
Feeling our Way

Evaluation report



Mental Health
Foundation



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Executive summary



Background of the programme

For young people who have spent time living in the care system away from their family, leaving care is a significant transition. It is unsurprising that young people leaving care may require emotional and mental health support to manage this transition process, and this need for support is likely even greater due to the challenges presented by the Covid-19 pandemic.

Despite this, many young people do not receive the support they require, as they may find it more difficult to access the services they need once they have left care. *Feeling our Way* is a programme developed by MHF in partnership with Nottingham City Council to provide young care leavers in Nottingham with a package of support of digital and physical resources to improve their coping strategies and feelings of social connectedness during the challenging Covid-19 pandemic.

The programme used a tiered approach to providing support based on level of need, including a specialised pathway to counselling for a set number of young people. Workforce development was built into the project to support PAs in recognising and responding to care leavers' mental health needs.

A mixed-methods approach fitted the evaluation

The evaluation team employed a mixed methods approach. Pre- and post-evaluation questionnaires were administered to young people to capture the impact of the programme on care leavers. This was complemented by interviews with young people and Personal Advisors (PAs), who are part of the Leaving Care team and act as the focal point to ensure a care leaver is provided with the correct level of support.

We also conducted a process evaluation to explore enablers, barriers and key learnings for future programmes via interviews with PAs and the staff at Base 51, who provided the therapeutic support for referral participants. The evaluation approach remained flexible and adapted to the needs of the residents and the challenges resulting from the Covid-19 pandemic.





Findings included enhanced coping strategies and improved understanding of feelings

The qualitative analysis from the interviews with young people and PAs provided us with a broader, positive insight into the impact of *Feeling our Way* on participants. The three participants interviewed were positive about the programme, commenting that the packs helped them understand how to cope with their feelings. Engaging with the packs also helped them express and understand their feelings better; participants also commented that the packs helped them to feel less alone in their experience.

All three participants would recommend the programme to others. This was echoed by the PAs who were largely positive about the impact of the packs. The fact that care leavers are all individuals with different needs can sometimes make pitching resources challenging, which was reflected in some of the comments – one PA spoke about including more images to make it more eye-catching to encourage people to engage, whereas another PA said that her young person found the information too simplistic.

Five young people completed both the pre- and post- survey. The small sample size means no generalisable conclusions can be made. The descriptive statistics, however, showed that on average participants reported that they were less lonely and socially isolated at the end of the project compared to the beginning of the project which is promising, though there was no observed change in both

participants' subjective wellbeing and participants' perceptions of their health-related quality of life from the beginning and the end of the programme. Though efforts were made to shorten and simplify the questionnaire, more interactive and creative approaches should be considered, as well as weighing up whether validated scales are always appropriate in this context.

The process evaluation, which included interviews with four PAs and four members of staff at Base 51 highlighted the importance of developing trust with the young people. The PAs were a key driving force behind the success of the programme as they were the ones who saw their young people regularly and had already spent the time prior to the programme establishing a relationship with them.

The Youth Worker at Base 51 had an integral role in engaging the young people to access their support, and it was clear that more time and resource was needed to prioritise this relationship building process. Having a flexible and adaptable approach also helped to engage care leavers, for instance, counselling sessions were offered over the phone instead of just face-to-face. At a wider level, there is a need to shift negative perceptions of counselling among care leavers.

All future mental health programmes targeting care leavers should aim to address the digital exclusion that some care leavers experience.



Understanding the impact of targeted support for care leavers

This evaluation sought to understand the impact and implementation of *Feeling our Way*, a package of support for care leavers¹ in Nottingham to manage their mental health during the pandemic.

The project was developed by the Mental Health Foundation (MHF) in partnership with Nottingham City Council and aimed to provide care leavers with resources and psychoeducation to help them to directly understand and address their mental health needs independently. Monthly workforce development meetings took place as part of the programme, with Personal Advisors (PAs)² and managers in the Nottingham City Leaving Care Team³.

There was also a component of the package that offered up to ten young people access to therapeutic support with no wait times and additional specialist youth engagement to encourage uptake of the therapy.

Care leavers are at increased risk of mental health problems

Young people in care often face a lack of security, reliability and stability in their lives due to multiple factors such as changing foster carers, home and school placements, early trauma and complications around their birth family. They are consequently at a greater risk of experiencing mental health problems and social isolation.⁴

A key transition that young people in care will experience is the move from being in care and supported by a social worker to being an independent care leaver eligible for assistance from a local authority Aftercare advisor (Personal Advisor, PA). This shift towards increased independence can add further disruption to their life, as they must contend with existing support ending and services being more difficult to access as an adult. This could lead to or exacerbate existing mental health problems – indeed, a 2017 Barnardo's study⁵ found that one in four care leavers in their study experienced a mental health crisis after leaving care.

1. When we talk about care leavers, we mean young people who are or have been in care and are entitled to support after their 16th birthday. This is based on our understanding of 'children in care', as in the Children Act (1989), and refers to those who are looked after and provided accommodation by a local authority for a continuous period of more than 24 hours, including those under a care or placement order.
2. A Personal Advisor is part of the Leaving Care Team, and acts as a focal point to ensure a care leaver is provided with the correct level of support up until the age of 25.
3. The Leaving Care Service offers advice, information, practical help and befriending to young people aged between 16 to 25 years who are eligible to receive care leaver support.
4. Baker, C. (2017) *Care leavers' views on their transition to adulthood: a rapid review of the evidence*, Coram Voice, London. Available online: [https://www.coramvoice.org.uk/sites/default/files/999-CV-Care-Leaver-Rapid-Review-lo%20\(OO4\).pdf](https://www.coramvoice.org.uk/sites/default/files/999-CV-Care-Leaver-Rapid-Review-lo%20(OO4).pdf)
5. Barnardo's (Sept 2017) *Neglected Minds: A report on mental health support for young people leaving care*, available online: <https://www.barnardos.org.uk/sites/default/files/uploads/neglected-minds.pdf>



However, care leavers with mental health problems may not always receive the support they desperately need. The same Barnardo's survey found that around two-thirds of care leavers with mental health problems were not accessing specialist support. This is echoed in a recent Coram report, which makes a recommendation to the local and national government to improve transitions from children's to adult's services, such as CAMHS to specialist mental health support.⁴



Targeted support to this group is critical

The impact of Covid-19 may be particularly pronounced for care leavers who are already at greater risk of mental health problems and substance misuse issues. The uncertainty of the current environment may exacerbate feelings of isolation among care leavers, who often have little financial, emotional and personal support and consequently can sometimes experience quite 'chaotic' lifestyles.

This programme took place in Nottingham City, which scores low on the Thriving Places Index (which identifies local conditions for wellbeing and measures whether they are delivered fairly and sustainably) for work and local economy and mental health. In the Covid-19 pandemic, care leavers may have felt even more isolated, which can result in an increase in risks, such as exploitation, or alcohol and substance misuse.

For these reasons, the Mental Health Foundation and Nottingham City Council created the '*Feeling our Way*' programme, after consulting with the Leaving Care Team to understand local care leavers' needs. The programme provided care leavers in Nottingham City with a package of support via digital and physical resources that aimed to improve care leavers' feelings of social connectedness and mental health during this period.

There are four key elements in the *Feeling our Way* support package

Feeling our Way offered 50 care leavers a tiered approach to support that included resources and psychoeducation to help them directly understand and address their mental health needs independently. In their past, care leavers are likely to have had a lot of interaction with health and social care professionals. The difference with the *Feeling our Way* project is that participants are supported to improve their mental health, in their own time and at their own pace.



This package of support was comprised of:

1. Wellbeing Kits: Monthly physical “home coping” packs

- a. Examples include a mindfulness colouring set, journaling resources (e.g. mood tracker), a budget planner, an indoor allotment plant kit, games and other art and crafts items to support coping strategies.

