



Evaluation of the Reading Well for young people Scheme







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The Authors

This research was undertaken by Dr Marie Polley and Dr Marija Kovandzic.

Correspondence to Dr Polley Department of Life Sciences, University of Westminster, 115 New Cavendish Street, London, W1W 6UW Email: M.Polley01@westminster.ac.uk; Tel: 020 7911 5000 extn 62647; Twitter @MariePolley1

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Note:

The Reading Well for young people scheme is one of four 'Reading Well' book lists from the Reading Agency. Reading Well for young people has been marketed to young people using the shorter name Shelf Help. Whilst Shelf Help is the term most often used in this report, Reading Well for young people and Shelf Help describe the same scheme.

Executive Summary

It is estimated that 2,773,460 people under 17 are in need of child and adolescent mental health services provided by the GP or schools. It is also known that half of all anxiety disorders - the most common mental health condition - are experienced before the age of 12 years old.

- Young people face many risk factors for poor mental health but not all young people with mental health conditions seek support or receive the support or services they need. The current environment of austerity means that there is decreasing resourcing of the third sector and increasing pressure on CAMHS.
- 'Shelf Help' is the name that has been used to market the Reading Well for young people scheme. It is a reading list for those who experience mental health problems between 13-18yrs old, or are friends with, live with, or care for people who do and is. Shelf Help is delivered in partnership with the Society of Chief Librarians as part of the Chief Librarian's Universal Health Offer.
- Reading Well for young people is endorsed by health professionals and supported by public libraries and provides advice of specific topics such as anxiety, depression, stress, OCD, self-harm, bullying, eating disorders, autism and aspergers as well as general topics to do with adolescence.

This research report documents the impact of introducing 'Shelf Help' – the Reading Well for young people scheme - into a secondary school environment in partnership with a local charity, which supports the mental wellbeing of young people.

- Adult stakeholders were interviewed during a scoping phase (n=12) to determine how to discretely monitor the usage and impact of the Reading Well for young people at The Priory School and Phase, in Hitchin.
- Multiple copies of the reading list were given to the School and Phase, and young people were left to interact with the books for 3 months (Dec 2016 February 2017. The engagement with the books was monitored at each site. Young people and key adult stakeholders were consented to take part in focus groups and interviews (during March 2017). Qualitative analysis of interviews focus groups used to determine the impact of engaging with the Reading Well for young people books.
- **4** 33 participants provided qualitative data for the project, 18 young people and 15 adults.
- 4 26 participants (8 adults and 18 young people) took part in focus groups and interviews to determine engagement with and impact with the scheme.
- Innovative and successful approaches to getting young people to engage with Shelf Help books were devised e.g. Creating a wellbeing corner in the library, selecting a' book of the week', promoting the scheme to the whole school to create inclusivity and talking points, making Shelf Help the focus of wellbeing events, a staff reading challenge, opportunity to write short reviews for other library users. Books were recommended to service users of Phase which included young people and parents.

128 Reading Well for young people books were borrowed from the library by 67 people during the 3 months, a further 35 titles were borrowed by 18 users at Phase. Borrowers ranged from year 7 to year 11 as well as adults. Several titles were renewed and many were continually on loan for the duration of the project. Interestingly, many people used the wellbeing corner to browse and read books during break-times, without taking out loans.

Many positive impacts of reading the Shelf Help books were identified. Four key themes emerged in the qualitative research analysis:

- ↓ Improved awareness, knowledge and understanding of mental health conditions.
- Improved emotional and mental wellbeing, specifically relating to confidence, self-esteem, hope, isolation and emotional intelligence
- Changes in behaviour and improved relationships
- **4** Normalising and destigmatizing mental health discussions.

Through piloting Shelf Help in a secondary school and charity setting there were several areas of learning going forwards. The books can be accessed by people with low, moderate or severe mental health conditions, thus suggestions to develop a supportive environment include:

- Ensuring appropriate training in mental first aid to key staff involved in the shelf help scheme
 this may include staff who would not normally have this training.
- Provide time and access for staff to read through the list of books and familiarise themselves with the content prior to rolling out to the whole organisation.
- Providing activities, or book groups that would allow young people to discuss the books they have been reading within a facilitated environment, especially where some books may make young people feel sad or upset.
- Ensure the use of the Shelf Help leaflet as much as possible, specifically as it has contact number for support organisations that can be contacted, often 24/7.

In conclusion, all participants found the Reading Well for young people scheme highly acceptable and the inclusive approach has supported an increase in discussion about mental health in each organisation that piloted 'Shelf Help'. Further research should now be conducted to further understand the impact of the Reading Well for young people scheme on wellbeing and resilience.

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"One thing that surprised me, erm, was how many books came into the library, because at first I just thought there was going to be a really, really slow progress to get the books in the library. But when they all came, erm, it was almost like, erm... I know... a tsunami of hope for other people because there was so many different topics that could help people so say anxiety, depression and other stuff, it's just such a wide range".

Participant – young person

"In secondary schools they see that mental health issues are on the rise. So they are obviously primarily they're meant to be educators however that often, when speaking to them it feels like that's a secondary thing. Actually they're, they realise that before young people can engage in education there needs to be, they need to have some support or something. So we see there is a huge need. We're probably looking at 50%, 60%, of young people are struggling with some sort of mental or emotional health need. Now that is from the low level all the way up to the very extreme... But there is just a lot, there is, we're seeing through a lot of our work the lack of emotional intelligence or literacy. It's actually so often young people can't even express how they feel. They just don't know. But they know they don't feel good. If we add on to that, so that, the rise in testing and everything else, just the sheer pressure that young people are under, too often the rhetoric that's coming back from young people is that, I just, I can't cope."

#### Participant – adult stakeholder

### Introduction

#### Background

Mental health conditions have been recognised as one of the leading causes of disability in the United Kingdom (UK). Common mental health conditions include depression, anxiety and phobias (WHO, 2008). For many years the National Institute of Health and Care Excellence (NICE) have recommended the use of a stepped care approach to accessing services for common mental health problems (NICE 2009a, b). The basis of a stepped care approach is to initially refer the patient to the least intrusive, least expensive, most effective intervention to achieve a therapeutic goal. Upon monitoring the patient, the intervention can be stepped up in intensity if necessary (Pilling et al 2011). This approach can, therefore, improve patient access to resources when there are long waiting lists to see mental health professionals and in the case of low to moderate mental health conditions, this may include bibliotherapy.

Mental health conditions can occur at any age, and it is acknowledged that young people are growing up in a world that has less financial stability, increasing levels of austerity and less certainty of around employment and housing (RSE Scotland Foundation, 2017). Many risk factors exist for poor mental health in young people. For example, young people have more electronic media contact than any other age group, which can expose them to cyber bullying, online harassment or inappropriate material. Other risk factors include feeling stressed with school work, poor relationships with parents, peers or teachers, a negative perception of body image, risky health behaviour, experiences of being bullied and low social economic status (WHO, 2014).

It may not be so surprising, therefore, that half of all anxiety disorders - the most common mental health condition - are experienced before the age of 12 (Fineberg 2013; Kessler 2005). Furthermore, correlations exist between mental health problems developed in childhood and adolescence and mental health problems in adulthood (Kim-Cohen 2003). Recent estimates reveal that 2,773,460 people under 17 are in need of generalised adolescent mental health services that are provided by the GP or schools (Aldaba 2017). But not all young people with mental health conditions seek support or receive the support or services they need. Whilst the Department of Health (DH 2014) want to prioritise access to services, the current environment of austerity means that there is decreasing resourcing of the third sector and increasing pressure on CAMHS.

The recent five year strategic vision for transforming the NHS places greater emphasis on innovative and effective approaches to self-care and health and wellbeing (NHS England, 2014). As part of this strategy, and as part of the GP Forward View (NHS England, 2016), social prescribing has gained increasing recognition for its ability to provide non-medical solutions to patients (Social Prescribing Network, 2016). Bibliotherapy has been recognised as a potential approach that could sit within social prescribing schemes, to facilitate reaching a greater number of people.

#### **Bibliotherapy and Books on Prescription**

Bibliotherapy is the guided use of reading, with an intended therapeutic outcome (Katz and Watt, 1992). It has primarily been used as an adjunctive approach for people with mental health illness. The original aim was to provide specific reading material alongside a degree of interaction a health professional or therapist who can help the person engage with the reading material. Today, as the amount of bibliotherapy continues to increase, the degree of interaction a patient may have with a therapist varies according to who the bibliotherapy scheme is aimed at and why it is being used.

