

**Waltham Forest Council**

# Mental Wellbeing

Joint Strategic Needs Assessment

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# 1. Introduction

## 1.1 What is mental wellbeing and why is it important?

Mental wellbeing comprises a positive state of mind and body that describes both feeling good and functioning well. It represents a positive state of holistic health, including person's sense of happiness, connection with other people, communities, and the wider environment. It involves a subjective component, a self-evaluation of living a meaningful and satisfactory life, and an objective component of whether basic living needs are met<sup>1</sup>

The UK Faculty of Public Health<sup>2</sup> has stated that good mental wellbeing includes the capacity to:

- Realise one's abilities, live a life with purpose and meaning, and make a positive contribution to the community
- Form positive relationships with others and feel connected and supported.
- Experience peace of mind, contentment, happiness and joy.
- Cope with life's ups and downs and be confident and resilient.
- Take responsibility for oneself and for others around you.

Positive mental wellbeing is an important aspiration in its own right, contributing to educational attainment, economic success, fostering community cohesion and quality of life, but it is also important as a means of preventing mental ill-health. While the relationship between mental wellbeing and mental health problems is complex, it is accepted that promoting mental wellbeing at a population level will prevent the development of mental health conditions further down the line. With the burden of mental ill-health a significant problem across the country, prevention is a crucial element of efforts to tackle this issue and there have been repeated calls for an increased focus on prevention.

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<sup>1</sup> Department of Health (2014) Wellbeing: why it matters to health policy:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/277566/Narrative\\_January\\_2014\\_.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/277566/Narrative_January_2014_.pdf)

<sup>2</sup> Faculty of Public Health (2023). Concepts of Mental and Social Wellbeing: <https://www.fph.org.uk/policy-advocacy/special-interest-groups/special-interest-groups-list/public-mental-health-special-interest-group/better-mental-health-for-all/concepts-of-mental-and-social-wellbeing/>

## 2. What is the current picture?

National and local data provides a picture of the current state of mental wellbeing in Waltham Forest. Since 2018, both local survey data which use the standardised Warwick Edinburgh Mental Wellbeing Scale (WEMWBS) and national Annual Population Survey (APS) data demonstrate a deterioration in adult mental wellbeing in Waltham Forest. Although local trends appear to be following national trends in the APS, that should not lead us to take the problem any less seriously – in Waltham Forest there has been a consistent decline in mental wellbeing over the past 4 years, and this requires prompt and effective action.

### 2.1 Sense of Wellbeing: Warwick Edinburgh Mental Wellbeing Scale

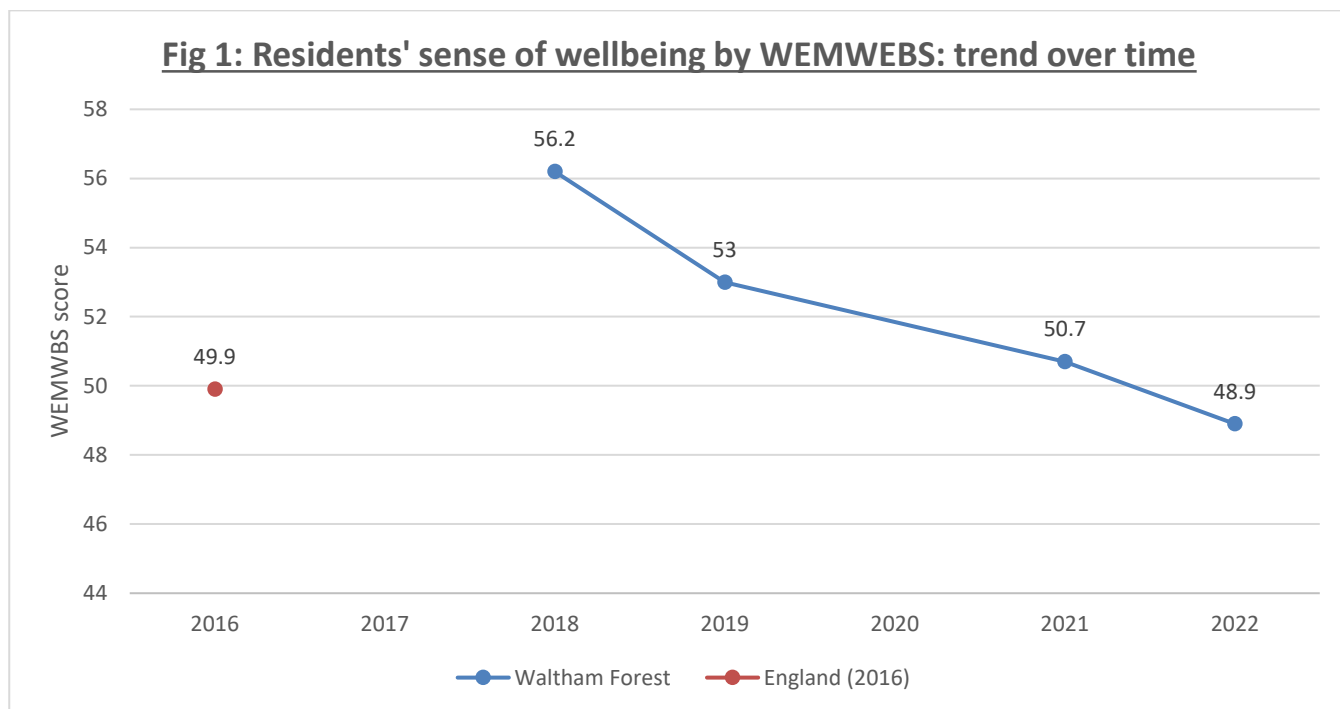
Since 2018, resident insight surveys carried out by the Council have included standardised wellbeing questions (The Warwick Edinburgh Mental Wellbeing Scale (WEMWBS)<sup>3</sup>), to monitor residents' **sense of wellbeing** over the years. The scale consists of 14 positively worded questions, providing a total overall score out of 70.

In 2018, the survey showed that Waltham Forest had good mental wellbeing, with an overall score of 56.2 compared to a national benchmark from the 2016 Health Survey for England of 49.9. Since 2018, the Waltham Forest score has been gradually declining, first to 53.0 in 2019, then to 50.7 in 2021, and most recently to 48.9 in Autumn 2022. It would be anticipated that the national benchmark would also have fallen due to the difficulties people have faced from the COVID-19 pandemic and now the cost-of-living crisis. However, there has been no national release of WEMWBS data since 2016 and so there is no national comparator. **Error! Reference source not found.** displays the trend in WEMWEBS score.

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<sup>3</sup> Warwick Medical School (2021). The Warwick-Edinburgh Mental Wellbeing Scales – WEBWBS: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/>

Figure 1



## 2.2 Life satisfaction, happiness, worthwhile and anxiety: Annual Population Survey

National and local population wellbeing is also measured in the Annual Population Survey which includes questions on four related concepts: **life satisfaction, feeling worthwhile, happiness and anxiety**.

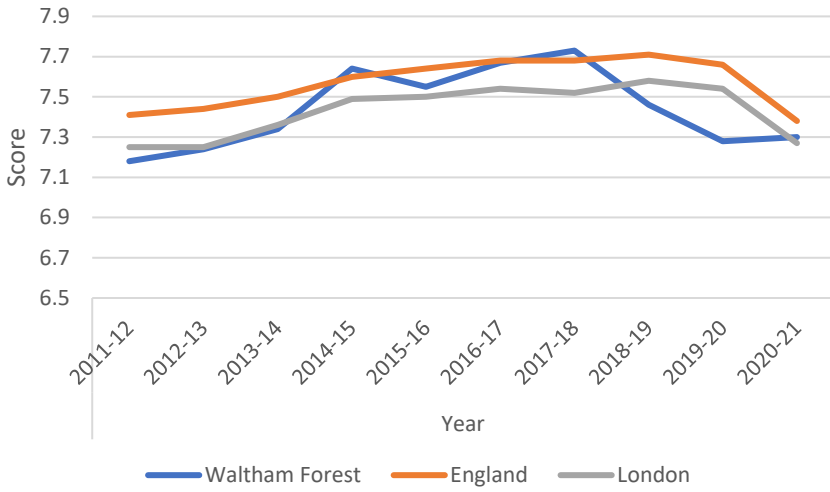
The pattern of Waltham Forest data has followed London and national data over time. Broadly speaking, life satisfaction, feeling that the things in life are worthwhile, happiness and anxiety were all improving until around 2018/19. With the advent of the COVID-19 pandemic, wellbeing then deteriorated. Measures of wellbeing were still deteriorating in 2020/2021 [Figures 2, 5, 8, 11]

London consistently scores worse than the national average on all wellbeing measures. The position of Waltham Forest compared to London and England has varied over time. In 2020/21, around three quarters of Waltham Forest residents felt they had high or very high levels of life satisfaction, things in life feeling worthwhile and happiness [Figures 3, 6, 9] and Waltham Forest sat slightly above the London average in all measures except anxiety. For the measure of anxiety, residents reported feeling significantly more anxious in Waltham Forest (average score 3.49) than both London (3.38) and England (3.31) [Figures 2, 5, 8, 11]. Over half (51%) of residents reported high or very high levels of anxiety [Figure 11].

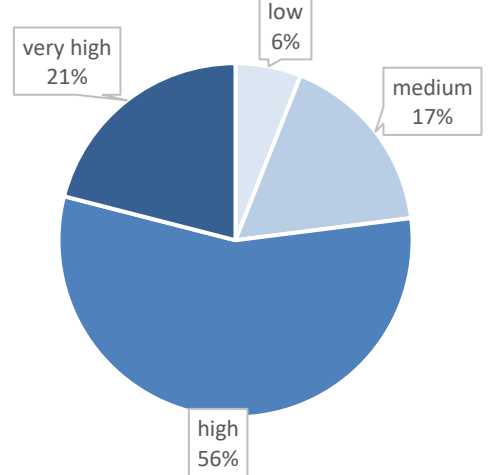
Waltham Forest's scores can also be compared with each of the other London boroughs [Figures 3, 6, 9 and 12]. This comparison in 2020/21 can then be further compared with the same data across London boroughs in 2016/17. In all four measures of wellbeing, Waltham Forest showed very high levels of wellbeing in 2016/17 compared to other London boroughs. In 2020/21, Waltham Forest's position fell across all four measures, relative to the other London boroughs. The change in rank was particularly pronounced for feelings of anxiety [Figure 13]. For this indicator, Waltham Forest's average score increased from 2.62 in 2016/17, well under the London average of 3.12 at the time, to 3.49 in 2020/21, above the London average of 3.38.

**Life satisfaction** *Figure 2, Figure 3, Figure 4*

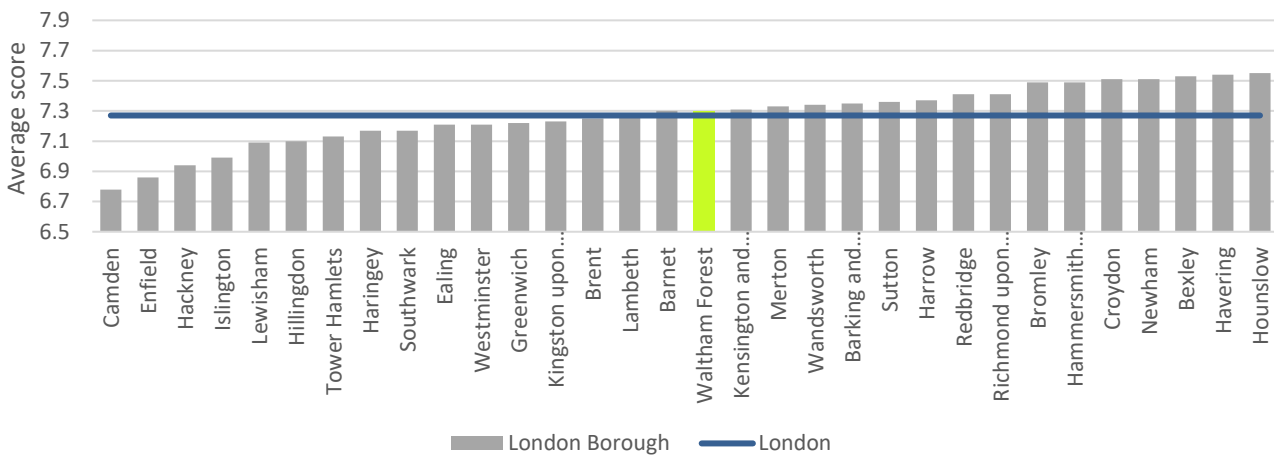
**Fig 2: Average Life Satisfaction score**



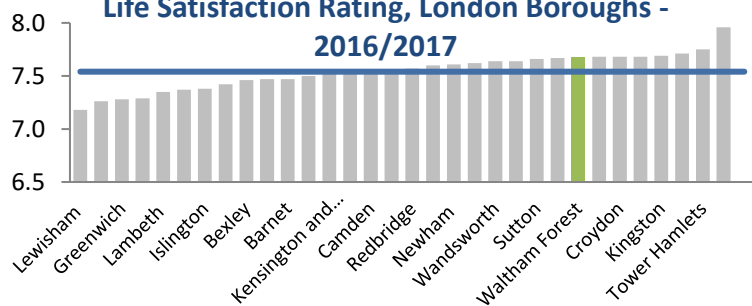
**Fig 3: % of population reporting different levels of life satisfaction - Waltham Forest, 2020/2021**



**Fig 4: Average life satisfaction score, London Boroughs - 2020/2021**



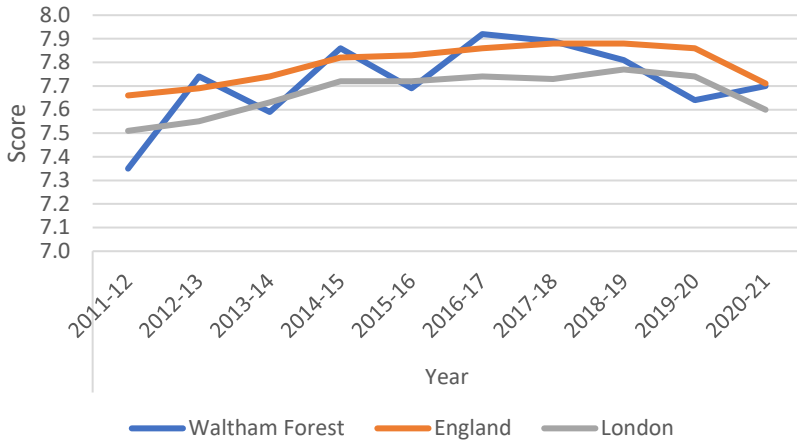
**Life Satisfaction Rating, London Boroughs - 2016/2017**



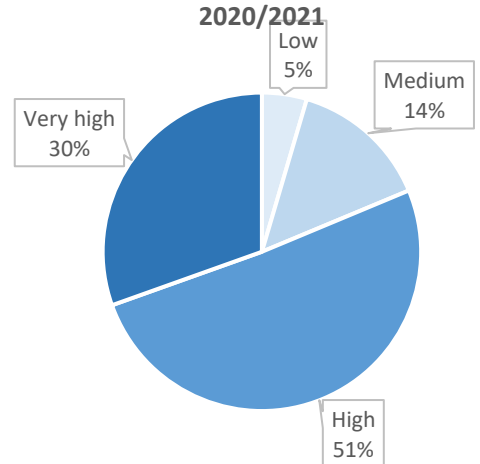


**Feeling life is worthwhile** *Figure 5, Figure 6, Figure 7*

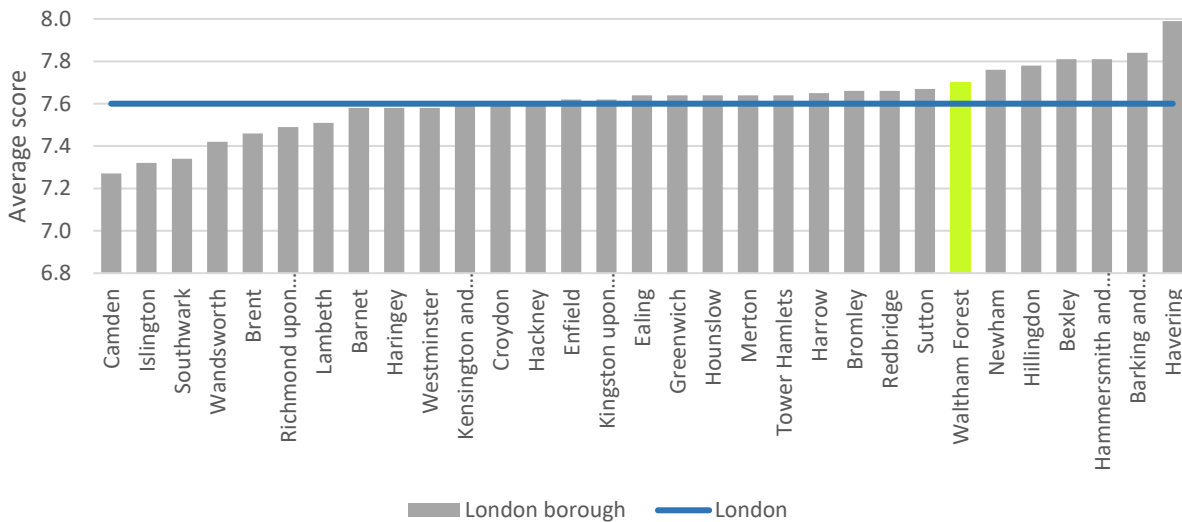
**Fig 5: Average score for feeling that the things done in life are worthwhile**



