

## Mindset College – The Recovery College in Hong Kong

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Many thanks for the kind introduction. I am glad to have the chance to introduce Mindset College to you. Mindset College is the Recovery College in Hong Kong. In this presentation, I am going to introduce the nature of Recovery College, and then I will talk about the background and the operation of the College in Hong Kong. Finally I will show you some research findings regarding the effectiveness of the College in promoting mental health.

### Recovery College Model

I will first talk about the features of Recovery College. There are several key characteristics. First, the College is educational so it provides mental health education and facilitates the recovery of people with mental illness through an educational approach. We use a college system to allow people with mental illness to become students under different identities. Second, we emphasize collaboration, so this involves co-production, which means partnerships between professionals and service users. Third, the College uses a strength-based approach. We focus on various aspects of people with mental illness. We focus on their qualities, strengths, and skills, rather than focusing on their problems, disabilities, or symptoms. Fourth, in the College, we emphasize person-centered development. So we provide a personally-tailored curriculum to help our students achieve their personal goals. Finally, a characteristic of Recovery College is that it is inclusive because we allow all people - including students of all abilities, cultures, mindsets, etc., as well as

individuals with mental illness and their family members - to enrol in the College.

In Recovery College, we use an educational approach instead of a therapeutic approach in promoting mental health and recovery. We find some differences between this approach against the traditional therapeutic approach. Rather than focusing on the problems of people with mental illness, we focus on their qualities, potentials, and possibilities. Also, while professionals are responsible for selecting therapies for patients in traditional mental health services, Recovery College allows students to choose their own courses to take, so we see quite a difference here. Finally, one more difference between a therapeutic approach and an educational approach is that the traditional therapeutic approach maintains a power imbalance and reinforces the idea that professionals are the only experts in the provision of mental health services. In the educational approach, actually we aim to empower people with lived experience to become experts in their self-care and also to utilize their talents in everyday life.

As we utilize an educational approach rather than a therapeutic approach, we also use a different language in Recovery College. For example, we don't have any patients; we only have students. We don't have therapists; we only have tutors, coaches and trainers. We don't have any case referral; we only have course registration. We don't have any treatment plan; we only have an individual learning plan. We don't have any concepts about discharge; we only have some ideas about graduation. We

## Dr. Kevin Chan

don't have any patient groups; we only have our student unions. People are not regarded as patients but as the same as everyone else, just like you and me.

### Mindset College in Hong Kong

Recovery Colleges have been established in about 22 countries, as mentioned by Professor Mike Slade. Mindset College is the first Recovery College in Hong Kong and is sponsored by Mindset and operated by four local NGOs, including the Mental Health Association of Hong Kong, Caritas Hong Kong, Baptist Oi Kwan Social Service, and New Life Psychiatric Rehabilitation Association. The College aims to promote the well-being of people with mental illness as well as the general public. The College actually emphasises co-production and co-delivery, bringing together people with lived experience and those with professional experience in the co-design and co-delivery of some courses. In this way, the College actually allows people with mental illness, the service users, to be involved in the design and delivery of mental health services.

There are six scopes of curriculum, including recovery, keeping well, building life, self-advocacy, peer support, as well as family support. Here we show some examples of our course topics. For example, in order to facilitate our patients to be integrated into the community and build a community life, some courses are about preparing for work and returning to learn. Also, in order to promote peer support among people with mental illness, we offer some courses on peer support workers training.

Figure 1 shows the learning progress of our students. After enrolment, we have a Peer Learning Advisor to meet with the students to discuss their individual learning plans. The Advisor will try to identify the goals, ambitions, and objectives of the students and facilitate them to choose appropriate courses to take. Through this learning process, the students will enhance their knowledge and life skills so that they can accomplish their life goals. From time to time, the Advisor will review and revise the individual learning plans with the students. After completing a semester, the students will graduate or move on to another learning journey.

