Prevention and Promotion Programme for Better Mental Health 2021-2022

October 2022



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InPower

Wolverhampton Suicide and Preve Stakeholder Forum	illioii
Stakeholder i Gruini	

Wolverhampton Suicide Prevention Alliance

Wolverhampton Voluntary Sector Council

Wolverhampton Mental Health Stakeholder Forum

Wolves Foundation (Head4Health)

University of Wolverhampton

Institute for Community Research and Development

Skills Team - City Wolverhampton Council
Black Country Healthcare NHS Foundation Trust
Kaleidoscope
4MentalHealth
Access to Business
Aspiring Futures
City of Wolverhampton College
Switch

Executive Summary

BETTER MENTAL HEALTH

Background

The Prevention and Promotion Programme for Better Mental Health is part of the Mental Health Recovery Action Plan 2021/22 which seeks to ensure the mental health impacts of Covid-19 are rapidly addressed, services can respond quickly, and pressures on the NHS are reduced.

Aim

The programme aimed to prevent mental ill health and promote good mental health amongst the most deprived communities in England. The focus on deprivation is part of the government's levelling up agenda which seeks to restore the economy, level up the country, and build back better. The City of Wolverhampton Council (CWC) Better Mental Health programme of activities ran from October 2021- May 2022.

Methods

The programme was utilised in Wolverhampton to survey population mental health and wellbeing of adults 16+, and to understand the needs and protective factors of groups disproportionately impacted by the Covid-19 pandemic. Initiatives were delivered to increase mental wellbeing, improve physical activity levels, and connect people facing complex life challenges with support and social contact. Other projects aimed to reduce barriers to work, improve awareness of mental health literacy, reduce the stigma surrounding the experience of mental illness, as well as working with partner organisations from across the city in a range of settings to build capacity to raise awareness of and help prevent suicide.

Reach

Of those people engaging directly with prevention and promotion project interventions, 73% were from the 30% most deprived lower super output areas (LSOAs) in England, 18% of people disclosed having a disability, and 39% of people were from ethnic minority backgrounds

Outcomes

Projects using evidence-based measures of mental wellbeing were able to show significant improvements in participants' mental wellbeing compared to pre-programme levels for physical activity and wellbeing initiatives and community co-creation projects. Wellbeing improvements were also observed in some employment support cohorts and those engaging with people who had become mental health first aid (MHFA) champions. Suicide prevention training mobilised over 350 local people to have the confidence to be able to look out for others across our city, whilst city-wide campaigns to tackle loneliness and improve suicide awareness supported continuing efforts to encourage people to engage early with support available in our city when problems occur.

Reports

All project reports from the Prevention and Promotion Programme for Better Mental Health are available at

www.bettermentalhealthwolves.co.uk

Background

The Prevention and Promotion Programme for Better Mental Health 2021-22 is administered by Public Health England (PHE), now known as Office for Health Improvements and Disparities (OHID). The programme is part of the Mental Health Recovery Action Plan 2021/22 which seeks to ensure the mental health impacts of Covid-19 are rapidly addressed, services can respond quickly, and pressures on the NHS are reduced. The Better Mental Health (BMH) programme aimed to prevent mental ill health and promote good mental health amongst the most deprived communities in England. The focus on deprivation is part of the levelling up agenda which seeks to restore the economy, level up the country, and build back better.

The Prevention and Promotion Programme for Better Mental Health 2021-2022 was a single-year grant-funded intervention designed to incentivise investment in prevention and promotion interventions for better mental health in the most deprived local authorities. Specifically, to mitigate mental health impacts arising from the Covid-19 pandemic, reduce widening mental health inequalities by targeting at-risk and vulnerable groups and ensure adequate distribution of funding to support minority ethnic communities.

In setting out plans for the programme in Wolverhampton, the following broad principles underpinned our local public mental health response to better understand and begin to address some of the impacts of the Covid-19 pandemic:

 Whole system prevention approaches required No single agency or intervention can provide the public mental health response to Covid-19; input from all sectors including voluntary, statutory, employers and faith communities, as well as local neighbourhood action is needed to support the mental health of the whole population, those at greater risk of poor mental health, and those receiving treatment.

- People and community centred It is important to involve local communities in decision-making (co-production) from the outset. Communities help to identify needs and issues, local assets and solutions that will work for them.
- Good communication, collaboration and partnership Collaboration and trust are required between partners across the whole system. There should be recognition of the need to build trust among all partners and communities within the city.
- Tackling inequalities The social
 determinants of mental health interact with
 socio-economic status, gender, ethnicity, age
 and other characteristics in ways that put
 some people at higher risk than others.
 Covid-19 has the potential to exacerbate
 these inequalities. Those most at risk,
 including those living in the most deprived
 areas, or experiencing multiple disadvantages
 are a key focus of this programme.
- Life course and whole household approach It is important to minimise risk factors and enhance protective factors at important life stages, from the perinatal period through early childhood to adolescence, working age, pre-conception and the family-building years, and into older age. This includes recognising that mental illhealth affects the whole family or household, beyond a single individual with a mental

health condition.

