

# A Mental Health & Wellbeing Plan for Hounslow 2010-2011

This Plan, published in October 2010, was commissioned by the Hounslow Mental Health Local Implementation Team and overseen by Dr Alice Parshall

It was compiled and edited by Jane Lyons (jane.lyons@gmail.com)

Learning from Dr Lynne Friedli and Commissioning Support for London is gratefully acknowledged

This is a live document: to report updates please contact [Alice.Parshall@wlmht.nhs.uk](mailto:Alice.Parshall@wlmht.nhs.uk)



**London Borough  
of Hounslow**



West London  
Mental Health  
NHS Trust



**CVS**  
hounslow

# Five ways to wellbeing<sup>1</sup>

A review of the most up-to-date evidence by the new economics foundation (nef), suggests that building the following five actions into our day-to-day lives is important for wellbeing:

## Connect...

With the people around you. With family, friends, colleagues and neighbours. At home, work, school or in your local community. Think of these as the cornerstones of your life and invest time in developing them. Building these connections will support and enrich you every day.

## Be active...

Go for a walk or run. Step outside. Cycle. Play a game. Garden. Dance. Exercising makes you feel good. Most importantly, discover a physical activity you enjoy and that suits your level of mobility and fitness.

## Take notice...

Be curious. Catch sight of the beautiful. Remark on the unusual. Notice the changing seasons. Savour the moment, whether you are walking to work, eating lunch or talking to friends. Be aware of the world around you and what you are feeling. Reflecting on your experiences will help you appreciate what matters to you.

## Keep learning...

Try something new. Rediscover an old interest. Sign up for that course. Take on a different responsibility at work. Fix a bike. Learn to play an instrument or how to cook your favourite food. Set a challenge you will enjoy achieving. Learning new things will make you more confident as well as being fun.

## Give...

Do something nice for a friend, or a stranger. Thank someone. Smile. Volunteer your time. Join a community group. Look out, as well as in. Seeing yourself, and your happiness, linked to the wider community can be incredibly rewarding and creates connections with the people around you.

*At the start of this Plan, let's ask ourselves what could we all – Council, service commissioners, service providers and citizens – do to enable these five to happen in our lives and those of our fellow citizens? Taking responsibility for some of our own wellbeing in this way also fits with the latest government arguments for a shift from big government to big society; for less reliance on state intervention and more emphasis on community engagement.<sup>2</sup>*

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## Introduction

This Mental Health and Wellbeing Plan is both a statement of achievements to date and the vehicle for developing and driving the delivery of a forward Action Plan. The vision is to show routes to improving mental health and wellbeing for everyone in Hounslow so that citizens of the borough know more about how to support their own mental health and that of those around them; recognize needs; and access appropriate services. Everyone has a right to wellbeing, and the Plan, informed by inviting people in Hounslow to share their priorities for wellbeing, is for everybody, across the life age span.

Wellbeing is inseparable from individual and family experience of social justice, income, housing and public services, and other factors behind health inequality, but these will not be directly addressed here. This Plan will concentrate on what can be achieved with community social interaction and inclusion (as promoted by the Adult Mental Health Joint Commissioning Strategy 2008/2011)<sup>3</sup> to further the spread of local wellbeing.

In this spirit, we are proud of the modest but achievable goals that have been signed up to by the Partners in this document, and which will be found in the Action Plan accompanying it. In many cases these will enable added value from existing work plans or from new links. Achieving these goals will enable the small but sustainable changes that can raise wellbeing levels for all, positively including the most disadvantaged groups. Initially, achievement will be acknowledged just because the action has taken place. One early goal, however, is to begin to build up baseline wellbeing measurements now to compare with those in the future.<sup>4</sup>

This is a live document – a work in progress – and it can be refreshed and the Action Plan updated as necessary. It will have an 18-month initial life span, with a view to recording achievements, work outstanding and new opportunities by the end of 2011.

Work done for this Plan will inform the more strategic work of the Director of Public Health's Report on Mental Health in September 2011. That Report's four goals are likely to focus on:

- Raising awareness of the scale of mental wellbeing issues and attendant human misery, as well as the enormous potential that exists for reducing them
- Embedding Mental Wellbeing Impact Assessment (see page 3) into all decision making
- 'Tough love' on projects so that only those delivering proven results are supported
- Deepening involvement at all levels for the mental wellbeing agenda, including the appointment of local Champions.

**Dr Mike Robinson**  
Joint Director of Public Health and  
Medical Director  
London Borough of Hounslow / Hounslow NHS

**Dr Alice Parshall**  
Clinical Director  
Hounslow Service Delivery Unit  
West London Mental Health Trust

## Definitions of mental wellbeing

Mental health and mental wellbeing are not the same thing. These working definitions of mental health, wellbeing, mental health promotion and recovery will support an understanding of how these may interplay.

**Mental health** is the absence of mental illness but it is more than that; it has been defined as 'a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community'. 'There is no health without mental health.'<sup>5</sup>

**Wellbeing** has recently been defined it as: 'A positive state of mind and body, feeling safe and able to cope, with a sense of connection with people, communities and the wider environment'.<sup>6</sup>

**Mental health promotion** 'covers a range of approaches, all aimed at having a positive impact on mental health. Like all health promotion, mental health promotion involves actions that create living conditions and environments to support mental health and allow people to adopt and maintain healthy lifestyles'.<sup>7</sup>

**Recovery** 'there is no single definition of the concept of recovery for people with mental health problems, but the key idea is one of hope that it is possible for meaningful life to be restored, despite serious mental illness... Recovery emphasises that while people may not have full control over their symptoms, they can have full control over their lives'.<sup>8</sup>

## Reasons to promote and improve mental wellbeing

*"Good mental health is fundamental to the wellbeing and prosperity of our nation. And we know it is linked with good physical health and many other benefits for individuals and communities."*

*New Horizons*<sup>9</sup>

Improving mental health, that is promoting the circumstances, skills and attributes associated with positive mental health, is a worthwhile goal in itself: most people place a high value on a sense of emotional and social wellbeing.

Improved mental wellbeing:<sup>10</sup>

- reduces health inequalities
- contributes to preventing mental illness
- leads to better outcomes across the board, for example in physical health, health behaviours, relationships, educational performance, employability and earnings, crime reduction and quality of life
- delivers social (as well as economic) returns.

### **Inequalities and wellbeing**

The mental wellbeing of individuals, communities and local populations is influenced by the complex relationship between social, material, cultural and environmental factors. There is a gradient in the distribution of common mental health problems and in levels of wellbeing. Material deprivation, lower income, less wealth and lower socio-economic status are associated with much greater risk of poorer mental health and wellbeing, as highlighted in the recent London Health Inequalities Strategy.<sup>11</sup>

Specific challenges for Hounslow are reflected in its Joint Strategic Needs Assessment and Local Area Agreement. Some projects within the borough have used Mental Wellbeing Impact Assessments. These point stakeholders towards the potential impacts on mental wellbeing of proposed projects.<sup>12</sup> At the Star Centre, for example, likely impacts of the Compass project (see below) on resilience and community assets included increased educational opportunity, improvement of skills, opportunities for good mental health and wellbeing, and a sense of achievement. Meanwhile, for the Hub Garden in the west of the borough (see below) potential gains included opportunities to 'recharge', a place to meet people and relax, and a way to feel happier and calmer. This systematic and more contained approach, in a borough like Hounslow where there is such diversity, and diverse vulnerability, can be very valuable as we aim to address the wider wellbeing needs of all.

### **Policy context**

Although very much for Hounslow, this Plan falls in line with the national vision for mental health set out in *New Horizons* and *Confident Communities, Brighter Futures: A framework for developing wellbeing*, as well as wider policy referenced

below under Key settings and target groups, and thereby is timely. A new government public health strategy is now expected by the end of 2010.

