

## Case study: Uthink – a third sector recovery learning programme for 14-25 year olds

### Summary

Uthink recovery learning programme is designed for 14-25 year olds experiencing, or at risk of developing, mental health problems (including those with first episode psychosis). The programme ran as a pilot in three sites across England and included residential services, leadership, peer mentoring and modular-based elements.

Now that the pilot phase is complete, aspects of Uthink are being embedded into the local services offered by Rethink in the East Midlands and Dorset areas. Using new funding, programmes are being developed for delivery in London. The London programmes will have a specific focus on supporting young people from black and minority ethnic (BME) backgrounds.

### How the service works

Uthink is a recovery learning project for 14-25 years olds run by Rethink, a national membership mental health charity. The Uthink project ran from 2007-2010 and was piloted in three areas of England – the South East (Southampton), the South West (Bournemouth, Poole and Dorset) and the East Midlands (Derby and Nottinghamshire). The aim of the pilot was to deliver and test a range of activity-based programmes to promote positive mental health and recovery in young people<sup>1</sup>.

The programmes delivered by the pilot are recovery-focused and intend to:

- improve young people's understanding of and ability to manage their mental health difficulties
- help them to build peer relationships and networks
- provide opportunities to learn new skills, including communication skills, and to have hope and aspirations for the future.

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<sup>1</sup> University of Central Lancashire, *Evaluation of the Uthink Project*

[http://www.rethink.org/how\\_we\\_can\\_help/our\\_services/uthink\\_evaluation.html](http://www.rethink.org/how_we_can_help/our_services/uthink_evaluation.html)

<sup>2</sup> Ibid., p. 21

<sup>3</sup> Rethink (2010) *Positive mental health and recovery in young people, Uthink interim outcomes report*

<http://www.rethink.org/document.rm?id=10984>

All programmes emphasise the importance of activities that are enjoyable and rewarding, with particular focus on group activities and learning.

Uthink was designed to address:

*'the lack of services for younger people, especially the 16-18 group who "fall between stools" of CAMHS and adult services, and the need more generally for services that enable people to find their own solutions rather than being prescriptive.'*

The exact format of the programme varied between pilot sites. Core programmes included a six-month programme for 19-25 year olds who have experienced psychotic or other serious mental health difficulties and a shorter (one-week or eight-session) programme for 14-18 year olds who are subject to concern in relation to their emotional wellbeing. Each programme offered:

- peer-based support and learning underpinned by a recovery and life skills learning approach in small groups
- a mixed session format comprising practical, artistic and sporting activities, interspersed with information-sharing sessions where young people share ideas and strategies for promoting good mental health and emotional wellbeing
- opportunities to acquire skills likely to be of value now and in adulthood, including the chance to gain a qualification recognised by ASDAN (an educational charity that oversees a number of qualifications).<sup>3</sup>

In addition, bespoke Uthink programmes have been developed to meet specific local needs. These included programmes for young carers, young teenage parents and students at a special school for pupils with complex needs including moderate learning difficulties. During the lifetime of the pilot, Uthink engaged with just over 340 service users. The majority (93 per cent) of young people identified as White British, 3.5 per cent as Asian and 3.5 per cent as Mixed (White and Black-African). People using the service had a wide range of diagnoses including schizophrenia, bipolar disorder and depression. Attendees were from both rural and urban environments and had a mixture of employment and education prospects. Some had other difficult life factors including involvement in gun and knife crime and low-level communication skills.

One of the service's requirements was that referrals must come from statutory services. The intention of this system was to provide continuity for people using the service, as there would still be a professional and a service involved for the young person when their involvement in the Uthink programme had ended. In terms of the referrals for the pilot programme, 35 per cent came from early intervention services, 24 per cent from CAMHS, 12 per cent from social services and the remainder of referrals came from other statutory agencies such as schools.

Many of the programmes were co-delivered with staff from local mental health services (including CAMHS and early intervention services) thereby building new local partnerships. The co-delivery design increased communication systems between services, helped to develop formal pathways, referral meetings and consultation, support networks and mental health training.

## Background to project

Uthink programmes draw on the evidence base for what is known to work for young people with mental health problems. This included existing research such *What's New: Learning from the CAMHS innovation projects*<sup>4</sup>, *Minority voices*<sup>5</sup>, and *YoungMinds Stressed out and struggling project*<sup>6</sup>.

Drawing on these findings, the programme adopted a flexible approach where projects are delivered in the community from non-stigmatising venues and at times that fit well with the other commitments young people may have. The projects all emphasised the active involvement of young people including opportunities for peer-learning and peer support. The origins of the programme grew from a collaboration between YoungMinds and Rethink with both charities drawing on their knowledge and expertise in challenging mental health stigma and engaging young people.

