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Recovery Colleges: Sharing Our Experience - Number 2

Serving Diverse Communities: Tower Hamlets Recovery College

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Introduction to the 'Recovery Colleges: Sharing Our Experience Series'

This is the second paper in the 'Sharing our Experience' series that is designed to explore different facets of Recovery Colleges and how the principles on which they are based (see Perkins et al, 2018) are realised in different contexts. In the first paper in this 'Sharing Our Experience' series, colleagues from the Recovery College within the Ontario Shores Centre for Mental Health Sciences in Canada provided insights into the creative and thoughtful ways in which the core principles of a Recovery College were realised in practice in a largely clinical mental health service as a core part of a broader 'Recovery Action Plan'. They described the role of the Recovery College in driving forward recovery-oriented practice across the whole mental health service system. In future papers in the series we will address other important issues, for example, how Recovery Colleges can respond to a changing landscape such as mental health transformation in England and the development of Recovery/Discovery Colleges for young people.

This second paper in the 'Sharing Our Experience' series describes the innovative initiatives within the Recovery College in Tower Hamlets, London, that resulted in significant improvements in serving diverse communities.

Established in 2017, the Recovery College is based in the London Borough of Tower Hamlets which is one of the most diverse in the UK (only 31% of the population are White British). It is the most densely populated Local Authority in the UK and has some of the greatest extremes of wealth and poverty. The Manager of the College described how, in the first 3 years of its operation, the College had attempted to provide courses in local community venues that would be relevant to the population of the area, but nevertheless *"we weren't reflecting the demographics of the borough."* This paper describes how the Tower Hamlets Recovery College was successful in seizing an opportunity presented by the mental health transformation process in the borough to rectify this situation.

The Tower Hamlets Recovery College was built upon a deep understanding of the nature, history and nuances of communities that it serves, as well as these communities experience of, and suspicions about, local health and social services. As one college tutor said *"We were starting from a place where there is no trust, where people feel let down: 'we are just numbers to you'"*.

Co-production is one of the key guiding principles of Recovery Colleges, and the Tower Hamlets Recovery College is impressive in the way in which it established a co-production process that goes beyond the inclusion of people with lived experience of mental health challenges, to involving local communities and community organisations in co-creating and co-delivering solutions. They work alongside local communities and community organisations and draw on the assets of, and subject experts within those communities. This creates opportunities that really reflect what those communities want and need, and provides these in a way that is accessible and acceptable to the people who might benefit from them. In recruiting peer tutors, the College leaders recognised that the concept of being 'peer' extended beyond lived experience of mental health challenges to lived experience of being part of local communities and speaking the languages of those communities. Gaining the trust of local communities was key. As the College tutors said:

"People want things that are local, understandable, in their own language from their own communities. Someone who looks like them, sounds like them and really understands the politics and nuances within those communities. If you aren't part of the community you simply could not navigate the issues and politics within the community. One mis-step and you break the trust." "I understand needs and nuances within my community. I knew what the Recovery College had to offer. I had lived experience. People see me in the community, they know me."

We would like to thank the Tower Hamlets Recovery College Team for generously sharing the lessons they have learned to develop a College that really does serve the diverse communities of the area in which they are based. We are sure that their insights and experience will provide food for thought and useful ideas for other Recovery Colleges.

Rachel Perkins, ImROC Senior Consultant

Serving Diverse Communities: Tower Hamlets Recovery College The London Borough of Tower Hamlets

Tower Hamlets is a borough of great contrasts: extreme wealth juxtaposed with social deprivation. Some of these contrasts are immediately visible with the gleaming financial sector high rise buildings of Canary Wharf towering over the much smaller street markets and residential areas. This financial sector divides the borough both physically and economically. Geographically, it cuts off the more deprived 'Isle of Dogs' (London E14) from the rest of the area, often leaving people living there relatively cut off from services and community resources that are generally focused in the London E1, E2 and E3 areas. Economically, in terms of income deprivation, Tower Hamlets is ranked the 22nd most deprived Local Authority area of the 326 local authorities in the country (Office for National Statistics, 2021), and has, in overall terms, become relatively less deprived. A process of 'gentrification' has meant that the 'East End' of London (of which Tower Hamlets is a part) has become a 'cool' place to live and many luxury apartments have been built along the river. Together, these have caused housing prices and the cost of living to increase massively in the area. However, such gentrification soon gives way to the poorer, overcrowded areas and relative poverty is huge: of its 144 neighbourhoods, 74 are among the 20% most income deprived in England while 6 were in the 20% least deprived (Office for National Statistics, 2021), 26.6% of children in the Borough live in income deprived households (the 14th highest in the country) and 43.9% of older people live in income deprived households (the highest in the country) (Ministry of Housing, Communities and Local Government, 2019).

