



Mental Health and Social Support Linking Research and Practice





Joyce Cavaye The Open University Scotland





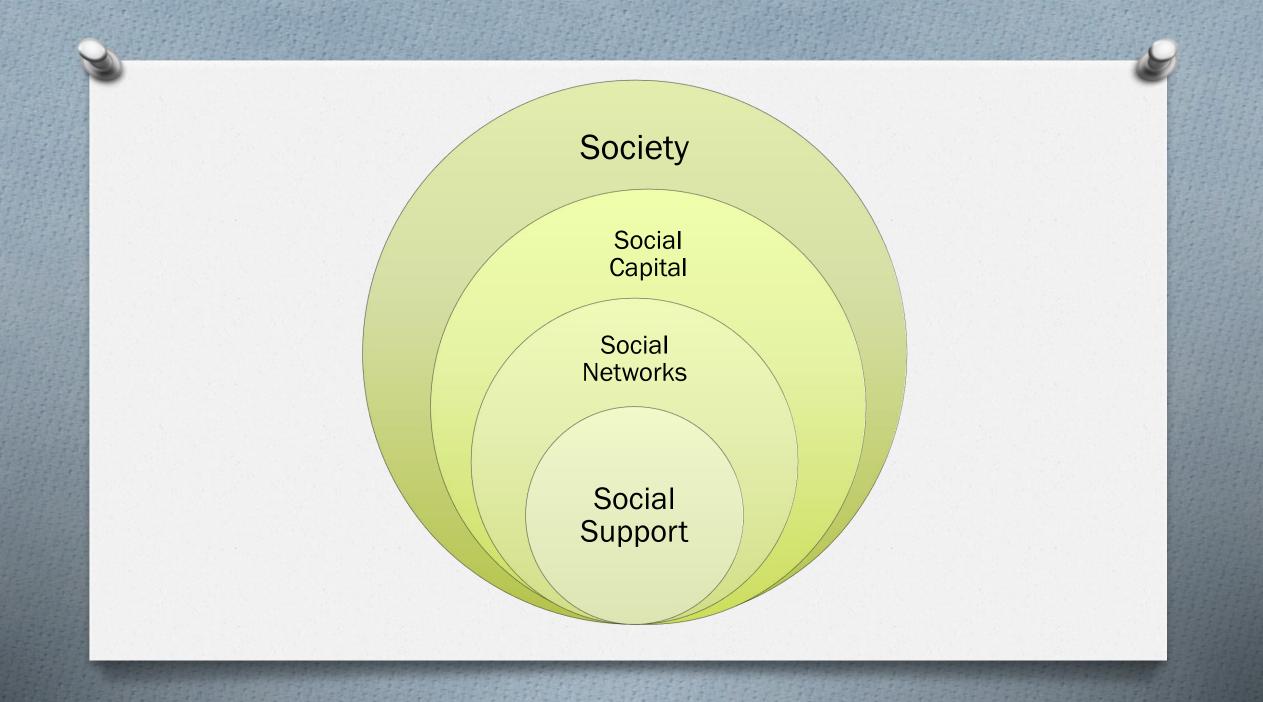
Jonathan Leach The Open University Scotland

Social Support for Mental Health

Jonathan Leach

The Open University





Impact of loneliness

- Loneliness is associated with increased risk of a wide range of cognitive and mental health problems. Also with poorer physical health and reduced life expectancy, particularly in relation to an increased risk of cardio-vascular problems (Hawkley and Cacioppo, 2010).
- The absence of close confiding relationships has been found to be a significant factor in predicting depression and anxiety (Harrison et al., 1999)

Social support

- 'Quite often talking is the best form of therapy and having someone who knows you, who you can confide in and can talk back to you on a personal level based on the fact they know you, can sometimes be very comforting.'
- 'I could not survive without the day to day support of my neighbours and friends. They help my daily functioning and control my money and medication.'

