FLOURISH EVALUATION REPORT

Adam Zimmermann
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1. INTRODUCTION

In April 2010 Neami commenced the delivery of Flourish throughout the organisation. Flourish; a self development program developed by the University of Wollongong, is designed to help participants identify their strengths and values in life and to guide them in developing a plan to express these things more strongly in their lives. The Flourish program focuses on participants developing a sense of wellbeing, i.e. recovering a life that is meaningful and fulfilling. The aim of the program is to ultimately motivate people and equip them with the skills necessary to achieve positive changes within their lives.

Neami is committed to demonstrating the effectiveness of its services through routine data collection. An evaluation of the program was therefore incorporated into the delivery of Flourish. The evaluation had three broad aims, as follows:

- To explore the experiences of participants by measuring the impact of the Flourish program in improving their overall self development and psychological well being.

- To explore the experiences of the Peer Support Workers as Facilitators of the Flourish Program.

- To determine the suitability and effectiveness of the Flourish program design and delivery within Neami.

There have been few studies exploring the effectiveness of peer support work in mental health settings. One randomised controlled trial[1] on peer support groups for people with psychosis, demonstrated that a peer intervention was effective in improving the social network of participants by encouraging mutual relationships and enhancing their appraisal support. The finding that peer support groups lead to more mutual relationships is essential, as most people with severe mental health issues have small social networks with few opportunities to share their experiences with other people (Castelein et al, 2008). This finding is illustrated in the current evaluation in which majority of participants reported that participation in Flourish was extremely important in them connecting with and learning from other people's experiences.

This report will summarise the findings of evaluation data collected over three rounds of Flourish delivery between April 2010 and early 2011 across eight service sites.

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[1] **The key distinguishing feature of the usual randomised controlled trial RCT is that study subjects, after assessment of eligibility and recruitment, but before the intervention to be studied begins, are randomly allocated to receive one or other of the alternative treatments under study.**

2. EVALUATON DESIGN

All Peer Support Workers and participants of Flourish were invited to take part in the evaluation. Participants completed a set of recovery measures pre and post their Flourish involvement and again at a three month follow up point. Peer Support Workers participation in the evaluation involved an interview before and after the first round of Flourish delivery and again after the third round as part of a reflection exercise.

FLOURISH DELIVERY

Five Flourish groups are routinely delivered across Neami by a team of eleven Peer Support Workers in service sites in Queensland, New South Wales and Victoria. The program consists of 6 sessions usually delivered over a 12 week period, consisting of four components: a participant handbook, a set of audio podcasts, regular peer-support meetings, and reminder coaching phone calls on the alternate weeks.

EVALUATION MEASURES

The *Self Identified Stage of Recovery* (SISR) (Andresen et al, 2006) is a two-part scale which was used in the evaluation to assess both the stage of recovery (*SISR A*) and the component processes of recovery (*SISR B*). *SISR A* consists of five statements, each representing a stage of recovery (*Moratorium, Awareness, Preparation, Rebuilding, Growth).* Respondents choose the statement which best represents their current recovery experience. *SISR B* consists of four items representing four recovery processes *(Hope, Responsibility, Identity, Meaning)* rated on a six point scale from Disagree Strongly to Agree Strongly.

The *Mental Health Continuum Short Form (MHC-SF)* (Keyes, 2002) consists of 14 items designed to determine emotional, psychological and social well being. Respondents choose on a six point scale from Never to Every Day about how often they have experienced or felt in the past month related to the 14 items. On both the SISR A and B and the MHC-SF a higher rating indicates a better recovery progress and higher levels of emotional, psychological and social well being.

The Flourish Facilitators supported participants to complete the forms where necessary and also liaised with a number of CRSWs who were working with people who had completed Flourish in order to get the three month follow up measures completed. Participants were also requested to complete a basic feedback/evaluation form at the end of the last Flourish session in which they rated various aspects of the group including the overall satisfaction with the course, mix of activities, etc. Within this form they were also encouraged to provide any general comments about what they thought of Flourish.

All Peer Support Workers took part in a semi-structured qualitative interview designed to explore their experiences of being a Flourish Facilitator.

