

Intergenerational mentoring at Men's Sheds: A feasibility study

Nathan J Wilson¹ | Reinie Cordier² | Marina Ciccarelli² | Judith MacCallum³ | Benjamin Milbourn² | Sharmila Vaz² | Annette Joosten² | Angus Buchanan² | Tomomi McAuliffe² | Roger J Stancliffe⁴

¹School of Nursing and Midwifery, Western Sydney University, Richmond, NSW, Australia

²Faculty of Health Sciences, School of Occupational Therapy and Social Work, Curtin University, Perth, WA, Australia

³School of Education, Murdoch University, Murdoch, WA, Australia

⁴Centre for Disability Research and Policy, the University of Sydney, Lidcombe, NSW, Australia

Correspondence

Nathan J. Wilson, School of Nursing and Midwifery, Western Sydney University, Richmond, NSW, Australia.

Email: N.Wilson@westernsydney.edu.au and

Reinie Cordier, Faculty of Health Sciences, School of Occupational Therapy and Social Work, Curtin University, Perth, WA, Australia. Email: reinie.cordier@curtin.edu.au

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Background: This study reports on the feasibility of an intergenerational mentoring programme for youth with intellectual disability (ID) aimed at developing skills and building networks.

Methods: Youth with ID were paired with older male mentors who were trained to support the mentees participate in activities and social interactions during weekly sessions. We interviewed the mentees and mentors, and assessed them on a range of outcomes using standardized measures.

Results: Interviews highlighted that the programme presented a great “opportunity” for the mentees and mentors. The participants described facilitators and challenges to the acquisition of practical skills by mentees and the development of relationships between mentors and mentees, including communication, transportation and mentor training. The youth with ID had difficulty completing the self-report measures.

Conclusions: Mentoring programmes are viable to support youth with ID during the transition to adulthood; however, refinement is required in the rollout out of a pilot intervention.

KEYWORDS

active support, employment, intellectual disability, Men's Sheds, mentoring, social inclusion

1 | INTRODUCTION

Young Australians with disabilities experience multiple lifelong disadvantages in education, employment, community access, and social participation (Llewellyn, Emerson, & Honey, 2013). The seeds of this lifelong disadvantage are often sown during key developmental periods, including the transition to adulthood. For young adults with intellectual disability (ID), this disadvantage is often associated with a lack of positive role models, limited choice and opportunity, poor community networks, low expectations, ad hoc career planning, reduced community mobility and individual life skill deficits (Emerson, Honey, Madden, & Llewellyn, 2009). Although disability policies seek to reduce social and economic exclusion, the disadvantage is widening. Sustainable ways to build community support networks are needed.

Community networks help make connections, create contacts and increase exposure to potential job opportunities. For young adults with intellectual disability, the opportunity to engage with and develop such networks is limited. Men's Sheds present as a potential untapped naturalistic community resource through the many different types of informal and formal mentoring programmes they offer (Cordier & Wilson, 2014). Men's Sheds are a community space where, typically, older retired men meet to socialize and participate in activities, such as wood and metalwork. With nearly 1000 sheds across Australia and an expanding network of sheds internationally, Men's Sheds offer access to an expansive community network both within the shed and within communities (Wilson & Cordier, 2013). This project examined the feasibility of a novel Men's Shed intergenerational mentoring intervention to offer a sustainable space for young adults with intellectual disability to build wider community networks and learn new work-related skills.

1.1 | The problems facing young adults with intellectual disability

Australian youth with disabilities experience significant disparities in school completion, workforce participation and social inclusion compared with their non-disabled peers. In regard to employment, people with disabilities reported the most important issues were as follows: (i) addressing negative attitudes and stereotypes; (ii) availability of jobs; and (iii) providing assistance in finding, securing and maintaining employment (Australian Human Rights Commission, 2014). Disparities in the areas of employment and social inclusion emerge most noticeably during the transition from school to work, with effects that persist throughout adult life. Barriers to meaningful employment include a lack of choice and rigidity within disability policy, poor school to work transitions, inadequate support for people with intellectual disability outside the family and the need for better work preparation models (Enhancing Quality, 2015).

1.2 | Intergenerational mentoring

International research reveals that mentors can have important influences on lifelong outcomes (Beier, Rosenfeld, Spitalny, Zansky, & Bontempo, 2000). Intergenerational mentor programmes have provided opportunities for different generations to better understand each other and build close relationships and broader networks (MacCallum et al., 2010). Mentoring relationships during adolescence are positively associated with educational outcomes, employment and psychological well-being (DuBois & Silverthorn, 2005). Yet, few programmes have been developed for special populations of young people, and research on mentoring young people with disabilities is limited (McDonald, Balcazar & Keys, 2005). In the Australian context, little is known about the effectiveness of formal mentoring or how mentoring works in different contexts (Cumming-Potvin & MacCallum, 2010).

1.3 | Men's sheds and mentoring

Men's Sheds offer community spaces where activities, such as wood-work projects, are underpinned by social interactions. Some 140 Men's Sheds in Australia currently use vocational activities in formal and informal mentoring of youth (Cordier et al., 2016) and have a number of advantages over traditional mentoring environments. First, they are the fastest growing grassroots organization in Australia and are available in most geographical areas. Second, sheds offer mentors who have the time and life experience to support mentees. Third, there is motivation to be a mentor, insofar as older male mentors report the satisfaction of passing on their knowledge and experience (Wilson, Cordier, & Wilson-Whatley, 2013). Fourth, Men's Sheds offer a unique, naturalistic and activity-based mentoring context for developing work-related skills. Finally, with the right support, Men's Sheds and their members are very willing to mentor people with intellectual disability (Wilson et al., 2015).

1.4 | Aims and objectives

This study implemented an intergenerational mentoring intervention for youth with intellectual disability and had five objectives:

1. Modify a mentor training programme developed in conjunction with the Australian Youth Mentoring Network for use with youth with intellectual disability;
2. Test the feasibility of the intellectual disability-appropriate innovative intergenerational mentoring programme at Men's Sheds and identify what works, for whom and in what context;
3. Evaluate the utility of a suite of planned outcome measures for mentees and mentors;
4. Evaluate the feasibility of mentors supporting mentees in a volunteer role; and
5. Explore mentees' and mentors' perceptions of the appropriateness of the programme.