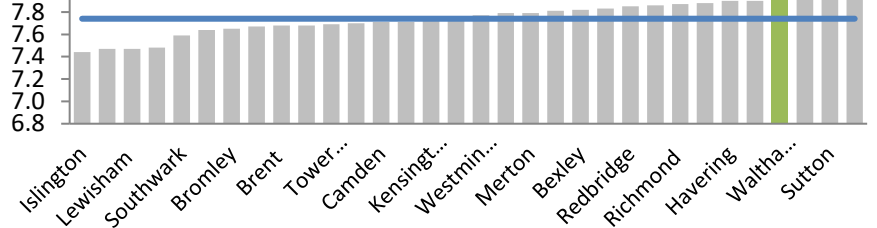
**Fig 6: % population reporting different levels of feeling that the things done in life are worthwhile - Waltham Forest, 2020/2021**



**Fig 7: Average the things done in life are worthwhile score, London boroughs - 2020/21**

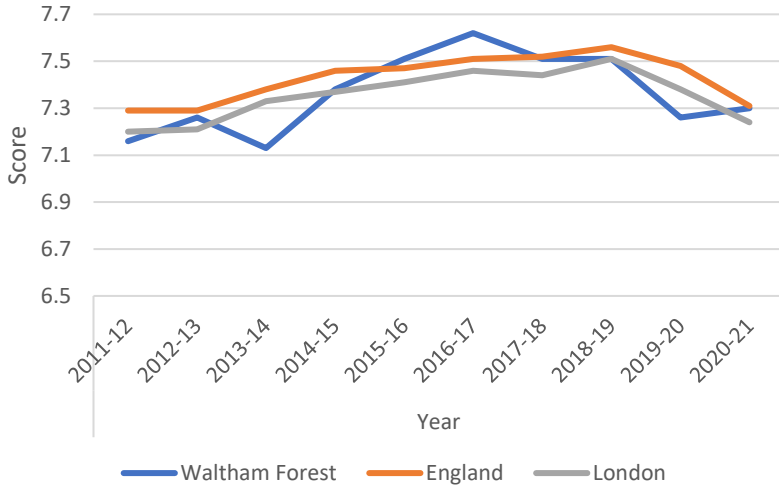


**Life worthwhile rating, London boroughs - 2016/2016**

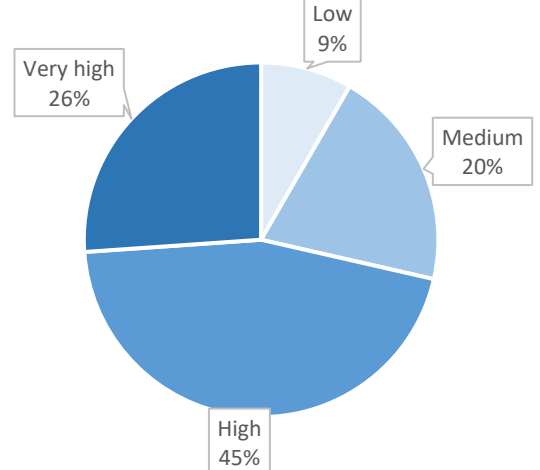


**Happiness** *Figure 8, Figure 9, Figure 10*

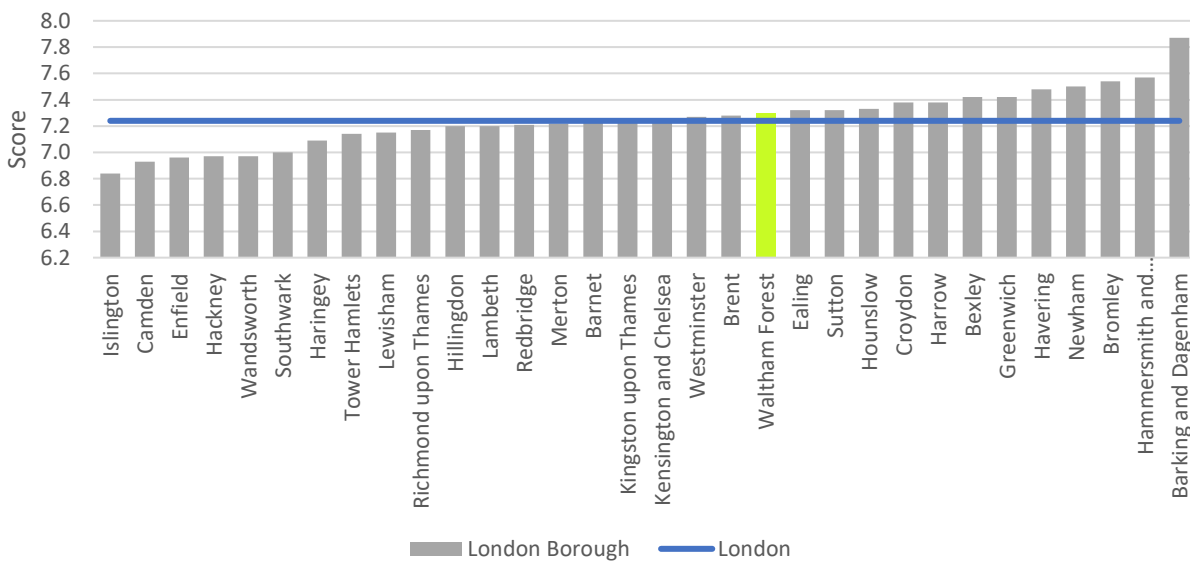
**Fig 8: Average happiness score**



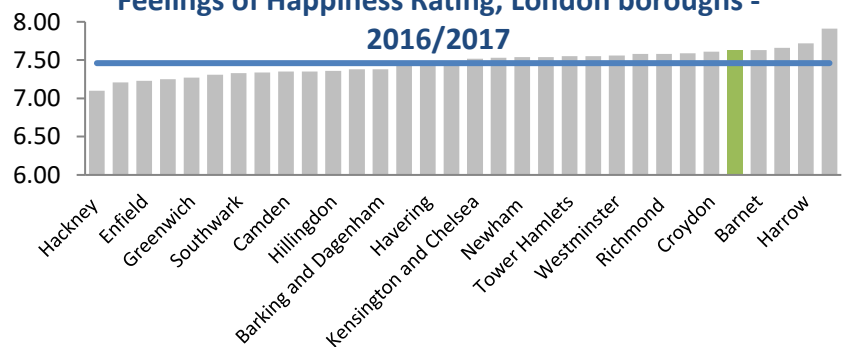
**Fig 9: % of population reporting different levels of happiness - Waltham Forest, 2020/2021**



**Fig 10: Average happiness score, London boroughs - 2020/21**

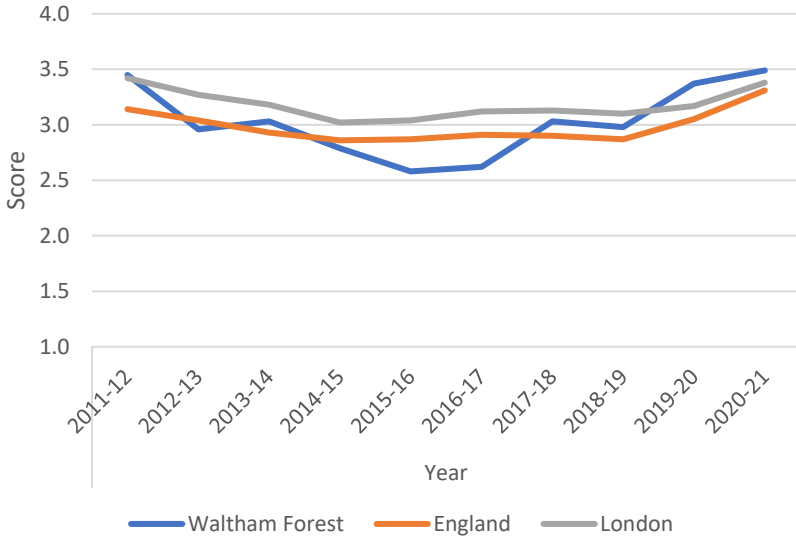


**Feelings of Happiness Rating, London boroughs - 2016/2017**

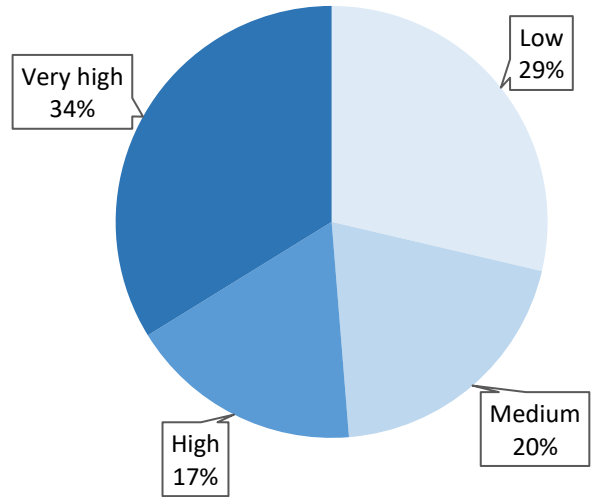


**Feeling anxious** *Figure 11, Figure 12, Figure 13*

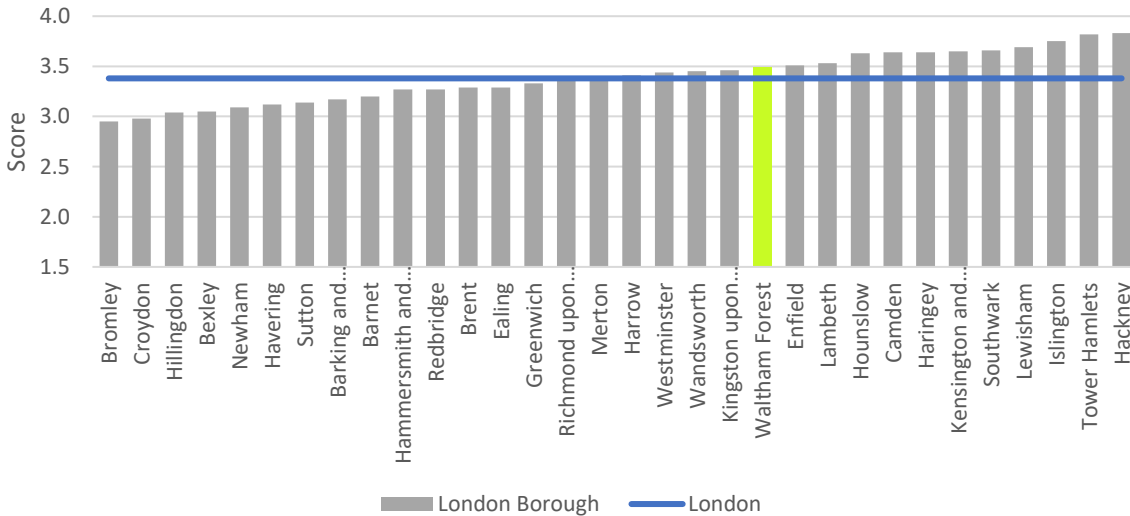
**Fig 11: Average anxiety score**



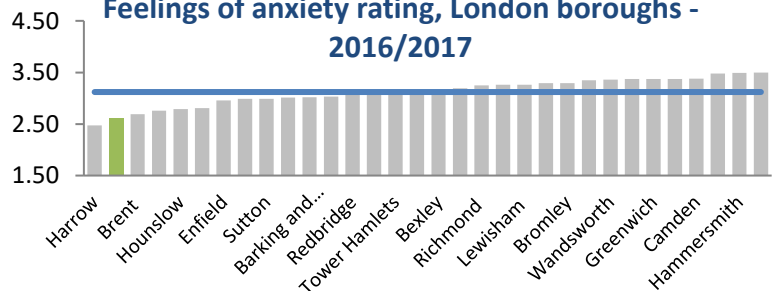
**Fig 12: % of population reporting different levels of anxiety - Waltham Forest, 2020/2021**



**Fig 13: Average anxiety score, London boroughs - 2020/21**



**Feelings of anxiety rating, London boroughs - 2016/2017**

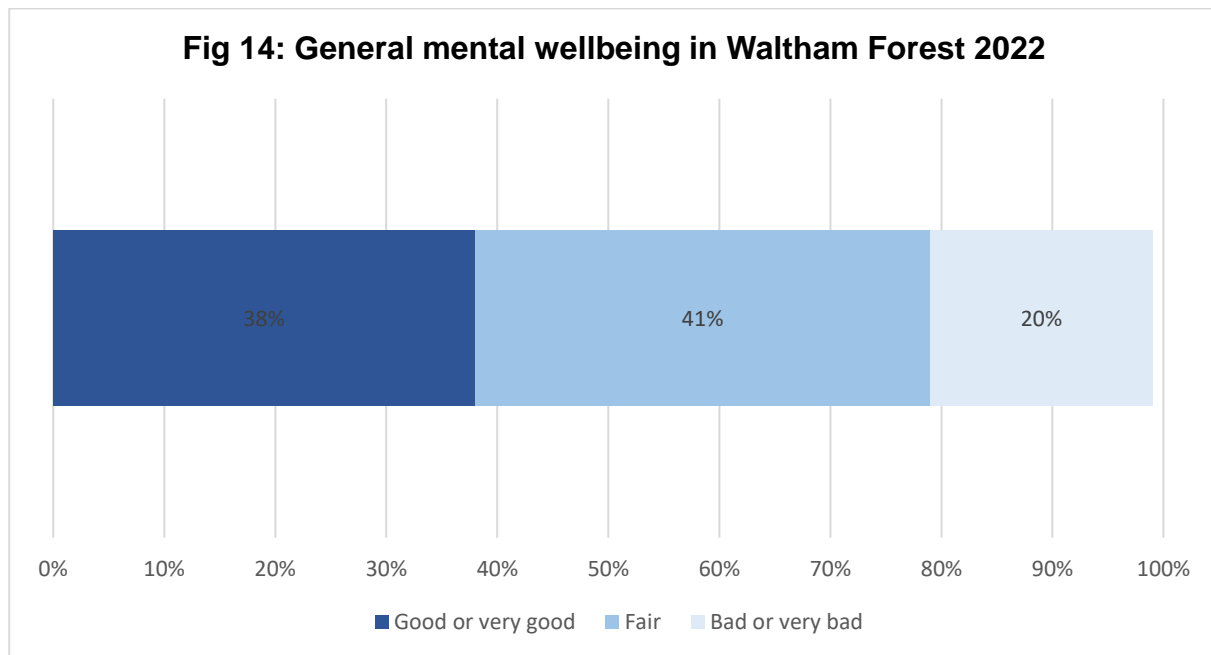


## 2.3 Local mental wellbeing data: Waltham Forest Mental Wellbeing Engagement Survey 2022

In Spring 2022, Waltham Forest carried out its largest wellbeing survey to date, collecting information around mental wellbeing from 1032 residents from across the borough online and in person. The information collected allows us to build a more detailed picture of the factors that affect our residents' wellbeing and helps us understand better where residents need additional support.

1 in 5 (20%) residents reported their **general mental wellbeing** as being bad or very bad, almost 2 in 5 (38%) reported it as good or very good, and the remaining 2 in 5 (41%) reported it is fair [Figure 14]. Thus, whilst a large proportion report good or very good mental wellbeing, more than 3 in 5 residents would strongly benefit from interventions or strategies to help improve their mental wellbeing.

Figure 14



In terms of the **issues which make residents' mental health and wellbeing worse**, residents reported the following issues to be most important:

1. Financial issues (35%)
2. Stress at work (34%)
3. What's happening in the world / what's in the news (30%)
4. Isolation / loneliness (23%)
- =5. Family / relationship problems (20%)
- =5. Own poor health (20%)

All these issues are considered later in this report, either because they are a social determinant of mental wellbeing [Chapter 4. Social and economic determinants of mental wellbeing] or because the issue represents a high-risk group [3.1.1 People with disabilities and long-term health conditions].

Whether or not difficult circumstances go on to affect mental wellbeing and mental health depends on how individuals manage their problems. A coping mechanism is a behaviour that someone engages in to try and protect themselves from psychological damage resulting from life challenges. Mechanisms may be positive – where the coping behaviour is useful and constructive and reduces stress and harm both in the short and long-term, or negative – where the behaviour does not resolve the problem in the long-term and may actually increase harm, although it may feel like they have a short-term effect.

