Ayrshire & Arran

Mental health & wellbeing strategy
1. Introduction

1.1 This is the second mental health and wellbeing strategy that has been produced in Ayrshire and Arran. The work is led by NHS Ayrshire & Arran, but a strategy like this involves a range of partners, agencies, communities and individuals across the area. Improving mental health and wellbeing is for the whole population.

1.2 The constituent parts of good mental health and wellbeing have been identified and, irrespective of the context or external circumstances, these are immutable. The six areas that require to be considered for optimum mental health & wellbeing are:

- Promoting health & healthy behaviours
- Sustaining inner resources
- Increasing social connectedness, relationships and trust in families & communities
- Increasing social inclusion and decreasing inequality and discrimination
- Increasing financial security and creating mentally healthy environments for working and learning
- Promoting a safe and supportive environment at home and in the community.

The strategy will consider all these areas.

1.3 The strategy does not encompass mental health services or issues relating to mental illness. There is already a progressive national strategy for people who experience mental health problems (*Mental Health Strategy for Scotland 2012 – 2015*)\(^1\). Instead this local strategy focuses on ensuring that people in Ayrshire and Arran recognise that we all have mental health and wellbeing and that it can be maintained and improved, like all other aspects of health. Like

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\(^1\) Mental Health Strategy for Scotland 2012 – 2015\(^1\), Scottish Government, 2012

[http://www.scotland.gov.uk/Publications/2012/08/9714](http://www.scotland.gov.uk/Publications/2012/08/9714)
other aspects of health, mental health is also more vulnerable to damage/illness if there are inequalities and mental wellbeing is not explicitly supported.

1.4 There are well recognised factors that promote mental wellbeing and those which are challenges to our mental wellbeing. The overall aim of this strategy is to help strengthen the factors that promote mental wellbeing at both individual and community level. The strategy adopts an approach that follows the life-course from pre-birth to older people. The areas identified for action are all based on the best evidence that is currently available and is fully described in the attached appendices to the strategy.

1.5 Accordingly, although this is an extremely complex area, it is our intention that this strategy should be concise and accessible. To help translate the strategic direction into reality, there will also be a series of an accompanying action plans for the strategy. Each action plan will have a three-year timescale.

2. Background

2.1 Mental health and wellbeing is affected by a wide range of factors that we experience in our lives, such as forming and sustaining relationships, going to work and school, being able to participate in leisure activities and feeling part of the wider community. All aspects of our lives and the lives of those around us can be affected by our mental health and vice versa.

2.2 The state of our mental health is linked to a number of factors such as whether we experience social isolation, deprivation, unemployment or social discrimination. Whilst there have been many positive developments addressing these risk factors for mental health (such as Equality legislation), there are a number of risk factors that remain in this area. These include high levels of unemployment, homelessness, low educational achievement and poor vocational skills.

2.3 NHS Health Scotland has described how all this fits together (Table 1, below). This strategy focuses on the achievement of the intermediate outcomes (6 boxes in the lower section of the triangle).
3. Policy context

3.1 Because of the complexity of mental health and wellbeing, there is a large number of policy initiatives that also impact on the mental health and wellbeing of individuals and communities. It is not the intention of this strategy to attempt to encompass these, but the list below identifies those that are likely to have the biggest impact on mental health and wellbeing.

- The economic strategy
- Equally well implementation plan
- Child poverty strategy
- Getting it Right for Every Child
- Early Years Framework
- Delivering a healthy future: Children & Young People’s health
- More Choices, More Chances
- Achieving our Potential
- Carers and Young Carers strategies
- Health Works
- Reshaping care for older people
- Good Places, Better Health
- Safer Lives, Changed Lives
- Volunteering strategy
- Strategies for changing health behaviours: active living, healthy eating, tobacco control, drugs & alcohol, sexual health & teenage pregnancy.

This list is not exhaustive but it does demonstrate the breadth of factors that affect mental wellbeing.

3.2 Some contextual issues are likely to have a bigger impact than others; for example, there is already a developing body of evidence that is demonstrating a negative impact of the welfare reforms on the mental health and wellbeing of individuals and communities. Therefore, all possible support mechanisms need to be invoked to try to maintain current levels of wellbeing.

