



**LTCAS**

LONG-TERM CONDITIONS  
ALLIANCE SCOTLAND  
people not patients



# Self Management Fund – Special Report Mental Health

**May 2011**

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## **Overview and Background**

'Gaun Yersel' the Self Management Strategy for Scotland<sup>1</sup> recognises that people living with long term conditions, and their unpaid carers, should be involved in the design, development, implementation and evaluation of the services that are intended to support them.

This became a key criteria of the Self Management Fund, and the 81 successful projects all have the lived experience of people living with long term conditions, and their unpaid carers, at their heart.

The Self Management Fund has been available to voluntary organisations and community groups throughout Scotland since March 2009. The Self Management Fund has been set-up and administered by Long Term Conditions Alliance Scotland (LTCAS).

The Self Management Fund has been made possible through funding from the Scottish Government. £4 million was available over two financial years - £2 million across 2009/10 and £2 million across 2010/2011.

The aim has been to improve work to expand the capacity of people living with long term conditions to learn more about the management of their conditions and to become active partners in their own care.

### **Mental Health**

The Self Management Fund supports projects and organisations across Scotland which encourage people living with long term conditions, and their unpaid carers, to work in partnership with health and social care professionals.

This Special Report looks at how the Self Management Fund has encouraged approaches to self management for a wide variety of mental health conditions.

26% of the projects look specifically at mental health conditions, and many other generic projects involve people living with mental health conditions.

This report is the sixth of a series of Special Reports which highlight some of the key themes of the Interim Evaluation Report launched in October 2010<sup>2</sup>. A full evaluation report will be produced at the end of the current funding period, June 2011.

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<sup>1</sup> [http://www.ltcas.org.uk/self\\_man\\_gaun.html](http://www.ltcas.org.uk/self_man_gaun.html)

<sup>2</sup> [http://www.ltcas.org.uk/self\\_basics.html](http://www.ltcas.org.uk/self_basics.html)

## **Mental Health Conditions in context**

### **What is a Mental Health Condition?**

Mental health problems are the most prevalent type of long term condition, and often go hand-in-hand with other conditions.

- One in four adults will experience a mental health problem at some point in their lives.
- Depression is the most common mental health problem affecting an estimated 6% of men and 10% of women in any given year.
- 30% of people with limiting long term conditions indicate potential mental ill health compared with only 9% of other adults.
- Depression and suicide are four to five times more common among people with epilepsy.
- People with diabetes are three times more likely to experience depression and this is likely to be severe and recurring.
- Up to a third of people develop depression following a heart attack.
- Among people with diabetes who have depression less than a third are diagnosed or given treatment.
- National waiting times are not available for psychological therapies, but Audit Scotland has reported that "it is widely recognised that waiting times for psychological therapies are too long".

People with long term conditions are at far higher risk of mental health problems, do not routinely have their mental health needs addressed and do not receive adequate emotional or psychological support. People with mental health problems are at higher risk of developing other long term conditions and often face unacceptably long waits for psychological services.

### **Principles of Self Management**

The Principles of Self Management (see appendix 1) were developed by LTCAS to encapsulate the core messages of the Self Management Strategy. The Principles provide a useful tool for underpinning any work being done to support self management.

The Principles reflect the approach people need from services and practitioners to enable them to take on the responsibility of self management.

The Principles also form the basic criteria of the Self Management Fund for Scotland, and as such underpin each project.

### **Self Management Fund**

The inclusion of peoples' experience in the design, development, implementation and evaluation of the 81 Self Management Fund projects has been a key to their success. Working in a person-centred way to promote self management, all the projects have used the experiences of people to inspire and encourage others to become involved.

Mental Health conditions have been reflected in the projects in a variety of ways;

- by involving peers in delivery and support
- by encouraging people to share information
- by encouraging people to develop new skills
- by working in partnership with other services

The 81 funded projects, and other examples of self management support across partnerships within the voluntary, health and social care sectors, have illustrated the value of maximising experience when designing and delivering services.

### **Scottish Recovery Network**

The Scottish Recovery Network (SRN) was formally launched in 2004 as an initiative designed to raise awareness of recovery from mental health problems. (see appendix 2)

Since then interest in the concept of recovery has increased greatly in Scotland. SRN now understands more about what recovery means to people and are thinking carefully about the implications for the way they support people with mental health issues.

SRN are a network in two senses. Firstly it was developed out of a loose affiliation of individuals and organisations with a common interest in recovery, and secondly, it has been designed to share information and ideas as quickly as possible.