Mental health promotion, with wellbeing, is central to emerging themes and messages drawn from *New Horizons*:<sup>13</sup>

*Key emerging themes:*

- Prevention and public mental health – recognising the need to prevent as well as treat mental health problems and to promote mental wellbeing
- Multi-agency commissioning/collaboration – working to achieve a joint approach between local authorities, the NHS and others, mirrored by cross-government collaboration
- Value for money – delivering cost-effective and innovative services in a period of recession.

*Key messages:*

- Early intervention to build mental wellbeing and resilience in infancy and childhood can prevent mental health problems in adult life and lead to better outcomes in health, education, employment and relationships
- Successful employment is one important way to promote recovery and wellbeing
- Multi-sector approaches can be taken at a wider population and community level to maintain and promote mental wellbeing.

## **Advantages – what's in it for all of us?**

### **Health and social benefits**

Mental wellbeing has a strong impact on physical health. While better outcomes are of course associated with the absence or proper treatment of coexisting mental illness, how people feel influences cholesterol levels, blood pressure and susceptibility to infection. Subjective wellbeing increases life expectancy by 7.5 years, provides as much protection from coronary heart disease as giving up smoking, improves recovery and health outcomes from a range of chronic diseases (e.g. diabetes) and in young people, significantly influences alcohol, tobacco and cannabis use. Subjective wellbeing also predicts pro-social behaviour e.g. participation, civic engagement and volunteering.<sup>14</sup> Feeling included, able to

participate and having control over one's own life are core protective factors for mental wellbeing. People are becoming more interested in creating their own wellbeing. Just one example is the London Happiness project, a community blog based on the new economics foundation five ways to wellbeing (see above), refined by a London resident for her – and her audience's – own use.<sup>15</sup>

### **Benefits for people with mental health problems**

Mental wellbeing brings additional benefits, including for people with mental health problems. Confidence, self esteem, positive mood (e.g. hopefulness, optimism) and social integration influence both clinical and quality of life outcomes for people with mental health problems. As around half of people with common mental health problems are limited by their condition and around a fifth disabled by it,<sup>16</sup> the benefits of promoting positive mental health and wellbeing are considerable. Such promotion is seen within Hounslow, including among occupational therapists from the West London Mental Health Trust who work with service users to create their own personalised wellness recovery action plans. These cover daily maintenance, signs and symptoms, and directions of what they would like to happen in the event of crisis.

### **Value for money**

As well as the personal, the economic opportunities from improving mental health are huge. To put it another way, to not achieve our goals is to waste not only an individual's potential but also national resources.

### **The cost of mental illness**

In the UK mental illness now accounts for more DALYs\* lost per year than any other health condition. 20.0% of the total burden of disease in the UK was attributable to mental illness (including suicide), compared with 17.2% for cardiovascular diseases and 15.5% for cancer. No other condition exceeded 10%.

Mental illness including suicide accounts for less than 5% of all premature mortality but for over 30% of all morbidity and disability. The cost of mental health problems in the UK is £110 billion per annum.

\* The World Health Organisation calculates the cost/burden of disease using a composite non-monetary measure, the disability-adjusted life year (DALY), combining morbidity and premature mortality.

Specific examples of cost savings achievable through wellbeing work include:<sup>17</sup>

- Investment in parenting support and home visiting programmes can provide a return on investment of £17 for every £1 spent.
- Economic analysis of The Place2Be young people's support service found a potential return of £6 for every £1 invested in their school based individual and group counselling programmes.
- Increasing the education of women in the UK from 'no' to 'basic' qualifications could reduce the cost of depression by £230 million per year or £4.9 billion over the working life of these women.
- Achieving change in relation to diet, exercise and alcohol has potentially large mental health benefits with relatively low cost interventions. Advice from GPs can be effective: only a very low level of effectiveness is needed to make the intervention cost-effective, given the scale of potential benefits and the very modest cost of GP advice – a typical GP consultation cost around £30 in 2007/08.
- BT's emotional wellbeing programme achieved a 30% reduction in sickness absence and a 75% return to work for people off longer than 6 months with mental health problems, and increased productivity.
- A case study analysis of workplace wellbeing programmes found returns of £4.17 for every £1 invested.
- The Metropolitan Police reduced stress-related sickness absence of 10.2 days per officer per annum to less than one day.<sup>18</sup>
- The annual cost of mental ill health to an organisation with 1000 employees is £835,355. Evidence-based action to improve mental health could achieve a saving of around 30% of this, i.e. in the region of £250K per annum.<sup>19</sup>
- 'Presenteeism' or reduced productivity from employees who are at work but experiencing stress or mental health problems costs £15.1 billion a year, which is almost twice the estimated annual cost of absenteeism (£8.4 billion).<sup>20</sup>

## **Local need**

The following section develops and acknowledges data from Hounslow Joint Strategic Needs Assessment 2009.<sup>21</sup> Hounslow is a wedge-shaped outer London borough, bordered in part to the south by the Thames, to the west by Heathrow airport, to the north by Ealing and Hillingdon, and to the east by Hammersmith & Fulham. It is a borough of contrasting character and fortunes, each part with characteristic needs and priorities. Attention is drawn to some particular features within the changing population profile.

### **People**

Hounslow has a rapidly increasing population. The 2001 Census counted 212,300 people living there. Greater London Assembly (GLA) figures suggest Hounslow's population is expected to grow by 6.6% between 2005 and 2011, equivalent to around 3,000 people each year. Births are increasing, though expected to level off from 2011, and deaths decreasing.

In Hounslow an estimated 5000 children and young people (10%) are likely to be experiencing emotional problems. Referrals to Child and Adolescent Mental Health Services and to the Community Adolescent Team fell in 2008/09; this is paradoxical given the rate of rise of the young population. There is a sense that this indicates that services are not arranged in an optimal way, and this is perhaps also illustrated by the relative under-representation of children of Black and ethnic minorities in the caseload being treated. Child and Adolescent Mental Health Services, however, are of course not the only service able to influence childhood wellbeing or achieve early intervention in respect of childhood mental distress. In schools, initiatives to tackle bullying and discrimination are being actioned, including by direct pupil involvement.

Hounslow's age profile has been markedly different from that of the country as a whole, with more infants and young adults under 40 but fewer adults and older people from 45 on. However, GLA projections suggest that numbers of people aged 65+ are set to increase from 2008 on, increasing numbers of people seeking services, including treatment for dementia.

The borough is home to a number of lesbian, gay, bisexual and transgender citizens. A study by Mind found that this community reports more psychological distress than heterosexuals.<sup>22</sup> There has been an active anti-homophobia

campaign, with posters, led by the West London Gay Men's Project on behalf of the Hounslow Homophobic Crime stakeholder group, funded both locally and by the Home Office. Hounslow has limited support for the lesbian, gay, bisexual and transgender community, mainly focused around sexual health.

Existing census data are nearly a decade old. Moreover, Hounslow people are mobile, particularly the younger age groups. 2005 estimates suggest just over 38% of Hounslow's resident population is from Black and minority ethnic communities.<sup>23</sup> Many people of Asian origin arrived in the 1960s and 1970s from India, Pakistan and East Africa; a smaller number from the Caribbean. These families have been joined by people from an increasingly diverse range of backgrounds, including, from 2004, many Eastern Europeans. Around 3% of Hounslow's population consists of refugees, including people from Afghanistan, Albania, Bosnia, Kosovo, Iran, Iraq, Sri Lanka, Kenya, Somalia and Tanzania. Some, arriving from areas of armed conflict, may have high levels of mental distress.

Good mental health and wellbeing are for all Hounslow's citizens, whatever group they may belong to, and meeting wellbeing needs must be mainstreamed *and* personalised.

