



WE TELL YOU

Jewish Young People's
Peer Research Project
Salford

October 2017

Written by Cassie Horwich and Simone Spray



ACKNOWLEDGEMENTS & THANKS

The project would like to thank all the young people involved in collecting the research data and all those in the community who gave their time and shared their experiences and opinions during one to one discussions, interviews, focus groups and group work.

Special thanks to our Advisory Group, Melech Dovid Kanter, Debra Frazer, Avremi Rosenberg, Mimi Pines and Nava Kezstenbaum and to the services, community organisations and schools for their co-operation and support:

- / Bais Yaakov Jewish High School
- / Bnos Yisroel School
- / Manchester Mesivta School
- / Etz Chaim School
- / Pathways Mentoring Programme
- / The Supper Club
- / Hatikvah
- / Darchei Torah
- / Learn and Work Chabura

This We Tell You Research Project
was funded by Salford CCG:



Salford

Clinical Commissioning Group

CONTENTS

- 4 Foreword by Salford CCG
- 5 A Bit About 42nd Street
- 6 The Objectives
- 7 The Process
- 9 The Settings
- 11 Results
- 13 Stigma
- 18 Attitudes to Mental Health and Wellbeing
- 21 Lessons Learned
- 23 Suggestions from the Young People
- 24 Evaluation
- 25 Recommendations
- 27 Appendices



FOREWORD BY SALFORD CCG

This research was commissioned as part of Salford's CAMHS Transformation Plan and 0-25 Emotional Health and Wellbeing work. When reviewing the evidence of need amongst Salford children and young people, it became apparent that we had very little information on the emotional wellbeing of young people within the Orthodox Jewish communities in Salford. This identifying information is not routinely collected through service monitoring in our commissioned mental health services for children and young people. Anecdotally it was felt that only small numbers of young people from Orthodox Jewish communities were accessing our commissioned services although there are considerable numbers of young people within these communities and these numbers are growing.

The aims of this commissioned research was to better understand the personal, social and cultural issues impacting on the mental health and wellbeing of young people within the Orthodox Jewish communities and to identify barriers and recommend approaches that are more likely to engage the communities in opportunities and services that would support their emotional health and wellbeing. It was important to engage young people through the research and involve them in influencing and shaping services, hence the adoption of the peer research approach. Finally, we wanted to look at what works well here in Salford and elsewhere and how commissioning and delivery can better meet need.

The report illustrates the strong sense of identity within the community and the support young people get from family and friends. Also as a result of engaging services and young people in this research, it has highlighted the community assets and key individuals, organisations and leaders that could become champions for improved provision and integrated delivery.

We welcome this report and hope it will provide a mechanism for services and commissioners to give greater consideration to the needs and experiences of Orthodox Jewish young people in Salford when designing, commissioning and delivering services. The recommendations offer a way forward to enhance the support already offered within the Orthodox Jewish communities and as commissioners we will consider the opportunities to build on this work, in conjunction with our neighbouring authorities.

The aim was to better understand the personal, social and cultural issues impacting on the mental health and wellbeing of young people within the Orthodox Jewish communities.

A BIT ABOUT 42ND STREET

42nd Street's mission is to support young people aged 11-25 years with their emotional well-being and mental health, promoting choice and creativity. We champion young person centred approaches that demonstrate local impact and have national significance.

Our Social objectives are to:

- Improve well-being and recovery
- Increase opportunities for young people to shape their own care and influence change
- Improve and increase inclusion and accessibility to appropriate services and support
- Increase awareness and reduce stigma

We deliver from our purpose built community hub in the heart of Manchester and in community settings across Greater Manchester providing free, high quality, accessible, and responsive services to young people who present with a wide range of mental health and wellbeing issues from mild to moderate depression, anxiety and conduct problems through to more significant mental ill-health including psychosis and difficulties that may be described as personality disorders. To achieve its overall aims, the charity encourages and supports young people to have a voice and make decisions about their care and commits to offering young people a range of interventions, providing a menu of support and choice. Evidence based therapeutic interventions are combined with opportunities for young people to learn, develop new skills, be creative, have fun and demonstrate to themselves and others that they are able to recover from mental ill-health, manage their mental health and wellbeing and achieve their full potential.

Giving young people opportunities to influence mental health policy and practice is another critical part of our approach and programme at 42nd Street; the Charity believes that active participation and involvement of young people helps to promote resilience and recovery and also informs the type of services provided to best meet the needs of young people. Genuine participatory approaches contribute to safeguarding young people using services by giving them different ways of voicing concerns and raising problems and it also gives young people the opportunity to develop new life skills.

This is an approach that 42nd Street has centred around for over 37 years and in that time we have influenced local regional and national policy and practice, for example around approaches to self-harm, in the development of the Greater Manchester Mental Health Strategy and as part of the Department for Education's research around the specific needs of 16-19 year olds.

This ethos embodied the We Tell You: Peer Research Project in the Jewish Community in Salford; creating safe spaces and opportunities for young people to discuss their attitudes around mental health and wellbeing and to explain what works for them now and what might work for them in the future. Using carefully and collaboratively designed participatory methodology coupled with our expertise around young people's mental health we are able to work with community members and young people and really get an understanding of what is going on for young people and gain new insights into how best to support them.



THE OBJECTIVES

Clear objectives were agreed between Salford CCG and 42nd Street, these were:

- 1** To build a better and more shared understanding of the issues impacting on the mental health and wellbeing of young people within the Jewish communities within Salford

- 2** To better understand and highlight community assets within the community and build on these to support the emotional wellbeing and mental health of young Jewish people in Salford.

- 3** To work with local stakeholders and young people to identify any barriers for young people and/or gaps in service offer.

- 4** To collectively find solutions to improve provision and appropriate uptake of support for young people in relation to their emotional health and wellbeing.
To identify and work with key individuals, organisations and leaders to champion the need for improved provision and to help build the social and cultural capital required to maximise the impact of the project.

- 5** To ensure successful training and development opportunities for the young people involved as peer researchers.

- 6** To identify relevant themes that could inform future research and inform opportunities for further work.



THE PROCESS

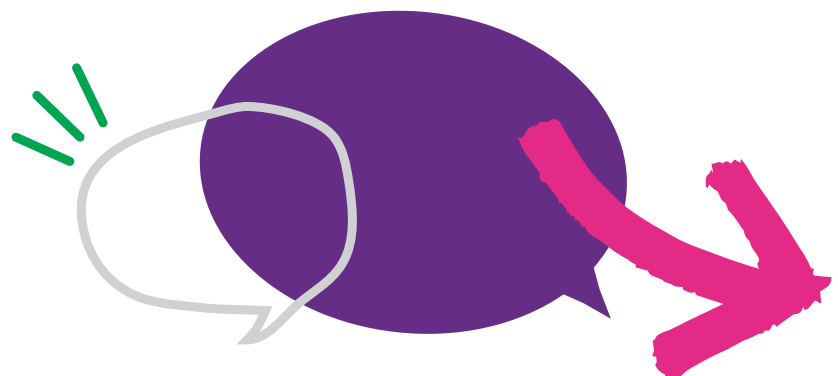
This process started with the recruitment of a Project Lead from within the Jewish Community in October 2016, who immediately began a desk top review of the services available in Greater Manchester, both Jewish and non-Jewish and an induction period meeting key community members and young people's mental health experts.

As anticipated, it became very clear, very early on, that there were significant gaps in knowledge and understanding between many of the mental health professionals and commissioners and the Jewish community and that a period of "community development" would be required to address this and gain a deeper understanding before starting the peer research with young people directly. The Project Lead therefore engaged in an extensive period of talking and listening to community members and experts in young people's mental health services (Appendix 1). 42nd Street invited The Project Lead to deliver a training session to improve the teams knowledge and understanding of the Orthodox Jewish community, which was of considerable benefit to 42nd Street and improved the organisations ability to better support the community and make adjustments to improve inclusivity.

It was also identified that a critical element of the community development phase was to assemble an Advisory Group, with clear terms of reference (Appendix 2), to help navigate the project and enable the Project Lead to gain access to the community in an appropriate way.

The Advisory Group was chaired by a member of the community and met regularly over the course of the project supporting the 42nd Street project team to achieve the agreed objectives of the project, to champion the need for improved provision, to help to build the social and cultural capital required to maximise the impact of the project and to have oversight and influence on how to best approach delivery to achieve maximum impact.

Throughout the project the Project Lead also worked with colleagues that work with the Jewish community in London and have expertise in mental health.



Once the parameters of the project had been established it was decided that access to young people would be best brokered via established youth groups and schools to ensure inclusivity and diversity, to ensure the safe and smooth running of the sessions with young people and also to assuage (parental) fears around the project's potentially sensitive subject matter.

A workshop framework (Appendix 3) was developed by 42nd Street and the Project Lead in consultation with young Jewish people and signed off by the Advisory Group; the workshops used an interactive, participatory approach to guide the consultation process and produce both quantitative and qualitative information that could be analysed and interpreted to inform recommendations for future service development. In recognition of the diversity of the Jewish Community in Salford, it was also agreed that additional facilitators, both male and female would be sought and trained from the community to work with the young people in the different groups and settings directly. Once we had developed relationships with schools and youth groups, the Project Lead and/or facilitator met with the head teacher of the school to demonstrate how the workshop had been developed and to discuss the project in greater depth. Once the settings were satisfied with the approach, recruitment of young people was able to begin.

Small groups (ideally 8-10 young people) were then identified in each setting and the facilitators identified two of the group to be the peer researchers and scheduled in training for them. The Project Lead and the facilitator trained the peer researchers together (where appropriate) which involved going through the workshop, adapting the content and delivery where necessary and gaining the peer researchers feedback to ensure that they were comfortable to deliver it with their peers.

Workshops were then scheduled in each setting with the peer researchers. The Project Lead and/or facilitator were present at each workshop for support, safeguard and ensure accurate capture of data.



Figure 1:
Young peoples workshop drawing.

THE SETTINGS

The settings where the research was conducted are listed below, along with a small explanation of each one. These explanations were written by the heads of the groups.

Beis Yaakov (Year 8 and Year 10):

Beis Yaakov Jewish High School for girls aged 11 – 16. The school is situated in the heart of Broughton Park, Salford where there is a high percentage of Orthodox Jewish families. The school serves the North-West Orthodox Jewish Community; the student body is mainly based in Salford and Bury. There are a few pupils from Leeds, and Gateshead. The school aims to provide a secular and religious education as well as caring for the pupil's emotional health and well-being.

Bnos (year 8 and Year 10):

Bnos Yisroel School was established in 1965 as a mainstream Haredi (Orthodox) Jewish religious school for girls to serve the strictly observant Jewish communities of Broughton Park and Prestwich, Greater Manchester. All the pupils come from strictly Orthodox Jewish homes. They represent wide socio-economic backgrounds and a relatively wide spectrum of Jewish cultural backgrounds (Chassidi and non- Chassidic).



Hatikvah – Holding Hearts:

Supports girls aged 17-24 from the Orthodox Jewish community. These girls feel that due to circumstance, examples include; dysfunction, abuse, non-acceptance and social pressure, they are no longer accepted by their families and/or their community and as a result they don't want to be associated with it. We help them to build up their self-esteem and be healthy wholesome girls, regardless of religious observance.

Women's Group:

Orthodox women aged 21 – 26. Some married with children, some working and some studying. All live or lived in Salford and conducted their schooling there.

Sem Girls:

A group of young women aged 17 currently attending religious colleges in Newcastle or Manchester. They are learning both secular and religious studies with a particular emphasis on the religious side.

Manchester Mesivta (year 8 and Year 11):

As one of the oldest Jewish schools in Manchester, Manchester Mesivta is well known throughout the UK. Its vision, as set out by the founders back in 1948, was to create an institution that would provide its students with a first class broad and balanced curriculum offering both Jewish and secular subjects in a caring environment.

Eitz Chaim (Year 8 and Year 9):

Eitz Chaim is an Orthodox Independent Secondary school for boys. It is located on Middleton Road in Manchester.

Mentoring Programme:

Pathways is a wellbeing organisation within the Manchester Jewish community. They offer referrals to local practitioners as well as services within the greater community which wouldn't otherwise be unknown to the community members. There is a mentoring wing which offers training, supervision and match-makes appropriate mentees to the mentors.

Supper Club:

The Supper Club is a grassroots community based organisation run entirely by volunteers with an aim to empower all those youth that require empowerment; whether via social, emotional, spiritual, educational or any other means - The Supper Club is working hard to empower all our young people of today to be our leaders in the future.

Chabura:

Learn & Work Chabura is an organisation specialising in teens and young adults giving them social skills and helping them fit into society. Activities include extra lessons in Torah studies, business studies, therapy, fun activities and many more programmes. They have over 50 attendees and over 50 mentors so that each person can have individual attention to their needs.

