

## Wellbeing of young people with visual impairments

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# Wellbeing of young people with visual impairments

Technical report of findings to February 2015

November 2015

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## **Glossary**

NEET	Not in Education, Employment or Training
RNIB	Royal National Institute of Blind People
VICTAR	Visual Impairment Centre for Teaching and Research
Year 11 cohort	Participants were in school Year 11, aged 15-16 when recruitment commenced in summer 2010
Year 10 cohort	Participants were in school Year 10, aged 14-15 when recruitment commenced in summer 2010
Year 9 cohort	Participants were in school Year 9, aged 13-14 when recruitment commenced in summer 2010

## Executive Summary

This report presents findings from the research project: “A longitudinal study of blind and partially sighted young people in the UK”. The project has surveyed a sample of young people about their circumstances and views since 2010 when they were aged between 14 and 16 years old.

This report draws upon interviews with 61 young people. The interviews took place in autumn 2014 / spring 2015 when the young people were aged between 19 and 21 years old. The data presented here relates to these young people’s views of their own wellbeing (including responses to some standardised measures of wellbeing or well-related constructs) and friendships. This includes:

- Wellbeing: Short Warwick-Edinburgh Mental Wellbeing Scale
- Wellbeing: Locus of Control
- Wellbeing: Self-Image Profile for Adults
- Friendship networks
- Friendships with others with visual impairments
- Peer Support from others with visual impairments
- Anticipated benefits of peer support from others with visual impairments

### **Wellbeing: Short Warwick-Edinburgh Mental Wellbeing Scale**

Fifty nine participants completed the Short Warwick Edinburgh Mental Wellbeing Scale which is a nationally validated measure of mental wellbeing. The test is designed to be used amongst populations, rather than on an individual basis. It was found that collectively the participants have average psychological wellbeing, in line with national norms.

### **Wellbeing: Locus of Control**

Fifty nine participants answered questions which sought to determine their self-reported ‘locus of control’: the extent to which they believe they have control over their lives. Comparator data for the general population of people of a similar age was available from the Longitudinal Study of Young People in England (LSYPE). The responses from the participants mirrored closely the results from LSYPE. One notable difference however was the proportion of participants who responded that they ‘strongly agree’ that ‘if you work hard at something you’ll usually succeed’. The responses from the four statements were combined together to obtain an overall impression of the participants’ locus of control. The results suggest that the majority of participants lie between having a moderate internal or moderate external locus of control. One

participant however gave a response which would suggest a strong external locus of control, whilst 12 displayed a strong internal locus of control.

When asked how dissatisfied or satisfied they were with the way in which their lives had turned out so far, the distribution of responses were found to be similar to those given to the LSYPE survey. Ninety percent were either very satisfied or fairly satisfied. One participant who was 'fairly dissatisfied' was long term NEET at the time of interview. In contrast, two participants who described themselves as 'very satisfied' had not been looking for employment since they had become NEET, providing some indication of lower expectations in this regard.

### **Wellbeing: Self-Image Profile for Adults**

The Self-Image Profile investigates the way in which the participants view themselves, and their self-esteem. The responses from the participants were compared against comparator data which is provided within the administrative guide of the profile. The analysis showed the overall Self-Image Profiles and Self-Esteem profiles of the young people to be typical, and not warranting further investigation. However, there are indications that the Longitudinal Study participants identify themselves more strongly as 'hardworking' than those from the comparator group within their age range. In contrast, they would identify themselves as less active and less sociable. While numbers are relatively small this makes some intuitive sense and is in keeping with other literature (e.g. which highlights some of the challenges of participating in sport and socialising because of opportunities of finding suitable groups and barriers of travel).

### **Friendship networks**

Two thirds of the participants reported that the majority of their friends were of a similar age. Six reported that less than half their friends were of a similar age, whilst two felt that they did not have many close friends.

Just over a third of the participants reported that the majority of their friends live within their local area. For those participants who have either been in residential school and/or university, it was common for them to have very few friends living within the area of their family home.

All but one of the participants would use social networking web-sites, and this remains a very popular way for the young people to communicate with social groups, just as is typical for their sighted peers. They would use these web-sites to varying degrees, with some using

them throughout the day to communicate with friends, whilst others would use them very infrequently. Encouragingly, there appears to be little evidence of this group feeling excluded from this route to friendship and socialising, or finding it difficult to access.

Over 80% of the participants would go out socially or visit friends 'when they felt like it'. Reasons for not going out socially included: no-one to go with/no one in the area (7); too busy/not enough time (2); anxiety/lack of confidence (2); not knowing the area (1); difficulty with public transport (1). Visual impairment did not appear to be directly identified as a barrier to socialising. Although linked, of the seven who reported not having friends in the area, this tended to be because they were based at a residential school, so once they were back home, they were some distance from their friends.

### **Friendships with others with visual impairments**

Thirty four of the participants reported being friends with other people with a visual impairment, whilst twenty three said they were not. It was more likely for participants who were registered blind to be friends with other people with visual impairments. In most cases these young people had spent some of their education in specialist schools, where they had the opportunity to develop these friendship networks.

A variety of explanations were given by the participants to describe how they initially got to know other people with a visual impairment. These include: school (20); organised activities such as visual impairment charity events (10); university (6); through other friends (5); voluntary work at visual impairment charity (1); visual impairment sports team (1); hospital support group (1).

### **Peer support from others with visual impairments**

We asked questions about the value of support offered by friendships with others with visual impairments. Thirty of the participants would talk to friends who also have a visual impairment in relation to challenges they may be facing or alternatively to share something positive, specifically in relation to their visual impairment. The types of conversation described include: shared experience; giving advice to one another; and having discussions relating to technology. Several examples were given of ways in which they would benefit from having someone else to talk with who could relate to them directly as a young person with a visual impairment.

