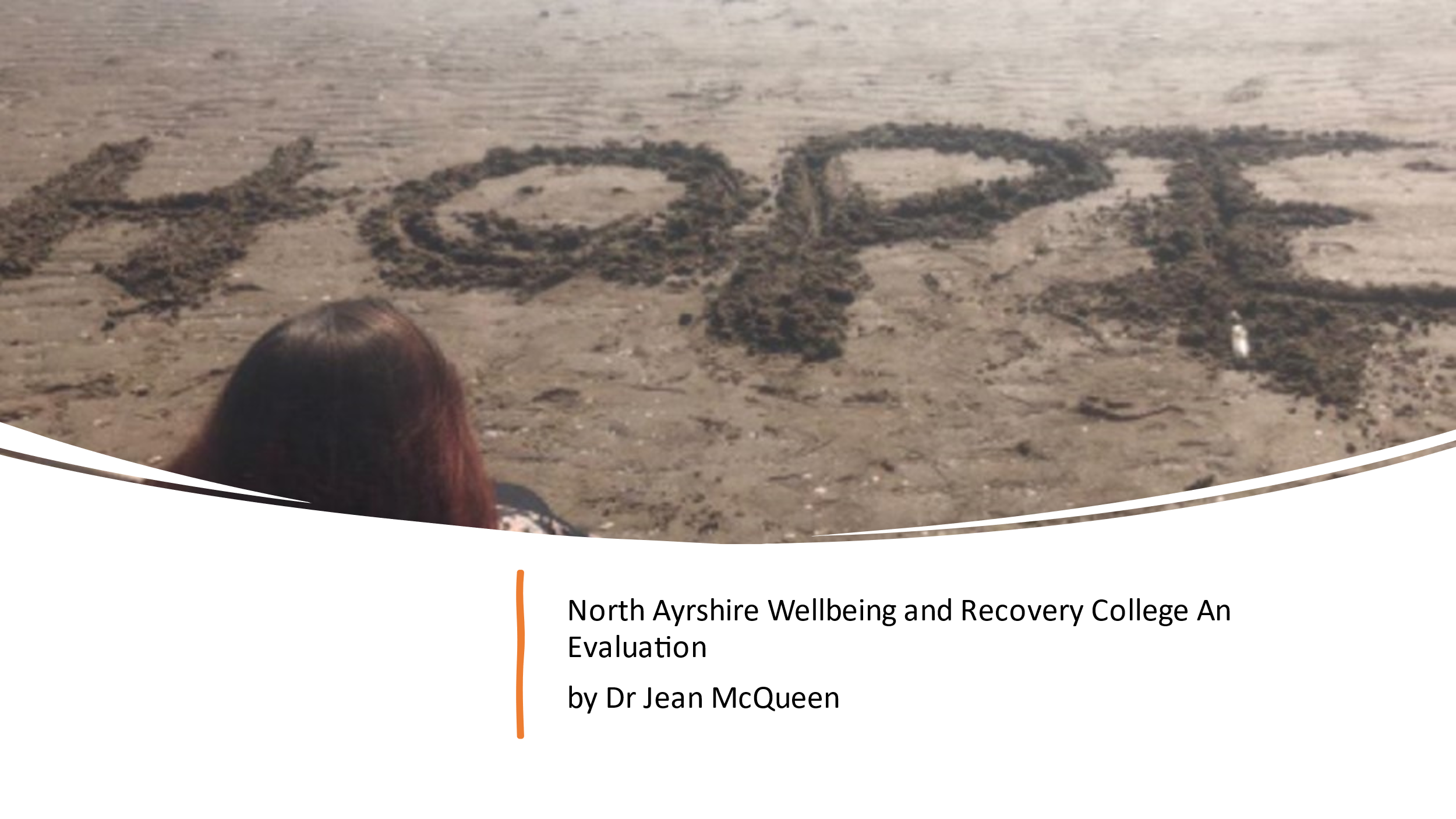
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Aim of the evaluation

To evaluate the North Ayrshire Recovery and Wellbeing College’s impact on students’ personal recovery, mental wellbeing, empowerment, connectivity, hope and optimism. It follows a mixed methods approach using quantitative data from pre and post wellbeing assessments and (S)WEMWEBS scores combined with qualitative data from focus groups with 11 students and 10 members of staff (both core team and independent tutors).

# Introduction to recovery college ethos

Recovery colleges are increasingly being recognised internationally as an innovative approach to promote wellbeing and personal recovery for people with mental health challenges. The COVID-19 pandemic has severely impacted on people’s mental health meaning services which promote good mental wellbeing have never been more important. Across the UK and beyond there is a growing appreciation of the role recovery colleges can play and the differences associated with clinical recovery and personal recovery. Clinical recovery reflects a medical model focusing on the suppression of ‘symptoms’, whereas personal recovery has emerged as an important dimension for people experiencing mental health challenges. Its focus is on learning to live life regardless of the presence or absence of ‘symptoms’ (Slade 2009). Recovery colleges with their focus on personal recovery offer an important counterbalance to the medical model focusing on the importance of wellbeing and recovery as opposed to diagnosis, deficits, and pathology.

