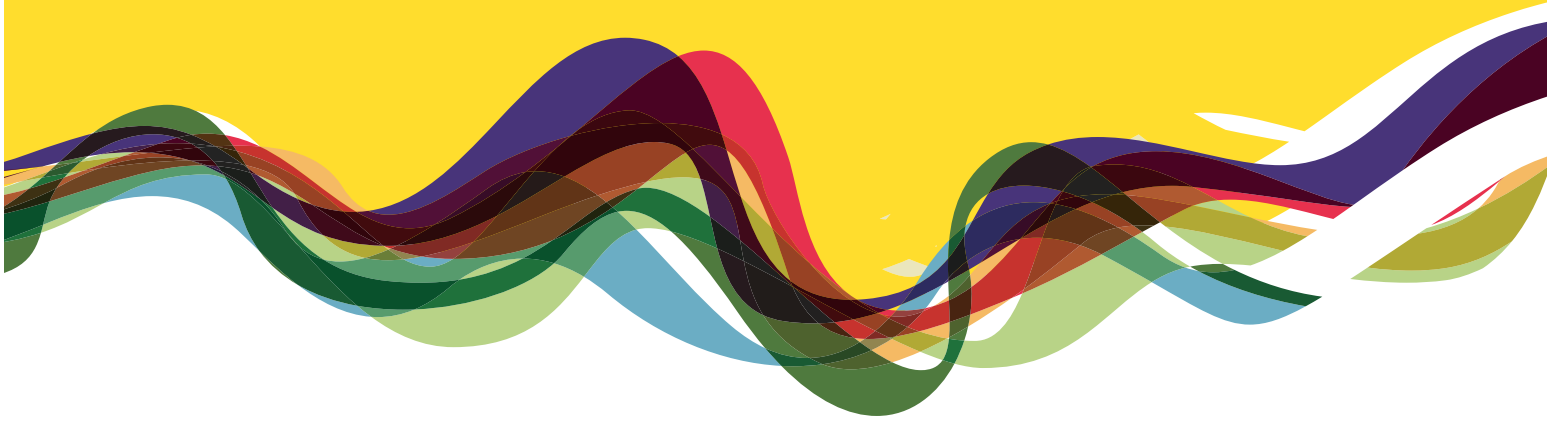


West Midlands
CHARTER
for Mental Health and Well-being



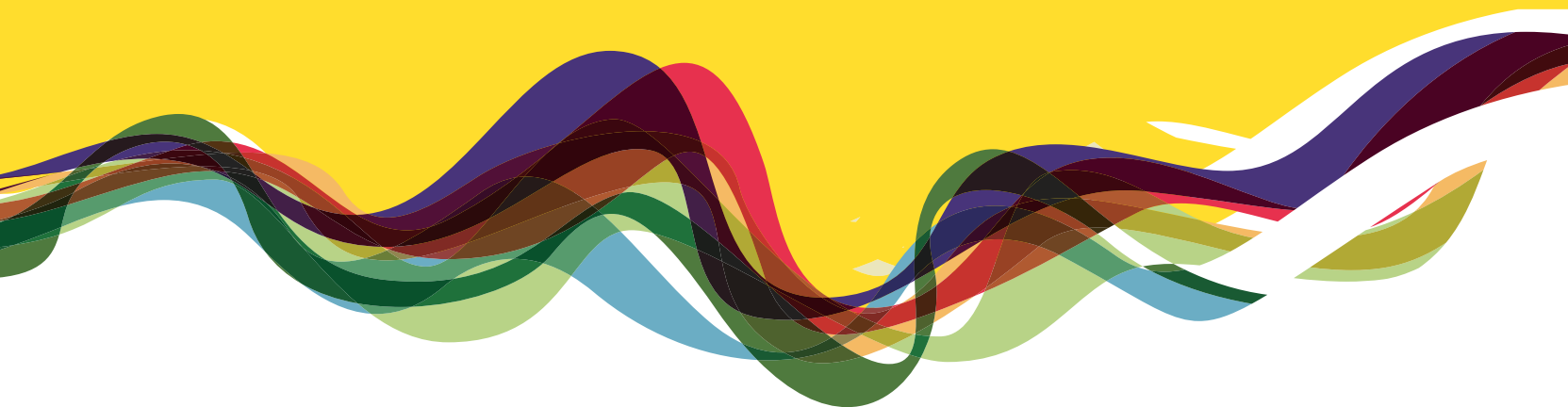
THERE IS NO HEALTH WITHOUT MENTAL HEALTH

