

# SEE ME

## EDUCATION AND YOUNG PEOPLE

THREE YEAR PROGRAMME EVALUATION  
NOVEMBER 2016 - OCTOBER 2019





**See Me**  
End mental health discrimination

**What's on your mind?**  
Mental health is part of everyday life.  
don't be afraid to talk about it.

It's okay not to be okay

**Fuel Up!**  
Eat Breakfast!  
Carbs  
Protein

Healthy  
Food Choices

Okay

That's Okay

Post-it  
Take The Day To Do The Day



## SEE ME - EDUCATION AND YOUNG PEOPLE PROGRAMME EVALUATION

### Outcomes aligned to See Me Education and Young People Programme:

- People individually and collectively will increasingly challenge self-stigma and stigma and discrimination.
- People will increasingly feel safe, confident and inspired to speak about their mental health and seek help.
- Diverse leaders and organisations champion the elimination of stigma and discrimination and take relevant action themselves.

### Reach of EYP Programme (November 2016 – September 2019)

- **30** Schools engaged
- **27,059** Pupils reached
- **420** Teachers trained in SMHFA
- **1047** Schools Champions Trained<sup>1</sup>
- **71** Young Champions now trained
- **7,212** Young Champion hours
- **1,937** 'What's On Your Mind?' downloads

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<sup>1</sup> Includes training on resources, social contact, Scottish Mental Health First Aid and mental health literacy

## Summary

- One of the main strengths of the EYP programme is its successful partnership working. See Me work well at a strategic level and as a result delivery is extensive, given capacity.
- A local authority approach to delivery is supported and has proven to maximise the reach of the EYP programme.
- The cascade training model of the Enhanced Scottish Mental Health First Aid offered by See Me has been well received and offers a sustainable intervention for mental health and stigma reduction in education.
- The See Me EYP programme has been welcomed by schools across Scotland; teachers and senior pupils speak highly of the training and offer constructive suggestions for moderate improvements.
- Consideration of how mental health literacy and negative understandings of mental health contribute to stigma and discrimination are important to the See Me programme and need to be addressed as part of wider efforts to eliminate mental health stigma and discrimination.
- Building trust remains an important facilitator to breaking down stigma and discrimination amongst young people, as evidenced in data from the past three years of programme evaluation.
- EYP Youth Champions training is fundamental to the programme. Youth Champions support the social contact element of EYP, report favourably of their experiences with See Me and are integral to training in schools.



## 1.0 EYP Introduction

The See Me Education and Young People (EYP) programme developed to provide training, resources and information to increase mental health literacy and tackle mental health stigma and discrimination for young people. See Me aim to challenge stigma and discrimination and provide young people with the language, skills and ability to talk about mental health. The See Me EYP intervention works on an evidence-based education and social contact model. It is a targeted, systematic intervention that aims to build capacity and agency in education to tackle stigma over several years.

See Me offer schools 'Enhanced' Scottish Mental Health First Aid (SMHFA) training for their staff and senior pupils. This offering includes SMHFA training and a What's on Your Mind (WOYM) resource pack to facilitate the implementation of learning. The WOYM resource pack is to support both teachers and young people to learn about mental health and develop the skills and confidence to tackle stigma and discrimination in school and the wider community. The pack is designed for use with young people aged between 12 and 17 and is split into three modules – Building Confidence, Challenging stigma, discrimination and dual stigma and Taking Action. These modules are built around Mental and Emotional Wellbeing, Social Wellbeing, Physical Wellbeing and Relationships, which are key capacities and learning outcomes in the Curriculum for Excellence and Health and Wellbeing (HWB) Curriculum. The pack contains a wide range of practical tools for implementing learning and carrying out activities. Content includes lesson plans linked to the HWB curriculum; Expectations and Outcomes, which explore definitions of stigma and preconceptions and Human Rights based activities, through participatory methods

and experiential learning. The resource also includes fact sheets on mental health conditions, exploring the associated stigma and a common language card for use within education. The common language card is a folded information and signposting resource that can be carried in a pocket or a wallet. The card is distilled from an academic model of help-seeking behaviour, which suggests four stages in the process of seeking help: an ability to identify a problem; an ability to express the problem; ability to identify sources of help and support and a willingness to approach sources of help and support.

See Me currently deliver Enhanced SMHFA in a cascade training model, in which a small cohort of teachers and senior pupils in schools are trained to deliver the training themselves in school. Previously, training was delivered to whole senior pupil year groups. A targeted intervention was developed to improve sustainability and was informed by evidence of implementation of learning in schools by smaller groups of trained pupils following training.

In Year 3, targeted training was delivered to **22** schools in four local authority areas in Scotland, using a local authority approach.

See Me also facilitate residential training for new volunteer Youth Champions. The training aims to provide an empowering and rewarding experience from which Youth Champions will feel confident to deliver anti-mental health stigma and discrimination messages and activities in their communities, with the support of See Me. In Year 3, **27** new Youth Champions were trained.

The See Me EYP programme have an EYP-specific strategic steering group, who meet

quarterly. The steering group was set up in 2015 and is comprised of multiple lead agencies and partners, including local authority representatives and third sector organisations, to ensure close partnership working. The group supports the wider influencing work of the EYP programme, provides backing and identifies opportunities. The steering group work together on EYP programme developments and provide a critical eye and diverse insights on the work and activities within the programme area.

This report presents the findings of the See Me EYP evaluation, which was carried out by the Mental Health Foundation in the period November 2018 to September 2019. Section 1 presents the methods used in the evaluation. Sections 2 – 5 present the findings of the analysis of EYP data collection. How See Me are achieving their outcomes and evidence of what works to reduce mental health stigma and discrimination are reflected in four thematic examples: Continuing the Journey: Local Authority A; Building Capacity: Local Authority B; Beginning the Journey: Local Authority C and See Me Young Champions. Each example demonstrates the processes and outputs of See Me and the mechanisms through which See Me are working to achieve their goals. Discussion of the findings in relation to See Me outcomes and recommendations for the programme are then presented in Section 6.

## 1.1 Methods

A mixed methodology was applied to the evaluation of the EYP programme. Both qualitative and quantitative data were gathered to assess whether the medium-term outcomes relevant to the EYP programme are being met. The medium-term outcomes for the See Me EYP programme are presented on page one.

Qualitative data collection included face-to-face, semi-structured interviews, focus groups, a free-writing exercise and event feedback forms. Quantitative data collection included short, follow-up pupil survey questionnaires, cross sectional short pupil survey questionnaires, See Me residential training evaluation questionnaires and See Me schools training evaluation questionnaires. Table 1 below summarises cumulative evaluation data, collected during Years 1-3; a breakdown of data collected in Year 3 alone can be found in the relevant findings section.

**Focus groups:** Focus groups were carried out separately with teachers and pupils. Each focus group lasted between 30 and 40 minutes. The topic guides for discussion during the focus groups varied for teachers and pupils, but broadly included questions on knowledge of mental health and wellbeing; views and experience of stigma and discrimination and school engagement with the See Me EYP programme.

**Semi-structured interviews:** Interviews were carried out with teaching staff. Each interview lasted between 30 and 60 minutes. The interview schedule included questions about experience of working with See Me, implementation of learning within school and views on challenging stigma and discrimination.

**Free-writing exercise:** Before taking part in a focus group, previous Young Champions were asked to 'free-write' for seven minutes about their experience of becoming and being a See Me Young Champion.

**Follow-up and cross-sectional survey questionnaire:** School pupils were asked to rate their agreement with a series of statements about mental health and mental health stigma and discrimination. The rating scale ranged from strongly agree to

strongly disagree. The following numbers were assigned to the answers for analysis purposes: strongly agree (5); slightly agree (4); neither agree nor disagree (3); slightly disagree (2); strongly disagree (1). The mean for each statement was calculated for the pre and post surveys and the cross-sectional surveys.

**See Me schools training and residential training questionnaires:** The surveys assessed the views of senior pupils and Young Champions taking part in See Me training. Participants were asked to rate their agreement with a series of statements about their experience immediately before and immediately after the training. The rating scale ranged from strongly agree to strongly disagree, with the same numerical values attached to each statement as listed for the above questionnaires.

The evaluation of the EYP programme was granted ethical approval from the University of Strathclyde. All participants taking part in surveys and/or focus groups/interviews were given a detailed participant information sheet and consent form about the evaluation one week before data collection, where possible. The parents of pupils under the age of 16 were also given information sheets and an opt-out form if they did not wish for their child to take part. Additional verbal consent was obtained from participants to take part and to audio-record focus groups. Anyone who declined to take part was advised that this would not in any way impact on their care, teaching or work with See Me. Those who were lost to follow-up or withdrew from the survey process were excluded from analysis.

**Table 1: Cumulative summary of EYP Data Collection, Years 1-3**

Summary of Education and Young People Research Methods		
Programme	Qualitative	Quantitative
Education & Young People	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)  <b>Visual inquiry</b> - Pupils (n=157) - Staff (n=37) - Pre and Post staff SMHFA (n=12) - Young volunteers (n=2)

### 1.3 Analysis

All qualitative interviews and focus groups were transcribed and analysed thematically, using an outcomes-focussed approach. Themes related to the relevant programmatic outcomes were induced within and across datasets. Any additional significant themes arising within these were also induced.

