THE LANCET Psychiatry

Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Hayes D, Hunter-Brown H, Camacho E, et al. Organisational and student characteristics, fidelity, funding models, and unit costs of recovery colleges in 28 countries: a cross-sectional survey. *Lancet Psychiatry* 2023; published online Sept 19. https://doi.org/10.1016/S2215-0366(23)00229-8.

Supplementary information

- S1: International survey
- S2: Categorical components and categories
- S3: Exchange rates
- S4 Reasons for Exclusion
- S5: RC Fidelity across continents
- S6: Regressions exploring the associations between total and item-level fidelity scores and either college size or time in operation
- S7: Scatterplot of the relationship between budget and number of students
- S8: RC funding sources
- S9: RC staff roles
- S10: Median budget by country
- S11 Identified RCs and those that participated by country and continent

S1: International Survey

SCREENING QUESTIONS

Thank you for your interest in this survey about Recovery Colleges. We use the term 'Recovery College' in this survey but we do recognise that your service may be called something different. Before we ask you to complete the survey, we have four questions about your service to make sure it is eligible to take part in this survey. Please note we're focused here just on whether your college is in scope for our survey, and we do recognise that your answers won't be providing a full or complete description e.g. of other goals of your college:

Q1) Is the main focus of your Recovery College on supporting personal recovery?

[Personal recovery is defined as 'living as well as possible' as opposed to e.g. a reduction in symptoms of illness]

- Yes
- No

Q2) Does your Recovery College aspire to use co-production at all levels?

[Co-production is defined as people with lived experience (e.g. Peer Trainers and students) who work with professionals and subject experts to design and deliver all aspects of the Recovery College. This includes collaborative decision-making about the prospectus, courses, college policies, staff recruitment, advertising, etc., as well as the co-design and co-delivery of all courses by a Peer Trainer and other subject-expert']

- Yes
- No

Q3) Does your Recovery College aspire to use an adult learning approach?

[Adult learning is defined as an approach whereby students and trainers collaborate and learn from each other by sharing experiences, knowledge, and skills. Students have responsibility for their learning and learn through interactive and reflective exercises. Students gain self-awareness, understanding of their difficulties and practical, relevant self-management skills. Students choose courses which best suit their needs]

- Yes
- No

Q4) Is your Recovery College currently running

- Yes
- No

If you have answered <u>No</u> to any of these questions, please stop here. Unfortunately, your service does not meet our eligibility criteria – please let your local collaborator (the individual that sent you the survey) know. If you want to find more out about our work, please visit: https://www.researchintorecovery.com/research/recollect/ If you have selected **Yes** to all four questions, please continue.

INFORMATION SHEET FOR PARTICIPANTS

Ethical Clearance Reference Number: MRA-21/22-28685

Recovery Colleges Characterisation and Testing (RECOLLECT): Understanding the organisational characteristics of Recovery Colleges internationally

You are invited to take part in the RECOLLECT research project. Before deciding whether to participate it is important to understand the rationale for the research and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information.

What is the purpose of the project?

RECOLLECT is a five-year research project investigating Recovery Colleges. We use the term 'Recovery College' to refer to services that are underpinned by values such as recovery but recognise that your service may be called something different. Over the last decade, Recovery Colleges have expanded internationally, but there is limited research into how Recovery Colleges compare across different countries. The aim of this survey is to better understand how Recovery Colleges are set up and run internationally.

Why have I been invited to take part?

We are working with an international team of collaborators who will be facilitating the survey. Each collaborator is co-ordinating survey responses in each of their respective countries and is asking one individual with an overview of each Recovery College to complete the survey. You are being invited to take part as they have identified your Recovery College as meeting inclusion criteria and have identified you as someone who is able to complete the survey.

What will happen if I take part?

This survey can either be completed online or in Microsoft Word. Where translation from English is needed, the survey will need to be completed in Microsoft Word. Your collaborator (who sent you the survey) may complete it with you or help you if you are having difficulties.

If you agree to take part, you will be asked to sign a consent form. For those that consent, you will then be asked to complete some questions around your Recovery College. Your local collaborator (the person who sent you the survey), can assist you if you have any questions. If you complete the survey in Microsoft Word, we ask that you password protect the file and send it back to the research team RECOLLECT@kcl.ac.uk. If you complete it online, your responses will be automatically recorded, and you do not need to do anything else.

What does taking part involve?

The survey will take about 25 minutes and can be completed at a time to suit you. As part of this survey, you will be asked questions about your Recovery College, including when it was set up, how it rates on different aspects of Recovery College fidelity (such as co-production), and the annual budget. For the purposes of the project, we will ask for personal information, such as your name and email address, so that we know who completed the survey. This will only be available to the RECOLLECT research team.