### **Anticipated benefits of peer support from others with visual impairments**

Those participants who were not friends with anyone else with a visual impairment were asked whether they could see any potential benefit to them in having this type of relationship. The responses were mixed, with some reporting that they would have found that type of relationship beneficial, others suggesting it was something they had considered but they never made a priority, and finally others who felt the friendships that they already fulfilled their needs. Nine of the participants reported that they have never had an opportunity to meet other people their age who also have a visual impairment, although this was reported in a matter of fact way, with little positive or negative judgement attached.

# 1 Introduction

The research project is entitled “A longitudinal study of blind and partially sighted young people in the UK”. This project was designed in 2009 by a team from RNIB and the Visual Impairment Centre for Teaching and Research (VICTAR) at the University of Birmingham in response to the research brief prepared by RNIB.

The key objectives of the project were:

- To track the process of transition for blind and partially sighted young people from age 14 for [initially] five years;
- To identify the roles of professionals involved;
- To identify the factors that improve or reduce a young person’s chance of gaining employment.

Phase 1 of the study involved the recruitment of an original sample of approximately 80 young people to the longitudinal study and carrying out several surveys of their views and circumstances. This took place between autumn 2009 – March 2012 and was funded by RNIB. The phase of research resulted in a number of reports (e.g. Hewett and Douglas, 2011a; Hewett and Douglas, 2011b, Hewett, Douglas, Ramli, and Keil, 2012).

Phase 2 of the study has been funded by the Nuffield Foundation, and centred on follow-up surveys of the sample of young people with visual impairment. By autumn 2014/spring 2015 there were 73 participants actively involved in the research, 61 of whom were available for interviews which are presented in this report.

This report focuses upon data collected between October 2014 and February 2015 through semi-structured telephone interviews (“autumn 2014 interviews”). A more comprehensive overview of the data collection of the study as a whole is presented in an accompanying report “Longitudinal Transitions Study of Young People with Visual Impairments: Methodology Summary” (Hewett et al, 2015a). This wave of interviews aimed to: explore the concept of wellbeing; look at the young people’s friendship networks; investigate the young people’s perceptions of how well prepared they consider themselves to be for independent living; and ask some more questions around support for and information about their eye condition. The findings from these interviews are presented in a series of accompanying themed reports:

- Longitudinal transitions study of young people with visual impairments: methodology summary (Hewett et al, 2015a)
- The transition experiences of young people with visual impairments aged 17-21 (Hewett et al, 2015b)
- Wellbeing of young people with visual impairments (this report)
- Support and information received by young people with visual impairments (Hewett et al, 2015d)
- Young people, visual impairment and preparing to live independently (Hewett et al, 2015e)

These reports are part of a series of technical reports which present all findings in the project since 2010.

## 2 Wellbeing

### 2.1 What is Wellbeing?

In their report, Chanfreau et al (2013) define Wellbeing as follows:

“Subjective wellbeing is generally regarded as consisting of at least two factors. Broadly there are ‘hedonic’ wellbeing (happiness, pleasure, enjoyment) and ‘eudemonic’ wellbeing (purpose, meaning, fulfilment)”

Guided by this report, which provides an overview of some of the available measures for predicting wellbeing, we have adopted a number of measures and investigated factors which are considered to be important indicators of Wellbeing. These include:

- Warwick-Edinburgh Mental Well-Being Scale which NatCen identifies to be the principle scale for measuring subjective wellbeing
- Locus of Control which was taken from the Longitudinal Study of Young People in England and measures the extent to which individuals believe that they have control over events in their lives
- Self-image profile for adults which is a measures self-image and self-esteem. This was successfully used in another project by School of Education, University of Birmingham in investigating the life and experiences of people with Usher syndrome (see Ellis and Hodges, 2013).
- Friendship by taking some questions from the Understanding Society survey. Social relationships have been identified as a key indicator for wellbeing.
- Independent living and how prepared the young people felt for the move towards independent living.

Being in employment is also identified as a central aspect of Wellbeing, and in particular having a “good” job which does not result in an unhealthy amount of stress for the worker. The participants’ experiences of transitioning into employment have been followed throughout the longitudinal study, and we will continue to track their experiences as more participants enter the labour market. Our most recent findings are presented in Hewett et al (2015).

## 2.2 Mental Well-being

### 2.2.1 Short Warwick-Edinburgh Mental Wellbeing Scale

The Warwick-Edinburgh Mental Wellbeing Scale is described as a “validated measure of mental wellbeing that has been used nationally, regionally and locally and seen as an effective tool” (ChaMPS, 2015). For the purpose of this research we used the Short Warwick-Edinburgh Mental Wellbeing Scale, which is made up of seven statements. The participants are invited to rate their feelings and thoughts over the previous two weeks, using a five item Likert scale. The seven statements are:

- I've been feeling optimistic about the future
- I've been feeling useful
- I've been feeling relaxed
- I've been dealing with problems well
- I've been thinking clearly
- I've been feeling close to other people
- I've been able to make up my own mind about things

The five item Likert scale given is:

- None of the time (1)
- Rarely (2)
- Some of the time (3)
- Often (4)
- All of the time (5)

The tool has been developed to investigate whether the mental wellbeing of a specific **population** (e.g. in the case of this research, young people who have a visual impairment). Therefore it is not appropriate to use the tool to look at the mental wellbeing of individuals. The responses given by the participants are summed up, giving a possible score range of 7 to 35, with higher scores indicating higher levels of wellbeing (Institute for Social and Economic Research, 2011).

A national mental wellbeing score has previously been calculated which can be used to compare the mental wellbeing of our sample, against the national average (ChaMPS, 2015). The Understanding Society survey (Institute for Social and Economic Research, 2011) found an average national score of 25.3 with a standard deviation of 4.4.

Fifty-nine participants participated in completed the Short Warwick-Edinburgh Mental Wellbeing. The mean score was **26.61**, with a standard deviation of **3.1**. This reflects an average mental wellbeing for our participant's which is slightly higher than the national average. According to the guidance given by Tennant et al (2007), this means that our sample have average psychological wellbeing.