Early records show an extensive patient library movement in the US that sought, over many years, to develop patient libraries in hospitals, particularly supporting people with mental health conditions (Panella, 1994). In fact the first medical doctors who were recorded to use bibliotherapy were

Benjamin Rush in 1815 and John Galt in 1853 (in the US), as well as Bruce Porter in England in 1930 (Panella 1994, p56). The idea of using books to support health, therefore, is by no means a new one.

#### Bibliotherapy use internationally

Research conducted recently indicates that bibliotherapy is now being adapted to different countries e.g. New Zealand (Carty et al, 2016), different cultures (Harper Shehdeh et al, 2016) and different user groups. For example, bibliotherapy is being used to support caregivers of young people with first-episode psychosis in Australia (McCann 2013; McCann and Lubman, 2014) and caregivers of people with first episode psychosis in China (Chein et al 2016). It has been applied with an aim of improving psychological capital in University staff in Iran (Papi et al, 2017) and as a group intervention for self-esteem in female university students studying medical sciences in Iran (Salimi 2014). It has been also been used to support the increase in resilience of people with moderate depression in Thailand (Songprakun and McCann 2014), and adolescents with depression in the Philippines (Jacob and De Guzman, 2016).

Bibliotherapy today is described in different ways, often being used interchangeably with other phrases such as guided self-help, books on prescription and healthy reading. The following section will explain the common catergorisations of bibliotherapy.

**Creative bibliotherapy or affective bibliotherapy** describes the use of carefully selected imaginative literature in a group setting to improve the psychological wellbeing of a person. Examples include poetry, novels, biographies or short stories. The aim of creative bibliotherapy is to support self-discovery and insight into ones own life, through identification with a character in the literature. This type of bibliotherapy is more often used alongside therapeutic group based interventions to facilitate therapeutic discussion in both children and young people or adults. The therapeutic group-based approach is facilitated by a trained therapist.

'**Prescriptive bibliotherapy' or 'guided self-help'** on the other hand, uses specific non-fiction books and reading materials that may include workbooks, as part of a treatment strategy for mental health conditions. This may be with varying levels of input from a mental health practitioner. Typically the books are cognitive behavioural therapy books that are used to support a person to learn more about their condition and provide guidance on how to effectively manage a condition often through changing behaviour.

**Books on Prescription** has developed as a simple and cost effective way to reach a large number of people and provide a means whereby a person can take control over an aspect of their life and their condition as with prescriptive bibliotherapy. Books on prescription are prescribed or recommended usually by GPs or mental health practitioners to support people with specific conditions, most notably low-moderate mental health conditions (Frude, 2004). The non-fiction books are prescribed from a book list that has been chosen by appropriate healthcare professionals to quality assure the accuracy and appropriateness of content. The person then goes along to their local library to source the book, often taking a prescription card with them to hand to the librarians.

The first Books on Prescription scheme in the UK was rolled out across Wales in 2005 and is now referred to as the Cardiff Model, (Frude 2004, Farrand 2005). Since then, over 20 schemes were set up in the UK, (Farrand 2005, Hicks 2006). The are several benefits to using books on prescription. Patients are relieved of being confronted with an array of self-help books from internet searches, which may vary in quality, accuracy and accessibility. A person has no way to discern which book will have a therapeutic effect. Furthermore, for people who are experiencing mental health conditions, reading particular content could trigger further problems -an example would be self-harm. These readers, therefore, need to know that the content has been quality assured by appropriate health professionals.

Recommending the use of a specific non-fiction book provides health professionals, such as a GPs and mental health practitioners, with a cost effective 'offer', instead of, or additional to a pharmacological prescription. The bibliotherapy may be used alongside existing psychological support or as a first step in a stepped-approach to accessing psychological services. As waiting lists for IAPT schemes are now often over 6 months, being able to offer some bibliotherapy whilst a person is on a waiting list, is becoming increasingly popular.

#### **Reading Well Books on Prescription**

This national scheme was launched by the Reading Agency in 2013 and is delivered in partnership with the Society of Chief Librarians as part of the Chief Librarian's Universal Health Offer. Reading Well Books on Prescription reading lists are endorsed by health professionals and supported by public libraries. The uptake of the first scheme for common mental health conditions was excellent, reaching 275,000 people in their first year. Library loans of core titles increased by 113% and there was a 70% increase in published sales across the reading list (Reading Agency and Society of Chief Librarians, 2015).

A further three reading lists have since been launched with the support of relevant charities and associations. These include Reading Well Books on Prescription for dementia (launched Jan 2015), Reading Well for long term conditions (launched July 2017) and Reading Well for young people often marketed as 'Shelf Help' (launched April 2016).

Since the launch of the first Reading Well scheme in 2013 the footprint of the scheme has expanded to use a combine creative, psychoeducational and therapeutic model and is offered both on a referral and self-referral basis. For example, fictional and personal stories were introduced into the Reading Well Books on Prescription for dementia in 2015.

#### Reading Well for young people – 'Shelf Help'

Reading Well for young people or 'Shelf Help' is a reading list about mental health for young people between 13-18yrs old. The list is for those who experience mental health problems or are friends with, live with, or care for people who do, to better understand and deal with their situation. The expert endorsed books provide advice of specific topics such as anxiety, depression, stress, OCD, self-harm, bullying, eating disorders, autism and aspergers as well as general topics to do with adolescence (see Appendix 1 for complete titles).

The book list was developed through an active co-production model by health experts and young people. Health experts provided expert knowledge to quality assure the content from a professional perspective. Young people from YoungMinds provided their perspectives to help identify books that young people would find accessible (Hilgers, 2015). This list contains a mixture of non-fiction, fiction and poetry and many books talk about the experience of mental health conditions from the perspective of other young people who have experienced it. To date, the Shelf Help reading list is available is the majority of public libraries in England and is also being purchased by secondary schools to put in the school libraries.

#### Reading Well for young people – 'Shelf Help' in a school and local charity setting

All previous Reading Well book lists were accessed via public libraries, however, Reading Well for young people is also promoted through the school's library service. For this evaluation therefore, a school setting was proposed to provide access to research participants in the target age range (13-18yrs), who could be identifiable once they have used the book list. Furthermore it provide access

to other key individuals (e.g. teachers, school librarian, counsellors), which would not be possible if using a public library setting. This setting was also recommended in the YoungMinds report (Hilgers, 2015, p50).

The Priory School and a local charity, Phase, both agreed to pilot the Reading Well for young people book list. This enabled the researchers to access the target users after they had read the books to find out what their experiences were. This change in approach to accessing the books, therefore, also meant that it was less likely that books would be recommended by health professionals, e.g. GPs, and more by teachers, pastoral staff or school librarians. The Reading Well for young people book list was also available at the local public library, but data was not collected from there.

The priory school is one of three secondary schools in the area. The priory school is a co-educational community comprehensive school in Hitchin. The school in-take is broad and varied with high attaining students, students with SEND needs and also approximately 23% pupil premium students. The school has 1100 students from Year 7 to 6th form.

Phase is a local charity that works alongside young people to promote wellbeing and resilience. Within the three local secondary schools, Phase delivers a range of key support services including mentoring, emotional support, self-harm support and spiritual, moral, social and cultural (SMSC) development. Phase staff therefore, are aware of the specific mental health issues with young people in Hitchin and has become an integral part of how the Priory school supports the wellbeing of their students. Furthermore, both the Priory school and Phase lead the local region in promoting positive mental health and wellbeing in young people.



Three complete reading lists were given to The Priory School. The librarians then created an attractive and informal wellbeing area in the library, specifically to display the 'Shelf Help' books and provide a comfortable reading environment. Books could be borrowed for 2 weeks at a time or browsed in the library during break times.

One complete reading list was provided to Phase who kept the booklist in their office and lent books to young people and adults, when staff felt it would be appropriate. For instance they may feel a book suitable to recommend to a young person who was being mentored or who had attended a group session at the Phase headquarters. Interviewer: "And what are the problems in terms of students' wellbeing and mental health that you perceived that inspired you to take part in this project?" Participant: "Couple of things. So the first thing was a lack of resilience. Lots and lots of students not having the necessary tools to be able to deal with difficulties themselves. Also emotional literacy, not really having an understanding to be able to communicate their feelings, so very quickly, if they were feeling a little bit down one day identifying that that meant that they were depressed, and actually it doesn't. So being able to normalise some of the ways that they feel. And one of the main problems that we deal with in terms of mental health is anxiety, especially around exam pressure and also failure, which then obviously ties in with resilience as well. So those are the main issues that we're dealing with. And we also deal with lots of guite severe mental health, self-harm and suicidal tendencies. We have lots of students that struggle with sexuality as well...So being able to give them the necessary tools to be able to support themselves as much as them relying on our staff to give them support as well. But developing their resilience mainly, to give them something that they have as a sort of a fallback to complement some of the other work that we do as well."

