

LAMBETH PREVENTION AND PROMOTION FOR BETTER MENTAL HEALTH

A Realist Evaluation of a Prevention and Promotion for Better
Mental Health programme: the Black Men's Consortium (BMC).

Briefing Report - July 2024



Katherine Brown, Olujoke Fakoya, Imogen Freethy, Laura Lamming, Nigel Lloyd,
Katherine Barrett, Lisa Miners, Adam Wagner, and Professor Julia Jones.

PHIRST | Connect

**This report contains transcripts of interviews conducted in the course of the research and contains language which may offend some readers.*

CONTENTS

Background

1

Programme Theory 1

3

Programme Theory 2

4

Programme Theory 3

5

Programme Theory 4

6

Conclusions

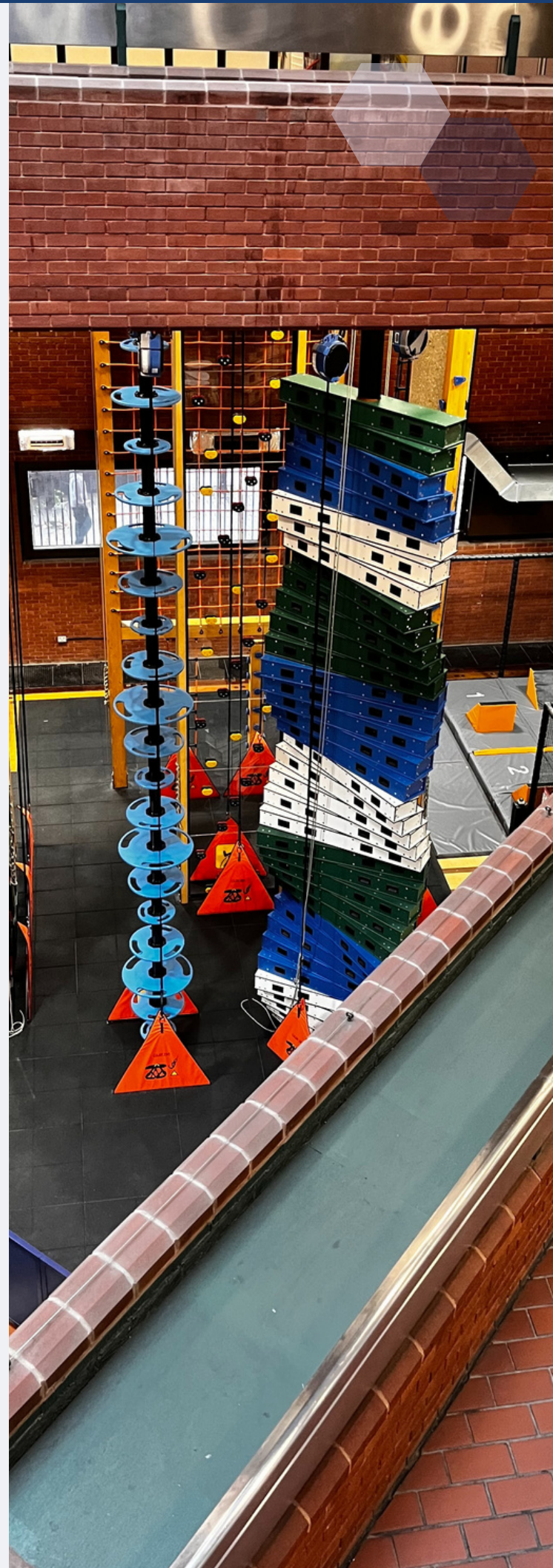
7

Recommendations

9

References

10



THE BLACK MEN'S CONSORTIUM

Background

Increasing numbers of people around the world have been struggling with mental health problems like depression and anxiety (World Health Organization, 2022). Poor mental health contributes significantly to the number of people who live with disabilities, and suicide is the second leading cause of death for adults up to age 29 (WHO, 2022). The recent COVID-19 pandemic made things even harder for people's mental health. Those with least money or resources have been some of the most severely affected by poor mental health since the pandemic (The Lancet Public Health, 2020).

In the UK, 22% more working-age adults are now out of work because of long-term mental illness or nervous disorders compared to before the pandemic started (Office for National Statistics, 2022). People from Black, Asian and other minority ethnic backgrounds are known to have struggled more with their mental health during the pandemic than their white British counterparts, due in part to increased experience of stigma and racism (Gillard et al., 2021) and a higher likelihood of problems with housing, jobs and finances caused by the pandemic (Mind, 2020). Long-standing inequality of access to mental healthcare and unequal treatment within the healthcare system are also common for minority ethnic groups (Barkhuizen et al., 2020; Koodun et al., 2021). People from ethnic minorities, including Black men, are more likely to experience coercive forms of treatment (e.g. sectioning; Barkhuizen et al., 2021) and there have been calls for more culturally sensitive care in the mental health sector (Winsper et al., 2023).

