

time to change

let's end mental health discrimination



SPA
Future
Thinking

Evaluation of Richmond Fellowship's 'Face 2 Face' project

March 2015

Funded by



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→ What is Time to Change?

Time to Change

Time to Change is England's biggest programme to reduce mental health-related stigma and discrimination. The programme is run by the charities Mind and Rethink Mental Illness, and funded by the Department of Health, Comic Relief and the Big Lottery Fund.

The national aims of the programme are:

- Improve public attitudes towards people with mental health problems by 5%;
- Reduce discrimination by 5%;
- Reduce the number of areas of life in which people experience discrimination;
- Increase the confidence and ability of people with mental health problems to address discrimination;
- Improve the social capital of people with mental health problems.

Time to Change is based on robust evidence from other international campaigns to show what works to change public attitudes and behaviours. Research shows that people's attitudes towards people with mental health problems are more likely to improve when they have the opportunity to learn, in the right context, from someone with personal experience of them. Time to Change calls this social contact.

For more information about Time to Change, please refer to www.time-to-change.org.uk



About the Time to Change grant fund

Grant Fund

Richmond Fellowship was funded through the Time to Change grant fund to deliver the 'Face 2 Face' project from July 2012 to March 2013.

The grant fund ran from 2012 to 2015 and funded 65 community projects across England. All the projects were led by people with experience of mental health problems. Volunteers and staff shared their experiences with the public in informal one-to-one conversations in order to change attitudes towards people with mental health problems.

All grant projects were funded to deliver the following outcomes:

- **Outcome 1:** Improve public attitudes and behaviour towards mental health issues which lead to more people (children and young people and adults) facing less discrimination in relation to their mental health
- **Outcome 2:** Improve the confidence and ability of people (children and young people and adults) with mental health problems to take action to tackle stigma and discrimination
- **Outcome 3:** Improve the confidence of people (children and young people and adults) with mental health problems to engage in and contribute to the life of their community

In total more than two million pounds was awarded to organisations and groups. Of this, 33% of the funding was allocated to projects led by and reaching people from Black and Minority Ethnic communities.

To find out more about the grant fund please visit www.time-to-change.org.uk/grants



How was the project evaluated?

As part of the grant fund, projects were required to evaluate the impact of their project on their volunteers with lived experience of mental health problems and audience members using the tools designed by Time to Change. SPA Future Thinking, the market research agency hired to carry out the evaluation of Time to Change's activities, and the Time to Change evaluation team worked closely with each grant project to measure the effectiveness of all projects.

An audience survey was carried out with the members of the public engaged in conversations about mental health. Volunteers with lived experience of mental health problems and steering group members involved in each grant project were also surveyed to measure changes in confidence.

Grant funded projects were given the choice of undertaking the evaluation either by collecting email addresses from their volunteers and audience members or by obtaining completed paper surveys face-to-face or a combination of both. The 'Richmond Fellowship' project chose a combination of email collection and paper completions for both the volunteer and audience evaluation.

At the end of each project, project coordinators were asked to reflect on the key findings from the surveys with volunteers and audience members, and provide further insight into the successes and learning points of the project.



What was measured?

Audience attitudes

To show the impact that grant funded projects had on the general public, the audience evaluation data collected by each project was compared against a baseline survey conducted among the general public not exposed to social contact. To create this baseline, 1,759 adults were asked the same attitude questions in a survey in March 2014. This was on an 'omnibus' survey by Ipsos MORI, where a representative sample of the general public were canvassed about attitudes to mental health, without having been exposed to any social contact event. The grant funded projects' audiences were then asked the same questions after attending an event, and the difference in answers is taken to reflect the likely change in attitudes as a result of having social contact.

Volunteer empowerment and social capital

Grant funded projects were user-run with volunteers with lived experience of mental health problems participating in the management of projects as well as delivery.