The free-writing exercise carried out with previous Young Champions was analysed using a vignette method. Vignettes are a narrative form of presenting research data (Erickson, 2012). Vignettes provide a sensitive way of gathering or analysing data that explores sensitive topics; they also provide an additional level of anonymity and confidentiality to participants. A vignette was used in this part of the evaluation as a way of analysing and representing the data. The free-written accounts of previous Young Champions were collated, analysed and reconstructed to create a representational, hypothetical narrative (vignette). This narrative was also informed by the content of the focus group discussion that followed the free-writing exercise. The vignette is written in the past tense, in third person and is designed to be an auto-ethnographic account of becoming a Young Champion for See Me. In addition, the focus group was examined thematically for any pertinent outcomes from the data.

Quantitative data was gathered via SurveyMonkey and/or paper surveys which were then inputted into SurveyMonkey. Data cleaning and descriptive analyses undertaken using Microsoft Excel. The descriptive analyses focused on calculating and comparing baseline and follow-up mean values for the questionnaire items to assess overall changes in knowledge and attitudes. Most of the surveys include questions where participants are asked to rate their agreement with several

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 were 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.

### 1.4 Limitations of the data

The questionnaire used in this evaluation is not a validated instrument. There is no available validated survey instrument to measure attitude and experience of mental health stigma and discrimination in young people. Further, there was no sample size calculation carried out in this evaluation and some samples reported are small and diverse. The results of the quantitative data should therefore be interpreted with caution.



## 2.0 Local Authority A: Continuing the Journey

In early 2018 (Year 2), the See Me EYP programme engaged with every secondary school in Local Authority A and delivered training to **529** senior pupils and **69** teachers across ten schools. In September 2019, a further **180** senior pupils and **40** staff members across the ten schools were trained using the cascade training model. See Me additionally delivered inter-agency training to staff in Local Authority Area A in May 2018. Local Authority A have a mental health strategic group who oversee additional provisions being delivered in relation to mental health in education services.

The following findings are taken from follow-up data collected in three secondary schools in Local Authority A. Qualitative data collection included **13** pupil focus groups, two teacher focus groups and two teacher interviews. These findings are discussed thematically and, where relevant, comparative findings with baseline data and change over time are presented. Only pupils who completed baseline and follow-up questionnaires were included in quantitative analysis. There were **22** pupils for whom there was no follow-up data, therefore the quantitative results are from a sample of **53** pupils across all year groups.

### 2.1 Education: See Me Training and Resources

The refocused programme was considered preferable to training whole senior year groups. Teachers felt the new model gives pupils a choice; motivated pupils can have the opportunity to attend the training and those pupils for whom the training may not be appropriate are not required to take part. The practicalities of taking part in the training with fewer numbers of pupils was also highlighted by teachers. Further, teachers also felt that training a smaller cohort of pupils, who then take their learning into school, kept momentum for challenging stigma and discrimination going and fostered a sense of ownership and a collective goal:

I think it gives them a sense of ownership a bit more, because it's their school and this is how it's going to be delivered in their school

*Teacher*

Teachers felt that offering training to pupils entering S5 as well as those entering S6 would be beneficial. They felt this would assist with continuity and extend pupil capacity within the school, rather than having to start again each year:

I think with the fifth years it'd be more engrained within the school, because starting again every time...it's too fresh. ... [we need] kids here for longer with that training and experience...

*Teacher*

The involvement of See Me Young Champions in the training programme – many of whom have lived experience of mental health problems – was felt by teachers to facilitate the interaction with senior pupils and to be of interest to those involved in the training:

it hooks them in because they want to hear all of that... they're [Young Champions] really passionate about it

*Teacher*

This reinforces previous findings from Year 2, which found learning through lived experience to be integral to the success of the training, as expressed by pupils and teachers. This element has been retained in the refocused programme structure.

Feedback on the WOYM See Me resource pack for teachers and trained ambassadors was broadly positive and constructive with regards to suggested improvement. How often the pack was used varied by school. Teachers felt that additional guidance on implementation of learning from the training and suggested activities within the school would enhance the pack and increase frequency of use. One teacher suggested the inclusion of more lesson plans to assist with delivery. Further, some teachers suggested the inclusion of a guide for imparting their learning on challenging stigma and discrimination with diverse pupil groups, such as those with complex learning difficulties. They reported utilising the WOYM pack in an adapted way but felt guidance on generating activities suitable for working with these pupils was a useful addition. The absence of this guidance appeared to have the unintended consequence of isolating certain pupils from the relevance of challenging mental health stigma and discrimination in the minds of some teachers:

My gut reaction is those pupils are not obviously going to get as much out of it as other people in the class.

*Teacher*

Teachers also reported adapting the learning for practical use with younger pupils, to make delivery more suitable for younger age groups:

...some of the topics or the questions, I just adapt it because I think it's quite complicated. The language, the wording, if you put that in front of an 11 year old...it's going to go over their head; they're not going to engage with it.

*Teacher*

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*

Trained ambassadors reported making use of the exercises and resources in the WOYM pack to deliver presentations to classes, during which stress was often a focus of discussion.

Overall, a general increased focus on mental health and wellbeing was reported in schools following the See Me training in Local Authority A. Teachers reported increased awareness of changes in pupil behaviour and the potential mental health significance of these changes following training. Where, previously, a pupil exhibiting certain behaviours may have been dismissed, teachers felt more confident to recognise a possible mental health problem and engage the necessary referral pathways within the school for that individual:

[speaking about a pupil] it's like, I know she's being quite difficult, but actually, I'm really quite concerned here... I can take things to the right people... [the training] gave me the confidence to do that.

*Teacher*

One trained ambassador felt that increased support was needed from other year groups and pupils in her school:

I think it's quite hard to rely on young people to feed back to young people, when they're actually that age that they're affected by it anyway...

*Pupil (S6)*

Both teachers and pupils felt that more interactive activity suggestions, inclusion of other senior year groups (S5) and the distribution of pre-training materials may help to overcome these issues.

## 2.3 Post-Training Barriers

### 2.3.1 Competing demands

Following training, senior pupils often have competing demands on their time, which can create a barrier to implementing learning and reducing stigma and discrimination. Applying the training to activities within the school, when the trained ambassadors need to manage their personal timetables and commitments, can mean that challenging stigma and discrimination may not be a priority. As highlighted by one teacher, structural stigma and lack of prioritisation of mental wellbeing contributes to this problem:

It's quite difficult for them, if some of their roles are linked to subjects that they want to keep on at university, like literacy ambassadors, if they're going to be studying English. It's tricky for them to say, 'Oh right, okay, I'll let that go and I'll be a See Me ambassador instead.' I mean, that's just society isn't it? Society often doesn't see it as important as other things.

*Teacher*

**Teachers:** Teachers who took part in the See Me training reported some colleagues as a barrier to challenging stigma and discrimination within the school. Some staff members were discussed as displaying stigmatising attitudes and behaviour and resistance to acknowledging mental health and wellbeing, which inhibited progress within the school:

...the lack of understanding from some of our staff; some of them are brilliant about the impact of anxiety and what anxiety looks like for example, but a number of staff have said to me 'I've just seen her with her friends laughing, she'll be fine... She's alright, there's nothing wrong with her, she's playing you, she's playing the system.' It's trying to change that kind of culture.

*Teacher*

The teachers felt that a staff session from See Me is "imperative" to challenging mental health stigma and discrimination within their schools. Fellow teachers are perceived as a potential barrier to pupils seeking mental health support due to discriminatory views and this is part of the challenge that trained teachers are "trying to fight against". Further, it was felt this training should extend to senior management, amongst whom there is a perceived "spectrum of acceptance" of mental health, that often does not extend beyond a professional acknowledgement of challenging stigma and discrimination, to understanding, tolerance and action:

There is absolutely no point in us doing it [training] with sixth years and having ambassadors and spreading this positive message throughout the school if you're met with that as a young person going into your class... I don't think teachers and guidance realise what impact they have on a young person... and if they're met with lack of empathy or understanding, that really impacts them.

*Teacher*

Teachers discussed the need to embed the practice of challenging mental health stigma and discrimination into the school and create acceptance and openness of mental health. As one teacher reflected, this should not be a "tick box" exercise but requires "whole school recognition".

### 2.3.2 Parents

Both teachers and pupils reflected engaging parents in challenging stigma and discrimination to be a barrier. Teachers discussed experience of reluctance amongst many parents to discuss mental health, to engage in mental health related school activities or to accept the role of the school in the mental wellbeing of their child if directly related to mental health struggles. Lack of understanding and fear around mental ill health was felt by teachers to contribute to stigmatising behaviour of parents:

If it's not directly related to their exam results, it's difficult. 'Well, my kid's fine, my kid doesn't have mental health, my kid doesn't have anxiety'...

*Teacher*

These views were also reflected in those of the pupils and the impact that relationships have on their confidence to discuss mental health, which is discussed below in section 2.5.



## 2.4 Mental Health Literacy:

Pupils were able to talk about mental health and most said that they think everyone has mental health; however, answers to the question {what does mental health mean to you?} were varied and demonstrated different interpretations. Answers included health of the brain; coping ability; happiness; learning difficulties; Down's Syndrome; stress; bullying; feelings; viewpoints; and depression and anxiety, amongst others. Further, pupils talked about mental health predominantly in the context of mental ill health, across all schools and year groups, but particularly amongst younger years:

[of mental health] When you have a mental problem, like in your brain.

*Pupil (S2)*

When you've got an unhealthy mental ability.

*Pupil (S2)*

Someone's struggling to cope or is really unhappy.

*Pupil (S2)*

This reflects the negative context within which several pupils reported the topic of mental health is addressed within and out with school. These pupils felt that adequate explanation of mental health and positive mental health is lacking. One pupil reflected:

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 (S3)*

This sentiment was shared by another pupil, who echoed:

I think they [teachers] focus more on what to do if you have ill mental health, but they don't talk about positive mental health and how you can maintain positive [mental health].