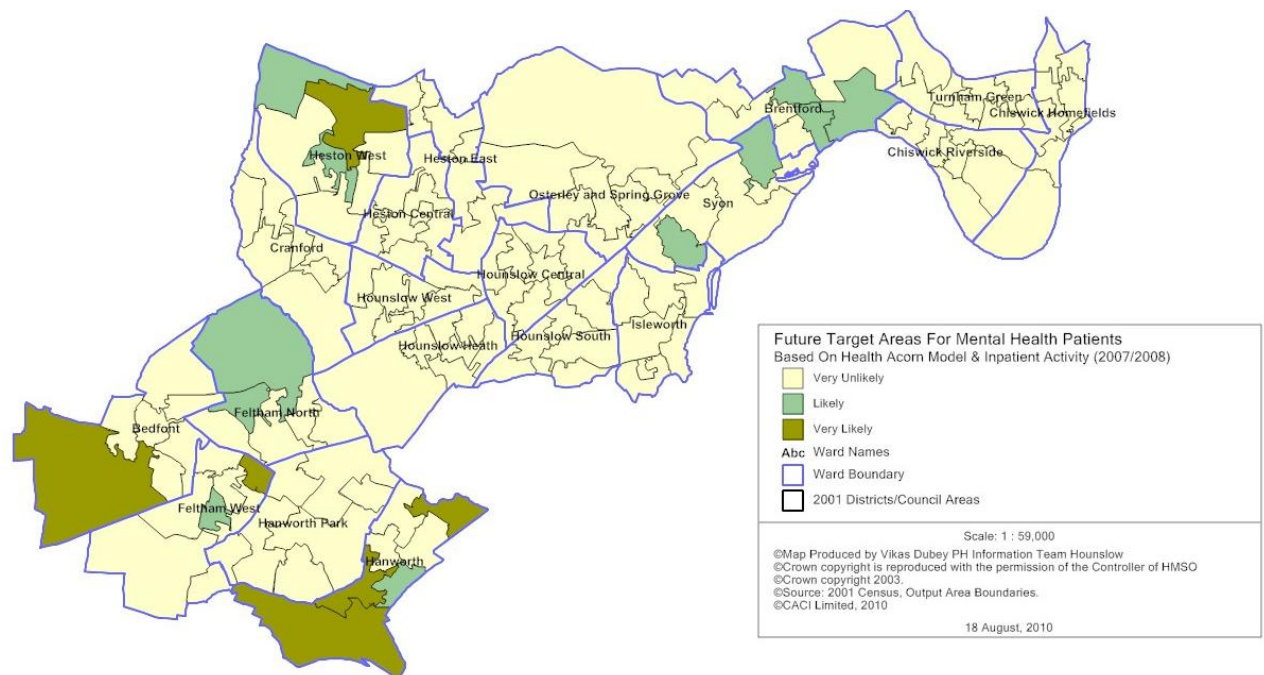
### **Physical health**

Physical health areas identified for priority action in Hounslow rightly reflect the high risks for the particular population. Some ethnic groups are at higher risk of particular physical health problems. Borough priorities include high blood pressure, stroke, chronic obstructive pulmonary disease, smoking (an indicator for health inequalities), reduction of teenage pregnancy, and healthy eating, obesity and activity. Just over a quarter of Hounslow adults eat healthily, which is similar to the average for England. Less than 20% are physically active, which is below the London average. Large east-west differences are seen across the borough, with high participation rates in the east (23-27%), medium rates in the centre (18-23%) and low rates in the west (11-18%).

### **Mental health**

A picture of mental health needs in the borough is given in the map below. Future target areas for mental health inpatients are shaded as 'very unlikely', 'likely' or 'very likely' based on expected numbers of psychiatric inpatients minus actual numbers of psychiatric inpatients in the year 2007/2008. The darker areas are the ones where future intervention will be most necessary.

## Future target areas for mental health inpatients



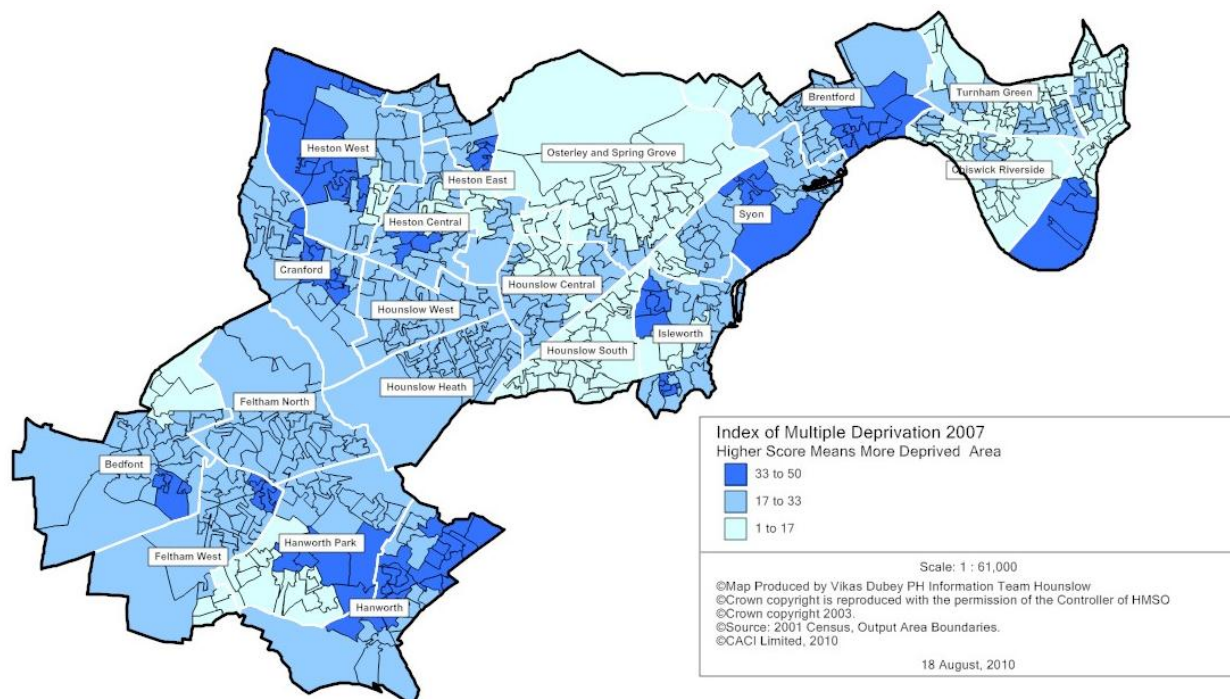
## Community cohesion

Above are outlined some of the more separate and specific vulnerabilities in Hounslow, which might compromise mental wellbeing. There are, however, factors which evidence shows actively to enhance it; opportunities to do which in Hounslow we are looking at below. Community cohesion is a corner stone, as highlighted in *Confident Communities, Brighter Futures: A framework for developing wellbeing*.<sup>24</sup> Nationally 80% of people feel that people from different backgrounds get on well together but only 64% of respondents in a 2008 Hounslow residents' panel tracker survey<sup>25</sup> agreed that their local area was a place like that. This gives us a sense that Hounslow has some way to go to achieve a strong sense of cohesion. It is diverse and there are frank social divisions. But perhaps worth noting is that there were no significant differences when examining the data by ethnic sub-groups.

The quest for cohesion should not lead to solutions that assume 'one size fits all' for Hounslow and the people who live there. Multiple deprivation measures combine data on income, employment, health deprivation and disability, barriers to housing and services, education, crime and living environment. It is measured 'fact' that the areas with the darkest colours in the map below are deprived. A small number of these in Hanworth, Feltham and Brentford fall into the bottom tenth (the 10% most deprived) of the 32,500 areas in England. Quite a few more,

spread across the borough, are within the bottom third. Areas that are relatively affluent are sometimes adjacent to the most deprived areas. This is not odd for London, but makes real community cohesion a challenge.