To demonstrate the impact that grant funded projects had on their volunteers' confidence to tackle discrimination, volunteers and steering group members were asked to rate changes in their feelings of confidence in empowerment and social capital. The empowerment questions consisted of nine statements, which were developed in consultation with people with lived experience and other stakeholders, including an academic (Dr Fiona Warner-Gail). The statements were adapted from work on youth empowerment ('Tackling Stigma', Preece, D., Kell, E. and Midgen, T. (2011), Warwickshire Educational Psychology Service) and incorporate Time To Change's focus on talking about mental health and challenging stigma and discrimination. The social capital questions consisted of 12 statements on social capital, drawn from 'Social Capital Indicators Review' (September 2011, Foxton, L.F. and Jones, R., Office for National Statistics). The statements were developed in consultation with people with lived experience and other stakeholders, including Dr Fiona Warner-Gail.



What targets did the project reach?

The 'Face 2 Face' project was an 9 month programme funded through Time to Change, which aimed to tackle mental health stigma and discrimination by generating conversations between volunteers with experience of mental health problems and members of the public

Project performance vs targets

The project took the form of a varied series of art events around Dorset, including Boscombe Carnival, Sandbanks, Compton Acres, Bridport Hat Fair, Waterfest, Sturminster Cheese Festival, Beach Walk, Dorset Ringwood School, Big Draw, Health and Well being Fair. These events engaged directly with the public using interactive art activities (and free cake) to attract people.

	Project targets	Total achieved
Social contacts	1000	1200
Lived experience volunteers leading the project (e.g. steering group)	4	6
Lived experience volunteers involved in the project (e.g. social contact)	26	20

→ What are the highlights from audience and volunteer evaluation?

Impact on audience members

Audience attitudes were positively impacted by the project – for example, the number of audience members agreeing with the statement “It’s easier to talk to people about their mental health problems than most people expect” was 23 percentage points higher than the general public baseline. Furthermore, there was a greater proportion of audience members strongly agreeing with all the statements, when compared against the general public.

More than 8 out of 10 audience members would be more willing to both challenge a person if they saw them doing something unfair to someone with mental health problems, and also speak more openly about their own mental health problems. With the significant proportion of those being “a lot more willing” for both statements, audience empowerment was certainly achieved.

90% of audience members found the project effective in demonstrating how stigma and discrimination might affect people with mental health problems. Also, 65% of audience members stated the project was very effective in conveying that mental health problems are not a sign of weakness.

Impact on volunteers

Volunteer empowerment was overall positively affected by the project, with the large majority of volunteers reporting an increase in their confidence as a result of having taken part in the project. The project was especially successful in increasing confidence to “Talk about mental health with friends/ family” and “Speak up for your own rights”.

On average, volunteer confidence in terms of volunteer social capital also increased as a result of the project. A greater number of volunteers than average reported no change in confidence when it comes to “Trust people who are not like you” and “Become involved in volunteering” – these may be areas the project needs to improve.



What did the project coordinator feed back?

The project coordinator was given the opportunity to provide feedback on the following areas:

Impact on volunteers

These events engaged directly with the public using interactive art activities (and free cake) to attract people. This created a positive, exciting atmosphere that led to many conversations with our trained volunteers. The fact that our mental health volunteers were successfully running the art events and interacting with the public ensured that we created awareness of our messages in a very upbeat way.

Impact on audience

We received overwhelmingly positive feedback but very few negative reactions. The only negative reaction we had was one older man at the Holnest event who expressed his negative belief in people with mental health problems. The volunteers were brilliant with him and managed to have a conversation where, at the end, he softened his stance.

Some comments taken from Audience surveys include:

“I liked how open everyone was, and how welcomed I felt. I felt I could talk about issues I have experienced.”

“Fun. Friendly welcome.”

“Interaction, positive energy – working together.”

“Bringing everything into the open and sharing with family”

“Anyone could do it whatever your age. It wasn't in your face about informing.”

“The friendliness and the knowledge of the volunteers and the effort it took her to come out and help others.”

“Impressed about how open to talk about our problems.”

“Good for children to be aware and involved with it.”

“Freedom and Fun. Creativity.”

“Accessible to all.”

