

Joint Strategic Needs Assessment – Community Mental Wellbeing

Purpose

Mental health and wellbeing is a pressing issue garnering attention at both national and local levels throughout the UK. The rising trend in anxiety and depression cases, alongside an increase in referrals to services like IAPT, underscores this growing challenge.

Local insights and national statistics have been echoed in many JSNA discussions, emphasizing an increase in people experiencing low-level mental health conditions, stress and feeling overwhelmed. Concerns range from the effects of social media on youth, to the broader impacts of loneliness, the COVID pandemic, and economic pressures. These discussions have informed the direction of our work, identifying a need to explore community mental wellbeing through the JSNA process.

This discovery paper summarises insights on community mental wellbeing collated from

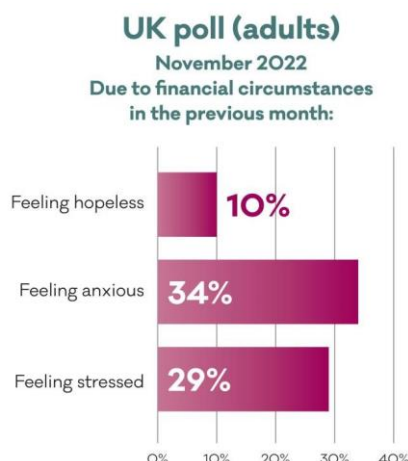
1. A workshop drawing on the expertise of a range of stakeholders, including the Dorset Mental Health Alliance, all dedicated to enhancing mental health support within the community.
2. National and local data on stress, wellbeing, and mental ill health
3. Future trends identified with Horizon scanning software.

The paper sets out some themes that might be considered when commissioning and reviewing services to support and enhance community mental wellbeing.

Introduction

Poor mental health can have a profound impact on the overall wellbeing and physical health of an individual and have detrimental impacts at household and community level. Furthermore, at a societal level, the increase in mental ill-health is putting existing mental health services under strain. However, it is the reported and widespread sense of stress and feelings of overwhelm experienced across different parts of society that was of particular concern to this discovery work.

In a YouGov and Mental Health Foundation survey from 2018, it was reported that 74% of UK adults have felt so stressed at some point over the last year they felt overwhelmed or unable to cope (Mental Health Foundation, 2018), affecting women more than men (81% vs 67%), and younger people more than older (83% of 18-24 year-olds compared to 65% of people aged 55 and over).



In a poll conducted by Mental Health Foundation and Opinium in November 2022, it was reported that one in ten (10%) of UK adults were feeling hopeless about financial circumstances, more than one-third (34%) were feeling anxious, and almost three in ten (29%) were feeling stressed in the past month.

A follow-up survey (Mental Health Foundation, 2023) in March 2023 looking at anxiety in the UK found that nearly three-quarters of people (73%) had felt anxious in the previous two weeks, with one in five (20%) feeling anxious most or all of the time.

Figure 1 Mental Health and the Cost-of-Living Crisis: 2023

This study found that single parents, LGBTQ+ people, carers, people aged 18-34 years old, people

from minority ethnic communities, and people with long-term physical health conditions had the highest levels of anxiety, with over 82% of people in these groups reporting high levels of anxiety.

