

Tees Valley Wildlife Trust Inclusive Volunteering

An evaluation of the Impacts of Nature-Based Intervention on Mental Health

December 2012 - Part One





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There are...

"...premises and assumptions on which we implicitly rely when we make choices about (for example) funding for treatments...These include a premise that medicine is generally superior to other responses to illness, suffering and disability, that curing is more important than caring (as well as prevention), that dealing with the episodic illness of the healthy is more important than dealing with chronic illness and disability, and that physical health takes priority over other dimensions of health, including mental health"

(Lahey 2004, p.79-80)



Contents

Introduction	p.5
The Story so Far	p.6
Rationale (including policy context)	p.9
So, where do we fit in?	p.12
- Project aim and objectives	p.15
- Strategic Plan	p.17
Literature Review	p.20
- Benefits to the Individual	p.20
- Benefits to Organisations and the Wider Community	p.29
What's Already Out There (and what's not)?	p.36
How did we do it?	p.44
First Phase Data	p.51
- Survey Results	p.54
Discussion and Conclusions	p.96
Where do we go From Here?	n.100



Introduction

This report is the product of a year's work based on a six year project at Tees Valley Wildlife Trust, made possible by funding from the Dame Mary Smeiton Strategic Development Fund and Northern Rock Foundation. It is part one of a major report, with part two due to be completed and published later in 2013. At Tees Valley Wildlife Trust we engage people in conservation volunteering as a form of nature-based intervention in well-being through our Inclusive Volunteering Project. Both parts of this report aim to help shape the way the Wildlife Trust movement works with people suffering from poor mental health, documenting the impacts our Trust has in this area and presenting the views of our service users. Based upon an in-depth evaluation, this report will discuss the evidence already available on the impacts of nature-based volunteering on mental health, outline our approach to the research, review our work in relation to current policy and practice and finally display our own data from the first phase of our investigation.

This document covers a lot of ground but this is a big subject with many important elements and technical terms. The report is designed to be accessible, however, if you are just after key points there is also an executive summary available on our website and the Wildlife Trust's communication platform Wildnet (hard copies available on request). Throughout the report you will see quotes at the beginning of some sections which are taken from the Wildlife Trust's Development Strategy 2012-2017. In line with this strategy this evaluation demonstrates our commitment to knowledge sharing and a collective approach to development and innovation, and therefore we have highlighted strategic points that the Wildlife Trust could, and should, work on together in any way possible.





Volunteering at Tees Valley Wildlife Trust

The Story so far...

Like any Wildlife Trust in the UK, Tees Valley simply could not survive without its volunteers. The contributions they make are essential to our operations and future development. Volunteers are involved in all aspects of our work including administration, education, research, fundraising, marketing, management and of course carrying out practical conservation work.

Volunteers are the foundation upon which our movement has been built, and they are an integral part of its success (wildlifetrusts.org 2012). We have around 40 volunteers at the

moment at Tees Valley Wildlife Trust, and 15 of these work regularly out on our nature reserves, at the 'grass roots' if you like. They contribute 4,600 hours to us in Tees Valley local communities every year, helping people access green spaces and managing wildlife habitats, not to mention the invaluable work they do promoting our organisation and spreading positive messages of conservation.



We know that volunteers work with us because we are a reputable organisation, because they want to give something back to society and to make the most of the Tees Valley's unique natural landscape. Their contributions allow our staff to accomplish work it could not ordinarily take on and they bring their own special skills, knowledge and variety of experiences to us. But we recognise that volunteering is not all about giving, it is about an exchange, and that we have something very original and valuable to offer the people who choose to give their time to us. Tees Valley and many other Trusts provide reserve volunteers with activities encouraging stimulation for the body and the mind, in contexts that are exciting and unpredictable, yet at the same time comforting, relaxing and educational.



There is already a wealth of evidence to suggest that volunteering in any form has a positive effect on an individual's social life, improves their skill set and provides them with a renewed or enhanced sense of purpose. There is also a growing field of research into the positive effects green spaces can have on a person's attention span, their

stress levels and self-esteem. By combining what is known about these two activities and applying this knowledge in our programmes, environmental volunteering at Tees Valley Wildlife Trust offers an exceptionally valuable experience in terms of mental health and well-being.

In 2006 we created the 'Inclusive Volunteering Project', which involved a small group of patients from a local forensic mental health unit who worked on our reserves once a week in general habitat management. In 2012 we still have this partnership and it is not only stronger than ever, it has generated wider interest and the potential for significant growth. We still have volunteers who are inpatients, but now we also have volunteers who self-refer for a variety of reasons. Volunteers with poor mental health on this project mainly suffer from anxiety and/or depression but some do have experiences of personality and delusional disorders, some require their carers to be present and others have learning disabilities. It is important (as we shall

discover in this report) that some of our volunteers do not have any history of poor mental health, as well as those who may only have experiences of relatives and/or friends who may have suffered from mental health problems. Our volunteers are from right across the mental health spectrum – hence the 'inclusive' volunteering project – because we believe this diversity is



valuable for their development, but also in raising awareness and tackling the stigma surrounding mental health.

The volunteers, their carers and health care professionals tell us how valuable our project is all the time but this is only anecdotal evidence. We need to grow, make this project better and more available to others in need, and in order to do this we need to show just how great it is in a professional study, as well as passing on the knowledge we have gained to others. This stage of our evaluation was sponsored by the Tees, Esk and Wear Valleys NHS Foundation Trust, and



examines the personal impacts of environmental volunteering as nature-based intervention in mental health with our current reserve volunteers, demonstrating the long-term value of our work but also the value of evaluation itself in this area. We reviewed many of the methods and tools available in this field and collected very valuable data. This process lead to the development of the Tees Valley Wildlife Trust Well-Being Evaluation, including our own questionnaire designed specifically for nature-based interventions of this kind. We identified the work already being conducted in this area across the 47 Wildlife Trusts and locally in the Tees Valley

region, and the information collected can be found in this report.

This process has further lead to the creation of a set of 'guidance notes' for Wildlife Trusts or similar organisations contributing to mental health at any stage of project development, which will constitute part two of this report to be published later in 2013. This guidance aims to improve organisations' potential to expand their work in mental health, to secure funding from health care commissioners or other sources, and document the impacts and outcomes of their work. These documents put together report the process of designing and conducting an original, appropriate and professional evaluation in this area, how to get through the minefield of research methods, data analysis and dissemination of findings. Both reports also present the results of our own evaluation in its two major stages.

At this stage we are involving volunteers in pilot projects through new partnerships with mental health charities and support groups from across the region. Our evaluation design has been assessed in terms of reliability and validity but we need to take this further in determining how robust our methods are. Evaluating the outcomes of these pilot projects will allow us to do this, strengthening the connection between volunteering, nature and mental health benefits. We hope our evaluation tools will be widely used in other similar projects, increasing the evidence base of the Wildlife Trusts and promoting their unique work in this field to others. Ultimately, we want the value of the work the Wildlife Trust movement do to be recognised, to help more people who may feel vulnerable or excluded in any way, and for our services to them to become sustainable.



Rationale

"We need to make a step change in releasing the possibilities presented by the talent and creativity of all our trustees, staff and volunteers...

Only their innovation and passion will allow us to deliver"

So, Tees Valley Wildlife Trust and its volunteers are part of an important and valuable exchange of impacts that we intend to explore. But there are wider reasons behind The Inclusive Volunteering Project and its evaluation, in terms of population trends and public sector reform. In short, the characteristics of both supply and demand in mental health care are dramatically changing and while we feel that nature-based intervention has an innovative way of responding to this, based upon a wealth of knowledge and experience, there are many issues and challenges involved.

The publicity spotlight has recently been turned on increasing poor mental health in the UK and in particular its connections with social deprivation and exclusion, identifying regions which are in greater need of effective community-based services than others. The Tees Valley is one such example, where social capital is low and deprivation and segregation is high. It is estimated that for every mile travelled down Ormesby Bank (a main route through Middlesbrough in the centre of the Valley), there is a two year reduction in life expectancy, with an estimated gap of 13.05 years between the most and least deprives wards in this area (Middlesbrough Joint Health and Well-Being Strategy 2012-2022). In general, demand for mental health services in the UK is increasing, and at the same time there are regular announcements of dramatic health care reforms on the huge savings and operational changes that need to be made in everything from primary to social care. New government policies have set formidable objectives for the UK and specifically the North East, but how such objectives are to be achieved is heavily debated. Those attempting to contribute - whether long-standing or new services - face deep-rooted ideas and demanding new environments, decreasing resources, challenging systems and complex communities.

It is estimated that 1 in 4 British adults will experience at least one diagnosable mental health problem in any one year, and 1 in 6 will experience this at one time during their lives (ONS 2001 cited by centreformentalhealth.org.uk 2012). The cost of mental health issues in the UK to the National Health Service (NHS) was £105 billion in 2010, a rise of 36% since 2003. This figure

comprises of £30 billion in lost output through unemployment, £53 billion (economic equivalent) in human suffering and over £21 billion for care services – the most dramatic rise of over 70% in 7 years. In order to close the productivity gap the NHS are facing, health spending needs to be cut by 4% each year from 2012, and mental health currently accounts for 12% of Primary Care Trust's healthcare budgets (Naylor and Bell 2010, p.viii). Patient numbers are also set to rise in specific disorders:

"McCrone et al (2008) estimate that the number of people identified with and requiring treatment for depression will increase by 17% to 1.45 million in 2026. Commissioners are advised to plan for an increase in the identification of people with depression, and therefore an increase in demand for treatment" (NICE 2011 p.3).

In light of these figures it is surprising (and disconcerting) that mental illness only receives approximately 5% of funding allocated for health research (mentalhealth.org.uk 2012).

In terms of challenging contexts, Melzer et al (2004) and Fryers (2003) have not only found people living in deprived areas have the highest levels of mental health problems but also that long-term illnesses are directly connected to suffering from depression (Nash 2011), both of which are unfortunately prevalent in the Tees Valley:

"There is a recognised link between high levels of deprivation, characteristic of Teesside, and common MH (mental health) problems" (Middlesbrough Integrated and Operational Strategic Plan 2011-2014, p.32).

Similarly unemployment is connected to poor mental health and the Tees Valley has the highest rates in the North East at 10.8% (nebusiness.co.uk 15/3/12). It is unsurprising then that 192,000 people accessed mental health services across the Tees Valley in 2010/11 (neighbourhoodstatistics.gov.uk 2012), with Darlington and Middlesbrough having the highest rates of people with specialist needs (neighbourhoodstatistics.gov.uk 2012).

The ultimate aims for mental health care are prevention or rehabilitation and recovery. A patient's full self-management of a mental illness involves being equipped with the physical and psychological skills to function in society, and although a selection of complimentary services tend to be employed by the NHS in order to achieve this, there is often an over-reliance on prescription drugs, and less attention paid to the full range of impacts an illness has had on a patient (Beresford 2005, Beresford and Sloper2003), as well as a strong dependence on 'preferred provider' lists, which inevitably limit the potential of innovative services like ours. Many services aim to take place in community settings, but people with poor mental health backgrounds still find it difficult to engage fully and actively in their local communities. There is also a lack of services which cater for individuals who may be in a transition period from one level of care to more independent living (see Killaspy, Harden, Holloway and King 2005).

However, therapeutic intervention and specifically non-pharmacological therapies are being increasingly valued by academics, practitioners, and of course patients alongside conventional drug treatments, particularly to aid a person's integration back into everyday society. Occupational therapy in particular is a central part of treatment which focuses on the patient's ability to accomplish meaningful and purposeful tasks in order to live as independently as possible. However, it has been shown that there are many instances which can result in low attendance and engagement in this type of therapy with psychiatric patients (Kruger and Westhuizen 2011). An occupational therapist's role often involves seeking alternative methods for patients to deal with everyday activities, with the hope that patients will eventually make the transition back into society and the workplace but these, as with psychological counselling, are not always representative of reality and their impacts are often 'micro-scale' in terms of improving people's quality of life, plus there remains a limited choice of treatments. The majority of such therapies still also remain clinical, often carried out under experimental conditions which are far from representative of the 'real world':

"Over and over again, we hear how much all groups of service users want the choice of discussing treatments, in particular complementary approaches. But what you can expect, and what are still most readily available are the chemical responses. We need to go beyond 'symptoms' to relationships, activity, learning, recreation and social role" (Beresford 2005, p.87).

Of course the clinical approach is absolutely necessary in many contexts, but there is growing evidence that alternative environments and therapies can be incredibly effective as supportive methods as well as being more economically, socially and environmentally beneficial.

In terms of the rationale behind our project evaluation, considering the small amount of evidence presented so far, research into such innovative services could be extremely valuable to individuals and services. Essentially such evaluations provide the proof of what many organisations already know – that therapies for mental health exist in contexts outside the doctor's surgery, delivered by people who are not medical health professionals, and they have the potential to be incredibly successful in ways others do not:

"...the traditional focus on prevocational skills training, life skills education or general rehabilitative programmes in the mental health setting, unlinked to any systematic efforts to restore vocational functioning, can no longer be justified. In other words, traditional rehabilitation-based activities must give way to evidence-based practices" (Lloyd and Waghorn 2010, p.131).

It is most certainly true that services like ours can compete at the level required and that we even have a competitive 'edge' over more common, traditional therapies but there is not as

much strength in the evidence we collect or our approach to it. In a recent report commissioned by the RSPB, Bird argues categorically that "the natural environment has a quantifiable health value" (Bird 2007, p.5) and that we run the risk, through lack of understanding of this, of depriving future generations of a 'natural health service'. It is clear that there is a great need for research in this area, for the benefit of the NHS and alternative service providers but most importantly, for the patients, but the policy context within which this research takes place emphasises the need for projects like ours further, at national and regional levels.



So, where do we fit in?

"We need to put more emphasis on building up evidence to demonstrate what we do towards our mission and how we do it, and on communicating successes to demonstrate that our vision is both possible and beneficial"

For many, even perhaps within our movement, it may be difficult to see how Tees Valley Wildlife Trust, as an environmental charity may respond to such important parts of people's lives as their mental health. Firstly, people are as integral to our work as wildlife is; conservation is about spreading positive messages, influencing positive behaviour, education, enjoyment and values. These goals are as applicable to people suffering from poor mental health as they are in working with any of our members, school groups, families or visitors, if not more so. Secondly we have a long history of successfully engaging with local communities that are often marginalised or difficult to reach, through volunteering – we know that we can provide meaningful, well-managed experiences that improve social relations, increase individuals knowledge and skills as well as their connections with nature, all of which are again strongly linked to positive well-being. Thirdly, we offer diverse and stimulating environments for volunteers to work in that the majority of organisations simply don't have, which is directly conducive to achieving positive mental (and physical) health outcomes¹ through the natural landscape itself.

'Fitting in' is of course not only important in terms of how we are perceived, it is vital that we can show our connections to national and local policy and strategy. The national coalition government produced a major strategy paper in 2011 – 'No Health Without Mental Health' – identifying five core (and some would argue ambitious) objectives for mental health in the UK including increased recovery and general good mental health for all. Tees Valley Wildlife Trust's commitment to improving mental health in the region undoubtedly contributes to these, and we intend to demonstrate how we are achieving this in due course. However there are other more specific objectives that our project connects with. One major issue our work contributes to which also concerns 'fitting in' is that of tackling the stigma surrounding mental health and associated social exclusion, which often leads to a vicious cycle of poor well-being.

¹ Mental health involves memory too, but for the purposes of this study mental health is referred to in terms of emotional well-being and psychological functioning. Also, while it is important to focus on mental health the connection to physical health cannot be ignored.

Tackling Stigma

The government's sixth objective for future mental health will be that fewer people will experience stigma and discrimination (2011). The World Health Organisation also stated in 2001 that stigma and discrimination of mental health was the single most important barrier that needed to be overcome in the worldwide community, an objective which still stands today (www.who.int 2012). This could be interpreted positively in that it remains a high priority, or negatively in that it is still a major problem. The debate around the issue began back in 1963 with Goffman's discussion of 'spoiled identity', where the destructive effects of social stigma on perception of self were highlighted in relation to general disabilities, but it is only recently that the true cost of mental health discrimination to individuals has been recognised and organisations and communities have attempted to tackle the issue with any real force.



The social costs of stigma surrounding mental health have been highlighted in awareness campaigns such as Time to Change, which aims to deal with the difficulties and misunderstandings people have in talking about poor mental health through various means. According to Time to Change, mental health stigma significantly affects society and the economy, as well as having major impacts on individuals, creating further self-stigma and perpetuating the problem (timetochange.org 2012). The costs to people's confidence and self-esteem are huge and can affect patients in any number of ways that complicate or extend

their recovery. An IVR report on volunteering and mental health found that people's attitudes had affected their volunteering experiences, and one of the main concerns for participants prior to volunteering was that others would not react well to their mental health history (2003, p.2). It has been frequently found in research that the discrimination accompanying mental health problems is more debilitating and even longer-lasting than the illness itself (Schultze and Angermeyer 2003). Stigma hinders social interaction and delays return to employment, creating a vicious cycle of disadvantage (Stolzman 1994, Stuart 2005). Even more shocking though is that it is not only through interactions with strangers, colleagues or acquaintances that stigma is experienced though; it is also commonly felt from family or friends (Peterson et al 2006 in Sharac et al 2010, p.5).

An inclusive approach is at the heart of our volunteering work (it was, after all, originally called the Inclusive Volunteering Project!) and as long as volunteers are physically capable and have the capacity to stay safe and benefit from working with us, all are welcome. We believe that this approach is not only valuable in terms of providing opportunities that may not be available elsewhere, but also in terms of volunteers meeting and engaging with a diverse group of people who have different backgrounds, skills and attitudes, improving their understanding of other's

experiences. We believe that this is challenging in a positive way for individuals who need to integrate themselves back into society in a supportive environment, while simultaneously challenging for those who may come to us with misconceptions about mental health.

Addressing the Vicious Circle

Another of the government's core strategy objectives is for people with mental health issues to have better physical health (2011). Conservation volunteering naturally involves physical exercise, with a range of cardiovascular and resistance activities from walking through to heavy lifting. We use a variety of tools, working a in a variety of environments and while some activities can be repetitive other can be extremely variable, working different muscle groups to different levels. These activities naturally combine all established exercise 'zones', each having their own benefits; light/low impact, weight loss/calorie and fat burning, aerobic and anaerobic. The positive effects of any form of physical exercise on mental health are well-known - even the simple act of walking will heighten mood through the release of endorphins. Vice versa the effects of poor physical health on mental health are also well-documented, for example, people suffering from diabetes are up to three times more likely to develop clinical depression (NICE 2009).

Public health is of course a major issue and takes priority in national and local authority strategies across the UK, focussing on lifestyle in particular. But despite long and expensive (often very smart) campaigns against poor diet and for greater physical activity, the government have declared their determination "to ensure mental health has equal priority with physical health, a principle enshrined in the Health and Social Care Act 2012" (Centre for Mental Health 2012, p.4) and Rethink, a major mental health charity have devised a framework for putting the strategy into action. The framework suggests that in order to place mental and physical health on par with each other access to a wider range of treatments needs to be improved. Through the range of physical activities volunteers engage in on our Inclusive Volunteering Project we most certainly contribute to the government's objectives and Rethinks recommendations on implementation.

Providing High Quality Care

The final two objectives of the national government strategy are that 'More people will have a positive experience of care and support' and 'Fewer people will suffer avoidable harm' and while we are not a primary care health service in the traditional sense, we are of course also committed to these. Reduction of potential harm is core to conservation work of course and necessary procedures and policies are in place to protect those involved. Full training is given wherever necessary and where volunteers may require additional support our staff are always available. Patients' levels of ability and fitness are taken into account and tasks are designed

accordingly with the groups working together cooperatively. Our Trust is also part of several health and well-being networks across the Tees Valley, and through consultation with health professionals in the sector our volunteers benefit from information and advice should they need it. Protection from harm in this area is a wider issue though, and in the Trust we are aware of the importance of recognising and dealing with discrimination, increased sensitivity surrounding data protection and responsibility towards safeguarding potentially vulnerable adults.

We are committed to maintaining the standards of care for community health services set by the Care Quality Commission including keeping service users updated with information, providing care that meets individuals' needs, involving skilled staff, ensuring safety and respect for all and reviewing our service quality regularly (cqc.org 2012). This evaluation forms an integral part of our service review process. Specifically in relation to volunteer management feedback is central to their involvement, as they are seen as unique stakeholders in our work, not simply as service users or an extension to our paid workforce. The evaluation developed through this research will tie well into future government plans for payment by results in health care, where our efficiency, contributions and demand for our service can be clearly demonstrated. In terms of the objective to improve experiences of care, our dedication to continuous improvement can be seen in the Trust's general management, protective policies and procedures, and continuous improvement.

What do we intend to do?

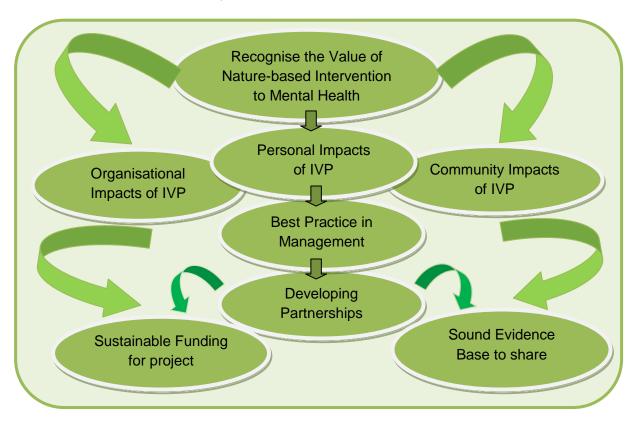
So, it is clear from the information given so far (there is much more to come) that it is highly likely the Inclusive Volunteering Project benefits mental health and well-being in the Tees Valley, so why do we need to do more? Evaluation is a process which is increasingly encouraged across sectors and organisations (if not expected by funders). But further it is a chance to be more aware of impact so that organisations can demonstrate their value to others, and use data for future growth, planning and assessments. Information on who is getting involved and why, what difference a project is making and to whom is important to any organisation, yet it is surprising how many do not engage in it at all, collect information in the wrong way, or collect information but do not really use it to its full potential.

As stated in the introduction, we wanted to conduct an evaluation to show the amazing work we and other Trusts do so that more people can benefit, but also to help us establish where we are and where we need to go. We also want to help other Trusts and similar organisations do the same. We owe it to ourselves and others to conduct this type of rigorous research and share this type of knowledge, to make projects like this as accessible as possible and understand the experiences and needs of those involved. This evaluation is as much an

important recognition of volunteer efforts, regardless of their mental health, as it is of those of our staff in making the project possible.

We also want to respond to calls for collaboration in service provision. In creating strong partnerships with other local organisations we will become more aware of what is already available and what is needed in our community, improve access to resources and ensure that our service is appropriate. Achieving our aims for knowledge exchange will involve everyone within Tees Valley Wildlife Trust, other Trusts and any organisation or individuals with an interest in mental health and well-being.

The main areas of the investigation and how they relate to the broader outcomes of the evaluation are illustrated below;



Under these broader aims for the Inclusive Volunteering Project, the following nine specific objectives have been identified for this research project;

 To analyse the relationship between mental health and engagement with the natural environment

- To identify the personal impacts of 'nature-based intervention' (in the form of conservation volunteering) on participants of Tees Valley Wildlife Trust's (TVWT) Inclusive Volunteering Project
- To assess the quality and appropriateness of available measures of mental health and well-being
- To design an evaluation of the impacts of nature-based interventions on mental health and well-being which is reliable, valid, robust and available to similar projects
- To identify the wider impacts of environmental engagement through the Inclusive Volunteering Project to TVWT and the local community
- To assess the appropriateness and effectiveness of project/volunteer management practices at TVWT through evaluation processes
- To develop a solid evidence base valuable to other Trusts and organisations

Conducting the Research

Our methodological design was created in order to realise these objectives, and the data presented here demonstrates that this has been successful, although the full details of our methods (and how they came to be used) form a major part of the evaluation guidelines in the form of a 'toolkit' which will be published in part two of this report. In order to achieve our research objectives a significant amount of work has been carried out during 2012 and will continue through 2013. The investigation began with an extensive desk-based study of secondary research and theoretical literature already published on mental health, well-being and the impacts of spending time in nature. This part of the research took approximately three months but is ongoing as the Trust continues to keep up with new developments and publications in the field. A condensed literature review can be found in the following chapter.