Tower Hamlets has the fastest growing population in England and Wales: between the 2011 and 2021 census, the population grew by 22% from 254,096 to 310,300. It is the most densely populated local authority area in England, with 15,695 residents per square kilometre compared to an average of 242 people per square kilometre



Whitechapel market against the backdrop of London's famous high-rise skyline

in England as a whole: over 37 times higher than the mean average population density in England (Tower Hamlets Council, 2023). And the population density has been growing: "In 2021, Tower Hamlets was home to around 112.1 people per football pitch-sized piece of land, compared with 91.8 in 2011." (Office for National Statistics, Census 2021). 12.2% of households have at least 5 persons compared with 6.9% in England and Wales, and 2.7% of households have at least seven persons – three times the proportion in England and Wales (0.9%) (Tower Hamlets Council, 2023). The proportion of people who own their own homes is the lowest in England and Wales with 35.9% of the population living in the social rented sector, and 38.2% in private rented accommodation (Office for National Statistics, 2021). It is also the youngest local authority area with a median age of 30, and population turnover is very high with more than 20% of the population having lived somewhere else a year prior to the national Census (Tower Hamlets Council, 2023).

Tower Hamlets is extremely culturally and ethnically diverse. The Borough, and 'Brick Lane' – the 'cultural heart' of the Borough - have, for centuries been the place of arrival and settlement for migrants from across the globe: from the Huguenots from France escaping religious persecution in the 1570s, through Irish people escaping starvation in the Irish famine in the 1840s, to waves of Jewish migration, initially escaping persecution by the Spanish Inquisition, and later escaping Nazi persecution in the Second

World War. There has also been a long history of migration to Tower Hamlets from the Sylhet region in the north east of what is today Bangladesh. They came as seafarers by way of the East India Company alongside seamen from other parts of the British Empire such as British Somaliland. After the Second World War, the small community of Sylheti ex-seafarers grew rapidly as increasing numbers of commonwealth citizens came from the newly independent 'East Pakistan' – now Bangladesh. The most recent migrants to the area include many Somali refugees who fled the civil war in the 1990s.

These patterns of migration have done much to shape the ethnic composition of the Borough today. It has one of the smallest proportions of White British residents in the country: more than two-thirds of Tower Hamlets residents – 69% - belong to minority ethnic groups (i.e. not White British). 55% belong to black, Asian and minority ethnic groups (and 14% to white minority groups). Tower Hamlets is home to the largest Bangladeshi/Bengali¹ population in England and Wales who comprise 34.6% of the population (Tower Hamlets Council, 2023). Black ethnic groups make up 7% of the population. However, the national Census data make it difficult to know the number of Tower Hamlets residents who are Somali. 'Somali' is not listed as a separate ethnic group on the national Census, and when responding to the ethnicity questions, some tick the 'Black African' box, some identify themselves as 'Black Other' and specify themselves as Somali or Somalilander. In the 2021 census 6180 people (2% of all residents) specified that they were a Somali or Somalilander, but this is an underestimate because it does not include those ticking the 'Black African' box on the Census. In terms of country of birth, the number of Somali born residents has increased greatly over the last 20 years from 1353 in 2001, to 2925 in 2011, and 3107 in 2021 (around 1% of the population).

However, these figures do not include second generation UK born children of Somali residents, so these figures also represent an underestimate of the Tower Hamlets Somali population (see Tower Hamlets Council, 2023).

A larger proportion of Tower Hamlets residents are Muslim than in any other part of the country. 39.9% of Tower Hamlets residents identified themselves as Muslim in the 2021 Census (compared 6.5% across England and Wales as a whole) – a rise from 34.5% in 2011 (Tower Hamlets Council, 2023). The East London Mosque and its London Muslim Centre and Maryam Centre² (the women's part of the Muslim Centre) are the cornerstone of the Tower Hamlets Muslim community.

