



Understanding the impact of Growing Well

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"I always had something that was consistent, non-judgemental, very clear, valued me for who I was and all the things I did wrong, or right. And that was here, that was Growing Well" (Volunteer).

Executive summary

Growing Well (GW) is an organic growing enterprise that provides support to people recovering from mental health issues. This research demonstrates the impact of GW's work and identifies areas of particular strength and suggested areas of development. The research employed a mixed methods approach, using both qualitative and quantitative data, gathered from both primary and secondary sources.

Analysis of the volunteers' Warwick Edinburgh Mental Well-being Scale (WEMWBS) revealed that 76% of volunteers showed an increase in well-being at some point during their involvement with GW in 2012. 36% showed a decrease from beginning to end (or last point of data collection). However, some of these did show increased scores at some point during this period. This alerts us to not rely solely on the WEMWBS to show the impact of GW on volunteers. The qualitative data provided greater insight into the impact.

Qualitative analysis of both primary data (interviews) and secondary data (volunteers' supervision notes) identified the following key themes in what had an impact on volunteers:

Social interaction – Overall, this had the greatest impact on the volunteers. This was both in terms of what they gained as well as how challenging it was for them. They gained from the opportunity to start to interact with others in a non-formal and non-judgemental environment. This was significant in direct relation to how typically they had been cut off/cut themselves off through their mental illness. This led to volunteers feeling less isolated and developing their capacity to build relationships. This interaction took the focus off of their mental illness. They described feeling empathy towards and from others. The impact of this was to gain confidence to speak to people and socialise with people, both at GW and in their lives away from GW. GW, in this sense, provided a safe place for people to start/continue to interact and socialise. However, this was also the biggest challenge for volunteers. GW are implementing a 'buddy system' to help in this challenge.

Positive feelings of self – Volunteers described a growth in confidence (particularly though the social interaction discussed above). They also described gaining positive feelings of worth through feeling trusted and valued. These appeared to have been lost through mental illness. This had a significant impact on the recovery of mental health as well as in applying positive feelings to other areas of their life, for example, regaining employment.

Routine – Volunteers regained routine, structure and purpose through coming to GW. This was through a commitment to attending GW at a certain time, on a certain day. GW provided something to focus on. Volunteers had commonly struggled with these areas through their mental health problems. Most described a problem with being able to get out of bed, or out of the house. Volunteers widely expressed the important impact that having routine, structure or purpose had on their wider lives. Many further described this as an important stepping stone back into a functioning life and significantly towards regaining employment.

Flexibility – The openness and flexibility that GW provides has a positive impact on volunteers. This was described with regard to attendance and work expectations once at GW. This area, coupled with the positive feelings of self above, shows the importance of responsibility, autonomy and self-efficacy. The amount of flexibility afforded does not encourage dependency, which in turn allows volunteers the opportunity to take responsibility for themselves; developing agency in their recovery from mental health issues.

Training – the opportunity to train, learn new skills and gain a qualification was shown to have an impact on volunteers' well-being and mental health. This was important as volunteers had typically been unable to work during their mental illness. This led to volunteers having something to focus their mind on; feeling as though they had knowledge; and a sense of achievement gained in achieving a qualification.

Natural environment – The impact of being outdoors, in nature, helping things grow, was described by many volunteers as a critical part of what they gained from GW. For many this was distinguished as a unique feature. This was described by many volunteers as leading to increased physical fitness and physical well-being. This, in turn, was associated to mental health and well-being. The natural environment appeared to have a therapeutic impact on volunteers with a sense of connection to nature and feeling of safety that came with this.

The research identified the following potential areas for development:

There appears to be some uncertainty from volunteers as to the therapeutic intent of GW. Some volunteers valued the informal nature of GW, whereas others were requesting more formal therapeutic support within supervision. There is a need for greater understanding of GW's boundaries of therapeutic practice and for articulating this to volunteers.

Volunteers showed value in gaining practical skills and qualifications in their mental health recovery. However, when goal setting within supervision, there appeared to be less emphasis on personal development and more emphasis on practical skill development. There is a need for greater understanding of the role of practical skill development in relation to personal development and increased well-being.

There was mixed opinion as well as understanding of the purpose of the WEMWBS. There is a need for clarification and development of the use of the WEMWBS as both a therapeutic tool and to show overall trends in volunteer well-being.

Research context

Growing Well (GW) is a rural enterprise that aims to provide local people suffering with mental health problems with an effective, supportive and inclusive community that promotes recovery within the range of activities of an organic growing business. GW have collected qualitative and quantitative data over a number of years and wanted to use this to demonstrate the impact of their work in order to influence future practice and business development.

Research aims

The aims of this research were:

- To understand the impact of GW's work
- To identify any areas of strength and areas for development

Research questions

Through investigation of the context, the following research questions evolved:

- What are the volunteers' well-being levels during their involvement in GW?
- What themes are there regarding people's experiences of GW?
- Which aspects of GW have a particular impact on volunteers' well-being?
- What goals do people set and do they show progress against these?

Method

The research employed a mixed methods approach, using both qualitative and quantitative methods. Data was gathered from both primary and secondary sources and was carried out through the following phased process:

Phase one: Secondary data analysis

a) Warwick Edinburgh Mental Well-being Scale

The Warwick Edinburgh Mental Well-being Scale (WEMWBS) was developed for assessing positive mental health (mental well-being). The 14 positively worded item scale has five response categories (None of the time, Rarely, Some of the time, Often, All of the time). It covers most aspects of positive mental health (positive thoughts and feelings).

Volunteers completed the WEMWBS each time they had a supervision session. GW collated the 2012 scores into an anonymous spread sheet. This data was then statistically analysed by the researcher to identify trends.

b) Supervision notes

GW collated and made anonymous all supervision notes from the same 2012 period. This aimed to allow direct comparisons to be made between quantitative and qualitative data. This data was then analysed by the researcher for key themes. This inductive analysis allowed themes to emerge from the data, rather than deductively looking for predefined themes.