Do I have to take part?

Participation in the survey is completely voluntary. You should only take part if you want to. If you do not take part, you will not be disadvantaged in any other way.

Once you have read the information sheet, please contact us or your local collaborator if you have any questions that will help you make a decision about taking part. If you decide to take part, you will need consent prior to your participation in the survey.

What are the possible benefits of taking part?

There will be limited, if any immediate / direct benefit in taking part in this research. However, the research itself may have many possible direct / indirect benefits for Recovery College staff / students in the future. This will include helping to inform future international service provision and providing comparative information on Recovery Colleges internationally.

What are the possible risks of taking part?

There are no known risks to taking part. The questions in the survey are not designed to elicit any emotional response.

Data handling and confidentiality

Data will be stored on a secure network within the Institute of Psychiatry, Psychology and Neuroscience at Kings College London and may be used for future research. Only members of the research team will have access to the full dataset. No information that could identify your Recovery College will be used in any publications or outputs. We will retain your contact details to make you aware of findings once the international survey is complete. However, you can opt out of further contact at any point.

At the end of RECOLLECT (December 2025), the data from this survey will be anonymised. This dataset will be kept at the Institute of Psychiatry, Psychology and Neuroscience for another 15 years. Researchers from outside of the RECOLLECT research team may request access to anonymised data from the Principal Investigator at Kings College London (Dr Daniel Hayes).

Data Protection Statement

Your data will be processed in accordance with the General Data Protection Regulation 2016 (GDPR). If you would like more information about how your data will be processed in accordance with GDPR please visit the link below. https://www.kcl.ac.uk/research/support/research-ethics/kings-college-london-statement-on-use-of-personal-data-in-research

What if I change my mind about taking part?

You are free to withdraw at any point in the project, without having to give a reason. You can withdraw your survey data up to one month after you have completed the survey, after which withdrawal of your data will no longer be possible, due to data analysis.

How is the project being funded?

This project is being funded by the NIHR (Programme Grants for Applied Research, Recovery Colleges Characterisation and Testing (RECOLLECT) 2, NIHR200605).

What will happen to the results of the project?

The results of the project will be summarised in outputs such as project reports, publications and conferences. Findings will be distributed through Recovery College network, and appear on the website www.researchintorecovery.com/research/recollect/publications/

Who should I contact for further information?

If you have any questions or require more information about this project, please contact your local collaborator (who sent you the survey) or us on:

Dr Daniel Hayes Research Fellow, RECOLLECT

Health Services and Population Research Department

P028, David Goldberg Centre, King's College London

Institute of Psychiatry, Psychology and Neuroscience,

De Crespigny Park, London SE5 8AF.

Email: <u>Daniel.Hayes@kcl.ac.uk</u>

What if I have further questions, or if something goes wrong?

If this project has harmed you in any way or if you wish to make a complaint about the conduct of the project you can contact King's College London using the details below for further advice and information:

The Chair

Research Ethics Office Room 4.16/4.16A

Waterloo Bridge Wing

Franklin Wilkins Building

Waterloo Road London SE1 9NH

Email: rec@kcl.ac.uk

Thank you for reading this information sheet and for considering taking part in this research.

CONSENT FORM

Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research

	ele of project: Recovery Colleges Characterisation and Testing (RECOLLEC aracteristics of Recovery Colleges internationally	T): Understanding the organ	nisational			
Et	Ethical review reference number: MRA-21/22-28685 Version number 1.0. 07-02-					
			Tick or initial			
1.	I confirm that I have read and understood the information sheet dated Versio above project. I have had the opportunity to consider the information and ask been answered to my satisfaction.					
2.	I consent voluntarily to be a participant in this survey and understand that I can withdraw from the project at any time, without having to give a reason. I after completing the survey, I will not be able to remove my survey data due	understand that one month				
3.	I consent to the processing of my personal information for the purposes explain Information Sheet. I understand that such information will be handled under protection law, including the UK General Data Protection Regulation (UK General Data 2018).	the terms of UK data				

4.	I understand that my information may be subject to review by responsible individuals from the College for monitoring and audit purposes.	
5.	I understand that confidentiality and anonymity will be maintained, and it will not be possible to identify me in any research outputs	
6.	I am aware links to research outputs will be available on RECOLLECT website www.researchintorecovery.com/research/RECOLLECT/publications/	
Nan	ne of Participant Date Signature	

Name of Participant Date Signature Name of Researcher Date Signature

SURVEY

Thank you for giving consent to take part in this survey. We will now ask you questions about your Recovery College (though we know that not all services use this term!). Towards the end of the survey, there are some questions on running costs, so you may need access to any budget information you have. Please complete all parts, even if some responses are just your best estimate.