- Building on existing arrangements Mental health programmes and other local assets should be built upon. This also includes national wellbeing resources such as Every Mind Matters.
- Applying learning from the first and second wave of the pandemic It is essential to build on local intelligence about groups supported during the pandemic who might need further support, as well as identifying residents who have become more vulnerable as the result of indirect and direct consequences of the pandemic.

The City of Wolverhampton Council (CWC) proposal to apply to the Prevention and Promotion Programme for Better Mental Health 2021-2022 was developed in conjunction with key cross-sector stakeholder groups including the Wolverhampton Mental Health Stakeholder Forum (WMHSF), Wolverhampton Suicide Prevention Forum (WSPF), the One Wolverhampton Adult Mental Health group, and Wolverhampton Health and Wellbeing Together (HWT) partnership.

Application proposals to the programme were approved by OHID in 2021 and included use of the fund to complete a city-wide survey of mental health and wellbeing for adults 16+, an evidence review on the impact of the Covid-19 pandemic upon different population groups, followed by engagement with some of the groups likely to have been disproportionately impacted to identify risk, and protective factors for wellbeing in Wolverhampton. Other activities approved by OHID included the use of resources to pilot physical activity and wellbeing promotion sessions, along with 1-1 counselling for people facing a range of complex life challenges in the city. A series of 6-week skills and learning workshops were also proposed to support people facing additional barriers into employment.

In addition, a suicide prevention awareness campaign, and tailored training to upskill frontline staff across primary care, city-wide workforce and barbers and hairdressers was envisaged to support those in the city who were most in need. Key mental health campaigns were also planned to tackle loneliness across the city with partner agencies and support services, as well as engagement in scoping the accessibility and inclusivity of mental health and wellbeing promotion resources, particularly for those digitally excluded. Community members with reach into groups across the city were to be provided with access to mental health first aid (MHFA) training, enabling them to act as health promotion facilitators able to advise people on how to stay mentally well using evidence-based frameworks like the 'five ways to wellbeing', as well as reducing the stigma of mental ill health and signposting those in need of more structured help to local support groups and services.

A BMH project team was established by the CWC Public Health department to oversee the discharge of the BMH programme in line with OHID grant terms and conditions with regular updates provided to the corporate Project Assurance Group (PAG). All BMH programmes were required to have delivered activities by May 2022 and to report against a range of performance indicators and project outputs. Where appropriate programmes also used evidenced based mental wellbeing measurement tools to understand the impact of project activities on participant groups pre and post intervention, as well as collecting case studies, and testimonies from project beneficiaries.

Mental Health and Wellbeing in Wolverhampton

A city-wide survey of mental health and wellbeing was delivered by the Institute for Community Research and Development (ICRD) from the University of Wolverhampton (UoW). The survey was developed and designed to provide snapshot insight into the current views of local people on mental health and wellbeing. The survey was open to everyone that lived, worked and/or studied in Wolverhampton that was aged 16 or older. All participants who completed the survey were also given the opportunity to be entered into a prize draw.

Design of the #WolvesWellbeingAndMe Survey

To provide a local identity to the online mental health and wellbeing survey the decision was taken to learn from previous surveys with high levels of engagement that had developed a strong social media presence. Following consultation amongst various working groups, the survey was titled as the #WolvesWellbeingAndMe survey. The survey included standardised measures of wellbeing alongside tailored questions as outlined in sections 1-4.

Section 1

Standardised measures of wellbeing

- Warwick and Edinburgh Mental Wellbeing Scale (WEMWBS) (Tennant et al. 2007)
- Office of National Statistics (ONS) wellbeing measure (Hicks et al. 2013)

Section 2

How Covid-19 has affected wellbeing

- What does it mean to you to be mentally well in Wolverhampton?
- How has the Covid-19 pandemic affected your wellbeing?
- What could be provided or improved in Wolverhampton that would help enhance your wellbeing?

Section 3

Other aspects of the pandemic that have impacted on wellbeing

- social (e.g., housing and relationships)
- economic (e.g., employment and finances)
- and health/disability factors

Section 4

Demographics

 age, sex, gender, ethnicity, employment status, disability, postcode

Survey Recruitment Strategy

The online mental health survey was circulated through stakeholder forums to various community groups and organisations mainly via email and publicised through various media including via social media and local radio. A QR code was also generated and displayed on formal poster sites around the city centre to encourage survey completion.

To support with survey participant recruitment a 2-minute YouTube video was developed outlining the purpose of the survey which was shared via several community stakeholder forums and partnership networks to local community groups.

Hard copies of surveys were made available for completion at various community engagement events across the city during mental health awareness week 9th-15th May 2022.