### Index of Multiple Deprivation 2007



### Work<sup>26</sup>

Unemployment in Hounslow, particularly among women, is higher than the England average. One person in eight of working age is out of work and claiming benefits. The highest proportions of 16-18 year olds out of education, employment or training, are found in the west. About Almost one-third of Hounslow children live in households that are claiming means-tested benefits. Nationally, only 24% of adults with long-term mental health problems are in work, and only 50% of those with mobility problems. Both claimants and professionals now recognise that support to find a job and stay in it has better outcomes than providing training, and services in Hounslow are increasingly taking this approach. An indicator of some success is that the proportion of adults with learning disabilities in work is over the London average, although still a local priority for improvement. Hounslow, however, has the second lowest percentage in London of users of community mental services in a job (2006-07 data).

Earnings are lower than the London average, reflecting the fact that people living in Hounslow are less likely to be employed in managerial, professional or skilled

trades jobs (57.6% of those employed in 2006-07, compared with 60.1% for London as a whole).

### **Environment**

As well as environment at home, the surrounding environment has a strong impact on wellbeing. Evidence finds better wellbeing in those who live in or near green spaces. Hounslow's parks and green spaces together represent one of the highest percentages of green areas in any London borough. Events, play areas, and space for sporting activities, provide the opportunity for diverse pastimes. There are some large parks, such as Osterley, Hounslow Heath, or Chiswick House grounds, plus many other neighbourhood spaces. Local projects are also building up access to smaller green spaces and the shared creative excitement that can go with being part of using one.

### **Housing**

Rapid population growth has had significant implications for tenure, which is strongly inclined towards renting – at 42% about 10% higher than the national average. The proportion of owner-occupiers (58%) is slightly lower than the London average and well below the national average. Hounslow's housing stock is dominated by flats, with the rest split between terraced and semi-detached houses. There has been a fall in the proportion of social rented dwellings (now managed by Hounslow Homes), but an overall rise of 8.7% in the total number of units, since 1998. Dwellings in Hounslow are generally smaller than the national average. A relatively large number of households are overcrowded (8%). Families account for just under half of all households in gross housing need (46.5%), despite comprising only 31.4% of households.

## **Linking in to local priorities**

In the same way that this project links to national policy, it takes forward identified local issues.

### **Relevant key goals of the Hounslow Joint Strategic Needs Assessment 2009**

#### **1. To improve health and emotional wellbeing**

- More needs to be done to identify emotional and mental health problems in older people, adults, young people and children at an early stage and action taken to promote emotional and mental wellbeing.
- Around a third of people with learning disabilities also have mental health needs and these must be addressed.
- Hounslow citizens would like more talking therapies to be available for those with mental health needs.
- Healthy lifestyles must be supported by provision of sport and leisure facilities, by support to build exercise into daily routines, and by provision of accessible information about healthy diet, services and treatments available and about what treatments may involve.

#### **2. To enable people to make a positive contribution**

- Users of services and carers have involvement through mental health service user involvement projects and the Hear Say groups in learning disability services. The Local Involvement Network (LINK) is a strong driver to bring about citizen involvement in health and social care decision-making, and played a valued role in widening consultation on this Plan.
- All services need to give added emphasis to enabling users to participate in community life and to enhancing social inclusion.

#### **3. To improve economic wellbeing**

- On the measured and combined indices of income, employment and education, Hounslow, particularly the west of the Borough, shows as one of the most deprived boroughs in West London. Other problem indicators are also marked in the west: the highest number of lone parents, the lowest levels of both adult and young people's attainment, and claims for benefit by under 19 year olds.
- Many more young people and adults from vulnerable groups, including care

leavers, young offenders, and those with disabilities, learning difficulties or mental health problems need support to enable them to find a paid job and stay in employment.

### **Local Area Agreement 2008-11**

Local Area Agreements aim to simplify some central funding, help join up public services more effectively and allow greater flexibility for local solutions to local circumstances. They set out to describe how to make a borough or community a better place to live in.

A local mental health promotion strategy should relate to the Local Area Agreement priorities, which are agreed between central government, the local authority, Local Strategic Partnership and other key partners at the local level.

This Plan fits with Hounslow Local Area Agreement priorities, especially in the following, from the A-Z areas:

- A) Reducing worklessness in the population
- D) Sustaining the local environment through enhancing local open spaces
- H) Improving the health and wellbeing of the local population by supporting them to make healthy lifestyle choices
- J) Promoting community cohesion through cultural and sporting activities
- K) Support children, young people, adults and older people who have mental health problems to improve their emotional and mental wellbeing, maintain their independence and promote their social inclusion
- L) Reducing the impact of crime and the harm caused by drugs and alcohol
- M) Providing support, information and services to family carers providing unpaid care to sick and vulnerable family and friends
- O) Supporting older people to maintain independence
- W) Development of a strong and vibrant voluntary sector

### **Hounslow Director of Public Health's health priorities 2010**

This Plan is informed by the important *Making Hounslow Healthier* priorities, as also found in the *NHS Hounslow Commissioning Strategy Plan 2008-13*:

"Let's get moving" – physical activity for adults and children

"Families first" – alcohol misuse; mental health.

## **Hounslow Plan (2006–2010) People, Pride and Performance**

The commitment to building a stronger and more united community identified in the Plan provides an opportunity to tackle the issues identified in the Institute of Community Cohesion *Windows on Extremism Report*. As part of Hounslow Homes' 'building sustainable communities' aim, it recognises the challenge to help transform its neighbourhoods into strong cohesive communities, so that people from different backgrounds get on well and live peacefully together.

## **Action – what should we look to do?**

Our actions arise from local needs, but will also take account of the growing evidence base for what is most likely to bring the most benefit to the most people – what we know works.

### **What works**

Review level evidence demonstrates that programmes promoting mental health can be effective in improving multiple areas of mental wellbeing *and* in reducing the risk of mental health problems. A recent economic analysis identified the following 'best buys' in effective interventions:

Supporting parents and early years: **parenting skills training/pre-school education/home learning environment**

Supporting lifelong learning: **health promoting schools and continuing education**

Improving working lives: **employment/workplace**

Positive steps for mental health: **lifestyle (diet, exercise, sensible drinking) and social support**

Supporting communities: **environmental improvements**<sup>27</sup>

## **Key settings and target groups**

Priorities belong to this Plan, and started life from sharing needs and possible solutions with service commissioners and providers, service users and carers, and members of many citizen groups (see Partners and Co-owners list at front). But they also come out of the examination of local objectives, especially in the Joint Strategic Needs Assessment, the Hounslow Community Plan and *Making*

*Hounslow Healthier*. As a result of this work, the priorities for this Plan have self-declared:

1. 'Let's get moving' – active healthy lifestyles for good mental health
2. 'Families first' – early years work to build resilience; right-time intervention for dementia; community cohesion; alcohol
3. 'Good work, good workplace' – as a way to good mental health and inclusion
4. 'Be aware' – appropriate services for Black and minority ethnic groups; addressing stigma and discrimination, including towards lesbian, gay, bisexual and transgender communities; diversity alongside cohesion
5. 'Keep learning' – lifelong learning, including mental health awareness raising and education for everyone.

In compiling this Plan we have drawn together some of the work we know is going on in Hounslow. We recognize that it is, even so, only a sample. And we hope that the delivery of this Plan will encourage more of the organisations active in these areas to bring forward their knowledge and goals. Behind the work of individual bodies, the Mental Health Local Implementation Team works to promote positive mental health within the community, both for those receiving specialist mental health services and for all citizens.

## **1. 'Let's get moving'**

Health behaviour and mental health are tied together. Capacity, motivation and opportunity to adopt a healthy lifestyle are, of course, strongly influenced by mental health, as well as by socio-economic factors. Evidence-based lifestyle messages for the promotion of positive mental health include exercise, healthy eating, learning new skills, creative pursuits and social participation.