Beginning primary research was not quite so straight forward. Because our project involves working with NHS patients from a Forensic Mental Health Unit, there were quite a few hurdles to overcome with regard to established systems and processes. These were in many ways understandable and beneficial in organising our research, but were also bureaucratic and extremely time-consuming. After being approved by the North East regional NHS ethics committee and being sponsored by the local research and development department at Tees, Esk and Wear Valley NHS Foundation Trust in April 2012, we could finally begin our primary investigation. The first stage of research design consisted of interviews and three popular mental health measurement scales. This was started at the end of June 2012 and completed at

the beginning of August 2012. This work was completed with volunteers and carers currently involved in our project and the findings are reported here.

The second stage of primary research involved designing our own questionnaires based on volunteers' feedback and our review of research limitations, while the interview data collected during stage one had been so valuable that interview designs only needed to be modified slightly. The Tees Valley Wildlife Trust Well-Being questionnaire has been redrafted six times in relation to volunteer feedback on its content, design and accessibility, further secondary research and reviews by professionals in academia and practice. Professor Shucksmith (Professor in Public Health, Director of the Health and Social Care Institute at Teesside University and researcher in mental health and well-being) and Professor Meek (Professor in psychology, chartered psychologist and researcher in impact evaluation) have reviewed the questionnaire and provided very valuable comments. The final version was completed in December 2012.

Further Development

The third stage of our research involves creating networks and partnerships with other mental health organisations and services. This is being achieved through pilot volunteering projects in which volunteers register to participate on the project for 12 weeks, agreeing to complete an evaluation (questionnaires and interviews) at the beginning and end of this period, and again after this at regular intervals if volunteers continue. These projects will allow us to measure well-being impacts with an established baseline and therefore demonstrate a causal relationship with more confidence. These shorter participation periods will also help us to determine whether impacts are immediately visible or take more time to develop. This information will enable us to design more appropriate, hopefully more sustainable volunteering packages in the future. Pilot project volunteers started in December 2012 and will continue until we have enough data to answer our questions faithfully and determine the validity and reliability of our methods of assessing their progress (based on statistical measures). It is the results of this stage of our evaluation that will be published in part two of this report.

Contacts have already been made with a range of mental health organisations and services include:

- Hearts and Minds (Middlesbrough)
- New Horizons (Teesside)
- CHAT (Stockton-on-Tees)
- MENCAP (Middlesbrough)

- MIND (Middlesbrough and Stockton)
- Teesside University Health and Well-Being Centre (based in Middlesbrough but also covers a campus site in Darlington).
- CRI (Crime Reduction Initiatives) Addiction Recovery Service (Stockton-on-Tees)
- Stonham Home Group (associated with Middlesbrough Community Mental Health Team)

Pilot project volunteers have already been referred to the Inclusive Volunteering Project from Hearts and Minds, CHAT, Mencap, CRI and Stonham. We are also currently in the process of developing partnerships with other organisations across Tees Valley local authorities and the voluntary and community sector.

In order to reach one of our ultimate goals of securing sustainable funding for our Inclusive Volunteering Project, our achievements need to be communicated to health professionals and achieve appropriate support from the sector. Further, bearing in mind the many changes facing the NHS it has been important to foster and maintain relationships with those in medical practice and consultation groups representing community views to health and social care providers. One key contact in this has been Middlesbrough LINK, which will be involved in the transition to local Healthwatch in April 2013. Contacts is also being made with 48 GP services across Middlesbrough, Stockton-on-Tees and Redcar and Cleveland as well as other representatives of the new Clinical Commissioning Group for South Tees and the local Health and Well-Being board (also to be formally established by April 2013).

We have received great support so far from eminent mental health professionals including a practising cognitive behaviour therapist, previous advisor to South Tees Clinical Commissioning Group on mental health and member of Improving Access to Psychological Therapies Committee) and a retired GP based in Middlesbrough who is also a member of South Tees Clinical Commissioning Group. We hope that this burgeoning network will eventually lead to more formal referral processes to our programme which will in turn increase our evidence base.

Our plan overall is to provide a full report (albeit in two parts), possibly accompanied by a training workshop, that can act as an aid to those Wildlife Trusts who engage, or would like to engage volunteers with experiences of poor mental health and want to harness the benefits of evaluation. While we aim to lead the movement in terms of evaluation in this area we want to encourage collective action and knowledge which will be achieved through publications and possible presentations where opportunities may arise. We hope that this work will encourage other Wildlife Trusts who may never have thought about this kind of work before or have

perhaps had negative experiences in the past, to consider providing such innovative services in the new knowledge that they can manage volunteers with mental health difficulties effectively, identify their impacts thoroughly, create strong and lucrative partnerships and have a much better chance of securing sustainable funding for important community work.



Benefits to the Individual

"...we must restore nature's place in the hearts and minds of people and reconnect them to the natural world...we need to do more work to inspire action by communicating the opportunity for a better future for nature and people (this is harder than communicating the risk of loss, but we are well placed to do it"

The notion that the great outdoors can have a positive effect on the mind and the body is certainly not a new one. The natural landscape has been touted as a form of alternative medicine for the mind for centuries and terms such as 'ecotherapy' and 'green care' are being increasingly used to relate to interventions which bring people and green environments together in a variety of ways. Green spaces offer an excellent alternative therapy environment to clinical settings such as secure units and for those who may spend most of their time isolated at home. Back in 1865 the famous



landscape architect Frederick Law Olmsted, responsible for many state parks in the U.S., proposed that exposure to nature counteracts feelings of melancholy and anger, as well as improving physical health (1865). Over 100 years later academic researchers began to scientifically explore the psychological impacts of interaction with the natural environment, demonstrating that experiences of the wilderness indeed had various benefits to personal well-being (Kaplan and Talbot 1983).

In 'The Experience of Nature: A Psychological Perspective' (1989) Kaplan and Kaplan brought together years of consultation with representatives of forestry, nature-interpretation, horticulture and many more, creating a platform for an integral branch of environmental psychology, bringing the 'wilderness laboratory' into the spotlight. Since then their work has continually and quite simply shown that 'green is good for you' in terms of self-confidence and trust in others (among many other outcomes), even in surprisingly small doses. From Kaplan (R.) and Kaplan's (S.) investigations the seminal Attention Restoration Theory (ART) was produced in 1995, directly connecting peoples' positive thinking processes to their experiences with nature. Attention, concentration and focus are necessary not only for human beings to function effectively and appropriately but also for survival and recovery and so these findings had significant implications for the treatment of both physical and mental health conditions. A recent study conducted by Cimprich (1992) based on ART, demonstrated that patients

susceptible to attention fatigue after being diagnosed with breast cancer actually increased their directed attention spans greatly through nature-based intervention. This suggests that there is a biological need for nature within humans in order to function psychologically, rather than a simple desire to engage with it, and also that because the fundamental bases of our mental functions have been shown to be affected by green environments, there are an infinite amount of situations in which such restoration can help in both physical and mental health treatments.

The argument that there is a human need for nature is supported by two earlier theories; Wilson's Biophilia Hypothesis (1984) and Ulrich's Psycho-evolutionary Framework of Stress Reduction (1983). The Biophilia Hypothesis is mainly concerned with our predisposition to connect with the living world, while the Psycho-evolutionary Theory concerns our emotional reactions towards it. Both of these theories similarly propose though, that human beings have an innate, genetic connection to the natural environment. While later concessions have been made which acknowledge the importance of culture, experience etc. on human emotions and behaviours in reaction to nature (Kahn 1997) these theories remain strongly supported by research.

'Restorative environments' are often now standard areas for architects and designers to consider in planning new developments, as we see offices and even train stations embracing the value of the natural world into the urban landscape to encourage their users well-being. The fact that almost every central hospital in the UK - even in some cases individual hospital departments - has a garden area is testament to the healing powers attributed to spending time outdoors amongst nature and wildlife. Access to the natural environment is seen to be so psychologically valuable, even necessary, that many researchers have increasingly sought to demonstrate the impacts of green experiences upon mental well-being scientifically, particularly as well-being is becoming more common in policy and strategy at both national and local levels. As a result of this building evidence base certain outdoor activities are becoming core elements of rehabilitation programmes, and many professionals are starting to see that in some cases nature can be a s powerful as medication for healing and maintaining stability of the mind.

When looking at today's society in terms of the Biophilia hypothesis, despite our vast recent technological advancements and grand cities, people do continually strive to 'get back to nature' in any way possible. In our contemporary cosmopolitan lives, stress is also a major factor and Ulrich's evolutionary framework has been continually and successfully applied in a variety of contexts, highlighting this contrast of landscape. Ulrich et al (1991) demonstrated how blood pressure and muscle tension were dramatically reduced in students after simply being shown videos of nature in comparison with those shown images of urban landscapes.

Here the link between physical and mental health was beginning to be recognised too. Ulrich suggests that natural settings generate 'restorative responses' in human beings (1999) which restrict or displace negative, stressful or anxious thoughts resulting in more "positively toned emotions" (Hartig et al 2011, p.149). Bird (2007) suggests that nature-based interventions do not only improve mental health and well-being for individuals but can reduce aggression, crime and improve discipline (increasingly associated with urban living) which inevitably benefits wider society as well as the individual.

Such evidence has been recognised outside of the academic realm now, and its potential influence, not to mention its efficiency in health and social care practices is becoming impossible to ignore. A recent major report by mental health charity Mind (2007) made important recommendations to the sector based upon the increasing evidence to support these theories;

- 1. Ecotherapy should be recognised as a clinically valid treatment for mental distress
- Allocation of health and social care budgets should be informed by cost-benefit analysis of ecotherapies
- GP's should consider referral for green exercise as a treatment option for every patient experiencing mental distress
- Access to green space should be considered a key issue for all care planning and care assessment processes
- 5. Referral to green care projects such as green care farms should be incorporated into health and social care referral systems

The Royal College of General Practitioners responded to this report by saying there are "no easy answers", but that green therapy could indeed become part of general practice in the NHS if based upon valid, approved research (2007). Kaplan and Kaplan highlighted the need to identify ways of maximising the benefits of green therapies back in 1989, yet this has been taken on by relatively few since. Therefore, work still needs to be done to explore the potential of different forms of green therapy for individuals and increase the evidence base to support it.

There are many studies which have illustrated the positive impacts volunteering has upon physical and mental health as an intense form of engagement in any area. Wilson and Musick assert that fundamentally, volunteer work is beneficial because of increased social integration, self-validation through 'helping' behaviour and increased self-efficacy (1999). Social integration is seen by many academics as the foundation of all positive impact from volunteer work,

whereas validation and efficacy are believed to improve positive thought and lower stress through feelings of increased control. Studies have also consistently shown that giving time in this way offers training for careers, improves social relations, confidence and even mortality rates (Musick, Herzog and House 1999, Oman, Thoresen and McMahon 1999, Harris and Thoresen 2005).

Greenfield and Marks (2004) found that in addition to studies demonstrating the positive effects volunteering can have on well-being, the activity can actually serve a protective function for those at risk of suffering from poor mental health. It is well known that early intervention in this area is extremely valuable, to the individual at risk and to those around them (Department of Health 2011). Volunteering has also specifically been shown to be of great benefit in recovery from mental illness (Kaplan and Kaplan 1989) and that even the costs of time and effort in the activity are viewed as a positive part of the process conducive to achieving great satisfaction. Plus there is a growing body of research suggesting that high levels of subjective wellbeing are a partial cause of positive life events and outcomes (Waldron 2010, Lyubomirsky, King, & Diener, 2005) and therefore indirectly volunteering could to some degree be connected to this too.

Volunteer work as therapy and rehabilitation

Viewing nature and volunteering as valid forms of therapeutic intervention requires a specific connection to a specific health practice within already established care pathways for mental health, and the most natural relationship is with occupational therapy. Garner (1995) found that after structured occupational therapy, rehabilitation staff often reported a marked improvement in patients' self-esteem, confidence, problem solving, social skills and in managing their anxiety. Researchers since have taken this further to show that occupational therapy may be more beneficial in less clinical, more natural settings (Karnish, Bruder and Rainforth 1995, Jenkins in Ryan and McKay 1999). However, despite the well-documented personal and social benefits (and economic) benefits of volunteer work, the connection between volunteering and occupational therapy is less explicitly made in research. There needs to be some reconciliation here.

The notion that volunteering in any activity can be a form of occupational therapy in itself is very little recognized (or perhaps taken for granted), even though it fits perfectly into the practice and theory. Occupational therapy is quite simply defined by the World Federation of Occupational Therapists as a

"...client-centred health profession concerned with promoting health and well being through occupation" (www.wfot.org 2012).

Black and Living (2004) tackled this subject in research which found that their results on volunteer experiences and motivations were consistent with the occupational therapy philosophy that "occupations need to be meaningful and purposeful to hold therapeutic value" (p.526). Black and Living make a clear argument for further exploration from this finding:



"Future research with occupational therapists working in this area could establish if volunteerism has been used as a therapeutic occupation and its outcomes, thereby informing occupational therapy practice"

Despite the established tradition of occupational therapy, calls have been made for innovation in this area recently (as well as other services across the board), particularly those in community settings. These calls have arisen alongside rising concerns over increasing mental health needs of the UK population and government have marked mental health as a priority for service improvement and innovative delivery (Department of Health 2011). It is hoped that the National Health Service will broaden its horizons to both improve care and its financial outlay, which creates an opportunity for alternative services to come to the fore and for the voluntary and community sector to demonstrate its unique value to the well-being of society. It is certainly now time to cast the spotlight on forms of therapy which naturally address major concerns both effectively and efficiently and there are rising perspectives with sub-disciplines in occupational therapy theory and practice which could be helpful in this.

Volunteering may easily be viewed as vocational rehabilitation, a rapidly emerging form of occupational therapy, defined as;

"...a process that enables people with functional, psychological, developmental, cognitive and emotional impairments or health conditions to overcome barriers to accessing, maintaining or returning to employment or other useful occupation." (Scottish Executive 2007 p.32)

Vocational rehabilitation is also more simply defined as whatever helps someone with a health problem to stay at or return to and remain in work (Waddell, Burton and Kendall 2008). Wilson and Musick (1999) note that Meyer's clinical observations at the beginning of the twentieth century

"...indicated that enforced idleness resulted in 'demoralisation, breakdown of habits, physical deterioration and loss of abilities' (Shimitras et al, 2003, page 47)" (in Howlett 2004, p.57)

concluding that the productive use of time - as in volunteering - is a key factor in combating negative states of mental health. Practices of vocational rehabilitation are naturally strongly

linked to those fundamental to occupational therapy through the emphasis on *occupation*, with therapists working across the NHS, the Department for Work and Pensions and private practice employed through industry, insurance providers and individuals. Vocational rehabilitation is also considered a strategy of social inclusion, as to be in paid employment is seen as becoming part of society (Barnes and Holmes 2007).

Despite the obvious links, there is little attention on volunteering in this more specific area either yet though. Even in the latest publication which deals with the point at which occupational therapy and vocational rehabilitation meet, volunteering is only considered as a positive outcome of treatment, a goal, a type of work that those in rehabilitation aim to return to (Ross 2007 and College of Occupational Therapists 2007, p.9) not as a means towards returning to work and a form of therapy and rehabilitation to reach wider goals.

As well as breaking down some of the barriers facing people with poor mental health in relation to being excluded from society by being accessible by nature, volunteering is also ideal in preparation for re-integration in terms of the workplace, increasing social, personal and professional skills. Further investigation here is particularly pertinent under the recently published NHS outcome framework for 2012/13 (Department of Health 2012) which specifies employment rates as a primary indicator of enhanced quality of life for people with mental illness (Annex A p.16). The importance of such activity to well-being seems obvious, yet because there has been very little investigation there is little in the way of reliable evidence to support a direct connection. As a result, in a circular fashion the value of volunteering goes unrecognised with no evidence to demonstrate it.

Despite what has been found so far to suggest that volunteer work is incredibly positive for individuals, there have been challenges to this. In an extensive review of evidence on well-being and its associations, Dolan, Peasgood and White (2006) found that while many recent studies indicate a positive relationship between volunteering and mental health, the majority have found that there is no evidence at all. However, these authors do comment that

"...the potential for a win-win situation does seem to be there if we can identify exactly which community or voluntary activities are associated with the most positive effects, when in the life cycle these effects are most likely to occur, who in particular is likely to benefit most from them and so on" (p.53).

Considering the wealth of evidence available to suggest that volunteering has positive physical and psychological impacts for those engaged in it this is a challenging finding, but this part of the review did only cover a sample of eight studies, plus here the impacts of volunteering are not being explored in a context which can only serve to improve these impacts – e.g. the natural environment. The findings relayed so far go some way to making a case for the

potential positive impacts of environmental exposure and volunteer work combined, but there is also some context-specific evidence to support this.

The Two Combined – Nature-Based Intervention

Environmental volunteering has increasingly attracted scholarly attention with several finding that actively engaging with the unique context of the natural world can lead to unique and more wide-ranging benefits than other areas. Townsend and WeeraSuriya (2010) cite several studies including Townsend and Ebdon (2006) that have found hands-on experiences with nature satisfy a variety of basic human needs, including the most basic physiological requirements (air, water etc.) through belongingness (relationships) cognitive (self-awareness) to actualization (personal growth) as outlined in Maslow's hierarchy (1954). Townsend and Ebdon's study 'Feel Blue, Touch Green' (2006) showed that nature-based intervention with patients suffering from depression and/or anxiety satisfied higher needs of cognition and actualization as well as lower levels, which have a more significant and long-term impact on people's lives. Nebbe (2000) and Adhemar (2008) also support this connection in their work, suggesting that not only is interaction with nature conducive to well-being, but in some ways it is necessary to it, which connects to Wilson (1984) and Ulrich's (1983) theories discussed earlier.

So what is it about this activity in context that gives 'added value' to mental health and well-being? According to Guiney conservation volunteers are in fact more likely to be motivated by the perceived outcomes of their work (2009) which may be explained through greater visual impact. Visible impact has been highlighted by some studies in this context as extremely important in developing satisfaction, confidence, esteem etc. (Russell 2009) and in outdoor conservation much of the work undertaken will have lasting visual impact. In administration, education and many other common volunteering contexts it is predominantly the case that impacts are less tangible, less visually striking and although some may be long-lasting for recipients, what is actually seen by the volunteer is often temporary.

Temporary experiences which are unique and special of course can be extremely powerful in evoking positive emotions, and if these experiences are shared they can enhance social bonding as well as the social skills which develop from a common ground. Wild green spaces are unpredictable by their very nature and many of the experiences to be had there are not only unusual, but memorable and incredibly positive. For an environmental volunteer this could involve a beautiful landscape in a sunset light or seeing a rare butterfly. These are experiences which may happen often in the wild but people are not often there to see them. Stebbins (1992) refers to such experiences in leisure which he argues contribute heavily towards self-enrichment, usually of a moral, intellectual or cultural nature, and has also conducted extensive research into volunteering as a unique experience of leisure (1982 - present). Stebbins found

that in various contexts the effects of memorable experiences are powerful and widespread (p.119-133). Very few studies however have explored the effects of such special events on personal development, but Inglis (2008) does attribute participants' memorable experiences such as wildlife encounters (which may be positive or negative) to the development of attachment, identity and respect. Through volunteering, access to such environments and experiences is invariably increased, and the effects of such experiences deserves further attention.

In a comprehensive report to the Scottish Forestry Trust and Forestry Commission, O'Brien, Townsend and Ebden (2008) presented evidence of impacts on well-being in four distinct forms: Physical, Mental, Spiritual and Social, likening conservation volunteering to prescription drugs and being good for the soul, as well as the other more common benefits of confidence and esteem. It is suggested in this report that environmental conservation could indeed "...inspire people and benefit people in a range of ways not available through other types of voluntary activity" (2008). The Scottish government also suggest that individuals suffering from mental health problems are one of the groups with the most to gain from environmental volunteering (www.scotland.gov.uk 2012). No comparative research on volunteering contexts and impacts has actually been conducted, however, considering the unique context which creates the environmental volunteering experience it is fair to say that the combination of impacts could have major potential for well-being.

It must be noted though, that the variables involved in this field are varied and complex. Firstly, this form of volunteering inevitably occurs outdoors and inherently involves physically active work and the positive effects of any form of physical exercise on mental health are well-known. Therefore it is certainly not unreasonable to assume that mental well-being is affected by natural engagement both directly and indirectly through physical activity. From guided walks and estate maintenance tasks, to tree felling and hedging it is generally the case that environmental volunteering can be a demanding physical activity, and even less demanding roles often still involve light exercise. Of the hundreds of roles available to RSPB volunteers, they estimate that 40% of them involve work which is physically intense (RSPB 2005, p.14). The impacts of 'green exercise' have been shown to be significant in participants lowering their body mass index, living more healthy lifestyles e.g. smoking less (Hine et al 2011) and reducing their blood pressure (Pretty, Peacock, Sellens and Griffin 2005). Peacock, Hine and Pretty (2007) compared the effects of outdoor and indoor exercise, finding that participants who had exercised in a country park expressed increased levels of energy and more positive moods.

The BTCV have involved thousands of people with learning difficulties, mental health issues and physical disabilities in their 'Green Gyms' project since 1998, and their own evaluation showed that 99% of participants 'agreed' or 'strongly agreed' with the statements of 'health and



fatigue and tension.

confidence' including 'I feel more positive about myself as a result of my involvement with the group' and 'I have made new friends as a result of working with the group' (Yerell 2008, p.3). The Forestry Commission recently found that in their green space engagement project there were significant increases in participants' physical activity as well as confidence and self-esteem (2009). Hine et al's recent major study on outdoor activity found that alongside measurable biological improvements, there was a 66% improvement in participants total mood disturbance under categories including anger, depression,

So, it seems that the context in which the activity takes place is as important as the activity itself, having unique effects on the body and the mind. Conservation volunteering whether engaged in as a form of Ecotherapy or not is extremely popular in the UK, which is invaluable to the nature-based organisations and nature itself that relies on voluntary help. The ability to go beyond conventional visitor experiences of the natural environment has attracted over 500,000 volunteers to the British Trust for Conservation Volunteers (btcv.org.uk 10/1/12), and the Wildlife Trust movement currently involves over 30,000 volunteers in its work. It is estimated that 8% of all volunteering in the UK takes place in conserving green spaces (Cabinet Office of the Third Sector 2007) which has been further attributed to an increase in environmental awareness and of course the benefits of this activity beyond the individual should not be ignored.



Benefits to Organisations and the Wider Community

The Wildlife Trusts are a "catalyst for social and economic change...
Without a healthy environment, society cannot be resilient but for nature to look after us,
we need to look after nature"

The benefits of volunteering of course exist at wider levels than the individual. The benefits felt by organisations and communities can be just as varied, and often just as unexpected. However, there are standard social, economic and environmental forms of impact an organisation like ours would expect to receive and pass on to our local communities as a result of involving volunteers, and the motivation for achieving these is understandably significant.

Social Benefits

The wildlife trusts across the UK are well aware of the needs to involve local communities in their work;

"A Living Landscape aims to reconnect people with the natural world and promote the benefits it provides - from the technical and functional (food production, clean water), to the spiritual (nature makes people happy!). We work closely with local communities to promote the wildlife on their doorstep. Living Landscape schemes improve access to wildlife and green spaces and provide opportunities for recreation, education and hands-on



volunteering. In fact, our volunteers are often vital to the success of the schemes." (www.wildlifetrusts.org/livinglandscape 2012)

Volunteers can offer a wealth of social and cultural benefits which affect organisations internally and externally in relation to the local community. Internally volunteers can have a major impact upon an existing workforce, allowing staff to undertake tasks they would not normally have time to do, and their impact upon quality of service has been demonstrated in various industries (Howlett, Machin and Malmersjo 2005). Where they work alongside paid staff volunteers can bring new skills, refreshing attitudes and alternative perspectives on things, improving the organisation's knowledge capital. Externally, organisations across sectors and

industries are now more socially accountable than ever. It is no longer enough to produce goods with nothing more than profit primarily in mind, and now it is recognised that the social position of an organisation can often improve its economic one. Corporate Social Responsibility is inextricably tied to sustainable development as a key buzz phrase of the 21st century, and although it is predominantly used in relation to major national and international companies the real implications are ultimately at the grass-roots level. Voluntary sector organisations and charities have even greater social expectations placed upon them in responding to complex social needs as well as setting high social goals for themselves.

