



Ontario Shores
Centre for Mental Health Sciences

Discovery. Recovery. Hope.



Association canadienne
pour la santé mentale
Canadian Mental
Health Association



100
ans de
communauté
years of
community

Implementation and Impact of Recovery Colleges in Canada

"There are other people out there that struggle like me, what I'm experiencing is a part of an illness and I'm not alone."

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Introduction

Project Overview and Partnership

In March, 2020 the Canadian Mental Health Association (CMHA) and Ontario Shores Centre for Mental Health Sciences (Ontario Shores) announced a new collaboration to help support the expansion and creation of 20 mental health and well-being learning centres—or “recovery colleges”—by the following year. At that time, there were twelve in operation. At present there are 26 Recovery Colleges spanning seven provinces.

In addition to launching Recovery Colleges across Canada, the goals of the partnership were also to evaluate the implementation of these colleges as well as their impact using an implementation science framework. The RE-AIM (Reach, Effectiveness, Adoption, Implementation and Maintenance) framework is widely used to examine the implementation of health promotion interventions and collaborations. Therefore, this framework will be applied to the examination of the impact of the collaboration on the development and implementation of Recovery Colleges in the Canadian context.

Purpose and Goals of Report

Using the RE-AIM framework, the current analysis and report will examine the impact of the Recovery College partnership on the implementation of Recovery Colleges across Canada.

Organizations within the Collaboration

About the Canadian Mental Health Association

Founded in 1918, the Canadian Mental Health Association (CMHA) is the most established, most extensive community mental health organization in Canada. Through a presence in more than 330 communities across every province and one territory, CMHA provides advocacy, programs and resources that help to prevent mental health problems and illnesses, support recovery and resilience, and enable all Canadians to flourish and thrive. For more information, visit www.cmha.ca

About Ontario Shores Centre for Mental Health Sciences

Ontario Shores Centre for Mental Health Sciences (Ontario Shores) is a leader in mental health care, providing a range of specialized assessment and treatment services for people living with complex mental illness. Patients benefit from a recovery-oriented environment of care, built on compassion, inspiration and hope. Ontario Shores engages in research, education and advocacy initiatives to advance the mental health care system.



Methodology

Twelve of the 26 recovery colleges agreed to participate in the outcome evaluation. Nine participated in the methodology outlined below, whereas three colleges (Hong Fook, CMHA Edmonton and CMHA Calgary) provided a summary of outcome evaluations conducted independently. The data summarized below was collected from:

- Ontario Shores
- CMHA Winnipeg
- CMHA Durham
- CMHA Toronto
- CMHA PEI
- CMHA Kelowna
- CMHA Saskatchewan Division
- Northumberland Hills Hospital
- Hong Fook (process evaluation only)

Recovery College Student Experience Survey

Using a retrospective pre- and post- survey design, this mixed method instrument including both qualitative and quantitative questions was used to capture the student experience by comparing mental health outcomes pre and post Recovery College participation.

Key Questions

- Has participating in the Recovery College provided students with new information to support and make a difference in their mental health and well-being?
- How does Recovery College support mental health?
- Does participating in the Recovery College program increase self-esteem, connection, personal mental health recovery, and mental well-being?

Scales:

- The Short Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)
- The Questionnaire about the Process of Recovery (QPR)
- Campaign to End Loneliness Scale
- One-Item Self Esteem Scale

Changes in self-reported loneliness, self-esteem, personal mental health recovery, and mental well-being were analyzed using a paired t-test analysis. Open-ended questions were coded to identify themes that captured the most important takeaways and learnings from attending the Recovery College.

Program Manager Survey

Survey designed to better understand program reach and what has been delivered as a part of the Recovery College program.

Key Questions

- The total number of programs offered (i.e., webinars, single-session courses, and multi-session courses)
- Of the courses offered, how many were offered online versus in-person
- Total number of community partners that have been engaged through the Recovery College (via formal partnerships, co-design, co-facilitation, etc.)
- Total number of student registrations
- Total number of unique students who have attended the Recovery College
- Types of barriers experienced (i.e., funding, staff capacity, connectivity issues, etc.)