“Children welcome”

“Really nice to speak to someone so well informed and easy to speak to.”

“Creative and fun and out in the open in the fresh air – great event



What did the project coordinator feed back?

Learning points

Maintaining regular contact by phone/text between meetings helps to keep engagement. An Informal network was started up which helped with volunteers supporting each other.

The steering group has been a source of ideas and planning and a forum for feeding back and generating solutions to problems that have arisen. Having a volunteer at each meeting has been very helpful in hearing from them directly rather than through the co-ordinator.

Maintaining ongoing volunteer recruitment is time consuming but necessary. We suffered from only having one Project Co-ordinator for the last 6 months of the project so less time could be given to this. We used media to try and recruit volunteers for F2F going forward.

As well as formal training in techniques and best practise, induction goes on at events by new people shadowing and being supported by those that have had more experience. Having a friendly and welcoming group helps with this.

We need to constantly identify and train new Facebook people. Our Facebook page has seen a decrease in activity, which reflects that fact that volunteers are losing energy and motivation as the project draws to a close. Zap arts could have done with its own Facebook page as a way of documenting weekly activity.



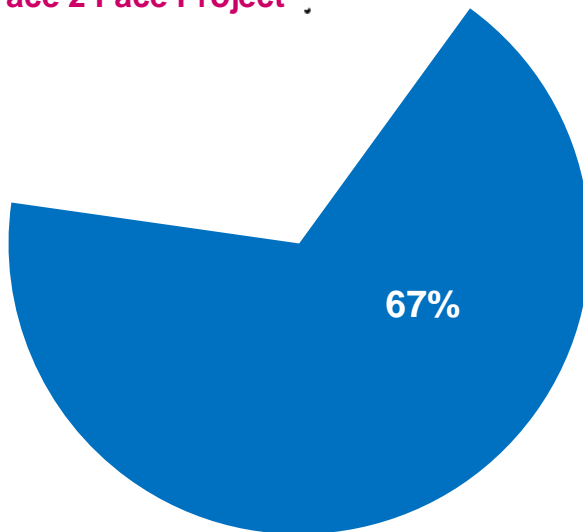
Audience

→ How did audience attitudes change? - A summary

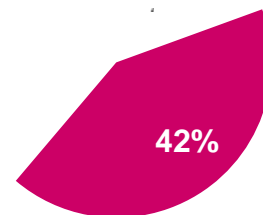
Audience members were asked how much would they agree/disagree with the following:

- Mental health problems are common;
- People with mental health problems can face stigma and discrimination
- Sometimes the hardest part of dealing with mental health problems is facing stigma from others;
- It's easier to talk to people about their mental health problems that most people expect

Face 2 Face Project



General public 2014 baseline



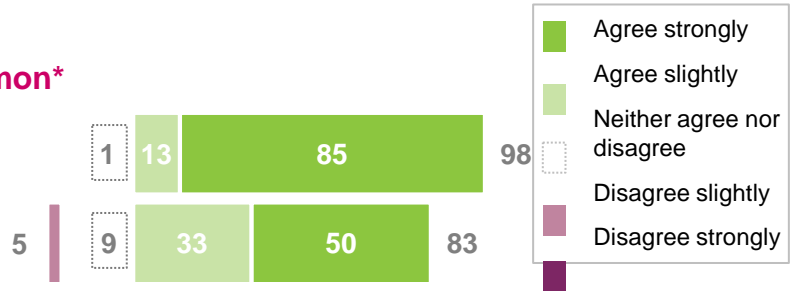
The Face 2 Face project, on average, had a 25 percentage point higher proportion of audience members agreeing with the attitude statements than baseline measure taken from the general public.

