



let's end mental health discrimination

Time to Change Legacy Materials  
[www.time-to-change.org.uk/legacy](http://www.time-to-change.org.uk/legacy)

## The Time to Change projects

Time to Change launched with 28 local projects, six national projects and the evaluation programme. By 2010 we were also running two additional sport-related projects: Imagine your Goals (funded by the Premier League and Sport Relief) and the Sport and Mental Health Project (with funding from the Department of Health).

Some projects were large in scale and reached across the population of England; some were community based and localised; and others focused on specific target audiences. The goals of the programme were so ambitious that work had to be fast paced to achieve them.

### The England-wide social marketing campaign

The social marketing campaign built on international research into changing public attitudes towards people with mental health problems, and aimed to reach 75% of the English adult population – 30 million people. As a result of the campaign we saw signs of a significant reduction in levels of stigma and discrimination. This campaign acted as a catalyst for change, encouraging people to get involved across the programme of activities. A separate legacy document has been produced with information on the development and delivery of the social [marketing campaign](#).

### What were the targets and did the project meet them?

#### **1. To consult with people affected by mental health problems to find out more about their experiences of stigma and discrimination.**

In 2008 Time to Change produced and distributed a survey called Stigma Shout within the networks of Mind and Rethink Mental Illness. Responses were received from 3,700 people with lived experience of mental health problems and/or of caring for someone with a mental health problem. The campaign team used the feedback from Stigma Shout to identify target audiences, plan messages and set the tone for the campaign. To read the results of the Stigma Shout survey [take a look here](#).

#### **2. To recruit appropriate agencies to produce audience research, develop plans on how to reach the audience and buy media for them.**

In total four agencies were recruited for the campaign. Breathe researched the audience; MCBBD were responsible for the creation of the campaign content; Naked planned what media should be used to promote campaign messages; and Seven Stars bought the spaces for campaign promotion.

#### **3. To run a pilot campaign in Cambridge with Cambridgeshire and Peterborough NHS Foundation Trust.**

Campaign activity was piloted in Cambridge in 2008 with advertising including posters, beer mats and street art that was evaluated. This went on to inform the nation-wide campaign.



**4. To run bursts of the anti-stigma campaign and PR activity, including national, local and regional activity. If appropriate the campaign should also include England-wide television, press, website and poster campaigns.**

The first campaign burst ran in January 2009, with six bursts taking place in the first phase. A total of 44 million people were reached through the campaign via a combination of TV, radio, press and online activity. According to evaluation of Time to Change by the Institute of Psychiatry, King's College London, there is a clear and consistent link between awareness of the Time to Change campaign and improved knowledge, attitudes and behaviour around mental health. In 2012 people aware of the Time to Change campaign scored 4.8% higher on the attitude score (than those who weren't aware of the campaign), 3.6% higher on the intended behaviour score and 4% higher on the knowledge score.

Relevant documents/websites:

- [2011 Time to Change Annual Report](#)
- [The resources page](#)

### **Lessons learnt**

#### **Be clear about who the campaign is aimed at**

Time to Change had to strike a balance between reaching people with mental health problems, and the public whose attitudes and behaviours needed to change. The remit of the social marketing project was to change the behaviour of people without mental health problems. The social marketing campaign had to work for the public audience – not necessarily for the programme's supporters. On the other hand, supporters were vital to the programme and it was important for them to understand the campaign and feel ownership of it. Staying focused and communicating clearly with people with mental health problems to explain the rationale behind campaign activity and give them a role was essential. There was a clearly defined target audience of 'subconscious stigmatisers' that was the primary audience. We had to avoid at all costs alienating people with mental health problems, and a key aim for the campaign was to empower people who had seen the ads to challenge stigma and discrimination.

#### **The brand can't always be controlled**

The campaign was not trying to raise awareness of the Time to Change brand; the focus was on changing attitudes and behaviour. It was important to always hold the target audience in mind and do what worked for them, not necessarily what was in line with the brand.

Campaigns and activities such as user-led training and events run locally by community groups were very important for Time to Change. The programme lost some control, but the payoff was that the activity was effective and credible within that community. It was vital for us that there was local ownership of the campaign. We created a logo for stakeholders that differentiated between work that was funded by Time to Change and work that supported its aims. This gave individuals and external organisations the opportunity to associate their work with the programme.

#### **Behaviour can be changed without changing attitudes**

We have seen a bigger reduction in discrimination than an improvement in attitudes. Behaviour change has been sustained, while attitudes are more volatile. In many ways behaviour change is the most important thing, as this has a tangible impact on people's lives, meaning they are discriminated against less.

