



MENTAL HEALTH

SUPPORT AND GUIDANCE

Contents

Foreword	2
About Mental Health	3
Historical View	4
Attitudes, stigma and impact	4
Research evidence	5
Mental ill health: a short guide	6
Legislation	7
Mental health conditions	8
Internal and external demands	9
Recovery	9
Support and help	10

Foreword

Mental health is part of our overall health. We all have it.

And yet, for many reasons, the term ‘mental health’ somehow doesn’t carry the same level of understanding or empathy as the term ‘physical health’.

Is mental health always stable? No. Just like physical health, mental health is constantly changing, influenced by a wide range of factors.

Mental health conditions are just as prevalent as physical illness – in fact, the World Health Organisation (WHO) predicts that by 2030, depression will be the single leading cause of the global burden of disease.

Attitudes are slowly changing, but there is still a long way to go in reducing stigma whilst increasing awareness and literacy. Many of us will have direct or indirect experience of poor mental health or mental ill health. Whatever our experiences, we will always continue to be mindful & respectful of each other’s reference points.

This information handout provides a helpful starting point for all of us here at Qube Learning; from understanding a little more about the actual term ‘mental health’, along with acknowledging attitudes & stigma associated with the term mental health.

It can be used as an initial awareness piece for identifying signs and symptoms, with headline information about illness and conditions or by highlighting that help is available, and being aware of some of the resources available to us all.

There’s something here that hopefully can bring us all to a consistent level of awareness as we start our journey together in creating a mentally healthy workplace.

Thank you for taking the time to read this resource – and for your participation during our onward journey.



Joe Crossley
Qube Learning CEO

About Mental Health

Below are some definitions and terminology associated with mental health.

What is 'mental health'?

Mental health has many different definitions and perceptions. The World Health Organisation defines it as 'The state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively & fruitfully, and is able to contribute to his or her community'. (WHO 2014)

Many publications and organisations describe it as having a resilience to pain, disappointment and sadness and is the ability to live life in a positive way.

Mental health is part of our overall health; a good barometer for the quality of our mental health can be shown by:

- How we think, feel & behave
- Healthy perception about ourselves, our life & our future
- Our self-esteem & self confidence
- Being able to cope with the demands of everyday life
- How stress affects us

We all have mental health – there is no health without mental health.

What is 'mental ill-health'?

Terminology is important when talking about mental health or dealing with someone who is experiencing a mental health condition. What may be appropriate language for clinicians & experts may be less helpful in the workplace. For the purposes of this resource, we generally use the phrase 'mental ill health' or mental health issue'.

Many people experience symptoms of distress – for example, sleeplessness, irritability or poor concentration, loss/increase of appetite, higher alcohol consumption – without having a diagnosable mental health condition. Mental ill health considers the severity & duration of symptoms and the impact they have on everyday life.

What is 'mental well-being'?

This is taking a holistic view to health (the whole picture). Good mental health and well-being can be influenced by a combination of biological, social and psychological factors. Someone may have a mental health condition, either chronic or fleeting, but still enjoy well-being: the two are not incompatible.

Positive mental well-being includes a mix of individual and societal factors such as:

- Self-belief & confidence
- Positive life events
- Coping skills
- Problem solving
- Communication skills
- Values & beliefs
- Positive childhood experiences
- Good levels of social support
- Rewarding employment
- Financial stability
- Tolerant communities
- Access to healthcare

Did you know...?

Approximately 1 in 4 people in the UK will experience a mental health problem each year.

In England, 1 in 6 people report experiencing a common mental health problem (such as anxiety and depression) in any given week.

Reports from both England and Wales suggest that approximately 1 in 8 adults with a mental health problem are currently receiving treatment. Medication is reported as the most common type of treatment for a mental health problem.

Further information can be found at: www.mind.org.uk

Historical view

The historical approach to mental health issues was often institutionalisation. It was believed that the best treatment for mental ill health was to be segregated from society. This led to people being placed in secure hospitals which were said to be similar to prisons.

In 1845 the Lunacy Act and the County Asylums Act were published. These led to more purpose-built asylums which housed the mentally ill. These were mainly built on the outskirts of major cities to provide a rural retreat for patients. These quickly became overcrowded as there was a significant number of admissions of many physically disabled people, as well as people who were not mentally 'ill' but had displayed socially undesirable behaviours.

The decline in the asylum population and the eventual closure of them came about around the same time as the establishment of the National Health Service. This also changed many social and political views towards mental illness along with the development of new psychiatric medical developments in the mid-1950s.

In the 1970s people experiencing acute mental health illness were cared for in district general hospitals, with the input of their GP and local social services.