Phase two: Primary data collection and analysis

Semi-structured interviews were carried out with ten current volunteers. The volunteers were a representative sample from the data analysed in phase one. They were representative with regard to age, gender, length of time involved in GW, and those that had shown both increase and decrease in well-being scores. The interviews were transcribed and then inductively analysed. On the whole these themes mapped onto those that had emerged from phase one. There were also some additional themes. This process provided depth and clarity to the findings from phase one.

Phase one findings

WEMWBS

Out of the data supplied for 53 volunteers, 34 (64%) had completed the scale in 2012. Out of these 34 volunteers, 25 (74%) had completed it more than once and thus could be used to see change over time. These volunteers had completed an average of four scales. Scales were completed a minimum of two times and a maximum of eight times.

There was a general correlation between the numbers of WEMWBS completed by each volunteer and the approximate duration of their involvement with GW in 2012 (columns two and three in Table 1). This suggests that volunteers were getting regular supervision roughly every four to six weeks. There were some exceptions to this. In particular, those volunteers who had been involved for a shorter amount of time had completed the survey more often. This suggests that volunteers have supervision more often at the beginning of their involvement with GW. However, the data is inconsistent here and therefore unreliable, making this a tentative finding. The number of WEMWBS completed should match the number of supervision sessions, as the scale is completed as part of the supervision session. Columns two and six in Table 1 show that these do not match, suggesting either types of data were either not completed or lost.

Table 1. WEMWBS results

Volunteer code	Number of WEMWBS completed	Approximate duration of involvement with GW in 2012(months)	Change beginning to end (%)	Increase during involvement	Number of supervision sessions
	2	1	42	42	0
7	2	2	-19	0	2
16	2	1	10	10	2
18	2	2	-5	0	3
20	6	5	0	1	6
23	4	7	-6	0	5
24	4	8	-1	6	4
25	4	6	-9	3	5
26	5	6	5	5	5
27	3	4	-1	3	3
28	3	5	2	12	6
29	4	4	4	6	4
30	3	4	-2	0	3
31	5	8	14	14	4
32	5	7	0	6	6
33	8	10	21	21	8
34	7	8	36	36	6
35	7	7	10	10	7
37	5	6	1	4	4
38	2	2	-2	0	2
39	3	3	18	18	2
40	2	1	2	2	1
41	2	1	-3	0	1
43	2	1	14	14	0
46	4	4	12	19	3
Count=25	Average=4	Average=5	Average=6	Average=12	Average=4
min	2	1	-19	1	
max	8	10	42	42	8

Significant increase	9
Increase	5
Stayed the same	2
Decrease	7
Significant decrease	2

Table 1 shows that 14 of the 25 volunteers (43%) who completed the WEMWBS more than once, showed an increase from beginning to end (or last data collection point). 9 (36%) of these showed a significant increase. 9 of the 25 volunteers (36%) showed a decrease from beginning to end (or last data collection point). 2 (8%) of these showed a significant decrease. The average change score was 6. The lowest score was -19 and the highest score was 42.

There was a significant difference between the change scores recorded from beginning to end (or last data collection point) and change scores recorded throughout the duration of 2012. 19 of the 25 volunteers (76%) who completed the WEMWBS more than once, showed an increase in well-being at some point during their involvement. The average increased score (during their involvement) was 12. The lowest score was 1 and the highest score was 42.

Of the 25 volunteers, 9 (36%) had a negative score, i.e. their well-being decreased. These scores decreased from beginning to end (or last point of data collection). However, some of these volunteers showed a period of increase during that time. There was no correlation between the amount of time the volunteers had been involved with GW, the number of supervision sessions and their decrease in score. In addition, there appeared to be no overall correlation between length of time involved with GW and any change in score (increase or decrease). This shows the diversity of the individual volunteers and the subjective nature of well-being. For example, the greatest change in score was shown from a volunteer who had only been involved for one month out of 2012. The inconsistent data (described above) did not allow further investigation of this, as although two WEMWBS were completed, there were no supervision notes. Further analysis of supervision notes for those who showed a decrease provided some understanding of decreases. For example, one volunteer described how their "bi-polar" caused fluctuations in their well-being. This was characterised in their scores showing a -1 from beginning to end, but an increase of 6 during their involvement in 2012. However, for other volunteers, whose scores had declined, no clarity was gained through analysis of the supervision notes.

What we can take from this is that volunteers do not always show a straightforward increase in wellbeing in their recovery of mental health. Volunteer's scores show fluctuations; gradual progress as well as periods of acceleration and decline.

This alerts us to not rely solely on the WEMWBS to show the impact of GW on volunteers. The qualitative data described below can provide greater insight into the impact. The usefulness of the WEMWBS is discussed further in the findings from Phase two, with regard to volunteers' experiences of completing it.

Supervision notes

From the data supplied for 53 volunteers, 38 (72%) referrals were from a professional (e.g. GP, Mental Health Nurse, etc), 7 (13%) were self-referrals and 8 (16%) were unknown.

From the data supplied for 53 volunteers, 36 (68%) had supervision notes to analyse. The number of supervision records per volunteer ranged from one to eight, with an average of four session records.

The key themes which emerged from the analysis were coded into four categories:

- What volunteers gained
- Challenges volunteers experienced with GW
- Challenges volunteers brought with them to GW
- Volunteers' goals

What volunteers gained

Volunteers reported a variety of things that they had gained. These were further coded into key areas and are shown in Table 2 below. More detail of what volunteers described is shown in a word cloud in Figure 1. Word clouds are a visual representation for data. The frequency of each theme's occurrence is depicted by font size (greatest number of volunteers shown by larger font size).

