



Waltham Forest
Health and
Wellbeing Board

LONDON
BOROUGH
OF
WALTHAM
FOREST

MENTAL WELLBEING STRATEGY 2018-21

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Executive summary

The Waltham Forest Health and Wellbeing Strategy calls for an increased focus on the promotion of population mental wellbeing and the prevention of mental health conditions through early intervention where people are struggling with their mental wellbeing. The North East London Sustainability and Transformation Plan also calls for an increased focus on prevention. This strategy sets out our approach to delivering on these aims.

Although the relationship between mental health conditions and mental wellbeing is complex, mental wellbeing can be simply viewed as the positive end of the mental health spectrum. It comprises a positive state of mind and body that includes both feeling good and functioning well. In Waltham Forest there is a positive picture in terms of the mental wellbeing of our population. We are better than the London average for all four of the wellbeing measures reported annually by the Government; life satisfaction, feeling life is worthwhile, happiness and anxiety. In line with the country as a whole these indicators have all improved significantly in recent years.

For children and young people, the picture is less positive. Positive satisfaction with life among 15 year olds in the borough in 2014/2015 was lower than the London average and it is estimated that a higher proportion of 5-16 year olds in the borough have a mental health condition than the England average. Furthermore, children in Waltham Forest experience poorer early social and emotional development, behavioural development and language development compared to other London boroughs.

In order to develop a mental wellbeing strategy we have engaged widely with stakeholders including mental health professionals and other front-line staff, commissioners, service users and residents from across the borough. The views and information we have collected have informed the key themes and priorities we have identified, the recommendations and the summaries of what is happening across all sectors in the borough. We have also sought to incorporate relevant local, regional and national policy into the strategy wherever possible. Five key themes were identified which are:

- Tackling the stigma and discrimination around mental health conditions.
- Promoting evidence based ways of improving mental wellbeing.
- Tackling the wider determinants of mental ill-health.
- Early intervention where people are struggling with their mental health.
- Improving the mental health and wellbeing in the early years and young people

Detailed action plans will be developed to take forward actions under each of these themes, however key actions are summarised below.

Stigma and discrimination

We will deliver an intensive local campaign to tackle the stigma and discrimination that exists around mental health conditions. We have recently successfully bid to become the first funded Time to Change Hub in London. This will enable us to access funding and support, training and resources from the national Time to Change campaign to bring together a new local partnership to take action in this area. We will aim to identify and train a bank of 'Time to Change' champions who will communicate their experiences of living with mental health conditions back to their communities and the general public in order to challenge the negative stereotypes that so many people still hold. This will be one of the key priorities for delivery during year one of the strategy.

Promoting evidence based ways of improving mental wellbeing

We will work to promote knowledge and understanding of evidence based ways of improving mental wellbeing in the population. The Five Ways to Wellbeing is an evidence based set of actions people can take to improve their mental wellbeing and we will begin to promote these alongside other health promotion messages using social and printed media, public events and through training front-line staff to deliver the information.

Tackling the wider determinants of mental ill-health

The strategy identifies five key determinants of mental wellbeing that we will aim to mitigate the impact of on our population. These are:

- economic wellbeing including poverty
- employment & workplace
- housing and homelessness
- social capital and social isolation
- access to green space and the natural environment

The Local Authority is taking steps to alleviate the impact of the social, physical and economic environment on residents' health including through the new Local Plan, Housing Strategy and others. We are also delivering a social prescribing service for residents who can benefit from support with these issues from local statutory and voluntary sector services and are delivering work to reduce fuel poverty and social isolation.

Early intervention where people are struggling with their mental health

Providing support at an early stage for those who are struggling with their mental health is key to preventing more serious mental health problems developing further down the line. We have worked with Local Authorities and CCGs across London to fund the development of a London Digital Mental Wellbeing Service, called *Good Thinking*. This provides online support for people with low level mental health problems such as stress, anxiety, sleeping problems and others. We will continue to support the work to develop, promote and evaluate this service.

Another important aspect of our early intervention work is to train front-line staff in health and other services across the borough, including those working with children and young people to

identify when people are struggling with their mental health and provide basic advice and signposting to services. Around 200 staff have been provided mental health awareness training such as Mental Health First Aid over the last two years and we will continue to identify and deliver opportunities for training.

There are many services across the statutory and voluntary sectors for people with common mental health conditions including Talking Therapies, community based counselling, exercise on referral groups, health walks, social groups, service user support groups and others but there is a need to improve coordination and awareness of these services on offer.

Improving the mental health and wellbeing in the early years and young people

The early years and childhood are crucial times for setting people up to enjoy good mental wellbeing for life. Secure attachment to caregivers promotes a child's self-esteem and resilience, and influences the way in which the child relates to and behaves with others. It gives the child an internal working model of the world as a safe and secure one in which the main caregiver will respond to its needs. There are many services that support parents of young children across the borough including Children and Family Centres, the Health Visiting service and others. We are working towards UNICEF Baby Friendly Accreditation which is an evidence based approach to increasing breast feeding rates, which promotes strong attachment and the development of good physical and mental health.

Schools and other educational settings have been shown to provide a good opportunity for mental health promotion and Waltham Forest has a strong local Healthy Schools programme with most schools in the borough participating. Emotional health and wellbeing is one of the core strands of this programme and we will also be developing an equivalent programme for Early Years Settings including childminders and nurseries.

Summary

Mental health and wellbeing can be maintained, improved and diminished just like physical health. This strategy highlights our focus on improving mental wellbeing and preventing mental health conditions from developing before they become serious problems. In doing so we can enable our residents to contribute to their community, develop meaningful social networks and relationships, and reach their full potential.

1.0 Introduction

Mental ill-health represents the largest single cause of disability in the UK (Mental Health 5 Year Forward View). People can be affected by mental health problems at any point in their lives; including new mothers, children, teenagers, adults and older people. It is estimated that one in four adults will suffer from a mental health problem in any given year, equivalent to almost 53,000 people in Waltham Forest.

This strategy sets out our approach to improving population mental wellbeing, which evidence shows will help prevent mental health problems from developing further down the line. We want to support residents to look after their own mental health, just as many do for their physical health, by engaging in mentally healthy behaviours such as social activities and physical activity. There is now a strong evidence base to guide us in terms of how mental wellbeing can be improved and it is known that initiatives to improve wellbeing can be both cost-effective and popular. Tackling the stigma and discrimination around mental health is also a vitally important part of this work as we know this prevents people from talking about, or seeking help for, their mental health and wellbeing. The strategy also highlights how we aim to support residents early on, when they need support, in order to prevent low level mental health problems developing into more serious conditions. The delivery of effective mental health services is beyond the scope of this strategy, as are services to support the recovery of people from serious mental illness. However, good mental wellbeing is something everyone can achieve regardless of age, gender, socio economic status or mental health diagnosis.

The strategy will deliver the objective of the Waltham Forest Health and Wellbeing Strategy to increase efforts to improve population mental wellbeing and prevent mental illness while the most recent Waltham Forest mental health strategy, Better Mental Health, called for the development of a comprehensive mental wellbeing strategy to be developed for the borough. Mental wellbeing has also been selected as one of four priority areas of work for the Health and Wellbeing Board over the next two years and this strategy will guide work to deliver on that priority.

Successful approaches to promoting population mental wellbeing involve empowering people and communities to support themselves and to be able to make meaningful decisions about their lives and local neighbourhoods. This resonates strongly with a number of Council programmes, particularly the Creating Futures corporate strategy and, before that, the Think Family Strategy which aims to empower people, families and communities by developing skills and building relationships so that families are able to manage all the complexity and challenges of life in the 21st century. In short the approach is about enabling people to help themselves and each other.

In summary, mental health can be maintained, improved and diminished just like physical health. To improve population mental health we will focus on improving mental wellbeing. In doing so we can enable our residents to enjoy a good quality of life, making contributions to their communities, developing meaningful social networks and relationships, and reaching their full potential.

1.1 Strategy development

In order to develop the strategy, we held a Thrive LDN workshop in September 2017 for health professionals, commissioners, wider Council staff, service users and the general public where we listened to thoughts and ideas about how we can improve mental health and wellbeing in the borough. The box below summarises some of the discussions at the workshop.

Waltham Forest Thrive LDN workshop

Thrive LDN is a new city wide mental health campaign backed by the Mayor of London. Waltham Forest supported the campaign by hosting a large workshop for mental health and wellbeing stakeholders across the borough in September 2017. The discussions at the event centred around the key themes of the Thrive LDN campaign and have been used to inform this strategy. These themes are:

- A city where individuals and communities take the lead
- A city free from mental health stigma and discrimination
- A city that maximises the potential of children and young people
- A city with a healthy, happy and productive workforce
- A city with services where and when people need them
- A zero suicide city

A number of key messages came from the workshop discussions. Firstly, it was clear that there is still a great need to work to reduce the stigma and discrimination that surrounds mental health. Examples of people unable to share their issues with work colleagues, and stigmatising views experienced from family members and even health professionals were heard. The issue of cultural differences in understanding and accepting mental health problems was also highlighted as important.

The important role of the community and voluntary sector was also made clear, with community groups of all types and sizes important. It was felt that despite challenges faced by the community and voluntary sector in the borough, Waltham Forest benefits from strong communities and these can be utilised better to support population mental wellbeing. Finally, the importance of consulting and engaging with communities at every opportunity was agreed and that this has to be real and meaningful engagement where everybody has an opportunity to influence events in the borough and their communities.

Workplaces are seen as an important setting for promoting mental wellbeing and reducing risks to mental health, although the number of small businesses in the borough makes engaging a large proportion of the workforce difficult. It was acknowledged that the Council and key partners need to be taking a lead on this issue, particularly in terms of reducing stress and the stigma of mental health.

Finally, it was thought that there still needs to be better support and education for children and young people on understanding and dealing with their emotions and wellbeing and work to build their self-esteem and resilience to cope with everyday stresses such as exams, relationships and family life. Mindfulness techniques should be taught at an early age, particularly in schools, and mental health awareness among school staff could be improved through training and resources.

1.2 Financial landscape

This strategy has been developed at a time of financial constraint. Organisations across the borough in every sector have had to make difficult decisions about where best to direct resources and how to use funding as effectively as possible. While there is no new funding attached to this strategy to improve mental wellbeing, we will need to ensure that existing resources are used as effectively and efficiently as possible. This will include ensuring that mental health and wider wellbeing services are as joined up as possible with no duplication of activities. We will also explore opportunities for bidding for new funding to support the strategy objectives wherever possible.

2.0 Aim of the strategy

The aim of this strategy is to promote population mental wellbeing in Waltham Forest. It will do this by supporting residents to improve and protect their own wellbeing and by reducing risk factors for poor mental wellbeing and mental health problems.

2.1 Objectives

- Improve awareness of mental health issues among the general population to reduce stigma and discrimination.
- Develop understanding across the statutory, private and voluntary sectors in Waltham Forest of the key wider determinants of mental health and wellbeing and identify opportunities for work to promote good mental wellbeing and reduce risk factors for poor mental health.
- Facilitate the provision of information and support at an early stage for people who are experiencing low level mental health problems through health, local authority and voluntary services.
- Propose evidence based approaches to promoting mental wellbeing in the population including the evidence based Five Ways to Wellbeing and the promotion of good sleep patterns.
- Propose standardised measures and tools for measuring mental wellbeing and evaluating the impact of services and projects across the borough.

3.0 Background

3.1 What is mental wellbeing and why is it important?

Mental wellbeing comprises a positive state of mind and body that describes both feeling good and functioning well. It represents a positive state of holistic health, including a person's sense of happiness, connection with other people, communities, and the wider environment. It involves a subjective component, a self-evaluation of living a meaningful and satisfactory life, and an objective component of whether basic living needs are met¹. The UK Faculty of Public Health² has stated that good mental wellbeing includes the capacity to:

- Realise one's abilities, live a life with purpose and meaning, and make a positive contribution to the community.
- Form positive relationships with others, and feel connected and supported.
- Experience peace of mind, contentment, happiness and joy.
- Cope with life's ups and downs and be confident and resilient.
- Take responsibility for oneself and for others around you.

Positive mental wellbeing is an important aspiration in its own right, contributing to educational attainment, economic success, fostering community cohesion and quality of life, but it is also important as a means of preventing mental ill-health. While the relationship between mental wellbeing and mental health problems is complex, it is accepted that promoting mental wellbeing at a population level will prevent the development of mental health conditions further down the line. With the burden of mental ill-health a significant problem across the country, prevention is a crucial element of efforts to tackle this issue and there have been repeated calls for an increased focus on prevention. Alongside efforts to promote positive mental wellbeing in the population, this will also require targeted actions for those groups at high risk of poor mental health and effective early intervention for those who are struggling.

Mental wellbeing is a positive state of mind and body that describes both feeling good and functioning well.

Some of the key wider determinants of mental health and wellbeing are described in detail in section 5. However, the experiential factors highlighted in table 1 are known to affect people's mental wellbeing at individual, social and environment levels.

Table 1.