How did audience attitudes change? - Detail

Mental health problems are common*

Face 2 Face Project

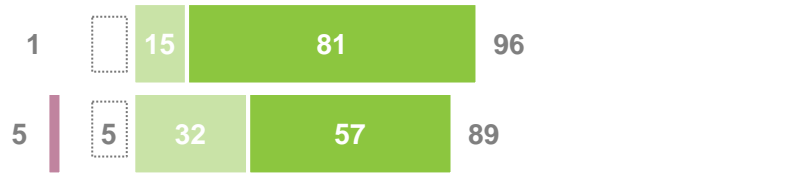
General Public 2014 baseline



People with mental health problems can face stigma and discrimination*

Face 2 Face Project

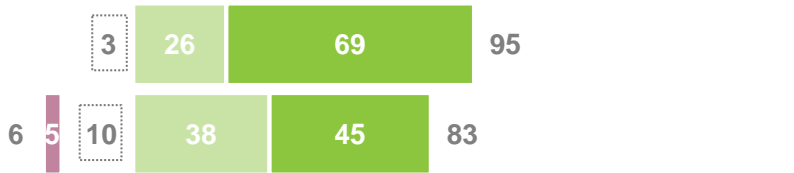
General Public 2014 baseline



Sometimes the hardest part of dealing with mental health problems is facing stigma from others*

Face 2 Face Project

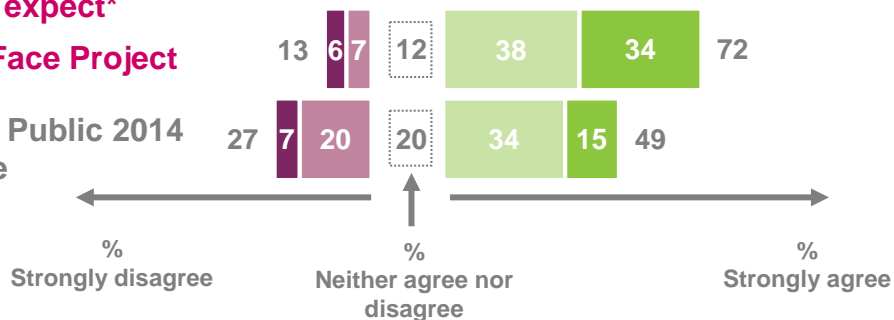
General Public 2014 baseline



It's easier to talk to people about their mental health problems than most people expect*

Face 2 Face Project

General Public 2014 baseline

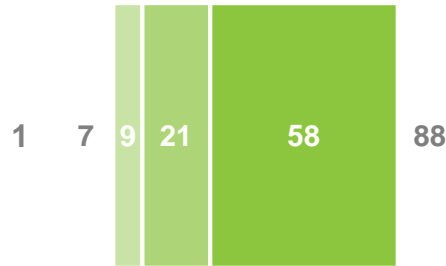


Audience attitudes were positively impacted by the project – for example, the number of audience members agreeing with the statement “It’s easier to talk to people about their mental health problems than most people expect” was 23 percentage points higher than the general public baseline. Furthermore, there was a greater proportion of audience members strongly agreeing with all the statements, when compared against the general public.

→ Were audience members more empowered?

Challenging a person if you saw them doing something unfair to someone with mental health problems*

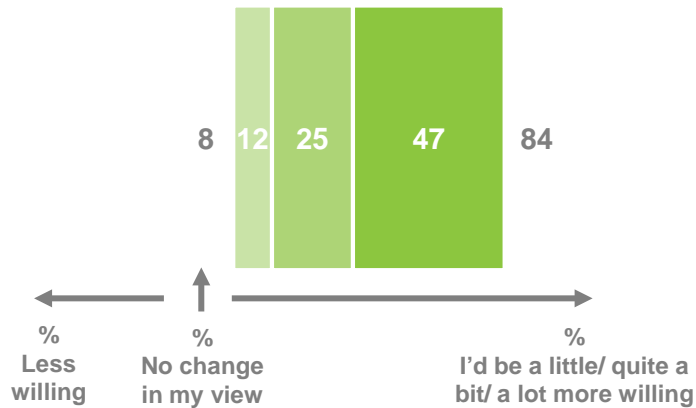
Face 2 Face Project



- I'd be a lot more willing
- I'd be quite a bit more willing
- I'd be a little more willing
- No change in my view
- I'd be less willing

Speaking more openly about your mental health problems*

Face 2 Face Project



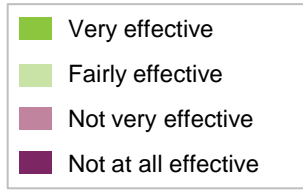
More than 8 out of 10 audience members would be more willing to both challenge a person if they saw them doing something unfair to someone with mental health problems, and also speak more openly about their own mental health problems. With the significant proportion of those being “a lot more willing” for both statements, audience empowerment was certainly achieved.