Darchei Torah:

Darchei Torah provides a structure and educational Torah framework for its boys and is singular and unique. It is indeed the only program of its kind in Europe. The yeshiva aims to deliver to its students an authentic residential yeshiva experience combined with an accredited secular curriculum in the afternoons, thereby providing them with the tools they need to become valuable members of their communities.

Satmar /Belz Young People:

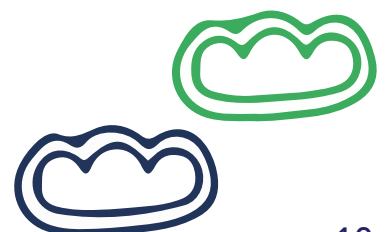
Samar and Bells communities adhere and follow without deviation from the traditional Polish communities of Samar and Bells where they lived in pre-war Europe. They follow this tradition in all aspects of life from education and family life to dress and modesty.

Young Men's Group:

Young men between the ages of 14-19 with challenging life circumstances, these include needs that could not be met in the school system so most are not in full time education.

Yeshiva Boys:

Young men between the ages of 16-19 who have graduated from a range of ultra-orthodox high schools and now study full time at Yeshiva/Talmudic College.



RESULTS

162 young people were involved in the research project.



Please note in the results we have anonymised the settings to protect young people's anonymity.

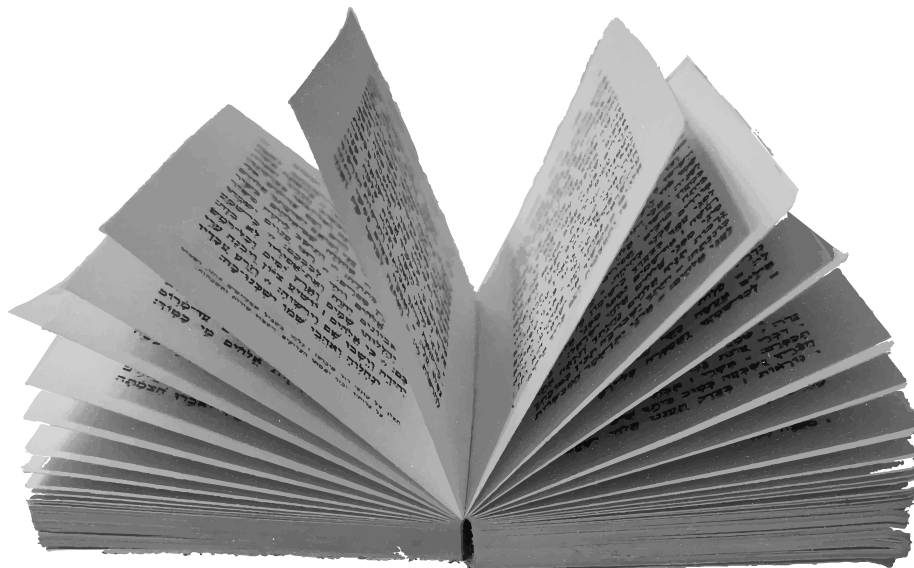


Throughout this report we have used direct quotes from young people that took part in the research to give them a voice and to increase our understanding of the issues raised.

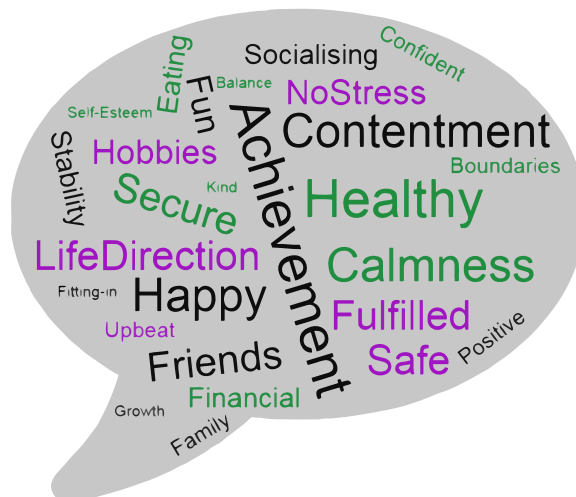


The following information was gathered from a workshop developed and delivered by Young People to their peers (Appendix 3). The two word clouds reflect the strength of free responses, using their own words from all the young people that took part in the research. Please note sometimes the words were from individuals and some were from the whole group.

These responses do not directly indicate how the young people feel, more their understanding of the questions they were being asked and an indication of the language that they used to answer them.

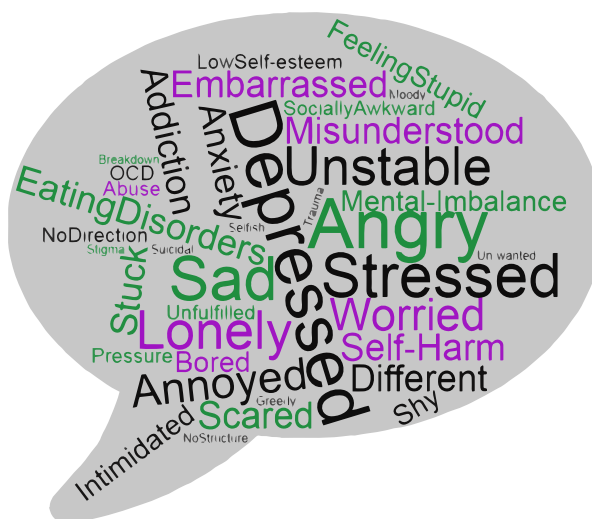


What does wellbeing mean to young people?



It is worthy of note that achievement was the most mentioned response to this question. In 42nd Street's experience this is not always the case when talking to young people about what wellbeing means to them. It is therefore worth considering how support around mental health and wellbeing supports young Jewish people to achieve, as well as the more standard answers around health, happiness, contentedness and feeling calm.

What does mental health mean to young people?



The words used to describe mental health reflect the issues that young people most often present with at 42nd Street; depression, stress/anxiety and anger are consistently top presentations. However, it is worthy of note that loneliness was mentioned often. Although this is something that we recognise as key issue for young people, it is unusual for loneliness to be mentioned as often as it was in this study and therefore potentially worth understanding what this means specifically in terms of the young Orthodox Jewish community. Also self-esteem is missing from this list and is a very common presentation at 42nd Street. (However, self-esteem is a feature of the following question around what contributes to stress and anxiety.)

STIGMA

The stigma faced by those with mental health difficulties is widely and regularly recognised, witnessed and felt by young people, this is true of all young people from different communities, cultures and lifestyles. As one community member in Salford acknowledges...

"Stigma and attitudes that accompany any form of mental health illness is not specific to the Jewish community. Prejudices and some ignorance or historic mind-set of not discussing or addressing the issues are prevalent and cross the board of religion, ethnic minorities and gender. This is partially due to people feeling uncomfortable with the subject matter. Mental illness is an unknown entity and is not prescriptive either in presentation or cure. Sadly there is also ignorance of resources available, but this is beginning to change. We have a way to go but have made a good start towards reframing people's approach and understanding of mental health issues."

It is therefore important in this research for us to understand the wider issues of stigma experienced by young people around mental health. In October 2016 the YMCA produced a report called, "I Am Whole" investigating the stigma faced by 2,072 young people aged between 11 and 24-years-old interviewed from across England and Wales. 75% reported that people experiencing difficulties with their mental health are treated negatively as a result of stigma. The Princes Trust research published in March 2017, based on a survey of 2,215 respondents aged 16 to 25 also found that the vast majority of young people (78%) think there is a stigma attached to mental health issues.

More than one in three young people in the YMCA research (38%) with mental health difficulties had felt the negative impact of stigma themselves and more than one in three young people (37%) who experienced this stigma did so at least once a week.

The YMCA report showed that stigma comes in many forms and is often inflicted by those closest to the young person in settings they depend upon most for support. They reported that school is the place where most young people (59%) experienced this stigma and more than half of young people (54%) who experienced this stigma said it came from their own friends. MIND's research from 2014, conducted with young people directly experiencing mental health problems highlighted that for these young people this figure rose to 70% from friends, 35% from siblings and 57% from parents. Young people with mental health difficulties who had experienced this stigma said they have been subject to prejudice (70%), left out of activities (54%) and verbally abused (36%).

The YMCA report highlighted that this stigma is both profound and pervasive as it infiltrates many areas of a young person's life. More than four in five young people (85%) who had experienced this stigma said it was their confidence that had been most negatively affected. They said it made them less likely to talk about their experiences (70%) or to seek professional help (56%). In the Princes Trust research, one third (32%) of those interviewed said that they would keep quiet about their mental health as they were worried it could affect their job prospects, 57% would not want anyone to know they were struggling and 35% feared it would make them "look weak". For many in the YMCA report stigma, or the fear of stigma, resulted in the young people who had experienced it being unwilling to go out (74%) and unable to perform day-to-day tasks (69%).

The young people in the YMCA study felt that education and awareness lay at the heart of normalising mental health difficulties and overcoming this stigma experienced by young people. Education (76%) and more people talking about mental health (66%) topped the ways that young people believed this stigma could be tackled. Four in five (81%) of those who believe this stigma exists said school is the best place to combat it.

Dame Martina Milburn DCVO CBE, Chief Executive of the Princes Trusts said (March 2017)



"We know issues like depression and anxiety can have a crippling impact on a young person's aspirations and life chances, so it's alarming to find that so many would rather live with mental health issues than talk to anyone about them."

Conversations throughout this research with young people and adults within the community corroborated the stigma surrounding mental health issues and in particular the stigma for young people and also added some additional dimensions specific to the Orthodox Jewish Community. For example one community member told our researcher...



"There has been tremendous improvement in awareness and acceptance (of mental health issues). Every Jewish magazine has a weekly column on mental health in the community but at the same time there is still the fear of being too open about it due to shidduchim (marriage matches)".

Another community member commented...



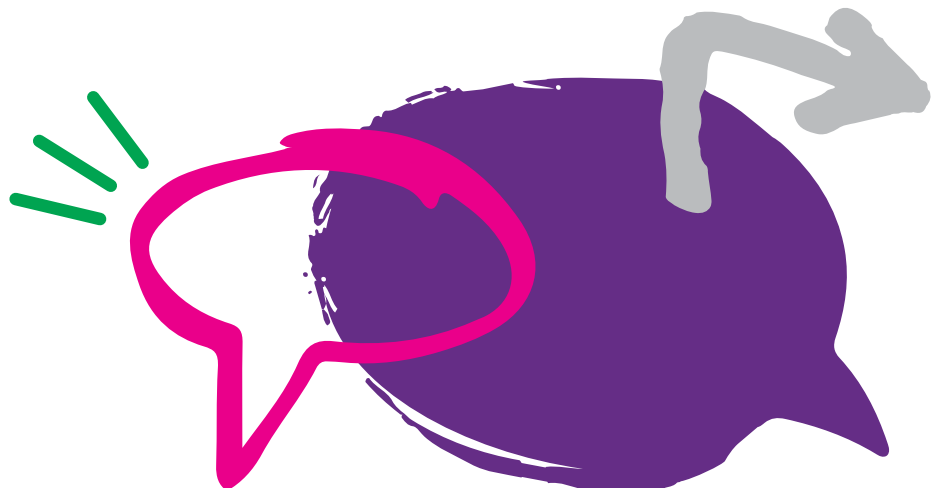
"The Jewish culture is not just about what you eat and wear, but it also gives people a guide into life and who they will become. Marriages are identified within this culture and people marry those whom they feel share their values culture and beliefs. Within the complexity of society people are afraid of consequences of not being able to fit the culture and place in which they'd like to. I believe that stigma results from this."

This demonstrates that whilst significant steps are being taken to try and reduce stigma, it is still important to recognise the either real or perceived fear of the impact for young people who might talk about or admit to experiencing mental health difficulties within the Orthodox Jewish culture is still there; if there is an impact on potential marriage prospects that could have a profound impact on the lives of young people and the lives of their wider family, it becomes entirely reasonable to expect mental health to remain hidden and stigma to prevail. There was also a feeling that the stigma might extend into people's behaviours in terms of seeking professional support.



"For many people within the Haredi Community engagement with a mental health service provider funded through the NHS also entails the crossing of a social boundary that they would not normally transgress without the blessing and permission of their Rabbis."

It is important to understand this within the context of this research as we consider who young people might go to for support and how they may, or may not, access statutory or NHS funded Child and Adolescent Mental Health Services (CAMHS) potentially perceived to exist outside of the community and acceptable social boundaries.




During the research we asked the young people...

The graphs for this question can be found in appendix 4.


