Stigma, social exclusion and mental illness in Northern Ireland: findings from a needs assessment in day support services

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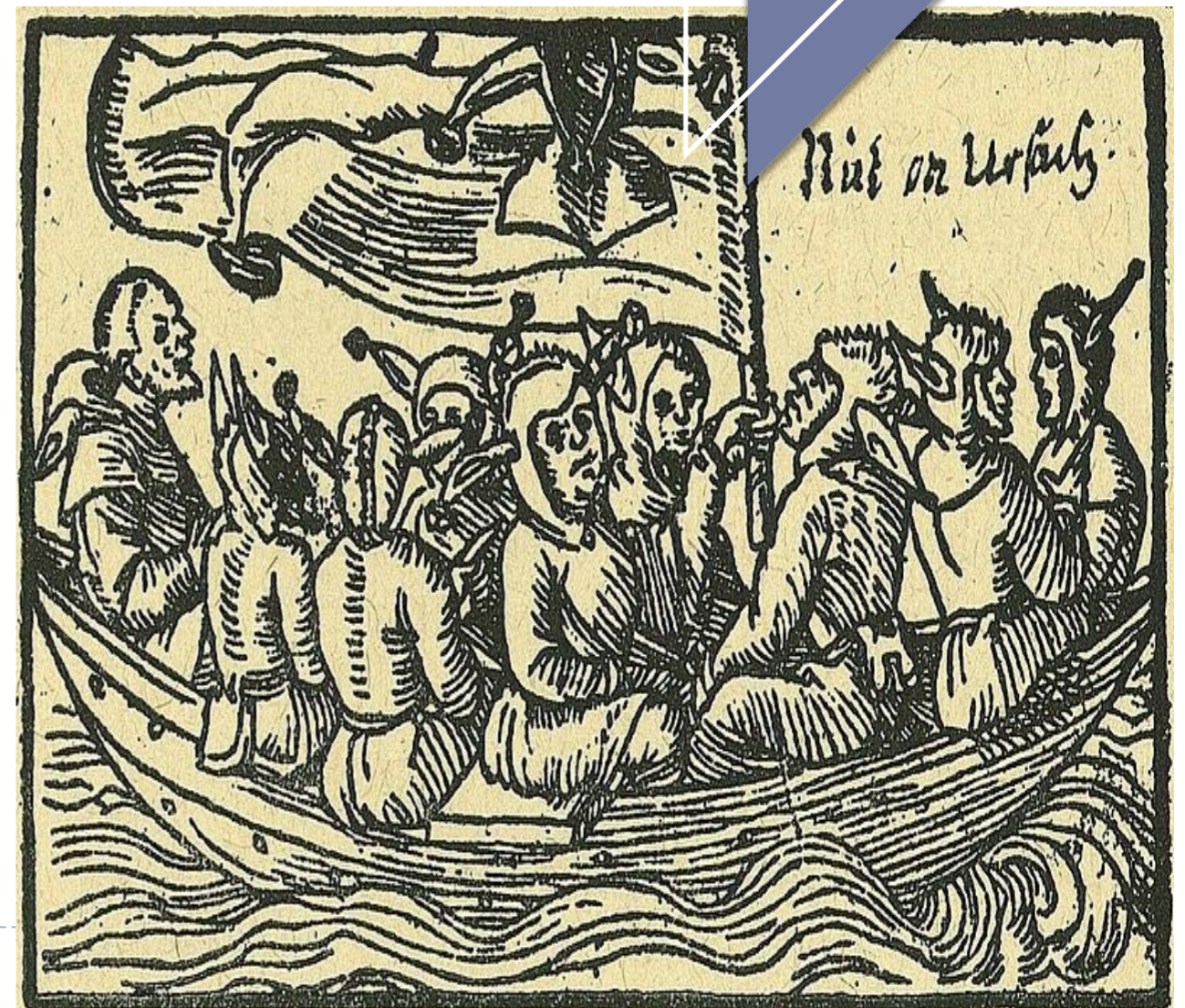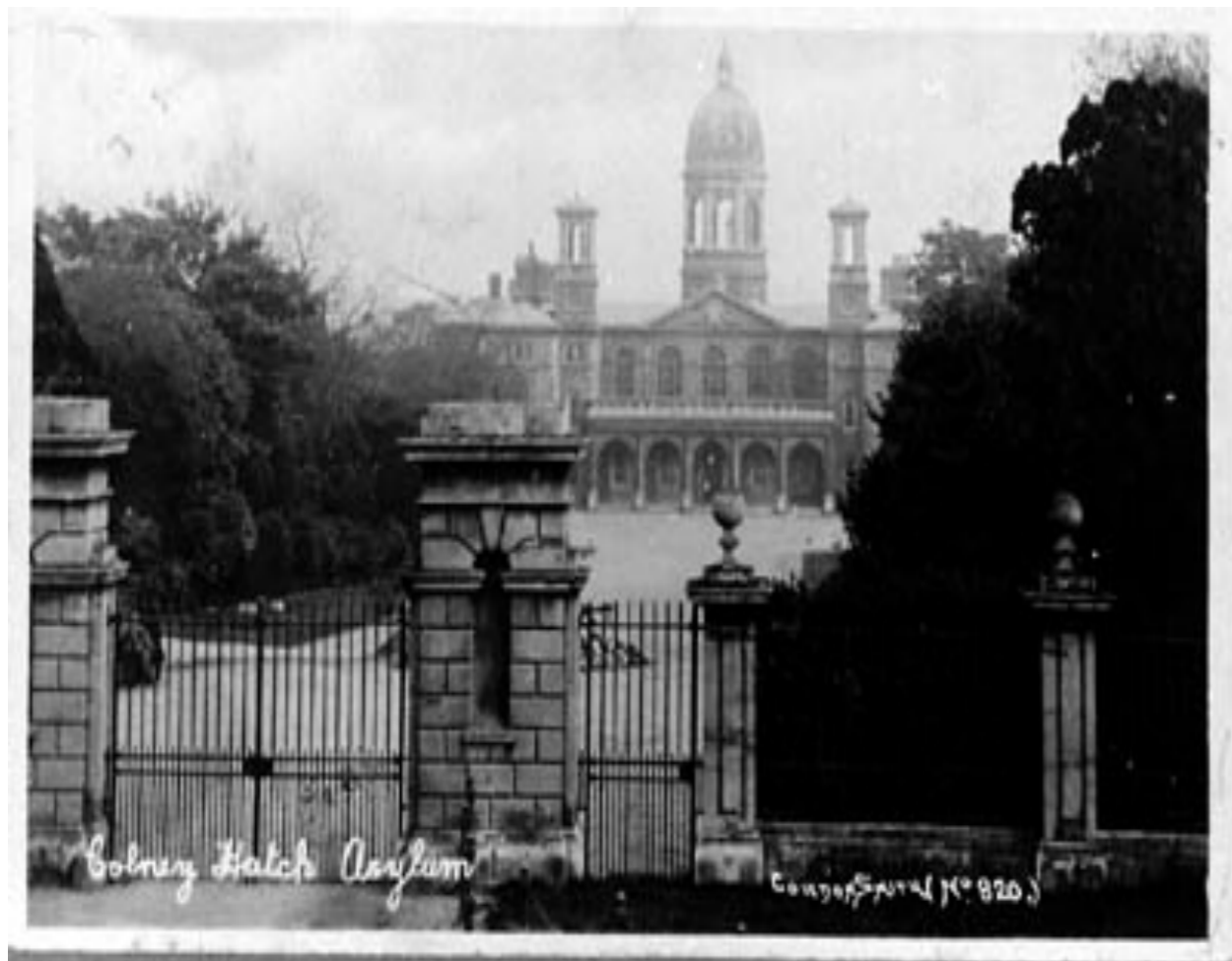& Northern Ireland Association for Mental Health