To meet the aims of the feasibility study and best determine what worked, for whom it worked and in what context it worked, the present authors adopted an approach to analysing social interventions described as Realistic Evaluation (Pawson & Tilley, 1997). That is, this approach gives an insight into the factors that cause change in social programmes by unravelling the important contextual outcomes from a social intervention rather than relying solely on causative outcomes to determine an intervention's effects. When using this approach, clear aims, procedures and prevailing theories about the social intervention are mapped beforehand, with analysis of data framed by enabling and constraining mechanisms driving the development of emerging and core contextual outcomes. Our prevailing theories were as follows: (i) the transition to adulthood presents many challenges and offers an ideal time for focussed interventions; (ii) Men's Sheds offer a fixed and local space where skills, social relationships and community networks can develop; (iii) intergenerational mentoring offers a range of lifelong benefits to mentees; (iv) older mentors can derive benefits from intergenerational mentoring; and (v) mentoring within a Men's Shed offers a consistent context that enables the development of vocational skills, strong relationships and networks.

2 | METHOD

2.1 | The mentoring intervention

Drawing on an approach to supported participation called *Active Mentoring* (Wilson, Stancliffe, Bigby, Balandin, & Craig, 2010), older male mentors from the Men's Sheds were provided with disability awareness training in one classroom-based session using videos to learn active support techniques. The mentoring programme was not intended to replace any other support service for the mentees, rather to add a new socially inclusive dimension to their life. The 10-week intervention was implemented during a 2015 school term at two Men's Sheds in metropolitan Perth, Western Australia (WA). The mentees ($n = 5$) were each individually paired with two mentors at one of the two Men's Shed on different days. Mentors worked with

their mentee on small construction projects such as bread boards and children's toys. Equipment used included hand tools, hand-held power tools and, in some instances, industrial-scale woodworking machinery. During the two-hour weekly sessions, the mentors supported mentees in their social interactions, adapted existing vocational activities and taught new vocational skills. All mentors were supported with transport to and from the shed by either a family member, researcher or paid caregiver except for one mentee who had existing travel skills and a pre-existing bus route stopped near the Men's Shed. Although most Men's Shed's in Perth are accessible by a public transport route, the routes to and from schools were quite complex, most mentees lacked travel skills and the project budget did not have the capacity to teach these skills to mentees.

2.2 | Participants

2.2.1 | Mentees

Clinical staff at Therapy Focus, a not-for-profit provider of disability services to people with disabilities in Perth, Western Australia assisted with recruitment of the mentees. Therapy Focus therapists emailed study information to families of young people who were receiving services from Therapy Focus and who met the selection criteria; that is, having an intellectual disability, learning disability, or being on the autism spectrum; current Therapy Focus service recipients; male; and in the senior years of high school (Years 10–12). The researchers contacted the potential participants and their families to further discuss the mentoring programme and obtain informed consent/assent. From a list of 13 potential participants, five young people agreed to participate in the programme. Some potential participants were unable to take part in the study because the mentoring programme was scheduled on the same day they attended vocational work experience through school, or because they were unable to be transported from their school to the Men's Shed during school hours. The mentees' average age was 16 years ($SD = 1.0$, range 15–17 years). One parent reported autism as her son's primary diagnosis.

2.2.2 | Mentors

The WA Men's Shed Association assisted with identifying two Men's Sheds from Perth that were interested in the research project. A total of 12 mentors from the two sheds were recruited (two from one Shed and 10 from the other), with an average age of 69.5 years ($SD = 8.53$, range 53–81 years).

2.3 | Ethics approval and consent

Approval was from the Human Research Ethics Committees at Curtin and Murdoch Universities. Written informed consent was obtained from mentors, mentees and their parents. Verbal consent to audio record interviews was obtained prior to using a digital voice recorder for individual interviews.

2.4 | Data collection

Data were collected from multiple sources: (i) pre- and post-intervention outcome measures, (ii) descriptive data on mentees' functional skills and (iii) end-of-project individual interviews with mentees and mentors.

2.4.1 | Instruments

The present authors deliberately included an extensive list of screening and outcome measures for the mentees for two reasons. First, given that participants had a mild–moderate intellectual disability, including difficulties in communication, the present authors wanted to test the feasibility of using the measures with the target population. Second, given the exploratory nature of the study, the present authors wanted to make sure that the present authors captured all functional (including employment-related skills), social and psychological domains that may be impacted by the mentoring programme. Therefore, the present authors explored the feasibility of measuring a range of outcomes including depression and anxiety, loneliness, quality of life, adaptive behaviour, community integration, self-efficacy and self-determination for mentees to explore which outcome measures were likely to provide valid and reliable data for a future full intervention. The present authors also explored the use of measures of generativity, depression and quality of life for mentors. Information about the purpose, administration duration and psychometric properties of the outcome measures used in this feasibility study is summarized in Table 1.

2.4.2 | Individual interviews

Interviews with mentees and mentors were conducted at the end of the 10-week mentoring programme to investigate their contextual perceptions of the intervention. Each interview lasted between 30 and 60 min using a semi-structured interview schedule and was digitally recorded and transcribed verbatim. Mentors were interviewed at their respective Men's Shed in a quiet and private location or by telephone, and mentees were interviewed at their respective homes in person. The mentors were all individually interviewed, and mentees were interviewed in the presence of one parent; in all cases, these were the mentees' mothers. Mentee interviews were conducted by SV who had no previous contact with the mentees. Likewise, TM and MC conducted individual mentor interviews with the mentors at the Sheds' where they had no previous direct contact.

