ImpulSE
Supported Education for People with Psychiatric Disabilities

Progress Report
Public Part
Project information

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Executive Summary

The purpose of the Erasmus ImpulSE project is to develop and implement Supported Education services (Toolkit) in European countries and to establish a European Network of Supported Education (ENSEd). Supported Education (SEd) is defined as the provision of individualized, practical support and instruction to assist people with psychiatric disabilities to achieve their educational goals (Anthony et al., 2002).

ImpulSE is an Erasmus Multilateral project (2013-2016) and is based in four countries: Czech Republic, Netherlands, Norway and Portugal. The partnership covers Europe well - North, West, East/Central and South - bringing variety in experience and good practices. As the organizations of the partners in Norway and the Netherlands are based at universities and the organizations of the partners in Czech Republic and Portugal are private organizations based in mental health care, the partnership brings diverse and complementary experience and expertise.

The toolkit will be based upon needs- and resources assessments (interviews with students with psychiatric disabilities and professionals, and literature reviews) from the four participating countries, as well as good practices from these.

The toolkit is aimed at students counsellors, trainers, teachers and tutors, mental health managers and workers, and local authority officials involved in policymaking concerning people with psychiatric disabilities. It will enable field workers to improve guidance and counselling to students/young adults with psychiatric disabilities, supporting these in their educational careers. The ultimate beneficiaries are the young adults/students with psychiatric disabilities themselves. They will be better ‘empowered’ to be successful in their educational careers (improving access and/or preventing drop out). This will also improve their chances on the labour market and participation in society at large (social inclusion).

Secondly, a European Network of Supported Education (ENSEd) will be initiated, starting with a first International Conference on Supported Education.

An Advisory board, panels of students with psychiatric disabilities and professionals and relevant staff members will give feedback on the project outcomes and these outcomes and products will be posted on the project’s website: www.supportededucation.eu.

So far, the needs and resources assessments have been finished; a website, poster and brochure have been developed; presentations have been given at conferences and we have begun to get in touch with potential partners for the ENSED network and to establish the advisory board and the panels of students and experts.

In the next year, the toolkit will be developed and tested in the four countries, the ENSED network will be established, and the first international conference on Supported Education will be organized. After the project, the toolkit remains freely available on the website, and the ENSED network will continue to expand and training sessions about the implementation of the toolkit will be offered to interested people and organizations.
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1. Project Objectives

The onset of psychiatric disabilities generally occurs between the ages of 17 and 25 - the years in which young adults follow higher education (including advanced vocational education), which is a major channel in our society to prepare for a career and enhance life goals. But for people with psychiatric disabilities, this resource is largely unavailable.

Although people with psychiatric disabilities often attempt higher education, they are frequently unable to complete their studies because of the nature of their illness and its treatment (see Broenink & Gorter, 2001). They often meet with overwhelming obstacles, including stigmatization and discrimination. In an economy that requires (higher) education for upward occupational mobility, people who are unable to succeed in postsecondary/higher education or training may find themselves ultimately underemployed or unemployed.

For other disability groups, such as people with physical disabilities, learning disabilities or acquired brain injury, student services are available on most campuses, while people with psychiatric disabilities have not been included in these services, also because student services staff have limited knowledge about this.

Therefore, it is of the utmost importance for the social inclusion and future (labour) opportunities of young adults with psychiatric disabilities (1) to have better access to higher education, and (2) to be able to complete such a study successfully. Supported Education is a means to reach these goals. It is defined as the provision of individualized, practical support and instruction to assist people with psychiatric disabilities to achieve their educational goals (Unger, Anthony, Sciarappay, & Rogers, 1991; Anthony et al., 2002; Sullivan et al., 1993).

The main aim of the project is the development of a toolkit for Supported Education services for students with psychiatric disabilities. The toolkit will be based upon needs- and resources assessments from various countries, as well as good practices from these. Secondly, a European Network of Supported Education (ENSED) will be initiated, starting with a first International Conference on Supported Education. The aim of ENSED is to raise awareness in the EU about the educational needs of young adults/students with psychiatric disabilities and for services that are in place to help to remove the barriers for this target group.

