There can be 'no health without mental health.'

'A state of mental wellbeing that enables people to cope with the stresses of life, realise their abilities, learn well, and work well, and contribute to their community.
Mental health is more than the absence of mental disorders.
It exists on a complex continuum, which is experienced differently from one person to the next, with varying degrees of difficulty and distress and potentially very different social and clinical outcomes'.

WHO Definition of Mental Health

Dr Lucy Chiddick – GPwER Health Inequalities and Population Health
l.Chiddick@nhs.net

Public Mental Health and Inclusion Health

➢ Why it's important we consider inclusion health groups in public mental health strategies

- Who are Inclusion Health Groups – making it 'Real'
- Impact of Stigma and Discrimination
- Importance of Understanding Impact of Trauma
- Structural and Cultural Factors
- Need for Coproduction

To then think about…

➢ Are our current public mental health (PMH) strategies meeting needs of inclusion health groups
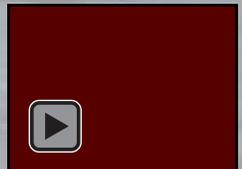➢ How can Inclusion health be included in PMH strategies

Renata's Story

Renata's Story

» Had a rough childhood

» Experienced homelessness, addiction

» Domestic violence as a teenager

» Ended up sex working to support addiction and buy food

» As an older adult experienced poverty, insecure housing and barriers to healthcare

Why does this Matter?

People in our communities 'in Inclusion health groups' are experiencing the extreme effects of inequalities and thus very poor mental health and wellbeing

Real stories like Renata's highlight the human impact

Addressing these multiple factors significantly improves mental health and wellbeing

Multiple risk factors for poor mental health (poverty, violence, complex trauma)

Social exclusion, stigma and discrimination

Inclusion health groups can have extremely poor mental health outcomes as a result of …

Not being consistently recorded in electronic systems, needs overlooked

Barriers in access to healthcare and other services

Insecure housing, communal accommodation, overcrowding

Multiple risk factors for poor mental health (poverty, violence, complex trauma)

Trauma and Inclusion health Groups

I think unrecognised trauma & the impact of trauma is central to public mental health considerations.
It's interesting to think about how may of the population are likely to be affected by trauma, and how many of them won't realise.
Whilst increasing awareness is part of it, a public mental health approach needs to factor in that many people won't necessarily know what's holding them back.
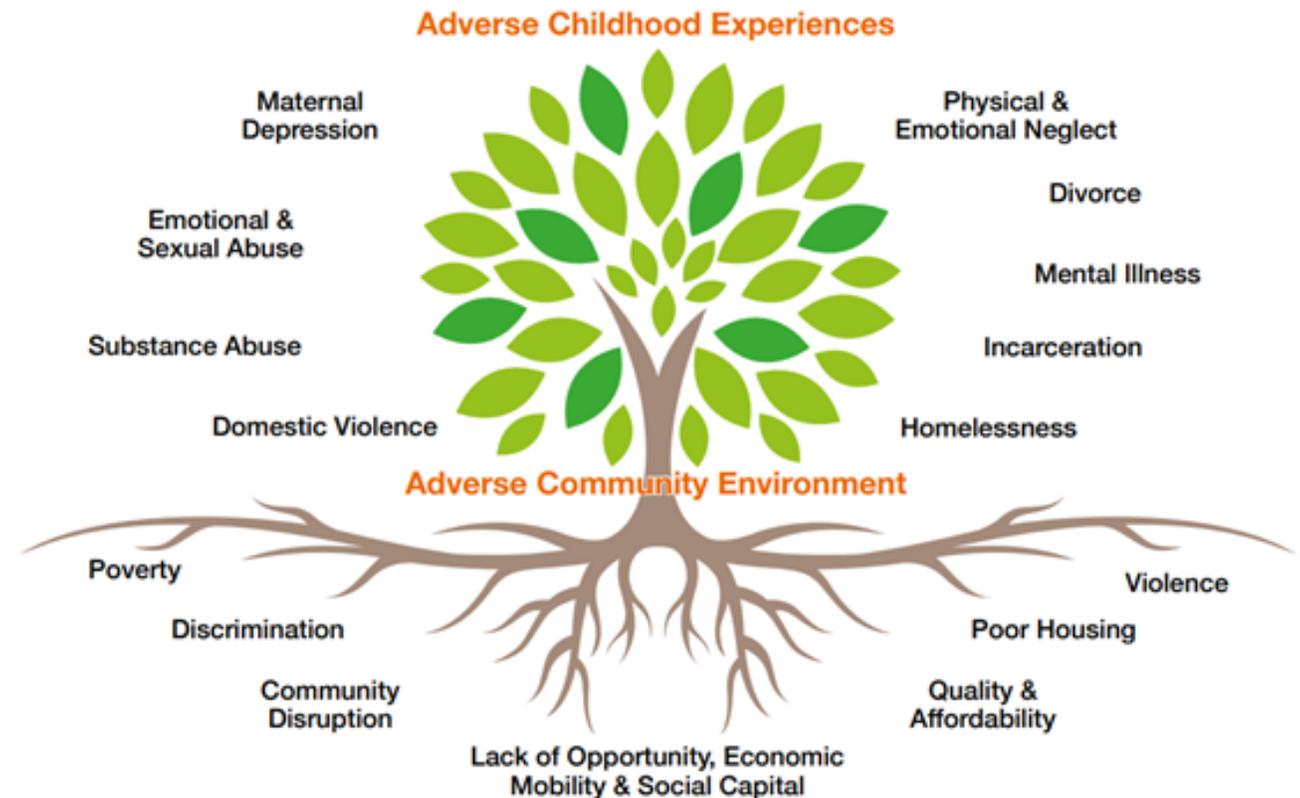
Public Health Consultant with a lead for Trauma Informed work