2. Fortnightly Digital Packs:

accessible via an online link

- a. Examples include a wellbeing blog, challenges and competitions (including physical exercises, cooking competitions, art activities), quizzes (relating to mental health and online safety), links to further resources and mental health support to increase their levels of connectivity to the outside world and give them something to look forward to on a regular basis.

3. **Digital access:** smart phones with unlimited data (including internet, minutes, texts) for the most vulnerable care leavers to connect to PAs and friends, and provide internet for increased access to information and support online. A needs assessment of care leavers’ digital access was undertaken to ensure any care leaver who needed it was given technology to allow them to connect to the internet for online support sessions. Those who had digital access were provided with the Digital Packs every two weeks.

4. **Specialist therapeutic support:** from February 2021, up to ten young people were offered access to therapeutic support at Base 51⁶ with no wait times and additional specialist youth engagement to encourage uptake of the therapy. The young person’s needs were assessed by phone or in-person, to determine the best course of action. Support could include counselling, online support, meeting in the community or holistic options like dance or sport. Aside from these targeted referrals, increased links between Base 51 and the Leaving Care team were established to enable wider uptake of these creative offers by the 200+ care leavers from across Nottingham City.

The programme employed a tiered approach, meaning not all participants received every component of the “package of support”; this depended on their level of need and preference. For instance, some participants received only the Wellbeing Kits or only the Digital Packs, whereas others received both. The Wellbeing Kits were delivered to 50 people and the Digital Packs (and subsequent digital access) were delivered to 30 people.

Timeframe of the programme

Delivery began in September 2020 and was intended to be for six-months, ending in February 2021. The programme was extended for three months and ended in the third week of May 2021.

6. Base 51 is a young people’s charity in Nottingham that supports 11- to 25-year-olds through counselling, groupwork and one-to-one support. This offer was secured by the *Feeling our Way* project team in December 2020.

Key people involved in the programme

For purposes of clarity, we have set out a table to include the key people in the programme, their role and how we will refer to them in the report:

Table 1: Key People in the Programme

Who?	Their role in the programme	How we refer to them in the report
The participants	The young people between 18 and 25 years old who are care leavers that are taking part in <i>Feeling our Way</i>	'Young people' or 'participants' or 'the care leavers'
The personal advisors	These are the personal advisors that are from Nottingham City's Leaving Care team. They are responsible for ensuring their young people receive appropriate support as they adjust to independent living. Their role in the programme was: to encourage and support their young people to take part in the programme and the evaluation. They brought the wellbeing kits to the care leavers as part of their regular home visit. For those living further away, the personal advisors posted the kits to them.	PA's
The youth worker	This is the youth worker at Base 51, whose role was to reach out and engage the young people referred to Base 51 for further support.	The Youth Worker
The counsellor	Once the young people were willing and engaged, and suitable to receive Base 51 counselling support, they undertook sessions with the counsellor. Young people could access wider offers alongside counselling.	The Counsellor
The MHF project team	This refers to the Programmes team at MHF who led the programme. They were responsible for managing the project, which included: developing the project, meeting and liaising with the different stakeholders, designing and creating the resources for the young people, and securing new opportunities (as with the therapeutic offer from Base 51).	The MHF project team
The MHF team working on the evaluation	They led on the design of the evaluation, the data collection, the analysis and the final write up of the evaluation report.	The evaluation team/ evaluators



A mixed methods approach to evaluation

The evaluation adopted a mixed-methods approach to understand the impact of *Feeling our Way* on care leavers and the process of implementing the project, key barriers and facilitators, and any learnings. The table below demonstrates how the evaluation aimed to shed insight on these factors.

Table 2: Evaluation Approach

Evaluation aim	Data collected	Notes
1. To explore the impact of the programme on care leavers.	<p>Questionnaires administered at the beginning of the programme (T1) and at the end of the programme, which was extended to the third week of May 2021 (T2).*</p> <p>Interviews with care leavers.</p> <p>Interviews with staff (to explore perceived impact on their care leavers).</p>	<ul style="list-style-type: none">• 11 young people completed the questionnaire at T1. Five young people completed the questionnaire at T2.• Three young people took part in interviews.• Four interviews with PAs also explored perceived impact. Towards the end of the programme, another interview was conducted with a PA whose care leaver accessed support from Base 51 to provide more specific insights into the impact of the Base 51 offer as part of the package of support.
2. To explore the process of implementing the project, its impact on service provision and key barriers and facilitators and any learnings.	<p>Interviews with PAs and Base 51 staff</p>	<ul style="list-style-type: none">• 4 interviews with PAs were conducted (as mentioned above).• 4 members of staff at Base 51 were interviewed.



***The following scales in the questionnaires were collected:**

1. Feelings of social connectedness, as measured by the Social Connectedness Scale (SCS). This scale consists of 20 items which respondents rate on a scale from 1 (strongly disagree) to 6 (strongly agree), with a higher score indicating greater connectedness to others.
2. Coping strategies, as measured by the Brief Resilient Coping Scale (BRCS). This short scale captures tendencies to cope with stress adaptively, and consists of 4 statements about behaviour and actions, which respondents rate from 1 (does not describe me at all) to 4 (describes me very well). Higher scores indicate higher resilient coping.
3. Awareness of, and access to, sources of mental health support and information and resilience, as measured by five bespoke questions in which young people were asked to rate the extent to which they agreed or disagreed (a 5-point Likert scale) with five statements.

In the T2 questionnaire additional bespoke qualitative questions were included:

4. Level of satisfaction with the topics explored in the home or digital packs and the activities; whether participants felt they learnt something new and whether they would recommend the programme to others (a 5-point Likert scale).

Young people were offered a £10 Love2Shop voucher at each time point for completing the questionnaire.

Participants were also invited to take part in a short interview to discuss their experiences of participating in the programme. This was advertised in two digital packs (one at the end of December 2020 and the other at the beginning of January 2021) and care leavers registered their interest in participating by completing a form.

The evaluation team then followed up with each individual to discuss the study and arrange the interview if the young person was still interested in taking part. Participants were offered a £20 Love2Shop voucher as a thank you for participating in the interview. Three young people agreed to take part in an interview.

For the process evaluation, PAs from the Leaving Care team were invited to participate in interviews with the evaluator. Four PAs took part in interviews. The Leaving Care team were also able to send qualitative feedback to the researcher if they preferred to share their views anonymously.



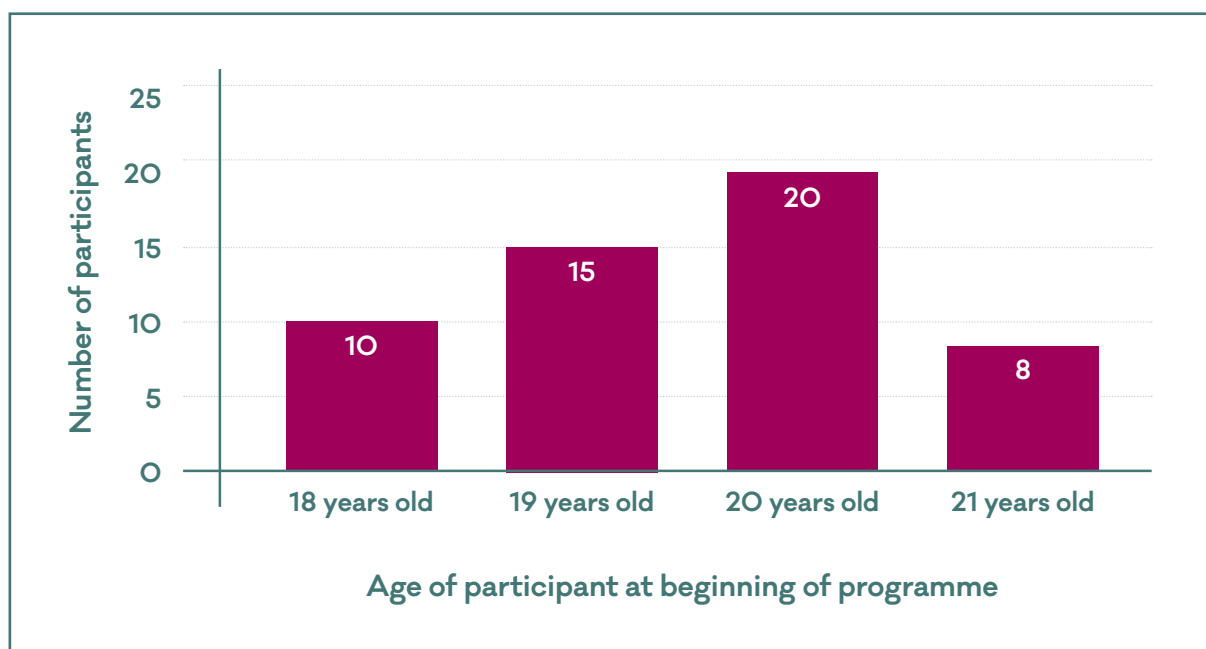
Feeling our Way support helped young people cope with their mental health and more