<i>Level</i>	<i>Adverse factors</i>		<i>Protective factors</i>
Individual attributes	Low self-esteem	↔	Self-esteem, confidence
	Cognitive/emotional immaturity	↔	Ability to solve problems and manage stress or adversity
	Difficulties in communicating	↔	Communication skills
	Medical illness, substance use	↔	Physical health, fitness
Social circumstances	Loneliness, bereavement	↔	Social support of family & friends
	Neglect, family conflict	↔	Good parenting / family interaction
	Exposure to violence/abuse	↔	Physical security and safety
	Low income and poverty	↔	Economic security
	Difficulties or failure at school	↔	Scholastic achievement
	Work stress, unemployment	↔	Satisfaction and success at work
Environmental factors	Poor access to basic services	↔	Equality of access to basic services
	Injustice and discrimination	↔	Social justice, tolerance, integration
	Social and gender inequalities	↔	Social and gender equality
	Exposure to war or disaster	↔	Physical security and safety

3.2 National and local policy context

The promotion of mental wellbeing is integral to a wide range of national, regional and local strategies and policies. We are ensuring that our plans are aligned with the national, regional and local aims. Below is a summary of the key strategies and policies that have informed this strategy:

3.2.1 National

- **No Health without Mental Health (Department of Health 2010):** A cross-government mental health strategy for people of all ages³ which includes core outcomes that more people will have good mental health. The strategy has six shared outcomes:
 - More people will have good mental health
 - More people with mental health problems will recover
 - More people with mental health problems will have good physical health
 - More people will have a positive experience of care and support
 - Fewer people will suffer avoidable harm
 - Fewer people will experience stigma and discrimination
- **New Horizons in Mental Health⁴ (Department of Health 2010):** brings a new focus on the overall mental wellbeing of the population, and to prevention and early intervention. It also aims to strengthen the focus on eradicating the stigma and social exclusion that is frequently associated with mental health problems. Equally, New Horizons recognises the impact of wider determinants of health and wellbeing and consequences on mental ill-health and call for co-ordinated action across the system.

- **Marmot review⁵ (Department of Health 2010):** recognised the relationship between health inequalities and impact on mental health and wellbeing. The review called for addressing the wider determinants of health that also impact on mental wellbeing. The recommendations included:
 - Enabling all children, young people and adults to maximise their capabilities and have control over their lives.
 - Creating fair employment and good work for all
 - Ensuring a healthy standard of living for all
 - Creating and developing sustainable places and communities

3.2.2 Regional

- **Thrive London** is an initiative led by the London Health Board (LHB). The LHB brings together local government, health partners and the Mayor of London to provide strategic political leadership for London on health issues. Thrive London has 6 key areas of focus that contribute to improving mental wellbeing of Londoners. See section 1.1, Strategy Development for a summary of the Thrive LDN areas of focus.
- **Sustainability and Transformation Plans (STPs)** are a new planning framework for NHS services. The East London Health and Care Partnership (ELHCP) Sustainability and Transformation Plan operates across 7 boroughs namely Tower Hamlets; Havering; City & Hackney; Newham; Redbridge, Barking & Dagenham and Waltham Forest. Mental Health is a cross-cutting theme across all key priority areas with a specific mental health work programme including the promotion of mental wellbeing.

3.2.3 Local

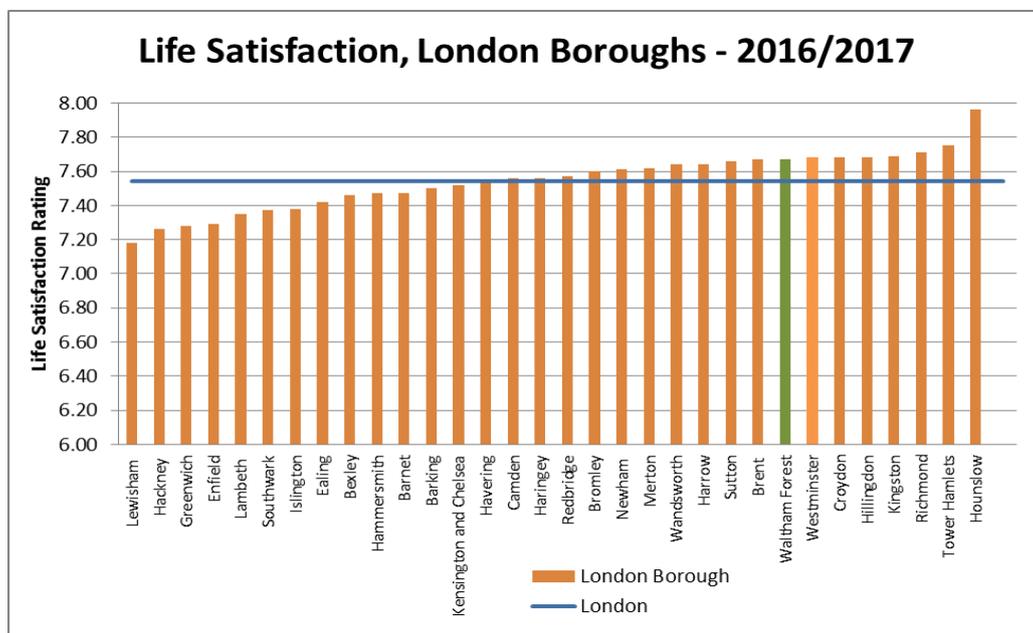
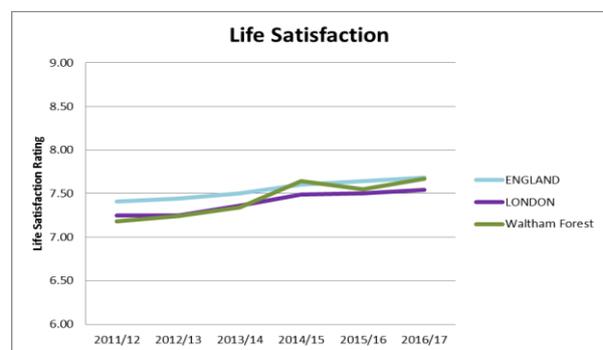
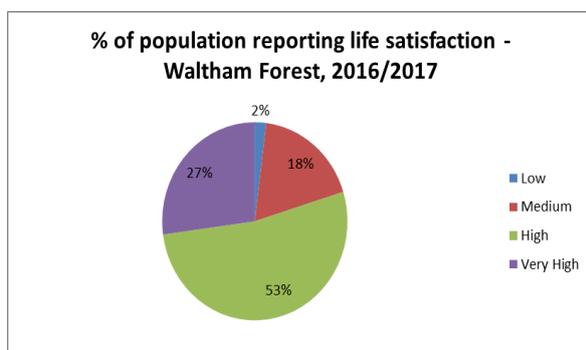
- **Waltham Forest Health and Wellbeing strategy⁶** sets out six key principles for working and one of these is to ensure ‘parity of esteem’ between mental and physical health and to deliver an increased focus on population mental wellbeing in addition to delivering services to treat people with mental health conditions. Unsurprisingly therefore, mental health and wellbeing is a theme that runs right through our health and wellbeing strategy. The strategy aims to deliver three high level outcomes:
 - The Best Start in Life
 - Healthy, Happy, Longer Lives
 - Thriving Maturity and Protected Communities
- **Waltham Forest suicide prevention strategy** is being developed alongside this strategy and the two strategies work together to prevent onset of mental illness and to promote mental wellbeing for the residents. People experiencing mental health problems are at an increased risk for suicide. By improving mental wellbeing we are also reducing suicide risk.
- **CAMHS Transformation Plans Waltham Forest** CCG is working with partners to develop local transformation plans, setting out what they want children and young people’s mental health services to look like by 2020 and how they intend to get there. We are currently half way through the Waltham Forest Child and Adolescent Mental health Transformation Plan 2015-2020. This is refreshed and published annually. This strategy links to local transformation plans in promoting mental wellbeing for children and young people.

3.3 The local picture in Waltham Forest

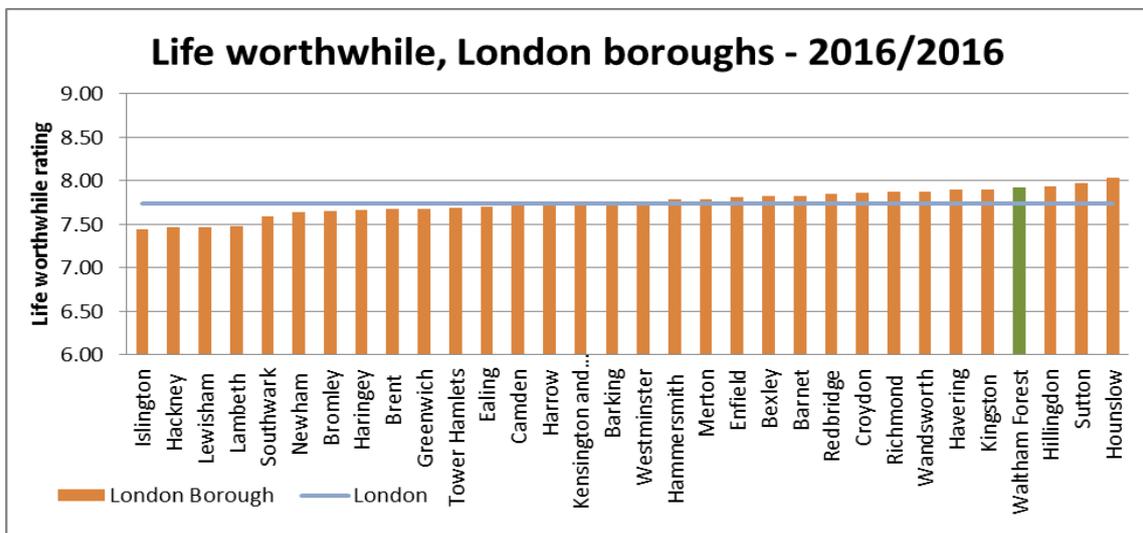
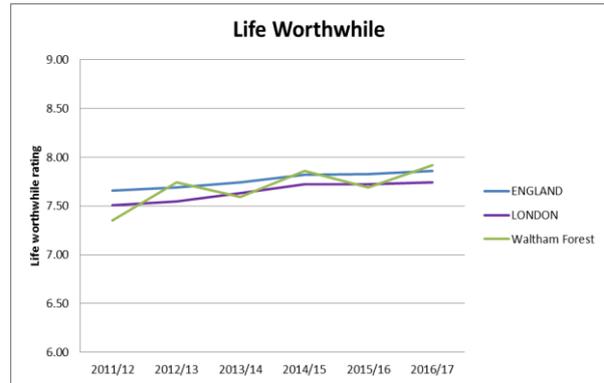
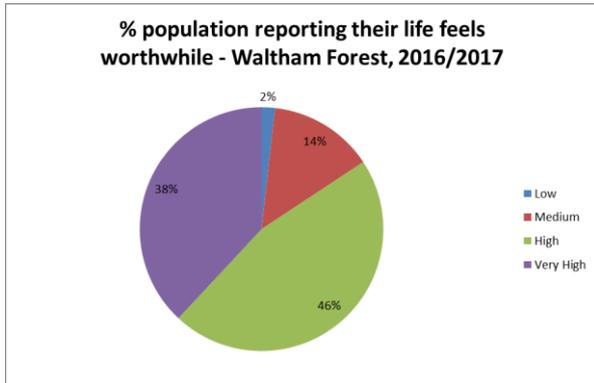
3.3.1 Adult mental wellbeing

Population wellbeing is measured in the Annual Population Survey which allows for analysis at the Local Authority level. It includes questions on four related concepts: life satisfaction, feeling worthwhile, happiness and anxiety. In Waltham Forest, in line with London and national data, life satisfaction, feeling worthwhile, happiness and anxiety have all been improving over recent years (figure 1 – 12). The borough also scored better than the London average for each of these measures, although not all of these were statistically significant. London as a whole generally scores worse than the national average on these indicators.

