



## Step Up: An asset based approach to transitions

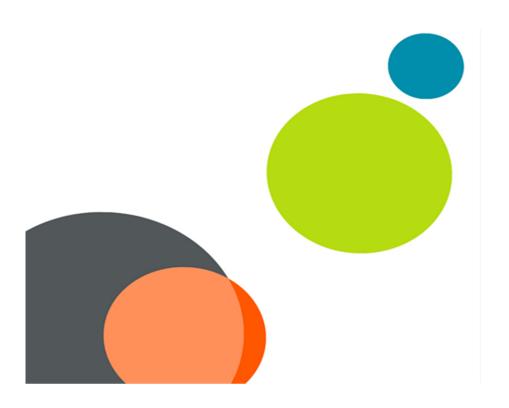
## **Executive Summary of the final Evaluation** report

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Prepared for Rethink Mental Illness

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## 1. Executive Summary

This is the executive summary of the final evaluation report for Step Up: An asset based approach to transitions (Step Up) project. Step Up was funded through the Big Lottery Fund's Reaching Communities programme and delivered by Rethink Mental Illness between September 2015 and August 2018. It aimed to enable young people aged 16-25 years to better plan for, manage and cope with periods of major age related transitions. Co-delivered by Rethink with a group of young Champion volunteers, interventions varied from one-off 1-hour sessions through to 6-session projects. They were delivered across London boroughs, primarily within secondary schools. Step Up provided practical support, information provision and skills development, giving participants tips and tools for coping during future transitions. Activities included sharing:

- Examples of mental health issues/diagnoses;
- Personal experiences from facilitators around mental health and coping strategies;
- Tools and interactive exercises for managing and maintaining mental health;
- A booklet with a range of resources for young people, with signposting to additional support.

A process and outcomes evaluation of Step Up was co-produced by the Tavistock Institute of Human Relations, working with Rethink staff and Step Up champions. It began with the co-creation of a project Theory of Change and Mental Wellbeing Impact Assessment, which informed the co-design of participant surveys, a number of Action Learning Sets and evaluation meetings with champions and staff, interviews with Rethink staff and champions, and an evaluation film<sup>1</sup>. Although follow-up evaluation activity with participants, including interviews and focus groups, had been designed, these did not take place due to challenges with setting these up.

Over 580 young people took part in 35 interventions, of which 561 completed surveys<sup>2</sup>. There were between 2 and 53 participants per intervention and 21 partner organisations were involved in total. Analysis of survey data collected demonstrated that the majority of funded outcomes were achieved, including 90% or more participants reporting:

- improved knowledge of mental health services and other local support networks;
- a clearer understanding of the process of transition (e.g. to university);
- new skills or tools for managing health and wellbeing during a period of change.

<sup>&</sup>lt;sup>1</sup> Available to see online: http://www.tavinstitute.org/news/step-up-final-evaluation-report-and-film/

<sup>&</sup>lt;sup>2</sup> Most surveys were completed at the end of one-off sessions. A small number (18) were completed pre- and post-activity. Not all participants responded to every survey statement or question.

Over 80% said that they felt more able to cope with and adapt to a major change after taking part in Step Up.

The majority of participants (over 75%) reported enjoying sessions and were particularly positive about champions, with lived experience of mental ill-health, being involved in Step Up's design and delivery. The lack of longitudinal data following participation meant that it was not possible to say whether or not Step Up was of benefit to young people through transitions or with subsequent mental health difficulties. Additionally, a number of factors prevented the project from being able to demonstrate the effects of interventions on participants' resilience levels. However, participant responses became increasingly positive over the three years, suggesting that activities were improved in response to earlier feedback. For instance, in Year 1, 49% of survey respondents agreed that sessions helped them make sense of their current situation. By Year 3, 78% agreed that this was the case.

Additionally, data analysis identified that participants who reported having previously used mental health services were more likely to agree that sessions helped them make sense of their current situation (50% strongly agreed) and that session content was relevant to them (48% strongly agreed), in contrast to participants reporting no previous mental health service use (23% and 25% strongly agreed respectively). However, social, emotional, knowledge and skills-based benefits from Step Up seemed most apparent for the champions who helped co-produce the project.

A whole range of benefits were reported by champions including new networks and friendships, pride and increased confidence, employability skills including teamwork, presentation and communication skills. Most champions interviewed connected their involvement in Step Up with further volunteering and employment opportunities. Indications from the data were that the champion experience could be beneficial to a young person's mental health and ongoing resilience. Some individual champion testimonies can be seen in the Step Up Evaluation Film. Despite the overwhelmingly positive results though, Step Up did also experience challenges.

During the course of Step Up, there were a number of changes, including in the project's staffing and some of the project delivery. During Year 2, pauses in delivery, the change of project manager and changes to some of the project management procedures and session content were experienced negatively by most champions interviewed. For instance, the project moved from being run primarily by one key member of staff, working with champions, to being delivered by a staff team, with champions. This seemed appropriate in relation to addressing the potential pressures and expectations around staff roles and capacity on a co-production project. It improved support for the staff team, clarified boundaries and operational processes for staff and champions. However, it also led to some feelings of disappointment and disillusionment for champions who had been involved since the beginning of Step Up. Whilst a difficult experience for those involved at the time, the learning from this can inform the planning of future co-production projects and address expectations from the start.

A number of recommendations were developed as a result of the process and outcomes evaluation. Some of these have already been implemented in the design of future Step Up activities, which have been fundraised for or which are in the process of being developed. Recommendations are summarised as follows:

- Ensure a structure is built around co-production projects, including more than one staff contact, a project steering group with staff, partners and champions represented, clear guidelines for those involved, and ongoing training and support;
- Consider a reduction of participation targets, to enable focused, longer-term projects to take place with smaller groups;
- Research the potential for some targeted work with possibly under-served groups such as young men, young people from BAME communities, and young people accessing mental health services.
- Embed training / introductory work with staff from partner organisations to support interventions with young people;
- Review and update the project Theory of Change in the light of what has so far been learnt from Step Up;
- Explore ways of cascading out the champion / peer leadership model to more organisations and young people, with in-depth longitudinal evaluation of outcomes for champions;
- Embed follow-up evaluation activity with participants and partners to understand what the project's longer term outcomes are, and to better understand what works best, what is and what is not helpful for different groups of young people;
- Consider developing specific 'peer researcher' roles for champions, to build capacity for evaluation activity on projects.

In conclusion, evaluation results have shown that Step Up worked successfully to deliver co-produced interventions that raised young people's general mental health awareness and offered tips and tools for managing mental health at times of change. In particular, participants valued the involvement of champions with lived experience in the project design and delivery. Champions reported a range of social, emotional and work-related benefits from being involved and the project over-achieved against most of its funded outcome targets. However, it was not possible to evidence longer-term outcomes from participation. Future iterations of Step Up could seek to understand better the longer-term benefits and potential harms of such activities as well as explore in more depth the mental health outcomes, such as increased resilience, for those undertaking the champion role. Overall, it seems that projects like Step Up do fulfil a need in supporting young people at times of increased stress, but more research is needed to find out what in particular works well and how projects like Step Up can support longer-term mental health outcomes for young people.