

HEALTH AND WELLBEING BOARD			
Report Title	Mental Health Promotion		
Contributors	Ruth Hutt	Item No.	6A
Class	Part 1	Date:	20 January 2015
Strategic Context	Mental Health has been identified as a local HWBB priority. This report provides an overview of public mental health and an update of performance of the Health and Wellbeing Strategy outcomes.		
Pathway			

1. Purpose

- 1.1 This report provides an overview of public mental health and an update on the Health and Wellbeing Strategy actions and performance.

2. Recommendation/s

- 2.1 Members of the Health and Wellbeing Board are recommended to:

- Note the contents of the report
- Consider ways in which partners could use the “Five Ways” to promote mental wellbeing
- Support the HeadStart programme and ongoing work towards the final submission
- Commit to working to reduce the gap in physical health outcomes for those with mental health problems.

3. Policy Context

- 3.1 In 2011 *No Health without Mental Health* set out a cross agency outcomes based framework for mental health. This included at its centre ‘parity of esteem’, that is to say that mental health would be regarded with the same importance as physical health. The Chief Medical Officer’s report (2014) also focused on mental health.

- 3.2 Mental Health was identified as a key area of focus for the Health and Wellbeing strategy by the Health and Wellbeing Board. A joint strategic needs assessment was completed in 2012 (this is currently being reviewed and updated). Children’s mental health has also been subject to an in depth review by the CYP Select Committee in 2014.

3.3 Mental Health has clear links to all 6 of the Sustainable Community Strategy priorities.

4. Background

4.1 Mental illness accounts for half of all illness in the under 65s, yet significant numbers of people with mental illness do not access services. For those living with mental illness, their physical health outcomes are also poor.

4.2 Whilst most of the population is aware of behaviours and interventions that will maintain and improve their physical health, there is far less awareness of the ways in which mental health and wellbeing can be maintained.

4.3 The Annual Report of the Chief Medical Officer described 3 interconnected areas for action on mental health:

- Improving promotion of good mental health across the population
- Preventing mental health problems, mental illness and suicide prevention
- Improving the quality of life, health and wellbeing of those living with and recovering from mental illness.

These are described in more detail below:

4.3 Improving Promotion of Good Mental Health across the population

4.4 Like physical health mental health can be protected and improved by a conscious focus on maintaining it. The New Economics Foundation conducted a review of all the research evidence and developed the “Five Ways to Wellbeing”, which are actions an individual can take to protect their own mental wellbeing. These are:

- Connect
- Be active
- Take Notice
- Keep Learning
- Give

More information about each is at Appendix 1 based on Southwark’s Five Ways to Wellbeing work.

4.5 Actively engaging in the five ways has been shown to improve mental wellbeing. These can be used at an individual, group, organisational or policy level. Promoting awareness of mental wellbeing and enable individuals and organisations to consider actions which promote rather than undermine good mental health is key to gaining a more mental health ‘literate’ population. In other boroughs, council services and activities have been linked to the Five Ways to promote awareness.

4.6 Preventing mental health problems, mental illness and suicide prevention

4.7 It is estimated that 50% of all mental illness starts before the age of 14, and 75% by early 20s. Certain childhood exposures are known to increase the likelihood of adult mental illness including;

- Exposure to poor parenting
- Having parents with mental illness
- Maternal stress in pregnancy
- “toxic trio” – substance misuse, mental illness and violence
- Being a “looked after child”

4.8 A review¹ of the most cost effective interventions for mental health promotion identified five ‘best buys’.

- Supporting parents and early years: parenting skills training/ pre-school education
- Supporting children and young people: health promoting schools and continuing education
- Improving workplace lives: employment/workplace
- Positive steps for mental health: lifestyle (diet, exercise, sensible drinking, social support)
- Supporting communities: environmental improvements

4.9 The estimated return on investment for a range of mental wellbeing programmes is outlined below. Schools based programmes offer particularly good value for money and are part of the “HeadStart” programme (see section 5 below).

