

Time to Change Wales Evaluation Report

Anti-Stigma Training Module for Healthcare Professionals in Wales- May 2023





Introduction

Time to Change Wales (TtCW) is delivered by a partnership of leading mental health charities, Adferiad Recovery and Mind Cymru. TtCW is the first national campaign to end the stigma and discrimination faced by people with mental health problems. With 1 in 4 of us affected by mental health problems in any given year, TtCW aims to tackle stigma and discrimination through a social contact model, by getting people across Wales to talk openly about their mental health.

By talking about our mental health, we can:

- strengthen relationships with friends, family, and colleagues
- take the taboo out of something that affects everyone
- break down stereotypes and challenge stigma
- support people in their recovery.

Definitions and key terminology

Stigma

Stigma is a form of prejudice (or pre-judgement) which can set a person apart from everyone else and is always negative.

Mental health

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices¹.

Black, Asian, and minority ethnic

Within this report, the phrase 'Black, Asian and minority ethnic' has been used for consistency. Time to Change Wales recognise the limitations of using phrases such as 'Black, Asian and minority ethnic' when referring to people from many ethnic and cultural backgrounds and where possible, we will seek to add additional detail.

Overview

What were our aims?

A quantitative evaluation was conducted by Mind's Evaluation and Performance team, to explore:

- Perceptions of the training by trainees
- The impact of the training for trainees

¹ World Health Organisation. (2007, September). Mental Health: Strengthening Mental Health Promotion. Fact sheet no. 220. Retrieved from: https://www.who.int/en/news-room/fact-sheets/detail/mental-health-strengthening-our-response



What did we do?

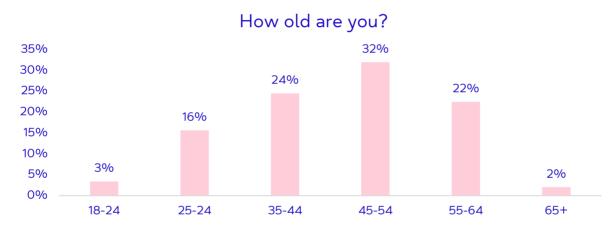
Mind's Evaluation and Performance team administered an online survey to trainees after attending the training module.

Survey data was analysed in Excel with the findings presented within this report.

At least 181 participants provided some survey data. Please note, the evaluation was not mandatory, and data presented represents those who chose to take part in the evaluation and does not represent all those who took part in the training.

The training ran from September 2022- March 2023 and the findings are outlined in the following sections.

Who did the training reach?



(Base = 147)

- Most trainee attendees were between the age range 45-54
- 3% of trainees under the age of 24
- There were 2% trainees over the age of 65+
- Percentage attendance for the other age ranges (35-44 and 55-64) was split somewhat evenly.



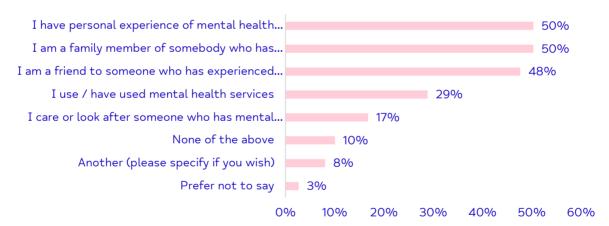




(Base = 167)

- 6% of trainees were from Black, Asian and minority ethnic communities.
- 94% of trainees were White or White British

Which of these categories best represents your experience of mental health problems?*



(Base= 149)

*Please note trainees were able to pick more than one option so percentages will not add up to 100%

- 50% of trainees had personal experience of mental health problems and 50% were family members of someone with experience of mental health problems.
- 29% had used or currently use mental health services.



How long have you worked within the healthcare sector in Wales?



(Base= 183)

- 5% of trainees had been working within NHS Wales for less than a year
- Over one third (34%) had been working in NHS Wales for more than 20 years
- 90% of trainees had an NHS pay grade of Band 7 or below, and 10% were band 8a and above.

Of those providing data (n=163), the percentage of trainees working for each of the health boards was as follows:

Health Board	Percentage
Swansea Bay University Health Board	99%
Cwm Taf Morgannwg University Health Board	1%
Aneurin Bevan University Health Board	1%

• Most trainees were medical professionals, with non-medical professionals including those working in HR, administrators, and inspectors.

The table below displays the percentage of how trainees heard about the training.

How did you hear about the training?	Percentage
Manager	27%
Intranet	23%
Colleague	15%
Staff Wellbeing Service	10%
Learning & Development	7%



Occupational Health Department	6%
Other, please specify	4%
HR Department	4%
Staff Briefing	3%
Trade Union Representative	1%

(Base= 177)

The following table shows how trainees attended the training.

How did you attend the training?	Percentage
Remotely	91%
Face to face/ in person	9%

(Base = 179)

Training feedback

Training accessibility and motivations for attending.





(Base = 174)

- Most trainees found the session very easy or quite easy to attend (64%)
- The most cited reasons as to why the training was difficult to attend included heavy workload and difficulty committing to three hours.



