

Evaluation of the All Right? campaign for tangata whaiora / mental health service users



An evaluation report prepared for All Right? and Mental Health Advocacy and Peer Support (MHAPS)
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June 2018

Canterbury
District Health Board
Te Poari Hauora o Waitaha

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Executive summary

The All Right? campaign is a wellbeing campaign developed in response to the Canterbury earthquakes of 2010 and 2011. This evaluation sought to understand the reach and impact of the All Right? campaign specifically for tangata whaiora / mental health service users.

The evaluation found that the All Right? campaign was valued by tangata whaiora / mental health service users for its positive effects on wellbeing with one respondent describing the campaign as *'almost a secondary treatment for me, 'cos every time I see them it reminds me to think about myself and how I'm doing'* and for its contribution to reducing the stigma of mental illness, *'I think that through the All Right? campaign there is more awareness of mental illness...'*

Mixed methods were used to collect data, comprising of stakeholder interviews and an online survey of tangata whaiora, as well as follow up interviews with some survey respondents. The survey was sent to a database of approximately 300 tangata whaiora / mental health service users who were engaged with Mental Health Advocacy and Peer Support (MHAPS). Over four fifths of respondents to the survey (n=54) were aware of the All Right? campaign (81%, n=44). Of those respondents aware of the campaign, a high proportion agreed that the campaign was helpful (83%, n=33), gave people ideas of things they can do to help themselves (85%, n=34), and made people think about how they were feeling (85%, n=34). Over two thirds (68%, n=27) of respondents had done activities as a result of what they had seen or heard from the All Right? campaign. These results compare favourably with the reach and impact of the campaign in the overall population in Christchurch. Comparative results of the reach and impact of the campaign with the overall population are indicative only as there were differences in survey methods and the data for tangata whaiora are not considered representative, as the sample was self-selected from service users who are engaged with (MHAPS).

The success factors of the All Right? campaign from the perspective of tangata whaiora / mental health service users included that the campaign was population wide, providing a gentle reminder for the community to think about their mental health. It was valued that the high visibility of the campaign was backed up with resources which could be requested when needed. All Right? provided both new ideas and increased awareness of how to improve wellbeing, including the importance of connecting with others. All Right? encouraged discussion about mental health which was viewed as increasing understanding and empathy for mental health service users. Similarly, the All Right? campaign was viewed as contributing to reducing the stigma of mental illness in Christchurch. This had led to people reaching out for help when they were struggling.

The success factors of the All Right? campaign from the perspective of key stakeholders included that All Right? was viewed as effective for all the Canterbury population, post-quakes. This included those people that were users of mental health services. All Right? campaign messages fit well with *'elements of recovery in a mental health terminology'*. Key stakeholders discussed a success factor of the All Right? campaign was that it had ongoing research and was adapted to help the population deal with the secondary stressors following the earthquakes. Key stakeholders also believed that the All Right? campaign had a positive impact on the stigma of mental illness. It was noted that some may view the campaign with a feeling of *'otherness'*, for example when someone is severely ill

'where nothing from outside will get in'. This situation was, however, viewed by key stakeholders as outside of the brief of the campaign. A concern was expressed by a number of key stakeholders and respondents that All Right? will not continue. There was a strong belief that the need remains for the All Right? campaign for the whole population.

The following recommendations are made based on the evaluation findings:

- That All Right? continues to promote wellbeing in Canterbury. Key stakeholders and interview respondents reported that the need for All Right? continues in Canterbury, particularly related to secondary stressors associated with the earthquake events.
- That All Right? continues to have a high visibility in Christchurch, including within the Canterbury DHB and other mental health service providers.
- That All Right? considers targeting an All Right? campaign specifically at improving community thinking around LGBTQ¹ and transgender² education.
- That All Right? considers developing a resource specifically for public sector workers, such as the police, that would be suitable to provide to people in acute distress situations.

¹ Lesbian, gay bisexual, transgender, queer.

² Denoting or relating to a person whose sense of personal identity and gender does not correspond with their birth sex.

Background

The All Right? campaign is a wellbeing campaign developed in response to the Canterbury earthquakes of 2010 and 2011.

Disasters require public health responses that include multiple levels of intervention: psychoeducation for many, and treatment for a few (Bonanno, Brewin, Kaniasty, & La Greca, 2010; Norris, Friedman, & Watson, 2002). Five key points about the psychological parameters of disaster have been proposed (Bonanno et al., 2010):

- disasters cause serious psychological harm in a minority of exposed individuals;
- disasters produce multiple patterns of outcome including psychological resilience, with a substantial proportion experiencing short-lived distress and going on to experience a relatively stable pattern of healthy functioning;
- disaster outcomes depend on a combination of risk and resilience factors;
- disasters put families and communities at risk and the stress of disasters can erode both interpersonal relationships and sense of community. Post-disaster social relationships are important predictors of resilience; and
- the remote effects of a disaster in unexposed populations are generally limited and transient.

Psychosocial interventions should be tangible and informative, including providing psychosocial support resources community-wide (Bonanno et al., 2010). It is important that activities which provide psychoeducation for the affected population match the cultural context of the group. The best way to ensure this is to involve the community in evaluating its own need and determining which actions are most suitable (Norris et al., 2002). To be effective, psychoeducation interventions must emphasise empowerment and support and build on strengths, capabilities and self-sufficiency. Facilitation of community empowerment processes involves, in part, assessing and/or developing the social and individual competencies that contribute to people being empowered and being able to identify and represent their needs during the response and recovery phases of disaster (Norris et al., 2002). Many people affected by disaster may have limited experience engaging in psychosocial support services and may have little understanding of why such engagement is of value (Australian Healthcare Associates, 2010).

The desired outcome of psychosocial recovery intervention, in general, is to assist people and communities to regain a sense of control in what are very atypical circumstances; to facilitate people's ability to return to effective functioning; and to assist them to make sense of their experience now and in the future. Crucial to this is communicating with communities in ways that orient people to the reality of the situation in which they find themselves, clarifying what has happened and what is likely to happen in the short, medium and long term, and providing information that helps people to identify their strengths and resources and to use them to take action to assist their own and others' recovery (Mooney et al., 2011).

In the 2016/17 New Zealand Health Survey 19.9% of adult respondents indicated that they had received a diagnosis of a mood or anxiety disorder at some point in their lives (Ministry of Health,

2018). In 2016, specialist mental health or addiction services engaged with 169,4543 people (3.6 percent of the New Zealand population) (Ministry of Health, 2017b). Disparities in mental health and wellbeing status by ethnicity are well documented. For example, Māori experience higher prevalence and severity of mental illness, and greater lifetime risk of developing a mental illness than non-Māori (Ministry of Health, 2015, 2017a). Racism and stigma have been identified as key reasons for Māori not seeking access to treatment for mental illness (Te Pou o Te Whakaaro Nui, 2010). There are also socioeconomic disparities in mental health and wellbeing, with, for example, those living in the most socioeconomically deprived areas being 1.76 times as likely to have received a diagnosis of a mood or anxiety disorder at some point in their lives as those in the least deprived areas, after adjusting for age, sex and ethnic differences (Ministry of Health, 2017a).

In greater Christchurch many people remain impacted by the earthquakes and the multiple stressors that have emerged since (Canterbury District Health Board, 2016). The Canterbury Wellbeing Survey in June 2017 (Canterbury District Health Board, 2017) reported that over two thirds of (71%) greater Christchurch residents have experienced stress at least sometimes in the past 12 months that has had a negative effect on them (this result has been showing a statistically significant downward trend since 2012). People surveyed in June 2017 were more likely to be stressed, have lower quality of life and emotional wellbeing, and report lower self-rated health if they had unresolved insurance or EQC claims.

This evaluation aims to contribute to the improvement of health and wellbeing equity by ensuring that the All Right? campaign is relevant to tangata whaiora / mental health service users, in which Māori and high deprivation populations are over represented.

The All Right? campaign

The All Right? campaign was developed as a mental health promotion campaign following the 2010-2011 Canterbury earthquakes. The campaign uses social marketing with the aim of increasing the positive mental health and wellbeing of Canterbury residents. The campaign has been developed and led by the Mental Health Foundation and the Canterbury District Health Board.

