Making Recovery Real in Moray

A review with the Scottish Recovery Network

Cathy Sharp, Research for Real October 2018

Executive Summary

This report is based on a review of the Making Recovery Real (MRR) initiative in Moray centred on the experience of those most closely involved, including people with lived experience of mental ill health and recovery, and practitioners from a range of organisations. We hope the review will influence current and future policy, practice and attitudes in services and the wider community.

Making Recovery Real has been a 'practical experiment' with much learning worth sharing, by highlighting the principles of the approach and the perspectives of those most closely involved. The review highlights how they have worked, their impact so far and how they expect to sustain the approach in Moray. Beyond the mental health world, there are also lessons for those seeking to change ways of working in public services and to achieve true service integration across different sectors and organisational boundaries.

**Making Recovery Real summary of learning and Dundee Review documents**

Key points

Moray Wellbeing Hub has become a key strategic partner in Making Recovery Real and sharing the stories of the Peer Champions has played an inspiring, enabling and ultimately, indispensable part. These stories have deepened understanding that there is no single model of, or pathway to, 'recovery' and sharing them has helped to create a genuine change in power dynamics - where people with lived experience have the right to be at the table and at the centre of decision-making.

- Story sharing has helped to create a new depth of understanding of recovery and helped to create a community of peers and practitioners. Discovering shared passions and values to 'make recovery real' is a positive and practical starting point for collaborative development.

- The accounts of 'lived experience' shared in MRR and in this review show how it is possible to help others to understand what recovery, wellness and resilience might mean to different people.

- Stories show that people with lived experience value meaningful connection with other people, having some degree of choice and of control over their circumstances, being able to proactively seek support rather than having to be referred, and speaking to people who also have lived experience, and have 'walked in their shoes'. Hearing this has helped to overturn expectations amongst professionals that they would be asked for things that would be 'unrealistic' to provide.

- The stories have generated empathy, changed the way that people think and encouraged action. They help to create a more authentic trust amongst all of those involved, build openness and positive relationships. Awareness of language and how it can be an enabler, or a barrier, is also a significant part of the more relational and dialogical approach.

The deliberate design of an informal and nurturing environment, including attention to venues and how meetings and community events are run, helps to create conditions for dialogue and a greater sense of equality in the room, that enables everyone to participate more fully and to genuinely hear each other.

- The conversations have not always been comfortable but have been important and necessary. People have been challenged in their thinking, without invoking defensiveness, and encouraged to adopt a greater sense of inquiry. There is a greater sense of possibilities and a focus on collective accountability.

- As relationships have developed, there is better understanding of the roles that different parties have and the demands or pressures that formal roles within the health and social care system may place upon people at different times.

- A focus on strengths and assets underlines that each individual and partner organisation has a part to play; that no one organisation can have all the answers and in fact, being both peer-led and diverse has provided more 'levers' and resources through which to initiate change.

The role of SRN

The involvement of SRN has been highly valued. They brought structure, focus and coordination to channel the work that was being done locally and skills and experience in hosting, facilitating and modelling a different approach to engagement. Their style of working, with persistence, patience and good humour, created a well-paced momentum that added to existing local activities and energy. Because of what has been achieved and the creation of an 'effective alliance', there is broad agreement and confidence that the work will continue without the on-going involvement of SRN.
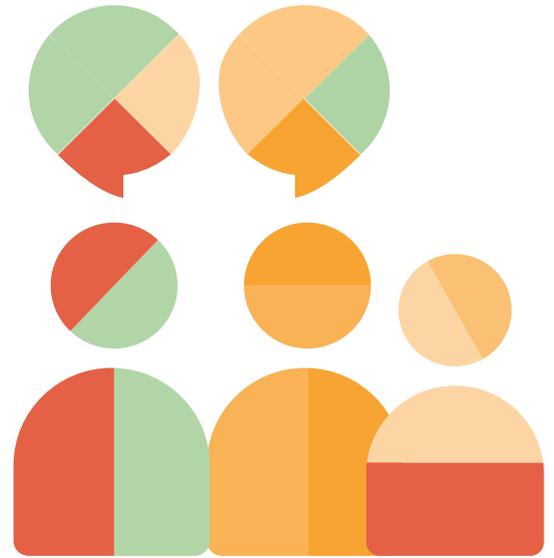
How is this influencing the wider system?

Change is happening at all levels: for individuals; amongst wider teams, colleagues, and peers; within organisations and in the wider environment.

- Shifts in individual thinking, a developing sense of agency, renewed engagement and pleasure in work, impacts on professional practice for individuals and wider teams, new understandings of recovery, changes in mindsets that support people in recovery and enable them to offer support to others, and a sense of belonging to a recovery community with shared values, are all important successes in their own right and foundations on which wider change can be built.

- There is more practical knowledge within the system as people have got to know individuals and organisations and understand better what they do and the agendas and parameters under which different organisations operate. There are new organisations and services that have not operated in the locality before and a feeling that organisations are listening and changing, with more 'gentle humour and lightness' and some valuable new understandings of lived experience and recovery.

- There is pride in the significant contribution that MRR has made to the Strategic Plan, embracing the principles of making recovery real.

- There is also pride in witnessing the difference that has been made in Moray and seeing the changes amongst people and organisations, enabling conversations about mental health to become more mainstream and every day. There are concrete and practical changes in service provision which enable greater visibility, more self-referral and ways to self-manage mental health.

- There are more Wellbeing Champions across Moray, greater involvement in events and activities and 'cascadiness' – the critical mass, capacity and energy that creates a positive environment and spills out beyond Making Recovery Real.

Looking to the future - so, what now?

A lot has changed and there is awareness of what still needs to change and eager readiness for what comes next. There is confidence that the concept of recovery is now firmly embedded and a desire to extend the influence and ambition of the work. There are specific ideas for initiatives and further developments in peer support, early intervention, mental health awareness and support and scope for greater involvement of people with lived experience in the co-design of services, joint working and scaling-up successful small-scale initiatives.

There is an understanding of the need to continue to nurture and support positive relationships across boundaries between people and professionals and that the work is evolving, dynamic and potentially becoming more diverse. At the same time, there is a desire not to 'overbrand' Making Recovery Real, but to see it as a form of intervening, 'of getting involved' that continues, rather than a specific intervention that ends. There is also a recognition that people still need high-level communication skills and support to navigate the complexities of multiple relationships and roles.