Adverse Childhood Experiences

Adverse Childhood Experiences are stressful experiences occurring during childhood that directly harm a child or affect the environment in which they live

The resulting trauma can continue to affect people as adults, long after it has happened.

Adverse Childhood Experiences

Maternal Depression

Emotional & Sexual Abuse

Substance Abuse

Domestic Violence

Physical & Emotional Neglect

Divorce

Mental Illness

Incarceration

Homelessness

Adverse Community Environment

Poverty

Discrimination

Community Disruption

Lack of Opportunity, Economic Mobility & Social Capital

Violence

Poor Housing

Quality & Affordability

Adapted from Ellis, W., Dietz, W. (2017) A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience (BCR) Model. Academic Pediatrics. 17 (2017) pp.S86-S93. DOI information: 10.1016/j.acap.2016.12.011

"Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as harmful or life threatening.

While unique to the individual, generally the experience of trauma can cause lasting adverse effects, limiting the ability to function and achieve mental, physical, social, emotional or spiritual well-being."

OHID working definition of Trauma Informed Practice, 2022

Adverse Childhood Experiences

4 or more aces compared to someone with 0:

3x more visits to A&E, 2x to GPs
4x more likely to develop type 2 diabetes
3x more likely to develop heart disease
3x more likely to develop respiratory disease (also linked to auto immune disease, asthma, cancer, obesity, smoking etc)
7x more likely to develop an alcohol problem
10x more likely to inject illegal drugs
10x more likely to attempt suicide
6x more likely to need MH treatment
17x more likely to have learning or behavioural problems in school
15x more likely to have committed violence
14x more likely to have been victim of violence in the last 12 months
20x more likely to have been in prison at any point in their life (75% in YOI have had childhood trauma)

And more…. *(people pleasing, power hungry, perfectionism, workaholic, judgemental, general failure to reach potential etc)*

Trauma Informed Practice and Inclusion health Groups

Multiple risk factors for poor mental health (poverty, violence, complex trauma)

1. SAFETY
2. TRUSTWORTHINESS & TRANSPARENCY
3. PEER SUPPORT
4. COLLABORATION & MUTUALITY
5. EMPOWERMENT VOICE & CHOICE
6. CULTURAL, HISTORICAL, & GENDER ISSUES