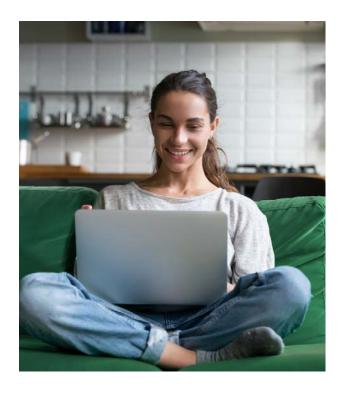
Survey Respondents

On-line survey methods were utilised due to project time constraints although it is recognised that a wider data collection approach is often needed to gain views of all groups. Despite some specific targeting of survey promotion, lower representation was seen amongst men, over 65s, and some ethnic groups. Groups of different sexual orientation and disability statuses were represented, though how representative these are, is difficult to discern without up-to-date normative data for Wolverhampton.

Attempts were made during survey recruitment to ensure adequate representation from a wide variety of respondents reflective of the City's population groups. Some groups specifically known to be at higher risk of mental health problems were targeted for survey completion.

Survey Limitations

Due to data gathering methods utilised to meet the time requirements of the BMH programme the final sample of 966 respondents was not representative of the city demographics for age, gender, or ethnicity. Findings should be interpreted with caution. The full mental health and wellbeing survey report is available at www.bettermentalhealthwolves.co.uk



Survey Findings: Summary Overview

Having good wellbeing in Wolverhampton

Key aspects of what people felt having good wellbeing meant for them (figure 1) included feeling emotionally balanced, resilient, and able to bounce back, or cope with life challenges. Feeling optimistic about the future, having good social connections, and being able to access support when needed are also features of responses.

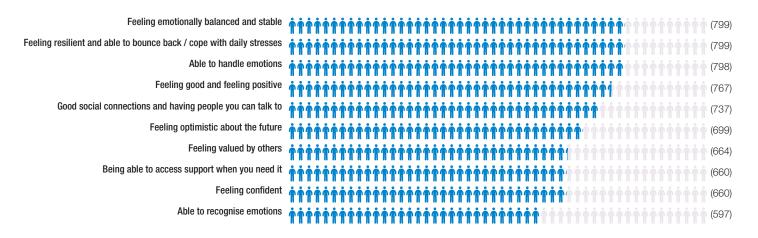


Figure 1. Responses to the question 'What does it mean to have good wellbeing?' The bars represent how many respondents chose each option.

Survey Findings: Summary Overview

How the Covid-19 pandemic has influenced mental wellbeing

The Covid-19 pandemic and its associated protective restrictions were reported as negatively affecting the health, lifestyles, education, finances, employment, and relationships of many respondents. A smaller number of people reported aspects of life being better during Covid-19 in areas such as their employment, relationships, and housing.

Whilst social inequalities are associated with an increased risk of many common mental disorders due to the small sample size no clear case could be made from survey responses for the impact of variables such as deprivation, living situation (living alone or with others), or

sexual orientation on wellbeing during the pandemic. Men had significantly better wellbeing than women when measured with WEMWBS, but these differences were not observed in responses to ONS measures of personal wellbeing. There were no significant differences between ethnic groups except for higher self-reported levels of anxiety amongst the white ethnic group. Those who identified as unemployed reported lower levels of happiness compared to those in full-time employment, part-time work, education, self-employed, or those looking after family or caring.

Survey Findings: Summary Overview

What could improve wellbeing in the city

In response to the question of what could improve wellbeing within the city moving forward, being able to 'get out and do more things' was the most frequent choice among respondents. Responses of 'having time for oneself', 'more money', and 'someone to talk to' were also factors highlighted as important in improving wellbeing. Better physical and mental healthcare support and better working environments also featured as likely to positively impact on future wellbeing.

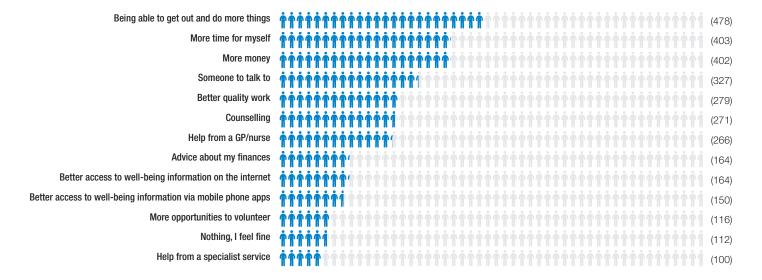


Figure 2. Responses to the question 'What could be provided or improved to support wellbeing?' The bars represent how many respondents chose each option.

2. Groups in Wolverhampton impacted by Covid-19

Evidence reviews and process

To support learning from the Wolverhampton mental health and wellbeing survey, the #WolvesWellbeingAndMe project explored available evidence on the impact of the Covid-19 pandemic upon different population groups. The review was concluded in April 2022. The review identified some of those groups likely to have been disproportionately exposed to factors which meant they were likely to be at a greater risk of developing mental health problems in the future. It should be noted that the review was completed using the available evidence at the time, and that as the evidence base around the impacts of Covid-19 has grown so too has the awareness of wider groups who will also be likely to have been adversely impacted by the Covid-19 pandemic.