*Pupil (S5)*

Teachers also conveyed concerns that, with challenges to mental health stigma and discrimination and increased conversation about mental health, pupils are not mental health literate enough to accurately identify and discuss their emotions and own mental wellbeing and that this can have a detrimental impact on them:

**Teacher One:** The young ones, S1, S2, when they're struggling, they go straight to, 'I don't want to be here anymore', there's no middle ground, it's 'I don't want to be here'. There's no resilience.

**Teacher Two:** I think it's because they're talking about it more probably within school and with social media... 'one day I'm happy and one day I'm sad, so I'm bi-polar'...

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

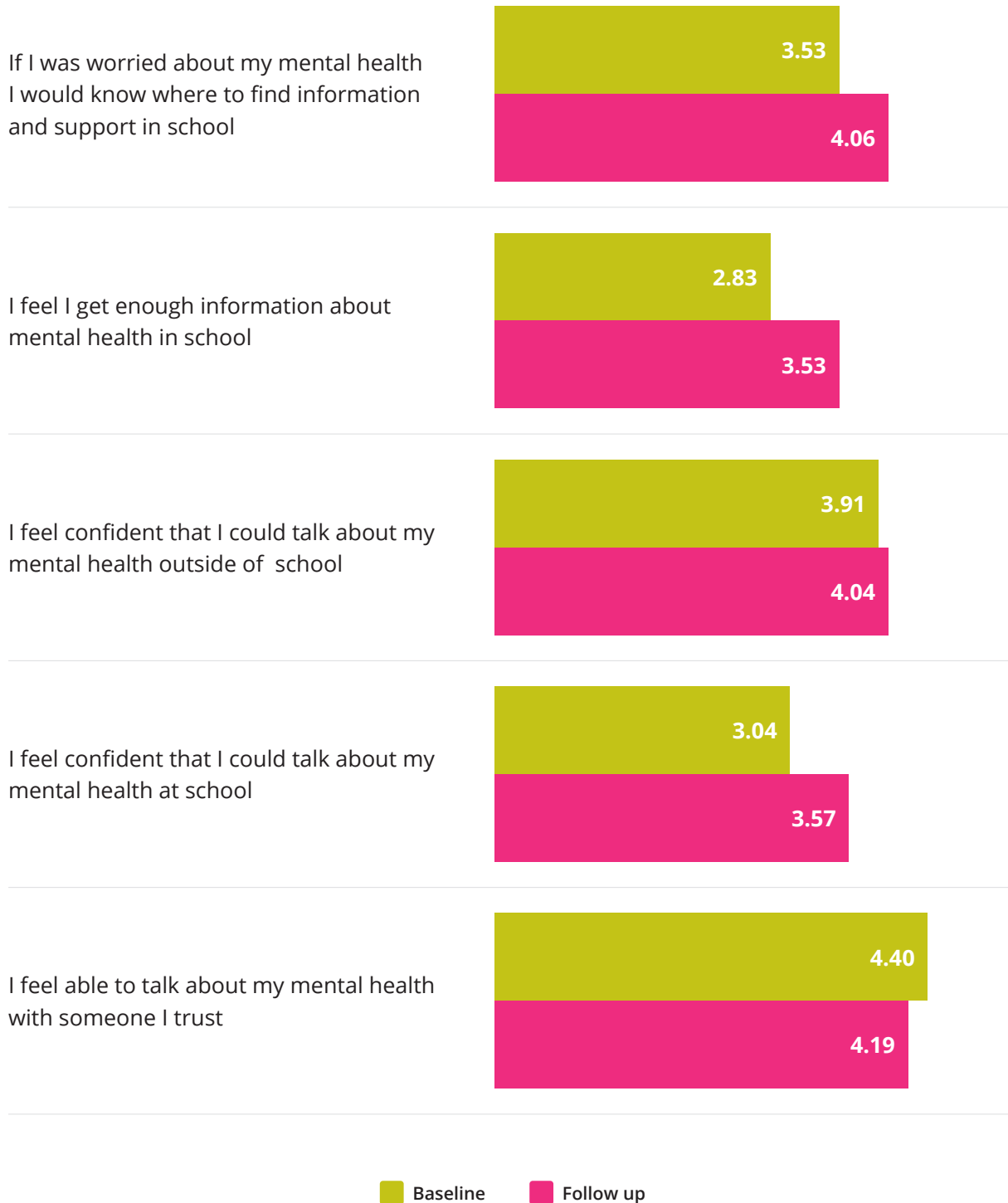
**Teacher Two:** And what they're experiencing is absolutely normal.

A negative framing of mental health is being experienced and expressed by pupils. This is having the unintended consequence of problematising the distinction between mental health and poor mental health for pupils who lack the language and understanding of these concepts and issues and how to differentiate them. A further consequence of the experience of negatively framed mental health appears to be of reinforcing stigma, as pupils report reluctance or a perception of reluctance to identify with mental health (see below: Help-Seeking Behaviour).

## 2.5 Help-Seeking Behaviour

Confidence to talk about mental health and to identify and approach sources of support are integral to help-seeking behaviour and overcoming stigma and discrimination. Overall, confidence to talk about mental health remained moderate, with a slight positive increase detected in the three schools in Local Authority A. The biggest positive change was in 'I feel I get enough information about mental health in school', which rose from a baseline mean **2.83** to a follow up mean **3.53**. 'If I was worried about my mental health I would know where to find information and support in school' rose from a baseline mean of **3.53** to a follow up mean of **4.06**. 'I feel confident that I could talk about mental health outside of school' rose slightly from a mean of **3.91** to **4.04**. 'I feel confident that I could talk about my mental health at school' rose from a baseline mean of **3.04** to a follow up mean of **3.57**. The exception was 'I feel able to talk about my mental health with someone I trust', which decreased from a baseline mean of **4.40** to a follow up mean of **4.19**; however, this difference is nominal.

Figure 1: Confidence to talk about mental health survey results (n=53)



Most pupils in the focus groups, across all year groups, said that they would feel more comfortable to talk to their friends if they were struggling with their mental health than they would be to talk to teachers or their parents. Teachers were the next preferred source of support, with parents coming last. Discussion with pupils indicated that this is due to parents being perceived to be reactionary, disbelieving and as exhibiting stigmatising behaviour:

My parents might be a bit more, like, fussy over it... your friends are going through all the same stuff, you know, school and that kind of thing

**Pupil (S4)**

Some pupils discussed feeling most comfortable to disclose mental health information to individuals further removed from their daily lives and routines, such as wider family members or family friends. They felt that this provided a level of trust, separation, objectivity and confidentiality. Many pupils felt that they didn't know teachers well enough to approach them to discuss their mental health. Confidence to talk about mental health for these pupils is closely linked to an established relationship:

**Interviewer:** Is there any reason why you wouldn't talk to your teacher?

**Pupil One (S5):** It's not really like a relationship with them.

**Pupil Two (S5):** It's not really the same as it is with a friend...unless it's a very good teacher-pupil relationship, but that's very rare.

For some pupils, lack of trust in their teachers impacted on their help-seeking behaviours. A perception of potential consequences after disclosure, that teachers will talk about them or that school life will be affected, persists in the minds of the pupils. This finding closely aligns with findings from evaluation data in Years 1 and 2, which found trust to be a foundational issue for school pupils when discussing mental health and exhibiting help seeking behaviour.

### 2.5.1 Attention-seeking

A recurrent theme in the pupil data was the perception that peers were attention-seeking by openly discussing or disclosing mental health problems, or that they would be judged by peers as exhibiting attention-seeking behaviour if they discussed their own mental health:

People think that you are just putting it on, just to get some attention or something.

**Pupil (S3)**

Again, help-seeking behaviour was linked to issues of mental health literacy and the negative framing of mental health that pupils report experiencing. Stigma gets in the way of help-seeking behaviour and one of the biggest contributing factors that pupils discussed was a fear of their peers finding out.



## 2.6 Increased Awareness and Hidden Mental Health

Pupils discussed an increased awareness of possible hidden mental health problems and how it's not necessarily easy to spot someone who is struggling. Pupils were able to relate this to possible feelings of embarrassment or shame or worrying about being made fun of. The pupils demonstrated a broad understanding of stigma and discrimination, although not necessarily using this terminology or knowingly associating what they were saying with stigma:

Pupil One: I don't think in this year I could spot someone with [a mental health issue]... I don't think anyone's really 'labelled' to having a mental health issue...

**Pupil Two:** Because they feel ashamed.

**Pupil Three:** Because people make fun of them.

**Pupil Two:** ...this person might have issues and this person might actually be upset...

**Pupil One:** What they've done [stigmatising], that stays with you.

The pupils were also able to abstractly compare different types of stigma, making associations and drawing comparisons with stigmatising language around, for example, homosexuality:

It's like when people say someone is gay... like, 'that's so gay'. That's stigma.