3. EVALUATON FINDINGS

FLOURISH PARTICIPANTS

The total number of Flourish participants included in the evaluation was 39. They were recruited from five Flourish groups delivered in Brisbane, Sydney and Melbourne, and included 21 males and 18 females, with an average age of 41 years (age range 22 to 61). The breakdown of participant involvement in the evaluation from the various Neami service sites is as follows: Darra (13), Strathpine (8), Whittlesea (5), Briar Hill (5), Thornbury (3), Heidelberg (2), Regent (2), Ashfield (1).

The average length of time a participant had been receiving support from Neami was approximately 13 months. The primary diagnoses reported by the participants were: Schizophrenia (15), Depression (8), Bi-Polar Disorder (7), Anxiety (5), Psychosis (3) and Personality Disorder (1).

RECOVERY AND WELLBEING

Mean scores for each of the measures completed by participants at pre, post and follow up time points are reported below in Tables One, Two and Three. Also included in the tables are the mean scores for participants who completed Flourish for a second time.

Table One demonstrates that there was a gradual increase in the mean score between the pre, post and follow up time points for the SISR A. The mean scores for these time points show that the majority of participants remained in the *Preparation* stage of recovery, yet they were moving closer to the *Rebuilding* stage. Participants who completed Flourish for a second time began and finished the group in the *Rebuilding* stage of recovery.

Paired *t* tests[2] conducted on SISR A scores revealed that none of these increases could be considered to be statistically significant. This result may have been influenced by the amount of missing data in the sample, i.e. participants completing a pre form but not a post or not being able to match pre and post forms due to inconsistencies in codes or missing demographic information. The low number of participants that completed the three month follow up measures may also have contributed to the lack of statistically significant score increases. Additionally, a one-way repeated measures analysis of variance (ANOVA) test (used to compare mean scores over three or more points in time) also indicated that the increase in mean scores were not at a statistically significant level over the pre, post and follow up time points.

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[2] **Used to test whether there is a significant mean difference between two sets of paired data, i.e. scores on the SISR A before and after completing Flourish. A result is called statistically significant if it is unlikely to have occurred by chance. The amount of evidence required to accept that an event is unlikely to have arisen by chance is known as the significance level or critical p-value. The lower the p-value the more significant the result.**

Table One

SISR A MEAN SCORES					
	Pre (1st time)	**Post (1st time)**	**Follow Up**	**Pre (2nd time)**	**Post (2nd time)**
Mean	3.19 (n=32)	3.50 (n=36)	3.86 (n=14)	4.00 (n=7)	4.17 (n=6)

Range = 1 (Moratorium), 2 (Awareness), 3 (Preparation), 4 (Rebuilding), 5 (Growth).

The mean scores for the SISR B are presented below in Table Two. In addition to there being consistent increases in the mean scores for each of the recovery processes, a number of paired *t* tests conducted indicated many of the increases in mean scores to be statistically significant. There was a statistically significant increase in participant *Hope* scores from Pre (M=4.43, SD=1.237) to Post (M=5.05, SD=.970), *t*(36)=-3.967, *P*<.05 (two tailed) and from Pre (M=4.73, SD=1.033) to Follow Up (M=5.20, SD=.862), *t*(14)=-2.168, *p*=.048 (two tailed). There was a statistically significant increase in *Identity* scores from Pre (M=4.73, SD=1.283) to Post (M=5.08, SD=0.862), *t*(36)=-2.124, *p*=.041 (two tailed). The analysis also revealed a statistically significant increase in *Meaning* scores from Pre (M=4.27, SD=1.484) to Post (M=4.86, SD=1.058), *t*(36)=-2.541, *p*=.015 (two tailed) and from Pre (M=4.47, SD=1.598) to Follow Up (M=5.13, SD=.915), *t*(14)=-2.646, *p*=.019 (two tailed). The final statistically significant increase in scores for the *SISR B* were recorded for *Responsibility* from Pre (M=4.73, SD=1.534) to Follow Up (M=5.53, SD=.915), *t*(14)=-2.567, *p*=.022 (two tailed).

The higher pre and post scores recorded for those participants that completed Flourish for the second time also provides an indication of the benefits gained from completing the program twice. As with the *SISR A*, the one-way repeated measures (ANOVA) test conducted for the *SISR B* did not reveal any statistically significant increases in scores over the multiple time points.

