

# SEE ME

## CROSS CUTTING THEMES

THREE YEAR PROGRAMME EVALUATION  
NOVEMBER 2016 - OCTOBER 2019







## SEE ME - CROSS CUTTING THEMES PROGRAMME EVALUATION

### Foreword



*Mental health stigma and discrimination continues to blight the lives of substantial sections of society and, with the increasing awareness that we all have of mental health, the significance of tackling and reducing such stigma and discrimination has never been greater. The See Me programme in Scotland is at the forefront of international efforts to eliminate*

*mental health stigma and discrimination and aims to achieve its goals by tackling these issues in a number of different ways and contexts. Strategies include a range of interventions, including a social movement approach; community work, education-based, workplace and health and social care programmes; and communications and policy activities. The importance of social contact as a mechanism for tackling mental health stigma and discrimination runs throughout all of this.*

*The importance of critically evaluating these programmes, so that successes are built upon and limitations addressed, has resulted in this three-year evaluation of See Me led by the Mental Health Foundation (MHF) in Scotland. As part of the evaluation, I have the pleasure of acting as Chair of the See Me Academic Advisory Group. The Advisory Group also includes a number of other academics associated with the University of Strathclyde, who advise and work with MHF evaluation leads on specific See Me programme areas. The Group supports the thorough and high-quality programme evaluation delivered by MHF, which is essential for the long-term realisation of the aims of See Me. I believe that this three-year evaluation has, and will continue to, identify both what works to tackle mental health stigma and discrimination, and what needs to work better.*

#### **Dr Simon C. Hunter**

Chair of the See Me Academic Advisory Group  
Senior Lecturer, Psychology, University of Strathclyde

## Report overview

The See Me Research, Learning and Evaluation team is led by MHF Scotland. The team consists of a Research and Evaluation Manager and two Research and Evaluation Officers who are responsible for evaluating specific See Me programmatic areas. This model ensures that research and evaluation remains independent from programme delivery. An aim of the See Me research and learning function is to gather evidence to demonstrate whether the See Me programme is meeting its intended outcomes. The team is also guided by the research question what works to tackle and eliminate mental health stigma and discrimination?

This report presents the cross-cutting themes and issues that have emerged over the past three years. It is part of a suite of six aligned reports, with the remaining five reports providing insight into successes and learning from the See Me programmatic areas: Social movement, Workplace, Education and Young People, Health and Social Care, and Communications. This report aims to support and contribute to the continuing approach of See Me and partners, by strengthening the evidence base to inform what works.

## Methods

A mixed methods approach was applied across the evaluation of the See Me programme. Both qualitative and quantitative data were gathered to assess whether the medium-term outcomes of See Me are being met and to provide insight into the processes and mechanisms of change that have contributed to this impact. Quantitative data that has been collected and analysed over the past three years (2016 – 2019). This includes data relating to e-learning training, Community Champion training (adult and youth) and community feedback gathered through 'overarching question' cards that ask a single question to gauge intended behaviour change following attendance/participation in a See Me event. This approach was introduced in 2017.

Quantitative data was gathered directly via Survey Monkey or through paper surveys which were then inputted into Survey Monkey. Data cleaning and descriptive analyses were undertaken using Microsoft Excel. The descriptive analyses focused on calculating and comparing baseline and follow-up mean values for questionnaire statements to assess overall changes in knowledge and attitudes. The majority of surveys include questions where participants are asked to rate their agreement with a number of statements (both positive and negative) on a scale from strongly agree to strongly disagree. To allow comparison

between the baseline and follow-up surveys, responses were given a numerical rating that includes reverse coding for negatively worded statements. For statements that are worded positively, agreement was rated from 1 to 5, with 1 corresponding to “strongly disagree” and 5 corresponding to “strongly agree”. Therefore, higher values correspond to more positive attitudes. For the purposes of analysis, “don’t know” responses were coded as a neutral response and assigned a value of 3, to minimise the amount of missing data.

Qualitative data has been gathered via interviews and focus groups with a wide range of stakeholders within each of the core programme areas including school staff and pupils, managers and employees in workplaces, health and social care staff and See Me volunteers and community partners. They have reflected on the development and impact of See Me. All interviews and focus groups were transcribed and analysed thematically using an outcomes focused approach. The themes that emerged from the qualitative data collected during 2018-19 have been cross-referenced against the qualitative themes that emerged in previous reports (2016-17 and 2017-18). This has enabled the research to identify reoccurring themes, new themes or where issues raised in previous years are no longer emerging.

## Ethics

Ethical approval was obtained from the University of Strathclyde for the Education and Young People evaluation and for social media campaigns within the Communications programme evaluation. The evaluation for all programme areas adhered to these ethical standards to ensure data collection was robust and to allow ethical approval to be sought in the future across programme areas. All participants involved in evaluation activities gave verbal and written consent to take part in interviews, focus groups and surveys, and for these to be audio-recorded where appropriate. Participants were given an information sheet and asked to sign a consent form once they had the information and time to consider if they wished to take part in the evaluation. In addition to this at the end of every interview, focus group or survey each participant was presented with a list of contact details for external support providers to call if they experience any distress. Further information about the consent particulars for each programme can be found within the relevant programmatic report under Section 1.2.

## Summary of Phase 2 Data Collection (November 2016-October 2019)

Programme	Quantitative	Qualitative	Secondary data
<b>Social Movement</b>	Baseline (N=55) & follow-up (N=53) training evaluation forms Community Connectedness pre (n=19) and post-engagement forms (n=14)	40 interviews, 1 partner focus group (n=2); 1 volunteer focus group (n=4) Comments from 17 community-based events (n=308)	Anonymous responses from selected questions from Champion application forms (n=29)
<b>Education &amp; Young People</b>	Baseline (n=2,551) and follow-up (n=332) pupil surveys SMHFA senior pupil training pre (n=720) and post (n=698) surveys SMHFA staff training pre and post surveys (n=21) Young champions residential training surveys (n=48) Follow up S1 – S6 pupil survey (n=53) Cross-sectional S2/S4 pupils (n=364) Schools S6 cascade training model evaluation questionnaire (n=96)	16 interviews with teachers and young champions 57 pupil focus groups (n=295) 14 staff focus groups (n=70) Free writing exercise with Young Champions (n=5) Visual inquiry - Pupils (n=157) - Staff (n=37) - Pre and Post staff SMHFA (n=12) - Young volunteers (n=2)	
<b>Workplace</b>	e-Learning participants (n=1,834) e-Learning evaluation survey (N=334)	23 interviews 27 focus groups (n=127)	Mental Health Check baseline responses (n=1,156) Mental Health Check follow-up responses (n=1,330)
<b>Health &amp; Social Care</b>		13 interviews 1 focus group (n=2) Feedback forms from Artist in residence exhibition National and local health and social care policy documents	Evaluation and feedback data from workshops for stigma free week; discussion data from lived experience seminar and leaders' seminar. Evaluation data from Artist in residence
<b>Communications</b>			Posts from 132 Instagram users that directly engaged with online Pass the Badge campaign between 20/11/17 and 31/12/17. FeelsFM engagement survey (n=1,455)

## Section 1: Context and Introduction

### Context and experience of mental health stigma and discrimination in society today

Around one in four people in the UK will experience a mental health problem each year<sup>1</sup>. At any one time, approximately one in six people have a mental health problem<sup>2</sup>. There has been an increase in the suicide rate for men and women in 2018<sup>3</sup>. In addition, there is unprecedented pressure on Child and Adolescent Mental Health Services (CAMHS)<sup>4</sup> with an increase in rejected referrals with few alternative services available to absorb the need<sup>5</sup>. The impact of this public mental health crisis is unevenly distributed, with people living in the most deprived areas twice as likely to have a common mental health problem compared to those who live in less deprived areas<sup>6</sup>. Other groups more likely to experience mental health problems or access support at the point of crisis include people who identify as LBGQT+, people from black and minority ethnic communities and other vulnerable groups such as people who are care experienced or who have been young carers<sup>7</sup>. Stigma and discrimination is heightened significantly when a mental health problem is combined with one or more protected characteristic.

With the increased priority and profile of mental health in Scotland there have been a number of significant policy and practice developments and there has been a noticeable and positive shift in the profile of mental health which has impacted on how people think and talk about mental health, share experiences and seek help. There is a view that this change reflects a reduction in mental health-related stigma and, whilst this may be true in part, the high profile of mental health does not necessarily equate to a reduction in stigma. Unfortunately, data, research and personal testimonies show that mental health stigma and discrimination remain an issue particularly among those that face the greatest levels of inequality in society.