Helping residents to develop self-help approaches to wellbeing was one of the key features of the Mental Wellbeing Strategy 2018-2021. To gain an understanding of how residents manage daily challenges to their mental wellbeing in 2022, we asked about **positive and negative coping mechanisms to a stressful day** [Figure 15, Figure 16]

Almost half (46%) reported using physical activity to manage their challenges, and more than a third (38%) rely on their connections with friends and family. A third (33%) talk to someone about their feelings and around 1 in 4 use sleep, hobbies and mindfulness/meditation to manage their stress. 9% use volunteering/charity work to improve their wellbeing. Although these percentages are not small, these results also demonstrate considerable potential for residents to help improve their own mental wellbeing, if such activities can be promoted and supported.

Figure 15

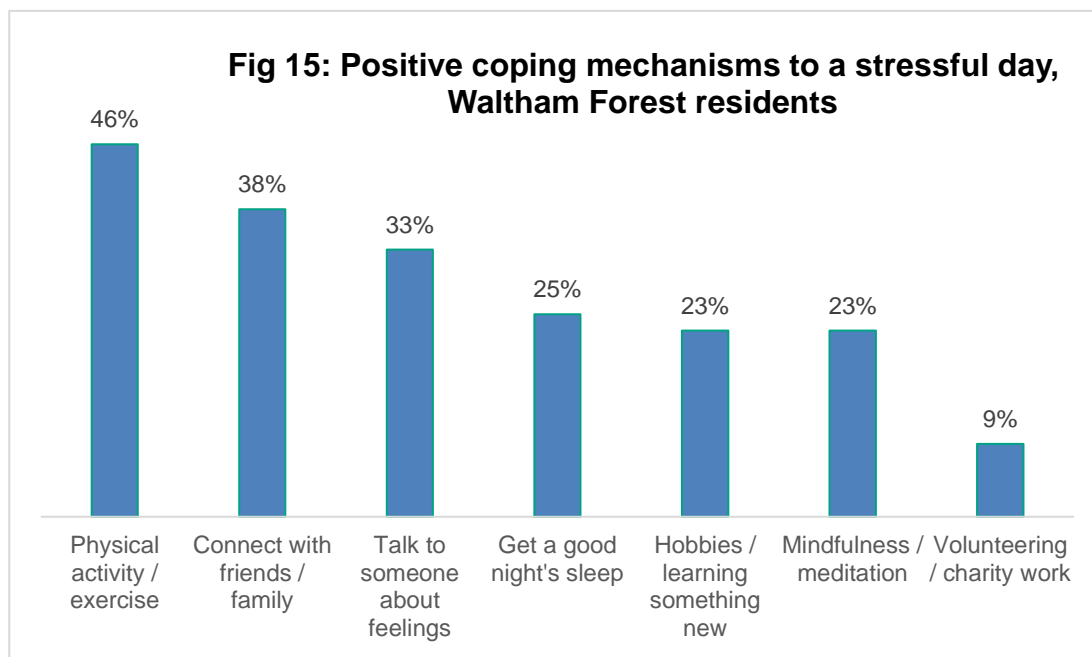
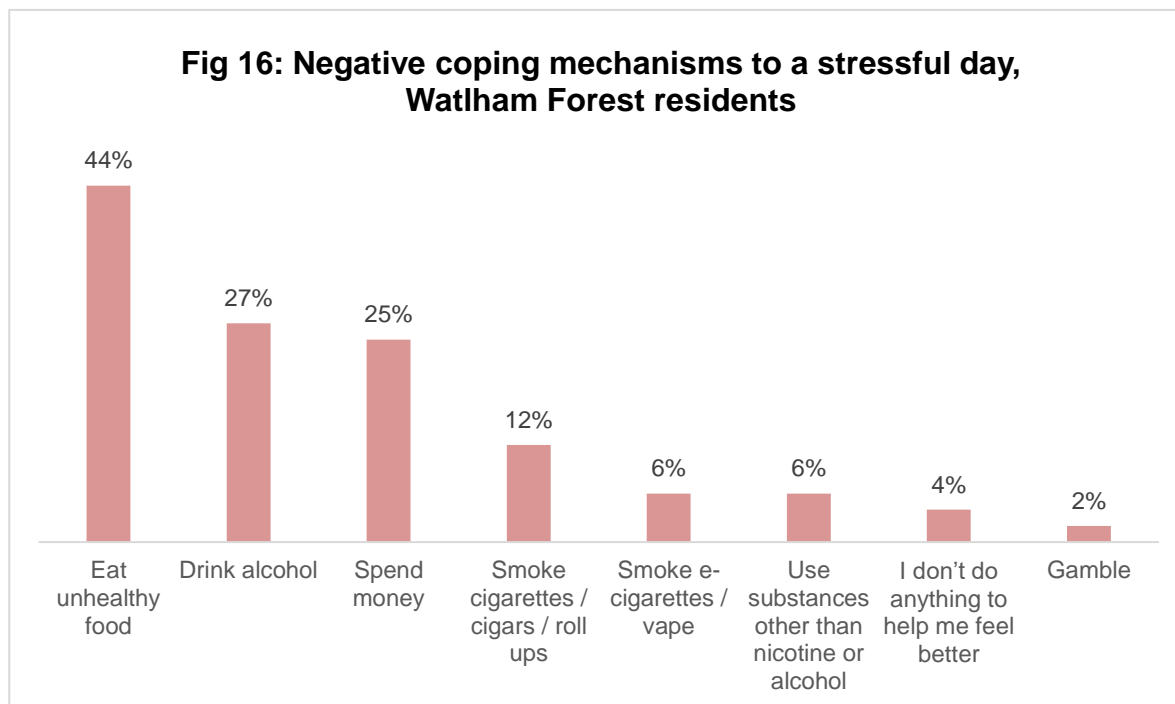


Figure 16



Whilst almost 1 in 3 residents (29%) use exclusively positive coping mechanisms to feel better, almost 1 in 5 (18%) use exclusively negative coping mechanisms.

Almost half (44%) of residents eat unhealthy food to manage their stress, and almost a third (27%) use alcohol. A quarter (25%) spend money and 12% and 6% use cigarettes and e-cigarettes/vapes, respectively. Six per cent use other substances, 2% gamble and 4% report using no coping mechanism at all.

Residents were also asked to consider **what might contribute the people not seeking help for poor mental health**. Overall, and in all subgroups, the most cited reason given was around a fear of not believing the problem will be taken seriously (83%). This was followed by mental health services being difficult to access (76%) and believing/hoping the problem will get better by itself (75%).

Understanding these barriers to mental wellbeing, particularly the first reason reported which relates to residents' perceptions around the importance of mental wellbeing as well as stigma [see Chapter 6. Stigma and discrimination around mental health], can help the Council develop effective strategies to improve mental wellbeing in the borough.

## 3 Population groups at risk of low mental wellbeing

Mental wellbeing is relevant to everyone in the population, and anyone can develop a mental health problem. However, we know that some groups are more likely to experience poor mental health and wellbeing. Increased risk is often amplified by the wider determinants of mental health, particularly poverty and low social capital caused by difficulty integrating into communities, prejudice, and discrimination [see section 4. Social and economic determinants of mental wellbeing].

The following adult groups have been identified nationally as being of high risk of mental health problems<sup>4</sup>:

- Ethnically diverse groups
- Those living with physical disabilities
- Those living with learning disabilities
- People with alcohol and/or drug dependence
- Prison population, offenders and victims of crime
- LGBT+ people
- Carers
- People with sensory impairment
- Homeless people
- Refugees and asylum seekers
- Pregnant women or women with a child under 12 months
- People with a history of violence or abuse
- Older people living in care homes
- Isolated older people

### 3.1 Waltham Forest mental wellbeing engagement 2022 subgroup analysis

In addition to what we know nationally about at-risk groups, the mental wellbeing engagement 2022 results introduced in Section 2.3 Local mental wellbeing data: Waltham Forest Mental Wellbeing Engagement Survey 2022 provide important insights into those groups that are disproportionately affected by poor mental wellbeing in Waltham Forest.

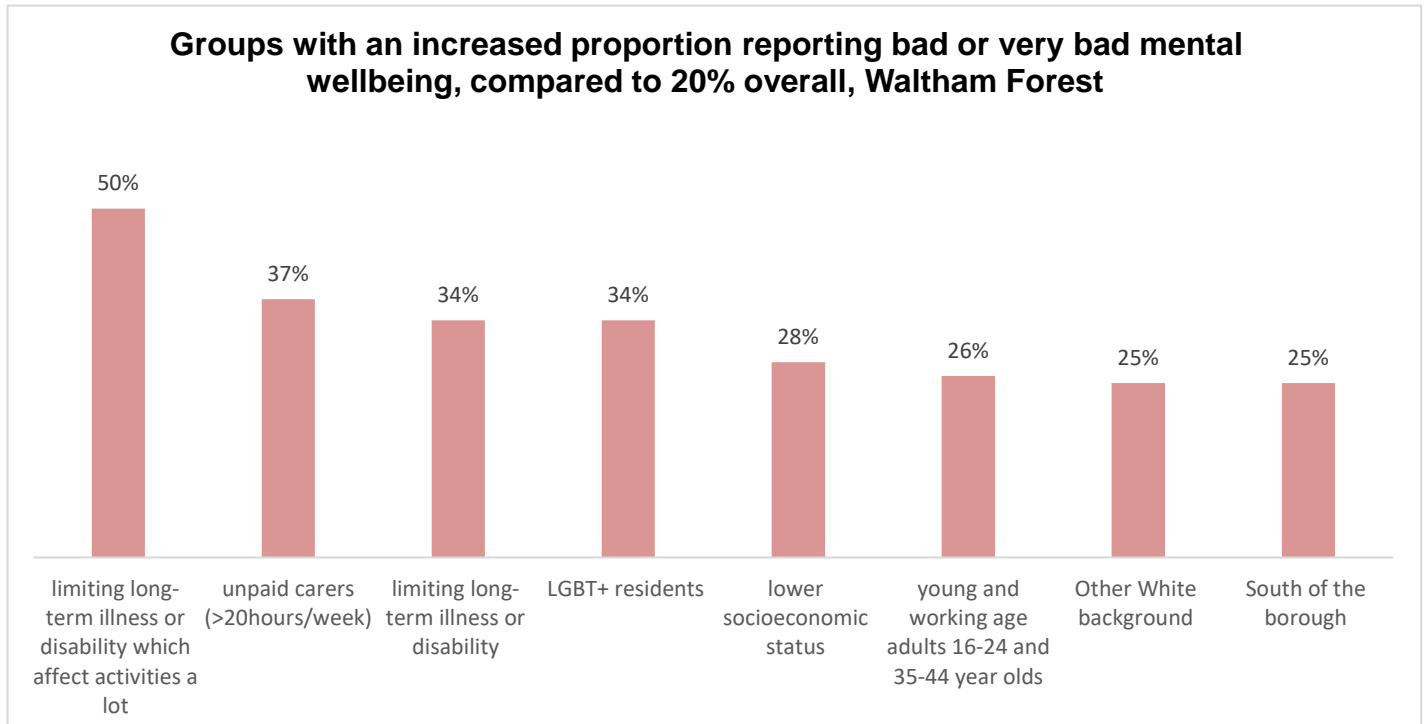
In response to the general wellbeing questions, the following groups had greater proportions of those **reporting bad or very bad mental wellbeing**, compared to the overall figure of 20% [Figure 17]: People with limiting long-term illness or disability which affects activities a lot (50% reporting bad or very bad mental wellbeing), unpaid carers of

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<sup>4</sup> Public Health England (2019). Mental health: population factors:  
<https://www.gov.uk/government/publications/better-mental-health-jsna-toolkit/3-understanding-people>

>20hours per week (37%), limiting long-term illness or disability (34%), lower socioeconomic status (28%), adults aged 16-24 and 35-44 years (26%), Other White ethnicity (25%) and South of the borough (25%)

Figure 17



In contrast, the proportion of residents reporting bad or very bad mental health decreases in other groups: Asian residents (13%), no limiting long-term illness or disability (12%) and aged 65+ (10%) [Figure 18].

Response to the **positive and negative coping mechanism** questions described in Section 2.3 Local mental wellbeing data: Waltham Forest Mental Wellbeing Engagement Survey 2022 also reveal that certain groups are more/less likely to cope with stress in different ways. For example, carers and those from a lower SES are *less likely* to use the some of the *positive* coping mechanisms listed, whilst young adults 16-34 years and residents who identify as LGBT+ are *more likely* to use some of the *negative* coping mechanisms listed. Figure 19 and Figure 20 provide more detail of the breakdowns by coping strategy and population group.



