

Mind in Harrow

A social marketing intervention to increase awareness of mental health and mental health services among Black and Minority Ethnic communities in Harrow

Campaign evaluation
April 2009

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1. Executive summary

This report details each stage of a social marketing intervention to increase awareness of mental health and services among Black and Minority Ethnic (BME) communities in Harrow. The report comprises an analysis of primary research with the target audience (mental health needs assessment) and secondary research (desk research and conversations with stakeholders), segmentation of the audience based on these findings, intervention development and delivery, and finally recommendations for future activity.

Key findings from this research include a general low awareness and low acceptance of mental health within the target audience and a requirement for more information about how and where to seek help. Other insights include specific cultural barriers to accessing mental health advice outside religious or community settings, particularly when English is a second language.

The report details intervention routes that were developed to increase awareness of mental health and to signpost the services available. The intervention routes include the development and production of a campaign creative identity, campaign launch, dissemination of collateral, media relations, advertising, mental health promotion workshops, development and promotion of a dedicated campaign website, signposting and communication with stakeholders.

The report concludes with a series of recommendations for taking the campaign forward, including sustaining the campaign over the longer term. Specifically:

- further dissemination of collateral
- development of the website
- media relations and advertising
- roll out of workshop programme
- building on relationships with key stakeholders, in particular GPs

This consolidation activity should result in higher levels of awareness and translate into action and meet the aims of the campaign around mental health and services.

No baseline survey was conducted prior to the launch of People Like Us. We recommend conducting a survey with the target audience to establish their awareness levels regarding People Like Us, mental health and mental health services before agreeing the next stage of campaign activity. In the long-term, this will enable accurate comparison of data to illustrate changes in behaviour and whether the campaign objectives and Harrow Primary Care Trust's required evaluation benchmarks and outcomes are being achieved.

2. Introduction and background

2.1 Our brief

Forster and Mind in Harrow were commissioned by Harrow PCT to develop and deliver a new mental health promotion campaign targeting people from BME communities living in the borough. The project consisted of a social marketing campaign including a series of mental health promotion workshops to increase knowledge, reduce stigma associated with mental health and signpost clients to local services.

The campaign aimed to:

- raise awareness of mental health and services amongst BME communities in Harrow
- increase these communities' engagement with services in Harrow
- promote the health promotion workshops

2.2 Our social marketing approach

At Forster we have a rigorous and successful approach to social marketing, which we define as being a systematic marketing process to motivate behaviour for social change. Social marketing takes a logical approach to changing behaviour by understanding and addressing people's perceptions and beliefs in the context of what is locally relevant. It avoids assumptions about what different groups believe, what will motivate them to change and what might stop them from doing so. This approach puts the audience at its heart, and looks at what will encourage them to change their perceptions and behaviour.

Our approach consists of four simple stages:

- Stage one – understand the audience and the issue
- Stage two – develop the intervention
- Stage three – deliver the intervention
- Stage four – evaluate and learn

2.3 Applying the approach

Based on our social marketing approach, and the requirements of Mind in Harrow and Harrow PCT, we recommended that the project should have four stages:

- Stage one: primary (needs assessment) and secondary research (desk research) to **understand** how the target audience perceive mental health and local services
- Stage two: **development** of the intervention, including testing of intervention routes with the target audience

- Stage three: intervention **delivery**, including media relation, dissemination of collateral and workshops
- Stage four: evaluation and **learning**

This report summarises the work from each stage of the project and covers a review of existing research, analysis and insights from the target audience, recommendations for interventions and evaluation.

3. Stage one: understanding the audience and issue

3.1 Primary and secondary research

In order to fully understand the local audience and issue primary and secondary research was conducted. The specific aim of the research was to:

- assess mental health needs of BME groups living in Harrow
- explore strategies to improve mental health and reduce health inequalities

3.2 Primary research techniques

The primary research was carried out in the form of a mental health needs assessment with BME communities in Harrow. This was carried out by Natalie Tobert on behalf of Harrow PCT and subsequently used by Mind in Harrow for this project.

The needs assessment used qualitative ethnographic research techniques, such as workshops and one-to-one meetings with the target audience and desk research to ascertain the mental health promotion needs of the BME population from their perspective.

Meetings were attended and workshops facilitated with the groups in the chart below (51 in total). Representatives from a range of ethnic and religious groups were represented at the workshops and meetings (see table below). Additionally, four focus groups were carried out; two 'informal' meetings were held with counselling centres and the researcher interviewed two men from the Somali and the Pakistani communities.

Organisation	Number of attendees	Ethnicity	Gender
Age Concern Harrow	8	3 Asian / 1 Black / 3 White	5 women / 2 men
Harrow Women's Centre	3	1 Asian / 1 Black	2 women
EKTA, South Asian Mental Health Service User Group	13	12 Asian	7 women / 5 men
Yakeen Counselling	8	7 Asian	7 women
Somali Community Group	12	11 Black	11 men
Somali Family Support, Muslim Women	13	9 Black / 2 Asian / 1 White	12 women
Total	51	25 Asian / 22 Black / 4 White	33 women / 18 men

Please note that the above table is based on the researchers own phasing model.

The data generated during the qualitative ethnographic research is detailed in section four below.

3.3 Secondary research techniques

To support the primary research, secondary research, carried out by Forster, was conducted in the form of:

- desk research
- conversations with stakeholders

3.3.1 Desk research

The desk research included insight from a number of key organisations including:

- World Health Organisation
- Mental Health Foundation
- Office for National Statistics
- National Institute for Clinical Excellence
- National Centre for Social Research
- Delivering Race Equality in Mental Health Care programme
- Social Services Inspectorate, Department of Health
- Mind
- Mind in Harrow
- Mental Health Partnership Board

The desk research also included information taken from a range of published and grey literature including:

- Office for National Statistics' Psychiatric Morbidity report (2001)
- Count Me In 2007, Healthcare Commission
- Scoping Exercise conducted with BME groups in Scotland
- Navigating the Mental Health Maze (2007)
- Harrow Council for Racial Equality
- Greater London Authority Call for Evidence on health inequalities (August 2007)
- COI report, Communicating with Communities using Outreach: a Good Practice Guide (July 2006)

3.3.2 Conversations with stakeholders

One-to-one conversations were conducted with approximately 20 stakeholders from different ethnic and religious backgrounds and from a range of socio-economic backgrounds, including:

- GPs
- Service Providers

- Service users
- Local community and religious groups

3.4 Primary and secondary research findings

The research provided us with a better understanding of the mental health needs of BME communities living in Harrow. Key findings from the stage one research shaped the development of the campaign and are detailed in section four.

4. Stage one: primary and secondary research findings

4.1 Overview

Forster collated and analysed the findings from the primary and secondary research, and highlighted key considerations and recommendations.

4.2 Key findings

4.2.1 Mental health nationally

The national context of mental health can be summarised as follows:

- one in four people will experience some kind of mental health problem in any one year
- rates of mental illness are thought to be higher in BME groups than in the white population
- there is a lack of awareness of mental health conditions, services and treatments among BME communities
- elderly members of the South Asian community are particularly lacking in knowledge of mental ill health and available services

4.2.2 Mental Health in London

Mental health in London can be summarised as follows:

- mental health problems are more prevalent in London than in other parts of the country
 - 18% of people living in London experience mental health problems, compared to 16% nationally
- London's mental health services face particular challenges, including a highly mobile and ethnically diverse population
- there are a large number of people with complex needs such as refugees and asylum seekers

4.2.3 Harrow population

Harrow is the ninth most ethnically diverse local authority in England and Wales, with over 40 different ethnic communities represented in its population (*Mind in Harrow Mental Health Needs Assessment, 2008*):

- White 59%
- Asian or Asian British 30%
- Black or Black British 6%
- Other 5%

Harrow has the largest level of religious diversity of any local authority in England and Wales (*Office of National Statistics, 2001*):

- Christian 47%
- Hindu 20%
- Muslim 7%
- Jewish 6%
- No stated religion 20%

4.2.4 Mental Health in Harrow

In Harrow, 27% of mental health cases known to Community Mental Health Teams are from BME communities. At the same time, those from BME communities who do access services, tend to access them at point of crisis. Afghan, Iranian and Somali refugees lack awareness of mental health services and how to access them. The prevalence of mental ill health in Asian communities may also be related to family relationships and socio-economic conditions (*Mind, 2008*).

4.3 Key considerations

For the purpose of this campaign we did not need to differentiate between mental health conditions as the research showed that:

- there was a need to increase basic awareness and understanding of mental health in general
- this would need to be done before we could explain the different mental health conditions and their specific services

4.4 Target Audience

Based on the stage one primary and secondary research, we segmented the target audience as follows:

- Audience 1: Asian community
 - Young (16 – 21 years)
 - Old (55+ years)
- Audience 1 subgroup: Somali community
- Audience 2: Refugees
 - Iranian
 - Afghani

The stage one research indicated that raising awareness of mental health among these communities as a whole would help to develop an environment in which people from BME backgrounds are able to seek help if they need to.