The All Right? campaign has been evaluated since its inception using both qualitative and quantitative methods. The campaign has achieved a wide reach within the target population. Awareness of the All Right? campaign in Christchurch city has increased from just over half (51%) in 2013, to just over four fifths (81%) in 2017. This reach had been achieved through the media campaign, including use of social media, and through partnerships with other organisations.

The All Right? campaign has maintained a consistently high impact, for example in both 2013 and 2017 over four fifths (89% in 2013, 87% in 2017) of Christchurch city respondents to a representative telephone survey who were aware of the campaign agreed that the All Right? messages were helpful. Success factors for the campaign have included: strong pre-existing relationships between the key agencies; local research to inform the use of appropriate language for translating evidence-based wellbeing messages into a local setting; and not being marketed as a government message whilst maintaining strong relationships with key agencies. In addition to the mass appeal of the All Right? campaign, targeted campaigns have been implemented to reach Māori and Pacific communities.

Evaluation methods

Evaluation purpose

The purpose of this stage of the All Right? evaluation is to understand the impact of the All Right? campaign for tangata whaiora / mental health service users. For example, this includes whether the All Right? wellbeing tips are perceived as being useful for tangata whaiora / mental health service users. The evaluation findings will inform the future development and delivery of the All Right? campaign.

Evaluation objectives

The objectives of this component of the evaluation primarily focused on understanding the engagement of tangata whaiora/ mental health services users and the key stakeholder views of how the All Right? campaign is meeting the needs of tangata whaiora/ mental health services users.

The main aims of the evaluation were:

1. To assess and document tangata whaiora / mental health service users' engagement with the All Right? campaign.
2. To determine the impact of the All Right? campaign for tangata whaiora / mental health service users.
3. To assess and document key stakeholders' views of the engagement of the All Right? campaign with tangata whaiora / mental health service users.

Evaluation questions

For tangata whaiora / mental health service users (see Appendix 1):

1. What is the level of engagement with the All Right? campaign for tangata whaiora / mental health service users?
2. What is the impact of the All Right? messages for tangata whaiora / mental health service users?
3. Did the All Right? messages prompt change in behaviour?
4. Did the All Right? messages help tangata whaiora / mental health service users to think about their wellbeing?
5. Is All Right? used as a tool to help manage wellbeing?
6. How could the All Right? campaign be improved to meet the needs of tangata whaiora / mental health service users?

For stakeholders:

1. What are stakeholders' views of the level of engagement of tangata whaiora / mental health service users with the All Right? campaign?
2. What are stakeholders' views of the impact of the All Right? messages for tangata whaiora / mental health service users?
3. Do stakeholders promote the All Right? campaign? If yes, how do they do this?
4. What do stakeholders perceive as the strengths of the All Right? campaign for tangata whaiora / mental health service users?
5. How could the All Right? campaign be improved to meet the needs of tangata whaiora / mental health service users?
6. Do stakeholders think that the All Right? campaign has had an impact on the stigma of mental illness in Canterbury? If yes, what is the nature of this impact?

Methods

Both qualitative and quantitative methods were used to collect data, comprising of stakeholder interviews and an online survey of tangata whaiora and follow up interviews. All evaluation methods and data collection tools were reviewed by volunteer advisors from the Consumer Awareness Network and Mental Health Advocacy and Peer Support (MHAPS) key staff, in addition to public health specialist review.

Data from tangata whaiora / mental health service users:

An email invitation to complete an online survey was sent by MHAPS to a contact list of approximately 300 people; 54 people responded. The survey link was open between 6 November 2017 and 22 January 2018. While the results are not necessarily representative of the overall tangata whaiora / mental health service user population, or of those engaged with MHAPS, they give an indication of the reach and impact of the All Right? campaign for tangata whaiora / mental health service users. At the end of the survey, participants were asked if they would be willing to participate in a telephone interview, to gather more in-depth information. Of the 12 survey respondents who indicated they were willing to be interviewed, seven were selected.

A Scope of Review Form³ was completed and submitted to the Ministry of Health, Health and Disability Ethics Committee (HDEC, 2014) detailing the proposed evaluation of the All Right? campaign for tangata whaiora / mental health service users. It was determined that the evaluation was not within the scope of HDEC review, with a letter provided by the HDEC outlining this decision.

Data from key stakeholders

Qualitative data were gathered from key stakeholders through semi-structured interviews. This approach was chosen because it works well with an inductive approach when new and unknown information is being sought. An inductive approach is concerned with the generation of new

³ <https://ethics.health.govt.nz/applying-review/how-do-i-apply>

evidence emerging from the data. Semi-structured interviews also make use of the flexibility of the qualitative research process, as understandings that are developed early on can be carried forward into subsequent interviews, thereby drawing out more detail as new issues come to light (Green & Thorogood, 2014). The semi-structured interviews used open-ended questions based on areas of interest. Interviews also explored any other issues brought up by the interviewees. The data were coded and analysed using a systematic iterative thematic approach to identify recurring patterns, following the method described by Green and Thorogood and others (Green & Thorogood, 2014; Liamputtong, 2013; Pope, Ziebland, & Mays, 2000).

The following key stakeholders were individually interviewed:

Rebecca Nicholls	GP Cashmere / Lead mental health, Pegasus
Assoc. Prof. Caroline Bell	Head of Mental Health Clinical Research Unit, University of Otago
Stuart Bigwood	Nursing Director of Mental Health, CHDB
Beth Nobes	Service Delivery Manager of Consumer and Advocacy Services at MHAPS
Superintendent John Price	District Commander, Canterbury Police
Ciaran Fox	All Right? Campaign Project Lead, Mental Health Foundation

Results

Key findings – survey highlights

Fifty four people responded to the email invitation to tangata whaiora / mental health service users to complete an online survey. As noted above, although, as coming from a self-selected group, these results are not necessarily representative of the overall tangata whaiora / mental health service users population, they give an indication of the reach and impact of the All Right? campaign for tangata whaiora / mental health service users in greater Christchurch.

The largest proportion of survey respondents lived in Christchurch (90%, n=39). All respondents lived in either Christchurch or greater Christchurch, which comprises Christchurch city and the neighbouring Selwyn and Waimakariri districts. Over three quarters of respondents were female (78%, n= 32), one fifth of respondents were male (20%, n= 8), and one identified as gender diverse (2%). Over a third of respondents were aged between 45-59 years (39%, n= 16). Over one fifth of respondents were aged between 30-44 years (22%, n=9) or 60 years and over (22%, n=9). Almost one fifth of respondents were aged between 15-29 years (17%, n= 7).

Of the 54 respondents, over four fifths reported that they were aware of the All Right? campaign (81%, n=44), over one tenth of respondents reported being unaware of the campaign (15%, n=8) and two respondents were unsure if they were aware of the campaign (4%).

Respondents who were aware of the campaign were asked to indicate which All Right? activities they were aware of. The most common response was the All Right? posters and billboards with tips and tricks for wellbeing (91%, n=41), followed by All Right? social media (such as Facebook) (47%, n=21), All Right? partnering with community activities (such as Body Festival, Walking Festival) (44%, n=20), All Right? hidden strengths quiz (29%, n=13), All Right? poster generator (29%, n=13), All Right? in newspapers (29%, n=13), All Right? research (24%, n=11), and the All Right? newsletter (20%, n=9). Five respondents specified other aspects of the campaign they were aware of, which included the All Right? website, habit stick, All Right? collaborating with workplaces to make their own posters, the All Right? roller-coaster, compliment posters, All Right? supporting other initiatives, road cone stress balls and All Right? postcards.

Key results for tangata whaiora / mental health service users who were aware of the All Right? campaign included:

- Over four fifths of respondents agreed that the All Right? messages have meaning for them (88%, n=36).
- Over four fifths of respondents agreed that the All Right? messages gave them ideas of things they can do to help themselves or those around them (85%, n=34).
- Over four fifths of respondents agreed that the All Right? messages make them think about how they are feeling (85%, n=35).
- Over four fifths of respondents agreed that the All Right? messages are helpful (83%, n=33).