Figure 18

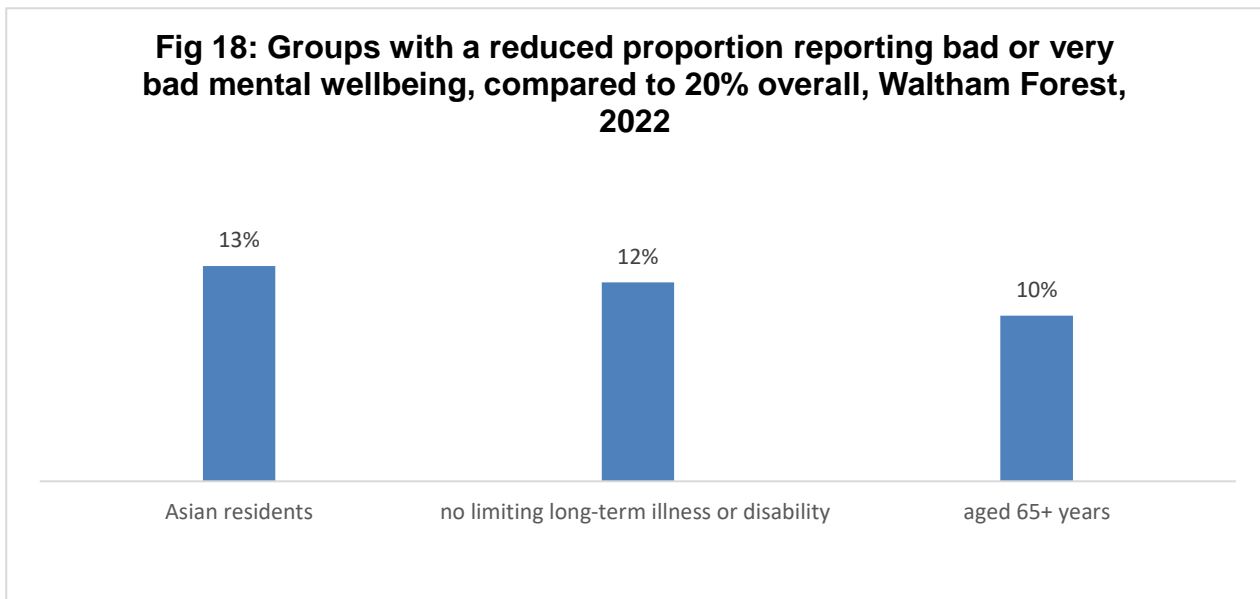


Figure 19

**Fig 19: Population groups less likely to use positive coping mechanisms to stress in Waltham Forest, 2022**

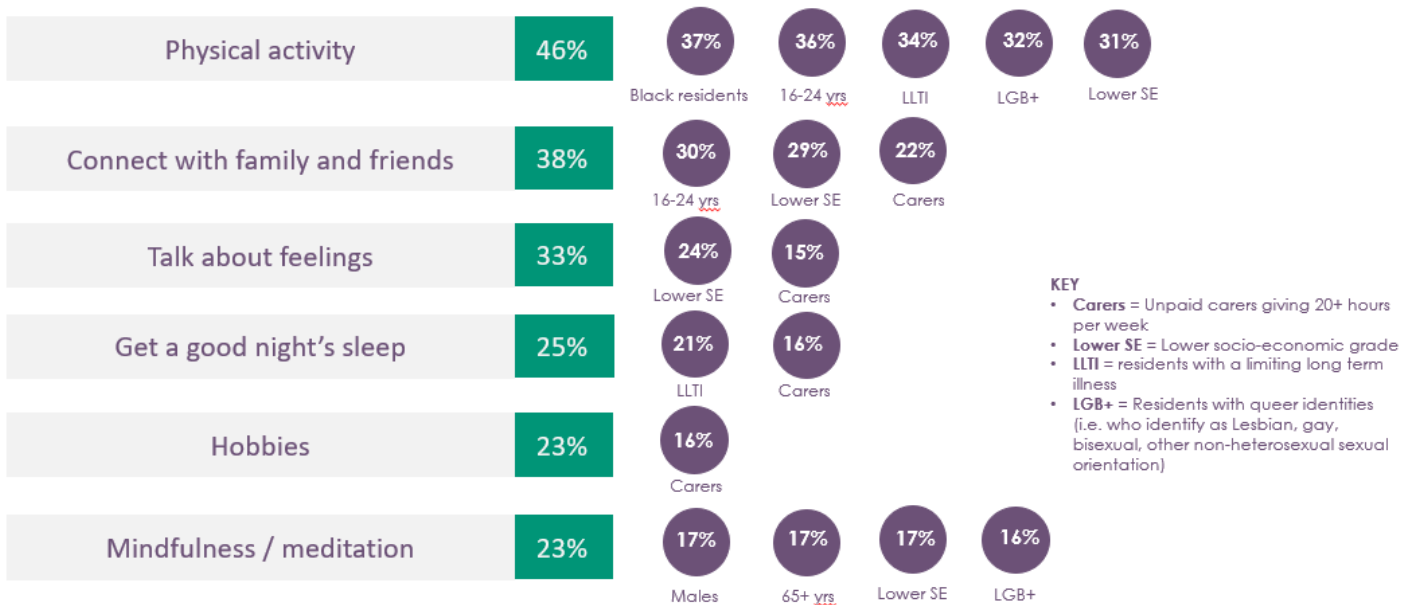
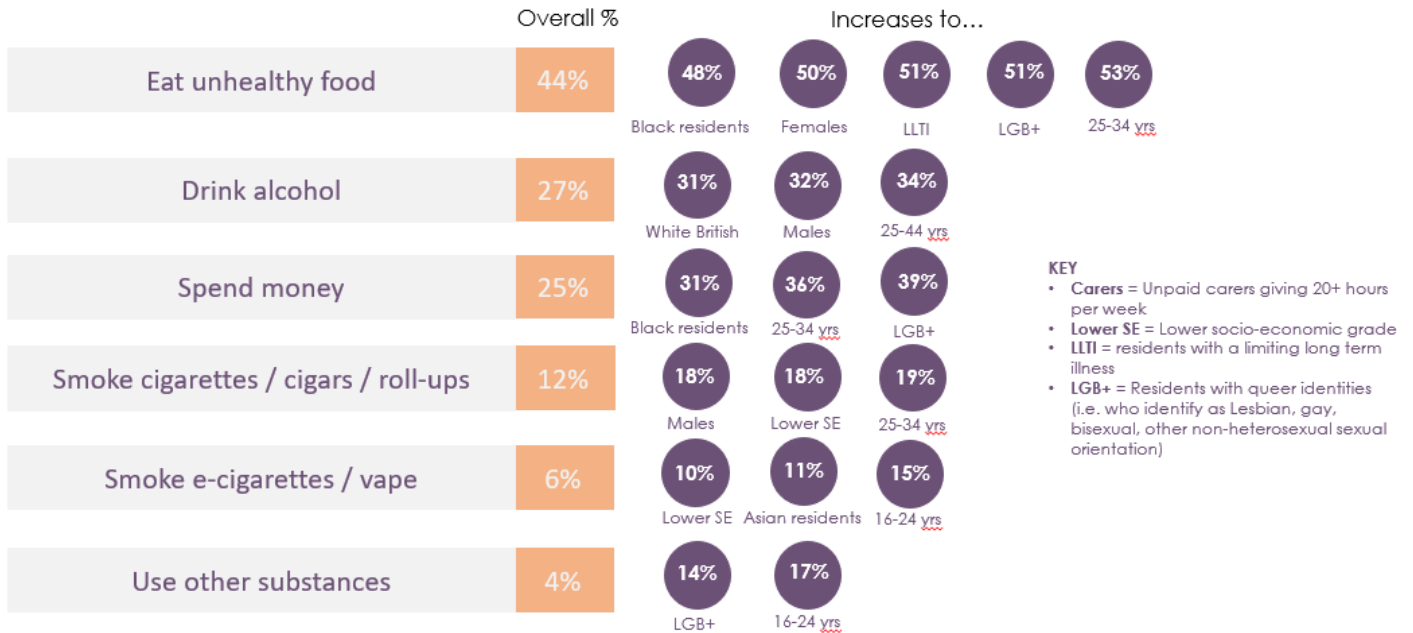


Figure 20

**Fig 20: Population groups more likely to use negative coping mechanisms to stress in Waltham Forest, 2022**



Using evidence of which groups experience poor mental wellbeing in the borough [Figure 17] in combination with the information around coping from Figure 19 and Figure 20 , we can build strategies to support different groups in the borough to improve coping strategies and thus enhance their mental wellbeing.

### 3.2 Vulnerable groups in Waltham Forest; those identified in engagement work

The following groups were identified in our local engagement as being at particularly high risk of poor mental wellbeing. The order listed reflects the extent to which the group was affected by bad or very bad mental wellbeing, as per

Figure 17.

In February 2022, the council also commissioned independent **qualitative** research with local residents to provide insight into mental wellbeing in the borough. More detail on this is given in Section 7 What do Waltham Forest residents and stakeholders think? Quotes from this work are included in the Vulnerable Groups section to add greater depth and meaning.

### 3.1.1 People with disabilities and long-term health conditions

Disability and mental health are closely linked. Many people with long-term physical health conditions also have mental health problems and national evidence suggests that people with long-term physical conditions are more than twice as likely to develop mental ill-health<sup>5</sup>.

In the 2011 Census, 37,600 Waltham Forest residents said their day-to-day activities are limited because of their health; this was made up of 17,900 (7%) whose activities were limited a lot, and 19,700 (8%) whose were limited a little, making a total of 15% compared to 18% nationally<sup>6</sup>. There was no data for the 2021 Census at the time of writing. Local Resident Insight surveys have shown that residents with disability were three times more likely to feel isolated than those without<sup>7</sup>.

People with learning disabilities are also at increased risk of poor mental health and it is generally accepted that between 15-52% of those living in the UK with a learning disability also have a mental health problem, depending on the criteria used<sup>8</sup>. In 2020, it was estimated there were over 5100 people with learning disabilities resident in Waltham Forest and it is expected that this figure has increased<sup>9</sup>.

**“I’m in quite a lot of pain and need an operation. That in itself is depressing. I’m thankful that I’m alive, but sometimes it can be quite depressing getting older, especially when you’re stuck in doors all day. I can’t go out, I can’t do the things I used to do and it does make you feel isolated and lonely. You feel like you’re on a downward spiral because you know the recipe for staying healthy is being active, and I can’t at the moment.”** Female, aged 55-69, White British-Irish, North of the borough, Older person group

### 3.1.2 Carers

Carers are more likely to experience physical and mental health problems than people without caring responsibilities. Research from Carers UK in 2018, pre-pandemic, showed that more than 7 out of 10 (72%) carers experienced mental ill health as a result of

<sup>5</sup> Mental Health Foundation (2022). Long-term physical conditions and mental health:

<https://www.mentalhealth.org.uk/explore-mental-health/a-z-topics/long-term-physical-conditions-and-mental-health>

<sup>6</sup> Census 2011 – updated data not available for Census 2021

<sup>7</sup> London Borough of Waltham Forest (2021). State of the Borough Report: Equalities, Diversity and Inclusion in Waltham Forest: <https://www.walthamforest.gov.uk/council-and-elections/about-us/our-equality-diversity-and-inclusion-strategy>

<sup>8</sup> Mencap. Mental health (accessed Jan 2023) <https://www.mencap.org.uk/learning-disability-explained/research-and-statistics/health/mental-health>

<sup>9</sup> Projection Adult Needs and Service Information (accessed Jan 2023): <https://www.pansi.org.uk/>

caring<sup>10</sup>. The COVID-19 pandemic put considerable additional pressure on carers and Carers UK's 2021 survey found that over two-thirds of carers (69%) reported their mental health worsening further as a result of caring during the pandemic<sup>11</sup>. Feelings such as stress, frustration, depression, loneliness, anxiety, anger, grief, mental fatigue and fear may all arise while caring.

Young carers are also at higher risk of poor mental wellbeing than the general population. National research shows that four in ten young carers reported feeling sad, one in four reported feeling lonely and one in two reported feeling angry in the preceding week<sup>12</sup>. Young adult carers are much more likely to be out of education, employment and training, which further impact their mental wellbeing.

In Waltham Forest, 8.2% of the population provide unpaid care (2011 Census, 2021 Census data pending), which is comparable to London (8.4%) and less than across England (10.2%). Yet only 24.5% of adult carers say they have as much social contact as they would like. This is significantly lower than the London rate of 27.8% and the England rate of 28.0%<sup>13</sup>.

Waltham Forest ranks low in terms of carer reported quality of life, ranking 140th out of the 333 councils across England<sup>14</sup>. In our 2022 Waltham Forest mental wellbeing engagement, carers also reported feeling substantially less well supported for mental health in the borough compared to the overall sample (74% carers feel there is not enough support, compared to 52% overall). As the population across the UK ages in the coming years, there is expected to be growing numbers of carers.

### 3.1.3 LGBTQ

It has been consistently demonstrated that LGBT individuals experience increased levels of mental health disorders than the general population. Stonewall research in 2018 showed that in the previous year, half (52%) of LGBT people experienced depression, three in five (61%) experienced anxiety, and half (52%) of young LGBT people aged 18-24 and almost half (46%) trans people thought about taking their own life<sup>15</sup>.

<sup>10</sup> Care Choices (2022) The UK's carers urgently need more support warn national charities:

<https://www.carechoices.co.uk/more-support-for-unpaid-carers-essential/>

<sup>11</sup> Carers UK (2021). State of Caring 2021 report: <https://www.carersuk.org/reports/state-of-caring-2021-report/>

<sup>12</sup> Department for Education. (2016) The lives of young carers in England:

<https://www.gov.uk/government/publications/the-lives-of-young-carers-in-england>

<sup>13</sup> NHS Digital. (2022). Survey of adult carers in England 2021/22

<https://app.powerbi.com/view?r=eyJrIjoieWZlZDdmM2YtMDRiNC00MTY0LThZjltYTE5ZjA3YTkxYWU4IiwidCI6IjUwZjYwNzFmLWJiZmUtNDAxYS04ODAzLTY3Mzc0OGU2MjllMlsmMiQjh9>

<sup>14</sup> NHS Digital (2022). Adult Social Care Outcomes Framework 2021/22

<https://app.powerbi.com/view?r=eyJrIjoieWZlZDdmM2YtMDRiNC00MTY0LThZjltYTE5ZjA3YTkxYWU4IiwidCI6IjUwZjYwNzFmLWJiZmUtNDAxYS04ODAzLTY3Mzc0OGU2MjllMlsmMiQjh9>

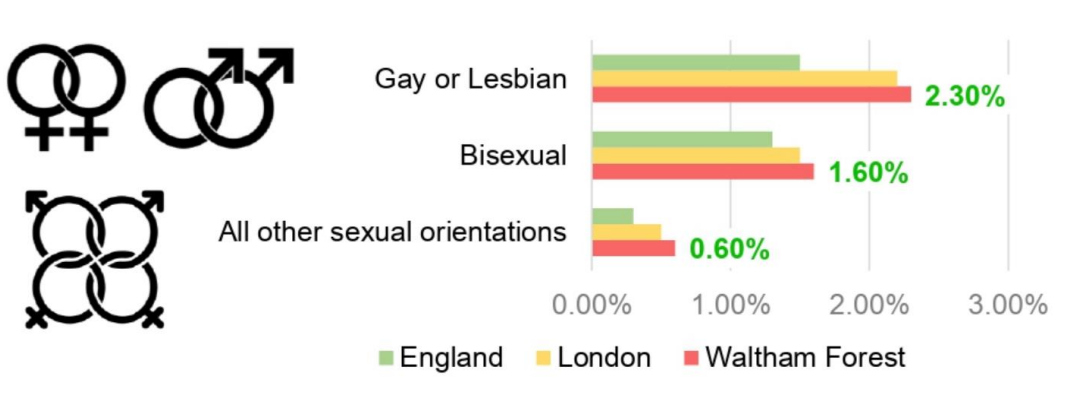
<sup>15</sup> Stonewall (2018). LGBT in Britain: <https://www.stonewall.org.uk/get-involved/stonewall-research>

Contributory factors resulting in poor mental health amongst LGBT individuals include external and internalised homophobia, bullying, discrimination (both within and outwith the LGBT community), racism, body image issues including body objectification and body shame, lifestyle factors including substance misuse.

Statistics for the size and composition of the LGBT population has historically been poor due to the lack of robust data, and issues with how comfortable people have felt discussing the sexuality (stigma). The Census 2021 was the first Census to ask about sexual orientation and gender identity. In Waltham Forest, 86.0% of people aged 16 years+ reported being straight or heterosexual (compared to 86.2% across London and 89.4% across England), 4.5% reported being LGB+ (4.3% in London and 3.2 % in England), whilst 9.5% did not answer. According to these results, Waltham Forest has the 13<sup>th</sup> highest proportion of LGB+ people in London and the 31<sup>st</sup> highest in the country. This data is further broken down in [Figure 21](#).

Figure 21

**Fig 21: Proportion of Waltham Forest’s 16+ population identifying themselves as LGB+**

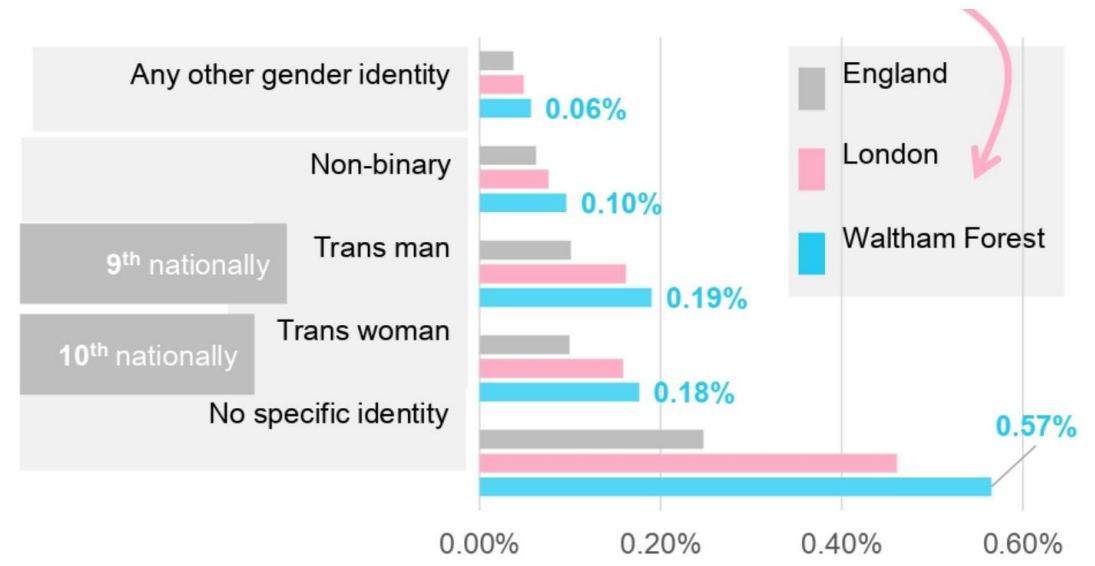


Source: ONS Census 2021

Similarly, a question on gender identity was also included. 1.1% (2,400 people) of Waltham Forest residents identify as a gender that is different from their sex assigned at birth.

Figure 22

**Fig 22: Proportion of Waltham Forest’s 16+ population identifying as a gender different to that assigned at birth**



Source: ONS Census 2021

### 3.1.4 Young adults, particularly young men

Waltham Forest is a young borough, with a median age of 35 years, down from 35.5 years in 2011. This is the same as the London median age but contrasts with the England median age of 40.

It has been estimated that three-quarters of all mental health conditions begin by age 24 and that recorded rates among women are rising<sup>16</sup>. Annual Population Survey data [see 2.2 Life satisfaction, happiness, worthwhile and anxiety: Annual Population Survey] shows that feelings of low worthwhile and high anxiety are highest during ages 20-24, and levels of happiness are also at their lowest<sup>17</sup>. While women are more likely to experience common mental health disorders than men, young men are a particularly high-risk group and are less likely to speak out, seek help or receive treatment for their problems. Men

<sup>16</sup> Department for Education (2022). State of the nation 2021: children and young people’s wellbeing [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1053302/State\\_of\\_the\\_Nation\\_CYP\\_Wellbeing\\_2022.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1053302/State_of_the_Nation_CYP_Wellbeing_2022.pdf)

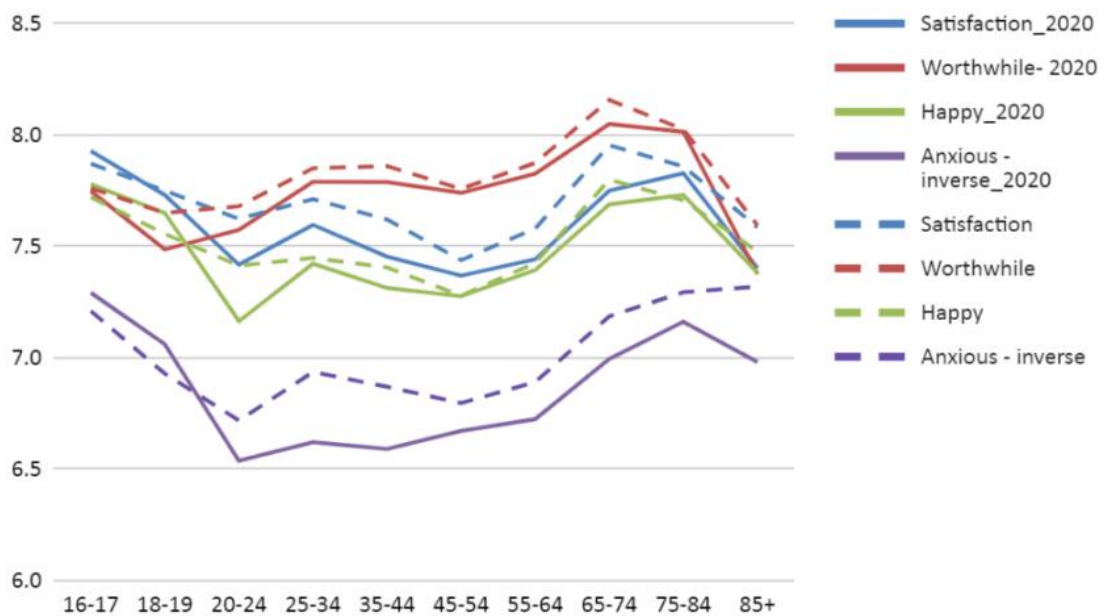
<sup>17</sup> What Works Centre for Wellbeing (2021) Wellbeing and age: the triple dip: <https://whatworkswellbeing.org/resources/wellbeing-and-age-the-triple-dip/>

are also 3 times more likely to die by suicide<sup>18</sup>, although suicide rates are higher in middle age groups (50-54 year in men, 45-49 years in women)<sup>19</sup>.