The responses to this question were very varied. Groups 1, 5, 6, and 7 all agreed quite strongly that it was embarrassing, but groups 12, 15 and particularly 16 did not agree at all, suggesting that they would not be embarrassed to admit that they had a mental health problem.

The majority of groups, (2, 3, 4, 8, 9, 10, 11, 13 and 14) had mixed reactions. There was an apparent age and gender divide in the results, where younger young people and young women more often, whilst some of the more experienced about their problems in the past and so the not directly experienced issues but expressed how stigmatise if someone wanted to talk to them and therefore disagreed with the statement. There is however, a clear issue in relation to stigma, with a significant proportion of young people, 64% involved in the study tending to agree with the statement.

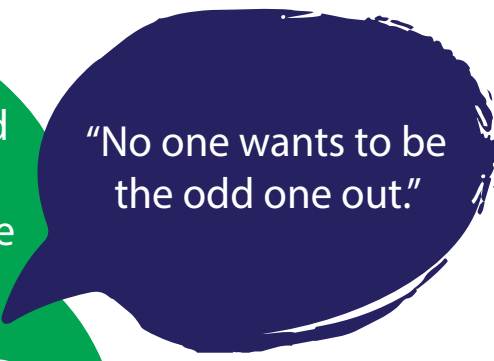
To better understand the issue of stigma we need to better understand young people's behaviour in terms of where they might go for support if they needed it. We therefore asked the following question...




"How embarrassing is it to admit to having a mental health problem?"



"I would be embarrassed to tell my friends that I had a mental health issue because they'd make fun of me."



"No one wants to be the odd one out."



"Where would young people go to for support?"

Young people were asked to generate a list of people/professionals that they would consider going to for support. Therefore, all of the people/professions mentioned below reflect where young people would consider going and therefore inclusion is positive. In order to better understand young people's behaviours and feelings, we also asked a further question in relation to the list generated by the young people, to get some idea of young people's preferences from the list generated.


The graphs for this question can be found in appendix 5.

Those people/ professions represented below in blue are where young people would prefer to/be most likely to go for support from the list generated and those represented in red are those people/professions where young people would least prefer/be least likely to go for support. It is important to note though that all of those mentioned below were the people/ professionals that young people named as being where they would consider going to for support; it is as important to consider the people/professionals that are missing from the lists generated as this is an indication of people/professions that young Jewish Orthodox people would not even think of approaching for support, perhaps due to issues of stigma and social and cultural boundaries mentioned above.

Most young people, 88 young people (54%) named their parents as being people that they would consider approaching for support, this breaks down to 74, (83%) of school age young people but only 14, (19%) of young people over school age. We also examined these responses in relation to gender; of the 88 that would turn to their parents, 37 were young women and 51 young men, representing 55% of the total young women and 54% of the total young men indicating very little gender difference.

Where young people went on to indicate which of those they had named as being approachable were the most or least likely for them to turn to, 37 (42%) of school age young people named teachers. (Those post school age did not mention teachers at all).


Similarly, of the young people who mentioned Rabbis as a source of support, 31 (35%) said that it was least likely that they would actually approach them, 17 (18%) of the total male participants and 14 (27%) of young women, suggesting a slight gender difference.



"I can't be confident that what is being said is correct as I don't trust that the people I speak to are properly trained."

In the older cohort of young people 11 (15%) said that they would not go anywhere to get support. 19 (26%) said that of the people and professionals that they had named, their friends were the least likely for them to approach for support and 8 (11%) stated that GP's were the least likely for them to approach .

For young women, 22 (33%) named teachers as being the most unlikely people they would go to for support from the list that they had generated, and 19 (28%) said that the least likely person they would go to would be their GP.



"I feel uncomfortable speaking to a therapist or teacher in the community because I think it will get out."

This data suggests that young Jewish people overwhelmingly seek support within their families, across genders although reducing as young people get older and this is an asset that needs to be recognised and built upon.

They speak with their peers to some degree, but not as much as become older. Seeking support professionally is not a prevalent behaviour, particularly with the younger age range and there is a complete lack of mention from any participants of wider young people's mental health services; Child and Adolescent Mental Health Services were not mentioned at all, A and E was not mentioned at all and VCSES organisations were also completely missing. It is also interesting that in schools teachers, counsellors and mentors were mentioned ,with counsellors often being cited as a preferred source of support but any other pastoral support, which is often part of the experience of young people outside of the Orthodox Jewish Community, is not mentioned at all (e.g. SEN leads, CAMHS leads, school nurses etc.).

ATTITUDES TO MENTAL HEALTH AND WELLBEING

We asked young people...

“What makes young people stressed or anxious?”

“What do young people do to cope with stress/anxieties?”



Self-esteem was the most prevalent response, followed by responses linked to loneliness and relationships with friends and family. This is very similar to the issues raised in other consultations conducted by 42nd Street, although, once again loneliness is mentioned more here than in 42nd Street’s previous experience. It is very interesting to note that school, homework, exams and not accomplishing are all significant factors in stress and anxiety for the young people that took part in the research.

It is worth noting how these responses relate to the 5 ways of Wellbeing developed by the New Economics Foundation. The 5 ways are:

1. Connect

There is strong evidence that the young people in the research see social relationships as critical for coping with stress and anxiety.

2. Be active

The young people clearly identified exercise, sports and fresh air as being important which is associated with lower rates of depression and anxiety across all age groups.

3. Take notice

The young people did mention meditation but this was not frequently mentioned.

4. Learn

This was mentioned less in this section, although reading was mentioned.

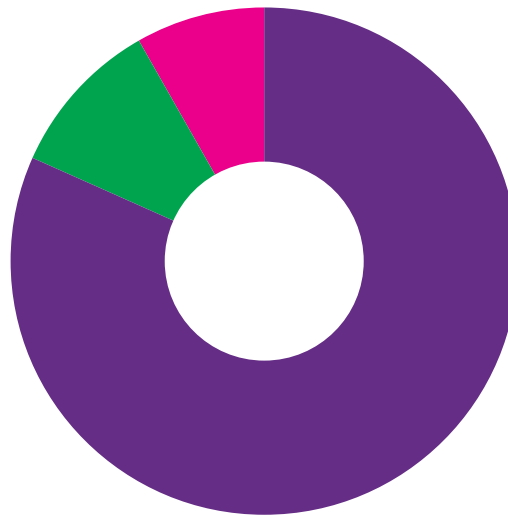
5. Give

This was not really mentioned by the young people directly, but it is recognised that individuals who report a greater interest in helping others are more likely to rate themselves as happy. Although the young people mentioned giving only twice in this section, it should be noted that many of the young people did report how being involved in the research had made them feel they were helping others and felt valued and that this had boosted their confidence and self-esteem and we will pick this up on the evaluation of the project when we return to settings. It should also be noted that some of the responses were less positive, e.g. drugs and alcohol which could be interpreted as self-medication.

We then went on to ask the following questions...

These areas of focus were generated with the young people and agreed by the Advisory Group as part of the design of the workshops as they were deemed to be areas of interest that it would be useful to gain more understanding around.

When asked how common mental health issues were the vast majority of young people 74% indicated that they felt that mental health issues were common, 14% felt they were neither common nor uncommon and 12% indicated that they were not common.



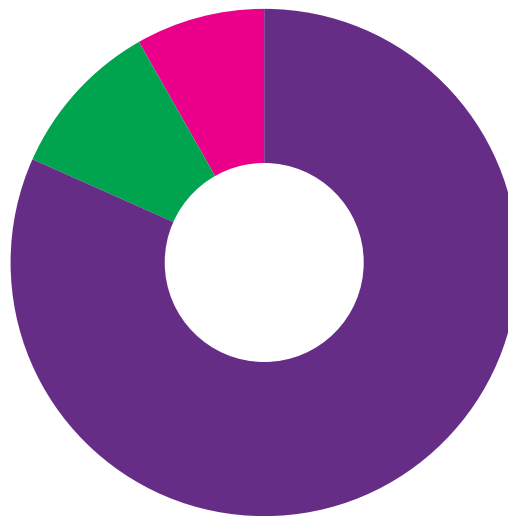
How common are mental health issues?

74% common

14% neither common or uncommon

12% uncommon

When asked if they viewed mental health issues to be as real as physical health issues, the majority, 69% indicated that they felt that mental health issues were as real as physical health issues, 16% indicated they are no more or less real than each other and 15% felt mental health issues were not as real as physical health issues.



Are mental health issues as real as physical health issues?

69% yes

16% no more or less real

15% no

When young people were asked if they felt people got better from mental illness, 54% indicated that they felt people did. 33% indicated that people neither get better or do not get better, perhaps in recognition of the fact that people learn to cope, but no not "get better". 13% indicated that that felt people did not get better.



Do people get better from mental illness?

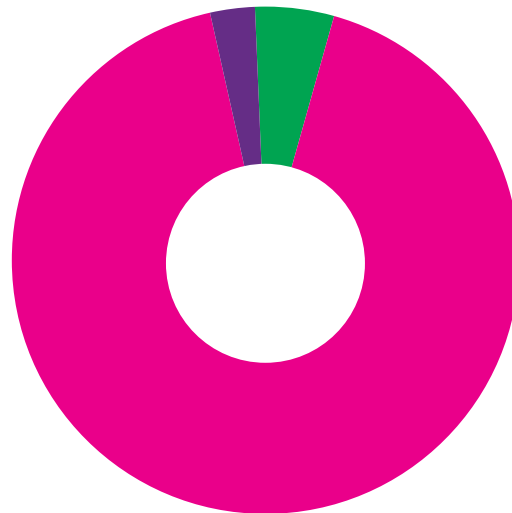
54% yes

33% no better or not

13% no

"They learn to adapt to live with it but it doesn't go away."

When asked if mental health issues only occurred for adults, the vast majority of respondents, 87% did not feel that this was the case indicating that they felt mental health issues are therefore just as likely to be an issue for children and young people. However, 3% did feel that mental health was only an issue for adults.



Do mental health issues only occur for adults?

3% yes

10% no more or less

87% no

When young people were asked if mental health services are expensive, 49% indicated that they felt that they were expensive, whilst 25% felt they were either expensive or inexpensive and 26% felt they were not expensive. It is interesting to note this response in relation to the lack of young people accessing of NHS funded services.



Are mental health services expensive?

49% yes

26% no more or less

25% no

LESSONS LEARNED

When the project was first introduced to the Jewish community in Salford, there was a high degree of anxiety and questions around the choice of 42nd Street to conduct the research because of the secular nature of the organisation from outside of the community. This meant that the time scales for the research had to be adapted to allow additional time for trust building and community liaison. This needs to be born in mind for any future project of this type.

Due to the sensitivities within the community, there were also concerns from 42nd Street around their own professional reputation; as an organisation with clear ethical and professional boundaries around inclusivity, safeguarding and participative approaches the charity needed to be satisfied that these were not going to be compromised or called into question. Concerns and risks were formally logged with the advisory group, the CCG and the charity's board throughout the project and approaches discussed and agreed that enabled all parties to navigate through the risks and build a better level of trust within the community. Building this trust required the Project Lead to be available to the community often well after normal working hours and during periods of annual leave etc. it should be noted that the personal commitment of the Project Lead has been a major contributing factor to the success of the project and the development of community relationships. This needs to be born in mind for future projects, as the choice of project lead is a critical success factor, along with their ability to build relationships with different sections of the community.

The community communicated to the Project Lead that projects of this kind had been tried before in the community and nothing had changed or been implemented differently as a result. The members of the community who kindly offered their time needed considerable reassurance that this project was worthwhile and would be utilised in some way. As the project has progressed and the methodology and benefits have been better understood, good will has improved and there is now considerable buy in for the work; although there does still exist a concern that nothing more will come of it, despite issues and gaps being better understood as a result of the project. It is key that statutory agencies take on board the findings from the research and work with the community to respond to the recommendations, capitalising on the good will and positivity towards the project which can be utilised to push agendas forward.



It became apparent through meetings and interviews with relevant individuals, that the original approach to the peer research needed to be explained and adapted; the biggest fear was that young people would be talking to one another about sensitive issues related to the causes of mental health issues and if this was not managed would be detrimental to the young people involved and the wider community. Reassurances were required that this was not the intended methodology or approach and that the sessions would be group work sessions, led by trained young people, using a clear workshop framework that accommodated for sensitivities and was overseen by trusted facilitators. Initially the idea was for research to be conducted through both groups and one-on-one peer interviews. It became apparent quite quickly that this would be the cause of much worry for parents and teachers amongst others. The lessons brought out from this was the need for flexibility in research methods and to ensure that there was time to adapt appropriately once it was clear that certain ways which would work in other communities, would not work here.