### **Behaviour change isn't always linear**

The target audience wasn't a homogeneous mass, and people reached different stages of attitude and behaviour change at different times.

Tracking each campaign burst allowed Time to Change to pick up on groups whose attitudes and behaviours were not moving at the same rate as those of other people and adapt accordingly. Tracking could show what point people started at, and then what point they moved to. For example, the evidence from the Institute of Psychiatry, King's College research was that bursts had different impacts on audiences. Some bursts had more impact with Black and Minority Ethnic audiences, while some bursts had less. It was then possible to adapt the number of radio ads aired and media buying to resonate better with Black and Minority Ethnic audiences.

### **Celebrities get the media interested, but real people should lead from there**

Using celebrities was a great way of getting press and media coverage, as they grabbed the attention of the media and members of the public who might not normally look at an advert about mental health. For some people it was encouraging to know that anyone could experience a mental health problem, but from there it was vital to give real people a platform as they were easier for the audience to relate to. The mixture of case studies showed that it could be your favourite celebrity, your friend or your colleague who had a mental health problem. Blogs were a great way of highlighting the experience of real people with mental health problems.

### **Always keep learning**

Time to Change always has more to learn and our approach has continued to change. To be the most successful it could be, the campaign needed to adapt and learn when things didn't go as planned.

### **A network of 28 community-based projects**

Between October 2007 and September 2011, Time to Change funded 28 local community projects across England. These projects were delivered by local Minds and Rethink Mental Illness, and the majority had targets based on improving levels of physical activity and, as a result, levels of wellbeing.

Four of the local projects had a different focus relating to their own areas of expertise: Stuff Stigma was an anti-stigma project run by Rethink Mental Illness in Norfolk, and Mind in Brighton delivered the MindOut project with a particular focus on stigma affecting lesbian, gay, bisexual and transgender people and a remit to provide training and guidance nationally. Rethink Mental Illness also ran a Time to Change project based at the University of Central Lancashire, targeting students and staff at the university. The Green Schools project, run by Rethink Mental Illness, also worked with young people that had been excluded from school.

### **What were the targets and did the project meet them?**

#### **1. The aim was for 24,500 attendants of the projects to become physically active on a regular basis, in order to improve their wellbeing.**

A total of 49,611 participants were engaged in activities to improve their wellbeing and confidence, 25,383 of whom undertook regular physical activity. Activities included walking, gardening, gym-based activity, team sports and dancing.

## **Lessons learnt**

### **Use community projects to create a spread across the country**

Community projects provided a local focus for the campaign and offered opportunities for local awareness-raising and involvement. The project at Sheffield Mind worked with the local primary care trust (PCT) and mental health trust on a Sheffield-wide campaign, while Stuff Stigma ran public engagement events in Norfolk in partnership with a range of local organisations. Projects run and delivered by local communities benefit from a better knowledge of local need and existing credibility within local communities.

### **Anecdotal evidence suggests a boost in confidence**

As a result of taking part in these projects, many participants built up enough confidence to use mainstream gyms and other community facilities, gain qualifications, and take up volunteering or campaigning. For many, the confidence they acquired through taking part in these projects was a big step towards recovery, rebuilding a social life or getting back into work. These were important steps and initially this was only fed back by projects anecdotally as these outcomes weren't being formally evaluated. However, Time to Change started capturing this information in monitoring reports and in Phase 2 the programme specifically addresses these improvements in people's lives.

### **Be clear on the requirements of small projects**

Some Time to Change local projects were run by very small organisations with limited additional capacity, and when asked to support the target outcomes of decreasing stigma and discrimination alongside their primary goals of physical activity, these projects struggled. This resulted in varying levels of anti-stigma and discrimination work across the local projects.

### **Combine local activity with national activity**

Many of the local projects felt they benefited from the national campaign materials, allowing them to concentrate on their own work with strong and exciting materials to support it. A lot of projects engaged particularly well with Time to Get Moving, seeing it as an opportunity to spread the word about their work.

### **Keep aims simple**

The local projects were particularly involved in joining the messaging around wellbeing and anti-stigma work together. The wellbeing message related to the fact that everyone needs to look after their mental as well as physical health. Secondly, if the wellbeing of people with mental health problems is improved, they can be more empowered to challenge stigma and discrimination. However, these two messages could get confused and detract from the overall work of the programme.

### **Regular meetings kept the focus on joint goals**

Regular project meetings were held for all local and national staff to come together and discuss their work. These were particularly valuable for local project staff, who were sometimes based far away from other similar projects. Meetings were used to share good practice, discuss monitoring arrangements and gather collective feedback and encourage a sense of shared ownership across all outcomes across all projects.