Local partners are aware of the challenges, for example, the shifts in the organisational and commissioning environment, and those of embedding culture change across the wider health and social care system.
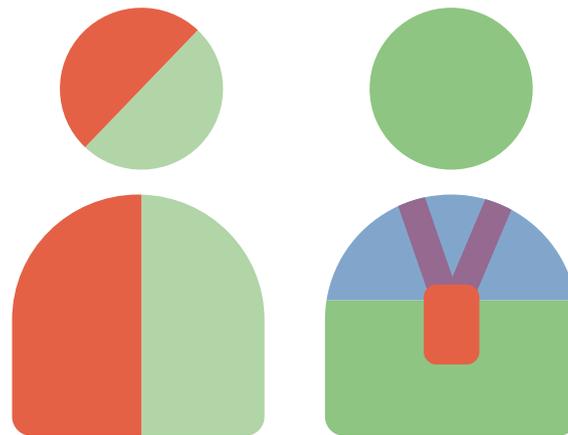
Acknowledgments and thanks

I would like to express my gratitude to all those who have taken part in this review and who have been so open about their personal and professional experience. I hope you will recognise your contribution in the report and that you are encouraged to continue with your important work.

Particular thanks are due to Heidi Tweedie, of Moray Wellbeing Hub and to Louise Christie and Robert Stevenson at SRN who have helped to set up and facilitate the review process. I am, of course, responsible for any errors, misinterpretations or omissions.

1 Introduction

This report is based on a review of the Making Recovery Real (MRR) initiative in Moray. The review is based on the experience of those most closely involved in Making Recovery Real, including people with lived experience of recovery and practitioners from a range of organisations. We hope the review will influence current and future policy, practice and attitudes in services and the wider community.

The Scottish Recovery Network (SRN) have described Making Recovery Real as a 'practical experiment'. The focus of this review is to learn from that 'experiment' in ways that do not expect simple duplication elsewhere, but which highlight the principles of the approach and the perspectives of those most closely involved in relation to both how they have worked and how they expect to sustain the approach in Moray. There is learning for those most closely involved in Moray and for SRN as a national organisation. There are also lessons that go beyond the mental health world for those seeking to change ways of working; to draw together people with lived experience and those with professional expertise and to achieve true service integration across different sectors and organisational boundaries.

This is a companion report to a similar review of MRR in Dundee and there is an overview document that summarises the learning from both initiatives.

The review draws on group discussions and individual interviews conducted with those most closely involved. This includes discussions at a joint event with the Dundee MRR held in Aberdeen in November 2017, two events in March and May 2018 in Moray, small group interviews with four peer champions from Moray Wellbeing Hub in May 2018 and seven individual interviews with people working in the third sector, the NHS and the health and social care partnership in July 2018.

Background and key milestones

The Moray Health and Social Care Partnership submitted the initial expression of interest in becoming part of the SRN Making Recovery Real initiative in 2015, with the aspirations to achieve greater adoption of recovery in policy and practice; increase knowledge and understanding of recovery and empowerment for people to lead their own recovery. Since the formal launch in June 2015, the partners and participants have been involved in a series of Conversation Cafés and other events that have shaped the specific objectives and priorities. There have also been important parallel service developments to support a greater focus on recovery, enabled and supported in different ways by Making Recovery Real.

Significant milestones over the timescale of MRR include the establishment of Moray Wellbeing Hub, a peer-led social enterprise in April 2016 and the process of recruiting 'Champions'; the commissioning of the Penumbra Peer Support Service in June 2016; the Making Recovery Real Roadshow, a series of 13 events in more remote rural communities across Moray during one week in November 2016; the commissioning of the Moray Mental Health and Wellness Centre, a new peer-led service run by Penumbra from shop-front premises in Elgin in early 2017; and the establishment of a team of Mental Health Link Workers in GP practices across Moray in April 2017.

Conversation Cafés, the Roadshow and other face to face meetings and events have been important opportunities for engagement, through sharing both information and stories of recovery, and to discuss how to continue to support people in Moray to achieve the best possible mental health. The Minister for Mental Health in the Scottish Government, Maureen Watt MSP, visited the Making Recovery Real in Moray project in November 2017 and took part in a Conversation Café. The formal MRR initiative ended in March 2018 with a review event.
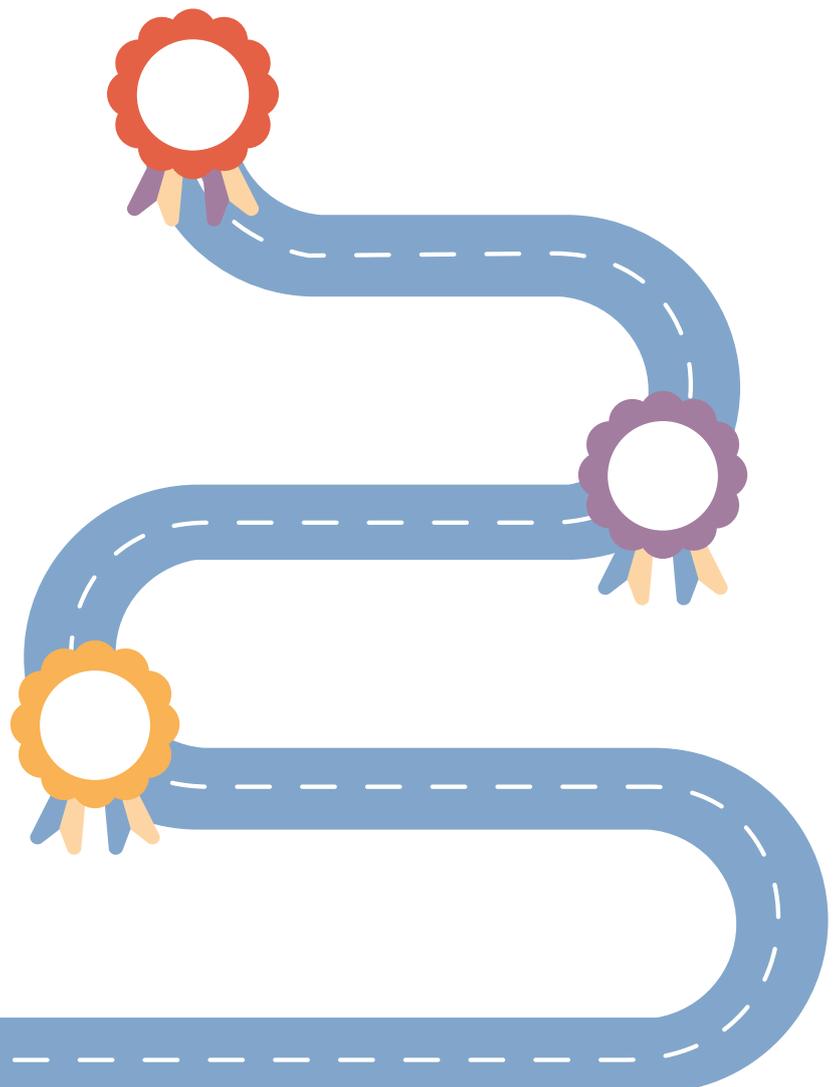
2 Start with the stories from Peer Champions

