

## Mental Health Promotion in the Church of Ireland

### 1. Project Overview

The Church of Ireland recently announced a major three-year, all-island, mental health promotion programme entitled '*Mental Health Promotion across the Church of Ireland and Wider Community*'. The project aims to transform the understanding of and attitudes and responses towards mental health, within the Church of Ireland and the wider community. It has been made possible by a significant grant from Allchurches Trust – one of the UK and Ireland's largest grant-making charities.

Mental Health promotion impacts the entire community. The project will therefore seek to actively integrate with other state and voluntary agencies engaged in mental health promotion. The existing evidence does show that Clergy and pastoral carers are often the first people to be approached by those experiencing a mental health difficulty, and their day-to-day activity brings them in contact with people experiencing anxiety, illness and bereavement, for example.

Research is at the centre of this three-year project:

- This project will commence with a literature review of recent research: an extensive piece of work that describes existing attitudes towards and understandings of mental health across both jurisdictions and will include best practice initiatives which demonstrate the contribution a Church can make in promoting positive mental health
- Following this, an all-island, representative, baseline study across the membership of the Church of Ireland will be undertaken. This cross-sectional, representative study should document current understandings of and attitudes towards, mental health.
- The analysis will inform the development and roll-out of an evidenced based training programme, which will be rolled out across the Church of Ireland. Quality assurance and evaluation necessary.
- The data collected, and feedback from training will inform the criteria necessary to implement a programme of mental health promotion initiatives across the dioceses. The mental health promotion initiatives will be continuously monitored and evaluated.
- In the final year of this project, a second study will be undertaken. The purpose of this is to measure the impact of the project (with a focus on attitudes) and evaluate the overall process. The output should include a framework to support the future development of a cohesive, sustainable, mental health strategy for the Church of Ireland

As an all-island body the Church of Ireland has extensive experience of operating in two different jurisdictions and cooperating with state agencies both North and South. The Church has a network of clergy and physical infrastructure covering every part of the island. An integral part of the Church's role is reaching out to society, including families, migrants, older people and supporting people at times of bereavement or other extreme stresses.

A recent report for the European Commission on health promotion effectiveness, found ample evidence that mental health promotion programmes not only improve mental health and quality of life but also reduce the risk for mental disorder. The report also confirms the impact of mental health promotion on the reduction of a range of social problems such as delinquency, child abuse, school drop-out, lost days from work, and social inequity.

This project will reach a church community of over 375,000 members who will disseminate awareness and skills into the wider community through their families and social contacts. The Church also has a significant presence among younger people through its schools and youth organisations.

#### 1.1. Aims and Objectives

- To gain an in-depth understanding of the awareness and attitudes towards mental health across the Church of Ireland by undertaking an extensive, representative, baseline study which will facilitate the development of an evidence based and a needs led project plan in years two and three. A strengths-based approach will be adopted in carrying out this phase of the research.
- To promote positive mental health across all parishes and dioceses in the Church of Ireland and wider community across both jurisdictions. Measurable through attitudinal surveys, numbers actively participating etc.

- To equip and empower clergy to effectively support the mental health of their communities. This will commence following the baseline study and will be measured by research into the impact of training engagements with specific agreed mental health programmes that show evidence of skill and attitudinal changes.
- To establish sustainable links between the Church and the wider mental health community, within both the voluntary and statutory sectors. Measurable by increase in effective models of partnership across the Church of Ireland at project end.
- To assess and share learnings, and to embed strategic cohesive approaches to mental health in the Church. Measurable by
  - Final Project Report including key recommendations
  - An all-island mental health conference attended by key stakeholders, other churches and government bodies
  - A framework to support the future development of a cohesive, sustainable, mental health strategy for the Church of Ireland

## 2. Scope of work

### Phase 1

- Undertake a literature review to describe existing attitudes towards and understandings of, mental health across both jurisdictions. This will be used to compare to and contrast with the findings of the baseline study (see below).
  - Should also identify evidence-based best practice initiatives which demonstrate the contribution a Church can make in promoting positive mental health
- Baseline, strengths-based, assessment of awareness of, and attitudes towards, mental health within the Church of Ireland. Assessment should include at least two cohorts:
  - Parishioners/Members of the Church of Ireland (375,000 members across Island)
  - Clergy (approx.. 600 members)
- Assessment to be carried out by means of both qualitative and quantitative methods. For example, representative samples of the population essential (% of population, demographics)
- A participative, consultation process with relevant stakeholders including service providers, service users and advocacy groups on issues which need to be considered in an implementation plan (focus groups, interviews, café-style workshops with representative sample of population)
- Assessment of evidenced based training programmes and/or identification of bespoke training programme
- End of Phase One project report to include key findings, including:
  - Evidence based literature review
  - Evaluation of surveys
  - Analysis and evaluation of qualitative research
  - Recommendations on how to effectively respond to findings via training and mental health promotion activities
  - Recommendations on evidence-based training programmes to utilise to support the findings
- On-going consultation with the project team

### Phase 2

- Measure the impact of the project through:
  - Follow-up assessment of the impact the project has had on awareness of, and attitudes towards, mental health within the Church of Ireland (representative sample, qualitative and quantitative methods)
  - Other tools as recommended by the researcher
- Development of final project report which should include:
  - Key findings
  - Analysis and key recommendations
- Preparation of, and participation in All-Island Conference on the project
- A framework to support the future development of a cohesive, sustainable, Mental Health strategy for the Church of Ireland

