North East Essex Health & Wellbeing Alliance
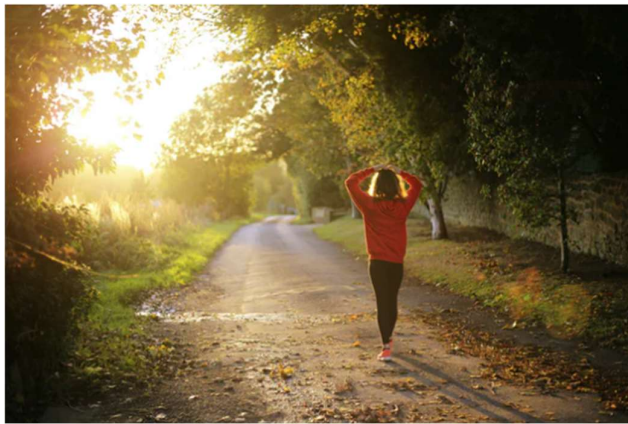# Community Assets Mapping

Feel Well – Mental Health
June 2022

Table of Contents

Introduction

The Feel Well Deep Dive is the second in a series of reports to be published as companions to the Community Assets Mapping refresh of North-East Essex, originally published in Spring 2021. Using the North East Essex Health and Wellbeing Alliance domains as a framework for each report, there will ultimately be a library of six reports:

- Start Well – completed over the Summer of 2021
- Feel Well – conducted during Autumn 2021
- Be Well
- Age well
- Stay Well
- Die Well – scheduled to begin in Winter 2022

The report has been produced by Healthwatch Essex, CVS Tendring and Community360, working in partnership, and collaborating with a Steering Group which has included the Feel Well domain lead, representatives from District and County Councils, Essex Fire and Rescue, the Local Delivery Pilot, North East Essex Clinical Commissioning Group and ESNEFT.

Scope and methodology

In learning from the completion of the first deep dive report for Start Well, this document is a refinement of a process that will continue to evolve as the asset mapping programme delves into new topics. Of primary concern was maintaining an Asset Based Community Development (ABCD) approach in a local context. This involved grounding research in local knowledge whilst using national and regional data sets, where available, for cross reference.

A clear outline for the report was shaped through consultation with the steering group and involved topic-specific specialists and relevant organisations.

It was agreed that the work would take into account key drivers and influences on people with mental health challenges and use learning from the last 12-18 months, gather information through a literature search and primary research which accurately reflects: -

• A deeper understanding of what facilitates and what presents barriers to access to services and how to address them

• key challenges facing people with mental ill health, especially those aged between 18 and 55 years of age

• local cultural factors and limitations

• transitioning from children to adult services

Citizen's voice work was concentrated in Berechurch and Pier wards as these were areas of particular interest due to demand and demographics. Berechurch is one of Colchester Central's wards, and Pier ward is based in Tendring.

Population Health data indicators showed that both would provide opportunities to explore the defined scope. The demographic profile in each area is broad, but in Berechurch also includes veterans and armed service personnel, as well as a cross-section

of ages. Pier has high levels of need, many Houses of Multiple Occupancy (HMOs) and a high level of demand for support.

The work will focus on working age adults aged 18-55, include transition from Young People's services, those living in HMOs, and where relevant, specific challenges such as eating disorders, or drugs and alcohol.

This report is collated from engagement with organisations and individuals and forms part of a wider interest in the topic of mental health that is being explored through varying research programmes. It should be seen in context of the Feel Well priority to aim for zero suicide and as a partner to ongoing activity in this field, although this report does not primarily focus on suicide rates or the experience and impact of suicide in North East Essex.

We would like to thank everyone who has contributed towards this report formally or informally, and hope that the content offers further insight into the experiences of local people and organisations working in the voluntary and community sector. Data gathering and consultation was conducted between September 2021 and December 2021.

The review of relevant literature included local and national sources of data listed in Appendix A.

Acknowledgements

Healthwatch Essex, Community360 and CVST would like to thank the organisations and residents who participated in all sections of the report, and notably as citizens' voices. Their experiences and data help to improve the understanding of this area of work.

Disclaimer

Please note that this report relates to findings and observations carried out on specific dates and times, representing the views of those who contributed anonymously during the engagement visits. This report summarises themes from the responses collected and puts forward recommendations based on the experiences shared with Healthwatch Essex during this time.

Context

It is recognised that the wider determinants of health – that is, the circumstances that people are born, grow, live, work and age into - impact on their physical and mental health. The Mental Health Foundation[1] looks at the links between the wider determinants of health, poor physical and mental health, and different population characteristics. Statistics identify some groups as being at higher risk of mental ill health. Below is a summary of some of their findings, to give context to this report and to recognise the impact of a range of factors upon health inequalities.

Healthy Lifestyles and Physical Health

Physical health problems increase risk of developing mental health problems and vice versa. According to the Mental Health Foundation, nearly 1 in 3 people with a long-term physical health condition also has mental ill-health, mostly depression and anxiety. Taking an holistic approach, minds and bodies cannot be separated, and they affect each other in terms of wellness and ill-health – so exercise, good diet, social contact, good living conditions and a healthy lifestyle support mental wellbeing.

> *Local Voices* – **the link between physical health and mental health**
>
> *'That's one of the downsides - people's health has really deteriorated for a lot of people. You could say it's nothing to do with the Covid but I think it must be some of it. It's because mental wellbeing affects your actual illness as well and I think that's where the big, big problem is, lack of - I'm the world's worst really - a lack of exercise and that, it's just like a rolling stone. It's gathering problems all the way along' –* ***Breathe Easy Colchester***

Minority Ethnic Communities

As well as the factors identified above, people from minority communities may also have to face racism, inequality, and mental health stigma - different communities address and approach mental health in different ways. This is exposed in statistics such as:

- Black men are more likely to have experienced (in the year to July 2021) a psychotic disorder than white men
- Black people are four times more likely to be detained under the Mental Health Act than white people
- Older South Asian women are an at-risk group for suicide
- Refugees and Asylum seekers are more likely to experience mental health problems than the general population, including higher rates of depression, anxiety, and PTSD.

The converse of this is that some minority community groups have better mental health particularly in people of Indian, Pakistani, and African-Caribbean origin; suicidal thoughts and self-harm were less common in Asian people than white people and mental ill health appears to be less prevalent among Chinese people than white people.

---

[1] https://www.mentalhealth.org.uk/a-to-z/p/physical-health-and-mental-health

Some of these statements should be treated with caution as either data is unavailable, or minority communities may be less likely to report mental health problems for practical or cultural reasons. The types of barriers which people may come across include:

- Not being aware of help available or how to access it
- Language challenges
- Lack of trust in formal healthcare services – higher level of trust in family and friends
- Lack of awareness and empathy towards mental ill health in their community
- Some professionals not understanding experiences of racism or discrimination
- Not feeling listened to or understood

Asylum seekers and refugees face specific challenges associated with their pre-migration experience (e.g., war trauma or persecution), their migration experience and their post migration experience (separation from loved ones, the asylum systems procedures and poor housing).

> *Local Voices* **– working with refugee and migrant communities**
>
> *'We have one house with one young man who has got advanced psychosis and who has regular outbursts. Most nights he will run around stomping and jumping and banging on doors. He would not, I think he would never hurt anybody and he has been assessed by the accommodation provider to say that he is practically harmless. Not that they are trained in any way to do that. But there are two other people in that household with PTSD so for them it's particularly scary when he does that. They do have locks on their doors. But it's terrifying for them when they are asleep and woken to the sounds of someone hammering on doors. And it can trigger them. And I think for them, they are living on £39 per week, most of them come to one or most of our groups and if they did not have that outlet, I don't know how they would survive.'– Refugee Action Colchester*

Adults with Learning Disabilities

Mental health problems are common among people with learning disabilities and can be overlooked or under-diagnosed due to lack of understanding, awareness evidence and identification of symptoms. One study referenced by the Mental Health Foundation found that 54% of people with a learning disability have a mental health problem.[2]

LGBTIQ+

Mental health problems such as depression, self-harm, substance misuse and suicidal thoughts are proportionately more common among people who define themselves as LGBTIQ+. Being LGBTIQ+ does not cause the problem in itself but the societal response – discrimination, homophobic reaction, social isolation, and fear of rejection and coming out - present a specific set of challenges. The converse also applies in that embracing

---

[2] Cooper, S.A., Smiley, E., Morrison, J., Williamson, A., & Allan, L. (2007). Mental ill-health in adults with intellectual disabilities: Prevalence and associated factors. The British Journal of Psychiatry, 190, 27–35

sexuality can lead to increased confidence, relief and self-acceptance and openness in family relationships. Each experience is unique.

Abuse

The effect of domestic violence on survivors' mental health can be acute. It is associated with depression, anxiety, PTSD, and substance misuse. Mental ill health can make people more vulnerable to domestic violence as well as it sometimes being the root cause of mental ill health. Many organisations supporting women and men experiencing domestic violence include mental wellbeing support as part of their offer.

Homelessness and Substance Misuse

The link between homelessness and mental health problems is often overlooked and again there is a cause-and-effect issue. For some, mental ill health or addiction cause homelessness and for others it is an outcome.

There is a strong link between mental health and substance misuse and it has been reported that for some it is difficult to access mental health services if there is an addiction present.

Local Voices **– working with people at risk of homelessness**

'We are absolutely not dealing with the cause, we are attempting to deal with the symptoms. And the cost for dealing with the symptoms is miles higher than it would be to deal with the cause, but nobody in politics seems to work that particular cost benefit equation out. We even had a letter from a consultant, a psychologist, about one of the guys and it basically said: the best outcome for this guy is if he goes back to prison.' – **Beacon House Ministries**

Spotlight **- Policy Approaches**

Changing Futures will be a new three-year national programme to improve outcomes for adults experiencing multiple disadvantage, including homelessness, substance misuse, mental health issues, domestic abuse and contact with the criminal justice system.   It aims to:

- *stabilise and then improve the life situation of adults who face multiple disadvantage*
- *transform local services to provide a person-centred approach and to reduce crisis demand.*
- *test a different approach to funding, accountability and engagement between local commissioners and services, and between central government and local areas.*
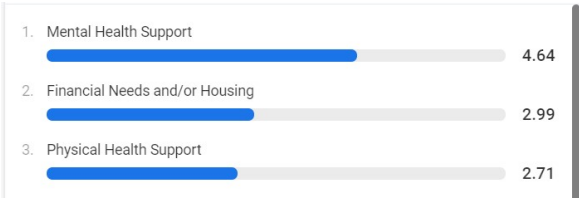
The programme will combine funding from the Department of Levelling Up, Housing and Communities, the Shared Outcomes Fund, and the National Lottery Community Fund. Essex has been chosen as one of 15 locations to receive funding worth £2.8m.

Gender

Being a man presents its own set of challenges in terms of perception of others, inability to open up, being perceived as 'weak' and generally being less likely to reach out for help. Suicide is the leading cause of death in men up to the age of 40. More needs to be done to help men access and benefit from services. There are programmes and peer support groups available.

Local Context

Throughout the period of producing this report, managing good mental health and the complexity of need within our region was a priority topic. This was borne out in consultation, through engagement events, and in some other, sometimes surprising, ways, for example:

- The Communities Can…Build Back Fairer conference asked attendees to highlight their current main priority – Mental Health Support scored nearly twice as highly as any other issue

1. Mental Health Support	4.64
2. Financial Needs and/or Housing	2.99
3. Physical Health Support	2.71

- 35% of programmes applying to access Hyperlocal funding sought to support the Feel Well domain (the second highest rate was Be Well at 21%)

- CVST and C360 conducted 'state of the sector' surveys in 2020 and 2021. Concerns about the mental health and resilience of community members and staff teams were identifiable features.

- The sector is undergoing a process of expansion and contraction which is influencing accessibility to services and capacity within organisations. Combined with feedback that prioritises the complexity of mental health needs amongst local people, there is an acknowledgement that pressure remains high. See reference to Alcoholics Anonymous in the descriptions below for an example of the changes in support available over the last two years.

The following research will touch upon these concerns in different ways, beginning with known clinical demand.

Statistics

In then taking a closer look at our place in North East Essex, it is possible to see that there are higher than average rates for depression, suicide, and self-harm – demonstrating the need for support within our local communities. In all indicator categories, Colchester and Tendring show a greater prevalence of mental health challenges and in most cases a greater prevalence than all England. These figures largely reflect pre-pandemic levels and demand on mental health services is reported to have increased in the past 18 months.

Prevalence Data

Date	England		Essex	Colchester	Tendring
2020/21		Depression – recorded prevalence 18+ years			
	12.3		11.1	12.7	12.1
2018/20		Suicide rate (persons)			
	10.4		12.6	16.2	16.3
2018/20		Suicide rate (Males)			
	15.9		19.3	24.9	22.8
2018/20		Suicide rate (Females)			
	5.0		6.3	7.6	10.4
2019/20		Emergency hospital admissions for intentional self-harm			
	192.6		150.2	181.6	208.8
2015/16 – 2019/20		Hospital stays for self-harm			
	100		83.5	124.3	151.3

The table above shows some of the key mental health indicators and compares Colchester and Tendring with Essex and England.

Population Health Management Data[3]

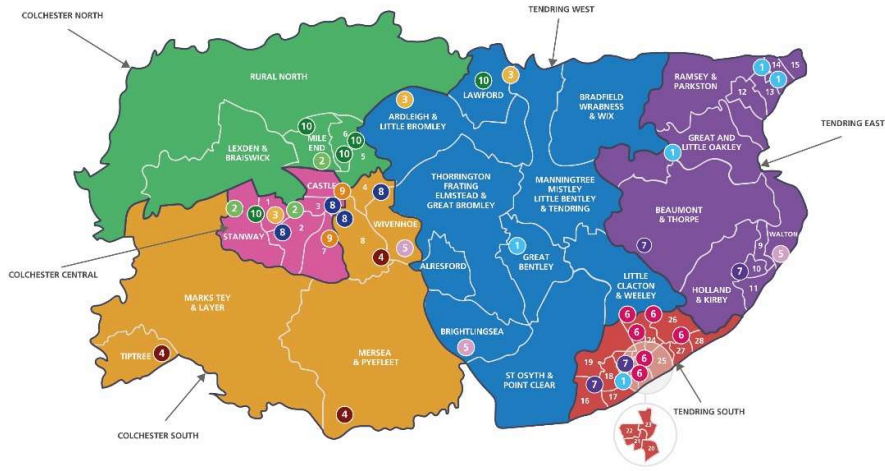| Borough	Indicator	Value	Date
Colchester	GP registered Population	235,344	
	Average life expectancy – male	80.20	Dec 2017
	Average life expectancy - female	83.31	Dec 2017
	IMD Deprivation rank	181	Dec 2019
	Unemployment rate	3.67%	Dec 2021
	Long-standing health conditions	52.03%	Dec 2021
	Long-standing Mental health conditions	10.6%	Dec 2021
	Depression 18+	12.37%	Mar 2020
	Mental Health	0.91%	Mar 2020
	Dementia	0.81%	Mar 2020
	Reporting Alzheimer's or dementia	0.42%	Dec 2021
	Learning Disability	0.56%	Mar 2020
Tendring	GP registered Population	127,488	
	Average life expectancy – male	78.05	Dec 2017
	Average life expectancy - female	82.05	Dec 2017
	IMD Deprivation rank	32	Dec 2019
	Unemployment rate	4.47%	Dec 2021
	Long-standing health conditions	58.54%	Dec 2021
	Long-standing Mental health conditions	11.09%	Dec 2021
	Depression 18+	10.54%	Mar 2020
	Mental Health	1.03%	Mar 2020
	Dementia	1.37%	Mar 2020
	Reporting Alzheimer's or dementia	0.93%	Dec 2021
	Learning Disability	0.66%	Mar 2020

---

[3] Data provided by NEECCG

In the table above the deprivation score across the UK ranges from 1 being the most deprived to 317 being the least deprived lower tier authority in England. Both are characterised by a mix of rural and urban settings and Tendring is a coastal area which has suffered economic decline. Both areas continue to fall in deprivation rankings.

Overall, the prevalence of long-standing physical health conditions is significant as there is a strong link between poor physical health and poor mental health – caused by a range of issues including living with health challenges, lack of mobility, increased vulnerability, isolation and loneliness.

In then assessing the data against surgeries and Primary Care Networks (PCN's), we can see how demographics produce differences across local Neighbourhood areas.[4]

- Harewood is smallest practice serving just under 3,000 patients; Colchester Medical Practice is by far the largest, servicing a patient population of over 37,000
- % with severe mental illness = lowest is Rowhedge at c0.38% and highest Bluebell at 1.36%; lowest is Thorpe at 0.4% and the highest is Fronks Road in Dovercourt at c2.7%
- MH prevalence data shows Rowhedge at lowest with c0.38%, highest in Colchester is Highwoods at 1.42%; Old Road in Clacton highest at 1.79% (serves Pier Ward) and lowest is Lawford at 0.6%. National average is 0.93%
- Depression –again, lowest is Rowhedge at 5.8% of practice population and highest is East Lynne at 21% (again, serves Pier Ward). National average is 11.56%
- Learning Disability lowest is Rowhedge at 0.22% and highest is East Lynne (again, serves Pier Ward as part of its catchment and there are quite a lot of supported living schemes in the area) and Riverside in Manningtree is at 1.1% probably due to Acorn Village being within its catchment area. National average is 0.51%
- EPUT referrals /1000 population – lowest is Rowhedge at c13, highest is east Lynne at 42.5. Top 3 highest rates are all practices which serve Pier Ward within their catchment.
- A&E admissions with a psychiatric condition – lowest is Ardleigh with 1.8/1000 population and highest is Old Road at 10.2/1000 population
- Including Access to Psychological Therapies (IAPT) referrals are lowest in North Clacton at c7/1000 population and highest in Abbeyfield at 30/1000 population.
- Those who actually entered IAPT, North Clacton is lowest with 5/1000 population and Abbeyfield is highest with c19/1000 population

---

[4] Data provided by NEECCG in the Autumn of 2021

COLCHESTER NORTH

TENDRING WEST

TENDRING EAST

COLCHESTER CENTRAL

COLCHESTER SOUTH

TENDRING SOUTH

RURAL NORTH

LAWFORD

ARDLEIGH & LITTLE BROMLEY

BRADFIELD WRABNESS & WIX

RAMSEY & PARKSTON

MILE END

LEXDEN & BRAISWICK

CASTLE

THORRINGTON FRATING ELMSTEAD & GREAT BROMLEY

MANNINGTREE MISTLEY LITTLE BENTLEY & TENDRING

GREAT AND LITTLE OAKLEY

STANWAY

WIVENHOE

ALRESFORD

GREAT BENTLEY

BEAUMONT & THORPE

WALTON

MARKS TEY & LAYER

BRIGHTLINGSEA

LITTLE CLACTON & WEELEY

HOLLAND & KIRBY

TIPTREE

MERSEA & PYEFLEET

ST OSYTH & POINT CLEAR

1. PRETTYGATE
2. SHRUB END
3. NEW TOWN & CHRISTCHURCH
4. GREENSTEAD
5. ST ANNE'S & ST JOHN'S
6. HIGHWOODS
7. BERECHURCH
8. OLD HEATH & THE HYTHE
9. HOMELANDS
10. HAMFORD
11. FRINTON
12. HARWICH WEST
13. HARWICH WEST CENTRAL
14. HARWICH EAST CENTRAL
15. HARWICH EAST
16. GOLF GREEN
17. ST JAMES
18. RUSH GREEN
19. ROCKINGS ELM
20. PIER
21. ALTON PARK
22. PETER BRUFF
23. ST MARY'S
24. ST JOHNS
25. ST PAULS
26. BURRSVILLE
27. ST BARTHOLOMEWS
28. HAVEN

1. TENDRING PCN
2. CREFFIELD MEDICAL GROUP PCN
3. COLTE PARTNERSHIP (ARA)
4. COLTE PARTNERSHIP (TMR)
5. COLTE PARTNERSHIP (WCW)
6. CLACTON PCN
7. THORPE AND RANWORTH PCN
8. COLCHESTER MEDICAL PRACTICE
9. EAST HILL & ABBEYFIELDS
10. NORTH COLCHESTER PCN

11

Voluntary and Community Sector Assets – how the sector is supporting people and their mental health

As noted above, grassroots groups and policy makers recognise the often-complex needs which occur alongside pressures on mental health. We would ask that readers recognise two recurrent challenges within many of the examples offered below.