For further information on what Time to Change is doing in Phase 2 around community activity [take a look here.](#)

## **Social contact project/Time to Get Moving**

Originally called Time to Get Moving, the aim of the social contact project was to bring people with and without experience of mental health problems together to talk about mental health. Events were held throughout the country to facilitate effective social contact. The original project also aimed to raise awareness of the benefits of physical activity for mental wellbeing, and all events had to involve physical activity. The idea behind this was that physical activity could be something fun that engaged people who wouldn't normally come to a mental health event, giving Time to Change the opportunity to talk to them about mental health.

Time to Change supporters ran with the idea of events to challenge stigma and discrimination, but many of them didn't promote physical activity and instead had art or theatre as a theme. We wanted to ensure these events counted as part of Time to Change and the movement for change it had inspired. By 2011, Time to Get Moving had broadened its initial focus on physical activity to a more integrated project challenging stigma and discrimination, and the outcome attached to it was changed to include different kinds of anti-stigma activity.

'Social contact' in this context is when people with different experiences of life meet and share these experiences with each other, and their attitudes and behaviour towards each other change as a result. By talking openly about their mental health, people with personal experience of mental health problems can help others to understand what it's really like to live with a mental health problem. This, in turn, breaks down any prejudices. The theory of this kind of social contact came through the New Zealand anti-stigma programme, Like Minds Like Mine, who found that social contact could only take place where there was equal status, pursuit of a mutual goal and the opportunity for individuals to get to know each other. Take a [look here](#) for further information.

### **What were the targets and did the project meet them?**

**1. To engage 250,000 people over four years in large scale events that involve people with and without mental health problems talking about mental health. The target in the first three years was for nearly 123,000 people to attend events, and for all events to centre on physical activity.**

Between 2008 and 2010 we held annual Time to Get Moving weeks of activity in October, reaching 85,405 people over the three years.

**2. In the final year the target changed to include events that didn't centre on physical activity but had a focus on bringing people with and without mental health problems together. The overall figure we were aiming for was still 250,000 people engaged.**

By the time the project had finished, 591,787 people had been engaged in activities that brought together people with and without mental health problems together to talk about mental health. Of this number, 171,361 of the people engaged were engaged through the Time to Change website, social media or online films. Research shows that this is an effective way of improving attitudes towards mental health.

In the first three years there were lots of events taking place that didn't involve physical activity but did challenge stigma and discrimination. Effective social contact was also happening 'virtually' via social media, with people sharing their stories online. To find out more about the impact of social media in this area, the Institute of Psychiatry, King's College London conducted a survey of Time to Change Facebook fans, and found that social media empowered people to speak out about their mental

health and challenge stigma and discrimination. As a result the project was able to count people engaged through Facebook and Twitter towards its targets.

## **Lessons learnt**

### **Keep branding simple**

In the fourth year of this project, branding was changed so that events were integrated with the overall Time to Change campaign. Events had a very simple message: the campaign message of *It's time to talk, it's Time to Change* was highly effective in the context of events that were about bringing people together to talk more openly about mental health. We learnt that we need to use one brand and consistent messages for all events.

### **Reach the right people**

As the Time to Change programme progressed, the approach to social contact shifted significantly. It took time to understand what social contact in this context meant, and it was sometimes misinterpreted as social interaction. Attracting the people the programme was targeting to events organised around social contact could be difficult, as the types of people that chose to attend were likely to already be sympathetic to the aims of Time to Change. The people that needed targeting probably wouldn't choose to come to a mental health event, so by reaching out to people and taking the programme to them, Time to Change reached more of its target public audience.

### **The power of one**

Some of the most successful events were those where a passionate individual ran with the project. With promotional resources from Time to Change and the backing of a national banner, individuals could support local activity. Whether they worked in partnership with local organisations or by themselves, people with lived experience of mental health problems were the heart and soul of this part of the movement.

### **Be flexible and learn to evolve**

This project found that a target that had been strictly defined at the beginning (that social contact must take place through events related to physical activity) could stifle the work. Up and down the country there were events taking place where social contact was the main objective and was happening really effectively, but without physical activity it couldn't count towards the Time to Change targets. Only in the fourth year, once the target was amended, could these events be counted by Time to Change.

## **Training for influential groups: Education Not Discrimination**

Education Not Discrimination (END) targeted professionals who had a significant impact on the lives of people with mental health problems by delivering training to trainee teachers, senior teachers, medical students and GP surgery staff.

