

KEY MESSAGES

MENTAL HEALTH AND SOCIAL SUPPORT: LINKING RESEARCH AND PRACTICE

23 March 2017, GLASGOW

VHS, THE OPEN UNIVERSITY & SUPPORT IN MIND SCOTLAND

VHS, the Open University and Support in Mind Scotland have partnered together to present a programme of events across the country on mental health and social support, running between November 2016 and June 2017. The first seminar was held in Dundee on 2nd November and the Glasgow seminar took place on 23rd March and was attended by over 50 delegates drawn from national and local third sector organisations, academia, NHS bodies and Local Authorities. This report aims to give VHS members an overview of the key messages from the presentations and the subsequent discussion.

Dr Jonathan Leach, the Open University

Dr Leach presented findings from his research. Why is mental health a social issue? A good social network supports mental health and loneliness occurs when there is a lack of good quality connections. Social support is really important as it underpins mental wellbeing and people are supported to deal with crises.

Social support involves small acts of kindness, unpaid and unrecognized, that have a really meaningful impact on people's lives. It can be provided by a range of people in a variety of different roles. Neighbours, librarians, friends, family, and even university wardens can provide social support which can have a positive impact on people's mental health. Social support works alongside clinical interventions and can help to inform clinical work. Poorly given social support can exacerbate people's issues.

There are five elements of social support that work across a range of structures; Formal (e.g. support worker), semi-formal (e.g. colleague), informal (e.g. friend) and close (e.g. partner or relative).

1. Friendship: based on equality and reciprocity with people we share a similar outlook with and usually a similar economic and social status.
 - a. Peer support may come into this category: someone with shared experience who understands the problem and has genuine empathy.
2. Emotional Support: in the form of listening and being heard, accepting people and also lifting a person's mood. The messages that we give back to people.

- a. Sophisticated comforting messages: messages that focus on people's needs and are empathetic.
 - b. Non-sophisticated: not listening, rather than helping an individual come to a solution telling them what you would do.
3. Constructing meaning: sharing experience that then constructs, whether positively or negatively, the meaning of mental health.
 4. Practical advice: This is a tricky area as it is harder to give appropriate advice if you do not have lived experience and an understanding of the situation someone is facing. This needs to be based on the needs of the person you are supporting.
 5. Material assistance: help with finances, transport, housing, learning a new skill. This can be empowering as it can help someone lead a 'normal life'. How it is given is important as it can make people uncomfortable in situations where there is a lack of reciprocity.

There are three types of caring relationships:

Positive: the person being cared for is seen as an individual and is not defined by the problems they face, and the carer also looks after their own needs.

Emotionally over-involved: the carer becomes too involved and neglects their own needs.

Critical or hostile: the person being cared for is defined by their problems for which they are blamed. The carer feels resentful, angry and depressed.

Risks involved in providing social support:

Confidentiality: this can be breached as people are not set by rules or laws in the same way as clinicians.

Catastrophising: person providing support can reinforce negative attitudes.

Disempowering relationship: receiving such support can result in a power imbalance.

Spoiling relationship: friends or relatives may not want to discuss issues or problems you may be facing.

Inappropriate advice: risk of given inappropriate advice.

Unclear boundaries: boundaries in different relationships can become blurred.

Overall social support is more intuitive and is more readily available compared to therapies. Social Support is also more open ended and requires more informal skills. Research suggests that those without social support are overly dependent on therapies and formal support.

Frances Simpson, Support in Mind Scotland

Social support is an important aspect of the work that Support in Mind Scotland (SiMS) do. However, it is not unique to SiMS many other organisations and community groups understand and provide social support.

The five elements of social support that Jonathan has described provide an evidence base and credibility to the concept of social support. Social support can exist alongside formal services. It plays a role in early intervention as providers of social support can signpost to health

professionals and services as soon as issues emerge. However, unlike formal services the impact of social support is difficult to pin-down and articulate. The concept of social support is sometimes misunderstood.

Peer support is an important element of Social Support as it supports people to share their experiences. The Scottish Recovery Network have developed 6 principles of peer support. Support in Mind Scotland understood that peer support is very important and that they provided a lot of it, but wanted to understand this further. The Support in Mind Scotland Survey looked at the role staff with lived experience played in Peer Support.

“73% of staff feel their lived or carer experience influences their work within SiMS” – This is a very important statistic as it raises issues around personal disclosure which does not happen in formal services. Peer support also raises a number of issues around boundaries, what happens once people share their experience but the relationship breaks down?