Since the 1980s specialist psychiatric units have been mainly used to support people experiencing mental health emergencies. Rehabilitation clinics have been used for longer term inpatient care.

Supported housing, day services and care in the community-based professionals are now the primary services available for those people with mental health difficulties. Many professionals now form specialist mental health teams that are based in the community.

Further information can be found at:
www.studymore.org.uk

Attitudes, stigma & impact

What is the attitude towards mental health?

There are many challenges people experiencing mental health issues face. These do vary from person to person but usually consist of the following:

Discrimination and stigma

People with mental health issues are discriminated against in various areas of life. One of these areas is employment. Within society in general there is still considerable stigma attached to mental ill health.

What is stigma?

Stigma is a set of prejudicial attitudes & values, which may lead to discriminatory behaviours. Stigma is based on beliefs & attitudes that we pick up from our environment, which are often based on a lack of understanding and lead to negative stereotypes. Discrimination is negative behaviour.

Cultural attitudes to mental illness

Culture can influence a person's views of mental ill health. For example, Western cultures tend to think that symptoms such as 'hearing voices' is a sign of 'madness', whereas some cultures view this as a 'gift'.

Media attitudes to mental illness

The media portray mental illness both positively and negatively. The mass media often sensationalise incidents unfairly, creating a perception or belief that mental ill health relates to violence. Recently, popular culture programmes such as TV soaps have been applauded for raising awareness of mental ill health.

Social withdrawal and isolation

Avoiding others may be caused by some mental health issues as well as others avoiding them. This causes people to become more and more isolated from society. Stigma is often the cause of this isolation.



Research evidence

The Student perspective on the causes of mental health problems, attitudes and support offered, by the National Union of Students (NUS) in 2017.

Recent examples include:

The Stevenson Farmer review of mental health & employers, entitled 'Thriving at Work' sets out what employers can do to better support employees, including those with mental health problems, to remain in and thrive through work. It includes a detailed analysis that explores the significant cost of poor mental health to UK businesses and the economy as a whole.

www.gov.uk/government/publications/thriving-at-work-a-review-of-mental-health-and-employers

Business In The Community 2017 Mental Health at work report shows some significant improvement in attitudes towards mental health in the workplace. 84% of employers acknowledge that they have a responsibility towards their employee's mental well-being. 91% of managers agree that what they do affects the well-being of their staff. However, despite this, less than a quarter (24%) of managers have received any training in mental health. There also remains a pervasive culture of silence over mental health at work.

<https://wellbeing.bitc.org.uk/all-resources/research-articles/mental-health-work-report-2017>

2017 research from the NUS (National Union of Students) perspective on mental health issues has summarised a number of key triggers in students that provide cause for concern;

- Social Media and 24/7 connectivity
- Problems with friends and family, & feeling unable to speak about them
- Sexuality – stigma, lack of awareness, bullying & physical violence often occurs because of sexuality
- Workload – constant stress, pressure and anxiety as a result of workload, coupled with a perceived lack of time

• Poor careers information, advice & guidance
www.nusconnect.org.uk/resources/further-education-and-mental-health-report

The CIPD (Chartered Institute of Personnel & Development) viewpoint is that Organisations should support employees experiencing or recovering from mental health issues and make adjustments to ensure people with a mental health issue can thrive and make a positive contribution at work.

There is still stigma and misunderstanding about mental health in society and the workplace. Increasing awareness of mental health issues across the workforce can help break the silence and start to build a more open and inclusive culture. Managers need to feel confident and competent to have conversations with staff about sensitive issues like mental health and signpost to specialist sources of support if necessary

www.cipd.co.uk/knowledge/culture/well-being/mental-health

Mental ill health affects people differently, including the length of time they experience it for. In general, mental ill health is categorised as temporary, fluctuating or ongoing.

Temporary – the person experiences the condition for a short time and recovers after treatment

Fluctuating – sometimes the person experiences the condition, and sometimes they don't

Ongoing – the person experiences the mental health condition all the time, but controls it through one or a combination of the following:

- Medication
- Talking therapies
- Self Help
- Practical Supports

Mental ill health: a short guide

Anyone can develop mental ill health at almost any time in their life, just as they can a physical illness. Mental ill health has no respect for age, background or circumstances. It can be triggered by a range of things – including ostensibly happy events like getting married, having a baby, getting a new job or being promoted. Risk factors are individual & societal.

Individual risk factors

Each person has their own vulnerabilities. These risk factors are usually associated with low self-esteem and insecurity, both in the workplace and at home. A person's lifestyle choices can also increase their risk of developing mental health problems. An example of this is substance misuse.

