9.0   Mental Health and Well-being

9.1   Introduction

'Mental health and mental well-being are fundamental to the quality of life and productivity of individuals, families, communities and nations, enabling people to experience life as meaningful and be creative and active citizens.' WHO European Declaration on Mental Health, 2005

At any one time one in six adults suffer from some form of mental illness. [10] These range from depression, which affects around 10%, [11] to schizophrenia affecting 0.2 – 0.4% [12] of the population at any one time. One in ten children aged 5-16 have a diagnosable mental health disorder. [13]

Poor mental health and mental ill-health have strong links with social exclusion and lifestyle factors such as physical inactivity, smoking, drugs, and alcohol misuse.

Factors linked to an increased risk in mental illness include:
▼ Gender: men have an increased risk (1.5 to 2.5 times higher) [14][15] of psychosis but women are more likely to be treated for a mental health problem than men (29% compared to 17%) [16]
▼ Some Black and Minority Ethnic (BME) groups, where institutional racism may be contributory
▼ Socio-economic deprivation, unemployment and physical health
▼ Some groups are particularly vulnerable: refugees, homeless people and prisoners [17]
▼ Individual and community factors like coping skills, strong religious or spiritual beliefs, formal and informal social networks and group membership can be proactive. The skills and attributes associated with positive mental health may lead to improved physical health, better education attainment and economic well-being. [18]

[10] Office for National Statistics. Psychiatric morbidity among adults living in private households in Great Britain1
[11] Jenkins R, Bebbington B, Brugha, TS et al. British Psychiatric Morbidity Survey. British journal of Psychiatry 1998; 173, 4-7
[12] Birchwood M, Hallet S, Preston m. Schizophrenia – an integrated approach to research and treatment. London: Longman, 1998
[13] Office for National Statistics, Mental health of children and young people in Great Britain, 2004
[14] McGrath J, Saha S, Welham J et al. A systematic review of the incidence of schizophrenia: the distribution of rates and the influence of sex, urbanicity, migrant status and methodology. BMC Medicine, 2:13. 2004
[15] Kirkbride J, Fearon P, Morgan C et al. Heterogeneity in incidence rates of schizophrenia and other psychotic syndromes. Archives of General Psychiatry 2006; 63:250-258
[16] Office for National Statistics: Better or Worse: A Longitudinal Study of the Mental Health of Adults in Great Britain. Press Release. London: The Stationery Office, 2003
[17] Health Inequalities in Sutton and Merton: Developing a platform for local action. Annual Report of the Director for Public Health 2005. London: Sutton and Merton PCT 2005
[18] National Institute for Mental Health in England (NIME)/Care Services Improvement Partnership (CSIP). Making it Possible: Improving Mental Health and ell-being in England. 2005

9.2 Our key priorities

Target	Plan
Year on year increase in the number/proportion of people with mental health problems in mainstream employment, mainstream education/training or voluntary work in integrated settings	**Community Plan**
Assisting people not in work or at risk of going onto incapacity benefit Indicators by which performance will be measured – People in receipt of incapacity related benefits for a minimum of 26 weeks helped into employment by Merton Council and partners of at least 16 hours per week or more for at least 13 consecutive weeks, as measured by records collected by consortium members (led by South West London and St George's Mental Health NHS Trust) for individuals worked with in the borough of Merton. – People who are on Statutory Sick Pay for reasons of mental health and have been signed off by a GP for at least one month helped to return to employment by Merton Council and partners for at least 16 hours per week for at least 13 consecutive weeks, as measured by records collected by consortium members (led by South West London and St George's Mental Health NHS Trust) for individuals worked with in the borough of Merton. – People on incapacity benefits for a minimum of 26 weeks helped into permitted work by Merton Council and partners of less than 16 hours per week for at least 13 consecutive weeks, as measured by records collected by consortium members (led by South West London and St George's Mental Health NHS Trust) for individuals worked with in the borough of Merton.	
Adults in contact with secondary mental health services in employment	**Local Area Agreement**
Number of issues made on recommended books on prescriptions - Bibliotherapy service	**Local Area Agreement**
Number of people with depression and/or anxiety disorders who are offered psychological therapies	**Local Area Agreement**
Number of people engaged in cultural Olympiad through arts activities and events	**Local Area Agreement**
By 2010 reduce mortality rates from suicide and undetermined injury by at least 20%	**Operating Plan**
Percentage of people on enhanced care programme approach (CPA) receiving follow up within 7 days of discharge from hospital	**Operating Plan**
Percentage of people admitted because of risk of self harm/suicide followed up within 48 hours of discharge	**Mental Health Trust Suicide Prevention Strategy**

Key Initiatives:
- Bibliotherapy programme
- Physical well-being checks for in-patients at SWL and St George's Mental Health Trust
- Graduate mental health workers – health promotion awareness with BME communities
- Merton Council offers lunch time activities for staff: Pilates, Tai chi, meditation and stress awareness to improve mental health and well being at work, emphasising prevention

9.3 What we want to achieve – delivering through actions

The Mental Health Promotion Strategy for Sutton and Merton (2008-2012) provides a local strategic framework to implement Standard One of the National Service Framework for mental health: 'promoting mental health and challenging the stigma of mental illness'.

The promotion of mental health takes a proactive and preventative approach to addressing needs in a wide variety of contexts including primary care, the workplace, schools and colleges and health care settings.