**Pupil (S4)**

Pupils did not express confidence in being able to free schools from stigma and discrimination, despite - where an understanding of the issue was communicated - acknowledging that it is what they would like to see:

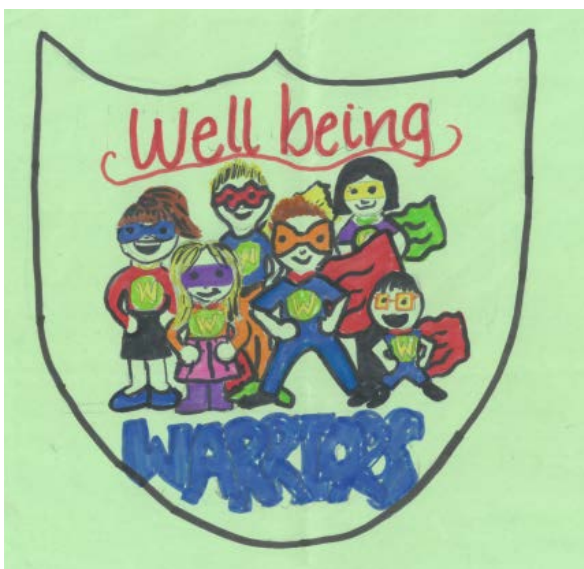
I just feel like it's never going to happen [a school free from stigma and discrimination], I feel like there's always going to be some sort of stigma around it, like an aura around the schools. School is just one of those things, it's like chucking someone into a snake pit.

**Pupil (S3)**

## 2.7 Sustainability of action

There were variable amounts of mental wellbeing activity and output reported across the three schools. Following an initial surge in activity by ambassadors immediately after training, work on challenging stigma and discrimination had tended to stall and both teachers and pupils reported that work is mainly siloed to PSE class or equivalent. Another common theme was a focus on exam-related stress. All schools reported engaging in Mental Health Awareness week and other national mental health and wellbeing campaigns, during which times activity within school increased. Tangible outputs delivered by school ambassadors included a schoolwide mental health and wellbeing logo competition (see Figure 1); the introduction of a 'cosy cafe' for pupils; a mental wellbeing corridor, where people can anonymously post their feelings on the wall and dedicated mental health and anti-stigma school Instagram pages.

**Figure 1: Local Authority A Secondary School Mental Health and Wellbeing Logo**



## 2.8 Local Authority Approach

As a local authority, Local Authority A has taken and continues to take definitive action to eliminate stigma and discrimination in education and young people. Senior pupils and staff in all secondary schools in the local authority continue to receive See Me programme training. The See Me EYP programme training is compulsory for all schools in Local Authority A, enforced and overseen by the Senior Education Officer and the Health Improvement Lead for Children and Young People. Teachers reported being very supportive of this approach:

Every day we've got kids at our doors with anxiety, with stress, with mental health issues... it forces your hand [the training], you have to do it and I like that aspect of it.

*Teacher*

The local authority approach in Local Authority A also helped in overcoming resistance from teaching staff who were reticent to allow senior pupils time out of class for the training:

I also like the fact that when I say to teachers, 'I'm taking these kids out for two days... it's from above the school so they [the teachers] have to support it.

*Teacher*

## 3.0 Local Authority B: Building Capacity

In 2017, Local Authority Area B were enrolled into the EYP training programme. At that time, preparations for staff and senior pupil training delivery were undertaken. Due to unforeseen circumstances, Local Authority B temporarily withdrew from the See Me programme. See Me maintained a close relationship with Local Authority B. In May 2018, they held a development day with intersectional and multi-agency partners; the aim of this was to share good practice around what was happening in terms of mental health across the local authority. See Me facilitated the day and drafted a follow-up report. Subsequently, Local Authority Area B established a Strategic Group, with the aim of demonstrating rationale behind key mental health deliverables and a sustainable approach to mental health intervention delivery in schools. Multi-agency partners and representatives from the health, education and social care sectors, amongst others in Local Authority B, sit on the group.

Anti-stigma and discrimination were designated as an essential function of the Strategic Group and delivery in schools and See Me were invited to be a core member. See Me went on to deliver a small test of change in a Local Authority B school, delivering training to senior pupils, staff and parents. This year, Local Authority B proceeded with the See Me EYP training programme and staff and senior pupils in nine secondary schools received cascade training (240 pupils; 36 staff). Further, Local Authority B are now offering SVQ Level 4 in Mental Health and Wellbeing to S3 pupils and up. This qualification is underpinned by See Me WOYM pack resources. The Strategic Group continues to meet quarterly and See Me retain a core role in the group. The following findings are taken from an in-depth focus group with the Strategic Group in Local

Authority B; two focus groups with teaching staff in the recent See Me training (n=12) and training evaluation feedback from all senior pupils who recently took part in the recent See Me training (n=240).

### 3.1 Strategic Senior Leadership

The Strategic Group has made significant change to mental health delivery in education in Local Authority B. The group aims to share learning across the sector and provide equality of mental health service provision across the authority and ensure children get access to the same opportunities:

The group is about partnerships... promoting shared learning and sharing resources... just sharing good practice and promoting consistency as well. And a sort of more strategic overview of what's going on across the authority.

*Member One, Strategic Group*

I don't like to use the phrase postcode lottery, but it is a wee bit, because some localities were doing a lot and some weren't. So I would say consistency was definitely one of the main reasons.

*Member Two, Strategic Group*

We needed buy in from senior management in the authority...we didn't want a situation where we said to schools, yes, you can do this and then we had [just] two schools buying in.

*Member One, Strategic Group*

The relationship with See Me has been pivotal for the group and for building capacity to challenge stigma and discrimination in Local Authority B. Strategic Group members attributed this to “follow through” from See Me and maintaining contact, despite unexpected circumstances, from day one:

I think certainly from our perspective, from the secondary school that I’m in, the prior involvement of See Me was pivotal... it laid the foundations for future working –

*Member Three, Strategic Group*

...mental health...it’s getting recognition now....in the last few years, there’s been a need for something...I’d say more so now than ever. The timing is crucial.

*Member Three, Strategic Group*

Strategic Group members also attributed successes to having a lead contact at each school who is motivated and engaged to tackle stigma and discrimination and address mental health. They also felt that the refocused structure overcame previous reluctance by some schools, as it was more practicable and involved less time, money and staff commitment. Strategic Group members also felt, similarly to staff in Local Authority A, that offering the training to S5 pupils could potentially be beneficial, as it would embed the learning more into the school and allow ambassadors to “contribute to the life of the school for longer.”

The Strategic Group felt that See Me would be integral to their work for the foreseeable future. They want to ensure that they are delivering sustainable interventions and

change in mental health for young people and continue to focus on tackling stigma and discrimination. See Me support them in this endeavour:

This is something that we can continue ourselves, but to do that, I think we need quite a bit more support from See Me... It’s still early days... we need to make sure that we are reflecting the needs of all our young people in Local Authority B.

*Member Two, Strategic Group*

Developing services for younger, primary age pupils and hard to reach groups are also goals discussed by the group, on which they want to work with See Me.

## 3.2 Empowering Teachers and Pupils

### 3.2.1 Increased confidence

Teachers in the focus groups were very positive about the See Me training and overall expressed that they felt increased confidence to discuss mental health and deal with mental wellbeing related situations:

It definitely raised awareness...and it definitely raised confidence.

*Teacher, FG One*

To be honest, I think it’s the type of training that all staff and all schools should go through.

*Teacher, FG One*



Someone having an anxiety attack, just knowing. I really genuinely wouldn't [have] really know what to do. But knowing now, I'm feeling a lot more confident to be in a situation like that.

*Teacher, FG Two*

Ideally, I could see it happening in all subjects...we never talk about health and wellbeing. You know, we just assume that somebody else is doing that.

*Teacher, FG One*

### 3.2.2 Shared learning

Teachers discussed that taking part in the training with staff members from other schools in the local authority facilitated a sense of empowerment and confidence to carry on work on their schools. The training provided them with an opportunity to share learning and experience and united everyone under a common goal:

I think it [the training] gave an identity to the community in the room, so that was, that was really well done.

*Teacher, FG One*

This unification extended to the senior pupils; the teachers felt that taking part in the training alongside the senior pupils built a trust and confidence in the teaching staff and built capacity by breaking down barriers:

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, FG Two*

They also discussed that the See Me training helped to build on existing knowledge and learning and that made them feel more capable of carrying forward mental health work in their schools.

### 3.2.3 Personal Mental Wellbeing

The teachers also discussed how the training made them think about their own mental wellbeing and how important it is, both personally and as a teacher:

I think it's just an element when you are in a room constantly talking about it, you subconsciously just address the situation personally. I think it had me thinking about my own life... if I'm not in a good place, I'm actually not much use to my kids [pupils]. You've got to look after yourself in order to look after others. I liked that bit; I thought that that was good to bear in mind.

*Teacher, FG One*

And the fact that if you say, well I'm dealing with teachers as adults that have positive mental health because of the way they treat themselves... it's contagious.

*Teacher, FG One*

### 3.2.4 Stigmatising language and social contact

Increased awareness of the use and implications of stigmatising mental health language was also discussed by teachers following training:

Now that I think about it... I actually spot it in adults, like my friends and family as well... they will say something like 'doolally' or 'that's mental' or something like that. And they don't understand the implication around it... It certainly opened my eyes.

*Teacher, FG One*

The social contact model of support from Young Champions - who facilitated sessions during training - was felt by teachers to offer senior pupils important lived experience and learning from those closer in age:

I think the model of having younger people...that's quite a good model. Someone separate that's not the teacher. We're getting too old now.

*Teacher, FG One*

I think I would [normally] put it [mental health] under PSE...that's the easiest way, rather than actually a grander, sort of ethos, culture change. 'Ah, dip it in PSE, that'll cover it, that'll tick the box'.

*Teacher, FG One*

### 3.2.5 Implementing learning

Several teachers already had ideas for how they were going to bring learning to their schools. Some reflected similarly to those in Local Authority A, suggesting that the inclusion of strategies and "the actual logistics of how to implement change in a school" would be a helpful addition to the training; however, some had innovative ideas of their own:

I'm thinking about it in the classroom context... my plan for my S3 drama class... is devising a piece of theatre and education around mental health for the whole of First Year...Sixth Year pupils can lead and be part of it.