Sharing stories has been an essential part of Making Recovery Real, not only those of the Peer Champions but also of those involved managing or delivering services. Four Moray Wellbeing Hub Peer Champions have shared their experience of being part of Making Recovery Real.

This section includes selections from those stories, as a good starting point for this review.[1] Feedback on the process of telling the stories was positive, with people suggesting that it had encouraged them to speak about themselves and about how to tell the story so that everybody would be able to understand, but also share an 'abridged' version of the story.

Every reader will understand and interpret these stories in their own way. Undoubtedly, the courage of the story tellers shines through. Meeting new people, sharing their story, the importance of making a contribution and developing a sense of belonging are powerful themes within these accounts of 'lived experience'. They show how it is possible to turn experience of difficulties, embarrassment, despair, bewilderment and isolation into more positive feelings of confidence, self-belief, hope, inspiration and connectedness to others and to help others to understand what recovery, wellness and resilience might mean to different people.
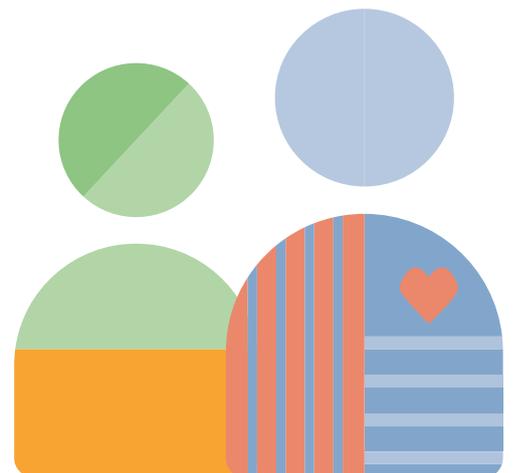
1 These stories were gathered using the emotional touchpoint approach.
See http://myhomelife.uws.ac.uk/scotland/resources/emotional-touchpoints/
SRN now has a bespoke set of touchpoints and edited emotional words.

What belonging makes possible

I picked the word belonging to tell my recovery story because of where we are today, in Elgin at the Making Recovery Real event run by the Scottish Recovery Network.

I feel that I do have a strong sense of belonging within this mental health recovery community here now. I know lots of people and that there's lots of overlaps and connections, people I've met from doing workshops; courses; projects; fellow champions of The Wellbeing Hub; health professionals; people who work in the 3rd sector. Basically, the connection between us is we are all interested, even passionate about striving for good Mental Health, personally and to support others. Maybe this interest comes from direct experience of mental health challenges or maybe not.

The difference now is that I have a strong sense of being accepted and having some sense of respect both personally and amongst my peer group. This is a big difference compared to where I was a while back.

I spent quite a lot of my time being bewildered and isolated. I also isolate myself, I felt judged and stigmatised. Back then I wasn't aware of the term 'self-stigma', but I was definitely suffering with the things I was telling myself about myself. This left me unable to trust others and I felt very alienated and unsupported – I didn't know how to access support.

I had a really great CPN (community psychiatric nurse) and she just planted that seed, by saying 'why don't you have a wee look at the SRN website?' I found out a little bit about them and was interested in seeing what they were doing. I was amazed to find out I could just go to their conferences. So, I went to conferences and that is when I first had that feeling of being in a room where nobody had labels or even badges. It was a conference where politicians were there, policy makers, people who worked in the voluntary sector, people like me and everyone in between. When anyone made contributions in the room, if you didn't already know them, there was no way of knowing where that person was speaking from, whether from personal experience or whether from professional experience.

I loved this free space where the only qualifying factors were to be human; authentic, to actively listen to others as they spoke and as you would be listened to if you felt drawn to contribute your opinion. This was a powerful experience, a taster of a kind of world I believed in, that everyone was valuable and equal.

Getting involved with the Moray Wellbeing Hub has been a hugely positive part on the road to my recovery. It has given me support, definitely, and opportunities without a doubt, a sense of meaning and identity and a tribe to be part of. All this while gently nourishing and stretching me in an environment of support and celebration of what each person could do, not focusing on what it was they couldn't do. In short, what was right with us, not what was wrong with us. Having this opportunity today to speak of what I've done in the last few years is a real gift. It has let me see that people, particularly the Moray Wellbeing Hub, believed in me and thought I was worth investing in even when I didn't believe it myself... amazing.
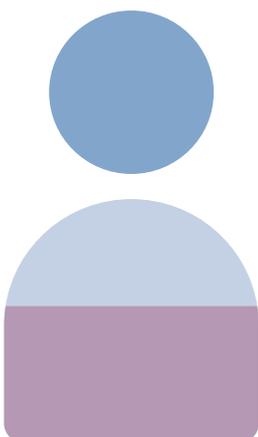
Since I have been facilitating courses, I see people who are in their own deep, dark place and even just struggling to be in the room with other people – and then our paths cross at another event, or in the street and the clouds have parted for them. This really gives me hope and inspiration and reminds me that recovery is possible and makes me grateful for the journey I have had – that I can connect and inspire others by showing that, if I can do it, so can they. This sense of belonging has supported me to try new things and has encouraged me to put myself in positions where it would have been really uncomfortable in the past – I mean prior to my mental ill-health even.

I'm now beginning to trust myself more, so there is a sense of this calmness in me. I'm noticing that when I do stand up to do something, I know that the world is not going to end. I know that I have got my own back. I know that if something doesn't feel right, or the language that other people are using, or anything that arises in me that needs addressed, that I'll be able to trust myself and voice my opinions in a way that is not putting someone else down, but trying to make the space for everyone in the room to feel more comfortable.