Table Two

SISR B MEAN SCORES					
	Pre (1st time)	**Post (1st time)**	**Follow Up**	**Pre (2nd time)**	**Post (2nd time)**
Hope	4.46 (n=39)	5.05 (n=37)	5.20 (n=15)	5.43 (n=7)	5.50 (n=6)
Identity	4.77 (n=39)	5.08 (n=37)	5.33 (n=15)	5.43 (n=7)	5.17 (n=6)
Meaning	4.31 (n=39)	4.86 (n=37)	5.13 (n=15)	5.43 (n=7)	5.33 (n=6)
Responsibility	4.97 (n=39)	5.52 (n=36)	5.53 (n=15)	5.86 (n=7)	6.00 (n=6)

Range = 1(Disagree Strongly), 2(Disagree Slightly) 3(Disagree Somewhat), 4(Agree Slightly), 5(Agree Somewhat), 6(Agree Strongly).

Analysis of the participant scores for the Mental Health Continuum Short Form presented in Table Three indicated a number of small but gradual increases in scores across the various time points. There were also a number of small decreases between some of the first round pre and post completion of the measures. Further analysis revealed no statistically significant increases or decreases in scores between 1st round pre and post completion of the measure. However, a number of paired *t* tests were conducted between other points in time, i.e. pre and follow up, pre and post for second time completion and pre first time completion and post second time completion, with a number of statistically significant increases recorded, as summarised below:

- *Pre and Follow Up*

    o *That you had something important to contribute to society* Pre (M=2.47, SD=1.457) and Follow Up (M=3.33, SD=1.234), *t*(14)=-2.694, p=.017.

    o *That you had warm and trusting relationships with others* Pre (M=2.73, SD=1.251) and Follow Up (M=3.07, SD=1.496), *t*(14)=-2.709, p=.017.

    o *That you have experiences that challenge you to grow and become a better person* Pre (M=3.00, SD=1.648) and Follow Up (M=4.07, SD=1.100), *t*(14)=-2.694, p=.017.

    o *Confident to think or express your own ideas and opinions* Pre (M=2.80, SD=1.521) and Follow Up (M=3.67, SD=1.291), *t*(14)=-2.229, p=.043.

- *Pre and Post (Second time)*

    o *That your life has a sense of direction or meaning to it* Pre (M=3.33, SD=1.862) and Post (M=4.33, SD=1.033), *t*(5)=-2.739, p=.041.

- *Pre (First Time) and Post (Second Time)*

    o *That our society is becoming a better place for people* Pre (M=1.67, SD=1.633) and Post (M=3.67, SD=1.366), *t*(5)=-2.928, p=.033.

    o *That you liked most parts of your personality* Pre (M=.50, SD=.577) and Post (M=3.50, SD=1.915), *t*(3)=-4.243, p=.024.

    o *That you have experiences that challenge you to grow to become a better person* Pre (M=2.00, SD=1.789) and Post (M=4.17, SD=.753), *t*(5)=-3.606, p=.015.

    o *That your life has a sense of direction or meaning to it* Pre (M=2.50, SD=2.429) and Post (M=4.33, SD=1.033), *t*(5)=-2.607 p=.048.

Table Three

MHC-SF MEAN SCORES					
	Pre (1st time)	**Post (1st time)**	**Follow Up**	**Pre (2nd time)**	**Post (2nd time)**
Happy	3.03 (n=39)	2.87 (n=38)	3.33 (n=15)	3.43 (n=7)	3.17 (n=6)
Interested in Life	3.08 (n=39)	3.13 (n=38)	3.73 (n=15)	3.57 (n=7)	3.67 (n=6)
Satisfied	2.85 (n=39)	2.74 (n=38)	3.00 (n=15)	3.29 (n=7)	3.17 (n=6)
That you had something important to contribute to society	2.23 (n=39)	2.53 (n=38)	3.33 (n=15)	3.43 (n=7)	4.33 (n=6)
That you belonged to a community	2.63 (n=38)	2.57 (n=37)	3.60 (n=15)	3.86 (n=7)	3.67 (n=6)
That our society is becoming a better place for people	2.18 (n=39)	2.46 (n=37)	3.07 (n=15)	3.14 (n=7)	3.67 (n=6)
That people are basically good	3.00 (n=38)	2.95 (n=38)	3.33 (n=15)	3.29 (n=7)	3.83 (n=6)
That the way our society works makes sense to you	2.41 (n=39)	2.18 (n=38)	3.27 (n=15)	3.29 (n=7)	3.17 (n=6)
That you liked most parts of your personality	2.43 (n=37)	2.79 (n=38)	3.40 (n=15)	3.57 (n=7)	3.83 (n=6)
Good at managing the responsibilities of your daily life	3.14 (n=37)	3.58 (n=38)	3.53 (n=15)	3.86 (n=7)	4.17 (n=6)
That you had warm and trusting relationships with others	2.62 (n=37)	2.89 (n=37)	3.67 (n=15)	3.43 (n=7)	3.50 (n=6)
That you have experiences that challenge you to grow and become a better person	2.92 (n=38)	3.11 (n=38)	4.07 (n=15)	3.86 (n=7)	4.17 (n=6)
Confident to think or express your own ideas and opinions	2.79 (n=39)	3.08 (n=38)	3.67 (n=15)	4.00 (n=7)	3.83 (n=6)
That your life has a sense of direction or meaning to it	2.64 (n=39)	2.97 (n=38)	3.73 (n=15)	3.57 (n=7)	4.33 (n=6)