Pauline from Support in Mind Scotland Glasgow Carers Group

Pauline was a carer for her mother who had schizophrenia and spoke about her experience at the Charlie Reid Carers Centre. Pauline’s own mental health was fragile as she was caring for her mother and she felt that outside the carers centre there was a lack of understanding of mental health. No one understood the ripple effect of a caring role of the family members and other relationships. When in the Charlie Reid Centre she felt compassion and could speak freely about her experiences. The carers centre developed confidence and provided peer and mutual support amongst carers, it lowered loneliness and gave the carers support, empathy and friendship. Carers have a lack of support and a network so this type of support is invaluable. There are also a number of issues around the physical and mental health of older issues and recovery should be seen as a holistic approach for both the person being cared for and their carers.

Key Messages from Discussion

Mahmud Al-Gailani, VOX Scotland

How does social support work for refugees and asylum seekers who do not have established social networks?

Jonathan Leach

Social support provides a range of helpful practices that can support anyone. These may not be readily available to refugees, asylum seekers, people living in rural communities and for people for whom English is not their first language. This is where organisations need to play a part by setting up services and support for marginalised communities.

Karla Perez Portilla, West of Scotland Regional Equality Council

The recent survey into hate crime shows that victims suffer from anxiety and fear. There is not a lot of support and resources to help people and there is not a lot of collaboration between services to help people. People who are victims of hate crime would benefit from social support.

Paula Shiels, NHS24

Mental health services are fragmented and have historically been either clinical or voluntary.

Mental health services need to be wider than this and take on board physical health as well and look at mental health from a public health lens.

Trish Mullen, Glasgow Carers Group

There needs to be parity between mental and physical health. People on medication for mental health are dying 15 – 20 years earlier.

Mahmud Al-Gailani, VOX Scotland

Diagnostic overshadowing. Mental health patients are being refused treatment for their physical health. People with mental health issues have a right to social activity, which is very important to their health and wellbeing. Welfare Reform and funding cuts gave reduced people's access to social activity. This is an important issue and VOX are keen to work in collaboration to tackle this.

Linda Hendry, Glasgow City Council

The criteria for accessing mental health services are also an issue. People are being boxed into categories and are unable to access services for example, over 65, etc.

Trish Mullen, Glasgow Carers Group

The mental Welfare Commission are discussing this issue. The funding for services is crumbling and people are missing out.

Frances Simpson, Support in Mind

Organisations' Service Level Agreements dictate access requirements. The other issue with specific access requirements is that many people do not relate to the services that are for them, for example day care services for older people.

Claire Stevens, Voluntary Health Scotland

Where does volunteering fit in to social support?

Jonathan Leach, Open University

Volunteers sit in a semi-formal setting. For example, between a befriender and a befriended the boundaries are more permeable and people can transition from one to another.

Claire Stevens Voluntary Health Scotland

Volunteers could have been service users before. Where does that leave people on benefits, who want to volunteer but are unclear about the DWP regulations?

It was noted that new [guidance](#) has been published by the Department for Work and Pensions (DWP) and Voluntary Action Scotland looking at volunteering and claiming benefits.

Rob Murray, Changing Faces

A new [report](#) has been released that explores whether youth participation in the Scouts and Guides could protect mental health in later life. To Jonathan Leach – did your research look at social support and young people?

Jonathan Leach, Open University

The study was conducted on adults only. Children's mental health in a digital age with cyber

bullying is really important and needs to be grasped. There are also initiatives such as '[Friend Finder](#)' which set out to help young people of any age who find it hard to make friends because they miss school. Friend finder hold events have an online friend finder world for the children to be able to talk to each other afterwards in a safe environment.

Lynn Law, Health in Mind

Some people live in virtual ghettos. This is a cyclical problem where people use services and have friends that reinforce their mental health issues. You need to ensure there are services that are more normalised and not specific to mental health for example, Zumba classes.

Norma Taylor, Southside Housing Association

There needs to be more mainstream activities. Need to recognise that people find it hard to get through the door of services and take the first steps, and people need support to do so.

Karen Mulcahy, RAMH

Sometimes it is social isolation rather than a medical issue that is affecting people. Community Link Workers can recognise this and link people to services within the community.

I am a Self-management Co-ordinator and speak about my own lived experience with the people I support. I have never experienced any negative situations or issues arising from sharing my lived experience.

Useful Resources

[Improving Mental Health through Social Support – Building Positive and Empowering Relationships. Dr Jonathan Leach](#)

[Voluntary Health Scotland Response to Mental Health in Scotland – A 10 year vision](#)
[Support in Mind Scotland Response to Mental Health in Scotland – A 10 year vision](#)

For information about future events on mental health and support contact:

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