Participant – adult stakeholder

"After reading the book I kind of realised that I might have more than one type of anxiety which is why I was struggling with certain things. So it kind of helps, because then you can, you know what to do to change that, because the book also had that, so it kind of relates to you and then shows you how you can change that."

#### **Evaluation aim and objectives**

The aim of this evaluation was to understand the immediate effect the Reading Well for young people - 'Shelf Help' books had in a secondary school setting.

Our objectives focused on recording and assessing any intended and unintended outcomes of the overall students' engagement with the books from the reading list, mindful of each stage of the intervention and any contingent interactions. This involved the following specific steps.

- 1. To record and assess type and level of engagement of students with the book list and the books;
- 2. To identify incentives and obstacles to reading the books from the list
- 3. To record and assess the immediate effects of reading the books
- 4. To record participants' anticipation of any further effects of the intervention
- 5. To record participants' ideas and suggestions for the improvement of the intervention;
- 6. To construct a theory of change applicable to similar interventions in the similar contexts

It is intended that the sum knowledge derived from this evaluation can provide background evidence and theoretical assumptions for further research in this area e.g. a longer-term in-depth evaluation.

"What surprised me was how it was..., it's kind of how much you learnt from just reading one book and so if you were to read the next you would get more information and be more the wiser of it. But how much I didn't know before, or how much also that I thought I knew before but then after reading just I didn't know. And how much I think if I knew I wouldn't of been that isolated in the past and now I know for a fact I won't be in the future"

#### **Methods**

This evaluation used a pragmatic qualitative approach to explore the effect of implementing the Reading Well for young people scheme in a secondary school and a charity setting.

#### **Ethical considerations**

Ethical approval for this evaluation was gained from the University of Westminster's Faculty Research Ethics Committee (#ETH1617-0068). Informed consent was gained from all participants within the scoping phase and actual evaluation phase of the project. Young people were required to provide consent from their parent/carer as well as consenting themselves. All participants had the right to withdraw their participation from the evaluation at any stage, no questions asked. All data was processed (in accordance with the Data Protection Act 1988), in a locked filing cabinet in the researchers office, and any digital transcript files were password protected and anonymised at the earliest opportunity.

#### Scoping phase

Initial conversations and interviews with adult stakeholders within the Priory school and Phase, the Reading Agency and the local public library, were carried out prior to the book list being implemented and evaluated *in situ*. Adult stakeholders were selected for participation based on whether their role within each organisation was considered key to implementing and supporting the Reading Well for young people scheme. The aim of these interviews was to gain detailed knowledge to determine how best to carry out the evaluation of Reading Well for young people scheme with minimum disruption to the organisations' daily interactions with young people, e.g. to inform the most appropriate way of accessing, recruiting and consenting participants into the evaluation; to ensure proposed data collection processes were viable and acceptable. Moreover the data from the interviews (in addition to the YoungMinds report) enabled the researchers to construct a preliminary theory of change model to be explored throughout the evaluation.

#### **Recruitment of young people**

To make the process of recruitment and informed consent a realistic and manageable process within a large student population, specific groups of students were invited to participate within the evaluation at The Priory School. These groups [*unnamed to preserve anonymity*] spanned a range of ages and provided a potential 80 participants for recruitment.

A specific introduction to the 'Shelf Help' book list and evaluation was held at The Priory School (during school hours). This allowed the researchers to explain to young people what the evaluation was about. The Director of Phase also attended this briefing. This provided an opportunity for questions to be asked by young people and for the researchers to sound out possible data collection approaches. All students were given a participant information sheet (PIS) and consent form and a stamped addressed envelope at this meeting. Teachers handed out further PIS and consent forms if students were unable to attend this meeting or needed a replacement form.

To recruit students who were using 'Shelf Help' books from Phase, PIS, consent forms and stamped addressed envelopes were kindly handed out by staff at Phase.

Consent forms were either returned by post, or to a member of staff who kept them locked in a filing cabinet in their office until collection by the researchers. The researchers then checked the consent forms had been filled in by both parent/carer and young person before logging the young person as recruited.

## Engagement with the Reading Well for young people – 'Shelf Help' scheme

The books were available in The Priory School library (for browsing and/or borrowing) and at Phase headquarters from late November 2016 and are still available to students. The book list was also available at the local library where 50% of the list could be downloaded as ebooks.

To encourage engagement with the booklist members of staff at the school devised a range of approaches to encourage as many people in the school to know about the books.

- The library area was rearranged creating a wellbeing corner, and 'Shelf Help' books were displayed together in a prominent place.
- Any person who read or browsed a book could fill in a feedback card (designed by library staff). The cards were then displayed around the wellbeing corner.
- An official launch of the 'Shelf Help' scheme was held in the library in early December 2016. Students, teachers, school governors, staff from the reading agency, Phase and local CAMHS staff were invited to hear about the books. Books were laid out across tables to enable people to pick them up and have a browse.
- Each week one book was selected as book of the week. This was displayed on the library counter, in the school newsletter and on every digital screen throughout the school.
- Adult staff in the school used the book list for their annual reading challenge.

To encourage our potential evaluation participants:

- At The Priory School young people were asked to select a book to read and then write up a one A4 page book review as part of their coursework.
- When staff at Phase were working with young people either on a 1:1 basis or in a group, the books were recommended when a member of staff felt this was an appropriate situation to do so. People were able to borrow the books for as long as they needed to.
- All young participants were entered into a prize draw to win a Kindle Paperwhite.

# Capturing the experiences and impact of the Reading Well for young people – 'Shelf Help' scheme

The research team collected data on experiences and immediate impacts of the booklist over 4 weeks during March 2017, 3 months after the Shelf Help book list had be introduced to The Priory School and Phase. Data was collected in a variety of ways:

- In-depth qualitative data was captured using focus groups with young people at The Priory School; a group interview was carried out with staff at Phase and individual interviews were carried out with adult participants at The Priory School. All interviews and focus groups were digitally recorded and the researchers took field notes.
- Less detailed text data were also captured from the book reviews carried out for coursework and from the mini-review cards in the The Priory School library.
- Young participants were asked to go through the list of books to tick that they had read, flicked through or wanted to read. Comments could be added if they wanted to (see App 2).
- The researchers collated a list of potential outcomes and young participants were asked to tick all that apply or add their own (see App 3).
- During all the focus groups and interviews, all participants were asked to briefly state up to 3 positive and 3 negative comments about the book list (see App 4 and 5).
- Adult participants were given the Shelf Help leaflet to look through to identify which books they had engaged with.
- A Book issue survey was administered to librarians at The Priory School and to staff at Phase, to determine which books were borrowed.
- Basic demographic data was collected where possible.

#### Data processing and analysis

All interviews and focus groups were recorded, transcribed verbatim, files were password protected and then reviewed for accuracy and anonymised. These data were then imported into NVIVO software (Version 10), for analysis and coding. Analysis of interview data was conducted using the combination of deductive and inductive thematic coding based on the evaluation objectives corresponding to the stage of the project (i.e. scoping phase or evaluation proper).

Data on the positives and negatives of the scheme, the list of books read, and the outcomes of the scheme were all collated by item and frequency. Data from the book issue survey was collated to understand more about the books being borrowed. Demographic data was analysed to provide and overall picture of the participants ethnicity and age.

"well it come backs to what {XX} is saying about how we prevent this [mental health situation] because we realise that is just growing but part of it is helping, we need, I'd say a big part of that is helping young people understand what is normal or it might feel like normal, but what is just normal in reality and actually then what is a problem, and then so far it feels like one of the big struggles are is that nobody really knows what normal is. If we look at media and everything else, go on social media, actually life's meant to be perfect and so suddenly when it's not how do I cope with this? What do I do? And so we again, just to come back to that question of need, the need is huge. There is, from the very low level how we help young people understand the reality and the landscape that they're in through to the high end."

#### Participant – adult stakeholder

Interviewer: What was the impact of the book you read? Participant: Well, it just made me feel like if it ever did happen to me or something like that happened there was always something there or someone there to help you. And it would help you through it and you wouldn't be alone. [...] I didn't know if it would be as helpful as it is and I know that I could tell anyone about it now if it happened. And I could tell my friend to read it or something to help them understand it more and help them and know that they're not alone.

#### **Results**

Evaluating the impact of the Reading Well for young people books in a school library setting has not been done before. One key objective for this project was to develop a theory of change for the reading list, when rolled out to a target readership of young people. Based on all the data analysed, this theory of change is described in Fig 1.