- **Growing 'Economic Stress' –** in this report, we are terming the impact of the rising cost of living and the uncertainties associated with it as 'economic stress'. This is to capture the pressure that this builds within households and because it also reflects the many ways in which voluntary and community groups are able to detect how this pressure is impacting up – from changing priorities identified in Neighbourhoods by Citizens Advice, the speed at which Household Support Funds have been allocated over the Winter of 2022 and the sense of anticipation from partners that even more challenge is yet to come.
- **Managing Dualities** – the development of the Changing Futures programme, referenced above, is a clear indication that policy makers are recognising different situations where the multiplicity of needs can inhibit the outcomes achieved. The duality of a diagnosis of a mental health condition and substance misuse is a prevalent example. There are some innovative solutions emerging within our communities in North East Essex but there is also an opportunity to do more.

Spotlight **- Shelter and Health Enlisting Local Support (SHELLS)**

Since December 2020, an SOS bus been used by and re-badged as part of the SHELLS project, providing support at Clacton's Christmas Tree Island every Friday between 10am and 3pm and, since March 2021, operating from outside the Park Pavilion in Harwich on Mondays between 10am and 3pm, recently moving to Kingsway, Dovercourt. It works closely with and is integrated in the SHELLS project and commissioned by NEECCG. It was initially estimated that SHELLS would support 100 people. However, from September 202 to September 2021 it has supported 280 people.

This is an excellent example of early intervention and prevention, going where people are to provide expert advice guidance and support, enabling and facilitating access to a broad range of services. On board are SUMMIT workers and health advocates, drug & alcohol recovery workers, mental health nurses, social prescribers, housing support and local community services. The service is able to engage with local residents and support them, in a non-judgmental way, to access services locally to meet their need. They can help with a wide range of difficulties faced by residents, by putting them in touch with the right person/organisation. It is a drop-in service, no appointment needed.

Open Road SOS bus

The Open Road SOS bus has had a presence in Colchester High Street every Friday and Saturday night between 20:00h and 04:00h, supporting the night-time economy since 2008, with a gap in service only as a result of restrictions during the early months of the Covid-19 pandemic. The bus is specially adapted, equipped and staffed to be able to respond to emergencies and treat minor injuries and illness – relieving some of the impact on A&E and acute hospital services as well as undertaking healthy promotion advice and activities such as providing water and condoms, etc. Open Road has a small minibus which

works alongside the SOS bus and is able to pick people up from around the town and, if there is not alternative option, to take people home if they have become separated from friends and have no means of transport to get home safely. This is an excellent example of going where people are, instead of expecting them to find out where a service is and find a way to get to it – both of which can be barriers to accessing services.

SUMMIT

The organisation was primarily set up as a mental health charity in 1974. It is one of the oldest mental health charities in Essex. In Tendring there is a high level of vulnerable people with mental frailty or entrenched mental illness. Some people may possibly leave the Peter Bruff Ward in the hospital and remain in the area, even though they may not be familiar with Clacton, or are even new to the town. Clacton has a large community of individuals who suffer from poor mental health. There are many houses of multiple occupancy (HMO) in Pier Ward. Many coastal towns are associated with happy childhood memories, but as an adult this may not be the case.

One thing SUMMIT has learnt about the pandemic is that commonly-held perceptions about people with mental illnesses - that they are unemployed, they are from deprived areas, they have got drug or alcohol problems, or they come from broken families – are not necessarily accurate. Many of the people seeking help during the pandemic come from more privileged lives. It does show that when there is significant change in the circumstances - lost jobs, lost businesses, lost routine and home-bound for 24 hours a day, 7 days a week - a range of problems arise, exacerbating the strain on individuals and mental health services.

SUMMIT cite the real issue to be the problems people have in accessing mental health services, due to shortage of supply and overstretched resources, while respecting the challenges that people working within mental health services are experiencing.

The first barrier is when people feel that something is not right, go to their GP and they walk out with a prescription, but they don't always understand the medication or its potential side effects. They may have been told to make a self-referral for a talk to a therapist which they may feel unable to do because they are too unwell and lack motivation.

SUMMIT found a digital skills gap and digital poverty, meaning that in some cases the referral doesn't happen, mental health deteriorates and when delayed need could have been prevented people can end up in a crisis, potentially ending up in secondary or tertiary care.

SUMMIT also identified gender as a barrier to seeking timely support. In general, men feel the stigma strongly around mental health, thinking that mental ill health will change people's perceptions of them and make them seem 'a bit of a wuss'. Mental ill health is not an easy subject to broach in a pub or at a football game – there needs to be a safe space. Community walks, the CAB community mental health hub and Men's Sheds help but societal attitudes are still a problem.

To overcome these barriers, it is necessary to address the facts, talking about what would have been helpful at the point when started to feel unwell and anxious, when they didn't want to wake up the next morning. In a GP surgery there should be enough time and resource to support people to look after minds and refer to support and interventions to help.

SUMMIT runs a 10-week Mindfulness Course to help people look at their challenges in a different way and live in the moment. Taking people back to the *why;* when you can understand *why* as you work through you can realise how to start rebuilding. It is a mindfulness cognitive blend which has been hugely successful for people who had felt suicidal, or people who are about to walk out on their jobs, and SUMMIT supports them to learn that, "a bit like your computer, if you are going to put rubbish into your computer, then you are going to get the rubbish out, so it is really about the information you put it in, in a way that we can kind of understand it."

The SHELLS project has helped with SUMMIT in a leading role, working alongside a mental health nurse and other community links. Organisations work seamlessly together. "Clacton (Pier Ward) has a vibrant and supportive kind of community, and I think that was so major in the pandemic, when lockdown first happened."

Spotlight – **Alcoholics Anonymous (AA)**

AA provides an accessible fellowship of peer support to encourage sobriety and build networks of resilience within local communities. It operates locally around a structure of group meetings and was highlighted in Colchester's original asset mapping report, published in 2019, as an example of flexible practice. Face to face meetings were held at 10 sites across Colchester North, Central and South. The number of online groups was not recorded.

Alcoholics Anonymous (Colchester)
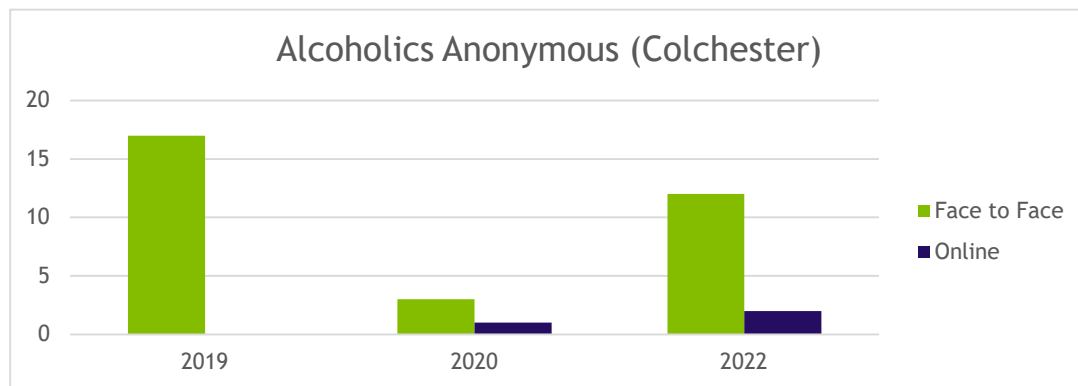
During the Autumn of 2020, research identified three groups reopening face to face and an online forum. Now in 2022, many more groups are in person again, operating seven days a week and retaining at least two online. However, they are predominantly based in Colchester Central, some in the North but none in wards in Colchester South.

In Tendring, six groups are now known to be active face to face but at the time of writing it was unclear if any were operating online.

Beacon House

Beacon House, which was founded in 1996 by a group of Christians from Colchester Baptist Church, adopts a holistic approach to the problem of homelessness and has as its over-riding goal the desire to transform lives, rather than simply to serve the need.

The objects of the Charity as stated in our Memorandum and Articles of Association are 'The relief of poverty and sickness amongst people who are homeless, or have no

permanent accommodation by the provision, according to Christian principles and faith, of healthcare, counselling, and other support services'.

Their Day Centre in Colchester, Essex provides a welcoming and non-judgemental environment which encourages a sense of belonging for people who are currently excluded from the wider community.

They provide the basics of hot food and drink, together with showers and laundry services. They also supply toiletries and recycled clothing, as well as a hairdressing service and podiatry service.

Their Primary Healthcare Centre (two clinics, two nurses) diagnoses and treats illness, provides various ancillary health services, such as needle exchange and sexual health advice, and links guests to GPs and external health services as required. In recent months they have extended their services and are now vaccinating both the homeless, and those at risk of homelessness for Covid-19. They have also employed the services of a locum GP for 2-3 hours per week to mentor the nurses and ensure they are fully compliant with all medical procedures.

They have a full Occupational Therapy programme, using both structured and informal activities, to help people identify their assets and to develop resilience and self-esteem. Their two Occupational Therapists and their assistant operate within Beacon House but also with those who have been accommodated, either by them or by another organisation.

They employ two specialist Housing and Tenancy Sustainment Officers who work with local statutory housing providers and private landlords to find appropriate accommodation for guests so that they can obtain, and more importantly, maintain their tenancies.

They also provide accommodation in shared houses/flats for people who would struggle to manage their finances, mental health/addiction, and social networks without consistent and regular support.

They help people to access various benefits and also support them in finding work. They have a suite of computers which guests can use for applications (with assistance if required) or to link up with friends and wider family members through social media. They provide telephones and a postal address to overcome any communication barriers to accessing mainstream support.

In a normal, non-Covid year they have approximately 11,000 guest visits to the Day Centre, comprising 600 – 650 unique individuals, of whom an average of 250 are new each year. Appointments with nurses' number 1400 – 1500 per year.

They partner with many organisations including the CCG/NHS, Colchester Borough Homes, the Colchester Night Shelter, Community360, Open Road, Open Door, Next Chapter, Alcoholics Anonymous, Narcotics Anonymous, Community Mental Health, Terence Higgins Trust, Phoenix Futures and, where appropriate, the Probation Service and the Police.

Refugee Action and Minority Community Leadership

As shown in the recent grant programmes (further details below), many minority community groups are concentrating on offering help to people and their mental health. A key example of this is Refugee Action Colchester. Their level casework support is growing at a considerable rate and the complexity of need can be accompanied by mental health concerns.

Refugee Action have advised that their team of two senior full-time caseworkers and three part-time caseworkers carry a caseload equivalent to 30 social workers.

Domestic violence towards women on spousal visas is high on the list of complex and long-term involvement. Complex EU cases where for a number of reasons people have failed to make an application for settled or pre settled status – resulting in no recourse to public funds are also climbing.

Casework for their 300 plus asylum cases is regular and ongoing. Cases of trafficked and abused men and woman are also often complex and difficult. Alongside this are the many regular interactions – getting people settled in the community, GP registrations, HC2 certificates, benefit applications, CV writing, debt support, school and college places are all done each day at our offices. All their clients are treated with respect and they have benefited enormously this year from seeing staff and volunteers take on trauma informed training and mental health first aid training Domestic Abuse has become a specialism with our caseworkers now enabled to offer a DASH risk assessment to police and other services.

Drop-in clients now number more than 30 a day and booked appointments around 17 each day between the staff.

The programme also seeks to offer outlets for activity and improve wellbeing. An example of this is a forest skills afternoon for dispersed clients.

In January and February, they held two forest days - one for dispersed clients in Colchester - in this case for men only. These clients have £40 a week with which to manage all household and personal costs. Refugee Action Colchester provides foodbank support to around 100 of them - however there are 150 such clients now in Colchester. Refugee Action has also assisted them all to access Wi-Fi which it pays for. They have assisted clients to get to college if they want to (most do), and to access GP registration and support, dentists, HC2 certificates, lawyers – and often emotional support. The activities are a great way for them to meet each other - often they are put in a house with nobody who speaks their language.

The importance of dedicated opportunities and appropriate assistance is clear.

Faith and Place based groups

Organisations adopt innovative approaches to connect with local residents in positive ways. They very often focus on social isolation and community connectivity. Two examples are:

In Colchester, **Caves of Hope** is an emerging programme supporting men from minority communities with men on parenting (themed "Our Lost Boys) and boys (themed "discovering self through music"). The project is a response to the impact of wider determinants of health, an increase of reports of men and boys experiencing mental health issues, including suicide, absence of father figures and good role models in minority community families, along with concerns for safety.

Hope@Trinity is a day centre which supports people who are homeless and vulnerable in Pier Avenue, Clacton, under the management of Trinity Methodist Church. The centre supports between 40-60 people a day, over 100 a week. Representatives from Mind work with the Centre.

The service offers hot food and a takeaway lunch, drinks, someone to talk to, emergency clothing, offers showers and clothes washing. This service is provided in a non-judgemental way, with direct access, so that people who use the service do not need a referral. The Centre is part of the SHELLS project, and the Day Centre works with some of the organisations working with the homeless and vulnerable in that group.

Spotlight – **Household Support Fund**

In the Winter of 2021/22, many infrastructure organisations, including CVST and C360 were awarded funds to support households in need over the winter with food, heating, and other essential items. One of the funds was the Household Support Fund, distributed by Essex County Council to local partners. No single grant from any fund exceeded £500, with most anywhere between £10 and £300.

Household Support Fund (C360)

- Food
- Energy and Water
- Essentials Linked to Energy and Water
- Wider Essentials
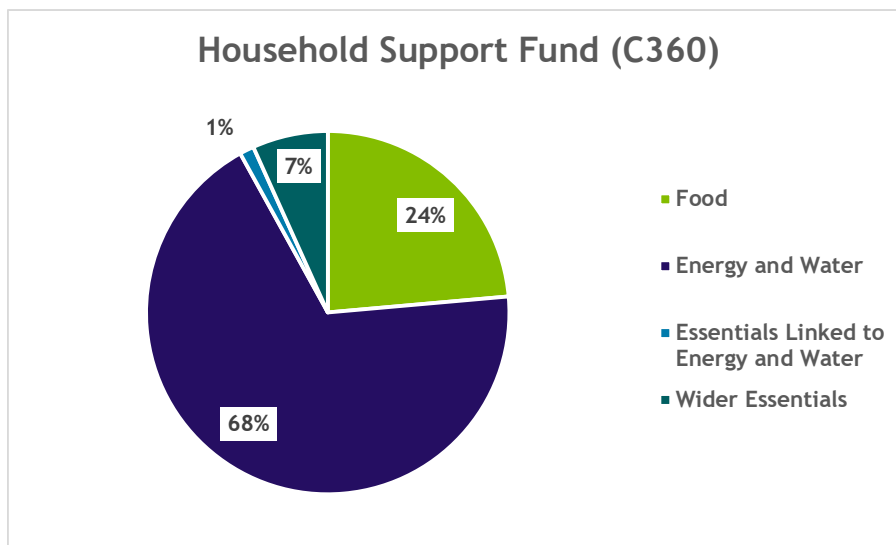
Feedback from grant recipients highlights the pressures they are experiencing:

Example A – individual cannot afford heating and socially isolated as wider family will not visit due to cold conditions in the home

Example B – parent recovering from serious illness, only able to work part time but with rising bills struggling with household expenses

Example C – parent and children with disabilities which require purchase of additional hygiene items, have been restricting spend on heating and food to cope

---

Citizens Advice Tendring (CAT) and Colchester Citizens Advice (CAC)

Citizens Advice supports people with mental health problems and the wider determinants of health, providing advice to empower people to tackle some of the wider determinants of health such as debt, housing, benefits, relationships and family issues and employment.

In Tendring, they do this specifically through the Community Hub in Old Road (see the Citizens Voice section for more detail).

Advice and Information

CAT reports that, despite long periods with lack of face-to-face contact, enquiries and issues have increased over the past year. Enquiries are often more complex and cover multiple problems.

In Pier Ward alone from January 2020 to end November 2020 CAT dealt with 308 issues; from January 2021 to end November 2021, they dealt with 394 issues. The profile of issues changed, as did the communication channels. The table below shows how the profile of enquiries changed as people dealt with the emerging issues of both Covid-19 pandemic and the impact of fuel price increases.

Top 6 Issues 2020 Pier Ward		Trend	Top 6 Issues 2021 Pier Ward		
Benefits/Universal Credits	149	↓	Benefits/Universal Credits	92	
Benefits and tax credits	40	↑	Benefits and tax credits	63	
Housing	34	↑	Housing	54	
Debt	22	↑	Debt	50	
Employment	17	↓	Employment	9	Not in top 6 in 2021
Utilities and Communications	7	↑	Utilities and Communications	24	Not in top 6 in 2020
Relationships and Family	12	↑	Relationships and Family	21	

Communication channels changed as indicated below, with a significant shift to on-line and telephone channels. In person channels were not available for much of 2020, so the in-person number primarily refers to the first 3 months of the year. This indicates that enquirers adapted to different methods of communication, but this may have deterred people for whom face-to-face contact is the preferred option.

Citizens Advice Tendring – Communication Channels Client and third party				
2020			2021	
In person	26%		In person	3%
Telephone	31%		Telephone	58%
Adviceline	13%		Adviceline	13%
email	11%		email	16%

Colchester Citizens Advice have provided a breakdown of impact in the Berechurch ward for comparative purposes. Some similar trends are emerging but also importantly the growing need in relation to debt.

