

How can Community Services Support Mental Health and Well-being?

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Aims

This project set out to identify:

- the experiences and views of people with serious mental health problems, and of members of other community groups (which were likely to include people who had mental health problems), about what keeps them well
- ways in which community services can support people's mental health and well-being.

The focus was on the range of community-based services with which people with health problems come in contact, including: specialist mental health services; other health and social care services; and, potentially, other public and commercial services that are used by everyone, such as leisure facilities and libraries.

The project also had an additional aim. The study involved a series of group interviews, planned and led by people who had personal experience of mental health problems. We wanted to find out whether this research method could be used by people who had little experience of carrying out research and who did have personal experience which was relevant to the subject of the research.

Methods

The project was planned and led by members of two networks of people with mental health problems, and a development organisation with research experience. Following a design and planning stage, network members carried out group interviews with:

- three mental health groups (6, 9 and 16 interviewees respectively)
- an older people's group (10 interviewees)
- a group of people with physical disabilities and/or chronic health problems, who were mostly older people (26 interviewees).

Interviews were structured around the following four questions:

- What does being well mean to you?
- What keeps you well?
- What keeps you unwell?
- What can services do to keep you well?

After the group discussions were completed, there was a review session with other people who had mental health problems, and staff from a range of community services (16 participants in total), to check that the suggestions for services were feasible.

Main findings

Most of the people who took part found that the phrase "well-being" did not mean much to them. They did relate to the term "being well", however. The people who took part – both those who had serious and long-term mental health problems and people from other community groups – also focused on their general health and well-being, linking their mental and physical health into a more holistic sense of being well.

The themes emerging from the discussions were as follows:

What does being well mean to you?

- consistency, predictability
- confidence and self-esteem
- feeling well
- having opportunities and being able to take these up
- how other people perceive you
- living well with symptoms
- relationships with other people
- enjoying what is around you.

What keeps you well?

- people, hobbies and activities
- looking after yourself
- support from mental health and other services that reflects the needs of each person
- how services are delivered – the attitudes and values.

What keeps you unwell?

- lack of choices and lack of control
- poor quality services
- other people who were unhelpful
- isolation
- people's social circumstances
- the impact of wider policies.

What can services do to help?

The people who took part in the interviews suggested actions that services could take to support people's mental health and well-being and their more general health and well-being. Their suggestions and those from the review session were:

- information, choice and involvement
- supporting people to participate in a wider range of activities
- a focus on recovery and practical coping skills
- supporting peer support
- supporting people to look after themselves
- the values and approach of services
- improving the quality of services
- extending the type of services available
- how services are organised – strategic planning.

Those carrying out the research felt that the approach to designing and carrying out the

project worked well:

- Using group interviews was a good way to generate discussion and worked well as an approach for an exploratory project
- Having people who had personal experience of mental health problems gathering the information gave the team credibility with the local groups
- Gathering and recording the information got easier with practice and as the team gained more confidence
- It was useful to have access to someone with more research experience when the initial plan and timescale for the project had to be revised.

Conclusions

Between them, these suggestions could start to address each aspect of supporting people's mental health and well-being and minimising the situations that contribute to people being unwell. No one solution could address every aspect of supporting people's well-being.

The range of suggested actions closely reflects research findings and established good practice in supporting people with disabilities, although these actions are not yet common in services for people with mental health problems in Scotland.

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