The Prevention and Promotion for Better Mental Health and Wellbeing programme, funded by former Public Health England, was launched in Lambeth in September 2021 to provide support to residents and groups who may most need it, in response to the effects of the COVID-19 pandemic. The programme was made up of nine individual projects that sought to reach different groups to improve mental health and wellbeing. One of these was the Black Men's Consortium (BMC).

The BMC is a community-based initiative, originally set-up in 2018, aimed at promoting mental health and well-being among working-age Black men. This project employs arts-based methods to support mental health, well-being, and the daily challenges faced by its members. Following a series of weekly sessions that commenced in September 2021, the participants created podcasts and a dramatic performance, which were subsequently presented in December of the same year.



Aims

This research aimed to identify factors that contribute to the programme's ability to reach, engage and bring about change in or support for mental wellbeing for Black Men in Lambeth. It also aimed to understand which factors support sustainability and maintenance of the programme and its effects.

Methods

This project used a Realist Evaluation methodology. For detail see the Methods briefing for the wider project [here](#). In brief, Realist Evaluation involves the development of 'theories' based on existing evidence and stakeholder discussions about how a programme works, for whom and in what circumstances. The theories are generated in terms of contexts (that exist anyway), mechanisms (resources of a programme and the way people react to them) and outcomes (an impact or change created by interactions between contexts and mechanisms). The theories are 'tested' in interviews with people who have organised, delivered or experienced the programme. Each interviewee is an expert in their own experience of the programme and provides unique insight. The initial theories are revised based on interviewees' evidence. Initial programme theories, the full revised theories and their summaries for the Black Men's Consortium can be accessed [here](#). Below, summaries of the revised theories are presented, which explain factors associated with reach, engagement, change and sustainability of the programme. Extracts from interviews are provided to illustrate each programme theory.





PROGRAMME THEORY 1: SAFETY



Context: For those feeling marginalised or isolated or any sense of need.

Mechanism (Resource): the BMC provides an opportunity to share experiences without judgement, and an opportunity to learn from others.

Mechanism (Reaction): This makes men feel safe, heard and understood, a new sense of connection reduces the experience of stress.

Outcome: Members experience personal growth and healing which builds resilience and supports wellbeing.

Alternative Reaction and Outcome: However, not everyone feels able to share and connect. There is turnover of participants. Those with more severe mental health problems may feel least able to connect and are likely to need alternative or additional support.

“...you hear people say that they couldn't talk about this with their partners or with their family, whatever, but they're able to do it here in the session, and so I think for some people it's, they even said it's kind of saved their life...maybe they had an experience in therapy, or hospitals where they felt anger, but that through the group, at least in the group moment, you know, they were able to see what it felt like not to be angry, to not be depressed, you know? At least for those three hours.”

BMC Participant 1

“Coming to the BMC, I was in an unfamiliar, unsafe zone, for me. But that, that unsafe zone flipped its caller because I felt so safe and so comfortable, being with people of colour who, who were, some were British born and some weren't British born and that was out of my comfort zone. I've never been in that environment for a long period of time, and I've learnt so much integrating and mixing with my peers but of a different generation, different background. And this is the only forum where I still do that, and it's taught me a lot.”

BMC participant 2

“the turnover for BMC is usually quite quick, we don't have sustainability. We'll start the course off with about twenty people and towards the end of it a production, and the next time round we'd have a full cohort of new people.... There's another guy who comes to the BMC, and he's been coming for a long time, and he's going through some ups and downs like, but he's always, every week he comes in, he's [serious mental health problem], so, he needs support in a group, but also in the group itself, we're not trained therapists, we're not trained anything...”

BMC Participant 3



PROGRAMME THEORY 2: SOLIDARITY

Context: If mainstream services are not meeting a particular groups' needs (in this case, working age Black Men) an opportunity that is just for that group in a community setting looking at the issue of mental health may appeal.

Mechanism (Resource): The programme offers the opportunity to share experiences of prejudice with people who may have had similar experiences which can **Mechanism (Reaction):** enhance bonding and a sense of solidarity.

Outcome: Racism is less likely to be internalised and constructive ways to contribute to change are built together.

Alternative Mechanism and Outcome: However, the focus on racism needs to account for different experiences (and avoid stereotyping) and other types of prejudice (e.g. homophobia) and reach to younger Black men is limited. Disagreements can sometimes occur, and the difficult subject matters may lead to disengagement for some.