Programme demographic data

We have an age, gender and ethnicity breakdown of the 53 young people that accessed either the Wellbeing Kits or the Digital Packs at the beginning of the programme.

Figure 1: Participant ages



Participants ranged between 18 and 21 years old at the start of the programme, with the majority falling between 19 and 20 years old. Over half (58%, 31) the participants identified as female. Whilst the majority of participants (74%, 34) were White British, a wide range of ethnic groups was represented, as in the Figure 2. This highlights the diverse backgrounds of care leavers in Nottingham City.

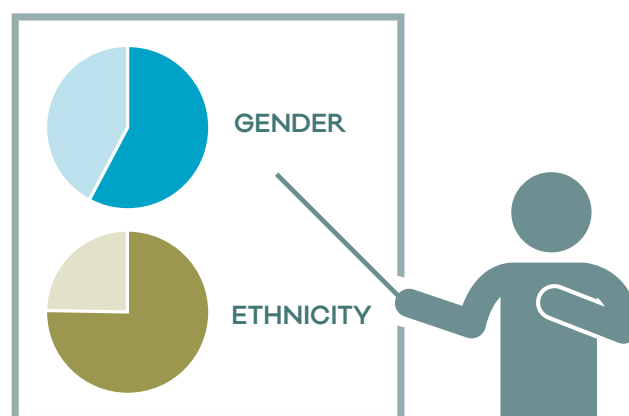
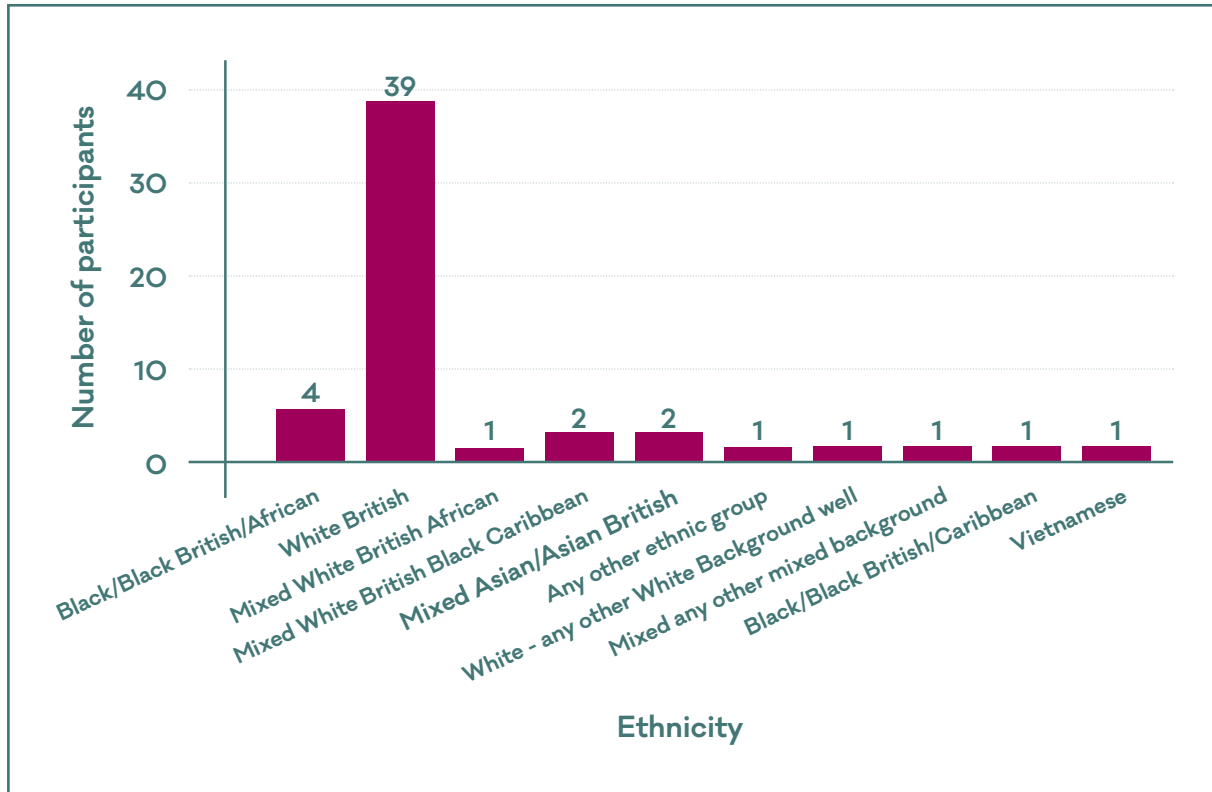




Figure 2: Participant Ethnicities



We were also interested in collecting data on those young people that accessed Base 51 support. At the end of the project, there were in total 14 referrals made to Base 51 through *Feeling our Way*. Of these 14 referrals, eight had engaged in counselling or communication at the time of the evaluation.

Four young people did not engage, one young person was still undecided as to whether to go ahead with accessing support and one person's support closed (i.e. they received the support and then ended it).



1. What was the impact of the programme on care leavers?



We wanted to understand the impact of *Feeling our Way* on the young people that participated. To do this, we gathered data through online questionnaires to the young people, interviews with young people, and interviews with the PAs.

1.1 Quantitative methodology and data

We administered online questionnaires to participants at the beginning and end of the programme. These questionnaires were advertised in the digital packs and PAs were asked to inform their care leavers participating in the programme of the evaluation questionnaire. A £10 shopping voucher incentive was sent to those participants that completed each questionnaire.

Of the 30 young people who were participating in the digital offer, 11 completed the pre-questionnaire which is a high response rate. Five young people who had completed the pre-questionnaire also completed the post-questionnaire despite efforts to increase the post-questionnaire response rate (reminders were sent to PAs to relay the information to their young people, incentive vouchers were offered, the window for completing the survey was extended).

Please see '2.33 Suggestions for future evaluations' for some reflections around how we can better engage care leavers in research going forward.

The quantitative data is therefore somewhat limited. Below we have presented some descriptive statistics for the five participants who completed pre- and post- questionnaires, however, given the small pool of matched data, it is not meaningful to conduct statistical tests on the data.

Statistical tests help us understand whether the change in data from the beginning to the end of a programme is statistically significant, that is, it hasn't occurred due to chance. As we're not able to test the data statistically, we will not be able to definitively say whether changes in the questionnaire data are attributable to the programme.

