

WHAT'S
YOUR STEP?



Now is the time to act.

Newham London

Newham Mental Wellbeing Impact Assessment

December 2020

Newham Mental Health and Wellbeing
Partnership

This report describes the methods and the findings of the Mental Wellbeing Impact Assessment carried out to understand the impact of the Covid-19 pandemic on the wellbeing of residents of Newham

**People at the Heart
of Everything We Do**



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Introduction

- COVID-19 has affected every aspect of our lives. While many people have acted in solidarity in response to COVID-19 and there are positive benefits from this community spirit and response, yet the pandemic has had many psychological impacts on the population which may have a detrimental effect on the short, medium and long-term mental health and wellbeing of our residents. The long-term impacts of trauma, grief and distress caused by COVID-19 may exacerbate the burden of mental ill-health and widen the pre-existing inequalities pre-COVID in our community.
- The residents of Newham in East London have been particularly affected by the pandemic. The Borough is very diverse with a BAME population of 75%. There are high levels of deprivation, and those who are in work tend to be in the more lower paid roles many of which have been lost as part of the pandemic implications. The number of deaths from COVID-19 has been high and therefore much wider implications for the families affected and communities with local tragedies.

Objectives of the Mental Wellbeing Impact Assessment

The aim of the mental wellbeing impact assessment was to take a systematic and evidence-based approach to understanding the impact of the Covid-19 pandemic on the mental wellbeing of residents of Newham. (1)

The objectives were as follows:-

- To build on work to date and develop an inclusive, collaborative approach to responding to such a complex subject
- To enable the evolving Mental health and Wellbeing Partnership to undertake actions and activities to move forwards
- The approach we want to take is to work in a collaborative way:
 - Bring people together from the public and voluntary sector services alongside those working within or having had experience of mental health services
 - Collaborate online through iterative workshops and social media 'Facebook Workplace'
 - 'Work Out Loud' to encourage wide reaching engagement

Summary and recommendations

The 12 recommendations and supporting action plan (Appendix 1) will be used to ensure that we have the appropriate responses in place and we will work alongside residents and communities to improve mental health and wellbeing in our borough.

The recommendations are as follows:

1. Work to continue collaboration across the system and progress the Mental Health and Wellbeing Action Plan
2. Ensure that we understand, reduce and tackle the inequalities of our diverse communities by having quality of access to mental health and wellbeing services
3. Develop the role of social prescribing as an important approach to the self management of mental health and wellbeing
4. Develop an overarching organisation that offers befriending services. Set a long-term plan to continue Befriending, Your Time and Parent Befriending
5. Increase awareness of existing mental health services. Explore opportunities to link more with community services and ensure frontline access points are able to signpost to mental health and wellbeing services

Summary and recommendations cont'd

6. Provide suicide training to increase awareness amongst colleagues and partners to be able to deal with and refer residents to services if experiencing distress, self harm and suicidal thoughts
7. Strengthen Mutual Aid Groups/Neighbourhood Groups/Community Cafes etc. Address limitations (e.g.: cultural barriers to access)
8. Using Community Health Champions and other channels as conduits for sharing information by increasing awareness of existing services and building additional capacity in the community through training (e.g.: Mental Health First Aid Training) training
9. Link to the wider 5 ways to wellbeing (e.g.: walking to improve health)
10. Provide universal bereavement training to key settings such as schools, colleges, children's centres and investing more in community bereavement services across the Borough
11. Develop a whole system Trauma Informed approach across the organisation (health, education and community settings)
12. Improve access to appropriate services for those disproportionately affected

Agencies involved

- The Newham Mental Health and Wellbeing Partnership is a collaboration between the NHS, Local Authority and Voluntary Sector partners and stakeholders
- A core project team was put in place from within the partnership to manage the project and maintain an overview on progress
- The stakeholder sessions were launched by the Director of Public Health
- Representatives from established co-production groups, faith organisations and service user groups were invited to take part in the workshops
- Basis were commissioned by the project team to ensure we worked online and in an interactive, and agile way. They facilitated the workshops, worked through and consider the complex challenges and to fully supported the process which added to the quality of the engagement.