Results

1. Reach

Survey Responses: 227

Number of Students

- Unique Students: ~6,500
- Total enrollments: 13,500

Number of Recovery Colleges

- Grown from 12 in 2020 to 26 in 2021

Provinces Represented

- Grown from five provinces to seven (AB = 7; BC = 1; MB=3; NB=1; ON=12; PEI=1; SK=1)

Target Population

- 65% of respondents self-reported: "I struggle or experience challenges with maintaining positive mental health. I would like resources and support to help improve my mental health."
- 79% of survey respondents identified as women
- 33% of survey respondents were over the age of 55

Accessibility

- 74.5% of respondents accessed programming virtually

2. Effectiveness

Highlights

- 24.5% of respondents reported attending 8+ courses
- 89% of respondents felt the Recovery College provided them with new information to support their mental health
- 96% of respondents said that they would recommend the Recovery College

Key Learnings and Themes

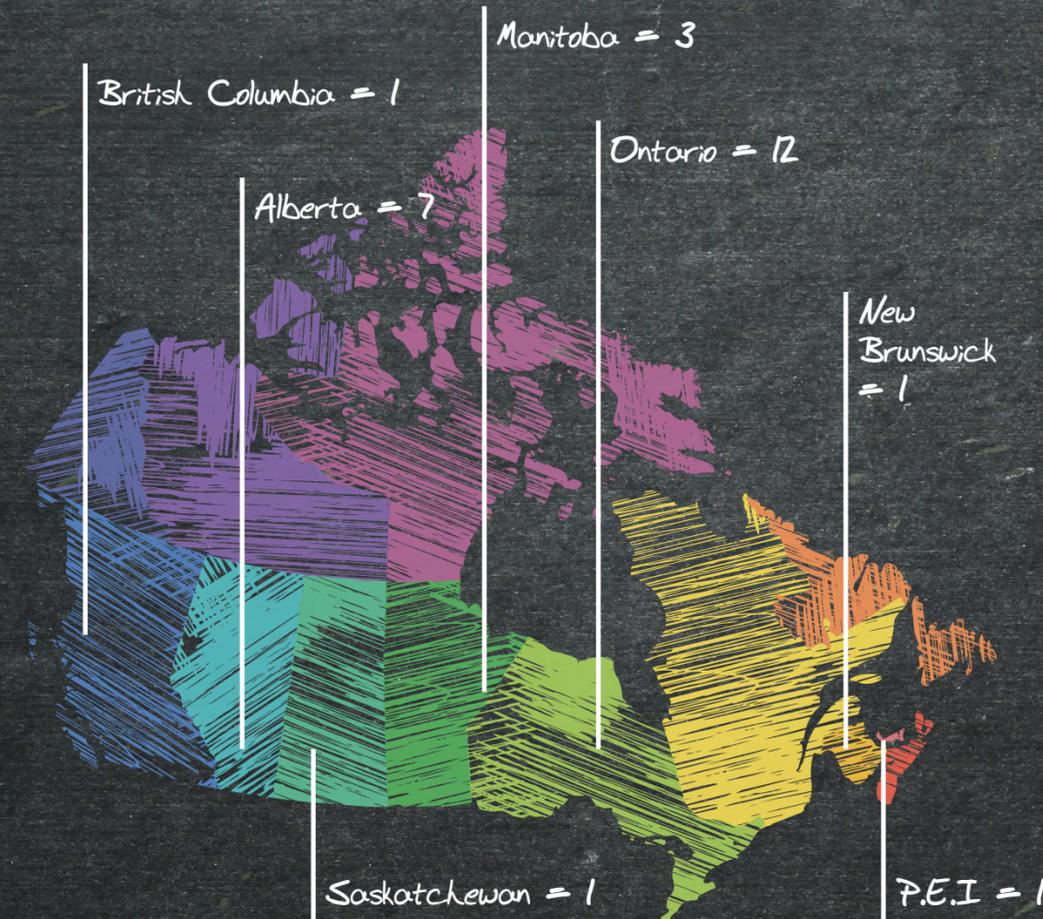
Feeling of belonging

Students felt they learned about the importance of connection with peers, support systems, and community, as well as the skills involved in enhancing these relationships and interactions.; Several students indicated that they no longer "felt alone" (n=7).

"There are other people out there that struggle like me, what I'm experiencing is a part of an illness and I'm not alone."

Provinces Represented

Grown from five provinces to seven



Target Population

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Target Population

79% of survey respondents identified as women.



33% 55+

33% of survey respondents were over the age of 55.

2. Effectiveness Continued

Strategies and information to enhance one's mental health and wellness toolkit

Students learned various coping skills (i.e., self-care, journaling, breathing techniques, mindfulness, etc.) to increase their ability to support their mental wellness, along with specific resources to access when in need of support. A few (n=3) even reported learning practical skills such as Microsoft Teams, facilitation skills, and writing techniques.