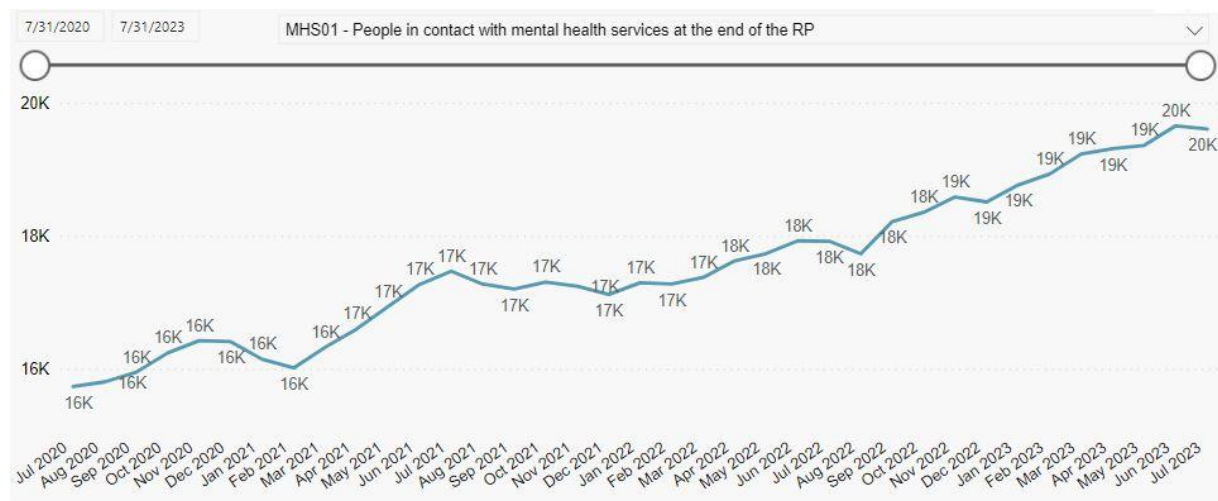
It is important also to consider the impact of the COVID-19 pandemic on mental health and wellbeing. The impact of the Covid-19 pandemic on mental health is well recognised, with the Centre for Mental Health predicting that up to 10m people in England will need new or additional mental health support as a direct consequence of the pandemic (Centre for Mental Health, 2020). Research undertaken by MIND during the pandemic (Mind, 2021) found that one in four (26%) adults experienced mental distress for the first time during the pandemic. It also found that the pandemic heightened inequalities, and those who had struggled with their mental health before the pandemic were disproportionately affected. Another key finding was that 1 in 5 adults surveyed did not access support because they did not think that their condition was serious enough to deserve support (ibid).

As well as the impact of the COVID-19 pandemic, the 2023 Mental Health Foundation survey (Mental Health Foundation, 2023) also found that the cost-of-living crisis and worries about being able to afford to pay bills featured highly as a cause of anxiety, followed by work, physical health problems, and loneliness. Anxiety about being able to afford to pay bills was highest amongst people over 50 years old.

Local Data and Insight

Across Dorset, concern over mental health and wellbeing has been raised across multiple forms of JSNA engagement, with a recognition of a higher number of people reporting a reduced ability to cope under pressure since the pandemic. This has been further compounded by other negative impacts on people’s lives, such as the rise in inflation, increasing inequalities, the Cost-of-Living Crisis, and concerns around climate change.

In the reporting period up to July 2023, 19,605 people were in contact with mental health services in the NHS Dorset ICB area (NHS Digital , 2023). This figure has steadily increased over the last few years.



According to the NHS Dorset ICB Quality and Outcomes Framework data, Dorset ICB has a prevalence of depression of 12.96% in 2022-2023, an increase from 12.5% in 2021-2022. This is slightly below the regional and national prevalence rates, which are 13.54% for the Southwest, and 13.25% for England (NHS Digital , 2023). According to OHID’s Public Health Outcomes Framework, BCP has an above average prevalence of people with high anxiety scores, with 24.8% self-reporting high anxiety scores, compared to a national average of 22.6%. BCP and Dorset also have worryingly high rates of Emergency Hospital Admissions for Intentional self-harm, with 259.9 per 100,000, and 200.9 per 100,000 respectively, compared with the national rate of 163.9 per 100,000 (2021-22). Dorset and BCP also have

above national and regional levels of adults experiencing high levels of loneliness (22.3%, and 25.6% respectively).

It is also important to consider the demographics of the Dorset population. Dorset has an above-average older population, and it is well documented that older people are more likely to struggle with loneliness, and as referenced above, concerns about the cost-of-living crisis. Dorset also has a large rural population, who may struggle to access services and experience higher levels of loneliness.

Workshop Discussion

As mental health and wellbeing is a wide-ranging topic, community mental wellbeing was taken as the focus for this discussion.

The workshop explored trends and patterns in how we manage stress, relate to others and make healthy choices. Specifically, this JSNA looked at two questions:

- Why do some people experience issues for a long time before they reach out for support? What are the reasons for this?
- Why people may not recognise the extent to which their mental health is being affected until they start to feel overwhelmed or reach a crisis point?

Some of the key insights discussed among participants in the workshop included.

