**Creating Conversations**

**About older people’s mental health and wellbeing**

**What we are hearing, February 2017**

Creating Conversations is a one-year project that is opening up conversations about older people’s mental health and wellbeing. The project runs to summer 2017 and is supported by the Scottish Government through the Promoting Equalities and Cohesion Fund.

People are having conversations with colleagues and friends. The people who have been contributing include

* Older people
* People who have mental health problems – those aged over 65 and those who are looking ahead to they types of support they want
* Workers and volunteers in community mental health projects
* Staff who work in mental health services
* People working in services for older people, including staff in care homes.

These are some of the things we are hearing.

**Awareness and experience around mental health and wellbeing**

The experience of most people who have been part of these conversations is that mental wellbeing is not something that older people talk about, even though so many older people have poor mental wellbeing and worry about this.

Some people and organisations – and the media - are talking about loneliness among older people and sometimes seem to equate this with depression or other aspects of poor mental health. The general view is that this is not helpful, as depression and loneliness are 2 different things. Encouraging people to have more connections with other people may help in both cases as part of the response. But linking them is adding to misunderstandings.

The experience of older people who had got support for their mental wellbeing is positive. Their message to other people is to tell people like your GP about how you are feeling.

Once someone does feel able to talk about mental wellbeing, including having mental health problems, it usually opens up the topic and other people feel more able to talk about their experiences and situation.

Some of the conversations happened around the time the report from the work led by Action in Mind and supported by See Me was published. This has been an important step in making people think about what happens as people who live with mental health problems get older.

**Access to support and care**

In most places people find that it is harder for people aged over 65 to get access to specialist mental health services. They seem to wait longer and to be offered less support especially from psychological therapies.

In some areas people are getting access to mental health services when they need it, so it is possible to make access work well.

Staff who work in mental health services would like to be able to offer more support to older people.

Sometimes the mental health supports that are there are time-limited, or end when the therapeutic aims have been achieved. But people can then struggle when the social contacts end and/or the underlying difficulties in their situation have not changed.

Access to community-based support is usually much easier. Some people find that being around more people and doing activities that help their mental health make a difference. The examples people gave included gentle exercise and walking, arts, craft groups, adult learning, music groups, film clubs and encouragement to eat well.

Some people have access to community supports that have an intentional focus on supporting people’s mental wellbeing. It is a similar range of activities, but the support from workers and help around understanding symptoms and managing your mental health and wellbeing give this support an increased impact.

There are more community supports and they are more effective at supporting older people who have poor mental health and wellbeing and preventing poor health than staff in some health settings realise.

The support that people get from family and friends when they do talk about their feelings and experiences is mostly positive, and sometimes more positive than the person was expecting.

Peer support among people in equalities groups is very important, such as among older LGBT people.

***Mental health and wellbeing of family carers***

One group of people who find it hard to get support for their own mental health and wellbeing are people who are, or have been, family carers. The barriers that people often describe include

* Conversations with GPs and services focussing on the person they care for rather than about them
* Conversations that are about them focussing on the physical aspects of being a carer and avoid the emotional aspects
* Not wanting to acknowledge how they feel and when they are struggling with poor mental wellbeing
* Support ending when the person they care for dies, but the carer is finding it difficult to regain or make other connections in their community or to cope with their feelings of loss.

People who are carers are also getting access to support from friends and from networks with other carers. Many people describe how much these help, even if there is no explicit conversation about mental wellbeing.

**Process – having the conversations**

The feedback on the conversations themselves has been very positive.

Older people and people who have lived with mental health problems found it was good to have the space to talk about this topic. Many people referred to having ‘permission’ to talk about mental wellbeing or to talk about growing old, as these are not conversations that usually happen. Once people had an initial conversation, they found it easier to continue the discussion. Individual people who took part have also found it easier to ask for support for themselves.

Staff find it useful to meet and have these conversations a wider rage of people. They find more resources that can benefit the people they support. People also find it useful when staff in services for older people and mental health services come together, to understand what each is doing and can offer the other.

People in a few locations have decided to continue the conversations and to involve other people. Ideas include a small regular discussion group and bigger workshops that will bring together a wider range of people.

**How the future could look**

The main change people want to see is conversations about older people’s mental health and wellbeing: for older people and their families and friends, for services making it natural for people to raise this, and services thinking about what they do to support older people’s mental wellbeing as well as other aspects of their wellbeing.

People in all locations and roles want to see more prevention and early support around older people’s mental health and wellbeing.

This is linked to raising awareness among older people and among families and professionals about older people’s experiences of poor mental health and the ways in which people go on experiencing good and poor mental wellbeing throughout our lives.

People in several areas have suggested See Me doing more national work around mental health and older people – both for people who have lived for many years with mental health problems and for people who are experiencing this for the first time when they are older.

Similar work by health promotion teams and staff in Health and Social Care Partnerships would also be good. There are opportunities for older people and for community groups and voluntary sector services to also be part of this.

There are opportunities for mental health services and services supporting older people to work together, to raise the skills and confidence of people working in older people’s services to talk to people about their mental wellbeing and know how to respond.

**Being part of the conversation**

We would like to hear from more people who are having conversations about these topics.

There is more information at <http://otbds.org/projects/raising-awareness-of-older-peoples-mental-health-and-wellbeing/>

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