This is reflected in the 2018 Our Voice Citizens Panel findings<sup>8</sup> where **69%** of respondents reported that they had witnessed people being treated differently or unfairly because of their mental health problems. Within this study, although promising levels of respondents indicated that they would be willing to speak to health care professionals (**94%**) and family members (**81%**) about their mental health, significantly fewer would be willing to talk to managers or HR departments within their workplace (**40%**).

<sup>1</sup> McManus, S., Meltzer, H., Brugha, T. S., Bebbington, P. E., & Jenkins, R. (2009)

<sup>2</sup> Scottish Government. (2015). The Scottish Health Survey: 2015 edition, volume 1, main report. Retrieved from <http://www.gov.scot/Publications/2016/09/2764/downloads> [Accessed on: 22/09/2016]

<sup>3</sup> ONS (2019) suicides in the UK: 2018 registrations <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/suicidesintheunitedkingdom/2018registrations> (accessed 16/12/19)

<sup>4</sup> Audit Scotland (2018) Children and young people's mental health

<sup>5</sup> ISD & SAMH (2018) Rejected Referrals Child & Adolescent Mental Health Services (CAMHS). A qualitative and quantitative audit. June 2018. Scottish Government.

<sup>6</sup> <https://www.mentalhealth.org.uk/statistics/mental-health-statistics-poverty>

<sup>7</sup> The Mental Health Policy Group (2019) Towards Equality for Mental Health: Developing a cross-government approach

<sup>8</sup> Scottish Health Council (2018) Our Voice Citizen Panel: Survey on HIV awareness, mental health and well-being and inclusive communication. Fourth Survey Report May 2018

A study into self-stigma (Mackay et al, 2015) found that just under half (**44%**) of participants with mental health problems felt that stereotypes about mental health problems applied to them, and two thirds that having a mental health problem had spoiled their life. It would appear that, although some headway has been made, key challenges still remain. These include:

- People with severe and enduring mental illness have a shortened life expectancy of up to 20 years. Stigma plays a significant role in this due to self-stigma i.e. delayed or not accessing support, social withdrawal and structural stigma i.e. diagnostic overshadowing.
- A significant amount of work is required to make the workplace a safe environment to disclose mental health problems without fear of discrimination.
- Research by the Scottish Youth Parliament demonstrates that **27%** of young people feel that their school, college, university, or workplace do not provide supportive environments to talk about mental health (Scottish Youth Parliament, 2016).



## Section 2: Programme Development within See Me

Diagram 1: Evolution of See Me

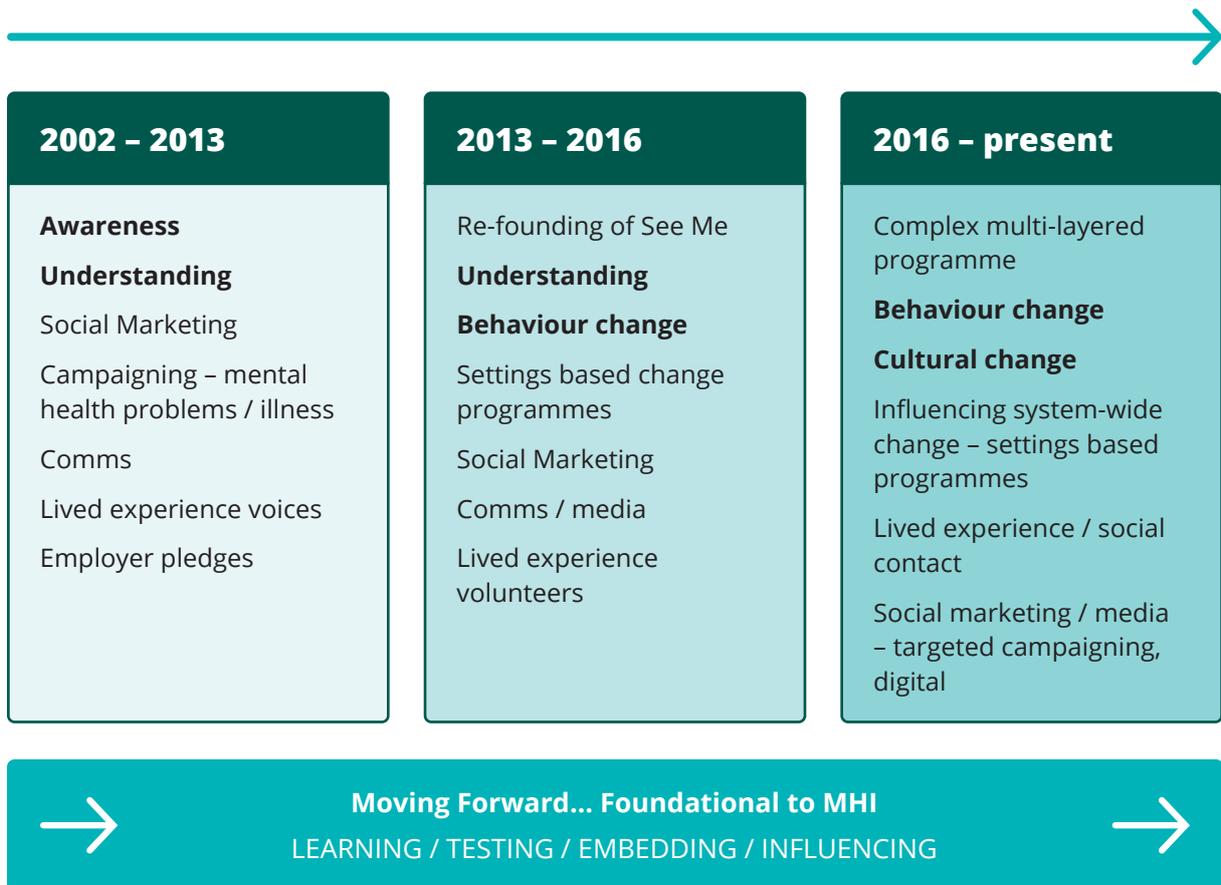


Diagram 1 illustrates how the See Me programme has evolved since its inception. The most current phase of the programme, from 2016 to the present, has provided an opportunity to consolidate the learning from previous phases (2002-2013; 2013-2016) and embed core approaches from a number of different models and available evidence. The See Me programme takes a rights based approach through the application of human rights based principles, along with an ethos

of co-production and understanding of intersectionality. The tactics employed by the programme to challenge and eliminate mental health stigma and discrimination are informed by the best available evidence into what supports attitude and behaviour change generally at the individual, community and socio-cultural level as well evidence on what works specifically to impact mental health stigma and discrimination.

## Definitions of core principles that underpin See Me programme



### Stigma

Stigma occurs when society labels someone as tainted or less desirable. The main types of stigma associated with mental health are self-stigma, public stigma and structural stigma. Social stigma, or public stigma, refers to negative stereotypes of those with a mental health problem. These come to define the person, mark them out as different and prevent them from being seen as an individual<sup>9</sup>. Literature that explores evidence for building a successful anti-stigma programme tend to agree that protest, education and social contact are some of the most effective approaches (Corrigan et al., 2001; Rusch et al., 2005), especially when combined (Link, 2001).

### Discrimination

Discrimination is when someone is treated in a negative way because of their mental health problems. People who are treated unfavourably because of a mental health condition have a right to challenge it under the Equality Act 2010<sup>10</sup>.

### Intersectionality

Intersectionality recognises that there are systematic patterns of interrelated stigma and discrimination that people face due to aspects of their identities

or social circumstances, such as race, ethnicity, economic status, gender, age, sexual orientation or disability.

### Behaviour change

To effect meaningful change, it is important for public mental health and/or anti-stigma programmes to not only improve knowledge and understanding but to impact on how people and organisations think (attitudes) and how they act (behaviour).

### Co-production

Co-production means ensuring an equal and reciprocal relationship between professionals, people using services, their families and their neighbours to become more effective agents of change.

### Human Rights Based Approach

A HRBA is about empowering people to know and claim their rights and increasing the ability and accountability of individuals and institutions who are responsible for respecting, protecting and fulfilling these rights. See Me are working to embed the PANEL principles in our work and to support implementation of right based approaches in practice and system improvement activity.

<sup>9</sup> Stigma involves three elements; a lack of knowledge (ignorance), negative attitudes (prejudice) and people behaving in ways that disadvantage the stigmatised person (discrimination). the stigma related to mental health problems is particularly severe and widespread (British Association for Psychopharmacology).

<sup>10</sup> To get protection under the Quality Act a person must show that their mental health problem is a disability.