Mental Wellbeing Impact Assessment activities

The Mental Wellbeing Impact Assessment Activities were as follows:

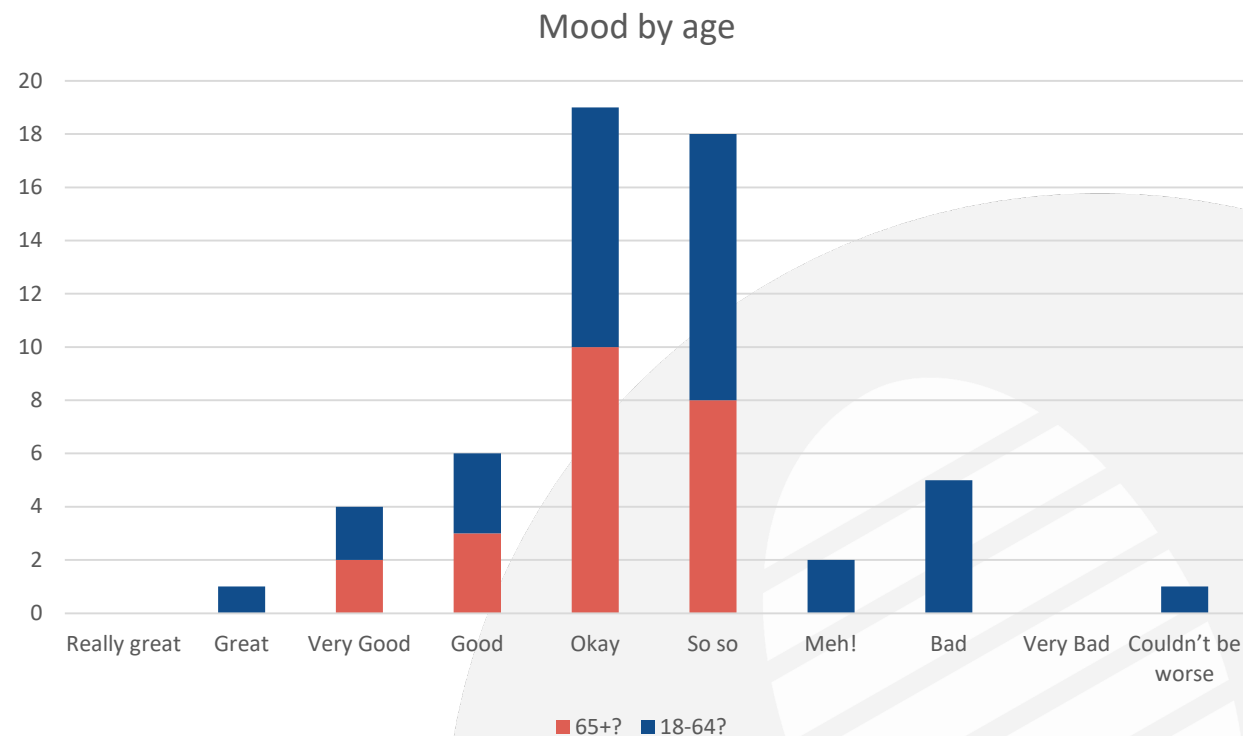
- Initial Screening and Scoping
- Appraisal Process – Gathering Evidence
 - Data Collection and Develop Community Profile
 - Stakeholder Workshops ‘Working Out Loud’
 - Literature Search and Evidence Review
- Identification of Potential Positive or Negative Impacts
- Developing Indicators
- Formulation
 - Recommendations and Report
 - Development of Action Plan