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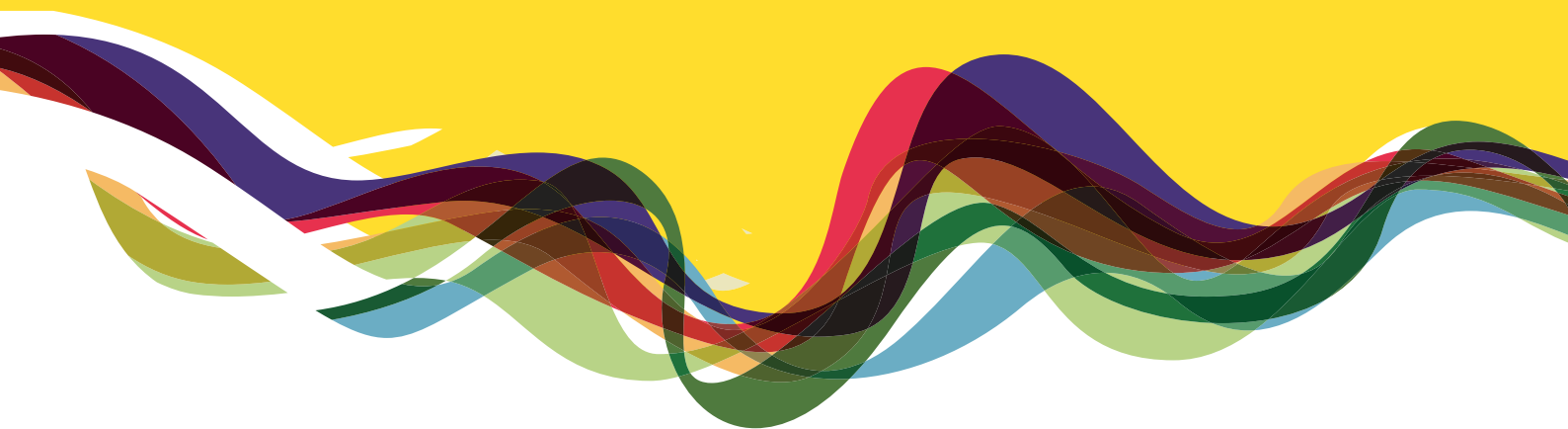
Signing the West Midlands Charter for Mental Health and Well-being
Further Information



Sharing a Vision

“There is no health without mental health. . .Mental health and mental well-being are fundamental to the quality of life and productivity of individuals, families, communities and nations, enabling people to experience life as meaningful and to be creative and active citizens.”

(WHO European Declaration on Mental Health 2005)



Introducing the Charter

The purpose of this Charter is to:

- Establish rights and aspirations for mental health and well-being in the West Midlands.
- Set out how individuals, communities and organisations can benefit from, and contribute to, mental health promotion.
- Set out the principles of effective mental health promotion, to inform action.
- Encourage and inspire individuals, communities and organisations to play their part in promoting mental health and well-being in the region.

Signing the Charter:

- Demonstrates a recognition of the rights, responsibilities and principles for mental health promotion it outlines
- Shows a commitment to play a part in improving mental health and well-being in the region, in line with these rights, responsibilities and principles
- Is voluntary and involves working towards the aspirations for mental well-being and mental health promotion it sets, not their immediate fulfilment.
- Will however be seen as a public and tangible commitment to achieve these aspirations, a commitment that each Charter signatory will be asked to demonstrate

The content of the Charter is based on Making it Possible: Improving Mental Health and Well-being in England (Department of Health, 2005). This national guidance sets out the priority

areas for action to promote mental health, which are reflected in this Charter for the West Midlands region.

Beyond this framework, the Charter does not and could not address every area of, or potential setting for, mental health promotion activity. However, it should offer some broad, generic principles to guide action in any arena. If you work within a setting, or with a target group that is not directly addressed in the Charter, and would like specific guidance to develop mental health promotion activity, you will find useful sources of information and expertise listed at the back of this document.

The Charter has been written to appeal to as many people as possible. However, some sections are aimed at people in a specific setting or professional group and so use their particular terms and language.

