



let's end mental health discrimination

Time to Change Legacy Materials
www.time-to-change.org.uk/legacy

Managing and evaluating the programme

The Time to Change programme was the largest ever programme in England to tackle the discrimination faced by people with mental health problems, one of the largest of the well-being portfolios funded by the Big Lottery Fund and Comic Relief's largest ever grant in the UK. The aim of the programme was ambitious and exciting – it had never been attempted before at this scale in England. We learnt a lot as we went along about evaluation, project management and anti-stigma work generally.

Management and governance

Mind and Rethink Mental Illness delivered the Time to Change programme, with the Institute of Psychiatry, King's College London as the evaluation partner. Initially there was a third delivery partner, Mental Health Media, who later merged with Mind. As a partnership rather than a separate entity, Time to Change didn't have trustees, but instead relied on a combination of Director level staff, lived experience representatives and Mind's Chief Executive for governance. Trustees from Mind and Rethink Mental Illness were still accountable but not involved in the day to day governance, but as they had ultimate responsibility they were kept informed of progress through formal internal reporting processes.

Joint Management Group (JMG)

The JMG was a meeting of director-level partner staff and the Time to Change Director, chaired by the Chief Executive of Mind. At the beginning of such a large, untested programme and with staff just settling in, it was vital for the directors to have detailed involvement. As the programme progressed, the group took on a more strategic perspective. Each partner organisation had a representative on the JMG and a say in how work progressed. The group also included a representative from the Lived Experience Advisory Panel (LEAP). The LEAP member represented the opinions of the panel and had a vote in the decision-making process. Meetings took place every month for the first year and then every quarter with annual review days for the group to reflect on strategic issues and joint working.

Senior Management Team (SMT)

As the programme was settling into a pattern of delivery and review the JMG became more strategic, allowing for a new layer of management to take operational decisions and ensure effective communication both with the Time to Change team, and with wider staff in Mind and Rethink Mental Illness. The SMT comprised senior operational leads (heads of departments from each partner who had responsibility for work within the organisation) and a LEAP representative. Meetings took place every two months and there were annual review days.

Lived Experience Advisory Panel (LEAP)



LEAP all had experience of mental health problems and/or of caring for someone with a mental health problem, and provided specific guidance on service user and carer involvement and engagement across the programme. They also provided guidance on campaigns and projects, reviewed progress, and acted as spokespeople and ambassadors for the programme. They contributed an invaluable mix of experience, expertise and skills, particularly in diversity, and links to broader networks and communities. LEAP worked directly with the programme management team, and had a representative on the JMG and SMT. For more information on how people with lived experience of mental health problems were involved in the programme, take a look at the legacy document entitled *Involvement of People with Lived Experience of Mental Health Problems*.

Central Management Team (CMT)

The CMT was responsible for programme delivery and budgets, as well as reporting and monitoring progress. With a wide range of projects and activity; a fast pace programme with delivery by many organisations; an evaluation partner; and multiple smaller projects, a key role of the central team was to coordinate and join up the work, and ensure targets and outcomes were being monitored and met. National project leads also met regularly to discuss project plans, budgets and other relevant issues.

The whole programme came together on a quarterly basis for Delivery Group meetings. Sharing the skills and experience of people in similar but different projects, and of staff working at local and national levels, benefited everyone. For instance, MindOut ran a workshop on working with lesbian, gay, bisexual and transgender service users, and Stuff Stigma ran a workshop on effective social contact.

Lessons learnt

Make governance structures clear and easy to understand

Each partner organisation had representation on the JMG and SMT, which promoted a sense of joint responsibility. It was important that staff should know where issues that arose should be identified and how a final decision would be made. The routes into management structures needed to be clear so that people knew how to feed into meetings. For LEAP, this meant creating a form that each member could complete stating their opinions for the representative to summarise.

Small can be beautiful

JMG membership was limited to partnership organisations and LEAP members, with other representatives joining meetings as necessary. It was a small group with a consistent membership, several of whom had been involved in the original bid, which created an effective partnership structure.