4.5 Audience insights

The stage one research findings allowed us to identify the following audience insights about each of the target audience communities.

Asian community

- There is a lack of awareness and acceptance of mental health, in particular among Gujarati speaking Asian elders
- The key motivators for older communities are likely to be concern for their families and personal experience
- Younger community members have a better understanding of health issues but make less use of health services
- Many individuals refer and adhere to religion and rituals and believe that faith helps them cope with everyday life
- Individuals are more likely to seek help from religious leaders than from GPs and mental health service providers

Refugee community

- Some community members are afraid to access health services as they are worried that this may affect their chances of securing asylum
- Younger members of the community have a better understanding of the health services, but make less use of them
- Female refugees have expressed an interest in seeking mental health advice, but lack understanding of how to do so
- Language and literacy is likely to be a significant barrier, particularly for new arrivals

4.6 Suggested implementation routes

The research findings and insights highlighted two key implementation channels as routes of reaching the target audience. These two routes included:

- Interpersonal contact
 - community organisations are often the first services contacted by individuals from BME communities, in particular by the majority of refugee groups
 - audiences may not be literate or understand written English (Harrow has the lowest rates of London West boroughs for those with poor literacy and numeracy skills, 19.4% and 18.6% respectively (*Basic Skills Agency, 2005*))
 - face-to-face localised campaigns are effective
- Media
 - the Asian community consumes and is receptive to specific media – particularly local media
 - non-English broadcast and print media is important

- Need to use local and specialist media to reach target audience

4.7 Barriers and exchange

A theme central to a social marketing approach is for the audience to choose to take up the behaviour we want them to adopt. This active choice is key in order for the behaviour to be maintained. We analysed both the barriers to the audience taking up the behaviour and the incentives about what would motivate them. From this analysis we developed the following barriers and exchange model for each audience segment.

4.7.1 Asian community

Barrier	Exchange
There's nothing wrong with me – I'm not mad	It's important to keep fit and well both mentally and physically
I don't know anyone who has a mental illness	One in four people experience mental ill-health at some time – it's nothing to be ashamed of
It's not something we talk about in my community	We regularly help people like you and have specially trained staff who understand your community
I don't know where to go for help and advice	Harrow Mental Health Directory (www.mindinharrow.org.uk / www.peoplelikeus.info) can provide you with contact details for a range of services providing specialist treatment
I don't want my community knowing I have a mental health problem	We can arrange for you to see someone in a private setting - we're here to help
My family and religion can help me, I don't need to go to the GP	You can bring a member of your family with you to visit the GP and they can get involved in your treatment and well-being

4.7.2 Refuge community

Barrier	Exchange
I don't know anyone who has a mental illness	One in four people experience mental ill-health at some time - it's nothing to be ashamed of
It's difficult to talk to my GP. I don't feel confident speaking English	We can offer you materials in various languages and interpreters are also on hand to help. You can also bring a friend/family member with you as a translator
I don't understand the NHS – will I have to pay for services?	The GP/NHS is there to help you with all your health related needs and is free of charge
I don't need to visit a doctor because I go to my community organisations for support	The GP can refer you to experts in the field of mental health who can help you access services in addition to the support you received from your community
I only want to speak to female staff	We can arrange for you to see a female GP in a private and safe setting
This country doesn't understand me and what I went through at home	We have specially trained staff who do understand - they are ready to speak to you

5. Stage two: stage one developing the campaign creative

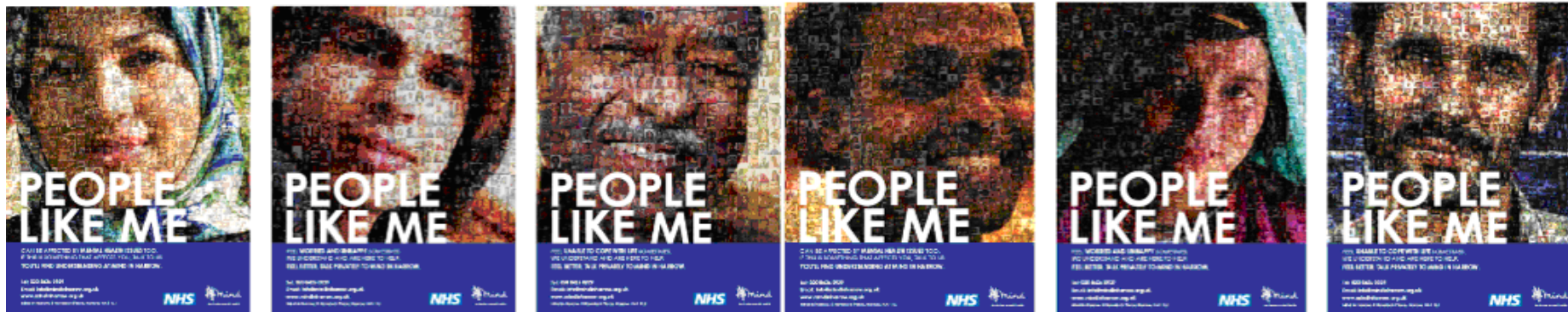
5.1 Creative routes

As part of stage two, Forster looked at a series of creative routes to engage the target audience with the campaign. In total, three creative routes were developed based on the findings from the stage one research.

5.2 Creative route one: community faces

The route aimed to:

- be inclusive by illustrating that mental ill-health does not affect just one 'type' of person
- put mental ill-health onto the agenda across the whole BME community/cross gender



5.3 Creative route two: community statements

The route aimed to:

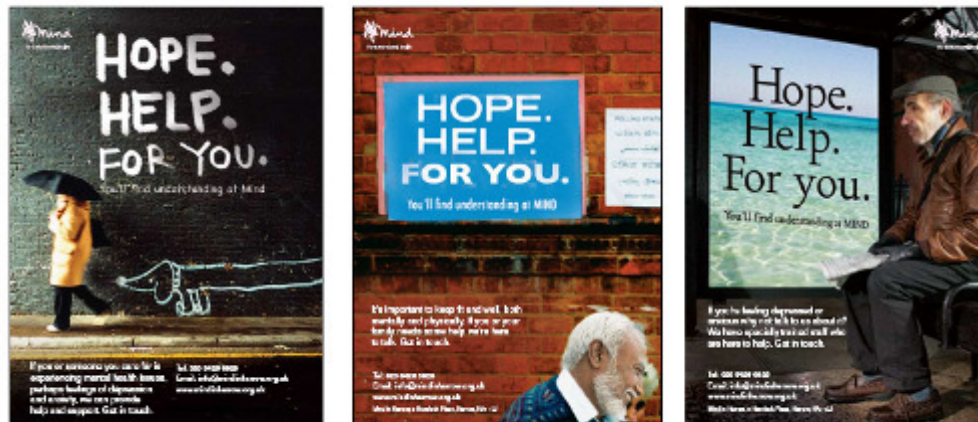
- show anonymity while also being identifiable, by visual cues from clothing, jewellery and skin colour
- humanise the campaign by the use of quotes, some from religious text



5.4 Creative route three: messages in the environment

The route aim to be:

- relevant to the target audience, by showing BME communities in their environment in Harrow
- quirky, friendly and recognisable



5.5 Testing of creative routes

Forster's recommended approach for testing creative routes would be to take on an integrated method of consulting with all of the target audience, via a series of small and targeted focus groups. This provides us with a robust base from which to develop the practical activity. For this campaign, as there was no budget available for testing the routes with all of the target audience, Mind in Harrow and Natalie Tobert took on the process and delivery of the focus group testing. This was supplemented by consultation with stakeholders and service users, delivered by Forster, to ensure effective and meaningful engagement with the target audience.

5.5.1 Focus group

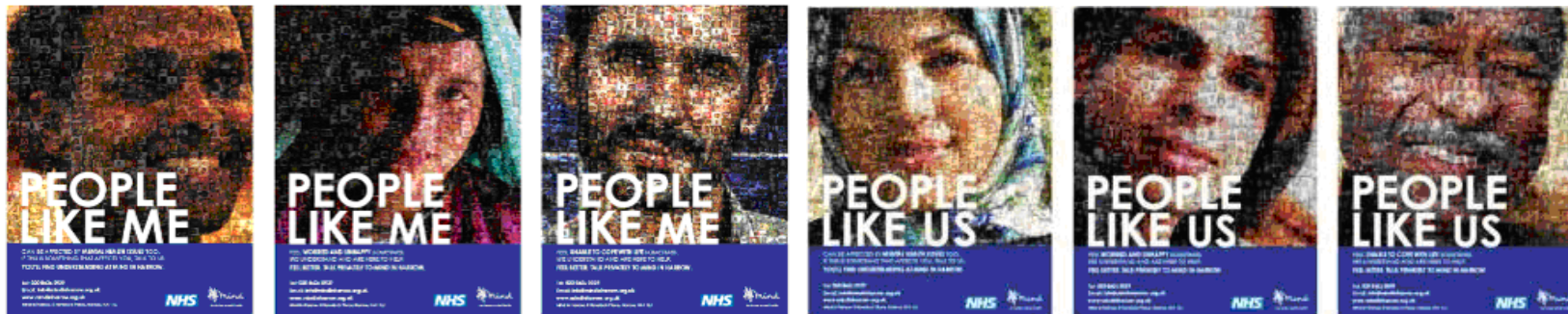
The three creative routes were tested at a focus group attended by approximately 30 individuals from various BME communities in Harrow.

