

Appendix 1: Evidence of need in Edinburgh – Community Mental Health and Wellbeing Fund

This table represents evidence we are aware of to date. Please contact us at funding@evoc.org.uk with any additional evidence which you are aware of.

Source	Evidence	Area
NE Locality Improvement Plan 2017-22	<p>Reviewed in 2020 to revise priorities under key themes. NE has highest percentage of people with long-term health problems that limit day-to-day activity; highest child poverty rates and lowest life expectancy for males and females.</p> <p>Theme 2: enable access to health and wellbeing opportunities for people who are vulnerable and in poverty including an outcome for reducing loneliness and social isolation.</p> <p>Theme 3: support and strengthen communities where poverty is highest to improve and maintain inclusive, safe and welcoming places to live - tackling domestic abuse has been prioritised. Will be delivering domestic abuse and coercive control awareness training for staff. Examples of activity in the locality include equalities focus e.g. MECOPP supporting local gypsy/traveller community in North Cairntow to create onsite hub.</p> <p>Also Leith Chooses - incorporating participatory budgeting model involving voluntary orgs and local residents</p>	NE
SE Locality Improvement Plan 2017-22	<p>Reviewed in 2020. SE has highest rate of private sector housing, second highest rate of child poverty, high numbers of people sleeping rough and begging. Southhouse, Burdiehouse, Moredun and Gracemount. Poor standards of health and low levels of professional and educational qualifications are amongst the greatest challenges in these areas.</p> <p>Priority One - focus on engagement with young people and families and includes increasing domestic abuse reporting.</p> <p>Priority Two - focused on providing support for people sleeping rough, begging and street drinking. Key action from this is to signpost and facilitate access to support services including mental health.</p> <p>Priority Three - focuses on supporting people in Dumbiedykes - increase community resilience via small area plan including sub-group on social isolation and loneliness</p>	SE
SW Locality Improvement Plan 2017-22	<p>Reviewed in 2020. Number of older people expected to grow higher here than in other parts of the city - 18%+ by 2037. Has some of the densest and also most sparsely populated areas in the city. SW has higher rate of income deprivation than other parts of the city.</p> <p>Theme one - focused on understanding and addressing causes of hate crime and impact this has on health and wellbeing.</p> <p>Theme Two - focuses on community involvement in food growing and related outcome about increased wellbeing.</p> <p>Theme Three - reducing loneliness and social isolation - increased support from CLWs/befriending services. Theme 5 - focusing on tackling causes and impact of domestic abuse.</p>	SW
NW Locality Improvement Plan 2017-22	<p>Reviewed in 2020. NW expected to see largest population growth in Edinburgh by 2022 (up to 10%). NW has more people aged over 65 than any other parts of the city. Forth Ward has second highest rate of</p>	NW

	<p>child poverty (35%) and North Edinburgh has second lowest average household income in Edinburgh. Muirhouse one of the top ten most deprived areas of Scotland.</p> <p>Theme One - Social Isolation - developing activities to promote both physical and mental health. Theme Three - is around developing robust mechanism for engagement with local community to combat poverty and inequality</p>	
Local Outcome Improvement Plan 2018-28	<p>Three Priority Workstreams: Enough Money to Live On; Access to Work; Learning and Training Opportunities; A Good Place to Live. Overarching Focus on Poverty and Inequality. Emphasis on strengthening community influence and engagement in planning process. Nothing really specific, although all workstreams will contribute to supporting better mental health and local LIPs link to the 3 priority workstreams.</p>	CW
CLW Network Review 2020-21	<p>Mental Health (50%) and Social Isolation and Loneliness (23%) were top two reasons for referral requests. CLWs created wellbeing packs to support people with issues such as anxiety etc. 10% of all referrals or 384 links were made for mental health support.</p>	CW
<p>CLW Feedback on Gaps in Service</p>	<p>CLWs across all areas of the city talk about gaps and long waiting lists for one-to-one counselling and mental health support (which may not be eligible for the funding?) SE (Ferniehill, Gracemount, Inch Park and Liberton Practices) talk about gap in counselling and one-to-one mental health support. Also identified gaps in befriending support and anger management (to support social isolation)</p>	SE
	<p>Crewe and Muirhouse Practices - gaps in mental health support for BAME groups; mindfulness and mental wellbeing; one-to-one support for men</p>	NW
	<p>SE - identifying a need for a One Stop Wellbeing Centre for crisis and trauma support (services could be accommodated by using a community centre or library). Wellbeing navigators could be used to provide support in a number of areas including: counselling or coaching (preferably 1-1) to allow individuals to work on their mental health and wellbeing. BME and Polish communities in particular have difficulty accessing counselling in their own languages. Other areas of support required include trauma support, domestic abuse as no service in SE for this; specific emotional support for men and women; peer support and befriending as well as IT and literacy support and walking therapies. SE has fewer services generally than other localities.</p>	SE
	<p>Westerhailes - mental health for men; befriending</p>	SW
	<p>Pentland, Ratho, Colinton - report long waiting lists for befriending</p>	SW
	<p>Stockbridge - gaps in counselling services</p>	SE
	<p>Whinpark - one-to-one counselling and trauma services</p>	SW
	<p>Durham Road, Craigmillar, Niddrie, Southfield - social drop-in to support mental health and for substance misuse. Gaps in peer support and befriending services. Flagged that there seem to be some issues with organisations taking referrals from Craigmillar? There is no community health of mental health project in Craigmillar. Support required for older men and trauma therapy.</p>	NE