- Over two thirds of respondents agreed that the All Right? campaign has helped to reduce stigma of mental illness in Canterbury (72%, n=28).
- Over two thirds of respondents reported that they had done activities or things as a result of what they had seen or heard from the All Right? campaign (68%, n=27).
- Over half of respondents considered the All Right? campaign to be one of the tools that they used to increase their wellbeing (59%, n=23).

These results compare favourably with the reach and impact of the campaign in the overall population of Christchurch city. Comparative results of the reach and impact of the campaign with the overall population are indicative only, as there were differences in sample size and survey methods, and the data for tangata whaiora are not considered representative.

Over four fifths of tangata whaiora / mental health service users reported that they were aware of the All Right? campaign (81%, n=44) compared with Christchurch city residents in 2017 who also had a reach of 81%.

Of the 81% of 400 respondents to a representative telephone survey who were aware of the All Right? campaign in greater Christchurch, in 2017:

- 87% agreed that the campaign messages were helpful (compared with 83% for tangata whaiora / mental health service users, n=33)
- 78% agreed that the All Right? messages made them think about how they were feeling (compared with 85% for tangata whaiora / mental health service users, n=35)
- 73% agreed that the All Right? messages gave them ideas of things they could do to help themselves (compared with 87% for tangata whaiora / mental health service users, n=34)
- 41% agreed that they had done activities or things as a result of what they had seen or heard of the All Right? campaign (compared with 68% for tangata whaiora / mental health service users, n=27).

The All Right? campaign makes me think about how I am feeling

Over four fifths of respondents agreed that the All Right? messages make them think about how they are feeling (85%). Fourteen respondents provided a free text comment following 'The All Right? messages make me think about how I am feeling.' A number of respondents commented that the All Right? campaign was a prompt to think about themselves. This included that the campaign guides them to think positively. One respondent commented that this was particularly important when experiencing mental distress.

The All Right? messages make me think about how I am feeling... they guide me to think about the positives. As someone who experiences intense distress... I have found the All Right? campaign doesn't leave me feeling too many strong emotions in an uncontained way, it just brings my attention to the positive things. (Respondent 16)

A number of respondents commented that the All Right? messages made them feel like a lot of their feelings were similar to many others in Christchurch.

I like how the All Right? campaign normalises that we all have days when we struggle. I wish the campaign had been around in 2010 when I was heavily depressed for the first time. I'm sure it would have helped then, as it does now. (Respondent 21)

.. it is so easy to feel as though your emotional life is extremely different to others in the community when you experience mental distress. It makes me aware most of my feelings are normal and common to everyone in our city. (Respondent 16)

The All Right? campaign has helped to reduce stigma of mental illness in Canterbury

Over two thirds of respondents agreed that the All Right? campaign has helped to reduce stigma of mental illness in Canterbury (72%). Seventeen respondents provided a free text comment following 'The All Right? campaign has helped to reduce the stigma of mental illness in Canterbury.' A number of respondents commented that the All Right? campaign had encouraged conversations about mental health, which was viewed as increasing '*understanding and empathy with those with poor mental health.*'

I think that through the All Right? campaign there is more awareness of mental illness and especially here in Canterbury after the earthquakes. People are talking about it more. (Respondent 39)

Overall I think this campaign is a part of a shift in our communities to have a better understanding and empathy with those with poor mental health issues. (Respondent 22)

Makes an easy talking point, almost everyone I know has heard of the All Right? campaign so I can explain what I do for work and my personal lived experience clearly when needed. (Respondent 1)

I feel like there is more understanding, mutuality, and open conversation, than before the earthquakes and the health promotion campaigns that have given people a framework to understand their experiences. (Respondent 16)

One respondent commented that All Right? has helped to reduce stigma of mental illness in Canterbury and that '*it seems like people are more comfortable talking about anxiety, depression... people are more likely to stick together, help each other out, talk about stress and challenges in a mutual empathetic way.*' This respondent commented that there is still work needed to promote mental health around less understood experiences such as psychosis, although they suggested that this is beyond the scope of the All Right? campaign.

Another respondent commented that they had noticed that the decreased stigma and self-stigma post-earthquakes had resulted in more people reaching out when they are struggling and that they had observed, '*frequent invalidating experiences when people attempt to access crisis support, this is likely to be mostly a resourcing issue...*'

I have family members, friends and colleagues who have seen crisis services in times of suicidal distress when they have felt unsafe and received no follow up. This isn't the fault of health promotion campaigns, but I do wonder whether the message of 'it's ok to be not ok' is damaging to the mental health community when this is absorbed by the services that are supposed to look after us when we are really hurting. (Respondent 16)

Many respondents commented that they thought the positive nature of the All Right? campaign helped to reduce stigma around mental illness. One respondent commented that this did not always correspond with a reduction in self-stigma.

It is always useful to see positive or accepting views of coping with anxiety or depression but there isn't always corresponding improvement in self view. (Respondent 9)

The All Right? campaign is one of the tools that I use to increase my wellbeing

Over half of respondents considered the All Right? campaign to be one of the tools that they used to increase their wellbeing (59%, n=23). Nineteen respondents provided a free text comment following this question, 'Do you consider the All Right? campaign to be one of the tools that you use to increase your wellbeing?'. Ways that the All Right? campaign increased respondents' wellbeing included: the high visibility of the All Right? campaign wellbeing reminders coupled with the knowledge that there are further All Right? resources available to help when they are needed, including the All Right? website; new ideas of how to improve wellbeing; increased awareness of others' mental wellbeing; and the importance of connecting with others.

By knowing that the All Right? campaign is there and that I can get resources to help me if I need them. (Respondent 20)

Having reminders pop up in so many... locations helps. (Respondent 9)

Try new ideas of improving my wellbeing. (Respondent 31)

I check on the website when in need to see what advice they have. (Respondent 23)

Every time I see an All Right? billboard I think about how that idea could grow in my life – when is the last time I saw friends, helped someone out, tried something new, got into the garden?... I use All Right? resources to try and have a positive impact on others' wellbeing too. (Respondent 16)

I regularly utilize many and differing (all highly innovative) consumer focused concepts to increase feelings of wellness. (Respondent 14)

I have my favourite posters/postcards handy to boost me and remind me to look after myself. (Respondent 4)

Taking notice of All Right? posters... at work, at the places I meet people, by the side of the road as I cycle... has meant I give back, be gentle on myself, get active... (Respondent 8)

A number of respondents commented that they use All Right? resources to increase wellbeing in their professional capacity.

Fifteen respondents provided a free text comment following the question, 'Please comment on why you have not used the All Right? tools to increase your wellbeing?' The largest number of respondents to this question said that they had not used the All Right? tools to increase their wellbeing because they did not need the campaign tools.

Because I don't currently feel that I need them... (Respondent 22)

They are reminders but I have an active recovery program currently. (Respondent 7)

Three respondents commented that they felt that the campaign tools were aimed at other people, not them.

I feel that they are intended for people earlier on in their mental wellness journey. (Respondent 6)

I feel like they aren't aimed towards me because a lot of the time it's aimed at Māori/Pasifika people, and I personally don't feel an issue with it, I'm very glad it's helping those who need it... (Respondent 1)

Two respondents commented that the campaign tools did not work for them.

Because all I have seen are the posters and I find the information they contain not useful for me... I don't like the emphasis on 'feeling good'/resiliency because I think it denies the experiences of those who are not all right. (Respondent 2)

They're not geared in a way that helps me. (Respondent 17)

Those respondents who used the All Right? tools to increase their wellbeing (n=23) were asked, 'Why do you use the All Right? campaign as one of your tools to increase your wellbeing?' Respondents could select more than one response. Responses included: the messages make me think about how I am feeling (63%, n=17); the messages give me ideas of things I can do to help myself (63%, n=17); and the messages are helpful (44%, n=12).