The reaction from participants found that:

- Routes one and two were preferable to route three, in particular due to the use of people's faces from a variety of communities
- The use of sacred texts were believed to be inappropriate, as the materials would be used in the wider community as well as within religious settings
- Sacred text and symbols were thought to be appropriate for inclusion on materials produced exclusively for use in religious settings
- The Mind in Harrow and NHS logos should be used on all materials
- The Mind in Harrow telephone number and website address should be shown on all materials
- Overall the preference was for route one with the modification that it should be 'People Like Us' rather than 'People Like Me'
- Overall it was agreed that the collateral should be in English only, as English was thought to be a mainstream language that was recognised although not always understood, by the majority of individuals from BME communities in Harrow

5.5.2 Target audience questionnaires

To ensure the final creative route was appealing and engaging to the target audience, Forster developed the first and second routes and tested these via an email questionnaire with target audiences. The questionnaire was developed to look at receptiveness to the overall route, key messages and imagery.



Feedback from the questionnaire confirmed that the target audience had a preference for route one, with the modified campaign name being People Like Us rather than People Like Me.

“The images and design both equally capture the posters appeal to the specific audience, using a design which ensures representation of both ages and ethnicity, as well as being subtle and eye-catching.”

“[The messages on the posters show] that mental health issues are a taboo within ethnic minority communities. Hence, the need to raise awareness about this sensitive subject via this poster.”

Black African Muslim, aged 25 – 34

“I like that fact that the individuals used in the poster come from different backgrounds which represents cultural diversity and shows that mental illness can be experienced by anyone. I also like the way the pictures are blurred and show little pictures within them.”

Indian, Sikh, 22 years old

5.5.3 Stakeholder consultation

The research during stage one showed that for the campaign to be implemented effectively, support for the campaign was required from key stakeholders (e.g. service providers, GPs). To ensure engagement with these groups, we invited stakeholders to provide their feedback on the final creative route, prior to disseminating the campaign collateral.

Stakeholders provided feedback regarding the campaign creative during the launch of People Like Us to Harrow PCT. Overall, stakeholders agreed that the target audience would be receptive to the creative. Furthermore, stakeholders suggested that as the campaign is aimed at individuals who are unlikely to have English as a first language, the campaign name – People Like Us – should be translated into the six main

5.7 Campaign collateral

Feedback from the stage one and two research indicated that stakeholders would appreciate the following resources to support the campaign:

Collateral developed by Forster:

- **posters** referring to the campaign, helpline and website (see images above)
- **flyers** referring to the campaign, helpline and website, using the same images as the posters on the front page and details regarding national mental health related helpline numbers on the reverse side

Collateral developed by Mind in Harrow:

- **Signposting Booklet** exploring religion, spirituality and mental health. The booklet also signposts culturally appropriate treatment of BME communities in Harrow, offers a summary of the history of migration of various populations residing in Harrow and offers inspiration through a selection of religious texts, all with the intention of helping a person's mental well-being
- **Counselling and Talking Therapies Booklet** including up to date information about counselling and talking therapies as an alternative to the NHS Psychological Services. The booklet is aimed specifically at GPs working with long waiting times and/or with patients that would like to see a counsellor that speaks their mother tongue

Flyer (reverse side)

PEOPLE FROM ALL COMMUNITIES CAN BE AFFECTED BY MENTAL HEALTH ISSUES. IF THIS IS SOMETHING THAT AFFECTS YOU, WE CAN HELP. TO ORDER AN INFORMATION BOOKLET OR TO FIND OUT ABOUT WORKSHOPS CALL 020 8515 7858.

Further details including list of local services in various languages can be found at www.peoplikeus.info

Mind in Harrow 020 8438 9329
Open Monday to Thursday 9.30am to 5pm
Mind in Harrow is a local charity which supports people experiencing mental health problems in Harrow to live independently and full lives.
www.mindinharrow.org.uk

There are also a number of national organisations which can help if you are going through a hard time and need advice to help to overcome:

MindAction 0845 764 6163
Open Monday to Friday 10am to 5pm
The national MindAction service is a free, confidential team of counsellors, responding to more than 20,000 enquiries a year. Topics range from types of mental illness, where to get help and drug treatment, to alternative therapies, who to contact for mental health services, and advocacy.

SANE 0845 767 8000
Support information and advice to anyone affected by mental health problems. Open 24 hours every day.

SANEmail
SANEmail is a new email support service which is fully funded by The Vodafone UK Foundation. SANEmail also operates a SANEline to provide an additional channel of support to those affected by mental health issues.

Anyone can email SANEmail but in particular the service aims to support:
• Young people affected by mental health problems who may feel more comfortable using email to gain support other than the helpline
• Those with substance misuse or mental illness that prevents them from using the helpline.
www.sane.org.uk

National Health Service 020 8761 6344 or nhs.uk
NHS National Advice Service provides expert advice and information on issues that affect the lives of people coping with mental illness. For general enquiries about SANE's work, please call 0845 454 6455.
www.nhs.uk

National Health Service 020 8761 6344 or nhs.uk
The national Health Service offers a free email support service for people with anxiety disorders.
www.phhsociety.org.uk

Dealing with Depression
Dealing with Depression is an online forum that provides a friendly and safe space for people to share information and talk about their experiences of depression.
www.dealingwithdepression.org.uk

Mental Health Helpline Partnership Project
The Telephone Helpline Association consists of a number of different mental health helpline services.
www.helpline.org.uk

One to one helpline

FOR HARROW SERVICES VISIT www.peoplikeus.info Harrow NHS Primary Care Trust

Counselling and Talking Therapies Booklet (front page)

PEOPLE LIKE US
A mental health promotion campaign

COUNSELLING SERVICES & TALKING THERAPIES

Where to find help in Harrow

February 2009

For more information, visit www.peoplikeus.info

Signposting Booklet (front page)

PEOPLE LIKE US
A mental health promotion campaign

Where to find help in Harrow

January 2009

For more information, visit www.peoplikeus.info

6. Stage two: stage two developing the intervention

6.1 Intervention planning

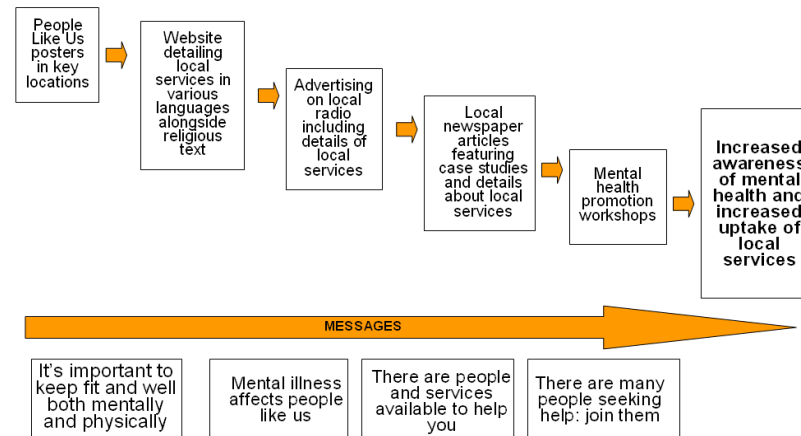
The second part of stage two of the campaign was to develop intervention routes which would deliver the campaign to the target audience. Based on findings from stage one and conversations with stakeholders, a number of intervention ideas were developed.

The primary target segment for this intervention was the Asian community. However, all materials were adapted to be appropriate to all target audiences.

The following intervention ideas were popular when tested with the target audience:

- Placement of collateral at GP clinics, hospitals, shops, local college, schools, religious premises and community centres
- Case studies of real people discussing how they have dealt with their experiences of mental health appearing in local media
- Informative advert on the subject of mental health in local/ethnic media, providing background on symptoms and treatments
- Mental health promotion workshops to increase knowledge and reduce stigma, and to signpost local services
- A website with advice about mental health and details about local services

Based on feedback received at the focus group, the following customer journey was developed.



7. Stage three: intervention delivery

7.1 Intervention delivery

The intervention included campaign launch, dissemination of collateral, media relations, advertising, mental health promotion workshops, development and promotion of a dedicated campaign website, and signposting the target audience and stakeholders to the campaign. These activities were based on the creative route as detailed above and were rolled out between December 2008 and March 2009.