Savings for every £1 invested in mental wellbeing programmes

Intervention	Savings (per £1 invested)
Social & emotional learning programmes in schools	£84
Suicide prevention through GP training	£44
Early intervention for psychosis	£18
Pre-school education programmes for 3-4 year olds in low income families	£17
School based interventions to reduce bullying	£14
Screening & brief interventions in primary care for alcohol misuse	£12
Work based mental health promotion (after 1 year)	£10
Early interventions for parents of children with behaviour disorder	£8
Early diagnosis & treatment of depression at work	£5
Debt advice services	£4

- 4.10 Improving the quality of life, health and wellbeing of those living with and recovering from mental illness
- 4.11 Physical health outcomes for people living with mental illness are poor. High rates of smoking in those with mental illness make a larger contribution to early mortality than suicide. Whilst historically mental illness has been treated as a lifelong illness and individuals developed dependency on services, the model of care is changing to a recovery based model, with a focus on recovering and leading a fulfilling life, including accessing employment and secure and suitable housing.
- 4.12 Targeted programmes geared towards getting people with mental illness more physically active have been very successful and have a direct effect on improving mental health as well as physical health. The local mental health provider South London and Maudsley NHS Trust (SLAM) has recently launched the Recovery College for patients to engage in learning and development activities to support their recovery.
- 4.13 In Lewisham, targeted work with SLAM to increase access to stop smoking support has been very successful. Blood borne virus screening has also been rolled out to SLAM inpatients in Lewisham due to the high prevalence of HIV, hepatitis B&C locally and the fact that many patients with mental illness are unlikely to access such screening through mainstream services, despite often being at high risk,

5. HeadStart

- 5.1 In 2013 Lewisham was approached by the Big Lottery Fund as one of twelve areas in the country to consider how best to improve resilience and well-being in young people aged 10 – 14 years through the 'Fulfilling Lives: HeadStart Programme'. In July 2014, Lewisham was informed of its success when securing £500,000 which would be used to develop universal and targeted mental and emotional well-being provision. Lewisham has the opportunity in 2015, to bid for a further £10 million from the Big Lottery Fund, to further develop this work and create 'whole-system change'.
- 5.2 Four local outcomes for HeadStart Lewisham have been developed as a response to stakeholder consultation:
- improved resilience
 - increased school attainment and integration with the community
 - improved emotional literacy
 - preventing needs escalating for those most at risk

- 5.3 Over the next twelve months a number of interventions will be implemented and tested, as part of stage two 'test and learn' phase (see appendix 2 for details).
- 5.4 Headstart offers an opportunity to broaden community awareness of mental health issues. Using some of the infrastructure developed around the programme, community awareness and social marketing opportunities exist to improve health and wellbeing more broadly across Lewisham. The connections that are developed in communities as a result of the proposals should build on local assets and make use of these to build resilience across communities.

6. Performance

- 6.1 The health and wellbeing performance dashboard has 5 mental health indicators. Performance against these is outlined below.

	Latest available Year	Previous	Latest Available Period (Lewisham)	London	England	England Benchmark	Direction from Previous Period	Data Source
Priority Objective 6: Improving mental health and wellbeing								
Under 75 mortality rates for those with serious mental illness (DSR per 100,000 pop)	2011/12	845.7	839.8	-	1,274.8	sig low	↓	NHSOF 1.5
Prevalence of SMI (%)	2012/13	1.2	1.2	1.0	0.8	-	→	QOF
Prevalence of Dementia (%)	2012/13	0.3	0.3	0.4	0.6	-	→	QOF
Prevalence of Depression (%)	2012/13	10.4	5.3	4.4	5.8	-	↓	QOF
Suicide rates (DSR per 100,000 pop)	2010-12	7.1	7.5	7.5	8.5	similar	↑	PHOF 4.10
Self-reported well-being - people with a low happiness score	2012/13	15.0	10.2	10.3	10.4	similar	↓	PHOF 2.23iii

- 6.2 The suicide rate in Lewisham appears to have risen slightly over the last few years. Lewisham has the 8th highest suicide rate in London, and over the period 2011-2013 69 suicides were recorded. A further review of suicides will be carried out in 2015 building on the work of the Clinical Quality Review Group of the SLAM commissioning CCGs.
- 6.3 There appears to have been a decrease in depression prevalence reported by GPs. This is observed across England, but it seems unlikely that it is real and is more likely to be a statistical artefact or change in reporting.
- 6.4 There were 3 main objectives detailed in the Health and Wellbeing Action Plan in relation to mental health. These are:
- Ensuring those in BME groups and at high risk of anxiety and depression get access to IAPT services
 - Improve recognition of poor mental health by front line workers (statutory and voluntary sector) and equip them to support individuals experiencing mental illness.
 - Improve the physical health of those with poor mental health.