Family factors

Studies have found that a family history of things such as violence, childhood neglect, family breakdown, trauma or unemployment are all risk factors for an individual developing or experiencing a mental health issue either in childhood or adult life.

Social isolation

Feeling cut off from your family or friends or the community in which you live can often leave a person feeling socially isolated and rejected. These can have a detrimental effect on your well-being.

Negative or traumatic life events

Events such as negative school experiences, abuse, being a victim of crime, unemployment, homelessness, bereavement, relationship breakdown, being involved in an accident or physical illness can all lead to mental distress for some people. Even positive changes, such as moving into a new house or having a child, can be stressful and have an impact on mental well-being.

Financial insecurity

Unemployment, the fear of unemployment, business failure or mounting debt can all erode a sense of well-being.

Community factors

In some communities, discrimination and prejudice are prevalent on the grounds of culture, ethnicity and religion. These can drain an individual's sense of well-being. Neighbourhood violence and crime can also be a significant risk factor.

Business in the Community

Business in the Community (BITC) exists to build healthy communities with successful businesses at their heart. BITC is a business-led membership organisation for organisations which want to publicly demonstrate their commitment to acting responsibly and invest in building a better society, thus supporting positive mental health. Business in the Community defines 'wellbeing' as the mutually supportive relationship between an individual's mental, physical, financial and social health and their personal wellbeing. Their wellbeing campaign takes a whole person approach to employee health and wellbeing, underpinned by a common mental health strand to support thriving people, thriving business and thriving communities.

For more information please visit - www.bitc.org.uk

Legislation

Here are some publications which outline legislation regarding mental health.

Mental Health (Discrimination) Act 2013

www.legislation.gov.uk/ukpga/2013/8

- A member of Parliament can no longer lose their seat if they are sectioned under the Mental Health Act for more than six months
- Remove the blanket ban on jury service for 'mentally disordered persons'
- A person can no longer be removed as a director of a public or private company 'by reason of their mental health'

Health & Social Care Act 2012

www.legislation.gov.uk/ukpga/2012/7

- Increase GPs' powers to commission services on behalf of their patients
- Promote patient choice

Equality Act 2010

www.legislation.gov.uk/ukpga/2010/15/contents

- All anti-discrimination laws of Great Britain were brought together under one Act.
- It provides the legal framework that protects people, including disabled people, from discrimination.

Health & Social Care Act 2008

www.legislation.gov.uk/ukpga/2008/14/contents

- Under this Act, the Care Quality Commission (CQC) came into force England in 2009.
- They are now the inspection body for all adult social care services.
- They have the power to close these services if they are providing inadequate care.

Mental Health Act 2007

www.legislation.gov.uk/ukpga/2007/12/contents

- The majority of the 1983 Act remains in place today and allows mental health professionals to detain, assess and treat people.
- In 2007 the 'community treatment order' was introduced. This allows for a person to be recalled back to hospital and forced to take their medication if they refuse to comply with their treatment while living in the community.

Mental Capacity Act 2005

www.legislation.gov.uk/ukpga/2005/9/contents

- This Act aims to protect people who cannot make decisions for themselves due to mental impairment or incapacity.
- 'Lasting Power of Attorney' is introduced in this Act which allows others to make decisions on an individual's behalf.

Human Rights Act 1998

www.legislation.gov.uk/ukpga/1998/42/contents

- This Act makes it unlawful for public authorities to violate the rights in the European Convention on Human Rights.
- The rights include: the right to life; the prohibition of discrimination; the right of people to be free from inhuman or degrading treatment; the right to liberty and security.

National Health Service & Community Act 1990

www.legislation.gov.uk/ukpga/1990/19/contents

- The responsibilities for assessing need, designing care packages and ensuring their delivery are outlined in this Act.
- It also includes people's rights about the services they are entitled to from the NHS & Social services.

Health & Safety at Work Act 1974

www.hse.gov.uk/legislation/hswa.htm

- Employers must protect the 'health, safety and welfare' at work of all their employees
- Enforce employer duties, with penalties for non-compliance.

Mental health conditions

When experiences last for prolonged periods of time, or become more severe, low mental well-being develops into illness or disorder.