People living in Tower Hamlets have a very strong identity as 'Tower Hamlets Residents'. The Borough has a vibrant street scene, and is home to many street markets – Whitechapel Market, Chrisp Street Market, Watney Market, Roman Road Market, Petticoat Lane Market and Old Spitalfields Market – which celebrate local businesses and the diverse culture of the area. The Altab Ali Park marks a dark moment in Tower Hamlets history in 1978, when Altab Ali, a 25 year old Bangladeshi Sylheti clothing worker was murdered by three teenage boys on his way home from work. The arch at the entrance of the park acts as a memorial to Altab Ali and other victims of racist attacks. It incorporates a Bengali-style pattern to show the merging of different cultures in East London and acts as a reminder of commitment against all acts of xenophobia, religious hatred and bigotry. Social justice has always been at the heart of Tower Hamlets. It is where the Salvation Army started, and justice remains a focus of Tower Hamlets Council. The borough is home to many housing associations that have community centres which act as local 'safe spaces'.

1 Most Bangladeshis are ethnically Bengali and speak Bengali/Sylheti

2 The Maryam Centre offers opportunities for women not only to attend prayers but also to get information, advice, guidance and counselling.

Tower Hamlets Recovery College

The Tower Hamlets Recovery College was established in 2017. It is provided by East London Foundation Trust (ELFT) and is located in a Community Mental Health Facility in a residential area just off the busy Whitechapel Road. This facility is not one used by the Community Mental Health Teams with whom people may have had contact, it houses other, smaller services like the Clozapine Clinic (a co-location that has proved useful in ensuring that the College is accessible to those with more complex needs – *“People just walk down the corridor to the Recovery College from the Clozapine Clinic.”*) The building is very much seen locally as ‘The Recovery College’ and the College’s sign is the prominent one at the entrance.

From its inception, Tower Hamlets Recovery College did a great deal to try and serve the diverse communities within the Borough, in terms of both the location and content of courses. Courses were, and continue to be, delivered in community venues across the Borough, including the relatively underserved Isle of Dogs E14 area. The College offered each new student a comprehensive, recovery-oriented ‘Individual Learning Plan’ to enable an understanding of the individual needs, hopes and aspirations of students from different backgrounds. Courses were run to try to meet the demographic needs of the population. However, as Table 1 shows, by the Autumn Term of 2020, 53% people using the College were White, and only 5.6% were Bangladeshi and 3.0% were Somali. As The Recovery College Manager said

“We weren’t reflecting the demographics of the borough.”

“We had very limited capacity to meet diverse needs. We weren’t reflecting the demographics in the Borough. We tried putting on courses like ‘Islam and Recovery’, but we tended to get people whose first language was English.”

Many among the Bangladeshi/Bengali and Somali populations of Tower Hamlets were suspicious of Health and Local Authority Services. Many felt that they were continually being consulted about what they wanted but nothing ever came of it. They had the sense that they were being used as kind of ‘tick box’ numbers to prove that services were engaging with the local community, but that they got nothing out of it. As College tutors said:

“We were starting from a place where there is no trust, where people feel let down: ‘we are just numbers to you’”.

“People say, it’s not for us, it’s for you so you can get your money. They just use the money and get rich and nothing comes of it for us”.”

This reflects the findings of Mind/The Unmistakables (2022) research on race and mental health:

“It’s crucial that services don’t use people from ethnic minority communities to ‘tick a box’, but rather acknowledge their right to play a part in creating services that understand the needs of different ethnic minority communities.”

This is exactly what the Tower Hamlets Recovery College did.

Seizing the opportunity to better serve the diverse communities of Tower Hamlets

The Mental Health Transformation Programme in Tower Hamlets was concerned with decreasing health inequalities. Those working to implement it were particularly concerned to improve services for the underserved Bangladeshi/Bengali and Somali communities, and for young people. In 2021 they asked for bids for some last minute, short term (one year) 'slippage funding' to address the needs of these groups of people. The Tower Hamlets Recovery College recognised that they could have something to offer...but the time scales were short. They had only a day to prepare their bid. It would have been easy to say that this time scale was unmanageable, but the Recovery College Manager saw a very real opportunity to improve the extent to which the College served the diverse communities of which it was a part. So a bid was rapidly prepared to create two new streams within the Recovery College:

- A Young Adults Stream to improve access to the College for 18-30 year olds (Tower Hamlets has the youngest population of any local authority in England, but Recovery College students did not reflect the borough's age profile).
- A Community Inclusion Stream designed to ensure that the Recovery College better served the Bangladeshi/Bengali and Somali residents in Tower Hamlets, and addressed racial inequalities and injustices.

The bid would enable the College to recruit 3 staff to each of these streams: a 0.6 whole time equivalent (WTE) lead for the stream, and two 0.4 WTE peer tutors. Although the two streams complement each other, the focus of this paper is the Community Inclusion Stream designed to better serve the ethnically diverse community of the Borough.