Top 6 Issues 2020 Berechurch		Trend	Top 6 Issues 2021 Berechurch		
Benefits/Universal Credits	80	⬆	Debt	119	
Debt	40	⬆	Benefits and tax credits	29	
Relationship and Family	36	⬇	Housing	26	
Benefit and Tax Credit	29	Same	Relationship and Family	21	
Employment	19	Not in top 6 2021	Utilities and Communications	20	Not in top 6 2020
Housing	19	⬆	Benefits/Universal Credit	18	

Colchester Citizens Advice – Communication Channels Client and third party				
2020			2021	
In person	36%		In person	3%
Telephone	8%		Telephone	30%
Adviceline	33%		Adviceline	47%
email	6%		email	23%
Webchat	1%		Webchat/Video call	1%
Other	1%		Other (admin/letter)	7%

Social Prescriber Link Workers

Social Prescribers provide timely appropriate links to voluntary and community sector services. They are based in Primary and Secondary care settings as well as in the wider community. They are ideally situated to encourage earlier intervention and prevention. The following analysis focuses on the themes of mental health and social isolation. There are also references to the needs of Pier Ward and Berechurch.

Tendring
During September and October 2021 there were a total of 68 referrals to the Tendring Social Prescriber Link Worker for Health and Wellbeing - Mental Health Condition. Of those 11 were for Pier Ward.

Pier Ward- breakdown	
East Lynne	4
Old Road	1
Homeless (surgery not known)	2
St James	3
Ranworth	1

An overview-of central Clacton area

From **1/1/21 to 31/10/21**, Social Prescribing link workers had 225 **new** beneficiaries with a mental health condition. When filtered by surgery they are distributed as follows: -

Pier Ward- breakdown	
East Lynne	18
Old Road	33
Homeless/surgery not known	5
St James	34
Ranworth	16

Old Road surgery report that they have a very high percentage of patients with a mental health condition, with many taking medication for chronic mental health. The surgery covers a wider area and will take on patients whom other surgeries refuse/have taken off their books.

Social prescribers refer to a range of services/organisations including Summit, Therapy for You, or to their GP to refer on to the mental health practitioners.

Across Tendring, Social Prescribing Link Workers had 465 social isolation/loneliness cases between January 2021 and end October 2021; approximately 380 of these were from Clacton/Jaywick areas. The largest referral areas in Clacton are covered by Old Road, North Clacton medical group, St James, and East Lynne.

Social prescribers refer into HILL, Age Concern befrienders, NHS responders befriending services and Citizens Advice Mental Health Hub among others for support to prevent social isolation and loneliness.

Pier Ward Case Study (Mental Health)

K was referred to Social Prescribers from the EPUT mental health team in August 2021 for support with social inclusion, community activities and employment. He said that he was desperate to sort out his life and get a job, but was unable to do so due to his difficult situation as a single parent with childcare problems. Other problems mentioned were debts and Social Prescribers contacted Peabody to refer him for support with debt management. On a follow up call we ascertained that he was now able to manage paying bills.

Manage paying bills for himself, with guidance from Peabody. It took some time to be able to move forward, but by November 2021, the childcare situation was improved and although K still had many issues going on in his life during contact with social prescribers they discussed what he would enjoy doing for himself and his own wellbeing.

He said, "I need something to take my mind away from all of my problems". It was suggested that he meet up that day at the Kennedy Way Garden Open Day, as he was interested in the Men's Shed.

K went along and was introduced to the Men's Shed, the garden team of volunteers and CVST staff. He says that he finds building things therapeutic and he will come along on a Tuesday and donate some tools to the Men's Shed, *"it was a good atmosphere, and everyone was friendly and interested in actually doing something"*.

Social Prescriber Link Workers in Colchester

During September and October 2021 there were a total of 60 referrals to Colchester Social Prescriber Link Workers for Health and Wellbeing - Mental Health Condition. Of those only 2 were for Berechurch ward. Berechurch does not contain a GP practice for the wider community but does contain a surgery for armed forces.

Across Colchester, Social Prescribing Link Workers had 506 social isolation/loneliness cases between April 2021 and end October 2021.
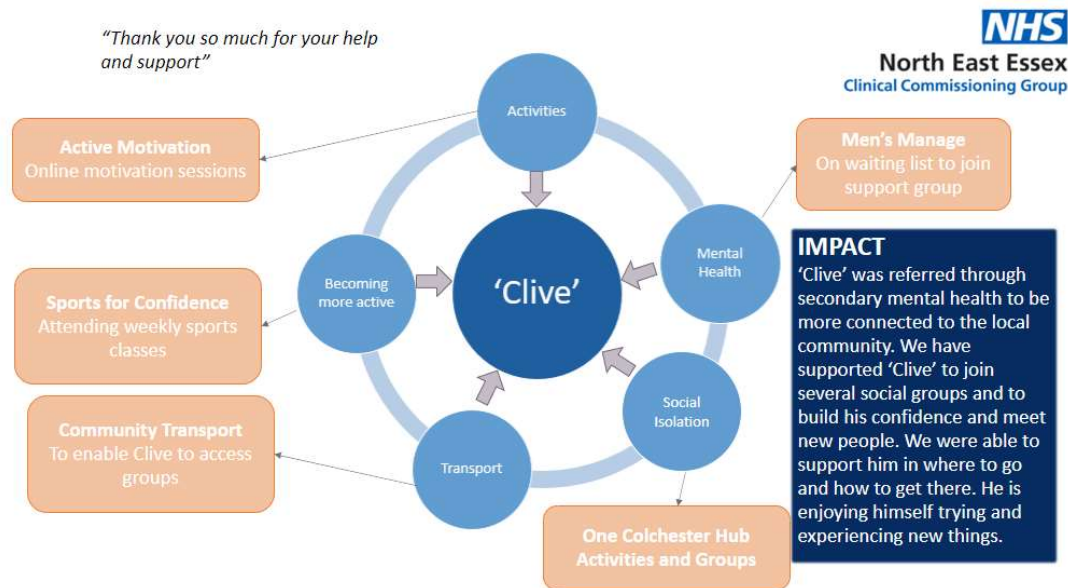
An overview-of central Colchester area
From **1/4/21 to 31/10/21**, Social Prescribing link workers had 198 **new** beneficiaries with a mental health condition. 88 of the referrals came directly from EPUT.

Since January 2021, Community360 have been piloting weekly drop-in sessions alongside an EPUT team member, working with individual patients. This formed part of a wider programme to also support Mental Health discharge by:

•   Supporting people to return home from a period in hospital. They may have been admitted to any hospital in the administrative county of Essex but be resettling home in Colchester or Tendring. This may include transport, providing a practical package to help them settle back in – basic food and goods and welfare contact.

From1st April 2021 to end of December 2021
•   83 referrals across all pathways
•   21 'did not attend/engage' at drop-in sessions – where applicable rebooked and referral taken subsequently.
•   Only 6.7% of patients referred to drop-in sessions were already accessing C360 services
•   Over half of drop in referrals are for people living alone, and people under the age of 50
•   Most common requests via drop in – social contact, benefits, and volunteering

"Thank you so much for your help and support"

NHS
North East Essex
Clinical Commissioning Group

Activities

Active Motivation
Online motivation sessions

Men's Manage
On waiting list to join support group

Mental Health

IMPACT
'Clive' was referred through secondary mental health to be more connected to the local community. We have supported 'Clive' to join several social groups and to build his confidence and meet new people. We were able to support him in where to go and how to get there. He is enjoying himself trying and experiencing new things.

Sports for Confidence
Attending weekly sports classes

Becoming more active

'Clive'

Social Isolation

Community Transport
To enable Clive to access groups

Transport

One Colchester Hub Activities and Groups

Carers and Mental Health

One group of NE Essex residents which has experienced considerable isolation and loneliness is informal carers – family, friends and relatives who provide help to family members, friends and people in their social network who have care needs, living inside or outside of their household, with everyday tasks which help them to remain in their own home and living independently.

In some ways, carers' lives did not change much – isolation and loneliness can be outcomes of caring for a loved one. Going out is difficult and can take up considerable time and physical effort, but access to services meant to support them and their loved one was no longer available. Vulnerability increased, along with the stress and anxiety arising from that.

Essex Carers Support identifies the following issues which have arisen or become exacerbated:

- Carers felt as if they had been forgotten
- Increased vulnerability made carers feel unsafe, took longer to relax
- Isolation and loneliness were more prevalent
- Guilt, frustration, and anger were amplified with carer losing their 'safe space' to talk to other carers
- Lack of recognition and identification of carers by Primary Care, vaccination centres, etc. – having stayed home, kept the cared-for person safe and stepped away from services, carers still had problems getting through to GPs to make sure the cared-for person's needs were met – needed flexibility (e.g., appointment times) and prioritisation (repeat medications, test results, reviews etc.)
- Increased risk of self-neglect, putting the cared-for person's needs ahead of their own

Carers First have been offering online support through carers groups and the Virtual Cuppa carers groups. Carers First are commissioned by Adult Social Care in Essex County Council to provide advice, information and guidance to carers across Essex. They meet carers in their own homes or in the community. They have over 700 carers from Tendring on their register - nearly 400m of those live in Clacton. Nearly 600 carers are registered in the Colchester district. These carers are all adults, but some may be providing care for children, partners or parents. Others support friends and neighbours.

> *Spotlight* - **Joanne, a Carer for her disabled daughter, agreed to share her experience of Time 4 You on Essex Carers Support Website**
>
> *"I really enjoyed our lovely chat. It helped just being able to talk about things and not feel I'm moaning to another friend all the time. That on its own was lovely; but the offer of the Time 4 You grant has allowed me to carry on my sewing which I'd had to postpone because my machine had broken.*
>
> *"I had contacted a repairer, but he said due to the age and condition of my old sewing machine it wasn't worth repairing. I had a bit saved, plus the grant money and with a gift from my husband for my birthday I was able to order my new sewing machine. Delivery was super speedy; it came next day!*
>
> *"I sew when my daughter is in her room because I know she's safe there and I can fully immerse myself in my craft. It relieves mental stress by focusing on being creative. I love producing decorative items for gifts and will be making face masks for us to wear. I have material to make some reading cushions and have other projects in mind too.*
>
> *"The life of an unpaid Carer is not easy, and the feelings of isolation and loneliness have been heightened during this pandemic, but it's talking to people like yourselves and charities like yours offering grants that give us a sense of comfort.*
>
> *"Thank you, Essex Carers Support, and your sponsors for acknowledging the efforts unpaid Carers go to to provide a safe and loving home to their disabled loved one.*
>
> *"Having a sewing machine again has allowed me to have time to do the thing I enjoy whilst still caring, and that means I can truly relax. Again, so many thanks for this wonderful gift. It has already made such a difference to me and my life as a Carer."*

Essex Carers Support has been picking people up with a focus on self-care, online self-care resources [5] and the Time4You project. The conversations before and after help are often the most important. People have been very creative during lockdown in their choice of support – artists' materials and sewing machines are examples of Time4You projects, giving something to talk about other than the single focus on caring and health conditions. 500 carers have accessed the Time 4 You project since April, most of whom are in North-East Essex where there is greatest need.

The 2Can project between Essex Carers Support and SUMMIT focused on Carers at risk of harm and self-neglect – providing support to the vulnerable person and the carer.

---

[5] https://www.essexcarerssupport.org.uk/self-care-for-carers

Sustaining Carer wellbeing needs to be much more personalised, responsive, quick, and relevant – creating space in which to vent and share anxieties and challenges.

The issue of language and communication was identified – many people do not identify themselves as carers, especially close relatives - and do not readily grasp or understand the detail behind medical terminology. The conversations with primary care and supporting organisations should be more general and not use medicalised terms but recognise carer stress and anxiety. GP care advisors have improved carer identification, especially among older people.

Family members of people with drug and alcohol addictions talk of the stigma attached, the feeling of isolation, desperation, and the 'shame'; making it very difficult to even talk to friends about the problems they experience. Organisations work to support them in this role but societal attitudes are a large part of the problem. The Government's shift to focus on supporting treatment and recovery, rather than criminalisation, may help over time to reduce stigma.

Action for Family Carers provide support across North East Essex, working with families and especially young carers. They work with primary and secondary schools across the borough, as well as running a young carers club in Stanway. They work with schools to identify young carers to enable earlier intervention or prevention around their health and wellbeing, education and address wider family or household issues. These could include finances, relationships or support to the family related to the 'cared-for' person. It can extend to participation in social and physical activities. Young Carers are more likely to have mental health issues themselves, to be bullied, to be on prescription medication, to get lower GCSE grades, and to have poor attendance at school.

Action for Family Carers have noted that more than in any other part of Essex, young carers in the Borough are supporting adults with mental health needs or substance misuse issues. The Stanway club is an important point of contact and safe space for participants to gain help from others.

There are approximately 10,000 Young Carers in Essex.

The OutHouse

The OutHouse provides vital support and guidance to the LGBTIQ+ population of Essex, whilst developing and promoting a sustainable, fair, and equal society where all the lesbian, gay, bisexual, trans-gender questioning people can achieve their full potential.

Outhouse East   01206 871394
19 East Hill   info@outhouseeast.org.uk
Colchester   www.outhouseeast.org.uk
CO1 2QX

This email is confidential to the intended recipient. If you have received it in error, please notify the sender and delete it from your system. Any unauthorised use, disclosure or duplication is not permitted. Any views or opinions presented are solely those of the author and do not necessarily represent those of Outhouse East or its agents unless specifically stated.
No liability is accepted for any damage caused by any virus transmitted by this email.
Outhouse East is a registered charity No.1006244.

The Youth project has supported over 130 young people. Of those, 30-40 are core users, 15 of whom are transitioning and 25% attend counselling. In recent referrals received, a higher proportion are young people who are transitioning or considering their gender identity.

As a charity we are finding that the needs of our services are changing and that people are coming to us with complex needs. Our Youth service especially has found that the needs of those attending youth groups have changed, so not only are they struggling with gender identity but they may also have an additional need, autism for example. We have young

people who are in or who have been in care or social housing and we are often supporting social workers, carers and foster carers. We have had to chance and diversify support to include parents' groups to offer additional support for them. Our referrals have increased by 50%, with support for our services coming via referrals from EWHMS, or social care.

Our previous early intervention and prevention status is now changing due to the higher demand for additional support.

We feel that there is a greater need for smaller organisations who are able to offer support to have a greater acknowledgment that these services are being offered and that we have had to diversify to support changing needs. Discussions need to be had regarding the resilience of our staff and from where the support/funding comes to support these changing needs.

Mid and North East Essex MIND

MIND is a fundamental provider of services across North East Essex, including the Crisis Café seven days a week.

MIND offers alternative community-based support for people leading up to crisis through the Sanctuary in Colchester (currently on Mersea Road but planning to move to the Town Centre) and through the Crisis Café in Clacton, based at the Holy Trinity Methodist Church – although MIND is looking for new, more suitable premises to accommodate this service. These are financed by NEECCG with the aim of reducing A&E admissions.

The service's phone lines operate from 5pm to 10pm. It is collaborative and works in partnership with EPUT (includes a mental health nurse) at both sites. The North East Essex Crisis Café/Sanctuary provides a safe, welcoming space where people experiencing emotional distress or mental health crisis can receive support outside of normal working hours. It is a community-based alternative to crisis mental health services.

It is open 7 days a week (excluding bank holidays) from 5pm to 10pm. Referral can also be made by a professional such as a GP, emergency services or NHS 111 (option 2) by telephone or email.

The North East Essex Crisis Café provides wellbeing support every evening to those in emotional distress or experiencing a mental health crisis.

The service looks to signpost people leading up to or in crisis but has stressed that it cannot take those at serious risk of harm to themselves or others. The service has recently introduced a community link worker.

MIND works with the **Haven Project,** supporting those with personality disorders or complex trauma. A workshop is run weekly at each site, supporting those with emotional distress to build relationships. The course has a maximum of 5 people and runs for six weeks. They are looking to extend this to Harwich in future. Transport is a key element which can act as a barrier to anticipation and engagement. MIND is looking for funding to support people with transport to enable access.

During the pandemic face-to-face contact stopped. MIND supported over 1000 people remotely but are now able to offer a choice between remote or face to face contact.
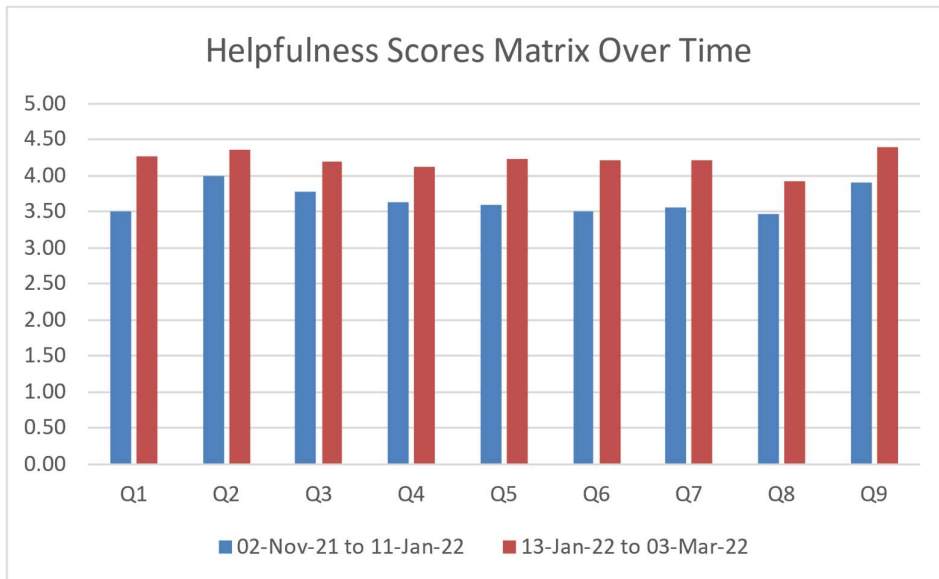
Haven Project
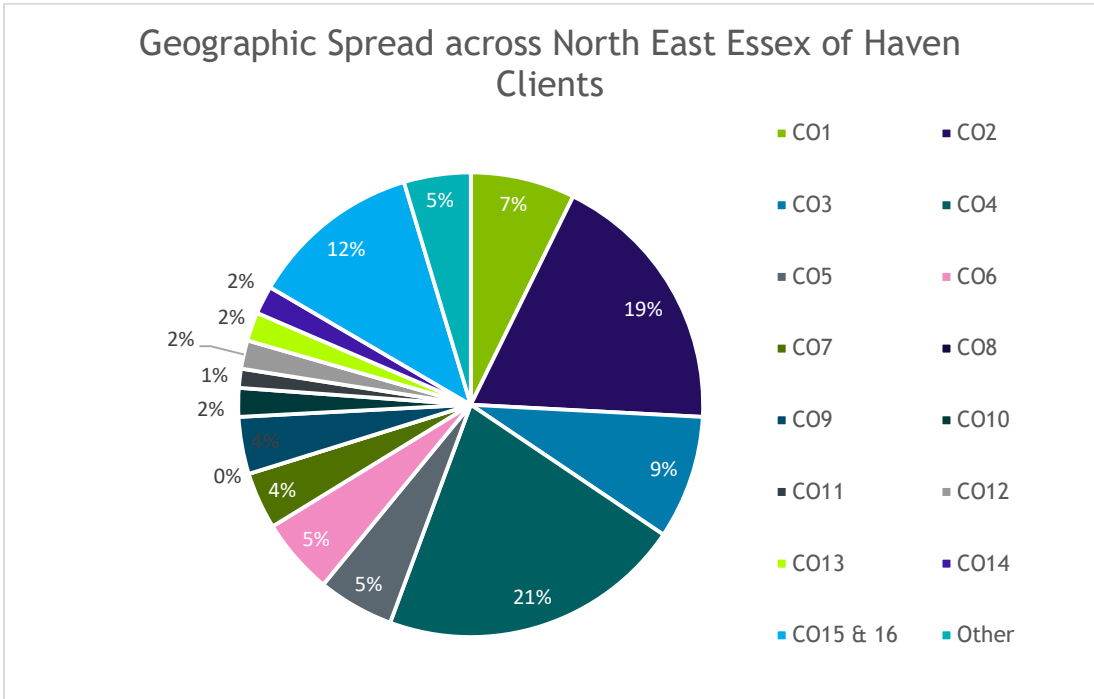
Positive about Personality Disorder

The Haven Project exists to help people with a Personality Disorder or Complex Trauma diagnosis who live in North East Essex. Set up following the publication of the paper "Personality Disorder: No Longer a Diagnosis of exclusion" in 2003, the project is a unique service operating in the area.