There were several stages to the evidence review process (see Figure 3). As a semi-structured literature review, the process involved the synthesis of methods associated with both systematic and traditional literature reviews described below.

- Database searches
- Snowballing techniques
- 'Hand-searching' relevant web sources of grey literature
- Drawing on the knowledge of existing networks; local Call for Evidence
- Analysis of local demographic

The review process was iterative, facilitating the emergence of relevant literature across a wide range of sources and academic disciplines to help support the review findings.

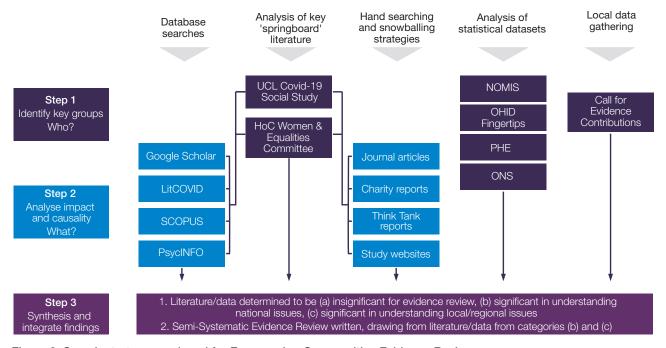


Figure 3: Search strategy employed for Empowering Communities Evidence Review

Review Findings

The review of available evidence confirmed that people who were experiencing disadvantage prior to the Covid-19 pandemic were subject to further challenges because of Covid-19, and this had a negative impact on the mental health of these population groups. These groups included but were not limited to ethnic minorities; people living with disabilities; and refugees and migrants. Economic and social factors related to Covid-19 lockdowns placed additional pressure on these groups. Children and young people (0-25), those living in poverty, women, and critical workers also faced significant additional stressors because of the Covid-19 pandemic.

The review also provided key data specific to Wolverhampton and the West Midlands region, to make sense of the impact of Covid-19 in a local and regional context. After London, the West Midlands is the most ethnically diverse region in England and, after London, suffered the highest number of hospitalisations and deaths among ethnic minority people during the first wave of the Covid-19 pandemic. Wolverhampton is ranked the 24th most deprived Local Authority in England, and 21% of people living in Wolverhampton live in the top 10% of most deprived areas of the country. Issues of ethnicity, poverty, and their relationship to poor mental health during the Covid-19 crisis are therefore particularly relevant to the City of Wolverhampton.

Given the limitations of time and resources, the review's recommendation was to engage nine groups in co-creation activities, across three stages of the life course to better understand the unique experiences of these groups during the pandemic, as well as the things they found most challenging, and those protective factors people drew upon to stay well.

These groups are as follows:

- 1. Children
- 2. Children with Special Educational Needs and Disabilities (SEND) and their parents/carers
- 3. Young, unemployed people
- 4. Refugees and migrants
- 5. Ethnic minorities
- 6. Women
- 7. Critical workers
- **8.** Older people with long-term physical health conditions or disabilities
- **9.** Older people with a pre-existing mental health condition.

These groups cover some of the population sub-groups likely to have experienced mental health inequalities prior to Covid-19 based on the available evidence at the time of the review, alongside available evidence of sub-groups for whom Covid-19 significantly increased their risk of poor mental health. A series of co-creation activities were deployed to empower community groups with the skills, knowledge, and confidence to collect stories about their members' unique experiences of the pandemic; to help understand the challenges, but also what has/will help people be well and how can they secure more of these capacity building resources.

3. Community stories of Covid-19 and mental wellbeing



Aspiring Futures creative activity group

A total of 141 people from the nine groups identified in the evidence review as being disproportionately impacted by Covid-19 were engaged via forums across the city to take part in co-creation projects using the 5 ways to wellbeing as a framework.

Many in the groups described facing multiple barriers to wellbeing during the pandemic and their stories revealed complex lives and causes of mental health problems which could not be easily reduced to one issue.

Groups used artwork and other visual mediums to highlight some of the challenges faced during the last two years, as well as protective factors for wellbeing and resources which they felt would help improve their wellbeing moving forward.