Theme	Number of volunteers
Enjoying social interaction	29
Positive feelings of self	21
Routine, structure, purpose	14
Working at own pace	14
External recognition	8
Achievements outside of GW	8
Learning and applying learning	7
Something to look forward to	7
Understanding other people	3
Understanding self	3

Table 2. What volunteers g	gained from GW
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Understanding other people

Managing difficulties with others. supporting new volunteers, compassionate to others

Working at own pace

Increasing days, changing days, flexing days, find comfort zone, variety

Understanding self

Concentrating on self, listening to body and knowing when to stop, looking after self

Enjoying social interaction

Other volunteers, support, conversation, team, getting to know people, coming on site for lunch

Learning and applying learning

Practical, knowledge, using brain, experience

Positive feelings of self

Confidence, resilience, selfesteem and managing self & panic attacks, positive attitude to challenges, contented, energy levels & motivation, vitality, pride, feels alive & enjoying life, can turn hand to anything, cope with what asked, see the way out of the woods, reason for being, fulfilment, accomplishment, give anything a go, congratulated self, settle mind, relaxed, kinder to self,

mindfulness, switch off

Routine, structure, purpose

Consistency, something to do, something to get out of bed/the house for, reference, sustained me, main activity of week, variety

External recognition

GW provides:

Helpful direction, understanding of absence, supportive staff, don't feel threatened, non- judgemental, non-competitive, relief from	Feeling valued, feeling useful, recognising previous skills, promoted, site supervision, strategy, joined review group, applied to board
pressure	Something to look forward to
threatened, non- judgemental, non-competitive, relief from	joined review group, applied to board

Enjoyment

Achievements outside of GW

Going to the gym, football training, catching bus on own, integrating back into the community, job interview, discharged from CMHT, reduced alcohol, clean from drugs, rebuilding life, more social

Challenges volunteers experienced

Overall, volunteers reported fewer challenges than gains. These challenges were divided into the challenges with GW and the challenges volunteers brought with them – external to GW. The challenges with GW were coded into key areas (Table 3). More detail of what volunteers described is shown in a word cloud (Figure 2). Interestingly, social interaction was reported by volunteers to be both the greatest gain as well as the greatest challenge. The challenges people bring with them were also coded into key areas (Table 4). More detail of what volunteers described is shown in a word cloud (Figure 3).

Theme	Number of volunteers
Social interaction difficulties	17
Tiring	5
Frustration and boredom	4
Courses/training adding stress	4
Travel problems	4
Weather	3
Physical problems	2
Self	2

Table 3. What volunteers found challenging about GW

Table 4. The challenges volunteers bring with them to GW

Theme	Number of volunteers
Other illness (physical)	9
Family responsibilities	7
Personal issues	7
Other uncontrollable circumstances	6
stopping people from coming	
Difficulty with medication/diagnosis	4
Loss of income	3
Alcohol / drug issues	3
Problems with housing	2

Social interaction difficulties

Difficulties bonding, doesn't know anyone, no confidence to talk, stressful being around others, prickly moments, problems with another volunteer, communicating, missing other volunteers when they leave, talking too much, other volunteers too quiet

Frustration and boredom

Frustration at structure and opportunities for responsibility, outgrown, not getting as much out of it, boredom with planting, frustration with blunt tools, guilty about asking to change

Tiring

Physical, long drive

Courses/ training adding stress

Level 1 was stressful, NVQ2 isn't useful, learning new skills is challenging

Travel problems

Long drive is tiring, catching bus on own, loss of driving license, getting up early and there for 9.30

Weather

Physical problems

Backache, bending

Self

Overwhelming and not sure what to expect at first,

Knowing when to stop, putting pressure on self, expecting too much of myself, not doing things properly

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Personal issues Poor motivation, gaps in knowledge, unreliable, panic attacks, lost way, indecision, compare self to others, bullied, sleep issues, depends on if having a good week, ght with self to get there

Supported housing, homeless hostel

Problems with housing

Loss of income

Figure 3. Word Cloud of volunteer descriptions of the challenges they brought with them (taken from supervision notes)

12

Family responsibilities

Children, helping at home, changes to child care is stressful, family bereavement, family illness

Difficulty with medication/diagnosis

Changes in meds

Alcohol / drug issues

Other illness (physical)

Food poisoning, blood pressure, shoulder injury, asthma, back problems, toe injury, physically unfit

Other uncontrollable circumstances stopping people from coming

Benefit assessment appointments, benefits stressful, life is busy, stressful employment tribunal, stress outside affects social struggle at GW

Volunteers' goals

The goals the volunteers recorded within their supervision were mainly practical goals rather than personal goals (Table 5). On the whole, volunteers' supervision notes showed progress in achieving most goals.

It appears surprising that practical goals (such as qualifications, training and increasing the number of days) are more frequently stated than personal goals such as those associated with mental health recovery (including social interaction, confidence and stress management). This unearths several questions:

- What are GW's boundaries of practice?
- What is the purpose of the supervision offered at GW and is this considered Therapy?
- Is GW based on the assumption that practical skill development aids mental health recovery?
- To what extents do volunteer's value gaining such practical skills in their mental health recovery?

Phase two of the research provided clarity of understanding to some of these questions. However, a greater exploration of these questions is recommended.

Theme	Number of volunteers
NVQ	20
Tractor training	18
Increase days	11
Training courses	10
Keep coming to GW	9
NVQ2	8
Employment	8
Social interaction	8
Learning	6
Pace self	4
Confidence and self-belief	4
Reduce anxiety / stress management	4
Physical fitness/stamina	3

Table 5. Volunteer goals recorded in supervision notes

Phase two findings

The majority of key themes emerging from the interviews mapped onto the top key themes which had emerged from phase one. These are discussed in turn below. This provided greater understanding and clarity of the impact GW had on volunteers.

