

Mental Health and Emotional Wellbeing Community Support Pilot

Evaluation

The mayor with community members talking in a circle.

Key information

Publication type: General

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The programme

Informing a whole family approach to reducing violence, in 2021 the Violence Reduction Unit (VRU) undertook a wide-ranging consultation to understand the needs of parents and carers in London, identifying a gap in the provision of culturally competent, community-based, mental health support services for parents/carers in underserved communities.?

Seeking to address this gap, the VRU co-developed the?Community-Based Mental Health and Emotional Wellbeing Support Pilot, with input from parents/carers/responsible people (PCR), young people and voluntary and community sector (VCS) partners.

Delivered by Groundwork and Midaye, the pilot aimed to help parents/carers of young people aged 11 to 24 improve their ability to manage their child's wellbeing and challenging behaviours. Groundwork's Strengthening Families programme in Southwark offered peer support groups, skills building workshops and one-to-one support. Midaye's Hope Project in Kensington and Chelsea offered one-to-one, group and peer to peer support.

The pilot ran between December 2021 to March 2024.

Evaluation summary and methodology

Coram was commissioned in August 2022 to evaluate the pilot interventions. The evaluation took a mixed-methods approach to explore the process and impact of Groundwork's Strengthening Families and Midaye's Hope Project interventions.

The evaluation approach combined qualitative and quantitative data.

Qualitative data was collected via semi-structured interviews and focus groups. Fieldwork was conducted with Coram researchers, often alongside co-researchers who were previous beneficiaries of the services. Across the two pilots, researchers engaged:

- **Strengthening Families:** 19 parents/carers (15 interviews and 1 focus group) and 8 professionals.
- **Hope Project:** 39 parents/carers (7 interviews and 4 focus groups) and 5 staff members.

Quantitative data analysis of monitoring data from both pilot services, and outcome data from the Strengthening Families pilot, were analysed.

Key findings

- **Improved parent/carer emotional wellbeing and mental health** – including improved confidence and self-esteem, greater self-compassion, greater contentment, reduced stress and anxiety, a greater awareness of trauma and how to respond, reduced isolation and improved physical wellbeing (in the Midaye Hope project). 94 per cent of parents/carers reported that the strengthening families programme improved their mental health and wellbeing.
- **Improved awareness and understanding of mental health** – including awareness of mental health issues, and children's mental health needs.
- **Improved parent-child communication and relationships especially relating to mental health** – building upon parenting strategies so parents felt better-equipped to problem solve within the home. There was a 23 per cent increase in the number of parents reporting feelings of confidence in talking to their child about mental health and wellbeing after the intervention.
- **Improved child outcomes** – although not a focus of the evaluation, anecdotal evidence from parents and carers suggested improved child outcomes e.g., reductions in school detentions, increasing attendance at school.
- **Improved access and engagement with other services** – improved perceptions of statutory services, counteracting existing mistrust.

- **Development of peer-to-peer networks among parents.**

Emerging best practice

The report highlights benefits of a genuinely relationship and person-centred approach by highlighting several examples of how both services prioritised working with kindness and compassion for parents and carers.

- **A high level of cultural competence demonstrated practically** – strategies including selecting staff from similar backgrounds to the communities they served, and often with direct experience of some challenges parents were experiencing, were cited as key elements of the programmes' successes. These decisions allowed staff to act on their understanding of the community and their needs.
- **A community-led, empowering and holistic approach** – the Midaye programme championed a bottom-up approach, ensuring they stayed in tune with parent/carer's needs and tailoring the service accordingly.

Challenges and lessons learned

- Time-limited nature of the service meant that it was not always possible to support young people who required high levels of time investment for support e.g., those not attending school at all.
- For the Strengthening Families pilot, a number of learnings led to changes during the programme.
- Some challenges were identified in coordinating with schools to refer to the services, especially when schools were often the site where challenges occurred.
- A lack of alternative resources and services meant that some referrals were inappropriate.
- Two student workers brought on to help struggling families with holistic support e.g., housing, legal, financial.
- The initial programme, aimed exclusively at families with African and Caribbean heritage, was opened up to a wider demographic.
- The cohort structure of Strengthening Families' service delivery did not align with families differing and busy schedules. Several parents would join the session delivery halfway through the programme and continue halfway into the next.
- Timing of delivery proved challenging. Parent/carer feedback led to the original offer of 6 group session being extended to 10, with face-to-face and online formats. The number of one-to-one sessions was also increased from 6 weeks to 12 weeks. However, the frequency of session delivery was reduced from weekly to fortnightly to allow parents time to try strategies at home.

- For the Midaye Hope pilot, the programme identified a need to better support their staff.
- The pilot adopted staff wellbeing support sessions and reflective sessions with a psychiatrist.

[Read the evaluation](#)

[Best Practice Toolkit for Working with Marginalised and Minoritised Communities](#)

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