- **Societal pressures and lifestyle changes that impact our wellbeing:** examples cited were global events such as the COVID-19 pandemic, the impact of the Russian invasion of Ukraine, as well as domestic issues within the UK such as the Cost-of-Living Crisis, and rising inflation, which affected people individually as well as collectively. Having constant access to news and information, “doom scrolling”, meant people felt overwhelmed by both information and the breadth of topics of worry. Furthermore, people may experience personal life events and stressors, which may cause temporary feelings of overwhelm. The sense of a faster pace of life was also reported by many, in comparison to the period of slowness during the pandemic, with reported sense of feeling always short of time, and not feeling that they have time to properly take care of themselves or reach out for help.
- **Loneliness, and the importance of community connection:** being connected and feeling part of a community was integral to the discussions around community mental health and wellbeing. On one side there was a common theme of loneliness, and the sense of disconnection from community. This could be due to close family or friends moving away, or also a more polarised society, due to sociopolitical events, such as Brexit and the rise in populism. The shift towards digital communication was also cited as both a cause of isolation - for those who miss in-person connections or are not as digitally literate -, as well as a platform for connectedness for those who have found digital communities online.
- **Internalised stigma and perceptions of mental health:** Varying personal perceptions of mental health also played a role in preventing people from reaching out for support. It was often mentioned that people did not think that their health was “bad enough” to seek support or felt shame or embarrassment about their inability to cope. Others did not associate themselves with having a mental health need, with beliefs such as “it’s just life/life is sometimes hard”, and therefore did not consider seeking support. It seems that there is internalised stigma and personal barriers around needing support, as well as social stigma if other people or their place of work found out that they needed mental health support.
- **Perceptions of ‘help’ and narratives around availability of support:** Even if people recognised their need for support, it was reported that some may lack belief in being

able to access services. This may be because they believed from national discourse that the services were overwhelmed, and not wishing to put further pressure on the system. They may also have had or know someone who had a poor experience previously, or that they were concerned that they would not be taken seriously. This also highlighted the importance of health literacy. It was reported that people were not sure where to seek help or were concerned about the treatment pathway such as needing medication. There was also a belief that the support available is not “for people like them”, linking to the internalised stigma referenced above, as well as the reality of a lack of adaptive services for people with different needs, such as older people, ethnic minorities, LGBTQ+, people with disabilities or neurodiversity, and other minority groups.

Mapping out the key influences of people seeking support from others – whether that be from family, friends, community organisations or clinical services – showed this is a complex area with many individual factors in play. The key challenges raised included:

- People respond to pressures differently – some may have sufficient coping mechanisms and/or support networks to cope with increasing pressures, whilst others may find the same issues more challenging. It was recognised there are many contributors to pressures that may affect our mental health – which potentially offers intervention opportunities.
- There are several factors that could influence whether someone reaches out for support (whether from friends, community or services) and all or some of these could be barriers – the ability to recognise declines in mental wellbeing especially when a gradual change, willingness to reach out for support (fear, personal or cultural beliefs around mental health may prevent this), having the relevant contacts, information and/or health literacy, levels of trust in the person/organisation and that their needs will be recognised, having time or physical access to support.
- Feedback into the ‘system’ was identified as a driver – which linked back to the trust element – through people’s earlier experiences of support and hearing external narratives about the level of support that is available for example national news reports about waiting times and waiting lists.

Appendix A shows the resulting system map from the workshop session.

What does horizon scanning show¹?

Various reports highlight the ever-increasing levels of mental health need across all parts of society. A report from the Health Foundation projects a 16% increase in anxiety and depression in England by 2040 (Watt T, 2023), which is predicted to put additional pressures on primary care and highlights the need to invest in general practice and community-based services.

There are also concerns about social isolation and increased loneliness as a risk for the future. There is growing evidence that loneliness or lack of social connection can increase the risk of a range of physical and mental health conditions ([Gallup.com](https://www.gallup.com)). The WHO recently launched the WHO Commission on Social Connection (WHO, 2023) to ensure that this “issue is recognised and resourced as a global public health priority”. Recognising that loneliness is a challenge particularly in older people, the UK’s Chief Medical Officer has also focused their annual report on the UK’s rising ageing population, with social isolation as a

¹ These insights were developed using an AI-driven horizon scanning tool.

notable risk factor for poor health (Chief Medical Officer, 2023), which is pertinent for Dorset with its above average older demographic.

With the predicted increased need, there are also reports of increased investment in mental health services. The NHS Long Term Plan “makes a renewed commitment that mental health services will grow faster than the overall NHS budget, creating a new ringfenced local investment fund worth at least £2.3 billion a year by 2023/24” (NHS, 2019). The NHS Business Plan for 23/24 also commits to “provide £150 million to build 150 new facilities to support mental health urgent and emergency care services” (NHS, 2023).