- Participants enjoyed the experience of sharing their stories, hearing from others, and valued being listened to as well as showing significant improvements in wellbeing following co-creation activities.
- As a result, it is hoped that the co-creation model utilised within this programme can now become a framework for future engagements between partners, groups, and stakeholders across the city.
- All findings and materials produced from cocreation projects will be made available online to help inform future health improvement strategies by partners across the city. A summary of the key highlights from each group is provided below.
- Full #WolvesWellbeingAndMe report here: www.bettermentalhealthwolves.co.uk



Visual minutes (output) of the Voice 4 Parents Co-creation activity

High-level summary of discussions from co-creation activities

Group	Protective	Challenges Faced	Want/need more
Youth Council (children and young people)	FriendsTechnologyArtMental health days organised by schools	 Lack of proper connection with friends Online learning at home less productive 	 Accessible counselling Wellbeing sessions in schools Physical/art activities Cheaper public transport
Voice4Parents (SEND families)	 Informal support from neighbours, employers and groups such as Voice4Parents (i.e., providing activity packs and laptops) Personal strength 	 School closures & loss of specialist support led to lack of routine for children and no respite for parents Felt abandoned by services 	 Activities & inclusive play spaces for SEND children & families Earlier prevention/access to services An inclusive & understanding society Support for parents of SEN children
Access2Business (young unemployed & unemployed with pre-existing mental health conditions)	 Investing time in interests/hobbies Technology to stay in touch with family Pets provided a focus beyond the self 	 Withdrawal of 'lifeline' activities Loss of identity & purpose from unemployment Decline in access to public services 	 Mental health needs to be talked about more openly Easier access to mental health support/shorter waiting times to avoid problems getting worse

High-level summary of discussions from co-creation activities

Group	Protective	Challenges Faced	Want/need more
Refugee & Migrant Centre (refugee & migrants)	Friends & neighboursFaith & churches	 Poor housing quality No access to legal employment Lack of awareness of service options & language barriers 	 Better awareness of service availability and what they can expect Better quality housing
Aspiring Futures (ethnic minorities & women)	 New hobbies (i.e., baking) Volunteering to help others Spending more time with family & children 	 Technology & digital exclusion Limited access to garden/outdoors Fear of getting COVID Closing of ESOL 	 Outdoor activities for children IT classes for women to be able to support children
Women of Wolverhampton (ethnic minorities & women)	 Continuity of informal support groups such as WoW Conversations with peers 	 Thresholds to mental health support Holding multiple roles including caring so unable to work Trauma of loss 	 Informal support groups without thresholds to attend or limited number of sessions
Wolves Foundation Head 4 Health (women)	 Time to spend with family & children Technology Hobbies Time for self-care 	 Loss of support networks & familiar activities Lack of privacy at home in lockdown 	Support groups to meet and socialise with others

High-level summary of discussions from co-creation activities

Group	Protective	Challenges Faced	Want/need more
The Crafty Gardener (older adults with learning disabilities)	 Friends Technology to keep in touch with people Occupy time with activities i.e., Baking/gardening 	 Concerns about safety in the city Unreliability of public transport Mask wearing made communication harder 	
TLC College (older unemployed adults & ethnic minorities)	Informal supportFamily connection	 Lockdowns and pressure of home-schooling isolation, loneliness Problems accessing services e.g., GPs & housing 	

4. Better Mental Health project case studies

The following case studies provide a summary overview of some of the wider Prevention and Promotion programme activities, outputs, and outcomes in addition to the

OneWolves Foundation – Head4Health18TwoSuicide Prevention Training20ThreeSkills and employability programmes22FourMental Health First Aid (MHFA) champions23FiveResources and Campaigns24

All case study full reports are featured at www.bettermentalhealthwolves.co.uk





Case Study One:

Wolves Foundation - Head4Health

The Head4Health mental wellbeing promotion programme from the Wolves Foundation runs over 8 weeks and offers wellbeing support, and a gentle introduction to physical activities including walking, golf, and boxercise. 'Walk and Talk' sessions provide social contact and a space where people can share what is going on in their lives. Structured talks from support organisations such as Samaritans and Citizens Advice provide wellbeing guidance and an overview of the support available to people locally. The project has run since 2019 and has been targeting males 18+ using the power of the football club badge to engage those at risk of low wellbeing with sessions hosted at Molineux Stadium.



Pilot: Supporting people facing complex life challenges

In an innovative pilot project Head4Health expanded its focus to include all adults 18+ specifically targeting people facing a variety of life challenges and complexities. Using a newly designed delivery model supported by partnership networks across the city the Head4Health team was able to offer mental wellbeing support to adults in a diverse range of community settings supporting the mental wellbeing of parents and carers of children living with special educational needs (SEND), refugee and migrant groups, people facing substance use issues, and those who were homelessness, and experiencing domestic violence.

Key Head4Health pilot project outputs



205

participants engaged (74 females, 130 males and 1 non-binary)



35

Groups delivered



104

Beneficiaries living in the most deprived 30% of LSOA's



600
Hours of delivery



24

Beneficiaries living in the most deprived 10% of LSOA's



409

Hours of counselling

Using validated measures of mental wellbeing people engaging in the Head4Health pilot outreach project were shown to have significant improvements in wellbeing as well as reporting lower stress scores.

Pilot project Impacts and sustainability

The collaboration between Wolves Foundation and CWC has enabled the expansion of the Head4Health programme model which is now open to all adults 18+ with the addition of private counselling sessions where needed.