Sharing my story

Everyone saw me as someone who could cope. I was so embarrassed at having to admit that I wasn't the person she thought I was to the health visitor. I felt angry at myself for letting everybody know, because it opened a can of worms and I couldn't put them all back in. It all came out and I felt judged – I was judged by other people, not family, but others who didn't know my situation.

After my therapy and everything I've gone through and I'm going through, I feel like I'm a braver person. Joining the Hub, going to see [name], coming here has taken a lot of guts to do. Although I might seem smiley and happy and everything else, that can be a false impression. I'm hopeful for my future.

I was embarrassed at sharing my story… today when I share my story I feel hopeful and brave.

Contributing

I've been accepted into the Hub and the sensory services where people understand what I've been going through and what I am going through, and fully understand that my recovery… is going to take a while. I feel accepted because people know what kind of journey I'm going through. I feel totally understood within the Hub. Because of my contributing… I'm feeling better within myself because I'm giving back to other people who are probably going through the same as me, or even if it is not the same as me, it's similar, and I am able to empathise with them.
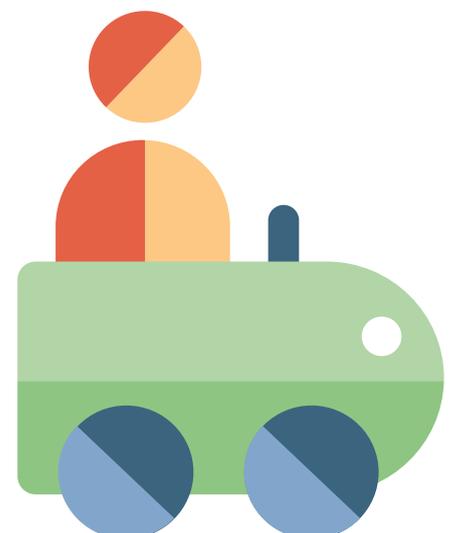
Meeting new people

I had an idea to set up a peer support group. I wanted help to set it up, but I didn't want to host it. But [they] both said to me… 'you're doubting yourself, but you can do this… you could host the support group'… kind of 'you don't know if you don't try!' They were both very confident in my ability to facilitate the group. Most importantly, unlike some other people that I had spoken to, they kind of respected my enthusiasm.

Even though I didn't see it at the time, it takes a lot of courage to step out of your comfort zone and I think I would say, there is an element of necessity. Was it brave? Maybe. Someone that I have great respect for said, in essence; 'courage and confidence aren't the same, you only pick up confidence after doing the same thing over and over again'. Courage is different, it is to be brave and push yourself forwards, sometimes into the unknown – sometimes, as it was with me, out of necessity rather than choice.

It's often quite hard on mental stamina to be so brave in such unfamiliar territories, yet I had the guidance …[they] would say 'you can do this' – who still offer support with the support group. I didn't quite believe in myself, but I was empowered to go that extra mile.

A note of thanks

The Moray Wellbeing Hub has played a pivotal role in Making Recovery Real and enabling the contribution of the Peer Champions:

"I am hugely inspired by the Well-being Hub, personally and professionally, and the work that they take forward… The hours and dedication are unbelievable, but what's being reaped as a result of that, is something really pretty wonderful as well."

3 Understanding the process – what has worked well?

Understanding recovery through stories

One of the strengths of the process has been the active engagement of the Moray Wellbeing Hub Peer Champions. They have talked about their lived experience of mental ill health and articulated recovery and what that means to them through sharing stories in different kinds of meetings and events. The involvement of the Peer Champions has never been about 'making up the numbers' but is an absolutely indispensable part of the process.

Story sharing is an inspiring and enabling practice which has helped to develop a new level of understanding and impact, as they have been heard by a range of different people:

"… It was definitely really interesting and exciting to hear thoughts and feelings direct from people – there is something very powerful about seeing the whites of somebody's eyes as they are telling you their experience – compared to that information being collated in a different way."

The stories have helped to create a new depth of understanding of recovery, amongst a community of peers and practitioners, some of whom by their own account, might previously have thought of themselves as recovery-focused:

"I always thought I was very recovery driven. I tried my best to make my services at the time recovery-focused, but I realised they were not as recovery focused as they could be."

"At events… everyone walks out a little bit changed, and a little bit different… it impacts on every interaction they have going forward."

When people have spoken of their experience of mental ill-health and recovery, it has not been disputed or 'batted back' as not being typical or as 'anecdotal'. Hearing directly in this way has overturned expectations amongst professionals that people might ask for things that would not be possible:

"What really struck me as well was that when people were talking about what was important to them it wasn't completely left-field ideas, it was things like, meaningful connection with other people, having some degree of choice, having a degree of control over our circumstance, being able to proactively seek support as opposed to having to be referred, and speaking to people who have lived experience, and had walked in their shoes. There wasn't loads of really unrealistic requests."

The stories have generated empathy, changed the way that people think and encouraged action. By sharing their experience in this way, they have helped to develop a more authentic trust amongst all of those involved. Some people attending in a professional role have been able to be more open about their own mental health and this has also helped to develop this level of trust, breakdown any sense of 'us and them' and create positive relationships.

Creating space for inquiry and learning together

This level of trust has been made possible by the attention to the process of working together, that has created a good environment for learning together:

"Our meetings used to be so formal. We used to be escorted into the room, it felt like you were grilled, you had to 'present' – it was traumatising. Now we meet at TSI Moray round a table, with biscuits and some people might have their lunch, it's informal. The entire power dynamic has been shaken by MRR."

The deliberate design of an informal and nurturing environment, including considering where people meet and how the meetings themselves are run, has been an explicit, intentional approach that has allowed different kinds of meetings to take place. There has been attention to making sure that meetings and events are accessible and welcoming, with significant impact.

Both peer champions and those attending in a professional role talk about a greater sense of equality in the room, 'the only qualifying factors were to be human', which enabled everyone to participate more fully and to genuinely hear each other:

"Events were always pretty accessible, there are tables with loads of colouring stuff, you can doodle, you can talk, you can write, you can do none of that! You can just be part of it, there is no pressure to do anything. It is informal, but it is a very thought-out approach, it might look great fun but actually you get a significant amount out of that, when people feel that comfortable."