Base: (Face 2 Face Project audience: 401)

*Has it changed your views about doing either of these things in the future?

→ Did audience members think the project was effective?

How stigma and discrimination might affect people with mental health problems*

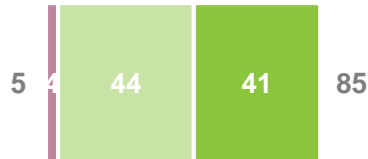


Face 2 Face Project



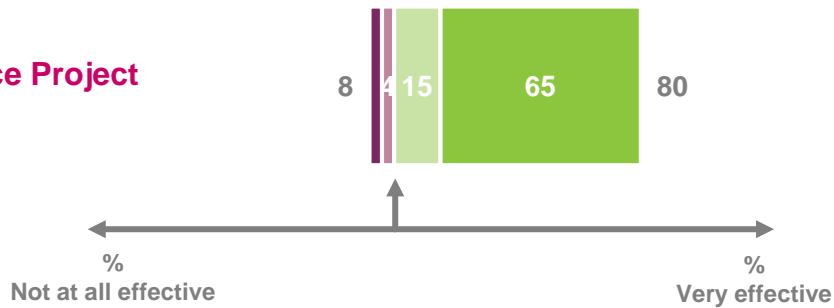
People can recover from mental health problems*

Face 2 Face Project



Mental health problems are not a sign of weakness*

Face 2 Face Project



90% of audience members found the project effective in demonstrating how stigma and discrimination might affect people with mental health problems. Also, 65% of audience members stated the project was very effective in conveying that mental health problems are not a sign of weakness.

Base: (Face 2 Face Project audience: 401)

*How effective was this activity in showing....?

What did the audience like?

What was liked?

“Helping to keep mental health out in the open”

“Good to talk to someone face to face with a mental health issues”

“Support. Make people know it's not wrong. Common problem.”

“Family friendly task so I had time to chat whilst kids were occupied”

“The human face of mental health sufferers was heartening to see”

“I liked the way people are letting other people know that not all people realise what it is like”

“The activity was colourful and fun and helped to attract people to the stage in order to bring attention to the problems regarding mental health”

“The open way the gentleman spoke to me. Very friendly”

“More awareness and help for patients in Dorset. More training”

“Good activity for all ages / good way to express thoughts freely”

“The people working with us who showed such empathy and such gentleness and the literature which was so accessible”



Volunteers



How did we measure the impact on volunteers?

- The Richmond Fellowship volunteers completed surveys during the course of the project, one baseline evaluation at the start of the project and a post evaluation at the end
- The initial baseline was completed via a combination of email surveys and paper completion, however the post was completed on paper
- As part of the post survey, volunteers were asked how their confidence has now changed in each area of Empowerment and Social Capital that has been tracked



How was volunteer empowerment affected?

- Confidence change

Total Empowerment* (average of the following statements)	1-3 events					4+ events				
	A lot less	A little less	No Change	A little more	A lot more	A lot less	A little less	No Change	A little more	A lot more
	0	0	0	0	0	0	0	1	4	3
Speak up for your own rights	0	0	0	0	0	0	0	1	3	4
Speak up for others' rights	0	0	0	0	0	0	0	1	4	3
Say no/stand up to person treating you unfairly	0	0	0	0	0	0	0	1	3	3
Talk about mental health within your community/area	0	0	0	0	0	0	0	0	5	3
Talk about mental health outside your community/area	0	0	0	0	0	0	0	0	7	1
Talk about mental health at work/school/college	0	0	0	0	0	0	0	1	4	1
Talk about mental health with friends/family	0	0	0	0	0	0	0	0	1	6
Speak more openly about your mental health	0	0	0	0	0	0	0	0	5	3
Seek work or maintain employment	0	0	0	0	0	0	0	1	3	2