(Respondents to Open University survey, 2011)

Five elements of social support

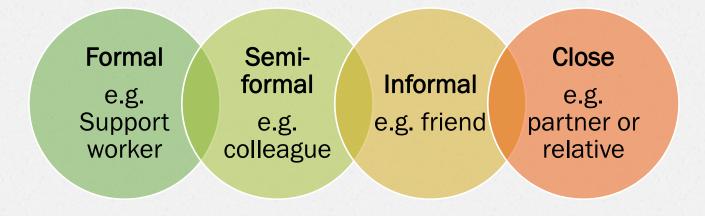
engaging in friendship,

providing emotional support,

- constructing meaning,
- offering practical advice
- giving material assistance.

(Leach, 2015)

Range of social support



Friendship

Graham Allan (2010) points to the key role of friendship in affirming a person's identity;

- Friendships are often chosen and nurtured because they help each party to maintain a similar world view and to reinforce their selfimages.
- Friendships also seem to develop between people with a similar economic and social status and for hierarchies to be avoided in these relationships.
- Reciprocity is important in sustaining friendships as it helps maintain equality in the relationship.

Peer support

'Some friends and family were very supportive, but without fully understanding the problem I was having. Some friends were less than welcoming to me... Since being involved with services and meeting like people, I have made a number of new friends who have been an enormous support and have been able to empathise with me.'

(Respondent to Open University survey, 2011)

Emotional support

Key components:

0 listening,

- showing empathy and concern
- acceptance
- perhaps trying to lift the person's mood

(Faulkner and Layzell, 2001)

- Sophisticated comforting messages are the most effective as they are focused on the recipient's needs and show sympathy and understanding of their situation.
- By contrast, non-sophisticated messages are largely focused on the giver's perspective on the situation and are influenced by their need to provide interpretations and to dispense advice.

(Burleson, 1994)

Constructing meaning

- '... sharing experiences to help me understand what I was going through, and how to make sense of it.'
- Colleagues supported my difficulties in remembering or comprehending what was required of me. They were grateful for anything I was able to achieve and encouraged me when I stumbled.'

(Respondents to Open University survey, 2011)

Practical advice

O 'Other people who have not experienced the full extent of a mental health problem can think that it is just like when they are feeling down, so they may not offer appropriate support or advice.'
(Student in Leach, 2004)

 'People have talked to me. I can't be sure they listened. Lots of advice.'
(Respondent to Open University survey, 2011)

Material assistance

- Examples: help with finances, transport, fixing things, learning new skills
- Can be empowering enabling a 'normal life'
- How it is given is important sense of empathy
- Can make some people feel uncomfortable through lack of reciprocity

Three types of 'caring' relationships

- Positive the person is seen as an individual rather than being defined by their problems. 'Carer' also looks after their own needs.
- Emotionally over-involved can take on too much and become over-protective. 'Carer' can neglect their own needs.
- Critical or hostile the person tends to be defined by their problems which are viewed as typical of them and for which they are to blame. 'Carer' may feel resentful, angry and depressed.

(Kuipers et al., 2010)

Risks involved in social support

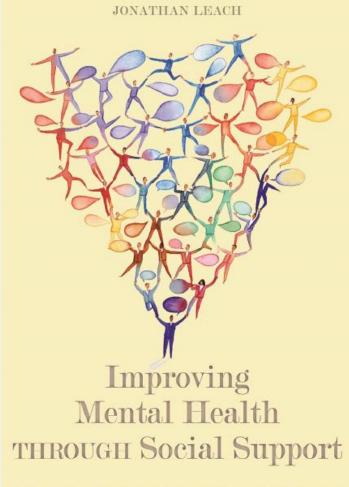
- Confidentiality and trust
- Catastrophising
- Disempowering relationships
- Spoiling friendships
- Inappropriate advice
- O Unclear boundaries

Social support compared to therapy

'What this student wanted was to be listened to by someone who really cared about her, not the kind of relationship you get in a counselling situation.'