### **2.3 Locus of Control**

“Locus of control refers to assumed internal states that explain why certain people actively, resiliently, and willingly try to deal with difficult circumstances, whilst others succumb to a range of negative emotions” (Lefcourt, 1991)

By investigating Locus of Control, we were investigating the extent to which participants believe that they have control over events in their lives. For the purpose of this research we adopted a tool used in the Longitudinal Study of Young People in England. They asked the following questions:

How much do you agree or disagree that:

- If someone is not a success in life, it is usually their own fault
- I can pretty much decide what will happen in my life
- How well you get on in this world is mostly a matter of luck
- If you work hard at something you'll usually succeed

The possible responses available to the participants were:

- Strongly agree (1)
- Agree (2)
- Disagree (3)
- Strongly disagree (4)

For question 1, 2 and 4, if the participant were to 'strongly agree' their response would indicate an internal locus of control, whilst to 'strongly disagree' would indicate an external locus of control, whilst the opposite is true for question 3. The tables below summarise the responses given by the participants. The responses given to each statement are presented in turn, along with the responses given by the participants of the Longitudinal Study of Young People in England. This data was gathered in 2010 when the participants were aged 20/21, and over 11,000 young people were surveyed.

**Table 1: If someone is not a success in life, it is usually their own fault**

	Total (N)	Total (%)	LSYPE (%)
Strongly agree	2	3%	7%
Agree	28	48%	36%
Disagree	26	44%	45%
Strongly disagree	3	5%	7%
Don't know	0	0%	5%
Total	59	100%	100%

**Table 2: I can pretty much decide what will happen in my life**

	Total (N)	Total (%)	LSYPE (%)
Strongly agree	2	3%	10%
Agree	41	70%	52%
Disagree	14	24%	30%
Strongly disagree	2	3%	5%
Don't know	0	0%	3%
Total	59	100%	100%

**Table 3: How well you get on in this world is mostly a matter of luck**

	Total (N)	Total (%)	LSYPE (%)
Strongly agree	3	5%	3%
Agree	16	27%	26%
Disagree	34	58%	58%
Strongly disagree	6	10%	9%
Don't know	0	0%	4%
Total	59	100%	100%

**Table 4: If you work hard at something you'll usually succeed**

	Total (N)	Total (%)	LSYPE (%)
Strongly agree	25	42%	29%
Agree	34	58%	65%
Disagree	0	0%	4%
Strongly disagree	0	0%	1%
Don't know	0	0%	1%
Total	59	100%	100%

We note a very similar pattern of response from our participants in comparison to the responses given by in the LSYPE survey. One notable difference is the proportion of participants who responded that they “strongly agree” that ‘if you work hard at something you’ll usually

succeed' (42% in the Transitions study, compared with 29% in the LSYPE) study.

**Table 5: Overall Locus of Control**

Total score	Total (N)	Total (%)
4-7	12	20%
8-11	46	78%
12-16	1	2%
Total	59	100%

To obtain an overall impression of the participants' Locus of Control, the responses they were given were summed together. For questions 1, 2 and 4, responses of 'strongly agree' were assigned a value of '1', through to 'strongly disagree' which were assigned a value of '4'. To reflect the direction of question 3, responses of 'strongly agree' were assigned a value of 4, through to 'strongly disagree' which was assigned a value of 1. A low value would reflect an internal locus of control; with a possible range from 4 - 16. The mean score for the 59 participants was 8.6, and the majority of participants had a score of between 8 and 11. This suggests the majority of participants have either a moderate internal or moderate external locus of control. We note however that one participant gave a response which would suggest a strong external locus of control. This participant is one who has been long term NEET and registered blind. In contrast, 20% of the participants display a strong internal local of control. These participants were following a wide range of pathways, including:

- 5 in Higher Education
- 4 in Employment
- 1 on a gap year
- 2 who were NEET.

It will be interesting to repeat these questions with the participants to ascertain whether their locus of control changes over time.

Finally the young people were asked "How dissatisfied or satisfied are you about the way in which your life has turned out so far". This question was also taken from the LSYPE survey, and the responses from that survey are given for comparison.

**Table 6: How dissatisfied or satisfied are you about the way your life has turned out so far?**

	Total (N)	Total (%)	LSYPE (%)
Very satisfied	13	22%	28%
Fairly satisfied	40	68%	51%
Neither satisfied or dissatisfied	5	9%	13%
Fairly dissatisfied	1	2%	65
Very dissatisfied	0	0%	3%
Don't know	0	0%	1%
Total	59	100%	100%

The responses given by our participants are similar to those given by the LSYPE participants. Ninety percent of the Transitions study participants reported being either 'very satisfied' or 'fairly satisfied' with the way in which their life had turned out so far, in comparison to 79% of those from the LSYPE survey. The participant who reported being 'fairly dissatisfied' has been long term NEET, and has spoken previously of being frustrated at not being in employment. The thirteen participants who were 'very satisfied' were following a range of pathways, including: 9 in higher education; 1 in employment; 1 in further education; and 2 who were long term NEET.

It is particularly interesting to note the contrast in response between three participants who are NEET. The participant who would describe themselves as 'fairly dissatisfied' has been seeking to find employment for some time, and has become very disillusioned. In contrast, the two participants who describe themselves as 'very satisfied' have not been looking for employment since they have been NEET. This provides some indication of lower expectations from these two participants.

## 2.4 Self-image profile for adults

### 2.4.1 Background to the Self-Image Profile

Following on from work conducted by other researchers based in Disability, Inclusion and Special Needs at University of Birmingham, we also investigated the participants' self-image. Self-image profiles look at how an individual views themselves. For the purpose of the study we used a self-image profile created by Richard Butler and Sarah Gasson (Butler and Gasson, 2004). Ellis and Hodges (2013) provide an overview of this tool and explain how it is administered and interpreted. Of particular note is the fact that it is a standardised tool, allowing us to make comparison with the wider population.