"How to cope with daily stressors."

"Support exists. Recovery College offers a wide variety of courses ranging from info based to skill building to peer support groups. I learned how important these opportunities have been to my personal mental health journey."

Self-confidence/self-worth

Many students demonstrated a new understanding of what "recovery" means, in a way that allowed them to think beyond symptom remission being their measurement of success. This understanding appears to have led to an increase self-acceptance, self-kindness, and empowerment.

"I am enough."

"I learned that I can live well and enjoy life even with mental health challenges."

Positive impact

90% of survey respondents said that the Recovery College has made a difference in their mental health and wellbeing.

"I am no longer wanting to end my life! I want to live!"

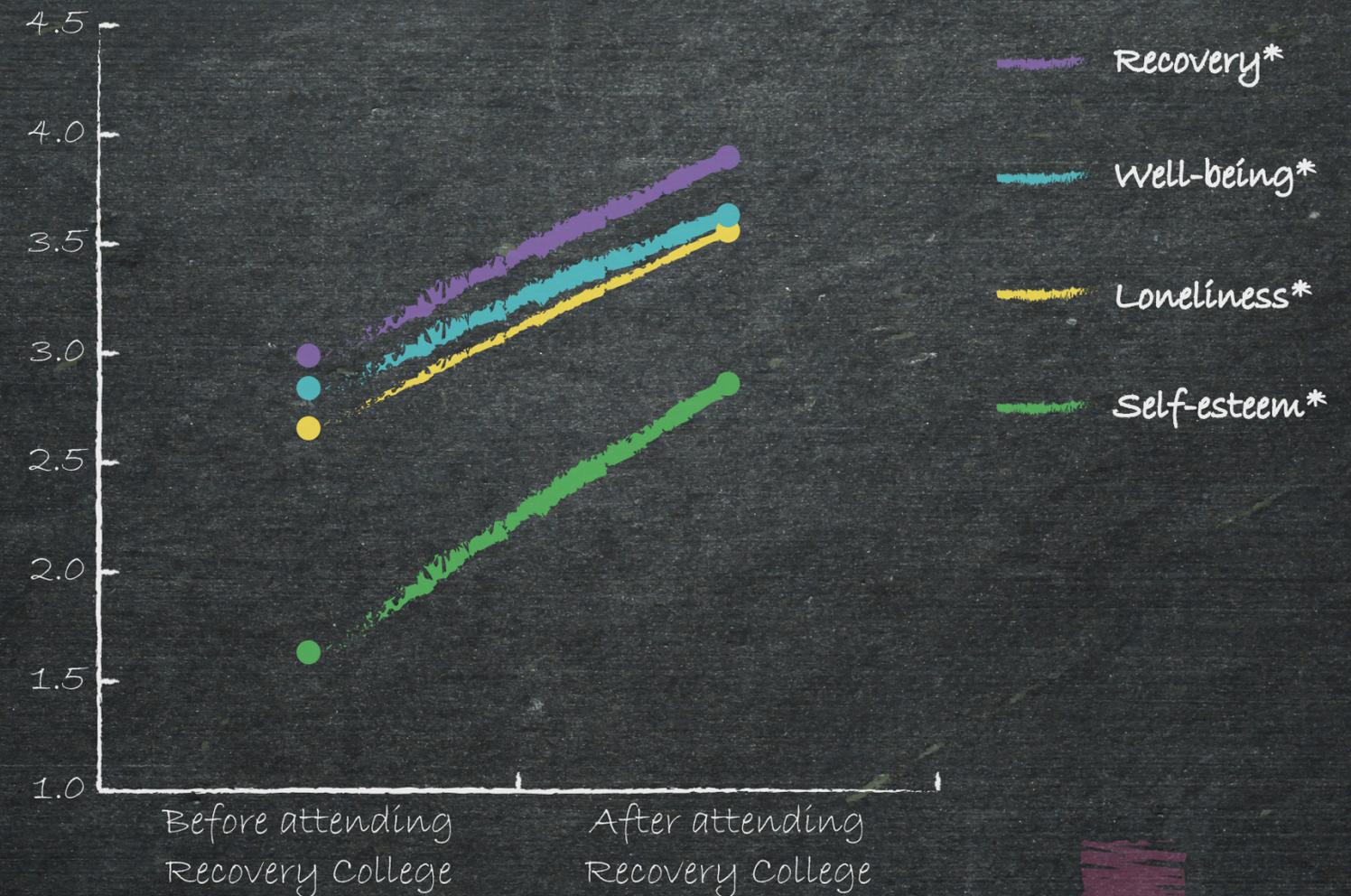
"Yes it provides hope and encourage to keep striving and improving."