OUTLINE

- Day services context
- Preliminary findings: A needs assessment of service users attending day support services
- Areas of concern

Gated communities

£2,500,000
3 bedroom penthouse for sale Princess Park Manor Royal Drive Stylish living, set in the impressive development Princess Park Manor surrounded by thirty acres of attractive parkland this property This is the opportunity of a lifetime. The Dome Penthouse offers everything you could need for is arranged over six floors with a stunning outlook from the Dome

- People with MHP were amongst those groups that had seen the least benefits from various policies to tackle disadvantage (SEU 2004)

- MI - the lowest employment rate for any of the main groups of disabled people.

- MI - not benefited from the same progress in tackling stigma and discrimination as other areas, such as race and sexuality.

- Current day service provision can further encourage dependency and hamper recovery

- Promote Recovery - enable people to lead full lives despite ongoing mental health problems.

- Focus on community participation – rather than creating segregated activities.

- Reduce social isolation – developing social networks with people outside the mental health system.

- Increase diversity of provision – maximise the contribution of the voluntary and private sector

- Maximise choice and self-determination

- Improve cross-sector working

Day care/support – what is it?

▸ To provide an alternative to inpatient care; to shorten the duration of inpatient stay; and to promote recovery and maintenance in the community (Marshall, 2005).

▸ *Supported employment* is a form of vocational rehabilitation that tries to place people with mental health problems in real jobs without extended preparation.

▸ *Drop-in centres* offer a non-clinical environment where people with mental illness can go for social support and activities.

▸ Ethnic and Cultural -specific

▸ Provide a sense of purpose and belonging for their clients; offer a range of services including 'drop-in' facilities (Crowther, Marshall, Bond, & Huxley, 2001)

▸ Catty, J. S., Burns, T., Comas, A., & Poole, Z. (2007). Day centres for severe mental illness. *Cochrane Database of Systematic Reviews,* (1)

▸ Heterogeneity of services and contexts

▸ Lack of any evidence that they are effective and may be harmful

Needs assessment of Day Support service users

Aims

- Explore aspects of social support, stigma and exclusion
- Examine provision and use of services
- Identify needs

- Stratified random sample (50%)
- 14 day centres across NI
- SU and volunteer involvement
- 306 interviews (76% response rate)

Measures

- Sociodemographic
- Stigma Scale (king et al)
- Rosenberg self-esteem
- Emotional and social loneliness scale (De Jong Gierveld)
- LQOL
- Physical Health
- Education & training needs
- Experience of Trauma
- Religion and spirituality

In-depth interviews with service users and staff:

expectations, use of services, activities

sample

- 55.6% female

- Mean age 52 years (majority aged 36-55 years) / 10% > 65 years

- Single (52%) Married/cohabiting (21%) divorced/separated (22%) Widowed (5%

- 55% depression / 31% SMI

- 65% first became ill >11 years (Mean years since onset 18)

- Privately owned home (33.3%; N=101) ; Housing association (25.4%; N=77); Privately rented flat (17.5%, N=53)

Employment

- 96% of SUs - previously employed
- 13.5% (N=42) - employed in the previous 5years

- Currently, 4% in part-time employment
- 1% engaged in voluntary work
- 17.4 years since SUs last worked