Why did you attend this training?*



(Base = 178)

*Please note trainees were able to pick more than one option so percentages will not add up to 100%

- Most (67%) attended the training to improve their skills and knowledge in the area
- 58% attended because of their personal development needs

Pre-attendance Information

Trainees were asked how much they agreed or disagreed with a series of statements about information received prior to training. Findings are outlined below.

 90% of trainees strongly agreed the information received prior to the training accurately described the purpose of the training and allowed then to join on the day

	Strongly Agree / agree	Neither agree nor disagree	Strongly Disagree / Disagree	Don't Know / Can't Say
The information I received prior to the training accurately described the purpose of the training (Base = 176)	90%	4%	4%	2%
I received ample information prior to the training to enable me to join/attend on the day (Base = 174)	91%	3%	4%	1%



Training rating

Trainees were asked to rate different aspects of the training including the training materials and trainers' knowledge of the topic. Findings are outlined below:

	Very good / good	Average	Poor / very poor	Don't know / Can't say
The training materials used during the training (e.g., slide shows)	97%	2%	1%	0%
(Base = 176) The functionality of the training platform (e.g., Zoom, Microsoft Teams) used (e.g., audio quality/ connection/ video) (Base = 160)	94%	5%	1%	0%
The trainer's knowledge on the topic (Base = 175)	99%	1%	0%	0%
The trainer's presentation and delivery skills (Base = 174)	99%	1%	0%	0%

- 99% of trainees rated the **trainer's knowledge on the topic as very good/ good**
- 99% rated the trainer's presentation and delivery skills as very good/ good
- Overall, the Community Engagement officers stood out as a highlight of the training



Training content

Trainees were asked questions relating to the content of the training including how relevant it was for their job roles. Findings are outlined below.

The content of the training was relevant to my workplace/job role



(Base= 175)

• Most trainees (96%) found the content of the training **relevant** to their job role/workplace

The training was helpful in understanding the role of the healthcare professional in reducing stigma for patients



(Base = 175)

• Most (99%) also thought the training clarified the role of healthcare professionals in reducing patient stigma

The **most helpful** aspects of the training as cited by trainees were:

- 1) Lived experience scenarios/ideas
- 2) Interactive discussions
- 3) Quiz

(Base = 139)

The **least helpful** aspects of the training as cited by trainees were:

- 1) Length of training
- 2) Technical difficulties joining
- 3) Being called upon

(Base = 71)



Knowledge before and after the training

Please note, only responses where the same respondent answered both the before and after question were included in this analysis.

How would you describe your understanding of the impact of stigma on the mental health of your patients?



(Base= 168)

• Trainees' **knowledge** of the impact of **stigma** on the mental health of their patients **improved** after attending the training. The biggest difference was seen in over half of trainees reporting their understanding as very good after attending the training, whereas prior to the training only 10% of trainees rated their understanding as very good.

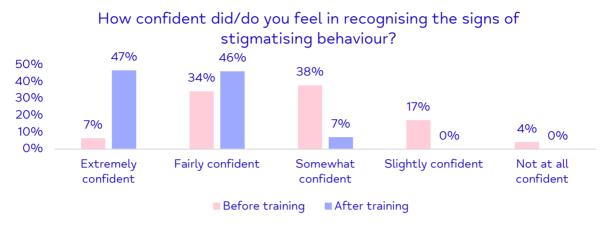
How confident were/are you that you had/have an understanding of the tools and techniques to use to reduce stigma for your patients?



(Base = 166)

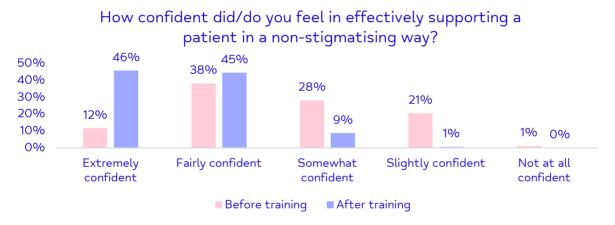
 Trainees' confidence that they have the tools/techniques to reduce patient stigma improved after attending the training with trainees becoming overall more confident





(Base = 169)

• Before attending the training, only 7% of people felt extremely confident in recognising the signs of stigmatising behaviour. After the training almost half of trainees (47%) felt extremely confident in recognising the signs of stigma



(Base = 170)

• Also, a greater percentage of trainees felt more confident in effectively supporting patients in a non-stigmatising way after attending the training, with 90% of trainees saying that they either felt fairly or extremely confident after attending the training.



Trainees were asked how likely they would be to recommend the training, and to rate the training out of 10. Findings are outlined below.

How likely are you to recommend this training to a colleague?



(Base = 168)

• 98% of trainees were extremely/quite likely to recommend the training to a colleague.

Trainees rated the training a 9.4 / 10 on average (n=168)

Thank you for reading this report. If you have any further questions, please email research@mind.org.uk