“the thing is we're all black and brown people, that's one thing, and we're all men as far as I'm aware, and so that is already, you know, deep connections that men can have, I don't know again to what extent, experience that having mental health problems can have, a greater connection with the men or not, I think a lot of them come there because they're looking for friendship, you know, it removes that isolation, it helps to build confidence, it helps them to see and listen and be emotionally held by other men, and that, all of that comes through the work that they do.”

BMC facilitator

“I can have a really bad day and when people ask me “oh how was work?” I tend not to talk about it but when I'm at the Black Men's Consortium I can say “look, I had a really sh*t day, this has happened, I was called a n****r, I was called this, I was called that”, you know, people didn't want to touch you because of the colour of my skin, I'm able to have that conversation and that makes life easier for me in a sense that I'm able to go about work the next week with... it's them who have a problem, not me.”

BMC participant 4



PROGRAMME THEORY 3: CONTROL & EMPOWERMENT



“ I think fundamentally I came because I was interested in black men and mental health, that was it, and everything else has been a tremendous bonus, everything, so like peer relationships, guys that I've met, the things that I've done, the performances that I have done, you know, going out on the stage public speaking, I've conquered something, a [personal problem] because growing up I had a [childhood problem] as a child and I used to get ridiculed for that, so being able to stand up in front of a audience and just perform, it's been like amazing, people are saying “well how did you do? What's your technique? Is there some kind of secret thing that you do?” No, just embraced my talent and be able to do that, you know, I've realised that I had a talent that I always suppressed or always kind of didn't believe in myself in my abilities and the BMC has allowed me to do that..... I was like a seed, you know, then I was a seedling, now I'm a tree, not quite matured yet but that tree has roots, those roots are what's important because that's keeping the tree up high, you know. Yeah, that's the best way I can describe it. ”

BMC participant 4

Context: for Black men interested in creative arts and mental health,

Mechanism (Resource): the programmes offers an opportunity to get involved in a way and at a pace that suits each man and an opportunity to process emotions and trauma in an alternative way to talking therapy.

Mechanism (Reaction): The approach supports a sense of agency and empowerment, putting each man in control. This promotes personal growth and enhanced wellbeing

Outcome: The outputs generate a sense of achievement and pride and may also contribute to wider societal change.

Alternative Reaction and Outcome: The artistic approach may not suit everyone, and some may grow bored or frustrated with balancing time to talk with time to prepare for performance, which may impact engagement and turnover.

“ if we have an important message to the audience, we would give that and so that's basically how it works and that's what makes it more powerful. Because it's real life, what we do. It's real life and it's based on real life scenarios, we don't need a script. You don't need to make it up because we have so much material with real life scenarios that it's easy to put that together. The only thing is it's executing it, because there are, some of the members are, were happy to disclose real life situations that they've either gone through, or currently go through, but didn't feel confident enough, as one would say, to perform that on the stage. So, then somebody else may say, okay right, “Sam, you tell me what your situation is but I'll play you. You just tell me, and I'll play you.” So, because if Sam's story is so powerful, we need that story, it's powerful, yeah? But Sam wasn't strong enough to execute it on the stage. So, we could... we will still deliver Sam's story, regardless of who, yeah. ”

BMC Participant 2



PROGRAMME THEORY 4: CREDIBILITY & COMMITMENT

Context: When aiming to develop such a programme the skills, credibility and motivation of the facilitator are important to consider as well as the location within a community as these translate into programme resources

Mechanism (Resource): resources included willingness to volunteer time when funding is not available, although skills and resources can build over time as well. For example, willingness to share leadership responsibility and draw on others' skills helped to build sustainability (an outcome). Shared characteristics between facilitator and participants support bonding and credibility, but so does demonstration of skills and expertise.

Mechanism (Response): Participants are able to grow in confidence and ability, rapport is built and there is joy in creating something to be proud of.

Outcomes: This leads to new skills, confidence, networks, employability and sustainability of the programme.

“ I originally was commissioned by [place name deleted] Suicide Prevention team, or strategy, or board, I can't remember which one and to make a performance about black men and suicide, and the project ran for six weeks, it was to put on a performance, it was a huge success, loads and loads of feedback from local community and it engaged a lot of men, and at the end of that project I decided to volunteer my time to keep the project going. And during that time of keeping it going which was in 2018 or '19, ... once I kept it going the group formed the name Black Men's Consortium. And I decided that at that point to kind of, yeah, be the one to keep, help keep the project going, because the needs of the men were so, it was so important for them, and that's what I decided to do. ”

BMC Facilitator

“ I think one of the reasons why it works is because it's not just James leading, there are also other people in the group that uphold the boundaries and support the men, and who probably get a feeling of having done something worthwhile. ”