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach

Trauma Informed Practice and Inclusion health Groups

Multiple risk factors for poor mental health (poverty, violence, complex trauma)

Examples of Practice:

➢ Trauma Informed Hull – Public Health Leadership

Becoming Trauma Informed Hull – Trauma Informed Hull

➢ West Yorkshire Trauma and Adversity

Publications and resources :: West Yorkshire Health & Care Partnership

➢ Children and Young People's Trauma Informed Care Programme (HNY)

HNY-CYP-TIC-Programme-Trauma-Informed-Care-Organisational-Toolkit-interactive.pdf

➢ Trauma Informed Fairer Access Enhanced Service (Primary Care – under development HNY)

➢ Leeds - Trauma Informed Professionals Meeting

Stigma, Attitudes and Culture

Stigma is defined as "a set of negative and unfair beliefs that a society or group of people have about something"

The experience of stigma may include labelling, negative stereotypes and using labels and names to create a sense of "them" being different to "us".

Stigma, Attitudes and Culture

"Women who are sex workers are so overlooked. They are looked down upon. They're often seen as not human. They are often hidden. **The shame and the stigma surrounding sex work is overwhelming, when in fact, sex workers are just trying to survive***."*

Real experiences

"As soon as you say 'I'm a migrant' you just sense the difference of how people are going to treat you *.... [They should be treated] as a person, just be treated with dignity, like everyone that is accessing that service..."*

Stigma, Attitudes and Culture

Social exclusion, stigma and discrimination

Worries identified by Young Travellers

Most discussed was **discrimination**

© Pavee Point Traveller and Roma Centre 2014

Stigma, Attitudes and Culture

Social exclusion, stigma and discrimination

'being a victim of hate crime has a greater impact on the emotional wellbeing of victims than non-hate crimes, with potentially devastating effects which may increase the risk of suicide'.

'participants repeatedly stressed the persistent demoralising effect of hate crime and hate speech on their lives'.

Suicide prevalence is six times higher for Irish Traveller women than women in the general population, and seven times higher for Traveller men

Research undertaken with Gypsy Roma & Traveller communities

Stigma, Attitudes and Culture

Social exclusion, stigma and discrimination

Examples of Best Practice:

'Attitude, Culture and Stigma working group'
Chaired by Alex Macnamara (Acting Public Health Consultant Hull CC):

'we've established a specific working group focused on culture, attitudes and stigma in healthcare settings. Some of the things we've done is deliver teaching, training and awareness sessions that have been co-produced and co-delivered with lived experience representatives, there's the Trauma informed work in ED and of course the Co-produced stigma film'

Stigma, Attitudes and Culture

Social exclusion, stigma and discrimination

Examples of Best Practice:

'Inclusion health champions'

Set up initially in the East Riding

Over the past few months, several Inclusion Health Champions have worked together to develop an Inclusion Health Awareness Session, which is now ready to be piloted.

This session is open to people across Humber and North Yorkshire and is designed to:

- Introduce the role of Inclusion Health Champions.

- Equip you with an understanding Inclusion Health, and the challenges and barriers people experience locally.

- Share examples of good practice.

- Offer you opportunity to reflect on inclusion health.

- Consider what you can do in your practitioner or leadership role to support Inclusion Health Groups.

- Offer you signposting to further training and information.

Organisations or services with an Inclusion Health Champion in place may wish to ask them to facilitate the session. For those without a Champion, but who are interested in arranging a session for staff, please contact tess.owen@nhs.net.

Stigma, Attitudes and Culture

'The media should be encouraged to promote positive messages about people experiencing exclusion to reduce stigma and stereotyping'

Views of Experts by Experience from Inclusion HealthGroups (Luchenski et al 2018)

Resources:

NHS Addictions Provider Alliance: Stigma Kills (with an addictions focus)
Stigma kills - YouTube (alcohol/alcohol care team focus)
Stop the Stigma Video (more generic around stigma broadly)
'One City, One Beat'
'A Life Backwards'
Clarissa - 'Clarissa' the film | Groundswell

Importance of Coproduction

Nothing without us about us is for us...