Twenty-nine respondents provided a free text comment following the question, 'What do you like best about the All Right? campaign?' Responses in order of frequency included: the campaign is accessible, *'It seems proactive and is approachable'*; the campaign is population wide; the campaign provides tips on how to improve wellbeing, *'It helps prevent mental distress from developing into mental illness.'*, *'the critically important messages and reminders to think about our wellness.'*; the look of the campaign; the high visibility of the campaign; the campaign normalises experiences; the campaign gives attention to mental health, *'...brings attention to the unspoken.'*; and the campaign is positive.

Twenty-two respondents provided a free text comment, following the question, 'What don't you like about the All Right? campaign?' Responses in order of frequency included: the campaign is all good, *'I don't have any dislikes'*; the campaign is not visible enough, *'Not common enough – only seen the posters at University and a few extras around town.'* One respondent questioned if the campaign over simplifies mental health issues. Another respondent commented, *'Unsure how to put it into words but I never felt this campaign was aimed towards me.'*

Nineteen respondents provided a free text comment following the question, 'Do you have any suggestions for the All Right? campaign?' Responses in order of frequency included: keep campaign going, *'to try and keep the All Right? campaign going for as long as possible as this is such a wonderful and useful initiative of the local DHB and their partners.'* One respondent commented, *'Lower your expectations for people with mental health issues. We can't do all those things. Just getting through the day doing boring selfcare is sometimes all that's achievable.'* One responded suggested, *'Some more youth/LGBT specific ones would be nice!'*.

Follow up interviews

Qualitative data were collected from seven tangata whaiora / mental health service users, each had indicated at the end of the survey that they would be willing to participate in a telephone interview. A total of 12 survey respondents indicated they were willing to be interviewed, of which seven were available to be interviewed. The interviews were conducted in December 2017. Interviewees are identified by age-group only to avoid potential identifiability.

Success factors

Tangata whaiora / mental health service users reported a number of success factors for the delivery of All Right? including:

- High visibility of the All Right? campaign in Christchurch, including at mental health service providers
- All Right? is a gentle campaign
- All Right? was viewed as providing reassurance that reactions to earthquakes/aftershocks were normal
- All Right? provided constant reminders to look after yourself
- All Right? provided encouragement to talk about mental health which reduced stigma and provided encouragement to seek help.

High visibility of the All Right? campaign

Interviewees identified that a success factor of All Right? was that the campaign was highly visible, including at mental health service providers.

My initial impression was that it was a nifty little campaign. I was with my partner at the time, we both were commenting on it and we kept on seeing more of All Right? around. We thought it was cool and a lot of them were posters on Māori culture... After that we've seen All Right? at the Anxiety Disorders Unit and I see it at MHAPS. (15-29 years old)

I've seen it when I've been into Hillmorton... I've seen it in libraries, I've seen it in papers, I've seen it in community houses, I've seen it at my doctor's, I've even seen it on buses, I've seen it in WINZ offices... I've seen it in all sorts of places. I've even seen it on fences when I've been driving around in great big billboard like styles. (45-59 years old)

All Right? is a gentle campaign

Interviewees identified that a success factor of All Right? was that the campaign is gentle in its approach. Interviewees liked that the campaign was not focused on mental illness.

Generally it was a gentle campaign... a general nature was part of its strength I think. It's not focussed on teen suicide or depression or male depression or post-traumatic stress... a gentle general campaign and I think that's its strength. (45-59 years old)

I was really pleased to see it going on and drew some comfort from All Right? (45-59 years old)

I thought All Right? was a good way to get across to people without being too much in their face. (45-59 years old)

I think All Right? have got it pretty right actually. 'Cos when I looked at the campaign I thought whoever's done this has actually put a lot of thought into it and asking... so it doesn't come across as stigma or judgemental 'cos it's been asked the right way. (45-59 years old)

The simple messages encouraged interviewees to repeat the messages to others:

Yeah I thought the All Right? messages were real cool, colourful and simple messages... I enjoyed looking at all the different ones and then eventually I found myself kind of repeating the messages to other people. (15-29 years old)

Reassurance that reactions to earthquakes were normal

Examples of messages or resources that were particularly useful, included messages that reassured people that their reactions to the earthquakes were normal.

...it's parts of the All Right? campaign that normalised the stuff that was going on [that made a particular impact]. It's OK to feel a bit out of sorts, it's all right to be scared... (45-59 years old)

...for me I think it just normalises it... like the PTSD stuff, quite traumatic every aftershock and even the building noise at the moment... that if someone else was in this situation they would feel the

same thing. So for me it destigmatises it... because I begin to think, is this just me?... but for me it ...was like OK yeah I'm not the only one that feels like this and going through this. (15-29 years old)

The campaign was viewed as encouraging people to think about their mental health.

Initially it was the normalising feeling but as it's gone on and as it continues I think it's real spread is in reminding the community to give some thought to their mental health. (45-59 years old)

A number of interviewees commented that they thought the reassurances that their reaction to an earthquake was normal was particularly important to them as tangata whaiora / mental health service users.

I guess the more All Right? messages that came out as more quakes happened and aftershocks, I found myself relating more to some of the messages... having a mental health background and having the diagnosis of post-traumatic stress disorder... Often when aftershocks would happen, I'd be thinking is my reaction normal or is it taking it a bit far? (15-29 years old)

Constant reminder to look after self

Interviewees identified that a success factor of All Right? was that the campaign provided constant reminders to look after oneself. Examples given of how the All Right? campaign had changed a behaviour included:

- thinking about my mental health, '*...for myself it makes me check in on myself...*'
- connecting with others about how they are feeling
- encouraging to connect with others or take a break.

It was these constant reminders of small easy tasks that were good... the five ways to wellbeing was one of them and it was good to be reminded of that. And it was really neat to be out around town and see an All Right? billboard, again it reminded me to be a bit more mindful or a bit more grateful or to acknowledge somebody. (45-59 years old)

...in town I'll often bump into an All Right? poster reminding me to do a bit of self-care. So it's nice to have those reminders to go past the billboard there's the current All Right? men's health campaign. It's good to have these reminders to take a moment, have a thought and acknowledge some other things that are going on. (45-59 years old)

Well actually when the postcards were out, I think in the earlier days of the campaign I actually had a couple of them stuck on my diary so that whenever I was out doing stuff... I had that reminder right there... (15-29 years old)

When I do see an All Right? poster it does remind me that it's all right if I'm not feeling as well as I should be or that I am doing better than I thought I would be, and it's a constant reminder to look after myself... I see them quite frequently, and my partner, we do the same thing, we like to talk about them when we see them now. (15-29 years old)

... especially on social media 'cos there's so much going on there at the moment when you'll be browsing through and then I'll see they'll be posters from All Right? update and it just reminds of it... it's OK, I may be a bit stressed out at the moment but I'm doing all right and even then on line it's quite good 'cos I'm on line quite frequently... (15-29 years old)

All Right? makes me question how I'm feeling that day and am I in a good space?... for myself it makes me check in on myself. So I think it makes you ask yourself those questions, is that where you should be and is that what you're feeling? I do think it's a good thing... I think the fact that the pictures and the questions are asked in a way that you just stop and think, am I actually feeling OK today? Or am I stressed or am I tired or am I overloaded?... sometimes I realise maybe I just need to go to the movies or I just need to see a friend for a while. (45-59 years old)

All Right? helping to manage wellbeing

Interviewees discussed how they used the All Right? campaign as one of their tools to manage their wellbeing. The ways that the campaign is used to manage wellbeing included the five ways of wellbeing.

[The All Right? campaign] is certainly one of the tools that I use... as I jump into the All Right? campaign from posters and billboards and so on, because it keeps turning up because I keep being exposed to it. I'm reminded there in that moment to do something. So the repetitiveness and the consistency of the messages, that's what reminds me to do something. (45-59 years old)

...there's one [All Right? message] that has become my catch phrase at the moment, I've got depression as well, and as each aftershock happened each hurdle you go through relating to the earthquakes you feel like shit.. at the moment I have earthquake repairs and delays you feel like shit's happened. (15-29 years old)

...the five ways of wellbeing, a reminder of that's really helpful. (15-29 years old)

One interviewee discussed All Right? as a '...secondary treatment'.