### **What were the targets and did the project meet them?**

#### **1. To recruit 15 people with experience of mental health problems to become trainers.**

Sixty people with lived experience of mental health problems or with experience of caring for people with mental health problems were recruited to become Involvement Workers, who helped develop the training content and became trainers.

**2. To research and decide upon a third and fourth audience (the first two audiences – medical students and trainee teachers – were decided on before the project began).**

The project selected senior teachers as the third audience, using feedback from people with lived experience of mental health problems. The fourth audience was to be a pilot to train professionals who work particularly closely with people with mental health problems. END decided that GP surgery staff would be an appropriate audience, particularly as the GP surgery is a commonly reported area where people experience discrimination. Involvement Workers and END developed tailored training and delivered it to each audience.

**3. To deliver training to 4,700 people within the target audiences (medical students, trainee teachers, senior teachers and GPs).**

END and the Involvement Workers planned, developed and delivered training to 6,550 people, exceeding the target.

This project is continuing until April 2013, after receiving additional funding from the Big Lottery Fund. The project is managed by Rethink Mental Illness, and will be working with GPs and primary care staff.

## **Lessons learnt**

### **Real experiences are worth more than lectures**

People with lived experience of mental health problems were central to this project, and their experiences formed the main threads of training content. END planned, developed and delivered training in partnership with people with experience of mental illness to show the realities of living with a mental health problem, whether it was consulting a GP and facing discrimination, or being teased at school because of their mental health problem. Involvement Workers were the experts, and the dynamics of involving them in sessions changed as a result. Feedback highlighted that the personal testimonies were the most impactful part of the training sessions. Involvement Workers also gained experience from the work and, in many cases, additional qualifications.

### **Ensure the content is appropriate to the audience**

Responses to the training differed depending on the audience, and getting the content right for each audience was of critical importance. This was particularly true for GP surgery staff, and resulted in the continuing project delivering training to GPs.

### **Open Up: Empowering people to challenge discrimination**

The Open Up project supported people with mental health problems to challenge discrimination in their community, and funded eight regional coordinators and 30 community projects. Community projects were supported to help empower people to challenge discrimination when they encountered it, on the basis that people from a community will know what's most needed and where it will sit best in that community. Projects were led and delivered by people with lived experience of mental health problems. A national team supported the regional coordinators and ran national activities to support the community work, such as training programmes and newsletters.

### **What were the targets and did the project meet them?**

**1. To engage 5,640 people to work within their communities to attend training, speak out to the media, and run activities and events that challenged stigma and discrimination.**

A total of 6,447 people ran events, attended training or spoke out to the media as a result of Open Up. These people were supported by eight regional coordinators.

**2. To engage 4,000 people through national work such as the Open Up website, the newsletter and e-bulletins.**

A total of 19,578 people were reached through the Open Up website, newsletters and e-bulletins, exceeding their target.

**3. The community projects aimed to reach 4,800 people through plays, music and other activities.**

The community based projects reached 9,836 people, well exceeding their target.

**4. To develop and promote a learning resource on challenging discrimination.**

The project launched the [Speak Out](#) resource in December 2010, using examples from community projects to highlight how people can challenge discrimination in their local community.

## **Lessons learnt**

### **Open Up was a commitment to service user leadership**

Open Up was one of the clearest examples of service user leadership in the Time to Change programme. A strong, proven model with people with lived experience leading and running the work, it reinforced the principles, beliefs and values of Time to Change. It was also important to the programme's credibility to have such a significant project led by people with lived experience of mental health problems.

### **Engaging people at a community level is time consuming**

The coordinators had huge reserves of knowledge and skill and were a fantastic resource to draw on, but their time was limited. For their work to be as valuable as possible they had to spend time creating and maintaining relationships with other community groups, and this work takes time. At times they struggled to reach the numbers of people they wanted as they were covering large areas of the country with limited time.

### **Keep community work joined up**

Some of the projects were small in scale and localised, and not linked in with other Time to Change activity. The ethos of the community projects supported individual action, and for some people this meant a limited desire to work with other larger scale projects. It was important as a whole that the projects had autonomy and were able to function in the way that was most effective. However, this could lead to Time to Change seeming fragmented, or not making it clear to the general public not understanding how activities linked together.

### **Mental health can fluctuate**

Two of the projects funded by Open Up did not finish after the mental health of the project lead worsened. Though any project should take account of mental health, it's something that projects run by people with lived experience need to be particularly aware of. One major learning point was to assign a deputy in case the project lead needed some time away from the project for the sake of their own health.

## **Time to Challenge**

The main objective of the Time to Challenge project was to bring mental health discrimination test cases to court. These would try to clarify the way the law concerning unlawful discrimination on the grounds of mental health should work in practice. The project also provided legal advice on discrimination issues and resources on employment and mental health.