(Student respondent, Leach 2004)

Talking Therapy	Social Support
Time-limited sessions	More open-ended
Takes place in clinical settings	Occurs in natural situations
Informed by theory and accredited training	Based on informal skills and life experiences
Clear boundaries	Boundaries less defined
Builds therapeutic alliance	Builds friendly relationship
May try to give meaning to experiences	May try to give meaning to experiences
Is likely to be focused on bringing about change	May focus on supporting change
Is likely to avoid giving direct advice	May involve giving advice and guidance



Building Positive AND Empowering Relationships

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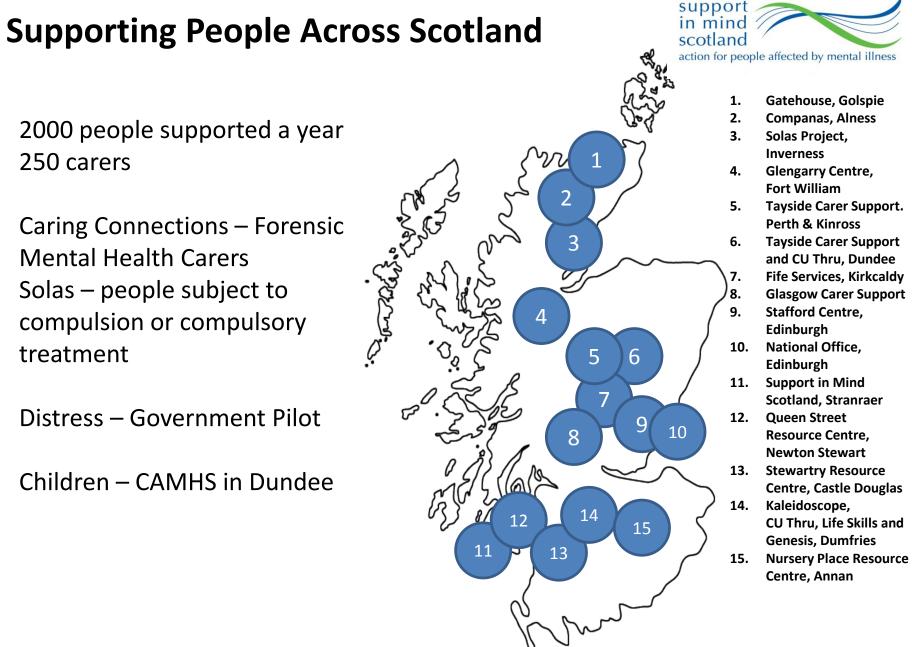


Frances Simpson Support in Mind

SUPPORT IN MIND SCOTLAND

SOCIAL SUPPORT – COMBATTING LONELINESS





- 2000 people supported a year ٠
- 250 carers ٠
- **Caring Connections Forensic** ٠ Mental Health Carers
- Solas people subject to • compulsion or compulsory treatment
- Distress Government Pilot •
- Children CAMHS in Dundee •

National Campaigns and Policy



- Equally Fit
- Rural Mental Health



See Me

EQUALLY FIT

 Carers Campaign – Recognition, Rights and Advocacy

Turning people's lives around



We improve quality of life by working with people to:

- Have more opportunities in life.
- Build confidence and social skills.
- Be more connected to their families and communities.
- Have more stable lifestyles by providing help with practical issues like house to tackle homelessness.
- Be more physically well exercise, diet, healthy eating.



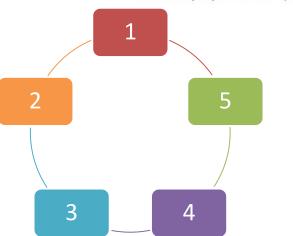
We support people who are hard to reach and engage

- People with serious mental illness including psychosis.
- People subject to compulsory treatment and compulsory measures those who come through criminal justice who are not well.
- People who have chaotic lifestyles due to historic factors, poverty and lifestyle choices.