Recovery colleges are formal learning institutions that strive to create environments in which people experiencing mental distress feel safe, welcome and are accepted to learn about wellbeing and personal recovery (Leighton et al 2017). Social, personal, and functional recovery are key, and the curriculum promotes individual wellbeing, hopefulness together with the importance of taking up valued social roles in society (Lloyd et al 2008). People attending recovery colleges take on the socially valued role of ‘student’ rather than ‘patient’, something that many students note has a positive, empowering effect on their recovery (Dept of Health Australia 2008). Recovery-focussed learning supports people to recognise their potential, understand personal wellbeing perspectives and make the most of their talents and resources through self-management. In turn this can help people to deal with the health challenges they experience now and in future, supporting them to achieve the things they want in life (Kaye and Edglely 2019). Recovery colleges apply a non-clinical pathway to support people to have a ‘good life’ using specific life-affirming educational approaches to promote self-management and recovery. Whilst the development of recovery colleges in the UK is in its infancy, having begun just over 10 years ago, findings from published research suggest recovery colleges fill an important gap in the current mental health system (Eloise 2019) a theme echoed in the Scottish Mental Health Strategy which outlines a powerful strategic shift towards recovery models focused on assets, strengths, and self-management (Scottish Government 2017).

# North Ayrshire Wellbeing and Recovery College

North Ayrshire Health & Social Care Partnership instigated a public social partnership (PSP) in 2017 to explore the recovery college model, share ideas and build local interest. A 'test of change' Wellbeing & Recovery College was commissioned in 2018, guided by a steering group of stakeholders, delivered in the first year by KA Leisure. Recovery Across Mental Health (RAMH) became the third sector provider in 2019 to continue the three-year test of change and have subsequently further developed the model.

Branded locally as North Ayrshire Wellbeing and Recovery College (NAWARC) it is based on internationally recognised recovery college principles (REF). North Ayrshire Health and Social Care Partnership steers the service and offers direct access to the recovery college for people experiencing challenges to their mental health through self-referral with sign posting by community link workers, GPs, CMHTs and wider mental health services. NAWARC offers an open application process for people aged 16 or over who live work or study in North Ayrshire.

Map

Description automatically generatedThe college serves a population of almost 135,000 people in North Ayrshire and many areas of the community experience moderately high levels of poverty and deprivation. The percentage of people prescribed medication for anxiety, depression or psychosis is higher in North Ayrshire than Scotland overall with the percentage of the local population receiving medication for some form of mental health condition rising each year (Millard et al 2016, NAIJB 2021). With the Covid-19 pandemic there is greater demand for local mental health support, with demand outstripping supply and clinicians at risk of burnout NAWRC has the potential to reduce pressure on GPs and mental health services which are under significant strain.

The college offers people in North Ayrshire an educational approach empowering people to take personal control of their health and wellbeing, while learning new skills, and connecting with others (figure one).

## 

## Figure One: RECOVERY COLLEGE AIMS

## THE RECOVERY COLLEGE AIMS TO:

The recovery college offers students ‘pathways’ to learning and wellness, promoting a sense of self-identity and self-discovery through a skills-based programme using recovery-based principles to improve wellbeing. The facilitation and/or co-facilitation of courses by peer volunteers with lived experience, is a central part of the educational approach within the recovery college. A key feature of the college is that people with lived experience develop an identity as a student rather than a patient and can progress to become a peer volunteer helping others in their recovery journey. The approach recognises the value of lived experience providing a progressive pathway from the role of student to peer trainee, peer volunteer and paid peer trainer. Peers are experts by experience, working as equals, with experts by profession involved in co-production of new courses and curriculum development alongside the student services team.