There is evidence to suggest that volunteers can have a demonstrable positive impact on the behaviour and opinions of service users which is particularly valuable in organisations with environmental missions. Christensen, Rowe and Needham (2007) and Hendricks, Ramthun and Chavez (2001) have both investigated this in recreational activity and engagement with wildlife nature reserves, demonstrating that volunteers had a definite positive effect on the behaviour and possible future behaviour of visitors. It has even been suggested that due to their selfless, altruistic associations, service-users often prefer to deal with volunteers than staff (Ronel, Haski-Leventhal, Ben-David and York 2008). Their passion, expertise and unique perspectives are invaluable in promoting good causes and satisfied volunteers are great advocates for an organisation, promoting user involvement and membership.

Volunteering is at the core of social capital - yet another recent buzz-phrase - which is indicative of many important social impacts measurable at various levels. Strong relationships and networks create social capital and these are inherently generated through volunteering, and even more so where volunteering naturally involves team work, as in conservation. Strong indicators of social capital are trust and community networks, and communities rich in these are found to be more inclusive, cohesive, healthier and more likely to volunteer – so the benefits are circular (see Putnam 2000, Veenstra 2002). In terms of social capital it has also been suggested that volunteers create an image of trust for an organisation through their

involvement (Haski-Leventhal, Meijs and Hustinx 2010), legitimating their operations in the eyes of the local community and those who may be more likely to provide further resources. The involvement of volunteers makes organisations appear more credible to communities, giving them a 'stamp of approval', and provides a local communication platform from which organisations can gain a greater understanding of

community needs. This image of trust and level of understanding is essential in provision of community-based services, particularly where individuals may be particularly vulnerable or at risk of exclusion from society.

While social capital and social inclusion are different concepts, they come together in important ways and the link is particularly strong where mental health and impacts of intervention are concerned. Organisational contributions towards social inclusion inevitably improve social capital at a wider level and are seen as the most forward thinking in terms of social responsibility. In doing so it has been demonstrated an organisation's economic impacts can improve as a result, namely lower costs, lower turnover of staff and increased efficiency as a result of shared goals and increased organizational stability (Cohen and Prusak 2001). Voluntary sector organizations seem to have established skills in generating social capital through tackling exclusion due to their local knowledge and expertise. As highlighted by the UK social exclusion task force among many others;

"The provision of information and flexibility of services are crucial, as socially excluded clients may lack the capability to effectively access and navigate the care to which they are entitled. Often, third sector providers have particular expertise in bringing vulnerable groups into contact with services" (Social Exclusion Task Force 2010, p.27).

The importance of social inclusion to mental health has been documented by many. The vision set out by the UK government for national healthcare services places great emphasis on equality and access improvement across their services, which has as much positive potential for the organisations involved as it does for the individuals. Adults with poor mental health are one of the most excluded groups in UK society and although this is widely recognized, the national policies and protective laws in place are not enough to tackle it alone. Social exclusion increases the negative impacts of mental health for individuals and their communities, which can be economic as well as social, and organisations need to use their resources to improve their access and use of public services. People with disabilities were identified by DEFRA in their 'Outdoors for All' Strategy 2008 as one of the four main groups most likely to feel excluded from experiencing green spaces. Further, the exclusion problem is cyclical, as people at a higher risk of social exclusion are among those most likely to suffer from mental health problems.

Voluntary organisations have always been seen as having a unique ability to reach the parts of society that others simply cannot (Moxham 2009, Burt and Taylor 2004), whether because of their proximity, independence or understanding, but most likely all of these. Although causality still remains unknown (Dolan, Layard and Metcalfe 2011) it is generally understood that because individuals with poor mental health are often subject to social exclusion, volunteering is subsequently less accessible to them than to others. Volunteering itself is identified by NHS Scotland just as an indicator of mental health (2007) which does lead to an assumption that volunteering is not as much an option for individuals with mental health problems; it is something that 'healthy' people do (Thoits and Hewitt 2001), but of course it is also a method of achieving these benefits.

Once again the context of environmental volunteering is perfect for such practices according to Dalgleish;

"Environmental volunteering offers the potential to engage people who had previously not been engaged with the environment, including the excluded, with a focus on the environment as a common language and a common baseline for all. ...for both the excluded and the non-excluded the common ground can expose people to individuals who challenge their stereotypes, and provide a platform for genuine integration. Working in the physical environment breaks down the categories into which people are placed and the opportunity to make a contribution is genuinely equal" (2006 p. 12).

Early intervention in mental health is incredibly valuable in cost-saving and service delivery but also, in nature-based volunteering there is the opportunity for genuine integration, educating others and promotion of key issues. Through strong organisations rooted in local communities government and organisational agendas can be put into practice and promoted by their commitment to volunteering as a form of social inclusion, breaking down social barriers and

creating social opportunites.

Economic

The direct economic benefits of involving volunteers in an organisation are fairly obvious, although they are often underestimated for various reasons (Davies 2004). Unpaid workers save money through their contributions, either in

supporting paid staff or completely managing organisations/projects themselves, and for environmental organisations like Tees Valley a significant amount of our work simply couldn't be completed by our small team of paid staff. Volunteers economic impacts can be calculated in a variety of ways including wage equivalents, and these statistics alone can be very impressive. There is also the option of quantifying social impacts through calculating Social Return on Investment, but such measures are often confusing, daunting and expensive for many charities. In the present climate, particularly in voluntary sector and public sector services it is clear to see that volunteers' economic support is invaluable.

If we take the latest figures on formal volunteering from the Home Office Helping Out Survey, volunteering is worth £38.9 billion to the UK economy (2007, p.15). From this, 8% of volunteering activity occurs in environmental conservation, and therefore we can estimate that volunteer work in this sector is worth approximately £20.5 billion nationally. There are few regional or organisational estimates of the economic impact of volunteering but these are increasing. The BTCV 'Green Gyms' have so far involved more than 10,000 people. It was calculated that the positive impact on mental and physical health, equated to the state saving

£153 for every £100 it invested (Bubb in the Telegraph 13/1/11). Volunteering has been highlighted as a solution for some of today's economic problems (Commission for the Future of Volunteering 2008) and it is definitely beneficial for organisations with limited funding. Scottish Natural Heritage recently published a review of the economic impact of environmental volunteering across 204 organisations, calculating 23,340 volunteers contributed 91,149 hours per month, 14.25 million per annum (Ferguson 2007).

Contributions are also demonstrable in terms of direct and indirect economic impact, and although measuring such impacts is difficult volunteer work can be attributed to a significant proportion of an organisations' economic success in many cases. Volunteers in the National Trust undertake 45% of the organisation's workload from conservation to management, equivalent to 1,330 full-time paid positions (Heritage Link 2003, p.2), so the economic equivalent of such contributions are undeniably be significant to the UK economy. Volunteers are in a form of training and education in the environmental sector, and future paid jobs they may gain as a result are also economically important to their local community. Indirectly volunteer involvement can provide increased access to resources and alternative sources of funding based upon community engagement 'brownie points' (Bowbridge and Creyton 2002) as mentioned earlier. Their front-line roles may encourage service users to become members of organisations or make donations, plus as ambassadors they may encourage more people to use services overall. Of course estimates of these impacts are incredibly subjective. While of course direct and indirect impacts must be viewed alongside the cost of involving volunteers (Ellis-Paine, Ockenden and Stuart 2010) the amounts saved are often vital to an organisations survival. Quite simply, hundreds of organisations in the UK could not exist without volunteers. Environmental volunteering specifically has considerable breadth, from self-help to services to others, political participation and advocacy (Ockenden 2007), so to lose the impacts all of these volunteers have on funding and revenue would be devastating to say the least.

Considering the spiraling costs of mental health in the UK community-based services present a very sensible investment, yet it goes unrecognised.

"In 2007/08, the NHS spent just 0.05 per cent of its healthcare budget on voluntary organisations. It is, in other words, a virtually untapped resource waiting to be used. Voluntary groups can compete against the private and statutory sectors, thereby freeing up NHS staff and delivering better care for the public. If we really want a "Big Society" then the NHS should – and can – be part of it." (Bubb in the Telegraph 13/1/11).

We have already mentioned the costs of mental health issues in the UK to the National Health Service, which are expected to rise at an alarming rate. There is also the fact that early intervention in mental health is extremely valuable not only to individuals but in terms of cost-saving to the NHS, and conservation volunteering is a non-medical, but practical therapy which

could be very valuable used in this way. As with the benefits of volunteering the impacts of mental health interventions need to be viewed in terms of direct and indirect costs including lost wages. Taking into account the savings that need to be made and potential value here, connecting volunteering and mental health through conservation provides a unique economic opportunity which has impact at various levels.

On a national level, there is the potential to save millions in mental health care. On a local level, the work of these volunteers preserves natural heritage which otherwise would be lost forever or alternatively cost millions in conservation contracts. At an organisational level, volunteers increase productivity and their work attracts visitors who in turn spend their money in local businesses. At an individual level, nature-based interventions in volunteering can help people get back into work, making them more financially stable too. Although it is difficult and often inappropriate to put volunteer contributions purely into monetary terms, if it was possible the figures would probably be more staggering than anyone could imagine.

Environmental



Reconnecting humans to the natural environment has been a long-standing goal of environmental charities such as Natural England and the Wildlife Trusts, and this occurs in many ways including volunteer work. The impacts of environmental conservation may seem fairly simplistic, but again the complexity and diversity of benefits is incredible, and as a result their impacts are inevitably undervalued. Although there are no definitive statistics available, of course there are specific impacts of conservation work on particular species that benefit greatly from volunteering as habitats are regularly maintained.

Conservation not only influences the immediate locality of a particular site though, but ultimately the global state of environmental preservation, not only the physical appearance of something but the mindset of people involved and those who hear about it and see it, and not only does it affect humans, but also millions of creatures and plants. It must not be forgotten that humans are part of an ecosystem just as flora and fauna is. The health and well-being of people is dependent upon the health of the nature around them, so in conserving and regenerating these areas, volunteers are in fact conserving and regenerating themselves and others. The true environmental impact of conservation volunteering is simply impossible to estimate accurately and again there are a multitude of other indirect impacts beyond the site where volunteering actually takes place.

Environmental regeneration can attract visitors and investors to regions as green images provide positive impressions to outsiders as well as insiders. The effects of planting trees and pulling weeds is immediate to the surrounding environment and wildlife while laying paths and

installing interpretation panels also allows greater access for visitors, but there is more to conservation volunteering than these 'visible' activities. A great deal of literature has investigated the role of volunteers in conducting biological surveys, an activity heavily dependent on their participation. These volunteers bring new ideas for research as well as increasing scientific knowledge for others and themselves (Foster-Smith and Evans 2003). As advocates for organisations volunteers also help to promote environmental causes and stimulate environmentally friendly behaviours. The BTCV found at one of their sites in Oxfordshire that greater visibility of greenspace management resulted in the wider community placing a greater value on the site and that vandalism and littering have decreased (btcv.org 2012).

It is not always the case that there is an abundance of green space to play with of course, and in areas like the Tees Valley heavy industry can often make it seem that nature is a million miles away. Making the urban landscape more 'green' is an ongoing mission of Groundwork, a national UK charity involving thousands of volunteers, and we have already mentioned the health value of having a contrast to such city environments. Well-being requires a balance, and this form of volunteering not only helps the volunteers, they in turn help others to achieve this balance where they perhaps may not have realised they could.

Warburton and Lutley (1990) describe how communities and volunteers can be a cost-effective means of working with and improving open spaces in urban areas, and also suggest that volunteers improve the sustainability of project results. The National Trust similarly attributes the sustainability of the UK's key environmental organisations to the active support of volunteers (2004, p.1). Major contributions are made to regeneration and sustainability by volunteers across the UK, particularly in recent years when regeneration has dominated local government strategies. Many voluntary sector groups dedicate themselves entirely to regeneration, and the impacts of such projects can be dramatic for the image and use of the local environment. Conservation volunteering may not only make natural areas more aesthetically pleasing, but also safer, more accessible and in many cases more enjoyable.



What's already out there?

Without making this sound too 'market-oriented', as a service provider it is obviously necessary to identify existing provision in order to assess the balance with demand. We have shown that in the UK, and the Tees Valley in particular there is a need for alternative mental health services, but we need to determine whether there is a need for us. In such a context as ours we do feel however that there is much greater value in reviewing existing supply for the purposes of collaboration rather than competition. The value of collaborative approaches is in interorganisational learning (Vachon and Klassen 2008), and this is what we intend to harness here from both within and outside our movement, locally and nationally.

Wildlife Trusts

Ecotherapy is a growing service across the country in a variety of organisations including the Wildlife Trusts. The benefits of Ecotherapy to health are relatively well acknowledged, but they are explored through different ways of engaging with nature and measured to varying degrees. While some trusts involve people with learning difficulties in educational workshops, others take more of a green exercise approach, focussing on the physical health benefits of being outdoors. Many trusts though have also, like Tees Valley, centred on improving mental health and well-being through conservation volunteering, often attracting continuing interest and, as a result, all important funding. At Tees Valley we do not intend to re-invent the wheel in terms of evaluation or service delivery, we simply aim to recognise the value of others work and develop from them, building stronger relationships on a stronger evidence base across the movement. Any advances we make in this area belong to all Wildlife Trusts, as shared knowledge and social capital.

Preliminary research involved making calls for information on any projects engaging people with poor mental health, past or present, on the Wildlife Trust's staff communication platform 'Wildnet' between January and October 2012 (thanks to everyone who responded). Through secondary research in industry reports, journals, news reports and the internet other leads on past, present and future projects were followed up through email and telephone. We hope that the following chapter will provide a fair review of how mental health is being tackled by the Wildlife Trusts for us, and others to build on in terms of knowledge and new relationships.

The Wiltshire Well-Being Project

The Wiltshire Wellbeing Project is a partnership between Wiltshire Wildlife Trust and NHS Wiltshire which started in 2008, and has gone through many changes. The project started work with vulnerable sections of the population, in particular people from black and ethnic minority communities and aims to improve mental health through physical activity in nature taking a balanced approach to the mental-physical cycle. The trust has previously delivered 12-week prescription programmes, 'green gyms' and engaged people in a range of activities including woodland crafts and countryside skills to accommodate those who require a less structured approach to their recovery. The project has a referral system in place and specific criteria determining who can and cannot take part e.g. based upon other health conditions etc. The project has involved hundreds of people each year, serving the majority of towns in its areas of operation. Well-being project participants have also been given further paid opportunities through the Trust's links with local councils and have established solid relationships with primary care trust officers, which have generated funding for them long-term.

Trust staff have observed multiple physical and mental health benefits to their users and their measures of evaluating these have also evolved over time, originally reviewed by Dr Sempik of Loughborough University. Currently the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) is completed by volunteers every 4 weeks, and the Trust carry out reviews with volunteers before they start, during their placement and before they leave. This scale was chosen after an initial trial period of using the popular General Self Efficacy scale, which most participants found difficult to relate to their own lives. Everyone in the project is provided with a personal profile at the end of the programme which identifies the skills they have developed and their achievements and they receive a certificate of completion. In terms of physical health baseline measures of weight and body-mass-index are taken as well as information on people's lifestyles before they start and again later as part of their review. The Trust have also collected qualitative data in the past through fixed interval photography which analysed people's facial expressions, general physical appearance through photographs taken at the same point of the day during an activity to demonstrate any improvement and although this method has featured less in evaluation lately, the Trust's well-being officer believes that it is important to keep a visual, as well as a textual record of people's progress.

Lancashire, Manchester and North Merseyside – Mud to Muscle

Lancashire Wildlife Trust is currently delivering a project called Mud to Muscle which was funded by The Department of Health's prestigious Health and Social Care Volunteering fund in 2010. The project targets males aged over 45 at risk of poor health within the wards of Rumworth and Johnson Fold, Bolton, although all are welcome. Working at two local sites participants volunteer in conservation and reserve management tasks, but funding from the

Department of Health ceased in October 2012. Currently the trust are at the stage of seeking NHS funding and finding the 'niche' for their work in terms of health and well-being, investigating a variety of options including the Innovation, Excellence and Strategic Development Fund.

Lancashire, Manchester and North Merseyside Trust are very interested in evaluation and have so far created surveys based upon the five ways to well-being developed by the New Economic Foundation, including 'connect', 'be active' and 'give. When participants were asked if they thought the activities which they engaged with as part of Mud to Muscle had helped them to be active and feel good 79% responded 'yes, definitely'. 68% of volunteers also answered 'yes, definitely' when asked if they thought their skills had benefitted from taking part in the project and 80% felt that Mud to Muscle had definitely helped them to appreciate the outdoors. However, the trust has also recognized that for the direction they want their work to go in, this evaluation framework may not be appropriate and are looking at the different tools available. They are also currently exploring the possibility of volunteer groups becoming constituted organizations in their own right in order to improve access to funding.

Dorset - New Frontiers

New Frontiers was ran by Dorset Wildlife Trust from 2006-2009 in association with Richmond Fellowship and Bournemouth Church Housing Association. Dorset delivered a targeted range of opportunities for people with physical and learning disabilities as well as those in addiction recovery services through this project, aiming to improve access and provide a sense of community ownership in the region's natural heritage. The project's key objectives included removing barriers to access for visitors, working with new audiences and promoting their cause to the local community. Although these objectives were not primarily focussed on achieving improved health and well-being for volunteers or reserve visitors, the Trust received very positive feedback on

"...the sense of achievement, feeling better and fitter, gaining new skills, feeling part of a team, having fun and feeling relaxed all supported the fact that wildlife makes a vital contribution to our quality of life and well being" (Dorset Wildlife Trust New Frontiers Newsletter Summer 2009).

The three year project was awarded £373,000 from Heritage Lottery Fund (based on a wider project on inclusion and diversity) and as well as winning a Group Award for Volunteering 2011. It was also hailed as a "...national example of best practice" (Goulding 10/1/2012).

Gwent - Green Key Project

In partnership with Newport Community Mental Health Team, Gwent Wildlife Trust set up the Green Key Project in 2003 and managed it for six years, promoting reserve volunteering as a form of occupational therapy. The programme involved people volunteering on Magor marsh reserve as well as decorating the Trust offices with nature-inspired artwork. The Wildlife Trust have also worked with service users from their local Mind charity, and due to the projects impressive results it has attracted funding from various sources over the years including Big Lottery and Corus Strip.

One of the volunteers involved in Green Key was a runner up in Wales Volunteer of the Year in 2005, and has secured employment as a reserve warden as a direct result of their experience. Other Green Key volunteers reported "increased personal development and confidence, enhanced social contacts, a sense of inclusion, stability and routine, improved mental wellbeing and the development of new skills as a direct result" (IVR 2007). The Trust's People and Wildlife Manager Dennis Jackson said

"The trust is very aware that working outside in the fresh air is good for mental well-being. People from the scheme have said things like it has changed their lives and given them a reason to get out of bed in the morning." (South Wales Argus 22/8/09)

Unfortunately despite all of its successes the project had 12 grant applications turned down in six months before operation ceased.

Staffordshire - Wildsteps

In its fourth year of funding from the local Primary Care Trust at NHS North Staffordshire, Staffordshire Wildsteps project is going strong with a defined service level agreement primarily focussed on improving participants' physical health. From what was originally just a two-year initial plan, Wildsteps targets local wards with poor health in Newcastle-Under-Lyme and Staffordshire through social care referrals from care groups rather than from GP's. The project works with all ages and also offers bespoke sessions to groups. The original aim was to involve 240 participants altogether in Wildsteps, now in 2012/13 Staffordshire are aiming to involve 250 people who volunteer once and 70 regular participants annually, although some targets have naturally been difficult to achieve. The programme involves graded exercise activities from wildlife walks to medium and heavy impact sessions which involve more practical conservation work.

The volunteers take part in a 12 week evaluation which collects quantitative data on their fitness levels. According to the latest figures Wildsteps has been responsible for burning 150,000 calories and information is also collected on body-mass-index. But attention is paid to

well-being too, as qualitative data is collected through questions on how participants are feeling and detailed case studies have been published to demonstrate personal impacts. Volunteer comments include: "I put far more importance on living healthily" and:

"Having lost my husband two years ago I had to get used to living on my own. I feel I have found a new lease of life- learning so much about nature and having an excellent leader has also contributed" (Staffordshire Wildlife Trust 2011).

Wildsteps project officers have also recognised the importance of highlighting efficiency in project delivery to the NHS. They have developed innovative ways of representing the savings they offer, in terms of average cost of gym membership as well as reduced visits to GP's using the costs of Health and Social Care which are freely available to the public.

Emerging Projects

The above are only a handful of the well-being focussed projects that Wildlife Trusts have been engaged in over the years though, and many trusts have taken different approaches to engaging with this area. Northumberland Trust were involved in the national BBC campaign 'Breathing Places' in 2009 which aimed to encourage people to simply "do one thing to help nature on their doorstep" (www.bbc.co.uk 2010). The Trust worked with volunteers referred from social care services and their support workers to improve the grounds of a local mental health unit, recognising the importance of nature in urban surroundings for positive mental health and recovery.

Warwickshire's 'Stepping Out' project has focussed on supporting carers, particularly from Asian communities. There is a lack of recognition of carers and their health, much of which is a result of carers not identifying themselves with the role of actually being a carer, particularly those of a younger age. As a Natural England Project as part of DEFRA's Diversity Review in 2004 Stepping Out won the Me2 award for working with young people with disabilities and demonstrated its success in creating a sustained connection between marginalised groups and green spaces. Many other trusts have also engaged people with mental health issues in their work through outreach programmes focussing on visitation and taking part in craft activities such as the Surrey Greenspace Project.

Other projects are developing in this area in new ways such as Hereforshire Nature Trust's in Orchard Origins. This programme aims to conserve orchard heritage through marketing products and provide opportunities for community involvement, training, ecotherapy and employment. Herefordshire Mind clients undertake harvesting and food preparation and ultimately, Orchard Origins hopes to develop food products into saleable commodities in order to generate income and pave the way for a future social enterprise or cooperative. This has

developed from Herefordshire's previous work on the Past in Mind project, which was highly commended and featured on Radio Four in December 2012.

The Avon Wildlife Trust CAN Project will work in six identified areas with higher indices of deprivation in Bristol, BANES and North Somerset. Through practical outdoor activities CAN aims to reduce isolation for individuals who may have poor mental health, creating more cohesive communities and employment opportunities in areas that are particularly challenging for residents. Both Herefordshire and Avon Wildlife Trust's are looking to develop their methods of evaluation further in this area.

Ecominds

The most significant opportunity for Wildlife Trusts and other environmental organisations to get involved in mental health came in 2007 in the form of Ecominds, a grant-giving initiative made possible by Big Lottery Fund. After their manifesto 'Ecotherapy: The Green Agenda for Mental Health' (2007), Mind, the national mental health charity began to enable organisations, small and large, to offer nature as a form of treatment for poor mental health across the UK. Ecominds projects must involve green activity and aim to target discrimination, improve connections in communities and widen people's social networks, while fundamentally improving individual's well-being. Naturally the Wildlife Trusts were quick to take on this challenge and opportunity. The 'Go Wild, Stay Well' project was set up by Somerset Wildlife Trust with Ecominds funding to enable people experiencing mental distress to "undertake physical activity against an inspiring backdrop to improve overall mental health and offer the opportunity to make a positive impact to the environment" (www.mindtws.org.uk 2012). They noted through Ecominds surveys and their own evaluation that participants in particular had improved confidence after getting involved and the project has been featured in the Ecologist (2010).

London's Budding Together project with Ecominds built upon work they had been doing for years working with local Primary Care Trusts. Budding Together was designed around developing skills in people with poor mental health. Although the work was informal and unaccredited it did follow an NVQ structure, hoping to encourage participants further in their professional development. Ecominds has further encouraged collaborations such as the Birmingham and Black Country Wildlife Trust and the Future Health and Social Care Association on Greener Futures, a new gardening project. It has also increased recognition for great work, as in the Idle Valley project managed by Nottinghamshire Wildlife Trust. Bassetlaw Physical

Activity and Health Partnership recognised Nottinghamshire's work promoting health and physical activity by presenting them with an award in the Inclusive Schemes category in 2011, and the project was recently featured in an episode of CountryFile.

Regional Projects

Of course it is not only the Wildlife Trusts that have taken on the Ecominds opportunity. Mind have so far supported 130 ecotherapy projects across the country, from rambling to recycling groups. 28 of these groups further received continuation funding and 87 secured long-term sustainable funding based on the success of their projects. In the North East of England thousands of people have benefitted from the knowledge and guidance of organisations like us and the natural beauty of their local green spaces through Ecominds support. Out and About in Middlesbrough, Workcraft in Northallerton, Load of Old Rubbish in Durham, Muddy Wellies in Consett, The Walker Challenge and Green steps to Well-Being in Malton have all engaged groups having difficulty with their mental health in green exercise and conservation volunteering and some have received funding from other sources as a result. Workcraft have noted the benefits of their project in terms of creating relationships with each other and local communities:

"Fifteen people attend twice a week and in the past the group has had 20 to 30 participants a week. There is a strong social element to using the project, providing a support network. A number of the participants are single and without family and therefore benefit from the relationships that have developed through Workcrafts...There has been a large amount of positive feedback from the volunteers on their experiences in volunteering in the wider community. A number of organisations were initially suspicious because volunteers offered to work for free and there was stigma attached to people" (Local Government Association 2012).