It was also apparent that some parts of the community were not comfortable meeting with the Project Lead due to the separation of genders and that she was not a part of a certain community or section of the society. This was largely overcome by working with the facilitators. What was learned from this is how important an advisory group with diverse members from all over the community would be. The advisory board was incredibly helpful and through them the project lead was able to forge real connections with many facilitators who were very helpful. There could have been more diversity and perhaps more of the fringe groups could have been spoken to.

On several occasions the Project Lead needed support from 42nd Street with complex community issues and whilst these were resolved there needed to be recognition of the pressure that this put her under and attention to her personal wellbeing. The sensitivity in this area was so important due to the project lead living within this very close knit community, regularly meeting people at the shops or family weddings and other such occasions who were part of the research. The community living within extremely close proximity to one another and having relatively few places to shop, eat out and conduct social activities meant that it was inevitable for the project lead to have the project discussed with her on a frequent basis during her working and private hours.

The advisory group proved to be exceptionally helpful, both politically and operationally. We developed a good working relationship with complete transparency which helped us navigate difficult and potentially sensitive areas. An advisory group is an important consideration in any future work to ensure that there is appropriate buy-in from the community.

The research has demonstrated the value of involving and listening to young people. The process was empowering for those young people involved. The act of asking their opinions, thoughts and feelings boosted them and brought about a lot of positive feedback. Many times the Project Lead was asked to come back to settings to do more workshops and on occasion, to get the entire school involved.

SUGGESTIONS FROM THE YOUNG PEOPLE

The following list of suggestions is from the young people that took part in the research that they felt would help support their mental health and wellbeing in the Orthodox Jewish Community in Salford.

Community Resources

- Community centre with library, classes, mentor programme and, place to relax.
- Clubs: dance, drama, football, krav maga, martial arts, homework, pottery etc.
- Skills based courses (beauty, first aid/EMT, dog training etc.)
- Teachers/Rabbis who are nice/approachable and have time for the young people.
- Café with approachable people there.
- Free separate (men and women) gym.
- Careers advisors.

Specialist Support

- A hotline- a listening ear.
- Non Jewish therapists.
- Anonymous way of communicating through a 'post-box' system.
- Groups for problem sharing.
- Person in school who is not involved with teachers to speak to about issues.
- More trained Jewish therapists who are affordable.
- Outreach.

Education

- Courses around coping, mental health, resilience, awareness.
- Education for parents/young people/leaders.
- Age appropriate workshops.
- Motivation (specifically around education).
- Evening classes ,small, with an approachable teacher.
- Marriage course after marriage teaching how to communicate, intimacy, mortgages, finances, fertility, PND etc.
- Awareness around domestic violence.
- Work around reducing stigma.

Information and Guidance

- School magazine (to address issues so people don't feel alone).
- Booklet distributed to all homes/schools with education about mental health/where to go if you have problems/how to help as a parent etc. that has been checked with the Rabbonim first.

EVALUATION

Adult partners within the Orthodox Community and peer researchers involved in the research were shown the draft report and asked to feedback comments to the project lead. All respondents reported that they had been clear what the research aims were and indicated that they were not surprised by the findings nor did they disagree with anything contained within the draft report.

Comments included:

“Nothing was surprising but it was certainly consistent with what I feel.”

“The findings were what I expected, especially the discussions on stigma. It was nice to see the beginning of awareness and acknowledgement of mental health issues and that people recognise it can affect so many different types of people. I do hope that the choices of help and ideas to put in place to prevent or support mental health issues will be implemented.”

The young people that contributed to the evaluation all reported feeling that they were clear why they were involved in the research, felt the session was enjoyable and informative and that they felt listened to and valued. All also reported that the session had either improved or somewhat improved their understanding of emotional wellbeing and mental health issues for young people, one young person stating,

“I felt I gained awareness from being involved in this research, and I feel since I am now more aware of these issues I will be more likely to notice people around me struggling with any mental health issues etc. and will possibly be able to notify the appropriate person to get them the help they so badly seek or to act as a support for them.”

And another saying,

“I try to be more aware and responsive to different situations since being involved in this workshop.”

However, none of the young people reported any changes within their schools or settings as a result of the research, and concerns were expressed in feedback via the evaluation and through other channels that the research will not lead to anything and that...

“Nothing will change as a result.”

RECOMMENDATIONS



Taking into account the suggestions from young people in the community and conversations with adults, parents and Rabbis, 42nd Street would recommend the following options as ways to progress this work. We would also recommend that any decisions or intentions around the possible short, medium and long term investment within the community be communicated as expediently as possible; this will help to reassure the community and to build on the positive relationships and learning from this research and other positive initiatives within the community e.g. the mentoring project.

- 1. Tackle stigma...**
 - ✓ Address the lack of knowledge on mental health difficulties
 - ✓ Train those working and interacting with young people on mental health
 - ✓ Challenge the negative language around mental health
 - ✓ Normalise mental health difficulties
 - ✓ Encourage young people to access mental health support
 - ✓ Empower young people to tackle stigma
- 2. Lack of local expertise, capacity and trained practitioners was often highlighted as an issue during the research, with some concerns being raised about inappropriate support being potentially detrimental to the emotional wellbeing and mental health of young people.**

Therefore, it is recommended that there is investment in bespoke accredited, culturally sensitive training that legitimises proven capable individuals within the community, includes training in safeguarding and is supported by expert external clinical supervision. Ideally, the training and supervision would be free, offer a recognised accreditation and be delivered by excellent, specialist practitioners, perhaps from the Orthodox Jewish community (but this may not be possible or necessary). The training would build capacity, expertise and quality assurance within the community and could build on the success and good practice already within the community e.g. the mentor project recently completed. The capacity building would also support the cultural change already initiated in the community and could be rolled out or cascaded across the community with impact being consistently monitored.
- 3. Education around mental health– evening classes, workshops in schools and yeshivas.**

Education is palatable in the Jewish community and links with the expressed relationship between achievement and wellbeing highlighted by the research. Contacts are strong in London where this work is delivered very successfully and there is an appetite to bring the learning and experience to Manchester given the appropriate local support.
- 4. It was also clear that attainment and achievement was very important for the young people that took part in the research and that this was also a cause of stress and anxiety. Therefore perhaps some specific input around stress and anxiety and achievement might be useful for young Jewish people, brought into schools by experts to support them to achieve whilst managing their levels of stress; these techniques would also be transferrable to other life situations.**

5. After marriage courses. Before marriage all couples have to have around 6-8 classes on preparing for marriage (talking about the Jewish laws etc.) Due to the very young age that individuals get married in this community (18-21 generally) and the fact that the couples date for very short periods of time (around 2-3 weeks) aspects such as finances, mortgages, communication, intimacy, post-natal depression, fertility problems are not widely discussed and can lead to serious issues in marriages and consequently, mental health problems. A course like this would require sensitive development with key community leaders on board.

6. An organisation similar to Relief in London (maybe even a satellite of it) where all the people who are qualified/known to be effective are on a centralised database so when people call up for help for themselves/friends/family members they are signposted appropriately. Something similar is being set up very capably and could be built on.

7. It is clear from the research that isolation and loneliness featured and the desire to socialise and take part in activities. Exercise was also highlighted as a key way to maintain mental health and well-being and therefore there does seem a need for a community hub with a gym, place for people to relax, space for classes and activities and lots of mentors around to speak to. One comment from the evaluation reinforces this suggestion saying...

“I would recommend a community centre where kids could be safe to go for support. I would recommend that there are therapists available to the users if an issue was out of the remit of the regular support people.”



APPENDICES

Appendix 1

People who were met with during the course of the project by the researcher (many more were met with through facilitators):

- Melech Dovid Kanter – Director of Pathways and therapist
- Marianne Debson – Hatikvah/Holding Hearts
- Nechama Rechnitzer – Therapist
- Rabbi Jonny Roodyn – Teacher
- Danya Ross - Therapist
- Esther Hoffner - Teacher
- Nava Kestenbaum – Head of Interlink (Manchester)
- Rabbi Dovid Jaffe – Head of Kids Trust
- Duvi Faulk – Mentor
- Shimshi Warhaftig – Mentor
- Yehuda Issler – Mentor
- Rabbi Dr Tomlin - Therapist
- Nikki Sher – Psychologist
- Jane Mechlowitz – Social Worker (The FED)
- Dayan Westheim – Prominent Rabbi
- Avremi Rosenberg – Therapist
- Yossi Goldberg – Mentor
- Rabbi Wilson – Headteacher (Bais Yaakov)
- Mrs Feddy – Headteacher (Bais Yaakov)
- Rabbi Schpitzer – Headteacher (Bnos Yisroel)
- Elisheva Lieberman – Therapist
- Debra Frazer – Therapist
- Blimi Leitner – Therapist
- Dov Ben-Yaakov Kurtzman – Therapist and founder of Heads-Up

London:

- Yoni Hamilton – Relief
- Leah Chantow – Bikur Cholim D'Satmar
- Naomi Lehrer – Noa Girls
- Headroom Café Representative – Jami
- Rabbi Harvey Belovski – Rabbi of Golders Green Synagogue
- Jonathan Rabson – Shema Koli

Non-Jewish Youth Mental Health Organisations in Manchester:

- Survivor
- YASP
- Hideaway
- Eccles Youth Centre

Appendix 2

Young Jewish People's Peer Research Project Salford Advisory Group Terms of reference
(Draft written October 2016)

Objectives:

The objectives of the Young Jewish People's Peer Research Project in Salford are to:

1. To build a better and more shared understanding of the issues impacting on the mental health and wellbeing of young people within the Jewish communities within Salford.
 2. To better understand and highlight community assets within the community and build on these to support the emotional wellbeing and mental health of young Jewish people in Salford.
 3. To work with local stakeholders and young people to identify any barriers for young people and/or gaps in service offer.
 4. To collectively find solutions to improve provision and appropriate uptake of support for young people in relation to their emotional health and wellbeing.
 5. To identify and work with key individuals, organisations and leaders to champion the need for improved provision and to help build the social and cultural capital required to maximise the impact of the project.
 6. To ensure successful training and development opportunities for the young people involved as peer researchers.
 7. To identify relevant themes that could inform future research and inform opportunities for further work.
-

Purpose of the group:

1. The primary purpose of the group is to support the project team (42ndStreet) to achieve the objectives above.
2. The group has a specific remit to champion the need for improved provision and help to build the social and cultural capital required to maximise the impact of the project.
3. They will do this by meeting together with the funders (CCG) and the providers (42nd Street) on a regular basis and working with them to find appropriate solutions and ways forward for progressing the project and overcoming any real or perceived barriers identified.
4. The group will not be responsible for sign off on all activity but will have oversight and influence on how to best approach delivery to achieve maximum impact.

Membership:

1. The group was identified as being a key instrument in the governance of the project in the initial brief for the work. Initial members were identified by and from the community in order to support and challenge the commissioners (Salford CCG) and providers (42nd Street) and ensure that the project understood and appreciated the social and cultural sensitivities of the proposed research.
 2. In order to continue to ensure inclusivity and transparency the Advisory group membership will need to remain flexible as research progresses and specific social and cultural priorities emerge.
 3. Membership is therefore open to individuals that express an interest and are able to sign up to supporting the project objectives outlined above - specifically Objective 5- and can commit to investing the appropriate time and expertise into the project.
 4. Individuals interested in joining the Advisory group must have agreement from the CCG, 42nd Street and the Advisory Group Chair in advance of meetings.
 5. It is anticipated that as the project develops peer researchers will also be invited to attend/report to the Advisory Group.
 6. Membership on the group will initially be for the duration of the funded project i.e. until September 2017, but may be extended depending on the outcomes of the project and future/legacy plans.
-

Accountability and meetings:

1. A chair will be appointed at the first Advisory group meeting and they will have responsibility for drafting the agenda with Salford CCG and 42nd Street and chairing each meeting.
2. 42nd Street will report back on progress at each Advisory group meeting and seek support, challenge and advice; however 42nd Street is a partner and as such is not accountable to the group; accountability remains with Salford CCG as the commissioners of the work.
3. Salford CCG will act as secretariat for the group, will take notes at the meetings and circulate them to the group in between meetings.
4. If Advisory Groups members wish to generate/contribute agenda items they should inform the Chair, Salford CCG and 42nd Street at least two weeks prior to the meeting; relevant papers will then be circulated at least one week in advance of the meetings.
5. Non-members may be invited to the groups as appropriate and in agreement with Salford CCG, 42nd Street and the Chair.
6. The group will meet quarterly over the course of the project.