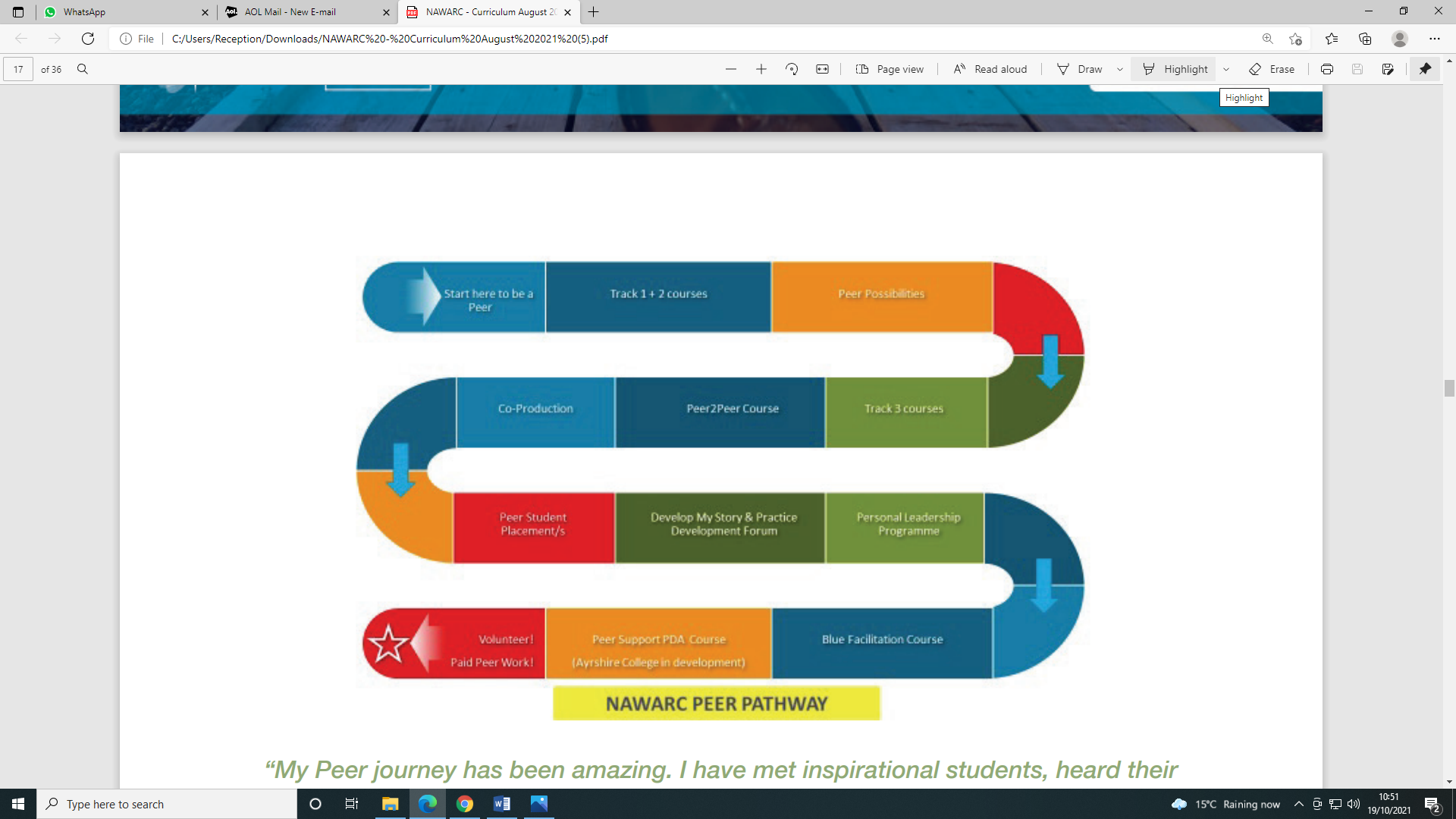
The recovery focused curriculum takes a personalised approach encouraging people to recognise their strengths, promoting self-management supporting students to realise their potential and make the most of their talents and resources.

The Student Pathway

The recovery college is delivered through a progressive three track framework which forms the student pathway

* **Track 1:** New students enter Track 1 which offers introductory courses such as Exploring Recovery which introduces students to recovery focussed models encouraging students to begin to take more responsibility for managing their own wellbeing. In Track 1 the concept of peer is introduced (we are all considered peers to each other). New students are inspired by more established students and peer volunteers who share their learning and their own experiences of progressing their recovery. A Peer Possibilities workshop features in Track 1 to firmly establish the peer model.
* **Track 2:** In Track 2 there is more focus on skill development and self-management, courses include more sessions with higher level of commitment expected including some self-directed learning. Courses include CBT principles and strategies. The ‘From Trauma to Recovery’ course brings trauma informed practice within a solution focussed framework. As students’ progress they learn more about taking control of their wellbeing and set weekly personal goals. Peer Volunteers and Peer Trainees role models who inspire hope are regularly involved in co-facilitating courses and supporting students.
* **Track 3:** In Track 3 there is a focus on going deeper with self-awareness, personal self-development and personal leadership. A co-produced Personal Leadership Programme makes the shift from a recovery focus to a personal development focus. Students are progressing towards graduation and taking their learning out of Recovery College. In Track 3 there is the opportunity to follow the peer pathway. This provides specific training for students who aspire to use their lived experience and recovery story to support other students. They can apply for a Peer Volunteer Post within NAWARC or use their learning as volunteers within their communities or gain paid peer work.

Figure Two: RECOVERY COLLEGE PEER PATHWAY



Application and Assessment

The college takes an individualised approach. Potential students access the college prospectus, explore the resources on the youtube channel and website and attend a ‘What is Recovery College?’ online session. In the application process students identify their learning needs, are supported to complete a wellbeing assessment and the Short Warwick Edinburgh Wellbeing Scale (SWEMWEBS) (see appendix one). The wellbeing assessment consists of 4 components which students’ rate 1-10. The SWEMWBS is a seven-item questionnaire which measures aspects of positive mental wellbeing scored out of 40. SWEMWBS has established validity and reliability, good psychometric properties and is able to distinguish between population groups with good internal consistency (Stewart-Brown et al., 2009, Warwick Medical School, 2015). Enrolled students receive a personalised timetable of courses and are invited to attend an online induction session. Each student’s journey and length of engagement with the college is personalised. Students complete learning plan reviews and wellbeing assessments at regular inter-semester reviews and reflect on their learning outcomes and ongoing learning goals. Until the pandemic, March 2020 all courses were delivered face to face at various locations across North Ayrshire and since COVID 19 all courses continued, online, via Zoom.