"You were there as yourself, not as your role and function… That felt different, it felt that I was able to contribute more freely, I felt better able to connect with people that were there, breaking some of those barriers or myths and misconceptions."

It helped to challenge perceptions and bring out and value the voices of people with lived experience. This was not always comfortable, but felt to be important and necessary:

"Part of this is about making people feel safe and comfortable, but some of it is about being uncomfortable too… We were having difficult conversations, but that was so much better than having no conversations at all, or when we weren't even let in the room."

"It's enabling things that are notoriously tricky things to do, that we all say we want, but actually, how often are we able to achieve it very well?"

The safety of the environment enabled people to choose how they wanted to participate at any particular time; they may choose to 'just be', to listen or to talk. As people have developed shared understandings of what recovery might mean for different people, they may well have been challenged in their thinking, but there is not a sense of defensiveness.

Rather than people advocating for their own positions there is a greater sense of inquiry; relationships have developed, and people have begun to understand the roles that different parties play and the demands or pressures that formal roles within the health and social care system may place upon people at different times:

"We want people to take their 'hats' off but at the same time, we want them to use their role/hat as a lever for change in the system. They have to balance hat/human."

This has helped people discover what they have in common, to be honest with each other and work through differences and tensions, recognising whilst there was shared agenda, there were also 'bits that were diverse' where different parties each had a slightly different agenda. The involvement of SRN helped the MRR group to maintain their focus on their shared purpose, without which 'we would tend to go off at tangents'.

This informal and welcoming ethos of engagement has extended to the way that wider community events have been run to create dialogue:

"Events are about dialogue it's about two-way communication, it wasn't 'we're going to give you a PowerPoint presentation'. It wasn't providing you with information – it was all interactive. When you're coming to that quite new and thinking – 'what do I actually achieve by drawing on the table?' The simple fact of doing that can spark a conversation and go a different way and think out of the box a little bit."

"I went to a roadshow in Fochabers, and only two people turned up, so we went to the café and had a cup of tea and had a conversation about what does good mental health look like? Those two people had never been to anything before and felt they wouldn't have gone to something big. It was just a cup of tea… in a café – nobody paid any heed… they found that really empowering. They wanted to have a support group in Fochabers, but felt it was too small a community and that they'd need to meet somewhere where no one could see them. But after that, they realised that it was possible. You could do it."

Working with a mix of people and organisations with a shared purpose

This attention to building relationships across the system helps to develop understanding of, and respect for, the part that each person or organisation plays. Discovering shared passions and values to 'make recovery real' is a different starting point for development:

"[MRR] has been a brilliant opportunity to change relationships, as systems are undergoing massive change. The values that come through it are really helpful to help people from different backgrounds and disciplines come together and develop shared understandings of things."

The approach has helped to create a climate where there is less 'us and them'. Differences are not erased, but an understanding of them allows a 'call out to people's strengths and focus' and is enabling in terms of what might be possible:

"You have to first of all have conversations and they're not always positive… the way to work through the tensions and set aside as far as you can some of the political context or the financial restraints, is to go through the conversation and unpick it, and have the joined up, honest examination of it. If you are willing and dedicated to do that bit of it, you can't come out at the other end without having a relationship with the person.

Then because you're having an established relationship you are more open to them, thinking a little differently, you're more likely to take risks, say 'let's try this or let's do that'."

This focus on strengths and assets underlines that each individual and partner organisation has a part to play; no one organisation can have all the answers and in fact, being both peer-led and diverse has provided more 'levers' through which to initiate change. This has created a sense of opening-up possibilities, however small:

"I have a lot more faith in what is possible. It is sometimes easy to get caught up in feeling a bit hopeless, but it's really connected me with so many different people – that it's also given me a real insight into the power of the collective too – what people can do together, [particularly people] that are in different positions, bringing that expertise, whether it's from lived experience or your professional experience, it's all coming together."

"It's instilled in people a sense that actually the small things work. It's not about having massive big projects. It's more doable than you think for an individual to get involved."

This has also created a sense of collective accountability:

"The MRR forum elevated the opinion of the people that were around the table… [any organisation] could not just crack on and do its own thing because there will be no integrity around that, we couldn't sit round the table and say that we are working collaboratively and go off and do our own thing."

This has been described as 'true collaboration' which involves being prepared to both do that little bit more, and to relinquish that little bit more as well, perhaps by letting go of a cherished idea that it should be your organisation or you that is doing something, to enable others and for the 'greater good of the well-being of the people of Moray to come into play'.

Making good use of external help

The involvement of SRN has been highly valued. They brought structure and focus to channel the work that was being done locally and used it as a resource. Significantly, they deliberately didn't position themselves as experts in recovery drawn from their status and knowledge as a national organisation, but brought skills and experience in hosting, facilitating and modelling a different approach to engagement.

Local partners suggest that they have provided an important 'human resource'. They have brought focus and coordination, in which the style of working, with persistence, patience and good humour, created a well-paced momentum that added to existing local activities and energy. Their role in this respect has freed-up others from the locality to take a fuller part themselves:

"I would like to express a sense of gratitude to the SRN, I know I wouldn't be alone in that, in terms of conversations I've had... for their patience and good humour. The thing we have in common is a passion for what we're doing. It's laid the groundwork for the next phase of developments."

Given the history, commitment of local partners and the work already underway when Making Recovery Real commenced, there is no suggestion that the progress made would not have happened at all without SRN, but that 'it would not have happened so fast or been as strong'.

Summary: understanding levers for change

Reviewing what has helped to create the success of Making Recovery Real provides a fuller understanding of 'the levers for change' – what might be the transferable and enduring learning from this 'practical experiment':

"The two things I keep coming back to in terms of the integration of health and social care, are relationships and dialogue – these are the two successful ingredients."

It is clear that there is no single model of, or pathway to, 'recovery', but that making recovery real entails a genuine change in power dynamics where people with lived experience have the right to be at the table and at the centre of decision-making. It entails creating conditions for on-going and genuine dialogue, so that people feel listened to and their views and experiences are valued. Listening is key to sharing power and enabling different conversations, that whilst they may still be challenging and difficult, don't invoke defensiveness, but a new openness of mind.

This attitude of 'inquiry' supports a willingness to take risks, try new things and better partnership working, as the strengths and contributions of each partner are better understood. This approach has helped to breakdown fears or expectations amongst professionals that people will ask for unrealistic or undeliverable forms of support or service.