Keep focused on programme outcomes

While all project activity and milestones were attached to key outcomes, it was the focus on what we sought to achieve at a national level (with our four outcomes) that helped keep the programme focused. The funding bid and programme plans helped keep the focus on what the role of Time to Change was, and how to manage expectations that we could work to address other related issues like improvements to services, health policies, or population wellbeing measures.

Integration is key

With a large programme, delivered by a range of organisations and teams across England, and with a talented pool of expertise within the LEAP group, integration was a key challenge in the early years when projects were focused on their own targets

rather than the 'bigger' picture of outcomes. The central team had a role to build shared learning opportunities, mutual support and planning, and inter-dependent delivery became a focus in the later half of the programme.

Academic journals and delivering projects move at a different rate

A tension existed between the need to review practice, communicate the impact of the programme and secure media coverage, and the desire to have this data published in peer-reviewed academic journals. The academic nature of the evaluation was a strength as it meant it was robust, but academic publishing can take time and this limited the external use of evaluation data. In the second phase of work, the evaluation is based on a more flexible model, allowing for an academic evaluation as well as evaluation that can be used immediately.

Fact paced work needs managing

As previously mentioned, the ambitious nature of the programme and the passion of those involved meant that the pace of work was extremely fast. It was important to manage the effect of this on the wellbeing of the workforce. It also meant that it could be difficult at times to keep everyone updated on activity, and give people the time they needed to reflect.

There's no alternative to meeting people face to face

The partner organisations joined together to run Time to Change because stigma and discrimination were issues too big to be tackled by just one organisation. The partnership didn't eliminate all differences between them and they continued to have their own remits and organisation goals, so face to face meetings were the best way to create effective relationships and help people work together. The delivery group meetings were held regularly for all staff and were vital for helping people feel connected to the programme. National project staff also had regular meetings to focus on the particular concerns of running a project across the whole country.

Programme evaluation

One of the priorities at the outset was that the Time to Change programme should be rigorously evaluated. The partners didn't want to just do the work – they wanted to create an evidence base and share this externally as well as learn from it themselves. In order for that to happen, solid academic evaluation of the effectiveness of the work was needed.

The Institute of Psychiatry, King's College London (IoP) conducted the Time to Change evaluation. The evaluation was purposefully academically based, using a series of measures, tools and surveys to demonstrate the impact of the programme. For more detail on the evaluation, including a list of published journals, take a look [here](#). In early 2013 a special British Journal of Psychiatry supplement will be published which will include details of the IoP evaluation in full.

Time to Change was also evaluated for the Big Lottery Fund's Well-being programme, which was conducted by the Centre for Local Economic Strategies (CLES) and the New Economics Foundations (NEF). You can take a look at the results [here](#).

The evaluation of Time to Change was based on a conceptual framework that describes stigma as consisting of difficulties of knowledge (ignorance or misinformation), attitudes (prejudice) and behaviour (discrimination). This followed the 2007 National Institute for Health and Clinical Excellence guidelines on 'Behaviour change at population, community and individual levels'.

Economic evaluation was essential to assess the programme's value for money.

National Attitudes to Mental Illness Survey

Time to Change used this annual survey to measure knowledge, attitudes and intended behaviour of the public between 2008 and 2012. The survey was carried out each January and the data made available to the IoP in May, allowing them to analyse and report the results each June.

Viewpoint

This survey questioned 1,000 people each year using secondary mental health services about personal experiences of mental health related discrimination within the previous 12 months. The IoP conducted the survey through an annual telephone survey, using the Discrimination and Stigma Scale. The sample consisted of people aged 18 to 65 drawn from areas covering a full range of deprivation indices and registered with community mental health teams.

For 2011, the IoP added several new validated outcome measures to establish a baseline for the second phase with respect to two outcome targets (empowerment and social capital) and to improve the economic evaluation. This survey was crucial as it allowed actual behaviour change to be measured and levels of discrimination to be recorded and analysed.