Volunteers on the Load of Old Rubbish project in County Durham have also shown that nature-based intervention does indeed alleviate symptoms of depression, anxiety, boosting self-esteem and well-being (www.mind.org.uk 2012). Muddy Wellies in Consett has encouraged young people with learning difficulties to care for animals and plants, while the Flotsam & Jetsam Tour of the Walker Challenge supported a group of mental health service users to get an Environmental Award with The John Muir Trust.

It is clear that both within and outside the Wildlife Trust movement there are innovative, wellorganised and successful projects geared towards creating positive impacts for individuals' wellbeing, organisations, local environments and communities. However, at a regional level these projects more often than not are temporary, and do not have in-depth evaluation methods in place or consistency in using them. It is as important to highlight what is missing and if possible why, as it is to identify existing services in order to improve on the way organisations can assess the impacts of Ecotherapy as well as maximising them for everyone involved. Unfortunately in many cases our research has highlighted unjustified omissions and lack of attention rather than lack of need.

What isn't already out There?

While the services available for people suffering from mental health issues have grown in number and some diversity, many providers are small charities and funding is an unavoidable issue, particularly in the North East. At a recent Mental Health North East conference comments were made in reflection on the delegates attending that many organisations have come and gone within two years, despite their success in terms of quality of service and quantity of users (Mental Health North East Conference 9/11/2013). There are calls for the voluntary sector to provide such services, but there is a lack of understanding that, particularly where volunteering is involved, provision costs money. Volunteers are not a free resource by any means and particularly if organisations want to create successful long-term relationships with them, these relationships must be invested in financially and emotionally. There is also the fact that while medical health professionals and government may profess to recognise the huge (and increasing) demand for mental health services, yet the amount of money spent on researching this does not compare with the need for greater knowledge, nor is it proportionate to public need. There is also an established link between poor mental health and poor physical health, other major health issues such as cancer, cardiovascular disease and lifestyle choices but it is these physical conditions which often take priority in health strategies, and this can be seen at all levels. The quote from William Lahey (2004) cited at the beginning of this report (see acknowledgements) illustrates the inequalities facing mental health in this way, that the fact that physical health takes priority over mental health is often a fundamental assumption. We have already discussed the over-reliance on drugs in treating mental health and the need for non-medical community-based services which are not being given the appropriate level of attention in terms of research or investment.

It is however surprising that despite the large and increasing demand for mental health services in the Tees Valley region, there are major national charities claiming to offer a variety of services, yet have absolutely nothing in operation here including Rethink Mental Illness and Together for Mental Well-Being. There is also the case of Remploy, the UK's highly regarded and successful organisation which offers the chance for employment to people with disabilities. In 2008 two major Remploy factories in Stockton-on-Tees and Hartlepool employing were closed due to owners modernisation plans. Although employees were assured there would be

no compulsory redundancies, the alternative employment offered was not suitable for everyone:

"What will happen to those people who are not suitable for mainstream employment because they don't meet the criteria? The older you are, the more your disability worsens and a lot of people would be left with no options, no matter what Remploy says. If the factory goes there is nowhere else for them to go." (TS18 Stockton 18/11/07)

Despite being the second best performer in its sector, the Stockton factory owners were accused of failing to apply for essential government contracts and a lack of attention paid to tracking workers after factories closed. The Northern Echo (7/12/12) followed this story and also reported the 'grim reality' that only one in ten of the Remploy workers in the North East actually found paid work after the round of closures, which eventually spread across the region.

Overall, there is a fairly bleak picture facing individuals with poor mental health, as services they find difficult to access because of their conditions actually become more difficult to access because of a lack of recognition and commitment from others. In the North East, the will is certainly there, but it seems almost impossible to gain commitment and investment from other key players. Perhaps stronger evaluation is the solution. There is a social exclusion cycle in the Tees Valley connected to public health (Chapman et al 2007), and organisations with resources and skills like the Wildlife Trusts are in a unique position to tackle this. With the healing effects of nature at our fingertips and a never-ending stream of conservation work to do, the only thing left is to prove is that we can provide a service which is often just as valuable as medication, cognitive therapy, an exercise regime or a support group.



How did we do it?



This chapter outlines the methods used for the first stage of evaluating the impacts of the Inclusive Volunteering Project. Evaluation is a necessary process in determining and communicating the value of a project effectively and reliably, one which is being increasingly called for as programmes are ever more required to justify their work to stakeholders, particularly where external funding is involved. Evaluation also demonstrates accountability and transparency as well as a commitment to continuous improvement in any organisation, but particularly with voluntary sector organisations this awareness of impact can present a more professional image of services to others.

Our research was designed to capture data in different ways from different perspectives to build a picture of how our work affects people and their surroundings (and vice versa). In line with recent drives in the UK to make mental health services more client-centred (NHS Institute for Innovation and Improvement 2012), our research prioritises service users in collecting data, harnessing the value of their individual perspectives alongside those who care for them and work with them. This is not only in order to 'tick boxes' when it comes to good practice, but also to demonstrate our commitment to engaging volunteers in our work fully and directly.

Thornicroft and Tansella (2010) discuss the complexity of recovery from mental health disorders and how recognition of this has lead to further understanding that one specific measure is unlikely to reflect a service users complex world view (p.6). Therefore we have chosen to adopt a multi-method approach. It is hoped that a combination of appropriate methodological tools will generate the most valuable data, supporting findings at each stage with data in different forms. We hope that our approach to evaluation not only contributes to

the evidence in this area, but also to research design and conduct by demonstrating the value of certain methods in certain contexts.²

Our Approach to Data Collection

Our evaluation takes place in two stages; firstly with volunteers who are already engaged in the project and secondly, through a series of pilot volunteering projects with new volunteers from different healthcare service providers across the Tees Valley. This report documents the methods and findings of the first stage. This stage was exploratory, creating a solid foundation from which to conduct the more formal evaluation in stage two, and develop our own impact measurement tools.

Stage one participants were the existing members of our Inclusive Volunteering Project. This group consisted of thirteen volunteers with various experiences of poor mental health, from mild anxiety to sever delusional disorders. Some of these participants were inpatients of a local Forensic Mental Health Unit, some had been discharged from formal services but were referred from social care systems, others were self-referred, and two volunteers had no personal experience of poor mental health.

In order to satisfy our objectives it was necessary to use a combination of appropriate methods of data collection. Qualitative interviewing was chosen as the main method for primary data collection, allowing volunteers to express themselves in their own words. All interviews were semi-structured in order to create a less formal, more relaxed setting, allowing the researcher to ask follow-up questions and participants to elaborate on their responses without the restriction of being pulled back to a specific point or question. Interviews lasted approximately 30 minutes each, and were based around key themes including:

- Initial motivations for volunteering
- Early perceptions of the project and of the Trust
- Role and activities undertaken
- Relationships with other volunteers, staff, local community, other groups, family
- Best and worst experiences
- Feelings about the future

² Details of evaluation and methodological design will be published in Autumn/Winter 2013, but more information on this is available on request (please use the contact details at the beginning of this report)

The interviews also had an important quantitative element to them too, designed to produce the most well-rounded and valuable data. Three short scales used to measure mental health and well-being were given to volunteers at the end of the interviews which took 5-10 minutes to complete. Although there are hundreds, possibly thousands of scales available in this area only a handful have proven themselves to be reliable, valid, accessible, open to continuous improvement and subsequently popular. Here we chose three which were best designed to satisfy our objectives and were most suited to our particular context. The scales used were carefully selected from 12 scales used in major studies and those available online from a directory produced by the Positive Psychology Center (University of Pennsylvania). The Short Warwick and Edinburgh Mental Well-Being (SWEMWBS) (Stewart-Brown 2006) and Personal Growth Initiative (PGI) (Robitschek 1998) were selected to measure well-being whereas the Inclusion of Nature in Self (INS) (Schultz 2002) scale was selected to measure our participants' connection to nature, gathering data which is quantitative but complimentary to the qualitative information collected through interviews. Scales were also completed during interviews so that the researcher was available to explain and assist with completion wherever necessary. Interviews were recorded using an audiotape device and notes were also taken manually throughout.

Interviews were also conducted with members of the Occupational Therapy staff at the local Forensic Unit as key informants who supervises the volunteers while working on the project. Again these interviews were semi-structured lasting approximately 30 minutes each. As well as questions relating to staff views on patients development etc., there were a few more specific questions asked of carers on other activities patients were involved in, how the carers felt the patients may have been without the project and whether they think the project helped staff in relation to themselves or their patients. Information was also collected from therapists on patients' general fitness and lifestyle habits in order to determine whether there had been any improvements to their physical health.

Well-Being Scales

Warwick Edinburgh Mental Well-Being Scale

The Warwick Edinburgh Mental Well-Being Scale (WEMWBS) was developed by scholars from Warwick and Edinburgh universities in 2006 and has been used in major pieces of health research in Scotland as well as many other projects across the UK. There was a definite need to create a scale based upon the wholly positive 'recovery rather than symptom' model of mental health which now underpins the entire UK healthcare system. This was important in our choice of scales and will be explained in greater depth in part two of this report. The scale covers happiness, satisfaction, psychological functioning, good relationships and self-realisation (in terms of thoughts and feelings) covering the components of emotional well-being, resilience,

self-esteem and positive functioning identified by the New Economics Foundation (2009). Statements such as 'I've been feeling optimistic about the future' are listed for participants with a 5-point Likert scale in which they circle the number representing the strength of their agreement with the statement.

We chose to use the short version of WEMWBS (SWEMWBS) which is only 7 items long as opposed to 14. This seemed more appropriate for participants and in the context of using other measurement scales which could have caused fatigue and boredom. The scale has been used successfully in an evaluation of a Forestry Commission project centred on engaging mental health service users with the natural environment (2009) and to measure change in participants' mental and physical health after participating in walking programmes (Hine et al 2011).

The Personal Growth Initiative Scale

The personal growth initiative scale (PGI) was developed by Robitschek in 1998, partly in response to Robitschek's research on people participating in a wilderness programme. Soon after the scale's development these researchers asserted that there was a strong relationship between personal growth initiative and psychological well-being (Robitschek and Kashubeck 1999). Through nine statements such as 'I know how to change specific things that I want to change in my life', PGI measures initiative, self-control, positivity, confidence and forward-thinking, covering the New Economics Foundation (2009) components of resilience, self-esteem and positive functioning. A key aspect of the scale (in theory) is its ability to identify from responses how able participants are in coping with everyday living, suggesting the ability to deal with challenges confidently and effectively. The construct is also strongly related to hope, with the scale responses reflecting participant's views on the outside world and opportunities, but also on their own perception and how proactive they feel they could be in seizing these or creating them. These factors are central to recovery from mental illness so this scale is highly appropriate for use in this context.

Since its development, PGI has been used in a variety of contexts such as higher education (Robitschek 2003) and even viral online marketing (Ho and Dempsey 2010), but surprisingly considering its origins in assessing the outcomes of an Outward Bound programme, and the wealth of studies which have investigated personal growth/natural environment relationships (see Friese, Pittman and Hendee 1995), the scale is rarely applied in the context of the natural environment.

Nature -Relatedness and the Inclusion of Nature in Self Scale

It was important that in our investigation the natural environment was not simply an 'environment' in which conservation volunteering takes place, but that it is recognised as a key factor in creating benefits to well-being and further, that this includes people's connection to nature which can have many other positive impacts at different levels.

Although the central focus of this research is the individual in terms of nature-based intervention and well-being, the area of nature-relatedness deserves some further exploration. Nature-relatedness may be a direct contributor to good mental well-being but it is a good deal more than this. An individual's connection to the natural world can lead to significant changes in attitude which in turn benefits others and the environment itself (again, contributing to social capital). There are a lot less measures of nature-relatedness than of well-being, but we have been just as thorough in our selection here.

In a study of perspective, Schultz demonstrated how people exhibit stronger feelings towards issues facing nature when they feel closer to it (2001).

"...individual's level of concern for the environment is directly related to the sense of connectedness the individual feels with nature" (in Vining, Merrick and Price 2008, p.2).

Schultz (2002) argues that connectedness with nature is actually the path to sustainability, drawing upon an argument made by Tarnas (1991):

"Only the experience of connectedness will save the earth – and us with it. Any attempt, however grandiose and with however much commitment to its cause, will fall short if it does not have at its root the transformation of human experience in which human thinking knows connectedness and itself with that" (in Schmuck and Schultz 2002, p.73).

'Inclusion of Nature in Self' is a simple graphical measure of how close participants feel to the natural environment. Using a series of seven pairs of circles (each with one circle labelled 'self', the other 'nature' see fig.1) ranging from completely separate to completely overlapping each other, participants are required to choose the image that best describes the closeness of their relationship. It was decided that this clear, short scale was most appropriate for our participants to alleviate the monotony of completing questionnaire-style forms and also avoid the possibility of collecting less accurate answers due to participants becoming bored with the process.

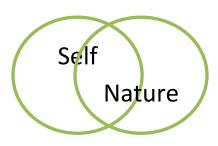


Fig 1.1 – Diagram 4 (Self and Nature fairly well connected)

So, even though as a Wildlife Trust we know how important peoples' connection to nature is, it is clear from these comments and the research discussed earlier that it is also necessary as a contributor to good mental well-being and health in general. While research may attempt to support this connection we felt it should be recognized explicitly in our methodological design as well as inferring it from the results of well-being studies on nature-based intervention.

Data Analysis

Interviews were recorded using an electronic device and paper copies of scales were collected from all participants, all in conditions in keeping with the ethical requirements of the NHS and general good practice in research methods, assuring participants' anonymity and confidentiality of information. Qualitative data was analysed through manual thematic analysis, whereby the researcher responsible for conducting interviews also analysed the data collected by transcribing recorded information into word processed documents, selecting key quotations, making summaries of discussions and organizing it into major themes.

Quantitative data was analysed using a combination of Microsoft Excel and SPSS (statistical package for the social sciences) software. Both packages were used to analyse and display results where appropriate, making use of the different calculations and tools available including averages and histograms to display scores for individual variables.³

The Tees Valley Wildlife Trust Well-Being Questionnaire

As a result of the feedback received from volunteers regarding the tools chosen and further investigation of literature, it was decided that it was both necessary, and appropriate, for Tees Valley to develop its own measure of well-being. Designed to be conducted as part of the interviews, which were modified slightly, a questionnaire was designed to build upon the

³Although this study was conducted with a relatively small sample in terms of quantitative methods, percentages have been employed to display results for ease of interpretation

strengths and weaknesses of the SWEMWBS, PGI and INS and the original methodology as a whole, by bringing the key elements together – general well-being, personal development and connection to nature. The development of this questionnaire will be discussed in depth in part two of this report (published July 2013) as well as the results collected through it in the second stage of our primary research involving pilot project volunteers.

Despite some criticisms made of the design of the scales used during the first stage, overall these measures are considered reliable, valid and have been used in similar contexts widely and therefore, although we have adopted a different design for phase two, the data collected initially and presented here is nonetheless valuable. Questionnaire scale data from the SWEMWBS, PGI AND INS will be discussed in the following chapters alongside qualitative data collected through interviews as findings support each other, enhancing their reliability. Using multiple methods of assessment has not only been useful in terms of reviewing the appropriateness, accessibility etc. of particular scales but also in terms of comparing results, highlighting commonalities and conflicts in participants' responses.



First Phase Data

This chapter presents the qualitative and quantitative data collected from our existing volunteers through the three scales and face-to-face interviews. As this is exploratory research, the themes discussed in this chapter have emerged directly from volunteers' responses and have not been predetermined by the researcher or Tees Valley Wildlife Trust. In line with our methodological approach it was felt that it was important to understand what was important to volunteers and their carers, rather than how they felt about what was important to us (or what we thought should be important to them). This is supported by data on our organisational outputs but as we will see, these are as important to our volunteers as they are to us, and it is necessary to include these to provide a full picture of the value of this project. Of course standard demographic and quantitative data is presented here too, in order to identify the characteristics of our volunteers and the many things they do.

In terms of demographics, Tees Valley Wildlife Trust volunteers represent a vast age range, from 18 to 90+ (!), with a wide range of educational and career backgrounds. However, there is not quite so much diversity in gender and ethnicity, as at the time of gathering the data twelve out of thirteen volunteers were male, and all volunteers were white and of British origin. Our inclusive approach to this project is naturally all about inclusion, and diversity is viewed in a broader way than simple demographics in terms of people's experiences and levels of good mental health. However it is duly noted that in terms of age and ethnic origin our volunteers are not necessarily representative of the wider community, and this is a point we have noted for the project's development in terms of access. This situation can occur for any number of reasons, and while some researchers have found the gender split to be fairly equal in environmental volunteering, when divided into categories of activity practical conservation tasks have been found to be mostly undertaken by men (see Russell 2009). The lack of females on our project in particular has been acknowledged by volunteers;

"We don't seem to get a lot of women...maybe it's not advertised enough...I don't mind working with the lads and that but like when the women are about it's a different crack with them you know what a mean. You still have a daft laugh with them but it's a different laugh you know what I mean" (Interview B)

One participant also commented that he had volunteered for the National Parks in the past and the same situation was observed there. He stated that conservation work seemed in general to be "heavily male-led", and that this could further be a factor in deterring women from applying (Interview D). There are several theories to suggest that as well as the possibility of a link between gender and type of activity, the fact that such groups are dominated by men will perpetuate the situation as many women may perceive these activities as exclusive in this way. It must also be acknowledged though, that volunteering in general in the UK carries a female stereotype, with the latest government survey of volunteering and charitable giving finding that women were not only likely to donate their free time, they were also more likely to donate more of it (Helping Out 2007). Therefore it is fair to propose that conservation volunteering may in itself be increasing the accessibility and diversity of volunteering overall.

There are many authors (Wilson and Musick 1997, Hewitt 2001) who have researched the existence of a cycle of volunteering in terms of there being certain qualities that make certain individuals more likely to volunteer (and in certain contexts) and that volunteering can enhance certain qualities in individuals too. The issue of diversity is less addressed in this way though – it is often identified that in certain contexts certain genders, age groups and ethnicities may be more likely to volunteer but it is much less acknowledged that this situation similarly may lead to volunteers with different characteristics being less likely to engage in volunteering. It is important to involve under-represented groups and while diversity may be difficult to achieve, equality of opportunity must be.

It has also been noted by researchers that demographics are often linked to mental health and well-being and this should be taken into account when engaging volunteers. Statistics show that women are more likely than men to have been treated for a mental health condition and are specifically more likely to suffer from depression (Mental Health Foundation 2007, p.27) and therefore it could be argued that we have a greater responsibility to engage with women in conservation volunteering as a form of Ecotherapy. There is also the fact that depression in minority ethnic groups has been found to be 60% higher than in the white population (Mental Health Foundation 2007, p.28), and a Black Caribbean person in the UK is twice as likely as a white person to be diagnosed with a psychotic disorder, so it is not only that in our group's demographic we are not representing the community in which we operate, we may be failing to attract significant groups who stand to benefit from our project. Of course as charities we do not always necessarily have the luxury of 'too many volunteers to choose from' and to reject willing volunteers just because they do not represent a particular target demographic seems extremely at odds with the principles of social exclusion, but we do still need to be mindful of these issues and their potential impacts on future or existing volunteers.

Organisational Outputs

Although this evaluation focuses on the personal impacts of our work it is necessary that the impacts of volunteering on our organisation and our reserves in the wider Tees Valley region are presented too. The huge efforts of Tees Valley Wildlife Trust volunteers and staff naturally directly benefit local communities as access to reserves and visitor experiences are improved, as well as, of course, benefitting the wildlife too!

We have approximately 19 volunteers involved in our project at the moment, although this naturally fluctuates depending on availability. Most of our volunteers contribute one day per week to the reserves, but two of them come out with us three days a week, and have done so for many years. In terms of length of service the mean average of our volunteer group is 6 years, but this ranges from 5 months to 11 years. As for time worked - per year the group takes part in 120 days of activities, so 480 hrs in total were contributed per person in 2012. With an average of 8 people on any given work party this amounts to 3840 person hrs that the Tees Valley Wildlife Trust benefits each year from volunteers, the equivalent to 2.4 full time positions.

The activities project volunteers have been involved in over the last year include a major project at Portrack Marsh in Middlesbrough, which has been regenerated to be more accessible, educational and enjoyable for visitors and organised groups, while of course being more habitable for its residents. Volunteers have undertaken a very broad range of activities during 2012 including fencing, hedging, path laying, installing benches and interpretation panels, building pond dipping platforms, pruning, strimming and essential repairs maintenance.

We often undertake projects to redevelop other sites, and in 2011/2012 the project team laid approximately 1km of footpath utilizing 120 tonnes of gravel, all shovelled and barrowed by hand at Portrack Marsh in Middlesbrough. A new nesting island and beach further involved moving 40 tonnes of cockle shell, which the team had already experienced creating an Avocet nesting island for the Industry Nature Conservation Association at the Brinefields, near Greatham Creek (Middlesbrough) in Winter 2010. At this site volunteers also moved 40 tonnes of cockleshell through frozen waters onto a central island to create a new nesting habitat.

Coatham Marsh was the most commonly cited reserve by volunteers when asked what their best experience with the Trust had been. The project volunteers were responsible for installing a 110m long boardwalk at Coatham Marsh in Redcar and Cleveland in 2009/10, which remains the only part of the site that is above water at times of peak flooding. In Winter 2010 phragmites reeds were also cut from Coatham marsh to make a thatched roof on the roundhouse at Woodhill Meadow, our reserve at Saltburn which is used a great deal by school groups. And, by no means last or least, at Preston farm in Stockton-on-Tees over 5000 trees of

mixed deciduous species were planted by our volunteers to create a native woodland on the slopes above some new lakes that our work team had created on the site.

There are also tasks performed every year which involve great commitment and effort from our team alongside special projects. Most summers, at the end of the flowering season and when all the seed has dropped around 7ha of grassland is cut and raked - this is the equivalent of cutting and raking a metre wide strip over 70km long. At our Gravel Hole reserve in Stockton for the past three years, in the dark winter months volunteers have cleared out a mass of mature hawthorn scrub that had encroached on the grassland. A thorough job involved grubbing the hawthorn out at the roots, by hand using an axe and mattock (and anyone who has done this knows it is not an easy or particularly nice job!). Countless miles of grassland have also been strimmed and regularly cleared of litter.

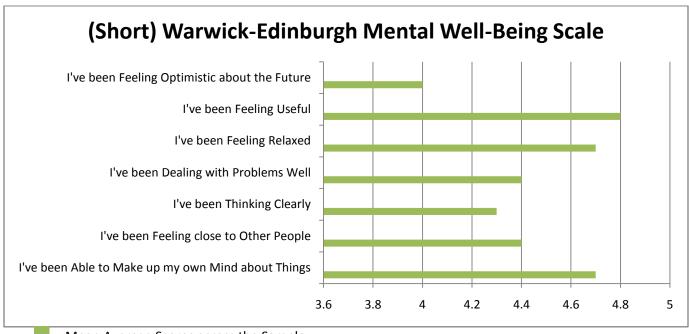
It's clear that the Trust depends heavily on the help of volunteers, and not only is a significant proportion of our work attributable to them; their involvement also brings enthusiasm, new skills and ideas to the team that make these projects possible. Volunteers also give us the opportunity to apply for different streams of funding and provide links to other resources, including of course, more volunteers.

Across the UK there is a growing need and commitment to demonstrating the impacts of volunteering in every sector, particularly in economic 'wage equivalent' terms. These evaluations are incredibly useful, but even when they account for social and community impacts they only paint part of the picture. We have a relationship of exchange to maintain with our volunteers, and accordingly this research is really, and deservedly, all about them, rather than what they contribute and how they can be quantified.

Survey Results

As described in the previous chapter on methodology (but to be discussed in much greater depth in the second part of the report), our existing volunteers were asked first to complete two well-known and recommended well-being measurement scales – the Short Warwick and Edinburgh Mental Well-Being Scale (SWEMWBS), the Personal Growth Initiative (PGI) scale (the Inclusion of Nature in Self (INS) scale data will be discussed separately later in this chapter). The SWEMWBS scale consists of seven-items with a rating scale from 1-5 and the PGI scale consists of 9 items with ratings from 1-6. The graphs below present the mean average scores of the data collected across all items in these scales.