The Courses

Courses delivered are based on the student cohort needs. New courses are developed for identified gaps and are often instigated during a co-production course which sits in track three.

## Figure Three: OUTLINE OF TRACKS 1-3 & CREATIVE COURSES

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The service specification expects the delivery of 15 courses per semester and 150 students over 18 months. NAWARC has a range of courses across 3 tracks (table one) and on average offers 30 courses per semester. Courses are developed according to identified needs in co-production with students who attend the recovery college. e.g. currently in development is a ‘Thinking about Work’ course and a ‘Work Well’ course as part of a Co-production course with Track 3 students and professionals from employability sectors. To date on average 70 students enrol each semester.

The NAWARC Team

The people involved in the delivery of NAWARC bring a breadth of experience, skills and knowledge from professional tutors, partnership organisations, the Health and Social Care Partnership (HSCP), Peer Volunteers, Ayrshire College staff and a small RAMH Student Services Team. Professional expertise includes: Occupational Therapy, Physiotherapy, Psychotherapy, Film + Documentary Production, Speech Therapy, Life Coaching, Leadership and Personal Development, Youth Work, Community Development, Business, Vocational Rehabilitation, Training & Education and Artists. NAWARC includes experts with lived experience from third sector organisations, a mental health charity and peer volunteers and a peer trainer.

The student services team includes a part time co-ordinator, an assistant co-ordinator, administrator/support worker, two part time, seconded HSCP Self-Help workers and will soon be joined by a part time peer worker.

# Evaluation Methods

A mixed methods evaluation was undertaken in June/July 2021 by Dr Jean McQueen an independent research consultant to evaluate the impact of the NAWRC on the students

* wellbeing
* self-management and sense of identity
* personal recovery
* empowerment
* connection with others
* hope and optimism for the future
* inclusion in education, training and employment

# Data Collection

Quantitative data using controlled before and after wellbeing scores from the validated (S)WEMWBS tool and wellbeing questionnaire were analysed using pre and post measurements. Students were invited to complete these assessments each semester. Data from (S)WEMWBS was entered into Excel and a total score for each questionnaire was calculated by summing up all individual scores. The total SWEMWBS scores were converted to metric scores based on the SWEMWBS scoring guidelines (Warwick Medical School, 2015). The data were then transferred to SPSS (IBM SPSS Statistics version ??) computerised statistics programme for analysis with mean scores used to calculate differences in wellbeing as students progressed within the college.

Qualitative data was gathered through five focus groups conducted online using Zoom. 11 students and 10 staff members participated. The focus groups were conducted separately for staff and students to ensure relevance of the questions and maximise opportunities for students to express their views independent of tutors and staff. Each focus group lasted around 2 hours. Facilitated discussion, by the researcher, explored student and staff perceptions of the recovery college approach. Student group 1 included students who were newer to the college i.e. track 1 and had completed one semester, group 2 were track 2 and 3 students and group 3 were those involved in the peer pathway who had also completed the Personal Leadership programme. Two staff focus groups were completed one which included the recovery college student services team and the other with recovery college tutors. The focus groups were recorded and transcribed, then analysed using deductive thematic analysis. Analysis included students’ perceptions on self-management, personal recovery, mental wellbeing, empowerment, connection with others, hope, optimism for the future and inclusion in education, training and employment.

# Quantitative: Wellbeing Results

Since the recovery college began 291 students have completed baseline wellbeing assessments and (S)WEMWEB. At the time of the evaluation students were at different places on the track programme. 139 students had completed both baseline and second assessment periods, 49 have completed baseline, second and third assessment, 24 completed 4 assessments. At the time of analysis scores were only available for a small number of students who had completed their 5th assessments and so it was not possible to include these in this statistical calculation.

Available pre and post (S)WEMWEB data were analysed to establish the impact on student wellbeing. Mean and median scores were compared for students who had completed their 1st, 2nd, 3rd and 4th wellbeing assessments (see table two). These results are taken within the context of a global pandemic (COVID19) and during the pandemic focus was on student welfare, maintaining connection, and supporting students to get online and this meant less emphasis on learning plan review. Positive changes in wellbeing were demonstrated (table one, table two).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Table One: MEAN WELLBING SCORE 1st, 2nd, 3rd, 4th assessment | | | | |
|  | baseline | second | third | forth |
| N | 291 | 139 | 49 | 24 |
| Mean | 16.22 | 18.86 | 24.67 | 24.71 |
| Median | 16.00 | 22.00 | 27.00 | 26.50 |
| Minimum | 6 | 8 | 7 | 8 |
| Maximum | 40 | 39 | 40 | 40 |
| Range | 6-40 | 8-39 | 7-33 | 8-32 |
| Std. Deviation | 9.266 | 11.462 | 8.863 | 9.388 |

Data collected from the students’ wellbeing assessments demonstrated positive changes in wellbeing at all time frames (Figure four). Overall, there was a mean difference between the 1st and 4th assessment of 8.49 points demonstrating significant positive changes in students’ wellbeing during their recovery college journey. Scores increased most between 2nd and 3rd assessment with a mean difference of 5.81 points with changes also shown between 1st and 2nd assessment with a mean difference 2.64 and a smaller change shown between 3rd and 4th assessment.