Range = 0(Never), 1(Once or Twice), 2(About once a week), 3(Two or three times a week), 4(Almost every day), 5(Every day).

PARTICIPANT FEEDBACK

In addition to participants completing the recovery and wellbeing measures some general feedback was collected about how the group was delivered via a general participant evaluation form. Table Four provides the mean scores from the completion of this form. -The mean scores indicate that participants were extremely happy with all aspects of the Flourish program, with each average score in the *Above Average* category.

Table Four

	Mean Score
Overall satisfaction with the course	4.67 (n=36)
Overall organisation of the course	4.57 (n=35)
Coverage of subject matter	4.58 (n=36)
Mix of activities	4.36 (n=36)
Effectiveness of the Facilitators	4.64 (n=36)
Suitability of the listening material	4.50 (n=32)
Suitability of the reading material	4.64 (n=36)

Range = 1(Poor), 2(Below Average), 3(Average), 4 (Above Average), 5(Excellent).

Participants also provided a number of general comments about their involvement in Flourish and what they got out of the program. The majority of participants stated that what they had learnt from Flourish will be useful in their lives, particularly in relation to setting goals and remaining focussed on what they want to achieve. A few of the comments about what participants liked the most about Flourish are detailed below:

- *Learning something new to build up my confidence*

- *Meeting new people and hearing about their experiences*

- *Learning about my goals, values and strengths*

- *Having consumer Facilitators who knew what we felt*

A few of the Flourish Facilitators also sent through some of the other comments they heard from participants during the group delivery. Many of these statements were quite powerful and demonstrated how much participants enjoyed and benefited from their involvement in the groups. Below is a selection of these comments:

- *Flourish has helped me to restore my self esteem and self worth and has helped me to se that I may just be one person; however I am a good person. Flourish has also helped me to gain my independence and to believe in myself and that I can achieve the things I want.*

- *I always leave feeling better than when I arrive.*

- *I loved Flourish because it was a positive course and made me think about a lot of things to be thankful for and that there are some good values that I have.*

- *If I had a friend with a mental illness I would tell them about the Flourish program.*

- *Flourish made me the person I want to be.*

FACILITATOR INTERVIEWS

As Neami is the first organisation to recruit Peer Support Workers to deliver the Flourish Program, it was decided that it would be extremely worthwhile if the evaluation also collected information about their experiences of delivering Flourish. As such, before and after the first round of Flourish and also following the third round of delivery all Facilitators were asked to complete a reflection interview designed to gather information about their thoughts of Flourish, if they believed it supported the recovery process of participants, if delivering the program also supported them in their recovery journey and any other general thoughts or comments about Flourish. Below is a summary of the responses:

PRE INTERVIEW FINDINGS

Facilitators stated that the chance to give something back and to help others in their recovery were key reasons why they initially became interested in delivering Flourish. When asked how having a lived experience would be used in delivering Flourish, the most common responses were about it supporting them to have a greater sense of empathy, the ability to share their experiences and to better understand what participants may have experienced as a result of having a mental illness. Being able to demonstrate that recovery is possible was another response to this question which many Facilitators had in common.