1.2 Data from the validated scale measurements

Improvements in social connectedness

Participants were asked to rate 20 statements touching on social connectedness (SC) on a 6-point Likert scale from 1 (strongly disagree) to 6 (strongly agree). Higher scores indicate higher levels of social connectedness. The minimum score an individual can get is 20 (it was mandatory in the questionnaire to complete all the items)



Table 3: Pres and Post Social Connectedness Scores

Total SC score		Mean SC score	
N=5			
Pre	Post	Pre	Post
335	417	67	83.4

and the maximum score an individual can get is 120. With this group of five participants, the maximum total score they could get was 600.

Young people's social connectedness scores increased by 24.5% from the beginning to the end of the programme. This is a rather surprising finding given the challenges of the pandemic and lockdown. Whilst we cannot say this is attributable to *Feeling our Way*, it presents a promising picture.

Improvements in resilience

Participants were asked to rate four statements on a 5-point Likert scale from 1 (does not describe me at all) to 5 (describes me very well) to capture tendencies to cope with stress adaptively.

The resilient coping scores increased by 18.2% from the beginning to the end of the programme. The scale provides an interpretation of different score ranges with 'low resilient copers' scoring 4 to 13 points, 'medium resilient copers' scoring 14 to 16 points and 'high resilient copers' scoring 17 to 20 points.

Table 4: Pre and Post Resilience Scores

Total BRC score		Mean BRC score (n=5)	
N=5			
Pre	Post	Pre	Post
63	77	12.6	15.4

According to this data, the mean BRC score for the five participants moved from the low resilient category to the medium resilient category.

Improvements in awareness of mental health and access to support

We asked participants to rate five bespoke questions to explore their levels of awareness of, and access to, support services. Participants rated these statements on a 5-point Likert scale with 1 being strongly disagree to 5 being strongly agree.

At baseline, participants' responses reflected a varied level of awareness of when to get help or support for their mental health. Of the five participants, three agreed or strongly agreed that they knew when to go for support. However, one participant neither agreed nor disagreed with the statement, and one disagreed.

At the end of the programme, the scores for the two participants that were less sure about when to get help or support for their mental health improved.



This was similar for participants' awareness of where to go to get help or support for their mental health. Three agreed or strongly agreed that they knew where to go for mental health support, one neither agreed nor disagreed with the statement, and one strongly disagreed. At the end of the programme, the scores for the two participants that were less sure or did not know where to get help or support for their mental health improved.

All participants at baseline were confident that they knew what mental health was, though improvements in scores were still evident at T2. At baseline, three participants felt aware of things they could do to look after their mental health. One person was more ambivalent, whereas another strongly

disagreed with the statement. Again, at T2, all scores improved or stayed the same. The two lower scores increased to indicate that they felt aware of things they could do to look after their mental health.

Young people were also asked whether they felt they had what they needed to look after their mental health. At baseline, most participants felt that they did have what they needed, however two disagreed or strongly disagreed with this. Promisingly the two participants that disagreed or strongly disagreed with the statement gave higher scores at T2, though one of them was still fairly ambivalent about whether they had what they needed. The figure below represents the change in responses from T1 to T2 more clearly:

Figure 3: Change in awareness of mental health and access to support

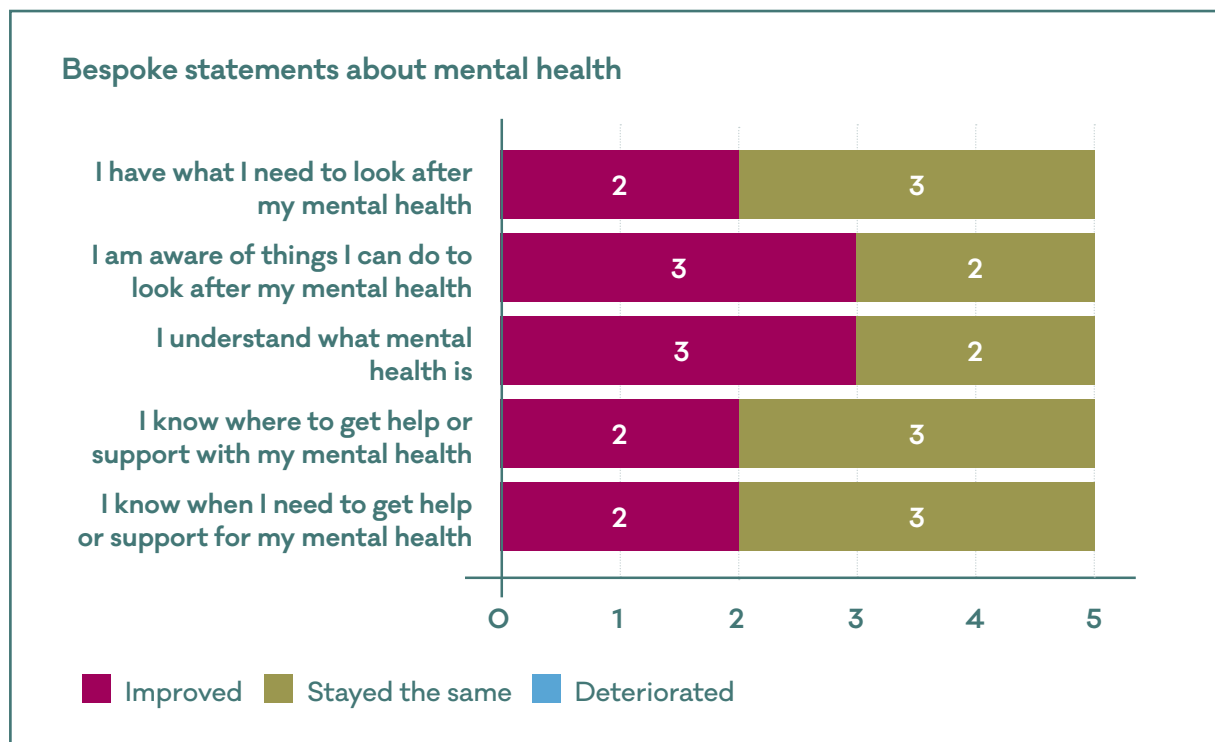
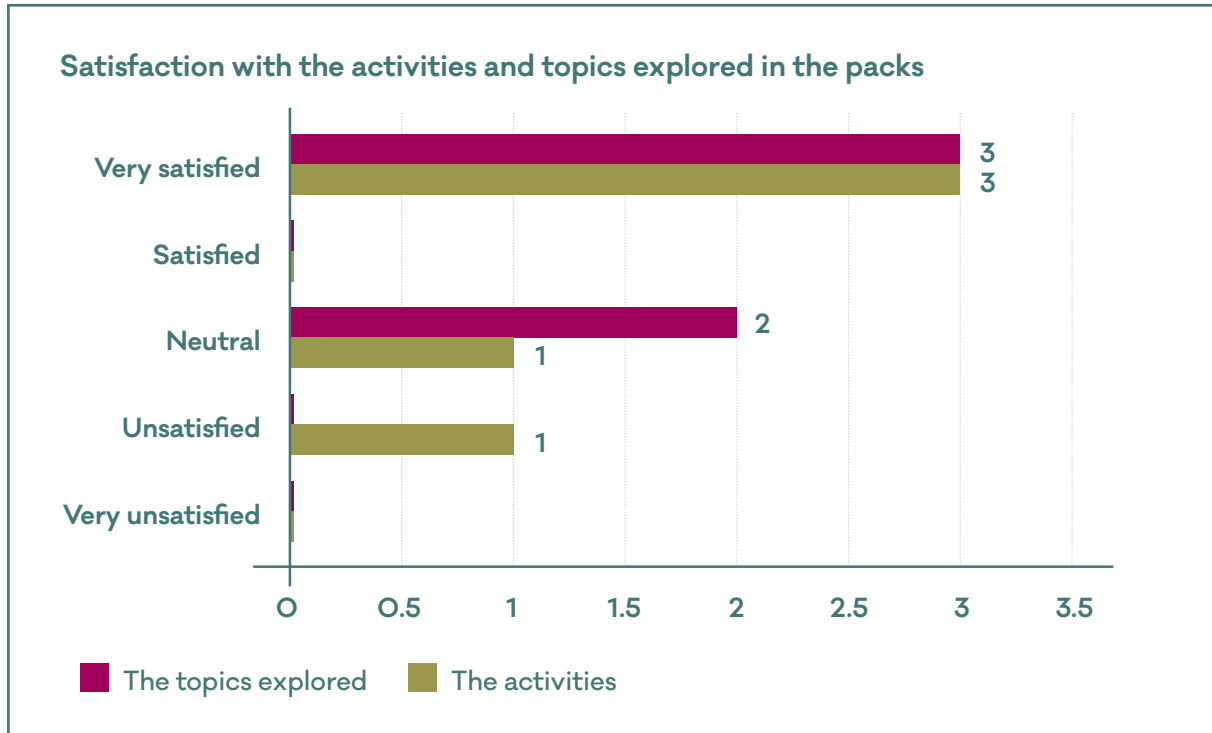




