A call to action
Addressing the Social Determinants of Mental Health

Isabella Goldie, Director of Development and Delivery
Marguerite Regan, Policy Manager

Mental Health Foundation
• Our **vision** is for a world with good mental health for all

• Our **mission** is to help people understand, protect, and sustain their mental health

Prevention is the key to achieving this
5 year Plan - based on WHO Framework

Mental Health Promotion

Mental Illness Prevention

Recovery, Improved lives
How we work

We connect policy, research and practice in services, communities and workplaces

We develop and test in flight prevention interventions with partners across the UK and beyond

We nurture and amplify the voice of citizens

We reach the public with eye-catching and evidence informed campaigns and media work
The challenge

*In the UK, we are facing a mental health crisis.*

- **One in six** people in the past week experienced a common mental health problem.
- The estimated cost to the UK economy: **Over £100 billion** each year.

On average, around **16 people** end their own lives every day.

That’s approximately one person **every two hours**.
Across the lifecourse

- Perinatal Maternal Mental Health
- School (Pre FE)
- Parenting

Settings (Workplace, services) ∩ Relationships

Lost employment opportunity cost £23.1bn

Health & Social Care (Poor health, poverty, isolation)

- 75% mental health Problems set by age 24
- ½ of People aged 75+ live alone
- 20% aged 65 and over experience Depression
Social determinants of mental health inequalities

- Stigma/Discrimination
- Adverse childhood experiences
- Violence
- Bereavement
- Isolation
- Poverty
- Debt
- Low levels of education
- Unemployment
- Poor work environment
- Retirement
- Addiction
- Disability
- Barriers to care
- Long-term conditions
- Transport issues
- Neighborhood deprivation
- Adverse natural environment
- Social inequalities
- Economic inequalities
- Ecological inequalities
- Health inequalities
Addressing the social determinants of mental Health

- A focus on specific challenges across the life course, opportunities for intervention and points of transition.
- Improving mental health for all with a strong focus on health equity (not just gain).
- Taking integrated systemic approaches to create a social movement for whole scale change.
- Adopting a socio-ecological model - working across multiple levels – individual, families, communities – wider society/structural.
Life course Approach

**Childhood**
- Perinatal Maternal Mental Health
- School (Pre FE)
- Parenting

**Working Age**
- Settings (Workplace, services)
- Relationships

**Later Life**
- Health & Social Care (Poor health, poverty, isolation)

- 75% mental health Problems set by age 24
- Lost employment opportunity cost £23.1bn
- % of People aged 75+ live alone
20% aged 65 and over experience Depression
Whole community approach to prevention

- Universal
  - 'Whole'
  - Recognising and addressing risk

- Selected
- Indicated
- Responding to functional distress
- People with mental health problems
The Whole Community Approach to Prevention in Mental Health

- Mental Health in all Policies
- Mental Health in all Impact Measures
- Mental Health in all Settings
- Mental Health in all Service Contacts

Assumes a Life Course Approach
Assumes Proportionality to Address Inequality
Assumes Genuine Co-Production with Community

Model developed by Mental Health Foundation (2016) All Rights Reserved
Whole community approach principles…

• Engages individuals, families, communities (including settings and groups of identity) in the context of their everyday life.

• Focuses on protective factors for enhancing mental health alongside risk.

• Addresses the social, physical and economic environments that determine the mental health of individuals and families and creates supportive convivial communities.

• Adopts integrated strategies, operating from the individual to socio-environmental levels.
Whole community approach principles

• Involves intersectoral action extending beyond the mental health sector.
• Strategies are built around effective citizen engagement, community empowerment and interventions are co-produced.
• Approaches are tailored and proportionately targeted towards those with highest risk – no one is left behind (complex needs, intersecting risk).
• Settings where there is a the greatest potential for impact and life points where there is the greatest risk are prioritized.
Prevention at Work

**Indicated**
Supporting staff who experience mental health problems to recover, thrive and develop in work, reducing relapse.

