

Mental health and wellbeing plan: discussion paper and call for evidence

This consultation closes at

11:45pm on 7 July 2022

Call [here](#) and questions [here](#).

1) How can we help people to improve their own wellbeing?

Your ideas may include actions which can be taken by different types of organisations – such as national and local government, public services such as schools, and the NHS, employers and the private and voluntary sectors. It can also include things that happen between family members and local communities.

Please provide your suggestions in relation to the wellbeing of different groups:

a) Infants and their parents or primary caregivers

b) Children and young people

c) Working age adults

d) Older adults

e) People that are more likely to experience poor wellbeing (see Annex A)

RESPONSE

The government is in a prime position to develop and embed public mental health policies and strategies that support individuals to lead a healthy life, specifically those which target the conditions and environments in which they are born, grow, study and work.

The World Health Organization (2005) states that “some of the major determinants of mental health are located within social and economic domains and include: financial security, social inclusion and access to supportive social networks; stable and supportive family, social and community environments; access to a variety of activities; having a valued social position; physical and psychological security; opportunity for self-determination and control of one’s life; and access to meaningful employment, education, income and housing.” (p.92)

As such, supporting good mental health requires a Health in All Policies approach, which in turn involves intersectoral and multidisciplinary collaboration and embedding a health perspective into policy decisions made across all appropriate areas. It is also crucial that the wider determinants of health, such as living and working conditions and housing are always acknowledged within and considered by government legislation. In addition, adequate funding must be in place to ensure that the selected policies and strategies to support good mental health can be implemented properly.

It is crucial that a population level approach is taken if we are to maximise impact for all communities. Smoking prevalence in England declined after robust smoke-free legislation came into force and smoking cessation programmes were widely implemented by local authorities. Changing

the environment through public health policies has been fundamental in helping thousands of people in England to quit smoking or never start. The recent Khan review highlighted the importance of this approach and the next steps needed. Applying a similar public health approach to mental health is crucial to support wellbeing at both the individual and population level.

Strategies by the devolved nations have already incorporated a public health approach to mental health in their plans. The Northern Ireland Mental Health Strategy 2021 – 2031 sets out the importance of social determinants of health and the need to work at a population level to promote good mental health. The Scotland Mental Health Strategy 2017 also emphasised the importance of prevention and population approaches. England’s 2011 policy strategy “No health without mental health” argued that services quality and efficiency would be improved if the approach taken to tackle the wider social determinants and consequences of mental health problems was broadened. The new 10-year Mental health Plan however must not only include policies that are built with this approach in mind but also a concrete plan and adequate funding for implementation.

References:

HM Government. No health without mental health. A cross-government mental health outcomes strategy for people of all ages [Internet] 2011. Available at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf [Accessed on 06 Jul 2022].

Northern Ireland Department of Health. Mental Health Strategy 2021 – 2031. [Internet] 2021. Available at <https://www.health-ni.gov.uk/sites/default/files/publications/health/doh-mhs-strategy-2021-2031.pdf> [Accessed on 06 Jul 2022].

Scottish Borders Mental Health Strategy 2017 [Internet] 2017. Available at nhs.uk/media/521799/mentalhealthstrategy17.pdf [Accessed on 06 Jul 2022].

World Health Organization, 2005. Promoting mental health: concepts, emerging evidence, practice. Geneva: WHO, available at <https://apps.who.int/iris/bitstream/handle/10665/42940/9241591595.pdf>

2) Do you have any suggestions for how we can improve the population’s wellbeing?

This can include ideas about what local people and communities can do together, as well as things you want to see in health services, wider public services such as education settings, places of employment and the private and voluntary sectors.

Please provide your suggestions in relation to the wellbeing of different groups:

- a) Infants and their parents or primary caregivers
- b) Children and young people
- c) Working age adults**
- d) Older adults
- e) People that are more likely to experience poor wellbeing (see Annex A)

RESPONSE

Royal Society for Public Health believes that mental health promotion is everyone's business, and as such, we advocate for an approach that provides the Public Health Workforce (PHW) – particularly those that are in a position to influence health and wellbeing – with a good understanding of how they can support mental wellbeing, prevent mental health issues, and the wider needs of those with mental illnesses. The PHW play a fundamental role in keeping the UK population healthy, by closely working with communities and promoting health and wellbeing. They are also critical in alleviating mental health pressures on the NHS and the wider social care system.