"For me, it's the opportunity to meet other women, because I don't get out as much anymore with my MS [Multiple Sclerosis]; this has been a good way for me to socialise." Head 4 Health Participant

"had to push myself to come today as I've been in a bad place this week...but to get up and go to a group, it's been wonderful...[I feel] a lot better than I did before I came. I was going to turn back and go home." Head 4 Health Participant

The focus on engaging with more complex and vulnerable adult cohorts in the city has been maintained within the universal Head4Health service offer. Strengthened partnership working during the pilot has led to greater training opportunities for Head4Health staff who are now able to support continuing engagement with people from LGBTQ+ groups and those with lived experience of mental health problems needing wellbeing support.

Case Study Two:

Suicide Prevention Training

A programme of Suicide Prevention Awareness Training was developed and led by the Wolverhampton Suicide Prevention Forum. The training aims to build a network of support across the city for people who find themselves thinking about ending their own lives. Three distinct training programmes were developed and procured; each tailored to the needs of specific groups to ensure that the training was focussed on their sector and gave delegates the skills and knowledge most likely to be drawn upon in their day-to-day roles.

Primary Care Training

- delivered by 4MentalHealth

This training course was made available to all staff working in primary care settings across the city, including GPs, registrars and trainee doctors, practice nurses, healthcare assistants and administrative staff. The three-hour course aimed to develop competencies around suicide prevention, understanding, a common language and a consistent approach. Clinicians were trained to use SAFETool Triage (Suicide Assessment Framework e-Tool) to support planning for patients considered to be at risk of suicide ideation. The training was delivered over 3 distance learning webinars and was attended by a total of 66 individuals.



Suicide Prevention and Safety Planning Training for professionals (multi-sector) working in Wolverhampton

- delivered by the Kaleidoscope Plus Group

This training programme was delivered over 14 sessions, with both virtual and face-to-face provision, to 260 professionals working across a range of services in Wolverhampton including the voluntary and community sector, local authority, healthcare and education sectors.

Following the training:

96% of attendees reported that the training would be practical at work if ever required

98%
of attendees
were
extremely
satisfied with
the trainer's
knowledge of
the subject

91% of attendees would be able to ask someone about suicide

Training for staff working in barbershops, hairdressers and nail technicians, 'Keep Your Head Up'

 delivered by Black Country Healthcare NHS Foundation Trust

When visiting personal care settings such as barbers, hairdressers, or nail bars, people will often talk about the most personal and intimate areas of their lives, upcoming holidays, family, relationship issues, as well as health, and how things might be affecting them from day to day.

Training sessions have equipped staff in these settings with the skills to actively listen to people who might disclose feeling distressed or are having suicidal thoughts. Staff now know how to respond to these situations as well as knowing where and how to signpost people to support available across the city.

Training of over 350 professionals in suicide prevention across the city will help in reducing suicide stigma and provide a better initial response to people exhibiting suicide ideation. Historically, talking about suicide has been taboo, the training delivered will help reduce this by enabling professionals to feel comfortable with talking about the subject and broaching the conversation with members of the public they support and serve in various forms.



Members of the public will also sense it is acceptable to talk about suicide and may seek help for themselves or loved ones, the trained professionals are now better equipped to respond empathetically and are more knowledgeable on how and where to refer people for further support. These outcomes tie into the strategic objectives of the Wolverhampton Suicide Prevention Stakeholder Forum which oversees the city-wide suicide prevention strategy.

The various training providers will be offering those who attended any of the suicide prevention training ongoing support including a regular forum overseen by a Trust Counselling Psychologist.

Case Study Three

Skills and employability programmes

- City of Wolverhampton Council 'Skills
 Team' managed the co-ordination and
 delivery of a total of 8 projects each providing
 a structured 6-week programme of skills and
 employability training to young people 16-25,
 women facing complex life challenges, and
 people living with long-term physical and
 mental ill health conditions.
- The Health at Work programme provided a total of 18 adults living with long-term conditions with an opportunity to gain further education, work experience, and soft skills to support confidence and wellbeing with a goal of helping people be 'job ready'
- Real Talk supported young people to build confidence, resilience, and motivation providing skills and employability training from business partners across the city supporting 16–25-year-olds with positive decision-making for their career pathway. The programme enabled 13 young people to improve their digital skills, self-esteem, and motivation, providing opportunities to engage in a community project gaining real-time work experience.
- The Empowering Women programme engaged 15 women (18+) who were facing a range of life complexities including substance use and domestic violence which are known barriers to securing rewarding and meaningful sustained employment. The programme provided tailored 'person centred' employability support focusing on further education, training, and volunteering, CV writing and mentoring. Targeted mental wellbeing promotion interventions, counselling, and time to explore new coping strategies all supported participants abilities to gain employment.