Graph A. Mean average scores across the sample for SWEMWBS



Mean Average Scores across the Sample

The SWEMWBS scale produces data relating to emotions, relationships and psychological functioning, so even the short version provides a well-rounded picture of well-being. Our volunteer participants found this scale the easiest to use and all statements received a response.

From the graph above it is clear to see that volunteers reported that their optimism and feelings about the future (item 1) as the least positive of all items. Scores were received across the full range from 1-5 on this item, but an average of 4 is not low in itself. It must also be noted that volunteers in this sample were at very different stages of rehabilitation from poor mental health, most notably six participants were at the time of data collection inpatients of a forensic mental health unit. There remains an awareness for some of these participants that their future, at least for the next few months, is uncertain and may involve them remaining in full-time secure care.

The highest scores were received in relation to volunteers' feelings of usefulness, relaxation and independence of thought. While the differences between these scores and the lowest scoring item are not significant in themselves (the largest difference between highest and lowest mean averages being 0.8), these results do suggest that, as a result of the tasks volunteers participate in on our reserves they have a greater sense of purpose and set of skills,

logically contributing to how useful they feel. Average scores of individual items ranged between 4 and 4.8, with higher scores being achieved in relation to how relaxed participants feel and their decision-making abilities. Generally the picture is good, as this collective data suggests that our existing volunteers feel they are able to function psychologically, maintain healthy relationships and are generally satisfied with their lives.

Each item on the WEMWBS and SWEMWBS is scored from 1-5 in order to produce an actual score for each individual and each questionnaire as a whole, giving a possible score of 14-70. As we were using the short scale our range per person is 7-35 (not accounting for missing entries). According to the manual for WEMWBS the UK population mean average score (per person) is 51. There is no mean equivalent score for the SWEMWBS scale available for the general population but we can take it that as a relative fraction, on a 7-point scale an average score per person could be assumed to total 25.5. The average score for each individual taking part in our primary research with this scale is 31, and therefore we can reasonably assume that the mental health and well-being of our existing volunteers is higher than average. Particular items on this and the PGI scale will be discussed in more depth in this chapter where they relate to themes from interviews.

Personal growth was identified in our study as a key factor in mental health and well-being as well as a key component in psychological measures before any other, while independence (as related to initiative) emerged as an issue more from observations on-site prior to engaging in this research. From the anecdotal evidence the Trust had already collected through conversations with volunteers and carers it was clear that volunteers developed personally as a result of the Inclusive Volunteering Project. As one carer stated,

"Clients benefit from taking on responsibilities and being committed to weekly tasks, which in turn improve their employability skills and improve opportunities and confidence to gain work and acclimatise back into the community" (Carer 2).

As a result of these initial findings the PGI scale was deemed appropriate for collecting quantitative data at this stage. Again this scale accounts for the importance of relationships and feelings about the future as with SWEMWBS, but it also places emphasis on the individual in terms of independence and confidence which are again undoubtedly linked to well-being. Responses to the statement 'I take charge of my life' achieved the highest scores with an average of 5.3 and considering the fairly strong wording of this item this is a pleasing result. Item six ('I have a Specific Action Plan to Reach my Goals') generated the biggest range in responses, with two participants stating that they 'definitely disagreed' with the statement. This item also generated the lowest mean average of 4.1 but, as with the SWEMWBS results this is certainly not a low score in itself.

Graph B. Mean Average Scores across the Sample for PGI



Mean Average Scores across the Sample

While volunteers may not have specific 'action plans' as such, it is clear from responses to item five that they are aware of what they need to do in order to reach their goals. Again this scale is scored in terms of simple points, providing each participant with an individual score which can then further be examined at a wider level in terms of averages. With PGI participant scores have a potential range from 9-54. The mean average here stands at 43.9, and although unfortunately no population mean average has yet been identified for PGI for us to compare our results with this is not a low figure overall. If interpreted in basic terms this average equates to an average well-being 'score' of 81%.

All this data is very impressive and clearly demonstrates that our volunteers are generally in a positive state of well-being. But there are two problems with this – direct attribution of their well-being to our project, and an accurate baseline from which to measure that difference in quantitative terms. We also require more in-depth knowledge regarding each of these factors. This is where the value of our extensive qualitative research comes in, as volunteers were able to tell us in their own words whether they feel they have developed directly as a result of the project, in what ways and how far they feel they have come⁴. This data is particularly enriching because qualitative data allows for participants to elaborate with examples, make comparisons and identify conflicts wherever appropriate.

⁴ We also attempt to tackle these issues directly in stage two of our research to be presented in part two of this report.

Skills and Knowledge

The strongest theme to emerge from qualitative interviews was considered both as a direct impact and as a motivator for volunteering (and continuing volunteering) with Tees Valley Wildlife Trust. The prospect of gaining new knowledge and skills in conservation, team working, planning and using tools, or even maintaining knowledge already held was a definite attraction for several of our volunteers. While three volunteers stated that they had a good existing level of knowledge about the countryside and wildlife, they found the guidance they received through our project took them one step further and they reported they felt more involved in their environment putting the skills they had learned into practice regularly. One participant commented that he had grown up in a rural area and found volunteering in green spaces "comforting" (Interview M). Participant E also noted that "skills like this can be lost so easily" and that volunteering was a way to maintain them, "for the good of your body and your mind". Another volunteer also noted that this impact could be useful in attracting younger people who are out of work in Teesside (Interview I), particularly as it offers the potential for them to combine theory and practical work in a number of situations. Levels of unemployment in the Tees Valley are undeniably high with unemployment benefit claimant rates in April 2013 at 6.6% (2.9% higher than the national average) (Tees Valley Unlimited 2013), and with a large University, graduating students may indeed present a new source of volunteers taking the opportunity to gain unique and transferable skills. 12.8% of those claiming unemployment benefit in the Tees Valley are aged 18-24 and 15.3% of Teesside University graduates assumed to be unemployed (Teesside University Statistics 2013). In terms of social inclusion, the relationship between unemployment and poor mental health is strong (with relationships being identified as influential both ways) and therefore our project can be an important preventative measure for well-being as well as facilitating people back into paid employment.

Participant H stated he would like to be more involved in technical work, and would "love to be able to be more skilled to get into employment". Gaining work experience is generally perceived as a core motivation for younger people to volunteer, usually short-term and with paid work as a clear, often solitary goal achieved as a result of the practical experience gained through programmes like ours. These perceptions may have some truth but it is also vital that people aged over 25, who may not have such clear direction and have an equal need for such projects, are not forgotten about. Plus there is the glaring fact that for people with poor mental health it is a lot more difficult to access education and employment, restricted by many manifestations of social exclusion. Again this points to a vicious circle that can be tackled through volunteering.

In terms of formal education, a carer in our study recalled that two of his patients had taken part in Open College Network programmes in Horticulture in association with Tees Valley

Wildlife Trust in the past. These programmes were taken at different levels depending on individuals' abilities and this participant noted that,

"...any piece of paper, any certificate's got to benefit them...the two who completed the OCN [Open College Network] got a lot out of it and they enjoyed the achievement at the end of it" (Interview 1).

Participant B echoed this sentiment but also highlighted the need for further formal training to support hands-on experiences;

"...experience is really valuable and any interview I go into I'd always bring up the wildlife trust and the work I've done with you but it would be nice if I did go into an interview to say that I've worked for the wildlife trust and they put me through my ticket".

Participants G and K said they were very interested in taking more formal qualifications in a variety of subjects from pesticide management to information technology. One key point raised by four volunteers was that training should be approached from an individual perspective, as each of these volunteers wanted to pursue different interests within conservation. Two volunteers told us they had experiences of training being delivered through other organisations which did not take individual levels of ability into account and this had unfortunately resulted in negative experiences which heavily influenced their perceptions of volunteering thereafter. However, these volunteers remained very enthusiastic about having "something new to learn about" (Participant D), whether for personal or professional development.

Learning new skills is certainly not exclusive to younger 'markets'. While most of our volunteers at Tees Valley are in higher age brackets and several expressed their disinterest in pursuing formal qualifications, every one of them mentioned skills as an important factor in volunteering on this project, with most stating that they found learning new skills to be most important to them in terms of personal impact. Both participants D and F highlighted the fact that many people do not get the opportunity to learn these skills at all during their working lives, and that we provide them with a unique and safe environment in which to do so.

"A lot of the skills they're new to me, you know sawing, drilling, and all that sort of thing I've learnt from it... it could benefit anyone, older people might decide to start their own business through unexpected positive experiences like this. Certain activities through volunteering might start them off" (Interview D).

These volunteers and participant K further commented that that they had used many of the skills they had learned at home in D.I.Y or small gardening projects, but also in helping out

neighbours and friends with theirs. Several of our participants said that they had learnt a great deal from our reserves officer and that they felt the Wildlife Trust staff were responsible for a great deal of the knowledge they had gained. One volunteer commented that our reserves officer had an "excellent way of teaching and working with us" (Interview E), while another was "impressed with how much knowledge the Wildlife Trust staff have" and "the days are well planned so you can learn a wide variety of skills" (Interview H). Participant H also highlighted that he felt he could always ask for instruction and received a great deal of support when needed. Participant D said that she appreciated being able to observe as well as be hands-on:

"You need someone to learn from...I'm quite happy to watch him and learn from him...even there when I'm not doing much I'm watching and I'm trying to pick up, oh right you hold it like that and you do it like that to do the best, to get the screw in better...I've got a bit better" (Interview D)

Although of course it is important that there is an appropriate level of knowledge of mental health issues in our project team and that volunteers are supported in their unique needs, it was suggested by some volunteers that the fact that Wildlife Trust staff were not mental health professionals which made the project more satisfying and effective. As well as providing many volunteers with a unique context to distract them from their everyday lives and potentially negative associations, it became clear that for the same reasons it was much more important to volunteers that staff working focussed on the activity as a form of work, rather than a form of therapy. Several participants commented that the team here at Tees Valley Wildlife Trust achieved an excellent balance in this and that, combined with the inclusive approach to volunteer engagement, while they felt supported in terms of their health, this was not the major issue presiding over their involvement.

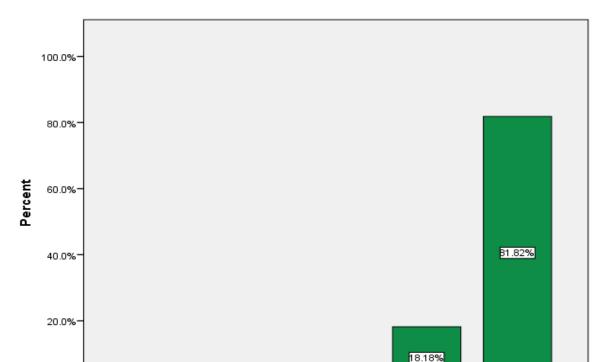
Our volunteers learn from a range of sources though, not just from Wildlife Trust staff. They learn a great deal from one another and independently, from the environment itself. The importance of passing on knowledge from experienced volunteers to new volunteers, and further on to family and friends was raised by three of our volunteers, which they found was "a very valuable thing" (Interview C). Participant F also said that to him, it was important to be valued in terms of the skills he had learned while volunteering as well as those he already had. He said that other volunteering opportunities he had pursued had offered a great deal to him, but he felt he had little to offer back, whereas at the Wildlife Trust he felt there was more of an exchange of skills and knowledge.

It is not simply a list of qualification or skills that holds the value of learning as an impact of our volunteering project though. The real value of this benefit lies in the way it makes people feel when they learn something new, how it inspires them and improves other aspects of their lives. It was clear from volunteers' qualitative responses how valuable these opportunities were to

them and later it will be shown how they feel they have developed in terms of confidence, relationships and their feelings about the future. In terms of the quantitative measurement scales used there is also data to support these qualitative findings. Graphs I and II below display the items in the SWEMWBS and PGI scales connected to learning and our findings on this theme.

'Usefulness' to others has been researched by many academics in terms of well-being and is a strong indicator of positive mental health, although the true impacts of this are only just beginning to be recognised. Occupational health research by Takaki et al (2010) recently found that Japanese workers who claimed they felt useful to others reported much lower incidences of sleep disturbance, symptoms of depression and reports of stress in the workplace. They argue that an effort-reward balance is important for well-being and that feeling useful acts as a form of buffer against negative feelings or environments, suggesting that it has a 'healthprotective effect'. The value of volunteering as part of a skill exchange has also recently been shown through community time banks in the USA, linked to mental health gains as a result of participants feeling useful by helping others in their community (Lasker et al 2011). The gains were found to be greatest for older people, those living alone and on low incomes, which accounts for a significant majority of the volunteers involved in our Inclusive Project and further for many people living in the Tees Valley suffering from poor mental health. WellScotland, the national government department for mental health improvement in Scotland also advocate learning new skills in order to improve feelings of usefulness, sense of purpose and personal value, highlighting these feelings as central in combating stress (2012). This aspect of well-being relates directly to the comment made by participant F earlier in terms of volunteering being an exchange. While we need to present an opportunity and valuable environment to people with poor mental health to learn in, they also need to have the opportunity to put this learning into practice and 'give back'. This is not only for the benefit of the organisation, but for the individual.

Our results show that almost 82% of our volunteers feel useful 'All of the time', with all volunteers feeling useful at least 'often'. During interviews participant I also specifically commented that he "felt useful all the time". These results are very satisfying considering the diversity of volunteer skills and states of well-being when they started volunteering with us. It is clear that not only are our volunteers able to learn and develop their skills and knowledge but are also able to put it is into practice, through hands-on tasks on our reserves, helping out more at home or passing their knowledge onto others.



0.00%

None of the Time

0.0%

D.00%

Rarely

Graph I. Responses to SWEMWBS Item Two - 'I've been feeling useful'

The PGI scale also features one item relating to learning as an indicator of well-being in terms of what individuals can offer those around them. As stated earlier enhancing a volunteer's skill set is valuable in a number of ways beyond employment or simply having an occupation, it is valuable in terms of creating a positive perception of themselves in which they are valuable to society, that they have something to offer and that this is unique. Although some participants struggled with the way this item was presented (it is fairly abstract), the results are positive. Graph II below shows that 100% of this study's participants to some extent agreed with the statement 'I know what my unique contribution to the world might be', and almost 64% agreed strongly.

0.00%

Some of the Time

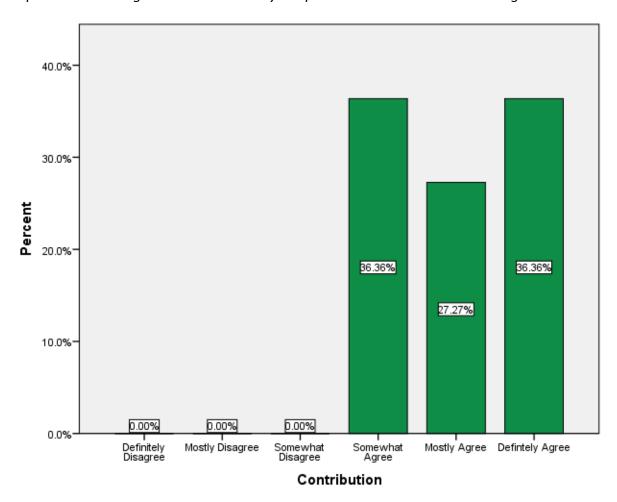
Usefulness

Often

All of the Time

These results strongly support our qualitative findings that learning is not only a key motivator for beginning and continuing volunteering and an important positive impact, but also that it is strongly connected to positive mental health and well-being. It is clear that volunteers are aware of the value of the 'usefulness factor' and value it highly - albeit in very different ways - but for those with experiences of poor mental health it is the ways in which learning new skills makes them feel personally, as well as how it can improve other aspects of their lives that is so valuable.

Graph II. PGI Item Eight – 'I know what my unique contribution to the world might be'



Confidence and Independence

Confidence and independence are strongly connected in our findings as they are in other studies of mental health, and are also directly associated with learning through building self-esteem, having a sense of purpose and value to society (Learning and Skills Council 2008). These issues are further naturally connected to social inclusion/exclusion, and studies documenting the positive effects of increased confidence and independence of individuals on their participation in society and well-being are innumerable. One interesting investigation in particular found that there is a human need to maintain a comfortable level of self-esteem, and maintaining this protects people from negative emotions and feelings of depression and anxiety, as well as enhancing coping mechanisms when such feelings become an issue (Leary, Terdal, Tambor and Downs 1995). These authors argue;

"...a person's feelings of state self-esteem are an internal, subjective index or marker of the degree to which the individual is being included versus excluded by other people (the person's *inclusionary status*) and the motive to maintain self-esteem functions to protect the person against social rejection and exclusion." (p.519).

They suggest that self-confidence and self-belief are integral to the circle of well-being, as those with lower levels have more negative perceptions of events and vice-versa. Where individuals feel excluded their confidence and esteem lowers, and as a result they feel, and become even more excluded, to some degree through self-stigma. Having the confidence to join a volunteering group is a major step in building esteem and recovery, so projects like ours have a responsibility to continue to reinforce and build every volunteers confidence, as well being as accessible as possible.

Independence is clearly linked to confidence through individuals' ability to make their own decisions, use their initiative, deal with problems and take control of their lives. For people such as participant M with a history of depression, independence most importantly involves paid work and moving out of supported accommodation. This is a goal they hope volunteering in green spaces can help them achieve through giving them something to hope for and unique to be involved in. In many situations people suffering from poor mental health of course have a limited level of independence out of necessity, as is the case with the patients from forensic units who volunteer with us. Codependent environments may also be necessary where people have been involved in the criminal justice system for reasons linked to their mental health but these individuals may be in a process of integrating back into the community. Similarly though, individuals may live completely independently but may not function well psychologically, and find it difficult to change things for the better on their own. 'Dependence' can also be interpreted in different ways, and could relate to medication, alcohol or illegal drugs, as well as other people, organisations and receiving state benefits. However a person's independence is limited, their confidence and mental health can be limited as a result.

However, where independence is limited and confidence is low at times, it was clear from one carer's response that our project has exceptional value;

"...when they come back they're the big 'I am'. It's all about self-esteem and confidence with them when they go back...Our lads, they're governed by rules, there's always somebody watching them when they're on the wards...obviously they get the satisfaction of going out and coming back and promoting, bulling themselves up on what they've done on the day. You do see it. You can see they puff their shoulders out on a morning as they're going out on a morning 'oh look at me I'm going to work' and on a night their chest's are pushed out and it's a case of yeah we've done that today and everybody's

going to ask me when we get back on the ward where we've been and what we've been doing" (Interview 1).

While many aspects of volunteers' daily lives may be restricted, dependent on others and various circumstantial factors, our project encourages as much independence as possible in terms of thought and action while volunteering, but also by encouraging preparation and organisation for volunteering.

"Bringing the lads out you're promoting that work ethos, structure to their day, independence it all comes together their confidence, their self esteem, the ownership because they've got to take ownership themselves because they've got to get themselves up and organised do their packed lunches make sure they've got the appropriate gear...it's a feeling of self worth as well because you know when they're out here they do feel that they're a part of something" (Interview 1).

Volunteer participants in our study raised issues of confidence and independence mostly in relation to learning as a form of personal development, which could lead them on to more independent living through employment or gaining access to more formal training. The contribution made to confidence here is not contained within the time frame of the work party itself but positively affects volunteers' lives outside the Wildlife Trust. Such unexpected factors were highlighted by some of our volunteers in relation to the confidence they had gained. While participant D did expect to gain new skills through volunteering, she commented that her growth in confidence as a result was a complete surprise and participant K referred to being 'behind the scenes' working on the landscape as an unexpected "confidence-builder".

The strongest source of confidence-building identified by volunteers was the opportunity to see the impacts of their work on others, the wildlife and the landscape. Immediate visible impacts were directly related to improved self-confidence by five participants, with examples of this ranging from small maintenance tasks;

"It seems such a simple thing for someone to be taught to use a strimmer and it's the easiest thing to see a result of your labours. Now if you're doing a path you can look back and think 'I've done that'" (Interview E)

to large-scale redevelopments, such as laying boardwalks at Coatham Marsh in Redcar which took several months during 2009 and 2010. Volunteers also commented that as well being more open and confident within themselves they had definitely seen the positive effects of the team's work on others' development, linking self-esteem, skills and confidence together as impacts (Participants E and G). Participant C stated they had

"...definitely seen changes confidence wise in people, learning new skills is definitely most linked to people's confidence" (Interview C).

Every task that is completed on our work parties has a role to play in building confidence and working towards the highest level of independence possible for each individual. The way that our volunteer days are organised bears this in mind featuring a range of individual and group work with small challenges, and this has clearly has a positive effect on everyone involved.

It has also been noted by volunteers that at the early stages of participation some individuals feel the need to attach themselves to others and tend to shy away from speaking up or making decisions, but within a very short space of time these individuals often become much more independent within the group (Interview D). Some degree of anxiety before joining a volunteer group is to be expected and participants J and F both stated this was something that needed to be broken through, both having had negative experiences on other programmes elsewhere. The relationships built with other volunteers therefore are instrumental in this as highlighted by participant L.

The way confidence is built through others was raised by several study participants, as their reaction to volunteers' work has a major impact;

"...you get a lot of satisfaction...when you see the public going by and they're like 'thanks that's looking nice' and it gives you a bit of a boost...At job club when he tells them he's done the work at Portrack the women there say "you've done good a good job there" so it's good to be involved in it...family and friends always see things I've done too and they see this as something that's increased my confidence too" (Interview B).

Participant B's experiences with poor physical health had lead to poor mental health as he suffered from depression after a long period in hospital, and he told us that he saw the Inclusive Project as a way of building up his confidence by meeting people. Independence and confidence then clearly do not have the solitary associations they seem to; they are in fact created through social interaction, and a level of independence within this.

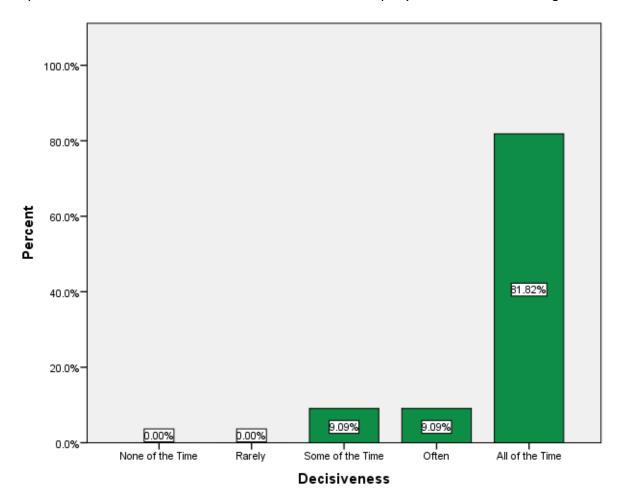
What was also very interesting from our data was that volunteers indicated that it was not only confidence in themselves that had a positive impact on their mental health, but also confidence in others. Trust is an important issue, particularly in terms of social exclusion and just as with individuals this needs to be built, or re-built where necessary in order to allow the positive impacts of volunteering to have their full effects. From this we can further understand complete independence does not necessarily exist alongside good mental health, a delicate balance of positive dependence on others and autonomy needs to be encouraged in volunteering tasks.

Both SWEMWBS and PGI scales feature more than one item relating to independence, confidence and initiative which demonstrates the important of this factor for well-being. While the qualitative data collected shows that these are impacts keenly felt by individuals and perceived in others, as well as being specific goals reached in stages, the data displayed below shows in more detail how levels of these factors translate into psychological functioning in everyday life. Graph III. shows our participants' responses to the statement 'I've been able to make up my own mind about things', highlighting the importance of decision-making as an indicator of independence and subsequently, good mental health.

Responses to this statement were extremely positive, with 81 % stating they were able to make their own decisions all of the time. None of our participants stated that they felt they were generally unable to make decisions for themselves, although 9% did feel that this was the case some of the time. As discussed earlier six of our participants are patients at a forensic unit and therefore the ability for them to be completely autonomous is removed to quite a high degree. Considering this, 81% is again a positive result. Volunteers are encouraged to make decisions during tasks and as a result each individual experiences increased sense of independence and confidence as well as the opportunity to build trust in others who make decisions for the group at different times. Apart from this being good practice for volunteer management in general as a form of facilitative or distributive leadership (see Bowbridge and Creyton 2002), improving volunteers' ability to rationalise and use their initiative tackles the opposite effects poor mental health can have on their daily life, where a lack of confidence can lead to an inability to make even the smallest of decisions.