Disorder	Definition	Causes	Signs & symptoms
Stress	'An adverse reaction a person has to excessive pressures or other types of demands placed upon them' - HSE	Work problems, relationship concerns, financial or health worries, housing issues, experiencing abuse or harassment, trying to meet the expectations of others.	Lack of concentration, memory lapses, easily distracted, negative thinking, depression & anxiety, mood swings, defensive, lack of motivation, angry, frustrated, lack of confidence & self-esteem, aches & pains, weight loss or gain, dizziness, palpitations, nausea.
Anxiety disorders - OCD, PTSD, GAD, Panic Disorder, Phobias	Anxiety is a human response to perceived threat, fear or danger. This is normal, and we all experience it from time to time. Intense, prolonged, debilitating anxiety deeply affects and restricts the lives of people who are unwell with anxiety disorders	This is down to the individual- each person is different. However, is mostly caused by perceived threats, fear or danger.	Unrealistic and/or excessive fear & worry, racing thoughts, sleep disturbances, shortness of breath, hyperventilation, dizziness, fatigue, headache, muscle aches & pains, avoidance of situations, phobic behaviour, increased use of drugs and alcohol
Depression	This is a type of mood disorder. It is usually a long period of low mood that negatively impacts a person's life	Physiological changes & some medical conditions, history of depressive illness, persistent discomfort or pain, alcohol or drug abuse, poor social networks, relationship breakdown, losing a job, work problems, adverse life events, isolation	Anxious, empty mood, feelings of hopelessness, guilt, worthlessness or helplessness, restlessness, irritability, change in sleeping habits, weight loss or weight gain, gastric problems, behaviour changes, drop in productivity, morale problems, fatigue
Psychosis	Psychosis is an umbrella term used to describe conditions that affect the mind where there has been some distortion of reality - hallucinations, delusions & thought disorders	Changes in brain structure/chemistry, trauma, a difficult background, excessive stress & anxiety, social migration, medical conditions, alcohol, cannabis & other substances	Emerging unusual beliefs, perception things have changed, hallucinations, delusions, feelings of persecution
Eating disorders	Unhealthy eating patterns that impact on a person's physical, social & mental well-being. Not about body image food or weight, but rather attempts to address emotional and stress related issues	Low self esteem, depression, anxiety, anger, needing to feel in control, difficulty expressing feelings, social & cultural pressures	Dramatic weight loss/gain, withdrawal from friends/ family/colleagues, evidence of purging, brittle hair & nails, dry skin, gastric issues

Internal and external demands

To overcome a mental health issue, individuals need to analyse why it is being caused. These are referred to as internal (personality and behaviour) and external (events or life changes) demands.

Internal

Internal demands are those demands which people impose on themselves. It's the way they react to external demands.

Here are a few examples of internal demands:

- Feeling jealous of people
- Feeling ineffective, insecure or incompetent
- Not getting enough sleep
- Feeling angry and frustrated about things
- Always wanting perfection

External

These are events that happen and the situations we find ourselves in.

Here are a few examples of external demands:

- Difficulty in achieving work-life balance
- Bereavement & loss
- Too much to do in the time available
- Illness (you or a loved one)
- Divorce or separation

Recovery

Recovery refers to the lived or real-life experiences of people as they accept and overcome the challenge of their mental health issue. Recovery is much more than achieving the absence of symptoms and means different things to different people.

People can and do recover from even the most severe mental health issues. A wide variety of factors can influence recovery. These include having supportive social & professional networks and playing a meaningful role in society, for example through education and employment opportunities.

Recovery may also be impacted by the quality & availability of treatments as well as the person's willingness and ability to take the opportunities available to them.

For some, recovery can be a long process, often described as a journey. There may be setbacks on the way, and the recovery journey will be different for each person.

Recovery provides an empowering message of hope, which says that, regardless of symptoms, people with serious mental health issues should have every opportunity to lead fulfilling and satisfying lives.



Support and help

Common types of support are as follows:

Medication – prescribed by a GP or psychiatrist, this may, for example, alleviate depression or anxiety by calming people down or combating sleeplessness or thought disturbance.

Talking therapies – such as IAPT (Improving Access to Psychological Therapies), counselling, CBT (cognitive behavioural therapy), or psychotherapy. A GP, the mental health service or Employee Assistance Provider (EAP) may all provide routes to these.

Self-Help – including learning mindfulness techniques and improving well-being through diet & exercise.

Additional practical support – such as helping an individual to resolve financial issues, advising them on lifestyle choices (including diet & exercise) or signposting them in the direction of relationship advice or counselling.