Quantitative Outcomes

Using a paired-t test analysis, the self-reported scores for mental well-being (M=3.63, SD=0.77; M=2.84, SD=0.97; $t(147)=10.286$, $p<0.05$), personal mental health recovery (M=3.90, SD=0.06; M=2.99, SD=0.08; $t(125)=12.55$, $P<0.05$), loneliness (M=3.56, SD=0.08; M=2.66, SD=0.09; $t(134)=11.78$, $p<0.05$), and self-esteem (M=2.86, SD=0.12; M=1.63, SD=0.11; $t(159)=10.56$, $p<0.05$) were found to be significantly higher after attending the Recovery College than before attending (Figure 1).

Pre- and Post- Recovery College Survey Scores

Figure 1: Mean scores for WEMWBS, QPR, Loneliness, and Self-Esteem scales from before and after attending the Recovery College.



*Note: sig. $p<0.05$

2. Effectiveness Continued

CMHA Alberta, CMHA Edmonton and Hong Fook Recovery College Evaluation Results

Similar survey results and constructs were seen in the final site reports submitted by CMHA Calgary and Edmonton which reviewed data gathered as part of the evaluation of Recovery Colleges scaled across Alberta. Students identified the most important takeaways and learnings that mapped onto the following themes: wellness, relationships, social and natural support networks, self-esteem, and sense of agency. Through the Recovery College, students experienced connection, belonging, acceptance, and hope. Furthermore, the survey found that the Recovery College would benefit from and gain the largest catchment of students through a mix of in-person, virtual, and hybrid programming as it allows for more flexibility on how students can participate and where.

While the current national evaluation did not look at broader system impact, the Alberta evaluations noted the essential role the Recovery College had in prevention of illness, management of care, and parallel and complementary supports. Students were asked if they were accessing mental health services, counselling, or emergency or crisis supports more, less, or about the same. The results indicated that they use emergency or crisis supports (37%), other mental health services (22%), and counselling supports (19%) less frequently since joining Recovery College. However, interestingly, 25% of students indicated the use counselling services more frequently, which is worth further exploration (CMHA Calgary, 2021; CMHA Edmonton, 2021).

Although using different a different outcome measure (PROM), significant changes were also seen at the Hong Fook Recovery College,

a non-CMHA branch developed through this collaboration, in pre-and post- survey scores. Results implicated that the Recovery College courses were effective in boosting the mental health and wellbeing of the participants (Liu, 2020).

"90% of survey respondents said that the Recovery College has made a difference..."

3. Adoption and Implementation

New Recovery Colleges

- 12 new Recovery Colleges
- 29 webinars offered
- 307 single-session courses offered
- 16 community partnerships established for program implementation

Recovery Colleges in Development

- 19 in the planning stage
- 14 agencies exploring the potential for a Recovery College program

Hong Fook Recovery College

Hong Fook Mental Health Services began the development of their culturally-specific Recovery College in 2018 with the hiring of a peer coach and the implementation of training and education. Beginning in the Cantonese community, they have further evolved to include offerings for the Mandarin, Korean, Vietnamese, and Cambodian communities. Through this community partnership, the college now offers numerous including Recovery 101, Cantonese Writing and Multimedia, Pathways to Recovery, Body and Mind, Tai Chi, etc. Strength-based language is explicitly used in the Recovery College and there is a focus on supporting students to re-discover and develop their strengths, skills, and interests on their recovery journey (Hong Fook Mental Health Association, n.d.).

Community of Practice (CoP)

A CMHA-led Recovery College CoP was developed comprised of 156 individuals including, executive directors, directors, managers, leads, facilitators, coordinators, and peers from 53 organizations across 11 provinces and territories. The CoP aims to create new knowledge to inform best practices and advance the adoption of the Recovery College model on a nationwide scale. Some

priority topics for meetings included: 1. New course development and offerings, 2. Promotion and marketing of recovery, 3. Peer training and development, 4. Co-production process, and 5. Compensation for peer facilitators/staff.

