A voice and a choice for young people’s mental health

Case Studies of innovative approaches to improving young people’s mental health and wellbeing

- What do you come back knowing?
- How can we measure success?
Acknowledgements

These case studies were prepared by Amy Woodhouse on behalf of the Mental Health Foundation and Paul Hamlyn Foundation. The Foundations are grateful to the Right Here project staff and young volunteers for their participation in this study.

We would also like to thank Eva Cyhlarova, Susan Blishen, and Elise Leclerc for their comments.
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Right Here: Aims and Approaches

Right Here is a £6 million programme which is running from 2009 to 2014, and is jointly managed by Paul Hamlyn Foundation and the Mental Health Foundation. It aims to develop effective new approaches to supporting the mental health and wellbeing of young people in the UK aged 16 to 25. Right Here focuses on intervening early to help young people at risk of developing mental health problems and on tackling the stigma associated with mental health problems that often prevents young people seeking help.

Right Here operates across four different projects in: Brighton and Hove, Fermanagh, Newham and Sheffield. Each project is led by a youth charity, working with other voluntary and statutory organisations. Young people’s participation is fundamental to how all of the projects operate, as is partnership working. Young people work with youth workers and mental health professionals to design, commission and deliver activities, while Right Here’s local delivery organisations work with public sector partners to increase the influence and impact of their work. The projects are intended to bring lasting benefits to the young people they work with, the lead organisations and their partners, and to local youth mental health provision.

Right Here is also a partner in the Innovation Labs initiative which is developing a range of new digital tools to support young people’s mental health.

Right Here is being independently evaluated by the Tavistock Institute of Human Relations and the Institute for Voluntary Action Research (IVAR). The final evaluation report from IVAR will be published in the autumn 2014. Paul Hamlyn Foundation and the Mental Health Foundation will use learning from these evaluations to influence practice more widely and make the case for policy changes, where appropriate.
Introduction

There is a growing body of evidence which supports the importance of Right Here’s work and the need for radical change to how youth mental health is addressed.

This paper provides four case studies giving a flavour of the approaches that the Right Here programme has adopted to addressing the mental health needs of 16 – 25 year olds, a unique combination of youth participation and co-design, prevention, early intervention, resilience-building and anti-stigma activity.

Background

The need for Right Here

A growing body of evidence is emerging which supports the importance of Right Here’s work. Rates of mental ill-health among young people are concerning and it is now understood that adolescence and early adulthood is the peak age of onset for mental ill-health and the period when there is a need for initial care. Poor mental health is closely related to many other health and social concerns for young people, including educational achievements, employment, relationships and substance use. Promoting good mental health and preventing mental health problems in young people is therefore an issue of considerable significance for UK society both in terms of public health and social wellbeing.

Appreciating the wider environmental factors is important and some young people are particularly vulnerable to mental ill-health. These include young people exposed to socio-economic factors such as poverty, social exclusion, and unemployment. Individuals who are subject to social and gender inequalities or who experience injustice or discrimination are also at higher risk of developing mental health problems.

Young people experience a range of barriers to mental health support. Transitions between child and adult services tend to be poorly co-ordinated and there is a lack of age-appropriate mental health services to support this particular group. Adult mental health services are often not designed or delivered in ways that young people wish to engage with, and the fear of being stigmatised for having a mental health problem is also a major factor in young people’s decisions not to access help from mainstream, traditional services.

These barriers can mean that young people’s mental health needs can go unsupported. However, it has been suggested that the effective treatment of mental health problems in young people may result in the prevention of many adult cases of mental ill health. There is a good case to be made therefore that young people should have ready access to mental health support, both to support their mental health in the present and to prevent the development of future mental health problems in adult life.

Approaches to supporting young peoples’ mental health underpinning Right Here

To better address the mental health needs of young people and prevent the continuation of mental health problems into adult life, the literature points to a number of approaches and interventions which are at the heart of Right Here’s approach. These include: prevention, early intervention, resilience building, youth participation, and anti-stigma activity. In some cases Right Here has also adopted gender specific approaches to encourage higher service take up.
Prevention and early intervention
The World Health Organisation (WHO) has made a strong case for the implementation of evidence based programmes to prevent the development of mental health problems across all age groups; to reduce risk factors, strengthen protective factors and decrease psychiatric symptoms as well as directly prevent the onset of some mental health problems. Examples of effective interventions WHO recommend for young people at risk of developing mental health problems include: group education in positive thinking, challenging negative thinking styles and improving problem-solving skills and mental health literacy programmes to encourage early help-seeking9.

Resilience
Resilience (the ability to cope well when something bad happens) has been shown to act as a protective factor against the development of mental health problems in young people10. In order to promote the building of resilience, Mind and the Mental Health Foundation identify three key facilitators: activities that promote wellbeing, building social capital and developing psychological coping strategies11. The authors suggest that wellbeing is best promoted through the delivery of “upstream” interventions which seek to remove barriers to support and enable people to take part in positive activities, such as being active, learning or giving to others. Social connectedness can be encouraged through peer support groups, social prescribing programmes and community based arts activities. Psychological coping strategies can be instilled through the provision of psychological therapies and education courses12.