SRN believe that people who experience mental health problems and those around them should expect recovery. The values and principles which underpin the recovery experience should form the basis of how, as a society, we approach mental health issues.

SRN's role in achieving this vision is to act as a catalyst for change by sharing ideas and practice to promote recovery from long-term mental health problems, improving outcomes at all levels.

Their aims are:

1. To raise awareness of recovery from mental health problems, in particular longer term problems.
2. To learn more about the recovery experience, and the factors which help and hinder it, and to share that learning.
3. Share ideas and encourage and support action nationally and locally for the promotion of recovery.

SRN have supported the development of the Wellness Recovery Action Planning (WRAP) tool in Scotland by training and supporting over 50 WRAP facilitators. WRAP is a 'self-management' tool used in many countries around the world to help people take more control over their own wellbeing and recovery. It emphasises that people are the experts in their own experience and is based on the premise there are no limits to recovery. (see appendix 3)

## **NHS Health Scotland**

Mental health is a national public health priority for Scotland. Until recently, there had been no assessment of the overall mental health of Scotland's population and its context, without which it is difficult to determine whether mental health is improving in Scotland or to track progress.

NHS Health Scotland's mental health improvement work has been developed to raise the profile of mental health improvement and support its application in Scotland. Much of the work also supports the implementation of the Scottish Government's health improvement policy in relation to mental health.

NHS Health Scotland is undertaking a programme of work to establish a core set of national, sustainable mental health indicators for Scotland. The indicators cover both mental wellbeing and mental health problems, and will provide a way of monitoring the state of mental health in Scotland at a national level.

For further information, including information on commissioned research and the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS), a newly developed scale to assess positive mental health, see appendix 4 and visit the Health Scotland [website](#).

## Learning from the Self Management Fund

### Peer Support

**'Within minutes of realising that the people in the room were in the same position as I was the nerves lessened'**  
– IntoWork West Lothian course participant

The value of peer led support, education and awareness raising can be seen directly and indirectly in the majority of projects. Although 14% of current projects are involved in formal direct peer support to encourage self management through sharing experiences, many others are reporting on the benefits of peer support informally in their programmes – see **Pink Ladies, COMAS, Post Natal Depression Support Network, Lothian Centre for Inclusive Living, IntoWork West Lothian and Carr-Gomm** case studies.

Some further examples of are;

- **Scottish Development Centre for Mental Health (now Mental Health Foundation)** have undertaken an action research project which will inform and promote the development of peer support services for individuals with long term conditions
- **Dunoon Link Club** are formalising their existing mental health outreach service, peer support and one-to-one counselling support. Volunteers who run the programmes currently will be given formal training to ensure sustainability of the service
- **Health in Mind** has trained peer supporters to pilot a 1:1 peer support service for those living with long term mental health conditions
- **Tagsa Uibhist** have hired an outreach worker to facilitate self management information, support and advice to those living with mental health conditions in the western Isles

### Information

**'Before this support, I felt a huge sense of insecurity and mistrust in my own ability to make decisions rationally and look objectively at problems'** – Post Natal Depression Support Network participant



The value of sharing information to encourage others to become involved in self management, to raise awareness of conditions and approaches and to increase understanding of the impact of self management can be seen in a number of the projects – see **Pink Ladies and Post Natal Depression Support Network** case studies.

Some further examples are;

- **Mental Health Foundation** have developed a service user led research project that will explore barriers and enablers of effective self management with people who experience long term mental health conditions in Scotland
- **Castlemilk Stress Centre** have developed their existing self management programme to give participants the opportunity to train and deliver certain aspects of the new course
- **Fullerton Community Health House** are developing their 1:1 self management programme for those living with a dual diagnosis of depression and another long term condition. By teaching people to manage their depression more effectively, they will be better able to manage their other condition
- **Penumbra** have developed a programme to support those living with mental health conditions to access self directed support and regain control of the support they are given to self manage

### Developing skills

**‘This project has opened up possibilities for people – in employment or volunteering and in developing their skills and confidence. The group support each other to get through their anxieties’** – Kevin Fullerton, Community Development Worker

The value of capitalising on the personal, lived experience of people living with long term conditions, and their unpaid carers, as the starting point for developing new skills can be seen in many projects - see **IntoWork West Lothian and Carr-Gomm** case studies.

