voluntary organisations helping to end the cliff edge of childrens' care through a focus on relationships

▪ A charity putting relationships first to create a safe and fun place for mums and pre-school children in insecure accommodation

▪ A research fellow exploring relationships between old adults and their care workers at the end of life

▪ A charity helping businesses see themselves as a series of relationships, not a series of contracts

▪ An alliance redistributing power by investing in relationships

▪ A movement of people across the UK who believe that the answer to our problems is each other

▪ A public space platform facilitating chance encounters

▪ A national campaign turning poverty and isolation into warmth and connection

▪ A funder working relationally with grantees and residents

▪ An organisation nurturing meaningful relationships between care experienced individuals and the organisations who are part of their lives

▪ A charity providing sustained, unconditional, relational support to families facing serious adversity

And many more...

SUMMARY

Better relationships, better outcomes. We hope, having engaged with the statistics and stories in this Case Maker, that you're convinced that everything works better when relationships are put first.

And we hope that you feel better equipped to make the case to your colleagues, board members and commissioners that relationship-centred practice results in...

OUTCOMES THAT MATTER

Relationships can get to the outcomes that really matter to those involved, responding to specific needs and interests

ENDURING CHANGE

Investing in relationships helps us to go beyond quick fixes and short-term relief and realise change that lasts

GREATER RESILIENCE

Warm webs of supportive relationships are indispensable when challenges arise, boosting resilience in the face of adversity

COST SAVINGS

Networks of good relationships reduce reliance on responsive services by giving us somewhere to turn to when we need help

ENJOYMENT AND RETENTION

Working relationally is more interesting, rewarding and values-aligned for the people doing it

EFFECTIVE COLLABORATION

Partnerships that are built on trust and understanding go further and deeper

BELONGING AND PRIDE

Feeling connected to those around us helps us feel rooted and invested in our local area

OUR STORY AND YOUR STORY

One of the best things about talking about relationships is that everyone has a story to tell. We remember the relationships that have mattered to us, but as Professor Waldinger says, "(this isn't) a touchy-feely idea. It is hard fact." The global evidence reinforces the anecdotal.

The service manager, policy maker, commissioner, political leader invariably is, or has been, a patient, a service user, a carer, a parent. We know what works for us and for others we love.

We may not realise that our lived experience rhymes so perfectly with the hard numbers: Everything works better when relationships work well.

We think that the stories told in this Case Maker are good stories, full of hope and kindness and a special kind of 'can-do' spirit, but they are not unique.

All over the UK and indeed further afield, relational practice is gathering momentum.

The contexts are diverse, as they are here in the Case Maker, but the driving principles are consistent.

It doesn't need to be about spending more money. It is about spending money differently, often, we suggest, more efficiently.

It is not about abandoning fundamental objectives. It is about a different way of working, often, we suggest, a more effective one.

And it is not a journey into the unknown. We know it can be done because across the UK we are doing it already, although often at the margins.

We need to do it more, common practice as well as common sense.

Things you can do:

Spread the word

Putting relationships first is common sense. It should be common practice – a generational shift in policy, systems and practice, that will only happen if we make it happen together. Please share this Case Maker with those around you. You might focus in on the stories that feel particularly relevant and reflect, together, on the prompt questions.
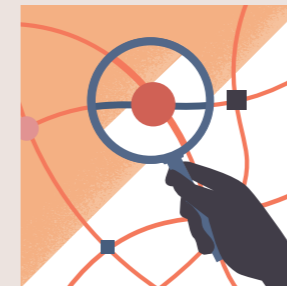
Make your own case

In this Case Maker, we've shared a myriad of reasons why relationships matter. We've created a DIY Case Maker to help you pick and mix the statistics and stories included here, and combine them with your own evidence and anecdotes to create a compelling narrative for why relationships matter in your place.

Join the Map

On the Relationships Map we have begun to plot the organisations and individuals who are putting relationships first. The Map is more than a directory. It's a meeting place; a space for finding one another and sharing ideas and resources. Please put your story on the Map, find kindred spirits and help to spread the word.

Share and learn

We are enthusiastic about relational practice because we know that it works, but we are not starry eyed. Change, no matter how promising, is always challenging. Our emerging Pattern Library, rooted in practical experience, is designed to provide support. Take a look and contribute your hard-earned wisdom.
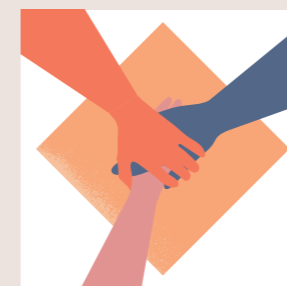
Join a Practitioner Community

If you sometimes feel like you're ploughing a lone furrow, our practitioner communities might offer some support. Serving and connecting the people who are putting relationships first, we're building out the existing patchwork of practitioner communities. Tell us about the support you're seeking or join an existing group.

Stay in touch

We would love for you to be involved in our deeply collaborative work, and welcome you to get in touch.

Whether you have ideas, critiques, resources or something else to offer, we'd love to hear from you.

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- **Gateshead Community Bridgebuilders**
  http://www.gatesheadcommunitybridgebuilders.co.uk
- **Bensham Grove Community Centre**
  http://www.benshamgrove.org.uk
- **Switchback**
  http://www.switchback.org.uk
- **Xenia**
  http://www.xenia.org.uk
- **Poppy's Funerals**
  http://www.poppysfunerals.co.uk
- **MAIA**
  http://www.maiagroup.co
- **Moston Social Clean-Ups**
  http://www.facebook.com/groups/mostonsocialcleanups
- **Jean's Bothy**
  http://www.jeansbothy.org
- **Make/Shift**
  http://www.wearemakeshift.uk
- **Barking & Dagenham Children's Social Care**
  http://www.lbbd.gov.uk/children-young-people-and-families
- **New Town Culture**
  http://www.newtownculture.org
- **The NHS**