Social interaction

Social interaction was the most frequently stated gain and challenge for volunteers. Several volunteers spoke of the difficulties they had with social interaction through mental illness. Therefore, coming into such a social setting was commonly problematic. One volunteer explained,

"When I first arrived and went in there [yurt] and I couldn't talk to people, I wasn't even that interested in other people [laugh]. I know that sounds awful, but, you know I didn't want to know about their lives and what they're doing. I just wanted them to know how much I hurt and you know and I thought urgh! I couldn't remember anybody's name or anything. And now, you get to know people and their ways and I am interested. You know I want to know about [volunteer's name's] [activity], or what [they] did last week. It's a tough one to crack, but...it's tough. And to make yourself go back the next week, instead of just, going off and doing something on your own, you know you have to interact. It's not easy, but..."

Several volunteers specifically described "walking through the door" as being the biggest challenge. This was explained below by a volunteer:

"Walking through the door was the biggest challenge. Day one. I knew once I got over that, it wouldn't be a problem. But for [number] years of my life, I've gone into cold meetings, walking through the door has always been the biggest challenge. But in my career, I walk through the door and I knew what I was going to talk about, but coming here, what do you do? You assume everyone's in the same boat as you. You watch films, don't you, and you think is it going to be like that? You just don't know, you have no idea. And so when I first walked around and I spent half a day here, once I'd got over that, I knew it was for me. So that was my biggest challenge. Walking through the door was the most difficult, because it would be easy to sit at home and feel sorry for yourself really."

GW are about to integrate a more formal co-working system, or "buddy system" to help with this challenge. Some volunteers commented how they thought this was a very good idea. However one volunteer had reservations worth noting:

"It's been suggested that some well experienced volunteers could actually take on the role of inducting people. Whilst I'm...well I'm reserved about that. I think the key thing here is about the way people approach coming and I don't think there's any substitute for people who have grown with the project from the word go for doing the induction. I don't think I could possibly do the induction and I may well be asked, I don't know. If I am asked, I would say no, I would rather not. On the basis that I want other people to get out of this project what I have. If I make the introduction and do the induction and show them where things

are and health and safety things... I don't think it would come across the same as if James did it, or Havel, or Val, or Alix did it."

Once volunteers have overcome the challenges of walking through the door, there were still social challenges to their involvement. This was exemplified by one volunteer, who stated,

"And when I first started I found a lot of the other volunteers quite hard to cope with...I felt like they were all bossing me about. But really when I look back and I've seen them with new people that have come in, they're not at all. They're being really helpful and nice! But it's that sort of paranoia I think. You're thinking's a bit twisted. So that was a challenge. And we have had some, challenging, volunteers. If they're not people that you are used to dealing with, that have had different kind of backgrounds to you...that can be quite hard. Because you want them to get better and get what they need out of it, but...I don't think I need that...that's been a hard thing."

Volunteers described being initially attracted to GW because of the "opportunity to meet new people" and how "talking to other volunteers might be good for me". This is further demonstrated by one volunteer, who said,

"Some weeks I think, urgh, I don't want to go, but there's the social side of things. I'd completely cut myself off from the world; got bullied out of my last job. So most of the staff I used to work with were my social circle as well. So they didn't want anything to do with me anymore...I was really lonely and isolated...So that social part of it, just coming here and I've got someone to tell my news to."

This was also referred to as the enjoyment of being part of a team, with a collective goal. This was frequently described as relaxed, friendly and the people as easy to get on with. A significant part of this social process was commonly stated to be "Nobody's judging you". One volunteer commented,

"Going back a year and a half, you'd think oh why can't I cope with this and how embarrassing this is and you thought everyone was judging you. But there are so many people from so many different backgrounds. And I'm staggered that some of the people here and what I know is absolutely amazing. You know there's one [person] who hasn't worked for ten years. I could just imagine how low your self-esteem gets, when I haven't done it for six or seven months."

The above quotation also shows the value volunteers gained from relating to others' situations.

Several volunteers described the social interaction as an informal therapeutic process:

"I mean we don't sit around and talk about all our problems and how depressed we were...So I think it just brings you out of your illness, because you spend so much time in your head, cut off from the world. The only contact you get with the outside world is 'This Morning' or 'Loraine Kelly' [laugh]. So I think you step out of your own problems and out of your own head and see the world again. And just spending time, you know, we're social beings aren't we and it's good for us."

"It's nice to share those experiences with people. Not quizzing or interrogating, but it just comes out doesn't it? If you're working with somebody in the field all day long, you've got to talk about something, haven't you. It absolutely staggers me now that you're not the only one...But again, you just share what you want to share and if you don't want to share it, you don't share it."

This therapeutic process is discussed further below.

Positive feelings of self

Closely linked to social interaction, volunteers frequently described both initially wanting to gain confidence, as well as actually gaining confidence. One volunteer described their initial goal of coming to GW:

"I wanted to get my confidence back, in terms of talking to people that I don't know and mixing with people because I'd not done that for seven or eight months...And I just wondered if I'd lost those kinds of skills in a different environment. That's what I desperately wanted to get out of coming."

However, confidence and positive feelings of self were not just gained from social interaction. One volunteer explained this from a different perspective:

"I remember that back in the past I had lots of skills that I could share, but would they [GW] trust me, that was the thing? ...It was good to be involved...and as time went on, I found myself really enjoying that and I think that was part of getting better too. I was able to do something – I've thought about this a lot. At that time I realised how much I would enjoy it. I had things to offer...It made me feel valued. And that's where Growing Well does so well, it makes you feel valued, even if you don't feel valuable."

Several people stated how they wanted to develop confidence in order to regain employment. This is discussed in greater detail below with regards to GW being a stepping stone.

Routine, structure, purpose

GW clearly provides an important "anchor" point for volunteers. The importance of this in mental health recovery is described below by several volunteers from their unique perspectives:

"When I was off, I was signed off work for a whole year...and you can't even, like some days, just to get dressed was too much, you know. I couldn't even get out of bed. And that was the other thing, just to get some routine. I mean I couldn't get out of bed before one o'clock...I was quite open minded, I think I just wanted a reason to get out there, to get up in the morning. And that's helped. I started on afternoons because I couldn't get up. And now I'm here [mornings at 9.30]. I didn't know what it would do for me, but I just wanted to get out of bed."