## **What were the targets and did the project meet them?**

### **1. To search for and identify appropriate cases to take to court.**

Two cases were identified and Time to Change gave appropriate advice. One of the cases did not get to court in the end, though it did have positive outcomes. In this case, some important guidance was given to make it easier for claimants to prove that they have a disability (and are entitled to bring claims for discrimination). In the other case, the employer concerned chose to settle with the claimant out of court and as part of the settlement agreed to put mental health awareness training in place for all employees.

### **2. To provide legal advice and guidance to people concerned about mental health discrimination.**

Overall Time to Change provided legal support and guidance to 1,755 people, including advice on work situations, housing and the NHS.

### **2. To produce online videos for employees and employers, using real-life case studies of employers and employees talking about their own experiences.**

Videos and employment guidance web pages were launched in November 2009. From then until the end of the first phase, there were 85,216 visitors. This includes 14,262 visitors viewing the pages aimed at employers (against a target of 5000) and 48,930 visitors to the pages aimed at employees and people looking for work (against a target of 50,000). Employers who visited the site were asked to complete a survey: 43% said they were more likely to employ someone with a mental health problem as a result of having visited the website.

## **Lessons learnt**

### **Set realistic goals**

Bringing a test case to court over four years was always a big ask, and with hindsight it was too big. There wasn't the time to follow an appropriate case through to the end and test the law in the way the targets suggested, and the target didn't allow for the potential to settle a case out of court. It was important to be ambitious, and by taking on potential test cases Time to Change made small wins, which contributed to the overall outcome of increasing empowerment. The original target also didn't take account of the fact that it might be better for the client to settle rather than taking the case through court procedures.

### **Adapt and be flexible**

While Time to Challenge didn't have the opportunity to take a test case through to a final judgement, they did manage to bring about significant change in other ways. The work done on potential test cases clarified legal complexities and gave the project small wins. This in turn created the potential for more immediate change for the employees of those organisations.

### **Work in partnership**

As a result of this project, Time to Challenge started working far more often in partnership with lawyers with expertise in discrimination law. The project raised the profile of Time to Change and mental health discrimination with lawyers, and as a result ongoing work now includes a far larger proportion of partnerships than previously. The legacy of this work sits not only with the people given advice and support, but with the whole team, as they are now using the skills of other people in the best way possible.

### **Provide resources for people to challenge discrimination themselves**

The Institute of Psychiatry, King's College London found that the employer and employee resources had a positive impact. They also found that in the lifetime of

Time to Change there had been an increase in workplace support, such as flexible hours and mental health policies. This section of the website has proved particularly popular and been shared by visitors through social media.

### **Additional projects**

Time to Change took on two additional projects during the first phase, both of which were related to physical activity and challenging stigma and discrimination.

#### **Imagine Your Goals**

Imagine Your Goals was a two-year programme working with Premier League football clubs throughout England to improve social inclusion and wellbeing for people with mental health problems, as well as tackling mental health stigma and discrimination. The programme was part of Time to Change, and funded by Sport Relief and the Premier League. It provided funding for 16 football clubs to improve the wellbeing of people with mental health problems through physical activity, and also aimed to bring people with and without mental health problems together to break down mental health discrimination.

The key outcomes for Imagine Your Goals were split into activity relating to physical activity; social contact and campaigning and the project had worked with 3657 people by July 2012. For more information on this project, [take a look here](#).

#### **Sports and Mental Health**

The Department of Health originally ran the Sport and Mental Health Project through Shift, their anti-stigma project. In April 2010 they handed the project over for Time to Change to manage until its conclusion in 2011.

#### **What were the targets and did the project meet them?**

##### **1. To campaign to raise awareness of mental health problems in football.**

In partnership with Imagine Your Goals the Time to Change advert was shown up and down the country at football matches, leading to 172,000 people seeing it. Again in partnership with Imagine Your Goals, Time to Change was also featured in match programmes and posters, reaching 224,700 people as a result.

##### **2. To train staff in grassroots sports clubs on mental health problems and to produce toolkits with examples of good practice and tips on how to run a mental health and sports project.**

Seventy sessions were run and 825 people trained. The project produced two toolkits that have been made freely available through the Football Association (FA) website.

##### **3. To organise and run a cricket tournament in 2010 and 2011 for people with and without mental health problems to challenge mental health discrimination.**

Both tournaments were held, with 240 attendees overall.

The Sports and Mental Health Project produced an evaluation document which is available through Time to Change.

Resources for community clubs hoping to run similar projects can be found on the [Time to Change website](#).