The toolkit is aimed at students counsellors, trainers, teachers and tutors, mental health managers and workers, and local authority officials involved in policymaking concerning people with psychiatric disabilities. It will enable field workers to improve guidance and counselling to students/young adults with psychiatric disabilities, supporting these in their educational careers. We will involve these professionals in several stages of the project, e.g. the assessment of barriers that people with a psychiatric disability face, the development of a social map of Supported Education, and of a description of good practices (through interviews, questionnaires etc.) in the countries involved. Also, the members of the Advisory Board will include such professionals. A panel of professionals will be formed as well to give feedback on the output of the project.

The ultimate beneficiaries of the project are the young adults/students with psychiatric disabilities themselves. In the Netherlands alone, it is estimated that 5% of the total student population suffers from a psychiatric disability, that is a total of 30.000 students. On a European scale, the number of students with a psychiatric disability is therefore considerably high. Through the project, these young adults/students will be better ‘empowered’ to be successful in their educational careers (improving access and/or preventing drop out). This will also improve their chances on the labour market and
participation in society at large (social inclusion). These young adults/ students will be involved in the project by forming panels of (present) students with psychiatric disabilities: what are their specific needs; how do they assess the toolkit?
2. **Project Approach**

*Needs and resources assessment*

In order to develop an effective toolkit, the first step is to assess the barriers for students with psychiatric disabilities in the countries involved, and then to develop a Social Map for Supported Education by assessing the available resources on a regional and national level, needed to remove the barriers. Identified stakeholders as potential resources for SEd are: Educational Organisations, Mental Health Organisations, Consumer & Family Organisations, Financial Aid & Social Security Organisations, and Reintegration Organisations.

Based on the barriers assessment, the available resources and methods/approaches, all partners describe their own good practice(s). These have to be worth transferring and exploiting in different contexts and environments by new users.

*Toolkit*

Based on the good practices, the partners will jointly develop an Implementation Toolkit for Supported Education. The aim of the Toolkit is to support other organisations wanting to start a Supported Education programme in their own organisation or region. Development and ‘joint version’ of the toolkit and user manual will be in English. Each partner will develop/adapt a version for its own country, in its own language where needed.

*Network*

A European Network on Supported Education (ENSED) will be created. As a start, each consortium partner will involve another “Supported Education partner” in its own country and one in another EU country (outside the countries involved in the project itself). This will extend ENSED from the starting four partners to about 12, in at least eight countries. Further grow is envisaged. A communication plan to make this happen will be drawn up, as well as legal documents like statutes etc.

*Evaluation*

An Advisory Board will be formed, consisting of four experts from the professional field from outside the partnership. They will assess and comment the (intermediate) results, and discuss its findings with the project coordinator and steering group (there will be two joint meetings of the advisory board and steering group during the project). The steering group then decides which actions (adaptations) have to be taken, and divides the tasks. Apart from the meetings, bi-lateral communication will also take place via Skype, e-mail and the website.

The intermediate and final results will all be assessed by relevant staff members of the participating institutions and (field) institutes with which they are cooperating in their own country, making use of questionnaires and interviews. The outcomes are then send to the steering group.

Apart from the expert advisory board, panels of students with psychiatric disabilities will be formed at regional level (not at national level, as we advocate real face to face contact with members of the panels) by each partner, as well as panels of professionals in students counselling. These panels will indicate which services they need/expect, and they will give feedback on the material to be developed. In this way, both target groups themselves have input in the project.
Dissemination

Another aim of the project is to reach a broad audience. Therefore, a website (www.supportededucation.eu) will be developed that consists of a newsletter, the toolkit which is freely available, a chat room, and a drop box for ideas and links to related institutions and initiatives. The website will include pages in other languages than English (specific country information). Also, an e-mail list of interested persons will be created, to send them newsletters.

Furthermore, in November 2015, the first European Conference on Supported Education will take place in Groningen. This will be organized by ENSED-partners, but participants will come from other (European) countries as well. During the conference, the toolkit will be presented to an audience actually involved in Supported Education.

The project outcomes will also be presented during other national and international conferences of associations of teachers, mental health workers, rehabilitation specialists, etc. Also, they will be presented in articles in relevant journals - including scientific and professional periodicals. Interviews with (local) radio and other media are foreseen as well.

Finally, the results will be disseminated/exploited by offering training (also after the project period) in working with the toolkit to relevant professionals like student counsellors, mental health workers and (regional) policy makers. First by the partners in the countries directly involved in the project; when ENSED expands to other ENSED members and countries as well. The training will be given at normal fees for such training.