Youth participation
There are a considerable variety of ways in which young people can actively participate within mental health services and organisations, including: participation in consultation processes, membership of advisory boards, informing the design of services, being involved in staff recruitment and training, service promotion and evaluating the impact of services13. Participation has been shown to have a positive impact on the mental health and wellbeing of the young people participating14 and on the quality of the services involved, in terms of their accessibility and responsiveness to the needs of young people15. However it has also been acknowledged by organisations such as the Carnegie Trust and the National Children’s Bureau that considerably more action is still required to increase young people’s participation within services: both in terms of breadth (the amount of young people involved) and depth (the meaningfulness of their involvement)16 17.
Challenging stigma and discrimination
Evidence suggests that young people hold more stigmatising attitudes towards mental ill-health than the general population and are also more likely to be the recipients of stigmatising attitudes if they have a mental health problem. Stigma can act as a barrier to help seeking and reduces self-confidence and esteem. In order to address stigma, providing young people with information about mental health issues has been shown to improve attitudes to mental health problems and help seeking behaviour.

Gender-specific approaches
Gender plays a role in terms of the vulnerability of young people to mental health problems such as depression, self-harm, and suicide. Evidence also suggests that young men and women present different help-seeking behaviours, with girls and young women having higher levels of mental health literacy than males. For these reasons WHO recommends a gender-sensitive approach to mental health interventions for young people.

Case study selection and methodology
This report presents four case studies from across the Right Here initiative, focusing on one specific activity from each of the four project areas. The case studies have been chosen to demonstrate the range of different approaches developed under the Right Here banner, with a particular emphasis on activities which incorporate the following components:

- Awareness raising to increase young people’s understanding of mental health and wellbeing (in the wider community)
- Therapeutic activities targeted at young people most at risk of developing mental health problems
- Participation activities involving young people in developing and delivering Right Here activities
- Physical and creative activities.

Evidence for the case studies was gathered from existing Right Here evaluation data and supplemented by one-to-one and group interviews with project staff and young people involved in the activities described.
### Case Study One: Research and Evaluation Projects, Right Here Brighton & Hove

**Young people-led research driving service improvements**

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<td><a href="http://right-here-brightonandhove.org.uk">http://right-here-brightonandhove.org.uk</a></td>
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<tr>
<td><strong>Lead agency</strong></td>
<td>Sussex Central YMCA</td>
</tr>
</tbody>
</table>
| **Partners** | • Mind in Brighton & Hove  
• Brighton & Hove Children and Families Services  
• Brighton & Hove City Clinical Commissioning Group |
| **Additional Funding and resources** | • Brighton & Hove Clinical Commissioning Group (How Can I…?)  
• Brighton and Hove City Council (self harm study) |
| **Aims and objectives of activity** | • To research the impact of Right Here Brighton & Hove interventions  
• To research specific mental health research topics of importance to young people and the people who support them |
| **Relevance to Right Here’s national aims and objectives** | This activity allies itself with the following Right Here ambitions:  
• To develop new approaches / structures which are participatory and able to engage with and be sensitive to the needs of young people  
• To develop closer co-operation between services, and particularly, between voluntary and statutory sector, youth and mental health services |
| **What led to the activity being set up** | It was an initial expectation of the Right Here initiative that each project would recruit Research and Evaluation volunteers to support the national evaluation of Right Here. |
| **Description of activities** | The Research and Evaluation Group (comprised of young volunteers from the project’s research and evaluation and mental health promotion groups) have undertaken a considerable programme of work since 2011, including:  
• Evaluating Right Here Brighton & Hove’s wellbeing guide – asking how young people and professionals viewed this resource  
• Research exploring 172 young people’s views and experiences of GP services in relation to emotional and mental health (2011). The research found that 48% of young people interviewed did not feel comfortable talking to their GP about emotional or mental health issues; and 41% did not know what was confidential when visiting their GP. See http://right-here-brightonandhove.org.uk/wp-content/uploads/Microsoft-Word-Right-Here-YP-research-GPs-Full-versionAug2012.pdf  
• Research exploring perceptions of self harm amongst young people and professionals who work with them  
• The Research and Evaluation Group were also runners up in the Independent Academic Research Studies Research and Leadership Awards (2012) for their GP services research |
| **Target group** | Young people aged 16 to 25 years. |
| **Target group involvement** | “from the go I was actively involved in the research, the first meeting I attended as a volunteer saw us developing the questions we would present to a series of focus groups in order to collect data for our GP research project. It was a great experience” (young person)  
There are on average 6-11 volunteers within the group at any one time, who meet every week with the support of a facilitator. The Research and Evaluation Group actively encourages the participation of young people at all stages of the research process, including planning and design, data collection, analysis, reporting and dissemination activities. Members have taken on more responsibility for the running of the group over time as their skills and confidence have increased. They are now responsible for setting their own meeting agendas and completing their programme of work, with less direct input from the group facilitator. |
| **Timescales** | From 2011 – ongoing |
Outcomes to date

“I have made friends as well – we go out frequently. Before this year I didn’t have many friends and all the friends I have now I’ve made through Right Here...so that’s amazing”. (young person)

“personally my confidence has definitely gone through the roof since I joined this team...” (young person)

As a result of their participation, members of the Research and Evaluation Group reported increased levels of:

- general wellbeing
- social connectedness amongst and between group members
- self confidence
- concentration levels
- research skills including communication and listening skills and focus group facilitation
- knowledge of mental health topics such as self harm.

The findings from the research undertaken by the group have also impacted on the wider work of Right Here Brighton & Hove through a number of subsequent developments:

- ‘How Can I...?’ (2012) Short film for young people designed to answer questions such as
  - What are my rights when I visit my doctor?
  - Will they tell anyone what I say?
- Training programme aimed at GPs, practice staff and student GP registrars, implementing the findings from GP services study (2012-2013) See http://www.right-here.org.uk/media-centre/26-April-2013
- Awareness raising visits to GP practices and practice managers forum (2012)
- Doc Ready App, one of seven Innovation Labs projects, funded by Comic Relief, Nominet Trust and Paul Hamlyn Foundation. Doc Ready, developed by FutureGov, Enabled by Design, Neontribe and Social Spider, with input from RH Brighton and Hove, aims to help young people get the most out of their consultations with GPs around their emotional health and wellbeing. See www.docready.org

Published literature

‘How can I….?’