3.3 To address such a wide range of issues, this mental health and wellbeing strategy needs to be “owned” by Community Planning partners and driven forward through that mechanism. Table 2 (below) demonstrates the wide range of agencies and partners who have a role in supporting mental health & wellbeing. Community Planning Partnerships are the optimum context for supporting this work, which will be driven forward by the Mental Health Leadership Group.
4. Vision for mental health and wellbeing in Ayrshire and Arran

4.1 The organisational mission statement for NHS Ayrshire & Arran is *Working together for the healthiest life possible for the people of Ayrshire & Arran*. This strategy is part of the contribution to the mental health and wellbeing dimension of that mission statement.

4.2 The overall, long-term aim of the mental health and wellbeing strategy is to contribute to healthy life expectancy and reduce inequalities in wellbeing. This will be done by:

- Increasing quality of life
- Improving mental wellbeing
- Reducing mental illness
- Reducing suicide.
4.3 The challenge associated with each of these cannot be over-estimated, so this strategy sets out a direction of travel for the next twelve years that intends to move Ayrshire and Arran towards the achievement of the long-term aim.

4.4 Outlined above (Table 1) are the intermediate outcomes which this strategy will work towards:

- Promoting health & healthy behaviours
- Sustaining inner resources
- Increasing social connectedness, relationships and trust in families & communities
- Increasing social inclusion and decreasing inequality and discrimination
- Increasing financial security and creating mentally healthy environments for working and learning
- Promoting a safe and supportive environment at home and in the community.

4.5 Promoting health & healthy behaviours

As already identified in paragraph 3.1, there are numerous national and local strategies that are being implemented by a wide range of organisations and individuals. It is not the intention of the mental health and wellbeing strategy to concern itself with overseeing how these strategies are being managed, and there is an expectation that the range of healthy behaviours will continue to be promoted locally. The evidence is that these activities will contribute to mental wellbeing.

4.6 Sustaining inner resources

This intermediate outcome refers to an individual’s capacity and ability to be resilient. It relates to purpose and meaning for individuals i.e. the feeling that one is making some sort of contribution and that there is a reason to get up each day. This section is about helping people develop a range of coping skills to deal with everyday stresses and using the evidence of “what works”, the strategy will identify this as one of its most important priority areas.

4.7 Increasing social connectedness, relationships and trust in families and communities

This intermediate outcome identifies that one of the most important aspects of maintaining our wellbeing (both mental and physical) is our degree of social connectedness. Evidence is strong – and growing – that the more social connections people have with each other, the less likely
they are to experience episodes of ill health and are likely to have a better sense of wellbeing. This is a very important area for development, although it is very challenging to support.

There is a considerable swell of opinion at this time that asset-based community development is a mechanism by which local social connections can be encouraged. This strategy will support such initiatives, using current available evidence to inform action.

4.8 Increasing social inclusion and decreasing inequality and discrimination

This outcome is about ensuring that those who are marginalised can be helped to be more integrated into mainstream society. Being (or feeling) excluded has a considerable negative impact on people’s mental wellbeing, so those individuals are at greater risk of experiencing poorer mental health. There are many groups of people who may be considered marginalised within our mainstream society in Ayrshire and Arran. For example, homeless people, people from different ethnic groups, people with any sort of disability, people who are lesbian, gay, bisexual and/or transsexual, people with mental health problems, prisoners, people with substance misuse problems and travelling people.

This strategy is concerned with developing the mental wellbeing and resilience of all these groups and in working towards increasing their social connectedness (as described above). Some of this will be by working directly with a group (e.g. prisoners) and the work already mentioned in relation to asset-based community development will support the second aspect.

In terms of addressing stigma for people with mental health problems, that is highlighted as a priority area (Commitment 4) of the national strategy for mental health and that will be taken forward under its auspices.

4.9 Increasing financial security and creating mentally healthy environments for working and learning

This is an important area of work for mental health and wellbeing, but this strategy intends to address financial inclusion in the same way as the work around healthy behaviours. Partners and NHS staff are increasingly recognising the importance of ensuring that everyone is able to access all the financial support that they are entitled to. Financial inclusion teams are working across Ayrshire and Arran, particularly with some of the more disadvantaged groups. Like the outcome on healthy behaviours, this strategy anticipates that this will continue and that contribution to wellbeing will continue to be made.
Conversely, healthy environments for working and learning will be a major focus of our attention. The education setting (nurseries, schools, special schools, colleges and universities) are all environments that can have a big impact – both positively and negatively - on people’s mental health and wellbeing. This strategy will ensure that there is continuing activity in these settings both at a (school/university) community level and also for children and young people as individuals.