In response to interview questions, the mentors gave their opinions of the mentoring programme including the appropriateness of the programme length (9–10 weeks); duration of the weekly sessions (2 hr); and the selected day and timing of the weekly sessions. Mentors provided information regarding how they felt about having more than one mentor assigned to each mentee; how they allocated their time to the mentees each week; and whether or not mentees had opportunities to interact with other Men's Shed members during structured activities or on tea breaks. They shared their opinions on the adequacy of the mentor training materials and preparation prior to the programme; support

TABLE 1 Screening and Outcome measures

Measure	Description	Psychometrics
Mentee screening measures		
Mini Psychiatric Assessment Schedule for Adults with Developmental Disability Checklist (Mini PAS-ADD Checklist) (Moss et al., 1998)	Proxy assessment of psychiatric symptoms in people with intellectual disability, including checklist of 17 life events (including job loss and retirement) experienced in the last two years. Screens for the following psychiatric disorders: psychosis, expansive mood (hypomania), autism, depression, unspecified disorder (including dementia), anxiety disorders, obsessive compulsive disorder. The Mini PAS-ADD is an informant-rated scale containing 29 items.	<ul style="list-style-type: none"> • Internal consistency of total score $\alpha = 0.87$; Test-retest: $r = 0.79$; Inter-rater reliability, Kappa = 0.42 • Good agreement on case identification (83%) • Validity in relation to clinical opinion was also satisfactory, case detection rising with clinically judged severity of disorder
Glasgow Depression and Anxiety Scales for people with Learning Disability (GDS-LD) (Cuthill, Espie, & Cooper, 2003)	Developed for individuals with intellectual disability and assesses depression and anxiety; contains 20-items with self-report and caregiver versions available.	<ul style="list-style-type: none"> • Internal consistency, Cronbach's $\alpha = 0.90$; Test-retest reliability, $r = 0.97$; correlated with the Beck Depression Inventory - II ($r = 0.88$) • Cut - off score of 13 yielded 96% sensitivity and 90% specificity • The Carer Supplement is reliable, $\alpha = 0.88$, $r = 0.98$
Inventory for Client and Agency Planning (ICAP) (Bruininks, Hill, Weatherman, & Woodcock, 1986)	Assesses adaptive and maladaptive behaviours and determines the type and amount of special assistance needed. Includes diagnostic and health status, functional limitations, adaptive and problem behaviour, residential placement, daytime programme support services and social/leisure activities. An informant-rated measure that takes 20 min to complete.	<ul style="list-style-type: none"> • Good validity and reliability with a test-retest reliability of 0.87 to 0.98 • Inter-rater reliability of 0.83 to 0.94 (Bruininks et al., 1986)
Mentee outcome measures		
Independent Living Skills – A checklist for young people in care (Family & Community Services, 2015)	Developed for young people in care to identify appropriate independent living skills prior to leaving care. Includes eight sections: money; housing; education and training; employment; health and well-being; daily living skills; personal and social development; and legal rights and responsibilities. Contains 129 items self-reported or care completed.	<ul style="list-style-type: none"> • Checklist - not validated.
Community Integration Questionnaire (CIQ) (Willer, Rosenthal, Kreutzer, Gordon, & Rempel, 1993):	Developed to assess if people with traumatic brain injury can perform common life roles. Has 15 self-reported items in three subscales: home integration, social integration and productive activity.	<ul style="list-style-type: none"> • Mixed reliability reported; based on (Pearson) correlations reported in the earliest study, the inter-rater reliability of the CIQ appears in the "acceptable" range. Kappas = .42 (shopping) to .94 (school)
AIR Self-Determination Scale (Wolman, Campeau, Dubois, Mithaug, & Stolarski, 1994):	The AIR Self-Determination Scale measures change in self-determination capacity; including ability, knowledge and perceptions/opportunity, and opportunity at school and at home. It is a self-report containing 18 - items.	<ul style="list-style-type: none"> • Internal consistency $\alpha = 0.95$ • Good test - retest reliability ($r = 0.74$). (Lee et al., 2012; Wehmeyer, Palmer, Shogren, Williams-Diehm, & Soukup, 2013)
New General Self-Efficacy Scale (Chen, Gully, & Eden, 2001):	Measures self-efficacy defined in terms of overall ability or confidence to perform successfully in a variety of achievement situations, or how confident one is that she or he can perform effectively across different tasks and situations. It is an 8-item self-report scale.	<ul style="list-style-type: none"> • Internal consistency, $\alpha = 0.86$; Test-retest reliability, $r = 0.67$ • Content validity: when compared to general Self-Efficacy Scale (SGSE), the NGSE items are substantially more consistent with the construct of general self-efficacy (Sherer et al., 1982).
Career Development Inventory (CDI) Short Form (Patton, Spooner-Lane, & Creed, 2005):	Assesses career maturity: planning, exploration, knowledge of the world of work and career decision-making skills. The self-report short forms contain 33 items.	<ul style="list-style-type: none"> • Internal consistency of all subscales except the career exploration are greater than 0.80.
Career Futures Inventory Revised (Rottinghaus, Buelow, Matyja, & Schneider, 2012):	The Career Futures Inventory Revised assesses self-awareness, control and self-efficacy for managing career transitions; and measures of relational components. The self-report measure has 28 items.	<ul style="list-style-type: none"> • Internal consistency, $\alpha = 0.75 - 0.88$. • Test-retest reliability, $r = 0.67$

(Continues)

TABLE 1 (Continued)