West Midlands Charter for Mental Health and Well-being

Sharing a Vision

“There is no health without mental health...Mental health and mental well-being are fundamental to the quality of life and productivity of individuals, families, communities and nations, enabling people to experience life as meaningful and to be creative and active citizens.”

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We all have the right to good mental health

Everyone has the right to enjoy life, to be able to deal with its challenges and to share in a positive sense of emotional well-being and a respect for equity and social justice.

People experiencing mental distress have the right to recovery, to lead a full and fulfilling life, and to achieve their goals for mental health and well-being.

As individuals and communities, we should aspire to good mental health and demand the conditions, opportunities and resources we need to achieve it.

Our framework for action is 'Making it Possible: Improving Mental Health and Well-being in England'. It sets out the

national priorities for action and how we can all benefit from, and contribute to, action to promote mental health.

What can we gain? What can we do?

For individuals, mental health promotion builds resilience, self-esteem and improves overall health and quality of life. Individuals can play their part by increasing their knowledge of mental health and taking positive steps to look after their own and others' mental well-being.

For families, mental health promotion strengthens relationships, promotes social and communication skills development, increases resilience and reduces anti-social behaviour in children. Organisations working with families can play their part by providing support and parenting skills training for parents and caregivers, supporting victims of domestic violence and reducing the acceptability of violent behaviour.

In communities, mental health promotion reduces the stigma surrounding mental health problems, improves social cohesion and contributes to suicide prevention. Communities can play their part by tackling isolation, exclusion and discrimination, encouraging social participation and social support and getting involved in decision-making which affects their quality of life.

In Primary Care, mental health promotion gives professionals and patients more options and reduces the burden of frequent attendance. Primary Care can play its part by offering a broad range of non-medical responses to mental well-being issues, signposting people out to resources and sources of support in the wider community.

In health and social care, mental health promotion promotes social inclusion and recovery. Health and social care can play its part by providing choice and a wide range of support for people of all ages with mental health difficulties, including non-pharmacological approaches and physical health promotion, and by reducing inequalities in access to this support.

For local authorities and public health, mental health promotion contributes to better public health. It improves physical health and increases people's ability and motivation to choose and adopt healthy lifestyles. Public health can play its part by championing and investing in mental, as well as physical, health promotion, and ensuring that mental health is embedded within the Local Area Agreement.

In schools, mental health promotion raises levels of attainment, improves behaviour and is essential to achieve Healthy School Status. Schools can play their part by implementing the SEAL (social and emotional aspects of learning) programme, introducing anti-bullying policies and providing opportunities for young people to be actively involved and make a positive contribution in school and community life.

In workplaces, mental health promotion can increase productivity and morale and reduce staff turnover and sickness absence. Employers can play their part by creating a mentally healthy workplace that meets the Health and Safety Executive's standards for managing stress at work, and which takes a positive approach to recruiting, supporting and retaining people with mental health problems.

Principles for Action

The rewards of mental health promotion for individuals, organisations and society as a whole are significant. For these to be achieved, mental health promotion must reflect the following principles and approaches:

Mental health promotion aims to increase the factors that promote mental health and reduce those that undermine it. These determinants of mental health are numerous and include living conditions, education, income and employment, social support, personal competencies and access to community resources. They operate at the level of the individual, the family, the community, the organisation and wider society. Action is required at all these levels.

For individuals, mental health promotion enables people to understand their mental health and develop the knowledge, skills and abilities that will allow them to enjoy mental well-being and manage mental distress.

To be successful, it also needs decision and policy makers to create environments that promote mental health and allow people to attain mental well-being.

Recovery and mental health promotion share a common goal; to enable people to lead fulfilling lives, and achieve their potential for mental health and well-being.

Mental health promotion priorities will be locally defined but must be informed by evidence of need and effectiveness to achieve the greatest impact with limited resources.

A Call to Action

The remit for mental health promotion is broad; so must be the mental health promotion workforce.

Mental health promotion is everybody's business. Individuals, families, communities and organisations must take up the challenge of creating better mental health and well-being for all.

Where we are now?

The Charter for Mental Health and Well-being sets out the vision we aspire to achieve in the West Midlands.