7.2 Campaign launch / showcase

The People Like Us campaign was officially launched to Harrow PCT and local media in the form of a campaign showcase. The showcase included presentations from Forster regarding stages one and two of the campaign, and presentations from Mind in Harrow about the website, workshops and Signposting Booklet. The event took place at the Harrow Health Living Centre on 16 December 2008.

A photographer was present at the launch and photos were taken of representatives from the PCT and Mind in Harrow alongside stakeholders. These pictures were distributed to the media along with a press release announcing that the People Like Us campaign had been launched and the initial plans for the campaign. These materials were sent to local print and broadcast media as well as other relevant national trade, consumer and religious publications.

7.3 Dissemination of collateral

Existing community networks were drawn upon, via Mind in Harrow and the PCT, as avenues for distributing the campaign collateral (posters, flyers and Signposting Booklet). A briefing document was developed and disseminated with the collateral outlining the campaign and asking for each organisation's help and input.

7.4 Media relations and advertising

Local and national, print, broadcast and online publications were targeted about the launch of People Like Us and with newsworthy updates throughout the duration of the campaign. Securing media relations is reliant of the development of a press release, key messages, and campaign Q&A. These documents were developed for the launch of People Like Us and sent to local print and broadcast media announcing the campaign and its aims and inviting journalists to attend the launch event. The press release also:

- referenced the campaign website that launched during the same week
- included quotes from case studies of individuals who have received help for mental ill health
- publicised the health promotion workshops

A photograph of a Mind in Harrow member of staff and a community member displaying a campaign poster within a local setting, was sent to the media together with the briefing documents.

Case studies were secured to act as campaign media spokespeople, alongside Mind in Harrow representatives. The case studies included:

- Chandra Shah: Befriending coordinator at Mind in Harrow
- Abdi Gure: Somali Advocacy Worker at Mind in Harrow
- Alex DaCosta: Chair of the Harrow Refugee Forum
- Pari Nouroozi: Harrow Iranian Community Association and Vice Chair of the Harrow Refugee Community
- Baldeth Sharma: Vice Chair of Harrow Anti Racist Alliance
- Mohammed Aden: Harrow Association of Somali Voluntary Organisations

Alongside the media activity, advertising was considered as a way of raising further awareness regarding the campaign. However, due to budget constraints we were only able to secure advertising space that was provided at no charge.

An advert was developed for the campaign highlighting the following messages:

- people from all communities suffer from mental ill health
- help is available from Mind in Harrow and other local service providers

The website address and health promotion workshops were also publicised via media relations and advertising.

7.5 Mental health promotion workshops

Mental health promotion workshops were developed and facilitated by Natalie Tobert, with the aims of:

- increasing knowledge and reducing stigma associated with mental health
- signposting local existing services

Workshops were delivered across range of different health, education and BME community organizations across Harrow

7.6 Website

A new website was developed by Mind in Harrow for the campaign, based on the campaign creative and messaging and was fully integrated with other campaign collateral. The website address, www.peoplelikeus.org, and the site act as a standalone website address while also linking directly from and to the Mind in Harrow website (www.mindinharrow.org.uk).

The site includes a Mental Health Directory including pages for specific BME languages and communities and extracts from the Signposting Booklet, looking at how mental health can be explored within the fields of religion and spirituality.

7.7 Signposting

Face-to-face and telephone signposting was undertaken by Mind in Harrow, directing the individuals and organisations to local and national existing services. The signposting was an element of the mental health promotion workshops as well as a stand-alone activity. The stand-alone element benefited from relationships with key stakeholders that were developed during the campaign.

7.8 Communicating with stakeholders

GPs play a vital role in ensuring that patients from BME communities are aware of the range of services available to them. It was therefore essential to the success of the campaign that GPs in the borough were informed and engaged around People Like Us.

The Signposting Booklet was developed by Natalie Tobert and Mind in Harrow as a resource for GPs to use in supporting their patients with mental ill-health, and in doing so it was hoped that in the long-term, subsequent visits to the GP may be reduced.

8. Stage four: evaluation – overview

8.1 Overview

This final evaluation report details a full overview of outputs, outcomes and learnings from the campaign.

Evaluation took place throughout the campaign in order to monitor and refine:

- progress against expected outcomes
- identify any difficulties or problems
- suggest improvements and further developments

At the outset of the campaign, Harrow PCT had identified the following desired outputs and outcomes:

Outputs

- reach approximately 75,000 individuals from BME communities, in particular the target audience covered in this report
- prompt 375 requests for signposting to mental health promotion workshops or other appropriate services
- result in 20,000 unique visitors per year to the website
- secure the attendance of 750 individuals from BME communities to attend mental health promotion workshops

Outcomes

- prevent symptoms related to poor mental health and a reduction of GP attendance in 10% of the BME population
- increase uptake of community support, leisure and social services by BME communities by 50%
- increase engagement in services by 15%
- attendees at the mental health promotion workshops to increase their knowledge of mental health and access their knowledge of mental health promotion services within Harrow by 80%

8.2 Considerations

Evaluating behaviour change is a complex process and needs to consider longer term shifts alongside short and medium term actions. Two key factors made this a challenge for the People Like Us campaign:

- the short campaign timeframe - condensing long-term behaviour change into a short five month campaign period
- the lack of benchmarks and metrics at the start of the campaign - preventing any accurate comparative data to illustrate changes in behaviour

We have recommended indicators to measure the success of the campaign. Forster also recommends that the long-term indicators put forth by Harrow PCT be re-evaluated at a later date.

8.3 Areas of Evaluation

The evaluation was conducted throughout the campaign and covered the following areas:

- dissemination of collateral
- media relations and advertising
- mental health promotion workshops
- website
- signposting

8.4 Evaluation summary

Activity	Workshops		Collateral distribution, media & advertising		Signposting		Website	
	Target	Output	Target	Output	Target	Output	Target	Output
Dec 08	1 (100 people)	1 (15 people)	30,00	347,500	60	54	1,700	1,526
Jan 09	2 (200 people)	2 (55 people)	30,000	303,000	120	72	1,700	1,659
Feb 09	2 (200 people)	4 (123 people)	10,000	38,741	120	162	1,700	1,723
March 09	2 (200 people)	11 (516 people)	5,000	37,300	60	117	1,700	1,875
April 09	NA	2 (20 people)	NA	67,500	NA	20	NA	NA
TOTAL	7 (700 people)	20 (729)	75,000	794,041	375	425	6,800	6,783

9. Results – dissemination of collateral

9.1 Dissemination of collateral

The distribution of campaign collateral (posters, flyers and Signposting Booklet) took place in February and March in the following target locations:

- GP surgeries and hospitals
- Places of worship
- Community centres and organisations
- Schools and colleges
- Libraries
- Shops, stores and pharmacies on high streets in Harrow

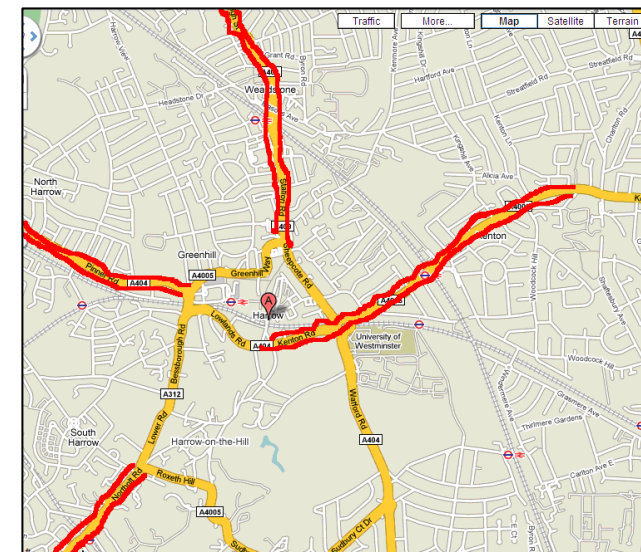
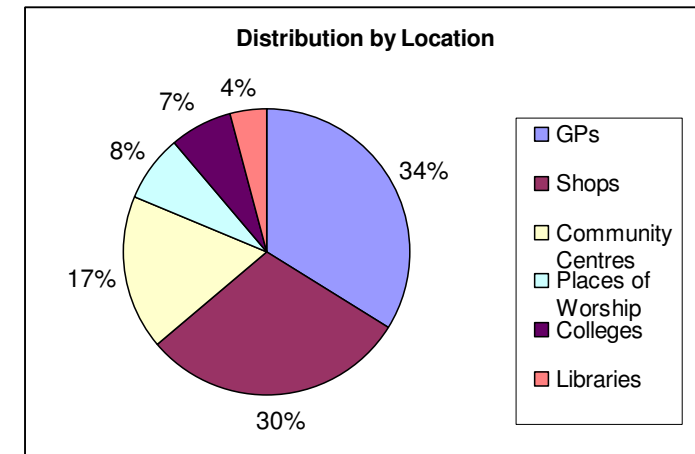
9.2 Distribution by location

In total 145 locations received the campaign collateral, 62 of which were delivered by hand and 83 by post. This can be broken-down as follows:

- 49 GPs
- 44 shops and pharmacies on High Streets
- 25 community centres
- 11 places of worship
- 10 colleges
- 6 libraries

Hand distribution took place along five key high streets in Harrow:

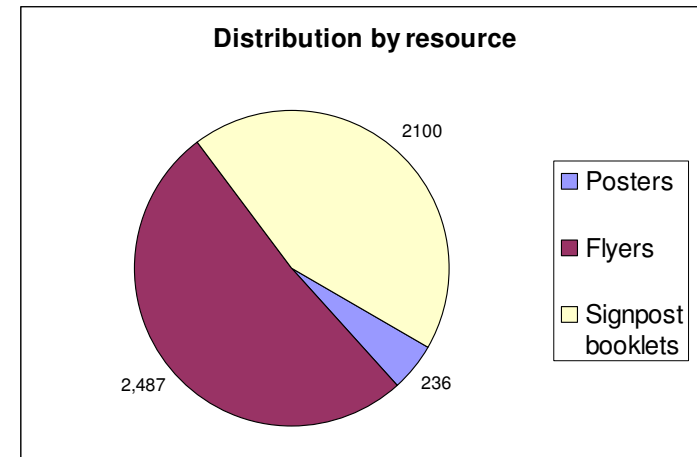
- Kenton Road
- High Road Wealdstone
- Pinner Road
- Northolt Road
- Station Road



9.3 Distribution by resource

Each location received posters, flyers and/or Signposting Booklets, depending on their requests and needs. All GPs, places of worship, community centres, schools, libraries, and pharmacies received the Signposting Booklets alongside the posters and flyers. However, stores and shops on the high streets were more receptive to posters and flyers, as they did not have an appropriate place to display the Booklet. This can be broken-down as follows:

- 236 posters
- 2,487 flyers
- 2,100 signpost booklets



"They [customers] were looking at it, I think because they wanted to know what it was about."

Grocer

"I haven't [noticed anyone looking at the posters] because we have so many posters here, but people must have because most of the leaflets have gone."

Wealdstone Library librarian

"Yes, possibly [customers identify with the person pictured]. Some of the families that come through here are going through the things that are in the posters."

Dentist

"We have quite a multicultural congregation so there'll probably be one face/poster that'll appeal to each member."

Minister at Wealdstone Baptist Church

10. Results - media relations and advertising

10.1 Quantitative analysis of secured media coverage

Date	Publication	Details	Reach	AVE
16 Dec 08	Sunrise Radio London 1458AM	People Like Us was referred to in the news bulletin	345,000	N/A
25 Dec 08	Harrow Observer	Article covering the launch of People Like Us, included the website address	2,500	£912.60
8 Jan 09	Westside Radio 89.6FM	Mark Gillham guest on the community health show with Carla Battista for one hour	35,000	N/A
21 Jan 09	Asian Voice (print)	Chandra Shah and Arvind Joshi interviewed by Rupanjana Dutta, deputy editor regarding People Like Us, included the website address	67,500	£2,052.00
21 Jan 09	Asian Voice (online)	As above	N/A (included above)	NA (included above)
26 Jan 09	Harrow Times (print)	Journalist attended the campaign launch and Religion, Spirituality and Mental Health workshop at Harrow College. Article referred to the launch of People Like Us and included the website address	175,000	£717.60
29 Jan 09	Harrow Times (online)	As above	23,000	NA
12 Feb 09	Westside Radio 89.6FM	Abdi Gure guest on Somali Unit show for one hour	35,000	N/A
12 March 09	Westside Radio 89.6FM	Gillian Samuel and Natalie Tobert guests on The Community Health Slot with Matthew Penney from 3 - 4pm	35,000	N/A
4 April 09	Asian Voice	Feature regarding the screening of Open Secrets at Safari Cinema	67,500	£2,052.00
Total reach to date			785,500	
Total AVE to date				£5,734.20+

10.2 Qualitative analysis of secured media coverage

The following key messages were reinforced within all media interviews and news reports:

- 'People Like Us' is the new mental health promotion campaign launched by Mind in Harrow and Harrow PCT
- The campaign aims to improve knowledge and understanding of mental health issues, and awareness of mental health services among BME communities in Harrow
- Raising awareness reduces stigma around mental health issues
- There are many services available in various languages
- The campaign website is www.peoplelikeus.info

"I have read the article above. Keep up the good work. You are doing a great job for Asian people."

Comment by reader below Asian Voice article online

10.3 Forthcoming media opportunities

The following media outlets have asked to be contacted following the campaign evaluation:

- Mental Health Nursing
- BBC Communities
- Radio Northwick Pack

10.4 Quantitative analysis of secured advertising

Date	Publication	Details	Reach
Jan 09	Harrow Heights	Article covering the launch of People Like Us	2,500
Feb 09	Harrow Heights	Free advert secured and includes the website address	2,500
Total reach to date			5,000

11. Results – mental health promotion workshops

11.1 Mental health promotion workshops overview

Natalie Tobert drew on existing community networks to run a series of mental health workshops throughout Harrow. The first workshop was held in December and workshops continued through the duration of the campaign until the beginning of April.

The workshops were either standalone events or People Like Us had a presence (e.g. table with campaign collateral) at community events and conferences. The data below represents workshops that were facilitated and that directly addressed the People Like Us campaign.

11.2 Mental health promotion workshops challenges

Forster's brief did not extend to running the mental health promotion workshops. According to Mind in Harrow and Natalie Tobert, this was one of the most challenging areas of the campaign. It took time, patience and understanding to develop a network of contacts in order to build trust and gain rapport with community and faith leaders. However, due to the sensitive manner in which these relationships were developed, some communities that previously showed resistance in their willingness to discuss mental health, are now beginning to show an interest in the issue and the campaign. Time was of the essence particularly to this element of the campaign, with March becoming a busy time for workshops and interested parties not able to run workshops during this month showing interest in getting involved with the campaign in the near future.

11.3 Signposting Booklet

Natalie Tobert developed the Signposting Booklet as a visual trigger to encourage discussion at the workshops. The facilitator had used display boards as a similar technique to prompt conversations at previous workshops and believed that by combining images of religion and faith linked to mental health the issue would become more comprehensible and personal to the workshop attendees. In turn, frank discussions arose at the workshops which led to a greater understanding of mental health and mental health services.