## Designing the service

Detailed programme design was undertaken prior to programme delivery and was shaped by a mixture of evidence-based research and stakeholder influence. Based on evidence of what is known to work for young people with mental health problems. A number of core principles underpin the project's design<sup>7</sup>:

- Responsiveness to young people's needs. The programmes are proactive, incorporating 'outreach' – going out to and engaging with young people rather than expecting them to simply attend a service or appointment.
- Being acceptable and accessible to young people and their families through flexible delivery at times that fit around young people's other commitments and use of non-stigmatising community venues.
- Involving and ensuring active participation of young people in the planning, delivery and reviewing of sessions and activities.
- Multi-agency input and local level partnership working, to help ensure that young people receive 'joined up' support, especially across key transitions in their lives.

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<sup>4</sup> Kurtz and James (2002) *What's new: learning from the CAMHS innovation projects*, London: Department of Health.

<sup>5</sup> Street et al., (2005) *Minority Voices: research into the access and acceptability of services for the mental health of young people from black and minority ethnic groups*, London: YoungMinds.

<http://www.youngminds.org.uk/publications/all-publications/minority-voices>

<sup>6</sup> YoungMinds (2006) *Stressed out and Struggling - emerging practice: examples of mental health services for 16–25 year-olds* <http://www.youngminds.org.uk/publications/all-publications/emerging-practice-examples-of-mental-health-services>

<sup>7</sup> These are drawn from Rethink, (2010) *Positive mental health and recovery in young people, Uthink interim outcomes report*.

Young people, parents and carers were consulted in the original bid to the Big Lottery Fund to

develop Uthink and their ideas and suggestions strongly influenced the session plans and overall structure of the programmes. For example, young people were keen for it to be a mix of peer learning and awareness sessions but also wanted a strong emphasis on going out and having fun as young people. Participants were able to choose activities from options presented to them and each day finished with a feedback session so young people could say what they had enjoyed or not, informing the design of future sessions.

Local implementation and steering groups involving young people supported the delivery of the programmes and young people's views continue to be an active part of the planning for Uthink in the future. For example, one area had a local delivery group of young people, many of which had been through the Uthink programme and who fed in views on how the programme should develop. At a national level, Rethink has also developed a young people's panel made up of 12 young people who are regularly consulted and asked to contribute to service develop. Their work is complemented by a larger virtual group of young people.

Whilst Uthink offers standalone short-term programmes at the same time, the project builds partnerships and joint working with local CAMHS, early intervention in psychosis (EIP) services and other mental health services. Strong partnership working and co-delivery in some cases acts as a way of joining up support for young people alongside providing new and innovative group-based programmes. A key part of the work of Uthink has been to help young people to plan for their future, including supporting young people's transitions between different services, helping them to resume education or take up training.

## Intended outcomes

The aim of Uthink was to deliver and test a range of activity-based programmes to promote positive mental health and recovery in young people. The aims differed for the 14-18 and 19-25 year old groups.

For the younger group the aim was to access and engage young people at risk of developing a mental health problem. Specifically:

- to raise self-esteem through low-level intervention
- to enable young people to cope better, and reduce feelings of stigma
- to use activities to open doors, build confidence, and enable work to be done on difficult issues in a natural way
- to provide a forum outside school, based on contact with other young people facing similar difficulties (defined as 'troubled' children or 'victims' rather than those with overt behaviour problems).

For 19-25 year olds the programme intended to empower young people already in receipt of mental health services. Specifically:

- to socially engage, with a view to recovery
- to promote peer development, social skills and self-advocacy
- to provide an opportunity that doesn't exist elsewhere, focused on recovery, peer support, development and awareness of self, and that is integrated in the community

- to work 'out of the box' in ways that de-medicalise services, and to reduce stigma and avoid oppressive practice
- to build self esteem using a diverse range of activities, focus on psycho-education and support recovery
- to increase people's confidence, link them with things that would be useful for them, learn from other people's experience, promote self-esteem and self worth and give insight (not so much into their condition, but into ways of helping themselves).<sup>8</sup>

## Measuring impact

Uthink was a central component of Rethink's strategy for developing innovative practice and therefore the project was rigorously evaluated throughout. To measure outcomes for service users, Rethink's research department developed a comprehensive monitoring framework, including:

- before and after programme monitoring using the Recovery Star - a tool that enables young people, in collaboration with their key worker, to assess their current position and progress over time in ten recovery-related life dimensions
- before and after programme monitoring using the Young Person Core (YP-CORE) which provides an assessment of general wellbeing and emotional health including commonly experienced symptoms of anxiety and depression and associated aspects of life and social functioning. YP-CORE is a version of the CORE-10 specially adapted and validated for young people aged 11-16 years
- bespoke mental health awareness questions and personal goals setting
- gathering a wide range of qualitative data from graffiti walls, personal journals, diaries and feedback forms.