7. It may be necessary for sub-groups e.g. task and finish groups to meet in between meetings to progress/support the work.
 8. The meeting times must be flexible and meet the needs of the members.
 9. Individuals and organisations may also be involved in supporting the delivery of some aspects of the work in partnership. Where this occurs, separate arrangements/agreements will be set up. In these instances it may be appropriate for such individuals/organisations to update the Advisory Group at quarterly meetings.
 10. Sensitive and confidential information will be identified as such at meetings and in any supporting notes and paperwork and members must agree to respect the information as such and keep it confidential.
-

Expenses:

Membership to the group is voluntary; however in recognition of the time and resources required to take part, an agreed amount /meeting (including sub-group and task and finish meetings) will be made available to each member attending (not 42nd Street or Salford CCG) to cover costs and expenses. 42nd Street will process any such claims made at each meeting.

Please note...

1. This does not apply to non-members invited to contribute on a one-off basis including young people, where separate arrangements may be in place.
2. This is a separate agreement to any specific project costs that may be paid to partners/stakeholders supporting the activity/delivery of the project work in the community and outside of these meetings.



Appendix 3

Workshop

Introduce project – doing a piece of research of what's available in the community to support young people with wellbeing. Really want to hear your views, want to build on community resources, gain a deeper understanding etc.

Discuss what they would like to gain from it/confidentiality/ground rules – this is a safe space, respecting views etc.... (get the young people to make these parameters).

Ice Breakers:

1. Changing places.
2. Introduce yourself – name and one positive thing you have done this week.

Word storm: Shout out words – Write the words in an outline of a person (one with a happy face, one with a sad face):

1. What does Wellbeing mean to you?
2. What does Mental Ill-Health mean to you?

String Circle:

1. Name someone who you would go to if you was feeling stressed (e.g. Mum, friend, Rabbi etc.) throw ball of string to next person whilst holding onto your piece etc. Write these on the board.
2. Vote with stickers which is the place you would go to: most to least likely.

Agree/Disagree: Vote in a line on a sliding scale:

Would you say the following statements are true or false: agree disagree...

- a) It is embarrassing to admit to having a mental health problem.
- b) Mental health issues are very uncommon.
- c) Mental illnesses aren't as real as physical ones.
- d) People don't get better from mental illnesses.
- e) Mental health problems only occur in adults.
- f) Mental health services are expensive.

Word Storm – shout out words:

1. What would be the main issues for young people your age that could make them feel low/stress them out?

String Circle:

1. When you are feeling low or stressed what can you do to feel better?

If those things don't make a person feel better and they don't have a support system in place, where would be good for them to go to/access? What would you like to see for these people? Think out of the box (draw a box and then put their answers around it).

Conclusion:

Thanking them, explaining that their contribution will be passed onto the Salford CCG and hopefully services will be enhanced in the community.

Go around in a circle with one positive thing you will take away from today.

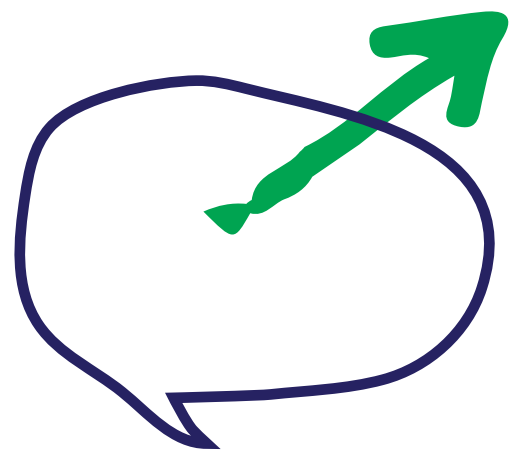
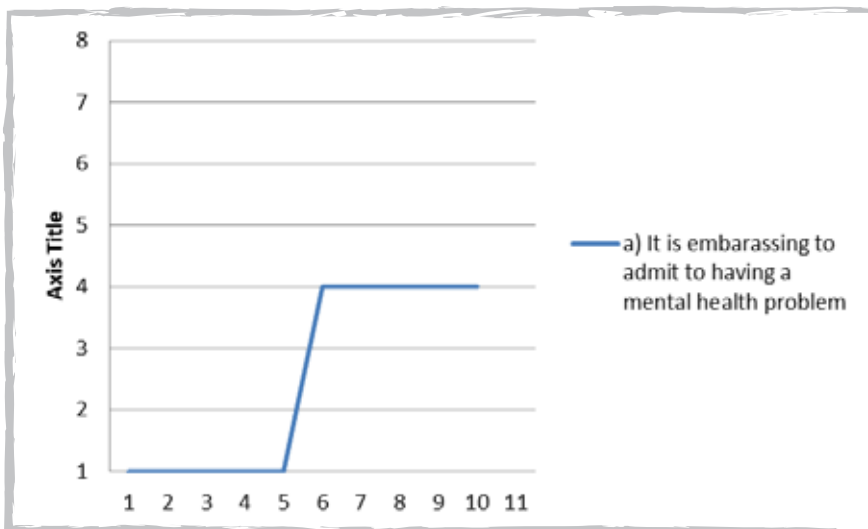
Appendix 4

Where:

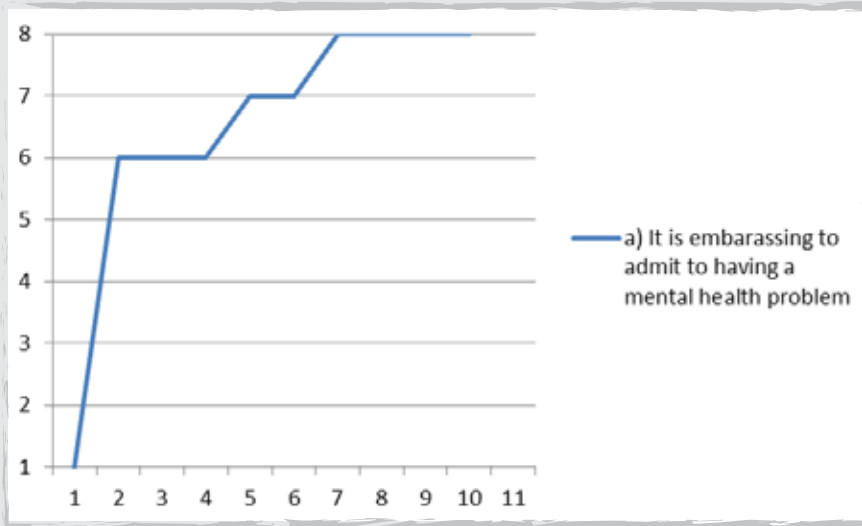
- 1 = Agree Completely
- 8 = Disagree Completely

The results were as follows (randomly presented and anonymised):