Objective	Actions	Timescale	Lead (s)	Links to plans/ strategies
PRIMARY CARE				
Increase mental health awareness within primary care	Develop a plan to increase the level of mental health awareness and support in primary care – e.g. 'Mental Health First Aid'	2008 - 2012	SMPCT	
Increase advice and information available	Support the availability of mental health updated resource directory	2008 -2010	SMPCT	MH Commissioning Strategy Overview and Scrutiny
	Increase information and support to individuals with a first prescription of anti-depressants	2008 -2011	SMPCT	MH Commissioning Strategy Overview and Scrutiny
	Provide improved access to Cognitive Behavioral Therapy (CBT) in libraries, community centres and other lifelong learning settings	2010	SWL and St Georges Mental Health Trust	

Objective	Actions	Timescale	Lead (s)	Links to plans/strategies
	Work with local libraries to provide 'prescribed self-help' material (books on prescription)	2009	SWL and St Georges Mental Health Trust LB Merton – Community and Housing – Library Service	MH Commissioning Strategy Cultural Strategy
Promote physical well being for those with long term mental illness	Develop the use of the SMI register and the implementation within primary care of routine health checks and advice on maintaining health and fitness	2010	SWL and St Georges Mental Health Trust SMPCT	MH Commissioning Strategy Overview and Scrutiny
SCHOOLS AND YOUNG PEOPLE				
Increase mental health promotion within school communities	Implement Social Educational Aspects of Learning Program (SEAL)		LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
	Wave 1 – All Primary Schools to support children develop better relationships	2008	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
	Wave 2 - Primary Schools to have two assistants in all primary schools	2009	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010

Objective	Actions	Timescale	Lead (s)	Links to plans/strategies
	Wave 3 – Primary Schools to have three additional workers CAMHs support to schools	2010	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
	SEAL in Secondary Schools – pilot 2 in schools - Programs on depression, self harm and eating disorders	2010	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
Young Carers	Develop a tool kit to support young carers	2009	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
Young People	10 Year Strategy for Youth - Positive activities for youth: Build friendships – social skills. Health through exercise Data base on things to do Utilise Youth Opportunities Fund to engage	2010	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
All Young People	Strengthen links between CAMHs, Early Intervention in Psychosis, Schools and other services	2009	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010

Objective	Actions	Timescale	Lead (s)	Links to plans/strategies
	Accessible information and advice - Review Tier 1 services and identify opportunities to strengthen e.g. mental health First Aid	2010	– Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
Increase mental health promotion within vulnerable groups within school communities	Increase mental health promotion interventions at particularly stressful times within the school year such as exam times	2011	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
	Strengthen practice in transitions e.g. when changing schools	2011	LB Merton – Children, Schools and Families SMPCT	Children and Young People Plan 2007 - 2010
SPORT, LEISURE AND RECREATION				
Increase mental health promotion with health and leisure facilities within the area/population	Increase understanding amongst leisure facility staff of the links between physical activity and mental well-being	2009	LB Merton – Environment and Regeneration – Leisure and Culture	Sports, Health and Physical Activity Strategy
	Consider integrated aspects of life-style coaching with fitness coaching	2009	LB Merton – Environment and Regeneration – Leisure and Culture	Sports, Health and Physical Activity Strategy

Objective	Actions	Timescale	Lead (s)	Links to plans/ strategies
Raise community awareness of the link between mental health and physical health	Develop media campaigns detailing the evidence in support of the positive impact of sport and leisure on mental well-being	2011	SMPCT – health improvement SWL and SG LB Merton – Environment and Regeneration – Leisure and Culture	Sports, Health and Physical Activity Strategy
Promote mental health within sport and leisure for vulnerable groups in the community and challenge barriers to sport and leisure	Increase access to leisure and recreational facilities – football coaching		LB Merton – Environment and Regeneration – Leisure and Culture SWL and St Georges Mental Health Trust	Sports, Health and Physical Activity Strategy
WORKPLACES				
Promote mental health within the working-age population of adults in the borough	Demonstrate best employment practice – appropriate employment policies in place	2009	SMPCT LB Merton SWL and St Georges Mental Health Trust	LB Merton's Healthier Workforce Programme

Objective	Actions	Timescale	Lead (s)	Links to plans/ strategies
	Ensure employers in the borough gain access to the resource pack for management, training and development, based on HSE management standards for workplace stress		LB Merton SWL and St Georges Mental Health Trust	
	Develop partnership links between employers and local leisure providers to promote physical activity	2010	SMPCT LB Merton – Corporate Services SWL and St Georges Mental Health Trust	
	Support networks for individuals working in high risk occupations (such as police, social work and teaching)	2009	SMPCT LB Merton – Corporate Services SWL and St Georges Mental Health Trust	
Promote mental health for vulnerable groups of individuals within workplace	Encourage primary care services to obtain additional support for patients of working age who have been off sick due to anxiety/ depression for over 12 weeks, e.g. offering exercise on prescription	2011	SWL and St Georges Mental Health Trust	LB Merton's Healthier Workforce Program

Objective	Actions	Timescale	Lead (s)	Links to plans/ strategies
	Increase the level of support and information for individual employers who are faced with staff with a record of mental ill-health	2011	SWL and St Georges Mental Health Trust	LB Merton's Healthier Workforce Programme
PEOPLE IN CONTACT WITH CRIMINAL JUSTICE SERVICES				
Staff	Stress Awareness Training for Police Management to increase effectiveness in stress management	2009	Met Police	
People in Custody	Increasing Safety - Regular audit of possible ligature points in custody suites	2009	Met Police	
	Referral to substance misuse services - Drug Arrest and Referral service - to respond proactively to people's substance misuse needs once in custody	2009	LB Merton – Chief Executive's – Safer Merton	
People Suffering Chronic Exclusion	To proactively address causes and symptoms of chronic exclusion - identify 30 people suffering chronic exclusion	2011	SWL and St Georges Mental Health Trust	