We worked with diverse Recovery College stakeholders to create and pilot this survey, but despite our efforts we recognise that response options for some questions may not fully fit your college. We're very interested in understanding the full range of innovation taking place in Recovery Colleges, so if the available responses don't quite fit your college, please choose the response which is as close as possible, and make a note of the question. At the end of the survey there will be a chance for you to give further information.

Section A) Describing organisational characteristics, curricula and student populations About the college

These questions are about how your Recovery College runs. Please answer in relation to how the Recovery College currently runs

- Q1) What is the name of your Recovery College?
- Q2) What country is your Recovery College in?
- Q3) What is your name?
- Q4) What is your role at your Recovery College (e.g. Recovery College Manager)?
- Q5) What is your email address?
- Q6) How long has your Recovery College been running (in years)?
- Q7) What is the annual budget for your Recovery College (approximate with a specific number if not known, please do not provide a range)? This would include costs, such as staff salaries, building hire and logistics (i.e. travel). Please also specify what currency you have written you answer in (e.g. Euros, Australian Dollars, Japanese Yen)

Q8) Which of these most closely matches the location of your Recovery College?

- Urban
- Suburban
- Rural
- Mixed (urban, suburban and/or rural)
- Q9) Do you have a main physical base (i.e. says Recovery College on the door, with administration, classrooms and library)? [Please ignore any temporary pandemic-related changes to online course delivery]
 - Yes
 - No we meet in community venues or mixed use venues
 - No we are a virtual college operating only online

Q10) Besides supporting personal recovery, which of these is the MORE important goal of your Recovery College?

- To reduce stigma and discrimination in society
- To positively impact on mental health services
- Both are equally important
- Q11) How many courses do you run per year? (Count every time each course is run, e.g. if you run the same course three times, count this as three courses)
- Q12) How many different courses do you provide? (Count the same course once even if it runs several times)
- Q13) How many courses does each student typically attend over one year?

Q14) Does your Recovery College use • Yes • No • Unknown/do not know	e goal-oriented personal plans (Ind	lividual Learning Plans)?
tudents hese questions are about your current student population 15) Based on your current student population, how many individuals would you expect to register as udents in a year in total? (i.e. count each person once, even if registered for more than one course or cross more than one term? 16 - 22) Who is your Recovery College for? Yes No People with mental health issues who are using no services or only primary care or non-governmental porganisation sector mental health services People with mental health issues who are using secondary mental health services People with mental health issues who are using secondary mental health services People with mental health issues who are using tertiary mental health services Informal carers (e.g. family, friends) of people with mental health issues Mental health worker (e.g. Nurse, Psychologist, Psychiatrist, Counsellor) Other staff working in mental health services (e.g. Receptionist, Counsellor) General public who may have no		
Q16 - 22) Who is your Recovery Coll	ege for?	
	Yes	No
are using no services or only primary		
organisation sector mental health services		
People with mental health issues who		
are using secondary mental health services		
People with mental health issues who		
are using tertiary mental health services		
Informal carers (e.g. family, friends) of people with mental health issues		
• •		
, -	П	П
Other staff working in mental health		
services (e.g. Receptionist,		
connection with the mental health		
3	groups that are catered to at your	Recovery College (or part of your
Recovery College, e.g. a specific colle	ge campus or spoke)? Tick all that	
	_	
• • • • • • • • • • • • • • • • • • • •		
	ccure services	
	difficulties	
The state of the s	_	NI.
Do you have a designated carers'	Yes	No
lead (someone who has a		
family/friend carers) at your		
Recovery College?		
Do you routinely monitor whether		
students are carers?		
In the past two years have you run a course specifically for carers or		
caring for someone with mental		
health issues?		

Q35) What is the mean age (years) of the students who attend your Recovery College (if not known, please estimate)

Q36-40) Estimate the proportion of students who attend your Recovery College from the following user groups:

Someone using mental health services:
Carers of someone using mental health services:
Members of staff at the Recovery College or host organisation:
Other members of the public or local community:
Q41-44) Estimate the proportion (% totaling to $\overline{100}$) of students who identify as:
Male:
Female:
Non-binary / third gender / other :
Prefer not to say:
Fotal :

Governance and leadership

These questions are about the wider organisational context of your Recovery College

Q45) What is the main organisational affiliation for your Recovery College (e.g. whose buildings you operate from or where data and records is stored (choose one, or more than one if an equal partnership))?

- Government health service
- Other health provider, e.g. private healthcare provider
- Local Government
- Education provider, e.g. University or college
- Non-governmental organisation (NGO) or Charity Sector
- We are independent
- Other

Q46) Does your core Recovery College leadership team include people with lived experience of mental health issues?