Some further examples are;

- **Open Secret** are running a complementary therapies self management programme in several areas of Scotland, aimed



at those living with Post Traumatic Stress, Anxiety and Depression as a result of childhood sexual abuse

- **Glasgow West Regeneration Agency** have explored the arts as a medium for the self management of long term mental health
- **Glasgow Association for Mental Health (GAMH)** are developing a range of complementary therapies to support people living with mental health problems
- **Mental Health Aberdeen** have set up an independent living skills programme for those making the transition from hospital or supported living to independent living

### Partnership working

**'I began to refer suitable clients of Midlothian substance misuse service and found that they had a remarkable impact on these clients lives'** – Community Psychiatric Nurse referring to the Pink Ladies

Many projects are working in partnership to develop, implement and evaluate their projects – see **Post Natal Depression Support Network, Lothian Centre for Inclusive Living, IntoWork West Lothian and Carr-Gomm** case studies.

Some further examples are;

- **Scottish Association for Mental Health (SAMH)** The organisation is running a nationwide project which will empower people to manage their mental health and wellbeing through participation in physical activity
- **What I Need (WIN) Project** have extended their successful programme of training for those living with mental health problems from South West Glasgow to city wide provision
- **Intrelate** are working in partnership with Penumbra and The Thistle Foundation, to develop and pilot an electronic person centred planning tool aimed at those with physical disabilities and mental health conditions

More details of all the improvement tools used by the funded projects, and the results they produce, will be available in the Final Evaluation Report for this allocation of the Self Management Fund after June 2011.

## Conclusions

The Self Management Fund for Scotland has enabled projects to incorporate the experience of people living with mental health conditions and those that care for them, throughout all aspects of their projects. The Fund is capturing the learning from these experiences, and has so far shown the value of;

- involving peers in delivery and support
- encouraging people to share information about their conditions
- encouraging people to develop new skills
- working in partnership

Projects supporting people living with mental health conditions are as varied and diverse as the range of projects supported by the fund in general. Projects are developing new ways to support people living with mental health conditions, and encouraging people to think differently about self management.

LTCAS will continue to work with partners, including the Scottish Recovery Network and NHS Health Scotland to promote and develop self management support for people living with mental health conditions.

**For further information about LTCAS - our work and our membership – the Self Management Projects and the continued development of the Self Management Fund for Scotland, please see our website [www.ltcas.org.uk](http://www.ltcas.org.uk)**

**For further information about the Scottish Recovery Network, please visit [www.scottishrecovery.net](http://www.scottishrecovery.net)**

# Case Studies



The following Case Studies illustrate the impact, emerging themes and learning points from the Self Management Fund in relation to mental health conditions.

- Pink Ladies
- COMAS
- Post Natal Depression Support Network
- Lothian Centre for Inclusive Living
- IntoWork West Lothian
- Carr-Gomm Scotland

The Case Studies also demonstrate the impact that LTCAS has had on shaping, expanding and sustaining these themes.

## Pink Ladies Scotland



Maria, Margaret and Sheila - Pink Ladies

Pink Ladies Scotland is a constituted Voluntary body, working presently in Midlothian with women experiencing stress, anxiety and depression.

Pink Ladies Scotland provide motivation workshops and group meetings to empower and enable women to take charge of their lives.

Pink Ladies Scotland – giving women a springboard for change.

Pink Ladies Scotland knew when they started that existing information and support available did not meet the needs of women like themselves. They recognised that women needed to be comfortable and have access to on-going support from others who had also experienced stress, anxiety and depression. Receiving £19280 from the Self Management Fund allowed Pink Ladies Scotland to deliver a series of ten week courses in Midlothian.

**'It's great to see people opening up and discussing things, I suffered a few years back from anxiety following the sudden death of my mother and I wish I had Pink Ladies to help me then' – course participant**

'When we saw the fund advertised we thought – that's us! Self Management is what we are about - it's what we've been doing for years. We wanted to use our personal experience to pass on tools and techniques to help women to manage better. We take a very person-centred approach, asking women what they themselves want to happen.' Sheila Peaston, co-founder of Pink Ladies Scotland.

**'Rather than "chew the fat" over the past and go over and over old problems, we spoke about our experiences**

**in a positive way and I found that I could laugh about half of it already’ – course participant**

Pink Ladies Scotland promoted their sessions by delivering information to health centres, giving presentations to Mental Health teams and through word of mouth locally. The sessions promote a sense of belonging, taking away the stigma often associated with mental health. Pink Ladies Scotland provide a space where it is alright to talk about it, and give women a choice for their future that does not necessarily involve pills and potions.