*Teacher, FG Two*

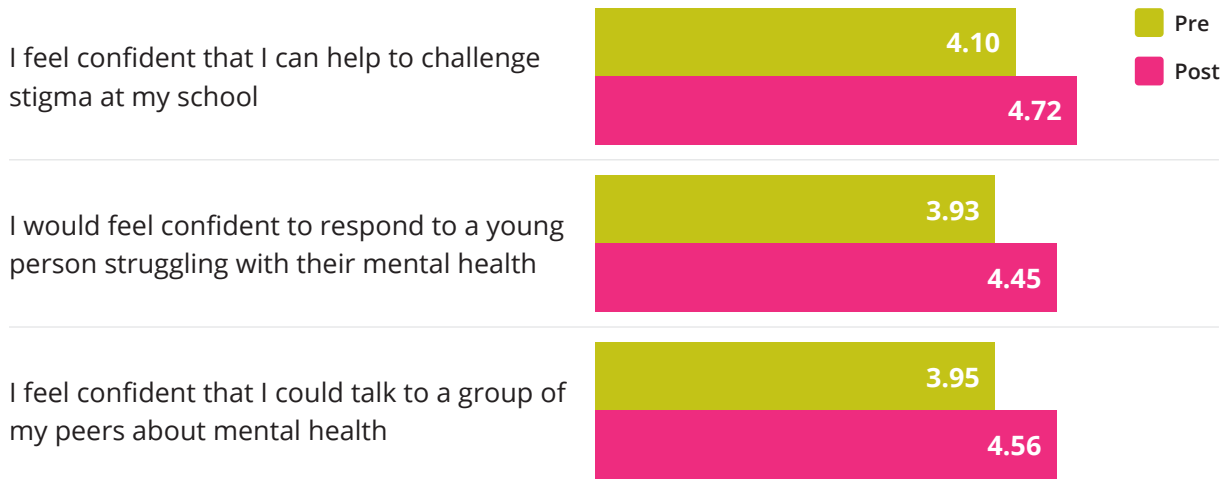
Overall, the response in Local Authority B to the See Me training was overwhelmingly positive, engaging and empowering the teaching staff to address mental health and tackle stigma and discrimination in their schools. As one teacher stated:

I can't believe I've been allowed to have as many children in front of me every day without having this training.

*Teacher, FG Two*

### 3.3: Pupil Training Questionnaire Feedback

**Figure 2: North Ayrshire Training Pre and Post Means**



**Figure 3: North Ayrshire Training Evaluation Means**



Due to practicalities, no qualitative data was gathered with senior pupils at training. However, feedback from evaluation questionnaires indicate that, overall, See Me training in Local Authority B was found to increase the confidence of senior pupils to discuss mental health and challenge mental

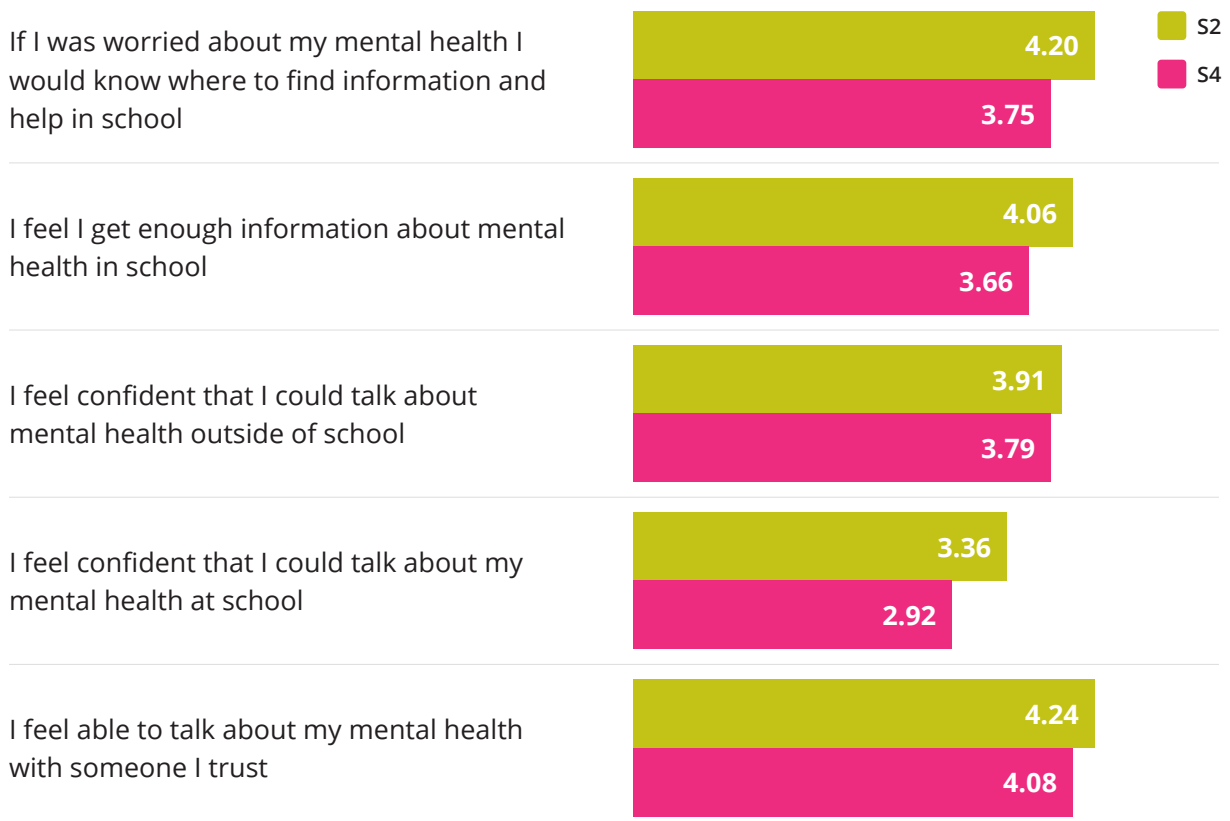
health stigma. The biggest change was 'I feel confident that I can help to challenge stigma at my school', which rose from a pre training mean of **4.10** to a post-training mean of **4.72**. Mean scores for all items relating to experience of the training were high, ranging from **4.67** to **4.86** (Figure 3).

## 4.0 Beginning the Journey: Local Authority C

Local Authority Area C recently received their first round of See Me training; five secondary schools in the two local authority took part (n=240 senior pupils and 15 staff). Unlike Local Authorities A and B, See Me training in Local Authority C was not compulsory nor was it carried out with every secondary school this year – it was done on a pilot basis. The following data is cross-sectional qualitative and quantitative data from one secondary

school who received the training; this includes 364 S2 and S4 survey questionnaires; a teacher focus group; two S2 and two S4 pupil focus groups and an interview with the lead contact at the school. The work being carried out and built upon in this secondary school began as a result of initial contact with the See Me EYP team in August 2018, prior to training. See Me attended an inset day at the school and gave a presentation to staff.

Figure 4: Confidence to talk about mental health results

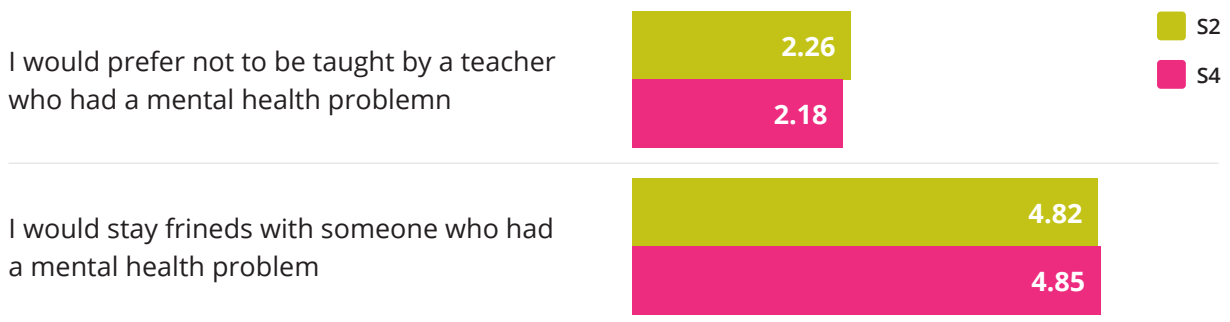


#### 4.1 Pupil survey questionnaires

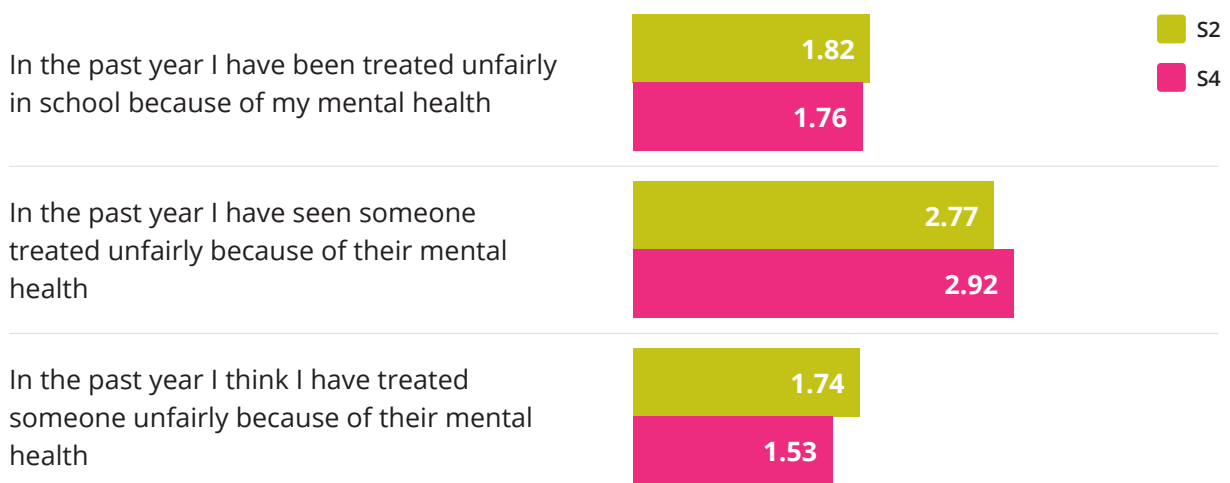
Survey questionnaires showed that overall, pupils in S2 reported more confidence than pupils in S4 to talk about mental health. The biggest difference was 'If I was worried about my mental health I would know where to find information and support in school', which had a mean of **4.20** for S2 and a **3.75** for S4. 'I feel I get enough information about mental health