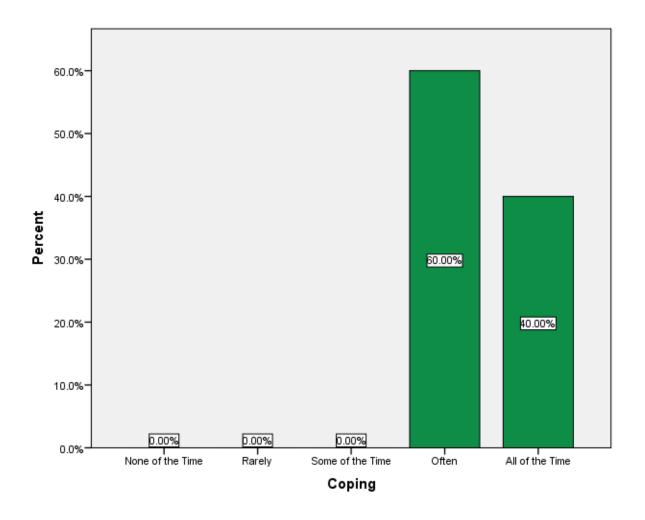
SWEMWBS item four explores individuals' ability to cope with their mental health issues and other problems, which is naturally an essential element of restoring or maintaining psychological functioning. The potential for green spaces to foster relaxation has already been noted and in this particular environment we would hope to have a significant positive influence on volunteers' ability to handle their problems calmly and effectively through increased relaxation, more rational thinking and the opportunity for distraction where appropriate. Graph IV. shows this item gained very good responses overall, with 100% participants stating they have been able to deal with their problems at least most of the time. For 60% of these volunteers to achieve this often is a great result considering the variety of stages of recovery, mental health disorders and personal situation they are in. It is further encouraging considering the current wider issues of the economy affecting the UK, particularly in the Tees Valley and for those who are unemployed and receiving incapacity benefits.

Graph III. SWEMWBS Item Seven 'I've been able to make up my own mind about things'



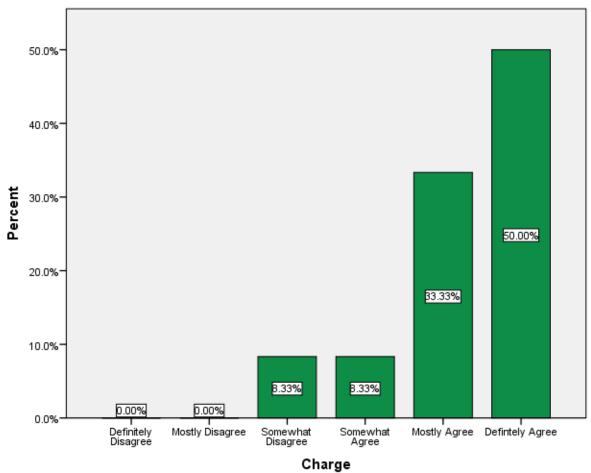
Graph IV. SWEMWBS Item Four 'I've been dealing with problems well'

While many participants chose not to go into great depth on the problems they have had with their mental health in the past, four volunteers did comment that volunteering with the Wildlife Trust has helped them to cope with their everyday lives because it presents a valuable alternative. Particularly for the forensic patients involved, they believed that being outdoors in nature allowed them to cope better with the confined, regulated spaces they had to deal with the rest of the week. Participant H reported that he felt being outdoors with the group gave him something to look forward to and that as a result his problems "don't seem so bad".



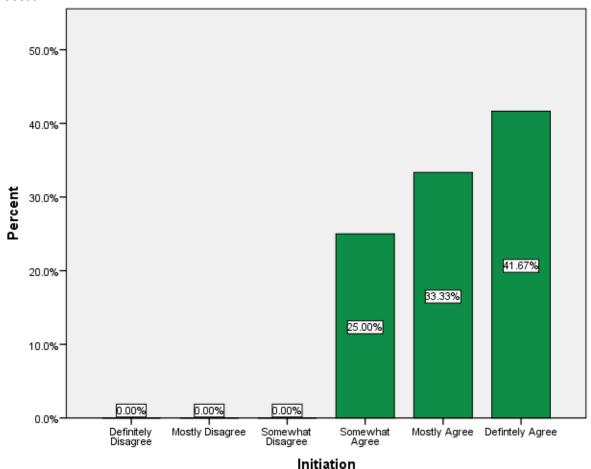
The PGI scale is heavily focussed on indicators of independence and confidence through statements relating to personal initiative. Some of the statements in the scale are strongly worded and high scores would certainly indicate high levels of confidence and independence. Plus at times these statements are also fairly philosophical, relating to life on a wider scale whereas the SWEMWBS scale featured softer, more specific (some may argue realistic) statements. It was expected that response scores would be slightly lower for PGI than those collected via SWEMWBS possibly as a result of this and as shown in graph V. this appears to be the case. 16% of participants reported just some level of agreement with the statement with 8% saying they did not really feel they took charge of their lives. However, 83% gave a positive response overall stating they felt they took charge most, or all of the time. Again we must be mindful in interpreting this data that many of our participants were in situations where independent decision-making was limited by others and their futures were not always certain.

Graph V. PGI Item Seven 'I take charge of my life'



Item three is clearly centred on participants' initiative and their will to improve their lives independently. Displaying confidence through planning, exercising individual choice and making the most of opportunities is tied in with this item, all of which are encouraged in our volunteering tasks. Item three is also about recognising the need for change in oneself and for improving life through something practical, and the fact that volunteers have chosen to work with us is proof of their first step in achieving this. Graph VI. below shows that all of our participants had some level of agreement with this statement, with 75% strongly feeling that they initiate change in their lives when they see fit.

Graph VI. PGI Item Three 'If I want to change something in my life, I initiate the transition process'



Having the confidence to change any significant aspect of life can be daunting for anyone, but for people suffering from poor mental health who may be marginalised by others in society, making changes even to small things that have become routine or that someone may have become dependent on, is often so frightening it is avoided altogether, leading to 'life inertia' (Taylor 2012). As well as Trust volunteers being confident in their own ability to initiate change, the tasks they engage in prepare them for this in small ways too, as unusual and changing circumstances natural to conservation (and British weather!) are experienced daily and the volunteers regularly have to adapt to these as a group.

The impacts of their increased confidence and independence reach far beyond our project, as several participants have moved from psychiatric wards through supported accommodation to independent living while working with us. Many volunteers have also joined other community groups, and taken on formal education or employment when they commented they would never have been able to do such things before (Interviews B and H).

Structure and Freedom

The mental health benefits of our project are gained through a balance of the natural qualities of volunteering in green spaces, and the more orchestrated qualities of a well-managed project. There is also an essential wider balance to maintain between structure and freedom to maintain for positive mental health. Such factors are subjective and therefore often mean different things to different people, and while some respond well to a strong routine, others require more freedom to achieve the benefits of such a project. It was clear through our evaluation that although volunteers may have different views on this, they do feel that some level of structure is absolutely necessary. As much as these factors are conducive to mental health rather than being actual mental health indicators, it is important to include them here as strong themes which emerged from the data collected.

We have already noted the value of volunteering as a form of distraction from potentially negative thoughts, but qualitative data from interviews shows that both carers and volunteer participants are well aware of the value of this form of structure in physically and mentally distracting them from negative behaviours too.

"We know if these lads are unoccupied they tend to wander astray, get back in with the wrong crowd and the last thing we want to see is the revolving door where they come back into the service, go back out, come back in and you see it so many times...There's few and far between that go out and get paid employment...they've got 16 hours a day that they're unoccupied so they are likely to get involved in negative behaviour" (Interview 1).

Participant H also commented "It keeps you out of trouble", while another volunteer suggested this could be a way forward for others as a form of early intervention where negative or even criminal behaviours are prevalent;

"Youngsters now are always in trouble and they always say there's nowt (sic) to do. Well why don't they come on a project like this?" (Interview I)

Earlier the important impact of learning was discussed and the maintenance of existing skills was mentioned as just as important to volunteers as developing new ones. In terms of a sense of purpose, our volunteers also commented on the importance of structure in achieving this;

"When you're out of work for like long term like sometimes I am you know you can still know you can do a proper days graft and still do a bit of manual work and that's what I like about it" (Interview B)

"...when I retired I knew I wouldn't be able to do just nothing...I just couldn't stay in the house it would drive me mad...I don't need slots as such but I thought when I was retiring that I need to make sure that I've got something to do" (Interview D)

Lamb (1980) referred to structure as 'the neglected ingredient of community treatment' in relation to mental health and continues to assert its importance in treatment and rehabilitation. It is generally agreed that 'happy people are busy people', and as with learning new skills, having structure and some degree of responsibility is naturally conducive to creating a sense of purpose and consequently a sense of self-worth. Participant F also highlighted that this is again part of a relationship of exchange, where the Wildlife Trust needs his contribution and he depends on the structure provided by them in return;

"I give a lot to whatever I'm doing...but I'm also getting a lot of benefit from it. It helps me mentally I don't feel useless which you can so easily do when you leave work. You don't have a job anymore you don't have any commitment you can go and sit in a chair watch the television and just stagnate and die or you can get off your backside and do something... I feel like a fish out of water (when it's not on) it's like well what are we going to do then?...I love it, I really look forward to it it's almost part of what you could call my work cycle if you like. I've replaced work with volunteering...I expect it to be there."

Participant F also commented that he had tried a few different community activities before coming to Tees Valley Trust but had not continued with them because the relationship seemed too one-sided, in that volunteers were not given a sense of purpose or any clear direction.

For all our volunteers though, (particularly those living in a forensic unit), volunteering may present positive structure, but the context of the natural environment presents a much-needed sense of freedom at the same time. During our interviews all volunteers commented on the positive impact working out on reserves had on their well-being, from simply giving them a bit of fresh air to clearing their mind and providing a form of retreat from the confines of everyday life (Interviews H, I and J). Participant M reported that he got involved in the project "just to get off the ward and get some freedom", and as well as feeling the project helps him deal with being in a very structured setting the rest of the week, he also said it "lets me relax, freedom, brilliant". One carer noted:

"...working in green spaces has got to have a good impact on their mental health, it encourages flexibility and they have more freedom over their behaviour because there are no walls, the carers tend to try and keep a bit more of a distance and that has a greater positive effect...they respect us for giving them that bit of freedom" (Interview 1)

A degree of freedom and flexibility is as important as structure in how our project is managed, and it is this element which was attractive to participant B when he left work due to ill health, but still wanted to be productive and build up his self-esteem. Participant G was advised to break free from a depressive routine and "enjoy the freedom of outdoors" by his GP. Participant E commented that while his initial motivation was to keep themselves busy, flexibility does need to be maintained, and that although it is important to be needed by the Trust, volunteers, particularly volunteers who may easily feel vulnerable or lacking in confidence, should not be completely depended upon or pressured. Plus it must also be recognised that being busy is relative, and for people suffering from stress and anxiety disorders structure needs to be managed sensitively. This may be on an individual or in many cases a day-by-day basis, as circumstances change and levels of participation may not stay the same, but again this is a delicate balancing act for those coordinating volunteers.

"You need to have something that keeps them on the straight and narrow because you can't rely on their own mental common sense to get on with life...but there's a fine line between keeping people on the straight and narrow as it were and treating them like soldiers" (Interview F)

Freedom of course is not only a positive feeling experienced by volunteers. Participant E further commented during interview that freedom was an important thing for volunteers' carers to get outside and enjoy some relaxation for themselves, and that in his own personal situation it was beneficial for his marriage for him and his wife to have some time apart doing their own thing.

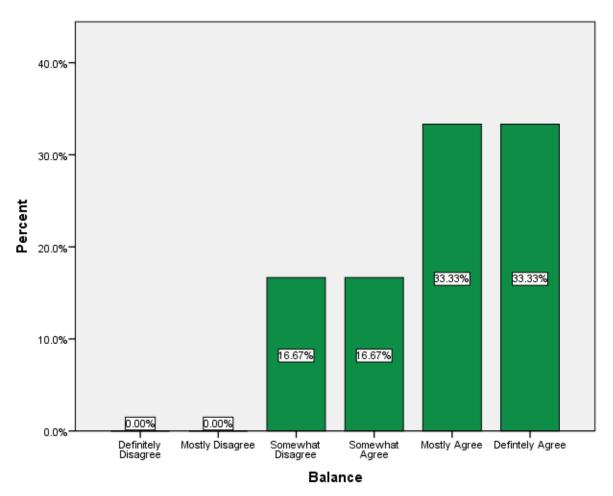
The value of freedom and structure can also be viewed in line with the other themes discussed so far, as to many of our volunteers freedom is interpreted as independent living, while structure may be of value to them in terms of gaining new skills for regular paid employment including time keeping and organisation. As discussed earlier though these impacts are not wholly individual and are often dependent or enhanced by the nature of the group and the team work involved in conservation volunteering. The inclusive nature of our project means that volunteers at all stages of recovery and well-being come together, and often in this situation particular individuals present an image of freedom or structure that others want to achieve in some way. The image these volunteers present to each other is often one of hope, and this often comes through their attitudes as their confidence and esteem develops. Participant F commented on this;

"...if you're going to bring people out of themselves you need to get them involved with people who are not in a mental institution who are living a normal, in inverted commas living a normal daily life so without realising it, ordinary people for want of a better word can help people with mental problems as I say without even realising it through their attitude and their friendliness and 'how you doing?' whereas I think I would imagine the

professionals people who are involved in institutions, staff, are trained to think in a particular way and it's a bit regimented".

As structure and freedom were issues raised by volunteers in terms of positive elements of conservation volunteering, they are less of a feature in the measurement scales used because they have less of a relationship with emotions or the ability to function mentally. However, PGI does reflect on this in terms of initiative, recognising the need for balance in life.

Graph VII. PGI Item Nine 'I have a plan for making my life more balanced'



Responses to this statement were the most variable from the PGI scale, with participants scoring from 1-6, however this statement is open to interpretation perhaps more than any other, as 'balance' is an incredibly subjective concept. However, it is assumed here that volunteers responded in relation to the traditional meaning of a work/life/leisure balance, which connects directly to flexibility and structure in the same way as we have discussed in qualitative responses. As can be seen from graph VII above most responses were positive, with 83% agreeing with the statement to some extent. Although almost 16% of participants felt they did not have a plan for making their lives more balanced, this could also be due to the

'planning' element more than recognising the importance of balance (this also relates to the 'action plan' issue noted earlier in relation to responses to item six of PGI). Identifying significance and conclusions from these responses is therefore problematic, but it is clear from qualitative data that structure and freedom are key issues in project management as well as in maintaining a healthy state of well-being.

Achievement

Logically, having a fulfilling life with a sense of purpose leads to a sense of achievement (BUPA 2012). But achievement must be thought of in smaller terms than 'life fulfilled'. To many people with poor mental health small accomplishments amount to major achievements and we all know how much overcoming a small hurdle can mean at times. In addition, major achievements tend to be associated with major challenges, and subsequently a higher risk of failure, so again this requires a sensitive approach in volunteer management. While achievement is naturally linked to developing good mental health by many researchers, a significant proportion of studies focus on opportunities to do so outdoors engaging with nature, recognising that such activities often present the perfect environments and challenges for personal development. Walking, fishing and gardening have all been linked with elevating mood states alongside providing individuals suffering from a variety of mental health disorders with a unique and lasting sense of personal (which could lead on to professional) achievement. Legault and Rebeiro (2001) demonstrated through an in-depth case study how a sense of achievement through occupation may enable persons suffering from multiple personality disorders to better control their illness. In a review of occupational choice in sufferers of a range of mental health disorders who were unemployed, Nagle, Cook and Polatajko (2002) found that achievements through alternative forms of occupation were not only linked to improved mental health, but also that participants were strongly aware of the connection, having an equally strong will to experience these impacts.

It is likely that volunteers on our project come to us with specific goals in mind which inevitably, if not explicitly, relate to improving their mood as well as their cognitive functioning abilities. These goals range from gaining new skills to meeting new people, and all are inevitably measured in relation to how likely they are to be achieved and whether relatively, it is worth the effort or 'risk';

"Makes me feel as if I'm achieving something, and aiming for goals and getting out in the fresh air and working with people" (Interview J)

Participant F commented that the impacts of small achievements are long-term, and are more valuable because of this. Participant J had heard about others' experiences on the project first,

based his goals on what was available to him and ultimately feels that these have been satisfied within a short time volunteering. Paid employment was specified as a primary goal for four of our volunteers (with different time frames in mind due to different stages of recovery), while other are aiming ultimately, and primarily, to achieve independent living. Participant J talked in some depth about the benefits of the inclusive nature of our project, stating that while knowing volunteers have had similar experiences is important, it is equally important that some volunteers are at later stages in recovery as they present something for others to aim for. Participant M echoed these comments in relation to the forensic patients in particular, and commented that as an ex-patient himself from the same unit he found it of great benefit for volunteers to "see themselves going through the same processes". Participating in the wildlife trust project itself is an ultimate goal for forensic patients at earlier stages in their recovery, as we are the final part of rehabilitation on their care pathway, usually before discharge (Interview 1).

Achieving wider goals in their personal and professional lives will indeed provide volunteers with a great sense of accomplishment, and with direction and support from staff they can be guided towards achieving their aims, but conservation volunteering offers so many more unexpected, but often even more valuable opportunities for achievement. Volunteers described during interviews how it was often unexpected things that gave them this sense of achievement, of things that they never actually imagined they would or could achieve. While participant D described how she entered into volunteering without any specific motivations other than occupying her time, she found there were many things she could achieve which were unexpected, leading to personal outcomes of greater self-confidence. In support of Nagle, Cook and Polatajko's (2002) research several of our volunteers were also very aware of the cycle of achievement though and are always looking for opportunities to build their confidence through this;

"Depends what you're looking for...when you end up with something that you can see that starts off as nothing and ends up as something marvellous...I get a lot more out of that kind of thing than I do from clearing the bracken at Saltburn Gill as it's sort of fruitless task...you come back a fortnight later and it's all back again...I could do that sort of stuff at home" (Participant F).

On the other hand though, one carer also highlighted the fact that the Inclusive Volunteering Project presents an opportunity to break the negative cycle of under achievement. In this situation people with mental health problems tend to be much less aware of the impacts, but benefit more from opportunities;

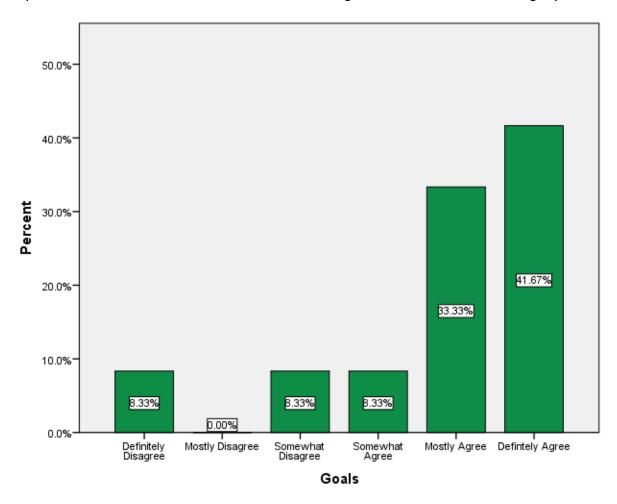
"A lot of our lads they've achieved nothing in their lives all they've had is knockbacks so too achieve something is a lot to them...generally our lads, the history of them they'll have been useless at school and it'll have progressed throughout their lives so they'll never have known to achieve anything much in their lives so it's a big thing for them when they do achieve something...again it boils down to confidence and self-worth" (Interview 1)

While some volunteer participants in our study were clear about the goals they wanted to achieve, they were not always clear about how to achieve them, as shown in the data displayed in graph VIII below. Some volunteers said that they were unsure of how to go about seeking employment because it had been so long since they had been in paid work. Volunteering was seen by these participants as something that could increase their chances and their desire to work, but they were at the same time unsure exactly how to move on from this. Almost 17% of participants disagreed to some extent with the statement from PGI 'I know what I need to do to get started towards reaching my goals', but one volunteer did highlight that the reason for doing this was because he felt the statements in this scale were aimed directly at younger people with goals of employment – as a retired gentleman he did not feel this had much relevance to him. This volunteer said that although of course he had things he wanted to achieve, these were not really 'goals' as such, and did not require a great deal of planning (Interview F)⁵. 75% of participants did agree with this statement however, which supports the qualitative data collected suggesting the importance of goals, and naturally a sense of achievement of these, to volunteers.

Our project offers a range of challenges, and this is recognised by volunteers. For participants D and H the weather was described as a challenge as it often presented the perfect opportunity for volunteers to shy away from outdoor work, but after a day out "in the bitter cold" (Interview D) they felt much better because they had overcome an obstacle. One volunteer said that he felt this improved his resilience particularly when having "off days" (Interview H). Volunteer tasks are also coordinated to challenge volunteers regularly and in a variety of ways, working on different habitats with different materials, tools and people. Participant F recalled an experience which demonstrated the long-term impact of such an approach, describing how over the years the group had take on tasks that "felt like climbing a mountain at times" but when they were done "there was a sense of achievement but there was also a sense of amazement at what you can do when you try" and that he felt this was experienced by everyone in the group to some degree. This volunteer further went on to describe how the staff coordinating the tasks were encouraging, gave direction, but also had high expectations of the team and individuals which was important.

⁵This finding also links back to the subjective nature of 'structure' as noted earlier.

Graph VIII PGI Item Five 'I know what I need to do to get started Towards Reaching my Goals'



Participant F commented on the wider implications of this approach to volunteer coordination:

"Gives you a different view on life. Not only that you can chop the grass down in a field but also when things seem to be overpowering and 'oh I'll never do that', like when one officer got us to clear an enormous meadow in two days and it looked impossible...I always think back to that field and I think who cleared that field? And I think one step at a time I'm sure we can do whatever else...so it does change your mental view".

Variety came through interviews as a very important factor for volunteers in terms of developing a sense of achievement, and this is involved through both ongoing projects at reserves which involve a number of different tasks, or through working on different reserves. Five participants commented on the value of being involved in a project from "start to finish" (Interviews A, B, C, I and K) and on site visits volunteers often pointed out the areas they had worked on with great pride and satisfaction;

"...when you work and you can see that you're doing something where there's an end, it's very hard to explain. This here started off as a dirty old pool full of stinking reeds and we pulled all the reeds out and everybody got stinky and smelly and we though oh this is horrible and then it started to come together. The posts went in and the walkway went in and what you saw last week the platform went in and you stand back and you think you know that's really good that, I'm pleased with that" (Interview F).

Participant E reflected on his memorable experiences covering an island with shale in the middle of winter, and that the impacts were even better because they were long-lasting, commenting "It was super to go and find avocets nesting on there a year later". Similarly though, there are obviously times when nature takes its course, and the impacts expected aren't received, as commented on by Participant F. He explained how some time ago the group had got involved with a local horticultural organisation and were asked to clear ground on a banked area which had overgrown in preparation for a wildflower meadow. The volunteers spent 4 weeks in the depths of winter on the task and a month later it had grown over with no sign of wildflowers having been planted or sown. He commented that this was "very disappointing" and probably would make certain members of the group wary of engaging in such partnerships again. Participants C and F also commented that regular tasks such as strimming grass and reed cutting may be quite disheartening when there are too many areas to cover in one day or they so quickly need to be repeated because they have grown back;

"If as on occasion happens we go to places like the Brotton end of Saltburn Gill and we spend the whole day pulling out bracken and weeds and when you step back and look at it at the end of the day you can't see where you've been there's a sort of a pointlessness to that somehow. You feel like you've worked your socks off and you haven't made the slightest difference. And I think that's deflating, I know it has to be done but it's deflating it's much better to have something concrete where at the end of your effort you can see what you've done" (Interview F).

However, these volunteers did also comment that the immediate visible impact still made their efforts seem worthwhile.

Major projects and one project in particular, were cited commonly during interviews as sources of great pride and achievement. During 2010 the project team worked on Coatham Marsh reserve in Redcar and Cleveland laying boardwalks to improve access and enjoyment of the site for visitors. Several volunteers said this was their most positive and enjoyable experience with the Trust so far. Participant A stated that it gave him great pride at the time, but further that it goes on giving a sense of great achievement to have been involved in such a grand project. Participant I brought along photographs of the development to our interview and talked

through each stage of the development, explaining how each task had made him feel good about himself and how he could see the same in other volunteers.