Informal peer support is invaluable; being able to make a contribution to the recovery of others by sharing stories breaks down isolation, increases hope, builds confidence and so creates a virtuous cycle of greater understanding and acceptance of recovery amongst those most closely affected, people in a professional role and the wider community. For people in recovery themselves, mutual peer support can become a significant personal resource and help people to better manage their own mental health.

This focus on relationships and dialogue helps to uncover local knowledge and enhances access to resources. Story sharing is an inspiring and enabling practice that creates the conditions for positive risk-taking and supports action, which in turn helps to show what is possible. Awareness of language and how it can be an enabler, or a barrier, is also a significant part of the dialogical approach:

"What you call things is important. I would say use whatever language you need to use to enable people to engage – for example, we learned that 'coffee mornings' sound too casual to be allowed time off work to attend."

Making Recovery Real has worked intelligently with formal and informal power by paying continuous attention to how creating a welcoming and enabling environment and the processes and habits that form within any partnership, whilst remaining focused on purpose, possibilities and actions.
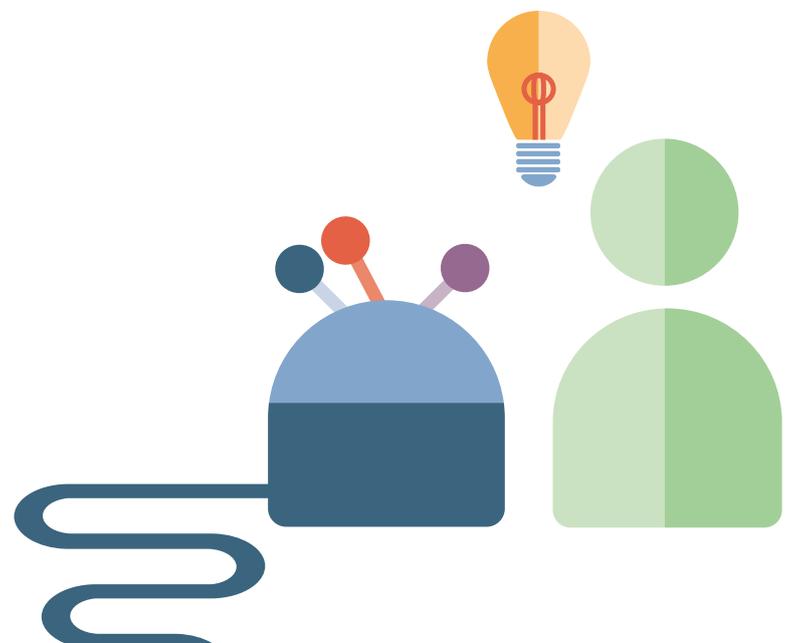
4 Progress towards outcomes: what's changing?

The review event in Aberdeen in November 2017 encouraged discussion about outcomes; what is changing for the individuals, teams or colleagues, within organisations and within the wider environment. This understanding has been developed at subsequent events and through the interviews conducted for the review.

Individual outcomes: what's changing for me?

In relation to themselves, people talk about shifts in their thinking that make them more open to change and of feeling more confident in their collaboration and in speaking with others. They suggest that there is 'good trust where there wasn't before', and that 'trust has been across all levels'.

There are new understandings of recovery for all those involved:

"I understand recovery as living a meaningful life, with or in spite of my mental health condition."

"If I hadn't been involved, I would be more resistant to recovery as a whole. Less eager to change and reflect on my own practice, that would trickle down into how I practice with my team. I probably would have said 'what's all this that's going on?' So it's changed the way I work. That's embedded... now in me personally and for me, I am very precious about it, I won't compromise."

There is sense of agency, enabling individuals to act independently and to make their own choices, amongst both peer champions and those in professional roles. For the latter, there is a sense of renewed engagement and pleasure in their work as they find their contribution is valuable and rewarding.

New understandings of recovery have impacted on practice; there are examples where a deeper understanding of recovery prompts, for example, more questioning of self or the decisions made by other professionals, more risk enablement and an expectation that people will be much more involved in shaping their support, 'getting away from 'doing for'...'.

Peer champions refer to the development of a more 'facilitative' or proactive mindset which might include taking on more responsibility for their own recovery and growth and providing support to others. Some refer to shifting from seeing themselves as a 'service user' to a 'facilitator'.

These changes in individual perspectives and understanding of contributions mean that in general terms, there is less distinction made between people and roles – less categorisation of 'us and them'. There is a sense of belonging to a recovery community with shared values that provides clearer channels of communication in accessing people more directly. There is an understanding of the need to continue to nurture an environment that encourages and supports positive relationships across boundaries between people and professionals.

People talk about understanding that the work is evolving and that it is about linking and connecting, of contributing to something that is dynamic, 'changing' and becoming more diverse as it 'cascades' into other areas of work and life. There is an understanding that making recovery real is a form of intervening (verb), 'of getting involved' that continues, rather than a specific intervention (noun) that ends.

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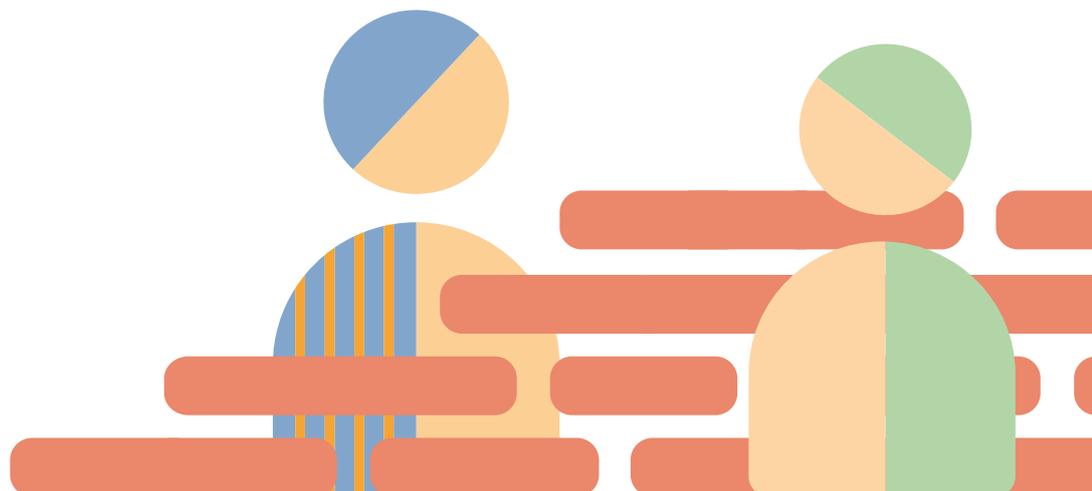
Immediate shared outcomes: what's changing for my team, colleagues or peers?