Offering training and continuous professional development opportunities to the PHW will enable them to further support the population and improve wellbeing. A practical, evidence-based framework for training across primary and community care services (and beyond) is provided by the Make Every Contact Count (MECC) approach. MECC enables the opportunistic delivery of consistent and concise healthy lifestyle information and support through short conversations (no more than a few of minutes) similar to the brief advice approach used with alcohol and recommended for smoking.

The MECC approach has been proven to be successful as a tool to support behaviour change in the areas of smoking, alcohol, weight management, and physical activity. The Royal Society for Public Health was commissioned by Health Education England (HEE) North to address this by rolling out MECC for Mental Health training across the frontline primary and community care workforce in the region (further information can be found at link referenced as n.1).

An evaluation of this work shows the benefits of this approach, including that when a short training programme is coupled with management support it can help MECC training participants to gain skills and confidence for having effective mental health conversations. Importantly, this approach showed changes to daily practice as these conversations were embedded into everyday interactions with the public.

A report with an evaluation and impact analysis of the MECC programme is due to be released on the 20th July 2022. As agreed with Health Education England, the report and data are embargoed until then. We will share this report with DHSC and would welcome the opportunity to discuss the programme of work and findings in detail.

In addition to the MECC training, RSPH provides a range of mental health related training programmes that are relevant to people working in all sectors and the general population, including:

- Arts, Culture and Heritage: Understanding their complex effects on our health, developed by RSPH and University College London (UCL), supported by the MARCH Network, this course to increase knowledge and understanding of how community resources, including arts, culture and heritage activities can improve our physical and mental health and wellbeing.
- Understanding and responding to gambling harms: A brief guide for professionals, this free online learning course has been developed in collaboration GambleAware. Our online course will provide useful guidance for people who want to provide brief interventions to address risks and harms related to gambling disorders.

RSPH believes that providing this training to the PHW and enhancing their knowledge about mental health, gives them the tools with which they can better support their communities mental health and wellbeing. It is important to highlight that the wider and core PHW is exhausted after the Covid-19 pandemic and is facing burn-out and issues with their own wellbeing and the toll that supporting their populations through a health crisis and now an economic one is taking on that The

government must develop holistic and sustainable strategies that support both the population and the people who deliver these services or risk losing a vital workforce.

References

1. RSPH. Making every contact count: MECC for mental health [Internet] 2022. Available at [https://www.rsph.org.uk/our-work/programmes/making-every-contact-count-mecc-for-mental-health-training-programme.html#:~:text=The%20Make%20Every%20Contact%20Count,Health%20Education%20England%20\(HEE\)](https://www.rsph.org.uk/our-work/programmes/making-every-contact-count-mecc-for-mental-health-training-programme.html#:~:text=The%20Make%20Every%20Contact%20Count,Health%20Education%20England%20(HEE)) [Accessed on 07 Jul 2022]
2. RSPH. Arts, Culture and Heritage: Understanding their complex effects on our health [Internet] 2022. Available at <https://www.rsph.org.uk/our-services/e-learning/courses/arts-culture-and-heritage.html> [Accessed on 07 Jul 2022]
3. RSPH. Understanding and responding to gambling-related harm. [Internet] 2022. Available at <https://www.rsph.org.uk/our-services/e-learning/courses/online-course-understanding-and-responding-to-gambling-related-harm.html> [Accessed on 07 Jul 2022]

3)How can we support different sectors within local areas to work together, and with people within their local communities, to improve population wellbeing?

This includes a wide range of public services, including education settings, social care, the NHS, voluntary sectors, housing associations and businesses.

RESPONSE

In RSPH's experience, convening all stakeholders to talk about their local situation and discuss practical solutions to problems is an effective way of promoting coordinated action, new partnerships, and innovation.

For example, between 2020 – 2022, RSPH partnered with Citizen's Advice and Hull City Council to facilitate a series of meetings and workshops with a wide range of local stakeholders (including community leaders) to understand the scale and impact of financial insecurity and debt on the mental wellbeing of the population in Hull.