in school' had a mean of **4.06** for S2 and **3.66** for S4. Similarly, 'I feel confident that I could talk about my mental health at school' had a mean of **3.36** for S2 and **2.92** for S4. The difference was smallest for 'I feel confident that I could talk about mental health outside of school' which had a mean of **3.91** for S2 and **3.79** for S4. And 'I feel able to talk about my mental health with someone I trust' had a mean of **4.24** for S2 and **4.08** for S4.

**Figure 5: Understanding stigma and discrimination results**



**Figure 6: Experience of stigma and discrimination results**

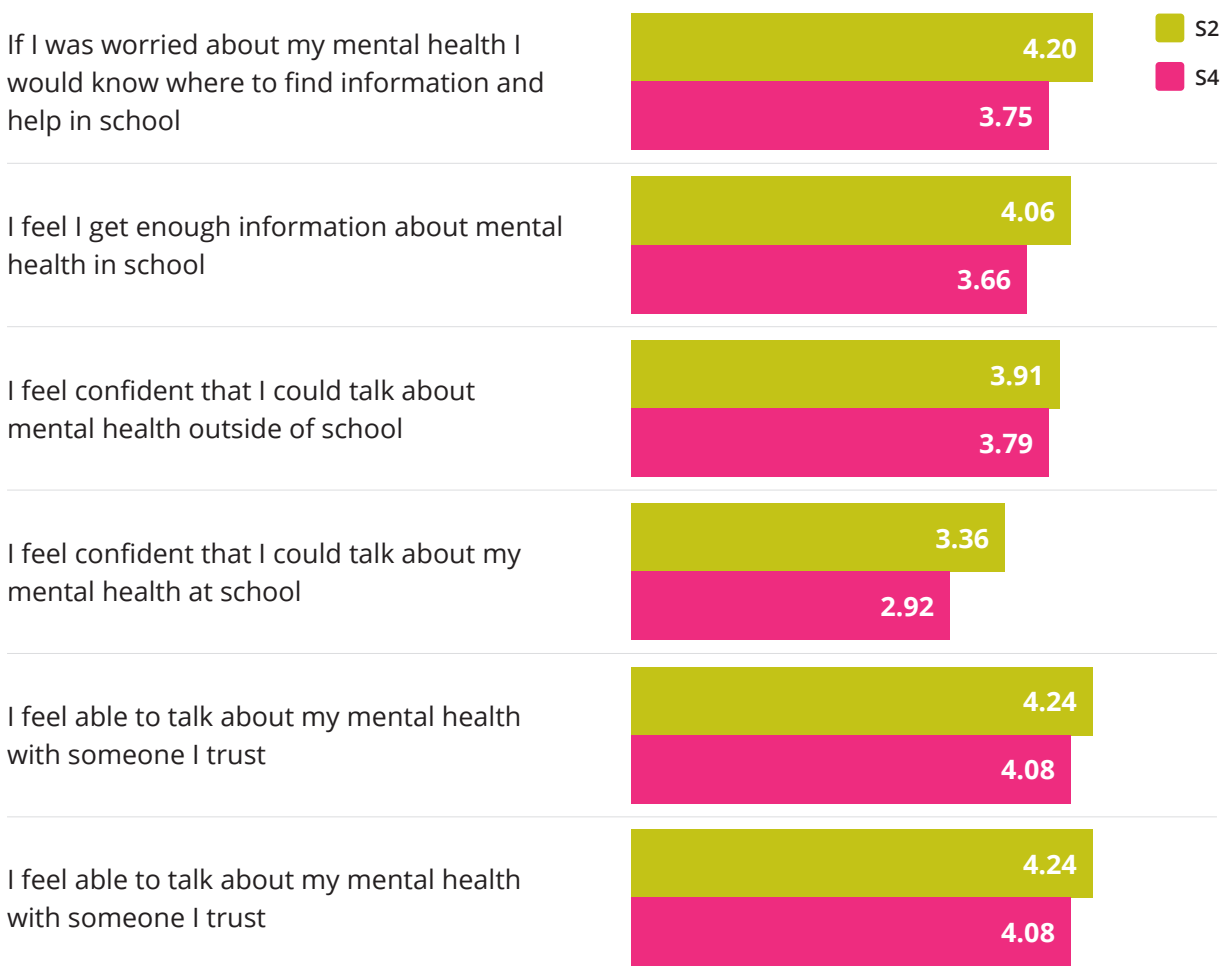


Overall understanding self-stigma, stigma and discrimination did not indicate any difference between S2 and S4. 'I would prefer not to be taught by a teacher who had a mental health problem' had a mean of **2.26** for S2 and a mean of **2.18** for S4, indicating that most pupils slightly disagree with that statement, but did not strongly disagree. 'I would stay friends with someone who had a mental health problem' had a mean of **4.82** for S2 and a mean of **4.85** for S4, indicating strong agreement with that statement.

Experiences of stigma and discrimination across S2 and S4 were broadly similar. The

biggest difference was 'In the past year I think I have treated someone unfairly due to their mental health' which had a mean of **1.74** for S2 and **1.53** for S4. 'In the past year I have seen someone being treated unfairly because of their mental health' had a similar difference with a mean of **2.77** for S2 and **2.92** for S4. This suggests that pupils are unsure if they agree with this statement, as they neither strongly agreed or disagreed. Pupils did not report being treated unfairly due to their mental health; the statement 'In the past year I have been treated unfairly in school because of my mental health' had a mean of **1.82** for S2 and **1.76** for S4.

**Figure 7: Acting on stigma and discrimination results**





There were some noticeable differences between S2 and S4 within acting on stigma and discrimination. The biggest difference in 'Tell a member of staff if you were being picked on because of your mental health' which had a mean of **3.45** for S2 and **2.99** for S4. The next biggest difference was between 'Tell a member of your family if you were being picked on because of your mental health' which had a mean of **3.91** for S2 and **3.58** for S4. Elsewhere there was not much difference between S2 means and S4 means. 'Stick up for a member of staff if pupils were making fun of them because of their mental' had a mean of **3.39** for S2 and **3.89** for S4. 'Support someone to get help if they were struggling with their mental health' had a mean of **4.67** for S2 and **4.63** for S4. 'Tell a friend that you were being picked on because of your mental health' had a mean of **3.93** for S2 and **3.88** for S4. And 'Stick up for someone if they were being picked on because of their mental health' had a mean of **4.55** for S2 and **4.46** for S4.

Despite quantitative results indicating that S4 pupils were less confident to discuss mental health than S2 pupils, during focus group discussions S4 pupils demonstrated more understanding and awareness of mental health than S2 pupils. They were able to articulate that everyone has mental health, that it varies from person to person and that when someone is struggling it is not always visible: "It depends on the person... some people are better at hiding it than others." S4 pupils, unlike S2 pupils, also discussed being more likely to seek support from sources such as the internet, than from another person. In addition, a number said they would rather talk about their problems to a pet or an anonymous person than someone they know.

Similar understandings of mental health and levels of mental health literacy were demonstrated as by pupils in Local Authority A. Analyse of S2 and S4 data highlighted greater understanding amongst older pupils, who were better able to articulate what 'mental health' means.

## 4.2 Addressing mental health and building resilience

Teachers perceived that mental health is a growing issue amongst young people and that instances of poor mental health have increased in schools in recent years. They were therefore highly motivated to take part in the training:

It's definitely something that I think I am becoming more aware of... I am definitely seeing it [mental health issues] becoming a growing issue in my classes... I just don't think I know enough about it.

*Teacher*

It's something that, when I was at school, it was never, ever discussed. So for me I need to know so that I can then...deal with it. I don't know how to deal with it, so that's why I'm here.

*Teacher*

Teachers were also looking for clarity around mental health and what poor mental health looks like and when it becomes problematic:

Not sure if I fully understand all the ins and outs of what falls under the auspices of mental health and what doesn't sometimes... There's some mental health issues but we don't know if they're on the spectrum. If those issues are just day to day things you deal with or whether it's something we should be seeking help for. I don't know if it's a mental health issue or just part of life.

*Teacher*

They relate this to increased awareness and mental health being discussed more:

I guess now that we are more aware of it and it's being talked about more... I guess you start to question it – 'oh, am I worrying too much?'