Sustainability

After the project has finished, the professionals, and their organizations/agencies will be reached via their membership of ENSED, the newsletter and the website. Improvements to the toolkit may continue to be made, within the ENSED network. Experiences will be shared and reported/commented upon in special sessions dedicated to the toolkit at each conference. Also, professionals working with the toolkit will comment via the website/chat room.

The (prospective) students themselves will be reached by their study counsellors and tutors using the toolkit and possible other expertise gained within the ENSED network.

The impact will be widened by offering the toolkit in more languages than the ones of the partnership, so that the target groups can be reached in more countries. This will be organized/done via ENSED. Also the SocNet 98 network will play a role in this. This is a European network of about 20 Schools/faculties of Social Work spread over the whole of Europe, of which Hanze University of Applied Sciences Groningen is a leading member.

Apart from that, the toolkit (including manual) will be placed on the internet as free source. This means that many more institutions of higher education may use it as well.
3. **Project Outcomes & Results**

*Needs and resources assessment*

The first step in the development process of the toolkit concerned the assessment of the barriers and facilitators that students with a psychiatric disorder perceive when going (back) to school. This information will help us to develop an effective toolkit. To identify these barriers and facilitators, in all four participating countries we used three types of research:

- focus group interviews: young adults with psychiatric disabilities were invited for a group interview about what hinders and what helps when going (back) to school
- interviews with professionals (from educational and mental health organizations): surveys were sent to professionals in the field of supported education with questions about what, to their opinion, hinders and helps young adults with psychiatric disabilities in going (back) to school
- review of literature (both peer reviewed papers and ‘gray’ publications) on barriers and effective adjustments in educational settings

All partners used the same guidelines when conducting the different types of research, in order to make the results comparable. These guidelines can be found on the website (www.supportededucation.eu > output).

The results of the research were written down in four reports (one report per country). These reports can also be found on the website (www.supportededucation.eu > output).

Furthermore, the four partners have developed a social map of existing adjustments and resources and current policies regarding educational opportunities for people with mental health disabilities in their region and or country. Based on this social map, each partner has described a good practice. To keep uniformity in our methods, we agreed to use the same procedure for the development of these two outcomes (see www.supportededucation.eu > output).

*Network*

Potential national and international partners have been approached by the partners and several of these potential partners are interested in becoming an ENSED-member.

Also the SocNet '98 network, a European network of about 20 Schools/faculties of Social Work spread over the whole of Europe of which Hanze University of Applied Sciences Groningen is a leading member, has been informed about the ImpulSE-project and several members were enthusiastic about becoming an ENSED-member.

An application form for ENSED-membership has been developed and can be found on the website.

*Evaluation*

At the moment, the Advisory board consists of the following members: Jos Dröes (PhD, Rehabilitation '92 Foundation, the Netherlands), Jiri Podlipny (M.D, PhD, Charles University Prague, Czech Republic), Camilla Bogarve (Malmö university, Sweden) and Ana Maria Bénard da Costa (former secretary of state for education/ UNESCO consultant, Portugal). At the partnership meeting in Plzen, Czech Republic, Jiri Podlipny was informed about the project and his feedback has been processed.

Panels of students with psychiatric disabilities and of professionals in students counselling have been formed and they have given feedback on the assessment of barriers that
students with psychiatric disabilities face when going (back) to school. Their feedback was assimilated into the final reports.

**Dissemination**

An important goal of the project is to reach a broad audience. To that end, a website was launched ([www.supportededucation.eu](http://www.supportededucation.eu)) on which background information about the project and the partners is written and the output (so far) is posted. Also, posters and brochures were made to enhance the awareness of our project among for instance students, colleagues and policy makers. Furthermore, in May 2014, Ledovec has hosted an invitational conference in Plzen about the ImpulSE-project. Several organizations who are working in the field of Supported Education were present. Finally, several presentations about the ImpulSE-project have been given in the four countries at national and international conferences and symposia.

Products of the ImpulSE project are and will be used in The Dutch RAAK project: Supported Education, new interventions for professionals. The Dutch project partners are Accare, Elker, GGz Friesland, Promens Care, Hanze University and Community College ROC Menso Alting. RAAK (Regional Attention and Action for Knowledge circulation) aims to improve knowledge exchange between Health & Welfare organizations and Universities of Applied sciences. Subsidies can be awarded to regional innovation programmes that are aimed at the exchange of knowledge, and are executed by a consortium of one or more education institutes and one or more organizations. These regional innovation programmes have to focus on innovation demands from organizations in the region.
4. **Partnerships**

As our consortium (Czech republic, Portugal, Norway and the Netherlands) covers all four ‘corners’ of Europe – East, South, North and West-, it brings diversity in experience and good practices, adding to the quality of the results. It also offers good opportunities for dissemination and valorization as all partners have a strong (regional and national) network of agencies and institutes, relevant for the project. The diverse and complementary experience and the opportunities for dissemination appear from the information about the four partners below.