### 2.4.2 Administration of the SIP

As discussed in the sister methodology report (Hewett et al, 2015a), due to some of the participants being restricted in time when interviewed (and in particular those in higher education), it was not possible to complete this profile with all participants. A short overview of the young people who participated is presented in the section below.

The self-image profile consists of 30 statements which can be grouped into six categories, all of which relate to self-image. These are: Outlook; Consideration; Social; Physical; Competence and Moral.

**Figure 1: Aspects of Self**

<b>Outlook</b>	<b>Consideration</b>	<b>Social</b>	<b>Physical</b>	<b>Competence</b>	<b>Moral</b>
Happy	Patient	Friendly	Fit	Creative	Hard working
Optimistic	Caring	Sociable	Active	Organised	Loyal
Easy going	Good listener	Fun	Thin/slim	Determined	Trustworthy
Patient	Thoughtful	Outgoing		Intelligent	Reliable
	Helpful	Sense of humour		Confident	Honest
	Generous				
	Sensitive				
	Kind				
	Friendly				

Reproduced from Ellis and Hodges (2013)

For each statement the participant is asked to rate on a scale of 0 to 6 how much they consider it to be like them: 0 being 'not at all like me' and 6 being 'very much like me'.

The participants were asked to complete the survey twice. The first time they would respond to the question 'how you think you are', and the second time they would respond to the question 'how you would like to be'. This means each participant had two resulting outcome measures: a **self-image score** (based on how they see themselves) and a **self-esteem score** (which looked at the difference between how they see themselves and how they would like to be).

### 2.4.3 Overview of Participants

**Table 7: Characteristics of participants who took part in the self-image profile**

Characteristic	Total (N=43)	Total (%)
Gender		
Male	17	40%
Female	26	60%
Cohort		
Year 9	13	30%
Year 10	6	14%
Year 11	24	56%
Registration type		
Blind	17	40%
Partially sighted	12	28%
Registered but category unknown	1	2%
Not registered	9	21%
Don't know	4	9%

Forty three participants participated by completing the self-image profile.

### 2.4.4 Self-Image

The participants' self-image score is calculated by adding together the scores from all thirty statements. Guidance is provided by Butler and Gasson (2004) for interpreting these scores:

- A high self-image score suggests the person has a positive view of themselves
- A low self-image score suggests the person fails to view themselves in terms of positive attributes

- Cut-off scores are provided by Age and Gender
- A Self-Image score below this cut-off value would indicate an unusual profile, and potentially of concern
- For those aged 17-25 years, cut off points are given as 92 for Male and 93 for Female

None of the participants had scores below the advised cut off points. The minimum score was 96 and the maximum was 157, with a mean score of 136.6 (134.4 for males and 138.1 for females). The participants were most likely to see themselves as honest, trustworthy, loyal, caring, and friendly, and least likely to see themselves as fit, active, organised, patient and confident. These findings are very similar to those of the Usher study (Ellis and Hodges, 2013).

Comparison was also made between the characteristics that the participants were most likely to see in themselves and the corresponding comparator results provided by Butler and Gasson (2004) for 17-25 year olds. The 30 characteristics from the self-image profile were taken and using the mean scores for Males and Females, the characteristics were ranked between 1 and 30 from 'most likely' to 'least likely'. The same process was carried out based on the responses from the participants in the Longitudinal Study. For each characteristic the ranking from the Longitudinal Study was then subtracted from the ranking of the comparator data. For example, those from the Longitudinal Study most identified themselves as being 'trustworthy', whilst this was ranked second by the comparator group, giving a difference of 1 between the two rankings. A table summarising the results of this process is presented in the appendix. Caution should be made in interpreting these differences, particularly as we are dealing with relatively low sample sizes. However, the differences identified are intuitive ones, and therefore worth exploring further. The table below summarises this further:

**Table 8: Comparison between how a representative sample of 17-25 year olds view themselves and how the participants of the Longitudinal Study view themselves: Notable differences**

Characteristic (From most like to least like)	Ranking of the comparator population of 17-25 year olds (averaged for Male and Female)	Ranking of the Longitudinal Transition Study Participants	Difference in rankings
Hard working	22	10	12

Active	18	29	11
Sociable	12	21	9

The table above shows that the participants identify themselves more strongly as 'hard working', than those from the comparator group from their age range. In contrast, comparatively they would identify themselves less as 'active' and less 'sociable'.

For young people with visual impairments who can have many challenges in their work, with tasks often taking longer, it is easy to understand why they are more likely to identify themselves as being hard working. Similarly, barriers can be anticipated for those with visual impairments in being active and socialising, particularly in relation to mobility and travel.

#### 2.4.5 Self Esteem

In the self-identity profile, the self-esteem of the individual is evaluated by looking at the difference between where they consider themselves to be, and where they would wish to be. Butler and Gasson (2004) provide guidance for the interpretation of this data, and how the values should be interpreted:

- The higher the score, the higher the discrepancy between the two, and the greater the indication of low self-esteem.
- Conversely a lower score would be an indicator of higher self-esteem.
- Cut-off scores for self-esteem are provided by Age and Gender
- A value **above** these cut-off scores would imply an unusually low measure of self esteem
- For those aged 17-25 years, cut off points are given as 65 for Male and 64 for Female

Similarly to the Self-Image score, none of the participants had values above the cut off points. The highest discrepancy was 58, and lowest 9, with a mean of 30.9.

#### 2.4.6 Aspects of Self Scores

Finally, we considered the responses of the participants in accordance to the categories presented in Figure 1.