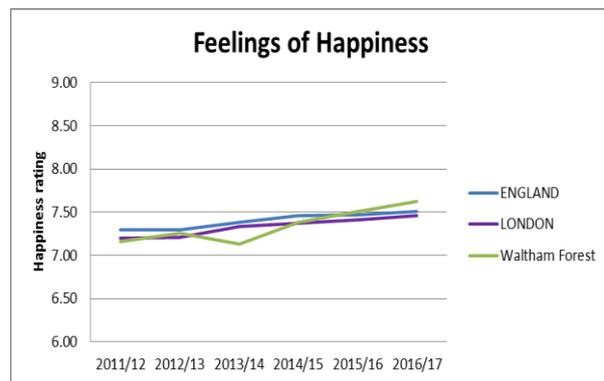
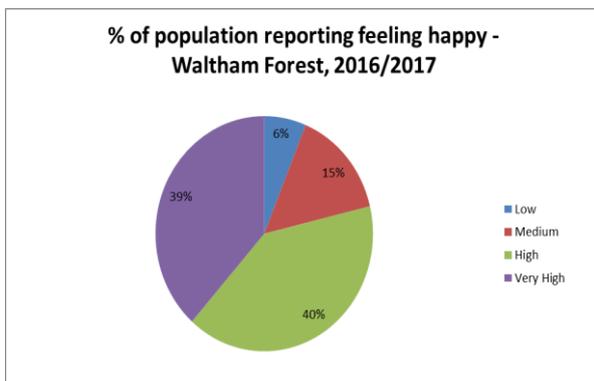
Life satisfaction figure 1-3

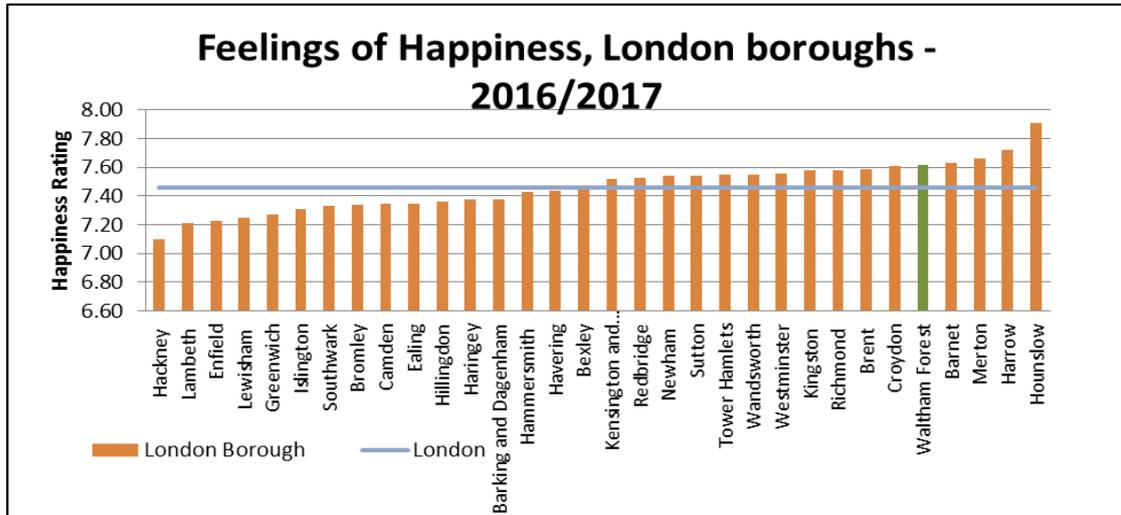


Feeling life is worthwhile figures 4 - 6

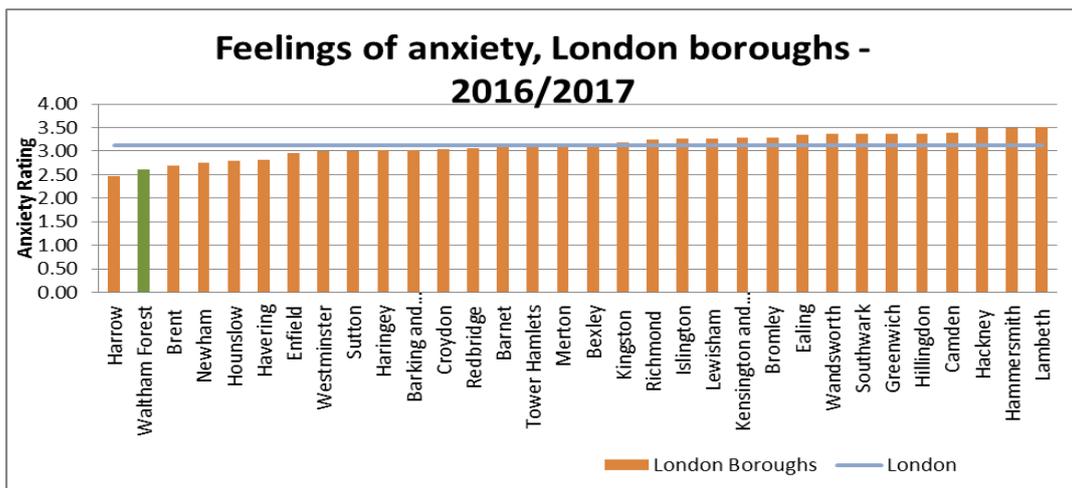
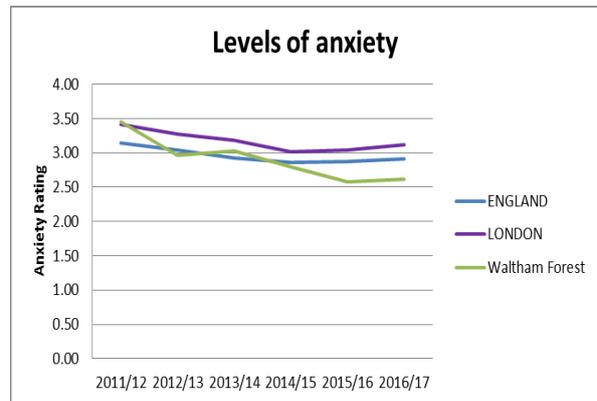
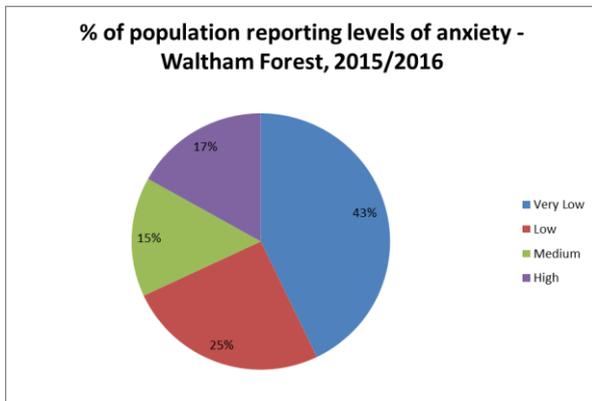


Happiness figures 7-9





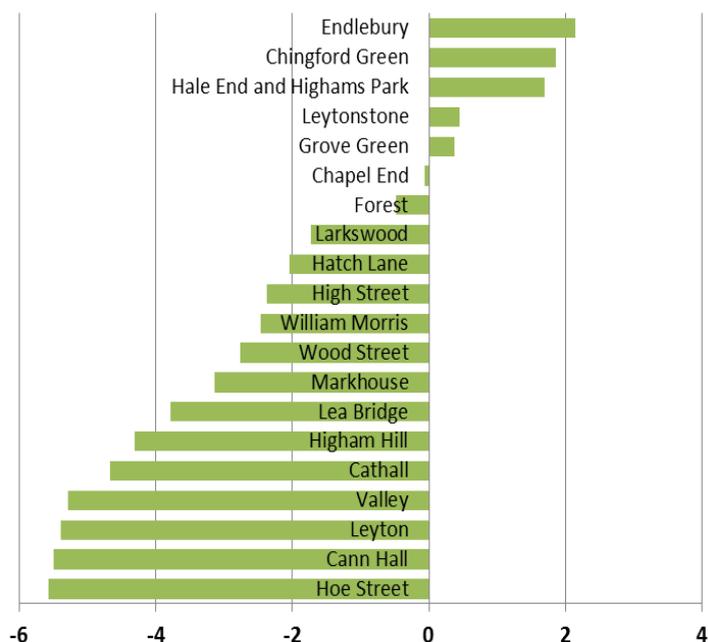
Feeling anxious figures 10-12



Despite this overall positive picture of adult mental wellbeing in the borough, we know that we perform poorly compared to other London boroughs in terms of many of the wider determinants of mental health and wellbeing, particularly economic wellbeing and poverty, poor housing, overcrowding and fuel poverty. The GLA has produced wellbeing scores for all wards in London

based on 12 different wellbeing indicators from 2009-13 data including economic security, crime rate, access to open green space and others. Scores above zero indicate a higher probability that the population will experience better than average wellbeing compared to the national average. In Waltham Forest, 15 out of 20 wards scored negatively, meaning they score lower than average for the wellbeing index (see figure 13 below). Further discussion of the wider determinants of health is provided in section 5.

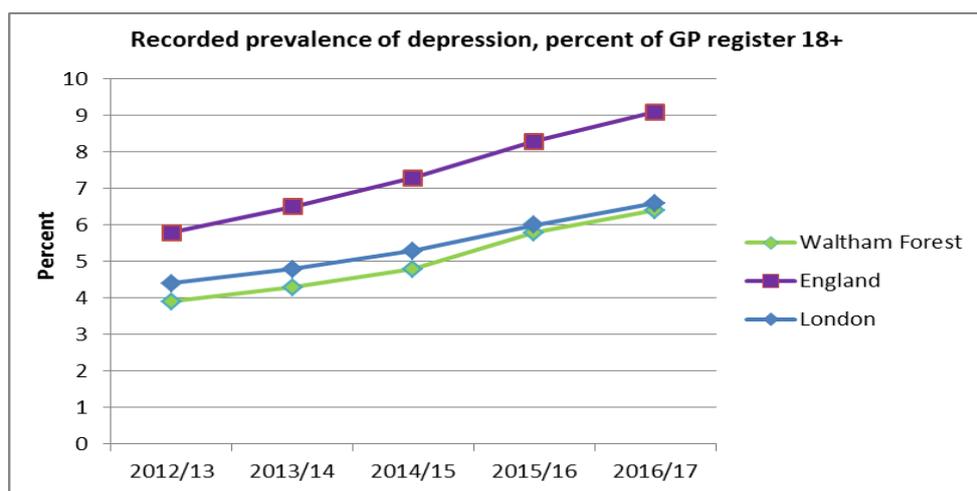
Figure 13



In terms of mental health conditions, the UK has a very high prevalence of mental ill-health with around 1 in 6 people experiencing a common mental health problem in any given week.⁷ In Waltham Forest, GP register data for 2016/2017 suggests that prevalence of depression in the borough is increasing in line with London and national data and is currently 6.4%, which is statistically lower than the London rate of 6.6% and the England rate of 9.1% (see figure 14 below). GP survey data for 2016/17 showed that 12.6% of Waltham Forest respondents reported experiencing moderate to extreme symptoms of depression and anxiety on the day of completing the survey. This was similar to London (12.4%) and lower than England as a whole (13.7%).⁸

However, we know that many mental health conditions will be undiagnosed and PHE estimate that in 2014/15, Waltham Forest had a prevalence of common mental health disorders among the population aged 16-74 of 15.5%. This compares to London at 16.4% and England at 15.6%.

Figure 14



3.3.2 Children and young people’s mental wellbeing

The situation for children and young people in the borough is less positive.

According to the 2015 Children and Young People’s Mental Health and Wellbeing profile from Public Health England, positive satisfaction with life among 15 year olds in the borough in 2014/2015 was found to be lower than the London average (56.9% vs 59.9%). It is also estimated that 9.7% of 5-16 year olds in the borough have a mental health condition, compared to 9.2% in England (PHE, 2015).

A recent report by Dartington Social Research Unit (2017) also showed that children in Waltham Forest experience poor early social and emotional development, poor behavioural development and poor language development compared to a number of other London boroughs where similar studies were conducted. These indicators are predictive of a range of later difficulties including poor mental wellbeing. See table below.

Measure	Description	Waltham Forest	Other London boroughs
Early social and emotional development	Difficulties with an infant or child's ability to calm down; follow the rules; respond to or initiate interactions; cope with sleeping, eating, elimination etc.; develop independence; communicate own feelings and demonstrate empathy.	59%	35%
Behavioural development	Aggressive and non-compliant behaviours exhibited during early to middle childhood.	18%	7%
Language development	Delays in child's attainment of key milestones in relation to their expressive and receptive language development. This includes babbling, vocalising, listening, and comprehension.	16%	7%

6% of children in Waltham Forest are likely to have a Conduct Disorder

These children are:



x2

more likely to leave school without qualifications



x3

more likely to become a teenage parent



x20

more likely to end up in prison

3.4 Groups at risk of mental ill-health

Mental wellbeing is relevant to everyone in the population and anyone can develop a mental health problem, but there are a number of population groups identified as being at increased risk of mental ill-health. The increased risk experienced by these groups is often amplified by the wider determinants of mental health, particularly poverty and low social capital caused by difficulty integrating into communities, prejudice and discrimination. It is important to consider groups at increased risk when planning all mental health promotion initiatives. Some of the biggest risk groups in Waltham Forest are highlighted below.



Black, Asian and Minority Ethnic (BAME) groups and migrants

Waltham Forest is one of the most ethnically diverse boroughs in the country and BAME groups have been increasing as a proportion of the population in recent years. According to GLA Ethnic Group data, 2016, almost 70% of the population identify as an ethnic group other than white British, compared to just under half in 2001. Most notably, the White Other group that includes arrivals from EU accession countries has more than doubled in the last decade from 6 per cent to 15 per cent. The percentage of residents from an Asian background has also increased from 15 per cent to 21 per cent as has the number of Black/Black British residents from 15 per cent to 17 per cent. Around 14% of the population are from African and African Caribbean communities.

The 2011 Census showed that more than a third of Waltham Forest residents (37 per cent) were born abroad. The largest migrant groups in Waltham Forest are from Pakistan (12,700 people), Poland (8,200) and Romania (4,300).

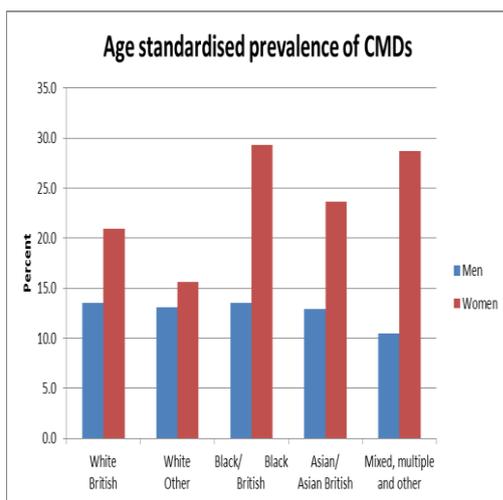
As a percentage of its total borough population, Waltham Forest has the second largest proportion of Central and Eastern European residents of all London boroughs, with 9 per cent of the population of the borough originating from Central and Eastern Europe. This is twice the London average and substantially higher than in England and Wales (2 per cent).