Figure 4 Satisfaction with activities and topics in packs



1.3 Programme-specific questions

Satisfaction with the support package
The participants were asked questions about the wellbeing kits and the digital packs more specifically. Of the five respondents, three said they were satisfied with both the topics explored and the activities involved in the packs (including home and digital). Two were more ambivalent about the topics explored.

One participant reported that they were unsatisfied with the activities included in the digital packs. In the interviews, it became clear that this could be due to personal preference with some young people preferring the information shared in the digital packs as opposed to the activities.

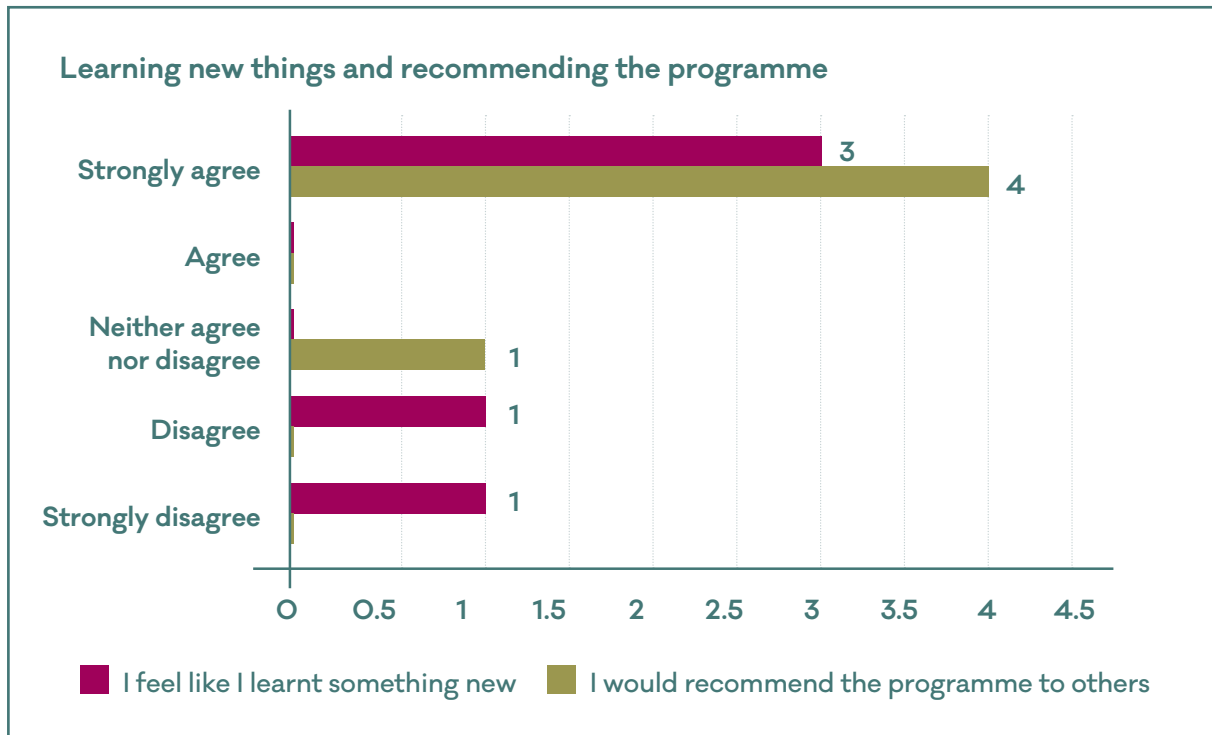
Recommending *Feeling our Way to others*

All but one of the respondents said that they would recommend the programme to others. The remaining participant was ambivalent about whether they would recommend this to others. There was a mixed picture regarding whether people felt they learnt something new from the programme.

This point is elaborated on further in the interviews with young people – whilst the information in the home and digital packs might not have always been ‘new’, participants can still benefit from being reminded of positive coping strategies to manage their mental health.



Figure 5 Recommending to others and learning something new



1.4 Interviews with young people and PAs

We conducted interviews with three young people (two who identified as women, one who identified as a man) taking part in the project. We invited participants to engage in interviews and offered a £20 shopping voucher as an incentive.

The three participants received slightly different packages: two received the home packs only, whereas the third young person received the digital packs and the phone. These interviews took place in January and February 2021 before the Base 51 offer really got underway. The PA interviews also explored the perceived impact of the programme on their care leavers.

1.4.1 Young people reported enhanced coping strategies

Across the interviews with young people, it was clear that the programme positively influenced their ability to cope with their mental health:

'It's helped me to be a more calmer person.' P2

'...since I've been on the programme, I was on my tablets...and I've slowly come down off them... I'd say it's to do with the programme that I'm doing.' P1

Participants found the practical information on coping strategies incredibly useful and were able to apply these to their daily lives:

'It taught me different new ways to cope with the, my feelings, my emotions and that was the main one for me, so you hit the nail on the head with that to be honest.' P3

'The information on how to keep calm and not let your head explode [was useful].' P2

In some cases, reading the wellbeing kits and doing the activities included could serve as a coping strategy in itself during more challenging times:

'I mean definitely when I feel like I'm depressed and I've got anxiety, I do go and read the packs or read the book and do some of the activities and it takes my mind completely off it...' P1

'I thought it was something I could look forward to, and something I knew could help me if I was having a bad day. I'd save it in the week when I was having a bad day and go check it out.' P3

Interviews with PAs supported this, stating that the practical activities provided entertainment, a good distraction from other negative behaviours (such as smoking cigarettes), and useful coping mechanisms for some care leavers. They mentioned that they thought it was nice for the care leavers to receive something physical that was thoughtful and for them only.

1.4.2 The importance of phones

Whilst only one of the three young people interviewed was given a mobile phone with data as part of their package of support, the benefits this brought to the participant were significant:

'This has helped and even with the SIM card, even the phone and that, it's helped a lot because I didn't have data or Wi-Fi, I don't even have a TV in my house, I don't even have a phone, so it's kept me up to date with the world and the news and getting in contact with people like you, you know what I mean? And not being as lonely as much, it's all just helped a lot really.' P3

Having a phone allowed the participant to stay connected with their family during the pandemic, when they were at home shielding due to health issues:

'It's everything, like it's helped me stay at home, just everything really, it's helped a lot.' P3

Both quotes highlight the importance of tackling digital exclusion among care leavers. Having the phone as a component of the *Feeling our Way* package of support was therefore hugely important, particularly during the pandemic when feelings of isolation and loneliness were likely to be exacerbated.