The Research and Innovation Centre for Rehabilitation from Hanze University of Applied Sciences Groningen is the only specific centre in the field of psycho-social rehabilitation in the Netherlands. Together with a partner organisation in Utrecht (Rehabilitation '92 Foundation) the centre has launched a National Supported Education Expertise centre for people with psychiatric disabilities. Both partners have more than 10 years of experience conducting Supported Education research and innovation projects. The Expertise centre also provides information about studying with psychiatric disabilities, and Supported Education presentations, workshops, courses and consultation. The research centre maintains contacts with many other institutions of Higher Education, Community Colleges and Mental Health Organizations in the region and nationally with regard to Supported Education programmes. Within the Netherlands, it is front runner in supported education in Higher Education.

Ledovec has got unique experience of introducing Supported Education as new and totally unknown service to Czech educational and social system. Starting in 2006, it runs projects now in several regions in the Czech Republic. It cooperates closely with, and offers services to, the University of West Bohemia and has supported dozens of students, gaining ‘good practice’ experience. Ledovec has established effective partnerships with the two regional mental health institutes in Plzen and institutes/foundations for psychosocial rehabilitation in Prague. Especially relevant for this project is its close cooperation with the University of West Bohemia and student counselling centres.

The Student Welfare Organization of Bergen (SiB) works with and for several institutions of Higher Education in Norway. It includes the Student Mental Health Service (SMHS) which employs seven specialists in clinical psychology, and one psychiatrist. SiB is involved in The Supported Education Project (SMS) in Bergen, financed by the Norwegian National Welfare Services Directorate, and will play a central role in a nation-wide project to be started. These projects are the first of its kind in Scandinavia. SiB collaborates with all higher education institutions affiliated with SiB, state-run mental health institutions, special schools and psychiatrists and psychologists in private practice. And also with student welfare organizations in Oslo, Trondheim and Tromso.

The AEIPS’ Supported Education Programme in Portugal provides specific support for people who experience mental illness and intend to go back to regular education, including Higher Education; support within and outside school or university. AEIPS works closely with educational agents (teachers, schools, universities and others). And for higher education with the Higher Education Institution ISPA.

Some members of the consortium already knew each other as they worked together on other projects. This makes us an efficient team that is willing to work hard on the project, in a friendly and positive atmosphere.
Partnerships outside of the consortium:

The Netherlands:
The Rehabilitation ’92 Foundation is an educational institute, located in Utrecht. The aim of the Rehabilitation 92 Foundation is to introduce and implement the psychiatric rehabilitation approach of the Center for Psychiatric Rehabilitation of Boston University in the Dutch Mental Health Care System. One of the activities of the foundation is Supported Education. The Foundation developed Supported Education in the Netherlands and has been developing expertise in this approach since 1999. The Foundation is willing to provide technical assistance, feedback and advice to the project team based on that knowledge base.

Rutgers University, USA
Michelle G. Mullen, Assistant Professor at Rutgers University & Director of the Center for the Study and Promotion of Recovery from Severe Mental Illness is an expert in Supported Education. Michelle Mullen is willing to provide technical assistance, feedback and advice to the project team. More concrete, Michelle Mullen will visit the Netherlands at least once a year to meet the project team. She is also available to provide support through electronic means (Skype, email, webinars) in between the visits and the video-conferences as we require.

Czech Republic
Psychiatric Clinic of University Hospital in Plzen.
Dr. Podlipny is head of psychiatric clinic of University hospital in Plzeň and working very close together with Ledovec. Dr. Podlipny works at the youth department of the clinic and he is very committed to SEd. He contributes to the ImpulSE project by disseminating SEd information among psychiatrists in the region (and at the medical faculty). Dr. Podlipny is willing to share his medical expertise with the ImpulSE project and to provide feedback and advice to the project team based on his medical expertise.
5. Plans for the Future

Toolkit

We will continue with the development of the toolkit, including a user manual. Each country will be responsible for a specific part of the toolkit, to which all partners will give feedback. The toolkit will contain guidelines and procedures which skilled professionals are encouraged to adapt and modify to meet the unique needs of the individuals they serve. It will also contain guidelines and procedures for administrators of educational and/or mental health organisations to implement a Supported Education programme in their own organisation or region.