"I was bored at home and needed something else to do...for four years I didn't leave the house really...I wasn't doing anything...I had no routine before."

"It is something to do – a routine. I wasn't working and I was up late watching films, so I couldn't get up early. This makes you feel better about yourself. I'm getting up early in the morning. I need to take my pills earlier in the evening so I'm not up so late. I need to put that into my routine."

"So I think that's really put some structure into my life really. So that's mainly what I've got out of it, some kind of structure. I had trains going everywhere, but I'm now reasonably on the right line!"

"I just feel more fulfilled; its brought a focus to me week; I've got a structure for me self, going forward, what I want to do... so it's kind of like put some kind of structure back into me life, but stress free... It's a discipline to the day as well."

Having a purpose to get up for and adding structure and routine to people's lives is a significant feature of GW's impact. Several volunteers further related this to a "stepping stone" to employment. They stated that they were perhaps not ready to return to work, but GW was a stepping stone towards employment.

"I wasn't well enough to go back to work, but I didn't want to stay off work forever. It's like an in-between. Because you beat yourself up for being lazy and you're not lazy, you're just really not well. But to go out and get a job and there's all these big changes and you're not thinking straight and your body's not working and, I don't know. It's like when you come here, you're expected to work. When you first start, some of the work is physically exhausting and demanding, but you want to do it. It's really weird but like, here, I could spend all morning weeding and I want to keep going and I want to do a good job. But at home, I'll think ah no! I'm not going to bother! It's really strange, how it happens. Yeah, there's a work ethic, but you're not forced to do something, like if you have a go at something and you can't do it, you beat yourself up a little bit, but you soon learn that no one else is and it's fine."

"So I'm kind of getting back to some worthwhile employment in the future. But this has kind of like given me an anchor; it's given me a focus and I'm sort of building the rest of my life around it really."

"I think for me, if I'd gone and got a part time paid job, straight off, I think I, that wouldn't have suited me. I needed to kind of like consolidate where I am, rather than too much challenge straight away. And that's what I've got out of here. It's allowed me to consolidate and get me life together and get some kind of platform to go forward. So that's the biggest thing, some stability. Going back six or seven months I just didn't have any focus at all."

One volunteer gave more specific detail of the importance of learning independence in this process:

"Also, it is a farm and a working environment and I was frightened of doing things wrong. You are supervised, but you're not. It's not somebody one to one with you. You've got to take that leap to be independent and do things for yourself and make decisions and there's a lot to learn about the routines and things."

Working at own pace

The interviews expanded on the theme of 'working at own pace', developed within the first phase of the research. This provided more breadth and depth in understanding.

Several volunteers appreciated the flexibility afforded in their attendance at GW:

"It's open to what you need.... As long as this is happening, the well-being, you're welcome to come as you want...on and off too. People have a break and need to come back for some reason; they're welcome to come back."

"If I don't want to come here, I can stop when I want."

This appreciation of flexibility was extended to work expectations once at GW:

"You've got the choice. No one's stood over you, making sure you're working the whole day. If you need a cup of tea, or just to get away, you can."

"It's nice working on your own if you want a bit of peace and quiet. There's no pressure. It's nice you can go along and say, *I don't fancy doing that today, can I do something else?* And there's some flexibility."

In relation to this, some volunteers described the importance of no pressure being put upon them:

"There's no pressure. If you're slow you're slow and you're not judged. You just get on with it. And if you do it wrong, it's wrong. You just do it again. Whereas coming from the life I've come from, if you do it wrong, you'd never get any more work! So it's a massive difference for me...it's just a different life; a proper night's sleep; my days are better quality; my home life's a lot better quality and I've got my own space; I'm not having to answer to somebody all the time."

"If you want to rise to the opportunity you can take the lead in things as well. Where you actually know a bit more than somebody else....But no real pressure, but you can actually add something. They said there's no pressure to give anything back at all. And that's another good thing, because I come from a background where you always feel you need to be doing something."

This flexibility and lack of pressure was related to by some volunteers, suggesting how GW was a safe space for them to recover their mental health and grow and develop:

"Safe place, you know, my happy place."

"Generally the ambiance. It's a cosy environment to be in. It's protective, so I think that's, there's nothing to be frightened of, so that's the great thing really."

Therapeutic support

Several volunteers described how GW had been a form of rehabilitation for them. There was wide acknowledgement of the uniqueness of support gained through GW. This uniqueness was exemplified by volunteers stating,

"I was seeing a chap in [name of place] but it was just a weekly half hour chat. Nothing like this was ever suggested at all. It wasn't until I moved that I found there was anything like this going on. It's not something that anybody in [name of place] had suggested. No body suggested working for a voluntary organisation."

"It's quite refreshing, because there are a lot of things open to you and you get a certain amount of time, if you sign up. You're there for a certain amount of time. You don't get kicked off but you've got your slot."

Phase one questioned the therapeutic boundaries of GW. This theme also developed through the interviews. Volunteers shared mixed experiences of the therapeutic nature of GW. Diverse opinions were offered in regard to the therapeutic support available through GW. Some people felt GW should retain its difference to other forms of therapeutic support and valued the informal and "natural" approach GW offered:

"I had counsellors that worked for the NHS that didn't help. This is the first thing that did work. I have problems with speaking and so speaking to counsellors doesn't help! So coming here you are just surrounded by people and it just works."