Covid-19 policy appraisal 2020

- First case confirmed in England – January
- Public Health information campaign produced by DHSC-February
- Health Protection (Coronavirus) Regulations and Chief Medical Officer Strategy – Contain, Delay, Research and Mitigate – February
- Stay at Home Order – 'Stay at home and protect the NHS' March introduced self isolating, shielding, closure of non-essential businesses
- Corona Virus Act provided emergency powers – March
- Schools close – March
- Furlough Scheme introduced – March
- Temporary Critical Care Nightingale Hospitals – March
- Curve of first wave of the epidemic starts to slow down – April
- Total number of excess deaths reaches 65,000 – June

Evidence – profiling of local communities

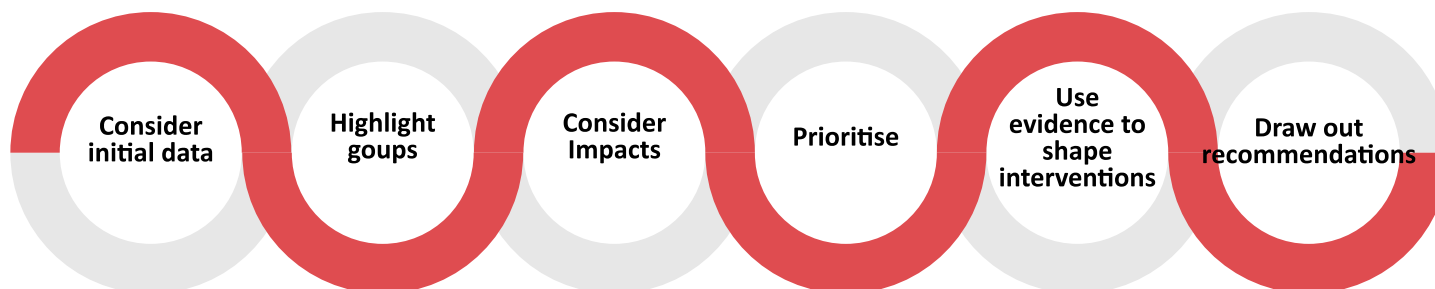
- Two sources of information were created to assist develop the profile of local communities.
- Firstly, an overview of health need has been created as part of the evidence base for the Health and Wellbeing Strategy 50 Steps to a healthier Newham. (2) The summary from this document is at Appendix 2
- Secondly a slide pack of with a more specific mental health profile was developed using fingertips data and local service information.



Evidence: Stakeholder and key person interviews – ‘Working Out Loud’

1. The approach provided a framework for engaging service users, communities and partner organisations in identifying the impacts both negative and positive, highlighting those most vulnerable and creating an action plan
2. The engagement took place in the form of four workshops
3. ‘Working Out Loud’ included
 - Collaborative workshops with an open invitation to all
 - Document sharing with live links which people were able to share
 - Social Media Platform to share ideas and share information
 - Continues Adaptation Based on learning

The flow of the discussion was as follows:





'Working Out Loud' - Outcomes overall

- Over 40 people engaged directly over the course of the 4 sessions. With many there for each one
- Data was shared, understood and used to create insight
- An online platform was used to facilitate an ongoing community of practice
- Suggested measures – Take up of services, diversity of access, awareness, wellbeing scores etc.
- Key recommendations were established
- Intervention activities identified
- Cross sector commitment to own this approach and work forging ahead





'Working Out Loud' – Outcomes overall





'Working Out Loud' – Outcomes overall

The collaborative approach really allowed for a depth of understanding which has helped formulate actions that can make a real difference.

Kevin Feaviour

We must keep on keeping on to build bridges between the sectors, and remember both those newly affected and those with pre-existing mental health conditions.