Displaying their achievements to others was found to be a great source of satisfaction for volunteers, whether to family, friends, the public or even just Wildlife Trust staff. Participant C described how his granddaughter had come to reserves to visit and the fact that she could get more involved through the things he had helped to create, gave him a "great feeling". Similarly participant F commented that he liked to visit Trust reserves with his sister and it reinforced his achievements showing his accomplishments to her on site. During our interviews six participants' highlighted instances where their work had been recognised, while others did so on site, and it was observed during research that when the public did make comments on the tasks volunteers were carrying out the mood among the group was very high. The volunteers were also very keen to explain the developments further to whoever had asked. Participant I thought that their work was "A fantastic job for the public to see" and further;

"I've enjoyed every bit of work that I've done...It's like you know when you're out on a job and the public comes round and sees what you're doing they can look at that and see what's been done" (Interview I).

The benefits of this project to local residents and tourist are central to volunteers, and this relates to traditional, altruistic notions of charitable work. Participant L felt that others' appreciation was in fact all that mattered to him;

"...don't really think it's important for me to see it I think I just know that other people will see it and that's enough for me".

Other responses were similarly altruistic and less focussed on the immediate personal impacts of conservation volunteering, with participant C stating the knowledge that his work was going to "benefit future generations" was his best achievement and participant H stating that he got "a lot of satisfaction out of helping people". However as stated earlier it was also made clear by many that their relationships were part of an exchange, and to almost all volunteers who mentioned community reactions to their work as being important, they also said that this in turn made them feel good and reinforced their feelings of achievement to know that it was appreciated.

It is clear from the data collected so far that the impacts of conservation volunteering as a form of nature-based intervention can be felt at various levels which are very diverse. The way in which Tees Valley Wildlife Trust, as do all Wildlife Trusts, commits itself to improving green space access, information and enjoyment is clearly shared by our volunteers. But what is really encouraging is that this data shows these motivations and achievements affect personal well-being very positively too.

State of Mind

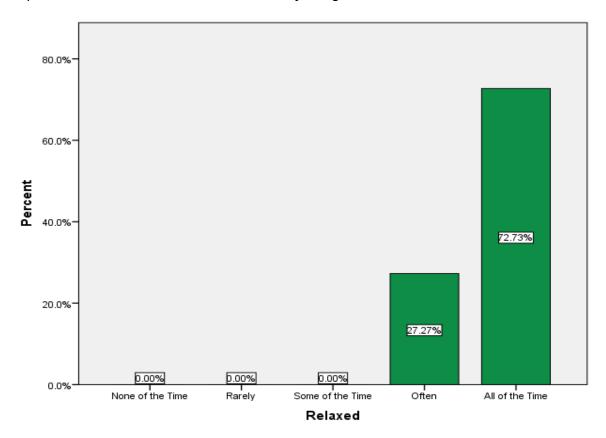
State of mind is often seen as wholly representative of mental health, while others see it is reflective, but not always necessarily representative and more related to moods and outlooks which are inevitably changeable. Several researchers have employed assessments of mood in exploring nature-based interventions to good effect (Pretty, Peacock, Hine, Sellens, South and Griffin 2007) but we have taken a more qualitative and flexible approach here. It should also be noted that in individuals suffering from multiple personality or bipolar disorders, assessments of mood would not necessarily provide reflective results in terms of well-being in the same way as they would from someone suffering from depression, and with our inclusive approach there are volunteers who have suffered from these disorders. Therefore our study focuses more on state of mind as a general reference to how volunteers have been feeling and thinking, rather than attempting to assess mood levels of anger or anxiety.

During interviews and observations on-site many volunteers and carers commented on being happy, how being out on the project made them feel better and 'lifted' them up. There were comments made about the impacts of their work making them generally feel happier towards the end of the day (Interview H), and much better than if they had decided to stay at home on the day of the activity. It was observed by the researcher that volunteers' moods appeared to be very positive while they were on-site and that while some volunteers did not seem relaxed, they were more excited about their work rather than nervous or tense. In general, observations revealed the mood is most often high across the group even in the wind, rain and freezing cold! From a carer's perspective, positive mood is increased long before and ends long after volunteering sessions.

"Prior to coming out the lads have already got the anticipation and excitement for coming out on the group...there's definitely that excitement beforehand and the satisfaction afterwards" (Interview 1).

There is a unique combination of factors affecting volunteers' state of mind here, including relaxation and stimulation. The exercise the volunteers are involved in is cardiovascular, which is well known to have a positive influence on mood even in short sessions (Yeung 1996). Two participants said that working on the project actually gave them more energy which allowed them to deal with the negative side-effects of their medication more effectively and feel generally more positive as a result. The impacts of this activity are joined by those generated by the environment surrounding them, as discussed earlier in terms of the relaxing affects of green spaces. While only one participant specifically mentioned feeling more relaxed after a day of volunteering, we can see from the results below that in response to statement five of the SWEMWBS scale 'I've been feeling relaxed', 100% of participants stated they had been feeling relaxed most of the time, with 72% claiming they felt relaxed all of the time.

Graph VIIII. SWEMWBS Item Three 'I've been feeling relaxed'



These results support other researchers' findings discussed earlier and emphasises the importance of the context in which volunteer work takes place. In terms of state of mind, feeling relaxed clearly connects to other impacts we have already explored, such as being able to cope with problems effectively. While neither interviews nor the PGI scale provided a great deal of supportive data on this specifically, the results of this SWEMWBS item are very positive and link strongly to existing research on Attention Restoration Theory in particular (Kaplan and Kaplan 1995). Also, the importance of working in the natural landscape to our volunteers was been revealed in other ways which will be discussed later in this chapter.

Clarity of thought is another important measure of well-being, as confusion can be highly destructive and often leads to more negative moods and behaviours. A lack of focus or a 'fog' is often referred to in relation to those who may be suffering from a form of mental health problem and therefore clarity of thought is a good indicator of a positive state of mind. This is undoubtedly connected to being able to deal with problems but also has a strong connection to participants' abilities to function in terms of decision-making, planning and rational thinking, activities, which are all encouraged through volunteering tasks. Of course difficulty in thinking clearly could be symptomatic of dependence on medication or other substances, but unclear thought processes are often an indicator of anything from seasonal affective disorder to

psychosis. While thinking clearly is a basic psychological function it inevitably has direct effects on a person's emotional state too.

SWEMWBS and a number of other scales have acknowledged the importance of this as an indicator of well-being. In response to statement three of SWEMWBS 'I've been thinking clearly', participants responded slightly less positively than to statements of relaxation, but a significant majority of 90% stated that they felt their thought processes had been clear most of the time, with no participants claiming they had rarely or not been thinking clearly at all.

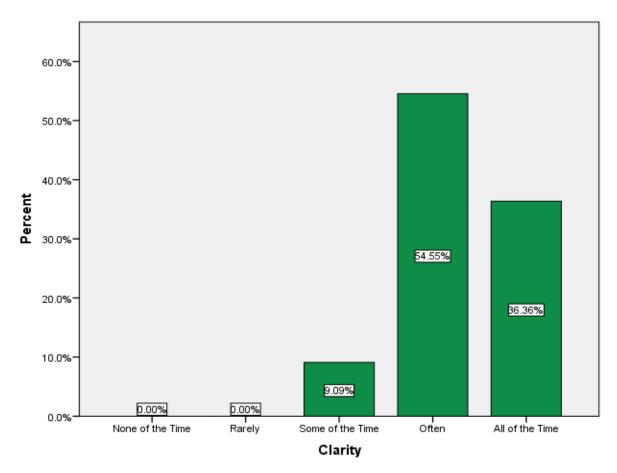
Considering the studies discussed in previous chapters relating to the effects of the natural environment on state of mind, it is possible that these positive results can again to some degree be attributed to the context of nature reserves. We have already seen how our work can provide a positive distraction away from negative thoughts and behaviours, which is particularly useful for people suffering from depression (the majority of our participants had experiences of this), providing external stimuli to tackle the tendency to focus inward negatively on oneself (Ingram and Smith 1984). Alternatively as argued by Kaplan and Kaplan (1995) green spaces have the potential to improve directed attention, and two of our volunteers commented that being in nature made them put things in perspective (Interviews H and I) and that the tasks they were engaged in helped them to focus (Interview B).

State of mind is not only related to mood, but also outlook. A person's perspective on life and how they envisage their future is naturally connected to their present emotional state. We aim to create long-term impacts for volunteers which stretch beyond volunteering and therefore the way participants see their future is very important to us. Participants in our study made important comments during interview about how they felt about their futures, which combined with the findings discussed so far creates a very positive picture of the long-term impacts our project can have. In terms of volunteers' future with the project, all participants said that they would continue to be involved until they no longer could. For two volunteers, entering paid work would result in them ending volunteering, while two others with employment goals said they would still continue to volunteer even if they found full-time work. For the patients from the forensic unit futures are often uncertain, but being on the project is the last stage of their full-time care as a form of occupational therapy, and two participants in particular did express positive feelings about being discharged from the hospital;

"I've always said when I see doctors that when I leave the hospital I'll always carry on with this work" (Interview I)

"I would like to get more involved in forestry when I'm discharged, this is good preparation to move forward" (Interview M)

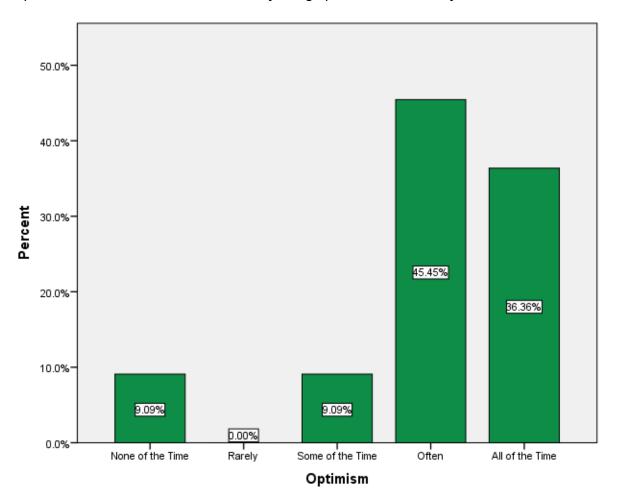
Graph X. SWEMWBS Item Five 'I've been thinking clearly'



While Participant B expressed his enthusiasm to undertake more formal training in the future either through, or as a result of the project, Participant F stated that he felt his positivity had "without a shadow of a doubt" come from working with the Trust. Participant J, a forensic patient, simply said "The future's bright". It is important to acknowledge though, the fact that while volunteers may want to continue with us, this is not always necessarily a positive indicator of development. We are well aware that our project may provide a safe place for volunteers which becomes heavily relied upon, and in this our work attempts to continuously move participants forward in order to achieve some momentum and continue their achievements beyond the programme.

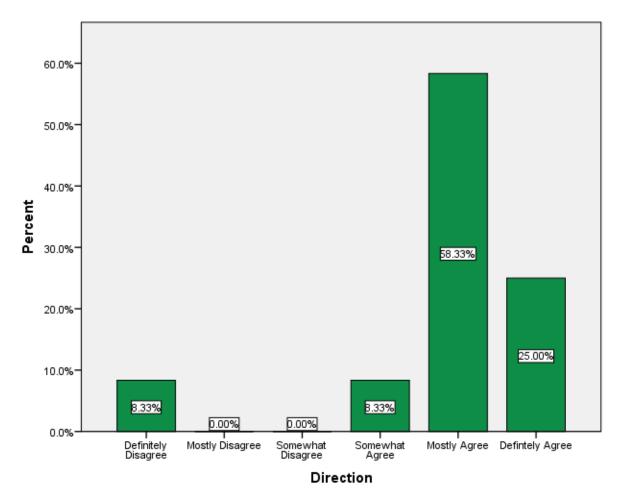
The results illustrated below in graph XI show a lot of variability in responses to SWEMWBS item one. Unfortunately 9% of participants stated that they never felt optimistic about the future but it was also stated in interviews that two in-patients felt that they still had some time in hospital before discharge. Most participants (45%) reported feeling positive about the future 'often', while 36% claimed they felt this way 'all of the time'. Again these results are positive overall, but must be interpreted with caution, being mindful of the fact that there are many, many variables which could influence an individuals' perception of their future.

Graph XI. SWEMWBS Item One 'I've been feeling optimistic about the future'



Similar results were obtained from the PGI scale in response to item two 'I have a good sense of where I am headed in my life' as shown in graph XII below. Responses were variable, with 8% stating that they definitely disagreed with this statement and 83% mostly or definitely agreeing with it. The results from the PGI scale correspond well with those already collected on optimism and planning to reach personal goals, suggesting that it is likely forensic patients are unable to comment on these indicators of well-being in the same way other volunteer participants have. Where individuals are not restricted in this way though, having direction in life remains difficult for someone suffering from poor mental health as they still face limitations in terms of access to opportunities, confidence, decision-making and clear thought processes. Therefore the fact that 83% agreed with this statement remains encouraging.

Graph XII. PGI Item Two 'I have a good sense of where I am headed in my life'



In terms of state of mind more generally, Participant J gave a fantastic response when asked how volunteering made him feel;

"How does it make me feel coming outside here when you've been on the ward?...Normal!" (Interview J).

Participant J's response suggests that not only does our inclusive approach have a positive effect on improving the way volunteers perceive themselves, but that it challenges negative experiences and feelings they may feel elsewhere. This raises the issue of self-stigma as associated with self-esteem, as people with poor mental health have been found to reinforce the effects of discrimination they experience from outside as they become more aware that their thought processes and behaviours are different to others. A major study in New Zealand on the destructive effects of self-stigma recently found that 'not feeling normal' was most commonly cited by people alongside feeling isolated, not being treated equally and a lack of belief in changing their situations (Peterson, Barnes and Duncan 2008). Participant J's response

therefore suggests that green volunteering has positive impacts on him in a variety of ways, further supported by qualitative data collected on volunteers' feelings about the future and the way they connect to people.

Social Networks

In relation to perceptions of mental illness and the issue of discrimination we have already seen how the way others, and specifically the general public, react to volunteers' work is incredibly important for their esteem and confidence, and we have found good evidence that these reactions are generally positive. We have also reflected on volunteers' comments on the benefits of the project's inclusive approach as everyone can learn from each other's experiences, understand more about the nature of mental health and appreciate the diversity of the group. However, social impacts are much more than a lack of discrimination or greater understanding of issues, and while this is often perceived as a 'soft' outcome of such interventions as ours there are often very serious implications surrounding this. According to The Mental Health Foundation (mentalhealth.org.uk 2013);

- People with more severe forms of mental illness have smaller social networks than others and have more family members than friends in their social circle.
- People with smaller social networks, with fewer intimate relationships, find it more difficult to manage social situations.
- People with more long-lasting mental health problems often have relationships mainly with other people with mental health problems.

Social networks have been shown to be essential to normal psychological, and even physiological functioning (Hammer 1983), and scientists have long asserted the relationship between these elements, even connecting poor levels of social networks to high levels of mortality (House, Landis and Umberson 1988, Holt-Lunstad, Smith and Layton 2010). Healthy relationships can affect outcomes of medical treatments and act as a buffer to stress and anxiety (Greenblatt, Becerra and Serafetinides 1982).

Social contact came through the interview data as extremely important to our volunteers, and this was significant as both a motivator for volunteering in the first place as well as an unexpected positive impact that was important in continuing volunteering. In terms of a motive for getting involved in out project, participants B, G and D stated that they joined the project in order to fulfil social needs, fully aware that increased social contact would be beneficial to their well-being. Participant D stated that she felt she just "needed to be out with people" and participant G saw the project as a real opportunity to improve his social networks as a turning point from depression;

"it got me out the house and it got me involved with things and it got me living again...getting involved with the team it's done me a lot of good...I never used to leave the house back in the, I call them the dark days and it got me out and involved, getting involved with people again" (Interview G)

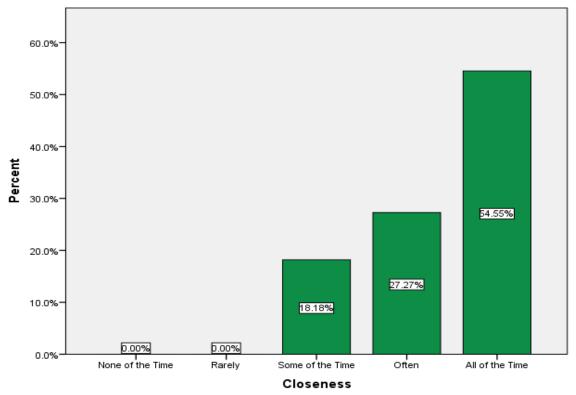
Participant F highlighted the destructive effects of being alone and feeling isolated, describing to us that social exclusion is a very real issue he had experienced at other community groups;

"The worst thing that can happen to somebody with mental problems whether they're sort of minor things or major you know like people having nervous breakdowns is to be excluded, it's an absolute no-no. Stand me on one side and treat me like a freak and I'll throw myself in the river...Some people will think 'I am so lonely it's untrue' and I like the wildlife and I like the country and I'd like to mix with people of a similar nature and they tend to be a bit sort of shy and quiet and you know they need to be pulled in because if you're not careful they'll just sort of kick the roses around and walk around the fields and they won't get involved...then you go home and you feel even worse, not good for mental attitude" (Interview F)

The socialisation of volunteers is something volunteer coordinators should always be aware of, but naturally where social exclusion may be more of an issue this is even more important. Participants F and J did comment that they felt our reserves team were very good at encouraging new volunteers to get involved and get to know the team, but where time may be limited on tasks and there are large groups, with more nervous new volunteers it can be "Too easy to be left on the outside" (Interview F). Participant A stated that he felt the Trust provides a safe place for him in terms of this integration process and that although he is confident within the group, change presents rather a big challenge to him (Interview A).

It is hoped that volunteering creates relationships but also that it improves the strength and number of relationships volunteers have outside of the group, improving their communication and social skills as well as their desire to be part of such networks. Item seven of the SWEMWBS scale deals with the way participants feel in relation to others, which reflects both the degree to which they are affected by social exclusion and also the level of trust and confidence they have in others which enables them to feel close in their relationships.

Graph XIII SWEMWBS Item Seven 'I've been Feeling Close to other People'



The majority of participants (54%) stated that they had been feeling close to others 'all of the time' recently, while all participants felt this way at least some of the time. From our interview data as can be seen from the quotes mentioned so far, our volunteers do appear to have healthy relationships with family and friends, and through their improved skills and achievements on the project this has helped them to make new connections, as well as strengthening existing ones. As stated earlier there is a also a need for balance between feeling independent and being connected to others as well as the need to recognise that these positive impacts affect carers and family as well as patients. It would seem from these findings that the majority of our volunteers have achieved a good balance between independence and dependence in terms of their closeness to others, while the others are well on their way.

Of course in feeling close to other people it is important that volunteers are part of relationships of exchange and can work together with others effectively. Conservation volunteering provides a good opportunity to assess how these individuals function in a group, both personally and professionally. Participants H, I, D and M all commented that they felt the volunteers made a very good team, learning and teaching each other and working well together (Interview I). Participants I and D highlighted the fact that the skills of working within a team are improved by working with so many diverse individuals, with different skills and levels of

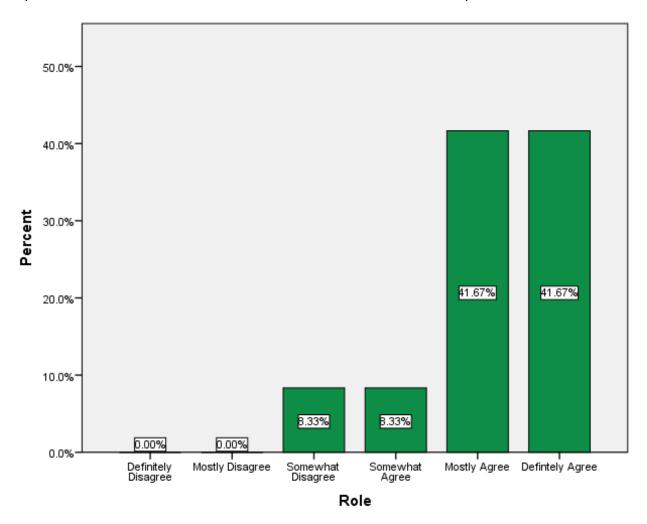
ability, that some will help out others wherever necessary. Participant H said he felt that they made "a brilliant team" and that working in this way "makes it more worthwhile".

Choosing the role someone wants to have in such a group is something which involves confidence, awareness of self and others, thinking rationally and social negotiation skills. Working and communicating in groups is often a core part of occupational therapy, as people with psychological disorders benefit from therapy in this form as well as one-on-one sessions, with the philosophy behind it that "participation in groups is essential to participation in life" (Cole, 2008 p.316). Benefits include participants recognising that they are not alone, that they have something unique to offer others, sharing information and expressing emotions through various channels. In group tasks, adapting to social norms and choosing roles is an essential part of the process.

The way a person becomes involved in a group is more about personal initiative and therefore is dealt with in the PGI scale, under item four. As shown in graph XIV below, we collected very positive data in relation to this. 83% of participants felt strongly that they were able to choose their role in a group, while 8% somewhat agreed with this statement. Unfortunately 8% of participant somewhat disagreed with this, and this is something that we must work on, providing the opportunity for choice in all tasks. Participant I did comment that volunteers often had to take turns on popular tasks such as felling trees, and there is not always the ability for each person to take on the tasks they want to. However, in terms of wider roles, participants A and E regularly occupy leadership roles and noted in order to achieve optimal benefit there must be some structure, but also choice. Between volunteers assisting Trust staff in directing the group in certain tasks, our group operates through basic co-operative or facilitative leadership rather than traditional directive management. It is of course natural that even with positive well-being some individuals will be more confident during group formation than others regardless of how long volunteers have worked together, but we must encourage everyone to feel that they can choose the roles and activities they engage in wherever possible.

As with the comments noted earlier that referred to our project as a form of retreat or escape, several volunteers similarly commented that group volunteer work of this kind allowed them to explore other roles that they did not have the confidence to in everyday life. One carer also noted that he valued the way the Trust managed the project allowing carers to take on a slightly different role, learning things that they could take back to their everyday caring roles and also creating new connections with other agencies through the Trust. In this way our work affects carer roles positively too.

Graph XIV PGI Item Four 'I can Choose the Role I want to Have in a Group'.



Beyond professional relationships it is well documented how beneficial volunteering is for developing friendships. Although participant M began by saying "Friendships and hospitals, they're not long-lasting" (Interview M) he also said that he thought since he started volunteering with the Trust his relationships with everyone had improved, and that the friendships he had made with other volunteers were very valuable to him. Several other volunteers agreed that their relationships with volunteers were valuable, but saw them as more long-term. Participant A commented that he had "made some good friends" and this had made the project more enjoyable, while Participant E talked about a ten-year friendship he had developed through volunteering. This volunteer further commented that despite the fact that he felt he was naturally "a solitary person" he would "really miss the social side of volunteering" (Interview E).

Participants D and L said that to them, diversity among the group was important for friendships but it is also important to find some familiarity from which to build relationships. Some

participants did comment on site and during interviews that while everyone had different experiences, it was reassuring to know that many volunteers understood what they had gone through and in this way there was a level of familiarity (Participants M, B and K).

Participant H felt that having something to tell their friends about and just generally being a more well-adjusted person allowed him to have better friendships outside the Trust. Participant K stated that he definitely felt he had become better at building friendships since he started with the Trust and Participant J commented on how volunteering had brought him out of his shell;

"I think I've come on quite a lot. When I first came I was a bit dubious, a bit aware but then I started getting to know the lads and soon I felt more comfortable" (Interview J).

Some participants also referred to relationships they may not previously have had with people without the help of the volunteering group. One carer said that he felt the way groups were organised allowed carers to improve the relationships they have with their patients;

"The patients do things that they would do with their friends such as buying each other dinner and the group encourages these kinds of exchanges, even between the carers and the patients (Interview 1).

Participant C on the other hand talked about the benefits of the inclusive approach in facilitating relationships;

"Over a period of time you obviously create bonds with people and I think that happens definitely because you know you've obviously got people with learning difficulties and mental health issues and you create a bond with them...because of the nature of the tasks, there's a definite process there where you can definitely interact with people" (Interview C).

The way participant C and many others have referred to the positive impacts of the inclusive approach to our project so far shows that people at different stages of well-being work well together and can develop good relationships despite their apparent diversity. But more than this though, the inclusive approach facilitates understanding of mental health, provides goals for individuals to aim for, allows knowledge sharing and learning. Here the many impacts within the Trust and within volunteers' lives have been presented as significant to their well-being and even to networks beyond this, and while this is the focus of our investigation it cannot be ignored that these impacts must have very positive effects on the local community.