11.4 Quantitative analysis of facilitated mental health promotion workshops

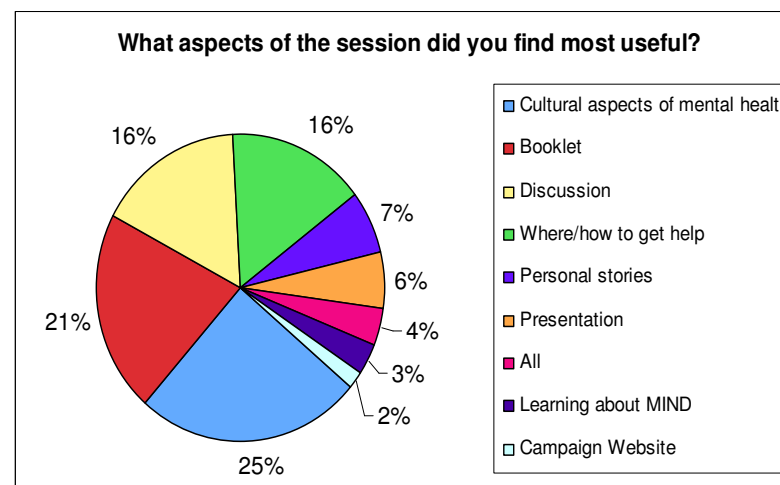
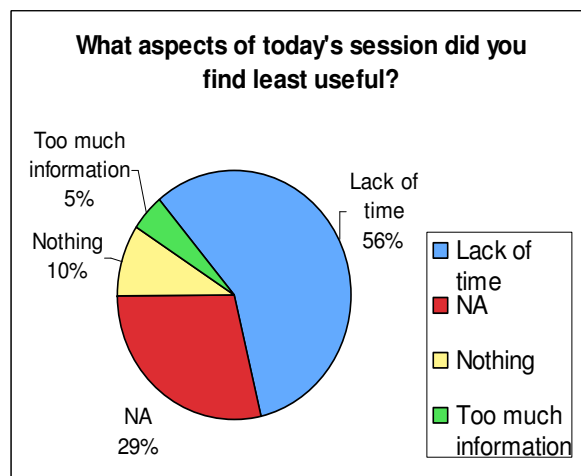
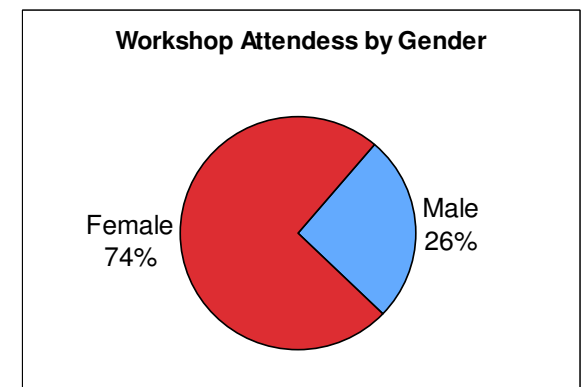
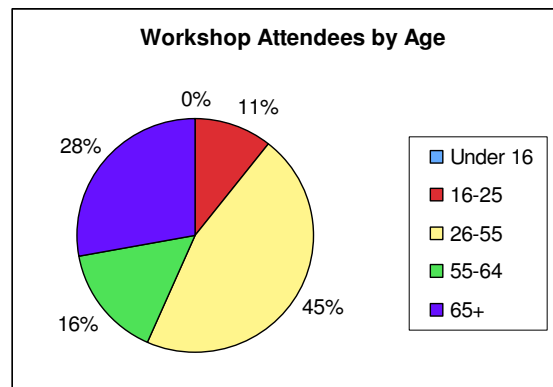
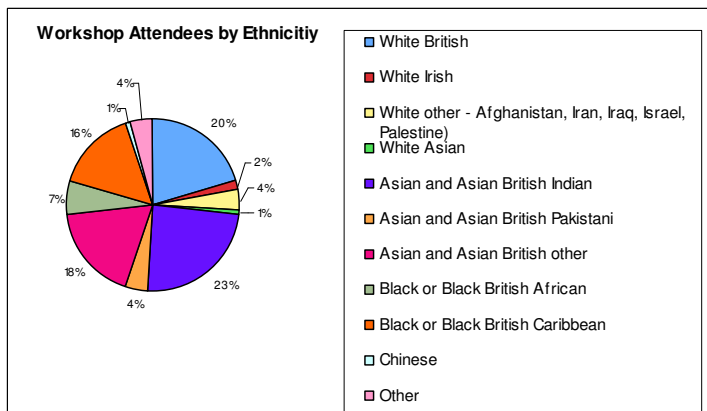
Date	Workshop	Number of attendees
10 December 08	Harrow College, Harrow Weald campus	15
31 January 09	Harrow College, Harrow on the Hill campus	5
30 January 09	Asian Awareness day, Cygnet clinic, Harrow on the Hill	50
19 February 09	HUG meeting	20
21 February 09	Mental Health Befrienders	18
24 February 09	EKTA Group	50
26 February 09	Northwick Park Hospital, Community Rehab Team	35
6 March 09	Northwick Park hospital, workshop with psychiatrist	1
7 March 09	Sri Aurobindo Society	13
9 March 09	Harrow College, three sessions	52
12 March 09	Delivering Race Equality Annual conference, delegate speaker for Shift in Action workshop	40
14 March 09	African-Caribbean Association	18
14 & 15 March 09	Harrow Council Events Programme, Two arts workshop	18
17 March 09	Partnership with Older People Panel & Older Peoples Reference group	36
19 March 09	Workshop following screening of Open Secrets at Safari Cinema	250
20 March 09	North harrow Assembly Halls	60
25 March 09	Community Centre Northolt, Iranian Association	20
27 March 09	Marlborough Hill, House meeting	8
1 April 09	New Testament Church, Sunrise Senior Citizens	10
2 April 09	Beacon Centre, Somali Health Fair run by PCT	10
Total	20	729

The Safari Screening, which took place on 19 March, had a huge impact on the project. The event was planned in partnership with Shift and was identified as the first public venue to screen the production of the award winning film *Open Secrets*. The event was attended by 250 people representing a range of different BME communities. The film director Azeem Khan attended and a question and answer session provoked interest in mental health issues. A discussion workshop followed where the Signposting Booklet was used as a tool to ensure that people know where to go if they need help.

"I was amazed to see the great turn-out of people: it is so good to know the amount of people who care and who are interested in making a positive change to abolish stigma and discrimination around Mental Health in our society!"

11.5 Quantitative evaluation of facilitated mental health promotion workshops

All participants of the workshops received a questionnaire to complete. This information allowed us to refine and assess reception to the workshops while they were in progress. The data below is gathered from 205 attendees' responses.



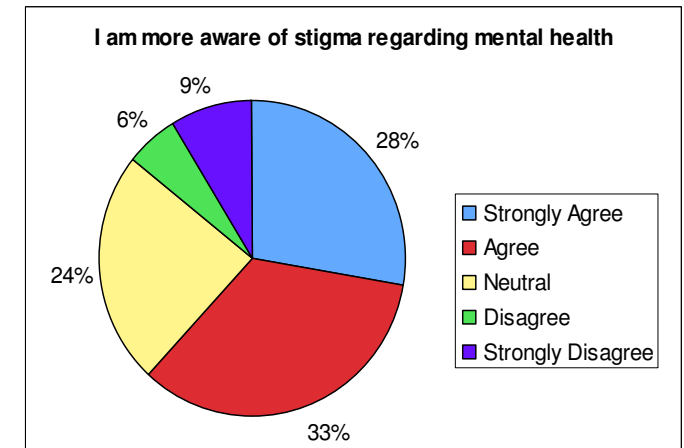
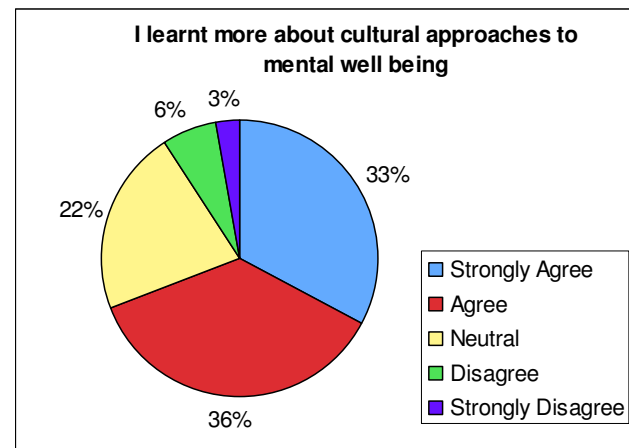
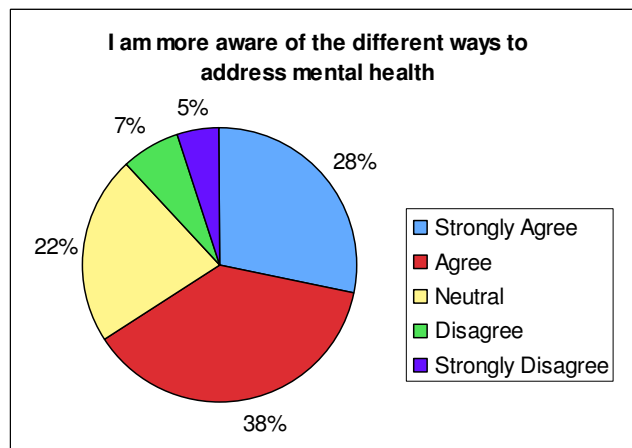
"I find the booklet very useful because I am new in this country and now I know if I get in any problem where should I contact."

"Very interesting discussion, especially on various ideas about what is mental health and its cultural aspects."

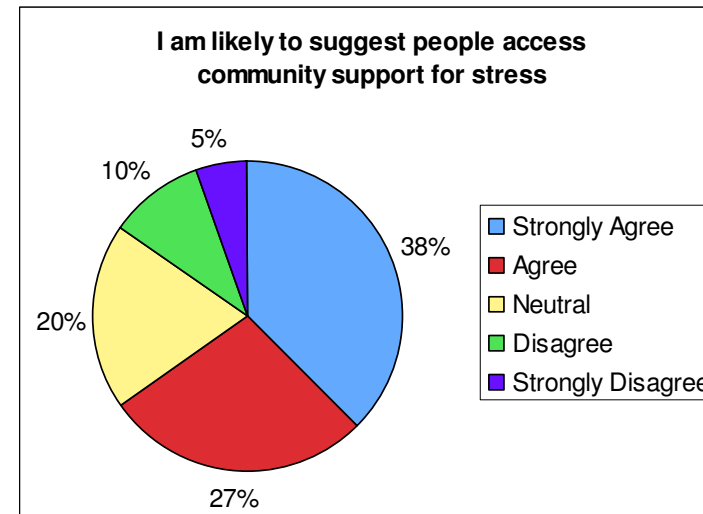
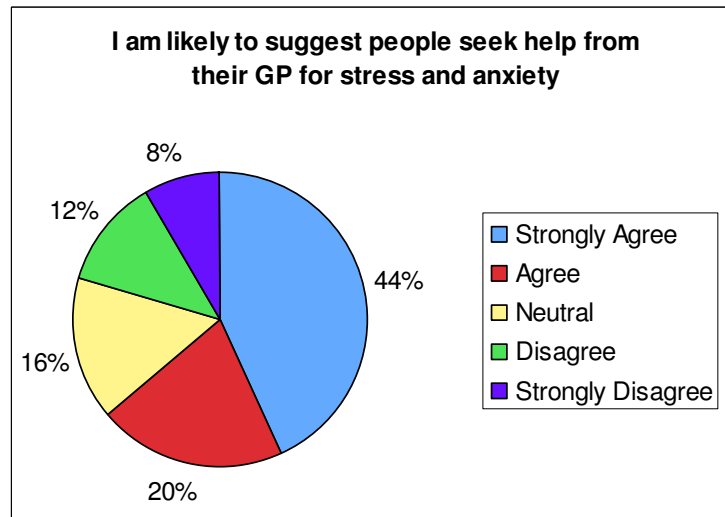
"It was very good experience to hear the views of other people from other ethnic background."