**Table 9: Aspects of Self Scores: Male**

Category	Mean Scale Score (and standard deviations) - Comparator group aged 17-25	Mean Scale Score Longitudinal Transition Study Participants
Consideration	4.28 [0.75]	4.54 [0.55]
Social	4.38 [0.84]	4.61 [0.73]
Moral	4.48 [0.76]	4.98 [0.70]
Competence	3.76 [0.80]	4.19 [0.72]
Physical	4.37 [1.15]	3.92 [0.98]
Outlook	4.12 [0.88]	4.34 [0.70]

**Table 10: Aspects of Self Scores: Female**

Category	Mean Scale Score (and standard deviations) - Comparator group aged 17-25	Mean Score Longitudinal Transition Study Participants
Consideration	4.57 [0.68]	4.85 [0.47]
Social	4.57 [0.80]	4.65 [0.68]
Moral	4.83 [0.67]	5.37 [0.64]
Competence	3.70 [0.73]	4.21 [0.50]
Physical	3.92 [1.29]	3.46 [1.17]
Outlook	3.96 [0.82]	4.43 [0.56]

The two tables above look at Aspects of Self Scores according to the six categories: Consideration; Social; Moral; Competence; Physical and Outlook. They compare the mean scale scores by gender for the comparator group and the mean scale scores for the study participants. Outlying results would be detected if the mean score for the longitudinal study participants was below two standard deviations of the comparator group. For all categories this is not the case for the participants of the Longitudinal Study. However, we do note that the mean scale score is higher for the Longitudinal Transition Study participants for all categories other than "Physical". Similarly, looking on an individual basis, when following the rule of thumb advised by Butler and Gasson (2004) that an item score which is  $\geq$  two standard deviations below the age and gender mean score is noteworthy, we note that two participants have a score for "Physical" which is below this critical value. Both these participants are registered as partially sighted.

### 3 Friendships

#### 3.1 Friendship networks

A number of questions were adopted from the 2013 Understanding Society questionnaire. The results of this survey have not been made publically available yet, but in the future we will be able to make direct comparison.

**Table 11: What proportion of your friends are a similar age to you?**

	Total (N)	Total (%)
All similar	17	30%
More than half	21	34%
About half	13	23%
Less than half	6	11%
Don't have any friends (spontaneous)	0	0%
Total	57	100%

The participants were asked what proportion of their friends group were of a similar age to them. Two thirds reported that more than half or all of their friends were of a similar age. Six reported that less than half their friends were of a similar age, with two explaining that they didn't have many close friends, one saying that she did not really have many friends apart from her partner who is older, and one participant who responded "I seem to attract all the oldies".

**Table 12: What proportion of your friends live in your local area?**

	Total (N)	Total (%)
All are in the local area	6	11%
More than half	14	25%
About half	15	26%
Less than half	20	35%
None	2	4%
Total	57	100%

Just over a third of the participants said that 'more than half' or 'all' of their friends live within their local area. For those participants who have either been to residential school and/or university, it was common for them to have very few friends living within their local area (i.e. the place they would identify as home).

**Table 13: How many close friends would you say you have?**

	Total (N)	Total (%)
1-3	16	30%
4-6	24	45%
6-9	7	13%
10+	6	11%
Total	53	100%

The participants were asked to estimate how many close friends they have. Where they gave a range (e.g. 5-7), the highest figure has been recorded. The responses were mixed, but the majority reported having six close friends or less.

The responses from two of the participants indicated some insecurity about the friends that they had:

“I wouldn’t know at the minute. Possibly one, maybe two.”

“I’m not sure about that yet.”

In both these cases the young person was struggling socially at university in getting to know people.

**Table 14: Do you belong to any social networking web-sites?**

	Total (N)	Total (%)
Yes	56	98%
No	1	2%
Total	57	100%

All but one of the participants would use social networking web-sites (mirroring findings in a previous interview). The one participant who would not use social networking specifically had made the decision not to. This was partly because she did not have any interest in such networking sites, and preferred to make contact with her friends, and also because she worked at a computer all day, she preferred not to have to look at a screen during her leisure time.

**Table 15: How many hours do you spend chatting or interacting with friends through social web-sites on a normal week day, that is Monday to Friday?**

	Total (N)	Total (%)
None	3	5%
Less than an hour	24	43%
1-3 hours	19	34%
4-6 hours	7	13%
7 or more hours	2	4%
Not applicable	1	2%
Total	56	100%

Again, there were a range of responses from participants when asked how long they would spend chatting or interacting with friends through social web-sites. On one end of the scale there were those who would go onto the sites very infrequently, just to catch up with messages. In contrast, there were those who had access to a computer or phone throughout the day who would always be available to chat or interact with their friends. However, over half would spend at least an hour communicating with friends through social media, demonstrating that for young people with a visual impairment that this is an important communication tool for them. Whilst in some ways this is unsurprising as this would be typical for young people without a visual impairment, it is encouraging that the young people are able to access these social media web-sites. Additionally, this is useful information for organisations wishing to promote events and information to young people with visual impairments, and suggests that social media is a platform which they should be using.

**Table 16: Do you go out socially or visit friends when you feel like it?**

	Total (N)	Total (%)
Yes	46	81%
No	11	19%
Total	57	100%

The participants were asked whether they would go out socially or visit friends when they felt like it. Forty six reported that they would, whilst eleven reported that they would not always be able to do this. They were asked to provide further explanation and their responses are summarised in the table below:

**Table 17: Why don't you go out socially? (N=9)**

	Total (N)	Total (%)
No-one to go with/no one in the area	7	78%
Too busy/not enough time	2	22%
Anxiety/lack of confidence	2	22%
Not knowing the area	1	11%
Difficulty with public transport	1	11%

Seven of the participants reported being restricted in not having anyone to go out with socially. This tended to be because they were based at a residential school, so once they were at home during the holidays they were some distance from their friends.

“I go travelling a lot to see my friends. When I am here I am not that social because I can't be”

Two participants reported being too busy to spend time socialising, whilst two felt restricted due to anxiety/a lack of confidence:

“I'm not very confident and I struggle to socialise, which I think is down more to the autism again”

One participant felt restricted in meeting up with friends as she did not know the area where they lived:

Participant: “Not really, no. I have no real way of getting about”.  
Researcher: “Is that due to public transport?” Participant: “It's due to not knowing the area where they live and stuff.”