<p>NE Social Connections Workshops (Sept/Oct 21)</p>	<p>Two workshops - first one (Sept) focusing on how people are feeling after 18 month of Covid and what hopes for future. Second workshop (Oct) focusing on taking lessons learnt and integrating them into our work and how we can better support people whose health and wellbeing has deteriorated during lockdown. Organisations that participated: EVOC, Pilmeny Development Project, SFRS, Bethany Christian Trust, Prestonfield Neighbourhood Project, Volunteer Edinburgh, NHS Lothian Public Health, Advocard and Inspiring Leith. Overall consensus is that mental health is worsening, carers are particularly stressed, people with dementia have deteriorated. Focus on tackling inequalities; early intervention and prevention; emphasis on involving local people and communities in supporting tackling social isolation. Need a change of approach - discussion on using case conference type model as support and have venues available in communities for support purposes. Using person-centred and asset-based approaches to support. Flexible, simpler and longer-term funding. Improve relationships across all sectors.</p>	<p>NE</p>
<p>Poverty Alliance Get Heard Report</p>	<p>Annual report of the Get Heard Scotland Project 2019-20; 2 discussions were with Edinburgh-focused organisations (Broomhouse Community Project and Edinburgh Action Group). Nothing specific to Edinburgh in this report, poverty exacerbates mental health concerns. Recommends SG invests in mental health and out of hours health services. Encourages more participatory approaches, particularly with marginalised communities and to explore ways of devolving powers to communities.</p>	<p>CW</p>
<p>End Poverty in Edinburgh Annual Report</p>	<p>Nothing that specific re mental health evidence. General points about Improving Equalities in Health and Wellbeing - key action of 2020-21. End Poverty Edinburgh wants health and wellbeing of all citizens in Edinburgh to be a priority for all partners. Emphasis on the right support in the places where people live and work. No stats on MH prescriptions.</p>	<p>CW</p>
<p>Edinburgh Poverty Commission Report 2020</p>	<p>Link between poverty and poor mental health - Scottish Government data indicates that you are three times more likely to have below average wellbeing in the most deprived areas compared to the least and at GP practices like Craigmillar Medical Group and Muirhouse Medical Centre, poor mental health is the predominant feature in half of all consultations. The report states that the city will need to make a significant and sustained effort to improve mental health, responding both to the impact of recent trauma and the underlying causes of mental health inequalities. The Edinburgh Partnership and employers must invest in early intervention, first aid and holistic approaches.</p>	<p>CW</p>
<p>Thrive Collective Report</p>	<p>Small data set (163 citizens) but Connect Partnership Project indicated that the most common interventions being delivered were Self-harm Therapeutic Support (21% of people), followed by Volunteer Peer Support and connecting support (19%), Counselling&Therapeutic Support for Childhood Trauma (14%), Welfare Rights & Advice (12%) and Guided Self-help (11%). The remaining 23% included counselling, listening support and support worker services. Under-representation in NW/SW; higher in SE/NE compared to population size. Thriving</p>	<p>CW</p>