Knowing what works, we can take opportunities for giving this focused mental health lifestyle advice in primary care and other health promotion settings. Social prescribing is the name given to linking people with non-medical sources of support within the community. Some may remember when this sorts of advice about getting out more, taking up a hobby or walking a few stops extra always seemed to come from the GP, but more demand for physical healthcare and shorter consultation times have displaced it. Professionals may feel they will be accused of patronising people by suggesting they have an authority to suggest changing lifestyles, but there is now an evidence base as strong as for physical medicine that this will really change things. It can include, for example,

subsidised gym, the support of a health trainer to lose weight, or advice about self-help books or computerised therapy. And we must not be put off by the fact that some of these things have attracted rather odd names, because what they can achieve is transformational and very cost effective.

Social prescribing is associated with:

- increased uptake of activities/behaviours that promote mental wellbeing
- increased social contact
- reduction in some symptoms, notably mild to moderate depression and anxiety.

In Hounslow, some projects are already under way. The Healthy Living Roadshow takes health checks out into the community, to people who may be less likely to visit a GP, and can refer people to services to help them stop smoking, eat more healthily or provide further tests and any necessary treatment. The Roadshow has been focusing on heart and other physical health conditions, but as a result of consultations for this Plan, work is under way to include a mental wellbeing screening, with signposting on if necessary (see Action Plan). Referrals can be made through pathways that primary and secondary providers have worked on to ensure they are sensitive, specific and non-stigmatising.

Health trainers are also working to decrease health inequalities by means of outreach to high need communities. The health trainers are part of national programme using individuals to support people to adopt healthier lifestyles in order to tackle issues such as poor diet, obesity, smoking and fitness. In Hounslow over 100 of them have been trained – some paid, some volunteers. All health trainers will consider the emotional health needs of their clients, using the WHO5 questions on wellbeing as a baseline and an outcome measure. Where appropriate they will be able to refer people on to Beating the Blues, a computerised self-help treatment based on the principles of cognitive behavioural therapy, which supports people experiencing mild to moderate depression and/or anxiety. There is also a targeted mental health project, where health trainers are linked with three health centres to work with individuals having mild to moderate depression in order to improve their mental wellbeing in an innovative way, through lifestyle change, including getting involved again in mainstream activity.

The health trainers will be directing people down some of the routes that we know can lead to better health outcomes. One example of how Hounslow is moving forward is in the area of what is sometimes called 'bibliotherapy'. Health

trainers, community mental health teams and GPs will be able to signpost people to mental health self-help books now being added to Library stock. The Wellbeing Collection will be held in Bedfont, Cranford, Feltham, Hanworth and Hounslow libraries, but will be available to anyone to order. As well as providing information and guidance, using the Collection should also introduce new users to library services. A further innovation will be the Health Zone, a health promotion space on the ground floor of the central library in the Treaty Centre (watch this space).

Other resources include initiatives to widen long-term participation in physical activity.

- Health walks are offered to engage individuals, including mental health service users and young mothers with buggies, on community walks. This is a way to gently begin physical activity, community involvement and appreciation of nature – all routes to improve feelings of mental wellbeing.
- A three-year project aims to get more women and girls (especially 14–19 and 50+) moving, with regular, accessible and fun dance-mat sessions in schools and in the community, and Go urban games: teenage girls-only taster sessions of different activities from local providers. The project aims to help identify barriers to women’s participation and work to overcome them, and to highlight resulting wellbeing. Work with women’s groups including Sahil Multicultural Women’s group, Muslim Active Women around Hounslow, Brentford Somali Women’s Group and Tamil Group has begun to highlight specific needs, including swimming. The main barrier to providing truly female-only sessions has been identified as a lack of female lifeguards and work is under way to win funding in order to train more local women as lifeguards.
- Brentford FC manages football teams and other sporting opportunities including kayaking and rock climbing for people with a wide range of disabilities and football is also taken out to housing estates.
- Hounslow Hawks is a football team made up of users of mental health services who find many benefits to playing regular sport. Service users are increasingly sharing their activity time with their fellow citizens. For example, Feltham Open Door Project organises keep fit in the local library for members and others; while tai chi in an additional mainstream group is offered to both service users and public in a partnership between the Hounslow Occupational Therapy Team and Adult and Community Education / Lifelong Learning.
- Hounslow leisure centres offer an ability to pay card – so that using leisure centre facilities can cost just 50p.

- Mental health day centre members say they enjoy the free swimming session offered and would like more, as well as alternative therapies and advice about a healthy diet. They want activities and therapies to be very local to them.

## 2. 'Families first'

### Early years

The foundations for good mental health lie in pregnancy, infancy and early childhood. Parenting style and attachment are key factors. High quality interventions in these areas can produce long-term benefits for the mental health of children and their parents, as well as for the wellbeing of the family and the wider community.

There is high quality evidence for the effectiveness of:

- Targeted home visiting programmes
- Targeted group and individual parenting skills programmes
- Prevention and treatment of post-natal depression

For comprehensive home visiting and parenting programmes, effects are greatest for the most disadvantaged families and communities.<sup>28</sup>

- Health visitors promote good mental health in new mothers as part of overall health promotion. At the new birth visit the new mother's emotional wellbeing is paramount as her needs can often be neglected once the baby arrives, and this can lead to health problems including postnatal depression. If this is suspected the health visitor will carry out a mood assessment to see if wider mental health services are needed. Listening visits are offered to allow the client to ventilate and make sense of her thoughts and feelings.
- Among other services for women with mild to moderate postnatal depression, special groups are set up. Mother/infant interaction sessions promote sensitive parenting, looking at bonding and attachment, as well as self-help skills.
- Sure Start Hounslow, at the Hub, Salisbury Road, is dedicated to ensuring that families can access the services, activities and opportunities they want and need in west Hounslow. The family's first contact is with the health visitors, who can then refer across to Sure Start if the family needs more

support. Sure Start offers positive parenting programmes, including a 6-week confidence-building course, and also works 1 to 1. It is part of Beaver's Children's Centre, alongside nursery Places for Children.

- As part of its Think Family programme, Hounslow has a parenting Early Intervention Programme delivering targeted intervention to parents of children aged 8–13 who are showing emotional and behaviour difficulties. Interventions are based upon accredited parenting support programmes and linked to the Hounslow Parenting Strategy.
- Hounslow Youth Counselling Service, a charity supported by Hounslow Integrated Youth Support Services, provides free, confidential counselling to young people aged 11-26 years old. More than 500 young people use the service every year, within five secondary schools, at the offices in Isleworth and at HM Prison and Young Offender Institution Feltham. Among other goals, the service aims to build resilience within young people to promote good mental health and wellbeing. Counsellors are rigorously recruited and trained in many areas, including an awareness of 'pink therapy': working in a way that affirms lesbian, gay, bisexual and transgender sexuality.
- The West London Gay Men's Project's Integrated Youth Support Service offers six-week 1:1 sessions to young people around lesbian, gay, bisexual and transgender issues, including feelings, looking at further services where necessary. The service also provides a safe space for gay-friendly and lesbian, gay, bisexual and transgender young people to socialise. The support programme is client led and no parent or guardian is spoken with unless the young person agrees. Training is available for social workers, youth workers and teachers, and parents.

### **Later life**

While mental wellbeing at the beginning of life is vital, its importance certainly does not reduce with maturity. Across the life course, the rich get richer in terms of mental health, while classes four and five get poorer. Improving mental health in later life can have a significant impact on chronic disease outcomes and independence. Depression and poor mental health contribute very much to poor physical health outcomes for older people and are correlated with increased use of services.<sup>29</sup> Improving mental wellbeing in the elderly has serious added value, as those over 75 are at such high risk of acute or repetitive or lengthy hospitalisation.

There is good evidence on the effectiveness of psychotherapeutic interventions and self-help/group-based practical, social and emotional support for older people. For carers, there is good evidence for the effectiveness of long-term, multifaceted individual and community-based support. Other effective approaches include:

- promoting physical activity
- improving opportunities for social involvement
- tackling social, economic and physical barriers to social activity e.g. transport, age discrimination, poverty
- initiatives to reduce fear of crime
- a coordinated local approach to addressing 'daily hassles' e.g. gardening support, house maintenance, heavy shopping.