Five elements of social support

- 1. engaging in friendship
- 2. providing emotional support
- 3. constructing meaning
- 4. offering practical advice
- 5. giving material assistance



(Leach, 2015)

Loneliness and Isolation Can:

- double the impact of obesity
- increase an older person's chances of premature death by 14%.
- increase the risk of experiencing a wide range of mental health problems
- reduce life expectancy due partly to increased cardio-vascular problems
- increase depression and anxiety

Lacking social connections can be as damaging as smoking 15 cigarettes a day

Equal Opportunities Committee report of 2015



Creating Safe, Supportive Communities

"If we feel a sense of belonging and acceptance, if we are valued and treasured and cared for and can share our experiences and our food and our stories, if there are places we can go and be with our own and if there are places in the wider community where we know we will be welcome rather than having to carve out our own acceptance then of course we can begin to think of ourselves in a new and more positive light. And then the ideals of self- management or recovery and of autonomy can flourish in a healthy way."

The Difference Support in Mind Scotland makes

- Social Inclusion
- Reconnecting to the wider world
- Sense of belonging
- Wellbeing
- Confidence
- Motivation
- Skills
- Quality of Life



"It means I meet with more people, I get out more, I have more of a life, a much better life. Without that I would just sleep all day. I wouldn't have any friends"

Carers Toolbox



Carers are provided with a toolbox of information and strategies, to take home and use for future.



- •"It gave me a lot to think about and plenty to read into"
- •"Good companionship, useful tips on how to cope with various issues, a feel good atmosphere"
- "The way it was put over was excellent"



Impact



• "By going to meetings you realise other people have similar problems you **do not feel so alone**"

• "Relaxing with like-minded people who understand what you have coped with... seeing how others have **risen above their problems** to keep going"

•"We enjoyed a laugh and **relaxed chat** which was a tonic"

Social Support



- Create Space
- Bring people together
- Share food and drink
- Human compassion and understanding
- Company and Conversation
- Share Experiences Peer Support





Louise Christie Scottish Recovery Network





The power of peer support Louise Christie | Network Manager

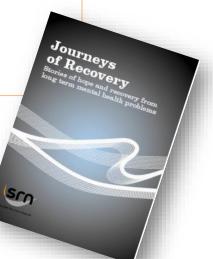
A Scotland where mental health recovery is a reality for all

www.scottishrecovery.net



"Recovery is being able to live a meaningful and satisfying life, as defined by each person, in the presence or absence of symptoms. It is about having control over and input into your own life... Each individual's recovery, like his or her experience of mental health problems is a unique and deeply personal process."

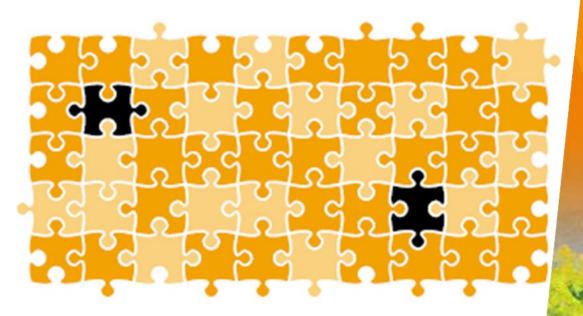
> Journeys of Recovery, Scottish Recovery Network, 2006



What supports recovery?



What is peer support?



- Peer worker roles most formal and least common Mutual support and self help
- 🔆 Naturally ocurring peer support least formal and most common

Empowerment Mutuality Responsibility Authenticity Experience Hope

The evidence



LOUISE CHRISTIE (SCOTTISH RECOVERY NETWORK) MAY 2016

INSIGHTS

A SERIES OF EVIDENCE SUMMARIES

7. Peer Support Workers: a practical guide to implementation

> with contributions from Becky Aldridge, Sharon Gilfoyle, Steve Gillard, Rachel Perkins and Jane Rennison

INTRODUCTION

ImROC

Briefing

ough Organisations

31

Iriss

Our experience with the ImROC programme has led us to the conclusion that the widespread introduction of people not worked for some time, nor been with lived experience of mental health problems into the mental health workforce is probably the single most important factor contributing to changes towards more recovery-oriented services. In the first paper on this topic (Repper, 2013) we discussed the theoretical background, core principles and the range of potential benefits. In this paper we will discuss practical issues of implementation in more detail.