- Loss of skills and loss of confidence
- Feared loss of benefit
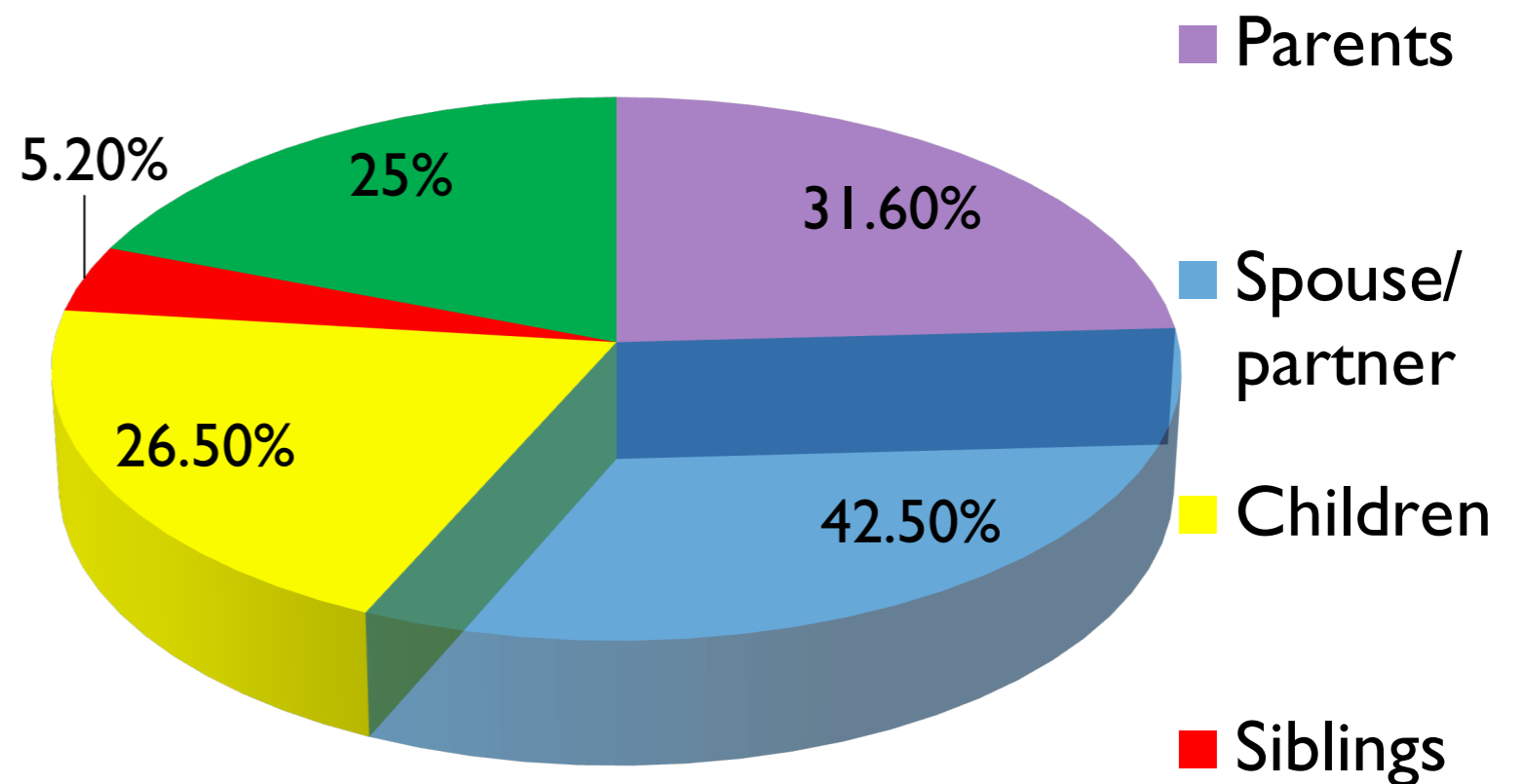- Poor