Befriending, intergenerational projects, approved trader schemes, work with providers to promote greater uptake of education, sports and leisure, and targeted outreach with those who are most isolated and vulnerable, are all valuable possibilities.

- Many organisations in the borough embrace the concept of promoting wellbeing in older people. Age Concern Hounslow, for example, offers keep fit including Fun and Fitness in Retirement and Fit as a Fiddle, and volunteer health mentors are being recruited to help embed a health engagement programme within local communities of older people. Age Concern also offers social activity, support to get jobs done in the house and garden, and a wide-ranging information and advice service (see below).
- Hounslow profits from a very special opportunity to keep older people 'ahead of the curve' in respect of memory loss in later life. At Hounslow's Memory Clinic, treatment aims to ensure that older people and their families are ready as memory loss progresses, knowing that 80% of the effects of Alzheimers are carried by the carers.

### **Alcohol misuse**

Misuse of alcohol and drugs can seriously disrupt families and communities. It is recognised from police, as well as medical and social, viewpoints as contributing to mental health needs within communities, and to violence and disturbance. Alcohol overuse correlates with poor wellbeing and is particularly harmful in combination with mental illness.<sup>30</sup> Across the community we find a harmful use of alcohol in the borough, higher than in comparative boroughs, and tackling this, its

causes and consequences must be a shared high priority. It is high on the agenda of the borough's Public Health department, and in view of this, it does not currently inform any of this Plan's Action Plan goals, although one example of work being done is given here.

- EACH is a community-based alcohol counselling service offering specialist intervention for people who want to give up or reduce harm from alcohol. It is very accessible; around one-third self-refer. Aftercare programmes help to sustain recovery which may involve education, training, voluntary work and paid work. A circle of support is provided to help meet individual needs, e.g. some want to use Alcoholics Anonymous, while others may want companionship away from a focus on addiction. All need to develop coping strategies and incorporate structure, family contact, behaviour change, and building resilience and self-esteem. User-run support groups meet varied needs; some have been running for 7 years or more. Currently one is being planned for women in recovery.

### **Domestic violence**

Domestic violence has a significant impact on mental health. NICE guidelines on preventing domestic violence are currently being developed; interim effective approaches include routine inquiry in antenatal clinics and A&E, initiatives to prevent forced marriage and improved criminal justice responses to victims.

The disease burden resulting from intimate partner violence is estimated to account for more ill-health and premature death in women under 45 than any other risk factor, including high blood pressure, obesity and smoking.<sup>31</sup>

Early recognition and connection is vital. For new mothers, Hounslow health visitors provide information in a number of languages, and can call in further support where needed. EACH offers a specialist domestic violence service, which was originally Asian specific but is now for all women, and which includes signposting on.

### **Community and cohesion**

We know that there is good quality evidence that the positive experience of cohesion enabled by, for example, strong social networks and feeling socially supported, play a significant role in protecting mental wellbeing, preventing

mental health problems and improving outcomes.<sup>32</sup> Interventions that strengthen opportunities for social contact include:

- Social prescribing: linking people with non-medical sources of support within the community, usually via primary care (as above)
- Volunteering.

Volunteering is recognised as making a critical contribution to building a strong and cohesive community. It has been described as a means of combating social exclusion and as an important contributor to the delivery of high quality public services. Around one-fifth of Hounslow residents undertake volunteering regularly. More than 700 organisations operate within the community and voluntary sector in Hounslow. CVS Hounslow, the Council for Voluntary Services, offers support and advice to these organisations.

- Cohesive communities – Hounslow’s Stronger and United Action Plan’s emphasis is on shared values and the need to focus on common aspirations rather than differences.
- Neighbourhood policing is a Metropolitan police priority that supports local wellbeing.
- Day centre members from all over the borough echo the comment of one of their number: “It’s enough to sit and chat”. They value the sense of community, often commenting that it is like a family – and that they may not find much support elsewhere. They add that they need fun as well as support, and that they can find this too in their day centres. They may be seen as traditional but still fulfil many community needs.

### **Housing and the environment**

- Good-quality, affordable, safe housing is essential for wellbeing.<sup>33</sup> Hounslow Homes, wholly owned by the London Borough of Hounslow, manages the council’s 16,500 homes, and in 2006 saw the completion of a £100 million refurbishment programme, meeting the Decent Homes Standard for all the council's housing stock four years ahead of the government's deadline. The housing needs department within the Council works with vulnerable groups, including those with mental health needs, to see them through temporary and into more permanent accommodation or straight to Supporting People funded supported housing. This can help keep people well.
- An extensive new-build programme in the borough will encourage stable neighbourhoods and flexible use of properties to support independence in

people with disabilities in line with the national preventative agenda and the care in the community strategy.

- Safe clean spaces for children to play are highlighted by local GPs as vital for early wellbeing. Hounslow has a relatively high number of open spaces (see above), and wellbeing projects based on gardening, see for example the Refugee allotment or the Hub food garden, below. Leveraging green space like this can be a way in to uniting the community and drawing on community expertise in healthy living.

### 3. Be aware

The mental health and wellbeing of Black and minority ethnic communities, as well as their access to and experience of mental health services, varies considerably by ethnic group, country of birth and factors like refugee or asylum status.<sup>34</sup> Some studies suggest that different cultures or ethnic groups present, perceive, interpret and cope with mental distress in different ways. However a major qualitative study found that idioms of distress bore great similarity across ethnic groups, although some specific symptoms were different, notably among those who have migrated from South Asian countries.<sup>35</sup> In many cases, religious faith and faith practices will be fundamental and the most effective approaches will involve partnership with faith leaders.

The need for a much stronger focus on prevention has been widely stated but there is limited good quality evidence on effective interventions. Effective approaches are likely to include:

- recognising and addressing the impact of racism
- increasing access to mainstream mental health promotion opportunities e.g. social prescribing, primary care, psychological therapies
- raising community awareness of mental health issues and challenging stigma
- culturally appropriate resources
- building partnerships with faith leaders
- building trust and social connections between local communities and newly arrived communities, especially refugees and asylum seekers.<sup>36</sup>

A recent look at Black and minority ethnic attitudes towards mental illness on the acute psychiatric wards at Lakeside found that many people look to church and other faith leaders once they are out of hospital, and that their faith can make them ignore medical advice, including taking medication. This highlights the need for education within faith communities about mental illness and treatment, and indeed requests for such information were made by a number of different faith groups during the consultations around this Plan.

A project to help break isolation among the refugee community is the Hounslow refugee allotment group, jointly run by the Refugee Council and West London Mental Health Trust, and running till July 2011. Gardening and cooking together helps people share health issues and cultures, increase language skills, enjoy the outdoors and relax, while expertise from their countries of origin is utilised in a way that also helps adjustment to a new way of living. The group held a food event in 2009, visited by 170 local people, which showcased the enriching cultures and positive contribution that refugees bring to the UK. The group has now published its own recipe book.

The Heathlands Wellbeing Partnership has a record of outreach success, with health events, e.g. provision of information, testing of blood pressure and cholesterol, tied in to mosque open days. The aim of the project is to improve the wider health and wellbeing of the local population by increasing awareness of and access to related local services. The partnership held a health and wellbeing event in 2009 in conjunction with mosque open days with 1500 people attending the health and wellbeing area. This received positive feedback from both the individuals and organisations that attended. The event led to referrals to services present such as the stop smoking service and fire safety checks. Work is under way to see if this approach might be extended to other faith groups.

Hounslow will be participating in the Increasing Access to Psychological Therapies programme. This will focus on people in disadvantaged groups who have been more excluded from talking therapies, and this will include many people from Black and minority ethnic groups.

Service providers within Hounslow are increasingly looking to be aware of the needs of Black and minority ethnic communities, as just four examples show:

- Age Concern Hounslow focuses on connecting people by means of its multicultural and community-based Active Age Programme; its main

agenda is psychological wellbeing. Black and minority ethnic outreach is an integral part of its information and advice service, with the first Somali speaker now on board (see developments in section below).