 Choices4U targeted 16–25-year-olds now ready to identify career paths and work towards the requirements for their chosen career. A total of 15 young people achieved online certification for employability skills. Training was provided in mental health awareness to support self-care and mentoring and coaching sessions the confidence

A total of 61 people were engaged in programmes with many participants living in the 30% most deprived local super output areas (LSOA'S) in the city. Programme output activity was captured using a range of methods including case studies, personal narratives, wellbeing measures and end-of-project reports from providers. Programme goals included empowering people with the skills, knowledge and experience required to overcome barriers to employment as well as improving mental health and wellbeing. The evaluation included case examples of people securing employment because of attending the skills and employment programmes along with case studies and workshop narratives.



Case Study Four:

Mental Health First Aid (MHFA) champions

A total of 50 people who lead or participate in community groups, third sector organisations and faith groups were provided with access to online Mental Health First Aid (MHFA) training with a goal of improving their ability to understand and look after their own mental health. The training also provided a unique opportunity for people who are already supporting Wolverhampton residents and wanted to enhance their skills to be better equipped to improve their communities/service users' emotional health and wellbeing.

The MHFA course is a 2-day training programme and attendees who complete the course go on to become Mental Health First Aiders, which means they are certified to support an individual experiencing a mental health-related crisis just as a physical first aider would if someone were taken physically ill or injured. The training covered common mental health disorders introducing mental health, understanding your own mental health, coping with stress, mental health stigma and discrimination, spotting early warning signs of mental distress, recovery from mental illness as well as signposting and resources for mental ill health. The course also covered the effects of alcohol and substance misuse and its effect on mental health.

InPower Academy staff who received MHFA training used mixed martial arts as a vehicle for transformative personal and community improvements with young people experiencing difficulties with criminality, relationships and health and wellbeing concerns. The programme focused on building self-identity, self-belief and self-esteem whilst facilitating positive behavioural change in young people in the city.



Switch Midlands provides participatory arts-based activities for children and young people, specialising in digital arts such as music production, film and photography. Over the Easter holidays Switch ran an ambitious multimedia training programme for young people from targeted areas of the city where young people may be particularly vulnerable to violence and exploitation. The activities aimed to entertain, educate, and inspire the young people by engaging them in a series of masterclasses delivered by industry professionals; giving them the opportunity to ask questions and get involved in workshops, as well as attending and taking part in a live concert on the fourth day.

Using OHID-approved modelling it is estimated that 405 people across the city have benefited from the work of MHFA champions following their training. Impacts have included people knowing how to better take care of their own mental health, how to spot the signs of symptoms when things are not going well, as well as reducing the stigma surrounding mental ill health and supporting people to know where and how to seek help earlier when needed.

Case Study Five

Resources and Campaigns

Digital and non-digital resources were designed to support two campaigns in the city. The first focused on suicide prevention awareness, with the second campaign tackling loneliness.

Look out for Wolverhampton: Suicide Prevention Awareness Campaign 2022

The 'Look out for Wolverhampton' suicide awareness and prevention campaign ran across the city from 23rd May to Sunday 5th June 2022. The campaign was spearheaded by the Wolverhampton Suicide Prevention Stakeholder Forum which is made up of a wide range of statutory, voluntary and community organisations in the city. The digital platform Look Out For Wolverhampton hosted campaign resources which were also cascaded across notice boards and on highway routes across the city. Messages encouraged people to play their part in keeping others safe and well signposting to support services locally and nationally.

The 'Look Out For Wolverhampton' website has now become a legacy site and acts as an ongoing repository of information on support and help available for people affected by suicide.

The campaign was augmented through radio interviews and two city centre events where residents were engaged to help them learn more about the campaign and suicide prevention.





Mander Centre: Mental Health Awareness Week campaign event 9th -15th May 2022







Mental Health Awareness week 9th – 15th May: Lift Someone out of Loneliness

This year's Mental Health Awareness week 9th - 15th May focused on the topic of loneliness. The national campaign encouraged people to talk about their experiences of loneliness and highlighted how we can support ourselves and others when feeling lonely. During the week, our local 'lift someone out of loneliness campaign' encouraged people to talk about their experiences of loneliness, using the hashtag #lvebeenthere, as a way of reaching others who may be experiencing loneliness and put a spotlight on how we can all feel lonely and things that can help.

A package of health promotion resources was developed in conjunction with the CWC Equalities team, a range of external stakeholders, and people with lived experience

in efforts to overcome digital exclusion barriers. These resources were made available to members of the public during the Mental Health Awareness week campaign in the city centre as well as being posted on social media and council support pages.

Our partners from Black County Healthcare NHS Foundation Trust, City of Wolverhampton Council services for carers and community support, and voluntary sector providers met with residents to share experiences and offer advice and support. Wellbeing engagement activities were also delivered across our libraries and tea and toast sessions were organised to encourage people to connect.

Future mental health promotion messaging is to be explored to ensure that information on how to stay mentally well and how and where to seek support when required is inclusive and accessible across all community groups.