*Teacher*

Teachers felt that they need the training to feel confident in delivering messages about mental health and stigma to pupils, as well as engaging with pupils who may be experiencing mental health problems. They discussed feeling as though they lack the skills and training to do this effectively:

I think there's always that thing about if we think somebody's got mental health issues, how would you raise it? Is it kind of a sort of judgement thing you are making about them, I don't know, so it's an awkward one isn't it?

*Teacher*

Teachers distinguished between increasing awareness of mental health problems in pupils, but a lack of understanding of how to identify it and how to deal with it. The lead contact at the school highlighted that initiating and building staff engagement and confidence was imperative and that until initial contact with See Me, the school weren't doing anything to address mental health. The death by suicide of a local pupil brought the issue to the fore:

It's a massive responsibility if a child's in front of you and it's obvious they're dealing with mental health issues... and you yourself don't have the knowledge to then signpost them or really know what to do with them... It was hitting home that something had to be done because at that we weren't really doing anything as far as mental health went.

*Lead Contact*

Alongside staff engagement, the school began to introduce the pupils to the idea of positive mental health. Following initial staff training by See Me, the school had a launch week, during which pupils had mental- wellbeing related activities every day and the school signed a Stigma-Free pledge. They created an 'I am...' wall, where every child and staff member in the school had a Post-It to write on and stick on the wall. They could write anything they wanted. The aim of this was to "show that we were all together." This was a very successful activity, with which almost all pupils engaged. Figure X shows the 'I am...' wall.

The lead contact also discussed further development work and building on the training from See Me, including a wellbeing room. This was established in response to long-waiting lists for children's mental health services and the need in the school:

So our thing was to try and create a support network in school for the kids who need proper counselling but they just couldn't wait. So as part of that we created the well-being room... The kids are referred by their pupil support teacher... They are allowed in a maximum of three periods a day, but it's to try and help kids to engage in school.

*Lead Contact*

The wellbeing room is supervised and has textbooks and resources, including colouring and 'busy boxes' to cope with anxiety and the See Me WOYM pack. The lead contact reported that there is always at least one pupil in the room. The school also have a mental health and wellbeing Twitter account and a 'worry box' in the school library.

Following shared practice discussions at a meeting with other local authorities, it was identified that a council or local authority-led campaign may be beneficial and support the work being driven by each individual school.

The school has an action plan for the year ahead, which they have developed with See Me. This action plan aims to initiate parental involvement and to focus on boys and boys' emotional literacy. The relevance of this action is reflected in the pupil focus group discussions. S4 boys commented:

...people don't expect boys to feel all self-conscious and that. Boys are meant to be strong and get over it. Boys have got the same worries as everyone else.

*Pupil, S4*

I think it's the raising awareness that then helps to break down the stigma. If the kids are seeing that we are talking about it... and we've got our pupil ambassadors. The kids who are mental health first aid trained by See Me introduce themselves at assemblies... and say to them (pupils)... it's okay to feel like that, you can come talk to us.

*Lead Contact*

I don't think it's necessarily just a fight against stigma, I think it's more raising awareness and understanding of mental health will then help in turn to reduce the stigma, or make young people more aware of the stigma attached and how it's not really fair.

*Lead Contact*

We have done a lot, but there is still a lot to do. I think...small steps... I think young people are much more open to talking about it. It's the kind of thing if they know you care, that's what the first thing is.

*Lead Contact*

The lead contact described how See Me has been an integral part of where the school is now:

Without See Me, we wouldn't have got the training. The resource packs they've made up are absolutely amazing. They're so open to coming in and working with you to develop more stuff as well.

*Lead Contact*

The school now has 30 SMHFA trained members of staff, including administrative and library staff as well as teachers. When asked what their advice would be for a school starting on their journey to reduce stigma and discrimination, the Lead Contact recommended:

Baby steps. If you bombard all the staff and all the pupils then... it's like a flash in the frying pan. It needs to be slowly introduced so that it's properly embedded. Using an approach that you can get as much engagement as you can; our Twitter followers go up every day.

*Lead Contact*

### 4.3 Barriers to training and implementation

Time and commitment constraints on teachers were highlighted as barriers to taking part in mental health-related training and to implementing learning and activities within the school. The burden on remaining staff members who attend training was also discussed. To overcome this barrier, See Me offered 'twilight' sessions to the school and split the teacher training over four nights instead of two full days, preventing the need for cover requirements. The school initially received staff training from See Me in December 2018, before the training in 2019.

Budget and financial burden were also important considerations for the school. The lead contact discussed not having a budget for mental health. That See Me training is free was an important consideration.

## 5.0 See Me Youth Champions

In August 2019, See Me ran their third Youth Champions training weekend. This was attended by **27** new Youth Champions in training and six previously trained Youth Champions, who attended to facilitate the weekend and offer support to the new cohort.

### 5.1 Residential training selection process

See Me Youth Champions are young people between the ages 16-25, many of whom have lived experience of mental ill health. Potential volunteers express interest before attending an open day. There is then an application process and a selection day, which is facilitated by youth champion volunteers already on the programme. The purpose of the selection day is to assess “appropriate individuals” for the residential training and to ensure that individuals needing specialist support and care are not enrolled and are signposted onto a personal development programme. Following selection, volunteers receive a one to one with See Me and a safe plan is developed, references are sought, and a mentoring and shadowing process is followed to assess how they engage with others, before carrying out activities on their own. Enhanced PVGs are undertaken for work with adults and children and young people. Table 3 presents diversity monitoring data for all Youth Champions trained in the past three years.

**Table 2: Youth Champion 3-year Diversity Monitoring Data**

		N	%
Gender	Male	8	19%
	Female	31	74%
	Transgender	2	5%
	Prefer not to say	1	2%
	<b>Total</b>	<b>42</b>	
Ethnic Origin	White Scottish	25	60%
	White British	4	10%
	All other White	10	24%
	Asian or British Asian	1	2%
	Chinese or British Chinese	2	5%
	<b>Total</b>	<b>42</b>	
Religion	Christianity	8	21%
	No Religion	31	74%
	Other	1	2%
	Prefer not to say	1	2%
	<b>Total</b>	<b>42</b>	
Disability	Yes	4	10%
	No	37	88%
	Prefer not to say	1	2%
	<b>Total</b>	<b>42</b>	
Sexuality	Heterosexual	23	55%
	Bisexual	10	24%
	Lesbian	3	7%
	Other	3	7%
	Prefer not to say	3	7%
	<b>Total</b>	<b>42</b>	

The following findings detail the experience of the previously trained See Me Youth Champions and are composed from the free-writing exercise and focus group carried out with these participants. Please see Section 1 for methods and data analysis information.

### 5.2 Vignette: Dale

Dale is a 20-year-old who identifies as non-binary. Ordinarily, Dale avoids social situations and only feels comfortable amongst close friends or family. Dale found a lot of comfort in the environment and atmosphere of the residential; they found it was a safe space, where they felt confident and able to be themselves. Dale feels passionately about mental health and overcoming stigma and discrimination and has themselves encountered stigmatising behaviour in the past. Dale was initially daunted by the idea of the residential but found staff and peers to be very supportive which put them at ease. Dale found the residential to be a supportive environment, without judgment, where they were accepted and could be themselves. Dale built confidence through the training weekend to express their convictions and confidently challenge stigma. Dale left the residential feeling accomplished and having gained useful skills and experience. Dale went on to carry out several anti-stigma activities for young people in their community and is now a Consultant Youth Worker at See Me. Dale has found this progression to have been well supported by See Me.

### 5.3 Additional findings:

Participants discussed how the training and support they receive from See Me is integral to a feeling of empowerment to end mental health stigma and discrimination. They report that See Me gives them skills, knowledge and confidence to deliver key messages. One Youth Champion has set up a society at university, which focuses on mental health. This society has driven the training of university staff and students in Scottish Mental Health First Aid and often partners with other university societies to deliver anti mental health stigma and discrimination messages:

I feel like I eat, sleep and breathe dismantling stigma and discrimination.

*Youth Champion*

I feel like every time I come back from an event with See Me... I feel so empowered. I'm like yes, we're going to change the world.

*Youth Champion*



All previous Youth Champions (now Youth Workers) are trainers in Scottish Mental Health First Aid Training and have been trained in the approach of the See Me EYP programme. This was discussed as a significantly positive opportunity, for which they are very grateful to See Me. Youth Champions also reported having had other opportunities through See Me, such as media training. The Youth Champions were keen to reinforce that all activities and opportunities are optional and that there is no pressure from See Me to partake. The focus is felt by Youth Champions to be on their own personal development and comfort levels, with the programme adapting to fit the pace of each Youth Champion:

I'd never ever, ever imagined being paid to do this. I would have continued to do this – I would have done this for free until I died, that's how much I care about it... to be respected and given the opportunity to do this as a bit of a career is just amazing for me.