In general, people from BAME groups living in the UK are:

- more likely to be diagnosed with mental health problems
- more likely to be admitted to hospital with mental health problems
- more likely to experience a poor outcome from treatment
- more likely to disengage from mainstream mental health services, leading to social exclusion and a deterioration in their mental health.

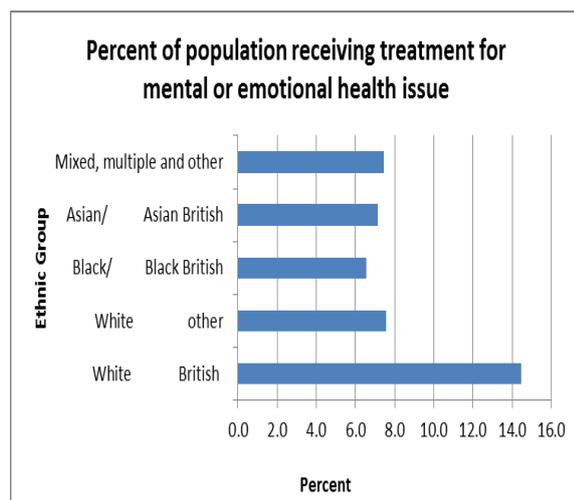
According to the Adult Psychiatric Morbidity Survey (2014), which surveys prevalence of mental health morbidity across England, rates of common mental health disorders (including depression, anxiety and phobias), were highest in the Black/Black British population and lowest in the White Other population. The prevalence of common mental health disorders was 17.3% in the White British group, 17.9% in the Asian group, and 19.5% in the mixed group. There were gender differences observed as well – whilst rates in each gender mirrored general ethnic differences (i.e. highest amongst Black/Black British, and lowest in White Other), women had higher rates across the board ranging from 1.2x higher in the White Other group to 2.7x higher in the Mixed ethnic groups. The two graphs in figures 15 and 16 below show mental ill-health is higher in BME groups, but level of access to treatment is lower.

Figure 15



Source: Adult Psychiatric Morbidity Survey, 2014

Figure 16



Migrant communities are also at increased risk of poor mental health and can experience isolation and alienation due to loss of kinship and social support from their country of origin.⁹ Moreover, shifts in socio-economic status, non-recognition of foreign credentials, loss of identity, and

uncertainties in immigration status may lead to depression.⁵ This suggests greater efforts in mental health promotion are needed to engage with BAME communities in promoting and maintaining mental health. This is particularly relevant for Waltham Forest given our high levels of ethnic diversity.



Young People

Waltham Forest has a young population with 22% of residents aged 0-15 compared to 19% nationally. Similar to London, Waltham Forest also has a high proportion of young working-age adults aged 25 to 49 (43% compared to 34% nationally). There are proportionately fewer people aged over 50 living in Waltham Forest (25 per cent) compared to the UK average (36 per cent).

The mental health of children and young people in the borough is described in detail in section 2.3.2. Nationally, mental health problems affect about 1 in 10 children and young people. These include depression, anxiety and conduct disorder, and are often a direct response to what is happening in their lives. However, 70% of children and young people who experience a mental health problem have not had appropriate interventions at a sufficiently early age.¹⁰ The GLA estimates there are 66,600 children aged 0-17 years in Waltham Forest which equates to approximately 6,660 children at risk of mental health problems in the borough.

Studies have shown links between mental ill-health and adverse childhood experiences, and it is estimated that looked after children are 4 times more likely than their peers to have a diagnosable mental health condition.¹¹ In Waltham Forest there were 282 looked after children in February 2018. Fifty-seven (19%) of these were Unaccompanied Asylum Seeking Children with the majority of these either of Afghanistan or Albanian nationality.¹²

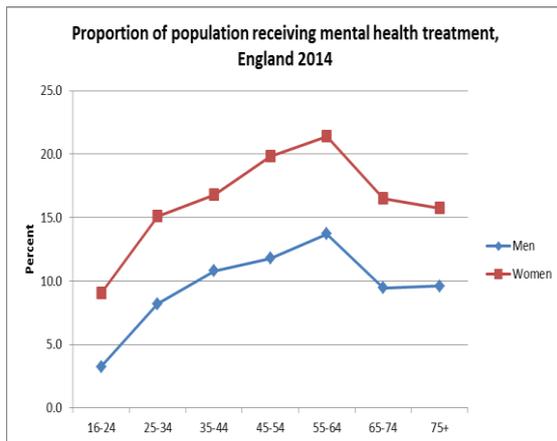


Men

While women are more likely to be diagnosed with a common mental health disorder than men, young men are a particularly high risk group and are less likely to speak out or seek help for their problems. Men are also more likely to live alone and individuals who live alone are 1.8x more likely to experience a psychotic disorder than those who are not¹³ and are more likely to experience substance misuse (including alcohol misuse). In 2015, 75% of suicides in England were by men and it is the single biggest killer of men under 45 in the UK. Although the numbers are small, Waltham Forest data suggests the ratio of males to females dying by suicide may be even higher still.

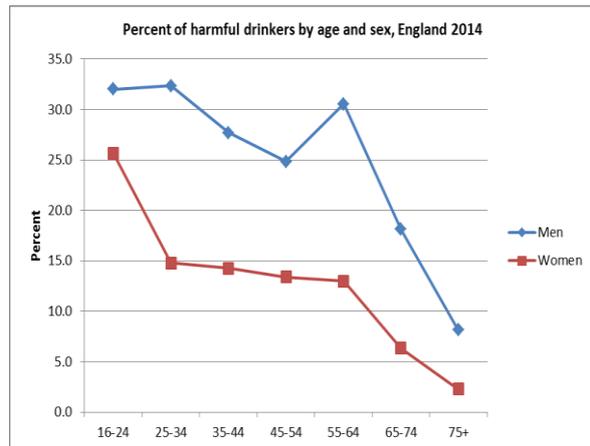
Young men are also known to be less likely to receive treatment for mental health conditions at all ages (See figures 17 and 18 below). Given Waltham Forest's young population, it would suggest interventions need to be tailored to young men in particular regarding mental health.

Figure 17



Source: Adult Psychiatric Morbidity Survey, 2014

Figure 18



People with disabilities and long term health conditions

Disability and mental health are closely linked. Many people with long-term physical health conditions also have mental health problems with national evidence suggesting that 30% of those with a long-term physical condition also have a mental health problem, higher than figures for the general population.¹⁴ ONS disability statistics show that in 2013 London had the lowest prevalence of people with a long-term disability at 14%¹⁵ and in 2015 it was estimated Waltham Forest had 12,469 people age 65 or over who had a limiting long-term condition.

People with learning disabilities are also at increased risk of poor mental health and it is generally accepted that between 25-40% of those living in the UK with a learning disability also have a mental health disorder.¹⁶ The 2014/15 JSNA for Waltham Forest estimated there are around 4,500 people with learning disabilities resident in Waltham Forest and this was expected to increase in coming years.

Social support is key for good mental health, but many people with disabilities of all types experience social isolation. In childhood, those with learning difficulties are often socially excluded, and 8 in 10 children in this group are bullied. Bullying is not only socially isolating, but also opens the child up to prejudice and discrimination, which may continue into adulthood and is another risk factor for mental illness.



LGBTQ+

Evidence suggests LGBTQ+ individuals are up to two times more likely to suffer from common mental health disorders than the general population.¹⁷ Stonewall research in 2014 also showed that 52% of young LGBTQ+ people have self-harmed, 44% have considered suicide and 42% have required medical support for mental distress.

Contributory factors resulting in poor mental health amongst LGBTQ+ individuals include external and internalised homophobia, bullying, discrimination (both within and outwith the LGBTQ+ community), racism experienced by BME LGBTQ+, body image issues including body objectification and body shame,¹⁸ lifestyle factors including substance misuse¹⁹ and high partner turnover.²⁰ It has been postulated that prevalence rates amongst LGBTQ+ youth are similar to other minority populations.²¹

Statistics for the size and composition of the LGBTQ+ population in Britain remain imperfect due to the lack of robust national data. Estimates range from 0.3% to 10% depending on the measures and sources employed. The 2014 Integrated Household Survey found that 1.6% of the population in the UK identified as gay, lesbian or bisexual. London had the highest proportion of adults who identified as members of these groups at 2.6%, which would be equivalent to around 7,000 people in Waltham Forest.



People with a history of drugs and/or alcohol misuse

Substance misuse and mental health are closely linked and one does not necessarily cause the other. Some links between the two include:

- Alcohol and drugs are often used to self-medicate the symptoms of mental health problems. People often abuse alcohol or drugs to ease the symptoms of an undiagnosed mental disorder, to cope with difficult emotions, or to temporarily change their mood. However, misusing substances causes side effects and in the long run often worsens the symptoms they initially helped to relieve.
- Alcohol and drug abuse can increase the underlying risk for mental health disorders which are caused by a complex interplay of genetics, the environment, and other outside factors. When someone is at risk for a mental health disorder, abusing alcohol or illegal or prescription drugs may push them over the edge. There is some evidence, for example, that

certain abusers of marijuana have an increased risk of psychosis while those who abuse opioid painkillers are at greater risk for depression.

- Alcohol and drug misuse can make symptoms of a mental health problem worse. Substance misuse may sharply increase symptoms of mental illness or even trigger new symptoms. Abuse of alcohol or drugs can also interact with medications such as antidepressants, anti-anxiety pills, and mood stabilizers, making them less effective at managing symptoms.

In Waltham Forest, data shows that:

- 10,734 adults drink alcohol at high risk levels (more than 35 units per week) and 40,000 adults drink between 14 and 35 units per week.
- 5,033 residents used Class A drugs, 1,463 of whom are heroin and crack users
- Alcohol and drug related hospital admissions have decreased across all age groups between 2013 and 2016, reducing previous health inequality gaps between Waltham Forest and the rest of the country. Drug related deaths were higher in 2015 than any year in the past 10 years but still significantly lower than the London and England averages. Despite these decreases, levels of health and social harm remain high.
- Residents are concerned about drug and alcohol related crime, specifically drug dealing and drinking alcohol in the street.
- In Waltham Forest, 90% of repeat offenders on the Integrated Offender Management programme have some level of drug or alcohol misuse. Of the Waltham Forest residents on probation with the National Probation Service, 30% have alcohol misuse linked to their behaviour, and 24% have drug misuse linked.



Victims of crime including domestic violence and sexual abuse

The UK government defines domestic violence and abuse as: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- psychological
- physical
- sexual
- financial
- emotional

Again, the link between domestic violence and mental health problems is complex and double sided: domestic violence can often lead to victims developing mental health

problems, and people with mental health problems are more likely to experience domestic violence.²² A large-scale population survey showed that women who suffer from domestic abuse are more likely to experience physical health issues, emotional distress and suicide ideation. A recent systematic review shows that sufferers of domestic abuse can experience depression, post-traumatic stress disorder, and anxiety.^{23 24}

In the September 2016/2017 reporting period, there were 2,513 reported cases of domestic abuse in Waltham Forest. 76% of all domestic abuse cases reported were in women, and 86% of all sexual violence victims in the borough were women. Waltham Forest ranks 13th out of the 32 London Boroughs (excluding the City) for domestic abuse rates, with a rate of 17 per 1000 population from the October 2016-September 2017 period.



Older people

Older people are more likely to develop common mental health problems compared to the rest of the population. Depression affects around 22% of men and 28% of women aged 65 years and over.²⁵ Age Concern and the Mental Health Foundation have identified five key factors that affect mental health and wellbeing of older people which are discrimination, lack of participation in meaningful activities, poor relationships, physical health and poverty. Lack of relationships and social contact are known to be particularly harmful to our physical and mental health and there is a significant role for prevention to play in this area (see section 5.4, social isolation and social capital for further discussion).

The Waltham Forest population aged 65+ is estimated to be 27,900 (mid 2015 population estimates) and in line with the national situation, this is expected to rise in coming years as the population ages, to 31,700 by 2021.

Dementia is one of leading mental health problems for older people. In UK it is estimated one in 14 people over 65 will develop dementia, and the condition affects 1 in 6 people over 80²⁶. In Waltham Forest there are 1,520 (June 2016) people diagnosed with dementia. Although Dementia is beyond the scope of this strategy, we recognise how it impacts on people's mental wellbeing - both the patients and their carers.



Carers

Carers are more likely to experience physical and mental health problems than people without caring responsibilities. A UK survey to explore the impact of caring on carers' health and well-being

showed 87 per cent of carers stated that caring has had a negative impact on their mental health.²⁷ Feelings such as stress, frustration, depression, loneliness, anxiety, anger, grief, mental fatigue and fear can arise while caring. Research carried out in 2010 by the Audit Commission also found that young adult carers (aged 16-18) had a much greater chance of not being in education, employment and training²⁸. This may impact young people's mental wellbeing, as not being in education employment and training has been associated with mental health problems and social isolation in young people.²⁹

According to the 2011 Census, approximately 8.3% of the population in Waltham Forest provide some form of unpaid care. 7% of carers report bad or very bad health, and this rises to 15.3% in carers over aged 65.