support - returning to work
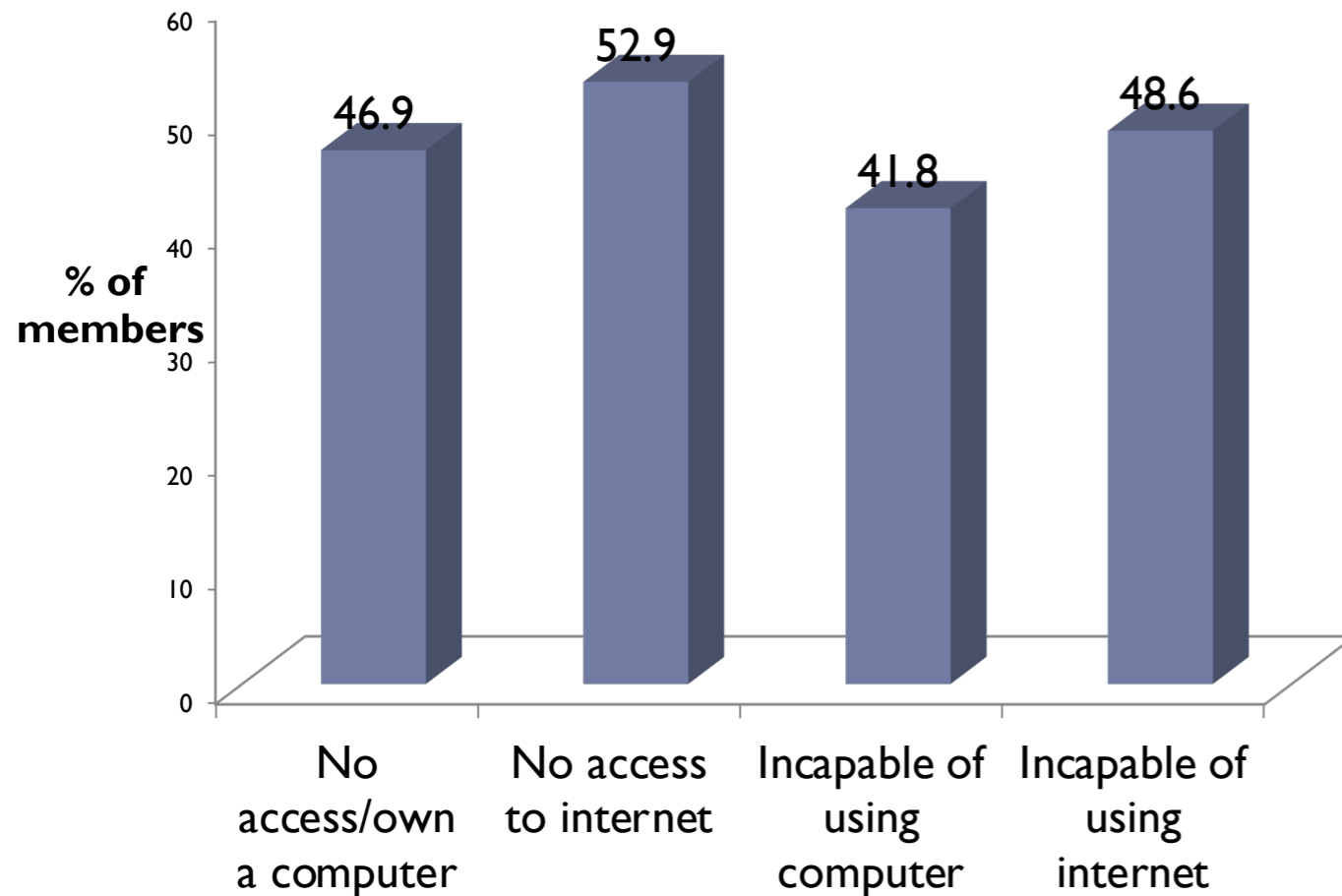- Anxiety and Stigma