Diagram 2: Mechanisms for Change



Diagram 2 represents the evidence based mechanisms for change that work to tackle mental health stigma and discrimination. See Me is comprised of five programme areas, including Education and Young People, Health and Social Care, Workplace, Social Movement and Communications. Each programme area aims to tackle mental health stigma and

discrimination in defined but increasingly cross-cutting domains. During Phase 2 of See Me (2016 – 2019) See Me programme areas have evolved in terms of scope, delivery and approach. Through this evaluation some common development themes have been identified.

## Common development themes

This section of the report identifies common development themes across See Me programmatic areas, that have emerged through the evaluation. It illustrates the ways in which the programme is adapting to improve the reach, scope and scale of its work, working more flexibly to encourage people and organisations to involve in ways that work best for them. Common development themes highlighted include:

- **Limiting direct delivery:** representing a shift from delivery to influencing. This incorporates a gradual shift in approach from direct delivery within individual or clustered institutions and organisations to capacity building and more strategic working which includes models such as cascade training. It is evident across multiple programme areas that a non-direct delivery approach using strategic partners is emerging as a successful (though not yet fully explored) way of working. The move towards influencing others to deliver anti stigma training will not replace but will complement the more traditional See Me approach. This is intended to increase the reach, scope, diversity, effectiveness and sustainability of each programme.

Partnership working approach: exploring the use of strategic partnerships to guide and deliver activity to reduce stigma and discrimination which incorporates See Me messages, tools, and training as highlighted above. Strategic partnerships have been established not only to undertake more localised anti stigma and discrimination training but also to review and advise on the work of See Me, providing a critical eye and diverse insights to the work of each programme area.

- **Local authority-based approaches:** testing locality-wide approaches to delivery, that can be seen in the Education and Young people, Health and Social Care and Social Movement programme areas.
- Within the EYP programme a local authority wide approach has been trialled and has resulted in the local authority making See Me training mandatory for each school. It is evident in Health and Social Care through partnership working with organisations and initiatives across local authorities and health boards, including Stigma Free Lanarkshire and Distress Brief Interventions. In the Social Movement programme work with partners to influence policy and embed anti stigma messages at local authority level can be seen in Moray and Fife.

**Programme toolkits and digital resources:** increasingly being considered as a way to increase reach and programme sustainability. Most apparent in the Workplace programme, toolkits might be a way to identify the readiness of organisations to engage in anti-stigma work, and to target workplaces that would benefit most from intensive, hands on support from See Me. While not intended to replace See Me's current way of working directly with beneficiaries, toolkits could complement programme offerings, and the potential for developing and using these is being examined across other settings.

Below is a summary of where these common development themes occur in each programme area.

### Education and Young People programme

In addition to offering schools Enhanced Scottish Mental Health First Aid training (SMHFA) for staff and senior pupils and the What's on Your Mind (WOYM) resource pack, See Me has more recently been delivering Enhanced SMHFA using a cascade training model<sup>11</sup>. Where previously training was delivered to whole senior pupil year groups, it is now delivered to a smaller cohort of teachers and senior pupils who are trained to deliver the training themselves to others in school. The targeted cascade training approach was designed to improve programme sustainability and was informed by evidence of successful implementation of learning in schools by smaller groups of trained pupils.

### Social Movement programme

Over the past three years the Social Movement programme has evolved and grown<sup>12</sup>. People who self-identify as having lived experience of mental health problems are supported through the programme to develop their skills, confidence and capacity to share their own experience and affect change in the behaviour of others. Volunteer roles that are supported through the programme are Community Champions, Media Volunteers and Speaker Volunteers. See Me has historically delivered training for these volunteer roles directly. During Phase 2 of the programme an additional delivery approach

has been introduced alongside traditional volunteer training – a partnership-working model as a way to increase programme reach and sustainability. See Me has developed partnerships with locality-based and intersectional partners thus creating regional and local social movements based around geographic areas and identity groups. This enables See Me to engage with a wider mix of volunteers through partner organisations and their members who have a clear insight into the experiences, needs and barriers within specific communities.

This approach represents a shift from direct delivery of training to a combination of targeted and partner-led delivery, which includes elements of training, facilitation and influencing. It is intended to empower volunteers to form their own peer groups within communities. In focusing programme resources towards enabling volunteers to network more effectively rather than focusing on time-intensive training, the Social Movement model becomes more sustainable for the future. By engaging with partners who have an existing interest in and commitment to the anti-stigma and discrimination agenda, the reach and capacity of the programme increases. As groups and organisations that have most knowledge of the needs, goals and aspirations of their communities become increasingly involved in volunteer training delivery, they can co-design and deliver See Me Community Champion training in a more inclusive and integrated way.

<sup>11</sup> For an in-depth description of the Education and Young People (EYP) programme refer to the full EYP evaluation report.

<sup>12</sup> For an in-depth description of the Social Movement programme refer to the full evaluation report.

## Health and Social Care programme

Over the past year there have been several important advancements within See Me's Health and Social Care programme. Evidence suggests that embedding anti stigma and discrimination messages and practice is facilitated by working with existing mental health initiatives, such as the DBI programme. See Me continues to be a close partner of Scotland's national Distress Brief Intervention (DBI) programme, to incorporate the delivery of anti-stigma and discrimination practices in this work. See Me volunteers also worked closely with NHS Inform, to redevelop its online depression and anxiety resources, which have now been updated. Work is ongoing with Chest, Heart and Stroke Scotland (CHSS) to raise awareness of mental health stigma and discrimination amongst nursing staff and to improve outcomes for people with mental health problems who use its services. See Me also continues to support the mental health inclusion agenda of Stigma Free Lanarkshire (SFL). Further, See Me is currently working closely with a Health and Social Care Partnership to deliver a programme of work within a local GP practice.

## Workplace programme

A review of the Workplace programme was carried out which identified key areas to be addressed. These included client management, flexibility of the programme, mainstreaming and streamlining the process. There was also a consideration for sustainability and future proofing of the programme. The review has resulted in the development of a Starter Pack that has been piloted. This Starter Pack aims to support organisations to self-assess current practice in relation to:

- Identifying improvement areas to improve equality, reduce discrimination for employees experiencing mental health problems, and remove any barriers to employees seeking or guiding others to help and support.
- Embedding a focus on mental health stigma and discrimination at all levels of the organisation, including organisational strategies, operational plans, policies and procedures, and training needs assessments.
- It is anticipated that additional tools will be developed for workplaces following the Starter Pack. For example, a Do it Yourself tool intended to enable organisations to facilitate their own initiatives is being developed, that will afford the Workplace programme team greater capacity to work more in-depth with fewer organisations.

## Communications programme

Over the last year, an evaluation of the Communications function of See Me has begun to develop. This is not something that has previously been undertaken. As such this work is still in a formative stage, with a view to developing a more structured evaluation plan in the future. To date the evaluation of the Communications programme has shown the success of using social media influencers/thought leaders to help spread messages that allow a campaign to flourish. The digital #passthebadge campaign is an example of this, where the See Me message was demonstrated to have been enhanced by social media influencers/thought leaders. In addition, the FeelsFM campaign worked with young people to create the world's first emoji jukebox. This gave greater insight into what young people consider to be the barriers to talking about mental health.

## Section 3: Cross Cutting Themes

The following section describes the cross-cutting themes that emerged from programmatic evaluation reports. These themes surfaced across programme findings, as core elements of the programme that work well and that can be further improved.

### Social Contact

Social contact is the challenging of stigmatising attitudes through planned interactions and conversations between people who have lived experience of mental health problems and members of the wider population who may not. It is evidenced as being particularly impactful when utilised with targeted groups especially employers, educational professionals and healthcare workers. Other features of effective social contact is where the contact is frequent and sustained and when the person behind the social contact mirrors some of the characteristics of those they are targeting i.e. young people working with other young people, business people to business people etc.

The use of social contact within the See Me programme as a core mechanism for change is well evidenced across programme areas. See Me encourages this approach through its Social Movement programme and specifically the volunteer 'Community Champion' role. Between November 2016 and November 2019, **57** people were trained as Community Champions. This is where people with lived experience of mental health problems engage with See Me and receive training to enable them to challenge stigma in their own communities. The training is very well received by volunteers.

It was so informative and fun and thank you... for having the faith in me to help in the fight against stigma and discrimination. I feel very [privileged] to be given the [opportunity] to work with you. After the training I feel so inspired and positive.