The development and ‘joint version’ of the toolkit and user manual will be in English. Each partner will develop/adapt a version for its own country, in its own language where needed. It may be adapted in more versions later on.

The toolkit will be tested by all partners in their country in practice. Testing and developing will go hand in hand, since the partners work with actual clients/students during the process. Student evaluations will be used for adaptations.

Network

In the coming months, we want to further establish and formalize several partnerships for the ENSED network. Each partner will involve another ‘supported education partner’ in its own country and one in another EU country (outside the countries involved in the project). We aim at 12 partners in at least 8 countries. At the moment, there are already contacts with interested partners in each of the participating countries and in e.g. Austria, Belgium, Denmark, Poland, Germany, Sweden, Italy, Ireland and Slovakia.

Evaluation

The intermediate results (parts of the toolkit) will be presented – in all four countries- to the Advisory Board, and to a panel of students with psychiatric disabilities and a panel of professionals, by e-mail or face to face contact. Their feedback will be used to improve our outcomes. At the partnership meetings in Norway (May 2015) and in the Netherlands (November 2015) the Advisory Boards will also be present to evaluate the results so far and to discuss further plans.

Dissemination)

In November 2014 the Portuguese partner AIEPS will organize an invitational conference in Lissabon about the ImpulSE project. Students, teachers and possible ENSED-partners will be invited. Furthermore, at least at two training sessions at AIEPS, the Portuguese partners will present about the ImpulSE-project.

In November 2014 the Dutch partners will give a presentation at a symposium about supported education in the Netherlands to disseminate the results of the first year of project. The symposium is called ‘Participation through education’, organized by the Supported Education Centre of Expertise and Promens Care (a mental health organization).

Next year November (2015) the first European conference on supported education will be organized by the consortium. It will take place in the Netherlands and will be aimed at students, teachers, policy makers and other professionals working in the field of supported education and or mental health care.
Also, we will continue to keep our website up to date. All project outcomes will be posted on this site, including the toolkit and a manual. Besides, we plan to send out newsletters about the project to potentially interested people and organizations in all four countries.
6. **Contribution to EU and national policies**

In 2010, the European Commission stated that: As full citizens, people with disabilities have equal rights and are entitled to dignity, equal treatment, independent living and full participation in society. Enabling people with disabilities to enjoy these rights is the main purpose of the EU's long-term strategy for their active inclusion (http://ec.europa.eu/social).

The project fits with the Disability Action Plan, adopted by the EU, fostering, e.g. equal access to quality education and lifelong learning enable disabled people to participate fully in society and improve their quality of life. And also fostering accessibility to the labour market.

It is also in line with the view held by the World Health Organization. In May 2005, the 58th World Health Assembly approved a Resolution on "Disability, including prevention, management and rehabilitation" that calls upon Member States to strengthen implementation of the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities; promote the rights and dignity of people with disabilities to ensure their full inclusion in society; promote and strengthen community-based rehabilitation programs; and include a disability component in their health policies and programs".

Recently, the Council of the European Union made reducing early school leaving from 14.4% (mean of all EU countries) to less than 10% by 2020 a headline target in the Europe 2020 strategy (Council of the European Union, 2011; Reducing early school leaving: Commission Staff Working Paper). People with psychiatric disabilities are one of the main 'risk groups' in early school leaving. Reducing this for this category of early school leavers will be quite helpful in this achieving the headline target.

In the Netherlands, there is a widespread debate in social and political circles, and among professional practitioners, about the steady growth in the number of young people with mental health problems. Recently (July, 2014), the Health Council of the Netherlands advised the State Secretaries for Health, Welfare and Sport and for Social Affairs and Employment about the community participation of young people with mental health problems. The Health Council describes the current situation on the labour market and in education. It identifies points of concern, and indicates what action employers, schools and the government can take to ensure that participation has every chance of succeeding. There have already been some important developments in this area. In the area of education, Supported Education is a rehabilitation approach that addresses the numerous questions that teachers and programme selection advisors face when dealing with pupils with mental health problems. The Health Council takes the view that permanent incentives should be set up for initiatives of this kind (Health Council of the Netherlands. Participation by young people with mental health problems. The Hague: Health Council of the Netherlands, 2014; publication no. 2014/18).