GP research report
Learning Points

“Some of the time young people can feel a bit isolated and alienated from adults. They’re like ‘I can’t be completely honest with you because you might be a professional and you might report it back to someone which might lead to me getting into trouble’ whereas with young people I think you can feel at ease especially if they’re from your local community... They’re a bit more comfortable with each other and a bit more honest.” (young person)

“[facilitator’s name] is a great co-ordinator, she ensures none of us are passive volunteers and we’re always completely active and involved with the project; together we decided how to collect and present our research as a team whilst having a lot of fun in the process!” (young person)

“I was going through depression and anxiety but everyone has been really supportive and everyone has known…and I have felt really accepted by everyone” (young person)

Success factors of the project include the following aspects:

- Young person led research has enabled research with young people to be more of an open and honest dialogue
- Providing training to volunteers has enabled participants to develop and feel confident about their research skills (e.g. 6 week course “Seek and Solve”, self harm training)
- The facilitator has been key to the group’s success, providing guidance, keeping the group on track and giving the group confidence to undertake research activities
- The perceived supportive and friendly atmosphere of the group has fostered an environment where participants feel they can be open about their own experiences of depression and anxiety without feeling stigmatised
- The group has offered an opportunity for participants’ negative experiences of services to be used constructively to achieve positive change
- Peer support between participants enabled newer members to learn research skills from more experienced members
- The research has been used to inform service development, such as the development of the How can I…? film, GP training programme and the Doc Ready app
- Facebook group adds as a mechanism for keeping volunteers up to date

A reflective process has ensured that the group learns and develops on an ongoing basis. Some of the challenges the group have experienced over the years have included:

- Making sure that the research is a group project and no one takes over in terms of suggesting tasks or research topics
- Setting the research aims and objectives from the outset of the research project
- Ensuring that the research is focused and does not go off at tangents
- Keeping motivated throughout the lifespan of a lengthy research project
- Time constraints – working within limited timescales

What we know

Empowerment is an important factor in promoting wellbeing for young people. Wong (2010) suggests that models of participation where young people share control with adults, such as that employed by Right Here Brighton and Hove, may provide the optimum means for empowerment. This enables the adult participant to act as a source of support and encouragement for young participants, which in turn allows the young people to grow in confidence and autonomy over time. Research also indicates that supporting young people to research the views and opinions of their peers increases the sense of empowerment experienced by both researchers and research participants.

Being highly engaged in activities such as learning or volunteering can also have positive impacts on individual wellbeing, particularly with regards to self esteem and self worth, social connections and anxiety levels. Volunteering and learning activities, such as those within the groups responsible for the projects’ research and campaigns, lay the foundations to support the individual psychological state of flow, which positive psychologists describe as full immersion in a process resulting in a sense of focus, enjoyment and fulfilment.
In keeping with the findings of the Research and Evaluation Group, the wider evidence base suggests that young people experience a range of perceived and actual barriers to accessing mental health support, including judgemental attitudes, perceived lack of confidentiality, unhelpful responses in the past, professionals being “out of touch” with young people, and service inaccessibility.

Many health professionals in contact with young people also lack awareness about self harm, which populations of young people are at particular risk of self harming, and the links between self harm and suicidal ideation. There is an identified need for further training amongst health professionals on self harm and young people.

What this project adds
The work of Right Here Brighton and Hove’s Research and Evaluation Group adds important evidence on the effectiveness of young person led research, particularly with regards to the processes which enable meaningful participation to take place and some of the individual outcomes for the young researchers involved. In turn the research produced by the group and their dissemination activities add to our understanding of service barriers for young people and recommendations as to how they may be addressed. Collaboration with professionals benefits both young people and adults and creates new ways of working that others can learn from.

Areas for future research
It would be useful to explore the longer term impacts of participation in the Research and Evaluation Group on the volunteers, to assess whether any of the outcomes achieved have any lasting effect. In terms of their own research, evidence about the impact of their research and training activities on GP services and other services for young people in Brighton and Hove would also add considerable value.

Examples of similar Right Here activities
Young people from Right Here Newham have evaluated the strengths and weaknesses of their project through the medium of film. See www.right-here.org.uk/project/newham. In Sheffield young people from the STAMP group have worked with CAMHS to help implement the ‘You’re Welcome’ Standards and are currently involved in a consultation about Children and Young People’s IAPT.
# Case Study Two: Suitcase Theatre Productions, Right Here Fermanagh

**Encouraging greater understanding of mental health through community theatre and creative approaches to mental health promotion**