Figure 23 demonstrate this dip in happiness, anxiety (inverse) and satisfaction that occurs at young adulthood. Dashed lines are data collected in 2019/2020 before the COVID pandemic, solid lines April-September 2020, during the pandemic.

Figure 23

**Fig 23: Mean Satisfaction, worthwhile, happiness and anxiety by age**



Source: What Works for Wellbeing (2021) <https://whatworkswellbeing.org/blog/a-decade-of-subjective-wellbeing-data/>

**“See for males, especially a single father, male or a young male adult, there's not a lot of help. And that's with mental health and just in general. Men are hidden in this and don't ever get help or the same level of help as women. And as a male, we go through just as much as a females. Depending on how you're brought up, if you're a male you're just taught to, to kind of deal with it. Cause you are a male, you know, and you're strong”.** Male, aged 18-34, Non-White British-Irish, Centre of the borough, Single male group

<sup>18</sup> Samaritans (2021). Suicides in England:

[https://media.samaritans.org/documents/Suicide\\_Stats\\_England\\_2021.pdf](https://media.samaritans.org/documents/Suicide_Stats_England_2021.pdf)

<sup>19</sup>Office for National Statistics (2022) Suicides in England and Wales: 2021 registrations

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/suicidesintheunitedkingdom/2021registrations>



### 3.1.5 Ethnic groups

Mental wellbeing and the prevalence of mental health disorders varies greatly by ethnicity. The Adult Psychiatric Morbidity Survey is usually carried out every seven years but there has been no update since 2014<sup>20</sup>. In 2014, rates of common mental health disorders (including depression, anxiety and phobias) were highest in the Black/Black British population and lowest in the White Other population. Rates of psychosis were found to be ten times greater in Black men (3.2%) compared to White men (0.3%). It is worth noting that mental health diagnoses are not the same as mental wellbeing.

Ethnic group	Any common mental disorder in past week (APS 2014, age standardised)
Black / Black British	23%
Mixed & other	20%
Asian / Asian British	18%
White British	17%
White other	14%

Waltham Forest is one of the most ethnically diverse areas in England and London and is ranked as the 18<sup>th</sup> most diverse local authority in England and Wales. 47% of our population are from ethnic minority backgrounds and 39% of the population were born outside of the UK. White is the largest ethnic group (53%) [comprised of White British (34%), Other White (17%) and White Irish & White Gypsy & White Roma (2%)] followed by Asian/Asian British (20%), Black/Black British (15%), Mixed (6%) and Other (6%)<sup>21</sup> [Figure 24]. The younger the population, the more ethnic diversity.

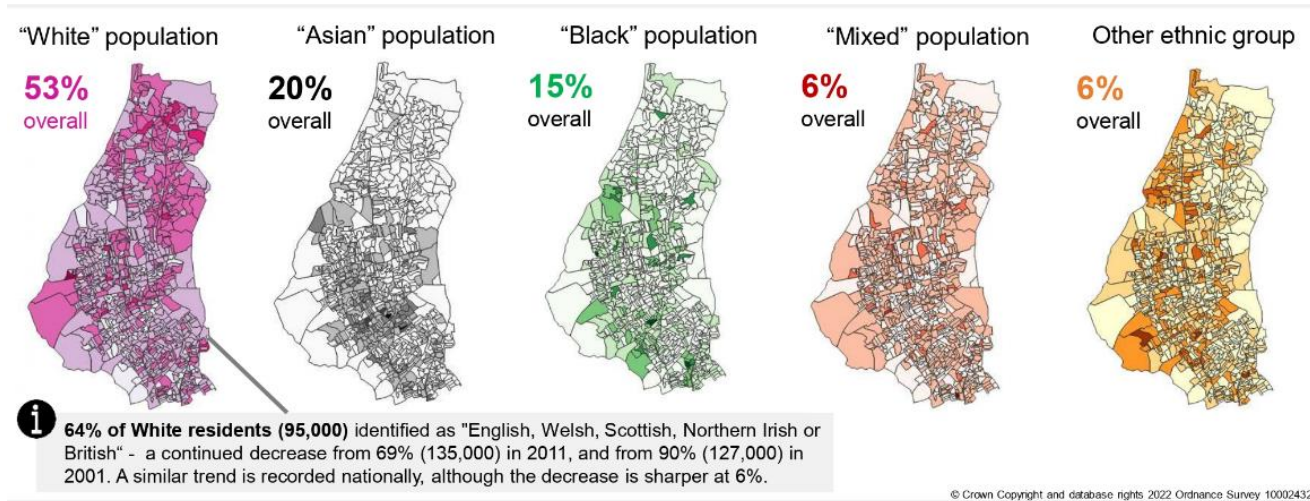
<sup>20</sup> NHS Digital (2016). Adult Psychiatric Morbidity Survey: <https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey>

<sup>21</sup> Census 2021



Figure 24

**Fig 24: Ethnicity by area in Waltham Forest**



Source: ONS Census 2021

As a percentage of its total borough population, Waltham Forest has the second largest proportion of Central and Eastern European residents of all London boroughs, with 10% of the population of the borough originating from Central and Eastern Europe<sup>22</sup>. This is almost twice the London average (6%) and substantially higher than in England and Wales (3%). There is also a large Pakistani population, comprising 10% of the population in terms of ethnic identity.

Migrant communities are also at increased risk of poor mental health and can experience isolation and alienation due to loss of kinship and social support from their country of origin<sup>23</sup>. Furthermore, the experience of immigration detention significantly injures the mental health and wellbeing of those already vulnerable individuals placed in such settings<sup>24</sup>. At the end of September 2022, 353 asylum seekers were in receipt of support from Waltham Forest Council<sup>25</sup>.

<sup>22</sup> EU8 (joined 2004) and EU2 (joined 2007) countries: Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia, Slovenia, Bulgaria, Romania

<sup>23</sup> Fang, M. L., & Goldner, E. M. (2011). Transitioning into the Canadian workplace: challenges of immigrants and its effect on mental health. *Can J Human & Soc Sci*, 2(1), 93-102.

<sup>24</sup> von Werthern, M., Robjant, K., Chui, Z. et al. The impact of immigration detention on mental health: a systematic review. *BMC Psychiatry* 18, 382 (2018). <https://doi.org/10.1186/s12888-018-1945-y>

<sup>25</sup> Home Office (2022). Asylum and resettlement datasets: <https://www.gov.uk/government/statistical-data-sets/asylum-and-resettlement-datasets#local-authority-data>

Our Waltham Forest mental health engagement work in 2022 identified that those who self-identified as “Other White” were more likely to experience bad or very bad mental wellbeing. Asian residents, on the other hand, reported lower rates of bad or very bad mental wellbeing, demonstrating a potentially protective effect of belonging to this ethnic group, or alternatively, the power of stigma to mask poor mental wellbeing.

**“I think it’s well known that there’s a lot of stigma amongst Black and Asian people around mental health. It’s got better and is less of an issue amongst younger people, but it’s still a problem and means that mental health issues can get buried and therefore made worse”.** Male, aged 18-34, Non-White British-Irish, Centre of borough, Black and Asian group

### 3.3 Vulnerable groups in Waltham Forest; other groups

In addition to the above groups, people with a history of drugs and/or alcohol misuse, victims of crime including domestic violence and sexual abuse and older people are known to be particularly vulnerable to poor mental wellbeing in Waltham Forest. These groups may not have been identified in local engagement because of factors such as low numbers, groups being “hard to reach” or marginalised, and stigma. Further detail around these vulnerable groups is included below.

#### 3.1.6 People with a history of drugs and/or alcohol misuse

People with a history of substance misuse are more likely to experience mental health problems. The two are closely linked and one does not necessarily cause the other. Alcohol and drugs are often used to self-medicate the symptoms of mental health problems. However, misusing substances causes side effects and in the long run often worsens the symptoms they initially helped to relieve.

Latest UK data suggests recreational drug use has increased in the past decade, with cannabis the most commonly used drug, followed by powder cocaine. National data shows that of those starting treatment for drugs and alcohol, nearly two thirds (63%) have a mental health need and a quarter (25%) of those with a mental health need are not receiving treatment for it<sup>26</sup>.

In Waltham Forest, an estimated 1,440 opiate and/ or crack users live in the borough, of which only approximately 41% are in treatment, below the England average of 46%. An estimated 3,133 dependent drinkers live in the borough, of which 596 (19%) are in specialist treatment, comparable with the England average of 18%. 55% of Waltham

<sup>26</sup> Office for Health Improvement & Disparities (2021). Adult substance misuse treatment statistics 2020 to 2021: report: <https://www.gov.uk/government/statistics/substance-misuse-treatment-for-adults-statistics-2020-to-2021/adult-substance-misuse-treatment-statistics-2020-to-2021-report#mental-health>

Forest clients that attend alcohol-only treatment services have been identified with a mental health treatment need, compared to the national figure of 65%, and only 65% of these were accessing treatment, compared with 80% nationally<sup>27</sup>. Thus there is considerable unmet mental health need for alcohol-dependent residents in the borough.

In terms of non-dependent alcohol consumption, Waltham Forest residents are far more likely to abstain from alcohol (34.3%) than the rest of England (16.2%) and fewer (15.6%) are drinking over 14 units of alcohol per week compared with the rest of England (22.8%)<sup>28</sup>. This difference is likely due to ethnically diverse population of the borough who are less likely to drink/binge drink alcohol.

### **3.1.7 Victims of crime including domestic violence and sexual abuse**

Domestic violence, which can include controlling, coercive, threatening behaviour, violence or abuse between intimate partners or family members is intimately associated with mental ill health. Victims of domestic violence frequently develop mental health problems and visa-versa.

A large-scale population survey showed that women who suffer from domestic abuse are more likely to experience physical health issues, emotional distress and suicide ideation<sup>29</sup>. Depression, post-traumatic stress disorder, and anxiety have also been shown to result from such abuse<sup>30</sup>. Childhood sexual abuse has also shown to increase rates of both childhood and adult mental disorders<sup>31</sup>.

The prevalence data around domestic violence and sexual abuse is stark. A recent report from the WHO found that worldwide, 1 in 3 women are subjected to physical or sexual violence by an intimate partner or sexual violence from a non-partner across their lifetime<sup>32</sup>. In the UK, the Crime Survey for England and Wales estimates 21.9% of the adult population have ever experienced domestic abuse<sup>33</sup>. The same survey estimates that 20.7% of the population aged 18 to 74 years experienced some form of abuse before

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<sup>27</sup> Waltham Forest Substance Misuse Needs Assessment 2022

<sup>28</sup> *ibid*

<sup>29</sup> <sup>29</sup> Pallitto, C C et al. (2013). Intimate partner violence, abortion, and unintended pregnancy: results from the WHO Multi-country Study on Women's Health and Domestic Violence. *Int J Gyn&Obst*, 120(1), 3-9. <https://doi.org/10.1016/j.ijgo.2012.07.003>

<sup>30</sup> Howard, L. M et al. (2013). Domestic violence and perinatal mental disorders: a systematic review and meta-analysis. *PLoS medicine*, 10(5), e1001452. <https://doi.org/10.1371/journal.pmed.1001452>

<sup>31</sup> Hailes HP et al. (2019) Long-term outcomes of childhood sexual abuse: an umbrella review. *Vol 6 (10) P830-839*. [https://doi.org/10.1016/S2215-0366\(19\)30286-X](https://doi.org/10.1016/S2215-0366(19)30286-X)

<sup>32</sup> World Health Organisation (2021). Devastatingly pervasive: 1 in 3 women globally experience violence: <https://www.who.int/news/item/09-03-2021-devastatingly-pervasive-1-in-3-women-globally-experience-violence>

<sup>33</sup> Office for National Statistics (2022). Domestic abuse in England and Wales overview: November 2022: <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwalesoverview/november2022#domestic-abuse-in-england-and-wales-data>

the age of 16 years<sup>34</sup> and 7.5% of the same population experienced sexual abuse before the age of 16<sup>35</sup>.

In the year December 21/22, there were 2,769 reported cases of domestic abuse in Waltham Forest, equating to rate of 10 per 1,000 population for the period. This ranks Waltham Forest 19th out of the 32 London Boroughs (excluding the City of London) for domestic abuse rates<sup>36</sup>.

Based on a landmark NSPCC report in 2000 on childhood sexual abuse, it is estimated that currently over 20,800 people aged 18-64 living in Waltham Forest are survivors of such abuse, with women being more than twice as likely to be a victim than men<sup>37</sup>.

### 3.1.8 Older people

Data from the Annual Population Survey shows that as well as low wellbeing being associated with young adulthood, a second dip in wellbeing occurs towards the end of life. During the older years, particularly in those aged 85 and older, satisfaction and sense of worthwhile reach an all-time low. As [Figure 25](#) shows, this poor wellbeing was exacerbated further by the COVID pandemic.

In those aged 65 and over, depression affects around 22% of men and 28% of women<sup>38</sup>. Age Concern and the Mental Health Foundation identified five key factors that negatively affect mental health and wellbeing of older people which are discrimination, lack of participation in meaningful activities, poor or no relationships with significant others, poor physical health, and poverty<sup>39</sup>.

In Waltham Forest, 10.2% of the population is aged 65 years and older, equivalent to 28,400 people<sup>40</sup>. As the UK population continues to age, this is expected to rise in coming years to 15.5% of the borough's population in 2026, or 36,230 people<sup>41</sup>.

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<sup>34</sup> Office for National Statistics (2020). Child abuse in England and Wales: March 2020:

<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/childabuseinenglandandwales/march2020#what-do-we-know-about-the-prevalence-of-child-abuse>

<sup>35</sup> Office for National Statistics (2020). Child sexual abuse in England and Wales: year ending March 2019:

<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/childsexualabuseinenglandandwales/yearendingmarch2019>

<sup>36</sup> London Datastore: Metropolitan Police Service Crime Dashboard. Accessed Dec 2022:

<https://data.london.gov.uk/dataset/mps-monthly-crime-dahboard-data>

<sup>37</sup> Projecting Adult Needs and Service Information. Accessed Dec 2022: <https://www.pansi.org.uk/>

<sup>38</sup> Mental Health Foundation: Older people: statistics. Accessed Dec 2022:

<https://www.mentalhealth.org.uk/statistics/mental-health-statistics-older-people>

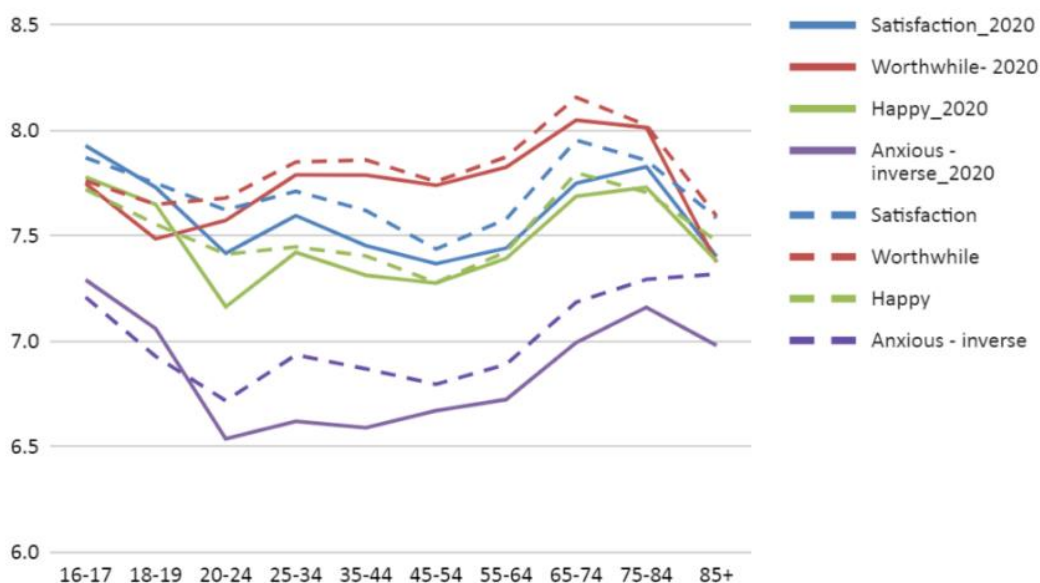
<sup>39</sup> Age Concern and the Mental Health Foundation (2006). Promoting mental health and well-being later in life: <https://lx.iriss.org.uk/sites/default/files/resources/26-Promoting%20Mental%20Health%20and%20Well-being%20in%20Later%20Life%20-%20Inquiry%20Report.pdf>

<sup>40</sup> mid 2021 Census estimates

<sup>41</sup> GLA borough preferred option (BPO) 2019-based housing-led population projections

Figure 25

**Fig 25: Mean Satisfaction, worthwhile, happiness and anxiety by age**



Source: What Works for Wellbeing: <https://whatworkswellbeing.org/blog/a-decade-of-subjective-wellbeing-data/>

Within our 2022 mental wellbeing engagement survey, only 10% of those aged 65+ in the borough reported bad or very bad mental wellbeing, compared to the overall proportion of 20%. However, Waltham Forest WEMWBS scores from 2019 told a different story – this survey showed that those aged 65 years+ were more likely to have lower wellbeing. Overall, local data on the mental wellbeing of older adults in Waltham Forest is unclear.