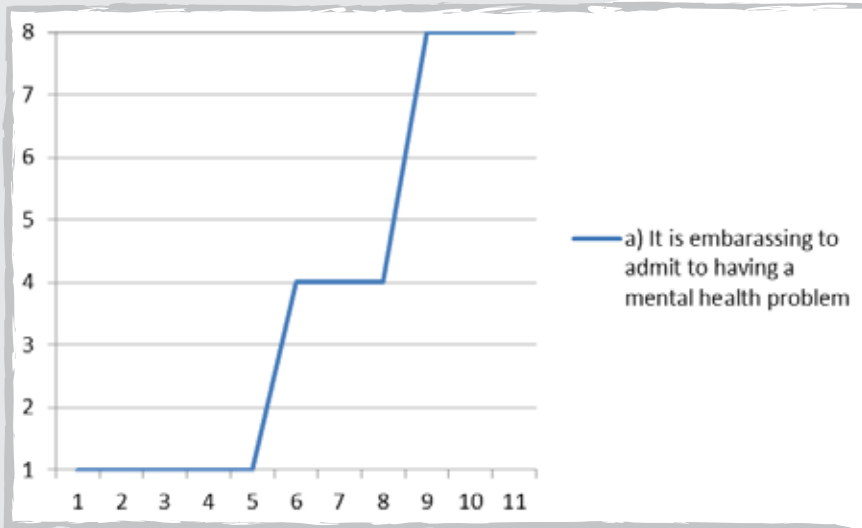
Setting 1



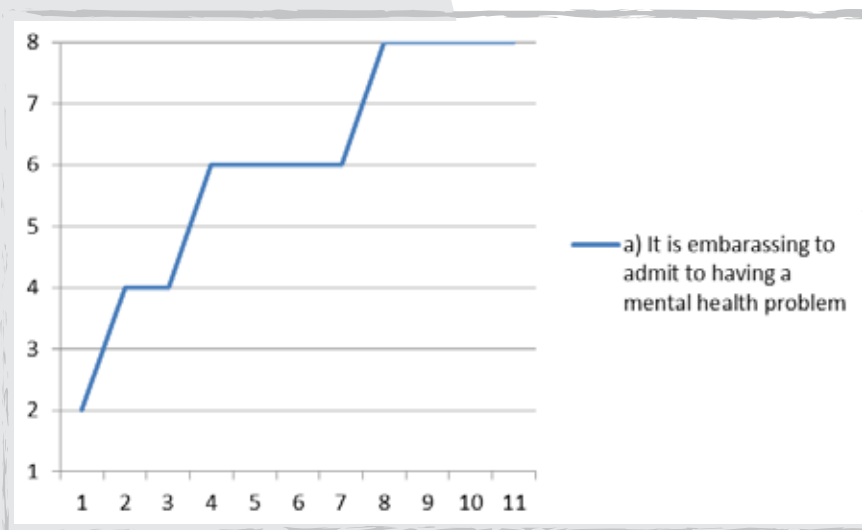
Setting 2



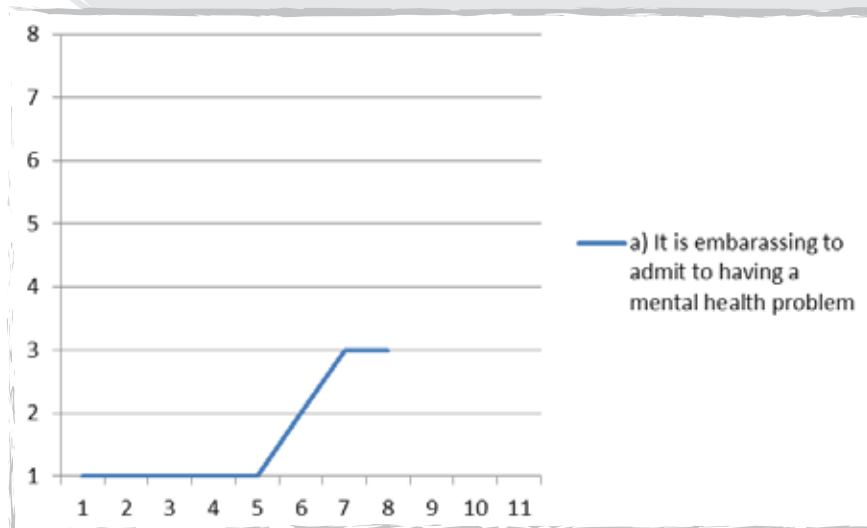
Setting 3



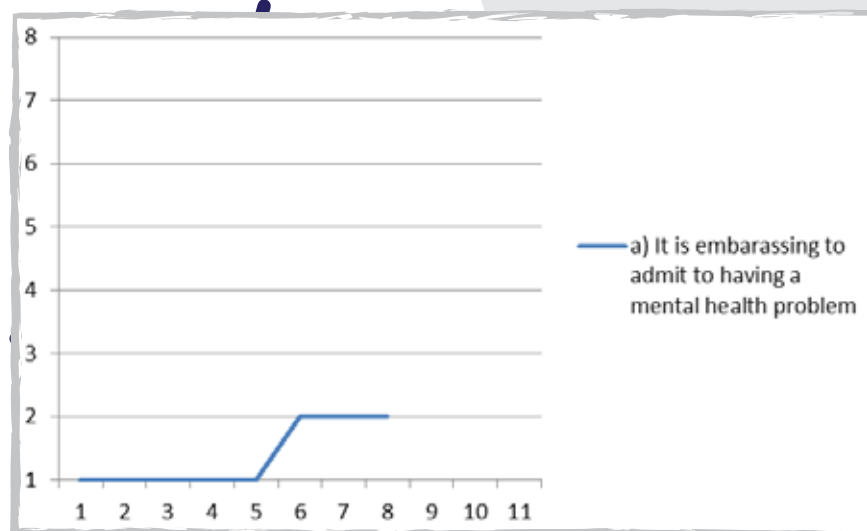
Setting 4



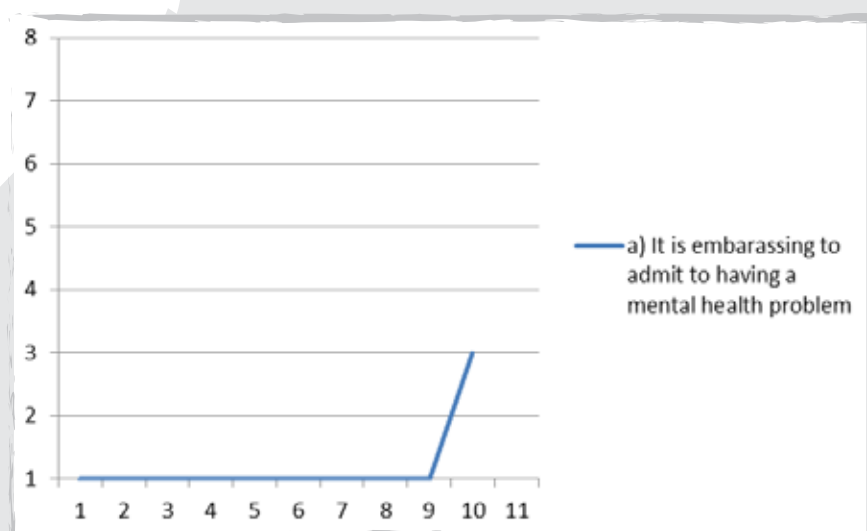
Setting 5



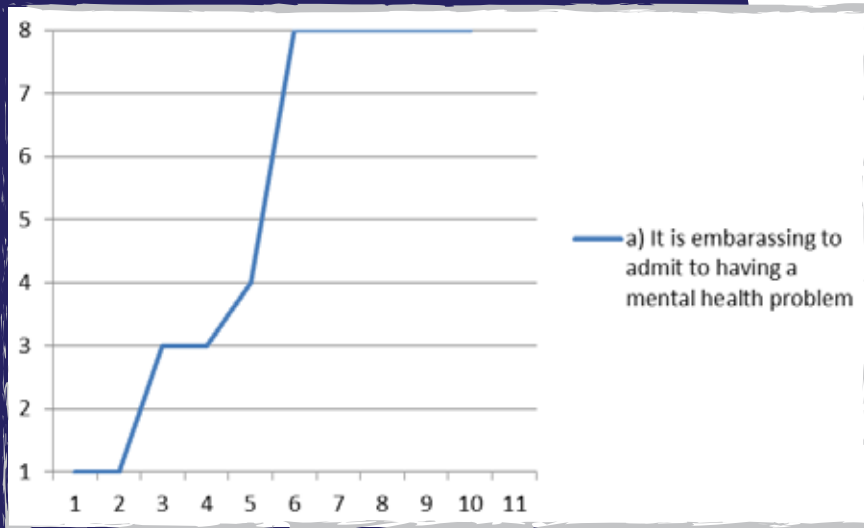
Setting 6



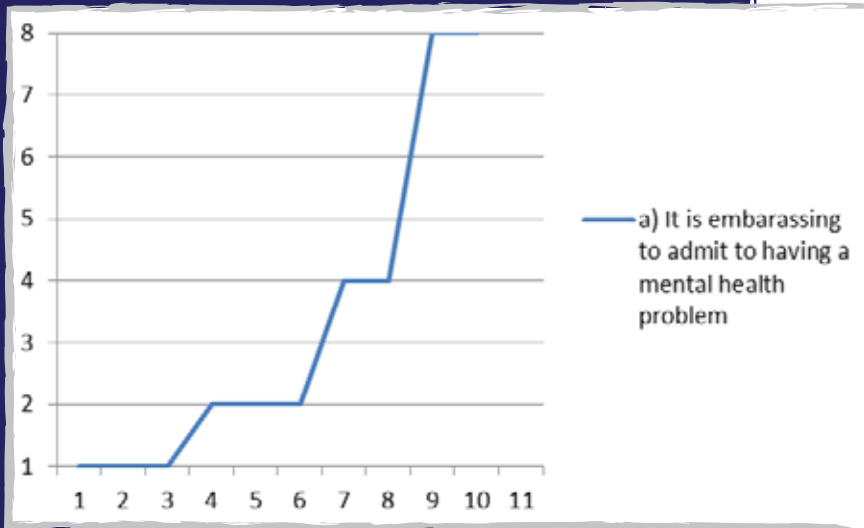
Setting 7



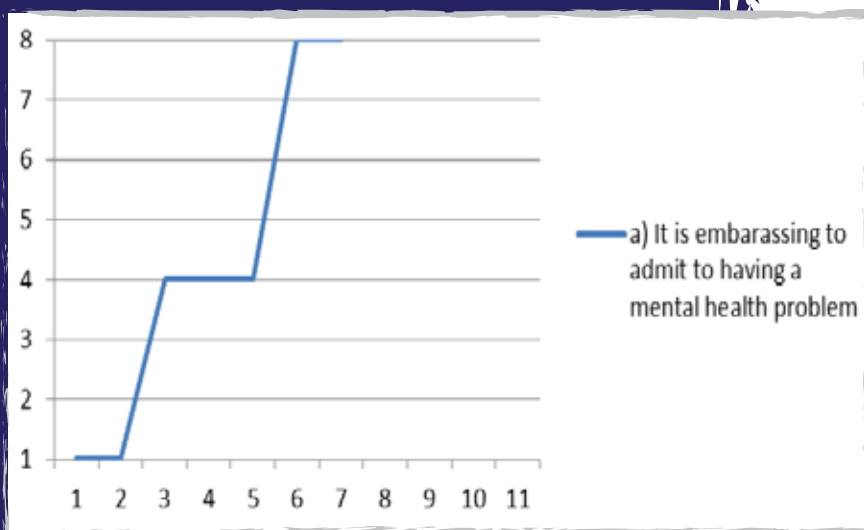
Setting 8



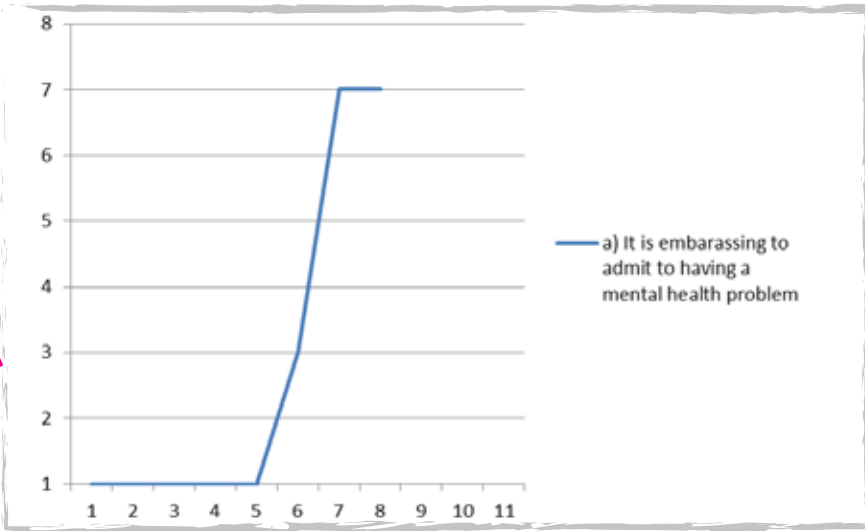
Setting 9



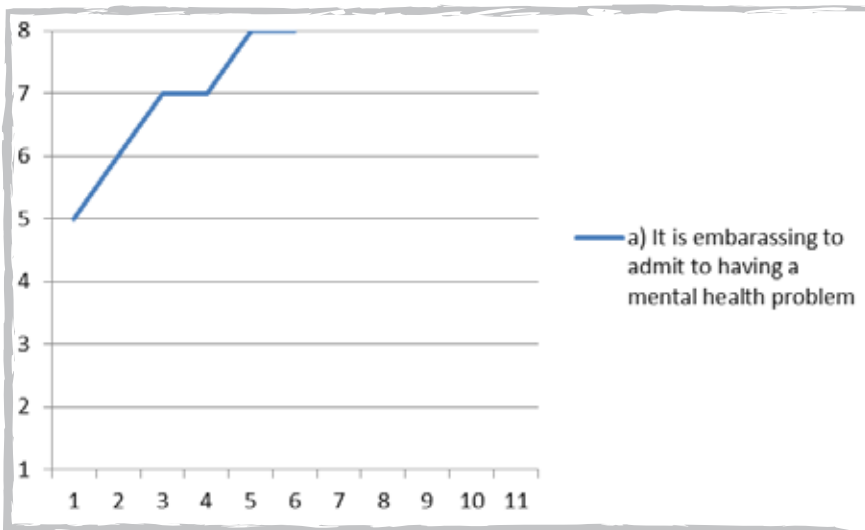
Setting 10



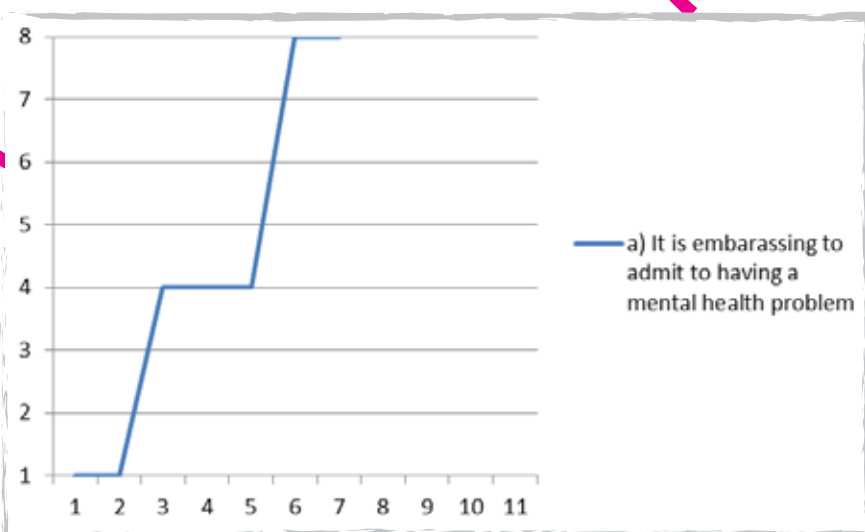
Setting 11

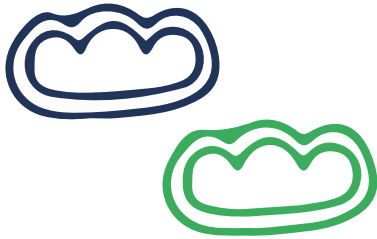