"The booklet is good because it provides guidance about what is available- something which can seem unclear at times."

11.5.1 Perceptions of Mental Health



11.5.2 Perceptions towards mental health services



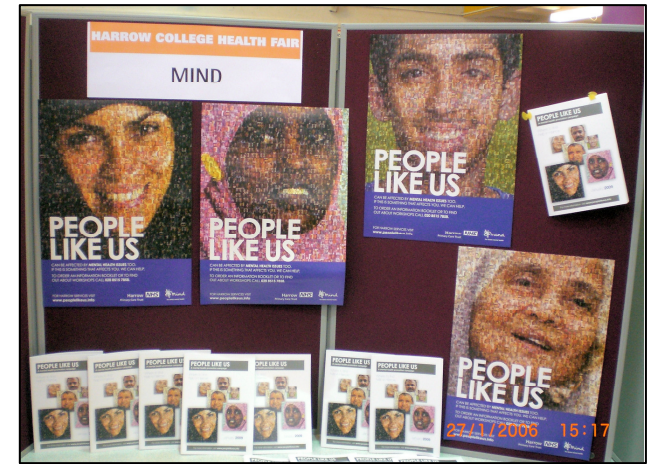
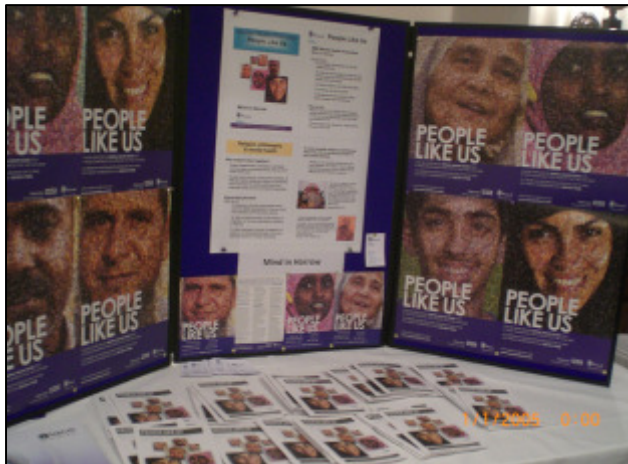
“Very well presented in easy to understand terms. Very user friendly resources which will be of enormous value when trying to help students.”

“The booklet has inspired me to send it to two people who both practice extreme, but different religions.”

“An eye opener to the causes and severity of mental health in our community. Great job!”

"This helped me put the idea of mental health into a bigger picture of community and personal background."

"The film day made a great impression on me. It touched the very heart of the problem I have faced as a mentally ill person."



12. Results – website

12.1 Quantitative analysis of visitors to the website

Month	Number of visitors	Promotion
December 08	1,526	<ul style="list-style-type: none"> • Campaign launch • Media activity
January 09	1,659	<ul style="list-style-type: none"> • Media activity • Weblink circulated to: <ul style="list-style-type: none"> – 100 community organizations – Harrow PCT – College of North West London – Foundation Trust – Harrow Council • Website demonstration to Harrow College support staff • Distribution of Signposting Booklet
February 09	1,723	<ul style="list-style-type: none"> • Media activity • 14,000 Harrow College students via the college intranet • Counselling and Therapies Booklet emailed to all Harrow GPS • Weblink and details of campaign uploaded on to Harrow PCT and Harrow Council websites • Distribution of campaign collateral
March 09	1,875	<ul style="list-style-type: none"> • Media activity • Weblink circulated to Harrow Association of Voluntary Services websites • Distribution of campaign collateral • Distribution of campaign collateral
Total	6,783	

13. Results – signposting

13.1 Quantitative analysis of signposting activity

Month	Number of people reached	Details
December 08	54	<ul style="list-style-type: none"> • Telephone signposting to people in crisis, needing employment support, advocacy or counselling
January 09	72	<ul style="list-style-type: none"> • Telephone signposting to people in crisis, needing employment support, advocacy or counselling • Face-to-face signposting with councillors and religious leaders at Harrow Council Civic Centre
February 09	162	<ul style="list-style-type: none"> • Face-to-face signposting via: <ul style="list-style-type: none"> – Harrow College Health Fairs to Greenhill and Weald campuses – Hindu Festival of Holi event at Hatch End High School – Hujjat Centre and Mosque • Telephone signposting to people in crisis, needing employment support, advocacy or counselling
March 09	117	<ul style="list-style-type: none"> • Telephone signposting to people in crisis, needing employment support, advocacy or counselling • Face-to-face signposting via: <ul style="list-style-type: none"> – Over 65s Health Fair – Zoroastrian centre, Interfaith day – National Institute of Adult Continuing Education conference
April 09	20	<ul style="list-style-type: none"> • Face-to-face signposting via: <ul style="list-style-type: none"> – National Spirituality and Mental Health Forum
Total	425	

14. Results – communicating with stakeholders

14.1 Quantitative analysis of activity involving communicating with stakeholders

Month	Number of GPs and GP Practise Managers reached	Avenue	Details
February	177	Email	<ul style="list-style-type: none"> • Details regarding People Like Us based on the press release developed for the media • One page PDF re counselling resource take from the Counselling & Talking Therapies Booklet
March	300	Harrow PCT website	<ul style="list-style-type: none"> • News feature and campaign collateral uploaded on to the site • We were advised by the GP Contracts Manager that this route would be more effective in reaching GPs in comparison to the GP intranet
Total	477		

14.2 Qualitative feedback received from GPs and GP practice managers

14.3

'Many thanks for news about this invaluable project and this very useful information. Have circulated to my colleagues and will find the People Like Us information very useful.'

Harrow Doctor

"Useful information for the doctors. Went to all of them I think they are quite eye-catching and attractive, as well as very helpful. The Posters don't quite reflect our practice population, so to put a whole host of them up wouldn't be appropriate."

GP Manager

"It's a very informative flyer, but we'll see if more patients ask about it."
Dental Practice Manager

“The chief exec [of the PCT] contacted me prior to the materials’ launch. I’ve also read about the campaign from the regular emails and letters that are circulated to GPs by the PCT.”

Harrow Doctor

“We hung the posters up on the nurses board. What most impressed me was the People Like Us website—particularly the breakdown by language. I supervise staff and have passed along this information to them since they see a wider range of people, and a breakdown by language would be very useful to them

“Also, the updated version of what services are available was very helpful.”

Harrow Doctor

“I think they [posters are] eye catching enough to make people pick them up, but in terms of getting people to act on the advice given I’m not sure. They seem more like a guide. I think a problem is, is that they’re targeted at people with mental health problems, rather than those who don’t – or don’t think they have. I think more should be made of ‘how to keep yourself well’, rather than what to do to make yourself better.”

Harrow Doctor

14.4 Forthcoming activity – GP Forum

Presenting the People Like Us Campaign to the GP Forum was thought to be an effective way of reaching GPs in the borough and we were very keen to attend. The scheduled GP Forum was to take place during January. Unfortunately this was delayed and consequently resulted in a delay in reaching GPs. We recommend that Mind in Harrow maintain contact with the GPs’ Contracts Manager to confirm the rescheduled date and a presentation slot regarding People Like Us at the GP Forum.

15. Evaluation against National Social Marketing Benchmark Criteria

The People Like Us campaign has been evaluated against the National Benchmark Criteria for social marketing. For more information regarding the benchmark criteria please visit www.nsmcentre.org.uk.