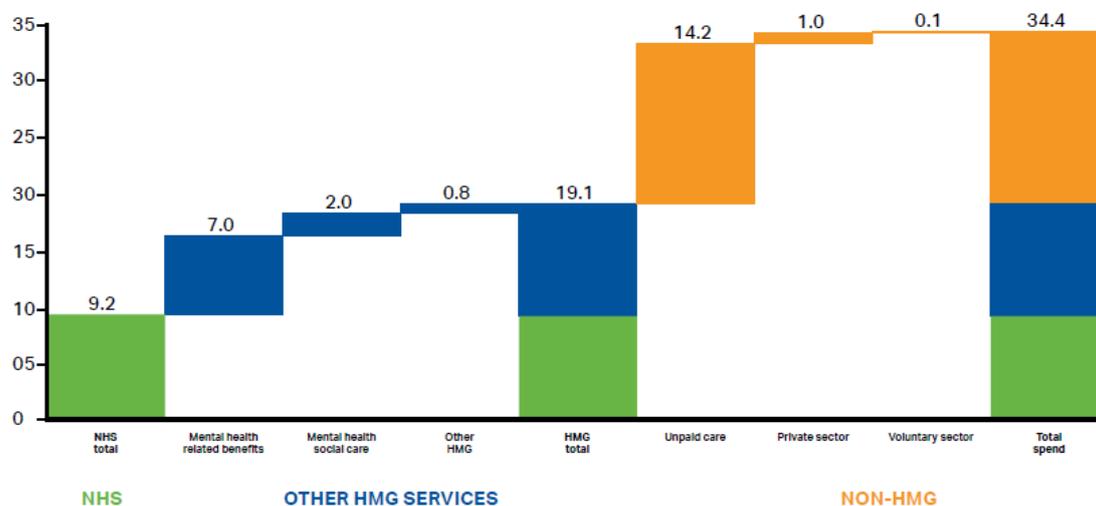
In Waltham Forest, only 31.1% of adult carers say they have as much social contact as they would like. This is significantly lower than the London rate of 36.5% and the England rate of 41.3%. Waltham Forest has one of the lowest rates of carer reported quality of life, ranking 30th out of the 32 London Boroughs (excluding the City of London). There is expected to be a growing numbers of carers as we an increase in dementia prevalence as a result of an increasingly ageing population, in particular people aged 75 and over. It will become increasingly important to establish services that support the mental wellbeing of carers and mitigate against mental health problems associated with being a carer.

3.5 Economic costs of poor mental health

Mental health is fundamental to our overall health and wellbeing and mental ill-health accounts for nearly a quarter of the total economic burden of illness. According to the Mental Health Five Year Forward View, poor mental health carries an economic and social cost of £105 billion a year in England. This includes direct costs of health, social care and other services, lost productivity at work and reduced quality of life.

Analysis commissioned by NHS England found that the national cost of dedicated mental health support and services across government departments in England totals £34 billion each year, excluding dementia and substance misuse. This is broken down in the chart below.

Total cost of mental health support and services in England 2013/14 (£bn)



£19 billion of this is made up of government spend, though there is little or no national data available for how up to 67 per cent of mental health funding is used at a local level. Most of the remainder (£14bn) is for the support provided by unpaid carers, plus a relatively small share that is funded through the private and voluntary sectors. In 2015/16, Local Authority adult social care departments in England spent £1.35 billion on services directly related to supporting adults with mental health conditions.³⁰

Between 12 per cent and 18 per cent of all NHS expenditure on long-term conditions is linked to poor mental health and wellbeing – between £8 billion and £13 billion in England each year.³¹ Forty-three percent of adults on long term benefits is a result of mental health problems.³²

Mental health problems also lead to wider societal costs³³. For example:

- Conduct disorder in children leads on to adulthood antisocial personality disorder in about 50% of cases, and is associated with a wide range of adverse long-term outcomes, particularly delinquency and criminality.³⁴
- Progression of psychosis is associated with higher costs to public services (including health, social care, and criminal justice), lost employment, and greatly diminished quality of life for the patient and their family.³⁵
- In the UK, 70 million days are lost from work each year due to mental ill health (i.e. anxiety, depression and stress related conditions), making it the leading cause of sickness absence.³⁶

Adults with mental health problems are much more likely to have other disadvantages, which involve an economic cost to society including:

- Lower incomes in early adulthood and into middle age;
- Lower probability of being in work in middle age;
- Increased risk of problems with their physical health, including cardiovascular disease, gum disease, serious injury and nicotine dependency;
- Increased involvement in the criminal justice system, both as victims and perpetrators.³⁷

Recommendations:

- **Ensure all evidence based interventions that support mental wellbeing consider the needs of the high risk groups identified in this strategy and where possible are tailored to support these groups.**

4.0 Tackling stigma and discrimination around mental health

“Stigma is a perceived negative attribute that causes someone to devalue or think less of the whole person.” - Kristalyn Salters-Pedneault

4.1 What is stigma and discrimination?

Mental health stigma refers to negative attitudes and beliefs held toward people who have a mental health problem. It often results in discrimination which may be obvious and direct, such as someone making a negative remark about someone’s mental illness, or indirect like exclusion from social circles or employment. The importance of tackling stigma and discrimination around mental health was clearly highlighted in discussions at the Waltham Forest Thrive LDN workshop summarised in section 1.1.

4.2 Impact of stigma and discrimination on mental wellbeing and other aspects of life

Mental illness is common and one in four people experience a mental health problem in any year.³⁸ Most people who experience mental health problems recover fully, or are able to live with and manage them, especially if they get help early on. But despite the fact that so many people are affected, there is a strong social stigma attached to mental ill-health, and people with mental health problems can experience discrimination in all aspects of their lives.

Nationally, almost 90% of service users report that stigma and discrimination has had a negative impact on their lives, including discrimination by other people, employers, and self-stigma which significantly impacts on self-esteem and confidence. There are many misconceptions and myths about mental health that are all too readily reinforced by the media, and there are also a number of important cultural factors that influence attitudes to mental health. Stigma and discrimination have a significant impact because they can:

- Prevent people seeking help
- Delay treatment
- Impair recovery
- Isolate people
- Exclude people from day-to-day activities and stop people getting jobs³⁹

We know that people with mental health problems are amongst the least likely of any group with a long-term health condition or disability to:

- Find work
- Be in a steady, long-term relationship
- Live in decent housing
- Be socially included in mainstream society

This is because society in general has stereotyped views about mental illness and how it affects people. Many people believe that people with mental ill-health are violent and dangerous, when in fact they are more at risk of being attacked or harming themselves than harming other people. The situation is exacerbated by the media with reports often linking mental illness with violence, or

portraying people with mental health problems as dangerous, criminal and unable to live normal, fulfilling lives.

Research shows that the best way to challenge and break down these stereotypes is through firsthand contact with people with experience of mental health problems. Communicating positive, evidence based information through social and other media channels can also have a positive impact.⁴⁰

4.3 Local and National attempts to tackle mental health stigma and discrimination

Time to Change is a national campaign in the UK that aims to tackle stigma and discrimination. In Waltham Forest, many local partners have implemented this campaign locally for a number of years, for example by supporting “Time to Talk Day” and “World Mental Health Day” as an opportunity to improve public awareness of mental health. In February 2018 Waltham Forest was successful in a bid to become the first London Time to Change hub. This has given us the resources to work with our partners to develop a coordinated campaign to address mental health stigma in the borough.

The Thrive LDN engagement event gathered views from local stakeholders on tackling stigma and discrimination around mental health and it was clear that people feel this should remain a priority for us in Waltham Forest.

Tackling stigma and discrimination is one of the most important things we can do to improve population mental health and wellbeing in the borough and we will continue to work across health, social care and the voluntary and private sectors, to develop coordinated, collaborative approaches to tackling stigma and discrimination and raising awareness of mental health.

4.4 Recommendations:

- **Work with the national Time to Change campaign to establish a new Time to Change hub in Waltham Forest. This will involve establishing and training a core bank of local champions who will be supported to arrange events, talks and campaigns to facilitate the firsthand contact with people holding stigmatising views that evidence shows can be effective at breaking down negative beliefs. We will also need to ensure we achieve a coordinated and joined up approach to amplify our media based messages further than we have managed in the past.**
- **The Council and all local partners on the Health and Wellbeing Board should commit to sign the Time to Change employer’s pledge.**

5.0 Wider determinants of mental health and wellbeing

Mental wellbeing is relevant to everyone in the population and anyone can develop a mental health problem. However, there are various social, economic, and physical factors, often described as the 'wider determinants of health', that influence an individual's mental health. Most of these factors are associated with inequality meaning that the most disadvantaged individuals, families and communities are also at the highest risk of poor mental health. The specific factors contributing to mental wellbeing are set out in numerous local, regional and national policies and strategies. The most recent national strategy 'No Health Without Mental Health' states that all of the indicators on tackling the wider determinants of health in the Public Health Outcomes Framework will influence mental health and that many of these will be interrelated, often occurring in combination. Furthermore, the relationship between mental health and many of the wider determinants is cyclical. For example, living in poverty can cause mental ill-health but mental ill-health itself can in turn make it harder to find and maintain employment or manage finances adequately.

For the purposes of this strategy, the wider determinants of mental wellbeing are grouped into the following areas:

- economic wellbeing including poverty
- employment & workplace
- housing
- social capital and social isolation
- access to green space and the natural environment

This list is by no means exhaustive but aims to cover the areas that the evidence base suggests have the biggest influence on mental health and wellbeing. These areas have also been chosen to reflect those focused on in key regional and national mental health policy and strategies including the Mayor of London's Thrive LDN campaign and the national strategy *No Health Without Mental Health*.

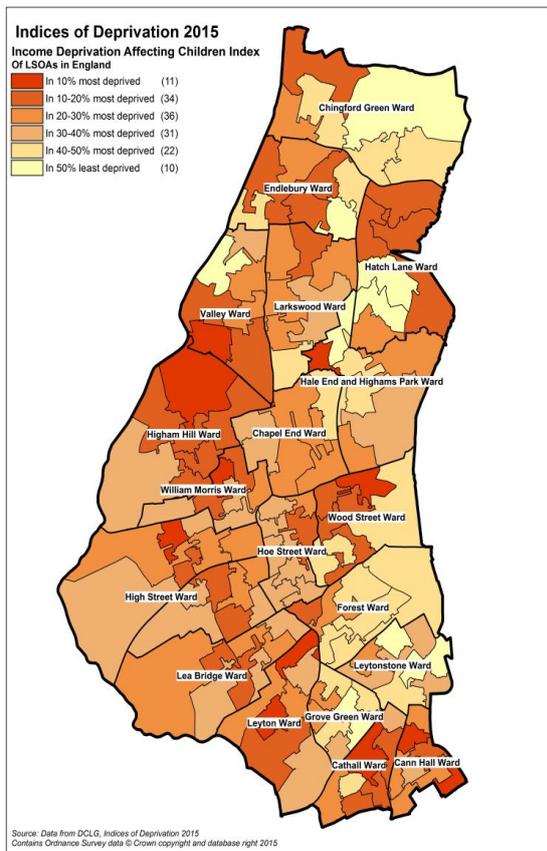
5.1 Economic wellbeing including poverty

Poverty produces an environment that is extremely harmful to individuals', families' and communities' mental health. The impacts of poverty are present throughout the life course (from before birth and into older age) and have cumulative impacts. In her 2013 annual report themed on public mental health, England's Chief Medical Officer identified particular groups of people at risk of developing mental health problems and highlighted children and adults living at a socio-economic disadvantage as those at some of the highest risk levels.

Many of the impacts of poverty on mental wellbeing occur via some of the other wider determinants described below including poor housing, poor educational attainment, unemployment etc. However, financial hardship and insecurity is also known to be a specific risk factor for poor mental wellbeing in its' own right. Across the UK, both men and women in the poorest fifth of the population are twice as likely to develop mental health problems as those on average incomes. Socioemotional and behavioural difficulties have been found to be inversely distributed by household wealth as a measure of socio-economic position in children as young as 3 years old.

Overall, Waltham Forest is a deprived borough. It is the 7th most deprived borough in London and the 35th most deprived of 326 local authorities in England. Of particular importance is the fact that an estimated 35% of our children live in poverty after including housing costs compared to a UK

average of 25%. There are also big challenges in terms of inequalities within the borough, between wards with the more affluent communities generally residing in the north of the borough and the least affluent in the south, although there are exceptions to this. See figure below.



The recent global financial and economic crisis has accentuated and reinforced long-term trends in inequality, low pay and related poverty in Europe. While the initial impact was high rates of male redundancy, women have experienced higher wage cuts. The primary health impacts of economic downturns are on mental health (including the risk of suicide).⁴¹ People with no previous history of mental health problems may develop them as a consequence of having to cope with the ongoing stress of job insecurity, sudden and unexpected redundancy, and the impacts of loss of employment (financial, social and psychological).

An additional challenge relevant to this area is the introduction of changes to the benefits system including roll-out of universal credit. Additional stress and anxiety can result from uncertainty around future income and actual losses of income worsens the effect of poverty and impacts on many of the wider determinants of mental health and wellbeing. The economic impacts of Brexit and ongoing local economic changes in Waltham Forest will bring fresh challenges to population mental wellbeing that we will need to be aware of in the coming years.

5.2 Employment & workplace

There are two distinct aspects of employment that relate to mental wellbeing:

- Being in work, and particularly good work, as opposed to under or unemployed, is known to have significant benefits and the Department for Communities and Local Government has highlighted being employed as one of the most important contributing factor for positive mental wellbeing.
- The conditions experienced in the workplace for those that are employed are also an important determinant. For example, workplace stress caused by unrealistic workloads and expectations or insecure employment status can lead to depression and anxiety.