Matthew Porter



Evidence – Literature review

- A rapid literature review was carried out to identify potential mental wellbeing impacts, contributory factors and the groups disproportionately affected, and then any evidence of mitigation. At the time there was very limited information and research linked to the current pandemic. To broaden this out the decision was made to also look at any international publications particularly those emerging from China which had experienced the pandemic at the end of 2019.
- The stages of collecting the evidence were: Consider any similar mental wellbeing impact assessments, Collect information from Public Health England and London wide meetings, Use search strategy to search bibliographic databases for evidence of links between the Covid-19 pandemic and mental wellbeing, appraise the literature selecting important and relevant studies, assess the likelihood of the mental wellbeing impact based on the evidence.
- From the search strategy 24 papers were identified for review (grey and some limited peer reviewed studies)
- Each paper was reviewed using an individual template and then the overview was brought together into a summary document highlighting the mental wellbeing impacts, factors causing further deterioration, Groups disproportionately affected and protective factors.
- A summary of the findings from the literature review was written up and summary slides produced and presented to the workshops in the consider impacts stage of 'working out loud'.



Overview of findings

Mental Wellbeing Impacts

- Negative- Fear and Anxiety, Isolation and Loneliness, Post Traumatic Stress Disorder, Further Impact on Poor Physical Health
- One positive impact – increase community support and bonds

Contributory Factors/ Factors causing further deterioration

- Social media, unemployment and low income, social isolation, digital inclusion, housing insecurity and overcrowding, shared facilities, Working on the front line, loss of coping mechanisms, reduced access to support services

Groups Disproportionally Affected

- Black, Asian and Minority Ethnic Groups, People with pre-existing mental health conditions, People on low income, unemployed, struggling with debt and/ or at risk of eviction, Children and Young People,, Young people at risk of exploitation, young carers, adult carers. People with learning disabilities and development disorders, people with long term physical health conditions, people experiencing domestic and sexual violence, Pregnant women, LGBTQ communities, Single and new parents, Those working or volunteering in care and health care

Mitigation/Protective Factors

- Good quality information, active prevention measures, increased social support, physical activity, wellbeing awareness and coping mechanisms, mental wellbeing support



Discussion of key mental wellbeing impacts

- In the workshops the group were also asked to consider the short, medium and longer term implications of the impacts on groups identified. The Mental wellbeing Impacts were also discussed and solutions suggested to reduce the impact of each relevant to the groups, including who needs to be involved, how it could be initiated and how this idea could fail
- Finally the group were asked to rank and prioritise the mental wellbeing impacts and from this the recommendations and resulting action plan took shape.
- The stakeholders and partners involved in the workshop offered multiple recommendations and at one point it became very difficult to priorities one above the other. Eventually knowing that progression over perfection is key they suggested the following impacts as overarching themes therefore the action plan is shaped around this.
 - Fear and anxiety
 - Isolation and Loneliness
 - Post Traumatic Stress Disorder
 - Poor Physical Health

Summary of outcomes

- The process has helped to identify those who are most vulnerable in the borough to deterioration of their mental health and wellbeing as a result of the impact of Covid-19
- We have been able to identify the main mental wellbeing impacts and risk factors.
- The evidence review has demonstrated limited research however clearly this is an area that needs to be kept under review as more studies are brought forward around Covid-19 and impact on Mental Health and Wellbeing
- The process has reminded us that we need to particularly monitor access to services and support and ensure that those who are most vulnerable are able to access and there are no barriers to take up.
- The Mental Health Impact Assessment has identified positive as well as negative mental health and wellbeing impacts particularly around improved community connectedness
- The recommendations are helpful in shaping our action plan for recovery going forwards and the longer-term planning of the Newham Mental Health and Wellbeing Strategy

References

1. Mental Wellbeing Impact Assessment Toolkit <http://www.mas.org.uk/uploads/artlib/mental-wellbeing-impact-assessment-a-tool-kit-for-wellbeing.pdf>
2. Evidence doc for Health and Wellbeing Strategy <https://www.newham.gov.uk/downloads/file/2554/50-steps-evidence-base-final>

Appendix 1: Action plan

Aim:

The Aim of this Action Plan is to deliver the recommendations of the Mental Wellbeing Impact Assessment. We recognise that the mental wellbeing impacts of the implications of Covid-19 on our residents may be experienced disproportionately among certain groups and these include:

- Black, Asian and Minority Ethnic (BAME) groups
- People with pre-existing mental health conditions
- People on low income, unemployed, struggling with debt and/or at risk of eviction
- Children and young people, young people at risk of exploitation, young carers.
- Adult carers
- People with learning disabilities and developmental disorders
- People with long-term physical health conditions
- People experiencing domestic and sexual violence



- Pregnant women
- LGBTQ+ communities
- Single parents and new parents
- Those working in care and health care and the voluntary sector

The overriding themes identified include:

- Fear and anxiety
- Isolation and loneliness
- Post-traumatic stress disorder
- Poor physical health impacting





Overarching recommendations

Recommendation 1: Work to continue collaboration across the system and progress Mental Health and Wellbeing Action Plan

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
1.1 Ensure greater collaboration between services to address complex issues and enable broader set of conversations with our residents through ongoing communication and co-production work	SB/FH and project team	Create a 'Community of practise' and run regular engagement sessions with our residents and stakeholders to develop an ongoing dialogue around mental health and wellbeing.	Ensure in place for March 2021		In place/ increased awareness and knowledge.
1.2 Mental Health and Wellbeing Partnership	RF	Continue with meetings on a monthly basis	Ongoing		In place
1.3 Review benefits of signing Prevention Concordat	NB	Review and bring paper forward for a decision	February 2021		Decision made to progress



Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
1.4 Develop Mental Health and Wellbeing Action Plan. To progress '50 Steps to a healthier Newham'	FH/SB	Set out timeline for review and engagement	April 2021		In place

Recommendation 2: Ensuring that we understand, reduce and tackle the inequalities of our diverse communities by having quality of access to mental health and wellbeing services

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
2.1 Understand service users' profiles and targets to ensure gaps dealt with across all Mental Health and Wellbeing services for Children and Young People, and Adults	RF/HE/S A	Undertake Mental Health and Wellbeing Needs Assessment/Fact Sheet for Children and Adults	March 2021		Mental Health and Wellbeing Needs Assessment/ Fact Sheet in place across children's and adults



Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
2.2 Explore further and co-develop solutions with groups disproportionately affected (see Appendix 3)	DL	Engagement sessions underway, review and recommendations	June 2021		Engagement complete and recommendations built into service delivery
2.3 Develop a mental health and wellbeing pathway (2 visual flowchart's) for children's and adult mental health and wellbeing services	RF/HE	Continue mapping to understand the offer across children and adult MH services (including VCS support)	February 2021		Pathways in place
	RF	Produce a guide outlining the MH&W support for schools over the next 12 months	November 2020		In place
2.4 Develop and focus offer for identified vulnerable groups (See 2.2 above)	DL	Alongside partners and service users develop plan for each of identified groups through co – production.	April 2021		Co-designed pathways in place

Recommendation 3: Develop the role of social prescribing as an important approach to self-management of mental health

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
3.1 Embed mental health and wellbeing pathway in the Well Newham - Social Prescribing for Adults offer	FH/SB	Ensure awareness and linkages to mental health and wellbeing pathway	April 2021		Wellbeing Measures to be developed
3.2 Develop a social prescribing offer for young people with a focus on Mental Health and Wellbeing in the first stage	RF/AT	Develop awareness and linkages to mental health and wellbeing pathway for young people			Wellbeing measures to be developed
3.3 Ensure that all services (e.g. housing, Debt management, Moneyworks etc.) make link/signpost to mental health and wellbeing support when needed	PV/HT	<ul style="list-style-type: none"> Adapt MECC training to mental health and train all frontline workers Referrals in place 			Training carried out.



Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
3.4 Develop a borough- wide mental health training offer post lockdown		<ul style="list-style-type: none">• Education and Schools• VCFS: work with VCS and faith leaders, fitness instructors, staff café, housing colleagues etc. to have conversations about mental health			

Fear and anxiety

Recommendation 4: Develop an overarching organisation that offers befriending services - Set a long term plan to continue Befriending, Your Time and Parent befriending

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
4.1 Extend Befriending with a particular emphasis on vulnerable groups	PV/FH	<ul style="list-style-type: none"> Connect Newham commissioned and due to start in January 2021 Further extension required to support vulnerable groups 	January 2021		Service in place, support to vulnerable communities
4.2 Your Time' – Befriending service for young people aged 10-18	KD	Invest and build more capacity in Your Time service, possibility of linking with VCS partners	April 2021		Service in place 10-18
4.3 Parenting Befriending	RF/HE	Review and implement parent befriending service	April 2021		Service in place

Recommendation 5: Increase awareness of existing MH services (e.g. IAPT, Kooth etc.) and explore opportunities to link some of these services more with community services and ensure all frontline access point are able to signpost to MH services

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
5.1 Use COVID-19 community health champions and young health champions as conduits to share information about existing mental wellbeing and mental health services with the community	RF/HE	Hold champions sessions with professionals from number of MH services to disseminate information about existing provision and services	Ongoing		Information sharing underway
5.2 Develop a borough wide Communications plan/behavioural insight	ST/BJ	Develop and promote Mental Wellbeing Conversation in the borough	February 2021		Year Long plan in place and individual targets
5.3 Building Mental Wellbeing capacity within existing services	PV/HC	Ensure front line services are aware of support. Build into social welfare alliance training.	March 2021		Plan in place for 6 months ahead



Recommendation 6: Providing suicide prevention training to increase awareness of colleagues and partners to be able to deal with and refer residents to services if experiencing distress, self-harm and suicidal thoughts

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
6.1 Review Suicide and self-harm Action Plan across children and adults.	HE PW	Improve focus of training through review of data and action plan	February 2021		Review complete
6.2 Implement training plan to increase awareness and promote crisis support	HE PW	Link to STP bid	March 2021		Training in place

Isolation and loneliness

Recommendation 7: Strengthen mutual aid groups / Neighborhood groups / community cafes etc. -- address limitations (e.g. cultural barriers to access)

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
7.1 Develop and strengthen support for specific vulnerable groups e.g. zoom cafes, larger open spaces, link to digital inclusion	AK/PV/ EA	Co-produce wellbeing services to support the needs of vulnerable people.			In place Numbers taking Part Wellbeing Measures to be developed

Recommendation 8: Use community health champions and other channels as conduits for sharing information by increasing awareness of existing services and building additional capacity in the community through training (e.g. MH first aid training)

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
8.1 Raise awareness via Health Champions and Young health Champions	AB/RF	See 5.1 above	Ongoing		Information Sharing underway
8.2 Strengthen understanding and focus of social isolation and loneliness	CG/HE/EA	Review evidence and develop further fact sheet and plan	April 2021		Detailed review carried out

Recommendation 9: Link to the wider 5 ways to wellbeing (e.g. walking to improve health)

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
9.1 Programmes targeting most vulnerable groups –active Newham and physical activity recovery plan (Be Physically Active)	CC/NN	Detailed and varied offer in place and targeted	Ongoing		Take up of programmes from vulnerable groups
9.2 Extend to include: <ul style="list-style-type: none"> • Connect with other people • Give to others • Learn new Skills • Pay attention to the present moment - Mindfulness 	SB	Needs further development in line with volunteering/ culture/learning strategy	April 2021		Linkages and take up of programmes in place

Post traumatic stress disorder

Recommendation 10: Provide a universal bereavement training to key settings such as schools, colleges, children's centres and investing more in community bereavement services across the borough