Ill-health of family members

31.4%% (n=96) Living with other people with health problems.

Health problems of SUs relatives

IT access and use

Computer and Internet access and use

% of members

No access/own a computer — 46.9
No access to internet — 52.9
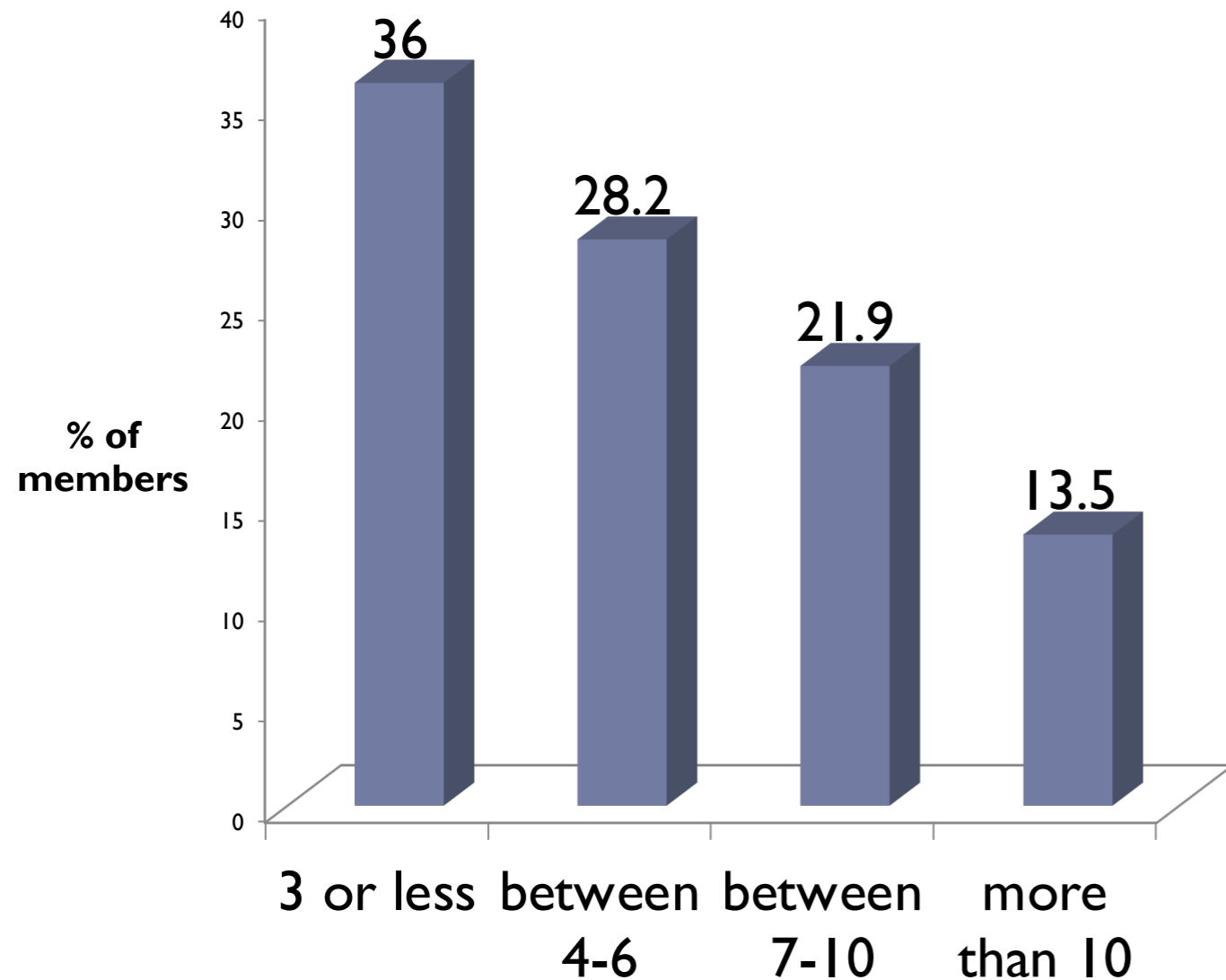Incapable of using computer — 41.8
Incapable of using internet — 48.6

- 83.5% adult population in the UK had used the Internet by the end of 2011

- Internet use associated with various socio-economic and demographic characteristics, such as age, disability, location and earnings.

- The over 65s and people with a disability - adults least likely to have used the Internet

- 34.5 per cent of disabled people had never used the internet.

- The ONS report Internet Access Quarterly Update 2011 Q4

Social connections

Number of close friends and relatives

SU Social loneliness

Bar chart values: 3 or less: 36; between 4-6: 28.2; between 7-10: 21.9; more than 10: 13.5. Y-axis: % of members.