The workplace too is an environment which can influence people’s wellbeing. It is recognised that there is a wide range of factors that can affect that: workload, colleagues, managers, work location, inflexible systems and lack of support for caring responsibilities and so on. This strategy acknowledges that there is a raft of other players involved in this agenda and that many of the HR policies in a workplace can contribute to mental wellbeing. Instead, this strategy will focus solely on the mental health and wellbeing dimensions of the workplace, including the role of work itself.

4.10 Promoting a safe and supportive environment at home and in the community

People have a fundamental need to feel safe when out and about in the community or in one’s own home. If that does not exist, then mental wellbeing can be compromised and individuals may begin to experience mental health problems.

There are a number of reasons for people not feeling safe in their communities; fear of violence, physical layout of public spaces, poor lighting, and lack of public transport or public transport that is not adequately staffed. Other people feel unsafe at home because of abuse either within the home or from neighbours. There are a number of community safety partnerships across Ayrshire and Arran and it is our intention to acknowledge the considerable contribution that their work makes to mental health and wellbeing and then to assume that this will continue to be delivered. This strategy will therefore not make further mention of this dimension of mental wellbeing

4.11 Acknowledging that there is much work underway elsewhere that contributes to mental health and wellbeing, this strategy will therefore focus on the following:

- Developing and sustaining inner resources, especially of marginalised groups
- Increasing social connectedness, relationships and trust in families & communities
- Creating mentally healthy environments for working and learning.
Each of these will be further developed to specify more precisely what should happen in relation to these, based on the best evidence that is currently available.

5. The Approach

5.1 In order to manage these three priority areas, above, each area will be addressed by taking a “life-course” perspective. There are four “categories” to help do this:

- Infants
- Children & young people (this may occasionally be sub-divided further)
- Working age adults
- Older people.

The tables below outline priority areas for activity over the next 12 years. It is recognised that, in some cases, the process of change and implementation may take some time and some resources but these areas for activity have been identified from the best available evidence. These are the areas for activity that will have the greatest chance of positively impacting on the mental health of people in Ayrshire and Arran.
6. Activities

All of these areas for activity impact on mental health and wellbeing. Activities have been linked to the outcome that it most closely aligns with, but all of the activity contributes to mental wellbeing. For example, “parenting programmes” or “asset based approaches” could be mentioned several times but is recorded only once.

All of the above will be underpinned by:

- A focus on marginalised groups.
- Training for staff working in universal services to promote infants, children’s and young people’s social, emotional and psychological wellbeing. This applies to all stages of staff experience i.e. in training (teachers, nurses) or when in post and is relevant to all categories and disciplines. This will include specific information portals, use of Intranet, LearnPro, online learning environments, face to face sessions, drop-in/advice sessions, seminars.
- Communication/media/social media plan.

Infants, children and young people

6.1 Priority area 1

Developing and sustaining inner resources, especially of marginalised groups

<table>
<thead>
<tr>
<th>Desired Intermediate Outcome(s)</th>
<th>Activities based on evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appreciation of own skills, attributes and environment</td>
<td>School-based programmes to promote mental health and wellbeing</td>
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<tr>
<td></td>
<td>Community based activities and volunteering opportunities</td>
</tr>
<tr>
<td>Ability to effect change including increasing control and mastery, self-efficacy, self determination</td>
<td>Responding to difficulties and challenges/problem solving teams and activities/play</td>
</tr>
<tr>
<td>Desired Intermediate Outcome(s)</td>
<td>Activities based on evidence</td>
</tr>
<tr>
<td>---------------------------------</td>
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</tr>
<tr>
<td>Increased confidence, increased positive sense of self</td>
<td>Information for prospective mums and dads</td>
</tr>
<tr>
<td></td>
<td>Antenatal and perinatal support to promote bonding and attachment</td>
</tr>
<tr>
<td></td>
<td>Parenting approaches and programmes</td>
</tr>
<tr>
<td></td>
<td>Information for parents from early years to adolescence</td>
</tr>
<tr>
<td></td>
<td>Childcare and nursery settings</td>
</tr>
</tbody>
</table>