When developing peer worker posts, it is useful to think of four sequential phases. The first involves preparation – of the organisation as a whole, of the teams in which peers will be placed, and, perhaps most obviously, of the peers themselves. The second phase involves recruitment of peers to the posts that have been created or existing posts that have been

modified for peer workers. Given the likelihood that peer applicants may have through an Interview process with all of the formalities and checks that this brings, the whole process needs careful support. Thirdly, there is the safe and effective employment of peer workers in mental health organisations. Finally, the ongoing development of peer worker opportunities and contributions needs to be considered in the context of the wider healthcare system and the changing culture of services. These different phases are shown in Box 1 below.

Centre for Mental Health Network

Reviewing Peer Working A New Way of Working in Mental Health

Srn

Recovery

Network

A paper in the Experts by Experience series Scottish Recovery Network: July 2013



The power of peer support!

strengths shared witted connecting experience experience experience employer to the strength of the strength o

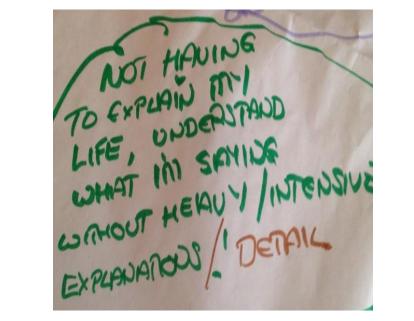
Shared experience

'spending time with people who understand'

'knowing you are not alone'

'where you can be yourself'

'natural'...'human'...'safe'



A mutual relationship

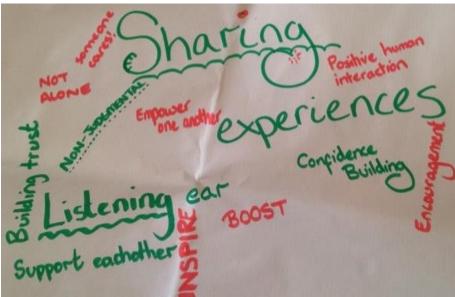
'progressing and moving forward together'

'valuing and respecting each other'

'talking to people'...

'being a listening ear'

'being there for people'



Strengths based



'see the person behind the illness'

'about what I can do'

'hope'

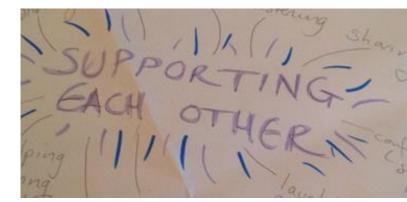
its about change'

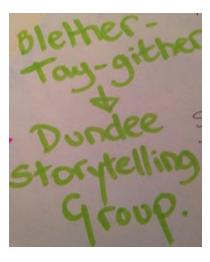


Powerful....empowering

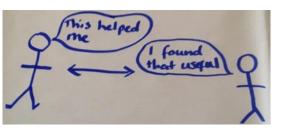
'knowing you are not the only one having these awful feelings and thoughts'

'sharing your story helps you recover'





'sharing what keeps you well'



Peer support....how?







www.scottishrecovery.net louise.christie@scottishrecovery.net @SRN_Tweet





Claire Stevens Voluntary Health Scotland Discussion Session

Twitter #SocialSupport @OUScotland @VHSComms @suppinmindscot





THANK YOU!



We welcome new members from all sectors – join us now. www.vhscotland.org.uk/get-involved

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#event title keyword Twitter:@VHSComms www.vhscotland.org.uk