*Youth Champion*

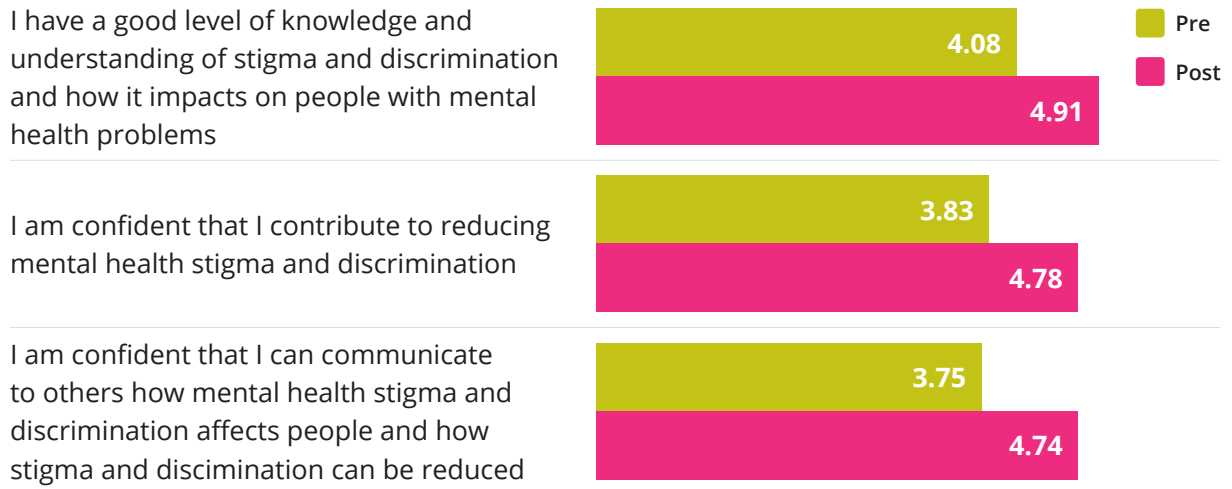
Notably, Youth Champions discussed that, whilst challenging mental health stigma and discrimination, one must individually and collectively be mindful of displaying other types of stigmatising behaviour and language. In Youth Champion peer to peer interaction, there was experience of non-mental health related stigmatising behaviours. This had the effect of making some uncomfortable and reluctant to fully contribute to or engage with the programme. It was felt that increased awareness was required of other types of stigma to help people understand that, despite Youth Champion engagement in challenging stigma and discrimination, they could still hold and exhibit stigmatising beliefs with regards to other issues:

Just because we're involved in tackling stigma, doesn't mean we aren't also part of the problem sometimes.

*Youth Champion*

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 age, gender, racial, religious and other terminologies that are widely condemned as stigmatising and discriminatory could assist people in bettering relating to the concepts of mental health stigma and discrimination.

**Figure 8: New Young Champions Residential Evaluation Questionnaire Results (n=24)**



**Figure 9: Residential Training Evaluation Means**



The experience of the newly trained Youth Champions was overwhelmingly positive and all felt better equipped and more confident by the end of the residential to challenge stigma and discrimination.

## 6.0 Discussion and Recommendations

### Local Authority Approach and Partnership Working

The local authority approach of the EYP programme has been very successful. See Me have demonstrated excellent partnership working with local authorities to deliver training, to build capacity and to support them through unexpected circumstances, as with the case of Local Authority B. By working strategically with local authorities and partner organisations, including those on the EYP steering group, See Me has developed their programme of work and extended the reach of the EYP programme across Scotland, delivering training to 22 schools this year alone.

Where the local authority approach has been particularly successful, instruction to take part in the See Me programme has come from high level management and is mandatory for all schools in that authority. These were the local authorities with a strategic operational group overseeing mental health work within education. This included Local Authority B, in which See Me were instrumental in establishing a mental health strategic group. In local authorities where the schools opt into the programme individually, buy-in from senior leadership at school-level is essential and maintaining a close relationship with the lead contact important to maintaining momentum and to providing support to the school. See Me has done this very successfully, as demonstrated in Local Authority C.

A benefit of the locality approach is that it is all inclusive and every school has the opportunity to take part. An important consideration however – and one that See Me

are very cognisant of – is the need to think about where a school is on their journey to becoming a mentally healthy community and eliminating stigma and discrimination. The programme must be considered within the context of local issues, such as poverty, deprivation and offending behaviour, which can impact on the mental health, aspirations and attainment of individuals and the school.

Where the See Me programme has been the most influential, it hasn't been used in silo, but rather combined with effective partnership working at the school level. See Me work very effectively at a strategic level and their partnerships are integral to the success of the programme. This learning needs to be carried on into schools, and joint working prioritised to tackle stigma and discrimination and increase the prominence of mental health in the school environment. Local Authority C, although early in their journey, provide a good example of how challenging mental health stigma and discrimination can begin to be embedded in a school environment, structure and culture.

The local authority approach of the See Me EYP programme demonstrates successful progress towards outcome 5: *Diverse leaders and organisations champion the elimination of stigma and discrimination and take relevant action themselves.*

## Training

Both staff and pupils reported feeling more knowledgeable about mental health, stigma and discrimination following training, as well as possessing an increased confidence to discuss these issues in their schools.

The refocused programme delivery is working well and has been positively received overall. The structure makes the training delivery and implementation more sustainable, for See Me and for schools. The challenge for schools will be maintaining momentum and ensuring that further training with ambassadors and senior pupils takes place within their school. The findings suggest that the WOYM resource pack is good at facilitating this process for teachers and pupils and could be augmented with further practical guidance and adapted material for use with younger pupils or pupils with additional needs. Any other available resources should be highlighted.

See Me are developing a training for trainers (T4T) model to delivery within schools and this is supported through the current case studies and good practice examples. See Me will be working towards an accredited qualification for staff and senior pupils from S4 and up, trained in the new See Me programme T4T model. This should assist in reinforcing the importance of challenging stigma and discrimination and make a small but significant step in aligning mental health and wellbeing alongside other priority areas. This will also build local level sustainability.

Evaluation findings demonstrate the successes of the EYP training programme and the contribution this has made towards achieving the outcome: *People will increasingly feel safe, confident and inspired to speak about their mental health and seek help.*

## Social Contact

The evaluation found that social contact was fundamental to the engagement of young people across the See Me EYP training programme. The facilitation of training in schools by Young Champions was well received and appeared to enhance the experience for pupils and break down barriers to participation. Participants in both Local Authority areas A and B reflected on the importance of lived experience volunteers in their training. Further incorporation of lived experience into the training programme and ongoing support from See Me would be welcomed by teachers and pupils alike.

## Age of Pupils

Data demonstrated disparities across year groups in their understanding of mental health, stigma and discrimination and in their mental health literacy. Additionally, confidence to talk about mental health also differed across year groups. Consideration should be made therefore of how training is adapted and implemented appropriately to consider the of age of the pupils and ensure that schools are empowered to build knowledge and confidence around mental health and eliminate stigma from S1 upwards.

## (Re)Framing Mental Health

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 and reflected that learning they receive on the subject is chiefly focused on such things as identification of poor mental health, help-seeking and coping with anxiety and depression. These experiences of negatively framed mental health appear to be having the effect of reducing mental health literacy and help-seeking behaviour and perpetuating stigma. Pupils discussed mental health as a problematic and suggested they would not seek help if required, for fear of condemnation by their peers or even their parents. In order to address this, mental health should be reframed positively, and increased content of positive mental wellbeing and all aspects of mental health included in training and imparted to schools. This is an important consideration for See Me, who should address how mental health is framed within training and materials. 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 the EYP programme, whilst simultaneously highlighting its importance. Consideration of how mental health literacy and understandings of mental health contribute to stigma and discrimination are important to the EYP programme and need to be addressed as part of efforts to eliminate mental health stigma and discrimination in schools.

### Recommendations for See Me:

- See Me should consider the way in which age-specific content in their training and WOYM resource materials can be implemented within individual schools and enhance materials to include further age-specific guidance and learning implementation with diverse pupil groups. Any existing complimentary resources designed to address this should be promoted more widely.
- Evidence suggests a need for wider staff training in schools; it is recommended that See Me encourages wider training or awareness sessions for staff who do not participate directly in See Me training in schools. This could help to overcome barriers to resistance in relation to promoting an agenda around mental health stigma and discrimination within some schools.
- The EYP programme could be enhanced by inclusion of targeted approaches to increase parental understanding and engagement.
- Increased inclusion of lived experience in training and in schools is supported by the data and would enhance the social contact element of the programme.
- See me should think about outcomes across programmes and not within – the EYP programme is contributing to outcomes beyond those stipulated in the outcomes for the programme area.

- See Me should consider how mental health literacy and understandings of mental health contribute to stigma and discrimination. Reframing mental health messages positively within training could improve the mental health literacy of young people and combat stigma and perceived stigma arising from negative perceptions of mental health.

- It is recommended that See Me continues to raise awareness within its training of different types of stigma and discrimination. These areas should highlight issues of diversity, including gender, age, race, religion, sexuality or other characteristics.

### Recommendations for schools:

- Efforts to eliminate mental health stigma and discrimination work best when training is offered to a wider discipline of staff within schools. It is recommended that schools train all staff in See Me Enhanced SMHFA.
- Where possible, See Me should be used in conjunction with other methods to address mental health and wellbeing and tackle stigma in schools. Efforts to eliminate mental health stigma and discrimination will be assisted by cross-programme working, to build knowledge and capacity for change.

It is going to take time to fully establish the impact of the See Me work in schools; schools themselves need time to develop their mental health stigma and discrimination agenda and to apply their learning. Available indications, however, demonstrate the programme's successes. The findings of the current evaluation suggest that the following mechanisms are key to eliminating stigma and discrimination within EYP:

- Partnership working
- Strategic planning
- Senior leadership buy-in
- Local authority approach to delivery

There is strong evidence that See Me is achieving their outcomes. Given the complex nature of the intervention and that it doesn't exist in silo, it is difficult to quantify this achievement. Over time, quantifying evidence of reduction in mental health stigma and discrimination amongst young people and in schools is possible, with a robust survey instrument and longitudinal research.





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**Author:**

Dr Pamela Jenkins, Research and Evaluation Officer, MHF Scotland

**Contributors:**

Julie Cameron, Head of Programmes, MHF Scotland

Jo Finlay, Research and Evaluation Manager, MHF Scotland