Stakeholders developed an action plan that called for 1) more ways of influencing service behaviours, by equipping the workforce with knowledge to have financial wellbeing conversations; 2) improved understanding of the local context, policy, intelligence and data to support greater analysis of the financial needs of the population they served, 3) more engagement with and listening to Hull's citizens. This resulted in stakeholders further listening to and empowering the community, offering the workforce adequate tools to address local need and gathering data to better understand who they served.

Hull also established a Financial Security Network with clear aims, objectives and priorities around bringing financial security to the population by influencing local services, for example, the NHS and the welfare system.

Programmes such as the one implemented in Hull will only have a meaningful impact on people's wellbeing if adequate funds and a clear strategy for implementation are set out. Different sectors within local areas will have difficulties working together if they do not have the right resources to support them. It is also vital that when these stakeholders do come together their expertise is acknowledged and calls for action and suggestions are implemented. This is how population wellbeing can really improve.

Citizen's Advice, The Health Foundation, and the Royal Society for Public Health. Financial Insecurity in Hull: Workshop Report [Internet]. 2021 Available at:

<https://cmis.hullcc.gov.uk/CMIS/Document.ashx?czJKcaeAi5tUFL1DTL2UE4zNRBcoShgo=H%2F1mTZ3hA%2BiTxuE9bDKHy%2FCJ%2BKUdXiyHO%2B25dyQpceTT%2BBQrrUe5ng%3D%3D&rUzwRPf%2BZ3zd4E7lkn8Lyw%3D%3D=pwRE6AGJFLDNlh225F5QMaQWctPHwdhUfCZ%2FLUQzgA2uL5jNRG4jdQ%3D%3D&mCTIbCubSFfXsDGW9IXnlg%3D%3D=hFflUdN3100%3D&kCx1Ans9%2FpWZQ40DXFvdEw%3D%3D=hFflUdN3100%3D&uJovDxwdjMPoYv%2BAJvYtyA%3D%3D=ctNJff55vVA%3D&FgPIIEJYlotS%2BYGoBi5oIA%3D%3D=NHdURQburHA%3D&d9Qjj0ag1Pd993jsyOJqFvmyB7X0CSQK=ctNJff55vVA%3D&WGewmoAfeNR9xqBux0r1Q8Za60lavYmz=ctNJff55vVA%3D&WGewmoAfeNQ16B2MHuCPMRKZMwaG1PaO=ctNJff55vVA%3D> [Accessed on 07 Jul 2022]

4) What is the most important thing we need to address in order to reduce the numbers of people who experience mental ill-health?

This might include actions which can be taken by national and local government, public services such as education settings, social care, the NHS, and the private and voluntary sectors.

Please provide your suggestions in relation to different groups:

- a) Infants and their parents or primary caregivers
- b) Children and young people
- c) Working age adults**
- d) Older adults
- e) People that are more likely to experience mental ill-health (see Annex A)

RESPONSE

It is important to demystify mental health within the health system and beyond. Empowering people so they feel confident to have meaningful conversations, creating safe spaces that facilitate difficult conversations and training the workforce, so they feel comfortable in engaging with those difficult conversations. An approach that helps build all this is Making Every Contact Count (MECC) for Mental Health. It is a blanket approach that supports health services to promote wellbeing and address mental health as part of their daily practices.

Through the MECC approach, millions of interactions every day are used as opportunities to improve health and wellbeing, meaning each of us can play a part in achieving population-level change. Applied to mental health, the MECC approach not only provides important signposting and support, but it also helps to normalise speaking about a subject which otherwise can be seen as stigmatising and taboo. MECC for Mental Health reduces the barriers presented by both lack of awareness and confidence in talking about mental health and concerns about asking for help.

RSPH 's experience of designing and delivering a MECC for Mental Health programme across the North demonstrated that this short training programme coupled with management support can help individuals to gain skills and confidence in having mental health conversations, increasing the likelihood of them asking for help and support when needed.