- Yes
- No
- Unknown/do not know

O47) During co-production, what groups are most commonly involved? (tick one)

- Lived experience + health or social care professional
- Lived experience + community topic expert
- Lived experience only
- Other

Section B) Recovery College Fidelity

Please complete this measure for your main Recovery College, even if you are involved in or managing more than one. Complete it for your Recovery College <u>as it is right now</u> (i.e. including any changes you have had to make due to the pandemic). Make a note of any scores which have changed due to the pandemic as we will ask you about this at the end of this section.

We now list seven dimensions of a Recovery College. Each dimension has three statements describe varying levels of development, from early stage to active engagement to active success. For each dimension, choose the statement which best matches your main Recovery College as it is right now, even if you may have phrased things a little differently. At the end of the survey, there will be the opportunity to tell us more if you found any items difficult to rate.

Q48) Dimension 1: Valuing equality

The contributions and assets of students, trainers (peers, clinicians, external) and other staff are equally valued. No one is judged or treated differently because of their background or mental health difficulties.

- We recognise that staff and students may take time to develop partnership-based working relationships. Whilst being supportive of staff and students, we only deal with issues of discrimination and power differences when they arise.
- We do not actively ensure that all relationships in the college demonstrate equal sharing of opportunities, training, etc. However, we do ensure that the college is welcoming to all staff and students, and have some structures in place (e.g. open days, training, supervision) to encourage equality and to challenge stigma and discrimination.
- We actively promote a non-judgemental and welcoming culture. Activities are undertaken to ensure that issues of power are always considered within the college (e.g. equal access to training and resources, diversity in promotional materials, analysing equal opportunity data).

Q49) Dimension 2: Learning

Recovery Colleges follow an adult education approach whereby students and trainers collaborate and learn from each other by sharing experiences, knowledge and skills. Students have responsibility for their learning and learn through interactive and reflective exercises. Students gain self-awareness, understanding of their difficulties and practical, relevant self-management skills. Students choose courses which best suit their needs.

- We cannot provide evidence of the college's model(s) of adult learning. We can identify a large number of barriers to progress, such as the influence of a strong clinical or psychoeducational model, or limited resources for Peer Trainer training. Trainers are skilled in delivering education and encouraging shared learning.
- We can articulate the college's model(s) of adult learning. Some processes are in place to ensure that trainers follow educational principles (e.g. lesson plans, educational language) and that courses involve co-learning. However, some barriers prevent the full and effective implementation of these model(s), e.g. time pressures to launch/recruit to new courses, or barriers to trainer recruitment and training.
- We can demonstrate the college's full commitment to principles of adult learning. These are evident in
 the college's prospectus, curriculum and course materials. All trainers (including clinical trainers) can
 describe the model(s) of adult learning used in the college, and are offered ongoing formal or
 accredited training in adult learning.

Q50) Dimension 3: Tailored to the student

Recovery Colleges don't offer a one size-fits-all experience. Students' individual needs are actively enquired about and accommodated during courses (e.g. personalised handouts, translated text, materials adapted for learning difficulties). Their needs outside the course are also accommodated (e.g. buddy service, transport help, individual learning plans).

- We are not able to demonstrate the ways in which the college provides an individualised experience for students. Trainers are not actively supported or trained to take account of and accommodate student differences during classes.
- We can demonstrate some ways in which individual needs of students are addressed, but recognise that there are still unmet needs, e.g. students with learning difficulties or not fluent in local languages.
- We are able to demonstrate many ways in which students' individual needs are addressed both during and outside courses. Trainers are made aware of students' needs in advance and provided with guidance on how to adapt the content/delivery of courses.

Q51) Dimension 4: Co-production of the Recovery College

People with lived experience (Peer Trainers and students) are brought together with professionals and subject experts to design and deliver all aspects of the Recovery College. This includes collaborative decision making about the prospectus, courses, college policies, staff recruitment, advertising, etc., as well as the co-design and co-delivery of all courses by a Peer Trainer and other subject-expert

- We routinely involve students and staff in decision-making about the design and running of the Recovery College. Most of our success in co-production has been at the level of course co-delivery.
 We recognise that there are currently some significant barriers to co-production throughout the college, including those of culture, management hierarchies and time.
- As well as consistent co-delivery of courses, we involve staff and students in most discussions about the design and running of the Recovery College (e.g. through student steering groups or student reps), but managers make many of the decisions.
- We can demonstrate a culture of co-production and its consistent use across the college. The voices of trainers and students are equally heard during decision-making across all levels of the college, including co-delivery, curriculum development, management and design of the physical environment.