- EACH works in 10 local community languages including Polish, Somali and the Southeast Asian languages. It offers an inclusive service and can also provide culturally sensitive services where needed. It supports service users who want to set up self-help groups and peer support, including Asian men's and women's groups.
- At the Volunteer Centre Hounslow around 45% of all volunteers are from a Black and minority ethnic background, and around 60% of those receiving volunteer support are.
- Anchor Counselling provides talking therapy within Hounslow Primary Care for all adults, with therapists who can deliver in most South Asian and many European languages, and who are experienced in working with refugees.

Happy Soul Festival is an annual event in southwest London that showcases Asian and Black film, arts and music, and explores wellbeing and mental health issues. Events are usually free to attend, and are designed to raise awareness and challenge stigma. As part of this Plan, Hounslow is investigating the possibility of participating in Happy Soul 2011 (see Action Plan).

#### **4. Good work, good workplace**

While some initiatives aim particularly to get or sustain paid work, good work can also be used to refer to a range of meaningful activities, including volunteering, studying and training. Good quality work has very significant benefits for mental health and there is high quality evidence that:

- supporting people with common mental health problems back to work through primary care is effective
- supported employment programmes (e.g. individual placement support programmes for people with mental health problems) are much more effective than pre-vocational training (e.g. 'preparing for work courses').<sup>37</sup>

Even amongst those who are employed in Hounslow, a disproportionately high number are in low-paid jobs, as discussed above. Targeting low-paid and

minimum-wage employment could contribute significantly to reducing health inequalities: people in low-paid jobs are much more likely to experience working conditions that damage mental health.<sup>38</sup>

The public sector provides a large number of Hounslow's jobs. In 2009 NHS Hounslow was awarded 'Employer of the year' in the category 'Health and Social Care' by the Education Business Partnership Awards. Remploy has been commissioned by the borough to deliver the Leading by Example project. This will increase access to employment in the four largest public sector bodies (London Borough of Hounslow, NHS Hounslow, West London Mental Health Trust and the West Middlesex University Hospital) for people with learning disabilities and those in the care of community mental health teams. These two groups have historically been the most excluded from the workplace. The 12-month project begins in September 2010.

### **Support to work**

A vocational adviser from Twining Enterprise is providing employment services to people with mental health needs in the west of the borough, aiming to identify individuals attending GP surgeries and work together to assist retention or return to work. This service looks to integrate vocational and psychological support in order to start recovery as early as possible

Each of Hounslow's community mental health teams includes an integrated vocational adviser, providing individual placement and support for people with longer-term mental health difficulties and their employers. In 2009/10 157 service users accessed support from these Twining advisers and 26 were successfully supported to gain and maintain meaningful activity. Eight clients gained employment, and out of 16 clients employed at the start of the period 13 were still in work at the end, a retention rate of 88%. An adviser also visits the acute psychiatric wards at Lakeside once a fortnight to help people preserve their work or student roles while they are unwell.

Similarly, there is a VIEWS supported employment project at Feltham Open Door day centre. At the Castle Centre there is keen awareness of the link between day services and employment services, and the need to break down barriers so that people can move on. The centre has created Compass, a community information telephone service, run by people in secondary mental health services, that can serve as a transition job if they choose to move on to paid or voluntary work in

the community. Many other services exist, including EACH, which supports recovering alcoholics into paid work and Leaders, who provide support for people with disabilities, including mental health difficulties and learning disabilities, to find and keep open paid employment. Leaders focus on matching the skills of the client with the needs of local employers. Its dedicated retention service provides time unlimited support to help people stay in work.

### **Volunteering**

Volunteering has many benefits for both the giver and the recipient of the time and talents shared. It can be a step on the path to paid work or a way to give to the community. Volunteer Bureau Hounslow provides volunteering opportunities for all as well as supported volunteering, a Lottery-funded 3-year project that successfully placed 250 volunteers in its first 36 months. The project has been an overall success in terms of recruiting, registering, placing and supporting volunteers, and socially including volunteers in the local community through volunteering. It is for all who need support, including users of mental health services and people with a physical or learning disability, and is used by organisations such as Twining, EACH and Leaders to provide a step on the recovery way. Individuals can add in extra wellbeing by volunteering in a gardening or environmental project, or one that connects them directly with other citizens or with opportunities for learning.

### **The healthy workplace**

Promoting mental wellbeing at work can achieve improved job satisfaction for employees as well as considerable savings for employers. Effective workplace mental health promotion combines individual and organisation level interventions (e.g. building capacity to deal with stress and also addressing sources of stress) and integrates mental health promotion into all policy and practice.

A comprehensive effective workplace mental health programme should include:

- recognition (i.e. improving mental health awareness at work)
- prevention (i.e. addressing key influences on mental health)
- awareness training (e.g. BeyondBlue, mental health literacy, positive steps)
- access to help (e.g. psychological therapies)
- effective rehabilitation (e.g. maintaining contact with employees off sick, gradual return to work, fitness notes).

Specific interventions recommended by the National Institute for Health and Clinical Excellence include:

- flexible working
- implementing HSE Stress Management Standards
- training for line managers
- primary care support for small and medium sized enterprises.<sup>39</sup>

Beginning work to assess and support improving mental wellbeing in local workplaces is being taken forward as a goal in the Action Plan. Many employers are already leading on this, and there is much to learn and share.

## **5. Keep learning**

The effects of schooling on health are generally greater than the effects of adult learning. However, improving literacy and participation in adult education influences self-efficacy (belief in one's capacity to succeed at tasks) and is associated with small but significant changes in health and social outcomes. There is some evidence that participation in adult learning has greater health benefits for those with less education. Women with low literacy have a five-fold increased risk for depression, while for both men and women, non-readers, with poor basic skills, are less likely to participate in community activities, which may in turn impact on mental wellbeing.

Examples of provision include vocational and non-vocational courses and basic skills e.g. literacy and numeracy. Prescription for learning links primary-care patients with learning opportunities.<sup>40</sup>

### **Whole community approaches**

In areas of multiple deprivation, whole community approaches may need to be developed to strengthen the psychological resources, support and opportunities that can reduce the links between community, poverty and poor educational outcomes.<sup>41</sup>

In Hounslow the social housing area around the Hub community centre (Beavers and Meadows estates) has been identified as such a place, with much unemployment, isolation and depression. Here the Well London project focuses on healthy eating, physical activity, mental wellbeing, open spaces, and culture and tradition. With Groundwork, a community vegetable garden has been planted and

tended by local volunteers. With Imagine, mental health awareness raising is being carried out throughout the community. Volunteers from the area – the Well London Delivery Team – choose and co-organise events and courses and encourage their neighbours and friends to take part.

'Changing minds on the Beaver's estate', part of this programme, is recruiting and training local people with direct experience of mental ill health to deliver mental health awareness training in the target community. It aims to empower people to use their experience to help reduce the stigma and discrimination faced by many people with mental health problems and promote understanding of mental health and wellbeing. So far the training has been delivered to Sure Start, Twining Enterprise (on severe mental illness), Home Start, Global Exchange and community groups. Support is also offered for stress management and confidence building. The training acts as both education and early intervention, showing people they can learn to manage or perhaps triggering a referral on. Well London only runs till 2011 but it aims to make its work as sustainable as possible. This is achieved by educating organisations in the area so they have a more informed understanding of mental health and related topics. There is still work to be done to reach out to the residents and Imagine is exploring ways to reach out to people.

### **Raising awareness of mental health issues**

Mental health awareness raising will promote wellbeing, decrease stigma and increase connection. While sharing views in the community around this Plan many groups requested mental health awareness training, including education about severe mental illness. These included an Asian older persons' group, community providers of physical health services, third sector providers of early years services, voluntary organisations and Volunteer Bureau Hounslow, Council officials, mental health staff for faith communities (to reach Black and minority ethnic groups) and for service users (to promote recovery), carers groups, police, and staff at public leisure facilities.