In addition to the level of wellbeing, recent Resident Insight Surveys have shown older adults in Walthamstow to have poorer awareness of mental wellbeing opportunities and resources in the borough than all other age groups<sup>42</sup>. These opportunities include opportunities to connect, physical activities, adult education, online resources, and volunteering opportunities.

Lack of relationships and social contact are known to be particularly harmful to both physical and mental wellbeing (see 4.4 Social capital and social isolation). In the Winter 2019 Resident Insight Survey, 37% of Waltham Forest residents felt that they had as much social contact as they wanted with people that they like, but this figure dropped to 21% in

<sup>42</sup> RIS Spring 2020

those aged 65+. Note that this research was also carried out pre-pandemic when social contact will have reduced further.

**“Getting older can be tough. It is depressing sometimes that your body doesn’t do what you want any more. You can find yourself becoming more isolated and lonely, especially as you get really old in your 80s and 90s and can’t get out as much. I still try to say active and social and I’m generally a positive person, but during the lockdowns it was tough”** Male, aged 70+, Non-White British-Irish, S. West of the borough, Older person group



## 4. Social and economic determinants of mental wellbeing

To appreciate what drives individuals and groups to feel mentally well, it is vital to understand that mental wellbeing is shaped by the social, economic, political and environmental circumstances in which people live. A large body of evidence demonstrates that common mental illness is distributed across a gradient of economic deprivation; poorer people are more likely to suffer from common mental illness and the adverse sequelae than their wealthier counterparts<sup>43</sup>. Poor employment, housing and social isolation as well as numerous other risk factors have been shown to be associated with mental ill health. **Figure 26** from the What Works Centre for Wellbeing provides some further examples, but this is not exhaustive.

Figure 26

**Fig 26: Social, Economic and Environmental Determinants of Mental Wellbeing**



Source: What Works for Wellbeing: <https://whatworkswellbeing.org/>

<sup>43</sup> WHO (2014). Social Determinants of Mental Health: [https://apps.who.int/iris/bitstream/handle/10665/112828/9789241506809\\_eng.pdf](https://apps.who.int/iris/bitstream/handle/10665/112828/9789241506809_eng.pdf)

The social determinants of health, including mental health, are explored further in the recent report by Michael Marmot from the Institute of Health Equity, published in December 2022<sup>44</sup>, entitled [A fairer and healthier Waltham Forest: equity and the social determinants of health](#). This work provides an assessment of health inequalities and key social determinants of health, as well as of the borough's systems. It shows not only the significant problems in the borough but also examples of best practice. It is recommended reading for this JSNA chapter and compliments and builds on the data included in this section.

For the purposes of this JSNA chapter, the following social and economic determinants are explored at a local level:

- Economic wellbeing including poverty
- Employment & workplace
- Housing
- Social capital and social isolation

Many of these determinants and their importance within Waltham Forest overlap and are touched upon in [Section 5.1 The cost-of-living crisis](#).

**“Waltham Forest has some really nice parts to it, including some lovely parks, the wetlands, the Forest, as well as some really interesting urban areas. It’s a great place to live. But it’s also somewhere that could be even better. They could do even more to make the existing parts of the borough better, like improving public spaces and maintaining open spaces better. And then they should make sure that all this new housing is high quality, both its design and not making it too dense, as well as making sure there’s nice open spaces and green spaces for people. It’s got to be a good quality place to live that adds to the borough, otherwise it will affect people’s quality of life and their mental health”.** Male, aged 55-69, Non-White British-Irish, S. West of the borough, Older person group

## 4.1 Economic wellbeing including poverty

Poverty produces an environment that is extremely harmful to individuals', families' and communities' mental health. The impacts of poverty are present throughout the life course (from before birth and into older age) and have cumulative impacts. Many of the impacts of poverty on mental wellbeing occur via some of the other wider determinants described below including poor housing, poor educational attainment, unemployment etc. However, financial hardship and insecurity is also known to be a specific risk factor for poor mental wellbeing in its' own right.

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<sup>44</sup> Institute of Health Equity (2022). A fairer and healthier Waltham Forest: equity and the social determinants of health. London: <https://www.instituteofhealthequity.org/resources-reports/a-fairer-and-healthier-waltham-forest/full-report.pdf>



Across the UK, both men and women in the poorest fifth of the population are two to three times more likely to develop mental health problems than those in the highest fifth<sup>45</sup>. Socioemotional and behavioural difficulties have been found to be inversely distributed by household wealth as a measure of socio-economic position in children as young as 3 years old.

Overall, Waltham Forest is a relatively deprived borough. According to the national Index of Multiple Deprivation (IMD), it is 12<sup>th</sup> most deprived borough in London and the 82<sup>nd</sup> most deprived of 317 local authorities in England<sup>46</sup>. This ranking is an improvement on that from 2015. However, the average level of deprivation can also mask high levels of poverty within the borough; There is great inequality within Waltham Forest and marked differences in poverty levels between different wards.

Child poverty is a particularly important indicator; In Waltham Forest, 2019 data shows nearly a fifth of children (19.2%) are living in poverty. This measure of poverty is based on the Income Deprivation Affecting Children Index (IDACI) which looks at income-deprived families based on benefits received. A similar index exists for older adults and data from 2019 shows that 22.8% of Waltham Forest residents aged 60+ years live in poverty, compared to 14.2% nationally. However, there are other measures of poverty. Relative poverty is defined as when a household's income is below 60% of the median in that year. Using this measure, 2019 data shows nearly a quarter of children (24%) in the borough are living in relative poverty, a higher proportion than the average for London (18%) and England (19%). All measures of poverty are calculated before housing costs. After housing costs the proportion of children living in poverty will be much higher; Loughborough University estimated that 22% of Waltham Forest were living in poverty in 2020/21 and that figure would increase to 43% once housing costs are considered<sup>47</sup>.

Economic hardship and poverty experienced by Waltham Forests residents will have a profound impact on mental wellbeing. [Section 5.1](#) The cost-of-living crisis explores the impact of fuel poverty, food poverty and low pay further, and demonstrates some of the ways in which these factors interact.

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<sup>45</sup> Marmot, M., Allen, J., Goldblatt, P et al. (2010). Fair society, healthy lives: Strategic review of health inequalities in England post 2010: <https://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review>

<sup>46</sup> Department for Levelling Up, Housing and Communities and Ministry of Housing, Communities & Local Government (2019). English indices of deprivation 2019: mapping resources: <https://www.gov.uk/guidance/english-indices-of-deprivation-2019-mapping-resources#indices-of-deprivation-2019-local-authority-dashboard>

<sup>47</sup> Trust for London (2022) Proportion of children in poverty before and after housing costs by London borough (2020/21). Available from: <https://www.trustforlondon.org.uk/data/child-poverty-borough/>

## 4.2 Employment & workplace

Both employment and unemployment can both significantly affect mental wellbeing. The following points demonstrate some of the ways in which they can relate:

- Being in work, and particularly good work, as opposed to under or unemployed, is known to have significant benefits. Previous Annual Population Surveys have shown that after self-reported health, employment status is the next most important factor related to personal well-being<sup>48</sup>.
- The conditions experienced in the workplace for those that are employed are also an important determinant. For example, workplace stress and financial insecurity and hardship are intimately associated with poor mental wellbeing<sup>49</sup>.
- For those who are unemployed, the demands of the social security system itself (e.g. claims process, work capability testing) can have a negative impact on mental wellbeing<sup>50</sup>.

Note that the definitions of employment, unemployment and economic activity can be confusing. Using estimated figures based on the Labour Force Survey, the percentage of people in employment aged 16-64 years in Waltham Forest is 73.6%, slightly less than the 75.2% estimated in London and 75.4% in England<sup>51</sup>. Those who are economically active are those who are employed, or unemployed. Groups comprising the economically inactive include: the long-term sick or disabled, the temporary sick (with no employment), people looking after family/home, students, and retired people. The Census 2021 shows that 68% of our residents aged 16+ (includes those who are retired) are economically active, and 32% are economically inactive. Between 2011 and 2021, there was an increase in employment in economically active people (excluding full-time students) in Waltham Forest from 56.8% in 2011 to 61.1% in 2021, the second-largest percentage-point rise in England<sup>52</sup>.

Unemployment as measured by the out-of-work benefit claimant count was declining in Waltham Forest, London and England until 2018, when it began to rise again, and rose sharply when the pandemic started [Figure 27]. During the pandemic, Waltham Forest was thought to have one of the highest unemployment rates in London, with one study for the London Councils estimating 15% of the borough to be unemployed in December 2021<sup>53</sup>.

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<sup>48</sup> The National Archives (2013) What matters most to personal well-being?

[www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/measuringnationalwellbeing/international-comparisons2019](http://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/measuringnationalwellbeing/international-comparisons2019)

<sup>49</sup> WHO (2022) Mental health at work: <https://www.who.int/news-room/fact-sheets/detail/mental-health-at-work>

<sup>50</sup> The Health Foundation (2021). Unemployment and Mental Health: [Unemployment and mental health - The Health Foundation](https://www.healthfoundation.org.uk/unemployment-and-mental-health)

<sup>51</sup> Office for Health Improvement & Disparities. Fingertips <https://fingertips.phe.org.uk/>

<sup>52</sup> Office for National Statistics (2022). How life has changed in Waltham Forest: Census 2021: <https://www.ons.gov.uk/visualisations/censusareachanges/E09000031/>

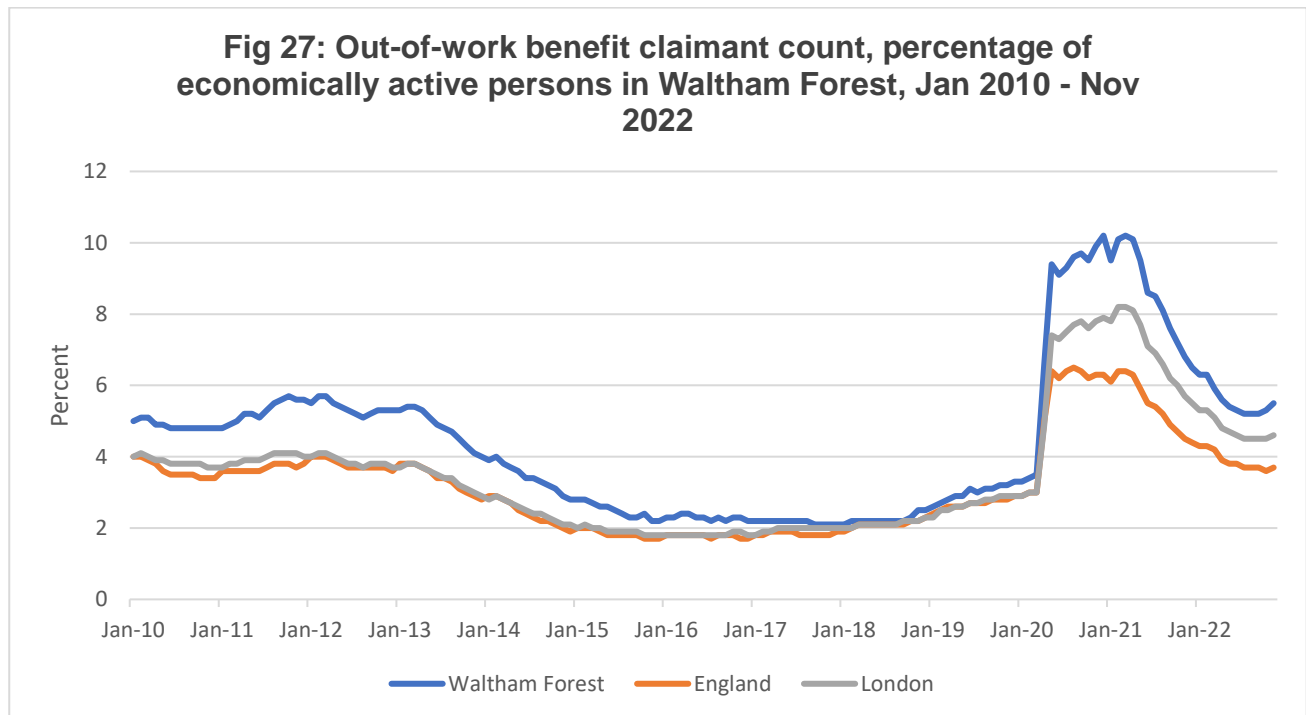
<sup>53</sup> London Councils (2021) A detailed study of unemployment in London:

[https://www.londoncouncils.gov.uk/sites/default/files/Policy%20themes/Economic%20development/Volterra\\_LondonCouncils\\_Unemployment\\_FinalExecutiveSummary\\_190321\\_PostBudget\\_0.pdf](https://www.londoncouncils.gov.uk/sites/default/files/Policy%20themes/Economic%20development/Volterra_LondonCouncils_Unemployment_FinalExecutiveSummary_190321_PostBudget_0.pdf)

The pandemic also led to a significant drop in the number of working households as measured in the Annual Population Survey; the proportion dropped from 57.6% to 51.6% of all households in the borough.

However, there has been some recovery post-pandemic, as Figure 27 also indicates. The numbers of people claiming out of work benefit has dropped to 5.5%, and the percentage of working households is now 57.7%, exceeding the London average of 56.4%.

Figure 27



Source: Nomis: <https://www.nomisweb.co.uk/reports/lmp/la/1946157278/report.aspx>

A national survey conducted by mental health charity MIND suggested that more than 1 in 6 employees have experienced common mental health problems, including anxiety and depression. The survey also showed that work is often the biggest cause of stress in people's lives, more so than housing issues or financial problems. Mental health problems are the leading cause of sickness absence from work<sup>54</sup>.

A report from The Health and Safety Executive indicates that around 914,000 workers are affected by work-related stress, depression or anxiety in Britain, and work-related stress, depression or anxiety accounted for 51% of all work-related ill health<sup>55</sup>

<sup>54</sup> Mind (2018) How to implement the Thriving at Work mental health standards in your workplace. [https://www.mind.org.uk/media-a/5762/mind\\_taw\\_a4\\_report\\_july18\\_final\\_webv2.pdf](https://www.mind.org.uk/media-a/5762/mind_taw_a4_report_july18_final_webv2.pdf)

<sup>55</sup> Health and Safety Executive (2022). Work-related ill health and occupational disease in Great Britain: <https://www.hse.gov.uk/statistics/causdis/index.htm>

The Labour Force Survey shows that Waltham Forest, sickness absence has been high – in the period 2018-2020, 3.1% of employees in Waltham Forest had at least one day off sick in the previous week, compared to 1.9% in both London and England, and 1.6% of all working days were lost due to sickness absence, compared to 0.9% in London and 1.0% in England<sup>56</sup>.

### 4.3 Housing and homelessness

There is a strong link between people's housing and their mental health and wellbeing and the absence of suitable, stable accommodation is a serious risk factor for poor mental health. One in 5 adults in England had experienced a housing related issue that had negatively impacted on their mental health in the last five years<sup>57</sup>.

The impact of housing includes:

- Rising prices for both renters and owners leading to stress around financial insecurity and poor economic wellbeing.
- Poor quality housing stock with dampness, poor safety and security, and cold homes
- Overcrowded accommodation, which relates to poor sleep, reduced educational attainment and increased stress
- Homelessness: one of the biggest threats to mental health. Current research (2022) from Homeless Link describes 81% of homeless people reporting some form of mental health issue and 25% requiring admission to hospital because of mental health problems<sup>58</sup>. This shows a large increase from the 45% of homeless people who reported a mental health issues in Wave 1 of this research, in 2012-14.