Some volunteers felt that GW had complimented other forms of therapeutic support they were getting:

"I've had a whole series of occupational therapy. This [GW] and that have worked really well together. Because that's given me a bit of focus and tools to manage my stress levels. And then this has really meshed together. So I think both together have been really good for me. I think the telephone support and things would have maybe not helped me so much if I didn't have this to relate to. So it's all been good, but in isolation that wouldn't have been very good. And, I think in isolation maybe this wouldn't as well. But together its really worked well."

In answer to some of the questions unearthed in Phase one, volunteers were showing that they valued gaining practical skills in their mental health recovery:

"And I think that's helped me because I think that's tapped back into the academic side of me. And I think that's what spurred me on to do [a course outside of GW] because I thought oh my brain does work actually, so that was good."

"It [NVQ] takes the focus off the therapy side of things. You're learning valuable skills and you're helping them sell crop shares. And I think I am qualified to do that, I know what I'm doing actually."

"That was the first thing I'd done in years and years where I learned something and got a piece of paper for it [tractor training]. It meant so much...It's like achieving things that are so

small. Like a level one is well less than a GCSE...but it was a completely different subject for me. And those things have stuck."

Volunteers also distinguished these practical skills from personal skills. For example,

"The ones [goals] I set here were things like I want to drive a tractor and I want to get an NVQ...so those were like practical skills goals. Whereas the goals that [Therapist] was setting was, kind of like, we went through a questionnaire, and every four weeks we marked me as to, well, things like how much is my stress level affecting my everyday life; what impact is it having on my home life; And things like that. So she was kind of like giving me ideas and tools to do this..."

"So Growing Well is practical, you know new skills to deal with things, social behaviour and getting your confidence back and that kind of thing. Whereas the support from [Therapist] has been, you know, recognising the signs of stress. How to deal with it and the fact that you might have flashbacks and whatever. I mean going back six months I wasn't sleeping at all, just worrying, all the time, about everything, absolutely everything. And she's kind of got me through that."

Some volunteers thought more therapeutic support should be integrated within GW:

"I think it could but I don't know. Like I know we have the supervision with Alix, or it was Val. But I think, from personal experience this is, something like that would be absolutely excellent. Because I've got so much out of it. It's just the tools for dealing, recognising, the signs, how to deal with it."

"But I can see if that was an ability, that kind of session, as being absolutely fantastic. For me it has, very much so. I'm not sure, I know I sit with Alix or whatever, but I'm not sure what qualifications, what skills, like I don't know if those skills are already in Growing Well and they're not used. And I don't particularly want to ask either, because I've got my own bit [therapy outside of GW]; I don't need that support. But I can see, I know I've got so much out of that support, that maybe other people could."

One longer term volunteer specifically valued the therapeutic support they gained from Beren in their earlier supervisions and paid huge respect to Beren specifically as a Therapist. In comparing GW to other places they had volunteered, they stated,

"This is supervised all the way. And Beren was doing the supervision then and Beren is a very very well trained Counsellor and that made a huge difference, having someone to offload on, who didn't judge."

Further to this, several volunteers showed a lack of understanding of the use of the WEMWBS. Some volunteers liked it and some did not:

"I think it's a good measure, in terms of how Growing Well use it."

"It's a useful guide to measure progress. How you're feeling and if you're improving. If your well-being is better or worse."

"I think just the process of ticking on the scale and thinking and I suppose it does help you face the fact that I'm having a really low day actually. And seeing it in black and white on paper, you think, I think you beat yourself up a little bit less, because the scale's there for people to show what they're feeling and what's going on. So I think it helps you face the fact that you're having a low point. But also, if you see it's all at the top end, you'll see, oh actually, things are going ok for me at the moment. So I think that's more useful than a number anyway."

"I thought it was a bit bland actually. It was a bit of a tick box and I'm not really in favour of tick boxes. It's like oh god I've got to do one of these again. Oh what did I say last time? But I understand the reason for it. I think it's to see that the volunteers are actually getting something out of it and that it's on an improving curve."

"I think they're more useful for the institution than the individual."

Some volunteers showed further scepticism of the scale and an uncertainty of the point of it:

"I'd hope that somebody takes them and looks at the trend. And then maybe says, oh that trend's in the wrong direction; we need to sort like an intervention policy. But I don't know what happens to it. I fill it out, I think I sign it, and the supervisor signs it, but I don't know what then happens to it. But my experience in my career is that tick boxes just get filed away and nobody looks at them. I would hope that if a volunteer's been here for six months, the fact that a trend is going in the wrong direction, then there might be some kind of like intervention. If it's going in the other direction, then that's fine, but I don't know what happens to that data...I hope somebody's doing something with it."

"I think if they're using it well...if you're using it as a measure you should relook at the results over the period of time. So if they improved markedly over the period of a year you could claim some merit in that. Saying whatever we are doing, we seem to be doing it right because he hasn't felt suicidal for the last six months. Or he's felt confident most of the time for the last six months. So I would hope that they would do that..."

When questioned further, volunteers stated that they had not received feedback from filling in the scale and the only way they gained from this was to try and remember what they got last time. This highlights a need for the purpose of the WEMWBS to be made clearer to the volunteers.

Volunteers also suggested that the survey could be used as more of a therapeutic tool, rather than a means of gathering data.

"...Other than personally recognising that when I started filling them in I was always on the negative side. In some ways it's self-fulfilling....there isn't any feedback that comes directly from the project. Maybe that would be a case. If they scored them in some way using a computer database..."

"It would be useful to see, rather than relying on memory. To see progress in front of me. Maybe once a month."

"An example is [Counsellor] said what effect is perfectionism having on your general life? And I said, well it's one of the biggest hurdles I know we've got to get over and I don't know how to get over it. And she then concentrated a whole session on that. And then we've reviewed that as we've gone on....and I've gone from a two to a seven....and the way we've got there is she's sort of coached me to deal with...There's probably about 12 different things she used to ask me. It wasn't every session; it was every four to six weeks, as a review to where we were. Then she'd say to me, what would you like to concentrate on for the next session, is there anything particular you want to do?"