**Selective**
Recognising the needs of staff /customers at additional risk and supporting accordingly

**Universal**
Supporting workplaces to maximise mental health and wellbeing across business, staff and communities of operation/influence
Theory-based interventions
Established theories of human functioning and social organization

Leadership
Need for this to be taken on at highest levels
Culture change and tradition
Sustainability

Resources and Support
Working Across Sectors/pooling resources
Social capital/co-production

Managing Your Own Organisations Mental Health
Example Setting
Awareness of Actions

Evidence Informed
Trans-disciplinary approach to research
Testing in Flight/Implementation Science

Work force Development
Mental Health Improvement Competencies
Public Sector Workforce
Community Leaders

The Effect of Change
Pressure points for communities and families
Migration

Equity Focused
Prevention Planning
Evidence Limitations

Settings
- Looked after children
- Pre school
- Further Education
- Care homes

Mental Health Inequalities
- Social Inequalities
- Poverty
- Health inequalities

Life Course
- Adults not in work
- Later Life
- Transitions

Prevention Review: Landscape Paper; Mental Health Foundation
Mental Health Inequality Mapping

1 Kingston upon Thames
2 Hammersmith and Fulham
3 Kensington and Chelsea
4 Westminster

5 City of London
6 Islington
7 Hackney
8 Waltham Forest
<table>
<thead>
<tr>
<th>Stage</th>
<th>Individual</th>
<th>Family/home based</th>
<th>Community - Structural</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Early Years and Family Formation</strong></td>
<td>Perinatal pathways of support for mothers</td>
<td>Support for Attachment</td>
<td>Peer Support Groups for young mums (or young fathers)</td>
</tr>
<tr>
<td><strong>Children and Adolescents</strong></td>
<td>Self Management Approaches (including digital)</td>
<td>Parenting Programmes</td>
<td>Whole School approaches</td>
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<td></td>
<td>Psychological interventions</td>
<td>Family Therapy</td>
<td>Bullying programmes</td>
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<td>Behaviour Interventions</td>
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<tr>
<td><strong>Adults</strong></td>
<td>Workplace support – line management interventions</td>
<td>Parenting support</td>
<td>Stigma &amp; discrimination programmes</td>
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<tr>
<td></td>
<td>Psychological Interventions – CBT, Solution focused</td>
<td>Carers support</td>
<td>Mentally Healthy Workplace approaches</td>
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<td>Trauma informed services</td>
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<tr>
<td><strong>Later Life</strong></td>
<td>Self management for long term conditions</td>
<td>Family based Dementia support</td>
<td>Volunteering opps</td>
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<td></td>
<td>Pre-retirement prep</td>
<td>Socially connected care homes</td>
<td>Peer Mentoring/Befriending</td>
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<td>Psychologically informed Physical health settings</td>
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</tbody>
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Collectivism and mental health

Holistic SEWB

Connection to family / kinship
Connection to community
Connection to culture
Connection to land
Connection to spirituality / ancestors
Connection to physical wellbeing
Connection to mental wellbeing

Cultural Determinants
Social Determinants
Political Determinants
Expressions
Experiences
Next developments

Prevention Review

Thrive Network in Scotland

icircle - global city network

Citizen empowerment and co-production

Growing our work with young people who are key to addressing future mental health inequity.
Change is never simple

Donors → Policy Formulation

Researchers → Agenda Setting

Private Sector → Monitoring and Evaluation

Parliament → Decision Making

People and Communities → Policy Implementation

You
Ready to join the revolution?

The role of LA:
• Leaders
• Partners
• Champions
• Ambassadors
• Cheerleaders
• Grafters
Discussion

• What do you think our priority areas should be?
• What information or evidence do you need in relation to public mental health?
• Are you doing any work in this area?
• How can we work better together and what support do you need?
Questions
Relevant resources

Better Mental Health for All: A Public Health Approach to Mental Health Improvement
https://www.mentalhealth.org.uk/publications/better-mental-health-all-public-health-approach-mental-health-improvement

Poverty and Mental Health: A Review
https://www.mentalhealth.org.uk/publications/poverty-and-mental-health

Mental health and prevention: Taking local action for better mental health

Added value: mental health as a workplace asset
http://www.mentalhealth.org.uk/publications/added-value-mental-health-workplace-asset

Fundamental Facts about mental health 2016

All resource available at: www.mentalhealth.org.uk
Thank you

Isabella Goldie - igoldie@mentalhealth.org.uk
Marguerite Regan - mregan@mentalhealth.org.uk

Website: www.mentalhealth.org.uk
Twitter: @mentalhealth

MENTAL HEALTH AWARENESS WEEK
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#MHAW17