### 6.2 Priority Area 2
**Increasing social connectedness, relationships and trust in families & communities**

<table>
<thead>
<tr>
<th>Desired Intermediate Outcome(s)</th>
<th>Activities based on evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased participation, engagement and attendance for all</td>
<td>Children’s involvement in asset-based community approaches</td>
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<tr>
<td>Increased social interaction for all</td>
<td>Raising awareness of positive role of adults</td>
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<tr>
<td></td>
<td>Intergenerational activities</td>
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<tr>
<td></td>
<td>Awareness of benefits and risks of social media networking</td>
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<tr>
<td>Better parent/guardian child relationship Parental relationship, peer relationship, friendship for all</td>
<td>Promoting attachment and bonding through play</td>
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<td></td>
<td>Supporting breastfeeding</td>
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</tbody>
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### 6.3 Priority Area 3
**Creating mentally healthy environments for working and learning**

<table>
<thead>
<tr>
<th>Desired Intermediate Outcome(s)</th>
<th>Activities based on evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mentally Healthy Nurseries and Schools</td>
<td>Counselling and advice services for children and young people</td>
</tr>
<tr>
<td></td>
<td>Promoting mental health and wellbeing aspects of Curriculum for Excellence</td>
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<td></td>
<td>Supporting Early Years Collaborative stretch aims</td>
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<tr>
<td></td>
<td>Mental health training</td>
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<tr>
<td></td>
<td>Supporting re-engagement with education for those who are marginalised from mainstream education</td>
</tr>
</tbody>
</table>
7. All of these areas for activity impact on mental health and wellbeing. Activities have been linked to the outcome that it most closely aligns with, but all of the activity contributes to mental wellbeing. For example, “volunteering” could be mentioned several times but is recorded only once.

### Working aged adults/older people

#### 7.1 Priority area 1

**Developing and sustaining inner resources, especially of marginalised groups**

<table>
<thead>
<tr>
<th>Desired Intermediate Outcome(s)</th>
<th>Activities based on evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased meaning, purpose, optimism and hope</td>
<td>Activities that promote mental health and wellbeing</td>
</tr>
<tr>
<td></td>
<td>Volunteering</td>
</tr>
<tr>
<td>Increased resilience</td>
<td>Tools specifically designed to help individuals improve and maintain their mental health and wellbeing e.g. Steps for Stress, Mindfulness, 5 Ways to Wellbeing etc</td>
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<tr>
<td></td>
<td>Creating organisational cultures in workplaces that support mental health and wellbeing</td>
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<tr>
<td>Increased individual mental health</td>
<td>Social prescribing</td>
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<tr>
<td></td>
<td>Public information campaigns</td>
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<tr>
<td></td>
<td>Training for professionals and volunteers to support people with mental health problems</td>
</tr>
</tbody>
</table>

#### 7.2 Priority Area 2

**Increasing social connectedness, relationships and trust in families & communities**

<table>
<thead>
<tr>
<th>Desired Intermediate Outcome(s)</th>
<th>Activities based on evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased participation, engagement and attendance for all</td>
<td>Asset-based community development</td>
</tr>
<tr>
<td></td>
<td>Environmental and green-space improvements</td>
</tr>
</tbody>
</table>
**Better parent/guardian child relationship.** **Parental relationship. Peer relationship, friendship for all**  
Support healthy relationships  
Activities referenced in the children and young people section

**Increased trust in the community by all**  
Social support interventions

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### 7.3 Priority Area 3

Creating mentally healthy environments for working and learning

<table>
<thead>
<tr>
<th>Desired Intermediate Outcome(s)</th>
<th>Activities based on evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased learning and development for all</td>
<td>Encouraging a range of learning opportunities, both formal and informal</td>
</tr>
</tbody>
</table>
| Increase mentally healthy workplaces | Workplace policies and procedures that support employees’ mental health and wellbeing  
Programmes to support employees |