Measure	Description	Psychometrics
Comprehensive Quality of Life	Measures quality of life (QOL) for young people with intellectual disability on two axes: objective QOL	<ul style="list-style-type: none"> Internal reliability ranges between .5 and .8.
Scale Intellectual Disability 5th edition (ComQol-I5) (Cummins, 1997):	(OQOL) and subjective QOL (SQOL); with 7 domains under each axis: material well-being, health, productivity, intimacy, safety, community and emotional well-being. The ComQol-I5 is a combination of self-report and carer report and takes 45 min to administer.	<ul style="list-style-type: none"> Strong content validity
Modified Worker Loneliness Questionnaire (MWLQ) (Chadsey-Rusch, Destefano, O'Reilly, Gonzales, & Collet-Klingenberg, 1992):	The MWLQ allows individuals with intellectual disability to express their views on loneliness. The MWLQ evaluates the person with intellectual disability to report on concerns about not having friends and people to talk to, and receiving social support from others. The self-report measure has 21 items.	<ul style="list-style-type: none"> Internal consistency, Cronbach's $\alpha = 0.65$ for aloneness items, 0.80 for social dissatisfaction, and 0.69 for interest and leisure Test-retest reliability is satisfactory, for both adults with mild intellectual disability ($r = 0.76$) and for those with moderate intellectual disability ($r = 0.89$) Inter-rater reliability ranged from 0.85 to 0.91
Becker Work Adjustment Profile (WAP-2) (Becker, 2005).	Developed to evaluate and plan for young adults transitioning from school to work. Explores skills in four work-related areas: Work habits/attitudes, interpersonal relations, cognitive skills and work performance. Seven additional questions were added by the researchers: (i) navigating work environment; (ii) self-awareness; (iii) multistep tasks; (iv) repetitive tasks; (v) negotiate; (vi) adaptive technology; (vii) mastery of skills.	<ul style="list-style-type: none"> Internal consistency (total score BWA) Cronbach's alpha: .87-.91 Test-retest reliability (total score BWA): .89 - .93 Inter-rater agreement: .82-87 Good construct and criterion validity
Mentor outcome measures		
Beck Depression Inventory (BDI) (Beck, Steer, & Brown, 1996; Osman et al., 1997):	One of the most commonly used measures of severity of depression symptoms. The self-report depression questionnaire has 21 items.	<ul style="list-style-type: none"> Internal consistency of the total score, $\alpha = 0.90$; reliability indices for the three factor scales were acceptable: Negative Attitude, $\alpha = .84$, Performance Difficulty, $\alpha = .77$, and Somatic Elements, $\alpha = .68$.
UCLA Loneliness Scale-3 (Russell, 1996)	The most frequently used measurement of loneliness. It assesses subjective feelings of loneliness or social isolation. It is a 20-item self-report measure.	<ul style="list-style-type: none"> Internal consistency, $\alpha = 0.89-0.94$; test-retest reliability, $r = 0.73$ Construct validity was supported by significant relations with measures of the adequacy of the individual's interpersonal relationships, and by correlations between loneliness and measures of health and well-being
Loyola Generativity Scale (McAdams, Aubin, & Logan, 1993):	The Loyola Generativity Scale assesses passing on knowledge to the next generation; making significant contributions for the betterment of one's community; doing things that will have an enduring legacy; being creative and productive; caring for and taking responsibility for other people. It is a 20-item self-report measure.	<ul style="list-style-type: none"> Internal consistency, $\alpha = 0.84$ Test-retest reliability ($r = 0.7$ over 3-week interval)
WHOQOL-BREF (Skevington, Lotfy, & O'Connell, 2004)	It is a 26 item self-report measure. It assesses the individual's perceptions in the context of their culture and value systems, and their personal goals, standards and concerns. It allows assessment of four domains; (i) physical health; (ii) psychological; (iii) social relationships; and (iv) environment.	<ul style="list-style-type: none"> Internal consistency for total sample was acceptable (Cronbach's $\alpha > 0.7$) for three out of the four domains for physical health (0.82), psychological (0.81), and environment (0.80), but marginal for the social relationships domain (0.68). Test-retest reliability was generally high ranging from 0.56 to 0.84 for individual items over an interval from 2-8 weeks. The measures domain scores have been shown to correlate at around 0.9 with the WHOQOL-100 domain scores, which has itself demonstrated criterion validity.

provided to them and the mentees by the research team; the level of commitment required by mentors; and whether they would consider mentoring young people with ID again. The mentors also described their personal interactions with the mentees; challenges experienced and how they were managed; and if and how their expectations of the mentees changed over the course of the programme.

Interviews with mentees focussed on what they liked most and least about the mentoring programme; what they found easiest and hardest; how they got on with their mentors and the other young people in the programme; and if they would participate in a mentoring programme again, and why. Because some mentees had challenges with verbal communication, the interviewer (SV) used a range of strategies to elicit their responses to the interview questions. These included framing and re-framing questions; using verbal prompts to encourage the mentee to further explain responses; using the finished product made by the mentee at the Men's Shed as the focus of the discussion; including the mentee's caregiver in the discussion to help elicit responses; and allowing the mentee to draw their responses, where appropriate.

2.5 | Qualitative data analysis and trustworthiness

The primary use of qualitative data meant that it was critical to address issues of trustworthiness to illustrate how our intervention could be transferred to other settings and contexts (Krefting, 1991). Transferability was ensured through purposive sampling of a very specific group of mentees in their final years of high school and mentors who were older members of two Men's Sheds who provided detailed insights into the intervention, the participants and the context of the mentoring programme. Credibility was enhanced through the use of multiple data sources and the use of interviewers not known to the participants in order to elicit candid responses. Dependability was strengthened through the creation of a clear audit trail of the qualitative analysis, independently by NW, and then together with JM until consensus was reached. Each verbatim transcript was read several times with the text analysed using both inductive and deductive reasoning to enable the formation of codes. From there and through discussion with the whole research team, the codes evolved into a series of enabling and constraining mechanisms that were based on their common connection as either working for (enabling) or not working for (constraining) participants. A series of emerging outcomes and then main outcomes were then generated through discussion by the whole of research team. Finally, confirmability was determined through the processes of discussing, refining and final agreement on all outcomes by a research team from different disciplines: nursing, social science, occupational therapy, education and psychology.

3 | RESULTS

3.1 | Outcome measures

Inferential statistical analysis of pre- to post-data was not appropriate because of the small sample size and missing data for most outcome

measures. The extent of and reasons for missing data for each outcome measure are detailed in Table 2. Notwithstanding these limitations, a key purpose of using these measures was linked to assessing their feasibility. As shown in Table 2, this outcome was achieved, and the present authors now have a much clearer idea of which measures are feasible, and which are not, for a future full intervention study.

3.2 | Mentor and Mentee Interviews

The present authors identified a number of clear enabling and constraining mechanisms that impacted on programme outcomes. To summarize, the Men's Shed mentoring intervention provided an "opportunity" for both mentors and mentees:

... we [the mentors at the shed] are making the opportunity ... the opportunity to make mistakes, the opportunity to learn from mistakes, and the opportunity to at least express what he [mentee] thinks ... it's all to do with confidence ... and success breeds success ... it's part of our [shed's] ... aims and so forth; [that] we will help young people [Mentor 8].

Table 3 illustrates the core outcomes that highlight: self-reported positive benefits, increased awareness of disability and an appropriate environmental context; but with the need for future greater emphasis on planning the mentoring programme, support and training for mentors, and fostering opportunities for relationship development over a longer programme.