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<td>YouthAction North Ireland</td>
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<tr>
<td>Partners</td>
<td>• Western Education and Library Board youth service workers (audience recruitment)</td>
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<tr>
<td>Funding and resources</td>
<td>Right here Fermanagh receives additional funding from:</td>
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<td>• Public Health Agency</td>
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<td>• Youth Council for Northern Ireland</td>
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<td>• Fermanagh District Council</td>
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<td>• Western Education and Library board</td>
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<tr>
<td>Aims and objectives of activity</td>
<td>Suitcase Theatre is an issue based theatre project, aiming to use the performing arts as a medium to allow young people to explore and express their views and beliefs on issues that they feel affect their lives. The concept of Suitcase Theatre is that productions are created that can travel anywhere in a suitcase. It involves young people in the creative development and performance of a piece of theatre around a specific topic, which in this instance focused on mental health issues.</td>
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<tr>
<td>Relevance to Right Here's national aims and objectives</td>
<td>This activity allies itself with the following Right Here ambitions:</td>
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<tr>
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<td>• To achieve greater understanding and acceptance of mental health issues by young people</td>
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<td>• To develop new approaches / structures which are participatory and able to engage with and be sensitive to the needs of young people</td>
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<tr>
<td>What led to the activity being set up</td>
<td>In 2010 funding was made available from Right Here Fermanagh to engage Suitcase Theatre to work with YouthAction Northern Ireland’s Youth Arts CLP Apprentices.</td>
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<td>The project was set up as a way of using youth-led methods to deliver a peer message to young people about mental health in an accessible and engaging way.</td>
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<td>Description of activities</td>
<td>Since 2010, two touring productions have been produced and performed by young people in partnership with YouthAction Northern Ireland and Right Here Fermanagh. In each case young people were involved in developing and delivering the performances to audiences of their peers. Along with the performances, the cast delivered post-show workshops with the audience, exploring the issues surrounding mental health and young people in today’s society. The performances and workshops were aimed at young people aged 15 – 25 years.</td>
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<td><strong>EVA – Emotions VOICED ALOUD</strong></td>
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<td>EVA was performed four times in 2010 - twice in Belfast and twice in Enniskillen to a total audience of 300. The production explored how young people experience everyday situations and pressures, through the life of the central character “Eva”. The plot centres around an experiment which robots / aliens are carrying out on humans, trying to discover how humans manage their mental health and emotions and tries to track one human, EVA, in a series of real life situations. In addition to the post performance workshop, audience members were given a range of mental health supports and inputs:</td>
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<td>• Specially designed wristbands were distributed with flashdrives built in containing mental health signposting information.</td>
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<td>• Inspirational quotes were created and distributed to young people.</td>
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<td><strong>Circus: Behind the Curtain</strong></td>
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<td>In 2013, “Circus: Behind the Curtain” was developed to explore myths about mental health and how to achieve a healthy state of mind. Using concepts from the field of positive psychology, it examined different aspects of mental health through various characters, played by young people, including The Clown, The Juggler and The Ringmaster. To date the show has been performed on two occasions to 75 young people in Belfast and 45 young people in Fermanagh.</td>
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After the performance, the cast ran a workshop with the audience, exploring the issues highlighted in the play concerning young adults and mental health. Young men’s wristbands were also distributed, with mental health messages on them such as “B CONFIDENT” “B ACTIVE” “B FOCUSED”.

In both EVA and Circus: Behind the Curtain performances Counselling Services from ‘CONTACT’ and ‘LIFELINE’ and Right Here Staff were available on-site to talk to young people about any mental health issues or concerns arising from the performances.

Target group
Young people living in Belfast and Fermanagh. Both productions were advertised using existing networks, Facebook, mental health partners, and youth clubs.

Target group involvement
“The cast members clearly loved the whole process and there was a real sense of exhilaration after the show. They had written the show themselves after researching the subject thoroughly and said they had learned a lot themselves in the process. For most of them it was their first time in a public production and they were very proud of their achievement” (Independent Evaluator from Arts Council Northern Ireland).

Right Here Fermanagh young people and staff worked with Youth Action’s Youth Arts CLP Apprentices to create and perform EVA and Circus: Behind the Curtain. Young people were involved in every stage of the process, from selecting the themes, writing the scripts, performing the show, facilitating the workshops and also in a range of front of house roles. In total, 52 young people were involved in the development and delivery of these two productions.

Timescales
2010 – 2013

Evaluation
• EVA – post performance audience questionnaire
• Circus Theatre - Evaluations from young people
• Evaluations of the Inspirational quotes
• Independent evaluation report of Circus: Behind the Curtain by the Arts Council for Northern Ireland.

Outcomes to date
“Made me think more about my own mental health. Made me understand I can always get help no matter what my issues, there is always a way out” (Young EVA audience member)

“My mental health is now something that I now consider talking to people about”
(Young EVA audience member)

“The workshop has made me realise I have factors that contribute to poor mental health”
(Young EVA audience member)

After watching EVA and participating in the post production workshop, young audience members reported increased awareness of:
• the differences between mental health and mental illness
• their own mental health and wellbeing and potential risk and protective factors affecting them
• tips and ideas to improve their own mental health
• the fact that sources of support and treatment are available for mental health problems

Post performance, EVA audience members were asked to rate their responses to set statements on a scale of 1-7, with 1 being low and 7 high. 54% of respondents indicated that there was a high probability (scoring of 6 or 7) that they would use the flashdrive distributed to EVA audience members.