**‘Pink Ladies have truly impressed me with their genuineness and willingness to ‘walk that extra mile’ with me, on more than one occasion. Little by little my faith in myself and other people is being restored’ – course participant**

As a relatively small community based organisation, Pink Ladies Scotland have benefitted from a great deal of support from Long Term Conditions Alliance. ‘We’ve met lots of other groups and inspiring people through LTCAS networking events. It’s been great talking to others involved in self management and sharing their enthusiasm. LTCAS have always been extremely approachable as funders, and by encouraging us to speak at conferences and events we feel that we are really part it. Their enthusiasm and support has inspired us to keep going’ Maria Martin, co-founder Pink Ladies Scotland.

**‘I began to refer suitable clients of Midlothian substance misuse service and found that they had a remarkable impact on these clients lives’ – Community Psychiatric Nurse**

The work of Pink Ladies Scotland has only just begun – they are keen to build upon their success and expand their services across Edinburgh and eventually across Scotland. Future funding is required to enable them to develop their approach, introduce new skills, interests, tools and techniques and be available more for the women they support.

**‘Pink Ladies has helped me in so many ways to find the strength and confidence in me to rebuild my life I have learnt that it is ok to be myself and have actually begun to really like the person I am’ – course participant**

For more information please visit [www.pinkladiesscotland.com](http://www.pinkladiesscotland.com)



## COMAS



Comas is a community development organisation working to promote recovery and resilience amongst individuals, helping them to create community connections.

Volunteers with the Serenity Café, Comas

Comas began working with people recovering from addiction and learned from them that there was limited support for them to look at their whole life, beyond their addiction. Existing addiction treatment programmes, once completed, could only provide limited ongoing support. Comas knew that many people who encountered a problem after a treatment programme returned to their substance misuse as a way of coping because they lacked the tools to cope in other ways.

**'Recovery is life long, not something that ends when the treatment ends' – Ruth Campbell, Chief Officer, Comas**

Comas was not initially familiar with the term 'self management', but soon realised the links between this and the work they were doing on recovery. Comas was relieved that LTCAS saw addiction as a long term condition, as this allowed the opportunity to look at recovery holistically, rather than in isolation from the rest of life – many health services look at one small aspect of a condition, not the bigger picture. Comas applied to the Self Management Fund to support the development of their peer support initiative within their Serenity Café project in Edinburgh.

The Serenity Café is a co-produced project, people in recovery lead the project and Comas facilitates their learning and development. They have been able to offer peer support through life coaching,

developing a unique course called 'Recovery Coaching' with the help of the Self Management Grant. Recovery coaches are people in recovery, and their training as coaches is person-centred, based on learning from each other. The course has been adapted to respond to peoples individual learning styles and their stage of recovery.

The Recovery Coaching model is based on the learning from people in recovery that people want to find ways to occupy their time and think positively about the future, as well as learning to manage their addiction.

**'Life can look big and daunting to people – addictive patterns of behaviour gnaw away at the back of people's minds' – Ruth Campbell**

The Serenity Café has supported people on the Recovery Coaching course to learn about emotional intelligence and brain recovery, encouraging people to understand how the brain can build pathways to support positive new behaviours. This provides people with a context and an explanation for certain behaviours. Participants learn about themselves in a safe environment, as well as learning skills in coaching others. Being coached by a Recovery Coach helps people to clarify their goals and plan the steps that they can take towards their goals.

**'Many people regard recovery from addiction as an event rather than something that needs on-going self management – we were really pleased that LTCAS understood' – Ruth Campbell**

Comas and the Serenity Café are accessible to the community they support, it is free to attend and no referral is required. The benefits of the project are multiplying – Recovery Coaches are adding to the capacity of the community to help each other, and people coming forward for coaching are able to access support. This is often during the hours that other services are closed, because this support is now available from within the community.

Comas has found that the strongest promotional tool is people in recovery themselves, spreading the news about the Serenity Café widely and positively throughout the recovery community. Comas would like to develop their Recovery Coaching programme nationally with other local communities, training peer coaches and continuing to provide recovery courses

For more information please visit [www.comas.org.uk](http://www.comas.org.uk) and [www.serenitycafe.org.uk](http://www.serenitycafe.org.uk)



## Post Natal Depression Support Network



PND Support Network provide a 24 hour Virtual Support Network. PND support people to identify individual needs, explore and develop individual coping strategies/ self help tools, leading to self management of their post natal depression.