3.2.1 | Enabling mechanisms

Mentoring programme enables positive self-reported personal and mutual benefits for both mentors and mentees

Both mentors and mentees stated that they benefited from the programme in individual and shared ways. All mentees reported that they enjoyed the programme. For example, Mentee 5 stated that "it was a bit perfect ... It makes me feel like that I am going to hammer nails and I say so ... that it was fun," and Mentee 2 stated "yeah, I did enjoy it ... it was really good." Mentees also felt proud of their achievements during the programme; such as Mentee 1 who stated that "you've done it by yourself, but with someone's help... so you have achieved something." Mentee 2 stated "we were building stuff and learning how to build stuff ... so that's the two things I've never done ... So that was pretty cool."

Mentors also talked about their sense of achievement through participating in the programme (Mentor 6): "just the achievement that we had, and you know, the feedback that we had from the [mentees] ... I felt that we really achieved something with [Mentee 2]." Mentor 3 said that he "loved it, I loved every bit of it," but also referred to the educational aspect of participation: "I found it to be educational for myself as well as everybody else around me and it's something that I've been wanting to do for quite some time." Mentor 7 "enjoyed the experience of endeavouring to encourage them [mentees] to do something

TABLE 2 Summary of screening and outcome measures

Instrument and authors	Completion Rate	Administration duration and burden to participant. Adding valuable information in relation to intervention aims; useability of measure
Youth with intellectual disability: Mentees' Screening Measures		
PAS-ADD Checklist***	Completed for all YP.	Time-consuming. Produces summary scores for depressive disorder; anxiety disorder; Expansive mood disorder; Obsessive compulsive disorder; Psychosis; Unspecified disorder (mostly dementia and other organic problems in our field-trial sample); and Autism spectrum disorder
GDS-LD**	Completed for all YP.	Useful for carer, easy to understand for parents/carers
ICAP***	Completed for all YP.	Lengthy, 30-40 min; best to do with primary carer, not paid carer – historic information, better at estimating ability, follows f=developmental sequences, scoring is time-consuming – generates helpful information
Youth with intellectual disability: Mentees' Pre- to Post-Outcome Measures		
Community Integration questionnaire**	Completed for all YP	Quick and easy, gives quick overview
Independent Life Skills Inventory**	Completed for all YP	Very lengthy with 14 domains. Don't think we needed this much detailed "profile" of YPs. Not difficult as many questions were answered as "no." Parents have found this useful as it prompted them to think what life skills they need to teach to their children.
AIR Self-Determination Scale*	Only one YP completed.	Not easy for YPs to understand as questions were ambiguous – asking about their "goals." For those completed, it was not too hard. The information about school context might be useful because it gave us an understanding of what some high functioning YPs don't get at school.
NGSE*	Only one YP completed.	Not useful for the majority of the population we worked with.
Career development inventory*	Only one YP completed.	It was difficult to answer some questions as the YP were just starting to think about their future.
Career Futures Inventory – Revised*	Only one YP completed.	It was difficult to answer some questions as the YP were just starting to think about their future.
CQoLID**	4 of 5 YP completed.	Useful; some questions were difficult, so these questions had to be rephrased but overall good tool to obtain YPs perceptions.
Modified Worker Loneliness Questionnaire*	2 of 5 YP completed.	It was not difficult, although for some YPs, questions had to be rephrased. It highlighted that this population of YPs feel lonely.
Becker Work Adjustment Profile****	Completed for all YP.	This is very useful measure to determine strengths in vocational skills and monitor change over time. The administrator needs to be made familiar with measure prior to conducting baseline assessment.
Men's Shed members (mentors): Pre- to Post-Outcome Measures		
Beck Depression Inventory -11*	8 of 24 completed	Some mentors expressed discomfort in completing the measure
UCLA Loneliness Scale (Version 3)*	7 of 24 completed	Some mentors expressed discomfort in completing the measure
The Loyola Generativity Scale (LGS)*	8 of 24 completed	This is a useful measure for highlighting the strengths of mentoring.
WHQOL*	11 of 24 completed	Some mentors expressed discomfort in completing the measure

*Self-report; **Proxy parent report; ***Researcher administered; ****Mentor reported.

which they'd not done before ... it's rewarding to participate and give a little bit back." Mentor 2 also talked about giving back to younger generations: "because if you can sense you are getting somewhere by spending the time and it's something I enjoy doing, as far as passing on information and experience."

Presented with the vastly divergent expressive communication skills and behavioural patterns of mentees, the mentors quickly became aware of individual differences and how this equated to the need to support the mentees in different ways. Some mentors were exposed to people with autistic behaviour patterns for the first time: "[the mentee's] behaviour really did surprise me ... it was very strange ... I've never seen that sort of behaviour before." Despite these new

challenges, Mentor 7, nicely contextualized the different need for support with the overall benefit to mentees, no matter how small the achievement may seem:

Perhaps simply having participated, it's enlightened me as to working with umm persons with disabilities ... but also just seeing what the men at the Men's Shed can do and are capable of doing by way of facilitating the opportunity for persons like [the mentees] to engage in an activity that they've probably not been exposed to before, and you find that they get some, I don't know if enjoyment is the right word but they can do things.

