# Supervisor & Project Information Form

Please complete and return via email ONLY to gdip.hres@utoronto.ca by

**Tuesday, October 13, 2020**

**Supervisor Information**

*MUST have unrestricted University of Toronto School of Graduate Studies (SGS) appointment (to independently supervise graduate students)*

<table>
<thead>
<tr>
<th>Name: Sanjeev Sockalingam</th>
<th>Email: <a href="mailto:sanjeev.sockalingam@camh.ca">sanjeev.sockalingam@camh.ca</a></th>
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<tbody>
<tr>
<td>SGS Department: IMS</td>
<td>Field of Research: Mental health, patient engagement/experience, education, knowledge translation/exchange</td>
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<tr>
<td>Research Institution affiliation (if applicable):</td>
<td>Location of Work: Remote/CAMH</td>
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<td>CAMH</td>
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<td>Student contact time (number of hours per week YOU are available to the student for any concerns or to review progress): 1-2 hour per week</td>
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Project Information (will be posted on GDipHR website for student access)

TITLE: Our recovery, Our outcomes: Co-producing an evaluation framework for Recovery Colleges

DESCRIPTION (MAX 500 WORDS):
Despite the introduction of the recovery-oriented mental health care in the late 1980s, a philosophy that holds social inclusion as one of its most significant goals, people with lived experience of mental health and/or substance use challenges continue to confront social inequities, including high rates of un- and under-employment and low rates of educational achievement. To address these inequities, recovery colleges (RCs) were developed and first implemented in 2009 in the United Kingdom. RCs are an innovative psychosocial intervention that provides an opportunity to gain skills, confidence, hope and resilience through the shift from “patient” to “student”. All levels of RC development, including program planning, course design, course delivery and quality assurance, are co-created by people with lived experience of mental illness and/or addiction and people with other forms of relevant expertise (e.g., mental health professionals, administrators and researchers). Co-creation is a process that acknowledges that the success of any initiative depends on the competency, knowledge and perspectives of both service providers and users. There is promising evidence that a recovery orientation approach as embedded in RCs reduces both symptoms and hospitalizations; increases positive recovery outcomes and well-being; and are more cost effective than traditional mental health services. However, researchers have also noted a lack of empirical evidence for precisely how RCs work and how to measure outcomes that reflect the impact of RC. There is a need for evaluative research to close this identified gap. In this CIHR funded study, we are identifying, developing and designing an evaluation framework that focuses on recovery-oriented processes and outcomes that matter most to patients participating in RCs.

We will use two simultaneous methodologies: stakeholder engagement of patients/students and a scoping review of the evaluation literature on RCs. We expect that the student participation in the scoping review will grow as the stakeholder group develops. The stakeholder engagement process will be initiated and co-led by patients/students and facilitators of existing RCs as well as those involved in developing the CAMH RC. To engage stakeholders as research partners, we will be using Participatory Action Research (PAR) methodology. Given that RCs are rapidly expanding, with little accompanying primary research, we will conduct a scoping review to map the extent and range of RC evaluation studies and identifying any current knowledge gaps. We will prioritize patient/student inclusion in the scoping review, both in terms of integrating their perspectives on the questions as well as supporting their active participation. Our approach will be exploratory and developmental with the goal of combining what is known from the literature with what is known to be important to the patient/student and use this information to co-create
how RC evaluation measures will be selected. Partnering with patients/students to shape how
RCs are evaluated will ensure that the identified processes/mechanisms and outcomes are
relevant and important to the users of the program.

Students will obtain expertise in scoping review methodology, engaging patients as partners in
research (patient-oriented research), and developing expertise in program evaluation
frameworks.

If human subjects are involved, have the appropriate Research Ethics Board approvals been
obtained?
☒ Yes ☐ No ☒ Application Submitted (Date: Received REB approval on August 8th, 2020)

Do you expect this work will be published within the 20 months?
☒ Yes ☐ No ☐ Uncertain / Other

**Student Roles & Responsibilities (please be as specific as possible)**

- Attend team meetings related to project
- Participate in the screening of articles for the scoping review
- Take minute meeting notes
- Meet with the PI/SGS supervisor and research team weekly
- Create summaries of project methodology and outcomes
- Participate in key aspects of the evaluation process by analyzing the data, drafting
results and creating charts to illustrate the findings
- Create PPT related to the project for presentation
- Draft abstracts for conference abstract submissions
- Present what they learned at Lightning Rounds and other relevant conferences
- Write a brief reflection on their learning and their experiences with the process of co-
producing research with students/patients. (potentially an additional publication)
Indicate who will serve as the student’s direct report for daily oversight (PI, PhD student, technician, etc…)  

- The PI of the project (senior scientist at CAMH) will have daily oversight of the student’s work.  
- The SGS supervisor will meet regularly to monitor progress in addition to the PI of the project.

Indicate to what extent the student’s research activities could, if necessary, be completed remotely.  

- All research activities could be completed remotely  
- The student will have desk space with a computer at CAMH Education.