This results section first focuses briefly on participant characteristics (p19, 21), then how people engaged with the Shelf Help reading list (p21-26) and finally what the identifiable impacts of engaging with the book list (p27-36).

#### **Participant characteristics**

In total 33 adult and young people, who were predominantly white British, contributed to data collection for this project. Some initial data was collected in the scoping phase and the majority of data collected in the evaluation phase. The range of participants in each stage is outlined below.

Cohort	Institution	Number of participants	Role	Gender distribution				
				Female	Male			
Adult stakeholders	The Priory school	5	2 Librarians, 2 Teachers, 1 School counsellor	5	0			
	Phase (MH support for young people)	4	1 director and 3 members of staff, all MH youth workers	3	1			
	The local public library	1	Librarian	1	0			
	The Reading Agency	5	Project leads, e valuation and creative lead	5	0			
Young People	The Priory school	17 (20 completed consent forms)	students	10	7			
	Phase (MH support for young people)	1	service user	1	0			
Total participa	nts	33		25	8			

#### Table 1 – Participant information

Outcomes	Increased knowledge of:	Mental health conditions	How to identify and articulate	feelings	How to cope with mental	health conditions	Where to seek appropriate	How to support someone else	with a mental health condition		Emotional & Mental Wellbeing	Decrease in feeling alone or	isolated and angry	Increase in feeling happier,	hopeful or more confident		Behaviour	Empathetic interaction with	people with menual nearing	More able to talk to someone		Relationships	Improved communication	Detween:	Sibilings Parent/carer and vound person	Teacher and student		Environment	Frictusive environment Facilitating discussion	Destigmatising mental health	issues
Mechanisms for encouraging	engagement with the Shelf Help		School and charity setting related	Official launch of scheme	Well designed access to the books	Ongoing promotion of books.	Inclusive promotion to whole organisation	l argeting young leaders and relevant	criampions Required engagement with a book -	coursework	Prestigious feeling of being involved	in an external research project	Rook liet ralatad:	Attractive covers and annealing fonts	Short chapters and text that isn't too	dense	Range of topics	Diversity of book types		Leving o fun concords to uning the books	Paer-recommendations	Have a buzz created around the books.	e.g. events and prize draw	Personal relevance	Wishing to help someone else	General curiosity Having a voice via verhal	recommendation	or feedback cards	Reading is initially less intimidating than	laiking to someone.	
Resources	Time	To plan how best to	house, promote and utilize	the books		For staff e.g. librarians to	make changes to		For staff to familiarize	themselves with the book	llSt.	Books	Multiple book lists in all	appropriate locations		Champions	Nominated champions	within staff and student	Śpod	Training	Potential training for staff	who may encounter	increased levels of	discussion on mental	nealth Issues.					Figure 1 Theory of Change for Shelf Help in a	vironment
Target users	Young people -	irrespective of	whether they have a	mental health	condition or not		In school In volith based	organisations	Within local library		Aduits Teachers and	teaching assistants	Librarians	Pastoral Care Staff	Parents,	grandparents and	carers	Mental health	Professionals in	statutory services.	`									Figure 1 Theory of Ch	school and charity environment

#### Scoping phase (12 participants)

As well as informal meetings, 9 participants were interviewed by the researchers to gain more knowledge of the Reading Well for young people scheme and the new environment in which it was going to be rolled out. Participants included 2 adults from the Priory school, 4 adults from the Phase, 1 adult from the local public library in Hitchin and 2 adults from the Reading Agency.

#### **Evaluation phase (26 participants)**

To establish the impact of the reading list, 26 participants were interviewed - 8 adults and 18 young people. Adult participants included 4 from the school and 4 from Phase. The consultations were conducted within 1 group- and 4 individual interviews with conversations prompted by two paper-based tasks. Eighteen young people from The Priory school and Phase, aged 11-13 and 18, were consulted through 3 focus groups (n=9, 5 and 3) as well and 1 individual interview. Most of the young people participated in the study also engaged in completing several paper-based tasks designed to gather additional information and trigger the discussion within the focus groups; See appendices 2-5.

# How did people engage with the Reading Well for young people – 'Shelf Help' reading list?

This section of the results describes the different and ways in which people engaged with the book list and the mechanisms that encouraged this engagement.

All ways of engaging with the 'Shelf Help' reading list are listed in Box 1 below. Briefly, books were borrowed as formal issues from the school library but a lot of reading without borrowing of the books also occurred at break-times. Books were also borrowed at Phase and the local public library. There was no specific targeting of the books to people with mental health issues, instead they were available to all people in the school. Within Phase, there was a degree of recommending a book to suit a mental health situation.

#### Box 1 – Types of Engagement with 'Shelf Help'

- Borrowing books from the school library, Phase (and from the public library in a few instances recorded)
- **4** Being recommended a specific book for a specific need
- Browsing and reading books in the school library
- Completing and returning the library feedback cards
- Writing book reviews within the school course work
- Participation in the promotional events (Book of the Week, wellbeing and literacy related events)
- + Talking about the books with peer and adults in the school and/or at home
- Taking part in the evaluation research

#### Borrowing from the School library or Phase

In the period from the beginning of December 2016 to the end of March 2017, anonymised data provided by the School library revealed that 5.6% (n=67) of the school population school borrowed 'Shelf Help' books. Borrowers comprised both participants of the evaluation and the wider school community, including adults. A breakdown of the borrowing activities from the School library are detailed in Box 2

During the same period, books were also borrowed from Phase (detailed in Box 3). Books could be borrowed from Phase for as long as needed so no renewals were necessary.

#### Box 2 – Reading Well for young people borrowing activity at the School

- 67 people (42 students and 25 adults), borrowed Shelf Help books 128 times (97 times by young people and 31 times by adults) in a 3-month period.
- The 5 most frequently issued titles were:
  - 1. Blame my brain
  - 2. Bullies, cyber bullies and frenemies
  - 3. Anxiety survival guide for teens
  - 4. Face
  - 5. Self-esteem and being you
- 4 30/35 Shelf Help titles were borrowed, 28 of these by young people.
- 4 30 borrowers were girls (71 issues) and 12 were boys (26 issues).
- Books were borrowed by young people from Year 7 (age 11-12) through to Year 11 (age 15-16).
- 30% of students borrowing Shelf Help books borrowed at least one more title from the collection.
- The maximum number of titles borrowed by a student was four.
- 4 60% of students borrowing a book had at least one renewal of the same title
- The top three most frequently renewed titles were:
  - 1. Anxiety survival guide for teens
  - 2. Blame my brain
  - 3. Face

#### Box 3 – Reading Well for young people borrowing activity at Phase

- 4 18 out of 35 titles from the list were issued to 18 users (15 people and 3 adults).
- 43% of young people eligible to borrow books from the charity's collection did so.
- 4 17% of borrowers took out at least one more title from the collection.
- **4** The maximum number of titles borrowed per young person was four
- 4 13 borrowers were girls and 2 were boys
- Most frequently borrowed book was My Anxious Mind

#### How many copies of the books is enough?

Three copies of the Reading Well for young people book list were provided to the school and one list to Phase. According to qualitative interviews, however, there was a greater interest in the books than is reflected in the borrowing records, as some of the popular books were not always available, even though there were three copies of each book in the school library.

"So the books on things like, self-esteem, by the Self-esteem Team, the books on banish your body image and those sorts of things, they were really popular books so we constantly have requests for students wanting those books again."

#### Participant -adult

"...And one or two members of staff have said, oh, the one I really want to read is out. So you're not getting an indication of the popularity, because we only have so many copies." **Participant - adult** 

#### Browsing and reading the books in the school library

Reading and browsing books without actually borrowing them was reported by both young people and adult participants during interviews and focus groups. Different sources of data have been compiled below to give more insight into this aspect of book use.

Reading in the Wellbeing Corner and other areas of the library occurred during the breaks, and 'Shelf Help' books were used during English classes. Our data indicate

that the short books with lots of images were popular, as well as those related to the topics of bullying, stress, anxiety and depression, body image and self-esteem, with a split interest between fiction and 'workbook' style books.

During the focus groups and interviews participants completed a questionnaire (see Appendix 2) to document if they had read (but not necessarily borrowed), flicked through or seen 'Shelf Help' books they wanted to read in the library. This data showed that the use of books was higher than captured by the borrowing data and revealed a different pattern of interest compared to the borrowing data. A breakdown of the browsing data is detailed in Box 4.