## Figure Four: WELLBEING SCORES

Mean and median scores were compared for students who had completed their 1st, 2nd, 3rd and 4th (S)WEMWEB assessments (see table two).

## Table Two: (S)WEMWEB SCORES

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **MEAN (S)WEMWEB SCORES** | | | | |
|  | WW1 | WW2 | WW3 | WW4 |
| N | 289 | 102 | 49 | 24 |
| Mean | 16.78 | 21.55 | 22.41 | 23.58 |
| Median | 17.00 | 22.50 | 22.00 | 23.50 |
| Minimum | 0 | 7 | 10 | 12 |
| Maximum | 34 | 35 | 35 | 35 |
| Range | 34 | 7-35 | 10-35 | 12-35 |
| Std. Deviation | 7.256 | 5.728 | 6.519 | 6.413 |

Data collected from the students’ (S)WEMWEB assessments demonstrated positive changes at all time frames (Figure five). Overall, there was a mean difference between 1st and 4th assessment of 6.8 points demonstrating significant positive changes in students’ wellbeing. Scores increased significantly between 1st and 2nd assessment with a mean difference 4.78. General population norms for (S)WEMWEB scoring has been measured as 23.6 (Health Survey for England 2011). For students enrolling in the recovery college their baseline wellbeing was significantly lower than the population norm. By their 4th assessment period mean scores available indicate wellbeing indicative of population norms at 23.58.

## Figure Five: MEAN (S)WEMWEB SCORES

This increase in wellbeing scores pre- to post-recovery college suggests that the college had a positive impact on student wellbeing. Meaningful improvements were evident bringing student scores on 4th assessment into line with those expected of the general population of 23.7 for men and 23.2 for women (Ng Fat 2017). This meaningful improvement is supported by data in-keeping with the validation manual for the tool. This states if a participant’s score increased by three to eight (S)WEMWBS points during the project, this demonstrates that mental wellbeing has meaningfully improved. Mean change scores for students in this evaluation show change of 6.8 suggesting meaningful improvements in wellbeing. Concurring with this data, students who participated in focus groups reported feeling more hopeful about the future, spoke of better self-management skills, focused goals, aspirations and a sense of hope and optimism for the future.

# Qualitative Findings

# Student and Staff Perspectives

Analysis of focus data revealed five superordinate themes which included the value students placed on their:

* ‘student’ identity,
* the development of self-management skills,
* how the college supported their personal recovery and mental wellbeing
* the value of peer support.
* sense of hope and optimism for the future

# Student Identity

Across each of the three student focus groups, the newer track one students and those further in their recovery college journey, emphasis was placed on the importance of the word ‘college’ and identity as a student. For many this made engaging with the college easier, due to less perceived stigma with one student indicating they would have been unlikely to enrol if it had been a more traditional ‘medical/clinical’ approach to mental health.

*It doesn’t bring the same stigma being part of a college and calling it that well it is the right choice.* (track 1 student)

For some the college name was a factor that influenced their decision to attend, as it took away perception of fear related to stigma with the name college instilling more of a drive towards learning and active participation in recovery. Using the college name supported a self-management, self-discovery approach to learning about mental health and how to achieve important personal recovery goals.

*I found it easier when people ask to say I go to recovery college instead of therapy. You feel with therapy people judge you but with recovery college you are there to learn and grow and that’s just what it is I don’t feel embarrassed I describe it as learning and growing so I feel proud to be part of it.* (track 3)

The name college is synonymous with learning, identifying as a student involves active participation as opposed to the more passive role of being a patient and for many of the students this was perceived as important. One student who had progressed to the role of peer tutor reported her preference for the college branding.

*If it was a specific mental health thing I don’t think I would have come. I recognised I had mental health issues due to trauma and the fact that I could come to recovery college where the main focus is recovery suited me ……. there are no therapeutic interventions. It’s all about learning for yourself we are not offered therapy, we are not offered counselling, we are not offered any of these things it’s a group of people learning together and that’s why I like it being called the recovery and wellbeing college which is its full name and it’s important not to forget the wellbeing part’ (peer tutor)*

This sentiment is echoed by the recovery college member of staff below

*‘When you are a patient sometimes the view is you will be helped…… but as a student at the recovery college it’s about learning and using that you will help yourself’ (*Recovery college staff member)

The name college accentuates personal responsibility for learning and something that featured strongly in discussions with the quote from one of the part time tutors below referencing differences from the medical model

*‘I think if we go back to the medical model which is parent child then adult to adult that is for some people a surprise. For many it’s the first time that people have experienced that and at the college we expect to deal with adults or us in adult to adult rather than in child mode’*. (part time tutor)

In the recovery college model, the emphasis is on creating an educational and learning programme. The focus is very much on learning and developing personal coping strategies which students can use in their day-to-day life to achieve personal goals. As a member of the college staff team describes

*‘We don’t run outside term time we have a curriculum we have semesters* students *all join at the same time as a cohort of students. We don’t run over the summer period so there is not the dependency …….though of course there is a risk there and a good measure is does this happen in a regular college and if it doesn’t we shouldn’t be doing it. We don’t ask people about their trauma history or clinical history we ask them about their learning needs so we might find out some of their mental health and wellbeing history but not necessarily’ (recovery college member of staff)*

Development of self-management skills

Self-management through the development of knowledge and skills framed much of the discussions among students who participated in the focus groups and reflected on their recovery college experience. One of the students who had recently joined the recovery college in track one identified that taking responsibility for her goals formed an important skill learned within the recovery college so far.