5. Findings

Findings from the Prevention and Promotion Programme for Better Mental Health 2021-2022

73% of people engaging in mental health support interventions lived in the 30% most deprived lower super output areas (LSOAs) in England, 18% disclosed having a disability, and 39% of people were from ethnic minority backgrounds

357 people who attended suicide prevention awareness training are now able to support someone experiencing suicidal ideation

The 'Look out for Wolverhampton' suicide awareness and prevention campaign was spearheaded by the Wolverhampton Suicide Prevention Stakeholder Forum helping people learn more about the campaign and where they can seek support for suicide



adults completed our in-depth #WolvesWellbeingandMe survey

people

belonging to some of the groups disadvantaged by COVID-19 pandemic took part in co-creation programmes to improve mental wellbeing

205 people facing complex life challenges supported by the Head4Health pilot programme offering wellbeing sessions, social contact, physical activity, 'Walk and Talk' and

400+ hours of 1-1 counselling provided to people with more complex wellbeing needs

facing complex barriers to work benefited from targeted skills and learning support to improve access to employment

people became Mental Health First Aid (MHFA) qualified champions

'Extra Time' initiatives



engaged in face-to-face interactions to help end people loneliness and provide supportive social contacts



400+ people are estimated to have been supported by MHFA Champions to improve their mental health and wellbeing through engagement activities using evidence based approaches

6. Conclusion & Next Steps

The Prevention and Promotion Programme for Better Mental Health 2021-2022 has strengthened existing partnership approaches to delivering mental health promotion and illness prevention interventions for people across the City of Wolverhampton. The local mental health survey, evidence review of mental health risk groups and co-creation projects have provided insight to enable us to better understand and therefore respond to some of the mental health impacts arising from the Covid-19 pandemic, supporting efforts to reduce mental health inequalities. Models of engagement utilised in co-creation activities using evidence-based frameworks will help shape future place-based approaches to working with communities to understand assets, needs and priorities. All project outcomes will help shape the planning of activities undertaken by local stakeholder forums for mental health and suicide prevention as well as inform placed-based mental health promotion and prevention plans of strategic working groups for mental health.

The Joint Public Mental Health and Wellbeing Strategy 2018 – 2021 for Wolverhampton aims to ensure every resident in the City of Wolverhampton has the best mental health that they can at every stage of their life. The strategy recognises that mental health is integral to overall health, and is fundamental to growth, development, learning and resilience. Our strategy follows a life course approach, covering all tiers of service provision and support for all ages. The aim is to not only meet the specific needs of different age groups, but also to reduce cumulative disadvantage associated with

poor mental health and wellbeing and related risk factors. In addition, it sets out key programmes and strategies acting on the wider social, environmental, and economic determinants of health to create mentally healthy places that keep people well, providing high quality services for people experiencing mental health problems, and supporting people through their recovery journey. A mental health needs assessment is currently underway to support a refresh of public mental health strategy priorities and ambitions for the city.

Further system wide action is now required to take the lessons learned from the Prevention and Promotion Programme for Better Mental Health 2021-2022 and consider how such approaches can be mobilised sustainably and at the scale required for the city. Mental health promotion, prevention and early intervention can reduce pressures on NHS services, social care, education, criminal justice, and employers, resulting in economic benefits even in the short term. One potential route to sustain the momentum towards prevention galvanised during the BMH programme and support our existing public mental health commitments is through adopting the ambitions outlined in the Prevention Concordat for Mental Health.

The Prevention Concordat for Better Mental Health is a commitment from system leaders to develop actions which aim to:

- Prevent mental health problems
- Promote good mental health and wellbeing

The above ambitions can be achieved by strengthening protective factors, reducing risk factors, and reducing mental health inequalities for mental health across the city. Signing the prevention consensus statement and committing to a plan to address the prevention and promotion of better mental health is a cost-effective, evidence-based approach to reducing health inequalities and preventing future harm.

By committing to the Prevention Concordat, system leaders are required to pledge to:

- focus on prevention and the wider determinants of mental health
- work in partnership and across organisations to deliver an increased focus on the prevention of mental health problems and the promotion of good mental health at local level
- promote a prevention-focused approach towards improving the public's mental health, as all organisations have a role to play
- work collaboratively across organisational boundaries and disciplines to secure place-based improvements that are tailored to local needs and assets, in turn increasing sustainability and the effective use of limited resources
- build the capacity and capability across workforces to prevent mental health problems and promote good mental health and wellbeing.

To be recognised as a signatory, system leaders agree to the above Prevention Concordat consensus statement pledges and to produce a prevention-focussed action plan which understands local needs and assets, strengthens partnership approaches, provides leadership and direction, and acts for mental health promotion and mental ill health prevention, including reducing health inequalities, defining success, and measuring progress.

The above commitments are likely to complement workstreams already underway to support our public mental health ambitions to ensure every resident in the City of Wolverhampton has the best mental health that they can at every stage of their life.

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