BMC Co-facilitator

“ He has a skill and a craft, and that's his strength, at just bringing things together...that skill of drawing in that and bringing out your ability, especially if you're introverted and insecure. ”

BMC Participant 2



CONCLUSIONS

Reach and engagement

The Black Men's Consortium has been able to reach a wide range of working age Black men in Lambeth, overall and as part of the Public Health England funded project that was a particular focus of this evaluation. There was some evidence that younger Black men and men who are already experiencing more serious mental health problems may be less likely to either be reached or engaged by the programme. For those who are reached, engagement is supported by the processes in the approach which allows people to have control over the extent to which they get involved. Some who may be reluctant to fully engage to start with have ended up growing in confidence to fully engage with the drama and improvisation approach by the end. Where people do not feel comfortable enacting their own experiences, they can still benefit from sharing what they have experienced and see others acting that out in the group. Some people may however need greater support with mental health than this group can provide.

CONCLUSIONS CONTINUED

How it works

Participants experience beneficial effects in a number of ways. Being with other Black men is deemed to be part of this; shared characteristics and backgrounds do help to expedite bonding and may overcome the need to explain certain aspects of experience. There is also recognition however, of the variation in experience and the benefit of learning from others who have different experiences and who can support building of positive coping strategies. Group disagreements may seem like a negative part of the process at first but may contribute to skill development and learning ultimately. The safety and emotional bonding experienced within the group is an important part of its therapeutic effects and people can experience both talking about trauma and using creative expression to process trauma. They also benefit from the social connection, the power of being networked, and the shared experience of creating something joyful, that is valued and that they can feel collectively proud of. In addition, sharing experience of racism or other prejudiced experiences can reduce the damage they have as the experience is less likely to be internalised but instead challenged and used to create something positive that is then shared with the outside world, which in itself has the potential to support positive change.

Sustainability

The skills, expertise and character of the lead facilitator have undoubtedly contributed to the success of the programme, as has his willingness to volunteer time when funding has been unavailable. In addition however, the group and the facilitator have grown and evolved together over time and together they have supported each other's commitment and skill development and trust in one another to create a self-sustaining, naturally evolving asset within the community. It has led to spin-out support groups and the support of a local charitable organisation who provide a free community meeting space is also important for the sustainability of the programme.



RECOMMENDATIONS



Continuing to invest in the BMC, as an existing community asset, where possible is likely to be of benefit as a preventive and early intervention public health approach for Lambeth Borough Council



Programmes like this need to be well linked to onwards referral and support for those with greater mental health needs



Younger men were identified as less often reached by the group, so thinking about reach and intervention that is more targeted for younger Black Men may be needed, and perhaps separately or outside of the BMC



The provision of free community space to meet has been helpful for sustainability – ensuring that they always have this is important



Broadening the artistic offer may help to widen appeal and engagement as well as contribute to the sense of agency and empowerment the BMC provides



Continuing to identify, support and reward participants who have skills to offer and willingness to share leadership is likely to bring benefit in terms of sustainability, broadening reach and appeal, and contribute to feelings of agency, and empowerment as well as skill development and enhancement of the important social network the BMC provides



REFERENCES

Barkhuizen W, Cullen AE, Shetty H, et al. (2020). Community treatment orders and associations with readmission rates and duration of psychiatric hospital admission: a controlled electronic case register study. *BMJ Open*;10:e035121.

Gillard S, Dare C, Hardy J, et al. (2021). Correction to: experiences of living with mental health problems during the COVID-19 pandemic in the UK: a coproduced, participatory qualitative interview study. *Soc Psychiatry Psychiatr Epidemiol*;56:1113.

Koodun S, Dudhia R, Abifarin B, et al. (2021). Racial and ethnic disparities in mental health care. *The Pharmaceutical Journal*, Vol 307, No 7954;307(7954):DOI:10.1211/PJ.2021.1.107434.

The Lancet Public Health (2020). COVID-19: from a PHEIC to a public mental health crisis? 10.1016/S2468-2667(20)30165-1

WHO (2022). Mental Health available form: <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>

Winsper C, et al. (2023). Improving mental healthcare access and experience for people from minority ethnic groups: an England-wide multisite experience-based codesign study. *BMJ Ment Health*, 26:1–8. doi:10.1136/bmjment-2023-300709



phirst@herts.ac.uk



www.phirst.nihr.ac.uk



@NIHR_PHIRST

This project is funded by the National Institute for Health and Care Research (NIHR) [Public Health Research Programme (NIHR135393/PHIRST)]. The views expressed are those of the authors and not necessarily those of the NIHR or the Department of Health and Social Care.

FUNDED BY

NIHR | National Institute for
Health and Care Research

(NIHR/PHIRST)