Staff of the Community Inclusion Stream - Sazidun Haque, Asha Abdillahi & Halima Baiyat



The bid was successful and using the money obtained, the College set about recruiting the new staff for the Community Inclusion team. The aim was to recruit people who were a part of the local Bangladeshi and Somali communities who were bilingual in Bengali/Sylheti and English, or Somali and English, who had lived experience of mental health challenges. The lead who was recruited was Bengali speaking from the local Bangladeshi community. The two peer tutors were Somali speaking. As the successful recruits said, given the suspicion and lack of trust of statutory services that exists within Tower Hamlets Bangladeshi/Bengali and Somali communities, it was critical that the recruits really understood the local communities so that trust could be forged between these communities and the Recovery College:

“People want things that are local, understandable, in their own language from their own communities. Someone who looks like them, sounds like them and really understands the politics and nuances within those communities. If you aren’t part of the community you simply could not navigate the issues and politics within the community. One mis-step and you break the trust.”

“I initially came on board as a peer tutor, but I had also been a community development worker and had lots of contacts within the community from this work.”

“I understand needs and nuances within my community. I knew what the Recovery College had to offer. I had lived experience. People see me in the community, they know me.”

Monies received from the Transformation funding (for both the Community Inclusion and Young Adult programmes) enabled the Recovery College to create a genuinely diverse team that was almost double its previous size. The resulting team comprised 20 people, most of whom work part time and 17 of whom are peer tutors: only the manager, deputy manager and administrator are not required to draw on their personal experience of mental health challenges. Fifteen of the staff, including the manager, identify as being from Black, Asian and minority communities: 2 Bangladeshi, 3 Somali, 3 Indian, 2 Pakistani, 1 Fijian, 1 Ghanaian, 1 Guyanese, 1 Ecuadorian, 1 St Lucian. Six staff are of the Islamic faith – the most common faith among Tower Hamlets residents. Additional input is provided by mental health workers from local community organisations who co-produce and co-deliver courses. Careful consideration around nuances and community politics relating to these local community organisations are taken into account before forging these partnerships/relationships.

The usual recruitment process had to be changed in order to get the right people for the Community Inclusion stream positions. Person specifications specified as essential language competencies, that the people be residents of Tower Hamlets or East London and that they have personal experience of mental health challenges. During the selection process applicants had two interviews. The first aimed to assess competencies and values, and candidates successful in this interview were invited for a second interview in their language. The interview panel included Bengali/Sylheti and Somali speaking staff from within East London NHS Foundation Trust. The aim was to ensure that candidates were able to speak about well-being and complex mental health issues in

these languages in a sensitive and culturally appropriate way.

The first part of the work of the new Community Inclusion Stream was to really understand and listen to local communities. In their bid for the transformation monies, the College made it clear that they could not commit themselves to specific deliverables because these would be identified and established after listening to local communities, so that what was offered could be truly representative of what the communities want. Therefore, for three months of the Community Inclusion programme, the College held focus groups led by the newly recruited Somali and Bangladeshi tutors. Here is what the tutors had to say about these focus groups:

“It is really important to understand the nuances of experiences in the communities and their needs. The politics of those communities and the impact of things that happen in Bangladesh and Somalia.”

“During the Bangladeshi floods many knew people who were affected by the floods, had relatives who were dying. They couldn’t talk about these things at home – they needed a space to talk.”

These focus groups were held in the language of the communities and listened to people from different parts of those communities. Segregation between men and women is the norm in both Somali and Bangladeshi/Bengali communities, so these sessions were organised for men and women separately. These produced a wealth of information about how the Recovery College could better serve these local communities.

Term dates, timings and venues for courses were important to people. Dates for the College terms within the Community Inclusion stream had to be agreed around Ramadan – with no courses or workshops held within the two weeks before and the two weeks after Ramadan. As the dates for Ramadan change each year this means adjusting the term dates accordingly each year. All courses need to be held in community languages between 10.30am and 2 pm to fit around childcare responsibilities that are paramount in the communities. Courses need to be held in places known to the community, like well-established and frequently used community centres that offer

services specifically for those communities, the London Muslim Centre and the Maryam Centre, women’s part of the East London Mosque.

There was a preference for skills-based workshops rather than feeling or discussion-based ones. As the research conducted by Mind/Unmistakables (2022) found *“Only 30% of ethnic minority communities feel comfortable talking about their thoughts and feelings.”* Skills based workshops offer the opportunity of bringing people together in a way that enables them to talk about their experiences and problems and help each other out. The course tutors said:

“Skills workshops open the door for other things to happen. People wouldn’t come to a discussion group. They talk about things and that wouldn’t happen in a discussion group.”