Q52) Dimension 5: Social connectedness

Both the culture and the physical environment of the college provide students with opportunities to develop connections with others. The learning space is relaxed, e.g. nonclinical chair layout, access to drinks facilities, shared spaces for socialising. Trainers recognise and cater for students' social needs, e.g. organising exercises and breaks for chatting, sharing experiences and developing friendships

- Students' social experience is low on the Recovery College's agenda when deciding on course structure and the physical environment. There are no specific processes for students to get to know one another. Course venues rarely have facilities or spaces outside the classroom where students can relax or socialise.
- We ensure that the Recovery College is a welcoming environment for students. Trainers are encouraged to provide opportunities for socialising during courses where possible, but this is not central to their role. A few of our course spaces have facilities outside the classroom where students can relax, but there are a number of practical or financial barriers to this.
- The Recovery College recognises the role that student integration and connectedness plays in learning and recovery. The college provides a range of facilities for socialising (e.g. café, seating areas, informal

and spacious course venues). Trainers are supported to integrate opportunities for students to form closer bonds with each other into the structure of courses.

Q53) Dimension 6: Community focus

Recovery Colleges engage with community organisations (e.g. mental health charities, artistic/sporting groups) and Further Education colleges to co-produce relevant courses. The college provides students with information, handouts and events which support students' pathways into valued activities, roles, relationships and support in the community.

- We have limited involvement with, or presence in, community organisations. Community organisations are not involved in college meetings or events, or do not routinely work with the college to co-produce courses or facilitate opportunities for staff/students.
- We ensure that the college undertakes some activities to build awareness of its community services and relationships with community organisations. Some college courses are co-produced with community organisations and students are signposted to relevant community organisations for support.
- We work with a range of community organisations to co-produce college courses and facilitate
 pathways for students. We can demonstrate activities to build awareness of, and relationships with, the
 community. We can demonstrate that joint-working with community organisations has led to changes
 in the college.

Q54) Dimension 7: Commitment to recovery

Recovery College workers talk with conviction and enthusiasm about the service and are dedicated to students' recovery. There is a positive energy in the college and its activities, based on shared values about the recovery principles on which the college is based.

- Our organisational policies and procedures ensure the Recovery College runs smoothly, but there are barriers (e.g. culture, organisational structures) to personal investment by workers in promoting recovery principles (dimensions 1 to 6 above) throughout the college. There is still significant effort needed to establish the college as something 'different' and 'meaningful'.
- We actively motivate each other to promote recovery principles. We have a shared commitment to constantly improve the recovery focus of the college but recognise some barriers to progress (e.g. cultural, financial).
- We actively promote recovery principles in the college, and collectively lead with enthusiasm and an
 expressed belief in the college's students and staff. College activities demonstrate recovery principles
 in practice, e.g. graduation ceremonies, students becoming trainers.

We now ask you about five components which can differ between Recovery Colleges. <u>Please pick the type that most closely resembles your college as it is right now.</u>

Q55) Component 1: Available to all

- Type 1: The Recovery College is available to all. The Recovery College is accessible to any adult (16+ or 18+), including staff and carers, regardless of their use of local services of any kind. Any restrictions are minimal, e.g. living locally, being registered with a local or family doctor.
- Type 2: The Recovery College is limited to specific groups. The Recovery College is open to adults (16+ or 18+) who are current or previous users of local secondary care mental health services. There may be local additions to this eligibility e.g. health/social care/community organisation staff, or family and carers. Being 'inclusive' relates to the ways in which the Recovery College does not discriminate or create access barriers for people with, for example, certain diagnoses, learning difficulties or physical health/mobility needs.

Q56) Component 2: Location

- Type 1: The Recovery College is based in a community location that is not shared with health, social care or other statutory services. The Recovery College is deliberately located within communities or neighbourhoods, not in health or social care buildings.
- Type 2: The Recovery College is based in a location which is shared with health, social care or other statutory services. The Recovery College is located within or near (e.g. adjoining building) to local health or social care services.

O57) Component 3: Distinctiveness of course content

- Type 1: Any topic can be offered as a course, irrespective of whether it is available in mainstream adult education settings. The curriculum includes courses on topics which are also available in local mainstream colleges. Example courses might include, arts, Maths, budgeting, physical health care, job-seeking, home maintenance and a range of leisure/recreation activities.
- Type 2: Only topics not available in mainstream adult education settings are offered. The curriculum never includes courses on topics which are available in local mainstream colleges. Some courses are offered with a specific recovery-related focus, e.g. arts for recovery.

Q58) Component 4: Strengths-based

- Type 1: A focus on strengths (not problems) is implicit in the college. The learning opportunities offered by the Recovery College implicitly builds on the experiences, strengths, assets and resources of students. The language of being 'strengths-based' is not often used.
- Type 2: A focus on strengths (not problems) is explicit in the college, in addition to dimensions 1-7 above. The learning opportunities offered by the Recovery College explicitly build on the experiences, strengths, assets and resources of students. The language of being 'strengths-based' is routinely used by staff and students, and features in course materials and other aspects of the Recovery College.

