

Development and evaluation of a collaborative care intervention for male prison leavers with mental health problems: the Engager research programme

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research, or similar, and contains language that may offend some readers.

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Plain English summary

The Engager research programme

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Plain English summary

Many people leaving prison have common mental health problems (e.g. depression and anxiety), have past trauma and are often homeless, but get little help from services. We developed a new service called Engager to help people with their mental health when in prison and back in the community.

To design the Engager intervention, we looked at previous research, we visited services that were doing something new and we spoke to people who were homeless and families of prisoners. In addition, we worked with a group of men who had been in prison. We tested the Engager intervention to see which bits were liked and those that did not appear to work well. We tried to pick the best ways to measure how the Engager intervention worked.

We carried out a trial where 140 people received the Engager intervention and 140 people received only what the prison and community services would normally offer (i.e. usual care). Therefore, there were 280 people in total. We tried to speak to people at 1, 3, 6 and 12 months after they had left prison to find out how they were getting on. At 6 months, we collected results from 186 people.

Using standard measures, we found that people receiving the Engager intervention did no better and no worse than people who did not receive the Engager intervention. The Engager practitioners sometimes found it hard working in the prison and making links with community services. When we looked in detail, we found that Engager staff were sometimes able to help the person think about their feelings and thoughts and, although this was sometimes difficult, when this was done well people had put positive changes in place. In the future, we think that we need better training and support for the Engager staff to do these parts well. In addition, we suggest that better research methods are needed to measure this kind of personal progress.

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