### 3. Expected outputs and deliverables

#### Phase 1

- a) Regular Meetings with project team:
  - An initial planning meeting to agree the overall approach and milestones/timing
  - Production of clear outline plan of outputs / deadlines
  - Production of literature review document
  - Following literature review, meeting to examine findings and plan for quantitative / qualitative commencement of research
- b) Interim report on progress upon completion of quantitative / qualitative research
- c) End of Phase One project report to include key findings, including:
  - Evidence based literature review
  - Evaluation of surveys
  - Analysis and evaluation of qualitative research
  - Recommendations on how to effectively respond to findings via training and mental health promotion activities
  - Recommendations on evidence-based training programmes to utilise to support the findings

#### Phase 2

- a) Initial planning meeting
- b) Repeat of Phase 1 field research to assess impact of MHP project to date
- c) A final meeting to discuss research results, analysis and the implementation plan
- d) Development of final project report which should include:
  - Key findings
  - Analysis and key recommendations
- e) Preparation of, and participation in All-Island Conference on the project
- f) A framework to support the future development of a cohesive, sustainable, Mental Health strategy for the Church of Ireland

### 4. Timescale

Based on a project start date of 4<sup>th</sup> January 2021 major Phase 1 milestones are as follows:

- Literature review by mid-February 2021
- Qualitative and quantitative research to be complete by end May 2021
- Final report by end of June 2021
- Phase 2 research is scheduled to begin in spring 2023 with final report submitted by August 2023
- More detailed timescales will be developed as part of the planning process in Section 3 (a) and (b), above
- Regular contact will be maintained with the MHP project team throughout the process.

### 5. Budget

The budget range for this project is £45,000.00 - £50,000.00stg. This should include all costs including VAT where applicable. Payment will be made as follows:

#### Phase 1

**10%** following literature review document

**20%** progress upon completion of quantitative / qualitative research

**30%** upon sign-off

#### Phase 2

**10%** following the initial planning meeting

**20%** completion and presentation of the final report

**10%** following completion of framework

The budget relates to *all costs* in the production of the final reports, presentation of findings and development of the implementation plan. It also covers all travel and subsistence costs. It is inclusive of VAT.

## 6. Format of tenders

Tenderers must provide all relevant details to clearly demonstrate how, why and in what way, their tender is specifically tailored to meet the requirements as set out in this document.

The quotation must:

- Be clear and concise (no more than 10 pages- not including CVs)
- Outline the expertise of the personnel to be involved in the project with particular reference to the following:
  - Experience of undertaking research of a similar scale and complexity
  - Experience and knowledge of mental health in general and mental health promotion in particular
  - Experience of report writing (e.g. provide examples and/or links to examples available online)
- Set out the approach to undertaking this project (taking into account the award criteria)
- Set out a clear pricing schedule, having regard for administrative overheads, personnel, travel and subsistence, equipment, design and printing. This should be inclusive of all incidental expenses and VAT if applicable
- Indicate capacity to complete all phases of the project, and within the specified time frames
- CVs of all project personnel, clearly indicating
  - The name of the lead contact person who has overall responsibility for the project
  - Responsibilities of, and time allocated to the project for, each team member
- Tenderers must provide details of two referees (including contact names and details) and demonstrate how the services provided are relevant to the requirements of this project

## 7. Award criteria

Tenderers should note that they will be scored as outlined on the award criteria below. Tenders will be evaluated on the basis of relevant information, demonstrating how and why these tenders meet requirements. The closing date is Friday, 20<sup>th</sup> November. Short listed tenderers may be invited to present their proposal to the project team during the first week of December.

Award Criteria	Description	Max Score
1	Understanding the requirements of the study	100
2	Understanding of Mental Health Promotion in the context of both Ireland and Northern Ireland	150
3	Project Management – including timelines, personnel and material requirements	100
4	Research: Description and rationale for proposed method of data capture (including sampling, expected response rates, access, timing, practicalities, permissions, confidentiality)	100
	Research: Evidence of robust data management and processing to ensure quality control at every stage while complying with the Data Protection Acts	50
	Research: Evidence of consideration of qualitative and quantitative methods, pilot testing, survey instruments, interview guides and potential problems	50
	Evidence of management of ethical issues in respect of informed consent, anonymity and confidentiality, and how these will be managed	50
	Experience of undertaking research of a similar scale and complexity	100
	Experience of undertaking research in the field of mental health	50
5	Risk Management and how potential risks will be managed	50
	Cost (Value for money)	100
<b>TOTAL Marks</b>		<b>900</b>

## 8. Copyright

Copyright of any reports or material produced shall rest with and be assigned to the RCB. The RCB shall have the right to publish, or not as the case may be, and to disseminate the report in both its original and in a modified form, without further reference to the tenderer. The tenderer will not be entitled to further payment if this occurs. The tenderer and the individual researchers will be entitled to be credited with the work that they have done on this project in any publication.

**Quotations should be sent by email in PDF to [mhp@rcbdub.org](mailto:mhp@rcbdub.org) marked 'Tender' in the subject line  
Closing date for receipt of quotations is 5.00 p.m. on 20<sup>th</sup> November 2020**