Future Vision

There are several local and national initiatives already in place or progressing to provide support to those who are struggling with their mental wellbeing, working at an individual and a community level – in addition to system-based work looking at transformation of services for those experiencing mental health conditions.

- Many workplaces have staff trained in Mental Health First Aid, Five ways to wellbeing or other mental health and wellbeing support services for employees.
- There is a range of online mental health resources, from [NHS Dorset](#), [Dorset Mind](#), the [Campaign Against Living Miserably](#), amongst others. There are also a range of resources to support people with the cost of living crisis, such as the [Citizens Advice Bureau](#) and [Dorset Council](#) and [BCP Council](#).
- On a global level, the World Health Organisation (WHO) has this year recognised the importance of loneliness and its impact on health and wellbeing, and has launched a new [Commission on Social Connection](#), which also features an [evidence and gap map of interventions to address social isolation](#). This new Commission will bring focus, advocacy, and ensure more robust evidence for programmes to address social isolation at a global level.

The role of prevention

Taking a prevention focus to community mental wellbeing involves finding system-wide opportunities for minimising risk factors and enhancing protective factors across the life course – from pre-conception and pregnancy, childhood, working and family building years through to our older years². Evidence shows the potential value in investment to create mentally healthy people and mentally healthy places³.

Supporting mental health can be achieved through working better together – a key ambition of the [Dorset Integrated Care Partnership](#). The [Prevention Concordat](#) is one example of how good mental health can be embedded into organisation plans and principles.

What else can be done?

It is clear from the discussions in the JSNA workshops that more can be done to overcome people’s personal barriers to accessing support. There are several campaigns that encourage people to reach out for support if they are struggling, however it is important to understand how to translate these campaigns into action through behaviour change models.

More can also be done to improve health literacy, to ensure people have access to appropriate information that can help them with their mental health and wellbeing needs. Efforts can also be made to increase and improve signposting to different types of support, from a range of sources, such as local community groups, education institutions,

² [What-Good-Public-Mental-Health-Looks-Like-Final.pdf \(adph.org.uk\)](#)

³ [MHF-better-mental-health-for-all.pdf \(mentalhealth.org.uk\)](#)

workplaces, and other social places. This could be as simple as encouraging people to ask for support from family or friends over a cup of tea or accessing support from local services.

Next Steps

This JSNA discovery paper explored community mental wellbeing and highlights the complexity and individual factors that may be influencing trends seen in levels of stress, feelings of overwhelm, low level anxiety and depression.

Evidence shows the potential of investing in prevention to support mental wellbeing and create mentally healthy places⁴. Supporting mental wellbeing can be achieved through working better together – a key ambition of the [Dorset Integrated Care Partnership](#).

Some areas that might be considered when commissioning and reviewing services include.

- **Consider the impact of societal pressures and lifestyle change** – Recognise the impact of global events, societal issues and personal pressures on individual and collective wellbeing. Consider options to support the development of resilience and mental health awareness skills to help manage in times of increased pressure or accelerated pace of life.
- **Promote Community Connection** – Acknowledge the importance of community in supporting wellbeing. Develop strategies to combat loneliness and isolation and foster connectedness within and between communities – be that geographic, peer groups or digitally based.
- **Improve communication and information availability** – Enhance health literacy and accessibility of information, clarify support pathways and options, and ensure services are inclusive and adaptive to the needs of diverse groups. Consider ways to address concerns about the accessibility and quality of services.
- **Seek to understand barriers** – Understand the role of personal feelings, beliefs, and preferences that impact when or how people might seek support. Implement initiatives to raise awareness of mental health issues, address stigma, listen to the preferences of different communities and build trust.

If you have any other thoughts, comments or references to add to this JSNA discussion please let us know via publichealth-enquiries@dorsetcouncil.gov.uk. We'll be looking to socialise these findings with stakeholders across the Dorset Integrated Care System.

Additional Resources

[Mental Health Needs Assessment - Epidemiology](#)

[Public Mental Health – Evidence Review](#)

[Common mental health disorders](#)

[Dorset ICP Strategy](#)

[Dorset Joint Forward Plan](#)

⁴ [MHF-better-mental-health-for-all.pdf \(mentalhealth.org.uk\)](#)

Appendix A: Workshop discussion depicting drivers behind mental health issues and choices to seek support.