Setting 12

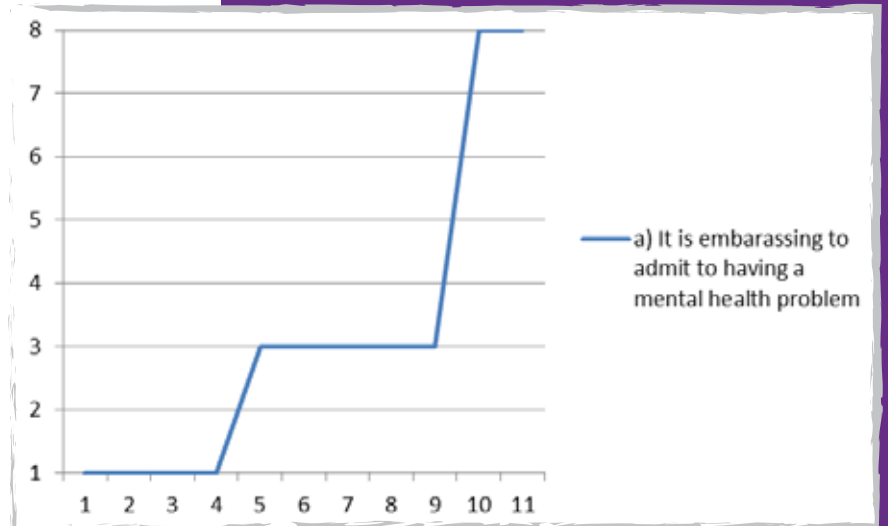


Setting 13

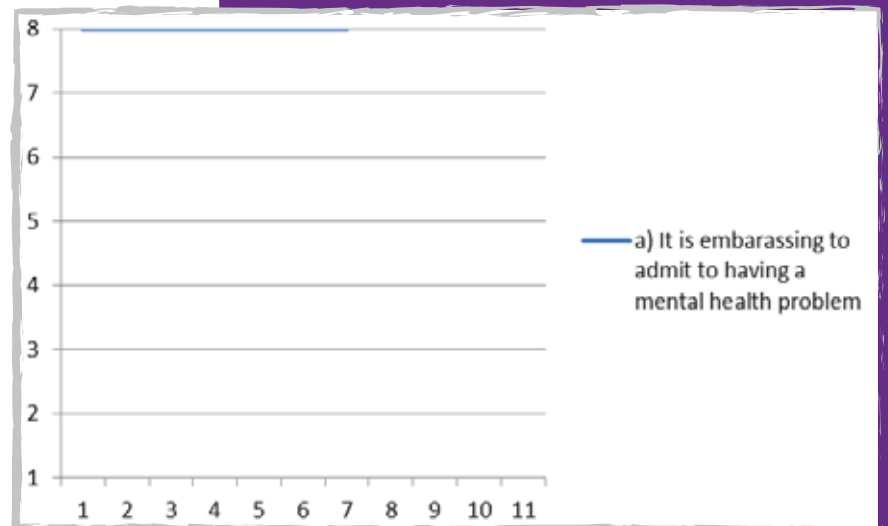




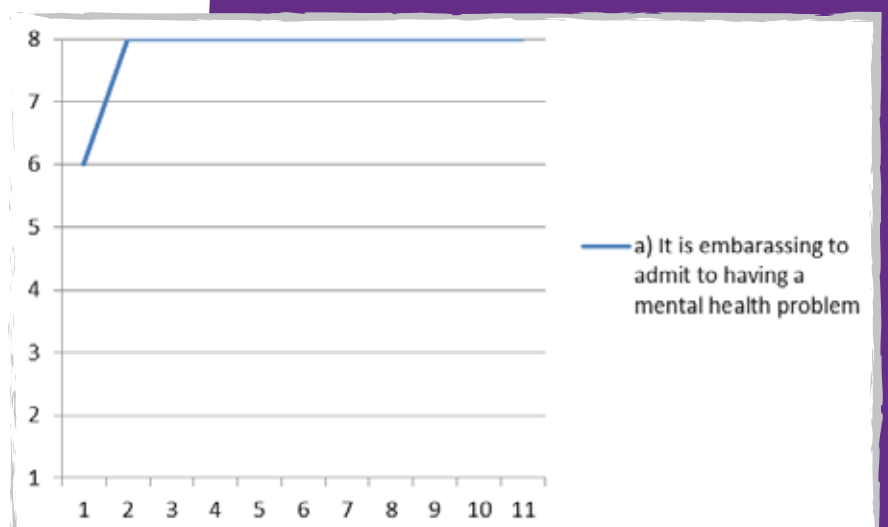
Setting 14



Setting 15



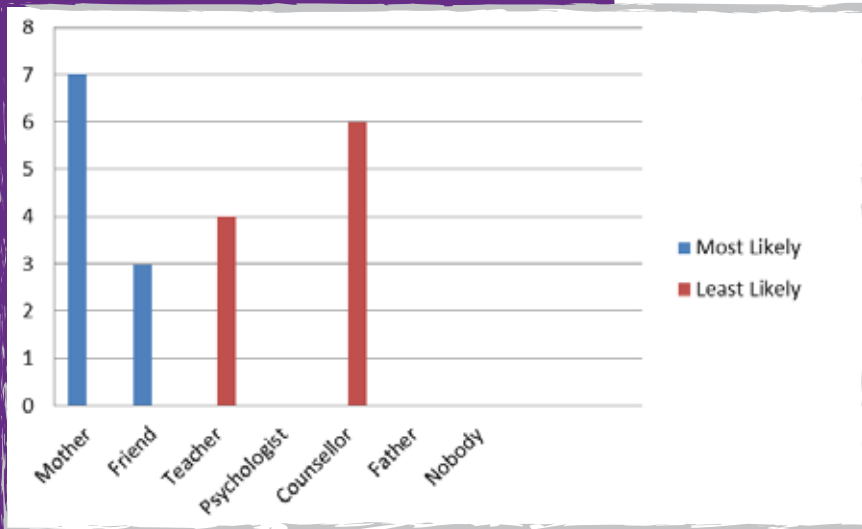
Setting 16



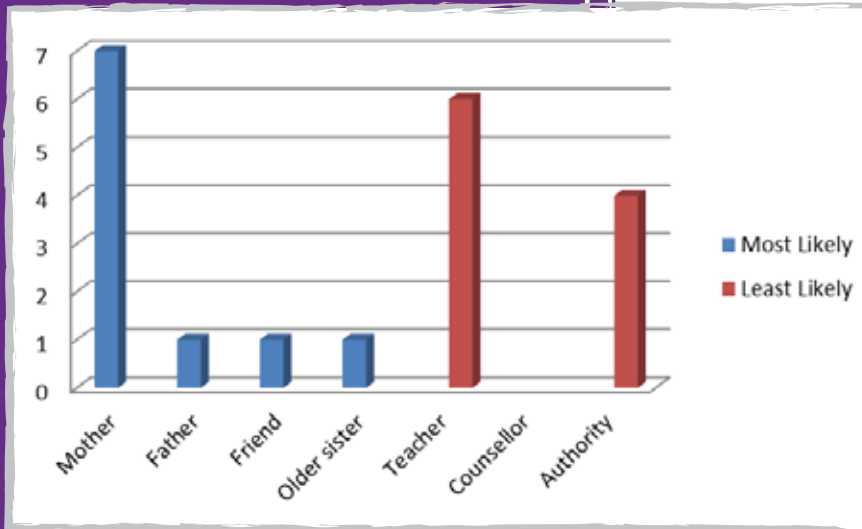
Appendix 5

Please note some settings have amalgamated their data.

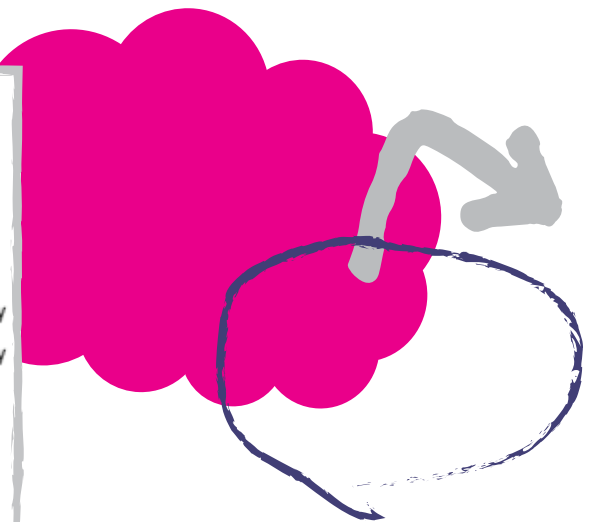
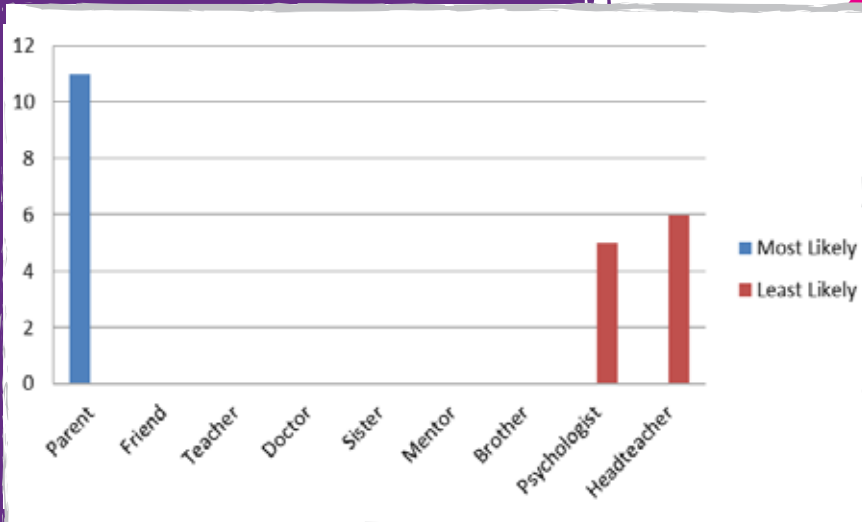
Setting 1



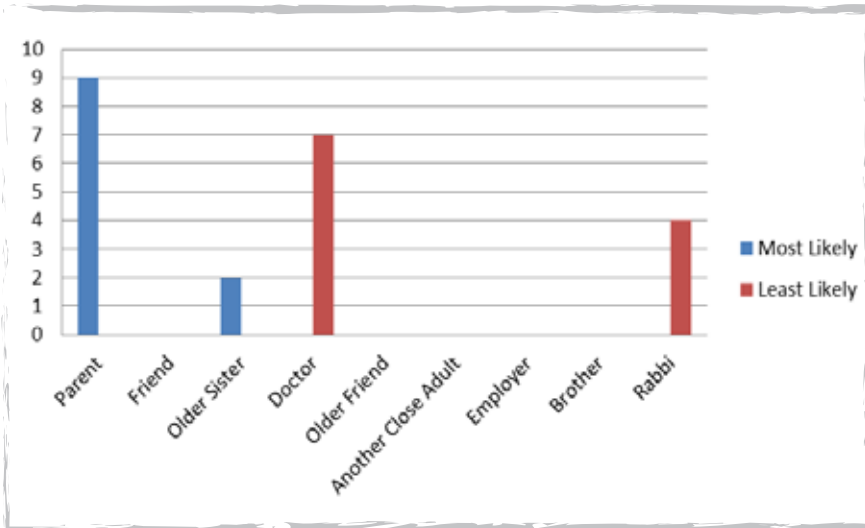
Setting 2



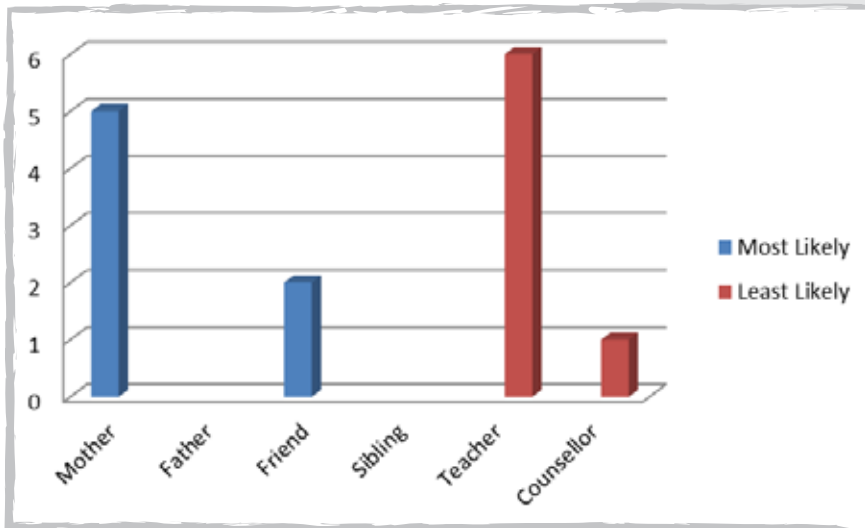
Setting 3



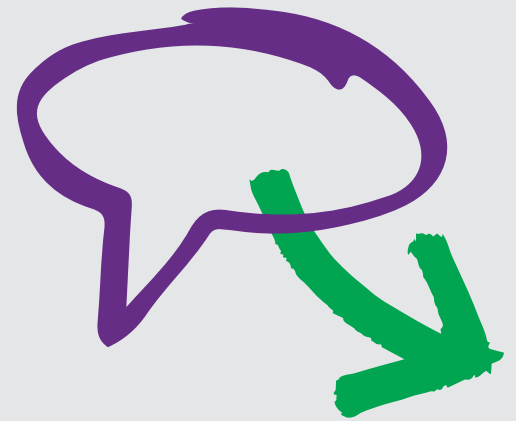
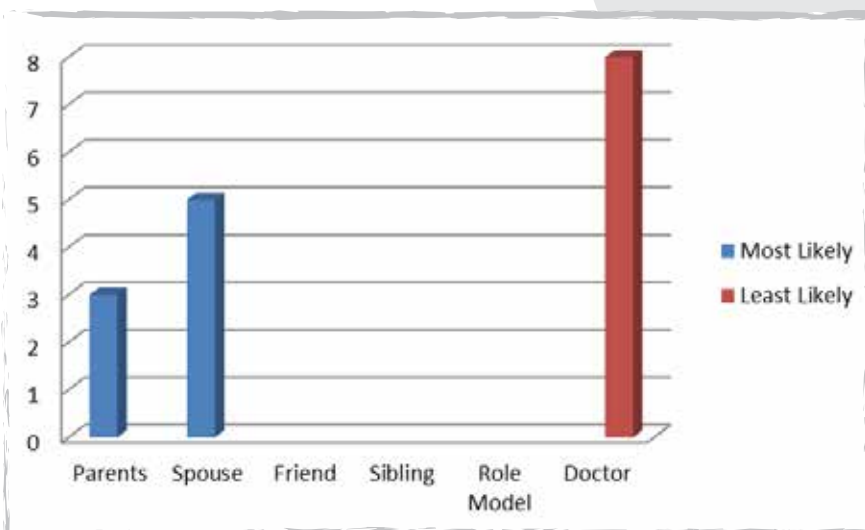
Setting 4



