

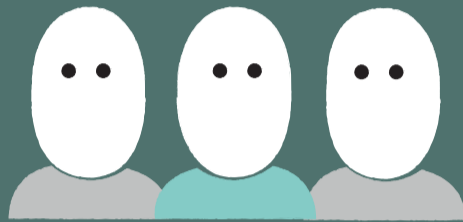
COMMUNITY LEARNING

MENTAL HEALTH PROJECT

The Community Learning Mental Health research project tested whether non-formal adult learning can support people to manage mental health problems like anxiety and depression.

WHO took part in the project?

Over 23,000 people took part in the project



One in three were not receiving any other support for their mental health.

Socially and economically disadvantaged people took part

No qualifications



Employed

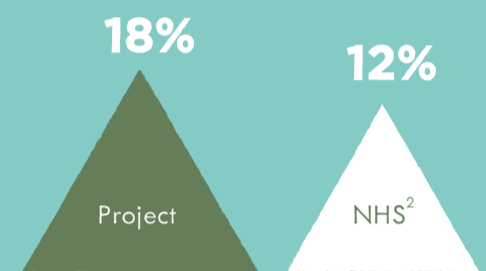


Unemployed or unable to work due to illness¹



A more representative range of ethnicities

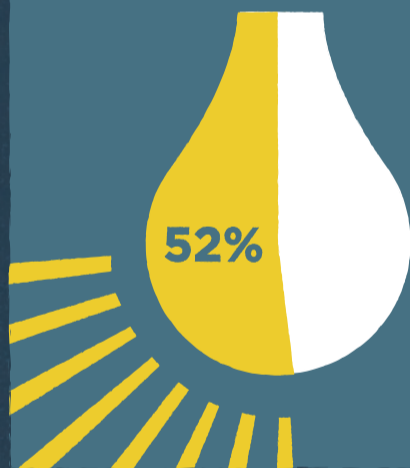
(compared with people using NHS mental health services)



People from ethnic minority backgrounds

What DIFFERENCE did the project make to people?

Half of people said they would go on to further learning



Positive changes in people's lives³

Health and wellbeing



Communication and relationships



Opportunity and things to do



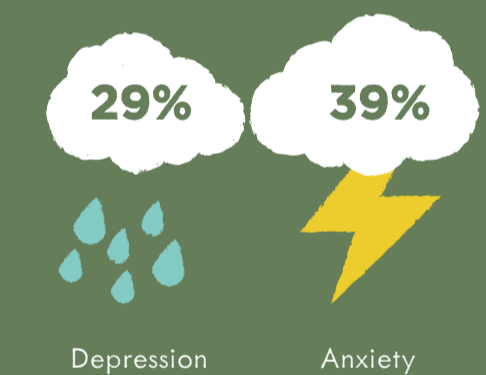
Learning and skills



Confidence and positive thinking



Improvements⁴ in people's symptoms of depression or anxiety



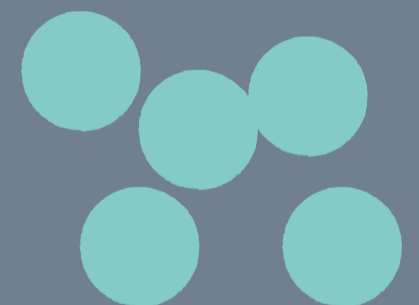
What were the REASONS for this?



The courses allowed them to relax and focus on something positive



An opportunity to learn something new, which gave them a sense of achievement



People felt less isolated through meeting other people in a similar situation



Department for Education



Ipsos MORI

Source: Ipsos MORI analysis of DfE survey data; Ipsos MORI interviews with learners.

Bases: sizes vary, but up to 10,200 learners from phase two of the project who completed a survey.

¹ 17% unemployed and 19% unable to work – doesn't sum due to rounding.

² Psychological Therapies: Annual Report on use of IAPT Services 2015/16. Base is all IAPT patients starting a course of treatment in England.

³ In response to being asked - what changed the most? Figures sum to more than 100 as some learners described more than one positive change.

⁴ Learners reported their symptoms of depression or anxiety using the PHQ-9 and GAD-7 self-assessment scales, which produce a numerical score. Research has identified the minimum change in scores which can be interpreted as a genuine sign of recovery. Learners whose scores improved by this amount or more were recorded as experiencing significant improvement in their symptoms.