	Spaces Partnership (282 people) - the most common intervention being delivered was social support (51% of people), followed by self-esteem and wellbeing (33%). The remaining 12% had no recorded information. NE/SW highest proportion of referrals comparative to their population size.	
Mental Health Foundation Covid 19 pandemic, financial inequality and mental health	Link between poverty/financial insecurity/unemployment/debt on mental health. UK wide, not Edinburgh specific.	UK
Mental Health Foundation Mental Health in the Covid 19 pandemic	UK wide, not Edinburgh specific. Stats referenced in report are UK wide. Recommends advocating for trauma-informed public service, safe spaces for connection and peer support, specific support for asylum seekers and refugees and BAME communities.	UK
SBAR dated 30th March 2021 from PHPs and GPs	<p>Feedback from Practices indicates the additional workload is significantly composed of more people with:</p> <ul style="list-style-type: none"> • Distress due to money, employability and housing worries • Depression due to social isolation • Clinical depression episodes • Young males presenting with suicidal ideation • Anxiety • Destabilising of substance misuse patients <p>Relevant recommendations are: Increase welfare rights and employability services- open up access to all Practices. (It should be noted that additional commitment to welfare rights workers has recently been announced)</p> <ul style="list-style-type: none"> • Engage and work with Volunteers/Befriending services (suggested use of college and university students studying Psychology, counselling) Initial funding of a post to work with Volunteer Edinburgh to assess and provide recommendations and any associated costs. (£10k for scoping report) • Be imaginative around outside space- outside table chairs etc to allow services to meet people outside. Link to Thrive which is active in this area. • Increase green prescribing access – start walks from GP Practices • Digital Solutions- Text Links for coping with anxiety, mindfulness, Zoom anxiety classes. Link to Thrive resources. • Increase capacity in listening services 	CW
JSNA Input Locality Population Needs (May 2021)	<p>GP mental health workload varies from practice to practice but is generally described as around 30% of primary care workload, or in Edinburgh around 600,000 patient consultations per year/12,000 per week/35 consultations per day in an average practice. Initial feedback from Practices indicated the additional workload is significantly composed of more people with:</p> <p>.Distress due to money; employability and housing worries; depression due to social isolation; clinical depression episodes; young</p>	CW

	<p>males presenting with suicidal ideation; anxiety; destabilising of substance misuse patients. Community Mental Health waiting lists are long, which means people not getting early support before they require more complex interventions. In June 2021, Public Health Practitioners (EHSCP) and a Senior Health Promotion Specialist (NHSL) contacted the GP Cluster Quality Leads and Practice Quality Leads in each locality in order to collect more detailed feedback on their Practice population’s mental health needs and discuss potential solutions.</p> <p>1) There is significant unmet need amongst young people for mental health support, including self-harm, eating disorders, and substance misuse. They could benefit from short interventions but not widely available. 2) There are high levels of stress and distress (due to financial, employment and housing worries), as well as anxiety and depression amongst the population. There is a lack of available counselling, CBT and anxiety management options in the community, particularly in languages other than English. 3) Social isolation is a major issue, especially for older people. There is limited capacity in befriending services across the city, and other services that help improve social connections. 4) Perinatal support/ support for new parents was flagged as a need. 5) carers were identified as requiring additional support. 6) The community link worker network highlighted that there are no longer many longer term support worker roles in the city, but that this is often what their clients are looking for. NB there are separate lists of concerns from each locality's GP practices. Alcohol misuse highlighted as an increasingly prevalent problem.</p>	
<p>The experiences of UK LGBT+ communities during the COVID-19 pandemic</p>	<p>UK wide. The COVID-19 pandemic has had a negative impact on the mental health of LGBT+ people living in the UK. This includes evidence of increased anxiety and depression, attributed to feelings of isolation and loneliness through the loss of safe, supportive, and identity-affirming peer-groups, communities and spaces.”</p>	<p>UK</p>
<p>LGBT Health and Wellbeing submission</p>	<p>Pre-pandemic there were 9 community groups in Edinburgh, of which only 4 are currently still running - have indicated frequency pre-pandemic (in brackets) and outlined below how each group has responded to covid:</p> <ul style="list-style-type: none"> - Non- Binary Group (monthly): initially started to meet weekly through zoom, now fortnightly and has moved to the online Discord platform - Trans Masculine Scotland (monthly alternating between Edinburgh & Glasgow): group moved online, initially holding weekly, later fortnightly meetings - Edinburgh Trans Women (monthly): maintained monthly meetings through zoom - Gay Men’s Book Club (monthly): maintained monthly meetings through zoom - LGBT Basketball (weekly): group paused; group members recently consulted about restarting and safety measures needed, with the hope the group can restart in future 	<p>CW</p>

	<ul style="list-style-type: none">- LGBTQ Yoga (monthly): group paused, briefly ran as a monthly online group, but attendance very low; now folded (early 2021 group facilitator moved down south)- Queer Arts & Social Club: due to launch in person, but instead set up initially as a Facebook group, and then moved to the online Discord platform; now folded- New Beginnings (fortnightly): group paused- Bi and Beyond (fortnightly): group paused, but staff supported the group to run a few one-off online events.	
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