‘*I’ve learned that I need to set goals for myself that I know I can achieve each day. Just having simple goals that I know I can achieve each day, well it does affect my mental health in a good way and not in a negative way anymore. Before I started recovery college they (my goals) were set a bit high. With these big unachievable goals (if that makes sense) but through doing the i-matter course* *I’ve learned that I need to set goals for myself that I know I can achieve each day.*’ (track 1 student)

Students spoke of the hope and sense of empowerment that the recovery college offers with one student summarising his journey from the small steps he took initially to the difference he notices using tools and techniques learned at the recovery college. This has enabled him to get out in the community and back on public transport.

*‘before I was ill for 10 years and 2 years ago I hit rock bottom I got swallowed up in my illness and I thought this is me till I die. I was totally lost I couldn’t see past my front door. Recovery college gave me the tools to look at it and think I can get through this….being well it’s a bit about self-confidence and gently the recovery college was giving me the tools to think this is my life, I need to take charge again like getting on the bus for the first time the tiny baby steps helped instead of it being a huge cloud’* (track 3 student)

For this student using public transport again to get out and about enabled him to re-engage with his local community and this represented a milestone in his recovery

‘*now I can go to the next town which is about a 40 min ride away and that’s fine I’ve also been on the train as well and sometimes to keep my confidence I get the train and then bus back. It’s been a huge benefit not just for me but for my family too they see the difference’* (track 3 student)

The benefit to others was also eluded too when one of the students compared the impact her mental health challenges had on her children

*‘before if things got tough I’d just shut right down and freeze in the past I’ve become overwhelmed I didn’t do any house work didn’t take the kids to their clubs I was neglecting them actually …..not through choice it was just really hard to get myself back on track but now I take them everywhere there are so many clubs that they go to and I feel confident to take them on my own’* (track 3 student)

Students who participated in the focus groups spoke of the impact the recovery college approach had on their personal recovery and mental wellbeing and the positive impact on those around them too. Thus, adding weight to the findings from the wellbeing and (S)WEMWEB assessments shown earlier.

# Personal Recovery and Mental Wellbeing

Students spoke openly about their recovery journey and although it wasn’t always easy and there are still challenges to their mental wellbeing, many students believed the recovery college offered them tools to minimise challenges to their mental wellbeing. Students spoke positively about the coping strategies, tools they valued, and personal learning. Students used these to help counteract challenges to their mental health. As one of the track 3 students states below

*‘I’ve still got a fair way to go and there will be times where I take a step back but I feel it’s given me the tools to say well ok I’ve had a bad day and now instead of that being for 2 or 3 weeks it’s only a low spot for a day or so and then I am able to bring myself back. One of the good things about the recovery college is they send out handouts or booklets and so when at times I hit rock bottom I’ve got a drawer for recovery college stuff.I can go there and I rifle through and go back through things I’ve written. Even though I am having a bad day I can look back at where I was 2 years ago even a year ago and say no actually I have come so far and that actually lifts me my mood and so and it’s pulled me back up again quite a few times’ (track3)*

In the focus groups (both students and staff) there was a clear emphasis on the personal recovery approach of the college. Students are offered choices and actively involved in selecting curriculum options with support from their student services team. One of the students, who is now a peer tutor, spoke of how she purposely chose courses with a creative focus early in her recovery college journey. She felt more comfortable with what she perceived as a more indirect approach to her mental health issues

*‘I know that when I first started I didn’t really choose courses that dealt with issues (mental health) directly. I always felt more comfortable with creative based approaches because it’s an indirect approach to recovery. When we were working in face-to-face classes we used to have one that was crafty corner and it might not sound like a wellness class because you are doing creative projects but there is lots of scientific research around it. You are physically doing an activity it helps with social anxiety your mind is distracted from the anxiety because you are focusing on something and wee simple things like that I would say helped me the most. You know if I am physically doing something, and I am not tackling something directly but now I can do it more directly doing the classes and I really love the psychological type of class but in the beginning that was really intimidating for me.’ (peer tutor)*

The value and contribution of the creative aspects of the curriculum are expanded on further by one of the recovery college staff members and one of the students who describes the impact of mindful photography

*‘For the creative courses it’s really come and have a go it’s all about the social connectedness side and using the creative activity to encourage people to take part, share more and to talk about what they are doing’* (recovery college member of staff)

The mindful photography class in one of the student’s opinions acted as a space for reflection and relaxation.