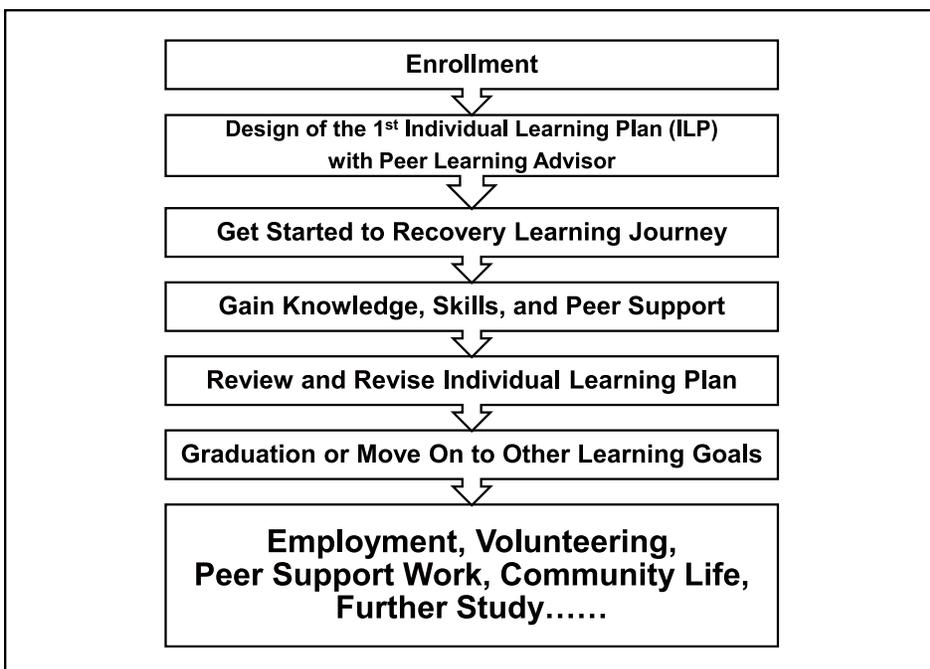


Figure 1. Progress Pathway of Students in Mindset College

## Mindset College – The Recovery College in Hong Kong

Mindset College was established in 2017, and in the past two years, we had very successful achievements. For example, in the past two years, over 1,800 students enrolled in our courses and attended about 14,000 training sessions. Also, 137 people with mental illness served as our peer trainers in 1,375 training sessions. Furthermore, over 73 experts from different industries served as our professional trainers.

### Does Mindset College work?

Regarding the effectiveness of Mindset College, we have been trying to analyse some data to find some scientific evidence regarding the effectiveness of the College (summarized in Table 1). We collected questionnaire data from students with mental illness before and after their first semester in the College. Our research objective was to examine whether our College could help students find a new student identity and whether our College could enhance students' social support, hope, and flourishing. A total of 326 students participated in this evaluation study and the average age of participants was 49 years. Most participants were female and had received a high school education or more. 87% of the students had a single diagnosis and had psychotic, depressive, bipolar, or other disorders. The mean duration of illness was about 16 years.

We expected that our Mindset College could empower people with mental illness to extend their self-definitions beyond their patient identity. So we included a measure of their salience of student identity. Results showed that our expectation was correct - after the first semester, participants thought about their student identity more often.

We expected that our Mindset College could help students develop a greater sense of social support. Results showed that our expectation was correct - after the first semester, participants reported a greater sense of belonging, acceptance, and being loved by others.

Finally, we expected that our Mindset College could help students promote positive mental health. Results showed that our expectation was correct.

After the first semester, students reported higher levels of flourishing.

In addition to evaluating the role of the Mindset College in enhancing students' well-being, we would want to know whether our peer trainers could be benefited from the College. So we also collected and analyzed questionnaire data from peer trainers before and after their first semester in the College. Our research questions were whether teaching at the Mindset College would increase their sense of empowerment, reduce their self-stigma, improve their self-efficacy in disclosing their recovery story, and reaching a higher level of flourishing.

A total of 36 peer trainers participated in this study and the average age of the participants was about 45 years. Most were females and had achieved a higher school education or more. About 83% of participants had a single diagnosis, and their primary diagnoses included psychotic, depressive, bipolar, anxiety, personality, and other disorders. The mean duration of illness was about 16 years.