There is currently a homelessness crisis in the UK, which is most severe in London. IN 2022, over 55,000 households in London were living in Temporary Accommodation. The central issue appears to be affordability of living – over half of these households are in work, yet still cannot afford a stable home<sup>59</sup>. In Waltham Forest, at the end of June 2022, there were 984 households in temporary accommodation, 780 of which (79%) were households with children. A total of 1851 children were living in temporary housing<sup>60</sup>.

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<sup>56</sup> OHID, Fingertips: Public health profiles: <https://fingertips.phe.org.uk/>

<sup>57</sup> Shelter (2017). The Impact of Housing Problems on Mental Health: [https://england.shelter.org.uk/media/press\\_release/1\\_in\\_5\\_adults\\_suffer\\_mental\\_health\\_problems\\_such\\_as\\_anxiety\\_depression\\_and\\_panic\\_attacks\\_due\\_to\\_housing\\_pressures](https://england.shelter.org.uk/media/press_release/1_in_5_adults_suffer_mental_health_problems_such_as_anxiety_depression_and_panic_attacks_due_to_housing_pressures)

<sup>58</sup> Homeless Link (2022) Unhealthy State of Homelessness 2022. <https://homeless.org.uk/knowledge-hub/unhealthy-state-of-homelessness-2022-findings-from-the-homeless-health-needs-audit/>

<sup>59</sup> London Councils (2022) London's Homelessness Crisis. Winter briefing 2021/22. <https://www.londoncouncils.gov.uk/our-key-themes/housing-and-planning/housing-and-planning-reports/winter-homelessness-briefing-2021>

<sup>60</sup> Department for Levelling Up, Housing and Communities. (2022). Live tables on homelessness: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

In Waltham Forest, a relatively high proportion of residents own their own homes (50%)<sup>61</sup>. However, property prices have risen rapidly in the borough: in March 2021 house prices in Waltham Forest had risen by 7.7% in a year, the highest annual increase across London<sup>62</sup>, and the ratio of average house prices to average earnings in the borough more than doubled between 2002 and 2018, increasing from 5.69 to 13.61<sup>63</sup>. This means housing in Waltham Forest is less affordable than in London as a whole and raises questions about whether those who grow up in the borough will be able to afford to live here in the future.

Fifty per cent of housing in Waltham Forest is rented, 28% privately rented and 22% socially rented. One in four (23%) residents in Waltham Forest's most recent Resident Insight Survey (Autumn 2022) cited lack of affordable housing as one of their top three concerns, and it was third most important concern for residents after the Cost-of-Living Crisis and crime/violence

Overcrowding in the UK has increased for social and private renters over the last 30 years. From the English Housing Survey of 2020, an average of 8.7% of all social-renting households and 6.7% of all private-renting households were overcrowded in the UK, compared with 1.2% of owner-occupying households<sup>64</sup>. The English Housing Survey also shows substantial differences in levels of overcrowding between different ethnic groups, with Bangladeshi (24%), Pakistani (18%) and Black African (16%) households most likely to experience overcrowding compared to an all ethnicity average of 3%. Households in London are more likely to experience overcrowding.

In Waltham Forest, almost one in five households (17.5%) are overcrowded compared to 15.7% in London and 6.4% of nationally, based on number of rooms required<sup>65</sup>. Nearly half of Waltham Forest's housing stock was built before 1919 and is difficult to insulate and to heat; Fuel poverty, another aspect of housing which affects mental and physical health, is covered in [Section 5.1 The cost-of-living crisis](#).

## 4.4 Social capital and social isolation

Social capital has been defined as the resources people develop and draw on to increase their confidence and self-esteem, their sense of connectedness, belonging, and ability to bring about change in their lives and communities. Increasing social capital involves the creation of strong networks, good levels of support and positive relationships which help to integrate individuals and communities. The health benefits include: increased confidence

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<sup>61</sup> Census 2021

<sup>62</sup> London Councils (2021). Delivering on London's Housing Requirement: interim report: <https://www.londoncouncils.gov.uk/our-key-themes/housing-and-planning/housing-and-planning-reports/delivering-london%e2%80%99s-housing>

<sup>63</sup> London Borough of Waltham Forest (2022). Statistics about the borough. <https://www.walthamforest.gov.uk/council-and-elections/about-us/statistics-about-borough>

<sup>64</sup> House of Commons Library (2021). Overcrowded housing (England): <https://researchbriefings.files.parliament.uk/documents/SN01013/SN01013.pdf>

<sup>65</sup> Census 2021

and self-esteem, particularly in one's ability to handle a crisis, a sense of connectedness and belonging, the ability to bring about change in one's own life or in their community. Evidence shows that all of these benefits support the development of good mental wellbeing and are protective factors in relation to poor mental health.

Conversely, the opposite of social capital is social isolation and/or loneliness. These are known to be strong risk factors for poor mental wellbeing. Research shows that lacking social connections is as damaging to our health as smoking fifteen cigarettes a day and loneliness increases the likelihood of mortality by 26%<sup>66</sup> and much of this impact on health is seen through poor mental health and wellbeing. UK survey data from Age UK pre-pandemic showed that 1 in 12 people aged 50 years and over were often lonely<sup>67</sup> and the pandemic has been shown to have had a huge impact on loneliness, disproportionately affecting those with low incomes, health issues or from ethnic minorities. National loneliness data also shows that disabled adults are nearly four times more likely to often or always feel lonely, compared to non-disabled adults<sup>68</sup>.

In Waltham Forest, 25.9% of all households in Waltham Forest are single-person households<sup>69</sup> and almost one in three (29%) of adults aged 65+ live alone, a proportion that has reduced by 6% since the 2011 Census. While living alone doesn't necessarily mean social isolation or loneliness, it is an important factor in the burden of social isolation, particularly in older adults.

Local Waltham Forest surveys pre-COVID pandemic showed that 18% of the borough did not feel like they had adequate social contact with people, with older people, people with a disability and economically inactive residents more likely to feel isolated<sup>70</sup>. During the pandemic, as many as 59% of residents reported the negative impact of loneliness on their mental wellbeing<sup>71</sup>. Post-pandemic we have learned that those aged 65+ are also the least connected via the internet, with 13% not having access to the internet from home, compared with 3% overall<sup>72</sup>.

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<sup>66</sup> Holt-Lunstad, J et al. (2015). Loneliness and Social Isolation as Risk Factors for Mortality: A Meta-Analytic Review. *Perspectives on Psychological Science*, 10(2), 227–237. <https://doi.org/10.1177/1745691614568352>

<sup>67</sup> Age UK (2018). All the Lonely People: Loneliness in Later Life: <https://www.ageuk.org.uk/latest-press/articles/2018/october/all-the-lonely-people-report/>

<sup>68</sup> Disability, well-being and loneliness, UK: 2019. Office for National Statistics. <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/bulletins/disabilitywellbeingandlonelinessuk/2019>

<sup>69</sup> Census 2021

<sup>70</sup> RIS Winter 2019

<sup>71</sup> Coronavirus (COVID-19) –Lockdown easing, reset and recovery. Pandemic Residents' Survey 2021.

<sup>72</sup> RIS Spring 2022



## 5 National and global determinants of mental wellbeing

As well as local social, economic, environmental and political conditions affecting mental wellbeing, we know that national and global events also have a profound effect on the lives of our residents.

Following the Global Financial Crisis in 2008, research has shown us that economic downturns are associated with less healthy behaviours, an increase in mental health problems including depression and reduced wellbeing, more completed suicide and suicide attempts and possibly more homicides and domestic violence<sup>73</sup>. The introduction of Universal Credit led tens of thousands of people in the UK to experience psychological stress and clinical depression<sup>74</sup>. In our Waltham Forest mental wellbeing engagement survey 2022, the third most important issue which made residents' mental health and wellbeing worse was "what was happening in the world / what's in the news" [see section 2.3 Local mental wellbeing data: Waltham Forest Mental Wellbeing Engagement Survey 2022]. News anxiety has been described since the 1990s, when 24 hour rolling news became available on the television. Negative news such as news of wars, for example the current Russia-Ukraine war, can lead to heightened levels of anxiety, uncertainty and fear, or bring up traumatic memories.

According to the most recent Resident Insight Surveys in 2022, there are three major national/global concerns which worry Waltham Forest residents. In order of perceived importance, these are the Cost-of-Living crisis, climate change and the COVID-19 pandemic. These three topics are addressed below.

### 5.1 The cost-of-living crisis

The President of the Royal College of Psychiatrists has warned that "the cost-of-living crisis poses a threat of pandemic proportions to the nation's mental health<sup>75</sup>." UK-wide research this year indicated that 59% of UK adults say that the cost-of-living crisis has had a negative impact on their mental health, such as leaving them feeling anxious, depressed or hopeless, and 11 million people reported feeling 'unable to cope'<sup>76</sup>

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<sup>73</sup> Institute of Health Equity (2012): The impact of the economic downturn and policy changes on health inequalities in London: <https://www.instituteoftheequity.org/resources-reports/the-impact-of-the-economic-downturn-and-policy-changes-on-health-inequalities-in-london/the-impact-of-economic-downturn.pdf>

<sup>74</sup> Wickham S et al. (2020). Effects on mental health of a UK welfare reform, Universal Credit: a longitudinal controlled study. The Lancet Public Health: Vol 5 (3) E157-E164. DOI: [https://doi.org/10.1016/S2468-2667\(20\)30026-8](https://doi.org/10.1016/S2468-2667(20)30026-8)

<sup>75</sup> Royal College of Psychiatrists (2022). Cost-of-living crisis threat of 'pandemic proportions' to mental health, warns UK's leading psychiatrist: <https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2022/06/20/cost-of-living-crisis-threat-of-pandemic-proportions-to-mental-health-warns-uk-s-leading-psychiatrist>

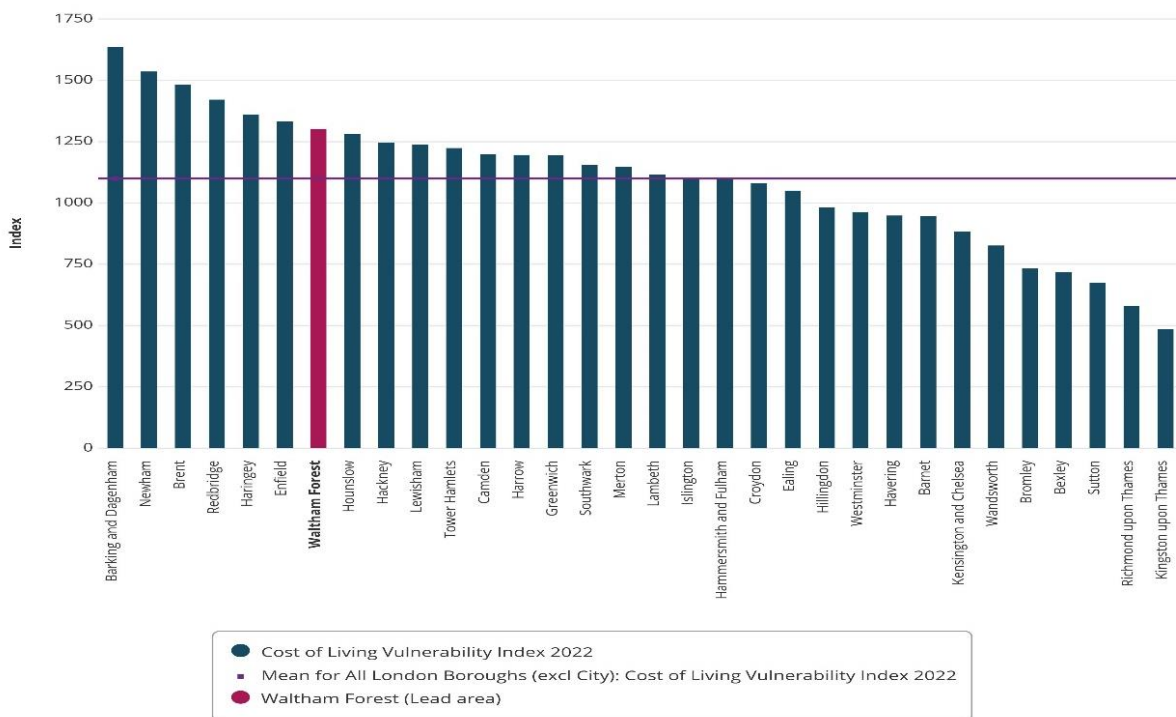
<sup>76</sup> Money and Mental Health Policy Institute (2022): <https://www.moneyandmentalhealth.org/press-release/cost-of-living-crisis/>

The importance of economic wellbeing and financial security was introduced in 4.1 [Economic wellbeing including poverty](#). Here it is expanded upon further. Unmanageable financial debt is associated with poorer mental health<sup>77</sup> and a quarter of people experiencing common mental health conditions also have financial problems; this is three times greater than the general population<sup>78</sup>.

The Cost-of-Living Vulnerability Index, created by the Centre for Progressive Policy, is the total of multiple poverty- and work-based vulnerability indicator rankings for each local authority. Indicators included are fuel poverty, food insecurity, child poverty, claimant count, economic inactivity and low pay. According to this Index, Waltham Forest lies in the most vulnerable quartile of all local authorities in London, and in the UK<sup>79</sup>.

Figure 28

**Fig 28: Cost of Living Vulnerability Index (2022) for All London Boroughs**



Source: Centre for Progressive Policy

Powered by LG Inform

Source: Local Government Association: LG Inform: <https://lginform.local.gov.uk/>

<sup>77</sup> Meltzer H et al. (2012). The relationship between personal debt and specific common mental disorders. Eur J Pub Health. Vol 23 (1) 108-113. <https://doi.org/10.1093/eurpub/cks021>

<sup>78</sup> Money and Mental Health Policy Institute (2016). The Missing Link: <https://www.moneyandmentalhealth.org/the-missing-link/>

<sup>79</sup> Local Government Association: LG Inform: <https://lginform.local.gov.uk/> [accessed Jan 2023]



Waltham Forest's most recent Resident Insight Survey (Autumn 2022) reported that 89% of residents are concerned about the cost of living and 35% are very concerned. When reporting on whether they are struggling to make ends meet, 17% were struggling to make ends meet/going without basic needs and 46% reported just about managing. These figures had increased significantly from Spring 2022 (82% of residents concerned, 14% struggling, 36% just managing) demonstrating a clear intensification of residents' worry and need. As a result of these concerns, more than a quarter of residents are using their savings to manage their living costs and buying less food, whilst one in fourteen are sometime going without food, and one in thirteen are going into debt in order to cope.

In the context of the Cost-of-Living Crisis, we consider the issues of fuel poverty, food insecurity and low pay in more detail.

### 5.1.1 Fuel Poverty

Fuel poverty affects many aspects of health. A household is defined as being in fuel poverty if it has a low energy efficiency ratio and low income after housing costs and energy needs are taken into account (the Low Income Low Energy Efficiency (LILEE) measure).

Waltham Forest has high levels of fuel poverty, with 16.4% of households thought to be fuel poor, a proportion significantly higher than seen in London (11.5%) and England (13.2%) [Figure 29]. Of all London boroughs, Waltham Forest is ranked the third most affected by fuel poverty. Some wards are particularly affected, with wards such as Lea Bridge and Cann Hall in the South of the borough having rates of more than one in four households<sup>80</sup>.

Alongside its effect on physical health and mortality, living in cold homes is associated with multiple mental health risks. Mothers of young children living in cold homes may be up to 64% more likely to experience maternal depression after taking account of other socioeconomic factors<sup>81</sup>. In turn, maternal mental health is known to impact on the health and wellbeing of the child across their lifecourse. More than one in four adolescents living in cold housing are at risk of multiple mental health problems compared with a rate of one in 20 for adolescents who have always lived in warm housing<sup>82</sup>.