Karen Nicoll, Project Co-ordinator, Post Natal Depression Support Network

Before the PND Support Network was established, there was very little specific help that women could access. Services that were around were closing, partly as result of the geography of the area and the difficulties women faced in accessing public transport to get to these services. Aberdeenshire CVS knew that because of the size and rurality of the area they covered, it was important to enable women to help themselves without relying on services that they might not be able to access. Talking to women they realised that self management could be effective in supporting women to recognise trigger and crisis points, and also equipping women with the tools to manage these themselves.

**'I found the hardest time to cope was actually when I felt I was beginning to recover and all the normal forms of support were pulling back and gradually being withdrawn'** – PND Support Network participant

They focused on the main barriers that women themselves identified - which were isolation, location of services, time to attend and the associated costs – to provide flexible solutions. Women were able to access one-to-one time with a support worker, and

also to access an on-line resource and forum to share information and support at times that suited them.

The PND Support Network benefits women themselves, and also healthcare professionals and others who support women with post natal depression. The network have seen an increase in people's mental health and wellbeing resulting in increased attendance at appointments as confidence levels rise. At the same time, there has been a reduction in appointments overall, and the length of time that professionals have spent with women as they develop their own individual coping strategies.

**'In the longer term, by helping women to progress beyond individual crisis points, there is less chance that they will deteriorate to the point where more medical intervention is required'** – healthcare professional

The benefits filter into every aspect of the women's lives, including work and family. The Network encourages women to find the information and support that they need rather than feeling like decisions are being made for them. They support women to feel less isolated and to realise that what they are feeling is 'normal' for someone living with this condition. Realising that despite their geographical isolation they are not alone is crucial to support the management of their condition.

**'Before this support, I felt a huge sense of insecurity and mistrust in my own ability to make decisions rationally and look objectively at problems'** – PND Support Network participant

The work of the PND Support Network has led to an increase of general health and wellbeing of local residents, and an increase in social activity within communities. Women they support are now using more community groups and facilities locally, which is helping to reduce social isolation.

**'We made sure we were offering a service which enables rather than takes over, offering support to deal with problems and issues rather than "taking them away" for women'** – Karen Nicoll

The PND Support Network would like to expand into other geographical communities, as well as looking at other developments such as a volunteer led buddy system.

For more information please visit  
[www.signpostingpndsupport.org.uk](http://www.signpostingpndsupport.org.uk)

## Lothian Centre for Inclusive Living



Lothian Centre for Inclusive Living is a user-controlled organisation which supports disabled people to live independently. 'Your Call' is a free telephone counselling service led by disabled people themselves who work as volunteers, and are trained to a professional standard in counselling.

Pauline and Katrina, Your Call Counsellors

'Your Call' was developed in response to feedback from LCiL service users who felt that telephone counselling would increase the accessibility of counselling provision for disabled people and those living with long term conditions.

Difficulties encountered by disabled people who were looking for counselling included accessibility, expense, transport and a lack of understanding among non-disabled counsellors of the issues and challenges which disabled people meet on a day-to-day basis.

LCiL felt that a telephone counselling service would have many advantages in terms of accessibility. It would also allow the counsellors to work in a flexible way which would also support their own self management.

**'A telephone service means that you can access counselling even if you aren't well enough to get out. You don't have to exacerbate your symptoms unnecessarily' - LCiL Counsellor**

LCiL also identified a lack of joined up working around counselling for disabled people. Statutory services tended to medicalise a person's physical condition, but provide no support for associated

psychological and emotional issues. Your Call's aim was to link these for disabled people across the whole of Scotland.

The success of the Your Call pilot demonstrated the importance of peer counselling and the value of emotional and mental support for people with long term conditions. The Self Management Fund presented an opportunity to expand the service.

The experience of already professionally trained LCiL counsellors was integral to the design of the new national service. They have become project consultants advising on every aspect of the service from the technology used to the need for flexible working practices.

**'Your Call used the experience of those living with long term physical disabilities to combine peer support with emotional support in a package that was accessible and appropriate'** - Ian Fuller, Counselling Coordinator

LCiL believes that the success of the service is based upon the mutual understanding between counsellor and client of what it means to live as a person with long term conditions. The counsellors personal experience is strengthened by the counsellors holding professional qualifications.