My tools to manage my anxiety... breathing techniques and medication and treatment... I feel All Right? is almost a secondary treatment for me, 'cos every time I see them it reminds me to think about myself and how I'm doing. (15-29 years old)

Two interviewees, as well as being mental health service users, also worked in mental health care. They discussed how they use All Right? resources in their work.

I work in mental health care so the people that I work with I'll often remind or point out some of those things so the habit stick. I've picked up a number of those and used those with people who are trying to build new habits... the campaign in general I've used those tools and resources that can be provided to the community, in the community with people that I work with. (45-59 years old)

I do make an effort to talk about them especially when I see them, like the new campaigns come out. I will point them out to my partner and we'll talk about them... I make a particular effort now to talk about them at work as well because it definitely is such a good tool that it gets talked to other people from other cultures and backgrounds for me at work... (15-29 years old)

I have been along to the All Right? website... when I get the emails from the campaign, and the All Right? campaign resources have become available, I'll often go on to the All Right? website for one reason or another to have a look at what's new, what's happening. (45-59 years old)

Encouragement to talk about mental health / reducing stigma / encouragement to seek help

Interviewees believed that the All Right? campaign had reduced the stigma of mental illness in Christchurch.

All Right? had reduced the stigma of mental illness in my eyes. Basically everyone in Canterbury's gone through a traumatic event now. (15-29 years old)

All Right? has helped to destigmatise mental illness a bit... being able to be open and talk a bit about it... (15-29 years old)

[All Right?] it's done a good job in terms of awareness. (45-59 years old)

One interviewee commented that although she believed that the All Right? campaign had helped to reduce the stigma of mental illness, there was still a long way to go, to ensure people understand mental illness.

I think All Right? has [helped to reduce the stigma of mental illness]... but I still think there's a hell of a lot of judgement and stigma out there because of people that don't understand mental illness. (45-59 years old)

Interviewees discussed the link between reducing the stigma of mental illness and people seeking help in Christchurch, including specifically discussing the All Right? cultural wellbeing campaign which has encouraged people to seek help for mental health.

Then All Right? had the campaign for more variety of people [All Right? cultural wellbeing campaign] to give people who come out recently... We've got a few friends who are struggling with the idea that getting help with their mental health is actually OK... One friend who is from China in particular, he was very tabooed to look after your mental health ... that started him thinking maybe it is OK, I am in New Zealand now, this is my home and these people look after themselves and their mental health... and he's started getting some mental health treatment, medication started... (15-29 years old)

I encourage more people to go out and say look if you need help go and speak. It's not a bad thing if you need help, you should go and ask for help... So at all stages in our life people need to ask. I can take that from my own personal experience. For a long time you shut it away but you get to that stage you need to go and ask. (45-59 years old)

All Right? campaign needs to continue

Interviewees discussed their view that the All Right? campaign needed to continue.

Because I think that the event has cast a long shadow... it's still important and there is an ongoing and growing need for better mental health care, and I think that the All Right? campaign is a... response that just helps remind everybody. (45-59 years old)

The only thing I would say is keep, for the DHB to keep funding it and for it to keep being rolled out. (45-59 years old)

I think All Right? is doing a great job... just keep it up. (45-59 years old)

One of the reasons given for the need to continue the All Right? campaign is the secondary stressors following the earthquakes.

The All Right? campaign helps you to rationalise things... I live in a complex and half of us have just moved out in October for repairs to begin... the whole thing has been delayed... recognising it's what I'm going through, that it might be coming up seven years but you know people are still facing that....
(15-29 years old)

A number of interviewees discussed how they believed the All Right? campaign would be useful outside of Christchurch.

I've often thought All Right? should be rolled out nationwide... anything that gets the community having conversations about this stuff is progress. (45-59 years old)

A suggestion was made that All Right? develop a campaign targeting resources to the LGBTQ community.

I'm part of the transgender community myself, that's something that I personally would love to see in the All right? campaign, there's such a big struggle and we don't have anything like that... I work with the transgender community, the LGBTQ, I work with a lot of people in that mental health sector as well... it's such a need at the moment... (15-29 years old)

Key stakeholder interviews

Qualitative data were collected from key stakeholders (n=6) identified by the All Right? team. Interviews were conducted between October 2017 and March 2018.

Awareness of the All Right? campaign

All key stakeholders became aware of All Right? through their connections with key actors involved in the creation and implementation of the campaign. Some of the key stakeholders were on committees that have had an advisory role for the All Right? campaign, for example the Greater Christchurch Psychosocial Committee and Governance Group and the Mental Health Leadership Workstream.

Initial impressions

Key stakeholders discussed their initial impressions of the All Right? campaign. Interviewees reported that they were 'very impressed' with the All Right? campaign, for themselves as Canterbury residents, as well as for others.

I was very impressed with the effort made to normalise distress. I mean intense distress isn't normal but some levels of distress are normal and so just the very idea of being told that it's OK to feel edgy sometimes, it's OK to not be at the top of your game, it's OK to be worried, all that stuff. That stuff I thought was really valuable and also the corollary, it's OK to feel good, you're allowed to actually have good days and feel good without feeling like you're insulting somebody or not taking it seriously. I did think it was a great message. (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

I've got a 10-year-old daughter and a 17-year-old son and both of them would be able to tell you about the All Right? campaign and some of the messages out of it. And I've got a partner who's a tree surgeon out and about, blokey... and he could tell you about the All Right? campaign. (GP Cashmere / Lead mental health, Pegasus)

One interviewee discussed being ‘*mildly cynical*’ initially, and then ‘*pleasantly surprised at the impact and the acceptance of the campaign.*’

I suppose initially I was a little unsure how things would go but very quickly saw the effect that it [All Right? campaign] had on people and because I’m like everyone else in Canterbury and living the dream, I actually took a whole lot of the little [All Right] flags on bamboo poles and put them across the front of my house. I think this was at about our 6th EQC assessment... so I guess I was probably mildly cynical at the start but pleasantly surprised at the impact and the acceptance of the campaign... (Nursing Director of Mental Health, CHDB)

One interviewee commented that his first impression was that the campaign was ‘*something that’s absolutely required for the community.*’

Well look my first impressions were... it’s something that’s absolutely required for the community and I premised on the back of police being under a fair bit of pressure around mental health and around the wellbeing of community members in Canterbury but predominantly in Christchurch. (District Commander, Canterbury Police)

High visibility of All Right? across the Canterbury District Health Board including within mental health services.

A number of interviewees commented that they were aware the All Right? campaign was a whole of Canterbury population campaign and was not targeted at mental health service users. It was noted that the All Right? campaign had a high presence across the Canterbury District Health Board including within Canterbury mental health services.

So when we set up the All Right? campaign we were really thinking about trying to address things across the community and not separating out people with mental health issues or users from everybody else.... we recognised more and more that actually what we were saying is valuable across the board... the [All Right?] posters and the initiatives have been used across the DHB, so in a lot of the mental health facilities and the physical health facilities there’s been quite a presence of All Right?, encouraging everyone, staff, users, everybody, saying we can all get whatever we can out of this... (Head of Mental Health Clinical Research Unit, University of Otago)

Interviewees felt strongly that the All Right? campaign should not be targeted to mental health service users. Some interviewees commented that the reason they believed that All Right? works for users of mental health services is that the campaign is population wide.

I actually think that if you look at the campaign and what it’s doing, it’s there for the population and it’s a population intervention. The fact that it works for people with a diagnosed mental illness as it works for people without is a really good thing as it shows that it’s hitting the mark... I think it’s a good thing that it’s general, that it’s broad and that people from a lot of backgrounds and stratas of society and different experience can identify with it is good... I think it’s the fact it’s the same for everyone that’s the good thing. So it’s the brief. It’s very clever messaging. It’s very clever that the appeal is so broad. (Nursing Director of Mental Health, CHDB)

A number of interviewees noted that the All Right? campaign is not for people with severe mental illness.