Finally, one participant would socialise with friends, but instead of going out she would ask them to come to her home, due to difficulties in using public transport:

“If friends want to meet up in town then I have difficulty because I don't use buses, so, I think it's just easier and more convenient to ask them to meet around mine”

## 3.2 Friendships with others with visual impairments

### 3.2.1 Friendships with others who have a visual impairment

**Table 18: Are your friends with any other people with visual impairments?**

	Total (N)	Total (%)
Yes	34	60%
No	23	40%
Total	57	100%

The participants were asked whether they were friends with any other people with visual impairments. This prompted quite a mixed response, with 34 (59.6%) reporting that they were and 23 (40.4%) saying that they weren't. Some who reported not having friends with visual impairments shared that they had had opportunities to get to know other people with visual impairments, but were no longer in contact with them.

**Table 19: Are your friends with any other people with visual impairments? By registration type**

Registration type	Yes	No
Blind	18	2
Partially sighted	10	8
Registered by category unknown	0	2
Not registered/Unknown	3	7

It was more likely for participants who were registered blind to be friends with other people with visual impairments. In most cases these young people had spent at least some of their education in specialist schools, and therefore had had the opportunity to develop these friendship networks.

**Table 20: How did you get to know other people with visual impairment?**

	Total (N)
School	19
Organised activities	10
University	6
Through friends	5
Voluntary work at VI charity	1
VI sports team	1
Hospital group	1

The table above looks at how the young people got to know their friends, who also have a visual impairment. The most common response was through school (19), and this was particularly true for those who had been in specialist schools, or mainstream schools with an attached resource base:

“The majority of my friend are blind or visually impaired, yeah, because obviously I went to a special school for seven years. One of the things I really want to do when I go to uni is make more friends from the sighted community. But yeah, the vast majority of my friends are blind.”

“They are from my school, because I went to a school with a specialist eyes unit”

It was also common for the young people to have made friends with other people with visual impairments through organised activities (10), such as events put on by their local authority sensory support service and events put on by specialist organisations.

“I think it was with the RNIB, when they did trips to the PTL weekend, and we have been friends ever since”

Others spoke of going to organised events, but not keeping in touch with the people they met – they did not want to be friends with these other people simply because they also had a visual impairment.

“I don’t not agree with them, I won’t just make friends with someone because they can’t see or whatever”

Six of the participants got to know other people with visual impairments at university. In one case this was through a disabled student forum, whilst others got to know their friends through the course they were on.

Five participants said they got to know others with visual impairments through their friends. In some cases it was simply a case of other people with visual impairment introducing them to their friends (it is noticeable that there is a network of young people with severe visual impairments which has developed over time) whilst in other cases it was their sighted friends introducing them to someone else with a visual impairment. One participant got to know others through doing voluntary work at a charity for the visually impaired, one through a specialist sports team he was involved in, and one through a hospital group which she had attended as a child:

“Through the hospital... our parents were in contact when we were younger, and we have just stayed in contact”

### 3.2.2 Peer support

The participants were also asked whether they would talk with these friends in relation to any challenges that they may face with their visual impairment, or alternatively to share something positive.

**Table 21: Would you ever talk with these friends in relation to any challenges that you may face with your visual impairment, or share any positive experiences together in relation to your visual impairment?**

	Total (N)	Total (%)
Yes	30	57%
No	3	6%
N/A – no friends with visual impairment	23	43%
Total	53	100%

Of 33 participants who reported having friends who also have a visual impairment, the vast majority (30) would speak with these friends about issues in relation to their visual impairment. Those who would speak with their friends about issues specifically relating to their visual impairment were asked to share more information about the type of things they would discuss. These have been grouped into three categories:

### ***Shared experience***

Firstly, there were those who would talk about their shared experiences as someone with a visual impairment. There was a sense of comfort from being able to speak with someone else who would have the same experiences as them, to help them feel 'normal':

"Oh definitely, I would be like 'do you face this', you know, 'what do you do?'... it helps me feel a bit more normal, if I can!"

"We talked about basically if situations come up, it was like, can you do this. Do you get this question? We often commented on how we always got the question of why don't we wear glasses"

"Something like we have trouble getting around town, like escalators and we have trouble with judging how fast something is coming towards you, maybe a football, how fast that was coming towards you. Even traffic, if at a pedestrian crossing, do you wait for the green man or risk it and go."

For some this would be done quite a light hearted way:

"It would mostly be joking around, noticing things that we do similarly that no one else does, because of our visual impairments"

"Kind of, but it's more a kind thing of 'I can't see, me neither'. If we are both in the dark, in uni there is essentially a blind spot because they haven't fixed the lights, and she kind of suddenly goes really still and slow, and so do I, and it must be hilarious to watch because we are essentially the opposite of rabbits in headlights!"

In other cases they would benefit from sharing things with these friends as they know that they would understand in ways that others would not:

"Yes I would, because they would understand, because they are in the same situation"

"It was helpful having someone who understood it"

There were those who would also talk about specific shared experiences, such as life at university with a visual impairment, or in one case, going through the application process for a guide dog. It was noted however that sharing experiences like this was not always positive:

“Particularly when we first started at uni we exchanged notes – like ‘oh my god this is horrible’, ‘this is great’”

“I started talking to people about uni more, but it varies the kind of response you get, because some people really don’t like talking about it, and then other people, you can just end up having a massive rant! So I don’t know. It sometimes can be really helpful because someone will go “I did this” and then you are like “oh yeah, I could do that too”, but it just depends I think.”

“I talked to him about the daily challenges that you would expect to meet at university, I asked him how he dealt with them and he would advise me on the best way”

Others would share with one another ways in which they would approach challenges relating to their visual impairment:

“I think it’s mostly, often what I have found, if I have found for example say being able to talk to each other and say ‘how did you get this done’, and they would say that it is possible, that is an advantage really.”

### ***Giving advice to others***

Six of the participants spoke of how they would use their experiences to then give advice to others. In some cases this would be simply sharing information on Facebook, whilst in others they spoke of giving advice in more of a counselling type manner.