**'A disabled counsellor is better able to understand your situation and what it is to be disabled and physically unwell. The support from the You Call counsellors has helped me to make positive changes in my life'** - Service user

The benefits that have arisen from the service are specific to each individual. However, initial evaluation found that 95% those who have engaged with Your Call have reported an increase in their sense of wellbeing.

**'Your Call has made me stronger. It has helped me deal with emotional issues and overcome my fears. It has boosted to my confidence'** – Service user

Looking to the future, the Your Call team are keen to work towards the provision of diploma level counselling training for disabled people and to investigating new approaches to service delivery using technology for those people who have difficulty in using the telephone.

For more information please visit <http://www.lothiancil.org.uk/>

## IntoWork West Lothian



# INTOWORK

Intowork West Lothian offers support to people with mental health issues, autistic spectrum disorders and acquired brain injuries. Using the Supported Employment model, the project is able to assist people significantly distanced from the labour market move into employment, or to offer support to individuals who become ill whilst in employment.

Anne Reid, Jim Campbell, Lorna Wood, IntoWork West Lothian

IntoWork West Lothian support people with complex needs to realise their potential, recover their quality lives and employment. IntoWork West Lothian had identified that 'wellbeing' was much more than an absence of symptoms, and more about people having the tools themselves to take part in their care. They applied to the Self Management Fund for their 'Getting Started' course which looks at self management techniques and employability related skills over eleven weeks.

**'Within minutes of realising that the people in the room were in the same position as I was the nerves lessened'**  
– course participant

The funding has allowed IntoWork West Lothian to address the overall needs of the person, by bringing a mental health specialist, an Occupational Therapist and previous participants as volunteers into the team. Together they researched tools and techniques that would support people to feel less isolated, less negative and to combat feelings of despair.

**'I now don't feel like an outcast, I learnt how to communicate in a group again'** – course participant



Throughout the project, participants have been supported to identify new skills, and to value transferable skills that they possess already. IntoWork West Lothian offers ongoing support to encourage people to learn coping strategies to overcome barriers to progression. These barriers range from continued education and money management to advocacy and job search skills.

**'I'm a lot more confident than before, I feel I am able to reach my goals and I know I am ready to start looking for work'** – course participant

IntoWork West Lothian have found that having an Occupational Therapist as part of the team gives participants an instant access to clinical interventions, as opposed to joining lengthy NHS waiting lists. Participants are supported to make decisions for themselves and to access other services which are integrated, flexible, proactive and responsive to their needs.

**'I've found goal setting and not being too ambitious most helpful, maybe previously it has been too stressful jobs that have brought on ill health'** – course participant

Participants have benefited from having a basic structure to their day or week, as well as being able to interact socially with a group of people in a similar situation. Sharing these experiences has encouraged participants to feel more confident, to raise their expectations, to feel that they 'are worth something' again and to understand themselves, and their conditions, better.

During the project, IntoWork West Lothian have seen an increase in demand. As a result of the links made by the Occupational Therapist, there has been greater 'buy-in' from the NHS. This strong, integrated partnership has given the course more credibility and ultimately more benefits to the people they support.

IntoWork West Lothian would like to build on the success of their project by developing their ideas and taking forward their learning to continue to support their 'harder to reach' group.

**'I now work 16 hours a week and I still have the added bonus of being able to call the team when I falter, when anxiety creeps in or I feel down'** – previous course participant

For more information please visit [www.intowork.org.uk](http://www.intowork.org.uk)

## Carr-Gomm Scotland



***Carr-Gomm Scotland***

Person-Centred Support, Supported Living and Community Care Services

Carr-Gomm Scotland is a person-centred organisation that supports people to lead their lives safely and to do the things they want to do: in day-to-day living, in planning for the future and in realising dreams. Carr-Gomm Scotland do this by providing support at home and in supported services.

Kevin Fullerton, Community Development Worker, Carr-Gomm Scotland

Carr-Gomm Scotland provide support for people to find self management strategies which suit them best, encouraging people to take control of their own lives. They received feedback through focus groups and forums that people wanted to learn more about food and cookery. Carr-Gomm applied to the Self Management Fund for £9710 to deliver their 'Healthy Kitchen' project to support people to increase their food knowledge and cookery skills in Glasgow.