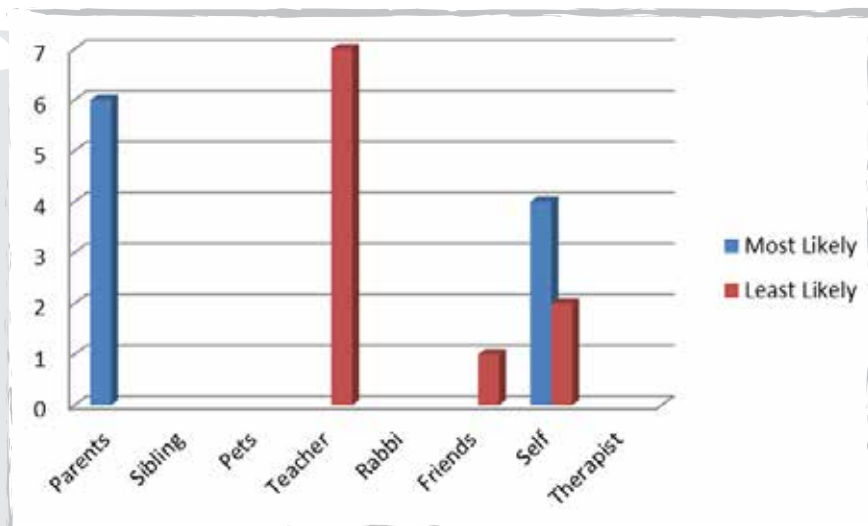
Setting 5



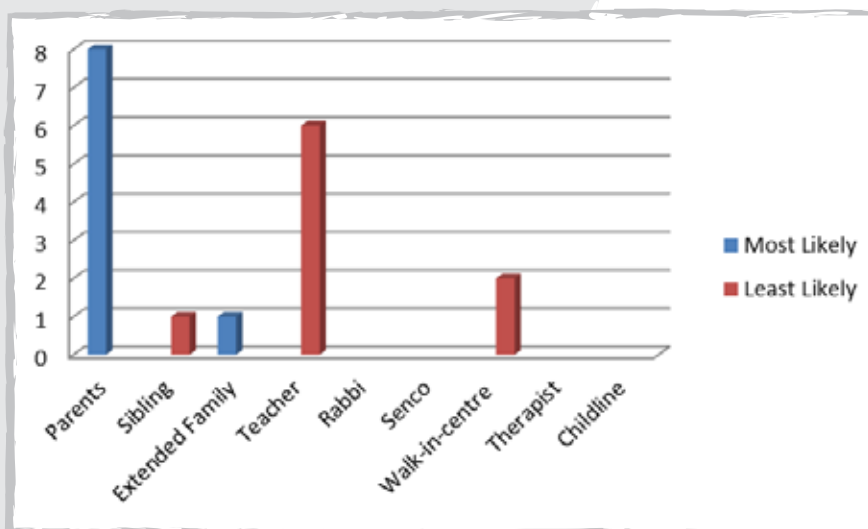
Setting 6



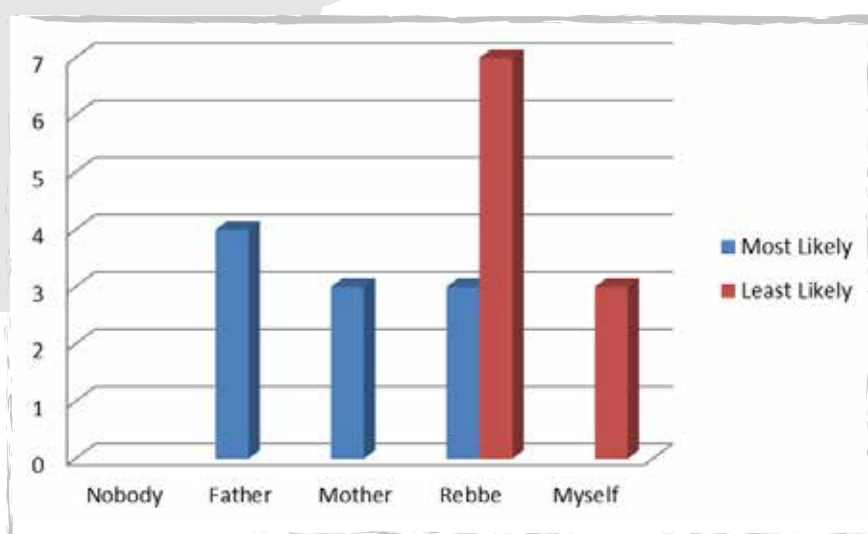
Setting 7



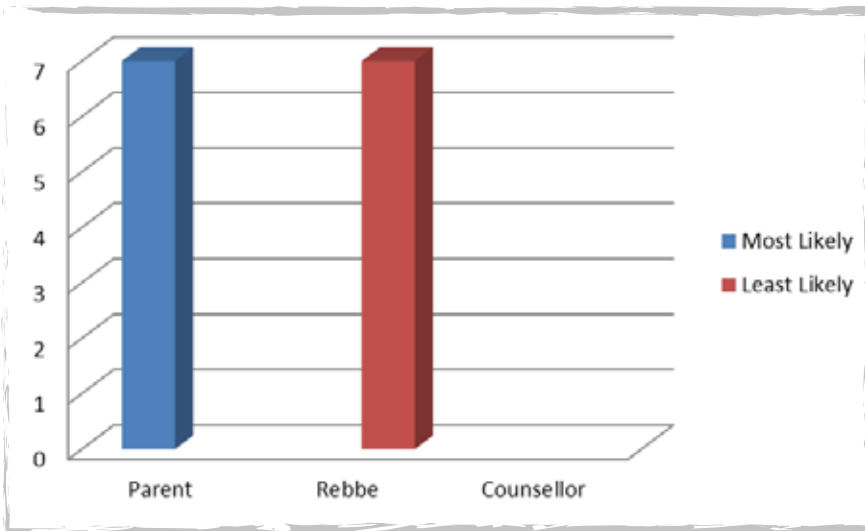
Setting 8



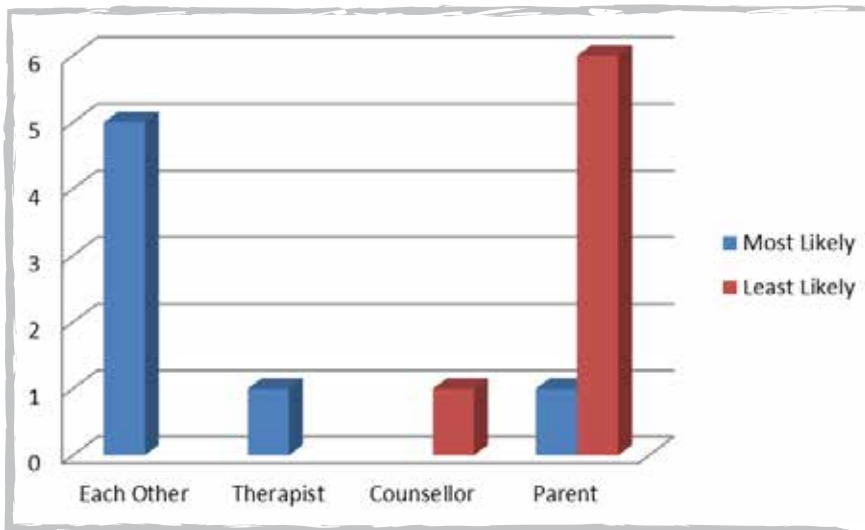
Setting 9



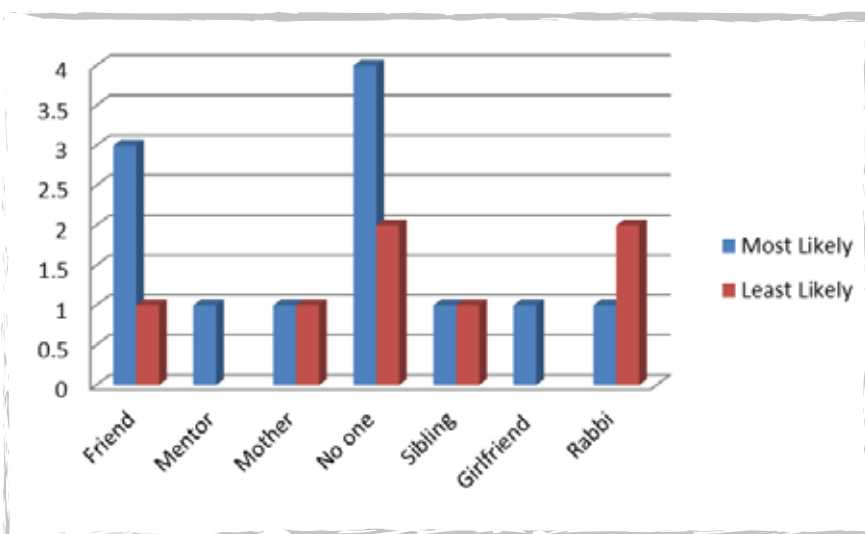
Setting 10



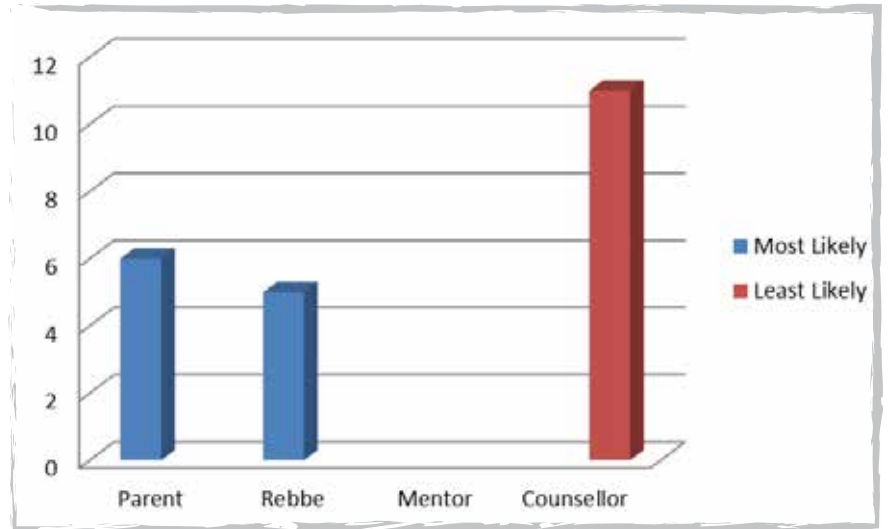
Setting 11



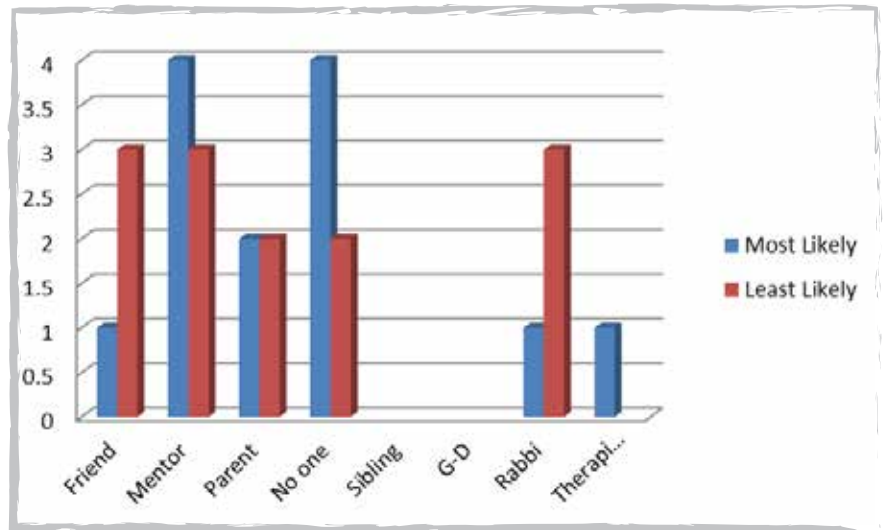
Setting 12



Setting 13



Setting 14



“

CALL US :
Tel. 0161 228 7321

FAX US:
Tel. 0161 228 7321

EMAIL US:
TheTeam@42ndStreet.org.uk

FOLLOW US:
@42ndstreetmcr
@thehorsfall

VISIT OUR WEBSITE:
www.42ndStreet.org.uk

ADDRESS:
42nd Street, The Space,
87-91 Great Ancoats St,
Manchester, M4 5AG