“If I think I see something good, I will put it out to my Facebook page, and my Facebook page has an awful lot of blind friends on it”

One participant saw that she had a role in encouraging people to make decisions and to take responsibility:

“I mean because I think people are responsible for themselves. I am lucky that my parents have let me do stuff. But I think there is only a certain length of time you can actually say it’s because of your upbringing, because there is a point where you could make a decision to change your life. And I think a lot of blind people don’t and they say it’s because I am sheltered”

A further participant spoke of how another person with a visual impairment had started at his workplace, and how he helped set up his working environment and advised him of certain things to be aware of, to avoid embarrassing situations:

“When he came to the company, I had been there a good 18 months beforehand, and I sorted him out a better monitor for his desktop, I showed him where to go in terms of who to talk to because he wanted Zoomtext, so I sorted him with the person he needed to speak to. His visual impairment is a stretch worse than mine, so I mentioned obstacles in the buildings, which is hard to navigate through, there are random bollards, it’s really not great, it’s quite a dark building, so I said to watch out for that... I didn’t want him to embarrass himself”

### ***Technology***

Finally, some of the participants spoke of sharing with each other their positive and negative experiences with different types of technology. As this was a consistent finding amongst the participants in previous interviews, it was presented as an example to the young people of the type of topic that they may discuss with their friends, and many simply agreed that they would. However, a few gave some specific examples of the types of conversation they would have around technology:

“Oh yeah, that’s useful. For all of us because I mean someone might find an app or something. Those communities online, like Appleverse which is a website where you can, it’s all for visually impaired people and they write reviews for stuff, write if it’s accessible or not”

### **3.2.3 Anticipated benefits of peer support**

Those participants who had not had any peer support were asked whether they could see any benefit to them of having this type of relationship. The responses were mixed, with some reporting that they would have found that type of relationship beneficial, others suggesting it was something they had considered but never made it a priority to address, and finally there were those who were happy with the friendships that they already had:

#### ***Beneficial***

Participant: “The events that I have been told of, it’s for people that are middle aged, so they haven’t been aimed at my age group.”

Researcher: “Do you think that would be something that you would find benefit, maybe finding someone of a similar age to you that you could find a visual impairment that you could talk with?”

Participant: “Yeah”

“Yeah I could, obviously to get to know other people and other people’s experiences, which would be nice.”

“Yeah because you could talk to them about what their visual impairment is like, and how it affects their lives. It would just be nice to talk to someone who knows that it is like to have a visual impairment, rather than people who don’t really understand that it does affect quite a big part of your life really”

### ***Not a priority***

“I can, I guess. I’ve just not really prioritised it”

“I do wonder sometimes if someone who has the same thing, if they have got a different life, or if they are affected differently, but then I think that it’s all about me and my life, so I am just focusing on my life really, me”

### ***Happy as they are***

“I don’t know really, probably not really. It didn’t really affect me, so it didn’t affect my friends or my relationships with friends”

“I don’t know, I don’t try to let it affect my life too much so...”

Nine of the participants report that they never have had an opportunity to meet other people their age who also have a visual impairment.



## 4 CONCLUSIONS

The autumn 2014 interviews provided an opportunity to explore various aspects of wellbeing amongst the participants involved in the study, and also to use comparator data to evaluate their responses in the context of national data sets and standardised tests.

On the whole the responses are positive. The Short Warwick-Edinburgh Mental Wellbeing Scale shows the participants as a group to have an average psychological wellbeing, in line with national norms. Similarly, the responses to the questions on locus of control were very comparable to those given by participants in the LSYPE study, and a Self-Image Profile showed the participants Self-Image Profiles and Self-Esteem scores to be typical.

It is interesting to note that when reviewing the responses to the LSYPE locus of control questions, the one notable difference was that large proportion of participants who responded that they 'strongly agree' that 'if you work hard at something, you'll usually succeed'. Additionally, when comparing rankings of characteristics within the Self-Image Profile, the participants appear to identify themselves more strongly as 'hardworking' than those from the comparator group. We also note that they were less likely to view themselves as 'active' and 'sociable' (which is explored further in the friendship questions). While numbers are relatively small this makes some intuitive sense and is in keeping with other literature (e.g. which highlights some of the challenges of participating in sport and socialising because of opportunities of finding suitable groups and barriers of travel). To date we have asked very few questions of the participants about the opportunities which they have to be active and undertake exercise, and this would be a very interesting theme to explore further in future interviews.

It is unfortunate that the comparator data is not available yet for the questions around Friendship taken from the Understanding Society study. As we write future research briefings we will be able to incorporate this data at a later date. We note that the majority of the participants have a network of friends around them. For those who attended specialist schools which involved living away from home, this often meant the majority of their friends were young people who also have visual impairments. It also meant for these young people when back at the family home during the holidays, they would often be limited in the friends they had around them.

School was the most common means for the participants to have formed friendships with other young people with visual impairments. Several advantages were identified by the participants to having peer support of this kind, and whilst there was a sense of wanting to have a broad range of friendships which also include those who are sighted, these relationships were valued and seen to have importance.

There were several young people who had not had the opportunity to develop friendships with others with visual impairments, although this was reported in a matter of fact way, with little positive or negative judgement attached. These tended to be those young people who had been in mainstream education, and not attached to resource bases. Given the value attached to these friendships identified by others, this might be an area for development in some mainstream education services, as well as encouragement made to the young people themselves.

## 5 FUTURE PLANS

This publication is part of a series of reports from the Longitudinal Transitions Study, which is following the transition experiences of over 80 young people with visual impairments. The project commenced in autumn 2009, and we have working alongside the young people since 2010. Funding has been received in two phases:

- Phase 1: 2009-2011 - Royal National Institute of Blind People
- Phase 2: 2012-2015 the Nuffield Foundation

We are pleased to report that funding has been secured through Thomas Pocklington Trust to continue the research into a third phase. This comes about as the participants continue their transitions into adulthood and employment, and look to start living more independent lives. Thomas Pocklington Trust's interest in the research came about following their own scoping study (Blood, 2015) which found that the likelihood of success for a young person with visual impairment making a positive transition into living independently was strongly linked to their employment status - thus concluding that a key way to help young people with visual impairments to be able to start living independently is to help equip them for work. Such findings also serve as a reminder that in looking to support a young person with visual impairment into employment, we need to think simply beyond the skills that they need in education, and instead look to the broader skills that they are going to need to live independently.