In Waltham Forest, the adult employment rate has been rising in recent years and was at 72.4% of all adults aged 16-64 in 2015. This is similar to the London and national figures of 73.2% and 73.9% respectively. The total number of local residents claiming Jobseekers Allowance (JSA) dropped from 9,800 in March 2013 to 6,630 in March 2014 and at December 2015 was recorded as 3,383. The number of young people claiming JSA also dropped from 2,600 in March 2013 to 1,415 in March 2014 and was 455 in March 2016. However, despite these improvements, in 2014 the borough was also listed as having the fourth lowest paid workforce in London, 9% below the London median salary.

In terms of workplace mental health, a national survey conducted by mental health charity MIND suggested that more than 1 in 6 employees have experienced common mental health problems, including anxiety and depression. The survey also showed that work is often the biggest cause of stress in people's lives, more so than housing issues or financial problems. Mental health problems are the leading cause of sickness absence from work. According to the Labour Force Survey 2013-15, 1.7% of employees in Waltham Forest had at least one day off sick in the previous week and around 1% of all working days were lost due to sickness absence, with both of these figures statistically similar to both the England and London averages.

In Waltham Forest there are currently numerous activities that contribute to improved population mental wellbeing through both increased employment and improved conditions in the workplace. Waltham Forest Citizens Advice provide support and advice to residents on money, benefits, housing and employment problems. Support is also provided for people who are at risk of poor mental health due to being unemployed through the local social prescribing service which can assist with linking people in to opportunities in the voluntary and statutory sectors to help with volunteering and employment opportunities. During the first six months of the pilot period for this service, work and finances was the most common category of primary concern among those referred. See section 8.0 for further information on social prescribing.

In terms of workplace mental wellbeing, the Council have recently become an accredited living wage employer and have offered mindfulness and physical activity opportunities to staff in the workplace. A number of organisations in the borough are engaging in the Mayor of London's Healthy Workplace Charter and Waltham Forest CCG recently became the first organisation to be accredited. The Charter requires specific plans for improving employee health, particularly mental health. However, to date, most work undertaken in the borough to promote workplace mental health has been focussed internally on Council and other statutory sector employees.

5.3 Housing and homelessness

There is a clear link between people's housing and their mental health and wellbeing and the absence of suitable, stable accommodation is a serious risk factor for poor mental health. Recent research by housing charity Shelter found that 1 in 5 adults in England had experienced a housing related issue that had negatively impacted on their mental health in the last five years.⁴² Stress was

the most common mental health issue reported (60%), followed by anxiety (54%) and Sleeping problems (50%).

Housing issues can impact on mental health in various ways including:

- Rising prices for both renters and owners leading to stress around financial insecurity and poor economic wellbeing.
- Poor quality housing stock with dampness, poor safety and security leading to poor physical health and mental wellbeing. Cold homes caused by fuel poverty and poor insulation also have a negative impact.
- Overcrowded accommodation, leading to poor sleep, reduced educational attainment and high stress levels.
- Homelessness is one of the biggest threats to mental health with research by the Homeless Link charity finding that 80% of homeless people reported some form of mental health issue and 45% had been diagnosed with a mental health condition.

Housing issues are a particularly pressing concern in Waltham Forest. For example, there has been a 77% increase in the average housing price over the last ten years and Waltham Forest ranks as the 2nd most deprived Local Authority area in the UK in terms of housing deprivation.

Over a quarter of homes in the private rented sector were overcrowded when this was last measured in the 2011 Census. Overall just under one in six homes were overcrowded, the sixth highest of all London boroughs. This proportion was significantly higher for households with dependent children, where almost 30% of homes were overcrowded; this was the 9th highest of all London boroughs. There are also over 8,500 households currently on the Council's housing register (as of July 2017) and more than 2,700 of these are homeless households living in temporary accommodation. Finally, fuel poverty is also an issue for our residents. In 2014, the Department for Energy and Climate Change estimated that there were 11,807 households in Waltham Forest living in fuel poverty, which is around 12% of the total population. This is the third highest in Outer London with only Haringey and Newham having a higher percentage and the seventh highest in London overall.⁴³ Unsurprisingly, housing was the second most frequently mentioned concern for residents according to the resident insight survey for 2016.

The Council has recognised these issues and Housing – ensuring that everyone has a decent roof over their head – is one of the Leader's key priorities. This involves commitments to:

- prioritise affordable housing for local people;
- take action against overcrowding and prosecute bad landlords; and
- improve the borough's housing estates

Specific outcomes set for Housing to deliver by 2020 are:

- 12,000 new homes built by 2020
- Reduce levels of homelessness
- Improve the quality of housing in the private rented sector
- Increase tenant satisfaction

The Homelessness Reduction Act 2017, which will come into force from April 2018, is a key piece of legislation affecting housing. It sets out new responsibilities for local authorities and public sector partners to tackle homelessness through a focus on earlier intervention and prevention.

Waltham Forest was also one of the first boroughs in London to introduce a private landlord licensing scheme, aiming to drive up the quality of homes in the private rented sector and protect residents from poor landlord practices.

Hoarding is another issue related to housing and mental health. It is defined as a persistent difficulty discarding or parting with possessions because of a perceived need to save them. A person with hoarding disorder experiences distress at the thought of getting rid of items and in serious cases this can include rubbish, leftover food etc. Hoarding is associated with numerous mental health issues including anxiety and depression. There is scope for professionals who enter individuals' homes in a professional capacity to spot the signs of hoarding disorder and make appropriate referrals.

5.4 Social capital and social isolation

Social capital has been defined as the resources people develop and draw on to increase their confidence and self-esteem, their sense of connectedness, belonging, and ability to bring about change in their lives and communities. This relates to the Thrive LDN aspiration to create a city where individuals and communities take the lead and feel empowered to influence and instigate change in their lives and environments. As mentioned in section 1.0, this also aligns well with the Council's Creating Futures Strategy and the Think Family Programme which aim to empower residents and create connected communities.

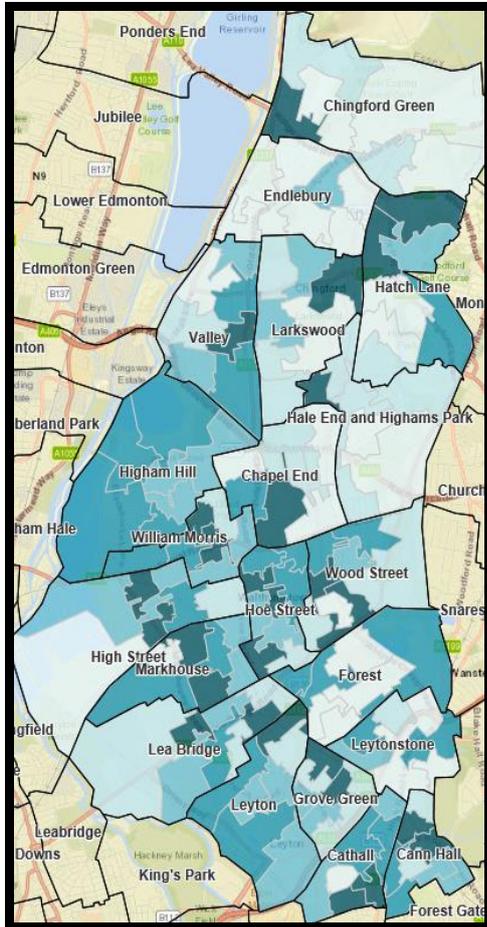
Increasing social capital involves the creation of strong networks, good levels of support and positive relationships which help to integrate individuals and communities. The health benefits include: increased confidence and self-esteem, particularly in one's ability to handle a crisis, a sense of connectedness and belonging, the ability to bring about change in one's own life or in their community. Evidence shows that all of these support the development of good mental wellbeing and are protective factors in relation to poor mental health.

Conversely, the opposite of having high levels of social capital is social isolation, which causes loneliness and is known to be a strong risk factor for mental ill-health. Research shows that lacking social connections is as damaging to our health as smoking 15 cigarettes a day and loneliness increases the likelihood of mortality by 26% (Holt-Lunstad, 2015). Much of this impact on health is seen through poor mental health and wellbeing. UK survey data from Age UK shows that 3 in 10 of those aged over 80 report being lonely.

In Waltham Forest, 40% of adults aged 65 and over live alone (22.9% of males and 42.8% of women). This comprises around 3.5% of all households in the borough which is similar to London (3.9%) although lower than England (5.2%). While living alone doesn't necessarily mean social isolation or loneliness, it is seen as a good indicator of the likely burden, particularly in older adults.

In Waltham Forest, only 21% of adult carers say that they have as much social contact as they would like which is considerably lower than London (36%) and England (38%), suggesting a high degree of social isolation in this group. However, in contrast to this, the findings of the recent Children Count survey by the Dartington Research Unit show that parents' perceived access to informal support in Waltham Forest is high, with 84% of families stating that they feel able to access different forms of social support within their community. The findings also show high levels of collective efficacy, with 71% reporting high levels of trust within their local community.

Age UK have produced 'loneliness maps' that show the relative risk of loneliness across neighbourhoods in England. The relative risk of loneliness is based on the Census figures for a number of the factors identified above including living alone and marital status, low income and poor physical health. These maps can be used to support the targeting of social and befriending opportunities within the borough.



Heat map showing relative risk of loneliness for those 65+ Age UK, 2016

Over the next decade, as more services become digital by default, digital exclusion among older populations is likely to increase and may compound loneliness and other forms of social exclusion. Conversely, social media platforms offer opportunities to engage older adults provided they are IT literate and have access to the necessary facilities to engage.

5.5 Access to green space and the natural environment

It is well known that contact with the natural environment and green space promotes good health and the evidence is particularly strong for positive associations between experience of natural environments and mental health. Contact with natural environments evokes positive emotions, promoting psychological restoration, improving mood and attention, and reduces stress and anxiety. Research has also shown the benefits of green space include reduced aggression and crime by improving companionship, sense of identity, belonging and happiness. In addition to providing a direct benefit to mental wellbeing, green space can act to indirectly improve wellbeing via increasing physical activity opportunities and community participation, while reducing noise and light pollution.⁴⁴

In urban settings such as London, most access to green space and natural environments comes in the form of parks and public gardens and these are associated with improved health and wellbeing at the individual and community level.

In Waltham Forest there are excellent opportunities to access green space through the local parks and, in particular, with the opening of the new Walthamstow wetlands which provides a unique opportunity to impact positively on residents' quality of life and mental wellbeing. There are six large parks in the borough and a number of smaller parks, open spaces, playing fields, children's playgrounds and cemeteries. The Council also recently committed to planting 1200 trees per year. The smaller spaces are particularly important as they provide more constant exposure to green space for most people who may not live in the immediate vicinity of a larger park.

As with all opportunities for accessing facilities and services that can provide a positive impact on mental wellbeing, it is important that work is undertaken to improve access to green spaces for all groups in the population, particularly those with risk factors for poor mental health and wellbeing.

5.6 Recommendations:

- **Strengthen our 'health in all policies' approach by working together with partners across the Council, NHS, voluntary sector and beyond to reduce and mitigate the impacts of poverty and other wider determinants on mental health and wellbeing. Of particular importance will be informing the content of the new Housing strategy and Local Plan.**
- **Continue to evaluate and develop approaches and programmes that aim to link those at risk of negative impacts on their mental health and wellbeing from issues such as being housed in temporary accommodation, in debt, unemployed, socially isolated etc. into existing support services. These include Social Prescribing, Local Area Coordination, Living Well Waltham Forest and others.**
- **Work with partners to identify and fill current gaps in support services for those at risk of poor mental health, including befriending support for carers who report high levels of social isolation and those with hoarding disorder.**
- **Provide information and support for residents likely to be affected by the roll-out of Universal Credit and enable them to prepare for any changes in income.**
- **Deliver mental health training for all front-line staff who are likely to come into contact with residents at risk of poor mental health due to their physical, social and economic environments. This should particularly include housing staff and cover identifying signs of hoarding disorder and information on support services available.**
- **Support the development of a strong and vibrant voluntary and community sector which will be crucial if we are to mitigate the impacts of the challenging situations that many of our residents face in terms of the wider determinants of mental health.**
- **Consider implementing the Mayor of London's Healthy Workplace Charter for businesses across the borough in order to support employers from all sectors to establish work environments that are conducive to good mental wellbeing and reduce risks to mental**

health from workplace stress. This particularly includes work to tackle mental health stigma. In all issues related to workplace health it is important to ensure the Council, NHS and other major partners are 'leading by example'.

- **Use a whole system approach and embed the promotion of mental wellbeing across Council and health services and programmes to ensure every contact counts in building mental wellbeing. This will require a multi-agency delivery group to be established.**

6.0 Evidence based approaches to improving mental wellbeing

In addition to taking action to reduce risks to mental wellbeing from factors such as poor housing, poverty etc., a comprehensive mental wellbeing strategy requires promotion of good mental wellbeing to the whole population. There is evidence that achieving a small change in the average level of mental wellbeing across the population would produce a large decrease in the percentage experiencing a mental health problem, and also in the percentage who have sub-clinical mental health disorders (those “languishing”).

The Government commissioned a Foresight report, ‘Mental Capital and Wellbeing’⁴⁵ which reviewed a huge quantity of evidence from around the world on what can be done to improve mental wellbeing. The report suggested, among other things, promoting positive mental health and wellbeing for the general population through the adoption of a mental health equivalent to the ‘five fruit and vegetables a day’ which has become known as the five ways to wellbeing and been adopted widely across the country by a variety of organisations and sectors.