Stress

- Identifying the source of stress quickly
- Set aside time for relaxation
- Adopt a healthy lifestyle
- Talk to others
- Local support, e.g. GP, counsellor or therapist

Anxiety

- Self-help strategies:
 - o Talking about feelings
 - o Relaxation techniques
 - o Personal action plans
 - o Active problem solving
 - o Distraction / refocusing techniques
 - o Exercise
 - o Complementary therapies such as yoga and meditation
- Antidepressant medication
- Talking therapies such as Cognitive Behavioural Therapy (CBT)
- Local support such as GP, local health and social care services

Depression

- 'Stepped approach' – start off with less intensive interventions and build up
- Cognitive Behavioural Therapy (CBT)
- Antidepressant medication
- Electro-convulsive Therapy (ECT)
- Self-help strategies

Eating Disorders

- Talking therapies
- Monitoring of physical health
- Weight management strategies
- Medication for physical symptoms

Hub of Hope

Hub of Hope is an App that has been launched by Chasing the Stigma (CTS) and is the first of its kind, bringing together organisations and charities from across the country in the form of a mental health database with all information in one place. It is easy to use and will provide all the help agencies and contact information that are close to any postcode that you enter.

Hub of Hope can be downloaded from the Apple App Store or Google Play Store



Helpful resources & support

There is a vast range of support for mental health issues. Below are a few resources you can access for more information, guidance and support if you should need it.

General			
Mind	www.mind.org.uk	0300 123 3393	A leading mental health charity that provides help and support through its local associations and national information line
Rethink	www.rethink.org	0300 5000 927	Provide practical help and information on the Mental Health Act, Equality Act, community care, benefits & justice.
Samaritans	www.samaritans.org	116 123	Provide emotional support and advice for people 24 hours a day 365 days a year
SaneLine	www.sane.org.uk	0300 304 7000 (6-11pm)	Provides out of hours support to anyone affected by mental ill health including family and friends
Citizens Advice	www.citizensadvice.org.uk	03444 111 444	Provides free financial & legal advice for those with money, dispute or legal worries.
NHS Choices	www.nhs.co.uk		Dedicated section on mental health 'moodzone'
Anxiety			
Anxiety UK	www.anxietyuk.org.uk	08444 775 774	National charity run by people with lived experience of anxiety. Offers confidential support, help and information
No Panic	www.nopanic.org.uk	0844 967 4848	Charity which helps people who experience any kind of anxiety.
OCD UK	www.ocduk.org	0845 120 3778	National charity providing a wide range of information on OCD
Bipolar disorder			
Bipolar UK	www.bipolaruk.org	0333 323 3880	National charity dedicated to supporting individuals with a diagnosis of bipolar disorder, as well as their families/carers.
Depression			
Depression Alliance	www.depressionalliance.org	0207 407 7584	Charity which aims to bring those with lived experience together by running national self help groups
Depression UK	www.depressionuk.org		National self-help organisation offering support to everyone affected by depression
Eating Disorders			
ABC (Anorexia & Bulimia Care)	www.anorexiabulimiacare.org.uk	0300 011 1213	National UK eating disorder organisation providing practical support and guidance for anyone affected by eating disorders.
Beat	www.b-eat.co.uk	0345 634 1414	UK's leading charity supporting anyone affected by eating disorders
Employment & Mental Health			
ACAS	www.acas.org.uk	0300 123 1100	Free impartial advice to employees & employers in all aspects of employment legislation and workplace relations.
BITC (Business in the community)	www.bitc.org.uk	020 7566 8650	BITC provides a wide range of services, practical guidance and creative ideas that help improve organisations
Self Help			
Big White Wall	www.bigwhitewall.com		Online Community of people who are struggling with anxiety who try to support each other
Elefriends	www.elefriends.org.uk		Safe, supportive online community run by the charity 'Mind'.
Headspace	www.headspace.com		App based around teaching mindfulness principles.
Moodscope	www.moodscope.com		Web based mood management and tracking platform
Moodpanda	www.moodpanda.com		App based platform allowing people to track their mood
Sleepio	www.sleepio.com		App for support with sleep management
Psychosis			
Hearing Voices Network	www.hearing-voices.org	0114 271 8210	Organisation committed to helping people who hear voices, experience hallucinations and experience sensory distortions.
Suicide Prevention			
ASIST	www.livingworks.net		ASIST (Applied Suicide & Intervention Skills Training) is a 2 day course that teaches how to intervene when someone is suicidal
CALM	www.thecalmzone.net	0800 58 58 58 (5pm-midnight)	The Campaign Against Living Miserably is a charity which exists to prevent male suicide in the UK.
Papyrus	www.papyrus-uk.org	0800 068 4141	National charity for the prevention of young suicide, with the dedicated HOPELineUK, for anyone under age of 35 who is feeling suicidal, or anyone who is concerned about a young person.
Stay Alive	www.prevent-suicide.org.uk		A suicide prevention pocket app for the UK, developed by Grassroots suicide prevention