**'I feel this has done a lot for my confidence, mixing with other people and getting out of the house' – project participant**

Carr-Gomm Scotland wanted the course to be as peer-led as possible. They identified someone that they supported to be the chef on this project – supporting his own self management and employability. The chef was able to use his own lived experience in a real job opportunity. Carr-Gomm Scotland knew that by showing people how to cook the types of food they wanted to eat, there would be a higher chance of them using the skills at home. So, the types of food that the chef supported people to learn to prepare were decided by the group themselves.

**'Before becoming involved in the Healthy Kitchen I just stayed in bed all day – I felt very self-conscious about**



**meeting people and talking to them – I have now joined other workshops and have things to do every day’ – project participant**

People involved in the project have reported that they have made positive changes to their diet, and that they have felt confident to cook at home for themselves, and for other people. Many of those involved have had issues with social anxiety. People involved in the project have developed a sense of camaraderie, which has in turn led to people choosing to participate in other activities together.

The Healthy Kitchen was promoted through the local CHCP’s in Glasgow and other mental health networks that Carr-Gomm Scotland are linked to. The project has offered people the opportunity to increase their cookery skills. During a regular slot each week, participants feedback to the group about what they have cooked at home. This builds on their team work, decision making and group discussions as part of the course. Carr-Gomm Scotland have been able to see the benefits for people re-acquainting themselves with social situations and building personal confidence.

**‘The Healthy Kitchen is important to me because it builds up my confidence and communication with others – this social anxiety has been a big part of my life’ – project participant**

The Healthy Kitchen has attracted interest from other parts of Glasgow and around the country. Carr-Gomm Scotland are looking at funding options to deliver their project in other locations. Carr-Gomm Scotland are looking to develop their learning from this project by investigating the possibility of creating a food based social enterprise. This project has helped them to understand how best to involve the people they support in future ventures.

**‘This project has opened up possibilities for people – in employment or volunteering and in developing their skills and confidence. The group support each other to get through their anxieties’ – Kevin Fullerton, Community Development Worker**

For more information please visit  
[www.carr-gommScotland.org.uk](http://www.carr-gommScotland.org.uk)

## Principles of Self Management

July 2008

### Principles: Self Management Health, Social and Voluntary Sectors

"Be accountable to me and value my experience"

Evaluation systems should be ongoing and shaped by my experience. They should be non judgemental and focus on more than medical or financial outcomes.



"I am the leading partner in management of my health"

I am involved in my own care. I, those who care for me and organisations that represent me, shape new approaches to my care.

"I am a whole person and this is for my whole life"

My needs are met along my life journey with support aimed at improving my physical, emotional, social and spiritual wellbeing.

"Self management is not a replacement for services. Gaun yersel doesn't mean going it alone"

Self management does not mean managing my long term condition alone. It's about self determination in partnership with supporters.

"Clear information helps me make decisions that are right for me"

Professionals communicate with me effectively. They help ensure I have high quality, accessible information. They also support my right to make decisions.

### What is Recovery?

People can and do recover from even the most serious and long-term mental health problems. Recovery is a unique and individual experience and while there may be common themes and experiences, no two people's recovery journeys will be identical.

The Scottish Recovery Network (SRN) describe recovery as follows:

"Recovery is being able to live a meaningful and satisfying life, as defined by each person, in the presence or absence of symptoms. It is about having control over and input into your own life. Each individual's recovery, like his or her experience of the mental health problems or illness, is a unique and deeply personal process."

SRN developed this description based on experiences shared in their [Narrative Research Project](#).

In talking about recovery SRN acknowledge that it is not necessarily easy or straightforward. Many people describe the need to persevere and to find ways to maintain hope through the most trying times. SRN believe that by sharing experiences through their Network they can have a positive impact.

### Key Themes of Recovery

While recovery is a unique and individual experience it is possible to identify key themes and ideas in relation to the experience. The following list, while not exhaustive, highlights some of the most commonly identified elements.

#### Recovery as a journey

The recovery journey can have ups and downs and some people describe being in recovery rather than recovered to reflect this.

#### Hope, optimism and strengths

Hope is widely acknowledged as key to recovery. There can be no change without the belief that a better life is both possible and attainable. One way to realise a more hopeful approach is to find ways to focus on strengths.

#### More than recovery from illness

Some people describe being in recovery while still experiencing symptoms. For some it is about recovering a life and identity beyond the experience of mental ill health.

### **Control, choice and inclusion**

Taking control can be hard but many people describe how it important it is to find a way to take an active and responsible role in their own recovery. Control is supported by the inclusion of people with experience of mental health issues in their communities. It is reduced by the experience of exclusion, stigma and discrimination.