Pie chart legend: Intensely lonely (31.70%); Quite lonely (21.70%); Moderately lonely (18%); Not lonely (28.70%).
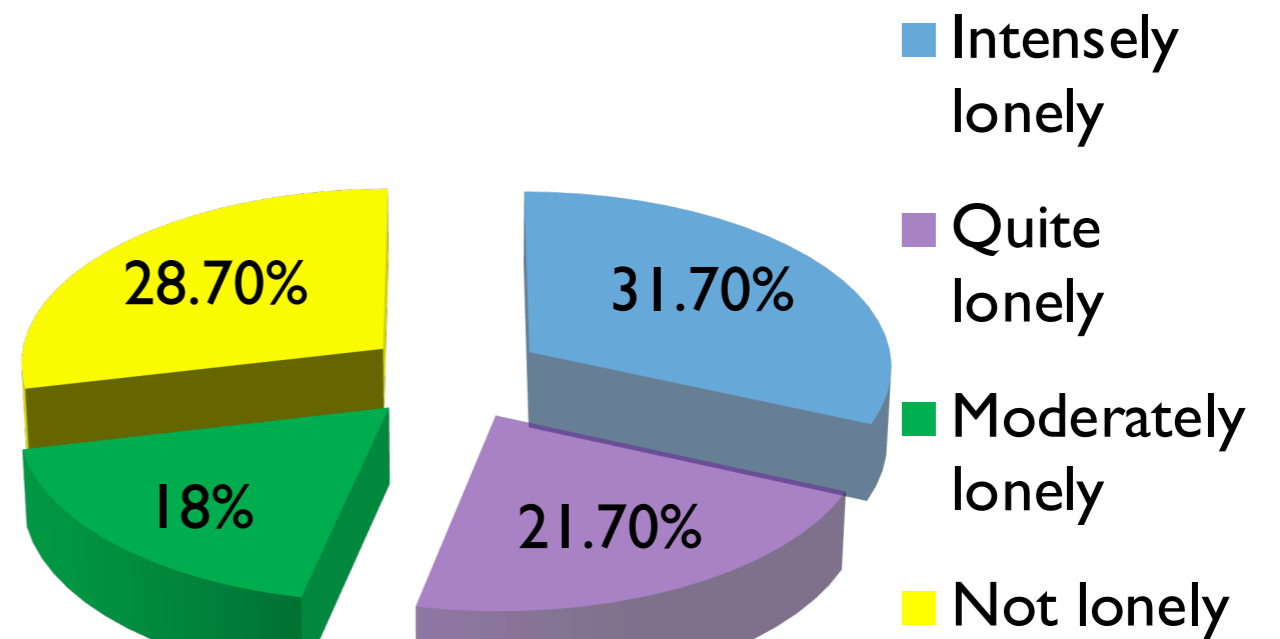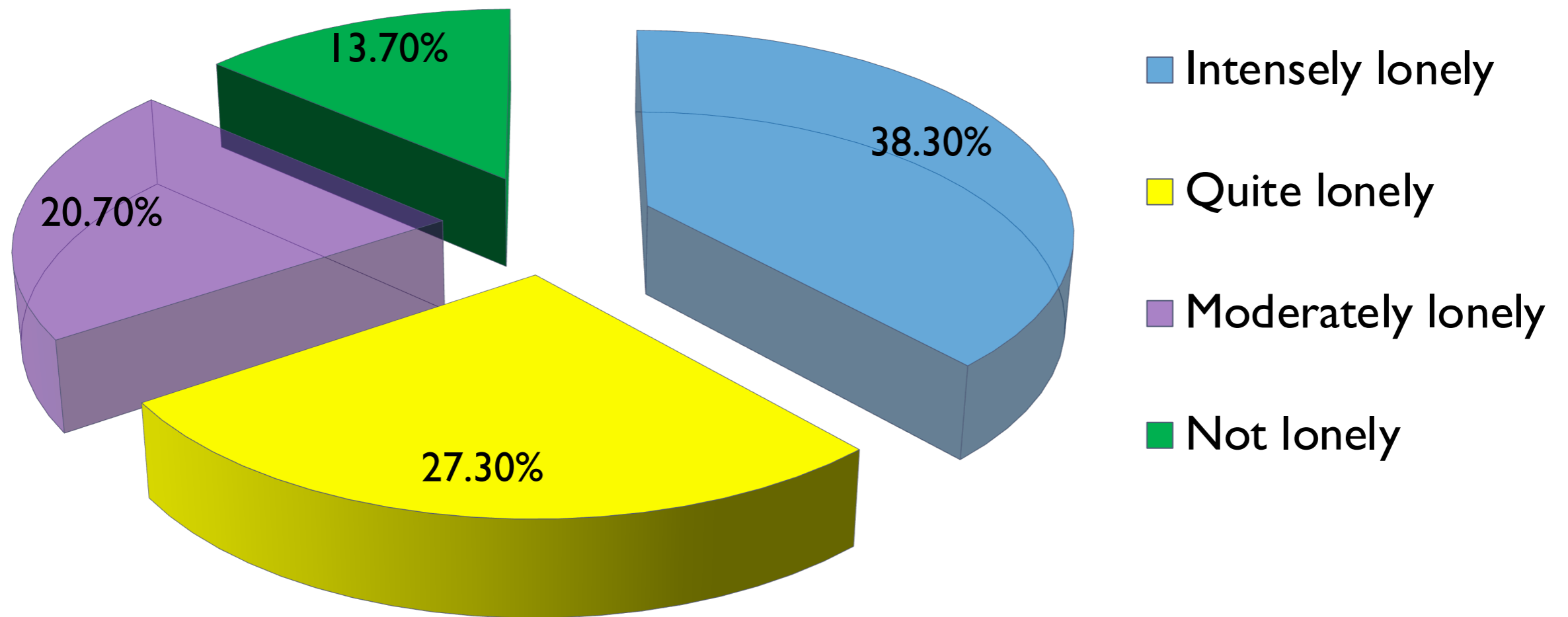
Emotional loneliness