*See Me Volunteer*

The use of social contact within the Social Movement programme is well evidenced and is a core element of Walk a Mile and Pass the Badge initiatives that are facilitated in communities, schools and workplaces. In addition, campaigns such as Time to Talk day and Feels FM enable social contact. Over the past three years there have been **181** pass the badge registrations with an estimated **65,270** badges passed (online and offline) and **46** Walk a Mile events with an estimated **4,085** participants. In addition, there has been a wide range of activities organised and led by volunteers where the lived experience voice of people with mental health problems has been a core component. This includes podcasts, community choirs, workplace training networks, literary events and more. The opportunity to share stories about hope and recovery from the perspective of living with mental health problems has not only been hugely beneficial to volunteers but has had a positive impact on communities. This is demonstrated in responses to the 'overarching question' where participants attending anti-stigma events describe intended behaviour changes as a result of their participation. The power of the lived experience voice is frequently cited as a key motivator for intended behaviour change.

Fife Voluntary Action's Delivering Differently project is supported by See Me's Social Movement programme specifically to embed lived experience into this work through Team Experience – a group of volunteers who benefit from See Me training, enabling them to tackle mental health stigma and discrimination in relation to employability in Fife. The Social Movement team also supports Moray Wellbeing Hub which uses a peer-led Champion approach to ensure that the voice of lived experience informs decision making and development of health and social care policy and practice.

Within Health and Social Care, the voice of people with mental health problems has helped to shape and influence content on the NHS Inform website. In addition, 'proxy social contact' is being used, for example as part of the training package for the national Distress Brief Intervention programme. This includes stories from Community Champions being included and shared in the training.

Anyone can start a social movement, but you need someone who's a catalyst, and the catalyst takes all of these bits that they do. They are a collector. They have a mindset. That helped me to put this together.

*See Me Partner*

Within the Workplace programme, social contact can most commonly be seen in network events where people with lived experience are supported to share their stories, and through the inclusion of people's stories within the e-Learning resource. Qualitative findings also highlight that people are inspired to change their behaviours and challenge stigma and discrimination because of lived experience stories embedded within

the training. The evaluation explored work being undertaken by See Me Champions in their own workplaces, as a result of volunteer training. Workplace Champions used See Me volunteer training as a platform to apply their individual skillsets to develop and lead their own anti stigma initiatives, with the aim of influencing the development of more mentally healthy and inclusive places for people to work.

Within the Education and Young People programme social contact is most evident through the involvement of Youth Champions who support the development and delivery of See Me in Schools training and resources, and in their contribution to shared learning events.

Although there are many examples of social contact being utilised in different programmes there was a view from some participants that this could be enhanced further. This includes within the Education and Young People and Workplace programmes. In particular at the point of delivery to pupils in schools and to help reach and inspire staff that have not directly been trained by See Me either through classroom delivery or engagement at school assemblies or workplace events. Other suggestions included that volunteers have more opportunity to work across programmes, for example Youth Champions being involved in Workplace and Health and Social Care programmes, or Community Champions being involved in schools.

This could extend opportunities to use the voice of lived experience to influence change. It could involve more See Me volunteers speaking at relevant events, bringing their experience into different environments and challenging attitudes and prejudice towards those with mental health problems, potentially encouraging behaviour change. Evidence highlights instances of volunteers sharing

their stories of lived experience, which has encouraged others to speak out about their own experiences, inspiring them to champion changes within their own contexts and communities.

In taking this forward, it will be important to ensure that evidence for the effectiveness of social contact is taken into consideration. And particularly that contact is frequent and sustained and that those with lived experience mirror as far as possible the target audience.

### Education and training

The evaluation highlighted that education and training in its different forms across See Me settings is still a core success of the programme. Across all programme areas it is clear that education is highly valued and effective. In the Workplace programme, the e-Learning resource is an education-based programme designed to promote mental health and reduce the stigma of mental illness in a workplace setting. The training includes videos of scenarios in which stigma may occur and stories of people who have experienced mental health problems in the workplace. All of the stories are informed by people with lived experience of mental health conditions. Between November 2016 and September 2019, **67** employers signed up to the programme, engaging **1,834** participants. Feedback from users demonstrates that the programme content is informative and effective and inspires employees to change their behaviour in the workplace. Participants who took part in the e-Learning evaluation reported that the most useful aspect of the training was lived experience shared through the training videos.

The Social Movement and Education and Young People programmes also adopt an

education-based approach to tackling stigma, with lived experience at the heart. Training was reported as an important mechanism for change. It resulted in positive differences for participants in both programmes including improved confidence and self-esteem, increased skills and knowledge, and the ability to more effectively tackle stigma and discrimination in communities. Participants said that they felt valued, listened to and empowered through training. A significant number of See Me volunteers progressed into leading and taking part in wider anti-stigma projects and activities. Training also opens up opportunities for participants to meet new people and build relationships. The development of peer support networks was directly linked to training and volunteers highlighted this as an important impact of the programme.

The skills and knowledge See Me has around how to support volunteers in this sector, the training that is available, and the understanding.

#### *See Me Partner*

Training in schools is also highly valued by teachers and pupils who take part. The inclusion of Youth Champions with lived experience of mental health problems in the programme is a significant success factor. The emerging cascade training model of delivery is proving successful in schools. Allowing pupils to opt into the programme giving them a greater sense of ownership and control, as are the strategic partnerships that are being developed to support and inform the programme. A local authority approach to delivering training in schools has been successful, making it compulsory for schools in some areas to take part. This has helped overcome resistance to the training in some

schools, for example resistance to pupils missing other lessons to attend training. The cascade training model of delivery is being tested across programme areas with the knowledge that beneficiaries value direct contact with See Me but that this must be sustainable for the future.

As teachers we can just dip in and out and take what we want; it's nice that there's an actual hands-on folder... I'll just change it [for audience], which is fine, I'm happy to do that.

*Teacher*

Education and training delivered in the Health and Social Care programme was also reported as favourable. For example, See Me's contribution to the DBI programme in terms of embedding stigma and discrimination into training was recognised as vital. And its involvement in the redesign of NHS Inform's online CBT resources was highlighted as a success. See Me's role in supporting Health and Social Care partners to review training materials was welcomed. See Me has acted as a critical friend to programmes like DBI, reviewing training documents and providing advice on language and presentation. See Me has developed film clips for partners delivering mental health interventions enabling them to include a lived experience element that previously was missing. This has added value and strengthened anti-stigma messages within these training programmes.

Training and education resources across programme areas are reported to work well. The What's on Your Mind education pack and Scottish Mental Health First Aid training were highlighted as successful, as is the eLearning resource for workplaces. Youth Champions residential training, Community

Champion and wider volunteer programme content is very well received. Social Movement partners highlighted that the flexibility to tailor Community Champions training to more strongly appeal to their target groups is beneficial.

Listening to real people talking about issues, made it more interesting.

*e-Learning Participant*

As highlighted elsewhere, lived experience is central to the success of education and training in all programme areas. Sharing stories of people with experience of mental health problems was reported to bring the programme messages to life. Some suggestions for improvement were highlighted by participants however on the whole most felt that training works well.

### Strategic Partnerships

Over the past three years, See Me has increasingly moved towards a strategic partnership working approach within the programme, to engage more people, build capacity, improve and increase delivery and advance the achievement of outcomes across programme areas. Strategic partnership working has involved identifying organisations that are relevant to achieving See Me's goals, or who have shared objectives that could be aligned with See Me, to increase the reach of the programme and improve programme development and delivery.

...it's all about relationships, not processes...So many organisations like this are driven by process and policy, but I come from a background that's all about relationships and See Me understand that.

#### *See Me Partner*

See Me has a formal strategic partnership with and contributes financially to the work of Stigma Free Lanarkshire (SFL), jointly with NHS Lanarkshire. See Me sits on the SFL Strategic Board and on the regional Lanarkshire Mental Health Strategy Group. These partnerships have resulted in a number of significant outputs, including the coordinated delivery of See Me in schools training to over **220** pupils and teachers at four secondary schools across Lanarkshire and the first in a series of senior and Health and Social Care leaders events to challenge stigma. In partnership with SFL, See Me has also been instrumental in embedding and challenging mental health stigma and discrimination in the local authority's new, cross-sectional Lanarkshire Mental Health and Wellbeing Strategy 2019-2024 (Getting it Right for Every Person).

See Me has been working strategically with lead education partners and the education board in Local Authority A for the past two years, to ensure delivery of See Me EYP schools training to senior pupils and teachers. As a result of this partnership, See Me training has been mandatory for every school in the local authority for the past two years.