As the project continues, we intend to keep speaking to the participants at regular intervals to continue tracking their transition experiences and in particular their experiences as they try to enter the labour market.

## 6 APPENDIX

**Table 22: Comparison between how a representative sample of 17-25 year olds view themselves and how the participants of the Longitudinal Study view themselves**

Characteristic (From most like to least like)	Ranking of the comparator population of 17-25 year olds (averaged for Male and Female)	Ranking of the Longitudinal Transition Study Participants	Difference in rankings
Trustworthy	1	2	1
Loyal	2	3	1
Friendly	3	5	2
Honest	4	1	3
Reliable	5	9	4
Sense of humour	6	8	2
Good listener	7	12	5
Caring	8	4	4
Kind	9	6	3
Helpful	10	17	7
Easy going	11	16	5
<b>Sociable</b>	<b>12</b>	<b>21</b>	<b>9</b>
Determined	13	7	6
Thoughtful	14	11	3
Sensitive	15	19	4
Happy	16	13	3
Fun	17	14	3
<b>Active</b>	<b>18</b>	<b>29</b>	<b>11</b>
Generous	19	15	4
Enthusiastic	20	18	2
Outgoing	21	25	4
<b>Hard working</b>	<b>22</b>	<b>10</b>	<b>12</b>
Intelligent	23	23	0
Optimistic	24	20	4
Patient	25	27	2
Confident	26	26	0
Creative	27	22	5
Thin/slim	28	24	4
Organised	29	28	1

Fit	30	30	0
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## 7 REFERENCES

Blood, I (2015) Housing and Independent Living: Synthesis of scoping research for Thomas Pocklington Trust. *Imogen Blood & Associates*

ChaMPS (2015) Measuring Wellbeing. ChaMPS Public Health Network. Available at <http://www.champspublichealth.com/writedir/0a57Measuring%20mental%20wellbeing%20using%20WEMWBS.pdf> Last accessed 7<sup>th</sup> May 2015.

Chanfreau, J., Lloyd, C., Byron, C., Roberts, C., Craig, R., De Feo, D., McManus, S (2013) Predicting wellbeing, *NatCen Social Research*.

Ellis, L and Hodges, L (2013) Life and Change with Usher: The experiences of diagnosis for people with Usher Syndrome. Report for Sense. *University of Birmingham*

Hewett, R., Douglas, G., Williams, H (2011) Post-14 transitions support – a survey of the transition experience of visually impaired young people Technical report of findings to summer 2011. Report for RNIB. <http://www.rnib.org.uk/research>

Hewett, R and Douglas, G (2011) Life after GCSEs – initial report from the RNIB Transitions Project. Conference paper presented at RNIB Transitions Conference, July 2011. *Visual Impairment Centre for Teaching and Research, University of Birmingham*.

Hewett, R., Douglas, G., Ramli, A., and Keil, S. (2012) Post-14 transitions – A survey of the social activity and social networking of blind and partially sighted young people: Technical Report, February 2012. *Visual Impairment Centre for Teaching and Research, University of Birmingham*.

Hewett, R., Douglas, G., and Keil, S. (2013) Young people's progress and views of independence aged 16-19: Post-14 transitions support, June 2013. *Visual Impairment Centre for Teaching and Research, University of Birmingham*

Hewett, R., Ellis, L., Douglas, G., and Keil, S. (2014) Vision, Accessing Information and Accessing Benefits. Technical report of findings to

December 2013. *Visual Impairment Centre for Teaching and Research, University of Birmingham*

Hewett, R., Douglas, G., and Keil, S. (2015a) Longitudinal Transitions Study of Young People with Visual Impairments: Methodology Summary. *Visual Impairment Centre for Teaching and Research, University of Birmingham*

Hewett, R., Douglas, G., Keil, S. and Williams, H. (2015b) The Transition Experiences of Young People with Visual Impairments aged 17-21. *Visual Impairment Centre for Teaching and Research, University of Birmingham*

Hewett, R., Douglas, G., and Keil, S. (2015d) Support and Information received by Young People with Visual Impairments. *Visual Impairment Centre for Teaching and Research, University of Birmingham*

Hewett, R., Douglas, G., and Keil, S. (2015e) Young people, visual impairment and preparing to live independently. *Visual Impairment Centre for Teaching and Research, University of Birmingham*

Lefcourt, H. (1991) Locus of Control In: Eds Robinson, J., Shaver, P., Wrightsman, L. Measures of Personality and Social Psychological Attitudes. *London. Academic Press, pp413-493*

Institute for Social and Economic Research (2011) Understanding Society: Early findings from the first wave of the UK's household longitudinal study. *University of Essex.*

RNIB (2015) Apprenticeships. Available at: <http://www.rnib.org.uk/young-people-starting-work/apprenticeships>. Last accessed 27<sup>th</sup> March 2015.

The Quality Assurance Agency for Higher Education. (2015). What is Access to HE? Available at: <https://www.accesstohe.ac.uk/Pages/Default.aspx>. Last accessed 26th March 2015.

Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., Parkinson, J., Secker, J., Stewart-Brown, S. (2007) The Warwick-Edinburgh Mental Well-being Scale (WEMWBS) development and UK validation. *Health and Quality of Life Outcomes Vol. 5(63)*

Stewart-Brown, S. and Janmohamed, K (2008) Warwick-Edinburgh  
Mental Well-being Scale (WEMWBS) User Guide Version 1. *Warwick  
Medical School, University of Warwick*