“Everyone was getting on so well you could assume they already knew each other well. But they did not. This was the only place they could get together and relax. Their only time for themselves. To talk about their troubles.”

“One woman was having problems with her kids. The women talked about it and thought about things she could do. The next week the women discussed how things were going.”

At the request of the community, the core of the Community Inclusion Stream is therefore weekly skills-based workshops: one for Bengali Women, one for Bengali Men, one for Somali women and one for Somali men. Offering segregated workshops shows respect for the communities’ norms. They allow the College to build trust and commitment from community members. The ‘Gardening for Wellbeing’ workshops have also proved popular and important. These are held at the Mudchute Park and Farm, a city farm in the deprived Isle of Dogs E14 area of the Tower Hamlets *“The focus is on growing foods that connect the diaspora to their culture.”*

From these workshops it has been evident that people form relationships with others and meet up outside, so peer support extends beyond the College. One tutor said, *“When one person died of Covid, 80% of the people at the funeral were Recovery College students.”* It is also noteworthy that these workshops have begun to bridge the gap between generations, with parents and children attending sessions together.

Once trust has been established, within the core, segregated workshops, people can move on to courses which are organised at intervals which cover important mental health, wellbeing and recovery-oriented topics that are specific to the community, like ‘Jinn, Black magic and Evil Eye’, ‘Bengali history and migration’, ‘Women and Islam’. The trust that develops between College staff from the local communities enables other Recovery College staff to contribute to courses and workshops. A peer tutor who is also a chef is particularly popular! One peer tutor said, *“It’s enough for me to say that I work with [the tutor from the local community] for me to be seen as OK.”*

One of the most popular skills-based courses is cooking. One tutor reflected that *“food is central to cultural identity, and central to bringing people together.”* Too often people feel isolated within their communities, making and eating food together is a great way of both addressing the cost of living crisis and bringing people together in a safe space in which they can start to address some of the challenges they face. As one person attending the course said, *“this is the first time I have eaten with someone else for years.”*

Initial segregated sessions also allow people to build up the confidence and trust necessary for people to move on to other, mixed, courses within the College. It can take time to build up this trust, but it is noteworthy that, on the most recent mainstream ‘Train the Tutors’ course, 7 of the 12 people are from Bengali/Somali communities. As one tutor reflected, *“there is a trust point ... and then it sky-rockets.”*

As trust and confidence develops, Individual Learning Plans can be offered to students in Bengali/Sylheti and Somali, but the way in which these are presented is important. We ask *“would you like to speak to someone to help you think about what you need, your hopes and aspirations?”* It is the opportunity for a one to one session in the person’s own language (with a male/female staff member as appropriate) that appears to be particularly attractive.

Collaboration with local partners within communities, and co-producing courses and workshops with people from them, has been critical in establishing trust, and creating a Recovery College that genuinely serves the local community. The Recovery College Manager said:

“We have worked alongside the London Muslim Centre, the East London Mosque and the Maryam Centre. We have lots of contacts there, we run lots of courses there.”

“We coproduce workshops and courses with local community partners who work specifically with the local community in their languages. For example, ‘Stitches in Time’ is a sewing charity. Alongside their two Bengali/Sylheti speaking staff, our Sylheti speaking peer tutors deliver sewing workshops. The ‘Bengali History and Migration’ course is coproduced and co-delivered with the Swadhinata Trust³ and Bangladeshi Mental Health Forum – 18 women attended this course. The ‘Somali Men’s Fitness’ workshop is co-delivered by a Somali speaking fitness instructor in a community space well known to, and frequently accessed by, the Somali community.”

Thinking about ways of communicating about the College to local communities is also important. Although there is a web-based student portal and app, printed prospectuses about the mainstream College courses available (outside the Community Inclusion Stream) are also delivered personally to venues throughout Tower Hamlets. The Recovery College Manager said *“this allows us to build relationships with local, diverse, community facing spaces.”* The College have found it important to have the NHS logo on the front of the prospectus: *“This is an important visual confirmation of integrity and legitimacy as it is a symbol that is recognised by non-English speaking community members.”*