An independent evaluation of the RSPH MECC for Mental Health training was conducted using data from 450 participants collected through questionnaires, interviews, focus groups and observations of training sessions. The data showed statistically significant increase in participants' capability, opportunity, and motivation to have conversations with people about their mental health, and to

refer people for further support. The follow-up stage of the evaluation also found a statistically significant increase in the number of conversations about mental health and wellbeing which participants were having, compared with before the training.

At the follow-up, more than three quarters of participants reported avoiding using stigmatising language, signposting, asking open questions, listening reflectively, asking people twice if they were ok, and responding empathetically. On average, each participant reported seeing 12 patients or service users per fortnight who would benefit from talking about their mental health and wellbeing. The MECC for Mental Health training programme could have a positive impact on over 13,000 interactions every 2 weeks.

These findings clearly demonstrate how effective MECC for mental health is, however, there are other challenges which need to be addressed alongside any implementation at a national level. It is known that COVID-19 has disrupted mental health services delivery and delayed the implementation of the NHS Long Term Plan for mental health and the pandemic has increased demands for these services. Simple approaches like MECC can help the population and help alleviate pressures on the system, however, funds must be allocated for implementation.

Reference

1. The Health Foundation. The NHS Long Term Plan and COVID-19 [Internet] 2021. Available at <https://www.health.org.uk/publications/reports/the-nhs-long-term-plan-and-covid-19> [Accessed on 07 Jul 2022]

5) Do you have ideas for how employers can support and protect the mental health of their employees?

RESPONSE

Workplaces must be open to conversations and offer support around mental health. In 2021, NICE and Public Health England gathered evidence and wrote a guidance which suggested that reducing stigma and equipping managers with skills to have conversations with employees about mental health are likely to facilitate conversations that address concerns about their mental wellbeing.

This NICE guidance, “Mental Wellbeing at Work” highlights how to create the right conditions to support mental wellbeing at work through an environment and culture of participation, equality, safety, and fairness in based on open communication. It is important to stress that providing employees with awareness and skills to talk about their mental health through training contributes to such culture. The RSPH provides mental health awareness qualifications and training:

- Mental Health at Work e-learning, developed by RSPH with the collaboration of Mental Health First Aid (MHFA) England It aims to raise awareness of the importance of mental wellbeing in the workplace, introduce common mental health disorders and offer advice and guidance to maintaining good mental health.
- Arts, Culture and Heritage: Understanding their complex effects on our health, developed by RSPH and University College London (UCL), supported by the MARCH Network. It increases knowledge and understanding of how community resources, including arts, culture and heritage activities can improve our physical and mental health and wellbeing.
- Understanding and responding to gambling harms: A brief guide for professionals, this free online learning course has been developed in collaboration GambleAware. It provides useful guidance for people who want to provide brief interventions to address risks and harms

related to gambling disorders. The course also contains an optional topic for organisational leaders wishing to set up and implement the processes necessary to support their employees to provide intervention in the workplace. Organisations such as North East Lincs Council have offered to all their staff.

- Making Every Contact Count for Menopause, developed in partnership with Blusci (a mental health promotion charity in Manchester) and Health Education England, enables people to discuss in an open way, menopause and its link to mental health and wellbeing in the workplace. More information about this programme can be shared once the embargo to the HEE and RSPH evaluation report is over.

Employers must support employees, however they themselves need to be supported and offered the right tools to provide adequate assistance for those who work for them and build a positive culture around wellbeing. Mental health aid cannot be viewed as a burden in the workplace, but employers will only be able to build a positive culture on mental health if the right workplace conditions and support structures are put in place. The new 10-year mental health and wellbeing strategy must take this into account and plan for the creation of a system where there is adequate support for businesses of all sizes and types.

England's 2011 policy strategy "No health without mental health" aimed to mainstream mental health in England and stressed the importance of employers' responsibilities and opportunities to promote it. The NHS Long Term Plan focused mainly on schools and colleges, and RSPH calls for workplaces to also be targeted in this way so that the adult working population can also be supported.