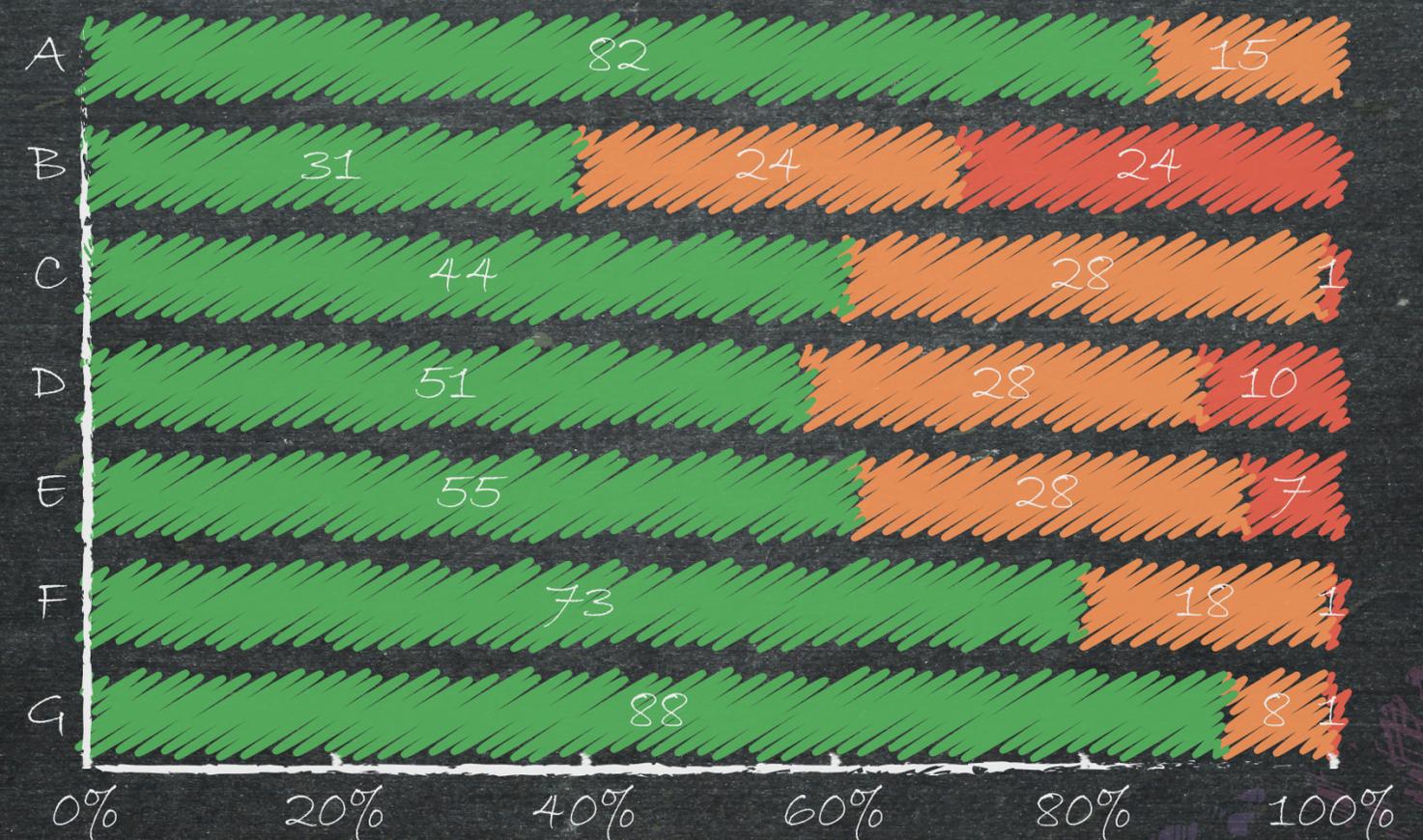
Aggregate RECOLLECT findings

The RECOLLECT fidelity measure is a tool designed to assess how closely a Recovery College maps on to our best understanding of an ideal Recovery College on 7 dimensions: 1. Valuing Equality, 2. Learning, 3. Tailored to the Student, 4. Co-Production of the Recovery College, 5. Social Connectedness, 6. Community Focus, and 7. Commitment to Recovery. Managers, peers, and students across eight participating sites were provided with three different versions of the measure to capture different perspectives (Toney et al., 2019).

Each colour category (green, amber, red) represents different stages of Recovery College development from early-stage to active engagement and active success. Dimensions predominated by red and/or amber may indicate opportunities for program growth to further align with the Recovery College model, while dimensions predominated by green indicates strong program fidelity according to ImROC (Toney et al., 2019) (Figure 2).

Aggregate RECOLLECT Findings

Figure 2: Aggregate RECOLLECT findings from 8 participating organizations.