Citizens accessing The Haven Project are able to benefit from improved health and wellbeing outcomes, through the management of their mental health and development of emotional resilience. Work extends to building identity, self-esteem, trust and hope, as well as independence. The Haven is a safe environment where new found psychological courage can be tried out in a safe place. The team at the organisation recognise that development will pave the way from mental and emotional stability to social inclusion and contribution. Clients are engaged as stakeholders in their own recovery and the organisation that helps them achieve it.

This has consequences for the wider health and care system. Work with clients connected to The Haven have reduced their A&E attendance by 60-70%, as well as improve their wellbeing between 15-25%. In-patients supported by the group on outreach have demonstrated improved outcomes measures as outlined below:

Helpfulness Scores Matrix Over Time

	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9
02-Nov-21 to 11-Jan-22	3.50	4.00	3.78	3.63	3.59	3.50	3.55	3.45	3.91
13-Jan-22 to 03-Mar-22	4.27	4.35	4.20	4.12	4.23	4.22	4.21	3.93	4.39

There is also a concentration of clients in specific CO postcodes, which is cause for reflection.

Geographic Spread across North East Essex of Haven Clients

Legend: CO1, CO2, CO3, CO4, CO5, CO6, CO7, CO8, CO9, CO10, CO11, CO12, CO13, CO14, CO15 & 16, Other

Pie chart values: 7%, 19%, 9%, 21%, 5%, 5%, 4%, 4%, 0%, 2%, 1%, 2%, 2%, 2%, 12%, 5%

Reach Out for Mental Health

Reach Out for Mental Health is an established organisation, based in Grays, but recently expanded to work across all of Essex. It is a free service that matches local people with volunteers. They are not counsellors or therapists but offer people the time to talk in confidence about how they are feeling. Volunteers work with people for eight weeks. Often citizens have expressed thoughts of suicide prior to a referral.

There has been a focus in North East Essex on suicide prevention following the publication of figures, noted above, that demonstrate nationally high suicide rates in Colchester and Tendring.

Suicide Prevention Group and Men's Mental Health Community Fund

In the light of high and rising suicide rates in South Suffolk and North East Essex and the increase in presentations with suicidal ideation, the ICS formed a Suicide Prevention Group. Phase 2 started in June 2021, with a continued focus on middle-aged men and self-harm as the key risk areas, primary care support and quality improvement within mental health services. In the light of Covid-19, reach was extended to groups felt to be more at risk in the community and those working directly with patients.

A well as a range of training and toolkits, a targeted campaign towards men in high prevalence areas was developed, underpinned by the Men's Mental Health Community Fund. This enabled projects in the community which support men's mental wellbeing to receive funding. Projects are very diverse and funding has been given to support community assets to deliver support and activities, as outlined below:

Organisation Name	Project Summary
African Families in the UK (AFIUK)	Using Zoom to bring together black men in open discussions around issues and experiences of mental health and ways to support and safeguard. Further project through virtual ZOOM meeting app; face to face meetings

	in Colchester, Clacton and Dovercourt. Training courses in Youth Work, Level 1 & 2 Sports coaching qualifications and Information, Advice and Guidance certification for the Community Ambassadors to give them professional tools and skills needed to work within their individual community groups
Age Concern - Dying to Talk	Develop their specialist Emotional Support service in response to Covid-19 for the later years' male client-base who face multiple significant losses, often including the loss of a life-partner.
C360	Men's mental health groups (up to 6 men at a time) - covering topics which can impact negatively on mental health e.g., money; gambling; employment; anxiety management; dealing with loss; fathers and families; drug or alcohol support; food issues and creative sessions.
CARA	The project provides specialist counselling to men and boys who have been victims of sexual violence or child sexual abuse.
Carers 1st	Support group specifically for men living in Tendring who have a caring responsibility, giving them an opportunity to connect, reduce social isolation and lessen the risk of carer breakdown. Invited to continue men's project for a further year after April 2022 and include some suicide prevention support to carers
Central Law CIC	Delivery of free Family Law Legal Advice to serving members of the Armed Forces in Essex via Colchester Garrison
Colchester YES	Increase capacity and ensure the waiting list (then which is 11 young people with 9 referrals) are seen in 8-10 weeks. Face-to-face counselling is critical in supporting young people who are anxious, self-harming, suicidal and those with suicidal thoughts.
Outhouse East	Counselling sessions to men from the Tendring area from the LGBTQ+ community to support their mental health.
Refugee Action Colchester	Outdoor activities at the Big Garden at High Woods in Colchester, including general maintenance, planting, growing, and cooking food in a supportive environment. Also, providing football activity for settled asylum seekers, to improve mental wellbeing. Provide transport to increase access to their facilities available in the town centre.
Royal Association for the Deaf	"It's ok project" - supporting profoundly deaf men with their mental health and wellbeing by bringing them together either through one-to-one support or workshops. Produce men's campaign "It's ok not to be ok"
Summit Toolbox	A research and insight project capturing the lived experience of men that live with suicidal thoughts, including families bereaved by suicide. Their lived experience will help to inform future services and educate us all.
Together We Grow	Improving lives through increased physical activity in a natural environment. Working with groups and individuals from a variety of settings, reducing social isolation and improving mental health at the same time. A further project working with a number of BAME/LGBTQ+ organisations, identifying individuals most at risk and exacerbated by the current Covid-19 crisis and life circumstances. Half day sessions at the garden where users take the lead and make this an "outdoor' support group, cooking/ eating together and active pursuits (running, cycling, walking).
Carers 1st	Have been invited to submit an application for £2900 to continue men's project for a further year after April 22 and also to develop the project into include some suicide prevention support to carers

Hyperlocal funding

Organisation Name	Project Summary
Age Concern/Age Well East	Befriending co-ordination and volunteers' expenses to set up additional friendship groups in Colchester. CVST working with organisation to identify alternative funding options.
AARCA	Restart group (on hold during pandemic) to support survivors of child abuse. Regular meetings, volunteer recruitment and management.
Abberton Rural Training	ART will provide advocacy support to vulnerable individuals in Colchester and Tendring. Beneficiaries are considered furthest removed from the job market and include adults with long-term health issues and lifelong conditions.
Affected Forever - Long Wyre Street	Peer led social and arts activities for people with MH conditions.
African Families in the UK	Pounce-Back - to provided training to support women and men who lost jobs during the pandemic period, through their Community Ambassador Pounce-Back Program, and to provide workshops, tuition, homework club, basketball, and other sports, and one to one coaching to young people via their youth club. This will benefit 52 families and 15 young people. 10 workshops, 4 sessions each of one-to-one coaching for 30 people, 1 member of staff and accredited course information, advice, and guidance for 5 people along with support costs will be provided.
Bangladeshi Women's Association Essex (BWAE) CIC	Forgotten Generation - this project aims to provide the Bangladeshi female older generation (60+) the opportunity to get out of the house, meet old friends and make new ones in a warm, friendly setting delivering cultural sensitivity where older generation members would feel that their ethnic, cultural, and spiritual beliefs were understood and address without language barriers or literacy issues that prevents them from participating. This will improve health and wellbeing by reducing isolation and loneliness, improve understanding of health issues, improve access to information and services and improve quality of life. They are looking to reach over 100 women.
Clothing Clinic Textile Collective CIC	The Clothing Clinic Textile Collective winter project focuses directly on connecting with individuals and communities who are vulnerable to fuel poverty, bringing people together through workshops and demonstrating economic and environmental solutions to keeping warm on a budget over the winter months. They are aiming to reach 200-300 people over 5 months.
Cobnuts Cooperative	To establish a regular eco-friendly craft & conservation club for the benefit of local residents, local green spaces, and local wildlife. 12 Workshops and 4 larger events will be held. This will benefit approximately 900 + residents and 30 volunteers.
Colchester Arts Centre	Arts-led project for children 5-15yrs using an empty shop. Children will provide a thriving business invented and run by them. They will conduct business meetings, design supported by artists and project managers from Colchester Arts Centre. 30 children will participate.
Colchester Islamic Cultural Association (CICA)	Supporting 60+ Male Muslims in Colchester by providing a luncheon club at CICA premises for male Muslims aged 60+ to provide an opportunity to get out of isolation, bond with others, eat healthy food, experience light exercise and to experience the local area and nature by way of organised

- 60+ Male Muslims	outings. By offering this provision at CICA, this generation will have the opportunity to stay to attend prayers throughout the day which is highly desired by them. It is hoped that this will reduce the burden of deprivation and inequality, improve mental health, and reduce suicide, improve health and wellbeing by reducing isolation and loneliness, improve physical health and management of long-term conditions and increase physical activity to reduce obesity. The project aims to reach 250 people.
Colchester Life In the UK CIC - Learn	To provide an online learning platform to support children from primary year 3 to secondary year 11 in learning intonation and how to control voice and sounds (elocution) to improve in spoken English and French. This will increase confidence and will support the children to progress and move towards maximising their full potential. The project is aiming to reach at least 160 children, providing each with 9 sessions for English and 5 sessions for French over a period of 20 weeks.
Community Music Colchester CIC	To deliver group workshops to those most at need in the community including people affected by homelessness or disability to teach them how to use music production software to enable them to complete their own finished original composition by the end of the workshop, which they can keep forever - building skills and confidence. The project expects to reach 42 participants.
Deafblind UK	"Like lying in a coffin but still being alive" - aims to provide a Wellbeing and Emotional Support package to beneficiaries across NE Essex from the end of October 2021 to the end of March 2022, including a 6-week intensive support package by way of 10 x 50-minute sessions with a trained counsellor and access to wellbeing services and befriending via the participants preferred method of contact. The project is aiming to reach over 100 participants aged over 18.
Greenpath Ventures - Ivy Farm	The Outdoor Wellbeing project will provide outdoor therapy to help an individual develop the social skills required to move on in life by way of various team building events and activities at Ivy Farm, working with Beacon House and with 40 homeless people and those dependant on drugs and alcohol.
Greenpath Ventures - Rustic Recovery	Operation Rustic Recovery will enable small groups of wounded and injured military personnel who are either exiting the military service or are recovering from an injury at work, either physical or mental, to develop a more positive and appreciative outlook on life which can have a positive effect on an individual's recovery pathway, working with Wellies-on CIC and the personnel Recovery Centre at Colchester Garrison. They are hoping to reach 60 individuals.
Headway Essex	The Men Motivating Men Support Group will provide a general personal development space with an open non-judgemental format for men with acquired brain injury to socialise, address challenges, ask questions, seek information and share positive outcomes for each other's benefit. They are hoping to reach 40 individuals.
Headway Essex	Peer support group for 25 people will be set up - this will be a social outlet where people can share information and hear from expert about brain injury care rehabilitation and relevant community services
InterAct (InterAct Chelmsford Ltd)	To deliver training 4 cohorts in Tendring and 8 cohorts in Colchester. These will be for those with close personal experience of suicide attempted suicide or suicidal thoughts. Four cohorts will include Special Educational Needs & Disabilities (SEND) who have additional suicide-related risk factors. Training will offer collaborative strategies, intended for supporting those close to people who took their own lives, and often face further challenges to their own mental health, including increased risks of suicide and self-harm. Aims to support up to 120 participants including friends/family members.

Lads Need Dads	A coordinator will be appointed to recruit 10 male volunteers and 20 boys from Harwich and Clacton schools to participate. Improve reading over a 6-month period and will include a bushcraft day
Mistley Kids Club	Operate a 6-hour Saturday Club to work alongside the afterschool and holiday club for mainstream and special needs children, as none exists at present. Parents and carers say they are unable to get clubs they need to care for their children. Of the 334 registered, 149 have special or additional needs. 40 - 60 children will benefit.
Next Chapter	The DART Project (Domestic Abuse Resettlement Team) aims to provide a Resettlement Support Worker for refuge clients leaving the refuge to provide longer term resettlement support, and to work towards creating a team of volunteer mentors to continue the project should further funding not be available, and to develop community resources such as drop-in sessions and coffee mornings to create further opportunities to raise awareness and to create safe and sustainable support networks. The expected number of beneficiaries include 30 refuge clients offer 6 months; 250 community clients over 6 months, increasing when mentors are in place; and 100+ individuals once drop in facilities are created.
Signpost	Funding will be used for volunteer recruitment and development to rebuild volunteer numbers to support beneficiaries facing barriers related to employment. They are looking to recruit and train 6 volunteers.
Tendring Specialist Stroke Services	Funding will be used to hire in counselling and physiotherapy services for stroke survivors this will enable them to increase their independence and reduce dependency on statutory services Our stroke pathway follows on from hospital discharge, with a review and then we signpost to physio services (at TSSS) Emotional counselling or group therapy sessions. Our emotional counselling services has a waiting list for post stroke following hospital discharge, we are looking to support the immediate need for emotional counselling.
Tendring Wellbeing and Intervention Services CIC	The grant will provide another psychotherapist to Tendring Tech for 33 weeks and 6 weeks of assessments. Young people needing the service get a service tailored to their presenting issues and will be worked accordingly for up to 20 sessions This will reduce the wait for services from up to 9 month improving mental health of 21 - 11-18yrs and 21 vulnerable adults.
The London Bus Theatre Company	Free interactive drama workshops on mental health and bullying for 480 young people aged 9-11 years to be delivered in schools
Uturn4support	10 young people having been identified as having risk factors will receive individual and group mentoring sessions with a youth worker over an 18-week period. Focussing on criminality current issues, victimisation emergency care mental and physical wellbeing funding will provide staff and resources/activities to the young people
We are the Minories	The Minories Art School wants to provide a space to recreate the spirit of the East Anglian School of Painting and Drawing open to all-comers, especially disadvantaged and underrepresented groups including care home residents, refugees, clients from Open Road and Outhouse. They aim to reach over 400 individuals, also supporting young and emerging artists, skilled freelancers, and independent practitioners by providing paid opportunities. They are planning workshops for 10 days a month for 4 months.
Your Living Room CIC	Establishing two further free User-led support groups in Tendring EAST and Tendring SOUTH, to reach 120 beneficiaries (over 25 years). These groups provide participants with the courage and self-belief that they are capable of engagement and accepting change without shame, by empowering them to make changes, becoming less isolated from friends, family, and community.
The Dance Network	Dance on Prescription: this programme will enable individuals to be referred by social prescribers to attend any of the 213 movement classes offered to residents in Colchester, to improve health, improve wellbeing

Association CIC (DNA)	and reduce isolation, especially with those living with Dementia and Parkinson's.
Independent Age	Connecting lonely older people across North Essex - taking referrals from the council, GPs, or other local organisations, they hope to connect older people with volunteers for emotional and practical support, reconnecting with their interests through activities or community events, enabling them to rediscover their passions and hobbies and reintegrate into their local communities to improve health and wellbeing and reduce loneliness and isolation. They hope to support around 150 older people with this ongoing service.
The Outhouse	Counselling support feel well supporting Mental wellbeing: they are looking to employ a counsellor to help those from the LGBTQ+ community who have the greatest barriers due to social isolation.

Open access activities which can prevent/provide early intervention for mental ill health

For many residents, prevention and early intervention within the community can do much to boost mental wellbeing and promote feelings of inclusion, prevent loneliness and give a sense of purpose.

The HILL project in Tendring was set up 7 years ago, funded by the National Lottery, in response to local need. People have made lasting friendships, reduced loneliness, taken up volunteering, developed new skills, are better able to manage their health condition, have gained confidence, are physically active, have found employment and are more involved in their local community.

During lockdown, volunteers and beneficiaries were empowered to keep connected through Facebook groups, WhatsApp, phone calls, emails and text which reduced feelings of isolation. HILL linked up with partners to provide a myriad of support to the community during the lockdowns. The vaccination programme would not have been as successful as it was and is, without HILL volunteers' intervention.

The past two years have highlighted the challenges faced by individuals, families, volunteers and the local voluntary sector. Needs have escalated. Coupled with growing level of deprivation in Tendring, this means that there are now even more people of all ages in our community suffering from chronic loneliness, significantly reduced mobility, increased levels of anxiety, high unemployment and loss of confidence. This has been compounded by many having a lack of digital skills and difficulties in connecting to services, friends and family.

HILL is an open access programme, offering a range of activities which promote physical and mental wellbeing and enable people to live independent lives for longer https://www.cvstendring.org.uk/what-we-do/hill/. Self-referral (mainly through word of mouth) is the most common access point, with referrals coming from social prescribers, other community and voluntary organisations, GPs and friends and family. Over the past 3 years 573 people have reported an increase in their skills as a result of HILL activities; 391 have reported a reduction in loneliness (including the period covered through the pandemic when activities were not running but contact was); 1827 people have been supported to improve their health, fitness and mobility; 529 inactive people or those in poor health or with mental ill health reported an increase in the amount of physical activity they do each week.
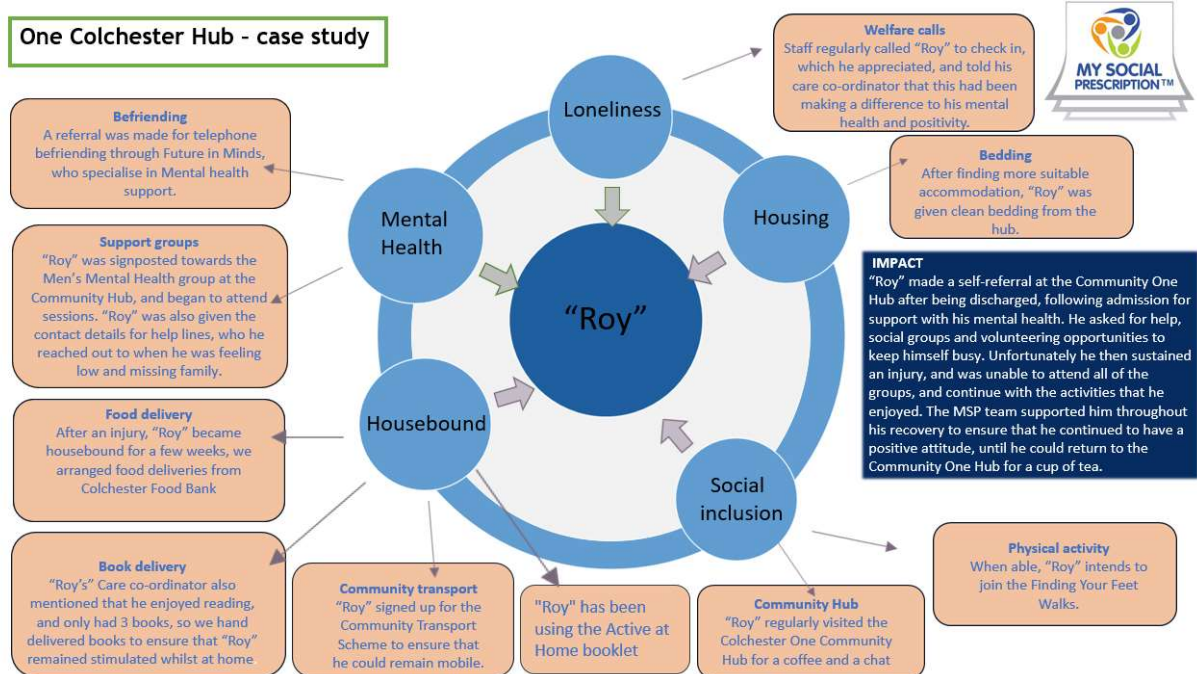
One Colchester Hub

The One Colchester community hub is based in the heart of Colchester. Managed as a multi-disciplinary space for community groups of different sizes and supporting people of all ages, the hub to provides early vital support and interventions. It hosts onsite out of hours cover for the North East Essex MIND Crisis Café and is the base for social prescribers and Essex Family Support Services, who accept self and agency referrals on site.