This point was further confirmed by the interviews with PAs, who felt that the phone was a valuable, practical resource for their care leavers that, in addition to allowing them to access the *Feeling our Way* resources, more importantly allowed them to make valuable contact with friends and family to combat isolation themselves. Those care leavers who may have only used Wi-Fi based communication apps such as WhatsApp, were able to make phone calls with the credit provided with the phone. This helped with other stressors such as being able to make important calls about utility bills and other practical issues.



Importantly, the phone also meant that the PAs found it easier to contact their young people, so they appeared more likely to continue engaging with them.

'...having the phone was like a Godsend' PA

'And ever since I gave her that phone... she's never not picked up my call' PA

'I feel this project has helped the kids because I have not... I've not even stopped talking with them.' PA

When considering risks to elements of the programme, the possibility of the phones being lost, stolen or sold was considered but it was felt in this instance that the benefits that the phones could offer participants greatly outweighed the risks. By the end of the project, three participants no longer had their phones, which were confiscated by police. Another participant's phone was blocked by their PA due to inappropriate usage.

1.4.3 Different people, different perspectives

Given that care leavers are a group of young people with diverse needs, it is perhaps unsurprising that what was most enjoyed or valuable differed greatly between young people. One participant really enjoyed the activities provided in the home packs, particularly the sports and baking-themed activities because it allowed them to engage in the programme with their family:

'That was really good 'cause that can get not just you involved but your whole family.' P1

However, another felt that while they were satisfied with the activities, they found the information provided in the digital packs to be more valuable to them than the activities.

On a wider level, the chosen package of support offered is clearly an individual decision that needs to be made after assessing the young person's needs. Whilst the two people who received home packs were happy with this, the participant who received digital packs felt that this format was better suited to her and enabled her to get the most out of the programme:

'...it mattered more like the videos to me because I'm a more visual person, I don't really like talking, writing, but me watching a video, I understand a lot more.' P3

The varied package of support offered by *Feeling our Way* is, therefore, one way of addressing the diverse needs of care leavers.

1.4.4 Familiarity with the content of the materials

The PAs were generally positive about the home and digital packs, stating that they were helpful and engaging. There were particular mentions of the colouring books as an interesting resource and the skipping rope for a care leaver who was already looking for ways to get active. However, one PA told us their care leaver had said that the packs were too simplistic, even childish, and didn't meet their expectations.

There was also the challenge that, given care leavers' experience with mental



health services and professionals, they may have felt that they were learning nothing new as some of the key messages around mental health were likely to be things they had heard before. While the home and digital packs were designed to be engaging and centred around different themes, one PA reflected that their young person felt as though nothing new could help them, leaving them feeling stuck:

'One week... she was like a different young person. She was really positive... it obviously had a really good impact on her for that particular week. But yet when I saw her on Friday it was like, yeah, it's the same thing, it's just about talking.'

'We just seem to be talking about the same things and it's making me sadder all the time.' PA

Given the complex nature of mental health, it is perhaps not surprising that some of the information provided is not 'new'. This was raised in some of the interviews with young people themselves; however, whilst they felt they knew some of the information before engaging in the programme, they still found it valuable:

'I wouldn't necessarily say [the information in the packs was] new. It taught me different new ways to cope with them, my feelings, my emotions and that was the main one for me...' P3





This stems back to the key challenge facing all programmes targeting care leavers, which is that they are a heterogenous group with a diverse set of needs, making it difficult to offer support that is well-suited to all participants.

Given that PAs were identifying which of their care leavers might benefit from engaging in the *Feeling our Way* project, future programmes might benefit from considering how care leavers' expectations can be managed at the beginning and throughout the programme.

1.4.5 Working independently

Care leavers tend to have had a lot of interaction with health and social care professionals in their past. The difference with the *Feeling our Way* project is that participants were supported to work on their mental health independently.

There was a therapeutic support component offered by Base 51, however that was by referral and participants only engaged with it if they felt they needed to. It was clear from the interviews that the young people, especially those who do not enjoy groupwork, enjoyed being able to engage in the programme in a way that suited them:

'It's been really really good, I'm not gonna lie, it kept me motivated for every week when I got [the pack], you know what I mean and I don't really like mental health work.' P3

'...normally I'm a quiet person so I won't do groups and stuff but this one has really helped.' P1

Indeed, the interviews with PAs highlighted that the home and digital packs generally offered participants a change from sitting and talking about mental health issues.

1.4.6 Feeling less alone

Simply by reading the information in the packs, some care leavers felt reassured and comforted that other people experience similar things to them:

'I think it's the information and just knowing that there's other people that are like me and it's not only me that struggles with it.' P1

This point was reinforced in a PA interview. They highlighted that just having the packs, reading and watching materials that reflected what they were going through, helped them to see that they weren't alone in their experience.

By showing that others experience similar things, the packs also seemed to help participants to articulate and understand their feelings better which is key to supporting them manage their mental health:

'I just think, really, they help with people that maybe don't know how to express their feelings and their depression, anxiety.' P1

'It's not like you don't try to take notice [of difficult feelings], but it's like you can try not to encourage it.' P2



1.4.7 Impact of access to Base 51 counselling

For the eight young people that engaged with Base 51 counselling or communication, it seemed to have a positive effect. However, this process of engaging young people is time-consuming; it takes time to build relationships with care leavers, many of whom have 'chaotic' lifestyles. However, the benefits of counselling can be great.

The counsellor recounted that for one care leaver, the positive changes arising from counselling were clearly evident in her self-evaluation after six sessions:

'It demonstrated lots of positive change, no self-harm compared to being quite moderate self-harm, her level of happiness, sense of wellbeing,

being consistent, being very up and down before, so seeing those positive changes has been really good and actually just hearing her say 'yeah everything's great, I feel so much better, I can express myself.' Base 51

This was also reflected in an interview with a PA of a care leaver who stated that she 'really liked her counsellor' and 'reported positively about her sessions.'

For another care leaver, it had taken time to build her trust and the counsellor spoke about how in each session, she was learning more about the trauma that the care leaver had experienced. In these more complex cases, which are likely with care leavers, the standard six or twelve sessions of counselling are not always sufficient to result in improvements in mental health.

2. What learnings did we identify from implementing the project? What were the key barriers and enablers?



The second evaluation question around process and implementation was explored through four online interviews with PAs and four with staff at Base 51 involved in the *Feeling our Way* project. These interviews helped us identify the project's barriers and enablers and key learnings that can benefit future planning.

2.1 Facilitators

2.1.1 The Base 51 Youth Worker's role in engagement

The role of the youth worker reaching out to young people that had been referred to Base 51 for further support was integral in increasing engagement with the offer. The Youth Worker's key aim was to build relationships with the young people which would encourage them to access Base 51 support. Given the unstable and challenging backgrounds many care leavers have experienced and their interaction with services, it could take a long time for care leavers to engage:

'It's been a really slow process to get to where we are and it's only now just getting to build a sense of momentum.' Base 51

The limited time period of the project added to the challenge for the Youth Worker, as they were trying to build trust with the care leavers from scratch. A longer programme that allows for this relationship building time would therefore be beneficial to increase the likelihood of tangible outcomes for the young people. This point was reiterated by a PA who mentioned that:

'That building of a relationship is important...it can take us [the PAs] 2 years to build a relationship.' PA

For the Base 51 offer, there were two points of contact for the young people: the Youth Worker and the Counsellor.⁷ This setup appeared to work quite well; however, one challenge was working around their different schedules:

'It would be better if we worked on the same day so we could meet the young person together... we've established a way to work around it...I feel like we're communicating well, even [the Youth Worker will] check in on me to see if the young person's turned up etc. on the day so we've got round to it.' Base 51

The two of them appear to have worked around this challenge by maintaining regular communication with each other and being flexible.