Q59) Component 5: Progressive

- Type 1: There is a focus on 'being' and 'belonging', not on goal-setting. The focus of the Recovery College is on supporting individual students' learning needs, safety and belonging, identity development, personal meaning-making and reflection. The college does not require behavioural goal-setting. Students can learn in whatever direction they want to and for some students that might not be about moving forwards.
- Type 2: There is a focus on 'becoming' and a strong emphasis on goal-setting and change. The focus of
 the Recovery College is on processes which provide pathways of opportunity for students and which
 support them to move on with their lives. This might include the use of goal-oriented personal plans
 (Individual Learning Plans) and planning and reviewing goal-oriented activities.

Q60) Do you think your Recovery College would have scored differently on any of these domains prior to the pandemic?

- Yes
- No

If you answered **No** to this question, please skip to Section C.

Q61-72) If yes, which do you think you would have scored differently on (tick all that apply)?

- Dimension 1: Valuing equality
- Dimension 2: Learning
- Dimension 3: Tailored to the student
- Dimension 4: Co-production of the Recovery College
- Dimension 5: Social connectedness
- Dimension 6: Community focus
- Dimension 7: Commitment to recovery
- Component 1: Available to all
- Component 2: Location
- Component 3: Distinctiveness of course content
- Component 4: Strengths-based
- Component 5: Progressive

Section C) Organisational costs

We are trying to learn more about how much it costs to run a recovery college and how the Recovery College is funded. We understand that some recovery colleges are integrated within other services, but in your responses please give information just about the Recovery College budget as far as possible.

Q73) What is the main funding source for your college? (if there is more than one main funder e.g. half of funding coming from each of two sources, please indicate those which apply)

- Government/Health service
- Other government/public sector organisations (e.g. education)
- Charitable fund, grants, and/or donations
- Self-funded (e.g. charges for courses; fund-raising activities by staff/students)
- Other [please specify]

Q74) What is your annual budget for paying staff (approximate with a specific number if not known, please do not provide a range)?

Q75) Please list the roles of staff at your Recovery College

Number of individuals in role paid for this role by the Recovery College

Number of individuals Typical number of hours per week Properties Typical number of hours per week per week Typical number of hours per week Properties Typical number o

Nurse(s)
Occupational
Therapist(s)
Psychologist(s)
Psychiatrist(s)
Other role
[Please specify]

Other role [Please specify]
Other role [Please specify]

Q76) Are there additional relevant details about these funders you wish to tell us?

Q77) If you have answered 'other' to any question in the survey or would like to tell us more about any of your responses, please do so here:

Q78) To make sure we have contacted all Recovery Colleges, please give any names and contact details of other Recovery Colleges which are close to you geographically:

Thank you for completing the survey. Please password protect this Word document and send the survey to: RECOLLECT@kcl.ac.uk and send the password to Daniel.hayes@kcl.ac.uk

Please also attach a copy of your current curriculum when you return the email

S2: RECOLLECT Fidelity measure Categorical components and categories

Categorical component	Categories
Available to all	Anyone from the local community versus just a specific population e.g., mental health service users, carers and staff
Location	Community based (i.e., does not share buildings with statutory health and social care services) versus Statutory services;
Distinctiveness of course content	Mainstream (i.e., any topic can be offered) versus Non-mainstream (i.e. only topics that fall outside of mainstream adult education settings are offered)
Strengths-based	Implicit (i.e., students strengths are built on but strengths-based language is not used) versus Explicit (i.e. students strengths are built with strengths-based language used by staff and in courses)
Progressive	No goal setting (i.e. goal setting is not a focus) versus Goal setting (e.g. via Individual Learning Plans)

S3: Exchange rates
Supplementary material – exchange rates from original currencies to Euros – exchange rate on 12th December 2022 – sourced from www.oanda.com

Original currency	Exchange rate to Euros
Australian dollars	0.64494
Canadian dollars	0.69549
Czech koruna	0.04114
Danish krone	0.13443
GBP	1.16354
Hong Kong dollars	0.12192
Hungarian forint	0.00238
Japanese yen	0.00695
Norwegian kroner	0.09488
NZ dollar	0.60779
Swiss francs	1.01564
Thai baht	0.02727
Uganda shillings	0.00026

Median budgets for countries where 3 or more recovery colleges reported a total annual budget; inter-quartile range (IQR) reported for countries with 5 or more recovery colleges.