A texting service was also borne from the idea of the inspirational quotes. The service texts random feel-good messages to young people who sign up for the service, with a particular emphasis on sending messages at times when young people might be feeling low, such as weekends. Approximately 500 young people have signed up for the texting service.
Learning Points

“Real for young people. Good to give young people space to talk about mental health” (Young EVA audience member)

“Really unique way of getting through to youth” (Young EVA audience member)

“There were several complex messages in the piece and the medium / analogy was very effective in putting them across without it feeling like a lecture. It was very thought provoking while fun to watch” (Independent Evaluator from Arts Council for Northern Ireland on Circus: Behind the Curtain)

Identified success factors of the project included:

• The enthusiasm and commitment of the cast of young people

• The proven track record of YouthAction having developed issue-based drama involving young people

• A range of local organisations were present in the audience, enabling mental health issues to be put on the agenda of other local agencies

• Accuracy of the productions with regards to the mental health issues affecting young people. When rating the “accuracy of the play re: the minds of young people” 86% (n=87) of young respondents rated EVA highly (a response of 6 or 7), indicating that audience members felt that the portrayal of young peoples’ mental health on stage was realistic and true to life. When asked whether the play matched their “own mind and emotions” 44% (n=44) rated EVA highly (6 or 7), indicating that a significant proportion of the audience had experienced some mental health issues and concerns themselves at some point. This was borne out by some of the comments received:

“My own mental health can be like Evas but at the moment it’s on an even keel” (Young EVA audience member)

Some of the challenges experienced through the performances have included:

• Young people, as audience members and as script-developers, are often attracted to the very acute and tragic stories of mental illness or suicide. Maintaining a focus on mental health rather than mental illness was challenging and required tenacity from staff supporting the work.

• Practical performance issues arose in many ways, with cast members withdrawing, technical difficulties and the issue of young people with busy lives fitting in rehearsals and workshop skills work.

What we know

Research shows that using drama to raise awareness of a particular social or health issue can result in a range of impacts on audience members of all ages including: increased knowledge of the topic presented, positive attitudinal changes towards people with the specific conditions addressed (including mental health problems), and improvements in intended future behaviour relating to health behaviours or help seeking33 34. There is also some evidence which suggests that experiencing theatrical performances live achieves greater affective responses than video recordings of the same performance35.

Furthermore, young people involved in the development and performance of issue-based community theatre can experience a range of positive mental health impacts stemming from their participation such as improved self esteem, confidence and improved capacity for self expression36 37.

What this project adds

The evidence gathered through post EVA performance questionnaires provides a valuable snapshot of how young audience members viewed their own mental health immediately after a show presenting a character who experienced a range of mental health difficulties. Most audience members surveyed described their own mental health positively at that moment in time, sometimes explicitly in relation to that of the character EVA’s. It is possible that the experience of the performance encouraged some audience members to positively adjust their opinions of their own mental health. Work to establish audience members’ perceptions of their mental health prior to future performances would provide a useful baseline to measure the impact of the performances on individuals.
Areas for future research
In addition to the dramatic productions, Right Here Fermanagh offered audience members the opportunity to undertake mental health awareness workshops immediately post performance. It would be useful to explore which activity (performance or workshop) was more impactful in terms of delivering mental health awareness messages to young people and whether the combination of both activities together was more effective than either one independently.

Examples of similar Right Here activities
Mental health and wellbeing drama workshops were developed by Right Here Newham to form part of the New Vic College’s BTEC Level 2 Diploma in Performing Arts. Young people delivered scripted pieces based on mental health issues linked to violence, relationships, isolation and stress. They have performed to their peers in the college, to an audience who have a lived experience of mental health issues at Newham Centre for Mental Health and at The Stratford Circus as part of the Stereo-Hype Festival. So far they have reached over 170 people through their performances.
## Case Study Three: Body and Mind Wellbeing Champions Project, Right Here Newham

*Using physical activity to recruit and engage young people living in Foyers in mental health awareness activities*

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<td><strong>Lead agency</strong></td>
<td>• New Choices for Youth Trust</td>
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<tr>
<td><strong>Partners</strong></td>
<td>• East Thames Foyer</td>
</tr>
</tbody>
</table>
| **Aims and objectives of activity**        | • To build awareness around mental health and wellbeing of the body and mind amongst 16-25 year olds who live in the Foyer  
• To provide young people with information about support available to them if they are affected by mental illness  
• To gain accreditation for the young people attending the training in order for them to become Wellbeing Champions  
• To help young people build resilience towards issues which affect them.                                                                 |
| **Relevance to Right Here’s national aims and objectives** | This activity allies itself with the following Right Here ambitions:  
• To improve young people’s wellbeing leading to a reduction in numbers of young people developing mental health problems  
• To achieve greater understanding and acceptance of mental health issues by young people |
| **What led to the activity being set up**  | Right Here Newham had an existing relationship with an East Thames Foyer and it was agreed that the Wellbeing Champions training would make a good additional activity to offer the young people living there. The decision was taken to add a boxing training component to the Wellbeing Champions training to act as an incentive to recruit participants from this traditionally hard to reach group. It also provided participants with a means of using exercise to look after their mental health and wellbeing. |
| **Description of activities**              | The Wellbeing Champions training has been part of Right Here Newham’s core activity programme for several years. The purpose of the training is:  
• to raise individuals’ awareness of mental health and strategies for looking after their mental wellbeing  
• to train a group of young volunteers who can go out into their communities and deliver mental health awareness raising sessions to other groups of young people.  

The Wellbeing Champions Training takes place over 10 weeks, with each weekly session lasting two hours. The training covers a range of topics relating to mental health and wellbeing including:  

• Icebreakers and teambuilding exercises  
• What is mental health and mental illness  
• Resilience  
• Support strategies and mechanisms  
• What to do if someone is in a mental health crisis  
• Group working and communication  

Over the last two weeks of the course the young people develop their own workshops or presentations relating to mental health and wellbeing. These are presented to the course facilitators, last approximately 30 minutes and include an ice breaker, presentation, Q&A session and signposting information. All participants are invited to a group meal after the course is finished.