2.1.2 Flexibility in therapeutic offer

Interviews with PAs and Base 51 staff highlighted the importance of being flexible and adaptable when working with care leavers. While Base 51 generally

7. Whilst the Base 51 offer was wider than counselling, all the referrals from *Feeling our Way* were for counselling.



encourages young people to attend sessions face-to-face due to being able to offer a safe, confidential space, there was an acknowledgement that some young people would engage better if they were offered sessions over the phone.

As previously mentioned, one young person felt more comfortable with their PA attending the first session, which – while not standard practice with counselling – was something that Base 51 was happy to accommodate to encourage engagement.

'I think it's about flexibility, I know [Base 51 staff member]'s had a few people ask her if they could do a Walk & Talk session and I know we're looking into that, if there's some way of offering that, a sort of walking talking therapy which we don't currently offer. I think it's those sorts of ways of looking at it, can we be flexible? We're offering telephone, face to face, Zoom...' Base 51

The interview with the Base 51 Youth Worker also echoed the importance of being flexible and adaptable. Whilst the assessment form is typically filled out in person, the Youth Worker offered this over the phone and aimed to structure this in an accessible way, more 'as a kind of chat, talking to them on the phone', as opposed to an interview 'where you're asking them loads and loads of questions.'

2.1.3 Personal Advisors as the key driving force

The PAs were clearly a crucial driving force behind ensuring the success of the programme and the participation and engagement of the care leavers. There may be an opportunity in future to

consider whether embedding PAs more in the model from the outset would be beneficial. This could potentially help to: improve buy-in from the care leavers, ensure consistent and effective internal communication about the programme, and create a more joined up response that would benefit the care leavers.

'I just think we owe it to our care leavers to have a more joined up response for them.' PA

The interviews with the staff at Base 51 confirmed the importance of the PAs in engaging the young people to access therapeutic support. Though young people could choose to self-refer to Base 51, all the referrals to date had been made by the PAs:

'There seems to be a fair amount of the PAs suggesting that it's a good idea, kind of thing, rather than it coming from the young person which then obviously makes the engagement level harder to attain.' Base 51

As mentioned above, one young person felt more comfortable to engage in counselling with their PA attending the first session. This is something that was explored to potentially help with engagement, however this should not be implemented as standard practice as its effectiveness is highly dependent on the relationship the young person has with their PA. Indeed, while PAs can act as a facilitator in engaging their young people to access support, a delicate balance is needed:

'Some young people won't mind you reminding them, with others they do and you risk disengagement.' PA



Indeed, while this group of PAs were willing to put in extra work for their young people, others may not be able to.

This is something that may need to be considered and accounted for in future planning of the project. Including what helps to engage the young person could be helpful to include on future bespoke referral forms.

2.2 Barriers/challenges

2.2.1 A heterogeneous group with diverse needs

The PAs and Base 51 staff confirmed that young people who are care leavers have a unique set of complex and diverse needs that need to be met through care leaver specific programmes.

'I feel it's something to do with their attachment style, that actually the way they view the world is so much scarier.' Base 51 staff

The 'leaving care' transition was highlighted as a crucial, unique stressor for this group. The care leavers are expected to be self-sufficient and 'adult' at 18 in a way that is perhaps not expected among their peers. In addition, they are likely to have experienced more trauma and other stressors compared to those their own age who haven't been in care. PAs also highlighted particularly low levels of resilience and motivation among the group.

PAs also raised the issue of the scarcity of mental health services for their care leavers. They confirmed the necessity for mental health programmes that can address their specific needs. They were generally enthusiastic at the prospect

of *Feeling our Way* as a new, different support approach to appeal to the care leavers.

'It's about time our kids had something because, you know, care leavers have not had so much input from services out there.' PA

2.2.2 Acknowledged challenges in engagement

There was a consensus among the PAs that the care leavers face specific challenges to engaging in programmes that require an ongoing commitment. Engagement in this programme was very variable among the care leavers, with some engaging throughout the programme, others seemingly willing to try but then losing engagement as the programme progressed, and others who did not want to engage at all.

One potential reason given for this low engagement was that the programme was perhaps viewed as an extra task in care leavers' lives where they already have so much to deal with, and when their motivation may already be low. The mental health and support needs of the care leavers may also contribute to these low levels of engagement.

Another PA mentioned that there was a language barrier for one care leaver which prevented their engagement. Care leavers may be from many different backgrounds but there may be relatively few from the same background, as highlighted in Figure 2, meaning translations of documents may not be feasible on a large scale. They suggested perhaps incorporating a session to go through the packs with care leavers

who may have a language barrier so that they are not limited from engaging with the programme.

It was clear from the PAs that ensuring engagement of the care leavers can require a lot of input and guidance from them. Maintaining communication and checking in on progress is crucial for some to continue to commit to the programme. This issue further impacted care leaver engagement in the Base 51 provision. Where PAs would regularly contact their care leavers, people from partner organisations may not have the capacity to do so. Where care leavers may miss a couple of calls from other points of contact, they may then be written off as a non-engager and not receive further support.

'...some professionals out there, they will just give them a couple of calls and if they don't pick up, write them off the book.' PA

This was not the case for Base 51, however, as the Youth Worker dedicated a lot of time and resource into reaching out to the young people; though the short length of the project and the limited number of days the Youth Worker had assigned to this project did make this challenging.



2.2.3 Expectations of young people

PAs highlighted that the motivation and expectations of the young people also acted as a barrier to participation. According to the PAs, among some of the young people there were expectations that taking part in the programme would 'cure their mental health'. They wanted to see instant results. When it became apparent that this wasn't the case, motivation to participate decreased and some young people lost interest.

Furthermore, PAs described generally low levels of motivation among the care leavers as a group. As the completion of the packs was intended to mostly be self-motivated or independent, this may have contributed where young people didn't fully participate in the programme.

'...And again it comes back to how bothered are you, how motivated are you to effect those changes?' PA

This point about motivation and expectations was also raised in the interviews with Base 51 staff, where it was discussed that care leavers as a group sometimes do not understand the need for regular, set times for counselling.

To overcome some of these issues, suggestions were made to include a group session at the beginning of the programme with the young people to outline the project, its aims and what they can expect from it. It was also suggested that perhaps there could also be group meetings or sessions to go through some of the packs together to help with continued motivation and engagement, though this might not be suitable for those young people who prefer to work independently.



However, there was a consensus among the PAs that more face-to-face communication would help with engagement, motivations and the longevity of the young people's commitment to the programme.

For those young people engaging in the counselling element offered by Base 51, they should be regularly reminded of the purpose of the counselling and that the process will take a while. Whilst a recap is always provided at these sessions where the Counsellor reflects on the last session, it was felt that care leavers would benefit from more regular reminders.

2.2.4 Perception of counselling

One barrier to accessing the support offered by Base 51 was the negative perception many care leavers have of counselling, which may be informed by their more 'clinical' experience with CAMHS.

The various paperwork required when accessing counselling – the processing and assessment sheets – may further serve to perpetuate the negative perceptions and even trigger anxieties among young people who feel that they have to demonstrate the 'seriousness' of their issues to warrant support.



Wider work around changing perceptions of counselling could have real potential to benefit care leavers in the longer term. One suggestion of how this could be done was offered by a PA, for instance, using pop-up tents 'to promote the friendliness of counselling'.

2.2.5 The location of therapeutic support

Even prior to referrals being made to Base 51, some PAs raised that the young people may have negative associations with Base 51 due to the building being associated with Youth Justice and being used as a Contact Centre.

Base 51 staff's flexible and adaptable approach, for instance offering phone sessions, helped in part to navigate these concerns. However, for some care leavers, this may have proven to be a barrier too great:

'She [a care leaver] was adamant that she didn't want to go back to Base 51.' PA

Workarounds for this – in addition to offering phone or online sessions – could include renting out different spaces to offer counselling sessions, for instance in the Council buildings or other spaces that are more approachable to care leavers.