There is a sense that change for others, who are not necessarily directly involved in the Making Recovery Real process, comes from the example set by those who are – a kind of personal ripple-effect. The change in thinking to create more expansive mindsets referred to above has a practical impact; as respect and acceptance, willingness to change and commitment to collaboration, underpinned by mutual respect and shared values, become 'the way we do things around here':

"A lot has changed. Perceptions have been challenged. A lot of people have an understanding of recovery... that sits really well with my values... but which I wouldn't necessarily have been able to articulate... I have a better understanding now."

There is more practical knowledge within the system as people have got to know individuals and organisations and understand better what they do:

"The team are much more focused on community resources, than we would have been in the past. We have a more holistic approach to overall wellbeing. Instead of us 'doing for', now we support people to access the help they want and use what's available in the community. We're focusing more on getting people to engage with employment, volunteering, college and so on."

Greater practical knowledge can help to stop a sense of 'passing the buck':

"... people feel they go from pillar to post. I can see how that can come about, but when you've got established relationships with people that you're passing on to, it can't do anything but help. We are more up-to-date... we've got established relationships with individuals who are involved... in good faith you can say, 'if this is something you're interested in, these are people that can help you'."

"I'm not going through 10 people to speak to someone."

Further shared outcomes: what's changing for organisations?

There is a strong sense that there is now more of a critical mass for positive change, that is more inclusive and as a result, there is less working in isolation. The focus on engagement has provided a space for third sector organisations to have more of a voice and contributions from Moray Wellbeing Hub have positioned them as a key strategic partner. There is a feeling that organisations are listening and changing, with more 'gentle humour and lightness' than was present before.

There has been the emergence of new organisations who have not operated in the locality before; re-commissioning decisions have played a part here, so that new organisations are able to contribute to changing cultures.

There is a better understanding of the agendas and parameters under which different organisations operate:

"We all know that the NHS and local authority can't move as fast as the third sector… the council and NHS were supportive, but let us run with things – we used the strengths of the organisations, not just the individuals."

And those organisations themselves have valuable new understandings:

"MRR has given the NHS insight into what people want and what's important to people – which they might not have got through their own consultation."

"I was talking with a nurse, who in the past has debated with me about why a service needs to be in place for a person, because they simply can't do something for themselves, they need it to be done for them – what we're talking about now is, 'no, let's take an asset based approach. If an individual wants to achieve something in a certain way and it gets the job done, then that's recovery for them – it's not imposing our ideas of what it should be.'"

The biggest change at organisational level is undoubtedly the contributions that MRR has made to the Strategic Plan:

"We now call our strategic mental health group the MRR Partnership. This is massive. The name has carried on."

"It's the way we want to work – we co-created that strategy. This is now very different from other strategies not done in this way."

"It has brought the strategy to life."

"It is culture change. The new Moray Mental Health strategy would not look like it does without MRR. It gave them even more feedback… it feels like it's got the right things in it. I don't think that would have been possible without the culture shift – it should feed the longevity of the shift. The principles of Making Recovery Real are embraced in the strategy."

In terms of understandings of how change happens and wider lessons, there is a sense that it is not necessary to wait until every organisation or partner is convinced of the value of a recovery-focused approach; but to take steps so that people can begin to see practical change as 'each initiative will change services a little' and in combination, the desired results will start to emerge.

Impact on mental health in Moray: what's changing in the wider environment?

There is great pride in the difference that has been made in Moray and pleasure in seeing the changes amongst people and organisations and within the mental health strategy:

"I want to say how delighted and chuffed I am when I see people that I've known for years and years, as people who use services, really chuffed to see them living their own lives, the way they want to live it, making their own decisions, and being more proactive in their own communities."

"People are much more open to the flexibility you can have in looking after someone's mental health… it would be fair to say, we have more visible choice now. Engagement events and things allowed people to see mental health as a thing – not hidden down a back alley. We're visible on the street… [but] there's still some communities where it is a really tough thing to talk about."

Review participants suggest that conversations about mental health have become more mainstream and everyday:

"Moray has become much more aware of its mental health… there's been more conversations about how to seek help, but also about not being fearful of seeking help. There is a change in what you're hearing… I wonder if the roadshows and events are helping people hear positive and hopeful vocabulary. They may think 'it doesn't have to be that way anymore'."

There are concrete and practical changes in service provision which enable greater visibility, more self-referral and ways to self-manage mental health.

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There are significant achievements in developing understandings of recovery and embedding that within the mental health strategy. In recognising these achievements, no individual or organisation is seeking to claim either credit for themselves or deny how much there is still to do. The larger and long-term ambition in Moray is to reform mental health services from a mental illness service and 'there is still a way to go'. Noting the sense that 'the whole environment feels different', there is awareness of what still needs to change in organisations and communities and eager readiness for what comes next:

"We're in a much better place – because of the promotion of the recovery agenda – there is some scepticism still in some places – but there's an impact just from seeing people who are committed. It's difficult to change cultures, some people have been working in a particular way for a long time. They need a push – but this comes best by seeing it in action."

"It is transformed, but I wouldn't use that word as it whitewashes out some of the grey… for some people, the change is incredible. There is lots of general great stuff, but it hasn't transformed everything – we've done some smaller, deep things, plus some general broader brush strokes."

There are more Wellbeing Champions across Moray, greater involvement in events and activities and what was referred to as 'cascadiness' – the critical mass, capacity and energy that creates a positive environment and spills out beyond Making Recovery Real.

This success has happened within an enabling national policy environment around co-production:

"This comes with greater emphasis from the Scottish Government and policy around involvement, but we are almost like 'it makes sense because we've been having a go in practice'. It's not like you're just reading 'we must do co-production!'"