The impact of the natural environment

Phase one of the research showed little reference to the impact of the natural environment, the outdoors or horticulture. This was surprising because this is perhaps part of GW's uniqueness. However, the interviews in Phase two showed a great deal of emphasis on the importance of the natural environment. This was perhaps implicit within the data from the supervision notes; an unspoken or taken for granted part of GW. During the interviews the volunteers' frequent reference to the natural environment was more explicit.

Volunteers felt that GW offered them a healthy environment, compared to unhealthy environments, some which had contributed to their mental health:

"Part of what made me unwell was the environment I was living in. No wonder I was anxious, there was an estate near me, somebody got knifed, somebody got shot and it got to the point where I was getting a bit agoraphobic and scared to go out. It just wasn't for me and I was very depressed. I couldn't go to work anymore. I was putting on weight because of the medication and I was inactive. So this ticked loads of the boxes for me, because it was outdoors, something back in this environment, back with nature, just getting your hands in the soil."

"Working with something natural as well, that makes a difference. I've sat at a desk in an office, even though I was on building sites, and seeing things being built, I actually wasn't doing it...but actually now dealing with something that's physical and growing, is a world away from what I did. I think if there was an opportunity for you to go and work in an office doing a database, I would not have been enthused by that what so ever. Not that I couldn't do it, but the attraction was, outside, in the muck and the slurry, getting dirty. Because I like walking and that kind of thing, so that doesn't faze me at all. So that was one of the original attractions, yeah. I think it takes me back to childhood actually...getting back to the outdoors, brings back all those good memories. Gives your soul a bit of spirit really. That's really why it's attractive."

The comparison offered by the volunteer above was shared by other volunteers, describing the uniqueness that the environment offers in mental health recovery:

"I've been through lots of counselling and therapy and services, at the start, or since I was 16 to be honest, I've struggled with depression and anxiety in particular. So I've been through a lot and I don't know, but I think the thing what's special about this is that you can go and sit

and explore what's going on for you with someone. That's really important. But sometimes, I think especially with CBT, I think, I know I do, I over analyse myself and what I'm thinking. I can go home after a CBT session and instead of thinking oh yes, I'm going to work on that and that's going to change my thinking, I go home and think, you idiot, you're doing that again and you can beat yourself up with it. Whereas I think with here, the focus is, well you're here to get better, but the focus goes out of your mind and on to something else. And you care about the crop share going out, complete and on time. And you care about doing a good job with the plants and looking after them...you might do some seed sowing and then the next week you come and it's in the top polytunnel and the seedlings are growing and you can go and stroke them and look at them and talk to them [laugh]. You can see them grow and you want them to do well and all of a sudden your focus has gone off all your problems and your difficulties and it's on a bigger picture of how you fit into a system; into a world outside of your own head. And what you do has an impact. When something you've sown, then you're picking it out on the field, for someone to enjoy in their crop share bag, you can't help but feel good about yourself really I think."

"The outdoors stimulates my mind...getting out in the fresh air stimulated my mind."

"I've been to a few places and there's not much outdoor activity. There's some walks, but you're not learning much. But it's still therapeutic. It's a setting...a different environment. It works in harmony."

"I enjoy working outdoors. In nature. Never really had the opportunity. Digging up potatoes in nature...it's peaceful and therapeutic."

Several volunteers described a metaphorical link between their own growth and that of the plants:

"A place that nurtures people, not just nurtures the plants."

"The organic effect."

"I've never really been in to organics, it's never really something I thought about that much before but it's becoming something that I care about. The way the world works and the way food is delivered. And it's opened a new part of me. But I think, things just grow. Like they're surrounded by weeds, but they're there and they come up and then some lovely produce, despite all the weeds, because we haven't sprayed them with rubbish. Things will grow even in difficult conditions. I suppose it's a metaphor isn't it."

"I think that the polytunnels are long; the fields are big; once you know what you're doing in the job, if you want to wander off to the other end of the bed and just get on with something on your own, then you can. Nobody takes it the wrong way, you know, if you're in a place of work and you're getting paid, if you're having an off day, then everybody's on you, saying what's wrong with you, you know and you have to stick in your team or whatever. Whereas here, somebody might say, are you ok, you don't seems yourself? You can say, I'm not feeling so good today and nobody judges you, they understand. It all seems so natural though, that's the thing. Nobody sits down and says, you must do this, or you must do that. I know this might sound cheesy, but it is sort of organic. I know this is organic farming but things seem to grow organically, it's just natural. Things just seem to grow." It appeared that nurturing plants enabled volunteers to understand how to nurture themselves. Several volunteers related the natural environment to physical wellness, which in turn affects mental health:

"I've done a little bit of activity today and I actually feel a bit better about myself and then you do a bit more activity..."

"[Got out of it] Some energy I think. Some energy for life."

"It's a nicer kind of tired. I was mentally exhausted and physically unfit. And now I'm, I go from here and I'm tired, but that's because you've done a physical day's work, rather than pushing buttons on a computer. It's a different kind of tired for me. A healthy tired. A proper night's sleep."

"...also for the activity side of things, to get some weight off and get my physical health back up. And also, all in a very nurturing environment."

"I think sometimes as well, you haven't slept and your minds been going all night; just to come here and start digging, you know, that physical tiredness you get as well from what you're doing. You go home and you can't help but nurture yourself. You go home and you have a hot bath and you have something nice and hot to eat, you get an early night with a hot water bottle and you're looking after yourself because you're knackered, but it's good for you."

Conclusions and recommendations

Analysis of the volunteers' WEMWBS revealed that 76% of volunteers showed an increase in wellbeing at some point during their involvement with GW in 2012. 36% showed a decrease from beginning to end (or last point of data collection). However, some of these did show increased scores at some point during this period.