#### Box 4 – Reading Well for young people browsing activity at School

21/35 titles were reported as read by 16/17 participants. The three most read books were:

- 1. I had a black dog
- 2. Banish your body image thief
- 3. Quiet the mind

31/35 titles as 'flicked through' by 14/17 participants. The three most 'flicked through' books were:

- 1. Bullies, cyberbullies and frenemies
- 2. Fighting invisible tigers
- 3. My anxious mind

All titles 'would like to be read at some point in the future' distributed across all 17 participants. The four most 'would like to read' books:

- 1. The reason I jump
- 2. Mind your head
- 3. Stuff that sucks
- 4. The anxiety survival guide for teens

One copy of the most popular book read in the library, *I had a Black Dog,* fell apart after 3 months, due to the level of use and had to be mended by the librarians. This is short and picture based book, making it quick and easy to read, hence more suitable for reading during a lunch break. It was not one of the most frequently borrowed books.



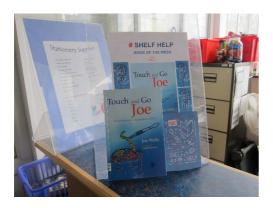
We also asked the librarians if there are any other indicators that the books were being read, other than observing the students.

"I see them reading in the library, but also I know how many times I need to sort the book, and I keep finding them in all over the library. Sometime in the very hidden corners of it." Extract from notes of a conversation with a librarian.

Interestingly almost the same statement was independently received from a health lead in three libraries of London, at the 4th book list launch in the Wellcome Trust in summer 2017.

#### Using events to support engagement

Different approaches were used particularly by the school to promote and maintain the profile of the 'Shelf Help' books across the school. Events included promoting Shelf Help with a launch to celebrate getting the books, and during specific themed weeks, e.g. wellbeing week.



#### Book of the Week:

Each week one of the Shelf Help books were selected as book of the week. This was displayed in the library and on digital screens in every classroom. This meant regular promotion of a Shelf Help book to all pupils. This inclusive approach promoted regular discussion to happen.

"When we had the staff challenge, I wish you'd been there. We should have got you in because there was a real buzz... At the staff challenge the students were busily recommending to all the teachers which books they should read, and the teachers were listening, and that was influencing them. And that was really nice to see."

#### Participant - adult

"I've just borrowed it as part of the staff challenge. [...] I'll Give You The Sun, because one of the students recommended it, and they're a very, very able student, and I've known them from teaching them last year and I really trust their judgment so they said it's amazing, one of the best books they've ever read, so I've borrowed it on their recommendation."

Participant - adult

Besides issuing books to the users (some of whom might not have been involved via school routes), staff at Phase used books in several different ways including reading and referring to them in their daily work, and recommending books to the users, parents and wider local community.

"I think it [Shelf Help] added real value. It was good, especially within our mentoring side, to be able to offer a physical, real, quality book for them to engage with. I think it was really good. I think it added a good string to our bow to be able to talk about it. And I'd definitely agree with what [xx] is saying, there is, long term it's something I personally would also like to do, is actually work my way through these books, and you've just got that history, that knowledge there, but just to have the resource there to be able to say to parents here's these books, have a look, or to young people or to staff, whoever it may be, I thought it had really good impact. It was great. Predominantly all the young people I spoke to, that I'd passed books to, come back and had, yes, there were some things that, ah, that bit I didn't engage so well with, but generally they found the books really helpful."

Participant - adult

# Identifying the Impact of the Reading Well for young people – 'Shelf Help' reading list

Several focus groups and interviews were carried out with young people and adults to gain a deeper understanding of whether engaging with the books led to any identifiable impact on the readers. These data were triangulated with free text data from other exercises carried out during the focus groups/interviews or by students in the school.

Several positive impacts of the book list were identified, which were multi-faceted and related to young people irrespective of whether they were currently experiencing a mental health issue. Impacts also related to adults working with or caring for young people. The relationship between the identified impacts and the mechanisms that facilitated the impact of the Shelf Help book list is summarised in Figure 2 below.

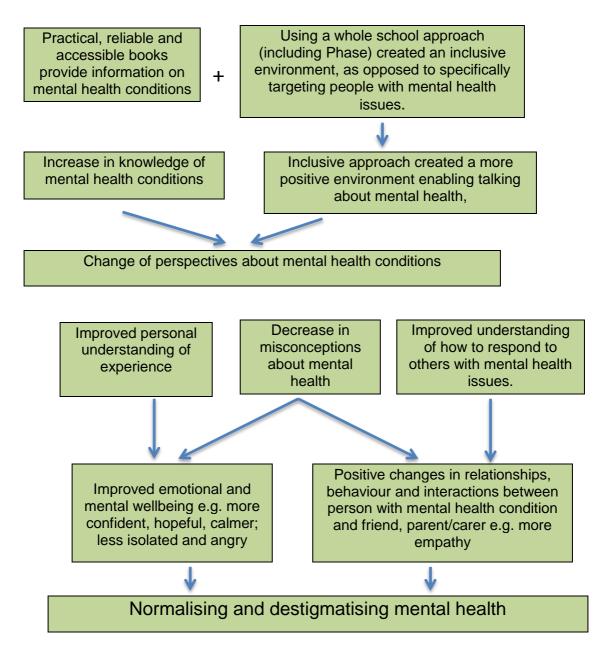


Figure 2. Identified impacts and associated mechanisms of change of the Reading Well for young people – 'Shelf Help' Scheme.

The Reading Well for young people book list was aimed at young people between 13-18 years old, however, have we also identified significant interest in reading the books from young people below the age of 13 and from adults. Box 5 below summarises the key themes that were reported as a result of engaging with the book list. The remainder of this results section will explore the themes in Box 5 in more detail using a combination of perspectives from young people and adults (where data allows).

## Box 5 – Key Themes of the Impact of the Reading Well for young people – 'Shelf Help' Scheme.

- + Awareness, knowledge and understanding of mental health conditions
- **4** Emotional and mental wellbeing (confidence, self-esteem, ease and unease)
- Behaviour and relationships
- Vormalising and destigmatising mental health discussions

#### Awareness, knowledge and understanding of mental health conditions

One essential aim of the reading list is to provide quality assured information to support an increase in knowledge of mental health conditions.

All young participants from School (16/16) reported a better understanding of mental health conditions in general and 75% (12/16) of these people reported that they had learnt more about wellbeing and healthy habits via the books. In some cases they were quite specific as to the conditions they had read about.

"I now understand OCD, asperger's and grief thanks to the books"

#### Participant – young person

Other times they were able to realise that the information learnt could be useful at any stage in your life and having the books available to refer to at a later stage acted as a safety-net.

"I think it's just really helpful to be educated or be prepared you could say for something, for some of the morals and things in these books because it could happen to you or anyone at any time by surprise and you wouldn't know. So it's just really helpful to be educated about some of this stuff in these books"

Participant – young person

The increased knowledge about mental health conditions, have several facets to it. There were reports, for instance, of learning how common some of the mental health conditions actually are and how people can suffer in silence. There was also an understanding that it didn't matter who you were, that we are all susceptible to being affected by mental health issues and that different people can experience mental health issues in different ways.

For some participants reading particular books appeared to help them face their own situation. Sometimes this was because of the information, tips and further sources of help provided by the books, other times however, it was the realisation that they were not alone with their particular mental health condition.

"I was going to say that you don't feel alone and you have, because you know that you're not the only one that suffers from anxiety so you can kind of, and it's helpful to have that because you know that other people have it too and they could have it worse. So it's not the end of the world and there are ways to try and get rid of it for the time being."

#### Participant – young person

Whilst the book list is arguably aimed at young people, the level of interest in the books from adults was surprising to other staff and the researchers.

I'm surprised that staff have been borrowing books and staff have been accessing them quite a lot, before we did the Staff Challenge that staff want to read them and that's lovely, that staff want to up-skill themselves but yeah, surprised at the staff wanting to get involved.

#### Participant – adult stakeholder

Several possible reasons account for the adult interest. Firstly the increase in mental health issues in young people is a foreign concept to many older adults as these didn't exist to the degree that they do now, when these adults were young –and if they did, they weren't talked about. Hence there is an identifiable knowledge gap and appetite in how adults in general deal with mental health issues in young people. Adults also found these books accessible and informative.

"...of course when we were kids you just kept quiet and got on and battled through, and I think certainly for my generation it's changing that mind set, changing that mind set because of course things are different. Family units are different, in virtually all respects. Not across the board obviously but I think enough to have an impact. Social media, it's all impacting on these kids' lives. We only had three channels on telly when I was a kid and you just got on. So I think it's possibly generational, it could impact mostly on it is my feeling."

#### Participant - adult

There were some noticeable shifts in attitude to mental health that were identified. For instance, some participants realized that even if they did experience a mental health problem that it doesn't have to be such a big deal. Being able to rationalise mental health as just another situation that may occur, is an important step in normalising and destigmatising mental health.