Prior to commencing delivery of Flourish a few of the Facilitators identified some initial resistance to promoting Flourish shown by Community Rehabilitation Support Workers (CRSWs). They were however unsure of the reasons behind this resistance. Other initial challenges identified were the potential drop-out rate of participants and working effectively with other Peer Support Workers throughout the delivering the program. Further to this they had experienced a number of difficulties in preparing for the first delivery of Flourish including some workers not actively promoting Flourish, organising venues and catering and in adjusting to the different working styles of other Peer Support Workers. Overall it was reported that they had been adequately supported by staff and management in preparing to deliver Flourish but it was stated that it would have been good to also participate in the Collaborative Recovery Model (CRM) training.

POST INTERVIEW FINDINGS

All Facilitators reported that they had witnessed benefits to individuals as a result of their participation in Flourish. The Facilitators had seen improved confidence and self esteem in participants. They believed that many participants were better able to identify their own values and sense of purpose in life and begin to understand how goals and well-being are related, and that overall the majority of participants had a much more positive attitude. Some of the Facilitators reflected on a few individuals that stood out for making positive changes as a result of being involved in Flourish. One such example was an individual who began employment after a number of years being unemployed. Another got in touch with a family member after 14 years of not speaking and another participant achieved their goal of getting their drivers licence. All Facilitators believed Flourish was effective in supporting recovery, with all believing this to be the case. The responses indicated that Facilitators believe Flourish really helps participants to focus on what is important to them, that participation creates a sense of hope for the future and opens up pathways and that the program helps to plant a seed of realisation for a better life.

In addition to asking about their perspectives of participant involvement in the program, the Facilitators were asked if as a result of delivering Flourish they learnt anything about themselves or if facilitation supported their own recovery. As in the case of benefits to participants all Facilitators stated that delivering Flourish helped to validate the things most important to them, reinforced the importance of setting goals to overcome obstacles, and also reinforced the need to believe in yourself and to make the most of each and every day. On the whole, the delivery of Flourish boosted the confidence of Facilitators and reassured them of their own abilities. In following up from the question in the pre interview about if having a lived experience will help in delivering Flourish, the post interview asked if indeed it did help. The Facilitators believed that having a lived experience helped to have a clearer understanding of where participants were coming from and that it also helped to create a sense of trust. The Facilitators also identified that through the provision of an element of comfort and hope, they were able to support participants to share with the group. This enabled the discussions within the sessions to focus more on solutions and not on problems.

When asked if they had faced any challenges in delivering Flourish, the Facilitators mentioned that it was sometimes hard maintaining consistency of the content in the sessions, that sometimes two hours just wasn't enough to get through all of the required material and being able to clearly explain the concepts to participants was difficult in some cases. A few general comments made by the Facilitators were that the group guidelines developed in the early sessions were extremely important in maintaining the dynamics of the subsequent sessions. Also of importance were the follow up coaching phone calls or visits to participants between the sessions.

More collaboration between CRSWs and PSWs in promoting Flourish and in recruiting participants, more information sharing between PSWs and regular meetings between the PSWs were reported as suggestions for how to improve the role of Flourish facilitator for the next round of delivery. All PSW stated that they would deliver Flourish again, but provided the following suggestions for what could be done differently:

- Restructuring the sessions so change enhancement component is brought forward
- Reviewing the need for MP3 players (as the majority of participants just utilised the CD's included in the workbook to listen to the audio recordings)
- Providing a booster session after 6 months
- Incorporating more creative activities

REFLECTION INTERVIEW FINDINGS

All Facilitators believed that participation in Flourish was of great benefit to supporting the recovery process of individuals. Many reported that they witnessed an overall increase in confidence and self esteem in the participants who engaged in Flourish, noticed improvements in self-awareness and insight, including a greater ability to identify their strengths and values. A number of Facilitators also reported that they had seen improvements in the participant's ability to really sit down and work out what recovery actually meant to them after completing the program. Other benefits of participation identified were that participants could now look at their lives and their future and be more focussed and settled in setting and achieving their identified goals.

A number of Facilitators shared some examples of participants whose lives changed significantly as a result of their involvement in Flourish. Here is an account given by one facilitator of the change that occurred for one participant:

A 19 year old female who joined Flourish had been hospitalised for seven months and appeared to have no hope or ideas of what she wanted to do with her life. She engaged really well with the group and as a result became involved in other activities in her life including art and gardening. Her whole demeanour changed and she is now able to clearly articulate what she wants to do in her life and what recovery is about. Ultimately I would say that she has completely transformed as a person.