I wonder too whether someone who had very significant mental health problems, whether they would feel that this is not the right fit with them... it's not really going to help them... on a one-to-one basis I think you could make sense of it and talk through well, that is really hard but there are some aspects of this that you could utilise and use... is there a mismatch in terms of when someone has severe mental health needs. Does this [All Right?] work? (Head of Mental Health Clinical Research Unit, University of Otago)

I think that when one is in the middle of an episode, which is one way of describing what I'm trying to talk about, they're much less attuned to things that are outside themselves. So there's less insight, so there's less ability to take in external positives. (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

One interviewee commented that mental health service users often experienced 'peaks and troughs', noting that sometimes, for example, 'when there's been a depression there's nothing from outside that gets in.'

I guess my experience of our clientele is that when we're all ticking along and we're stable and everything's fine, then we are aware of all the stuff that's around and we can take a positive message... but for our community there are peaks and troughs and so I think that the mental health consumer population probably goes through stages where there is no awareness of it [All Right? campaign] at all and it can't have any kind of a positive impact 'cos they're too intensely involved in what's going on for themselves. (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

The All Right? campaign has a similar impact on those who have been diagnosed with a mental illness to the rest of the Canterbury population

A number of interviewees reported that they believed that All Right? was effective for all the Canterbury population, post-quake. They made the point that this included those people that were users of mental health services.

I was unsure how acceptable and practical this [All Right? campaign] would be for the people who were in the midst of this, and particularly like for our guys using services [Hillmorton] and how this would touch them and how they would feel about it. Would they be motivated or interested?... the impression I get from people is that it's been embraced in a similar way to how the rest of the community embraced it. And quite a few people have seen that as a supportive thing, and it's been a plus. (Nursing Director of Mental Health, CHDB)

There have been a couple of guys [patients at Hillmorton hospital] that I've talked to about it. One I asked about it after one talked to me about All Right? Just in that we were chatting at the coffee machine and those [All Right?] posters were there... it makes people feel connected. It makes them feel part of something bigger and that they're the same as everyone else, and we're all right. That's what I got from that. And one of these people had used the website. (Nursing Director of Mental Health, CHDB)

It was noted the All Right? campaign messages fit well with 'elements of recovery in a mental health terminology'.

I think that it's accessible... It's careful not to stigmatise people, it normalises and generalises experience... it's restorative and it's hopeful. They're all the elements of recovery in a mental health terminology... So it fits really well with that. These are the things that work well for people with mental illness, who've suffered from mental illness. It's all of those things. So I think the positive messaging, the non-stigmatising, the saying that this is part of your human experience rather than focussing on the illness model is a really good thing.
(Nursing Director of Mental Health, CHDB)

One hundred percent [think that someone with mental illness might use some of the All Right? tools]... I consider that part of what we call step care and mental illness so the base of it is, are you eating well, are you going out with your friends, are you not smoking, are you sleeping properly... what are you doing that's fun? Those are message for all human beings and then obviously you layer some other stuff on top of that for people that as they become more unwell... what we're trying to do is stop the flow through to mental illness and so building resilience and those messages around the community are the aim of that's what I see the [All Right?] campaign as. (GP Cashmere / Lead mental health, Pegasus)

All Right? was viewed as effective for all the Canterbury population post-quake, including those who were users of mental health services. This was believed to be true both initially, dealing with the impacts of the earthquakes, and also dealing with secondary stressors.

..the campaign has also shifted over time... first it was much more dealing with the impacts of the earthquakes and I think that was accessible to most people because everyone was in the same boat. The earthquakes were a massive ongoing event for everybody so made a lot of sense for everybody. And then subsequently the issues shifted a bit in that it was more the secondary stresses. And the campaign also shifted to address those issues. So again I think that met the need I would have thought for the whole population, meaning the general population and people who were mental health users, I would think. (Head of Mental Health Clinical Research Unit, University of Otago)

A number of Interviewees indicated that the reason the campaign was useful for everyone, including users of mental health services, was that the campaign was based on the five ways to wellbeing.

It's aspirational, it's hopeful and it's positive, as in all people can all use the five ways for example... all of us can improve our mental health, and it's something we have quite a lot of autonomy to do so. Unlike illness, it's not just mental, it's either physical illness that might be beyond just an ordinary person we need to get health professional input into, so it's immediately quite disempowering to have that conversation straight away, whereas we're immediately all about... here's some steps that we can all do to feel better and look after ourselves... (All Right? Campaign Project Lead, Mental Health Foundation)

One interviewee commented that some mental health service users might have the feeling that the All Right? campaign is for everyone else, but still believed mental health service users were engaged with the campaign.

I probably thought that many people [who were mental health service users] would respond by thinking, that's not for me, that's for them, that's for the population who hasn't got a long-term experience of mental illness and everybody's upside down right now and that's reassuring for them. I would have thought that they would have had a concept of

otherness... It didn't keep us from putting the posters all over the whole building... (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

Although this interviewee reported that some mental health service users might have a feeling of 'otherness' when they view the All Right? campaign, they believed that the level of engagement with the campaign from mental health service users was similar to the rest of the population.

[what do you think has been the level of engagement with the All Right? campaign from mental health service users?] *I would think it was pretty much average. They would see the posters, we put up compliment posters around the building and the tabs disappear quite regularly and there's always a poster, whenever anyone comes out there's always one that's available out in the foyer and those disappear really regularly, so service users would certainly be engaging in that bit. We were interviewed about something and a poster was made from our perspective and that sits out there, so our names attached to that. So I would have thought it was pretty averagely out there for them as for everybody else. (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)*

Fewer mental health service admissions initially post-earthquake

A number of interviewees noted that, '*we expected that people with mental health difficulties might be more impacted than perhaps the general population*'. It was also noted that to begin with, this was not the case.

When the earthquakes hit we expected that people with mental health difficulties might be more impacted than perhaps the general population because some of the literature suggests that people with previous anxiety and depression may be at risk. And to start with I think we did not find that. So the evidence for that will be that the use of the inpatient beds actually went down for about the first year and then picked up again. We also surveyed our patients, some of them who were under the care of the Anxiety Disorder Service and they seemed to fare no better but no worse than the general population, meaning that most were fine but a significant minority had significant difficulties, which is what we found in the general population as well... So that would be early on, the actual acute impacts of the earthquakes. (Head of Mental Health Clinical Research Unit, University of Otago)

I guess a weird effect of the earthquake for us was that we [Hillmorton Hospital] had the lowest period of acute admissions in living memory soon after the earthquake... and this happens in all natural disasters, wars, things like that. And that's about social connectedness and social acceptability. Immediately after the earthquake XXand I were walking down the street and we have got something in common. We've got shared experience, something to talk about. I'm no longer that weird, slightly dodgy guy round the corner... So this is the lived recovery, so actually lowers your mental health admissions and things. It's a slightly different story now. But helps build that sense of community, that sense of social connectedness and we're in this together. (Nursing Director of Mental Health, CHDB)

One interviewee commented that they had noticed consumer-led mental health groups often are keen to support mental health initiatives, including the All Right? campaign, because there was a belief that mental health service users would be more vulnerable to the earthquakes.

I think that there's a heightened engagement from service users or mental health consumers for anything that comes out around mental health and from my experience with the Mental Health Foundation over the years... it's also embraced by consumer-led groups and awareness groups around the country really readily because it's just about the general topic of mental health... So having better awareness of our mental health is good and useful for anybody, but it feels like those groups and people with experience have a better grasp of it sometimes, just hard fought knowledge and experience so they jump at the chance to raise awareness and support programmes that do that. I feel like that continued to be the case for All Right? in that work here because there was also initially a sense from other services and agencies that people with experience of mental illness might be more vulnerable to the impacts of the earthquakes. And whether or not that worked out to be true or not, I think it's just been that there was that readiness to be involved. (Nursing Director of Mental Health, CHDB)

The impacts of secondary stressors

A number of interviewees believed that the secondary stressors of the earthquakes may have had a greater impact on mental health service users.

As time went on, I think that the secondary stresses impacted much more. So again on everybody but, well the use of mental health services then went up so is that more people being impacted or is it the same people having worse impacts, and we don't necessarily know the answer to that, and probably it's a bit of combination of both. Certainly the lack of accommodation and the impact on housing had a significant impact on that. (Head of Mental Health Clinical Research Unit, University of Otago)

Key stakeholders discussed the magnitude of the effect of the secondary stressors on the Canterbury population. They discussed a success factor of the All Right? campaign was that it had ongoing research and was adapted to help the population deal with the secondary stressors.