3 A Bengali community group that works to promote Bengali history and heritage among young people.

In terms of publicising and marketing the Recovery College, a key advantage of employing people from within the local Bangladeshi/Bengali and Somali communities is facilitating access to closed community forums and spaces. A tutor said, *“we have then been invited to be part of closed community networks and communication channels.”* These proved an effective way of communicating. ‘WhatsApp’ is a major means of communication within local communities: because staff are part of these communities they are able to use these WhatsApp groups. However, probably the most effective way of communicating about the College is word of mouth, from College tutors who are part of the local community and from people from the community who have attended workshops and courses. The Recovery College Manager said, *“instead of translating the whole prospectus, now that we have a foot in the community, we have found that creating posters and disseminating these through the word of mouth chain has been best: ‘They’ve done it for me – it’s good. They really do it.’”*

Holding events within the community has also been an important way of engaging with local communities and promoting the Recovery College: after each event there is an increase in the number of people coming to the College. For example,

an Eid event was organised in the Kobi Nazrul Centre: a Bengali arts and cultural centre in the heart of the community close to Brick Lane. A local Bangladeshi restaurant did the catering and the event was explicitly designed to be family friendly: the College have found that being family friendly is a key part of engaging the community. Therefore, for example, they had a Mario Kart station, colouring, henna art, a bubble machine, a lucky dip, and candy floss and slushy were all available. The event was advertised widely in the community, and some 200 people attended: students from the Somali and Bengali segregated male and female sessions at the event alongside other community members. Similarly, instead of a ‘graduation’ event, the College now runs a Summer Fete. The most recent fete was held at the Mudchute Park and Farm where the ‘Gardening for Wellbeing’ workshops are held. This was another family friendly event with activities and food designed to attract people from across the diverse communities of Tower Hamlets. It was attended by some 250 people and the number of attendees at the Recovery College ‘Gardening for Wellbeing’ workshop attendees doubled in the following week and these people continued to attend the sessions 4 months later, when this paper was written.

Impact of the Community Inclusion Initiative

Table 1 shows that the impact of these community inclusion initiatives was enormous. After the Community Inclusion Stream was commenced the proportion of Recovery College students from the Bangladeshi/Bengali community increased more than 6 fold: from 5.6% to 35% at the end of the first year. The proportion of Somali students rose more than 5 fold: from 3% to 15% at the end of the first year – figures reflecting the proportion of Bangladeshi/Bengali and Somali people within the Tower Hamlets population.

The initial Mental Health Transformation monies that the Recovery College received were for one year only. However, so impressive were their results at the end of this year, that the funding was made permanent. This has enabled the work to continue and by the end of the second year the proportion of Bangladeshi/Bengali and Somali students has risen further (to 41% and 16% respectively). This exponential increase in demand was not something that the Recovery College had anticipated, and waiting lists have developed. Moving forward the College is looking to recruit new peer tutors who are bilingual in locally spoken languages.

Within the Somali and Bangladeshi/Bengali communities considerable stigma attaches to mental health problems. While formal data on attitude changes is not available, the Recovery College tutors from these communities have begun to notice changes: *“There is huge stigma in the community. I want to be someone who breaks that stigma. I have seen very real changes in the language used in the community around mental health.”*

Table 1: Tower Hamlets Recovery College ethnicity data from before and after the community inclusion initiative started

	Autumn Term 2020	Autumn Term 2022	Summer Term 2023
	(Before community specific streams were started)	(1 year after community specific streams started)	(2 years after community specific streams started)
White British	44.4%	9.0%	8.0%
White Irish	3.4%		1.0%
White Other	7.6%	6.0%	4.0%
Asian/Asian British: Bangladeshi	5.6%	35.0%	41.0%
Asian/Asian British: Indian	5.6%	1.0%	1.0%
Asian/Asian British: Pakistani		2.0%	2.0%
Asian/Asian British: Other Asian background	8.0%	1.0%	1.0%
Black/Black British: Somali	3.0%	15.0%	16.0%
Black/Black British: Other African	5.6%	9.0%	7.0%
Black/Black British: Caribbean	2.8%	5.0%	3.0%
Black/Black British: Other Black background		1.0%	2.0%
Mixed/dual heritage: White/Black African			1.0%
Mixed/dual heritage: White/Asian		2.0%	2.0%
Mixed/dual heritage: Other mixed background		2.0%	1.0%
Other ethnic groups	14.0%	11.0%	2.0%
Preferred not to say			10.0%

Some of the challenges faced

The Recovery College has very much had to learn about the best ways of genuinely becoming a resource for the diverse communities that they serve. They have had to navigate local tensions, politics and sensitivities between and within local communities. For example, within the Somali community, one group wanted workshops that were specific to 'their' group and wanted to exclude those from other groups within the Somali community. Navigating such issues really did require the extensive knowledge and understanding that the workers from the local communities brought. *"You simply could not navigate these issues within the community if you were not of that community."* There have also been challenges in working with community partner agencies who may not hold the same values as the College. In particular, some community groups and resources become 'closed' to maintain group dynamics, but, as the initial focus groups revealed, this can be exclusionary of new members. The Recovery College have endeavoured to address this challenge by making sure that their spaces are open to, and inclusive of, all members of the community: all workshops and courses are open to new students and endeavour to enable students to move on so that new people from the waiting list can attend.