A = Commitment to recovery
 B = Community focus
 C = Social connectedness
 D = Co-production

E = Tailored to the student
 F = Learning
 G = Valuing Equality

4. Maintenance

The growth and sustainability of the Recovery Colleges established through this collaboration are supported through the development of peer positions, the CoP, and the impact report itself. A survey indicated that 96% of the Recovery Colleges have at least one peer, with 43% having five or more peer positions. Peer roles and functions reported included course facilitation, development, and overall program support such as one to one peer support, peer navigation, and marketing and promotions. Additionally, the CoP acts as an enabler to include the voices of professionals and service users to develop and disseminate best practices, guidelines, and strategies for existing and future Recovery Colleges to use. Lastly, this report demonstrates the population reached, program outcomes, sustainability, evolution and growth, providing an evidence base the development of new and growth of existing Recovery Colleges.

The principles of peer support developed within mental health services appear to have relevance for peer support offered within all services (Repper et al., 2018). This collaboration has allowed for the expansion beyond CMHA branches to include post-secondary institutions, the Abilities Centre, Grandview Kids, Hong Fook, and Northumberland Hills Hospital.

The movement of the Recovery College model into the post-secondary space has reached a population disproportionately affected by mental health issues (Council of Ontario Universities, 2017). Five post-secondary institutions (University of Toronto, Scarborough, Ontario Tech University, McMaster University, George Brown, and Durham College) have just recently begun to experience the benefits that the Recovery College model can bring. Preliminary survey results are promising as 90% of students (n=21) indicated that their mental health was supported in some level by the courses. 80% of students said that they either learned 'a lot', a 'moderate amount', or a 'great deal' from the courses. Additionally, there was a very notable increase

in self-reported emotional or mental health from before to after the Recovery College semester. The growth and expansion of this new and innovative approach to the Recovery model will further contribute to mental health system transformation as well as continue to provide access to support for students and young adults (Harris, 2021).

This model has also demonstrated potential to be extended to address the physical health of people with mental health problems. In Canada, one in five live with at least one of the following major chronic diseases: cardiovascular disease, cancer, chronic respiratory diseases, and diabetes. This number continues to grow each year due to the aging and growth of the Canadian population, demonstrating the need for intervention (Public Health Agency of Canada, 2017). Although more research is needed, research suggest that peer workers have an important role to play in improving the quality of life and community engagement of people who have long term physical and/or mental health problems. One UK based qualitative study on one to one peer support, designed for people adapting to chronic renal illness, reported benefits similar to those in mental health peer support, such as talking to someone 'who's gone through what you're going through'. Further benefits included practical information, reassurance, encouragement, increased confidence, support, and hope for the future, all of which align with what a Recovery College has the capacity to and has demonstrated it can do. Furthermore, similar benefits have been reported by participants in cancer and HIV groups, who found peer leaders to be positive role models who helped normalize illness and the demanding treatment regimes, ultimately increasing empowerment and agency (Repper et al., 2018).

Concluding Thoughts

The collaboration between CMHA and Ontario Shores has led to the implementation of 12 new Recovery Colleges spanning across Canada, with 19 more in the planning phase. The model has expanded beyond CMHA branches into innovative spaces including post-secondary institutions, the Abilities Centre, Hong Fook, and Northumberland Hills Hospital. The findings from this evaluation provide evidence of the impact that Recovery College's have on mental health and recovery-related outcomes. Recovery College participation provided students with a feeling of belonging, strategies and information to enhance one's mental health and wellness toolkit, and greater sense of self-confidence and self-worth. These results were strengthened through similar themes identified in student responses presented in the Alberta CMHA and Hong Fook Recovery College site evaluation reports. The development of the Recovery College CoP, the employment of peers, along with this impact report will assist with the growth and sustainability of existing and future Recovery Colleges.

The retrospective pre- and post-design was employed given the numerous benefits including flexibility, convenience, versatility, validity, and avoids attrition (Klatt & Taylor-Powell, 2005). These benefits were especially important for carrying out this national evaluation initiative that required a flexible design. However, it is important to acknowledge some of the limitations of this methodology that may impact self-reported responses. Limitations include recall period, self-report bias including social desirability and accuracy, and that self assessments fluctuate and thus the scores reported are only a snapshot

of the individual in that point in time (Klatt & Taylor-Powell, 2005). A second limitation of this evaluation that the broader system impact was not looked at, such as the impact of the Recovery College on prevention of illness, management of care, and parallel and complementary supports.

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"I learned that I can live well and enjoy life even with mental health challenges."

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