Emotional loneliness of Day Centre SU

Religious coping

- 48% - described themselves as religious/spiritual

- 41% (N=122) - religious or spiritual beliefs helped them 'Quite a lot' or 'very much' cope with mental health problems.

- 14.8% (n=44) – Helped Cope (Somewhat)

Experience of traumatic events

▸ Almost half (48%) -physically punished, beaten, mugged or attacked

▸ Witnessed serious injury or killing (27.5%),

▸ Experienced the violent death of a family member (23.5%)

▸ 20% had experienced a serious accident in a car, at work or elsewhere.

▸ 37% (n=102) reported experiencing three or more traumatic events.

Stigma scale

Stigma dimensions	Day Support SUs Mean (sd)	King et al Mean (sd)
Disclosure subscale	22.37 (8.21)	24.7 (8.0)
Discrimination subscale	21.38 (8.58)	29.1 (9.5)
Positive aspects subscale	12.24 (2.88)	8.8 (2.8)
Global stigma score	56.51 (13.80)	62.6 (15.4)

People with smaller social networks experience greater stigma:	
stigma disclosure	t=2.79, P=0.006
stigma discrimination	t=3.53, P=0.001
Stigma positive aspects	t=4.0, P=0.0001

Stigma decreases with:	
Age	P=0.000
Satisfaction with social relations	P<0.000
Satisfaction with quality of life	P<0.05
Religious/spiritual beliefs	P<0.05

Emotional loneliness is *increased* by		
Factor	Odds Ratio CI	sig
Perceived social loneliness	1.8, 1.2- 2.6	P<0.05
stigma discrimination	1.2, 1.05 -1.20	P<0.05
Emotional loneliness is *decreased* by		
Emotional wellbeing	0.95, 0.92- 0.97	P<0.05
marriage	0.34, 0.12 -0.95	P=0.001
religious beliefs	2.9, 1.07 -7.8	P<0.000

Summary

▶ Long tenure of SUs

▶ High levels of social and emotional loneliness

▶ Desire for employment but many barriers

▶ Low expectations of change and growth.

▶ VS -Strong on local connections - Limited skill mix of staff

▶ Role and function confusion

Day centres

▸ An increasing role for the 3ʳᵈ sector?

▸ The need for partnership in Day Support.

▸ Do day services reinforce or challenge social exclusion? (Clarity of DC role: a 'bonding' or a 'bridging' function?)

▸ Need for interventions to deal with stigma and social exclusion