Participants can choose to work towards receiving a LCN Accreditation (Level 2) through the training, although this is not essential to become a Wellbeing Champion. In order to achieve the qualification, participants are required to complete and submit coursework for two modules: Understanding Mental Health and Wellbeing and Developing Group and Teamwork Communication Skills.
Boxing Training

An hour long boxing training session immediately follows on at the end of each week of the Wellbeing Champions training. The boxing training incorporates a range of exercises including circuits, skipping, running and pad work. Three sessions of street self-defence are also included within this programme.

Following the successful completion of the first Body and Mind course in Summer 2013, Right Here Newham is looking to repeat Body and Mind with Foyer residents again in the near future.

Target group

Young people (16-25) living in a large Foyer within the Borough of Newham in London. This area has a large BME community. The programme was designed as a means of early mental health intervention and prevention. However some participants did describe having a history of mental health problems, such as depression and anxiety.

Target group involvement

Body and Mind had six regular attenders aged between 17-24, of which three were male and three female. Four participants went on to do the LCN Accreditation (level 2)

Timescales

2013 onwards

Evaluation

- Body maps asking participants to highlight something they liked, something they learned, something they would improve and something they would “kick out”
- Body and Mind evaluation forms
- Verbal feedback
- End of training evaluation

Outcomes to date

“At any given time you are on the mental health scale and can move forward and back” (Young person)

“I can throw 10 jabs in 3 seconds” (young person)

“One of the young women we worked with...we have inspired her to chair the house meetings [at the foyer]”

As a result of their participation, Body and Mind participants and project workers described the following outcomes for participants (evidenced through evaluation forms and staff interviews):

- Increased awareness and understanding of mental health and mental illness
- Improved knowledge and application of non contact boxing techniques
- Increased levels of self confidence
- Increased awareness of and interest in taking up other Right Here opportunities, such as the Youth Panel
- Increased awareness of sources of support available locally
- Increased influencing roles within foyer

Additional outcomes described by project staff included:

- Participants obtaining additional support from their Foyer key workers around specific health needs identified through the training
- Participants being referred to other sources of support for mental health issues, e.g. counselling
- Participants exploring future education options with Body and Mind staff.
Learning Points

“It's more important running it in the foyers than doing it outside the foyers...everyone has their own different types of stresses...with the foyer they are concerned about their future...how can I afford to eat...how do I build a relationship...how do I get back into college...to me it seems like it’s needed more in the foyer “ (Project staff member)

“Having a boxing session straight after wasn’t only a way of enticing and recruiting but at the same time it was a way of looking after your mental health and wellbeing and releasing any anxiety, stress and anger. So that linked really nicely” (Project staff member)

Success factors of the project include the following aspects:

• The young age of the boxing trainer (early 20s) worked well with participants as they could relate and engage with him. He was able to act as a role model and made the young men feel comfortable

• Use of boxing as a recruitment tool

• Having a good ethnic mix amongst project workers (African, Asian and White) was also felt to act as a facilitator

• The boxing proved popular with all participants. Young female participants were very interested in the boxing as a means for fitness

• Utilising participants’ friend networks was a useful method of recruitment

• Practical tasks linked to theory proved an effective way of disseminating knowledge, e.g. building a tower as part of an exercise on resilience

• Bringing in key workers from the Foyer for one session meant that any housing issues that arose through the training could be taken forward

• Using “wellbeing” instead of “mental health” in recruitment materials to make the course more accessible.

• Some of the challenges the group have experienced included:

• Recruitment took more time than originally expected, putting the project behind schedule. In the future more time would be allocated to advertising the course in advance and building familiarity with Right Here workers in the Foyer
• Some participants felt the mental health terminology used in some of the course materials was difficult to understand

• Some participants felt that the course was a bit rushed in places and would have preferred more time for reflection and writing

• The accreditation process required a lot of written work, which could act as a barrier when working with hard to reach young people.

What we know
Young people living in Foyers come from a range of backgrounds which makes them vulnerable to developing mental health problems, including those who have experienced living in care, who have a history of offending or who experience significant physical health issues. To support resilience in the Foyer population it is recommended that young people are given the chance to build positive connections and relationships within the wider community in which they live, including having the opportunity to volunteer for local voluntary organisations.

Young men face particular barriers to service engagement, including a lack of visible male role models within services. Young men from BME communities may face additional cultural and language barriers, thereby encouraging them to think that volunteering for those organisations is not for them. Volunteering opportunities that build in an aspect of physical activity, like the boxing training incorporated within Body and Mind, are more likely to be successful in engaging men and facilitating their input and discussion. Participants (both male and female) may also obtain mental health benefits from the physical activity opportunities provided within Body and Mind. Raising awareness of the project through the right networks, particularly through peer word of mouth, is also important, particularly when aiming to recruit men.

What this project adds
Whilst the numbers participating in this first Body and Mind courses. The use of boxing training as a means of recruiting as well as a mental health promotion activity in its own right supports evidence that physical activities facilitate the recruitment of young men and women into volunteering roles.

Areas for future research
It would be useful to explore the how the Wellbeing Champions trained through Body and Mind have utilised their training in practice, both in direct volunteering activities for Right Here and beyond in their everyday lives.