Volunteer empowerment was overall positively affected by the project, with the large majority of volunteers reporting an increase in their confidence as a result of having taken part in the project. The project was especially successful in increasing confidence to "Talk about mental health with friends/ family" and "Speak up for your own rights".

How was volunteer social capital affected?

- Confidence change

Total Social Capital* (average of the following statements)	1-3 events					4+ events				
	A lot less	A little less	No Change	A little more	A lot more	A lot less	A little less	No Change	A little more	A lot more
Get involved in new activities	0	0	0	0	0	0	0	1	2	5
Be involved with local action groups	0	0	0	0	0	0	0	0	5	3
Make friends	0	0	0	0	0	0	0	0	4	4
Get support when you need it	0	0	0	0	0	0	0	0	4	3
Give help if needed	0	0	0	0	0	0	0	0	3	5
Feel confident about the future	0	0	0	0	0	0	0	1	5	2
Feel confident in your daily life	0	0	0	0	0	0	0	1	4	2
Become involved in community/local events	0	0	0	0	0	0	0	1	5	2
Become involved in volunteering	0	0	0	0	0	0	0	2	3	3
Trust people who are like you	0	0	0	0	0	0	0	1	4	3
Trust people who are not like you	0	0	0	0	0	0	0	3	3	2
Use the facilities in your area	0	0	0	0	0	0	0	1	5	2

On average, volunteer confidence in terms of volunteer social capital also increased as a result of the project. A greater number of volunteers than average reported no change in confidence when it comes to “Trust people who are not like you” and “Become involved in volunteering” – these may be areas the project needs to improve.

Volunteer verbatim comments

What they gained/ How they were supported:

“Made me more confident being around a team”

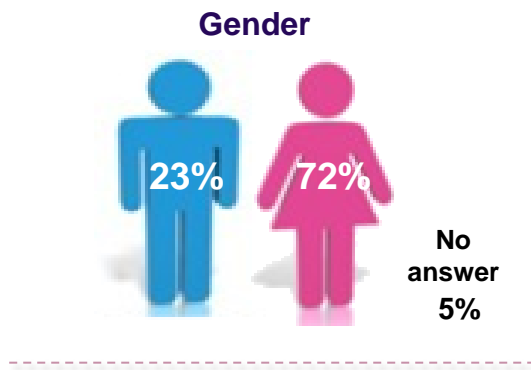
“It has got me out and about, meeting people again and help me fill empty days that I usually spend alone”

“Challenge/friendly supportive environment/ purpose / accomplishment / something to look forward to”



Appendix

→ Audience sample profile – gender & age



Transgender

Response	Percentage
Yes	15
No	75
Prefer not to say	10

Sexual Orientation

Sexual Orientation	Percentage
Bisexual	3
Heterosexual/straight	82
Gay/lesbian	2
Prefer not to say	13

Age

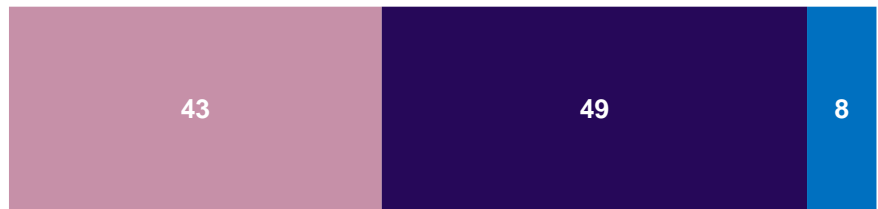
Age Group	Percentage
Under 14	0
14-17	0
18-24	5
25-34	15
35-44	29
45-54	20
55-64	13
65-74	11
75+	2
Prefer not to say	5

The majority of audience members were female, which is typical across all Time to Change activities. The project reached a mixed age demographic, with nearly half of audience members falling into the “35-54” age group.