*‘mindful photography I found very relaxing you took a photograph of the same thing every week over a number of weeks and saw it changing over a length of time and for me it reflected how people change over a length of time and by the end of it I was totally chilled out the most relaxing two hours of my week. The courses inspire you to learn more to do more to help other people’* (peer tutor)

These references to the creativity aspect of the recovery college are explained further by one of the track 3 students who spoke of how the creative courses and the more psychological aspect of the recovery college belong and operate naturally together and this is a powerful medium for recovery

*‘The creativity and trauma work really goes together the lift you get from the recovery college is great we made our inner critic a gargoyle face for example out of clay and all the things our inner critic says to us and we spoke a little bit about that but there was no pressure to talk. We then squashed it up to represent muting the inner critic and you make your inner warrior and I made a sunflower after that so the creativity and therapy goes together. We did paintings in class (oil painting) and you could see the happiness in everyone’s face at getting to use oil for the first time.* ‘(track 3 student)

# Peer support enhancing recovery

Staff and college tutors emphasised the college approach where peer support is an important feature. This was echoed by students who took part in the focus groups who valued the opportunity to meet others, describing the sense of comradeship gained from fellow students who were also on their personal wellbeing and recovery journey. One of the track one students spoke of the importance of this connection with fellow students which builds on the earlier comment made by the recovery college staff member.

*‘Meeting people has helped me for sure and to know that I am not alone, everyone is the same with different problems and it helps to know we are all in the same boat learning and developing together’*.(Track1 student)

The importance of peer support and being connected is expanded upon further by one of the peer tutors

*‘I think for me the biggest thing is the sense of connectedness, before recovery college for a year I was at home by myself. I’d have panic attacks and suddenly when I had to go somewhere important I’d think of all the jobs I needed to do even although I’d been in all day and hadn’t done them, I’d use that as an excuse not to go out. When I went to college the community and knowing that other people felt the same way before they left to go out of the house I think it’s that sense of community you know there are a lot of things go on before and after the classes with people talking’* (peer tutor)

As the curriculum progresses students’ are offered the opportunity to become peer trainees and peer volunteers and this helps to build confidence and a sense of responsibility as explained by a member of the recovery college staff below

‘*with the offer of peer-to-peer placement they (students) get to see behind the scenes they get the slides the session plan and meet online before the course. I (tutor) would highlight what they need to do I’ll ask a question I want you to answer first and then week by week their responsibilities can be built up. They are involved in the reflection afterwards, what went well what didn’t go well. So they are getting a bit of peer to peer experience and Zoom has made that easier to do as well. They get a taste of co-facilitation experience.’* (College tutor)

*‘Peer volunteers were students and the way I approach it is…. this is our class we are doing this together every session and the peer volunteer gets to input choices and in the preparation meeting I remember I was surprised that if she says I don’t think people should watch this film and I say ok let’s go for something else’* (part time tutor)

The perceptions from students who participated in the peer pathway was overwhelming positive and for some a sense of disbelief that they were now able to take on this role. For the peer trainee below a real sense of pride and achievement.

*‘We have really followed each other’s journey (fellow students) it has been amazing. I’m now helping to co-facilitate a peer-to peer course and a leadership one. I meet with the tutor prior making up the session plans and get involved in everything to facilitating and evaluating at the end. It’s been an amazing experience and working with learning partners it is so helpful all the strengths you build up and working with others and their strengths. Some you didn’t even know you had but you come across them so yeah it’s just been an amazing journey and next year I will be a peer volunteer trainer’* (peer trainee)

This sense of personal responsibility as an equal and how this could be experienced by the students is expanded upon by one to the free-lance tutors

‘*some of the peers have said you really push us further than I’ve expected and I say to them ok if that is too much you need to say to me as an adult to adult……. I’m thinking you’re ok as your thinking equal. I am astute enough to sense if someone is not ok and so it’s not about I know everything and you don’t’ I’ve got a story I don’t need to tell it but if there is a space for me to share it and if it might be helpful I can do that’* (part time tutor)

For one of the students the peer pathway represented an opportunity for some skills practice and this formed an important part in their wellbeing and recovery journey.

*The peer-to-peer track three is about how can I put what I have learned into practice whilst still continuing on my own recovery journey as well. So for me it has that added focus and chance to try out the skills and knowledge* (track 3 peer trainee)

# Hope and optimism for the future

A number of students on track three or above who had been with the recovery college longer summarised what their attendance so far has meant and how the curriculum has enhanced their wellbeing and recovery with some powerful reflections on where they were on first attendance and what they had achieved.

*‘I’ve gone from a very low place where I felt as if I was always 10 steps behind the world and other people. I think I’ve caught up with the recovery college and what it stands for and then technology wise too with zoom I feel as if I have got on at the ground floor of a high building and the* opportunities *just go up and up’* (peer volunteer)

The value of personal responsibility for learning was highlighted to by one of the students who is now a peer tutor. Here he describes his next steps suggesting that the recovery college helped him to ‘plan for the future’ with a focus on personal empowerment and next steps.