Examples of similar Right Here activities
• The Wellbeing Champion training has been run with a number of different cohorts of young people across Newham, including young people attending the New Vic College

• Similar roles to the Wellbeing Champions exist in other Right Here projects, such as the Wellbeing Ambassadors in Sheffield

• Right Here is building on the learning from these projects in a new collaboration with the Foyer Federation, entitled Healthy Conversations

• All of the projects have used physical activities to recruit young people and to help improve their mental health (e.g. Brighton rock climbing; Fermanagh fishing; Sheffield Walk and Talk)

• Right Here Fermanagh takes a gender specific approach to most of its activities.
Case Study Four: Walk and Talk, Right Here Sheffield/Counselling on the Move

Relationship-based therapeutic and exercise programme for young people with complex needs

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<td>Partners</td>
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<tr>
<td>Additional funding and resources</td>
<td>Change4Life funding</td>
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Aims and objectives of activity

- To improve young people’s confidence, emotional wellbeing and physical health and work to overcome harmful ways of thinking and behaving around food and exercise
- To embed new life-enhancing habits around food and exercise which can be sustained after the programme end
- To support those young people who wish to lose weight, helping them to increase their awareness of 1) healthy eating and exercise, and 2) the ways in which emotional problems can interfere with efforts to control what we eat
- To increase young people’s understanding of the value of exercise in maintaining good mental health – psychological (the sense of accomplishment) and biochemical (increases in the levels of neurotransmitters associated with the mood)
- To help improve the understanding of workers in the Change4Life programme of mental health issues for young people in transition to adulthood and how to signpost their service users towards appropriate support when needed

Relevance to Right Here’s national aims and objectives

- This activity allies itself with the following Right Here ambitions:
  - To increase the capacity and support available to young people to look after their own mental health
  - To develop new approaches / structures which are participatory and able to engage with and be sensitive to the needs of young people

What led to the activity being set up

Several groups of vulnerable young people aged 16-25 in the area served by Right Here had been identified as being hard to reach: those from ethnic minorities, with mental health problems, with learning difficulties, engagement with the criminal justice system, NEET, homeless, LGBT, and young carers. They were often socially isolated and lacking appropriate support to maintain good mental health in difficult circumstances. Interchange also identified that some clients struggle with traditional mental health support sitting still in a room with an adult for the therapeutic hour. Consultation with service users and with the STAMP panel suggested that counselling support ‘on the move’ and combined with peer group support may be more accessible for some.

Description of activities

Walk and Talk is a therapeutic programme providing vulnerable young people aged 16–25 with on-going support through counselling, along with physical activity sessions, with the aim of embedding new life-changing habits and providing social support.

The activity began as six 50-minute weekly sessions of one-to-one counselling with three (one per month) sessions offering group exercise and social support. However, in recognition of the complex needs of the young participants, an open ended approach was later adopted, which allowed young people to participate on an on-going basis.

Whilst walking remained a feature of the group physical activity programme, over time the group also incorporated massage, yoga, cooking and day excursions in the local area, to reflect participants’ interests and requests.

Following the completion of Walk and Talk, a therapy-only group was established by Interchange counsellors and made available to all Walk and Talk participants who wished to take it up.
### Target Group
Young people from North East Sheffield: not in education, employment or training; long-term unemployed young adults; teenage/young parents; BME young people who would benefit from improving their physical health as well as their emotional wellbeing.

A total of 40 potential service users were referred to the activity – 14 male and 26 female, the majority aged between 16 and 19. Of these, 23 attended some or all of the sessions.

### Target Group Involvement
“*We worked from the basis that the young person knows themselves the best… and we wanted that to permeate through to other aspects of the project… The whole ethos, the holistic ethos, was one of being person centred*” (Walk and Talk counsellor)

“We worked very sensitively with clients individually…the activities we offered came from the young people themselves and we developed it from there” (Walk and Talk counsellor)

The project was inclusive and responsive to the needs of its participants in the following ways:

- Modifying the programme away from time limited counselling to allow for on-going support
- Providing counselling in a person-centred way, which went at each individual’s own pace
- Consulting participants on their choice of group activities
- Offering a choice of venues for counselling and group activities
- Obtaining written and verbal feedback about individual experiences of the project
- Sharing and disseminating the learning from Walk and Talk through a training package developed for delivery at ZEST.

### Timescales
August 2010 to March 2012

### Evaluation
Impact evaluation for each young person

### Outcomes to Date
“*Everyone knocks you down out there but coming here builds you up again*” (Young person).

“We just connected like I wouldn’t think anyone would connect…we just all became friends” (Young person)

As a results of their participation, Walk and Talk participants reported increased levels of:

- general wellbeing
- social connectedness and friendships amongst and between group members
- self confidence, resulting in taking up new opportunities such as volunteering and undertaking activities which were previously difficult, such as catching the bus
- healthier lifestyles with regards to exercise, diet or weight management
- trust in other young people and professionals who support young people
- coping skills

Participants also described experiencing reduced levels of:

- anger
- anxiety
- fear
- social isolation
- self harm and suicidal ideation
Learning points

“If we were just sat there in a circle…I think it would be a bit awkward. Doing an activity helped…It became a regular thing… That’s what made the project I think – walking and talking” (Young person)

“It were like a peer mentoring type group as well – even if we didn’t realise we were doing it…” (Young person)

Success factors of the project include the following aspects:

• The person-centred approach of the project enabled Walk and Talk to be flexible to the needs of participants, both in terms of the structure of the project and the content of activity sessions
• The combination of one-to-one counselling and group activities worked well for young people with complex needs, giving them the opportunity to talk through their issues with trained counsellors alongside having the opportunity to build relationships with other young people
• Offering physical activities enabled the project to reach some young people who may well not have been engaged by traditional models of therapy
• The physical activities may have been more engaging for some young people than typical discussion groups. The physical element of the programme also seemed to provide non-verbal ways for the group to bond, for example by walking together at the same pace
• The counsellors were present for all group activities, taking a back seat unless specifically needed. This meant that issues arising from group discussions could be incorporated within the 1-2-1 sessions
• The self-referral route led to a number of young people joining the programme who may not have accessed services otherwise. Some of the challenges the group experienced over the years included:

• Because participants were often friends in real life, this meant that on each occasion the staff had to repeat and reinforce ethical and confidentiality issues
• The project was time limited because of funding restrictions, and for some young people no other service had quite replaced it in terms of the support it provided
• Some young people felt that although contact had been maintained between the young people since, the closeness of the friendships developed through the group had not been sustained after the project had finished.