TABLE 3 Contextual outcomes from intervention

CONTEXT	MECHANISMS	EMERGING OUTCOMES	OUTCOMES
To increase the chances of and capacity for young adults with intellectual disability to develop sustainable community networks through an intergenerational Men's Shed mentoring programme	<p>Mentees all enjoyed the programme and experienced personal growth</p> <p>Mentors felt a personal reward and sense of achievement through programme participation</p> <p>Mentees saw mentors as fun, nurturing and accepting of them as an individual</p> <p>Mentors enjoyed making a contribution to the lives of others</p> <p>Despite initial apprehension, over time mentees experienced a boost to their confidence</p> <p>Through targeted support, each mentee developed individual skills</p> <p>Through exposure to mentees, mentors had an increased awareness of diversity,</p> <p>Mentors started to understand that different disabilities present different challenges</p> <p>Mentors have the skills to work with and support mentees</p> <p>Mentors adapted to meet mentees' individual needs</p> <p>Mentors matched activity preparation and support to mentees' strengths</p> <p>Mentors provided mentees with tailored support and structure</p> <p>Over time, there was an improvement in mentees capacity to fit in to shed environment</p> <p>The shed environment suits each mentee having more than one and rotation of mentors</p> <p>2 hr duration matched mentees attention span and mentors capacity</p> <p>Unlike school, the programme was a place to feel special and mix with others</p> <p>A longer programme – 6 months – would enable better outcomes for mentees and mentors</p> <p>Mentors had mixed perceptions of mentee achievement in such a short programme</p> <p>Health and well-being outcome measures for mentors viewed as intrusive and irrelevant</p> <p>More time is needed to plan future programmes together – mentors, mentees, families, researchers</p> <p>Mentors felt a disconnect between the training and mentees perceived support needs</p> <p>Ongoing mentor support needs to match mentors' expectations of support from researchers</p> <p>Travel skill deficits of mentees places an increased burden on caregivers outside the shed</p> <p>The absence of a fixed time for a social break limited the development of social interactions</p> <p>Mentees need mentors to initiate and support social interactions</p> <p>Without a social gathering at the start, mentors didn't feel connected with mentees' families</p> <p>In the absence of verbal ways to communicate, mentors felt a limited connection with mentees</p>	<p>Mutual personal growth, engagement and benefit</p> <p>Increased awareness of diversity and individual needs</p> <p>Flexible activities and adaptable support</p> <p>An appropriate activity context</p> <p>Outcomes extendable with a longer programme</p> <p>Some aspects of research difficult</p> <p>Better planning around identified needs required</p> <p>More targeted support for social interactions important</p>	<p>Mentoring programme enables positive self-reported personal and mutual benefits for both mentors and mentees</p> <p>Mentoring programme offers appropriate activity context to enhance mentee skills</p> <p>A longer programme needed for better outcomes and more meaningful relationships</p> <p>Determining mentor benefit requires more support</p> <p>Enhanced programme planning and support are needed to fully realize the potential for network development</p>

NB: *italics* = mechanism; **bold italics** = outcome.

Mentoring programme offers appropriate activity context to enhance mentee skills

Although supporting some of the mentees was challenging, the mentors demonstrated the capacity and skills to adapt and provide support to each individual. For example, even though one mentee had a limited attention span, Mentor 5 adapted his support accordingly: "I didn't put pressure on him ... when he walked off I let him sit down and dither a little bit and let him have a rest." Another example involved Mentor 4 adapting to two mentees' aversion to dust and dirt on their hands and clothes: "I did notice though they have both got an aversion to dirt ... and dust ... he kept wiping and the simple solution is to put a pair of gloves on." Mentor 1 also mentioned having to adapt his language and support so that instructions could be understood and tasks followed through: "[we'd say] come on [mentee], you've got to hammer the nails in ... then he sort of stood there and said 'Hammer' ... so we actually put the hammer in his hand and then picked up the hand and then let him hammer that way." This more hands-on support was also described by Mentor 7: "He'd be looking away at something else not focused on what he was doing and always requiring encouragement or guidance by taking his hand and ... brushing up and down with the brush."

Situating the mentoring programme at a Men's Shed and using mentors from the Shed was conducive to positive outcomes for mentees. Mentor 1 explained:

I think he's just expanded what he's had up to now. It's allowed him to work with a number of people. It's given him the ability—you know, we've let him use the bandsaw, we've let him use the sanding machine, and you know—he did a couple of things like that... it will be very good in the future for him.

Mentees talked about how the Shed was unlike any other learning environment—including school—and how it enabled the mentees to feel special and to mix with others. Mentee 1 stated that he "felt accepted"; Mentee 3 said that "They made me feel like part of the group." Unlike school, weekly sessions at the Shed were for two hours and this amount of time and attention seemed about right to mentors, Mentor 1 stated "I think two hours is plenty ... both for the mentors and the mentees... you know, it's important for them to keep them occupied all the time." Further, the combination of 2 mentors paired to each mentee worked for the shed and for the programme, Mentor 2 stated that "having two [mentors] people meant one could stay with the mentee, and the other could run around and organise stuff." This also worked well to ensure that the right skills were available to each mentee; Mentor 4 stated that "we each had special skills and we could teach [mentees] different things and the others could have a break while we were doing something [else]."

3.2.2 | Constraining mechanisms

A longer programme needed for better outcomes and more meaningful relationships

Mentors felt that although the trial mentoring programme worked well, more meaningful relationships were not able to be fully realised.

For example, Mentor 2 stated that "I think for the mentoring to work, it has got to be over a prolonged period, just to create enough opportunity for enough things to come up and, you know, situations where relationships can develop." Mentor 7 also reflected the belief that a longer programme would result in better outcomes and skill development: "To develop those skills would require more sessions or a longer program ... if it were two terms, 20 weeks... I think that would be a better outcome on both sides."

Mentors experienced communication barriers with some mentees and perhaps had different perceptions of what the mentees got out of the programme. Mentor 1 referred to communication challenges: "[one particular mentee] was pretty good, even though he tended to wander a little bit, mind-wise but [the other mentee], being brutally honest, was hard work ... you couldn't talk to him." Mentor 4 extended this insight into how this related to the provision of support: "[One of the mentees] was sort of in a world of his own, and you had to sort of encourage him to do things... whereas the other [mentee] didn't need as much encouragement." For some mentors, these differences were not easy to work with: "the level of disability in [one particular mentee] was more difficult to deal with." For other mentors, the communication differences were linked to uncertain perceptions of what the mentee may have got out of the programme; Mentor 2 stated "I don't know what he was getting out of it, I wouldn't have a clue, but that comes into the communications side of things, and there really wasn't that much communication." This uncertainty was also reflected by Mentor 6 who discussed individual differences and how these related to skill development:

I don't think [one particular mentee] developed many skills... he may have developed a few minor skills, you know, I looked at him painting the other day... he'd retained a few of those skills, but they were very, very sort of haphazard, very basic.