*‘A lot of learning has taken place for me and lots of things I want to take forward in my own way. A lot of books I want to read. Nancy Klein and many other books taking that forward and investigating as I go are my next steps’(*peer trainer)

Students appeared to express a very real sense of hope and optimism for the future speaking about personal leadership and the opportunities to co-facilitate courses as part of the progressive curriculum offered.

‘*starts off with basic recovery and as you get onto track three you are moving away from recovery into leadership and you are looking at how you are going to take your life forward. By the time you are in track three you have the opportunity to be a peer trainee where you are working with a tutor on a course to deliver the course.’*

In summarising what they have been learning and how this has enhanced their wellbeing. One of the track one students reflected on a skill that he believed everyone should develop

*‘I’ve learnt about how to manage bad thoughts and that’s another skill everyone should have’* (Track one student)

Another student reflected on the shared experience with tutors and staff members with this, in their reflection, forming an important aspect of the recovery college approach

*‘My biggest thing about the college is they don’t judge people. It’s the way they speak to you like adults an equal not a person with a problem and your problems are not the main focus even the people who run the college have problems.’* (Track one student)

In terms of next steps many of the students who had attended the recovery college have already gone onto positive destinations such as work, further training and cited the recovery college as being a catalyst for change and positive mental wellbeing. One of the track three students outlines their future plans below. Suggesting that being better able to cope with difficult things means she can focus on plans for starting her own business

*‘It’s given me more confidence. The ‘You matter always’ course makes me think about myself taking more time for myself and I’ve been doing that and being more creative at home its inspired me to start my own business. For me I’ve got the confidence to go ahead …… so I’m now more persistent with this I can deal with my past trauma a lot better and understand things. I know there are difficult things in life but I do feel better able to cope with them and move forward’ (Track three student)*

# Conclusions/summary

The recovery college offers students ‘pathways’ to wellbeing through a personalised learning and skills-based programme co-produced with peers who have lived experience of mental health challenges. Data from standardised validated wellbeing assessments undertaken at regular timepoints show significant changes in students mean wellbeing scores through their time at college. On entry to the recovery college mean wellbeing scores were well below population norms and by track three and moving towards graduation they were comparable with population norms. These results are supported by focus group findings where students spoke of a growing confidence in their self-management skills with goals, aspirations and a sense of hope and optimism for the future. The students valued the peer support and sense of community they experienced from being part of the recovery college meant they perceived less mental health related stigma. Many welcomed the opportunity to become peer trainees and peer volunteers which enhanced their confidence and sense of identity. Data from the recovery college suggests many students have gone onto positive destinations such as work, further training and cited the recovery college as being a catalyst for change and positive mental wellbeing. The impact of the college was felt wider than the individual student with students emphasising how improvements in their wellbeing had a positive impact on those around them particularly their family. These findings compare well to the international evidence around recovery colleges. This demonstrates their impact on wellbeing, recovery, improved quality of life and well-being with increased knowledge and self-management skills and reduced mental health service use (Thériault 2020). Findings from this evaluation suggest the recovery college has a positive influence on mental wellbeing, hope and recovery.

Key findings

* Meaningful improvements in wellbeing were demonstrated as students progressed through the college track style curriculum
* By track 3, fourth scoring (graduation) wellbeing scores were comparable with population norms
* Improvements in students’ wellbeing had a positive impact on not just the student themselves but those around them particularly their family
* Students expressed a sense of hope and optimism for the future
* The recovery college model delivers on strategic shift to recovery, assets, strengths, and self-management outlined in Scotland’s Mental Health Strategy
* The recovery college has the potential to reduce pressure on over-stretched mental health services

# Appendix 1: Wellbeing Scales

**We would like to know about the impact in which taking part in the Wellbeing and Recovery College has on your life. Please rate yourself against the following areas.**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **1. I have good coping and self-management skills** |  |  |  |  |  |  |  |  |  |  |
| **2. I am able to make good connections with others (friends, family and peers)** |  |  |  |  |  |  |  |  |  |  |
| **3. I have a sense of empowerment (feel in charge of my life) and feel confident in making decisions** |  |  |  |  |  |  |  |  |  |  |
| **4. I have a sense of hope and optimism for the future** |  |  |  |  |  |  |  |  |  |  |
| **SCORE** | **/40** |

**5. Short Warwick Edinburgh Mental Wellbeing Scale (S) WEMWEBS**

**Below are some statements about feelings and thoughts.**

**Please circle the number that best describes your experience over the last 2 weeks.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Statement** | **None of the time** | **Rarely** | **Some of the time** | **Often** | **All of the time** |
|  | **1** | **2** | **3** | **4** | **5** |
| 1. **I’ve been feeling optimistic about the future** |  |  |  |  |  |
| 1. **I’ve been feeling optimistic** |  |  |  |  |  |
| 1. **I’ve been feeling relaxed** |  |  |  |  |  |
| 1. **I’ve been dealing with problems well** |  |  |  |  |  |
| 1. **I’ve been thinking clearly** |  |  |  |  |  |
| 1. **I’ve been feeling close to other people** |  |  |  |  |  |
| 1. **I’ve been able to make up my own mind about things** |  |  |  |  |  |
|  | **DATE** |  |  | **SCORE** |  |

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