The Council website contains a directory of services that was launched in 2016 which aims to make it easier for residents to identify activities and opportunities in the borough they can get involved in and there is a need to ensure this is linked to our approach to promoting mental wellbeing. See figure below for a summary of local resources and offers for residents to support their mental wellbeing.

Since the publication of the Mental Capital and Wellbeing report there has been additional focus on a number of other areas that evidence suggests can be important for improving mental wellbeing. Two of the main ones are diet and sleep. In terms of diet, the Mental Health Foundation report, *Food for Thought* outlines how a healthy diet is protective against mental health problems and recommends the improvement of nutritional literacy in respect to mental health and community level schemes to support access to affordable nutritious food, particularly in communities at higher risk of developing mental health problems.

There is also now strong evidence that getting enough good quality sleep is an important component of a healthy and balanced lifestyle, similar to being physically active, eating a healthy diet and staying within recommended alcohol consumption guidelines – although sleep hasn’t traditionally received the same level of attention as these other considerations. Poor sleep is known to both directly affect mental health and also be a symptom of poor mental health. Chronic problems with sleeping is also considered to be a mental health condition in its own right. In Waltham Forest, sleep clinics are provided by the NELFT Talking Therapies service for those with sleep disorders but there has been little consideration given to promoting good sleep on a population level for promoting mental wellbeing. The evidence appears to be strong enough that this should now be taken forward as a key public health message alongside other, more traditional messages, in the future.

Services and events can be designed to include several of the Five Ways to Wellbeing. For example, food growing initiatives can involve physical activity, socialising, learning a new skill and eating healthy food. Physical activity offers are often delivered as group based activities which enable social contact, for example the Our Parks sessions. Many social events provide a food offer and there is a need to ensure organisers understand the impact of healthy food on mental wellbeing as well as the impact of social contact.

Local Resources and Programmes

Connect

Connect with others – social connections support and develop good mental wellbeing.

- Children & Family and Community Centres across the borough
- Community events and festivals including Chingfest, Walthamstow Garden Party and Leytonstone Festival
- Community ward forums

Be Active

Be physically active – physical activity is known to be one of the best ways to improve mental wellbeing.

- Leisure Centres including free swimming for children
- Parks and green spaces including Our Parks sessions
- Health walks
- Waltham Forest Good Gym programme

Take Notice

Take notice – this relates to mindfulness and appreciation of the surrounding environment.

- Walthamstow wetlands
- William Morris Gallery
- Community gardens and allotments
- Free online mindfulness training at www.good-thinking.uk

Learn

Keep learning – mastering new skills, particularly later in life, improves self-esteem and reduces depression and anxiety.

- Libraries
- Waltham Forest Adult Learning Service

Give

Give – feelings of being useful to, and appreciated by, others can improve happiness and mental wellbeing.

- Volunteer in Council services or events
- Community Waltham Forest support volunteering opportunities in the CVS
- Waltham Forest Spring Clean events

An important principle of developing mental wellbeing programmes is to facilitate the involvement of individuals and communities in developing activities and services as being able to feel 'in control' leads to improved self-confidence and feelings of empowerment. This message was communicated clearly by stakeholders at the Thrive LDN workshop who felt that presenting recommended approaches in a specific tool would be perceived as a 'top down' approach which may be rejected. The '5 ways to wellbeing' are intended to provide a framework to guide development of initiatives to promote mental wellbeing, while allowing specific activities to be determined by users and groups themselves.

6.1 Recommendations:

- **Promote evidence based approaches to improving mental wellbeing, including the 5 ways to wellbeing, to residents by publicising and signposting opportunities including during relevant campaigns such as World Mental Health Day and Healthy Living Week. Barriers to participation for those at higher risk of poor mental health should be particularly considered when planning all such initiatives.**
- **Work to improve awareness of local opportunities to engage in wellbeing activities by reviewing the content of, and promoting, the online directory of services on the Council website. Activities that link to the Five Ways to Wellbeing should be clearly highlighted.**
- **Support population groups at increased risk of poor mental health to access existing opportunities in the borough to improve their mental wellbeing.**

7.0 Maternal health, early years and young people

7.1 Why is it important?

Pregnancy and the early years is a critical time for both parent and children's mental health. Good physical and mental health in pregnancy is associated with better outcomes for children. Anxiety, depression and maternal stress – especially the experience of domestic abuse – have been linked to impaired emotional, cognitive and language development in infants. During infancy, a child's secure attachment to their main caregiver creates expectations in the child and provides a mental model for future relationships. Secure attachment promotes a child's self-esteem and resilience, and influences the way in which the child relates to and behaves with others. It gives the child an internal working model of the world as a safe and secure one in which the main caregiver will respond to its needs. This supports the development of neural pathways.

Maternal depression (both in the antenatal and postnatal period) is one of the strongest predictors of poor attachment and emotional and mental health difficulties in childhood and later in life. Over 50% of lifetime mental illness (excluding dementia) manifests by age 14 with 75% of all adult mental illness manifesting by age 24.

A child whose mother reports feeling miserable and depressed is around 63% more likely to report the same difficulties than the average child.

There is little data available in pre-school-aged children and a relative lack of research on pre-school psychopathology compared with studies of the epidemiology of psychiatric disorders in older children. Despite this, the available evidence convincingly shows that the rates of common psychiatric disorders and the patterns of comorbidity are similar in pre-schoolers as seen in later childhood.

A literature review of four studies looking at 1,021 children aged 2 to 5 years inclusive, found that the average prevalence of any mental health disorder was 19.6% (this estimate includes the five most common groups of childhood psychiatric disorders: attention deficit hyperactivity disorders, oppositional defiant and conduct disorders, anxiety disorders, and depressive disorders).

Applying the average prevalence to the estimated population within the area, we could expect that 2,667 children aged 2 to 5 years inclusive living in Waltham Forest have a mental health disorder.

(Camhs transformation plan refresh 2017-18)

7.2 Local context

Perinatal mental health problems are those which occur during pregnancy or in the first year following the birth of a child. It is generally recognised that 10 to 20% of women in the general

population will experience some level of mental health difficulty in the perinatal period. Due to the number of risk factors in the local population, this may be a conservative estimate for Waltham Forest. (Waltham Forest CAMHS Transformation Plan Refresh 2017/18)

If left untreated, it can have significant and long lasting effects on the woman and her family. (NHS England, <https://www.england.nhs.uk/mental-health/perinatal/>, accessed on 18.10.2017). Local prevalence estimates of maternal depression compared to the level of mental health support provided to women in the perinatal period would indicate that around two thirds or 64% of needs are unmet. (Lot 1 Children and Family Centre specification, p21)

Based on the birth rate of 2016 (which is predicted to remain stable), we expect that at least 945 women per year in Waltham Forest will experience mental health difficulties in the perinatal period.

Breastfeeding has both physical and mental health benefits, promoting close parent-infant relationships and secure attachment which support the mental health of both baby and mother. Breastfeeding initiation rates are high in Waltham Forest and then appear to decrease significantly by 6-8 weeks.

Waltham Forest has a large proportion of residents aged under 18 years, approximately 24% of the population. Out of the estimated 9.7% of 5-16 year olds in Waltham Forest who have a mental health condition, two significant gender trends have been identified:

- In both 5-10 and 11-16 year age ranges, there are almost twice as many boys with conduct disorder as girls.
- For emotional disorders, girls in the 11-16 age range have significantly higher burden of emotional disorders than boys.

Conduct disorder: Antisocial behaviour by a child or young person that happens regularly over a period of time could be caused by a problem known as a 'conduct disorder.' Children and young people with a conduct disorder can also find it difficult to control their temper and may lie to others.

(Reference: NICE Guidance – Antisocial behaviour and conduct disorders in children and young people: recognition and management – Information for the Public. Accessed on 13.3.2018 at <https://www.nice.org.uk/guidance/cg158/ifp/chapter/Antisocial-behaviour-and-conduct-disorders>)

Emotional disorders: Anxiety disorders and depression (Reference PHE Fingertips. Accessed on 13.3.2018 at <https://fingertips.phe.org.uk/search/emotional%20disorder#page/6/gid/1/pat/10011/par/cat-11-7/ati/153/are/E38000192/iid/91578/age/246/sex/4>)

Children's mental health and emotional wellbeing is nurtured in the home, and supporting parents and carers during the perinatal phase and early years is key. This support continues to be important

for older children and young people, but there is evidence that schools, colleges and other organisations have a role in promoting emotional wellbeing. (Better Mental Health Outcomes for CYP)

- **Risk factors**

Waltham Forest have a number of risk factors at a significantly higher rate than national average including children under 16 living in poverty (24% vs. 20%), family homelessness (8.9 vs. 1.9 per 1,000 households), families out of work with dependent children (6.4% vs. 4.2%) and children who started to be looked after due to family stress or dysfunction or absent parenting (13.1 vs. 10.1 per 10,000 children under 18).

The mid-teen survey 2017 found that 44% of 14-15 year olds have experienced bullying, 24% cyberbullying, 25% have family issues that affect emotional wellbeing and 6.5% self-reported taking drugs regularly. (Mid-teen health survey summary, August 2017).

- **Protective factors**

In addition, a number of protective factors have been identified including the child's attachment, security and positive stimulation from their main carer. These are the foundation for health behaviours and educational attainment, and can be captured through a number of measures including School Readiness and Educational attainment (5 or more GCSEs). Waltham Forest has significantly higher School Readiness rates compared to national levels both for all children (72.2% vs. 69.3%) and for children with free school meal status (64.3% vs. 54.4%), and higher rates for educational attainment (5 or more GCSEs) (60.4% vs. 57.8%) (2015/16). However, positive satisfaction with life among 15 year olds was found to be significantly lower than national average (56.9% vs. 63.8%).

7.3 What we are doing

To facilitate early identification and access to services, Health Visitors include maternal mood assessments as part of the mandated health checks during the perinatal phase. In addition, Mental Health First Aid training has been provided to a wide range of professionals and volunteers who work with children and families. Organisations who have participated include schools, nurseries, CFC staff, Early Help staff, social workers, midwives, charity workers and volunteers.

New mothers who are encountering mental health difficulties during pregnancy or in their child's first year of life can access support suitable to their level of need within either the Children and Family Centre services or the Perinatal Mental Health Support services (PIMHS).

A range of services are provided within the Integrated Children and Family Centre (CFC) services to promote secure attachment and help mothers develop loving relationships with their children. These include both the universal offer such as the Infant Feeding service helpline and drop-in sessions, breastfeeding cafes, 'You and Your Baby' sessions, and targeted support such as parenting programmes and team around the family. There is targeted support for mothers with one or more risk factors for developing mental health difficulties such as the 'Family Nurse Partnership'

programme for teenage mothers and ‘Maternity Mates’ for vulnerable mothers isolated in the community.

The CAMHS transformation plan sets out the vision for improving mental health statutory provision for children and young people in Waltham Forest. This is updated annually and published as the ‘CAMHS transformation plan refresh’ with an overview of what has been achieved over the last year and what is prioritised in the forthcoming year.

There is a range of support for parents and carers in Waltham Forest including those detailed above as part of the Children and Family Centre Services. The Parents Forum is a voluntary organisation that supports parents of children with special educational needs and disabilities with information and training, as well as working across services to ensure their needs are met. The Disability Enablement Service provides a range of support to children and families, termed ‘the local offer’.

Educational settings are supported to promote and monitor mental health and emotional wellbeing with the Healthy Schools London Award programme and PSHE curriculum membership and resource. School Nursing provide drop-ins for children and young people and schools have been offered matched funding ‘Place2Be’ counselling service, Mental Health First Aid training, Mindfulness ‘train the trainer’, Learning Mentor supervision, Schools LINK project (with CAMHS), and the Educational Psychologist service. In addition, the SENCO Forum network supports SENCO teachers at primary and secondary level.

There is also targeted support for young people at risk of or identified with mental health issues including Fast Track access to CAMHS services for looked after children, Young People’s drug and substance misuse service and Liaison and Diversion support in the Youth Offending Service.

7.4 Recommendations

- **Work to increase breastfeeding rates through Children and Family Centres and implementation of the evidence based UNICEF Baby Friendly Initiative.**
- **Support for parents and carers: Parents and carers are key to the mental health and wellbeing of children and can need support both with their own mental health as well as support with a child with mental health or behavioural issues. Parent’s and carers of children with SEND can feel very isolated and may need additional support with managing conditions and behaviours and navigating public health services.**
- **Continue supporting educational settings to promote mental health and emotional wellbeing through the Healthy Schools London framework. Educational settings have a role to play in promoting mental health, both in creating an environment where children and young people can thrive and reducing stigma, in developing social and emotional health skills of individuals such as resilience, identifying and supporting those vulnerable to prevent mental health issues, early identification and treatment of emerging difficulties and providing access to self-help and expert guidance when needed.**

- **Support for children and young people:** Children and young people should be in an environment where they can develop social and emotional skills and develop emotional literacy, know where to find and have access to evidence based self-help and expert help as required.
- **Supporting vulnerable children and young people:** targeted support for children who are more vulnerable to developing mental health difficulties such as not in employment or education, exposed to domestic abuse and looked after children.
- **Provide training for the wider workforce:** All staff and volunteers working with children and families should have an understanding of mental health and wellbeing, and be able to identify and support children at risk of as well as developing mental health difficulties and signpost to support.