Assessing mentor outcomes requires more support

Although the purpose of the mentor outcome measures was explained during the training, mentors viewed the measures as irrelevant. For example, Mentor 4 stated that they were "A bit intrusive... like what your sex life is like? And do you get depressed? You know, I think that's very intrusive." Other challenges included difficulties with completing the schedules; Mentor 5 explained: "I was fine with filling them out ... quite a few of the questions were irrelevant ... some of them I could barely answer." There was also a somewhat antagonistic response from Mentor 7 who struggled to see how the measures related to the programme: "it troubles me as to how they are referable at all to the Men's Shed mentoring project ... and on that basis I've declined to complete the forms."

Enhanced programme planning and support are needed to fully realize the potential for network development

In future, a greater emphasis on planning the programme with mentors, and mentees and their families is required; specifically, clarity around the type and frequency of support required, and creating more opportunities for social interactions between all parties. In particular, mentors felt that the programme was rushed and disorganized and

would have liked more time for shared planning and development. Mentor 7 felt that “there has to be more planning or working together at the front end ... the Men’s Shed can in combination with the carers and [the researchers].” Without this planning, Mentor 2 felt the programme was “Probably a little disorganised to start with ... we didn’t really know what to expect and when they were coming, until the last minute.” Mentor 4 also reiterated this: “well more warning, would be better... because we had less than 2 weeks to recruit and train.”

Although the training was not perceived as being inadequate, mentors wanted to feel better prepared, as stated by Mentor 5: “I’d say it wasn’t inadequate... [but] I felt I wasn’t prepared for what I was about to encounter ... [one particular mentee] was a bit outside my comfort zone.” Mentor 7 also talked about how after the initial classroom-based training that they wanted more direct support and feedback from the research team: “I would’ve thought ... [researchers] would be there to observe what’s happening and be able to make an assessment as to how the activity is going, or how the mentee is progressing in what they are doing.” While Mentor 1 stated, “the [training content] was okay”; Mentor 5 felt “It was a bit different looking at things in a video, and then encountering young guys.”

Mentors also wanted more contact with and time to get to know mentees and their families before the programme started to foster a greater connection and insight into mentee capabilities. Mentor 8 wanted to “have been able to meet with the parents ... to have lunch together, we’ll [the Shed] put on some snaggers [a BBQ] and ... make it a bit of a fun thing.” Mentor 2 reiterated the need for a longer planning phase that included interactions with families:

I think it probably needs to be set up ... quite a few weeks before they actually start, and we would need to get that briefing, to what you guys think is their potential ... and a discussion maybe with the parents as to what sort of things they do at home, and what they like doing, so we have a feeling of what they like talking about or doing.

Although some mentees had limited communication skills and topics of conversation, the lack of social interactions with other mentees and the mentors was not particularly problematic to them. Some mentors found that this really limited their capacity to feel connected to mentees. This limited communication made it difficult for the mentors to establish a connection. Mentor 2 felt “there was no real rapport... [mentee] did ask questions about TV shows and things he had been watching ... but it was a bit different from what we experience ourselves, so there was no connection there.” Mentor 1 mirrored this limited sense of connection: “there was no discussion at all here, I never heard him sort of say any more than just mentioning my name, I don’t think he could speak ... he couldn’t put a sentence together at all.”

4 | DISCUSSION

This study has shown that intergenerational mentoring interventions for youth with intellectual disability at community Men’s Sheds

are both feasible and appropriate. Although mentors and mentees reported positive feedback, a number of areas need to be refined in a full-scale pilot of the intervention.

4.1 | Mentees

Matching the mentor support to the mentee’s needs enabled all mentees to acquire a range of skills. The one-to-one approach facilitated development of rapport between the mentor and mentee that may have influenced the nature and success of the support provided during the programme. The supported participation of the mentees is likely to have enabled mutual connectedness and a sense of social inclusion for the mentees (Cordier & Wilson, 2014). Although some mentees had limited communication skills, they did not see their limited social interactions with other mentees and the mentors as problematic. However, several mentors did express concern that mentees’ limited communication and conversation made it difficult to make a social connection with mentees. This finding highlights the need for mentees to have ongoing opportunities for social and leisure activities wherein they can develop these skills. Research has shown that people with intellectual disability find it difficult to forge friendships, understand and develop meaningful relationships, and access and engage meaningfully in their local community (Cory, Dattilo, & Williams, 2006).

Most mentees were unable to use public transport independently, and the available public transport options were too complex to be viable; the present authors know that limited access to public transportation impacts on community and employment participation (Van Asselt, Buchanan, & Peterson, 2015). A transport training package, should funding permit, could be included in a future programme to counter this barrier.

4.2 | Mentors, training and support

The literature on youth mentoring describes the physical and mental health and well-being outcomes of the mentees (DuBois & Silverthorn, 2005), with few studies reporting on the benefits to the mentors. Positive psychological health benefits have been reported for older adults mentoring at-risk youth (Larkin, Sadler, & Mahler, 2005). The mentors in our study focussed on maximizing the mentees’ benefits of participating in the Men’s Shed activities and were less concerned with any impact that mentoring had on their own health and well-being. This finding is consistent with previous research with older volunteers in community organizations (e.g., Morrow-Howell, Hong, & Tang, 2009), wherein the underlying primary aim of volunteering is to serve others. A challenge in our study was communicating with the mentors the importance of measuring the benefits of the mentoring programme to them, and doing so in a way that was not perceived to be intrusive.

The mentors in this feasibility study varied widely in their prior knowledge or experience in working with people with a disability; subsequently, some mentors felt limited in their abilities and wanted the researchers to provide more direct support, while the mentees

were completing their respective activities, or to assess the mentees' progress in developing the work skills. One important characteristic of mentoring is building a trusting relationship and sharing knowledge (Beier et al., 2000). At the conclusion of the trial, the mentors reported an increased awareness of diversity and the individual needs of people with disability, but more external support in the early stages of the programme would have better equipped them to work with the youth with intellectual disability.

Although the mentors reported that the two-hour training workshop was adequate at the time, after they met the young people they realized that they needed more specific preparation to support the individual young people in the programme. The videos and discussion included general information about mentoring, as well as more specific modelling of ways to support people with intellectual disability. The training resources in future programmes need to be more tailored to include strategies to adapt to the communication, intellectual capabilities and support needs of young people with intellectual disability, so that mentors feel more comfortable and confident earlier in the programme. Meeting with the young people and families prior to the training workshop may also assist mentors to focus on and develop the knowledge and skills needed for their role.