I know when I've been asked at some difficult community meetings where they have experience in a lot of loss of the houses, ongoing stress, all that, which is really big. Talking about the five ways to wellbeing is like well, how is that going to help me? My house is still wrecked, this is just pie in the sky, how can it possibly help, but actually on a one-to-one basis you can talk with people and help them recognise that yeah that stuff is terrible but there are some things that they can do that can help them manage that. So it felt like there was a bit of a mismatch with people who'd been severely impacted in terms of loss of houses and things... I think the campaign shifted because a massive plus of the campaign was doing the ongoing research, so actually it wasn't just saying, this is what we've developed, that's what it's going to be... it was much more fluid than that and it did change in response to the needs. I think [All Right?] did recognise that the secondary stresses were becoming really big and shift for dealing with that. (Head of Mental Health Clinical Research Unit, University of Otago)

One interviewee described the All Right? campaign operating as the population goes through the secondary stressors as 'it's not the ambulance at the bottom of the cliff.'

When I first arrived here two and a half years ago, we did a strategic assessment and part of that was to sit down across other agencies and look at all the information and what it tells us and the issues. Now not the issues directly related to crime and crashes which is our core

business but a big part of it for us is what's causing that crime. So what's causing that stress and anxiety in people's lives which can often be displayed and things like family violence and family harm... looks at all the family harm incidents that occur in Christchurch. So there's 200 a week and we look at all the information we can around that... we'd be able to then deploy a plan around what's best and of course sometimes one of those things is dealing with those issues of wellbeing... very much interrelated just purely because we're a people organisation. We're about caring for people and we knew that from the strategic assessment that 5-10 years after a major disaster you would see the wheels fall off for some people, and we're starting to see that. And having the All Right? campaign operating it means it's not the ambulance at the bottom of the cliff. (District Commander, Canterbury Police)

All Right? campaign has had a positive impact on the stigma of mental illness

A number of key stakeholders believed that the All Right? campaign had a positive impact on the stigma of mental illness. The All Right? campaign helped people to talk about how they were feeling post-quakes. All Right? normalised emotional experiences and the language around that which, they believed, has reduced stigma of discussing mental health.

...my feeling is that it [All Right?] has helped reduce stigma... the earthquakes... we were all not sleeping, feeling very jumpy, feeling anxious, moods more variable. So the whole experience of emotions was much more to the fore for people, but that by itself wouldn't have had an impact on stigma if it hadn't been for the likes of the All Right? campaign... trying to help people see that how they're feeling they could talk about that and explain that, and so I think it... normalised emotional experiences and that language around that. And so I think that has reduced stigma... it was really important, people really got it... (Head of Mental Health Clinical Research Unit, University of Otago)

I think that it's [All Right?] been one of the mechanisms following the quakes that's allowed for self-reflection and allowed a bit of self-awareness to occur, and for people to talk about, or to understand impacts on mental health as distinct from mental illness. And that sense of at least coming some way closer to understanding what mental pain must be like. (All Right? Campaign Project Lead, Mental Health Foundation)

...What I do think has happened in society and how much can be attributed to All Right? is that people are now seeing anxiety and depression as responses to external stimulus..., they never had a language for it before, they never had a concept of it before, but now they have a concept that the earthquakes, relationship breakup, health challenges can result in episodes of anxiety and/or depression and that's become more understood in society. And I do think that could be part of the whole package of what Canterbury put together for its population post quakes including All Right? (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

[All Right?] enables people to feel comfortable in having the conversation... (District Commander, Canterbury Police)

One interviewee believed that the All Right? campaign helped people to understand the difference between mental wellbeing and mental illness.

...there's no doubt that there is a better discussion and understanding of mental wellbeing from the All Right? campaign, with no stigma. People are just happy to discuss that now

without thinking they were discussing mental illness. People didn't really understand the difference between those two. (GP Cashmere / Lead mental health, Pegasus)

Some interviewees reported they believed that because All Right? is a campaign for everybody it reduces the stigma around mental health issues.

...just that it's a general message for everybody so it reduces stigma and makes it everybody's concern not just a direct concern of theirs [mental health service users] essentially. And that doesn't mean it doesn't benefit them. It's just that that's a nice base level for all of us to achieve... (GP Cashmere / Lead mental health, Pegasus)

Interviewees reported that because All Right? is about positive mental health, it is easy to talk about openly and without stigma.

.. it's a very egalitarian, mental health is for everybody sort of approach... it eschews in some ways the issue of stigma and discrimination because it's about positive mental health which is something everybody has... I think that's where there's a lot of strength. (All Right? Campaign Project Lead, Mental Health Foundation)

One interviewee suggested that possible evidence for All Right? having a positive impact on mental health stigma, is that there have been numerous reports of people seeking help as a result of the All Right? campaign.

...evidence would be the numerous stories we get of people seeking help as a result of the campaign. So for a lot of people they said that is a huge step going and seeking counselling, or going to their GP and saying I'm not coping, I think I'm going to need a little bit more help... And so for people to arrive at that place, it's a huge step forward in the rest of their life... that in itself will help reduce stigma... even if they're just reaching out, the recognition that there's something that's more than the resources they had to deal with and they reach out for some help... (All Right? Campaign Project Lead, Mental Health Foundation)

Promoting All Right?

A number of interviewees reported that All Right? was promoted at their workplace.

... the campaign's alive for us and we're kept up to date. We've distributed the stuff around here a lot [Hillmorton hospital] because our staff are a microcosm of society as consumers and you know a lot of them, well they're just part of the world and they find that helpful too.... there's all these great little reminders... to take a moment. It reminds you to think about how you talk to people... it's just all really positive, hopeful messaging and works for us in our environment. (Nursing Director of Mental Health, CHDB)

We mention All Right? to other sector workers and students who are coming or anybody who comes to us... there was a visitor from Japan the other day and she was coming to compare her experiences with Christchurch post quakes, and we showed her all the All Right? stuff because it was such a positive thing that was available following our disaster, so she was very interested in that. (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

The All Right? roller-coaster was visible at the Central Christchurch Police station, at the time of the interview.

Interviewees discussed how the All Right? campaign was adapted by staff at their workplaces, where All Right? enabled discussion of mental health.

I'd say particularly amongst staff we do [promote All Right?]?... do I specifically in a consultation, no, but mainly because... that information is now coming as... you should have a look at the All Right? campaign. It's coming as a general message... we still talk about various things like that at staff meetings around our own health... I think these kinds of campaigns definitely made that easier. I very much doubt you'd get it in general practice in Auckland sitting around talking about how are we looking after ourselves... I'd be very surprised... (GP Cashmere / Lead mental health, Pegasus)

...indirectly our staff picked up on their own little sub-project about All Right? and it was called Empty Chair. So Empty Chair was just in policing obviously, just the nature of policing as a lot of stuff that goes on in mental health affects our own staff. So one of our staff about six months or a year ago came forward and said I'd like to be able to tell my story... I said absolutely and as a result of that about eight other officers came forward and were willing to be videoed telling their personal story about how they'd been affected by their own mental health crisis and really, really powerful. And what that did, because here were people that other people admire and respect within the policing arena, stepping up and going, telling their story. (District Commander, Canterbury Police)

Staff at both Hillmorton Hospital and MHAPS discussed wearing All Right? badges, in addition to All Right? posters being visible at both Hillmorton Hospital and MHAPS, at the time of the interview.

I've got one of our [All Right?] buttons up there and I always used to wear them on my lanyard and whenever I go to national meetings and things, I tended to do it with the Ministry... (Nursing Director of Mental Health, CHDB)

We were wearing the [All Right?] buttons back in the day... we may even have handed them out.... (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

Belief that All Right? is still needed

Some interviewees reported that they believed that the Canterbury population is only part way through the recovery and that the All Right? campaign needed to continue.