"Well, it just made me feel like if it ever did happen to me or something like that happened there was always something there or someone there to help you. And it would help you through it and you wouldn't be alone"

#### Participant – young person

Several adult participants identified that they were aware of a general lack of understanding by young people on what is normal in terms of experiencing stress or anxiety - for instance when doing a test, and when this actually becomes a mental health condition. This was identified through seeing young people talk about feeling stressed, anxious or depressed for example, when really they didn't really know what these terms meant. It was noted that the book list could help young people become more informed. Interestingly, several young participants reported that they were now more aware of how the names of the mental health conditions are used without many people really knowing what they are talking about.

"I think these sort of words get thrown around a lot. So like self-esteem, wellbeing, you know, anxiety, depression. All, all these different things well with mental health I think. But they're never really sort of understood and I think the only way you really can understand it fully is to go through it yourself. But what these books do is they give you, sort of --an insight to it. I mean you're never going to fully understand it unless you've gone through it yourself, because you know what it feels like. But to have the third person knowledge just to help anyone you know going through it is a really important thing and that's what these books are really good at highlighting and doing so ..."

#### Emotional and mental wellbeing

There were many occasions when participants referred to how after having read a book that they felt differently. 11/16 (69%) young people reported feeling better just by reading a single book from the list. As reported in the previous section, the most common experience feeling less lonely or isolated with their situation. Understanding that other people are experiencing similar things is an important step to feeling able to be more open about mental health struggles.

"Yeah I agree with [XX] in the fact that there's other people, you're not the only person in the world that has this problem or that problem or whatever problem. There's other people you can talk to and there's people that won't judge for it, there's people that will just try and help you and they won't judge you at all for it."

#### Participant – young person

Young people also reported that they used what they had learnt to help themselves change how they felt so that they could better cope with a situation.

"I'm very busy, I have lots of outside of school stuff, I sometimes get quite stressed and stuff, homework and things, so there are certain points where I just sit down and just relax and just stay quiet until I've decided, yeah, actually I can carry on working or whatever I need to do. **That's what you learnt from the book?** Yeah, from Quiet the Mind, yeah"

Participant – young person.

*"it helps because when you're having a panic attack or you feel anxious you use that so you think in different ways so you kind of realise that you don't need to be panicking and just try to calm down."* 

Participant – young person

Other young people reported feeling less angry and happier in themselves after reading a 'Shelf Help' book.

"I would say with my book, erm, first of all you think you're angry with yourself because you know that you've been doing this and you know that you shouldn't of, and then... so you're angry but then you read on and then you think, oh why am I angry when this thing's helping me... to stop? So it almost just makes you so much happier, I suppose."

It was also noted that several participants reported feeling better prepared in the event of future problems, which could be interpreted as contributing towards an increase in resilience to cope with mental health situations in the future. Related to this was the idea that the books were in the library or with Phase permanently so there was a 'safety-net' knowing that the books were there if a mental health situation arose that they needed to learn more about.

#### Behaviour and relationships

When the researchers were in the scoping phase of the project, during the interviews, participants reported a general lack of emotional intelligence and ability of young people to know how to talk about mental health.

We're probably looking at 50%, 60%, of young people are struggling with some sort of mental or emotional health need. Now that is from the low level all the way up to the very extreme... But there is just a lot, there is, we're seeing through a lot of our work the lack of emotional intelligence or literacy. It's actually so often young people can't even express how they feel. They just don't know. But they know they don't feel good. If we add on to that, so that, the rise in testing and everything else, just the sheer pressure that young people are under, too often the rhetoric that's coming back from young people is that, I just, I can't cope."

#### Participant – adult stakeholder

Interestingly from the perspective of adult participants, the most reported outcome of the Shelf Help scheme was an increase of interactions and discussions related to mental health. This in turn was seen as way to destigmatise mental health problems. Another important outcome reported by adult participants was an observed development of empathy among students.

The observed increased discussions on mental health were independently corroborated by several of the young participants who reported that they had more confidence to talk about what they were feeling. This was partly because they understood more about what was happening to them, and also because they felt confident using appropriate language to articulate what they were feeling to someone, in a way that would be understood.

"I think it made me a bit more confident to talk to someone. And then also using the examples given so the phone numbers and stuff. So to speak in person I just got more confident with that from reading the book and from being able to understand like how to speak about it and **how to deal with it.**"

Another positive impact of the book list was helping young people who don't have a mental health condition have a better understanding of a person who does. Several participants reported how having a better understanding of a condition allowed them to change the way they reacted to the other person. In particular there were reports of being more empathetic and understanding towards other people. Several time this involved the relationship between siblings.

**Interviewer**: After you've read some of the books did it make you think differently or change the way you thought or interacted with people or anything like that?

**Participant**: Well my [sibling] suffers from anxiety, and anger issues are quite severe, and before I didn't really understand it. Because sometimes he acted a bit funny, or a bit shy, or a bit annoyed. So I would get a bit cross with them, the way they acted. [...] But after reading a book about anxiety it's made me like much more understanding, it also changed my actions to them. So I would calm them down in some ways and like speak nice and not get annoyed at them."

Participant – young person

**Interviewer**: Did that change your relationship with your sibling? **Participant:** Yeah. Yes we used to argue quite a lot because we weren't really playing and we were always like quite separate and but we now like quite closer together, we're normally together at home and we support each other through everything, so –

**Interviewer:** Was that from reading the book? [I Had A Black Dog] **Participant:** Yeah it was --Because we understood each other a lot more and I understood them and what they were going through and I could then..., offer them more support which they then really liked **Interviewer**: Did they read the book as well?

**Participant:** Yeah. I then asked them to read it and I was like, oh how about you read I Had a Black Dog, it's such a good book? They read it and then asked my mum to buy the book which we now have –

#### Participant – young person

Another angle to this theme of communication and relationships involved adults, particularly parents/carers who wanted to better understand the perspective of their young person, so that they could more effectively communicate with them and help to improve their relationships. This could be a parent seeking advice on how to interact with their young person, a young person wanting support on how to talk about an issue with their parent/carer or the parent/carer and young person reading/working through a Shelf Help book together.

"I had a parent call me and just asking for advice for her teenage son, and he was just coming into adolescence and she's really struggling with him at the moment, and actually there was a limit to how much I could say to her, what I could advise, what I could recommend. And actually I recommended the Blame My Brain book for her to get a better understanding of what her son's going through and so that she can, yeah, be a bit more patient and understand it a bit better. But I also suggested, so I suggested that she buy that book, read it herself but also get her son to read it and then they can talk about that together, so it helped give some, helped me give some more practical advice to a parent who has just asked for some support, really, so, yeah."

#### **Participant - Adult**

**Participant**: "My mum saw me reading it and then said that she wanted to read it too, so I've had to renew it a few times. [...] Yeah, but she still hasn't finished. She wants to be able to see how I'm feeling and know how to help me rather than just leaving me to try and do it all which is helpful, but, yeah.

*Interviewer:* So it's helped you communicate with your mum? *Participant:* Yes, and then she can help me as well in the situations."

Participant – young person

#### Normalising the environment

There appears to have been several elements that have contributed creating an environment where it is becoming OK and normal to talk about mental health topics. We think that one crucial element to this was promoting the 'Shelf Help' reading list to all students (and staff) as a way of having more knowledge about mental health conditions. This therefore avoided focusing only on people with known mental health conditions, and made it everyone's responsibility to find out more. This inclusive approach created a sense of normality around talking about mental health. The regular cross-school promotions of the 'Shelf Help' list then kept the momentum going. Events such as the staff reading challenge also changed the dynamics of power, when young people were then having a voice and recommending books to the staff. It is worth noting that Shelf Help as a name was seen as a catchy and fun title, therefore providing a good name to engage young people with.

Interesting, most of the young participants did not have disclosed mental health conditions, but it was apparent that they all had benefitted from reading the Shelf Help books. Moreover, after reading the books, participants were happy to have discussions with their friends or people in their class, about the books.

"[A] heard about the book from me and I now want to read The Reason I Jump because [B] told me that it was a really good book, and Eating Disorders..."

#### Participant – young person

**Participant**: "Every week on the daily bulletin, I don't know if you know, they've put a book of the week and this is where, again in my form, so one child reads out the bulletin and they get to the Shelf Help book of the week and somebody shouts out, 'Oh, that's really good!', that is and again that's when all the shouting starts, but in a good way.." Interviewer: it's interesting that you notice that kind of unprompted conversations about the books.

**Participant:** Oh yeah, and almost weekly. Almost weekly. Every time the new titles come up"

#### Participant – adult.

Overall the increase in knowledge, awareness and conversations about the books appears to have started to destigmatise the issue of mental health within the school and there are indications that this knowledge may improve resilience.