The TASHA Foundation in Hounslow works with carers of people with mental illness, providing support groups, counselling and training. Responding to carer needs, including skills development, TASHA is piloting inhouse training based on the NHS-supported CBT programmes Living Life to the Full and Five Areas. TASHA Foundation has received a grant to launch the delivery of online training courses to the local community that will support people into employment.

Hounslow Community Advocacy Service, run by Mind in Ealing and Hounslow, supports people with mental health issues to access services and to raise their concerns about the treatment they receive. Information about how healthy lifestyles can increase wellbeing is also provided.

### **Learning for all**

Lifelong Learning at London Borough of Hounslow provides learning for all, with additional support on request in mainstream classes as well as targeted programmes. These include daily living skills support or exercise for older learners that are taken out to day centres and nursing homes. People with learning disabilities have their own programme, progressing towards independent living, and including drama to look at such issues as depression and anxiety. Beauty classes are provided for inpatients at Lakeside, both improving wellbeing on the ward and, in some cases, leading people on to obtaining an NVQ qualification, contributing to their recovery process.

Age Concern Hounslow has long offered information and advice, but in 2009 it won a contract from London Borough of Hounslow to expand this to include an online directory of health and wellbeing information for everyone, irrespective of age, and to include support for people to use computers to access this. Mental health service users and people with learning and physical disabilities, as well as other health and wellbeing organisations, will all be partners in helping to run the service (see Action Plan), as will colleagues at Age Concern Feltham following merger and the creation of a borough-wide organisation from October 2010.

'Learning for all', echoing 'Keep learning' from the five ways to wellbeing where we started, seems an appropriate place to stop writing about what we are doing now and turn to what partners and co-owners of this Plan are committed to carrying forward. For this, please see the Action Plan that accompanies this Plan. As discussed above, achievement will initially be acknowledged once the action has taken place, as currently we have no baseline wellbeing measurements to be able to measure wellbeing more directly – though we do have goals to begin to address that. The Action Plan is deliberately high leverage and much of it is the setting into context of current work, as well as the development of new links. We have enthusiastically plundered work that is ongoing and planned within the borough to find and develop goals that will support the thinking of the Plan, and make it come alive.

## Partners in the Plan

Those listed have directly participated in the creation of this Plan. Many more, and the organisations they represent, have expressed their support for its goals and aspirations.

All partners, co-owners and supporters of this Plan are committed to providing services and activities that include all citizens regardless of race, religion, ethnicity, gender, age, physical or learning disability, physical or mental illness, or sexual orientation.

Jeri Appiah Chief Executive Mind in Ealing and Hounslow	Joan Conlon Preventing Violent Extremism & Community Cohesion Officer	Alison Hoble Service User Involvement Manager, Hounslow Service Delivery Unit, WLMHT
Lubna Aslam Assistant Joint Commissioning Manager – Mental Health & Learning Disabilities LBH and NHS Hounslow	Sanda Connolly Service Development Officer, Hounslow Library	Susan Hodgson Women and Girls Sport Development Officer, LBH
Phill Austen-Reed Public Health Manager (Adults & Older People), LBH	Dr Annabel Crowe Hounslow GP	John Hylton Feltham Open Door
Inspector Manpreet Bains Media and Communications Officer, Metropolitan Police	Hazel Daniel Senior Joint Commissioning Manager (Mental Health) LBH and NHS Hounslow	Sonia Hylton Family Support Team Leader, Sure Start Hounslow
Alison Baker Non-Executive Director NHS Hounslow	Patricia David Hounslow Youth Counselling Service Manager	Sagal Jama Health and Well Being Development Officer, CVS Hounslow
Jennifer Banks-Smith Health Promotion Manager Hounslow and Richmond Community Health Care	Audrey D'Costa CEO, TASHA Foundation	Mimi Konigsberg Director, Community Services, LBH
Mohinder Batra General Secretary, Retired Members Association (Asian Elders), Heston	Jenny Devine IAPT Employment Support Coordinator Hounslow Twining Enterprise	Navroop Kullar Assistant Director, Imagine London
Amar Bhoobun Community Development Worker, WLMHT	Alex Doig Consultant in Child and Adolescent Psychiatry, WLMHT	Jason Lowery Twining Enterprise
Nicky Bitar Employment Opportunities Manager, Community Services	Vikas Dubey Senior GIS Analyst NHS Hounslow	Honest Lubimbi Nurse, Home Treatment Team, Hounslow Service delivery Unit, WLMHT
Mark Blomfield Joint Commissioning Manager, Supported Housing, Community Services, LBH and NHS Hounslow	Derek Duggan Hounslow LINK Officer	Lucy McGee Director of Communications, WLMHT
Sharon Brookes Service Manager, WLMHT	Inspector Nathan Fane Metropolitan Police	Liz Meagher, Head of Lifelong Learning, LBH
Eric Carrington Carer / Mental Health Carer Carerspace Number 10 Project	Dr Garcha Hounslow GP	Members of Canal House
Liam Concannon Service Planning Manager LBH	Dr Prad Ghosh Consultant Psychiatrist, Feltham Community Mental Health Team	Members of Heston and Isleworth Old Peoples Club
	Kirsty Harris Director, Speak Out in Hounslow	Members of Retired Members Association (Asian Elders)
	Stephen Hawkins Chief Officer, Age Concern Hounslow	Members of Service User Involvement, Hounslow
	Sonja Heaslip Happy Soul Festival Admin Coordinator	Members of Speak Out in Hounslow
		Members of TASHA Carers Group

Dugald Millar  
Assistant Director,  
Partnerships &  
Commissioning, Community  
Services, LBH

Sarah Morris-Bray  
Project Manager, Volunteer  
Support Project, Volunteer  
Bureau Hounslow

Jim Mullany  
Senior Joint Commissioning  
Manager – Older People and  
Physical Disability, LBH and  
NHS Hounslow

Taz Nagra  
Director, Volunteer Bureau  
Hounslow

Deborah Newcombe  
Project Officer,  
Commissioning Support for  
London

Eddie Noble  
Cascata Communications  
Limited, Web Developer for  
Help in Hounslow and Stay  
Healthy, Stay Active

Cathy Page  
Carer Support Worker,  
TASHA Foundation

Chris Pelletier  
Assistant Joint  
Commissioner /  
Social Inclusion &  
Employment  
LBH and NHS Hounslow

Lynne Phillips  
Leisure Client Manager, LBH

Mark Raven  
Director, Star Centre  
Dr Mobin Salahuddin  
Chair, Hounslow Jamia  
Mosque

Natalie Rimington  
Mental Health  
Accommodation Project  
Manager, WLMHT

Dr Craig Ritchie  
Hounslow Memory Clinic

Lopita Sen  
Director, Anchor – The  
Counselling Practice

Clement Smith  
Canal House

Surjit Sonik  
Health Trainer Coordinator,  
LBH

Hilary Soobhany  
Health Visitor Lead for  
Mental Health, NHS  
Hounslow

Farida Stanitzkai  
Refugee Council

Vicki Taylor, Assistant Head  
of Service, Lifelong  
Learning, LBH

Jo Valks  
Community Sports  
Development Team

John Viner  
Service User Involvement  
Team, Hounslow Service  
Delivery Unit, WLMHT

Barry Watson  
Project Officer, Groundwork

Natalie Waterfield  
Head OT, Hounslow Service  
Delivery Unit, WLMHT

Sonny Wilson  
Carer

Dr Varendar Winayak  
Hounslow GP

**KEY**

IAPT: Increasing Access to Psychological Therapies

LBH: London Borough of Hounslow

WLMHT: West London Mental Health Trust

## Notes

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- <sup>1</sup> nef (2009) *Five Ways to Wellbeing* London: new economics foundation  
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