One of the initial challenges was to determine the best forms of marketing and publicising the College within their local communities. Initially, they produced the prospectus in three languages, but this was labour intensive and had minimal impact. Creating posters and communicating through local community WhatsApp groups of which the Bangladeshi/Bengali and Somali College tutors are a part, together with word of mouth chains has been more effective.

The Recovery College tutors who are also a part of their communities are positive about their work - *"It's good. It's lovely to see it flourish."* – but they also face challenges. On the one hand, they have to juggle their roles in the community and their roles in an NHS Recovery College within a community who have been sceptical about, and may have had negative experiences of, statutory services. Often communities feel that

they have been let down by services, or treated badly within them. When community members become part of these services it can cause friction for them within their own communities: *"You become like their perception of the rest of services who have let them down."* On the other hand, once the College had established itself within the local Bangladeshi/Bengali and Somali communities and began to be seen positively by people who had attended workshops and courses, these workers faced challenges in managing community expectations. People expect much of the College tutors with whom they have had positive experiences in workshops and courses and sometimes approach them in the community outside work and ask for help with other difficulties they are experiencing: *"For me it's personal and it's hard. People stop us in the street."* In order to help the Recovery College tutors who are part of their local communities navigate the challenges they face, the Community Inclusion team have been provided with additional supervision with a psychologist. This provides them a space to think about, and address issues arising from, their multiple roles.

The Recovery College have also been a victim of their own success and managing waiting lists has become an issue. Having established themselves in the community, there has been an exponential increase in demand that they had not anticipated given the previous challenges they had experienced in engaging with the communities. They are looking to recruit more bilingual peer tutors, but finding enough bilingual male and female peer tutors to meet the increasing demand has also been an issue. Managing sickness and other absences can be another issue: because of the specificity and language requirements of their roles, it is difficult for other staff to cover for the Community Inclusion Stream College tutors.

There has also been a considerable challenge finding mental health professionals who are bilingual to co-produce and co-deliver courses. While there are staff from the Bangladeshi/Bengali and Somali communities across the Trust, they often lack the confidence to represent their professional expertise in their ethnic languages

in less formal, colloquial contexts. This remains an issue that the College are working on, with some success. For example, they have recently identified a Somali speaking substance misuse worker from RESET⁴ to assist in the development and delivery of substance misuse courses (see 'for the future' below).

Working with other inpatient and community mental health services remains a challenge. It had been hoped that the model of community integration developed within the Recovery College might lead to broader systemic change in the way in which other services work with the communities they serve. Sometimes the experience that people have within these services the same kind of tokenistic, 'tick box' approach that Bangladeshi and Somali communities complained of. As one of the peer tutors said of a visit to another part of the mental health services *"When I walked in, they asked to take my picture for their publicity materials."* Extending the Recovery College community integration approach remains a work in progress, and the Bangladeshi/Bengali and Somali tutors are actively trying to establish links with, for example, the Crisis Café which is used very little by the local Bangladeshi and Somali Communities.

Key ingredients of success and learning points

The Tower Hamlets Recovery College attributes their success to a number of different things, but probably the critical thread that runs through all of them is trust: forging trust between the Recovery College and the communities that it serves. Too often, relationships between Black, Asian and minority ethnic communities have been poor (see, for example, Centre for Mental Health, Commission for Equality in Mental Health, 2020; Mind/The Unmistakables, 2022) - establishing a trusting relationship takes time and commitment, and that has been facilitated and demonstrated in a number of ways by the College. These include:

- 1 *Really understanding local communities, their nuances and politics, has been critical. "Go out into the community. Find places where communities are already congregating and find a way in - authentically and respectfully, of course. In these settings, community members already feel safe...so they can let some boundaries down and be more open to you."* (Recovery College Manager)
- 2 Employing tutors from the local communities, who speak the communities' languages – people who look like them, sound like them, and are a part of them – has been central. The community does not have to 'explain' themselves and the context of their lives to services because these are understood by the tutors employed from those communities. *"I knew what the Recovery College had to*
- 3 *offer, I had lived experience, I am part of the community, people see me in the community, this blurs the barriers between the community and the College."* (a Peer Tutor) They offer a point of trust on which the service can build, however, it is important to be clear about the language abilities that are expected of these tutors: *"not everyone is bilingual equally, not everyone can use their language to describe complex mental health needs and situations."* (Recovery College Manager). Equally it is important to ensure that tutors from the community have the support they need to navigate the complexities of their multiple roles

⁴ Provided by the 'Change Grow Live' (CGL) voluntary sector organisation, RESET Tower Hamlets is the local treatment and recovery support service that works with people who are using any substance, including alcohol, opiates, stimulants, cannabis and new psychoactive drugs.