→ Audience sample profile – mental health experience

Experiences of mental health

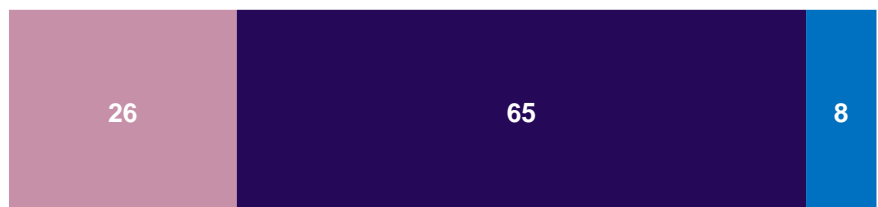
Whether they have/had experience mental health problems



Whether they use/used mental health services



Whether they are a carer for someone with mental health problems

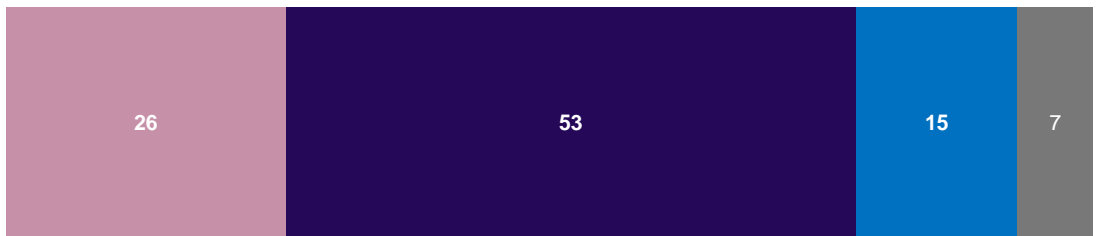


% ■ Yes ■ No ■ Prefer not to say

As intended, the majority of the project audience were people without lived experience of mental health issues.

→ Audience sample profile – regionality

Area type



% ■ City/Large Town
■ Village/Rural

■ Small-Medium Sized Town
■ Prefer not to say

Region

The majority of audience members were from the **South West (74%)**.

The majority of audience members lived in a small-medium sized town in the South West.

→ Audience sample profile – ethnicity & equalities

STATUS

	%
Refugee	0
Asylum seeker	0
No, neither of these	87
Prefer not to say	13

DISABILITY TYPE

	%
Physical	8
Learning	3
Other	7
No disability	68
Prefer not to say	16

ETHNICITY

	%
Bangladeshi	0
Indian	0
Pakistani	0
Any other Asian or Asian British	0
African	0
Caribbean	1
Any other Black or Black British	0
Asian and White	1
Black African and White	0
Black Caribbean and White	0
Any other mixed heritage	0
White British	82
Eastern European	0
Irish	0
Any other White background	4
Chinese or British Chinese	1
Any other background	1
Prefer not to say	7

The project reached mainly those from a White British background.



Glossary of key terms

Audience members - members of the public who attend a Time to Change event.

Discrimination - when someone dislikes, or is prejudiced against, a certain group of people and treats people from this group unfairly.

Empowerment - the process of increasing a person's confidence and strength, especially in controlling their life and claiming their rights.

Lived experience— Someone with direct experience of mental health problems (not just experience of supporting or caring for someone with mental health problems).

Social capital – People's access to social resources, for example taking part in community activities such as volunteering.

Social contact –This is where people with and without experience of mental health problems come together to have a meaningful conversation about mental health.

Stigma - when a person, group or condition has very negative or bad associations attached to it. There is a powerful stigma attached to mental illness, which causes people to discriminate against (see above) or stereotype people with mental health problems.

Time to Change Champions – people with lived experience of mental health problems who campaign to end mental health discrimination in their communities.

Volunteers with lived experience – people volunteering for Time to Change, who have lived experience of mental health problems.

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