Newspaper coverage

Analysis of newspaper coverage of mental illness related topics allowed the evaluation to monitor changes in the number of stigmatising and non-stigmatising articles.

Economic evaluation

In addition to the main Viewpoint survey in 2011, a subsample of Viewpoint participants were asked questions from the Costs of Discrimination Assessment (CODA).

Data from the National Attitudes to Mental Illness Survey was used to estimate the cost of the campaign in changing knowledge, attitudes and intended behaviour. This data was also used to model the possible implications of these changes with respect to professional help-seeking and access to employment on the part of people with mental health problems.

Campaign tracking

In addition to the evaluation by the IoP, each campaign burst was tracked so Time to Change could find out how far the burst had reached, what proportion of the target audience recognised the campaign, what messages they had taken from it and, crucially, the extent to which knowledge, attitudes and intended behaviour had changed as a result over this specific period. This was vital as it enabled Time to Change to link changes identified by the IoP back to the national campaign.

There was also evaluation of all other projects, including the local projects, Time to Get Moving, Open Up, Time to Challenge and Education Not Discrimination.

Lessons learnt

Take your time to establish baselines

It took time for the IoP to establish baseline figures, but once established they were invaluable as they allowed the programme to be clear about its impact. The IoP

researched pre-existing tools and methods, developing new ones where there wasn't an appropriate one available.

Strike the balance on the amount of information gathered

The temptation was always to gather detailed and specific data, but this corresponded with longer evaluation forms. Trimming forms to a more manageable length helped increase the number returned. The forms needed to be returned at a level that represented the wider response, and there was a fine line between getting the response rate and the level of detail right.

Evaluation means different things to different people

Time to Change projects were very diverse, and as a result had varying evaluation needs and expectations of what was possible. Managing these expectations and striking the balance between the needs of the programme and the individual projects was important.

Tailor the evaluation to the project

Much of the evaluation was based on project staff encouraging their service users to complete the relevant forms. Researchers developing the tools need to work closely with all projects and gain a thorough understanding of what is possible, what isn't possible and why. This process also gives project staff the opportunity to ask questions and understand why the evaluation is put together the way it is. The evaluation for local projects worked on the basis of a form completed at the beginning for a baseline, and followed up by forms at three, six and 12 months, but a lot of the projects ran only six week courses. This inevitably led to a steep drop-off in completed follow-up forms and a sense of misunderstanding among these projects.

Originally the evaluation team planned to use a pre-existing tool to measure changes to empowerment. This tool did not meet the needs of parts of the programme where people who were very experienced at challenging stigma and discrimination over many years did not feel the questionnaire was at all relevant or appropriate.

Keep the logistics of ethics approval in mind

Education Not Discrimination (END) ran a pilot project to understand how best to train primary care staff on mental health discrimination. For the IoP to conduct their evaluation, they needed approval not only from their own Ethics Committee, but from that of the NHS as well. The two committees required different information, delaying the evaluation significantly. END had to deliver against their targets and conducted their own evaluation, but this element of their work could not be evaluated in the same formal way that every other element of the programme was.

Partnerships

Time to Change is a partnership run by charities [Mind](#) and [Rethink Mental Illness](#). In the first four years the [Institute of Psychiatry, King's College London](#) was an evaluation partner, with a role to evaluate activity and the effectiveness of the programme. Time to Change launched with three delivery partners: Mind, Rethink Mental Illness and Mental Health Media. Mental Health Media was a service user led organisation and in 2009 merged with Mind.

From the outset of the programme it was important to secure the support of a large number of organisations across England. This stakeholder work began with those organisations most likely to support work to address stigma and discrimination (i.e. NHS mental health trusts and PCTs, user/survivor and carer groups, and the voluntary sector). The purpose of securing this early support was to provide best

value of the investment beyond Time to Change, extend the reach of campaign messages, encourage more activity locally, and minimise the risk of conflicting messages being delivered to the public. This work was crucial for Time to Change.