S4: Reasons for exclusion of organisations from survey

Reasons for exclusion of identified organisations	Number of excluded organisations
Non-contactable and local/expert contacts believe it no longer exists/operates	22
Did not pass screening/inclusion (i.e. not a Recovery College)	20
Previously open but now closed	11
Duplicate name for already-included Recovery College	7
Satellite site of an included Recovery College	5
Existing but not currently running	5
Merged with another Recovery College	4
Just opened and unable to complete the survey	4
Total	78

Table S5 RC Fidelity across continents

Country and region (N=29)	Recovery College (N=169)	Fidelity scores (median (IQR))
Africa		
Uganda	2	Blinded
Asia		
Hong Kong	2	Blinded
Japan	9	7 (6 to 10)
Thailand	2	Blinded
Europe		
Belgium	10	8·5 (8 to 10)
Bulgaria	1	Blinded
Czechia	1	Blinded
Denmark	9	8 (6 to 9)
England	63	11 (9 to 13)
Estonia	2	Blinded
Finland	2	Blinded
France	1	Blinded
Germany	3	9 (6 to 10)
Hungary	2	Blinded
Iceland	1	Blinded
Ireland	7	11 (10 to 13)
Italy	4	7.5 (5 to 10.5)
Jersey	1	Blinded
Netherlands	2	Blinded
Northern Ireland	3	13 (10 to 14)
Norway	4	12·5 (11 to 13)
Scotland	3	11 (9 to 12)
Spain	3	6 (5 to 10)
Sweden	3	11 (6 to 14)
Switzerland	3	8 (5 to 9)
Wales	1	Blinded
Oceania		
Australia	7	10 (6 to 13)
New Zealand	2	Blinded
North America		
Canada	16	10·5 (9 to 12)

Fidelity scores are blinded for countries/regions with data from < 3 Recovery Colleges to preserve anonymity

S6: Regressions exploring the associations between total and item-level fidelity scores and either college size or time in operation (N=169)

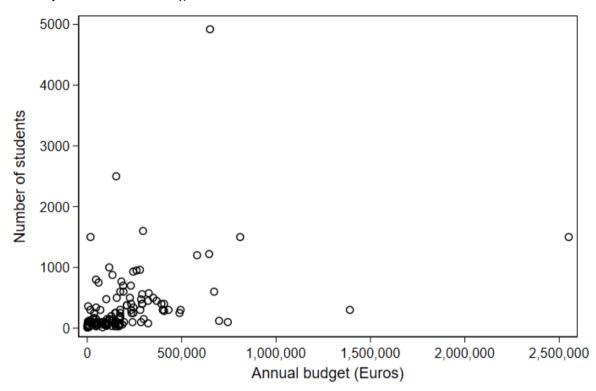
	Fidelity Sco (Items 1-7		1. Equalit	y	2. Adult lear	ning	3. Tailored to s	tudent	4. Coproduc	tion
	β (95% CI)*	p value	OR (95% CI)†	p value	OR (95% CI [†]	p value	OR (95% CI†	p value	OR (95% CI†	p value
Time in operation (years)	0.01 (-0.09 to 0.12)	0.83	0.94 (0.86 to 1.04)	0.22	0.99 (0.90 to 1.08)	0.77	1.11 (0.99 to 1.23)	0.09	0.96 (0.88 to 1.05)	0.37
Number of students	0.00 (-0.00 to 0.01)	0.24	1.00 (0.99 to 1.00)	0.67	1.00 (0.99 to 1.00)	0.41	1.00 (0.99 to 1.00)	0.59	1.00 (0.99 to 1.00)	0.26
	5. Social connect	tedness	6. Community	focus	7. Commitme recovery		8. Available (Anyone vs specifi		9. Locatio Community vs sa	
	OR (95% CI†	p value	OR (95% CI†	p value	OR (95% CI†	p value	OR (95% CI)‡	p value	OR (95% CI) [‡]	p value
Time in operation (years)	1.06 (0.98 to 1.14)	0.17	0.97 (0.90 to 1.04)	0.41	1.05 (0.96 to 1.16	0.28	1.02 (0.94 to 1.11)	0.64	1.14 (1.03 to 1.27)	0.01
Number of students	1.00 (0.99 to 1.00)	0.49	1.00 (1.00 to 1.00)	0.05	1.00 (0.99 to 1.00)	0.07	0.99 (0.99 to 1.00)	0.10	0.99 (0.99 to 1.00)	0.50
	10. Distinctiveness content Mainstream vs. mainstream	s not	11. Strengt Implicit vs ex		12. Progress No goal setting setting					
	OR (95% CI)‡	p value	OR (95% CI)‡	p value	OR (95% CI)‡	p value				
Time in operation (years)	0.99 (0.91 to 1.08)	0.82	1.11 (0.97 to 1.27)	0.13	1.10 (1.00 to 1.20)	0.04				
Number of students	0.99 (0.99 to 1.00)	0.85	1.00 (1.00 to 1.00)	0.05	1.00 (0.99 to 1.00)	0.56				

CI=confidence interval; OR=odds ratio

Significant p values are in bold. The Bonferroni corrected significant levels is p≤0.002. Note there are no significant results reported in this table.