“It’s really sad that’s it’s had to end – there was a lot that came good out of it…we all bonded so well…now everyone is just doing their own thing…You kind of miss the group situation” (Young Person)

What we know

The complex and multiple risk factors experienced by the young people participating in Walk and Talk placed them at higher risk of poor mental health. However, evidence suggests that young people experience a range of perceived and actual service barriers, including a paucity of young person specific mental health services, which can prevent them from getting the support they need. It has been recommended that an approach which places mental health support within a wider context of health and welfare expertise should be adopted to better address the mental health needs of young people.
Mental health and physical health are closely inter-related and both impact on the other46. Regular physical activity is associated with a greater sense of wellbeing and lower rates of depression and anxiety across all age groups47. Physical activity that takes place out of doors has been found to be particularly beneficial for wellbeing, with some evidence that outdoor walking groups may have a greater impact on participants’ self-esteem and mood than the equivalent activity indoors48. The New Economics Foundation also suggest that slower-paced activities, like walking, can have the benefit of encouraging social interactions at the same time as providing physical exercise49.

Social connectedness is another key determinant of mental wellbeing, both in terms of having access to supportive individual relationships and involvement in group and community activities50. The peer support which was clearly demonstrated amongst Walk and Talk participant members, built on and extended existing friendships with support from trained facilitators.

**What this project adds**
Through offering self referral routes and a variety of young person-centred 1-2-1 and group activities Walk and Talk has worked to engage and maintain supportive relationships with a traditionally underserved cohort of young people. The teams’ reflections on the flexibility required to enable young people to engage and benefit from the support available provides useful practical learning for other organisations wishing to engage with young people with complex needs.

**Areas for future research**
Qualitative research exploring methods for maintaining the social benefits of groups like Walk and Talk in the longer term would be useful, in light of the feedback from some young participants about the difficulties in sustaining the close relationships after the group finished.

**Examples of similar Right Here activities**
- A similar Walk and Talk project has recently started in Brighton & Hove, http://www.right-here.org.uk/projects/brighton-and-hove/
- Other projects provide a range of physical activities such as rock climbing (Brighton & Hove) and Boxing (Newham)
- The combination of group work, one-to-one counselling and referrals to other counselling as necessary is one of the hallmarks of Right Here Sheffield’s approach.
Conclusions

These case studies provide four examples of the range of different approaches incorporated within the Right Here Programme. They represent but a small proportion of the entire Right Here body of work, but are worth singling out to demonstrate some of the innovative practice which has been undertaken under the Right Here banner to improve the mental health and wellbeing of young people aged 16-25.

In particular the case studies highlight good practice developed across areas of mental health awareness-raising, therapeutic support, youth participation and physical and creative activities. Each of the four projects aligns themselves with the evidence of what is known to be effective in supporting the mental health of young people: whether this is increasing access to support (Walk and Talk, Research and Evaluation Group), raising awareness about mental health issues in young people (Body and Mind, Suitcase Theatre, Research and Evaluation Group), or providing support that works (Walk and Talk).

All of the case study projects have arisen from the contexts in which they are situated and have developed in response to specific local needs, such as particular service barriers (Research & Evaluation Group) or local high risk populations (Walk and Talk). Crucially, however, they have also built on local opportunities and resources available to make the most of what currently exists in each area, including particular staff skills (Body and Mind) and effective partnerships between local agencies (Suitcase Theatre).

In this respect all the case studies selected have in common a certain nimbleness – a flexibility to respond to local needs and opportunities and adapt as appropriate. This adaptability was very evident in Walk and Talk and Body and Mind, where the project staff were able to respond to the complex needs of young people who came along, but also in the Research and Evaluation group and Suitcase Theatre productions where the initial activities were used as a starting point to jump off into a host of other approaches that worked to further the aims and learning from the project.

The case studies were each small in scale. There is, however, considerable transferable learning still to be gained from Right Here’s approaches to supporting the mental health of young adults; particularly in terms of the approaches used to engage with young people, address service barriers and support their mental health needs. Central to all of the case studies is the overarching principle of placing young people at the centre of the work and using their experiences and needs to shape the direction of each activity, and the benefits of doing so.

Further examples of Right Here best practice and the full evaluation of the work will be published in 2014.

Find out more about the Right Here programme and how it is supporting young people’s mental health on our website: www.right-here.org.uk

You can also find out more about the Innovation Labs project by visiting www.innovationlabs.org.uk


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anxiety


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48. Mind (2007), Ecotherapy, the green agenda for mental health

49. Aked J et al (DATE) Five Ways to Wellbeing, New Economics Foundation

Right Here is a collaboration between Paul Hamlyn Foundation, a company limited by guarantee registered in England and Wales (no.5042279) and a registered charity (no.1102927) whose registered office is at 5-11 Leeke Street, London WC1X 9HY, and Mental Health Foundation, a company limited by guarantee registered in England and Wales (no.2350846) and a registered charity (no. 801130), Scottish registered charity (no. SC 039714), whose registered office is at Colechurch House, 1 London Bridge Walk, London SE1 2SX.