The site facilitates and welcomes many social groups, such as women's group, or special interest groups, such as Affected or Men's Mental Health groups, Men's Matters and M.A.N.A.G.E.

Re-launched at a new location in Long Wyre Street in May 2021, the hub provides a single point of access to multiple agencies through the One Colchester partnership. The Hub is active seven days a week, welcoming nearly 900 visits in November alone. People who had visited it in its previous location were pleased to return to such an environment, with new visitors coming daily.

"I didn't know anywhere like this existed"

"I've missed this space"

One Colchester Hub – case study

Befriending
A referral was made for telephone befriending through Future in Minds, who specialise in Mental health support.

Support groups
"Roy" was signposted towards the Men's Mental Health group at the Community Hub, and began to attend sessions. "Roy" was also given the contact details for help lines, who he reached out to when he was feeling low and missing family.

Food delivery
After an injury, "Roy" became housebound for a few weeks, we arranged food deliveries from Colchester Food Bank

Book delivery
"Roy's" Care co-ordinator also mentioned that he enjoyed reading, and only had 3 books, so we hand delivered books to ensure that "Roy" remained stimulated whilst at home

Welfare calls
Staff regularly called "Roy" to check in, which he appreciated, and told his care co-ordinator that this had been making a difference to his mental health and positivity.

Bedding
After finding more suitable accommodation, "Roy" was given clean bedding from the hub.

IMPACT
"Roy" made a self-referral at the Community One Hub after being discharged, following admission for support with his mental health. He asked for help, social groups and volunteering opportunities to keep himself busy. Unfortunately he then sustained an injury, and was unable to attend all of the groups, and continue with the activities that he enjoyed. The MSP team supported him throughout his recovery to ensure that he continued to have a positive attitude, until he could return to the Community One Hub for a cup of tea.

Physical activity
When able, "Roy" intends to join the Finding Your Feet Walks.

Community transport
"Roy" signed up for the Community Transport Scheme to ensure that he could remain mobile.

"Roy" has been using the Active at Home booklet

Community Hub
"Roy" regularly visited the Colchester One Community Hub for a coffee and a chat

Loneliness • Mental Health • Housing • Housebound • Social inclusion • "Roy"

MY SOCIAL PRESCRIPTION™

Abberton Rural Training (ART)

Abberton Rural Training (ART) was formed in 2014 to address the number of people isolated and vulnerable across Essex, while at the same time helping address a shortage of rural skills within the available workforce.

Their participants share a defining characteristic typically all are vulnerable, have experienced a period of unemployment, have become isolated, or are struggling with a variety of barriers including drug and alcohol issues, domestic violence, or have lost confidence in themselves. Almost all have a mental health issue of some sort and 82% of

our cohort this year have a diagnosis. It therefore made sense that concentration was initially agreed to focus on people most at risk of being outside of society, whether due to vulnerabilities, lack of education, isolation, family structure, illness, disability or other circumstances.

ART soon became an established educational organisation that delivers a set of programmes of practical and skills training to residents of Essex and surrounding areas. The positive aspect of education rather than being a client or patient, gives the individuals the chance to be in control of their improvement and learning in a most positive way. The courses focus on supporting those who are isolated and disengaged who need help to access jobs or further education and training. We work with a variety of groups and partners including working closely with Colchester Garrison Personnel Recovery Centre (PRC) to provide rustic recovery to wounded and injured service personnel; in partnership with DWP and Jobcentre Plus Advisors to support the hardest to

Spotlight – **Insights from ART**

"While running the courses we have heard first-hand the circumstances behind a large proportion of participants who have lost direction and focus. Many tell us that had it not been for their enrolment on ART courses their lives could have taken a very different direction into criminal activity, including rough sleeping/homelessness, drug and alcohol use and anti-social behaviour. Some have already been involved in criminal activity or been victims of crime due to their vulnerabilities but need empowering to make changes and focus on developing a more positive future. The structure and make-up of ART courses are designed specifically for those that are disengaged and/or isolated, many with trauma, issues and barriers that have caused them to stop living fulfilling and rewarding lives.

"The benefits of ART courses are great. First to the individual who get the opportunity to rebuild their wellbeing and confidence, gaining a greater sense of self-worth; can redevelop confidence in their own abilities; regain self-esteem; and who either directly regains employment or who can start to look positively at the prospect of employment, perhaps through volunteering or further education. Critically, it also helps prevent crime. Our participants are not now on the street, causing anti-social behaviour, getting further into drug use, being the drunk on the street, or getting into other crimes and instead have a reason to get in the morning and improve their chances of a better future and gain support to help with a variety of issues, including family relationships, housing support guidance and an opportunity to talk about their issues in a non-judgemental environment. Equally we all benefit from the savings in government costs due to a reduction in dependency, improved health and increased tax base. Very often a life of dependency flows down the generations; if we can stop this then the gain for us all is very long term. Breaking the cycle is key."

reach and most isolated, who are furthest removed from the job market; Domestic Abuse agencies to help victims of domestic abuse, and health services to assist people struggling further with their mental health issues and other issues such as drug and alcohol abuse. Essex and Suffolk may seem wealthy areas but there is a lot of poverty and deprivation. While this is most apparent in the larger towns and cities, there are pockets of deprivation throughout, particularly in small and isolated communities. Some of our participants have been isolated for many years – the longest to date being over 20 years of severe isolation. Often the first and critical step to changing lives is giving them the confidence to travel from their home. This can be a process of many small steps so travel training can

be incorporated into life-skills training. It is also one reason why we provide help with applying for free bus passes so participants can confidently access free transport from across the region to enable our participants to reach our training sites and venues.

Arts, Culture and Community

Arts-led activities are important within the domain of Feel Well, whether as a therapeutic option or when led by established arts organisations.

Affected Forever

Founded early in 2019, the Affected group began setting goals and creating a community people living with mental illness. Formed by people themselves managing their mental health, they could not find any other groups in the area that focussed on goals, which they found were a vital part of recovery and staying well. Many people who have been involved have said personally that their lives have been saved (through suicide prevention, loneliness and trauma) and that knowing a community would be there to share experiences and goals gives them strength.

After the pandemic, the need to understand and assist has risen so it seems vital to continue the group under the new title Affected Forever.

Art in the Community

Based at Firstsite in Colchester, Art in the Community meets fortnightly for people who use creativity to improve their well-being through engagement in group sessions, to recover from mental and physical issues. Described as a relaxed and informal art class the organisation has been active for many years, led by a local artist and experienced community worker, to welcoming new and existing members.

Mercury Theatre

The Mercury Theatre is a hub of activity for all ages, with a focus on social isolation and support for people to build connections. Activities include:

Community Choirs

They currently present two community choirs for adults weekly (each with approx. 60 members) as an open access group for adults (especially those facing any form of isolation or loneliness. They have a member 'buddy scheme' that identifies those suffering or at risk of isolation through referrals where an existing member reaches out with appropriate support, if relevant, through social services or other agency for members to come along.

Senior Social Club

On a Thursday every week they run a Senior Social Club for approx. 50 members with workshops, discussions, and presentations.

Following the sessions in the morning people benefit from a discount lunch and when available they can then attend an afternoon matinee of a show – therefore making a whole 'day out'. Again, the Theatre works on a referral basis if needed as above.

Seniors Movement and Well-Being Programme

They run a weekly movement and well-being class for elders.

Jaywick Martello Tower Project

Jaywick Martello Tower is an arts, heritage and community site which runs workshops, events and art projects for and with local residents. The ground floor houses an exhibition on the history of the Tower, the first floor is a temporary arts space and the roof provides a reading room and replica cannon to help bring the Tower to life. Jaywick Martello Tower provides free, fun and educational tours for schools and other community and educational groups. Local people can sign up for events and workshops individually where they will meet like-minded residents and can engage in arts and heritage projects and workshops, hear talks, or follow a trail and enjoy the out of doors. Free workshops take place on the first Wednesday of every month, with materials and refreshments provided. This is an example of a free to access activity which promotes mental wellbeing. The project is under the umbrella of ECC.

Partnerships

There are a number of partnerships in place across North East Essex which focus on collaborative working to support positive mental health and wellbeing. Some examples are outlined below.

Tendring Mental Health Forum

Tendring Mental Health Forum was set up to bring organisations working with people with mental health problems together for collaborations, to share knowledge and insights and to hold scenario-based case conferences. It is independently chaired by a Disability Employment Advisor from the DWP.

The organisations meet on a regular (bimonthly) basis to discuss common issues. Initially it was set up to cover Tendring but over time it has extended its reach to Colchester-based organisations.

Community360 Befriending Network

The Befriending Network is a quarterly forum and collaborative group of partners who provide mentoring and befriending support to adults in the Borough. It brings together 23 representatives to cross promote, cross refer and peer support one another. The organisations involved are experiencing increased demand and complexity of need.

Health and Care Academy Programme

In an aim to drive up employment and to meet the shortfalls in NHS and care staff, the Health and Care Academy programme in Tendring and Colchester was set up, headed by the NEECCG but including a wide range of stakeholders, to encourage young people to aspire to a future in employment which is relevant to their interests, makes best use of their transferable skills and builds on their competencies.

It offers a 'golden' insight into roles within health and care, looking at non-clinical and non-caring roles as well, hearing directly from people in those roles about what they do, how they got there and their opportunities going forward. It also offers practical help with CV writing, personal statements, preparation for interviews, first aid etc.

While the programme is primarily focused on secondary school age young people it has increasingly been accessed by adults up to the age of 30 years. This element is funded by the Prince's Trust and has a pre-employment coordinator who offers additional support

with applications and confidence building, community networking and facilitating access to employment by working with potential employers.

Careers Roadshows have taken place hiring the SOS bus every 3rd Wednesday of the month brings a number of partners and job roles out into the community. Partners include Health and Care Academy, DWP, CVS, ACL, Colchester Institute, private social care providers, Essex CC. The Academy is now organising a recruitment fair, spotlighting organisations with vacancies.

Employment is one of the key determinants of positive mental health and the academy has identified barriers in terms of transport (access to jobs and apprenticeships, especially where there are shift patterns and unsocial hours and cost of transport), the need to be able to drive (e.g., for domiciliary care) and cost of driving lessons, the perception of impact on benefits and rural isolation.

Finding out about local services

To support this report, a simple website analysis was conducted in September 2021 to understand how and where Primary Care Networks (PCNs), local Councils and Clinical Commissioning Groups were signposting residents for mental health support. Health services work across shared templates, listing organisations and services under a 'Wellbeing' section. The sections reviewed for this analysis included bereavement, depression, anxiety and stress, local support and dementia.
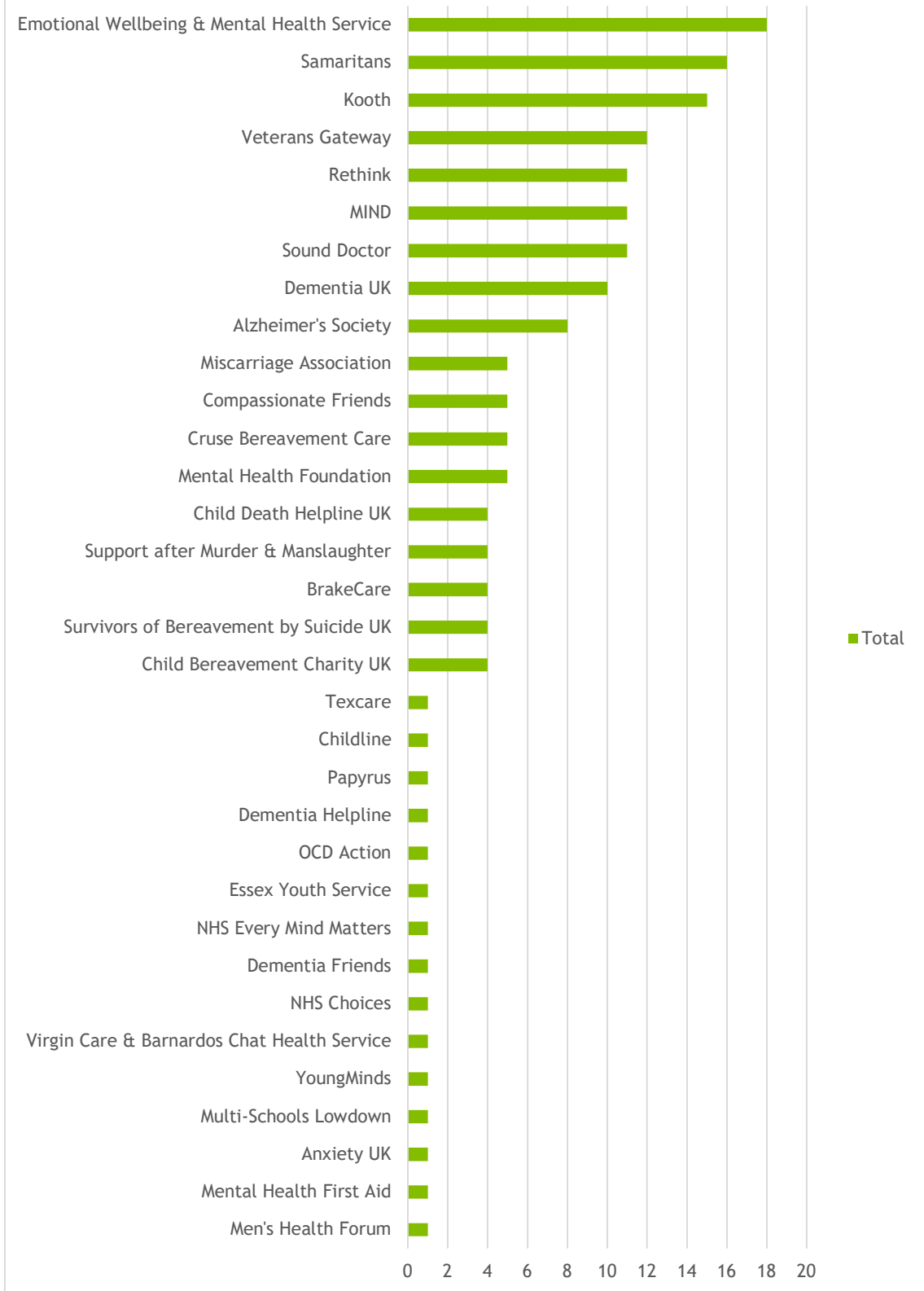
Key findings

- County-wide and local organizations were not as well represented as national organizations. Colchester Medical Practice Primary Care Network had more signposts to local organizations than other doctors' surgeries websites, but this was not consistent.
- None of the surgeries uses the term 'mental health' on their websites other than in the URL; rather they use the phrases 'depression', 'anxiety', and 'stress'.
- The terms offered were generally medicalised and pre-supposed diagnosis.
- Some sections of the sites appeared to be designed primarily for professionals and as such, required knowledge of trusts and service structures to assist with navigation.
- The use of acronyms and limited descriptions of services do not aid residents in identifying solutions. The information varies from Facebook pages, phone, email, websites and online resources to just phone numbers.
- There is no reference to how these services fit in with any care pathway, so that people may be unable to decide which the most relevant contact to make is. They also do not indicate how one might determine whether they should contact their GP, which may result in people reaching crisis before seeking support to recover.
- Over half of all services signposted to are national rather than local assets.
- The inclusion of local organizations that can offer support at a local level to local residents would raise awareness of their existence and benefit both these local assets and local residents.
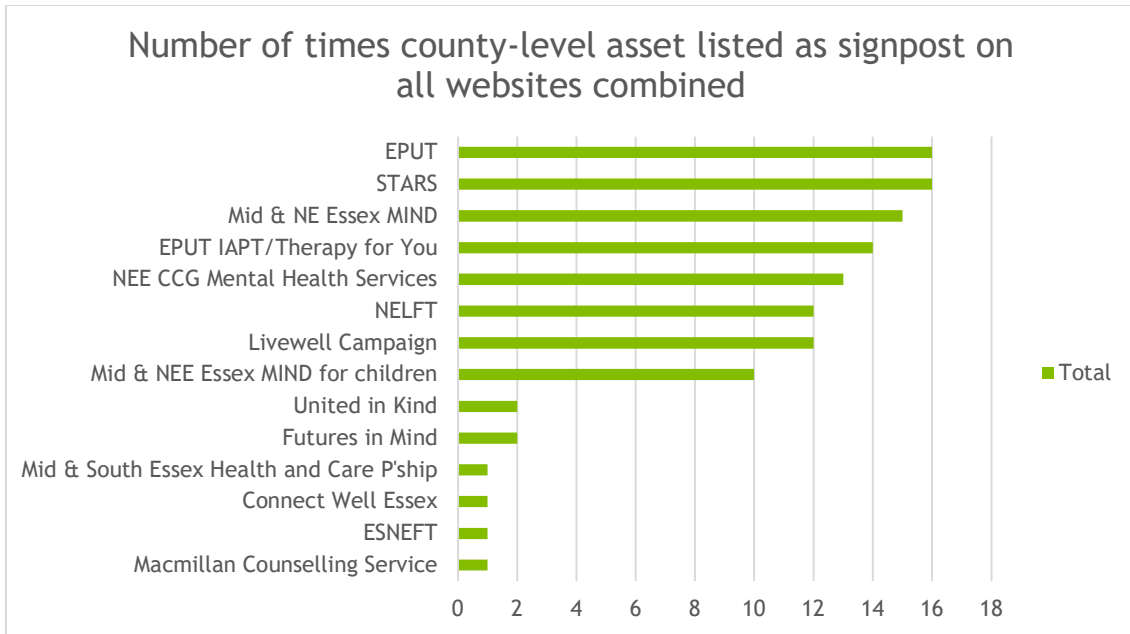
Signposted organisations

Using Colchester websites as an example, the following tables show the names of the organisations/assets that are signposted to by the websites analysed. Tables show the assets ranked by the number of times signposted (which is multiplied across PCN's using templates). Similar research in the Tendring area replicated the identified trends. It should be noted that Summit featured more prominently in the findings.