Currently in the West Midlands:

- Around 45,000 people experience stress, depression or anxiety caused or made worse by their work, resulting in an average sickness absence of almost 6 weeks in a year for each individual affected.
- The rate for suicide and undetermined deaths is the third highest among the regions of England
- Mental health problems are more likely to be reported by women, people living in the most deprived areas of the region and people from black and minority ethnic communities.
- Around 70,000 children are likely to be experiencing moderate to severe difficulties due to mental illness. However the region's investment in Child and Adolescent Mental Services is significantly lower than the national average.
- 9% of the UK's Incapacity Benefit claimants are based in the West Midlands. 38.5% of those claiming Incapacity Benefit in the region – 94,600 people - are claiming for reasons of mental ill-health.
- Suicide in older people is a cause for concern. There were almost 700 deaths from suicide in the 60+ age group in the West Midlands between 1995 and 2004.
- There is a public demand for better mental health. Ensuring a greater focus on mental well-being was the second highest priority identified at the national Citizens' Summit in Birmingham, for the Our Health, Our Care, Our Say consultation in 2005. People recognise the importance of mental health and want action to help them improve and maintain their mental well-being.
- Making It Possible provides national guidance for this action, and local mental health promotion strategies the means of implementation - the White Paper, Our Health, Our Care, Our Say, recognises both as key to delivering effective mental health promotion, and meeting the mental well-being needs of the population.

Sources:

Choosing Health for the West Midlands. Department of Health/ Government Office for the West Midlands (2006)

West Midlands Regional Lifestyle Survey: National Institute for Mental Health in England Annex. West Midlands Regional Observatory, 13 June 2006

Older People and Suicide. CSIP (2006) Beeston, D.

Our Health, Our Care, Our Say: a new direction for community services. Department of Health (2006)

Official figures on Incapacity Benefit provided by Jobcentre Plus

Taking up the challenge – what we can do

We can all contribute to improving mental health – see the following examples.

Everyone can

- Take care of their own mental health through regular exercise, healthy eating, sensible drinking, taking time to relax, doing something creative, learning new skills, getting involved in community activity, talking about their problems and asking for help when needed.
- Be there for family members, friends and colleagues under stress who need someone to listen and offer support.
- Learn how to recognise the signs and symptoms of mental health problems and where to access help.
- Actively challenge stigma and discrimination in relation to mental ill-health.

In families, parents and care-givers can

- Give children and young people time and attention – by doing things together and taking time to listen.
- Build their self-esteem with praise, encouragement, affection and support.
- Provide clear and consistent boundaries.

In our communities, we can

- Get involved in community life and activity and encourage others to do the same.
- Work to improve our local environment.
- Use opportunities to get involved in local decision-making that affects us.
- Actively promote social inclusion.
- Make use of the sources of support for well-being available within the community, such as local leisure and recreation facilities, green spaces and faith and other community organisations.

In schools, teachers can

- Work towards Healthy Schools accreditation.
- Implement the SEAL (social and emotional aspects of learning) programme.
- Develop their school grounds with the participation of the whole school community to create a mentally healthy environment for play and outdoor learning.

Colleges and universities can

- Involve staff and students in developing a mental health promotion policy for the organisation, to ensure its culture, environment, policies and procedures contribute to mental well-being.
- Use curriculum opportunities to raise mental health awareness, for example by building mental health into media and journalism courses to ensure sensitive and accurate reporting of mental health issues, or into teacher training courses to ensure future teachers can recognise mental health problems in their students and refer on to appropriate support.
- Provide information to staff and students on how to look after their own well-being and the sources of support available should they have concerns about their own, or someone else's, mental health.

In workplaces, managers can

- Work to the Health and Safety Executive's Management Standards for Stress.
- Ensure they are meeting their legal obligations for mental health at work under the Disability Discrimination Act and Health and Safety legislation – these include addressing mental health within risk assessment and making reasonable adjustments for staff with mental health problems
- Undertake training in managing well for good mental health at work.

Local Authorities, Local Strategic Partnerships, Primary Care Trusts and Primary Care can

- Assess the extent to which they are contributing to mental health promotion and identify areas in which they could do more.
- Ensure their services tackle as many of the determinants of mental health as possible and that mental health is a consideration in planning and decision-making.
- Develop a mentally healthy workplace and a representative workforce which includes people with experience of mental health problems.

In health and social care, commissioners can

- Use contracts and Service Level Agreements which require a commitment to mental health promotion.
- Ensure funding is directed towards mental health promotion, not just the treatment of mental ill-health.
- Champion mental health promotion within service development.