## Wider impacts of the Reading Well for young people – 'Shelf Help' reading list

Whilst the evaluation was focused on the immediate impacts of engagement with the book scheme, some wider impacts were recorded. During the time of the intervention, at least one other local secondary school decided to buy the collection of Reading Well for young people books. One reason for this was certainly the input from one of the staff from Phase who also provided group support to that school:

"I would say that partly the schools understand that they need to do more for young people's wellbeing, and mental wellbeing especially, and so therefore, so you've got one school and Phase doing something together, and [...] the [other]' school was very much like, 'Actually we've got a little pocket of money, this seems like a really good thing to invest in, so let's do it [buy a Shelf Help collection]. So we went and had a meeting with them and talked about the process that we'd been through and our thoughts on it. Very much they were like, 'Great, we want to get this up and running!"

#### **Participant - Adult**

As well as another school taking interest, the local public library had a display of the books. Our focus for this evaluation was on the school and charity use of the book list, hence we didn't analyse the borrowing figures from the local library - there was, however, an increased awareness from some of the local library users of the presence of the 'Shelf Help' books.

Oh I went to the Hitchin Library so, because I saw them [the Shelf Help books] there as well and I looked at them and I showed my mum and my brother and they thought they were a good idea.

### Participant – young person

One final wider impact suggested by a young participant was that people who are in positions of authority, such as the statutory sector could benefit from reading this book list. It was thought that these professionals would be more able to effectively interact with young people who are experiencing mental health issues.

### **Points of consideration**

This report gives a highly positive view of the Reading Well for young people or 'Shelf Help' scheme and it was clear that the participants interviewed really valued the book list. As with all projects there were also some points raised that way want to be considered by the organisations' as to whether they need addressing¹.

It is important to remember that the books on prescription lists were initially intended for health professionals to recommend to patients, which provided a personal involvement in recommending the list to people who would be judged suitable beneficiaries of the list. The Reading Well lists, however, have been developed as a referral and self-referral model, The Shelf Help book list was also aimed at young people with low to moderate mental health conditions and by bringing it into a school library, people with any level of mental health, are exposed to the books. The element of a personal recommendation of the list to a suitable candidate is also not necessarily present. Furthermore the people who become the recommending agents are different. This led to several related points being raised by both young people and adult participants. Appendix 4 and 5 provide a snapshot of what was positive and negative about the Shelf Help Scheme and many of the negative points are discussed in more detail below.

- A small number of young people noted that sometimes they felt uneasy or sad for the people they were reading about in a book, or to know that there are lots of other people out there suffering. Whilst they didn't say that this stopped them reading the books, it is important to be aware of these responses. This could be interpreted as a negative impact of the Reading Well for young people book list, or more evidence that there is an increased awareness about mental health conditions - or both. There were no formal activities for the young people to then participate in e.g. book club discussions, and time limits prevented us from further learning how the young people processed these emotions and responses to the books.
- As there is no 'filter' to recommending the books, people with more serious mental health issues are free to read the books. Whilst you can argue that the books could be accessed anyway (in the local library for instance), being aware of how books can trigger or aggravate existing mental health conditions may need further attention. One participant reported a quite profound impact from reading Kite Spirit - it made them more aware of the impact that harming themselves would have on the people left behind (Kite Spirit focuses on how a young person copes after their friend commits suicide). This led to a discussion on whether there should be 'trigger ratings' on books so that people at the more severe end of the mental health spectrum have some warning of how the book may potentially affect them. To add to this point, students experiencing suicidal thoughts were identified as an area of support that is needed for some students within the school population or at Phase.

 $^{^{1}}$  NB, if any points arose that the researchers felt needed attention, these have already been communicated to the appropriate people].

- Related to the above point was an observation that the Shelf Help leaflets that come with the book list, were not used to their full potential. They were handed out in some cases and displayed in the library, however, very few participants had picked up were aware that there were contact details for support organisations as well as the book list in the leaflet. Ensuring readers do know where to get support at anytime of the day or night is important.
- No negative events were recorded in our interviews or focus groups (except feeling sad about the topics), but several adult participants discussed the possibilities and their concerns that young people may end up self-diagnosing a condition when actually they need to see a mental health professional for support. Furthermore there were concerns that students may end up 'jumping on the bandwagon' and having mental health issues when this is not really the case – which takes resources away from those that genuinely need support.
- As a result of the success of the scheme, some staff found that they were increasingly in the position of having conversations about mental health issues with young people, and this was sometimes beyond what they felt equipped to deal with effectively. This research has therefore revealed the need to identify which adults will have most interaction with young people who are reading Shelf Help books, and ensure that they have the necessary training to talk with a young person about mental health.
- A related point to the above was that many adults said that even though the books have been reviewed and quality assured, they would like to have chance to read the books and be more familiar with them so that they feel happier directly recommending the books to a young person. This demonstrates the level of support that the adult participants wanted to provide for the young people and the idea of recommending the book to a person that you have some professional relationship came up several times.

"So in terms of my own work, having [Shelf Help] resources available that we can just pick up and read, and I think then I find it more useful to, yes, this is a really good list, so I know that it's safe to pick any of these to give to young people. But I will remember to offer it to someone if I've read it and I know the context and I know what's involved in it, because then I'll be like, OK, I know specifically that this will help you do this, whereas I haven't read most of the books on the list so they don't come to the forefront of my mind for me to remember to recommend them to someone, unless I'm specifically looking, I know, I think this young person would really do with having some sort of, something to read outside of our sessions, because in the rest of my work, which is large group stuff, like assemblies or huge lessons, there isn't really space for those things, like Shelf Help, to come into a conversation, so, yeah"

#### **Participant - Adult**

### Recommendations

This research has identified a much larger scale of use and appetite for the books in the Reading Well for young people scheme than initially anticipated – much of this due to the enthusiasm and vision of the two organisations who initially agreed to be pilot sites. Users outside of the initial target group have been discovered (younger and older), innovative methods of engagement have been created, and in some cases, points of discussion raised to ensure the highest level of governance and risk management can be achieved. Furthermore, this research has identified many potential new areas of exploration. This section is divided into recommendations appropriate for different stakeholders and represents suggestions from participants as well as the researchers.

### For the schools and local partners implementing and using Reading Well for young people – 'Shelf Help'

- Map out who could be involved with the scheme and identify 'champions' within the school that represent the relevant people across all vertical management structures. For example, involve heads of year, head of literacy, library staff, pastoral staff, teaching assistants, and student leaders, wellbeing champions etc.
- Explain the process of book list generation and accreditations to all leads involved in implementation at the very beginning
- The book list comes with a Shelf Help leaflet that promotes external support agencies for readers who may want further information and support. It is important that these leaflets are readily available alongside the books and that Champions are aware of them.
- Aim the book list at all people in the school or organisation, as opposed to targeting people with mental health issues. This approach encouraged wide spread discussion about mental health and helped to destigmatise mental health as an 'issue'
- Ideally plan the introduction of 'Shelf Help' in good time to weave it into academic planning.
- Protect time for staff to read/explore the books on the list before the launching the list.
- Identify which locations can house the books e.g. library, pastoral care offices, staff room. Then ensure all champions are aware of all locations within the school and locally where the books could be obtained without charge, including ways to obtain ebooks.
- Provide First Aid for Mental Health Training to all staff who have key involvement within the 'Shelf Help' scheme.
- Ensure there is a clear safeguarding and referral structure to ensure young people are signposted appropriately internally and externally if further support is needed.
- Use regular promotional activities to encourage people to engage with the 'Shelf Help' booklist. For example nominate a Book of the Week and circulate to the whole school, have a staff reading challenge, allow people to fill in short feedback cards.
- Consider putting the book list and details on the school / organisations' website so that other people e.g. parents can utilise the books.

- ↓ Order extra copies of the most popular books (3 copies was not enough)
- Create a space for follow-up conversations about the books read and their effects:
  - As availability of one-to-one confidential discussions with pastoral care staff as well as in form of peer lead book club discussions and forums or as a planned part of discussions in already existing groups e.g. Managing Emotions group, etc.
  - Consider having one member of the pastoral team available in the library at certain agreed points of time where it would be easier to access them on informal basis; That would also provide for closer collaboration between library and pastoral staff, which would be valuable having in mind an informal pastoral role that librarians perform on the daily base

### For the Reading Agency and the Society of Chief Librarians

- Commissioning/including more comics and picture books
- 4 A wider variety of books were requested on
  - eating disorders,
    - o bullying or self-harm
    - o General wellbeing which can help mental health
    - LGBT and sexuality
    - Social skills forming relationships and maintaining them
- Include audio books for people who find it hard to read through a whole book, or want to listen to the book in a private environment.
- **4** Review how users with learning disabilities can engage with the books
- There was a good appetite for the booklist by adults. This book list could therefore be promoted far more widely to
  - Teachers and teaching assistants,
  - o parents/carers,
  - $\circ$  youth workers and
  - professionals within statutory services who have interaction with young people

#### For the Wellcome Trust and other researchers and funders

This research was intended to be a small scale early phase project to initially explore and understand the impact of using the Reading Well for young people books in a school environment. Whilst it has achieved its aim, there are limitations that need acknowledging and further research that could be carried out.