See Me has been instrumental in building the capacity to challenge mental health stigma and discrimination in local authority B through strategic partnership working. Following a development day with intersectional and multi-agency partners in the area, local authority B established a Mental Health

Operational Group for schools, of which See Me is a core member. This group is comprised of intersectional mental health leads and aims to achieve key mental health deliverables and a sustainable approach to mental health intervention in schools, in which challenging stigma and discrimination is embedded. An intersectional, coordinated approach is being implemented within schools and See Me themselves have this year delivered training to a cohort of **36** teachers and **240** senior pupils covering every secondary school in this local authority.

See Me has an EYP-programme specific strategic steering group, to ensure close partnership working in all aspects of EYP-programme development and delivery. The group was established in 2015 and is comprised of multiple lead agencies and intersectional partners, including local authority representatives and third sector organisations. The group supports the wider influencing work of the EYP programme, provides backing and identifies opportunities. The steering group works together on EYP programme developments and provides a critical eye and diverse insights into the work and activities within the programme area.

See Me has worked with Moray Wellbeing Hub (MWH) since 2016 in the form of a locality-based strategic partnership. MWH is a social enterprise that delivers a programme of activity across Moray. See Me and MWH have been working together to tackle mental health stigma and discrimination in the local authority area, through a peer-led approach including national and local Champions. The partnership aims to embed stigma and discrimination messages into the work of MWH, and to attract future funding to continue to tackle stigma and discrimination with health and social care

partners including Moray HSCP. It also intends to provide national learning to assist See Me in promoting transformational change of this type in other areas. Primarily focused on influencing health and social care within Moray, the partnership has adopted a peer-led approach to ending mental health stigma and discrimination in Moray.

They [See Me] were able to help us with the language and ensure that we didn't include anything that was potentially stigmatising or discriminating. See Me have also... highlighted the importance of the role of lived experience testimony in any intervention, within a system to reduce stigma and discrimination.

**See Me Partner**

See Me and Fife Voluntary Action have developed a strategic partnership working arrangement to enhance the local Delivering Differently Project, a project that aims to support employability outcomes for people in Fife who are experiencing mental health problems, through a greater focus on stigma and discrimination. An integrated systems approach was adopted to identify challenges relating to employability and mental health, map out stakeholder needs and develop the solutions required to improve support for people with mental health problems. The project, initially funded through the Scottish Government's Employability Integration and Innovation Fund, secured funding from See Me for 12 months to extend aspects of the programme designed to tackle mental health stigma and discrimination in the employability, health and social care systems. This work has focused on improving personal outcomes for people who experience mental health problems, by embedding the voice of lived experience into the journey. For

example, Team Experience is an element of the project directly supported by See Me, to empower people with lived experience to influence policy and practice and to be active in improving personal outcomes for people in Fife.

See Me's Social Movement programme works with a range of intersectional partners, including LGBT Health and Wellbeing, Glasgow Association for Mental Health, Feniks and deafscotland, to support partners to embed stigma and discrimination into their work including Community Champion training. This allows See Me to extend the reach, scope and diversity of the Social Movement programme through a partnership-based approach. It enables intersectional partners to access support, resources and expertise to grow anti-stigma projects using See Me's national platform. It promotes community-led anti-stigma and discrimination work at local level, facilitated by local partners (with the support of See Me) who are best placed to understand the needs of their areas.

Strategic partnerships are under development in the Workplace programme. The programme is currently working with an umbrella body representing a significant number of professional member organisations. This is intended to increase the reach and influence of the programme and will be subject to evaluation in the next phase.

We look at them, they're the experts, and it's something that I feel that with them, it's the reliability. I can rely on them... They don't take you anywhere that you don't want to go, and everything in dealing with them - there's a reassurance in everything that you're dealing with them as well.

**Workplace Interviewee**

## Senior leadership commitment

Senior leadership has been identified across all See Me programme areas as being key for the sustainability of the programme. Senior leaders can play a significant role in creating the conditions for strategic, cultural and system-wide change. This is particularly true of the Education and Young People, Health and Social Care and Workplace programmes. Commitment from senior leadership, in theory, prevents engagement with See Me relying on one person to be the driver of change. It helps to avoid a stall in engagement should a key contact within an organisation leave or change roles. In reality, this is more complex, and senior leadership commitment does not always mean that the responsibility for engaging with See Me will always rest with one person. What is key within senior leadership buy-in is a commitment to the resources required to engage. See Me's offer is free at the point of entry insofar as it does not charge for time or resources. However sustained engagement with the programme requires a commitment of resources from partners who engage.

Senior leadership buy-in within workplaces is often easier to obtain in the early stages of engagement, when the organisation appears to benefit most visibly from See Me's expertise and resources. After initial stages of engagement, the cost for the organisation begins to increase insofar as any recommended actions come with an associated cost or resource for the organisation, whether that be in staff time, training, additional capacity or a change in policy. Maintaining engagement through this stage is where it is most crucial to gain senior leadership buy-in.

Quite a few of the senior partners have put their name forward for the Mental Health First Aid training and they have mentioned that it is because of their own story.

### *Lead Contact*

Some organisations that have engaged with the Workplace programme found that continued senior leadership buy-in can be challenging given the performance-based nature of most organisations. This has been particularly true of private sector organisations but is not limited to them. It was felt that a greater commitment to engagement with the programme was required from senior leadership in those organisations to ensure there was resource to continue to engage with See Me even when operational issues arose. Within this it is important that staff do not feel like senior leadership commitment is just 'lip-service'.

So...you get to that point down the road that you're looking at wellbeing. You're not talking about picking up the pieces or the things that go wrong, but you're actually putting a structure of wellbeing in place that people feel comfortable about.

### *Workplace Interviewee*

See Me works to influence leaders and practitioners within Health and Social Care to change minds, policy and practice, progressing towards an agenda of mental health inclusion. See Me works practically with partners in Health and Social Care to address stigma and embed mental health into practice. For example, See Me has successfully positioned itself on the Lanarkshire Mental Health Strategy Group. As a result of

senior leadership commitment, See Me has been instrumental, along with Stigma Free Lanarkshire, in embedding stigma and discrimination into the new NHS Lanarkshire Mental Health Strategy.

Within Education and Young People, See Me works with senior leadership in two different forms: senior leadership within a school; and senior leadership within a local authority. In local authorities where the schools opt into the programme individually, buy-in from senior leadership at school-level is essential, as is maintaining a close relationship with the local authority lead contact to maintain momentum and provide support to the school. For example, See Me has been instrumental in establishing a Mental Health Operational Group within one local authority.

Within the Social Movement programme there has not necessarily been the same focus on senior leadership, understandably so given the nature of the programme. However, there has been a focus on supporting and promoting grassroots leadership through inspirational leaders within communities. This has been particularly true in relation to Moray Wellbeing Hub (MWH) and Fife Voluntary Action's Delivering Differently project. Strong leadership is a key success factor of a social movement. For example, while Champions with lived experience, skills and knowledge drive forward the work on the ground, strong and clear leadership facilitates this. It is also recognised that a lot of knowledge lies in leadership and this must be effectively cascaded to ensure sustainability in the future.

## The See Me brand

See Me's Communications programme drives the programme brand through publications, presentations, online and multimedia campaigns. Campaigns such as #passthebadge, FeelsFM and Time to Talk Day connect with a range of audiences across Scotland, increasing engagement with the wider programme. See Me's social media followers have grown steadily year-on-year, which can be attributed to the power of the See Me brand. This has implications for the potential to use social media to connect with people on a large scale and result in wider societal impact. The Communications team ensures that branding across programmes is consistent and appealing to a range of different audiences.

The Time to Talk Day was a big thing that was really good. We got people involved going out on trains, giving out leaflets, our catering staff were giving out freebies.

### *Workplace Lead Contact*

The evaluation demonstrates that individuals and organisations engaging across programme areas highly value the See Me brand and their association with a national anti-stigma and discrimination programme. A significant number involved in the evaluation recognise the expertise that See Me brings to their work. However, there is also recognition that beyond initial engagement, See Me input is often incorporated within wider mental health and wellbeing activities for example in schools and workplaces. This can result in less awareness of the See Me brand among end beneficiaries.

In the Social Movement programme the See Me brand is perhaps most widely recognised. Volunteers and partners reported that their association with See Me enhances their anti-stigma projects and activities, bringing expertise and credibility. Most volunteers felt that their work towards tackling mental health stigma and discrimination was taken more seriously because of their connection with See Me. Partners highlighted that working with See Me added validity to their anti-stigma projects and activities.

Evaluation of the Workplace programme shows that organisations highly value their association with the See Me brand, particularly at the initial engagement stage. This enhanced engagement of staff and management with anti-stigma and discrimination activities within workplaces. It was reported that See Me's brand is trusted among See Me Workplace partners. For example, some people involved in the evaluation said the fact that the Mental Health Check is carried out by See Me in organisations works well because of See Me's reputation as an independent expert. It is less clear, beyond the first phase of engagement, if programme participants continue to associate work around stigma and discrimination with See Me.