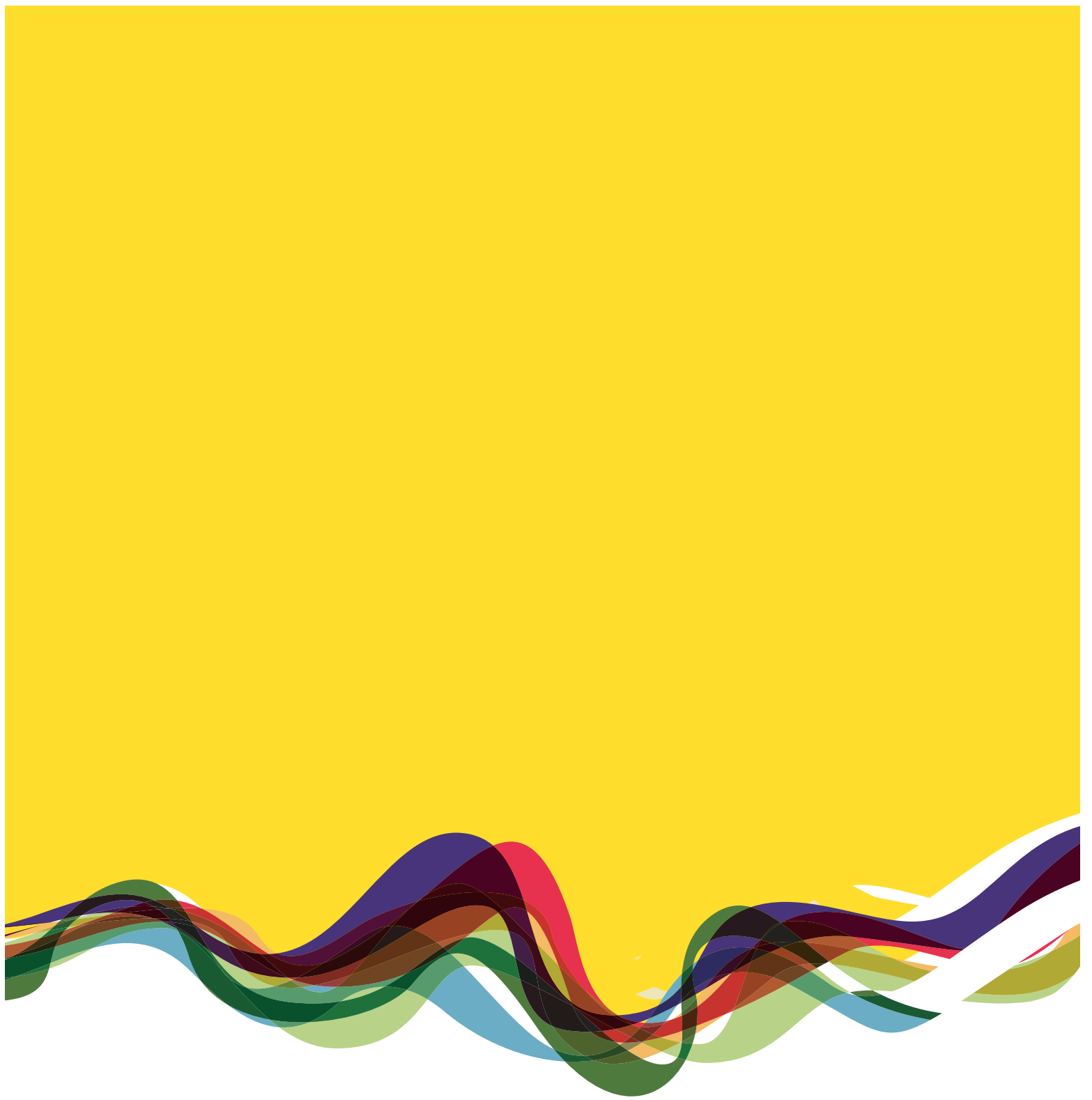
Information Sources

www.healthyschools.gov.uk

www.hse.gov.uk/stress/standards

www.drc.org.uk (For information on the Disability Discrimination Act)

Top Ten Ways to Promote Positive Mental Health in Adult Education. NIACE.



Care Services Improvement Partnership **CSIP**

West Midlands
Development Centre