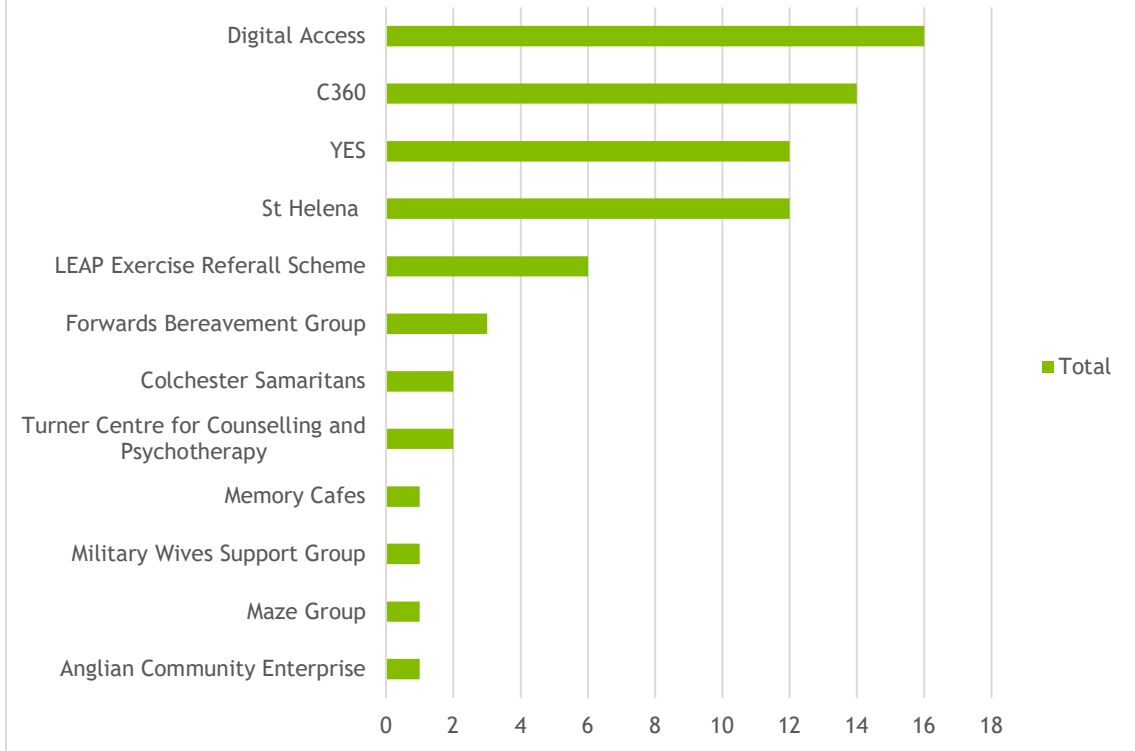Number of times national-level asset listed as signpost on all websites combined

Asset	Total
Emotional Wellbeing & Mental Health Service	18
Samaritans	16
Kooth	15
Veterans Gateway	12
Rethink	11
MIND	11
Sound Doctor	11
Dementia UK	10
Alzheimer's Society	8
Miscarriage Association	5
Compassionate Friends	5
Cruse Bereavement Care	5
Mental Health Foundation	5
Child Death Helpline UK	4
Support after Murder & Manslaughter	4
BrakeCare	4
Survivors of Bereavement by Suicide UK	4
Child Bereavement Charity UK	4
Texcare	1
Childline	1
Papyrus	1
Dementia Helpline	1
OCD Action	1
Essex Youth Service	1
NHS Every Mind Matters	1
Dementia Friends	1
NHS Choices	1
Virgin Care & Barnardos Chat Health Service	1
YoungMinds	1
Multi-Schools Lowdown	1
Anxiety UK	1
Mental Health First Aid	1
Men's Health Forum	1

County organizations

On a county-wide level, the top three organisations being signposted to for mental health support are EPUT, STARS (Support, Time and Recovery Service and Mid & North East Essex Mind.

Number of times county-level asset listed as signpost on all websites combined

Organization	Total
EPUT	16
STARS	16
Mid & NE Essex MIND	15
EPUT IAPT/Therapy for You	14
NEE CCG Mental Health Services	13
NELFT	12
Livewell Campaign	12
Mid & NEE Essex MIND for children	10
United in Kind	2
Futures in Mind	2
Mid & South Essex Health and Care P'ship	1
Connect Well Essex	1
ESNEFT	1
Macmillan Counselling Service	1

Local organizations

At a local level, St Helena, the Youth Enquiry Service and C360 are the top three local organisations that are signposted to the most, by GP Surgeries, the North East Essex CCG and Colchester Borough Council combined.

Number of times local-level assets listed as signpost on all websites combined

Asset	Total
Digital Access	16
C360	14
YES	12
St Helena	12
LEAP Exercise Referall Scheme	6
Forwards Bereavement Group	3
Colchester Samaritans	2
Turner Centre for Counselling and Psychotherapy	2
Memory Cafes	1
Military Wives Support Group	1
Maze Group	1
Anglian Community Enterprise	1

Citizen's Voice

Engagement methods

To ensure that citizen voices could be gathered effectively and productively, a qualitative and quantitative approach was implemented via two different work streams.

Survey
We decided to use the same approach as the first citizen's voice work by producing a survey asking about people's experience of accessing mental health services across North East Essex. The survey was shared with various partners, the steering group's members and through our social media platforms. The survey consisted of 7 main questions asking for insight into positive/negative experiences, what services people were aware of and whether they felt they received the support they needed.

Interviews
In order to gain a more in-depth understanding of barriers, cultural factors and changes needed, a number of 1:1 interviews were conducted. These involved reaching out to various organisations and individuals within the intended areas. Participants consented to taking part and having their conversations recorded. These conversations were then transcribed and analysed to produce some key themes for both geographical areas.

Case Study
Case studies are used frequently throughout this report to highlight good practice and understand community response to mental health.

Through our engagement, the following themes were identified:

Pier Ward

- The role of GPs in mental health support
- Safety on the streets
- Finance & Houses of Multiple Occupancy (HMO's)

Berechurch

- The need for a community space & safety
- Support for families
- Impact of local council

Community Asset Mapping-Survey results

Who have we received responses from?

For the purpose of this survey, it was decided that the demographic reach would include all residents of North East Essex (NEE) to gather a snapshot of accessing mental health services across the board.

In total, only 21 responses were collected from the survey that was promoted on various platforms and shared with various groups. Mental health can be a difficult topic to discuss and with other similar surveys being posted across the area, it can become a struggle to find suitable candidates. However, looking at the responses we did receive, the following data can be analysed.
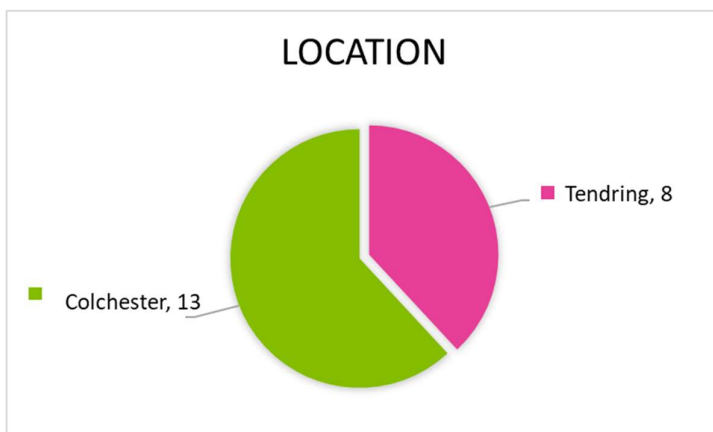
Figure 1- Location split of respondents.
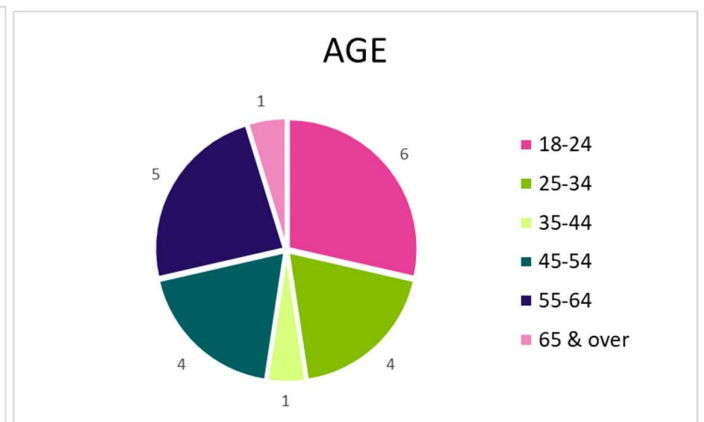
Figure 2- Age split of respondents.

As you can see from the figures above, over half of respondents indicated they lived within the Colchester area, with the most answers coming from individuals aged 18-24. Looking at the data further, for Colchester, over a third of individuals were aged 18-24 whereas in Tendring there was an even split between the age groups.

Figure 3- Breakdown of MH services respondents have heard of

Which of the following services have you heard of before? (Choose all that apply)
20 responses
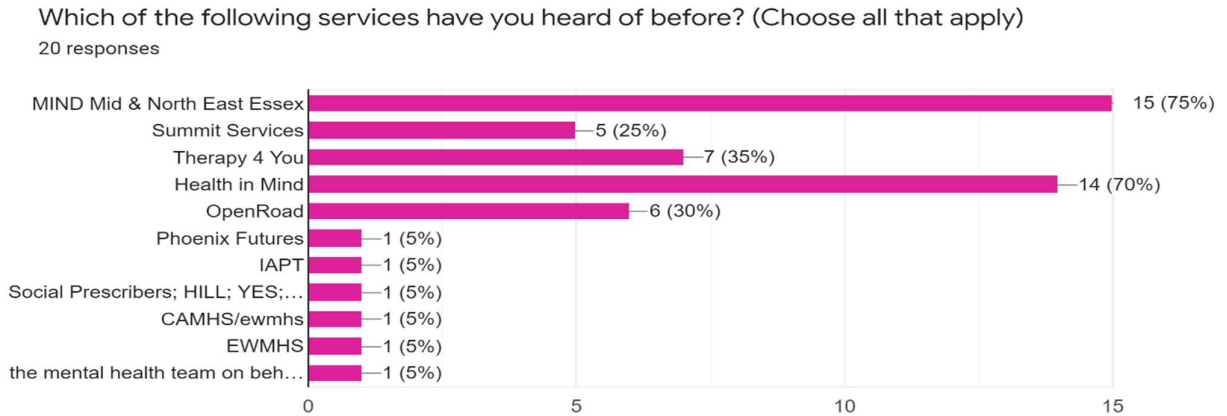
We can see from the data that 75% of individuals could identify MIND closely followed by Health in Mind. A third of individuals identified both Therapy for You & Open Road, with another 5 identifying Summit Services. We then went on to ask where people would look to reach for support for their mental health (as seen in figure 4). Interestingly, over half of respondents said they would visit their GP first, with a small majority reaching out mental health services directly.
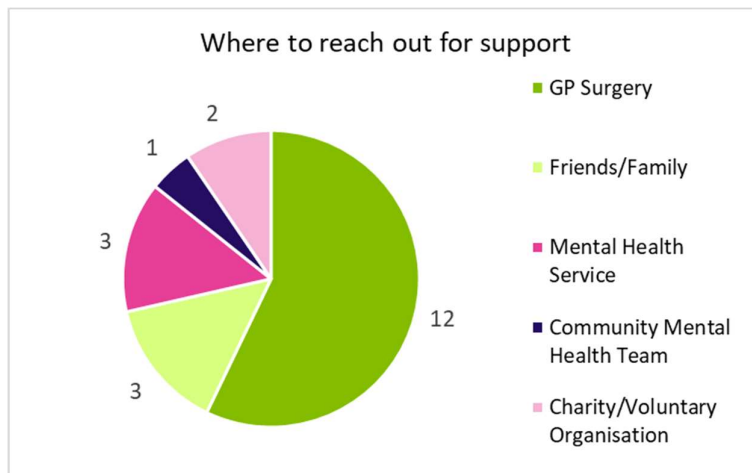
Figure 4- Breakdown of where individuals reached out for support

We wanted to look at this data further, comparing this with the responses to the next question asking if people had received the support they wanted.

As we can see from the data, over 66% of individuals who reached out to their GP for support felt that they didn't get the support they wanted, with only a third feeling satisfied with the outcome. Interestingly, this is a reoccurring theme over the other services, with only voluntary services receiving a positive outcome.

After gathering this insight, we asked for any positive experiences when accessing mental health services. Some individuals chose not to share an answer, but 5 individuals indicated that they had no positive example to share. Below shows some answers given providing a general understanding across the 21 respondents
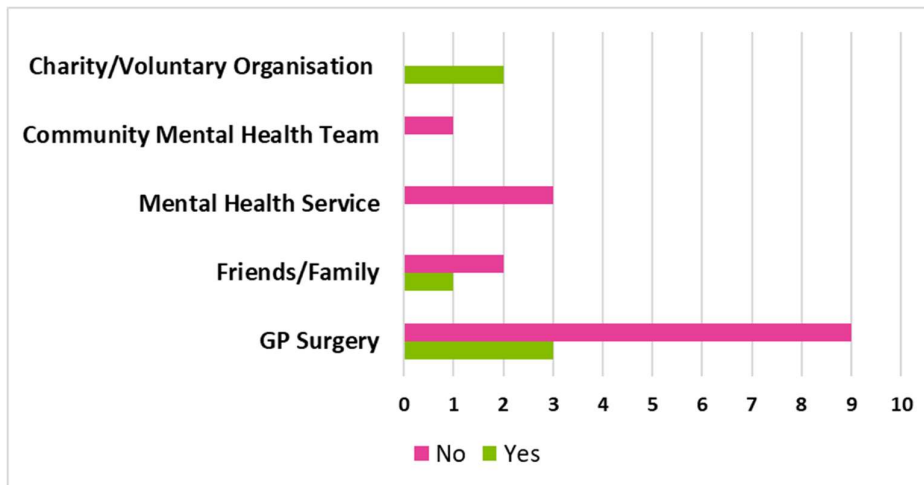

Figure 5- The number of individuals who received the support they wanted broken down by what service they accessed

We can see from these responses that MIND for some individuals had been a great support in allowing them to access mental health support, calling at specified times and allowing people to gain a diagnosis. One individual was told to access private mental health support and not to wait for the NHS support. We know that because of the pandemic mental health needs have doubled[6] which is expected to affect the number of people reaching out to mental health services. Therefore, we can begin to understand the reasons why this advice was given at this time, to look at ways in how this individual would be able to access support faster.

We then felt it was important to ask how mental health services can be changed to improve their experiences in the future. With such a small data set, we have included all responses to this question that we received.

1. **"Clear information about when to go to what services and where to access them".**
2. **"Better communication".**
3. **"More support"**
4. **"The waiting times".**
5. **"Reducing waiting times".**
6. **"Free NHS therapy. Been waiting 18 months. I have had subsided treatment at Colchester institute, but I don't know where I would be if I had to pay".**
7. **"Better Communication. Not being referred to services I was ineligible for and have access for people with ADHD".**
8. **"Evidence-based approaches. Professional & knowledge staff".**
9. **"Lots of things"**
10. **"Community based facilities. Maybe a community centre"?**
11. **"More funding leading to easier access for home visits".**
12. **"Communication, understanding & empathy".**

---

[6] https://bit.ly/healthfoundationmhcrisis

As seen from the data, answers where varied but most touched on communication and the need for a reduction in waiting times to access services. Some people shared their personal experiences, touching on the use of technology such as video calling which allowed for sessions to continue during the pandemic. This individual acknowledged that, for them and others, this could be inconvenient and hinder sharing details which they would be free to express in a private room, face to face with a counsellor.
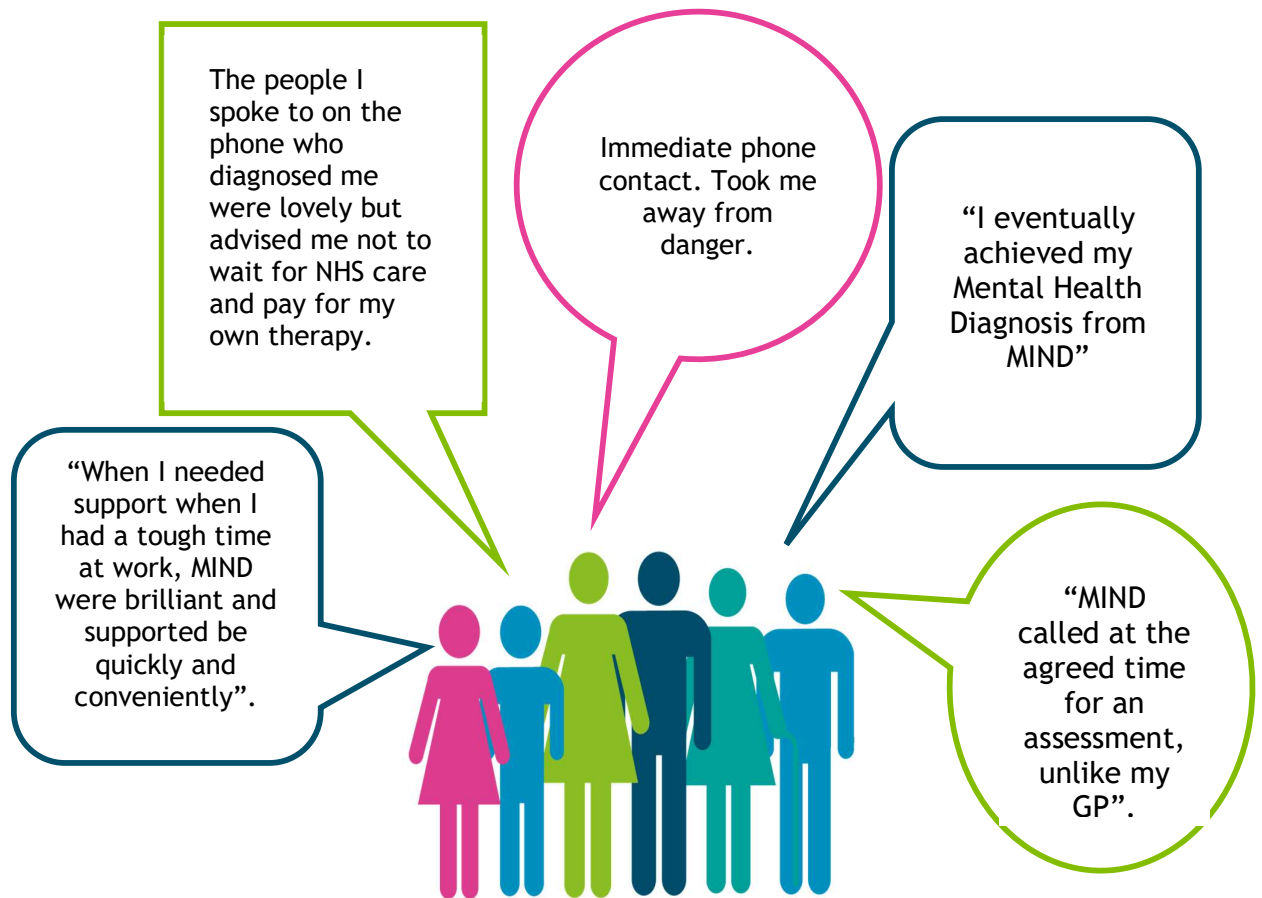
The people I spoke to on the phone who diagnosed me were lovely but advised me not to wait for NHS care and pay for my own therapy.