In May 2010 Uthink published a report detailing interim outcome findings. These sampled 92 young people for whom, by the end of December 2009, at least one 'start' and one 'completion' outcome score data set was available<sup>9</sup>. Interim findings using YP-Core and Recovery Star data show positive outcomes for all people using the service, namely with:

- Managing mental health: improved knowledge and understanding of how to manage and promote their own emotional and mental wellbeing. Recovery Star scores show this was the area of greatest improvement, for both 14-18 year olds and 19-25 year olds and for both young women and young men.
- The ability to form and maintain social networks was the second area of greatest improvement followed by living skills.
- Improvements in having a sense of identity and self-esteem, feelings of trust and hope, and improved confidence to engage in work or education.<sup>10</sup>

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<sup>8</sup> Taken from: University of Central Lancashire (2010), *Evaluation of the Uthink Project*.

<sup>9</sup> Rethink (2010), *Positive mental health and recovery in young people, Uthink interim outcomes report*.

<sup>10</sup> Ibid. p. 7.

An independent evaluation of Uthink by the University of Central Lancashire (UCLan) also

highlighted the positive impact the project has had on other local services which have particular implications for supporting service transitions. The evaluation involved a desk review, telephone interviews and site visits. The sample sizes for fieldwork in the three sites varied but averaged three to five interviews with staff, a slightly smaller number of interviews with people using services and observations of groups followed by informal conversations with young people. The report states:

*'The Uthink project was a success on all three sites. Good relationships were made with local service providers, the programmes were successfully run as planned, and the outcomes were satisfying to the young people who took part and to those working with them. The receptivity and responsiveness of local providers to this innovative offer makes a critical difference to its success.'*<sup>11</sup>

Local stakeholders have been very positive about the support and interventions offered through Uthink and have made comments to the effect that Uthink can:

- enhance the provision of statutory mental health service and provide group-based activities and opportunities that statutory mental health services cannot
- help to develop strong partnership working between statutory and voluntary sectors including across service transition points.

A fuller account of the programme outcomes can be found in UCLan's external evaluation. The qualitative feedback given by young people at the end of each of the programme sessions provides important insights regarding the value of Uthink. Many of the views expressed endorse Uthink as effective in engaging with and supporting young people in a way that is responsive and flexible to their different needs:

*'Before I was all over the place. I had a lot of anxiety problems and stress... the [residential] helped me combat these problems... build my confidence and communication skills...'* (19-25 programme participant)

## Sustainability and transfer to other settings

Research carried out by UCLan concluded that the Uthink project would have a high likelihood of success in other localities although the current climate might make it difficult to secure funding.

During the course of the pilot there was some debate as to whether statutory providers could provide this sort of service as opposed to a voluntary sector organisation. The external evaluation reported that the main differences between the project and statutory providers were:

- the project works with groups, not with individuals in isolation
- the style is more approachable and informal, with no case notes and not focused on diagnosis

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<sup>11</sup> University of Central Lancashire, *Evaluation of the Uthink Project*.

<sup>12</sup> University of Central Lancashire, *Evaluation of the Uthink Project*.

- the project leaves people in control of their own lives whereas it can be argued that the NHS tend to take control – some argued that the NHS is still governed by risk and therefore are unable to fully embrace the recovery model.<sup>12</sup>

For some staff being in the voluntary sector gave more freedom to work in different ways. Young people reported they were able to be more open and trusting, and workers felt able to share their own lived experience, including, where appropriate, their own experience of using services.

## Next steps

Now that the pilot phase of Uthink is complete, aspects of Uthink are being embedded into the local provision and services offered by Rethink in the East Midlands and Dorset areas and with new funding, programmes are being developed for delivery in the London area.

Since September 2010, Rethink have also begun developing a bespoke Uthink programme for young people from BME communities. In addition, new information resources will be added to the young people's section of the Rethink website and will also be available from Rethink's Advice and Information Service (RAIS).

## Resources involved

Uthink ran for 41 months in three regions and was funded through a three year grant from the Big Lottery Fund. It was delivered by two Rethink Recovery Officers per pilot area, with management and support centrally from Rethink's Public Affairs Department. Other mental health staff (from CAMHS, EIP services etc) offered input and support to the programmes on a voluntary basis. Most venues were free and actual activity costs were small. Young people's travel and subsistence were the only other significant cost.

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