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
10.1 Expand bereavement service	LD/FH/ NB	<ul style="list-style-type: none"> New Service commissioned Explore specific provision for residents with Learning Disabilities and those with Autism 	April 2021		Service in place
10.2 Embed bereavement support within existing services - Link to befriending service	FH/PV	Plan Pathway from Contact Newham	February 2021		Linkages in place
10.3 Support schools and all young people setting's staff with bereavement training	PW	Roll out Child Bereavement UK training offer for schools, early years and YP settings	March 2021		Training completed



Recommendation 11: Develop a whole system trauma informed approach across the organisation (health, education, and community settings)

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
11.1 Strategic endorsement to develop a trauma informed approach across the organisation	All	key principles of a trauma informed approach need to be integrated into all aspects of service development and delivery	March 2021		Approach Agreed with example projects underway
11.2 Recovery college	BM				
11.3 MH transformation	BM				

Poor physical health impact

Recommendation 12: Improve access to appropriate services for those disproportionately affected (e.g. weight management, smoking etc.)

Action	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
12.1 Focus lifestyle support at vulnerable groups	EO	Ensure lifestyle services have a specific focus on reaching those who are disproportionately affected.	Ongoing		Take up of services, diversity of access

Appendix 2

- Summary of health and wellbeing in Newham
- Our population is relatively young, highly diverse, often substantially deprived with a high degree of mobility. Many younger adults move into and out of the borough. Overall, the population is forecast to increase from 360,000 residents to around 445,000 residents by 2030.
- However our borough faces some significant health challenges. Life expectancy for our residents is lower than for London and England. Overall, Newham is the 3rd most deprived borough in London and there are many substantial inequalities throughout the borough. Covid-19 has brought many of these inequalities starkly to the surface where they may have been hidden from some for too long.
- Common mental health disorders are more prevalent in our residents than compared to London, although long term mental health disorders appear to have improved relative to those of London.
- There are many challenges rising from the behaviours that effect health and wellbeing. Too often health is adversely impacted for our residents because of this. Physical activity levels are the lowest of all the London boroughs. Alcohol consumption compares reasonably well to London whereas levels of healthy eating, smoking and obesity are worse than for London. We need to support our residents to achieve healthy lives wherever possible.
- Our environments influence our health and wellbeing. For example, access to unhealthy food, together with low physical activity levels, partly explains why child and adult obesity is significantly worse compared to London.



- Patterns of disease show marked differences across our borough. Levels of diabetes and heart disease are particularly high in some at-risk communities such as Asian groups, particularly in the north east of the borough. Respiratory disease and cancer are more prevalent in the south west of Newham.
- Our different communities face serious health inequalities which are shown by patterns of multimorbidity and too often health is affected by the early onset of disease.
- Childhood vaccination rates remain too low to fully protect many of our communities in Newham.
- Poor air quality in some parts of the borough has a significant impact on health and is linked to seven out of every 100 deaths in our borough. This makes Newham one of the worst affected of the London boroughs. Housing and homelessness issues remain particularly challenging. Many families live in temporary or unsuitable housing and homelessness rates are amongst the worst nationally. Income and employment levels tend to be lower compared to London, often making housing even less affordable for many residents.
- Despite these various challenges, our borough performs particularly well in many aspects including educational attainment and school readiness, high employment of people with learning disability, low levels of childhood injury, successful substance misuse treatment and various aspects of elderly care.

Appendix 3

Group	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
Black, Asian and Minority Ethnic (BAME) groups					
People with pre-existing mental health conditions					
People on low income, unemployed, struggling with debt and/or at risk of eviction					
Children and young people, young people at risk of exploitation, young carers.					
Adult carers					



Group	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
People with learning disabilities and developmental disorders					
People with long-term physical health conditions					
People experiencing domestic and sexual violence					
Pregnant women					
LGBTQ+ communities					



Group	Lead	Key Action steps	Timeline	Progress update	Outcome/ Measure
Single parents and new parents					
Those working in care and health care and the voluntary sector					