References:

1. RSPH. Mental Health at Work – eLearning. [Internet] 2022. Available at <https://www.rsph.org.uk/our-services/e-learning/courses/mental-health-at-work.html> [Accessed on 07 Jul 2022]
2. RSPH. Arts, Culture and Heritage: Understanding their complex effects on our health – eLearning. [Internet] 2022. Available at <https://www.rsph.org.uk/our-services/e-learning/courses/arts-culture-and-heritage.html> [Accessed on 07 Jul 2022]
3. RSPH. Understanding and responding to gambling harms: A brief guide for professionals [Internet] 2022. Available at <https://www.rsph.org.uk/our-services/e-learning/courses/online-course-understanding-and-responding-to-gambling-related-harm.html> [Accessed on 07 Jul 2022]

9) Do you have any suggestions for how the rest of society can better identify and respond to signs of mental ill-health?

yes

no

If yes, please share your ideas.

You might want to consider community bodies, public services and private and community sectors. We are particularly interested in how society and different sectors can work together to get people support early.

Please provide your suggestions in relation to different groups:

- a) Infants and their parents or primary caregivers**
- b) Children and young people**
- c) Working age adults**
- d) Older adults**
- e) Groups who face additional barriers to accessing support**

RESPONSE

Communities and social networks can have a significant and positive impact on our health and wellbeing.

RSPH, supported by The Health Foundation, developed and tested a 'Community Spirit Level' with communities across the UK. It found that in areas affected by poverty and other forms of social disadvantage, strong and supportive community and social relationships and networks have been found to be a buffer against worse health outcomes. However, the 2010 Marmot Review revealed that around 25% of people living in the most deprived area of England are without any social support, compared to just 12% in the least deprived areas.

In collaboration with local organisations and communities, RSPH developed an evidence-based toolkit, the Community Spirit Level, which can be used by community organisations, local authorities, and anyone with an interest in improving the health and wellbeing of their local area. It includes step-by-step guidance on:

- Engaging with communities to reflect on, and measure, the community spirit in their local area
- Collecting evidence on the community spirit, including how to conduct focus groups and surveys
- Mapping a community's assets and key stakeholders
- Developing and managing an action plan to improve local community spirit
- How to keep people informed and engaged with local projects

Evaluation of this programme found that the following policies would improve local wellbeing:

- More investment in green spaces, like community gardens and play parks, to be used for activities and socialising
- Public sector institutions, like local councils and schools, purchasing goods and services from local businesses to stimulate the area's economy
- Setting up community hubs to provide activities and services focused on health and wellbeing

This programme is a great example of how building a stronger community can help build support for everyone in that communities' wellbeing.

Reference

1. RSPH. Community spirit programme. [Internet] 2021 Available at <https://www.rsph.org.uk/our-work/programmes/community-spirit-programme.html> [Accessed on 07 Jul 2022]

26) How can we support local systems to develop and implement effective mental health plans for their local populations?

You might want to consider barriers local systems currently face, as well as enablers which would support more effective ways of working.

RESPONSE

Making Every Contact Count (MECC) for Mental Health is an approach that helps local communities by supporting health services and promoting wellbeing. Through MECC, millions of interactions every day are used as opportunities to improve health and wellbeing, meaning many of us can play a part in achieving population-level change. Applied to mental health, the MECC approach not only provides important signposting and support, but it also helps to normalise speaking about a subject which otherwise can be seen as stigmatising and taboo. MECC for Mental Health reduces the barriers presented by both lack of awareness and confidence in talking about mental health and concerns about asking for help.

RSPH's experience of designing and delivering a MECC for Mental Health programme across the North, demonstrated that this short training programme coupled with management support can help individuals to gain skills and confidence in having mental health conversations, increasing the likelihood of them asking for help and support when needed.

For the training to be sustainably delivered and embedded in local systems, RSPH used a cascade model with the end-user training being delivered by Lead Trainers and Local Trainers based within local primary and community care organisations. RSPH also provided a full set of training materials, which were developed and tested with Health Education England, local stakeholder organisations and an Expert Reference Group including subject matter experts and those with lived experience.

An independent evaluation of the RSPH MECC for Mental Health training was conducted using data from 450 participants collected through questionnaires, interviews, focus groups and observations of training sessions. Findings conclude that further adaptations, so this approach can be used in settings, should be considered and developed so that health promotion messages are embedded in clinical conversations across the entire health system.