Health and social care integration has also been suggested to provide some 'rebalancing' of power in mental health to more of a social model and locally, whilst the Health Board retains the clinical governance role, the Moray Health and Social Care Partnership now has delegated responsibility for mental health services and this is expected to be an enabling development.
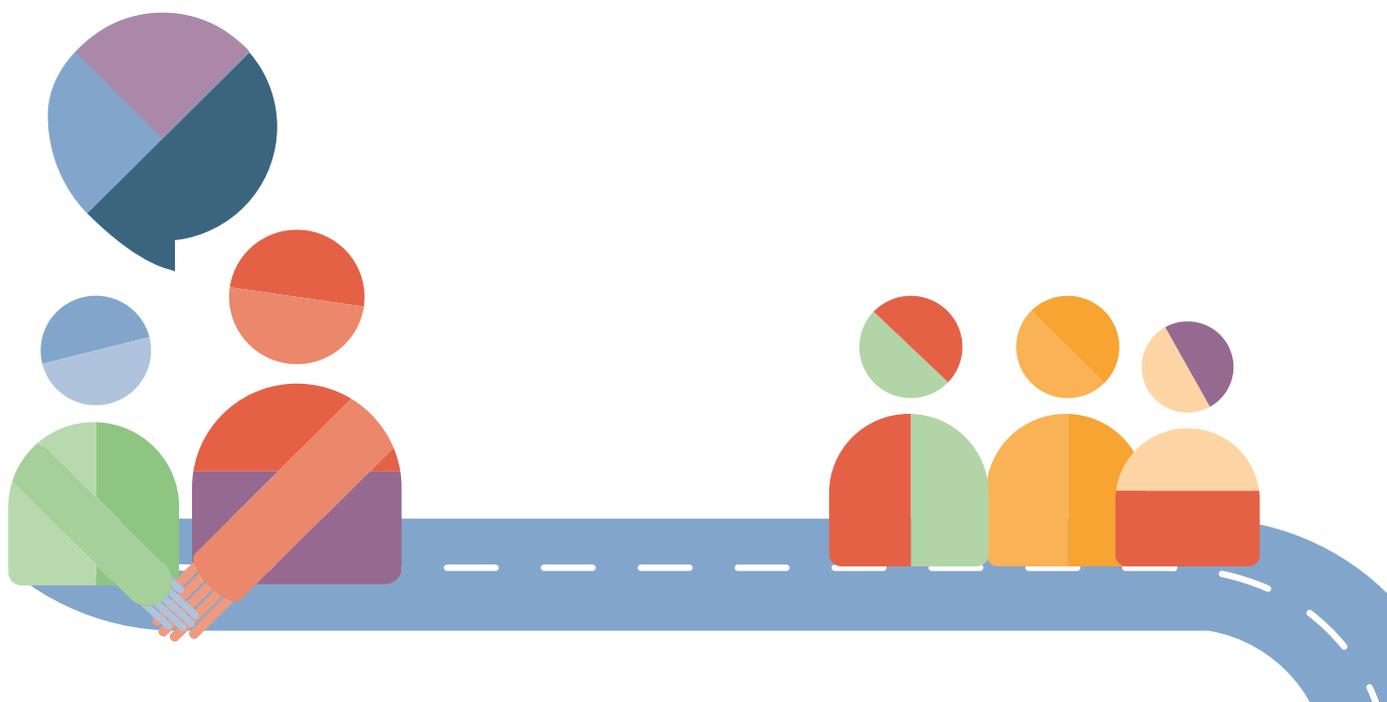
Developing capacity and embedding the approach

In celebrating the success to date, there is also a desire not to 'overbrand' Making Recovery Real. There is confidence that the concept of recovery is now firmly embedded and has a sustainable reach. There is an awareness of the challenges to extend the reach or influence that arises from the development of positive relationships to embed wider system change:

"Making Recovery Real has slipped into a more common acceptance and usage. There's a risk the concept can be diluted or altered – I've not seen that happening. I think there's a large enough committed group. We have built a big alliance."

"It's hard enough just having conversations about 'what is recovery?'... to actually going to the point now where some of the champions are facilitating strategic discussions, and being involved in challenging or not, the approaches that are being taken. Some of the really tough stuff is now, but MRR has built capacity to take that forward."

"There's been so much good work done, that it's almost 'OK, now, how to sort out the feast?'"

There is confidence amongst those interviewed that Making Recovery Real has created broader capacity and an 'effective alliance' that is not reliant on lone pioneers or the continued involvement of SRN.

# 5 Looking to the future - so, what now?

Whilst there is broad agreement and confidence that the work will continue without the on-going involvement of SRN, one of the challenges of taking this work to the next stage is the reality of the ever-changing nature of the organisational environment, particularly the third sector, and the differences within it. People in any sector don't always stay long in their work roles and this creates the necessity to really embed this approach as a way of working, so that it sustains, beyond the involvement of specific people or organisations. A further challenge is that whilst there is a new quality to local collaboration, inevitably, this has not altered the reality of the commissioning environment in which there is competition between different service providers:

"I hope it continues to evolve – there is still room for greater collaboration especially around funding opportunities, coming together over developments, whatever that might be. Using this approach could be done in a healthy kind of way."

There is also a recognition that people still need high-level communication skills and support to navigate the complexities of multiple relationships and roles. For example, to help to stay in an inquiring frame of mind that is reflective and intentional; to pay attention to both language and emotions; to continue to ask questions of each other about what is working well, so that productive approaches are recognised and continue and people almost 'coach each other' as they take the work forward.

There is much to celebrate, and review participants suggest that there is always scope to improve. In terms of what would make Making Recovery Real even better, in large part the emphasis is on maintaining the focus and ways of working that have been established to continue to create the energy and spaces for people to come together and recognise the value of lived experience, whilst also extending the reach and ambition of the work.

There is a desire to see more peer support including groups, volunteer opportunities and paid peer support posts and for new specialist support, for example, for eating disorders. There is interest in seeing more earlier interventions and support for young people, more work with children and young people in schools and colleges, and more work with employers supporting people who are experiencing mental health problems and distress. Participants want to see and be part of further conversations across Moray including in more rural communities. There is scope for more involvement of people with lived experience in the design of services, more joint working between practitioners and peers and scope to scale up successful small-scale initiatives.

Scottish
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Making
recovery
real
in Moray
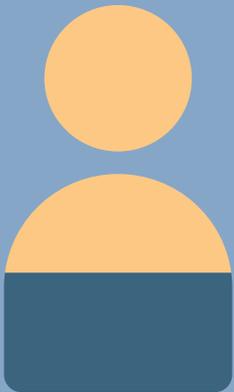
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for everyone in every community.**

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