Senior pupils and staff who received the See Me in schools training make the direct connection between See Me and their learning. Wider beneficiaries of the implementation of this learning as it is cascaded throughout schools do not necessarily associate school-wide mental health stigma and discrimination-related activities with See Me. Most pupils consulted, who had not experienced direct contact with See Me through training, were unaware of the programme within their school. Evidence suggests that whilst See Me training is

positively impacting efforts to eliminate stigma and discrimination within schools, actions and activities following training are not being directly attributed to the programme.

Partners involved in and who contributed to the Health and Social Care evaluation discussed the benefits of being aligned with a national anti-stigma programme. Receiving funding from and being associated with See Me was felt to give traction to their cause and gains recognition from other organisations. In addition, the See Me brand has been successful in widening access to some partner programmes, for example DBI. See Me has supported DBI to identify opportunities to engage young people in an extension of the programme for 16 and 17-year olds. See Me was described as influential in helping to engage young people in the programme and ensuring that the voices and expertise of young people are heard.

### Understanding stigma and discrimination

Across programme areas, there was found to be variable understanding of what stigma and discrimination is, particularly within EYP and workplace. Stigma and discrimination are complex constructs and approaches to help people in some populations better understand what these concepts mean, in relation to mental health, is a key focus for See Me. For some, the concept remains abstract and difficult to comprehend or articulate, which has implications for eliminating mental health stigma and discrimination.

School pupils, particularly those in younger year groups, demonstrated limited understanding of stigma and discrimination. Analysis revealed this to be related to mental health literacy and understandings

of mental health, which frequently involved correlation of mental health and poor mental health. For example, most pupils were able to articulate that they perceive everyone to have mental health, but, when asked what mental health is, most discussed elements of poor mental health or mental illness. It is difficult for young people to understand what mental health stigma is without first possessing a developed understanding of what mental health is. Further, if mental health is chiefly associated with poor mental health, this creates an increased challenge in overcoming related stigma and discrimination. This presents a challenge for See Me, whilst simultaneously highlighting the importance of the programme.

You can have good mental health and you can have bad mental health, or you can have different types, and I just think that it's one of those things that isn't talked about as much. It's talked about, but it's just you only really see the certain aspects of it, like the anxiety and depression, and you never see any other aspects of mental health I feel. And that's all we're really taught about in school, like you're just kind of taught about those bits and it's not really properly explained what it actually is.

*Pupil*

Older school pupils and senior pupils who took part in See Me training and Young Champions demonstrated a more refined understanding and awareness of stigma and discrimination and highlight the successes and importance of the EYP programme. Overall, these populations reported a positive experience of their See Me training and support and improved comprehension of the nature of mental health stigma and

discrimination, of mental health more generally and of how they can begin to challenge stigma and discrimination in their own lives and communities. With time, as this learning diffuses through schools and the EYP communities, increased understanding of mental health stigma and discrimination should be visible.

Across programme areas, the evaluation suggests that stigma and discrimination are comprised of numerous elements, the consideration of which will be essential in efforts to eliminate them. Such elements include mental health literacy and broader understandings of mental health and wellbeing. These elements contribute to the perceptions, attitudes and behaviours related to mental health stigma. For example, findings suggest that school pupils associate predominantly negative connotations with mental health and that this impacts detrimentally on their help-seeking behaviours and perceptions.

It also remains important to explore what stigma and discrimination mean as discreet concepts, and where they sit in connection with mental health and wellbeing, rather than in isolation. Individuals and partners need support to understand what stigma and discrimination is and how it presents and is embedded in everyday life and systems.

...a lot of See Me's work has been about...discrimination associated with mental health, mental ill-health and what we were very mindful of in DBI was... deliberately de-medialising it, so moving out with the framework of one of mental ill-health.

*See Me Partner*

## Section 4: Progress towards outcomes

**Since November 2016, the See Me programme has worked towards achieving six medium term outcomes.**

### Outcome 1: People individually and collectively will increasingly challenge self-stigma and stigma and discrimination

There are many good examples from across See Me programme areas that show progress towards this outcome. For example, evidence gathered from volunteers engaged in Social Movement demonstrates that the programme is effectively equipping them with the confidence, skills, knowledge and tools to individually and collectively challenge self-stigma, and stigma and discrimination. Volunteers indicated that See Me training supported them to develop more confidence in situations that involve challenging stigma and discrimination through sharing their stories and experiences, where they may not have before. Evaluation evidence also illustrates that communities are empowered to challenge stigma and discrimination through the development of peer support networks and new anti-stigma focused groups and activities at grassroots level.

Becoming a much more confident person...being able to share different experiences and relate to people who have had similar stories.

*See Me Volunteer*

Evaluation evidence gathered from the Education and Young People programme also demonstrates progress towards this outcome. Evaluation data from schools who

have received See Me training revealed that both staff and senior pupils feel more knowledgeable about mental health, stigma and discrimination, as well as feeling an increased confidence to discuss and challenge these issues in schools. This increased confidence is evidenced through the implementation of learning from See Me training, in mental health and stigma-challenging outputs and activities adopted within schools. Evaluation data from residential training demonstrates also that See Me is empowering young people to individually and collectively end mental health stigma and discrimination. Youth Champions report that See Me gives them the skills, knowledge and confidence to be themselves and to deliver key mental health and anti-stigma messages.

It's that whole idea of knowing you're not alone.

*See Me Volunteer*

Through its partnership with Stigma Free Lanarkshire, See Me works with health and social care professionals and workplaces to provide staff with an increased awareness and understanding of mental health stigma and discrimination, supporting them to recognise the rights of people with mental health problems and ensure equal opportunity for all to lead a fulfilled life.

## Outcome 2: People will increasingly feel safe, confident and inspired to speak about their mental health and seek help

Volunteer training made some people feel able to talk about their mental health conditions. The training supported some people to feel safe and confident enough to talk openly about their stories. Engaging with See Me inspired many volunteers to talk openly about their mental health for the benefit of themselves and others. This empowered volunteers and for some removed shame about their mental health conditions. Volunteers were inspired to start conversations, tell their stories, to use their negative experiences to help others and to normalise mental health. Volunteer opportunities that demonstrate community impact include equipping and inspiring volunteers with lived experience of mental health problems to share their stories at events, conferences, online and through the media.

I want to stand up with and support those dealing with the daily struggles of life through their mental illness.

*See Me Volunteer*

Senior school pupils and Youth Champions involved in the Education and Young People programme reported increased confidence to speak about mental health and to seek help. The evidence demonstrated that there are barriers however, impacting the confidence of young people to discuss mental health and seek help for younger pupils. There remains a negative association with mental health for some young people, which presents a challenge to overcoming stigma within this population. Some pupils reported being

concerned about the perceptions of peers, teachers and parents and a concern that they may be treated differently within the school community, if they talked openly about their mental health problems.

They know now they can trust speaking to adults... It's also helpful for them to know that we have the training as well; we're all doing it together... we're all kind of joined up.

*Teacher*

Workplace network events have provided See Me trained volunteers with lived experience of mental health problems the opportunity to share their stories. People's lived experience stories are also embedded within the e-Learning resource, and evidence gathered by the evaluation shows that others have been inspired to change their attitudes and behaviours towards those with mental health problems as a result. The evaluation also highlighted work being led by See Me Community Champions within their own workplaces because of their participation in the programme.

### **Outcome 3: People will feel increasingly confident to claim their rights**

Volunteers involved in Social Movement said that they felt more willing and able to use their voice to help themselves and others. Individuals explained how becoming programme volunteers helped them to understand their rights. Some said that being part of the programme gave them the confidence to stand up for and claim their rights. People said that the power of the programme is in supporting volunteers to realise their rights through providing opportunities to be themselves in a safe environment.

E-Learning training evaluation as part of the Workplace programme indicates that the greatest increase in knowledge gained from completing the training is in relation to rights. While it is not clear if increased knowledge about rights leads to people feeling more confident to claim them, it is likely that there is a causal link between the two.

### **Outcome 4: Increased understanding of nature, source, and impact of stigma and discrimination, rights based approach and what works in tackling it**

Access to training equips volunteers engaged in Social Movement with greater knowledge and awareness of what mental health stigma and discrimination looks like and where it originates. Training evaluation data tells us that volunteers gained increased understanding of the nature and source and impact of stigma and discrimination, a rights based approach and what works in tackling it. Training data from the last three years

shows that the biggest changes in volunteer knowledge and understanding have been around human rights based approaches, strategies to reduce stigmatising behaviours and influencing leaders to help tackle mental health stigma.