2.3 Considerations for future programmes

The interviews conducted with different stakeholders provided some things to consider for future programmes

that aim to address the mental health of care leavers. Some of these points came explicitly as suggestions from interviewees, whereas others came about after reflection on everything heard.

2.3.1 Suggestions around the packs

The PAs provided some useful feedback on modifications or additions that could be made to help improve the provision, including:

- Awarding those care leavers who completed the programme a certificate to acknowledge their commitment. The certificate could also be useful in applying for jobs or voluntary positions.⁸
- An amendment to the distribution process was also suggested. As the PAs only see their care leavers every eight weeks at most, having new wellbeing kits to distribute every four weeks means there will always be a time lag. Future planning of programmes should take this into account and work with the PAs to identify when is best for them to distribute packs.
- There were varying suggestions related to the packs (both the Wellbeing Kits and the Digital Packs) themselves. One PA felt that using more eye-catching images might help to engage care leavers at the beginning; however, another PA reflected that their young person found the content too simplistic. Overall, the packs appeared to be pitched appropriately. In a future programme, having a consultation workshop with care leavers prior

8. This was fed back to the Project team, who developed a certificate for participants.



to developing the packs might be useful in gathering ideas.

- The evaluation highlighted that the chosen package of support offered is clearly an individual decision that needs to be made after assessing the young person's needs. It might be beneficial for the PAs to conduct a needs assessment at the beginning to identify what their young people would get most value from.

2.3.2 Suggestions around increasing engagement

The interviews highlighted the challenges around engagement. Some suggestions for increasing levels of engagement for a programme such as *Feeling our Way* include:

- Working on changing the broader perception of counselling to something positive. This is more of a long-term change that can help to shift attitudes and barriers to engaging in therapeutic support. One PA suggested thinking about creative ways to do this, for instance having pop-up tents across the community to promote the benefits of counselling.
- Considering different spaces, without connections to negatively perceived services, to offer therapeutic support.
- Incorporating the cost of travel for young people to attend their counselling sessions, as this was mentioned as a barrier for one young person who couldn't afford the bus fare from her place to Base 51. Reimbursing was discussed and offered, however it was not seen as a viable option by young people.

- Building in greater time and increasing capacity for relationship building. The youth worker at Base 51 only had limited hours assigned to this programme, however their role was integral to get the young people to engage with counselling.
- If feasible, holding coproduction or consultation opportunities with PAs and/or young people to understand what they want from the packs would be a beneficial first step, prior to their development. For the young people, this could take the form of a survey or a one-to-one as they may not want to inform services within a group setting.

2.3.3 Suggestions for future evaluations

- Providing an option of paper-based surveys that PAs give to their young people, along with the incentive voucher.
 - This was not feasible with *Feeling our Way* which took place during the Covid-19 pandemic, when face-to-face contact between PAs and their young people was limited. Instead, online questionnaires were administered at the beginning and end of the programme.

Whilst PAs were allowed to provide support to their young people to complete these, we didn't want them influencing the results and created a guidance sheet to help manage this. However, bearing in mind the challenges in engaging care leavers to participate in research (even with incentives), utilising PAs would be encouraged.



- In the online questionnaires, participants had to get to the end before clicking a link which would take them to a separate questionnaire where they could fill in their details to collect their shopping voucher. This was to prevent their contact details being linked with their questionnaire data. The problem was that many care leavers missed this step and we had to reach out to PAs to let us know if their care leavers hadn't received vouchers despite completing the questionnaire. In the post-questionnaire, an attempt to address this was made by making it clearer that click on a link at the end had to be clicked, but the same problem remained. Whilst it was ensured that vouchers were sent to everyone owed one, in the future, providing the PAs with the vouchers would make this process simpler. This would of course mean that the PAs would know which of their care leavers had participated, so the evaluation team would have to develop guidance on this to emphasise that participation in the evaluation is voluntary.
- Using fewer quantitative measures where possible in the questionnaires.
 - Two standardised measures were used in the online questionnaires to capture changes in participants' feelings of social connectedness and coping strategies. Great effort was made to find suitable scales for the care leavers; nevertheless, the low response rate (for the post-questionnaire) prompts a wider discussion around what kind of measures should be used with care leavers. If the quality of data collected is low, there may be an argument that validated measures may not be suitable for this population, and other more interactive or creative, ways of capturing impact may be more appropriate. Having a coproduction or consultation workshop with the PAs and/or the young people at the beginning of the project may help to ensure that the measures are tailored and appropriate for the population group.

Limitations



Limitations of the quantitative element

Only five respondents completed both pre- and post- evaluation questionnaires. This led to a small sample so no firm conclusions can be drawn from the data.

The questionnaire was considered carefully from the outset and PAs supported the evaluation team by reminding their care leavers to complete the questionnaire. In the future, having the PAs administer paper-based surveys to their young people in person may improve the response rate, leading to more quality data for us to use to better understand the impact of the programme on the young people.

Limitations of the qualitative element

Interviews were possible with multiple key stakeholders (young people, PAs, Base 51 staff), which provided a comprehensive range of insights into the impact of the project on the young people and the process. Given the limited quantitative data, however, a greater number of interviews with young people would have helped answer the first evaluation question around impact more conclusively.

It should also be noted that those young people who were happy to take part in an interview are likely those who were more engaged with the programme. This may be less of a concern in this evaluation given that, of the five young people that completed both questionnaires, one was more neutral in their feedback, and another was less positive. Understanding why people didn't engage or stopped engaging mid-way in greater depth would be of immense value; however, reaching out to non-engagers in a programme for more detailed feedback or interviews is incredibly challenging.

The interviews with PAs did allow the gathering of some of these insights in a more indirect fashion, so encouraging more regular feedback from PAs could be of value. Building in a feedback mechanism every three months for evaluators to speak with PAs as part of the monthly meetings or alternatively, provide their feedback in a survey could potentially allow for that free discussion.



Discussion



These findings suggest that *Feeling our Way* led to positive effects on participants, helping them to cope with their mental health, to understand their feelings better and to feel less alone in their experiences.

Participants reported that they looked forward to receiving their packs and sometimes reserved them for more challenging times as they knew they would help them feel better. The information in the packs was particularly appreciated – even though not all the information on mental health was ‘new’, it was still useful and the care leavers were able to apply this information to their daily lives.

For those who were provided a phone as part of their package of support, this was an invaluable asset that helped them to feel more connected with others during the pandemic, as well as allowing them to stay in regular contact with their PAs.

The therapeutic support offered by Base 51 was an asset to the programme, however challenges exist to engage participants to access support for multiple reasons, including general negative perceptions of counselling and not being able to commit to attend weekly sessions. It should be noted that Base 51 also offered the young people a ‘drop-in’ counselling service that did not require this level of commitment.

Much time and resource are required from the Youth Worker at Base 51 and the PA to encourage the young people to attend their sessions.

Care leavers are at an increased risk of experiencing mental health problems and social isolation relative to their non-care peers. Care leavers are not a homogenous group and have a diverse range of needs which can make it difficult for a mental health programme to be pitched appropriately for everyone. Coproduction workshops or consultations with PAs and young people could help to ensure that the programme is as valuable to care leavers as possible.

Whilst this was an interim project intended to help care leavers during the pandemic, this evaluation demonstrates that programmes like *Feeling our Way* have real potential to help care leavers develop the resources to manage their mental health and feel more connected with others.

A longer programme which builds in sufficient time and resources for engagement is required, particularly given the challenges identified regarding engaging care leavers in programmes. All future mental health programmes targeting care leavers should aim to address the digital exclusion that some care leavers experience.





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 info@mentalhealth.org.uk

 mentalhealth.org.uk