### **Self management**

One way to gain more control over recovery is to develop and use self management techniques. One such self management tool which SRN promotes is the [Wellness Recovery Action Plan](#).

### **Finding meaning and purpose**

We all find meaning in very different ways. Some people may find spirituality important, while others may find meaning through employment or the development of stronger interpersonal or community links. Many people describe the importance of feeling valued and of contributing as active members of a community.

### **Relationships**

Supportive relationships based on belief, trust and shared humanity help promote recovery.

(see [www.scottishrecovery.net](http://www.scottishrecovery.net) for more details and to access a range of information and resources, including over 100 personal recovery narratives)

### Wellness Recovery Action Planning (WRAP)

Wellness Recovery Action Planning (WRAP) is a 'self-management' tool used in many countries around the world. It was developed in the United States by [Mary Ellen Copeland](#) and others to offer a structured means by which people could maintain wellness and recovery while working to anticipate and reflect on crisis.

Creating a WRAP can be a challenging process and SRN believe the process is best supported by a trained facilitator in a group setting, where opportunities exist to share experiences and offer mutual support

The Scottish Recovery Network (SRN) believe that while WRAP and its underlying principles have value in a one-to-one setting, it is of greatest benefit when used within a group setting, where opportunities exist to share experiences and offer mutual support.

At the same time as training and supporting facilitators SRN have commissioned research to find out more about WRAP, self management and recovery.

WRAP is underpinned by a number of core principles:

- That recovery is possible ('hope')
- That individuals should take personal responsibility for their own lives and well being ('personal responsibility')
- That it is important to know yourself, to be self aware ('education')
- That it is important to believe in and advocate for oneself ('self advocacy')
- That the support of others is vital ('support').

People work within these principles to create their own WRAP. Each plan should include the following components:

- Wellness toolbox
- Daily maintenance plan
- Identification of triggers and associated action plan
- Identification of early warning signs and associated action plan
- Identification of signs that things are breaking down and associated action plan
- Crisis and Post Crisis planning

(see [www.scottishrecovery.net](http://www.scottishrecovery.net) and [www.mentalhealthrecovery.com](http://www.mentalhealthrecovery.com) for more details)

## Appendix 4

### The Warwick-Edinburgh Mental Well-being Scale (WEMWBS)

Below are some statements about feelings and thoughts.

Please tick the box that best describes your experience of each over the last 2 weeks

STATEMENTS	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	1	2	3	4	5
I've been feeling useful	1	2	3	4	5
I've been feeling relaxed	1	2	3	4	5
I've been feeling interested in other people	1	2	3	4	5
I've had energy to spare	1	2	3	4	5
I've been dealing with problems well	1	2	3	4	5
I've been thinking clearly	1	2	3	4	5
I've been feeling good about myself	1	2	3	4	5
I've been feeling close to other people	1	2	3	4	5
I've been feeling confident	1	2	3	4	5
I've been able to make up my own mind about things	1	2	3	4	5
I've been feeling loved	1	2	3	4	5
I've been interested in new things	1	2	3	4	5
I've been feeling cheerful	1	2	3	4	5

Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)  
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### Useful Links

Long Term Conditions Alliance Scotland

[www.ltcas.org.uk](http://www.ltcas.org.uk)

Gaun Yersel – the Self Management Strategy for Long Term Conditions in Scotland

[www.ltcas.org.uk/self\\_man\\_gaun.html](http://www.ltcas.org.uk/self_man_gaun.html)

Emotional Support Matter – emotional and psychological support needs of people with long term conditions

[http://www.ltcas.org.uk/policy\\_reports.html](http://www.ltcas.org.uk/policy_reports.html)

Scottish Recovery Network

[www.scottishrecovery.net](http://www.scottishrecovery.net)

Mental Health Recovery and WRAP

[www.mentalhealthrecovery.com](http://www.mentalhealthrecovery.com)

NHS Health Scotland

[www.healthscotland.com](http://www.healthscotland.com)

Long Term Conditions Action Plan

[http://www.sehd.scot.nhs.uk/mels/CEL2009\\_23.pdf](http://www.sehd.scot.nhs.uk/mels/CEL2009_23.pdf)

Long Term Conditions Community

[www.knowledge.scot.nhs.uk/ltc.aspx](http://www.knowledge.scot.nhs.uk/ltc.aspx)