The following quote provided by another facilitator further demonstrates the strong belief held about the effectiveness of Flourish in supporting the recovery process of participants:

Although it is hard to assume any life changes are a direct result of participation in Flourish, I have certainly seen a number of participants make huge changes and even turn their lives around in the months following completion of the program.

Many participants who complete Flourish have also come back to future sessions to share their experiences with new participants, which further reinforces that participation in the program has had a positive effect for many people.

When asked what they most liked about Flourish the most common responses from the Facilitators included:

- Being able to engage and learn from the participants

- Seeing the participants engage with the program and watching their confidence grow as a result

- The flexibility of being able to deliver the content in various ways, and being able to add in our own activities

Alternatively, there were a number of suggestions provided in relation to what should be changed about either the content or delivery of the Flourish program. Many Facilitators reported concerns about the buddy system and not feeling comfortable in what they perceived as "pressuring" people to "buddy up" with people they may not want to. A few also reported that there were some general grammar and typos throughout the workbook and that some of the included activities could be made clearer to prompt more active involvement by the participants. On the whole, Facilitators didn't suggest that many things needed to be changed about the Flourish program. Despite this, the Facilitators also shared some of the challenges they faced when delivering the program including:

- Adjusting to the different facilitation styles of the co-facilitator

- The drop out rate of participants can present an issue of disruptions to the remaining participants and to delivery of the modules

- Getting people into the group to begin with and getting them to feel safe enough to engage with the content and other participants

- Managing the dynamics of the group and keeping conversations on track

- Sometimes difficult to maintain professional boundaries and ensuring in most cases we address the group and don't spend too much time talking with individual participants.

The final question in the Reflection Interview asked Facilitators if they have changed in any way or if they have learnt anything new about themselves since delivering Flourish. Further developing skills and confidence in the workplace was reported by a number of Facilitators of a change that had occurred for them. Facilitating Flourish also enabled them to expand their own understanding of recovery and to also be more in touch with their own strengths and values. A quote from one facilitator really captures what being in this role has meant for them, "Things have changed in many areas of my life and I feel that Flourish has been part of that tool that is changing the way I look at things".

4. DISCUSSION

Peer Support Work is based on the assumption that people who share similar experiences can offer each other emotional, appraisal and informational support and hope (Dennis, 2003; Davidson et al, 2006). This evaluation provides an insight into the under researched area of peer support in supporting positive outcomes for consumers. The information collected from participants indicates that the Flourish program can support the recovery process by encouraging individuals to get in touch with their strengths and values and to develop vision of what recovery actually means to them. Although the results on some of the recovery and wellbeing measures didn't show any significant improvements, the comments and feedback scores provided by participants demonstrate how much they enjoyed being involved in Flourish and how sharing and learning from others is something they really valued. It must be noted that a limitation inherent in this evaluation is the unknown number of participants that actually completed the Flourish program during the specified time period. As a result, the proportion of these participants that then chose to take part in the evaluation is also not known.

The data analysis found no statistically significant shifts in the identified stage of recovery by participants (assessed by SISR A). However, due to the complexities of mental illness it is important to recognise the limitations of what can be achieved after participating in a twelve week program. It was promising to see a number of statistically significant increases in scores related to the recovery processes as assessed by the SISR B. Across all participants there were relatively low increases in scores for all questions in the MHC-SF. In some cases the scores recorded for the MHC-SF actually decreased between pre and post involvement in Flourish. A potential reason for the small increases in scores on the measures is that they may not have been sensitive enough to detect the changes that participants experienced as a result of their involvement in Flourish. Additionally, a better sense of the ongoing benefits of participating in Flourish could have been determined if greater numbers of participants had completed the measures as part of the three month follow up. It would have potentially been useful to also include an assessment item as part of the evaluation which measured levels of psychological distress or something similar, to determine if there were other benefits of participating in Flourish.

The results do however indicate that participation in Flourish for a second time improves overall scores on both components of the SISR and the MHC-SF. This is perhaps due to the fact that participants had a better understanding of both the purpose of the group and of what they were aiming to get out of participating in Flourish. The evaluation findings are encouraging with regard to providing consumers with a self-development program that combines recovery movement principles of empowerment and hope with positive psychology constructs. The findings also demonstrate the suitability of Flourish being delivered across the whole organisation to support the recovery of consumers. The collection of further data from participants would be useful in further determining the effectiveness of the Flourish program in supporting the recovery of participants.