Immediate phone contact. Took me away from danger.

"I eventually achieved my Mental Health Diagnosis from MIND"

"When I needed support when I had a tough time at work, MIND were brilliant and supported be quickly and conveniently".

"MIND called at the agreed time for an assessment, unlike my GP".

Figure 6- Responses from 'name a positive experience you have had from accessing mental health services'

Finally, we wanted to understand where, considering the experience individuals have had previously, they would now reach out for support for their mental health. The graph below includes all 21 responses

As you can see from the above graph, most individuals' answers differed after the experience they had encountered. Some individuals, such as 14 & 15 decided that the best

approach would be to access support privately after their first experience of reaching out to their GP. Others would choose to reach out once again to the same services, such as individuals 5 & 12, who indicated they had a positive experience when accessing services though their GP. It's disheartening to see that for some they would be unsure of where to reach out next or would give up due to a negative experience. If this is happening for individuals, then it raises questions as to how many other people - because of a negative experience - are now not reaching out for support.

	Where/Who did you first reach out to to access support within your local community?	If you were to access support once again, where would be your first point of contact?
Individual 1	GP Surgery	Not Sure
Individual 2	GP Surgery	EX foster carers.
Individual 3	GP Surgery	Friend
Individual 4	Friends/Family	GP surgery
Individual 5	GP Surgery	GP
Individual 6	Mental Health Service	My therapist.
Individual 7	Mental Health Service	Not the NHS
Individual 8	GP Surgery	I would avoid NHS mental health services for my child for safeguarding reasons.
Individual 9	GP Surgery	Unfortunately GP
Individual 10	Friends/Family	Mind
Individual 11	Charity/Voluntary Organisation	GP surgery if open
Individual 12	GP Surgery	GP
Individual 13	Mental Health Service	depends on the persons situation at the time
Individual 14	GP Surgery	Private sector
Individual 15	GP Surgery	Private Mental health services
Individual 16	GP Surgery	GP
Individual 17	Charity/Voluntary Organisation	Not Sure
Individual 18	Community Mental Health Teams	Would not access again
Individual 19	GP Surgery	I just give up because my GP will just send me back to the same place that did not help
Individual 20	Friends/Family	counselling directory
Individual 21	GP Surgery	Mind

Figure 7- Individual 1st & 2nd response to reaching out for support

Conclusion

With such a small data set, it's hard to draw any real and comprehensive argument. What we can start to see and therefore predict, if we had a bigger data set, is that individuals reach out for mental health support in several different ways, with most not receiving the support they hoped for. However, we can see that individuals understand the current strain on mental health services and recognise the lack of funding and opportunities that could arise if this was looked at, such as the reduction on waiting times. This data captures a small snapshot of people who have accessed mental health services and that information and signposting could be improved. Communication is clearly a key component in improving services, this communication needs to start with the promotion of all available pathways and the outcomes that can be achieved. Mental health is different for everyone, so allowing for better communication would allow for an individual to understand what does and doesn't work for them.

The next section of this report will delve deeper into the mental health experiences of residents from both Pier Ward and Berechurch.

Pier Ward

Pier Ward in Clacton is one of 63 wards in the Tendring district, comprising Carnarvon Road up to Marine Parade East. In Dr Chris Whitty's 2021 report into Health in Coastal Communities[7], Clacton was said to have the second highest Mental Health need in the county, with rates of Heart Disease, Kidney Disease & Mental Illness over 10% higher, even after deprivation & older populations are considered. This level of deprivation is further

---

[7] https://bit.ly/coastalhealthreport

highlighted in the Indices of Deprivation date where in 4 years, the Pier Ward moved further up the top 10% of most deprived areas in the country[8].

Role of GPs in mental health support

We are already aware that the demand for mental health services within North East Essex is high compared to the rest of the country. Within Tendring, there is a huge concern around the rate of suicide, especially in men. Therefore it is important to therefore look at the position GP & mental health services play in supporting a growing number of residents experiencing these problems for the first time.

To firstly understand and then seek support, participants acknowledged that they had to admit to themselves they were suffering with poor mental health or well-being.

> "To be honest I've kind of remained ignorant. I thought that it would just pass or it's just a certain situation or just a certain mindset. But this kind of thing I've realised doesn't just go away, it can't be something that's cured"

Accepting that someone needs help is the first step in seeking support. For one individual it was the realisation from others that prompted action.

> "I haven't really labelled or focused on it. I've mostly pushed it to the back of my mind until people pointed it out to me. By this time, I realised I've had it for longer than I think".

What is becoming clear is the lack of awareness around what mental illness is and how to spot signs or symptoms. One participant, in their 60s, highlighted the stigma attached to growing up in a certain generation.

> "My generation feels the stigma of mental health. I come from the generation where mental illness was the illness you didn't talk about. I suppose I deliberately isolate myself to avoid the questions. The stigma of mental illness or the baggage I have acquired is probably the biggest problems I have had in recent years, rather than the mental illness itsself".

According to 2019 research by Bupa UK, only 10% of Baby Boomers (those aged 55+) would discuss mental health concerns with a colleague, compared to 18% of millennials[9]. Furthermore, around two thirds of Boomers suffer from symptoms of anxiety, low mood, insomnia, all of which could lead to bigger problems if left untreated. Compare this with Gen Z (born after 1997) who are increasingly more likely to reach out for support. This is due to a number of factors, such as more awareness on social media/technology and the breakdown of stigma attached to mental health. We already saw from the previous citizen voice work that children & young people are reaching out for more mental health support, therefore this idea of your generation group acting as a barrier has some argument to it.

With most of the individuals we spoke with, nearly all had decided the first route they would take in accessing support is to speak with their GP. It's ingrained in us from a young age that if you are unwell a visit to your local GP would be your first point of call. The NHS website states that "GPs are often the first point of contact for anyone with a physical or mental health problem. Looking after the whole person - the physical,

---

[8] https://bit.ly/Indicesofdeprivation

[9] https://bit.ly/Bupauk

emotional, social, spiritual, cultural and economic aspects through patient-centred approaches is a vital part of any GP's role"[10].

> "I think people think the only way to access mental health support is via their doctor. I think the doctors are a barrier in themselves".

It's interesting to hear the GP spoken about as a "barrier", opposed to what is expected when making a visit. In conversation, there were differing views as to how much support for mental health well-being the GP could offer. One individual shared their experience at their GP Surgery highlights their expectations.

> "I was expecting the GP to refer me, not for me to have to actually go do it myself. They just gave me either a website or a form which I had to fill out and wait for a response".

For this participant their expectations were unable to be met by their GP, leaving them feeling deflated. Furthermore, many feel that the doctor's only response to mental health support is to prescribe medication.

> "A lot of doctors issue anti-depressants because it's an initial quick fix. You will start feeling better and it'll help your mood without actually delving into how long, what triggered these feelings etc.".

The prescribing of anti-depressants is standard practice for some GPs and in some cases, provides necessary support for an individual at a time when they need it. However, some individuals feel the prescribing of such medication fails to find the root cause of the problem and in doing so, mental illness is not treated appropriately.

> "I think we need GP's who have a common interest in the psychiatric services. I think the GPs are used to sorting legs, arms etc. You walk in with a psychiatric problem, and you feel like it's not given the same priority as physical illness. Mental health is still the junior illness in all the illnesses that people have to deal with".

It is easy for a GP so see a physical problem like a cold, cough, rash etc but when presented with ill mental health, the resilence on what the GP is being told by the individual is at times the only trigger to spot if there is a problem. Because GPs are used to treating physical problems with medication, physiotherapy etc., the psychological problem could get ignored which could lead to wider consequences.

> "Mental health is considered less important, but the fact is mental health can affect your physical health. You can have a heart attack, high blood pressure, various other things".

Speaking from experience, individuals highlighted the impact their mental health had on their physical health. Participants feel that mental health needs expertly trained individuals to spot signs before the issue leads to wider problems which require further support in the future. Not only that, but individuals also feel the GP's have a responsibility first and foremost in listening and responding to what their patients are telling them.

> "Nine times out of ten, people go to their GP because they are not feeling great. In side conversations, they might say 'by the way, I know I am here for such and such, but I actually haven't been feeling great & not myself. That's the moment when intervention needs to happen and their almost needs to be psychiatrists as part of the GP to talk with".

---

[10] https://bit.ly/Generalpratice

It's the simple art of listening that for individuals is missing when talking about mental health. We already discussed that for some people they had to be prompted by others to realise they had a mental illness. If GPs were able to spot the signs quicker and engage in conversation with patients, then there could potentially be prevention of people who find themselves in crisis.

With the issues around identifying mental illness it is essential that individuals are open and honest when they receive their GP appointment, which could contribute to the correct signposting or support in the future.

> "GPs could put loads of posters and advertisements out, but it's the person who has to have the confidence to come out and make that appointment. It really depends on the environment you are in. If you are in a toxic environment, it makes you not want to do anything".

There are still clear issues around having the confidence to speak up about your mental health and although this is improving there is a need for more. Is this something that sits with the GPs, or could there be ways to support more signposting to these services?

When speaking further with participants, the level of support received can sometimes depend on the GP. One individual shared a positive experience they had with their doctor.

> "My doctor was an absolute superstar. Even in the street he would say hello. I went into my GP and said I was struggling. My doctor recommended I see someone, so I had sessions with the Psychologist within the Doctor's surgery".

This individual understood that the experience they had was not the same as others, and admitted they were lucky to have such a relationship and dynamic with their doctor. What it highlights is that building a rapport between patient and GP results in a patient feeling more relaxed and willing to discuss their issues. However, for some individuals the constant change in both doctors and locum doctors can make it incredibly hard to build such a relationship.

All the participants acknowledged the incredible pressures undertaken by GPs currently, which have been amplified by the challenges presented by the pandemic.

> "The system is overworked; overstretched and everyone understands that. The receptionists are getting their ears chewed off and it's not their fault. The GPs are doing their best".

According to a Sep 21 article from The Guardian, GPs across the country are struggling to deliver a guaranteed level of safe care due to a shortage of medics within the profession[11]. We already know that the first point of call for support is your GP and with an ever-increasing demand for mental health support, these pressures look set to continue.

> "They're doing what they're got to do to survive and get through. But the way the system is set up, the GP is the first point of call and it's all funnelled through them while they are short of numbers and are struggling".

It's been vital therefore, to find new innovative ways to offer support for those living with poor mental health.

---

[11] https://bit.ly/GPstruggle

Mental Health Hub Programme- Tendring Citizen Advice

The mental health hub programme has been running for the last 5 years and was launched by Tendring Citizen Advice. The programme is available to anyone and is to support people who would like to develop their social skills and make the first steps back into society. The scheme allows individuals to work within the Charity shop in a variety of different roles. Individuals can get peer support and also work alongside others and make friends. The programme runs for a year to allow people to become independent and move on to something new, such as another volunteer opportunity or a new career. Individuals also get involved with a number of other activities, such as cycling or Sport for Confidence activities. Below is just a summary of some of the comments from individuals on the programme and why it works for them.

"There's no pressure and there are no expectations to get things done a certain way or time".

"I think the reason I feel like I'm coming out of myself is because the staff are polite & there is good communication".

For all involved, the mental health hub is an innovative and flexible approach to mental health. By working alongside other organisations to provide new activities & in some cases qualifications, individuals are able to spend a good length of time getting the support they need while learning valuable skills.

The mental health hub programme is unique in its response to mental health support by providing a long-term programme, compared with other ways of support which are shorter in length.

"When people access support & help for their mental wellbeing, it needs to be long term. Six weeks of counselling from provider is not enough because they are going to be in this situation for many months to come"

When speaking with organisations, they agreed that long term support should be offered alongside already prescribed ways of support.

Safety on the streets

Clacton statistically is among the top 20 most dangerous towns to live in Essex.[12] According to Clacton Central crime data gathered by Essex Police as seen in figure 1, violence & sexual offences make up nearly half of the 4,015 crimes over the year between November 2020- October 2021.

Earlier this year Paul Honeywood, counsellor for Pier Ward, raised concerns around reports of gun related crime

Type	Total	Percentage
Anti-social behaviour	779	19.4%
Bicycle theft	59	1.5%
Burglary	109	2.7%
Criminal damage and arson	279	6.9%
Drugs	179	4.5%
Other theft	187	4.7%
Possession of weapons	38	0.9%
Public order	381	9.5%
Robbery	25	0.6%
Shoplifting	163	4.1%
Theft from the person	20	0.5%
Vehicle crime	64	1.6%
Violence and sexual offences	1673	41.7%
Other crime	59	1.5%

Figure 8- Clacton Central crime overview Nov 20- Oct

---

[12] https://crimerate.co.uk/essex/clacton-on-sea

within the area[13] . It's no wonder that some participants highlighted the effect this can have on your mental health.

> "The stabbing that happened was a genuine shock because it was so close to home. It gives the town a bad reputation and it's not the sort of thing you would think happen and to appear on the news".

The individual in question was responding to the stabbing in September 2021 of Harry Burkett, aged 21[14]. What was a random attack sent shockwaves through the wider local community and raised questions about safety on the streets, especially within Clacton town centre.

> "With all the crime it isn't great. That's probably why my mental health is the way it is at the moment. With all the stuff that you hear about & with the town's reputation, it doesn't make me what to go out"

With violence and sexual offences being the highest reported crime within Clacton Central, it's understandable why such random and unprovoked attacks have caused fear among local residents. Residents highlighted the impact this had on their confidence when walking the streets due to the fear of crime. Individuals would rather isolate themselves indoors than choose to walk alone in the town centre.

> "I do try and make an effort to go out. If I need to go out then I try and make sure that I keep to myself, don't get involved in anything and just get my errands done"

Wanting to avoid confrontation when out in the local area was prominent across the conversations had with individuals. People were not intending on isolating themselves away from others, but the fear due to violence is prompting such a response. One female respondent shared her feelings on the subject.

> "It makes me not what to go out. You could be walking on the street, and it could be you. I don't want to go out late at night, only at certain times. When I do go out at night, I get paranoid. I haven't exactly got a great neighbourhood, so I'm literally surrounded by Clacton".

2021 shone a spotlight on the safety of women on the streets due to the murders of Sarah Everard & Sabina Nessa. Statistically, 7 out of 10 women (although this could even be higher at 9 out of 10 women) have experienced some form of sexual harassment in public[15]. Towards the end of 2021, Essex Police promised to tackle violence against women by working with local organisations across the county[16]. Participants suggested one way below which could be provided to offer support.

> "I think self-defence classes should be available in the community. I have heard about a lot of women taking self-defence classes because they don't feel safe and it's affecting their mental health and after, they have felt better and trained".

Equipping individuals with the skills to, if needed, defend themselves could allow for more women to feel safer on the streets in the area. Statistically, men are more likely to be victims of street crime, compared to women who are more likely to be targeted as victims

---

[13] https://bit.ly/guncrimenottolerated

[14] https://bit.ly/Clactonstabbing

[15] https://www.bbc.co.uk/news/explainers-56365412

[16] https://www.essex.police.uk/news/essex/news/news/2021/november/our-promise-to-tackle-violence-against-women-and-girls/

of sexual assault. Therefore, such classes could be offered to both sexes to increase safety on the streets and reduce the effect this has on mental health.

Finance & Houses of Multiple Occupancy (HMO's)

Voted in the top 10 most deprived areas of Essex in a 2019 article from Essex Live[17], Pier Ward suffers from low levels of income, employment and housing. Statistically, seaside towns are known to be some of the most deprived areas, with little opportunity for the residents who live there.

"I think like a lot of seaside towns Clacton has suffered from a lack of investment. All the big seaside towns have problems because the work is seasonal and off season, people struggle to find something to do".

Clacton had always been known as a thriving seaside resort, especially during the '60s and '70s. After the closure of Butlins in the '80s due to the popularity of low-cost holidays abroad, many tourists instead choose to visit only for the day For residents, this means that opportunities are few and far between. In one neighbourhood in the Pier Ward, 54 per cent of people aged 16-64 are on out-of-work benefits[18]. This decline in constant work has meant many residents have fallen into hard times, affecting their mental health dramatically.

"The town has lost a lot of shops recently from the high street. The lack of investment and with that a lack of opportunity has an impact. With a lot of seaside towns, they are geared towards an elderly population and so are the facilities".

With the closing of stores comes a loss of jobs which adds to the rising levels of unemployment within the area. For participants, they feel the area has gained a reputation as a place to retire and with that much of the resources, shops and opportunities are geared towards this age group. A recent survey found Clacton is the fifth most popular retirement coastal town in Britain, with nearly a third of residents claiming state pensions. This has created a situation where a large proportion of the population does not work, leaving the local economy struggling[19].

"Clacton was always known as a place where people come to retire. I am conscious of the fact that the town is probably slanted to take care of elderly people in life. Therefore maybe the youngsters don't get a fair deal and there is lack of opportunities".

This impact means that many locals are priced out of the housing market, unable to compete. Such a situation is sure to influence someone's mental health and in an area with such a low level of jobs, stability, and affordable housing, we can begin to understand why the area's request for mental health support is one of the highest in the country.

In the past many of the area's hotels, especially those within the Pier Ward, would act as holiday accommodation for many families. Pre-pandemic, attractions such as the local air show would generate an income of over £1million a day, according to a 2014 article[20]. To ensure income now that most tourists are day trippers, many B&Bs now rent their rooms

---

[17] https://www.essexlive.news/news/essex-news/ten-most-deprived-areas-essex-3375681

[18] https://bit.ly/signedonwrittenoffreport

[19] https://bit.ly/Turningthetide20

[20]https://bit.ly/Incomeclactontourism

out to the council for temporary accommodation. This has led to the creation of a number of 'Houses of Multiple Occupancy' (HMOs) within the Pier Ward area.

"Just in Pier Ward, we have around 4 that are on our radar and also the hotels that are pretty much HMO's. We know that HMOs should be temporary until people are housed but some people are in there for a long time".

The organisations we spoke to understand that people need a roof over their head and an HMO does provide this. However, the perception of HMOs from local residents can be seen as those who are drug dealers or who commit anti-social behaviour.