^{*}Linear regression; †ordinal logistic regression (items 1 to 7); †logistic regression (items 8 to 12) Note: Multilevel modelling where country was included as a random intercept

S7. Scatterplot of RC annual budget and number of students



S8: Summary of RC funding sources

	Government-funded health service	Other government funding	Charity	Self-funded	Other
COLLEGES WITH ONE FUNDING SOURCE (n=116; 70% of colleges)					
Number of colleges n (%)	81 (70)	11 (9)	14 (12)	2 (2)	8 (7)
	Median (IQR) Range	Median (IQR) Range	Median (IQR) Range	Individual responses	Median (IQR) Range
Annual budget	€174,531 (96,741-295,583) 10,432-2,000,000	€149,985 (45,000-244,343) 34,775-494,505	€123,417 (94,270-156,485) 12,000-1,390,980	€800 €17,453	€33,958 (13,000-243,422) 4,680-2,550,000
COLLEGES WITH MORE THAN ONE FUNDING SOURCE (n=49)	n	n	n	n	n
Number of colleges with two funders (n=36)	27	4	23	12	6
Number of colleges with three or more funders (n=13)	12	6	11	7	5

Note: for colleges with more than one funder, n is the number of colleges reporting receiving funding from the respective sources

S9: Percentage of RCs reporting service delivery by different staff roles - overall, and broken down by continent

	Overall	Africa	Asia	Oceania	Europe	England	North America (Canada)
			r	N (%) positive respo	nse		
Nurse	49/157 (31)	2/2 (100)	7/13 (54)	1/7 (14)	18/61 (30)	20/58 (34)	1/16 (6)
Occupational therapist	54/160 (34)	2/2 (100)	5/13 (38)	3/7 (43)	20/64 (31)	24/58 (41)	0/16(0)
Psychologist	46/157 (29)	2/2 (100)	5/13 (38)	0/7(0)	16/60 (27)	23/59 (39)	0/16(0)
Psychiatrist	21/134 (14)	2/2 (100)	3/13 (23)	0/7 (0)	5/58 (9)	11/59 (19)	0/16(0)
Social worker	22/161 (14)	1/2 (50)	8/13 (62)	0/7 (0)	9/64 (14)	2/58 (3)	2/17 (12)
Peer/lay/lived experience support	107/166 (64)	0/2 (0)	6/13 (46)	5/8 (63)	37/67 (55)	47/59 (80)	12/17 (71)

Note: data on peer supporter role collected using different questions in the survey for England than international survey so may not be fully comparable

S10: Median budgets by country

Country	Median budget (Euros)	IQR
Australia	225,729	96,741-322,470
Belgium	55,500	3,280-80,000
Canada	156,485	34,775-230,903
Denmark	235,253	not reported
England	232,708	147,770-349,062
Ireland	121,000	100,000-207,000
Italy	12,000	not reported
Japan	2,780	1,529-34,750
Northern Ireland	174,531	not reported
Norway	186,000	70,211-284,640
Sweden	47,200	not reported

Median budgets for countries where 3 or more recovery colleges reported a total annual budget Inter-quartile range (IQR) reported for countries with 5 or more recovery colleges.

S11: Identified RCs and those that participated by country and continent

Africa	I	P	Asia	I	P	Oceania	I	P	Europe	I	P	England	I	P	North America	I	P
Uganda	2	2	Hong Kong	2	2	Australia	9	8	Belgium	14	10	England	88	63	Canada	23	19
			Japan	11	9	New Zealand (Aotearoa)	2	2	Bulgaria	1	1						
			Thailand	2	2				Czechia	1	1						
									Denmark	9	9						
									Estonia	2	2						
									Finland	2	2						
									France	1	1						
									Germany	3	3						
									Hungary	3	2						
									Iceland	1	1						
									Ireland	11	7						
									Italy	4	4						
									Jersey*	1	1						
									Netherlands	2	2						
									Northern Ireland	4	3						
									Norway	5	5						
									Scotland	3	3						
									Spain	6	3						
									Sweden	3	3						
									Switzerland	4	3						
									Wales	2	1						
Total	2	2		15	13		11	10		82	67		88	63		23	19

I = Number of RCs identified, P = Number of RCs that participated
*Note: Jersey is a self-governing dependency of the UK and was not included in the overall number of countries, but for analysis purposes the Jersey RC was considered to be a college in Europe, but separate to RCs in England