4. COLLABORATION & MUTUALITY

5. EMPOWERMENT VOICE & CHOICE

Examples:

Lived Experience Collective and Community of Practice - Hull

Women's System Change Panel – learnt and lived experience -Hull

Attitudes, Stigma and Culture work

And many more...

Neurodiversity and Inclusion Health

Multiple risk factors for poor mental health (poverty, violence, complex trauma)

Barriers in access to healthcare and other services

- Intersectionality with Inclusion Health

- Less likely to receive diagnosis / psychosocial support

- Missed opportunities for reasonable adjustments/support – environment, education system

- Impact of cultural factors and recognition

12.3% of people experiencing homelessness are autistic compared with 1-2% of the general population

Prevalence of ADHD in the homeless population is around four times the prevalence in the general population (32 % versus 5 to 8%)

At 41, people with ADHD significantly more likely than comparison participants to be homeless for ≥1 week (24% vs. 4%)

ADHD among 'Women who Sex Work' (research definition) found to be 32%

'Somalians see ASD (researchers terminology) as the Western Disease

Children and Young People

Multiple risk factors for poor mental health (poverty, violence, complex trauma)

Barriers in access to healthcare and other services

- Sharply increasing rates of mental distress in CYP

- Specific cohorts of children in inclusion health groups must be recognised as often missed (due to reasons cited above)

- Intersectionality – SEND, Neurodiversity, missed groups

- Carers in Inclusion Health Groups

Importance of Data

Not being consistently recorded in electronic systems, needs overlooked

- Ensure data collected across system to highlight and recognise groups
- Recognise value of doing this in clinical systems to amplify understanding of need
- Financial decisions are increasingly data driven – and this puts inclusion health groups at a disadvantage

- Best (localised) practice examples:

Fairer Practice Inclusion health LES - HNY ICB

Leeds Health Inequalities work – Local Authority and Primary Care

And many more…

To consider...

- What can you do first?

- What can you influence

- Who can you work with across the system

Further Resources

Structural & Cultural Factors and Competency

SDOH – increasing awareness/understanding

Introducing health inequalities in Primary Care (Fairhealth course but covers the basic information around social determinants of health

Structural Competency training: https://www.fairhealth.org.uk/

Cultural Competency

- Core intercultural concepts and principles toolkit published for those working with asylum seekers and migrants
- Cultural Competence and Cultural Safety - elearning for healthcare

(Awareness, Knowledge, Skill and Empathy)

Trauma Informed Resources

Training – Trauma Informed Hull
Trauma-Informed Care - elearning for healthcare
Children and Young People's Trauma Informed Care Programme - Humber and North Yorkshire Health and Care Partnership
Trauma, neglect and building resilience - Tavistock Training
Trauma Informed Approaches | aneemo
Young Minds book adversity-and-trauma-informed-practice-guide-for-professionals.pdf (youngminds.org.uk)
Healing Your Childhood Trauma | The Oprah Podcast (with Dr Bruce Perry)
Childhood Trauma and the Brain 5min video https://youtube.com/watch?v=EFrfBJrVLbE&feature=shares & Childhood Trauma and the Brain - UKTC (uktraumacouncil.org)

Trauma-informed approaches to supporting people experiencing multiple disadvantage
(Mis)understanding trauma-informed approaches in mental health Full article: (Mis)understanding trauma-informed approaches in mental health (tandfonline.com)
Tackling poor health outcomes: the role of trauma-informed care | The King's Fund
Trauma and resilience informed research principles and practice: A framework to improve the inclusion and experience of disadvantaged populations in health and social care research - Natalie L Edelman, 2023

Thanks to Kathryn Hodgson for some of these. Katalyst for Change – Empowering Awareness

Stigma, Attitudes and Culture
Gypsy Roma and Traveller Communities

Inequalities-in-mental-health-care-for-Gypsy-Roma-and-Traveller-communities.pdf

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summary-of-evidence-on-pmh-interventions-june-2022.pdf