- 4 Equally important has been the actual delivery of agreements reached – too often people feel that they are ‘consulted’ but nothing ever comes of it. Delivering on promises made is critical among communities who often feel they have been let down by services. *“If you show the community, give your time and effort, they will step towards you.”* (Recovery College Manager)
- 5 Combating isolation in the community and creating spaces where people feel they can congregate, share and discuss their issues in a safe and supportive environment has been important: *“Finding ways to bring unity and show people that they can work together to support each other.”* (A Peer Tutor). The segregated, separate, skills based workshops for men and women from each community that arose from the initial discussions with the community have proved an excellent entry point and resource for the communities.
- 6 Running courses and workshops in community specific venues has proved important. For example, when one session for the Somali community moved to a venue that was already known to, and used by, that community, attendance doubled.
- 7 In communicating about the College to local communities it has been important to use those means that are used within that community. Within the Bangladeshi/Bengali and Somali communities in Tower Hamlets, WhatsApp was the primary means of communication, so this is what the College used. Among young people, TikTok is the preferred means of communication, so the College is using this. Having members of these communities on the College staff meant that the College had access to community specific WhatsApp groups. However, whether via WhatsApp or personal contact *“Word of mouth is the most powerful marketing tool in the community.”* (A Peer Tutor)

...and for the future

The Tower Hamlets Recovery College is committed to an ongoing process of co-production to develop the opportunities that they offer to respond to the changing composition and needs of people in the local area. Working with the communities they serve, they have identified a number of needs, for example, to provide educational opportunities that:

- Enable local people to better understand and navigate the health, social care and support systems that are available within the borough, and to use the experience they have gained to increase the extent to which the broader mental health system is tailored to the needs of the diverse population of Tower Hamlets. In particular, they are developing links with the local Crisis Café which is currently little used by people from local Bengali and Somali communities.
- Address issues of substance misuse. Although alcohol and drugs are proscribed within Islam, addiction issues are an increasing challenge within these communities, but clearly one that requires a sensitive and culturally aware approach. The College are working on this area and have identified a Somali speaking substance misuse practitioner with whom they are working.
- Address the needs of children, and the families of which they are a part. There has been an increase in mental health challenges for young people in the borough and Somali and Bangladeshi mothers often report that they do not know how they can help their children. Many young people feel misunderstood within the education system and this alienation is further reinforced by the Government’s ‘Hostile Environment’⁵ policies, and police ‘stop and search’ practices. UK Government

5 As part of the UK Government’s commitment to reducing immigration figures, in 2012 the Home Office introduced a ‘hostile environment’ policy. It included a set of administrative and legislative measures to make staying in the UK as difficult as possible for migrants who did not have a right to remain in the country in the hope that they would leave voluntarily. As the Conservative Home Secretary at the time said *“The aim is to create, here in Britain, a really hostile environment for illegal immigrants.”* Although this policy was directed towards people who were in the UK illegally, it had reverberations across all immigrant communities in the country. See, for example, <https://www.theguardian.com/uk-news/2017/nov/28/hostile-environment-the-hardline-home-office-policy-tearing-families-apart>

data shows that London has the highest 'stop and search' rates for people from Black and Asian communities: in the year ending March 2022, 'stop and search' rates per 1000 were 27.2 for Black people and 11.5 for Bangladeshi people as compared with 5.2 for White British people⁶.

- Bridge the gap between generations. There are few opportunities within the borough for different generations to come together. The College have found a very positive response when parents and older children attend sessions together, therefore they are considering how they can focus on developing such opportunities.

The Recovery College must also address the changing demography of the borough. The population of the area has changed over time and continues to do so. The College is aware that it needs to work with new communities, like the increasing number of people from former eastern European communities, if it is to continue to serve the communities of which it is a part.

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6 <https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/policing/stop-and-search/latest/>

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Serving Diverse Communities: Tower Hamlets Recovery College - Nottingham: Imroc.