Evaluation data gathered for the schools and Young champions programmes indicates that both training programmes are influential in increasing understanding of the nature, source and impact of stigma and discrimination among young people, senior pupils and teachers. As well as directly reporting increased knowledge and awareness as a result of training, increased understanding of the nature and impact of mental stigma and discrimination can be seen in the efforts of those teachers and pupils who received See Me training to embed mental health and wellbeing practices within their schools and to overcome barriers to talking openly about mental health.

Examples of progress towards this outcome can be found in the Workplace programme, for example, the results from pre- and post e-Learning questionnaires demonstrate improvement across all areas. The largest improvement is observed in relation to rights. As a result of the e-Learning resource staff feel they have a greater understanding of their rights in relation to disclosing a mental health problem when applying for a job and feel increasingly confident to talk about their rights when discussing mental health and wellbeing in the workplace.

### Outcome 5: Diverse leaders and organisations champion the elimination of stigma and discrimination and take relevant action themselves

See Me has demonstrated excellent partnership working in the Education and Young People programme to deliver training and to support local authorities to build capacity. As a result, some local authorities have taken important steps towards eliminating stigma and discrimination in education, including making See Me training mandatory within secondary schools and establishing Mental Health Operational Groups to coordinate and support the delivery of mental health and anti-stigma work in their schools.

See Me sits on the Lanarkshire Mental Health Strategy Group as part of the Health and Social Care programme and has worked with local authorities to embed anti-stigma and discrimination cross-programmatically into the new Lanarkshire Mental Health Strategy. See Me also works strategically with and funds Stigma Free Lanarkshire, an organisation established exclusively to eliminate mental health stigma and discrimination in education, workplaces and health and social care within its local authority areas.

I do wonder that it takes a particular type of person, and I think that [colleague] is an inspirational person who just puts all her energy into this.

*See Me Partner*

All of the organisations that have engaged with the various elements of the See Me Workplace programme have acknowledged that leadership visibility and commitment is

key to the success of the programme. Getting the initial commitment from senior leadership to engage with See Me appears relatively easy and this can be evidenced by the demand the programme is experiencing. The issues lie in sustained commitment to resources and time to help eliminate stigma and discrimination.

Quite a few of the senior partners have put their name forward for the Mental Health First Aid training and they have mentioned that it is because of their own story.

*See Me Partner*

### Outcome 6: Negative stereotyping is reduced in targeted settings

Outcome 6 presents challenges generally in terms of a lack of data available to capture progress across programme areas. Evaluation tools currently in use do not gather evidence that specifically evidences progress towards this outcome. Therefore, there are challenges of attribution of impact that make it more difficult to evidence this outcome. Related recommendations to address this can be found in the Discussion and Recommendations section of this report. Mental Health Check pre and post data will be presented in a later draft of the Workplace programmatic report and may give an indication as to whether negative stereotyping has been reduced in targeted settings.

## Section 5: Discussion and Recommendations

### Discussion

#### Social contact and lived experience

Evidence consistently demonstrates that social contact-based theory underpins successful approaches to tackling mental health stigma and discrimination. In Social Movement, social contact remains a key element of the success of the programme, through facilitating conversations between people who have lived experience of mental health problems and those who may not. Social contact is most effective when people with lived experience of mental health problems are supported by See Me to share their stories with others, directly or through media channels. This has helped to normalise conversations about mental health. Through qualitative interviews Community Champions describe their own personal growth as a result of training and involvement with See Me as well as the development of peer support groups in geographic areas and with communities of interest (LGBT+, men) that previous did not exist.

...the community up there came to us to see if we could help them. We've been up there a few times. We've had...a community meeting to which they expected not many to turn up, but there was over 70 people. They had 17 facilitators wanting to get involved, so they decided that they're going to do it with the same format as what we use... So, they're ready to go in the next two weeks, so it's just brilliant.

*See Me Volunteer*

Volunteer training is viewed as a source of empowerment and is aligned to outcomes 1) people individually and collectively will increasingly challenge self-stigma, stigma and discrimination; and 2) people will increasingly feel safe, confident and inspired to speak about their mental health and 3) people will feel increasingly confident to claim their rights. This is reflected in the improvements between the pre and post surveys with training participants reporting the biggest changes in the areas '*I understand Human Rights Based approaches and how they apply to the Community Champions programme*', '*I know of strategies that can reduce stigmatising behaviours*' and '*I feel that I can influence relevant senior leaders to help tackle issues of mental health stigma and discrimination*'.

They got a guy with lived experience of psychosis...just his 10-minute talk changed the whole perspective of that course. It was a really powerful moment. That is vital, I would say.

*See Me Volunteer*

The evaluation findings also show that when a social contact-based approach is incorporated into anti-stigma training delivery in schools, the impact has been powerful. Social contact in schools is facilitated through Youth Champions who contribute to See Me anti-stigma training. Feedback from teachers, pupils and Youth Champions about this element of the programme is very positive. In particular, teachers and pupils welcomed the inclusion of Youth Champions in the training largely because of the effectiveness of the peer learning approach. This approach

engages pupils, enhances their experiences and breaks down barriers to participation.

At individual level, in terms of empowerment and capacity building, the process of capacity building among people with lived experience of mental health problems so that they feel confident and able to challenge stigma and discrimination in their community using social contact methods has a significant impact on those involved. At community level, social contact as a mechanism for change can be seen in the scope and reach of community events outlined previously in this report.

In addition, the concept of indirect social contact was discussed by some involved in the evaluation. For example See Me volunteers who share their stories of lived experience through media and social media channels, and the increase of those who have developed blogs about mental health as a result of participating in events including the Scottish Mental Health Arts Festival has become more prominent. In a society where people increasingly look to the media and other online channels for their news and information, the power of sharing lived experience stories of mental health problems may never have been greater.

### Strategic partnerships

Evaluation data has shown development of strategic partnership working to be integral to the achievements of See Me, particularly within EYP, Health and Social Care and Social Movement programme areas. For example, within the EYP programme, strategic partnerships with local authorities have worked to embed challenging stigma and discrimination in schools, by expanding the reach of the campaign and making the See Me training mandatory. Taking a local

authority approach has shown wider impact and influence and where a local authority strategic partnership is in place, reach and output is higher. This is also true within the Social Movement programme, which has seen increased reach and diversity of delivery and influence as strategic partnership working has increased. See Me and partners have achieved significant positive outcomes for people and organisations in communities and localities through both targeted and local authority approaches.

Strategic partnerships are also working successfully to embed the elimination of stigma and discrimination cross-sectionally, as evidenced in the work of See Me with SFL and its associated partner organisations and their influencing over the inclusion of mental health stigma and discrimination in the Lanarkshire Mental Health and Wellbeing Strategy.

It's [partnership with See Me] so symbiotic, and so useful. They provide a safe harbour, a pantry dish to grow.

*See Me Partner*

### Education

Across programme areas education is core. This is achieved through volunteer training, e-Learning in workplaces, training delivery in schools, at residential and in health and social care settings. Embedding the voice of lived experience in education and training is important to participants and a powerful way to communicate key messages. People who took part in training experienced improved confidence, reduced isolation, increased their understanding and awareness of stigma and discrimination. Education and training equips people with the skills and knowledge

required to tackle mental health stigma and discrimination in a range of settings and often resulted in the formation of peer support networks.

That was a huge part for us, setting up groups... we kind of help each other which we've learned to do...we have a debrief after meetings and we talk to each other about certain things.

*See Me volunteer*

As See Me considers its model of education and training delivery for the future, including an increased use of strategic partnerships as highlighted above, it might also want to consider further utilising the skills and abilities of people with lived experience of mental health problems across programme areas. Some people who took part in the evaluation were keen to support the delivery of anti-stigma education programmes in different settings. For example, Community Champions, media and speaker volunteers would welcome the opportunity to add value to See Me delivery in schools. The effectiveness of this approach can be seen through involving Youth Champions in anti-stigma education programmes in schools. This provides a strong evidence base on which to build this into the wider See Me programme and could contribute further to sustainability.