This suggests that volunteers do not always show a straightforward increase in well-being in their recovery of mental health. Volunteers' scores show fluctuations; gradual progress as well as periods of acceleration and decline. Further analysis of scores of a wider sample size, from 2010 and 2011 data, may help by providing wider trends.

This also alerts us to not rely solely on the WEMWBS to show the impact of GW on volunteers. The qualitative data described provided greater insight into the impact.

Qualitative data revealed that GW offers an intervention that is incredibly well valued by the participating volunteers. Clear positive impact was shown with regard to volunteers' well-being and mental health recovery. Volunteers value GW as a unique experience and distinguish this from other forms of mental health support.

Clear areas of strength and development were identified through the research process. These are summarised below.

Areas of strength

Social interaction – Overall, this had the greatest impact on the volunteers. They gained from the opportunity to start to interact with others in a non-formal and non-judgemental environment. This was significant in direct relation to how typically they had been cut off/cut themselves off through their mental illness. This led to volunteers feeling less isolated and developing their capacity to build relationships. This interaction took the focus off of their mental illness. They described feeling empathy towards and from others. The impact of this was to gain confidence to speak to people and socialise with people, both at GW and in their lives away from GW. GW, in this sense, provided a safe place for people to start/continue to interact and socialise.

However, it is important to note that this was also the biggest challenge for volunteers. It is significant that we do not know how many people did not volunteer at GW because of how challenging they found the social interaction. The buddy system is a strength, as it shows GW being proactive towards this negative impact. It will be interesting to see how well the buddy system supports new volunteers.

Positive feelings of self – Volunteers showed positive feelings of worth within their supervision notes. These included confidence, resilience, self-esteem, motivation, pride, and fulfilment. During the interviews, volunteers described in greater depth a growth in confidence (particularly though the social interaction discussed above). They also described gaining positive feelings of worth through feeling trusted and valued. These appeared to have been lost through mental illness. This had a significant impact on the recovery of mental health as well as in applying positive feelings to other areas of their life, for example, regaining employment.

Routine – Volunteers regained routine, structure and purpose through coming to GW. This was through a commitment to attending GW at a certain time, on a certain day. GW provided something to focus on. Volunteers had commonly struggled with these areas through their mental health problems. Most described a problem with being able to get out of bed, or out of the house. Volunteers widely expressed the important impact that having routine, structure or purpose had on their wider lives. Many further described this as an important stepping stone back into a functioning life and significantly towards regaining employment.

Flexibility – The openness and flexibility that GW provides has a positive impact on volunteers. This was described with regard to attendance and work expectations once at GW. This area, coupled with the positive feelings of self above, shows the importance of responsibility, autonomy and self-efficacy. The amount of flexibility afforded does not encourage dependency, which in turn allows volunteers the opportunity to take responsibility for themselves; developing agency in their recovery from mental health issues.

Training – the opportunity to train, learn new skills and gain a qualification was shown to have an impact on volunteers' well-being and mental health. This was important as volunteers had typically

been unable to work during their mental illness. This led to volunteers having something to focus their mind on; feeling as though they had knowledge; and a sense of achievement gained in achieving a qualification.

Natural environment – The impact of being outdoors, in nature, helping things grow, was described by many volunteers as a critical part of what they gained from GW. For many this was distinguished as a unique feature. This was described by many volunteers as leading to increased physical fitness and physical well-being. This, in turn, was associated to mental health and well-being. The natural environment appeared to have a therapeutic impact on volunteers with a sense of connection to nature and feeling of safety that came with this.

Areas of development

The research has unearthed some critical questions that lead to a need to explore some of the assumptions that GW is based around.

What are GW's boundaries of practice? There appears to be some uncertainty from volunteers as to the therapeutic intent of GW. This may be because GW is flexible and wants to be whatever volunteers need it to be. However, it may be useful to explore the therapeutic assumptions of GW and the volunteer's expectations. Some volunteers valued the informal nature of GW, whereas others were requesting more formal therapeutic support within supervision. This may be attributed to the changes in GW staff doing the supervision. These critical questions will be important to consider through this transition of staff and the development of new supervisory relationships.

It would be interesting to map what other forms of support volunteers are accessing prior to or alongside GW? This could aid the understanding of how GW supports mental health recovery.

Volunteers showed value in gaining practical skills in their mental health recovery. However, there appeared to be less emphasis on personal development and more emphasis on practical skill development when goal setting within supervision. Further reflection may help develop understanding as to the role of practical skill development and goal setting in the volunteer's mental health recovery. This reflection should question whether there is a need to refocus on to personal development and goal setting within supervisions.

What is the purpose of the WEMWBS? The WEMWBS can be easily developed to serve two functions: Firstly, to provide a big picture understanding of volunteers' levels of well-being throughout their involvement with GW. This will allow GW to demonstrate cross volunteer trends and evidence the value of its work. However, there should be caution of using this measure in isolation, as it doesn't allow the subjectivity of volunteers' mental health recovery or uniqueness of GW's impact to be shown. A basic system could be put in place for regular analysis to show big picture understanding and to demonstrate trends and impact. Further analysis of individual elements of the WEMWBS may allow more detailed trends to be demonstrated. For example, it would be interesting to see if the element "interest in other people" shows more of an increase than other elements, to match how frequently the benefits of social interaction were referred to in the qualitative data.

Secondly, the WEMWBS could be used as a more active therapeutic tool within supervisions. This would provide a visual aid and anchor for volunteers to relate to. Scores could be analysed with the volunteer and areas of growth and decline could be discussed. This could form the basis of their goal setting and could help integrate more personal goals with practical goals. More detailed goals could also be measured (qualitatively and quantitatively) to show distance travelled. This would be of individual benefit as well as of organisational benefit to show more subjective trends and impact.

One volunteer's summary of GW provides an inspiring conclusion to this report:

"I always had something that was consistent, non-judgemental, very clear, valued me for who I was and all the things I did wrong, or right. And that was here, that was Growing Well."