The booklist was impactful across a range of young people and adults, (most of whom had no or low levels mental health issues). We deliberately did not target participants with diagnosed mental health issues, therefore the impact of the Shelf Help booklist on young people with diagnosed mental health conditions and more severe conditions could be further explored – in particular to understand how the content of the books could influence their feelings, and to ensure that there is no triggering of harmful behaviour.

- The target population of the Shelf Help list was 13-18 years old. Our participants fell just below/ at the bottom end of this age range or were at the very top end. Therefore more data from a broader age range would be beneficial to corroborate these initial findings.
- The impact of the Shelf Help book list in this pilot study indicated that there were identifiable changes in emotional and mental wellbeing, awareness and understanding of mental health conditions and actions towards oneself and other people. It is recommended that further research is carried out on a larger population of young people and adults to confirm the immediate impacts identified here.
- To expand the provision of the Reading Well for young people book list, piloting of mediated approaches of engagement via established models such as community navigator / peer champion / social prescribing schemes could be tested - underpinned by action research. This could include the development of personal, health and social education (PHSE) materials for schools.
- The research was limited in timeframe frame and more research could be carried out to understand how the immediate impacts of the Shelf Help scheme may change and mature over time. Is there a noticeable large-scale effect in a school environment on wellbeing or resilience, for instance?
- This was a qualitative research project and future research want to explore the use of some validated quantitative measures to determine whether the outcomes observed could be measured.
- The impact of the book list on an adult population was not fully explored. The level of interest in this book list from adults warrants further exploration of the potential use and associated impact. This could include how teachers and teaching assistants can benefit from reading the books, how professionals in statutory services e.g. police, could use the book list, as well as youth workers and how school and parent/carers could work together to promote and utilise the book list.

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### Appendix 1. Reading Well for young people – 'Shelf Help' reading list

Reading Well for young people recommends expert endorsed books about mental health, providing 13 to 18 year olds with advice and information about issues like anxiety, stress and OCD, and difficult experiences like bullying and exams.

The books have all been recommended by young people and health professionals, and are available to borrow for free from public libraries.

Full details of the reading list can be found on the Reading Agency website <u>http://reading-well.org.uk/books/books-on-prescription/young-people-s-mental-health/general</u>



## Appendix 2. What books have you read, flicked through or want to read?

Example of a page from the whole list that was handed out to young participants during focus groups or interviews.

No.	The Book	l read it	l had a flick through it	l'd like to read it	Comments
1.	NICOLA MORGAN BLAME MY BRAIN MUTURN AMARINE TEENAGE BRAIN REVEALED				
2.	ALL ABOUT OUR MENTAL HEALTH				
3.	STUFF THAT SUCCES ACCEPTENG WHAT YOU CAN'T CHANGE AND COMMITTING TO MART YOU CAN BEN SELLEY				
4.	WITH A FOREWORD BY ZOELLA WITH A FOREWORD BY ZOELLA THE THE THE THE THE THE THE THE				

## Appendix 3. What is the impact of the book(s) you have read in the Shelf Help Scheme?

There are different ways in which a book as well as a scheme like Shelf Help can influence someone. Below are some examples. Please think of your overall experience of the Shelf Help scheme and tick all of the effects that you experienced.

No.	Example of a potential impact of the Shelf Help Scheme	Please tick any that apply to you
1.	It cheered me up.	
2.	It really bored me.	
3.	It made me feel uneasy.	
4.	It helped me to learn more about mental health in general.	
5.	It helped me learn more about well being and healthy habits.	
6.	It helped me have a better understanding of:	
6.1.	what is going on with me.	
6.2.	some of my friends.	
6.3.	someone from my family.	
7.	It helped me take better care of myself.	
8.	It helped me care better for people around me.	
9.	It gave me ideas on how to manage better my own mental health problems.	
10.	It helped me to feel better just by reading a single book from the list.	
11.	It helped me change some of my bad habits.	
12.	It helped me to find out where I could seek help if I needed it.	
13.	It inspired me to seek help for the problems I face.	
14.	It helped me to be able to explain to other people how I feel.	
15.	It have made me more confident to be who I am and make positive changes in my life.	
	Add your own:	

# Appendix 4. A short survey of positive and negative (or challenging) aspects of the scheme conducted with 18 young people

	t was good about the Shelf Help scheme? It's helpful / useful
	It's interesting
	It's easy to access
	It's relatable
	It's supports diversity and choice
	It's inclusive – for everyone
	It's easy to understand
	It's gives a good understanding
	It's informative
	It's eye opening
	It's eye-catching
	It's pleasurable, fun and friendly
4	It's interactive
	It's encouraging and supportive
-	It's set up in the nice and positive environment
4	You don't have to worry about being judged or having to talk to people about
	things.
Vha	t was pagative or challenging about the Shelf Help scheme
viia	t was negative of chanenging about the Shen help scheme
	Some books are too long
-	
<b>∔</b> ∔	Some books are too long
+ + +	Some books are too long Some books are difficult to read
+++	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring
* * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing
* * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad
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* * * * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting.
* * * * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting. Not all of the information you can learn from the books can be applied / works for
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* * * * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting. Not all of the information you can learn from the books can be applied / works for everyone; Could have some books as audiobooks. It would be good to have more of:
* * * * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting. Not all of the information you can learn from the books can be applied / works for everyone; Could have some books as audiobooks. It would be good to have more of: Meetings to discuss the books
* * * * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting. Not all of the information you can learn from the books can be applied / works for everyone; Could have some books as audiobooks. It would be good to have more of: Meetings to discuss the books Wider variety of books on eating disorders, bullying or self-harm
* * * * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting. Not all of the information you can learn from the books can be applied / works for everyone; Could have some books as audiobooks. It would be good to have more of: Meetings to discuss the books Wider variety of books on eating disorders, bullying or self-harm Short Stories
* * * * * * *	Some books are too long Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting. Not all of the information you can learn from the books can be applied / works for everyone; Could have some books as audiobooks. It would be good to have more of: Meetings to discuss the books Wider variety of books on eating disorders, bullying or self-harm Short Stories Interactive books
* * * * * * *	Some books are difficult to read Some paragraphs are too long which puts you off books a bit Some books are a bit boring It can be a bit confusing Some of them are quite hard going and sad Some of the titles can be misleading; 'The Reason I jump' Some books appear dull - not very appealing, e.g. textbook like, or the ones that haven't got many vibrant colours Not everyone can always relate to it but can sometimes still be interesting. Not all of the information you can learn from the books can be applied / works for everyone; Could have some books as audiobooks. It would be good to have more of: Meetings to discuss the books Wider variety of books on eating disorders, bullying or self-harm Short Stories

### **Appendix 5.** A short survey of positive and negative (or challenging) aspects of the scheme conducted with adults

### What was good about the scheme?

- 🗼 It's free
- It's accessible
- lt's self-lead
- It's empowering young people to own their growth
- It's encouraging / supporting / helpful for:
  - Independence
    - o self-motivation
    - talking about mental health in the school (discussion-forming)
    - o staff communication with students regarding mental health
    - o self-help
    - o empathy
- It's educational
- It allows anonymous engagement

### What was negative or challenging about the scheme?

- Availability of the books -more copies needed, particularly of the most popular titles
- Online presentation of the scheme could be better
- Ways to get feedback from young people (proved to be challenging for some participants)
- Time it takes to read a whole book
- Time to engage in the scheme
- Convincing young people to engage (was a challenge for some participants bit not for others)
- Remembering what is available on the book list (can be a challenge for some)
- Co-ordinating between libraries (was a challenge for all)
- Feeling under-qualified to discuss certain issues e.g. self-harm, because students have started to talk more about them
- Risk of self-diagnosis risk and subsequent unnecessary worry
- Dissemination could have been wider
- More books needed on topics of:
- General wellbeing and not just mental health
- LGBT and sexuality
- Social skills forming relationships and maintaining them
- Audio books needed

END