4.3 | Programme logistics

Organizing a programme-starting time which suited the mentees, mentors and the Sheds took considerable negotiation. Although the Sheds were very flexible, their weekday opening hours coincided with usual school hours. Carers had to individually negotiate with the respective schools for their sons to leave early in order to attend the Men's Sheds. One of the Men's Sheds operated on weekends and this accommodated the needs of those mentees who would otherwise have been unable to attend the programme. Another challenge was the geographical locations of the two Sheds with respect to the mentees' schools; especially where public transport routes and connections were either absent or very complex. In these cases, the research team provided partial transport support in partnership with families.

4.4 | Utility of outcome measures

The usability and benefit of using the Becker WAP-2 (100% completion –see Table 2) and the CIQ (100% completion) and to a lesser extent the CQoLID (80% completion) were confirmed by the proxy parent or mentor reporters. Although the ICAP provided useful information about the mentee's life skills, it was reported to be too lengthy. An unexpected outcome was that parents reported that completing the ICAP prompted them to think what life skills they should be teaching their son.

The self-report outcome measures for the mentees were chosen because of their suitability for people with a mild intellectual disability. Except for the loneliness measure (MWLQ), only one mentee was able to complete the self-report measures (see Table 2) and the information provided was considered to have less relevance to young people still at school because the questions on the measures related to future plans.

Even though the present authors aimed to recruit young people with mild intellectual disability, recruitment was difficult and resulted in the inclusion of four participants with a moderate intellectual disability who were unable to complete the measures, even with assistance. Although these participants and their carers reported they benefitted from the programme, the limited availability of valid and reliable self-report measures for people with intellectual disability is problematic. In turn, this situation highlights the need to include both self-report and proxy-report outcome measures in a future pilot, to ensure that at least some outcome data are available for mentees who are unable to self-report. Difficulties in collecting meaningful self-report and objective data from people with intellectual disability and the challenges faced by proxies to reliably report on subjective outcomes have previously been discussed (Stancliffe, Wilson, Bigby, Balandin, & Craig, 2014). Based on the two MWLQs that were completed in our study, self-reported loneliness in young people with an intellectual disability was identified as a concern. Although some questions needed to be rephrased, the measure had acceptable usability and it may be feasible and appropriate for use a future pilot of the intervention.

A valuable lesson learned from using the outcome measures with the mentors was the importance of taking extra time to carefully explain their purpose to improve completion rates. Feedback from some of the mentors was that they found some of the questions very personal, including questions from the WHO QOL-BREF. This might reflect the demographics of our mentors who are from an older generation where it may be regarded as inappropriate to discuss personal and sensitive issues about mental health and sexual behaviour. Therefore, the present authors speculated that the mentors could not see the importance or relevance of their own mental health or quality of life in relation to their role as being a mentor. Upon reflection, the two scales that are likely most useful in future studies are the Loyola Generativity Scale and the WHO QOL-BREF, because it is reasonable to expect that mentoring may positively influence these factors.

4.5 | Implications for an effectiveness pilot of the intervention

The present authors have identified from this feasibility study a number of useful insights to inform a future adequately-powered effectiveness pilot of the intervention that would allow for quantitative evaluation of outcomes. The present authors have identified outcome measures that could be used for the pilot. Subject to positive findings from the pilot, a controlled trial may eventually be warranted.

The present authors also identified some enhancements to delivering the intervention that the present authors expect may improve outcomes. Most importantly, the late afternoon timing of some of the programmes precluded a social break where the mentees and mentors could informally gather. Such breaks are important, as they offer opportunities for the different generations to connect socially (Wilson et al., 2013). Further, the present authors know that such social gatherings and the conversations during them generally need to be organized and initiated by mentors, as the mentees take cues from and develop adult-like social skills during such exchanges. In addition,

the mentors wanted more structured opportunities to feel more connected to the mentees and their families through planned “meet and greet” social gatherings at the start and at timed intervals during the programme. This shows that mentors not only wanted to get to know a little about the mentees prior to the programme, but also to gain an insight into each mentee’s possible interests and potential in order to better design individualized support and activities. Mentors all felt that a longer programme would enable the gradual development of better outcomes, including the building of community networks for all involved in the programme. Finally, a future pilot would benefit from inclusion of travel skills training to enable mentees to learn to travel independently to the Men’s Shed. This enhancement is not only useful to enable consistent attendance at a longer duration programme, but also likely to be beneficial for future employment prospects.

4.6 | Limitations

There are a number of limitations to this study, the most important being the small sample size, the use of non-probability sampling, the lack of a control group, the short-term nature of the intervention, the problems with some outcome measures and the fact that all mentees came from the one disability service in Perth. Although Perth is a major Australian city not too dissimilar from other major cities and many Men’s Sheds share similar characteristics, the present authors cannot generalize these results beyond the study setting. The present authors only supported mentees for 10 weeks in one school term and, as far as the present authors are aware, no longer-term networks were established as a result of this intervention, although the present authors were told by families that one mentee planned on joining his local Men’s Shed, and another has since been accepted into a pre-apprenticeship programme for cabinet making. Future implementation should consider longer intervention and even longer-term follow up to identify any employment or social outcomes of the intervention. Nevertheless, the intervention was feasible and the mentors all felt that a programme of longer duration would enable a deeper connection and better relationships with mentees and their families.

5 | CONCLUSION

The present authors successfully ran this feasibility study of a social intervention and all participants stated that they enjoyed and benefited from the mentoring programme. Intergenerational mentoring of youth with intellectual disability holds promise as a cost-effective, community-based and inclusive option to create and build sustainable community networks. Using a Realistic Evaluation framework to analyse qualitative data has enabled us to gain a better insight into the contextual mechanisms that acted as constraints within the programme; these give us numerous tangible strategies to improve the design of a future larger-scale pilot study. Trialling various outcome measures allowed us to identify usable instruments for a future pilot. The present authors are encouraged by the older male mentors who perceived this

intervention as an opportunity to help and support others within their community. Further, Men’s Sheds are existing community spaces that, with the right approach and support, can offer inclusive and enabling environments for people with intellectual disability.

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