Benchmark	Campaign details
1. Customer orientation (Using solid research to understand audience)	<ul style="list-style-type: none"> Using solid research to understand audience User centred approach to developing the campaign creative Review of national and local data regarding mental health and BME communities
2. Insight (Using research to generate workable insights)	<ul style="list-style-type: none"> Lack of awareness and acceptance of mental health Lack of understanding of how to access mental health services Language and literacy barriers
3. Behaviour goals (Focus on behaviour change with specific goals)	<ul style="list-style-type: none"> Target audience to become aware of mental health and services Target audience to engage with services in Harrow
4. Segmentation (Segment based on attitude as well as demographics)	Three segments based on primary and secondary research: <ul style="list-style-type: none"> Asian community, young (16 – 21 years) and older (55 years+) Somali community Refugees, Iranian and Afghani
5. Exchange (Develop exchange to understand full cost of change)	<ul style="list-style-type: none"> Motivations to accept mental health: social norm Identified barriers to: Benefits of accessing services: support for mental ill-health, understanding of mental ill-health and how it can be improved
6. Competition (Understand internal and external factors)	<ul style="list-style-type: none"> Fear regarding accessing mental health services for reasons linked to religion and securing asylum Support received from family, community and within religious settings
7. Methods mix (Method-neutral approach with ultimate change at heart)	<ul style="list-style-type: none"> Campaign launch Dissemination of collateral Media relations and advertising Mental health promotion workshops Dedicated campaign website Communications with stakeholders

<p>8. Theory (Apply behavioural theory and testing assumptions)</p>	<ul style="list-style-type: none">• Social Norms Theory: people's behaviour is strongly influenced by their perception of how other members of their social group behave• Health Belief Model: a person's willingness to change their health behaviour is based on perceived susceptibility to risk; perceived severity of health risks; perceived benefits of taking protective action; and perceived barriers that might frustrate this intention
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16. Campaign summary

To sum up, the campaign outputs can be summarised against the original output requirements as set by Harrow PCT as follows:

- 20 mental health promotion workshops arranged and facilitated, reaching a total audience of 726
- 236 posters, 2,487 flyers and 341 Signposting Booklets distribution
- 10 items of media coverage secured, reaching a total audience of 785,500
- 2 items of advertising secured, reaching a total audience of 5,000
- 425 individuals signposted
- 6,783 unique visitors secured for the website
- 477 GPs and GP Practice Managers reached

Overall, the PCT's output requirements have been achieved, other than the workshops. According to Mind in Harrow, securing workshops has however been the most challenging area of the campaign. It has taken time, patience and understanding to develop a network of contacts in order to build trust and gain rapport with community and faith leaders. These relationships have now been formed and given time will prove even more effective in generating interest in workshops behind facilitated at their faith and/or community centres.

The lack of benchmarks and metrics at the start of the campaign have prevented any accurate comparative data to illustrate changes in behaviour and whether Harrow PCT's required evaluation benchmarks/outcomes, have been achieved.

17. Recommendations

Based on the insights gathered throughout this social marketing programme, we would make the following recommendations for how Mind in Harrow and Harrow PCT can continue to increase awareness of mental health and services among BME communities in the borough.

In social marketing a 'magic bullet' that will lever a target audience to change their behaviour quickly usually doesn't usually exist – it is often a long-term learning and refining process involving both changes in service delivery and information provision and communications approach. We would therefore recommend that the People Like Us campaign is sustained over an ongoing period, at least three years, with the aim of generating further awareness and consolidating understanding of the campaign among the target audiences. In turn, higher levels of awareness will translate into action and meet the campaign objectives to increase awareness of mental health and services.

Based on the positive feedback received to date from the target audience, the campaign is well placed to meet audience needs. The campaign identity, collateral and website have proved effective and the workshops are working well. Good relationships have also been developed with the community and given time will prove even more effective in developing future partnership work.

Relationships have also been formed with GPs. This important activity has been somewhat limited, as it proved particularly difficult to make initial contact with GPs and in turn to engage them with the campaign. This reflects frustrations Mind in Harrow have experienced in engaging GPs in the past. There have been positive outcomes in this area through People Like Us and a key relationship has been established with the GP Contracts Manager for Harrow; we would recommend building on this relationship to take forward future campaign activities. One particular activity that is currently on the horizon and that would be an effective way of reaching GPs, would be presenting People Like Us at the GP Forum on mental health. No date has been confirmed as yet for the Forum, however the GP Contracts Manager has confirmed that she will allocate a slot to People Us once the date has been agreed.

Relationships with the media, in particular with local and BME press, have also been forged and this has allowed for frank, open discussions that can be harnessed further in future media work. Short term media opportunities that are outstanding from the implementation stage of the campaign are following up with Mental Health Nursing, BBC Communities and Radio Northwick Pack. These media have asked to be re-contacted following the campaign evaluation.

As no baseline survey was conducted prior to the launch of People Like Us, it would be beneficial to conduct a thorough survey with the target audience to establish their awareness levels regarding the campaign, mental health and services, before continuing the campaign.

In addition, we would also recommend reviewing the success of People Like Us on a monthly basis alongside a thorough evaluation on a yearly basis. In the long-term, the benchmarking exercise and regular evaluation will enable accurate comparison of data to illustrate changes in behaviour and illustrate whether the campaign aim and Harrow PCT's required evaluation benchmarks/outcomes, have been achieved.

In addition, Mind in Harrow have put forward the following recommendation, based upon feedback received from the workshops that revealed that attendees increased their knowledge regarding mental health as well as their awareness of local mental health services. To naturally evolve this awareness raising process Mind in Harrow recommend continuing to collaborate with BME communities, via workshops and signposting exercises, to develop new translations of mental health diagnoses (e.g. schizophrenia and depression) to bridge the cultural language gap, between western and BME perspectives on mental health.

18. Contact details

For further information regarding People Like Us please contact:

Mind in Harrow

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Forster

Ellen O'Donoghue / Almon Caspersz

020 7403 2230

ellen@forster.co.uk / almon@forster.co.uk

Appendix I: Distribution location details

Shops

Scope
 British Heart Foundation
 Café Works
 Canvinio
 Cards n gifts
 Splendour
 Bodywise
 Safer food
 Ayur beauty
 Chinese acupuncture
 Tesco
 Safari Cinema
 Madina Supermarket
 Harrow Pharmacy
 Nirala sweets
 Harrow International Communications Centre
 Harrow Halal Meat
 Yinkus
 Pineapple Boutique
 Red Brick Café
 Tawakal Telecom
 Fresh Food
 Sunrup News
 Garner Pharmacy
 Shayuna Sweets
 Pinner Supermarket
 Morning Fresh
 Saville Chemist
 Delight Food and Wine
 Kubri Chemist

Health First
 Tariq Butcher
 Tesco Express
 Yerest Pharmacy
 Overton and Picky Pharmacy
 Optnear Pharmacy
 Churchill Chemist
 Fresh Fruit and Veg
 Stratwick's Ltd Pharmacy
 SH Food and Wine
 Best Food- Aynagaran Video
 S & A Pharmacy
 Happy Food and Wine
 South Harrow Off Licence

Libraries

Roxeth Library
 Kenton Library
 Pinner Library
 Rayners Lane Library
 North Harrow Library

Community centres

Connexions
 Harrow Council
 Samaritans
 Job Centre Plus
 Harrow Bereavement Centre
 Volunteer Centre
 Harrow in Business Centre
 Kenton Learning Centre
 Harrow Healthy Living Centre

FWA Resource Centre
 Horn Response Project/BME Community Centre
 West London Refugee Women's Forum
 Sangat
 Harrow Drug and Alcohol
 Harrow CAB, Housing Advice Centre
 Afgan Association
 H.O.P.E
 Harrow Association of Disabled People
 Carers Support
 Harrow Refugee Forum
 Sneh Care
 Reed in Partnership
 Aspire
 Harrow Leisure Centre
 Roger Bannister Sports Centre

GPs and dental surgeries

371 Dental Surgery
 Aspri Medical Centre
 Bacon Lane Surgery
 Belmont Health Centre
 Chandos Surgery
 Charlton Medical Centre
 Civic Medical Centre
 Dukes Medical Centre
 Elliot Hall Medical Centre
 Elmcroft Surgery
 GP Direct
 Hatch End Medical Centre
 Headstone Lane M.C

FORSTER

Headstone Road Surgery
Honeypot Medical Centre
Hutcheson
Imperial Dental Centre
Kenton Bridge M.C
Kenton Clinic
Kenton Dental Centre
King Road Surgery
Lanfranc Medical Centre
Milne Field Surgery
Mollison Way Medical Centre
Oxford Drive Medical Centre
Pinner Road Dental Surgery
Pinner View M.C
Primary Care Medical Centre
Quadrant Dental Care
Roxbourne Medical Ct
S Balakrishnan
Savita Medical Centre
Simpson House M.C
St Peter's Medical Centre

Streatfield Surgery
The Enderley Medical Centre
The Enterprise Practice
The Medical Centre
The Northwick Surgery
The Pinn Medical Centre
The Pinner the Road Surgery
The Ridgeway Surgery
The Shafesbury Medical
The Stanmore Medical Centre
The Stanmore Surgery
The Village Surgery
Wasu Medical Centre
Wealdstone Centre
Zain Medical Centre

Places of worship

Harrow Central Mosque
Wealdstone Baptist Church
Trinity Methodist Church
Husseini Islamic Centre

Sri-Lankan Muslim Culture Centre
Stanmore and Canons Park Synagogue
Kenton United Synagogue
Shree Swaminarayan Temple
Shri Sithi Vinayagar Temple
Mahavir Foundation
Digambar Temple

Colleges

Harrow College
Stanmore College
St Dominic's Sixth Form College
Canons High School
Harrow High School
Shaftsbury High School
Whitmore High School
Hatch End High School
Nower Hill High School
University of Westminster - Harrow
Campus