We expected that our Mindset College could facilitate peer trainers to increase their sense of empowerment. Results showed a trend for increase in empowerment, but the increment was statistically insignificant.

We expected that our Mindset College could facilitate peer trainers to reduce their self-stigma. Results showed a trend for self-stigma reduction, but the degree of reduction was statistically insignificant.

We expected that our Mindset College could facilitate peer trainers to increase their self-efficacy in disclosing their recovery story. Results showed a trend for increase in their self-efficacy, but the degree of increment was statistically insignificant.

Finally, we expected that our Mindset College could increase the level of flourishing among peer trainers. Results showed a trend for increased flourishing, but the degree of increment was statistically insignificant. Overall, the results of our peer trainers were not as good as our students. These findings suggest that more support and supervision

## Dr. Kevin Chan

should be given to our peer trainers, so that they could be benefitted from our recovery college.

Aside from studying the roles of the Mindset College in enhancing students' and peer trainers' well-being, we would want to know whether there were some positive changes in our professional trainers. So we also collected and analyzed questionnaire data from professional trainers before and after their first semester. Our research questions were whether teaching at the Mindset College would increase the trainers' affirming attitudes toward people with mental illness.

A total of 57 professional trainers participated in this evaluation study, and the mean age of participants was 33 years. Most participants were female and most were social workers.

We expected that teaching at the Mindset College would increase professionals' affirming attitudes toward mental illness. Results supported this hypothesis. After the first semester, participants reported a greater level of acceptance towards people with mental illness.

Results also showed that, after the first semester, participants reported more positive views of empowerment regarding people with mental illness. For example, they increasingly endorsed the idea that individuals with mental illness are capable people.

Finally, results showed that, after the first semester, participants reported more positive views of mental health recovery.

Table 1  
Effectiveness of Mindset College among Students, Peer Trainers, and Professional Trainers

Variable	Minimum	Maximum	Before	After	<i>p</i>
<i>Students</i>					
Student Identity	1	5	3.02	3.18	< 0.05
Social Support	1	4	2.88	2.92	0.08
Hope	1	8	5.56	5.69	< 0.05
Flourishing	1	7	5.14	5.25	< 0.05
<i>Peer Trainers</i>					
Empowerment	1	5	3.65	3.67	0.83
Self-Stigma	1	4	1.83	1.82	0.85
Self-Efficacy	1	7	5.08	5.11	0.85
Flourishing	1	7	5.71	5.72	0.90
<i>Professional Trainers</i>					
Acceptance	1	6	5.21	5.33	< 0.05
Endorsement of Empowerment	1	9	7.82	8.01	0.08
View of Mental Health Recovery	1	9	7.61	7.85	< 0.05

## Mindset College – The Recovery College in Hong Kong

### My Personal Experience

Finally, I want to share with you my personal experience as a professional trainer. Indeed, I really think that it was an inspiring and fantastic journey. I found it inspiring and rewarding, because service users were so enthusiastic to share their recovery stories. Moreover, I think it was somewhere to discover ways of managing your condition and your life, develop greater confidence in your own potential and possibilities, and identify ways to achieve your personal goals, dreams, and aspirations. I have also talked to several peer trainers. Overall, they found the process to be very rewarding. However, they also found some challenges. Indeed, these feedbacks, together with our research findings, imply that we have to provide greater support for our peer trainers. In particular, we have to recruit people who are ready to be our peer trainers. We also have to provide substantial training to them, and offer ongoing support throughout the coproduction and co-delivery process. We also have to encourage peer trainers

to use supervision and seek support from others whenever necessary.

To conclude, our MINDSET College demonstrates the possibility of offering a relatively new approach within mental health services – one that focuses on an educational approach, rather than a therapeutic approach. Our research findings suggest that the college could facilitate mental health recovery, enabling students with mental illness to develop greater confidence, hope, and social support. Also, the college's emphases on co-production and co-delivery has created new relationships between professionals and service users. Some positive changes in professionals have already been found. Researchers, practitioners, and policymakers should continue to invest their time and resources in the Recovery College movement as growing evidence suggests that such colleges can facilitate the personal recovery of people with mental illness.

This is the end of my presentation. Thank you.