The Port Hills fires, even though it didn't directly impact on a lot of people, indirectly seeing your city under threat again put a lot of people up in their anxiety stakes. So I think yeah, I'd be concerned if we tried to walk away from the realisation that the 5-10 years we're only in the middle of that... We know that for our family harm work we're seeing an increase in family harm. Child protection teams, we've got an increase in child protection cases. All indicators that family environment isn't the best... I don't think we're through it... (District Commander, Canterbury Police)

..for me that the restorative nature of the All Right? campaign and the things that it promotes and the proactive stance that they've taken, it's become integral to the wider system. And I guess we all have fears... And what are the plans and what is the future and is there a back-up plan if it does go, and how do we retain the positive messaging... if it is going to be pulled what bits do others need to pick up?... I do see the need for it to continue. I also on a pragmatic point of view think that we have to have a strategy should that not happen. (Nursing Director of Mental Health, CHDB)

Like it's all very well for everyone to say it should continue and saying that we're just paying for it to continue but responsibly we have to at least have a back-up plan of whether funding to drastically change or was it to disappear... what is their plan?... I think that there's a

government's responsibility there... I think it almost becomes part of promoting a healthy society doesn't it, like it fits into our wider suicide prevention stuff like connectiveness... People being able to talk to each other, so it's about building a healthy society. It truly is mental health, not mental illness focussed. (Nursing Director of Mental Health, CHDB)

All Right? contributing to suicide prevention

A number of interviewees reported that they believed All Right? contributed 'towards a society that would have less incidents such as suicides...'

[All Right? campaign] It's the sort of thing that moves society towards a society that would have less incidents such as suicides... 'cos it promotes connectiveness, it promotes empathy, it promotes all those things... that prevents a whole lot of other things. It's not just that, it's everything else. It lowers crime... (Nursing Director of Mental Health, CHDB)

Ideas for future developments of the All Right? campaign

One interviewee suggested that All Right? could develop a resource specifically for when police are called out to anxiety-related situations, where a crime has not occurred, so that they could provide an appropriate All Right? resource in this situation.

... you know there's 200 families a week in Christchurch alone, not Canterbury just Christchurch alone, that we deal with and a disproportionately high number of those people have got a lot of anxiety or there's some mental health issues going on for them... so often we'll turn up and, if there's not been an actual evidence of a crime occurring, we're quite limited as to what we can do, but having something that we can point them to would be useful... even like an app. (District Commander, Canterbury Police)

One interviewee discussed how, as mental health service user advocates, they value being involved in the process of developing resources.

.. the reason co-designers, the hot word right now is because we do get a little bit tired of being invited to the last meeting to see how it all was written and if there was anything that we have a big problem with because it's going to the printer tomorrow... 'Cos that's just tokenism, so we get a bit peeved... We want to sit at the table with you while you're designing it. (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

Another idea from an interviewee was that All Right? could build from the campaign's positive messages to develop a campaign improving communities' thinking around the LGBTQ community and transgender education.

...my opinion is that the All Right? campaign has started the foundation of community communication and it has really built a solid foundation and is... recognisable as positive messages... When was the last time you looked at the night sky, how long's it been since we had a mate date. I'm very strongly positive about all the men's masculine stuff that was incorporated... a big positive from me... this foundation does offer an opportunity for more different areas. It would be lovely if there was something that was like the All Right? campaign that could be done in a way that would improve communities' thinking around LGBTQ stuff, in particular transgender stuff. It's a huge thing, people are confused... If there was anything that could gently year by year put out positive messages of being an inclusive society even for things that we're a little bit ignorant about or naïve about... That would be a lovely thing. (Service Delivery Manager of Consumer and Advocacy Services at MHAPS)

Conclusion

The findings of this evaluation indicate that the All Right? campaign has high reach and overall positive impact (Canterbury District Health Board, 2017) within a self-selected sample of Tangata whaiora / mental health service users. While comparisons are limited by methodological differences, there are many broad similarities in the findings for Tangata whaiora / mental health service users and the general Christchurch population.

Tangata whaiora / mental health service users reported a number of success factors for the delivery of All Right?, including the high visibility of the All Right? campaign which provided constant gentle reminders to look after yourself and encouragement to talk about mental health, which were perceived to have reduced stigma and provided encouragement to seek help.

Key stakeholders reported success factors that mirrored those of Tangata whaiora / mental health service users. Key stakeholders liked that All Right? was a population wide campaign and that the campaign normalised emotional experiences and the language around them. All Right? was viewed as a message for everybody, which reduces the stigma around mental health issues. Key stakeholders viewed All Right? as effective for everyone, inclusive of mental health service users. This was believed to be the case both initially, dealing with the impacts of the earthquakes, and also dealing with secondary stressors. There was a strong belief that the need remains for the All Right? campaign.

The following recommendations are made based on the evaluation findings:

- That All Right? continues to promote wellbeing in Canterbury. Key stakeholders and interview respondents reported that the need for All Right? continues in Canterbury, particularly related to secondary stressors associated with the earthquake events.
- That All Right? continues to have a high visibility in Christchurch, including within the Canterbury DHB and other mental health service providers.
- That All Right? considers targeting an All Right? campaign specifically at improving community thinking around LGBTQ⁴ and transgender⁵ education.
- That All Right? considers developing a resource specifically for public sector workers, such as the police, that would be suitable to provide to people in acute distress situations.

⁴ Lesbian, gay bisexual, transgender, queer.

⁵ Denoting or relating to a person whose sense of personal identity and gender does not correspond with their birth sex.

Appendix 1

Survey design for tangata whaiora /mental health service users.

All Right? would love to hear what you think about our campaign. We are especially interested in how the campaign has been perceived by tangata whaiora /mental health service users. Your views will help ensure that All Right? is meeting the needs of everyone in Canterbury.

All questions are voluntary and you can stop the survey at any time. You will not be identified and identifying information is not included other than for those that indicate they are willing to participate in a follow-up interview. That information will only be used for that purpose.

- Are you aware of the All Right? campaign? (a wellbeing campaign for the people of Canterbury after the earthquakes). (Yes / No / Unsure)
- Which aspects of the All Right? campaign are you aware of (select all that apply)?
- All Right? posters and billboards with tips and tricks for wellbeing
- All Right? social media (such as Facebook)
- All Right? partnering with community activities (such as Body Festival, Walking Festival)
- All Right? in newspapers
- All Right? research
- All Right? newsletter
- All Right? hidden strengths quiz
- All Right? poster generator
- Other (please specify)

Below are a series of statements, we would appreciate you providing the response that best matches your experience of the All Right? campaign.

- The All Right? messages have meaning for me
(Agree strongly / Agree slightly / Disagree slightly / Disagree strongly)
- The All Right? messages make me think about how I am feeling
(Agree strongly / Agree slightly / Disagree slightly / Disagree strongly)
- The All Right? messages are helpful
(Agree strongly / Agree slightly / Disagree slightly / Disagree strongly)
- The All Right? messages give me ideas of things I can do to help myself or those around me to feel better
(Agree strongly / Agree slightly / Disagree slightly / Disagree strongly)
- I have done activities or things as a result of what I have seen or heard from All Right?
(Agree strongly / Agree slightly / Disagree slightly / Disagree strongly)

- The All Right? campaign has helped to reduce the stigma of mental illness in Canterbury (Agree strongly / Agree slightly / Disagree slightly / Disagree strongly)

9. Do you consider the All Right? campaign to be one of the tools that you use to manage your wellbeing? (please tick the box)

(Yes/ No)

If yes, please comment on ways that you use the All Right? campaign to manage your wellbeing

10. Why do you use the All Right? campaign as one of your tools to manage wellbeing? (select all that apply)

- the messages are helpful
- the messages make me think about how I am feeling
- the messages give me ideas of things I can do to help myself
- Any additional reasons?

11. What do you like best about the All Right? campaign?

12. Do you have any suggestions for the All Right? campaign?

Below are some questions about you, remember that all questions are voluntary and you can stop the survey at any time. The data collected will help to ensure All Right? meets the needs of everyone in Canterbury.

13. Have you ever been diagnosed with a mental illness or condition?

(Yes / No)

14. Was the diagnosis of a mental illness or condition following any the Canterbury earthquakes?

(Yes / No)

- Demographic information (age / gender / ethnicity)
- Invitation for follow up interview

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