Community Impacts

While decreasing experiences of stigma and integrating volunteers back into society are personal impacts, they also naturally have an impact in the wider community too. We have already discussed the significant impacts our project volunteers have had on the natural landscape across the Tees Valley region, working to improve visitors and residents access to green spaces, their education and enjoyment. We have also discussed the benefits of social inclusion experienced by our volunteers through their enhanced social networks, and of course the increased knowledge around mental health created through our project which tackles stigma. As put by one of the carers from the forensic unit;

"It can only promote that mental health isn't as daunting as people perceive it. A lot of our friends still live in the age of people with mental health problems are like out of One Flew Over the Cuckoo's Nest and people still, because they don't have enough knowledge about mental health problems, they just make up their own ideas of what it is and as soon as you mention it, it's not measurable so people don't want to know. It's getting better but it still needs a lot of work on promotion" (Interview 1)

This carer also discussed the importance of normalisation back into society for patients at all stages of recovery, and through group work we have shown how the skills to function in the community are aided by the coordination of our conservation tasks. Rethink, a national mental health organisation suggest that getting involved in the local community is the first step in getting out of the "ghetto of mental health services" (Conference Report 2003). Feeling part of one's own community also demonstrates social capital as a measure of cohesiveness and inclusion, and being able to assess how much volunteers feel and want to be a part of their local communities is therefore important in this. This links well to the care pathway identified by the forensic unit many of our volunteers reside in, whereby our project is accessed as an outdoor activity representing the final stage of their rehabilitation, hopefully before their discharge into society.

Nine participants in our study commented on wanting to either contribute to their community, or become more actively involved in it. Participants A and B connected the two in their interviews;

"I do feel more of a connection with the community because I've improved their area for them to use" (Interview A).

Both participants C and D stated that they had seen both positive and negative things in their local community environments that motivated them to get involved. Unfortunately there are

areas rich in wildlife that are also subject to anti-social behaviour across the Tees Valley, and these participants felt that coming together with others to tackle these issues through conservation was important for society, as well as for themselves in being passionate about where they live. To our volunteers it is important that they can access the areas they have been involved in, and they also feel it is very important that others can get the most from their visits too, encouraging engaging in green spaces but also volunteering;

"We must be doing good for the community and the public...people should be encouraged to get involved in their environment and in nature" (Interview G)

Such a sense of connectedness to local environments as displayed here is directly conducive to social capital which, in turn, is an indicator of community cohesion. Social capital has been shown as an important indicator of health inequalities and is becoming increasingly prevalent in health care discussions at national policy level (McKenzie, Whitley and Weich 2002). It is important to recognise that the work of the Inclusive Volunteering Project contributes directly and indirectly to social capital, through bonding people in new relationships as well as bridging divides that exist in society e.g. between those with good and poor mental health (although this is incredibly difficult to measure objectively). The Tees Valley is often perceived as generally socially deprived, and many areas of it are. It is not necessarily the case that regions of social deprivation all have low social capital, but there is a link, and there is evidence of significant segregation in major areas of the Tees Valley such as Middlesbrough suggesting a lack of social networks and trust among communities which is indicative of a lack of social capital. In such areas residents often see their environments as important to them, but unfortunately not valued by everyone (Webster, Blackman, Sapsford, Neil and Chapman 2004).

Several volunteers commented during on-site observations that it was disheartening to find that many visitors to nature reserves did not exactly have the environment or wildlife in mind, leaving litter, graffiti and at times damaging the work volunteers had done. Webster et al's (2004) research showed that feelings of powerlessness and division within local communities is often connected to such behaviour. Encouraging people to get involved in green volunteering is an important way of challenging this, and a number of ex-offenders and patients remaining in the criminal justice system through the forensic unit volunteer with us. As discussed earlier, Participant H felt that engaging with the natural landscape distracted him from criminal behaviour in which he had been involved in the past and now he felt it was important for reserves to be kept clean and tidy for others. Participant M commented on how the project has completely changed his perception of green areas and that rather than taking them for granted he now respects them greatly. The benefits to small communities across the Tees Valley through this work are both social and cultural, having potential for wider changes in attitudes

and behaviours. This is even more positive considering the high levels of poor mental health across our region.

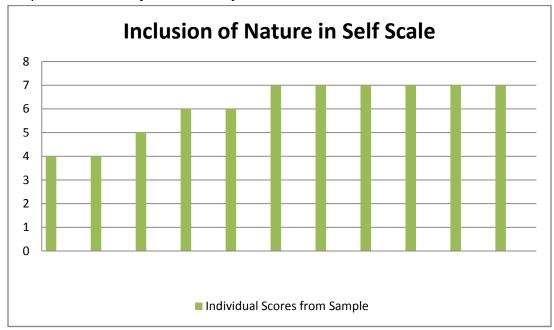
Participant M in particular recognised that promoting our work as a mental health service could be a way of encouraging such positive environmental behaviour, rather than presenting volunteering in its usual 'do-gooder' form, which does not always attract the people it could potentially benefit the most. Participant G also commented that he felt the volunteers' work would benefit the mental health of everybody else who uses the reserves by allowing them to engage with green spaces, and it was important to show what our Trust can offer to people as well as showing we are in need of help, echoing participant F's comments on exchange in the volunteer-organisation relationship.

Participant G and others are clearly aware of the value of green spaces to mental health, and so far we have been able to attribute several of the volunteers' reported personal impacts to the unique context in which they contribute. But it was important to the Trust to identify that there was a strong connection between volunteers and their natural environment, which leads us on to the final area of investigation in the first stage of this research.

Importance of the Natural Environment

Braunholtz, Davidson and Myant, Ipsos MORI and O'Connor (2007) have identified a link between the physical environment and high SWEMWBS scores in terms of satisfaction with neighbourhoods, and it is clear from the data mentioned above that the local landscape is important to our volunteers too. Most volunteers are aware of the positive impacts of the context of their volunteer work on their mental health, and they have demonstrated connections between green spaces and well-being through increased confidence, relaxation, clear thinking and engaging in their community. These findings are concurrent with existing research and there is enough evidence here to suggest that our data supports previous findings in identifying a link. However, we wanted to do more than this to strengthen the connection. Through the Inclusion of Nature in Self Scale (Schultz 2002) we aimed to do this by asking volunteers to state how connected they felt to the natural landscape.

Graph XV Inclusion of Nature in Self Scale – Individual Scores



Graph XV below displays the scores obtained from the single-item INS scale. The mean average score in this sample was calculated at six, ranging from four to seven out of a possible seven. These scores suggest that our volunteers feel very close to nature, with six participants responding that they felt completely 'at one' with nature, using the following diagram to illustrate their perception of the relationship;



Figure 1.2 INS Diagram Seven

This scale is limited in terms of quantity of data, but in terms of meaning and implications there are many things that can be inferred from these positive results as discussed earlier. For example, a high score on the INS scale can represent an individual's strong sense of personal responsibility towards the environment and likelihood of engaging in environmentally-friendly behaviours. Ultimately the scale is based upon cognitive representation and therefore a higher score suggests that nature is not only important to that person, but that it is actually part of their psychological make-up and that they have some 'required engagement' with nature in

order to successfully function and experience positive emotions (Schultz 2002, p.67). Therefore, the data collected from the INS is very useful to our investigation both in terms of well-being and environmental awareness and the high scores obtained very promising.

In addition to these results however, we also collected qualitative data from volunteers during interviews on this subject and most volunteers specifically mentioned the importance of green contexts for their volunteering to their positive mental health impacts, which further supports the INS scores. Participants commented on the value and importance of being outdoors in the natural environment, some because it provided a stark contrast to what they were used to but others because they had always been involved in nature and it was something they felt was simply 'part of them'. This would support the argument that there is a human need for nature suggested in Wilson's Biophilia Hypothesis (1984) and Ulrich's Psycho-evolutionary Framework of Stress Reduction as mentioned in our literature review. Our predisposition to connect with the living world is tackled by the Biophilia Hypothesis while the Psycho-evolutionary Theory concerns our emotional reactions towards it. Both of these theories similarly propose though, that human beings have an innate, genetic connection to the natural environment. In terms of Biophilia, despite our enormous technological advancements and grand cities many people do continually strive to 'get back to nature' in any way possible and this is confirmed by the statements of nine of our participants, some of whom had been brought up in green areas, some who had previously worked in outdoor roles, and others who simply saw it as something they had always enjoyed as part of their leisure activities.

Equally as a contrast, nature provides a strong attractant to those who have no experience of it, and particularly in this case mainly those who are inpatients and therefore completely removed from green spaces much of the time. One carer from the forensic unit said that while he felt the nature reserves gave his patients a feeling of freedom they could not achieve elsewhere, he also felt that it gave him a sense of freedom in his work too (Interview 1). Some participants commented that they had never taken part in any outdoor activity before and that they felt exploring wildlife was central to their volunteer work as it helped them to deal with their anxieties (Interview K). Volunteers with no history of poor mental health also commented on the benefits of nature, that they had actually seen a negative change in the moods and attitudes of volunteers when they were working in the workshop or the weather meant that they could not work outdoors (Interviews C and E). In an environment like the Tees Valley, and particularly Middlesbrough and Stockton-on-Tees where the majority of our reserves are, it is fair to say that green spaces have significant competition against the wealth of heavy industry and urban landscapes. Therefore being able to participate in projects like ours, so close to volunteers' homes is highly valued as a contrast and a place of retreat or sanctuary for wellbeing.

Engagement with nature was also specifically identified by Participant H as linked to independence and subsequently increased confidence. Participant H told us that since working with the Trust he felt the need to put the skills he had learned, and his new-found enthusiasm for nature into practice more at home, taking on an allotment "to try and become more independent" and visiting nature reserves more often. He stated;

"The fact that I was helping the outside was a significant thing...being out in the outdoors is quite rewarding in itself" (Interview H).

Engagement with green space and wildlife on any level naturally involves physical, as well as mental stimulation. While many volunteers originally thought the project would be more educational than physical work, and exercise was not exactly a strong motivator for most (Interview C), it was definitely viewed as a positive, if unexpected, outcome. Participant C commented that he felt the project has "kept him going a lot more physically", that he was originally very active in his profession but that he relished the fact that outdoors he could "...be involved in unique situations where you choose your activity to suit your physical presence". For participant D the project was a way of improving an existing exercise regime with a more diverse range of activities.

"Being active which is important to me, you know I'm not a couch person...I've always walked and things like that and used their walks and their facilities...I think it is proven way of improving people's health" (Interview D).

Six volunteers mentioned their improved physical fitness, with three claiming they had lost weight as a result and one volunteer stating that being involved in our project "has definitely helped me manage my medication better" (Interview M). In terms of the environment, Participants H and I said that this combination of exercise and work which was unique to volunteering outdoors was very important, that exercising alone felt more like a chore whereas conservation work is interesting, has different goals attached to it and works the body in different ways.

"It keeps you fit and healthy being out in the fresh air...the wheelbarrows and strimming you're moving your arms all the time and the wheelbarrow you're using your legs" (Interview I).

This unique approach to exercise was also noted by carers who commented on patients being more active over time, both within and outside of the project. Several volunteers also commented during interviews and on-site that they felt the fresh air they took in during volunteering felt better for them than the air of surrounding Teesside towns, and improved the

physical and mental benefits they were getting from their work. One carer had the following comments which highlight the link between physical and mental health;

"The fact that they're exercising, you know it's not enforced exercising they don't really know that they're exercising but it's got to have a bearing on their fitness levels and you can see it with [name], [name] was a big lad and that fact that he's progressed onto community groups and he's doing more thing he has lost a lot of weight and he is a lot fitter than he was...obviously if they're physically well mentally they're going to become more well they go hand in hand" (Interview 1).

The reserve environment simply provides benefits to physical health that are often more difficult to achieve (and much less enjoyable) elsewhere. The majority of work volunteers get involved in is cardiovascular, but the range of walking terrains, tools used and unusual tasks work muscles many other exercise regimes fail to. Our project is tailored to individual needs, which was valued by Participant J, and involves lifting and carrying, digging, planting, using hand tools and machinery, construction and destruction where necessary, which are all good forms of cardiovascular activity. It was noted that the surroundings of our reserves made exercise "feel easier" and much more enjoyable than being stuck inside a building with no room to move and with much less beautiful scenery (Interviews I, K and J.

Whereas 'green gyms', organised by the BTCV and taken on by other organisations, take a slightly different approach in holding warm up and cool down sessions of structured exercise, we try to incorporate guided walks into our work parties wherever possible. We do this at times when there is much to learn from wildlife, at particular times of the year and at certain sites in order to maximise learning and the combination of impacts best presented by the outdoor context. This low-impact exercise is used as an introductory activity at the beginning of work days or for winding down at the end. We feel this approach is more integrated with the natural environment and appreciated more by volunteers because of this.



Discussion and Conclusions

Psychologists say that our identities are shaped by the natural environment (Clayton and Opotow 2003), and findings presented from this stage of our investigation have shown that Inclusive Project volunteers do not only have a huge impact on their natural environments, but their environments also have a huge impact on them. The way we harness this value and engage people through the project maximises the positive outcomes of this work and its contexts, for everyone involved. Similarly, the way we interpret, communicate and really use the data collected here will be integral to how our work is received and impacts upon others. The evidence here, and what is still to come, can be used to demonstrate value of environmental volunteering to individuals' mental health and well-being, identifying that there is definitely a strong link between high levels of key indicators of well-being, connectedness to nature and participation in the Tees Valley Wildlife Trust Inclusive Volunteering Project. We have also identified some of the economic, social and environmental impacts of the project, although more in-depth research in these areas would be very useful.

Ultimately our findings will probably be most valuable to our funders to demonstrate the progress and potential of our organisation and this service. But essentially in this investigation it was most important to show that connection to nature, created through meaningful forms of engagement, has a positive impact on mental health and well-being. But we think we have shown more than that, and aim to continue to develop our evaluation methods in order to create as accurate and rich a picture as possible, based on strong evidence that we are indeed providing a unique, successful mental health service.

It is not only evidence of our impacts that are needed of course; there must be a demand for our service. There is a clear environmental need which was highlighted by participant E;

"We've spent most of this winter at Portrack and other areas fall by the wayside...There's always plenty to do, there's always more to do than we can do, and a second group would be good...we always seem to be fighting to get things done and then we're on to something else" (Interview E).

but in terms of health and social care there must be a demand too of course. While we have already demonstrated that there is a significant demand for mental health services in the Tees

Valley and across the UK, the demand for our particular project was made clear by study participants. Without any connection to the line of questioning during interviews, participants (both carers and volunteers) said they felt strongly that there is a great need for our service and others like it, which are unfortunately strictly limited by resources and is therefore not necessarily reaching everyone in need. Carer One described the frustrations of patients and staff at the forensic unit because places on the project were limited due to supervision requirements and a lack of staff, commenting that delaying patients from progressing forward in their recovery could be detrimental to their well-being. It is also entirely possible that people with poor mental health who self-refer may see these limitations as rejection, reinforcing the social exclusion cycle. Participant F recalled that he had taken rejection from another volunteer group very badly and it severely affected his confidence, and participant E said that he had friends who had seen him volunteering and were very interested, but were on a waiting list. Participant F said that the project was a core part of his life, and that if the work couldn't carry on;

"I would miss it terribly...To say that I would miss it if I didn't come is the understatement of the year" (Interview F).

Carer One recalled the process of setting up the partnership in 2006 between Tees Valley Wildlife Trust and Roseberry Park Hospital, describing how the staff had pleaded with NHS management that "you cannot fail to want us to do this" and that since then his opinions had not changed at all;

"This is probably one of the few vocational projects that the lads are involved in more where it's like a therapeutic activity whereas you've got some of the lads who'll be more interested in DJing groups, fishing groups, walking groups, cycling...we're using different groups to find out mental health and well-being of the individual but this is so much more vocational" (Interview 1).

Seeing our work as 'vocational' is very important, as we have demonstrated the importance of structure, independence and education to our volunteers and their carers. When discussing the place for conservation volunteering in mental health care earlier we mentioned an emerging form of occupational therapy – vocational rehabilitation – which emphasises these qualities alongside the issues facing people with poor health outside through stigma and exclusion;

"...a process that enables people with functional, psychological, developmental, cognitive and emotional impairments or health conditions to overcome barriers to accessing, maintaining or returning to employment or other useful occupation." (Scottish Executive 2007 p.32).

This may be a way forward in conceptualising and promoting similar projects. We may not replace medication or cognitive therapy with conservation volunteering, but we can show that we can improve the outcomes of traditional treatments through a more holistic approach that engages the body and the mind in ways that have far-reaching benefits. While a participant may feel happier, and report that they feel happier on a scale from one to ten while out on a reserve building fences, having the social and professional skills to function in society can aid their long-term rehabilitation so much more beyond this. Capturing this through measurement tools is very difficult, but we will continue to try to do so. Several volunteers have shown us that they feel the impacts of our work are indeed long-term, and have contributed to the effectiveness of their treatments and physical health too. Volunteers comments such as "my positive outlook on life has without a shadow of a doubt come from the Trust" (Participant F), "The future's bright" (Participant J) and "it got me living again" (Participant G) are so encouraging, and Participant J stating that our work makes him feel 'normal' show just how much of an impact we can have on those who may feel vulnerable and unable to access the same opportunities as others. The fact that several volunteers are actually looking forward to re-entering the workplace and/or further education shows just how far they have come, and that their rehabilitation does indeed have a firm, vocational underpinning.

From the first part of this investigation we have learned a great deal from other Wildlife Trusts across the movement that have involved people with poor mental health and physical health in recent years. These Trusts have told us what they succeeded at and what they found difficult, what was unexpected and what their plans are for the future. As stated earlier Tees Valley Wildlife Trust do not intend to re-invent the wheel when it comes to programme delivery, or even in evaluation, we just want to provide an opportunity for everyone to learn from each other's experiences and take advantage of the best tools available for the best results. Through these communications there are possibilities emerging in terms of new partnerships, and a renewed interest in these issues. In this relatively short process of knowledge exchange we have all contributed to an increase in social capital ourselves across the movement.

So, we have shown from this first stage that our inclusive volunteering project has significant and diverse, demonstrable benefits for mental health and well-being at a personal, but also at community level. Through qualitative and quantitative data we have found that volunteers value the green spaces they work in for exercise, relaxation, learning new skills and meeting people. The tasks they are involved in have been shown to enhance volunteers' feelings about the future, their state of mind, learn new skills, become more independent and use their initiative. Our research has highlighted areas of success in the management and coordination of our project, encouraging facilitative leadership and incorporating a range of tasks into work parties, as well as staff passing on their knowledge and fostering friendships among volunteers. Our most impressive quantitative results in particular have been from the SWEMWBS, where

81% of volunteers reported they felt useful, 81% that they felt able to make up their own mind about things and 72% that they felt relaxed 'all of the time'. PGI scores have included 83% of participants stating that they feel confident enough to choose the role they want to have in a group and 100% agreeing to some degree that if they wanted to change something in their lives, they would initiate the change. The results of the PGI scale were a little less consistent than SWEMWBS, and although the scale generates very interesting data which directly reflects volunteers' personal development in important areas such as confidence, qualitative data was needed to support areas of the investigation the PGI scale did not cover, such as state of mind. Schultz's INS scale (2002) has revealed that the majority of our volunteer participants feel very connected to nature, and qualitative data has highlighted the link between this connectedness and mental health. Overall the results from each method did support each other and have lead to some valuable and interesting conclusions.

In relation to existing research, our findings have strongly supported those of almost all studies mentioned in the literature review section of this report to varying degrees. Our volunteers have talked about increased focus and putting things into perspective as well as giving evidence of clear and rational thinking, which links in with Kaplan and Kaplan's Attention Restoration Theory (1995). Our participants said that they felt more confident as a result of our project and dependence was a central issue, in terms of living independently, autonomy and independence of thought which all tie into the elements of the PGI scale, well-being indicators (New Economic Foundation 2009) and other academic work including Leary, Terdal, Tambor and Downs (1995). There is also a definite indication of a fundamental 'need' for nature in our volunteers' responses as proposed by Ulrich's Psycho-Evolutionary Stress Framework (1983) and Wilson's Biophilia hypothesis (1984).

Confidence has been inherently linked by this sample to learning new skills and experiencing a range of achievements, which supports a lot of research on general volunteering as well as conservation volunteering. Research on the importance of visible impacts in achieving maximum benefits to confidence and self-esteem (Russell 2009) was certainly supported by our data. Participant responses regarding relationships were also very insightful in terms of their experiences of social exclusion, yet in our project they feel part of a team, have developed new relationships and improved existing ones. Our data also demonstrated the more indirect impacts of our project in that it helps carers' mental health and well-being too. It was clear from responses that volunteers had had very memorable experiences with us, often unexpected but having a considerable positive impact, and in this Stebbins' work (1997) mentioned earlier is also supported. Further research on how such unexpected experiences affect mental health short and long-term would be very interesting. Although not the focus of our study, participants and carers noted positive changes in their physical health which

supports research such as Hine et al (2011), and in line with this study again we have shown that environmental volunteering has a positive impact on participants' moods.

In terms of our evaluation design, the interviews worked very well as semi-structured topic guides allowed the researcher to ask further question and for the volunteers to direct the discussion towards their priorities rather than our own, creating a picture of what well-being really was to them and how we contributed towards it. The measurement scales also worked fairly well, but there were difficulties in the way statements were worded, the way items were presented and the fact that three separate measures needed to be used to cover the important aspects of our investigation. We have realised after this first stage that although perhaps in other contexts these scales would be more than appropriate, for us, they were not. While these scales have collected extremely valuable data we believe we can design an evaluation more tailored to our own needs. The feedback we received from volunteers on our methods and how it has influenced the design of our own original well-being evaluation will be discussed in much more depth in part two of this report.



Where do we Go from Here?

As far as this stage of the report goes, the evaluation is still in a state of development, and this will be continuously improved. Our second report will go into detail on this development, describing our journey from the original evaluation to designing our own, and presenting the results of the second stage of our primary research. This report has explored the connection between nature, volunteering and mental health made by others both in theory and practice, and demonstrated that our Inclusive Volunteering Project creates multiple positive impacts from this for individuals, organisations and communities. However, this needs to be taken further.

This investigation has opened up new partnerships with other organisations, as well as strengthening existing connections with other Wildlife Trusts. Through these we are taking the opportunity to create a stronger evidence base for the mental health-nature connection, through involving more volunteers in shorter pilot projects. This will allow us to measure well-being impacts from a definite baseline and strengthen the direct connection between our work and any improvements in mental health. We will be using our own well-being measurement scale and qualitative interviews to do this at different Trusts in the near future hopefully. Our data has also opened up avenues for academic research that we may take further in the future, such as the personal impacts of unexpected experiences and outcomes in nature-based activities.

Initially, the Inclusive Volunteering Project evaluation was about funding. Tees Valley Wildlife Trust needed to demonstrate its impacts in this area in order to sustain, and hopefully develop the project further with much-needed financial support. We have seen from volunteers' comments that there is a strong need for the service, but the evidence that we are achieving important outcomes has been mostly anecdotal up to this point. The ultimate aim has been (and still is) to secure sustainable funding from the NHS and the next stage of this report will document our progress towards this, as well as providing guidance for organisations with similar aims. Through the recent shake-up of the NHS and in particular the way in which it commissions its health and social care services it has at times felt that this was not necessarily going to be impossible (we must remain positive!), but would be much more difficult. However, in the face of these uncertainties we have sought out alternatives and fortunately have been very successful in securing funding from other, perhaps even more sought after sources.

The Health and Social Care Volunteering Fund offers four-years worth of funding to organisations seeking to contribute to major health outcomes for the UK, and is directed by the Department of Health at national level. We were lucky enough in December 2012 to be told that we had been successful in our bid for just under £49,907 to develop our project across the Tees Valley and become a model for best practise in this area. As a result of this we can begin to improve access to our service in a variety of ways. The fund offer training and a support package specifically tailored to individual organisations with a primary aim of placing each in the best position to achieve long-term funding.⁶

We were also lucky enough to secure one-years funding for 2013 of just under £10,000, to provide individual training budgets for our Inclusive Project volunteers to develop themselves personally and professionally, as they will be able to select formal training in conservation and personal development that suits them, from outdoor first aid to dry stone walling. These skills will be invaluable to us and them, and will further become part of our own reward system structured through certificates for community engagement and personal achievements.

Overall we have many places to go from here, and as it could only be said in the words of one of our volunteers,



"...the future's bright" (Participant J).

⁶ A special note of thanks to James Hall at Lancashire, Manchester and North Merseyside Wildlife Trust for help with our bid to the Health and Social Care Volunteering Fund.