- 6.5 Whilst IAPT services are reaching those in BME groups they are not proportionally represented in the service. Targeted work with these groups is essential to continue to improve access and uptake which the service has been doing and will continue to do.
- 6.6 Mental health awareness training and Mental Health First Aid courses have been delivered to those working in public sector and community and voluntary sector organisations. These help equip front line workers with skills to support people experiencing mental illness or who need help to access services.
- 6.7 Given the high prevalence of smoking in those with mental health problems offering patients at SLAM access to stop smoking services has been a key priority of the Stop Smoking service. This has been very successful and has had the support of SLAM staff. The trust became a non-smoking trust in October 2014. The Trust is routinely assessing smoking status and patients are automatically offered smoking cessation interventions.

7. Financial implications

- 7.1 There is currently a very small mental health promotion budget which is held by public health. Some of this has been proposed as a saving as part of the Lewisham Futures Board proposals. The total budget for mental health promotion is £98,000 in 2014/15. The proposals to Lewisham Futures Board identifies £59,200 of savings from this budget. This includes a reduction in the training budget, stopping payments for clinical support to Sydenham Gardens and the decommissioning of an Arts access programme. The remainder is spent on mental health awareness training and match funding for Big Lottery Headstart proposal.
- 7.2 It is proposed that going forward this resource is directed to support two main aims:
- improving physical health outcomes for those with mental health problems
 - improving community and individual mental health awareness, self help and access to services particularly in BME groups

8. Legal implications

- 8.1 Members of the Board are reminded that under Section 195 Health and Social Care Act 2012, health and wellbeing boards are under a duty to encourage integrated working between the persons who arrange for health and social care services in the area.

9. Crime and Disorder Implications

None.

10. Equalities Implications

10.1 Prevalence of mental illness is higher in many groups with protected characteristics. Programmes to promote wellbeing and support people with mental health problems should be monitored to ensure that they are reaching these populations.

11. Environmental Implications

11.1 None

12. Conclusion

12.1 Mental health remains a priority for Lewisham. The focus of the Health and Well Being board should be on ensuring that all partners work together to improve mental wellbeing for their staff and service users.

12.2 There should be an aspiration to close the gap in physical health outcomes in those experiencing mental illness.

Background Documents

- 1. Friedli I & Parsonage M 2010 Mental Health Promotion: Building an economic case**

http://www.chex.org.uk/media/resources/mental_health/Mental%20Health%20Promotion%20-%20Building%20an%20Economic%20Case.pdf

If you have any difficulty in opening the links above or those within the body of the report, please contact Kalyan DasGupta (kalyan.dasgupta@lewisham.gov.uk; 020 8314 8378), who will assist.

If there are any queries on this report please contact **Ruth Hutt, Consultant in Public Health**, Public Health, London Borough of Lewisham, on **020 8314 7610**, or by email at: **ruth.hutt@lewisham.gov.uk**

Appendix 1

Taken from “Five Ways to Wellbeing in Southwark”

Connect



Getting to know the people who live around you helps to give you a sense of Community. Say hello to your neighbor or ask your local shopkeeper how they are. Work together to resolve a local issue. Take your elderly neighbour's dog for a walk when she/he may be unwell. Ring up an old friend or family member you haven't heard from in a while. Rather than eating sandwiches at your desk or skipping lunch, ask a work colleague to join you for a proper break.