## The See Me brand

The See Me brand is a highly valued and important part of working with the programme for individuals and organisations across programme settings. It has a multitude of benefits including increased buy-in to and engagement with anti-stigma and discrimination activities because of

the trust that people place in the expertise of See Me. The evaluation indicates that work to tackle mental health stigma and discrimination across programmes would not be as effective without an association with See Me. It was reported that See Me adds credibility to anti-stigma projects and initiatives delivered by individuals and partner organisations and can lead to longer term impacts including leveraging funding and sustained activities. The See Me brand is driven by the Communications team which until recently has been less visible as a programme area beyond campaigns. It is increasingly recognised that joined up working between See Me programmes is required to use resources more effectively, including communication resources.

This is a great opportunity because See Me has got a really great reputation.

*See Me Partner*

It is recognised that the See Me brand has the potential to become less visible beyond a partner's initial engagement with See Me. As stigma and discrimination projects and activities delivered by See Me become more embedded within and cascaded throughout schools, workplaces and other organisations, it is reported that programme participants may not be aware of the involvement of See Me.

## A new approach to delivery

As the See Me programme progresses, it has been highlighted that increasing emphasis is being placed on facilitating and influencing anti-stigma and discrimination work and using the knowledge and expertise of local and regional partners to support the delivery of projects and activities.

This new approach to delivery is evident across See Me programme areas. For example, in the Social Movement programme it can be seen in devolving some volunteer training activities to partners. Community and locality-based partners are being equipped to train local volunteers using See Me learning resources and experience.

In Education and Young People, moving towards a targeted training model of deliver to senior pupils and staff in schools will enable See Me to train those with the most motivation and passion and who are best placed to cascade training more widely in schools. It also enables See Me to adopt a local authority approach to anti-stigma education in schools that increases the reach of the programme.

The Health and Social Care programme has successfully undertaken policy influencing and consultation work, demonstrable in their partnership with the Lanarkshire Mental Health Strategy Group and integral involvement in embedding stigma and discrimination in the new Lanarkshire Mental Health Strategy, alongside Stigma Free Lanarkshire. See Me is also currently working with Chest Heart and Stroke Scotland to embed behavioural, cultural and systemic changes around stigma throughout the organisation and progress towards inclusive policy and practice.

In the Workplace programme, a shift in delivery approach is demonstrated by the development of toolkits, such as the Starter Pack, that will enable organisations to self-assess their readiness to tackle stigma and discrimination. While See Me will continue to work with a number of targeted organisations providing direct support to implement anti-stigma and discrimination activities, toolkits will allow a larger number of organisations to

engage with the programme and its resources without necessarily accessing direct or intensive support from See Me.

Quality control should be considered with an increasing combination of direct and indirect delivery approaches. It should be acknowledged that the boundaries between See Me direct delivery and indirect delivery by partners and through toolkits may become less clear with this approach. This has implications for evaluating the impact of the programme. It may become more challenging to attribute impact solely to See Me with the increased use of partner delivery.

### Understanding stigma and discrimination

Through the evaluation of the Education and Young People programme, evidence indicates that there is work to be done to continue to improve the mental health literacy of pupils specifically in relation to the concepts of stigma and discrimination. More support could be provided to support individuals and partners to understand what stigma and discrimination is and how it presents and is embedded in everyday life and systems.

They know the vocabulary, don't they?  
But they don't understand what the vocabulary actually means.

*Teacher*

Drawing parallels with other types of known stigma may be helpful, especially with regards to mental health language and literacy. For example, highlighting the presence of unacceptable religious and racial terminology that is widely condemned as stigmatising and discriminatory could assist people in bettering relating to the concepts of mental

health stigma and discrimination. In addition, training could more explicitly underline the health, social and economic inequalities that affect people with mental health problems disproportionately (such as people with mental health problems being more likely to die young, gain and sustain employment etc.). While we recognise that the training provided by See Me is led by a human rights based approach, evaluation evidence indicates that this is not always perceived in that way by end beneficiaries.

Within Workplace, similar variances in understanding of mental health stigma and discrimination was demonstrated by some individuals and organisations. Again, this appears to be related to a broader lack of knowledge and understanding around mental health and wellbeing and therefore how stigma and discrimination sits within that context. Some organisations who engage with the Workplace programme used the See Me materials as an entry point to promote a more general mental health wellbeing agenda within

their organisation. This resulted in a lack of awareness and understanding of the concepts of mental health stigma and discrimination among some staff from the outset.

Furthermore, other organisations found that a focus solely on mental health stigma and discrimination to be too narrow for staff to engage with the programme sustainably.

I think the language is the language of stigma and discrimination might be more kind of abstract to people but I think there's still very much a role around education about that...in my experience of working with other organisations as well is that they won't necessarily know that something that they're doing within their organisation is potentially discriminatory because they don't have the knowledge of mental health to understand what it is.

*See Me in Work Employee*



## Recommendations

### 1. National commitment to tackling mental health stigma and discrimination

While progress has been made to tackle mental health stigma and discrimination in Scotland, this issue is still prevalent in society and there is much work to be done. Strong leadership and strategic partnership working lie at the heart of this recommendation.

**Recommendation for the Scottish Government:** an ongoing commitment to, and leadership from, the Scottish Government in relation to ending mental health stigma and discrimination is required. See Me delivers and influences anti-stigma work across Scotland, and continued visible, top-level leadership is required to effectively advocate this. This involves the Scottish Government and partners maintaining consistent messaging about mental health stigma and discrimination as foundational, and how it is framed in different settings. The commitment to eliminating mental health stigma and discrimination needs to be continually recognised and highlighted as a national priority that is championed by national government.

#### **Recommendation for Managing Partners:**

ongoing consideration of how Managing Partners work with the Scottish Government and other national partners. This includes See Me's delivery approach and embedding anti stigma and discrimination messages as foundational. Managing Partners should increasingly support capacity building of and alignment with wider organisations as central to enhancing the influence of See Me. Efforts should continue to promote See Me as the national stigma programme best placed to

support organisations across different settings to ensure that stigma and discrimination messages are embedded within any wider work around mental health and wellbeing. The evaluation demonstrates that this works best in partnership with other mental health related programmes.

### 2. Framing mental health messages

The evaluation has raised important messages in terms of how mental health can be perceived as negatively framed and indicates how it could be more positively framed in the future.

**Recommendation for all programme partners:** all partners that contribute to improving the mental health and wellbeing of the population and tackling mental health stigma and discrimination should consider how the mental health messages they give as part of their work are framed, and ensure that they are placed within a broad spectrum. This should include messages such as everyone has mental health, whether positive or negative, and a focus on prevention and recovery. Framing ideas about mental health positively going forward is recommended, while acknowledging the significant presence of mental health problems within society.

### 3. Growing a peer leadership approach

Within See Me, work continues to elevate the voice of lived experience through peer leadership approaches, providing opportunities for people with mental health problems to participate in programme design and development. This is supported by the strengthening of local and national peer support networks enabling people to more effectively connect, share and support each other.

**Recommendation for Managing Partners:**

it is recommended that this peer leadership model is expanded, creating broader opportunities for those with lived experience to contribute to and lead programme research and evaluation activities. This will demonstrate that See Me is a genuinely inclusive programme, committed to and led by the voice of lived experience.

**4. Review of See Me programme outcomes**

The evaluation has demonstrated that See Me programme outcomes should be reviewed as it moves into the next phase. As a behaviour change programme, outcomes should focus on changing minds, policy and practice as a way to achieve longer term positive changes within systems and cultures.

**Recommendation for Managing Partners:**

See Me and MHF should work together to develop programme outcomes and indicators that reflect its journey from delivery to influencing and capture the impact of behaviour change on individuals, communities and society. Current programme outcomes could contain more clarity and robust and clear indicators should be developed to ensure that progress towards outcomes can be more clearly evidenced.

**Recommendation for Managing Partners:**

for the next phase of the programme See Me and MHF should continue to work closely together to align delivery and evaluation frameworks plans, and in particular define the scope of delivery, research and evaluation roles.

**5. Data collection approaches**

Some programme outcomes are challenging to evidence because of the lack of outcome specific data gathered through existing tools. This could be strengthened in a number of ways.

**Recommendation for Managing Partners:**

- Revisiting existing stigma scales to identify fit for purpose measurement tools.
- Developing opportunities for peer led research to ensure that including the voice of lived experience extends beyond programme delivery.
- Building self-reporting measures into programmatic toolkits, to assist with monitoring ongoing activity, and to highlight any challenges or barriers for individual groups or organisations and to strengthen the evidence base about what works in tackling stigma.
- Creating opportunities to work more closely with the Scottish Government and partner agencies to achieve more standardised data collection that is used to inform the impact of the See Me programme.

More detailed programme level recommendations can be found in the programmatic reports, available on the MHF Scotland website -

[www.mentalhealth.org.uk/scotland](http://www.mentalhealth.org.uk/scotland)



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