"Actually, there are many young people, singles mums and those who have fled domestic abuse and violence who need somewhere to stay. It's almost like HMOs are spoken about in a hushed voice and then the people who live there feel degraded"

For some individuals, living in HMO is not their preferred choice and is sometimes out of their control, due to certain circumstances. However, because of the judgment from others and the constant perception of residents who live in HMO, this has an effect on their confidence which impacts on their mental health.

"Your address, your postcode it can all be a barrier when accessing services or applying for jobs. If you had someone applying for a job, say like a mainstream restaurant, and they ask where you live. They could have that impression of 'I don't want someone coming from there, I don't want bed bugs'".

At a disadvantage already due to the lack of employment in the area, individuals in HMOs face another barrier when seeking employment which is their postcode. Instead, they choose to keep it to themselves to avoid such judgement. Especially when it comes to local jobs, some individuals feel there is no point in applying because they would be judged as soon as they give their address. All these factors, stress of housing & not having jobs has a negative impact on an individual's mental health.

"There is this thing that when someone is homeless or in a HMO that it's due to poor decision-making or the fact that they have lost a tenancy because they have stopped paying the rent, can't manage their money or are irresponsible. They actually don't know because they don't know people stories and they don't take the time to listen to them".

A report from Essex University looked at the mental health of people living within an HMO and found that living conditions can have a significant impact on people[21]. What's clear is that HMOs carry negative connotations that significantly impact an individual in vast areas with their health and wellbeing. Therefore, investments into providing more long-term housing for local residents and working with local organisations to better understand the needs of people is important to support the improvement of mental health within the community.

Berechurch

Located to the South of Colchester, Berechurch is one of the six areas within the Colchester Central neighbourhood. Home to around a population of 9000 in 2011, this number is predicted to rise to over 11,000 once the 2021 census data is published.

---

[21] https://bit.ly/Turningthetide20

Berechurch compared to the rest of Colchester

Comparing the area to its counterparts, Berechurch sits fairly central when it comes to the English indices of Deprivation Data (EIDD) set. This looks at 7 domains: education, income, employment, health, crime, barriers to accessing housing and living environment. Each area is then spilt into Lower Layer Super Outlet Areas (LSOAs), which are smaller areas of equal proportion. Berechurch is made up of 4 LSOAs. According to figure 9, all 4 of Berechurch's LSOAs sit within the top 40% of most deprived areas within Colchester. Looking further at the graph,

Deprivation Decile	LSOA Name	Ward	Rank
0-10%	Magnolia	Greenstead	1,927
11-20%	Forest	Greenstead	3,456
	Salary Brook South	Greenstead	3,616
	St Anne's Estate	St Anne's & St John's	3,972
	New Town North	New Town & Christ Church	5,142
	Barnhall	Old Heath & The Hythe	5,168
	Speedwell	Old Heath & The Hythe	5,405
	Sycamore	Greenstead	6,106
	Eastern Approaches North	Greenstead	6,120
	Paxmans	Old Heath & The Hythe	6,467
21-30%	Iceni Square	Shrub End	6,502
	Rayner Road	Shrub End	7,520
	Monkwick	Berechurch	7,590
	Castle Central	Castle	7,622
	Blackheath	Berechurch	9,029
	Maypole	Tiptree	9,082
	The willows	Berechurch	9,750
31-40%	Chinook	Highwoods	10,060
	Friday wood	Berechurch	10,310
	East Ward	Greenstead	10,508
	Collingwood	Prettygate	10,537
	Berechurch North	Berechurch	10,913
	Harwich Road	St Anne's & St John's	10,950
	Castle East	Castle	11,046
	Salary Brook North	Greenstead	11,486
	Wheatfield Road	Stanway	12,493
	Donyland woods	Old Heath & The Hythe	12,501

Figure 9- Most deprived areas in Colchester according to EIDD

we can see that all 4 are fairly close in rank in terms of national data. A quick search of news articles finds many documents relating to investment in areas such as Greenstead and Old Heath, however, when compared with Berechurch this is not the case. This is reflected in conversations with residents who believe the area is 'forgotten' due to its position. Instead, lots of money is invested in other areas with higher levels of deprivation but there is a fear that Berechurch could reach such levels if ignored.

Need for a community space and community safety`

When we think of a community, at the heart sits the community centre. Areas such as Greenstead benefit from a thriving centre which offers a 'dynamic & widely accessible facility'[22]. Using funding from Colchester Borough Council, Big Lottery Fund & Community Fund amongst others, the building was completed in October 2003 and continues to serve the community. Compare this to Berechurch, many residents feel the area lacks any such space.

> "I would say Berechurch doesn't have a community centre. I think that's what makes us different to say Greenstead or St Anne's, which I have always felt are very comparable estates to ours"

Even though in terms of deprivation data, Greenstead and St Anne's sit higher, residents within Berechurch feel the areas are actually compatible when it comes to the experience of living there. Residents believe that "there is a community, there's just not a community centre" and we already know from the previous Citizen Voice work in Stanway that community support is a valuable tool in supporting locals' mental health[23].

---

[22] https://www.greensteadcommunitycentre.org.uk/about/
[23] https://healthwatchessex.org.uk/library/#gallery-1

St Margaret's Church- Satellite Foodbank

The Satellite Foodbank for Berechurch/Monkwick is run in St Margaret's church hall and takes place every Friday between 11am-1pm. The satellite foodbank provides much-needed support for local residents who are unable to travel to the main Foodbank at Stanway. The Foodbank is led by a number of committed volunteers who are local to the area. These volunteers understand the call to action for a community centre within the area and have started the process of expanding the services available. One way they are achieving this is by working with other local services, such as Tots 2 Teens, Precious Bundles and the free school uniform project. These organisations are invited to have their own stall which locals can access at the same time as the Foodbank, almost like a one-stop shop. The vision moving forward is to also have a mental health provider available. This would allow for people to come in and potentially make the first steps to seek mental health support. By utilising a space that already exists within the community, the hope is that this will start the ball rolling for a permanent community space.

To ensure that the ideas such as St Margaret's can be successful an understanding of the further costs for a bigger project need to be understood.

> "The hall does need a bit of repair, a bit of TLC. It's just a case of making sure people can access it but sometimes it isn't easy because there's underpinning costs".

Therefore potential guidance to apply for bids or investment from the local council is needed to support the creation of such community spaces and ensure that venues are fit for purpose and can therefore, continue to serve the community for a long time.

Much like the findings from Pier Ward, Berechurch also suffers from incidents of crime which have an impact on the local community. Looking at crime data from the local area over the last 12 months, violence and sexual offences are the highest recurring crime. Violence and sexual assault is highly prevalent, especially within Berechurch and the surrounding areas.
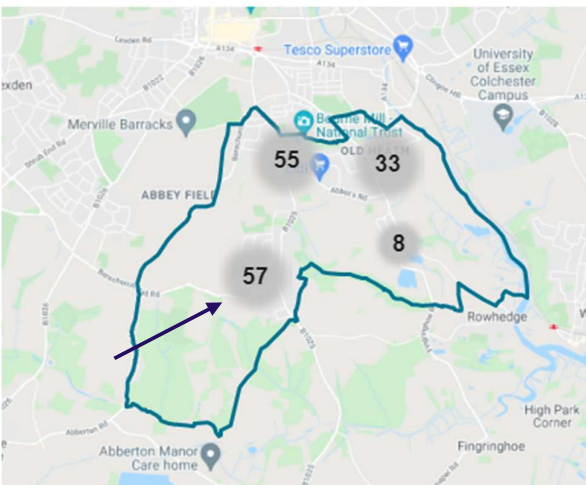
"There is a fair amount of low-level crime that occurs that probably would make people feel quite edgy in the evenings".

Much like Pier Ward, residents in Berechurch also have reservations about going out, especially at night. One such incident of violence was against the Family Hub, which in October 2020 was vandalised, with windows broken, trees uprooted, and the garden set alight[24]. When on a walk round of the local area for engagement, one resident expressed their thoughts.

"Just the other week one of the shops up the road got broken into. There seems to be a lot more burglaries lately and I have to walk along a path which isn't lit well at all, and it does make you anxious".

As we have already seen, feeling worried about going out because of crime can have an effect on your mental health. The community hub in Pier Ward enables people to have a space to speak with others and increase their confidence. If a community centre or similar was available for residents within Berechurch, this could provide a safe space for discussion of issues such as crime and anti-social behaviour.

Support for families

According to local organisations, the demographic of residents within Berechurch and the surrounding areas has changed considerably over the years due to the number of new builds. With the town also being situated near to the local garrison, there are many families who are temporarily housed or move into the area quickly.

"There's an older demographic who bought their council houses. But with the new estates, there are more families and also more families coming in from further afield to go to school because the schools in the town centre are full".

Of course, with new residents and also other families accessing services the need is far greater. What's also prominent is many families with differing situations to support.

"There are a lot more newcomers coming in, families who have moved from other areas such as Harlow or done housing exchanges. We also take in a lot of women's refuge here or families in temporary accommodation".

This demographic with various needs makes the demand for community much more prevalent. With more families in the area, this responsibility has been largely felt by the local schools.

"The lack of community centre, that's where the school tends to be called upon. We pride ourselves on our relationships with parents and that we have a very open-door approach. We have a brilliant family support worker who will work in the community as well as in the school and they are great at signposting and supporting families to be able to access other support out there".

There is a support worker within the schools available to help many families and provide a safe place for advice and guidance. This is especially important in Berechurch due to the many different circumstances that are presented to families. The schools have been a massive part in supporting mental health of families in Berechurch.

---

[24] https://www.councillordaveharris.com/2020/10/15/campaign-to-stop-vandalism/

"It's often difficult for families: lack of stability for them, often vulnerable families as well as a number of complex needs. So the school tends to feel like a safe space. It's important, especially with the young children starting school to build good relationships so they can have a good start".

"We talk about anxiety and depression predominantly. I think anxiety around living conditions, financial concerns, often in quite vulnerable situations at home. Quite a lot of young parents have experienced domestic violence and domestic abuse. Many also have diagnosed conditions such as personality disorder".

Participants highlighted that, for parents especially, some are not in suitable living situations which in turn has an effect on mental health. It's not just one thing that has an effect, but an accumulation of multiple triggers that all need further support. One way families can access support is though the family hub.

The family hub is great for offering parents and carers sessions to support the development of their child as they grow, but organisations believe there are gaps when it comes to the services in the area.

"I think there are definitely gaps in support for debt management, for wraparound care. We have quite a lot of families that struggle with the wraparound. We try and provide some at the school, but we don't have anything other than after-school clubs".

Participants believe that something like a community centre would be the perfect place to provide such services such as debt management that could have wider benefits if managed correctly for not only families but other individuals within the community.

"I do think Berechurch is missing a community space. I know from previous roles that was what we try to achieve with the children's centre but this was very focused on children so it wouldn't be a great space to want to bring a group of adults into".

Furthermore, the schools believe more could be done by other agencies as they feel their role is dealing with issues outside of their remit. A community centre would enable this focus on other social issues and take some of the responsibility away from just the schools.

Berechurch Family Hub

Provided by Virgin Care in partnership with Barnardo's, the Berechurch Family Hub next to the Monkwick primary school is available to all families locally in the Colchester district. The Hub welcomes 'children, young people and their families and helps provide access to support and services to help children and families achieve the best start in life'. Activities offered range from speech and language therapy, infant massage and singing sessions. The Hub is free and allows people to have easy access to local public health services in their community. During the pandemic services had been affected but now the centre is beginning to offer frequent sessions once again.

"We are a school; we can't keep constantly picking up these things because we are literally on our knees trying to support. We are doing the role of things which would never have come into the school".

There is a clear need through collaboration of agencies to help support and provide services to the residents of Berechurch which in turn will improve on individuals' mental health and well-being.

Impact of Local Council

When looking at the best way to approach residents in Berechurch to engage with, Cllr Dave Harris was a repeat suggestion. A Councillor for many years, Dave lives within the estate, trying every day to get out on the streets to speak with local residents. When on a walk round of the area alongside Dave we experienced first-hand his commitment and passion. One of his latest projects was working on a new piece of artwork for the local park.

What was originally installed as part of the 2012 Olympic Games to encourage fitness in children, the park needed a fresh look, especially the back of the basketball hoop. It made sense to commission a local artist to design a new mural of famous basketball player Michael Jordan. For Dave the hope is that 'this will inspire and enthuse the next generation to be hopefully Olympic champion contenders.[25]

Dave is also encouraging locals to get moving, by introducing a new 'Get Monkwick Moving' scheme that will see bike sessions for residents, cycle/walking routes & a free 'bike doctor' for repairs. Using locality funding available through the council, the scheme will hopefully promote healthy habits which in turn, can support an individual's mental health.

What was clear with Dave was his love for the local area and that his continuous work in improving the space for local residents was paramount. The number of people who recognised him when walking down the street highlights the real presence he has within the area. Clearly the effort made by local Councillor to improve the lives of residents through various factors can have a huge impact on the local community and their mental health.

Photos taken of new mural artwork at park near Monkwick School- November 2021

[25] https://www.councillordaveharris.com/2021/08/21/new-art-mural-for-monkwick/

Recommendations

Thematically, we would like to highlight a number of barriers, enablers and interdependencies which are visible and will have been referenced in previous asset mapping reports produced by Healthwatch Essex, Community360 and CVS Tendring.

Barriers to accessing services

1. Transport – in Tendring in particular, the paucity of public transport; infrequent nature of services and prohibitive costs present challenges
2. Lack of confidence and low self-esteem influence individuals' accessibility to activities
3. Health Inequalities – there is a key role for commissioners and providers to respond to pre-existing inequalities and to inform how and where we invest time, talent, and funding

Enablers

- More permanent services, which offer long term stability for local people
- Early Help services which build personal resilience and emotional wellbeing
- Advocacy which provides and helps to negotiate targeted assistance
- Sense of identity of place helps engagement with assets as it generates community ownership and value
- Peer networks are highly prized and effective facilitators of change

Independencies and Considerations

- The emerging Neighbourhoods programme under the management of the Health and Wellbeing Alliance will necessarily influence the development of community capacity and connection within the areas identified
- There are some distinct communities which may operate services with clear eligibility criteria – for instance those which support Armed Forces or Veterans
- National charities and helplines, as well as online groups, provide important tools for our communities to use. Our understanding of their role alongside local assets requires further exploration

Recommendations for the Feel Well Domain

1. **Tackle the continuing challenge of stigma**
   As a society, we speak more openly about mental health now, but this is not applied equally across all cohorts and not yet without fear or challenge.

   Example 1- *citizen's voices found that younger adults were more open to conversations and more likely to engage in the consultation. It was harder to gain access to the thoughts and experiences of older, working age adults. Respondents did describe the power of stigma.*
   Example 2 - *The Haven Project have highlighted the importance of language with the term 'personality disorder' associated with stigma. Clients may prefer the term 'complex trauma'.*

2. **Review and improve pathways and communications**
   We recommend reviewing the promotion and presence of mental health support services across Alliance partners' websites and resource packs, offering clear

explanation of pathways, starting with community resources. We have consistently heard that language and earlier intervention are a primary concern.

Example 1 - *public sector providers are prioritising national rather than local assets online*
Example 2 – *citizen's voice work references experiences of people who found access to pathways challenging*

3. **Prioritise holistic assessments of need to include wider determinants of health**
The role of 'economic stress' and financial hardship is threaded throughout this report. The advancement of multi-disciplinary meetings under the Neighbourhoods programme will enable partnerships to review many different needs. However, we should seek as many ways as possible to tackle this looming concern as it is anticipated to grow.

Example – *the relevance of financial sustainability and deprivation is evident. The speed at which Household Support Funds were distributed is just one demonstration of this.*

4. **Build a practical Mental Health Assets Map to support practitioners**
Navigating the range of support available is a challenge. In compiling this report and seeking feedback from practitioners they have asked for practical solutions. This may be a searchable map but also more directly a process of developing relationships.

Example – *in order to promote hyperlocal funded projects to frontline teams, briefing papers have been shared with the Neighbourhood Operational team and a 'show and tell' meeting arranged for partners to attend to meet the groups and build relationships.*

5. **Adopt a spectrum approach to our understanding of 'Feel Well'**
We must broaden promotion and understanding of good mental health across a wider spectrum to encourage earlier intervention and access to services. Social isolation is a strong feature and an area of increasing need. Referral rates to services have grown in recent years.

Example – *websites often rely on language that require existing diagnosis rather than earlier intervention*

6. **Widen our programme of training provision – focus on resilience**
We must respond to the increasing complexity of need and the knock-on effect this may have within our communities, especially for frontline VCSE groups. There has been a continued roll out of training, including Mental Health First Aid and Suicide Prevention, but many groups maintain longer term relationships with local citizens and would benefit from a greater focus on resilience for their contacts, staff, and volunteers. ACL Essex have free courses on building personal resilience – Introduction to Building Resilience, Self-care for Resilience and Managing your resilience.[26]

Example 1 – *the increasing complexity of needs is placing additional pressure upon*

---

[26] Courses.aclessex.com

volunteers and staff, who register concerns about their own health
Example 2 – *where groups access training it is often about crisis management or distress, rather than building social capital and positive relationships over longer periods of time. This kind of support is key.*

7. **Increase capacity and manage resources smartly within the voluntary and community sector**
Supply is not yet meeting demand. VCSE groups are identifying new ways in which they can support local people. Local services are seeing the effects of managing complex need in the way in which they can manage their workloads. Another potential solution is the pooling of available resources for greater impact and sustainability. Throughout the course of consultation on this programme, VCSE organisations have suggested different ways in which resources can be best managed to support the need. The joint recruitment of volunteers into a shared pool with appropriate training is one of the suggestions made but further consultation is needed to identify all of the opportunities. This is supported by a strong local infrastructure.

    Example 1 – *social prescribers record that a proportion of people referred are requiring increased numbers of interventions over longer periods of time, with greater follow up*

    Example 2 – *Citizen's Voice in one ward spoke of an asset deficit – focused on the lack of a centralised community centre. However, participants spoke of different assets they accessed but compartmentalised them into discrete categories.*

Actions of the Feel Well Domain

1. **Adopt the recommendations and integrate the findings into the Domain action plans**
2. **Co-ordinate a community fund to invest in local delivery and assets that**
    a. Target suicide prevention
    b. Supporting people with complex mental health needs
    c. Tackle loneliness and social isolation
3. **Develop a working team around the domain, including VCSE partners, which can encourage access to appropriate pathways, enhancing and developing them where needed – this will be overseen by the Domain steering group**
4. **Work across the Domains to concentrate providing responses to cross-cutting themes – especially 'economic stress'**
5. **Improve the provision of information for practitioners, including the asset map, by supporting the development of tools that can be trialled within the Neighbourhoods programme and Live Well Neighbourhood Teams (LNT)**
6. **Review current training offers in the community and address any gaps as appropriate**

Appendix A

Literature Review

Mental Health Foundation website and articles

Coronavirus: the consequences for mental health: London MIND, July 2021

Covid-19 and the Nation's Mental Health: forecasting needs and risks in the UK, Centre for Mental Health, May 2021

Health Profile for England 2021

ONS Quarterly Suicide Death Registrations

Covid-19 Mental Health Intelligence Network, Government Office for Health Improvement and Disparities, last updated November 2021