Take Notice



Be mindful of the moment and how you are feeling. Reflecting on your life experiences will help you appreciate what matters to you. Take some time out from your daily schedule to relax and notice the world around you. It costs nothing to get out and explore your local area, but the benefits can be priceless. A browse through the colorful stalls at Borough Market, Southwark Cathedral, and Surrey Docks farm is a great way to brighten your day. Stroll by the Thames River and enjoy the view as well as watching the street performers which is also free and fun.

Give



Helping someone else can make you feel better about yourself. Help your neighbour or friend out by lending a hand. Smile at a stranger in the street. Thank someone. Your actions will make other people feel good too. Volunteer at a local community group or charity and you will meet new people, learn new skills and gain valuable experience. You could join at Southwark Volunteer Centre.

Be Active



Keeping active makes you feel good. Find something you enjoy – cycling, swimming, dancing and just do it! Walking is a free and easy way to get moving. There are many ways to explore Southwark on foot. Join friendly walks on Burgess Park or become Friends of Southwark Parks. Visit www.southwark.gov.uk/walking

Keep Learning



Learning a new skill can make you feel good about yourself, confident and adventurous. Rediscover an old interest. Learn to play an instrument, roller skate or cook a new dish. Plant something. There are plenty of things to try in Southwark from amateur dramatics theatre groups to low cost adult learning courses. If you don't want to do a whole course, you can learn in your own time in one of Southwark's libraries. They are free to join and run lots of different activities, including book groups. For more information visit www.southwark.gov.uk/libraries

For more information and tips on how to improve your wellbeing in Southwark visit www.southwark.gov.uk/feelinggood



Appendix 2

Timescales for Stage Two of the HeadStart Lewisham Programme

In 2013 Lewisham was approached by the Big Lottery Fund as one of twelve areas in the country to consider how best to improve resilience and well-being in young people aged 10 – 14 years through the ‘Fulfilling Lives: HeadStart Programme’. In July 2014, Lewisham was informed of its success when securing £500,000 which would be used to develop universal and targeted mental and emotional well-being provision. Lewisham has the opportunity in 2015, to bid for a further £10 million from the Big Lottery Fund, to further develop this work and create ‘whole-system change’.

Four local outcomes for HeadStart Lewisham have been developed as a response to stakeholder consultation:

- improved resilience
- increased school attainment and integration with the community
- improved emotional literacy
- preventing needs escalating for those most at risk

Over the next twelve months the following interventions will be implemented and tested, as part of stage two ‘test and learn’ phase: -

- **implementing the ‘Transition Curriculum’**, across two school collaboratives which will focus on improving young people’s resilience, well-being and achievement. The schools will receive consultancy support from Young Minds, the UK’s leading charity for children and young people’s mental health. Young Minds will undertake a needs assessment at each school (which will include canvassing the views of pupils) by: developing a bespoke programme of work, which could include training of staff; implementation of support packages to families; delivery of well-being programmes to young people; and wider system change. They will also support “Communities of Practice”¹ across the collaboratives to identify shared problems and find solutions.
- **improving access to counselling support** this includes extending the Place2Be *face-to-face counselling* provision for young people and parents/carers to an additional five secondary schools. Place2Be have largely worked in primary schools so we will be working in partnership to test the model’s effectiveness in secondary schools. The programme also includes *online counselling* for four secondary schools and to those out of school, supported by a peer mentoring/ambassador programme, to enable young people to access support in a range of settings as they requested.
- **developing an online resource kit** which will bring together national and local resources to support young people who are facing difficulties regarding their wellbeing or who are concerned about a peer and for parents/carers and professionals who are concerned about a young person.

¹ <http://wenger-trayner.com/theory/>

- ***developing a varied creative arts programme***, which includes *youth-led film development*. It is anticipated that targeted groups such as looked after children, children with disabilities and young carers will benefit from this provision via a range of community settings. We will also work with children who are not in school. This element of HeadStart programme will aim to improve resilience and prevent escalation for those accessing this provision.
- ***administering an innovation fund*** to fund local organisations to pilot new ideas to achieve the HeadStart outcomes.
- delivery of ***'youth led events'*** and allocation of ***additional funds to design and commission community projects*** to build resilience, in partnership with local young people.