With stigma and discrimination affecting all areas of life and all communities, we needed to secure new partnerships and active support from a wide range of organisations beyond those traditionally involved in mental health. As a result of this investment Time to Change was able to build on an active and growing social movement, including leading companies, sports organisations, educational establishments, local authorities, and voluntary and statutory organisations. The wide range of organisations that pledged their support in the first four years included the FA, the Premier League, BT, Eon, NHS Trusts, PCTs, local authorities and police forces. This engagement also gave organisations the opportunity to use tested materials and be part of a wider movement.

Time to Change resources, the campaign in a box kit and events toolkits were provided free of charge to increase campaign reach and support local activity. Many of these materials were reprinted because of high demand. Over 3.2 million individual materials, and 788 campaign in a box sets were sent out to partners and stakeholders over six months in 2010, and over 1,200 paper toolkits sent out in 2009. We also created a logo for stakeholders that differentiated between work funded by Time to Change and work that supported its aims.

Lessons learnt

Work together

Stigma and discrimination affected nine out of ten people with mental health problems across all organisations, and one programme could not effect change across the whole population. Local activity led by communities had credibility and this was supported by the fact that mental health was made more visible with stigma more talked about and high profile due to the national campaign.

The partnership of local and regional organisations doing anti-stigma and discrimination work meant that messages were consistently delivered, avoiding confusing the public, as well as adding credibility and securing further reach. In this instance, the whole was greater than the sum of all parts, and by working and learning together better impacts were produced.

Commit to partnership fully

The existence of Time to Change couldn't lead to an alignment of every element of the partner organisations, so it was important that everyone was fully committed to the programme's overall goals. Challenges that arose included differences in terminology and organisational strategy and policy. Most of these challenges were resolved, but in some instances it was only possible to acknowledge differences and move on. This made it all the more important to promote the similarities and joint goals.

Listen to every voice

Time to Change encompasses a broad range of people, allowing the programme to grow and adapt to what worked best. The combination of different voices created a richness that wouldn't have been possible had they all said the same thing. This did, on occasion, generate tensions, but overall it created a greater programme of work.

Face to face interaction is irreplaceable

Working across several buildings and offices can be difficult. When people met regularly, partnership working became far more effective, relationships improved, and the programme felt better bonded as a result. In the second phase of work, staff regularly work in the offices of partner organisations to make sure this happens.

Working together is easier when people share targets

The final year of the social contact project (formerly called Time to Get Moving) involved collaborative working between teams. The social marketing campaign had hit all their targets and so was able to concentrate on partnership working more fully. The projects shared a budget, action plan and targets, and focused on achieving the same thing through different methods.

International activity

Time to Change follows the work of anti-stigma programmes from around the world and shares experiences and data and learning across the global anti-stigma movement.

Like Minds, Like Mine

[Like Minds, Like Mine](#) is New Zealand's national publicly funded programme aimed at reducing the stigma and discrimination associated with mental illness. It was the first large scale anti-stigma programme in the world.

See Me

[See Me](#) is Scotland's national campaign to end the stigma and discrimination around mental ill-health. See Me is an alliance of five Scottish mental health organisations: Highland Users Group; Penumbra; Royal College of Psychiatrists – Scottish Division; Scottish Association for Mental Health (SAMH); and Support in Mind Scotland.

Since Time to Change launched in 2007, there has been an increase in the number of large scale anti-stigma programmes around the world. Time to Change has shared learning and materials with the following organisations:

Opening Minds - Canada
BringChange2Mind - USA
Hjärnkoll - Sweden
See Change - Ireland
EN AF OS (One of Us) - Denmark
1 de cada 4 (One in Four) - Andalucia
Beyond Blue - Australia

In 2011 Time to Change Wales launched, led by three mental health charities – Gofal, Hafal and Mind Cymru. It is funded for three years, and funded by Big Lottery Cymru, Comic Relief and the Welsh government.