8.0 Early intervention for the prevention of mental health problems

Providing support for people who are struggling with their mental health at an early stage is key to preventing the development of more serious mental health conditions further down the line. This includes people who have not reached the stage of having a diagnosable condition but may be experiencing high levels of stress or low mood and could benefit from advice, support and non-medical interventions.

We know that many people will not consult a health professional at the early stages of poor mental health and often the first person to offer, or be asked for help will be a family member, friend or colleague. A key principle of our approach is therefore to provide training and information for relevant front-line professionals, people working in the community and members of the public so that they are able to identify when people around them are struggling and provide timely advice and signposting to services when relevant. In Waltham Forest we have already delivered Mental Health First Aid Training to over 170 front line staff including health professionals, teachers, community groups and Local Authority housing staff. But there are still many opportunities to engage more people in mental health training and we will explore options for delivery.

In Waltham Forest there are many services spanning the statutory, private and voluntary sectors that support our residents who are struggling with their mental health and wellbeing in order to prevent future mental ill-health. The following list provides a summary of the range of services offered in the borough.

8.1 Waltham Forest Talking therapies

Waltham Forest Talking Therapies is a service which is part of the national Improving Access to Psychological Therapies (IAPT) programme. The service provides talking therapies for people with mild to moderate mental health problems and is accessed via referral from GPs and other health professionals or self-referral. The service offers individual or group sessions which run for 6-20 weeks depending on level of need. The services offered include; mindfulness, anxiety management, winter wellbeing groups, post-traumatic stress disorder and others.

NHS England has set a national ambition to increase access to talking therapies so that by 2021 at least 25% of those with anxiety or depression have access to a clinically proven talking therapy service. There is also a commitment to improving access to services for people with long-term conditions, people from Black and Minority Ethnic communities, and to embed psychological support in pathways across health care so mental and physical healthcare is as joined-up as possible.

8.2 Social prescribing

The social prescribing service in Waltham Forest was launched as a pilot in 2016 and is a joint initiative between the Council and CCG. Social prescribing enables health professionals, mainly in primary care, to refer people to a range of local, non-clinical services. Social prescribing seeks to address people's needs in a holistic way and aims to support individuals to take greater control of their own mental health. In the first six months of the service, one of the most common concerns of people referred was mental health needs.

Social prescribing works with people to access local sources of support such as volunteering, arts activities, group learning, gardening, befriending, healthy eating advice and a range of sports etc.

8.3 London Digital Mental Wellbeing project ‘Good Thinking’

‘Good Thinking’ is an open access digital mental wellbeing service to help people to self-assess and self-manage their mental wellbeing issues via the internet utilising online resources, mindfulness training and live peer to peer forums. Waltham Forest is one of 19 LAs in London that helped fund the development of the service alongside all of the London CCGs.

8.4 Exercise on Referral

The Healthwise exercise on referral programme is a formalised programme where medical professionals can refer patients with a variety of health issues including mild to moderate mental health conditions to a tailored fitness programme, based in Waltham Forest leisure centres. The link between physical activity and mental wellbeing is well documented and is described in detail in the Waltham Forest Physical Activity and Sports strategy.⁴⁶

8.5 Books on Prescription ‘Reading Well’

The books on prescription service is part of the national ‘Reading Well’ programme which promotes the benefits of reading for health and wellbeing. Reading Well has two strands: books on prescription and mood-boosting books. Books on prescription helps people understand and manage their health and wellbeing using self-help reading. The scheme is endorsed by health professionals and supported by public libraries. National Institute of Clinical Excellence (NICE) guidelines show that self-help reading can help people with common mental health conditions such as anxiety and depression. Similarly the libraries are seen as non-stigmatised space that is both welcoming and empowering for people with mental health problems.

8.6 Voluntary and Community Sector Services

There are a number of local voluntary and community groups (VCSE) working to support people facing mental health issues in the borough. These include branches of national organisations, e.g. Alzheimers, Age UK and Samaritans. However most of these are small community based groups that are established delivering tailored support to some of the most needy marginalised communities in the borough, for example the Black Peoples Mental Health Association. There are also a growing number of VCSE groups including sports and environmental groups who have recognised the impact of extending their work to include people facing isolation, worklessness and mental health issues in their work and activities. Some examples are highlighted below.

East London Mental Health Support (ELMS) offer a free counselling service for Waltham Forest residents facing mental health problems. This involves the opportunity to share difficulties that are being faced with a trained counsellor and work towards resolving them.

Organic Lea are a long-standing community food growing organisation who provide supported, structured gardening and cooking volunteering and therapeutic horticulture and nature-engagement activities, for people referred or self-referred with common mental health conditions. They also

provide low-cost garden maintenance and gardening in people's own homes to improve the mental and physical wellbeing of socially isolated, vulnerable adults with support needs.

'Health and Happiness for All' is a local organisation that has been running since 2011. They offer free walk-in health and wellbeing sessions conducted by a group of qualified doctors and CBT therapists for the diverse communities. They offer free weekly sessions and they have supported many service users who have been suffering from depression and drug addiction.

Coping Through Football is an initiative which runs in partnership between London Playing Fields, NELFT and Leyton Orient Trust. It primarily aims to support the recovery of adults and young people who have experienced serious mental health issues by engaging them in group football activities but anyone who is struggling with their mental health is able to participate. Football for Health is a session aimed specifically at young people (age 11+) experiencing early emotional wellbeing issues. The project aims to improve both the physical and mental wellbeing of its participants and in the process increase their confidence and self-esteem.

8.7 Recommendations:

- **Improve awareness of existing services across the borough among both health professionals and residents, particularly those in high risk groups and those facing social and environmental conditions that are impacting on their mental wellbeing.**
- **Secure Public Health funding for the continued support of the pan London Digital Mental Wellbeing project over the next two years, including ensuring there is good awareness of the service among relevant stakeholders. Explore what local data in terms of user numbers, demographics etc. can be obtained for evaluation purposes.**
- **Utilise VCSE services and resources better to support individuals experiencing low level mental health problems through awareness raising among frontline professionals and specific programmes such as social prescribing.**

9.0 Measuring mental wellbeing

There is a need to ensure there is a consistency of approach to measuring mental wellbeing across the borough. This is in terms of evaluation of projects and interventions and in terms of any surveys to measure population mental wellbeing levels.

In terms of evaluating local initiatives to improve mental wellbeing, the best tool available is the **Warwick Edinburgh Mental Wellbeing Scale (WEMWBS)** which is a validated scale of items used for the measurement of mental wellbeing of the population aged 13 to 74. There is a longer version of 14 questions and a shorter version of seven items. It is the seven item scale that we recommend for use locally, as it is validated, widely used throughout the UK, free to use and quick and easy to administer. It is also now available in a number of different languages including Urdu, Arabic, French, Lithuanian and others. The scale comprises seven positively worded statements and participants are asked to answer each mental wellbeing statement for the previous two weeks. See appendix 2 for the full set of questions. Many local projects are already utilising this scale for evaluation purposes including the Waltham Forest social prescribing service.

Personal wellbeing, which is about how positively people evaluate their own lives, and highly relevant to mental wellbeing is also measured by ONS as part of the Annual Population Survey and this provides estimates at borough level (see section 1.3). This includes four questions, each scored on a 10 point scale, as shown in appendix 3. The questions relate to satisfaction with life, feeling the things you do are worthwhile, happiness and feeling anxious. While the WEMWEBS scale is the recommended choice for measuring mental wellbeing, local surveys which require a more general measure of wellbeing can utilise this scale.

9.1 Recommendations:

- **Promote the consistent use of the WEMWBS tool for measuring mental wellbeing, particularly in terms of evaluating services and interventions to promote mental wellbeing.**
- **Explore and agree the best options for measuring mental wellbeing in younger children and in school and other children's settings.**

Appendix 1 – Summary of national mental health policy

National policies	
<p>No Health Without Mental Health: A cross- government mental health strategy for people of all ages⁴⁷</p>	<p>6 Shared outcomes:</p> <ul style="list-style-type: none"> • More people will have good mental health • More people with mental health problems will recover • More people with mental health problems will have good physical health • More people will have a positive experience of care and support • Fewer people will suffer avoidable harm • Fewer people will experience stigma and discrimination
<p>The Marmot review final report – Fair Society, Healthy Lives⁴⁸</p>	<p>Recommendations:</p> <ul style="list-style-type: none"> • Giving every child the best start in life • Enabling all children, young people and adults to maximise their capabilities and have control over their lives. • Creating fair employment and good work for all • Ensuring a healthy standard of living for all • Creating and developing sustainable places and communities • Strengthening the role and impact of ill-health prevention
<p>The Care Act 2014</p>	<p>Changed many aspects of how social care support is arranged, and is intended to give greater control and influence to those in need of support. It makes clear that local authorities must provide or arrange services that help prevent people developing needs for care and support or delay people deteriorating such that they would need ongoing care and support.</p>
<p>Sustainability and Transformation Plans (STPs)</p>	<p>These are a new planning framework for NHS services. The North East London Sustainability and Transformation Plan operates across 7 boroughs namely Tower Hamlet; Havering; City & Hackney; Newham; Redbridge, Barking & Dagenham and Waltham Forest. Mental Health is a cross-cutting theme across all key priority areas with a specific mental health work programme including mental wellbeing promotion.</p>
<p>Thrive London (Thrive LDN)</p>	<p>Thrive London is an initiative led by the London Health Board (LHB). The LHB brings together local government, health partners and the Mayor of London to provide strategic political leadership for London on health issues. Thrive London has 6 key areas of focus, It strives for London to be:</p> <ol style="list-style-type: none"> 1. A city where individuals and communities take the lead 2. A city free from mental health stigma and discrimination 3. A city that maximises the potential of children and young people 4. A city with a happy, healthy and productive workforce 5. A city with services that are there when and where needed 6. A zero suicide city

<p>The Waltham Forest Health and Wellbeing strategy (2016-2020)</p>	<p>The Waltham Forest Health and Wellbeing strategy sets out six key principles for working and one of these is to ensure ‘parity of esteem’ between mental and physical health and to deliver an increased focus on population mental wellbeing in addition to delivering services to treat people with mental health conditions. Unsurprisingly therefore, mental health and wellbeing is a theme that runs right through our health and wellbeing strategy and central to this is tackling the stigma and discrimination faced by people with mental health conditions.</p> <p>The strategy aims to deliver three high level outcomes:</p> <ul style="list-style-type: none"> • The Best Start in Life • Healthy, Happy, Longer Lives • Thriving Maturity and Protected Communities
<p>New Horizons: A shared vision for mental health⁴⁹</p>	<p>Aim:</p> <ul style="list-style-type: none"> • To improve the mental health and well-being of the population • To improve the quality and accessibility of services for people with poor mental health
<p>New Horizons: Flourishing People, Connected Communities. A framework for developing well-being⁵⁰</p>	<p>This approach aims to enhance the connections between mental and physical health in order to improve overall well-being; the connections between people to improve resilience and reduce inequalities; and the connections between communities and their environment to ensure a sustainable future.</p>
<p>Preventing Suicide in England – A cross- government outcome strategies to save lives⁵¹</p>	<p>Overall objectives:</p> <ul style="list-style-type: none"> • To reduce suicide rate in the general population • To better support those bereaved or affected by suicide.
<p>Healthy Lives Healthy People, White paper⁵²</p>	<p>Supports a broad definition of mental health and recognises the value of promoting mental health and well-being of the whole population and the role this plays in contributing to the wider social and economic goals and to tackling health inequalities.</p>
<p>Our Health, Our Care, Our Say⁵³</p>	<p>As well as helping people to increase their own positive mental health and resilience, we also need to address external factors such as violence, abuse or workplace stress</p> <p>Calls for each local area to have a mental health promotion strategy which addresses these issues as well as the issues of individual lifestyles.</p>
<p>Making it Possible: Improving mental health and well-being in England⁵⁴</p>	<p>The key areas promoted in the publication include marketing mental health, equality and inclusion, and support for parents and other carers of young children.</p>
<p>Mental Health and Social Exclusion (Social</p>	<p>The action plan proposes actions to tackle six main areas:</p>

Exclusion Unit⁵⁵

- Stigma and discrimination
- The role of health and social care in tackling social exclusion
- Employment
- Supporting families and community participation
- Getting the basics right (decent housing, financial advice)
- Making it happen – the implementation process

The Short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS)

**Below are some statements about feelings and thoughts.
Please tick the box that best describes your experience of
each over the last 2 weeks**

STATEMENTS	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	1	2	3	4	5
I've been feeling useful	1	2	3	4	5
I've been feeling relaxed	1	2	3	4	5
I've been dealing with problems well	1	2	3	4	5
I've been thinking clearly	1	2	3	4	5
I've been feeling close to other people	1	2	3	4	5
I've been able to make up my own mind about things	1	2	3	4	5

"Short Warwick Edinburgh Mental Well-Being Scale (SWEMWBS)
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Appendix 3

Annual Population Survey 'personal wellbeing' measures.

1. Overall, how satisfied are you with your life nowadays?

(0 is 'not at all satisfied' and 10 is 'completely satisfied')

2. Overall, to what extent do you feel that the things you do in your life are worthwhile?

(0 is 'not at all worthwhile' and 10 is 'completely worthwhile')

3. Overall, how happy did you feel yesterday?

(0 is 'not at all happy' and 10 is 'completely happy')

4. Overall, how anxious did you feel yesterday?

(0 is 'not at all anxious' and 10 is 'completely anxious')

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