Fuel poverty affects mental wellbeing not only through the effect of cold homes, but also as a direct response of having less cash available for other expenditures critical to mental

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<sup>80</sup> Institute of Health Equity (2022). A fairer and healthier Waltham Forest: equity and the social determinants of health. London: <https://www.instituteofhealthequity.org/resources-reports/a-fairer-and-healthier-waltham-forest/full-report.pdf>

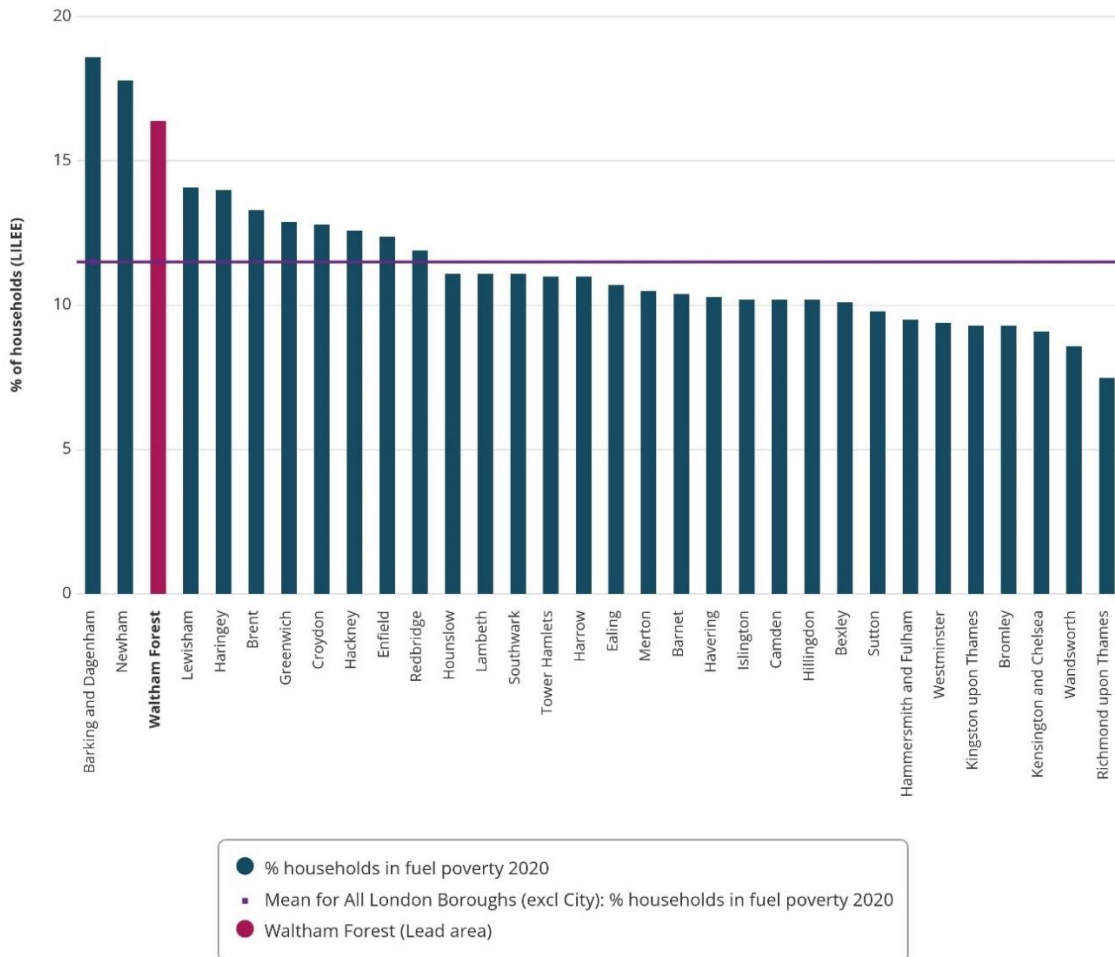
<sup>81</sup> Mohan G. (2021) The impact of household energy poverty on the mental health of parents of young children. J Pub Health. Vol 44 (1) pg 121-128: <https://doi.org/10.1093/pubmed/fdaa260>

<sup>82</sup> Institute of Health Equity (2022). Fuel poverty, cold homes and health inequalities. <https://www.instituteofhealthequity.org/resources-reports/fuel-poverty-cold-homes-and-health-inequalities-in-the-uk/read-the-report.pdf>

wellbeing, including food. In 2023, fuel poverty will increase further as fuel costs continue to rise.

Figure 29

**Fig 29: Percentage of households in fuel poverty (2020) for All London Boroughs excl City)**



Source: Department for Business, Energy & Industrial Strategy

Powered by LG Inform

Source: Local Government Association: LG Inform: <https://lginform.local.gov.uk/>

### 5.1.2 Food poverty

Food poverty, or food insecurity, refers to a state where an individual or household has insufficient food. Definitions vary from ‘not have access to enough safe and nutritious food

for normal growth and development and an active and health life<sup>83</sup> to 'feeling hungry, having smaller meals or not eating for a whole day because of not being able to afford or get access to food'<sup>84</sup>. Those particularly vulnerable to food poverty include those with low income, younger adults and those that rent their home. The mental wellbeing impacts are stark; it has been shown to be associated with depression, anxiety and stress in 149 countries from across the globe<sup>85</sup>, as well as an increase in suicidal thoughts<sup>86</sup>, and these associations are independent of socioeconomic factors such as household income.

Rates of food insecurity have been increasing in the UK over recent years and in 2022 the cost-of-living crisis rapidly pushed significant numbers of households further into food insecurity. For example, in September 2022 – after food prices rose by an average of 14.6% in a year - a survey of over 2000 UK parents working full time and earning less than the real Living Wage found that almost half (42%) of these low paid families regularly skipped meals for financial reasons, an increase of 10% in 6 months. Over half (56%) had also used a foodbank at least once in the previous 12 months, with 63% increasing their use over the past year<sup>87</sup>.

A snapshot of food insecurity post-COVID-19 at local authority level was taken in January 2021, by the University of Sheffield and the Food Foundation. At this time, 13.5% of residents in Waltham Forest were struggling to have food, compared to 12.8% in London and 10.5% nationally, and 5.2% were experiencing hunger, compared to 4.2% nationally<sup>88</sup>. In Summer 2022, the Felix Project, a charity that distributes food in Waltham Forest, estimated that over 11,000 people in borough were receiving support from community food providers<sup>89</sup>.

### 5.1.3 Low pay

Although being employed compared to unemployed is associated with better mental wellbeing, employment with low pay may negatively affect mental health. Low pay means not only less money for food, rent and heating, but also affects relationships with family and friends and increases anxiety. With the cost-of-living crisis, low paid workers describe the negative impact of low pay on their lives more than ever before.

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<sup>83</sup> Food and Agriculture Organization of the United Nations (2015). The State of Food Insecurity in the World: <https://www.fao.org/3/i4646e/i4646e.pdf>

<sup>84</sup> The Food Foundation: <https://foodfoundation.org.uk/> [accessed Dec 2022]

<sup>85</sup> Jones A D (2017). Food Insecurity and Mental Health Status: A Global Analysis of 149 Countries. *Am J Prev Med*. Vol 53 (2) Pg 264-273. <https://doi.org/10.1016/j.amepre.2017.04.008>

<sup>86</sup> Men F, Elgar FJ, Tarasuk V. (2021). Food insecurity is associated with mental health problems among Canadian youth. *J Epidemiol Community Health* Vol 75:741-748. <https://doi.org/10.1136/jech-2020-216149>

<sup>87</sup> Living Wage Foundation. (2022). Life on low pay during a cost-of-living crisis: <https://www.livingwage.org.uk/life-low-pay-during-cost-living-crisis>

<sup>88</sup> University of Sheffield (2021): New map shows where millions of UK residents struggle to access food: <https://www.sheffield.ac.uk/news/new-map-shows-where-millions-uk-residents-struggle-access-food>

<sup>89</sup> Institute of Health Equity (2022). A fairer and healthier Waltham Forest: equity and the social determinants of health. London: <https://www.instituteoftheequity.org/resources-reports/a-fairer-and-healthier-waltham-forest/full-report.pdf>

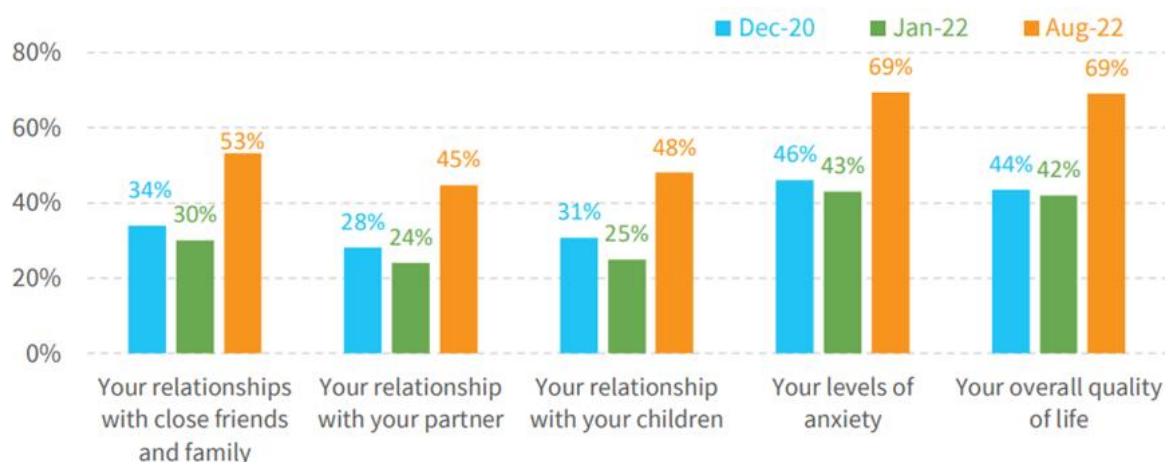
In Summer 2022, research carried out by the Living Wage Foundation showed that 69% of below Living Wage workers felt the pay they received negatively impacted their levels of anxiety, compared to 42% in January 2022 and 44% in December 2020<sup>90</sup>. The figures are similar for overall quality of life and other measures of wellbeing, as can be seen in [Figure 30](#).

The research also showed that the effect was more pronounced for women, compared to men, for example 75% of low paid women said their level of pay negatively impacted their anxiety, compared to 65% of low paid men. This is in keeping with previous research showing women are disproportionately affected financially and psychologically during periods of high inflation<sup>91</sup>

In Waltham Forest, 2022 data shows that 30.4% of jobs in the borough are paid at below the London Living Wage, making the borough the 4<sup>th</sup> most low-paid borough in London. This compares to 13.6% of jobs across London [[Figure 31](#)]. If considering the residents of Waltham Forest rather than the jobs in the borough, 17.7% of residents are low paid compared to an average of 20.2% across all London Boroughs<sup>92</sup>.

Figure 30

**Fig 30: Proportion of below Living Wage workers experiencing negative life situations because of low pay, UK, December 202 – August 2022**



Source: Living Wage Foundation analysis of Suration surveys. Data for December 2020 comes from 2,128 respondents aged 18+, who live in the UK and earn under the real Living Wage. Data for January 2022 comes from 1,702 respondents aged 18+, who live in the UK and earn under the real Living Wage. Data for August 2022 comes from 2,054 respondents aged 18+ who live in the UK and earn under the real Living Wage. All samples were asked: To what extent does the payment you receive for your work impact the following, if at all?

Source: Living Wage Foundation, 2022: <https://www.livingwage.org.uk/life-low-pay-during-cost-living-crisis>

<sup>90</sup> Living Wage Foundation. (2022). Life on low pay during a cost-of-living crisis:

<https://www.livingwage.org.uk/life-low-pay-during-cost-living-crisis>

<sup>91</sup> Living Wage Foundation (2022): Low paid work and cost-of-living crisis disproportionately affecting women:

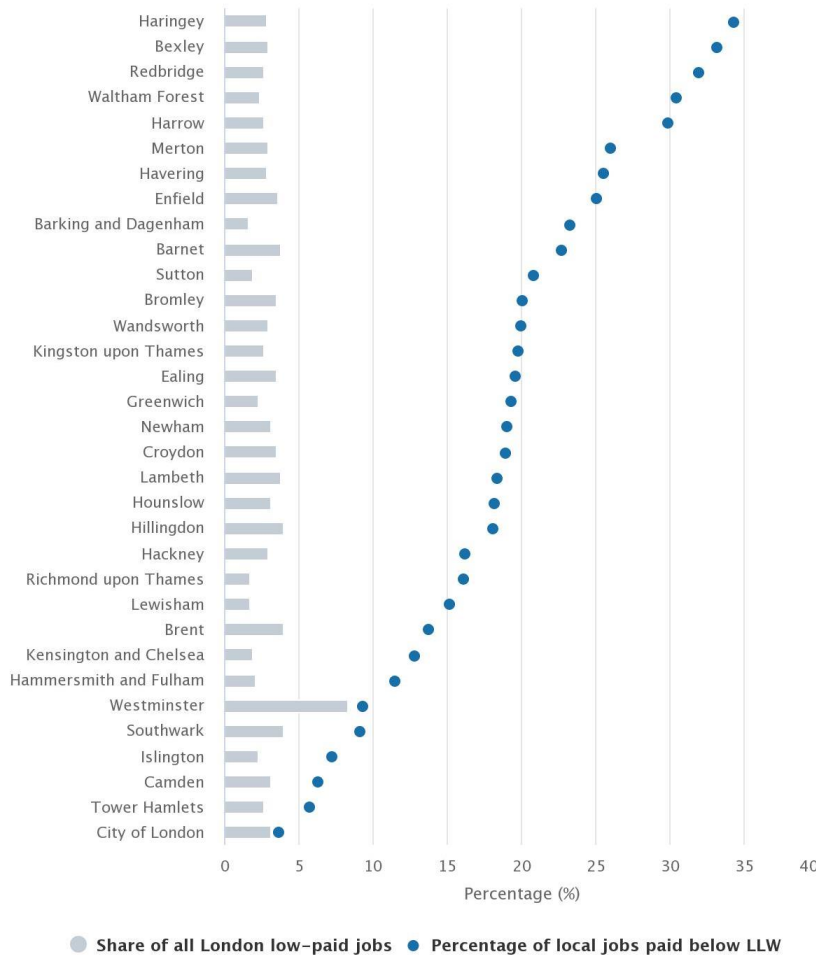
<https://www.livingwage.org.uk/news/cost-living-crisis-affecting-women>

<sup>92</sup> Trust for London: London's Poverty Profile: Waltham Forest.

<https://www.trustforlondon.org.uk/data/boroughs/waltham-forest-poverty-and-inequality-indicators/?indicator=work-2> [accessed Dec 2022]

Figure 31

**Fig 31: Proportion of jobs paying below London Living Wage by borough workplace (2022)**



London's Poverty Profile 2022  
 Data source: Employees earning below the London Living Wage (LLW), ONS

Source: Trust for London: Proportion of jobs in London workplaces that are paid below London Living Wage:  
<https://www.trustforlondon.org.uk/data/low-paid-jobs-in-London/>

## 5.2 Climate change

Climate change is negatively impacting our mental health and wellbeing. Mental health impacts have been historically neglected both in research and policy but are now being increasingly discussed and understood. Effects of climate change may be both direct and indirect, and include:

- **Extreme weather events:** Extreme weather events such as floods and storms can be potentially traumatic events, where serious injury or death is witnessed. As a

result, many will experience higher levels of psychological distress, and some may develop more serious mental health problems such as post-traumatic stress disorder (PTSD) or depression<sup>93</sup>. This has been observed internationally and within the UK. Extreme weather events also impact the social determinants of mental wellbeing such as employment, housing, food and water security.

- **Heat:** Rising temperatures, and particularly heatwaves, have been shown to be associated with poor sleep, hospitalisations for psychiatric disorders, suicide and violent crime<sup>94</sup>.
- **Air quality:** Rising temperatures and climate change increase levels of pollutants and allergens in the air, which in turn have been shown to be associated with depression, anxiety<sup>95</sup> and mental health service use<sup>96</sup>. Exposure to poor air during childhood and adolescence may also directly impact the developing central nervous system and has also been shown to be associated with development of mental health problems in adulthood.
- **Infectious diseases:** increasing temperatures allow infectious diseases to spread to new parts of the world. Many infectious diseases will have serious short term and long term physical and mental health consequences.
- **Climate anxiety:** Confronting the reality of climate change can lead to psychological symptoms such as ecological grief (feeling of loss that comes with environmental degradation) and climate anxiety (the chronic fear of environmental doom). Such reactions to climate change affect daily living, sleep and mental wellbeing and are particularly experienced by younger generations. A recent global survey conducted by the University of Bath showed that 45% of the 10,000 young people surveyed said their feeling about climate change negatively affected their daily life and functioning, over 50% felt sad, anxious, angry, powerless, helpless and guilty, and 84% felt at least moderately worried about climate change<sup>97</sup>.

It is also well recognised that climate change increases existing inequalities. Those who are most marginalised are at greater risk of being impacted by climate change and those who already have poor mental wellbeing are more likely to be affected. Certain groups,

<sup>93</sup> World Health Organisation (2022). Mental health in emergencies: <https://www.who.int/news-room/fact-sheets/detail/mental-health-in-emergencies>

<sup>94</sup> UCL The Bartlett (2021). Climate change and mental health: <https://www.ucl.ac.uk/bartlett/news/2021/jul/climate-change-and-mental-health>

<sup>95</sup> Braithwaite, I. et al.(2019). Air Pollution (Particulate Matter) Exposure and Associations with Depression, Anxiety, Bipolar, Psychosis and Suicide Risk: A Systematic Review and Meta-Analysis. *Environ Health Perspect.* Dec;127(12):126002. doi: <https://ehp.niehs.nih.gov/doi/10.1289/EHP4595>

<sup>96</sup> Newbury, J. et al. (2021). Association between air pollution exposure and mental health service use among individuals with first presentations of psychotic and mood disorders: Retrospective cohort study. *Br J Psychiatry*, 219(6), 678-685. doi:[10.1192/bjp.2021.119](https://doi.org/10.1192/bjp.2021.119)

<sup>97</sup> Hickman C, et al. (2021) Climate anxiety in children and young people and their beliefs about government responses to climate change: a global survey. *The Lancet Planetary Health*; 5 (12) e863-e873, ISSN 2542-5196, [https://doi.org/10.1016/S2542-5196\(21\)00278-3](https://doi.org/10.1016/S2542-5196(21)00278-3)

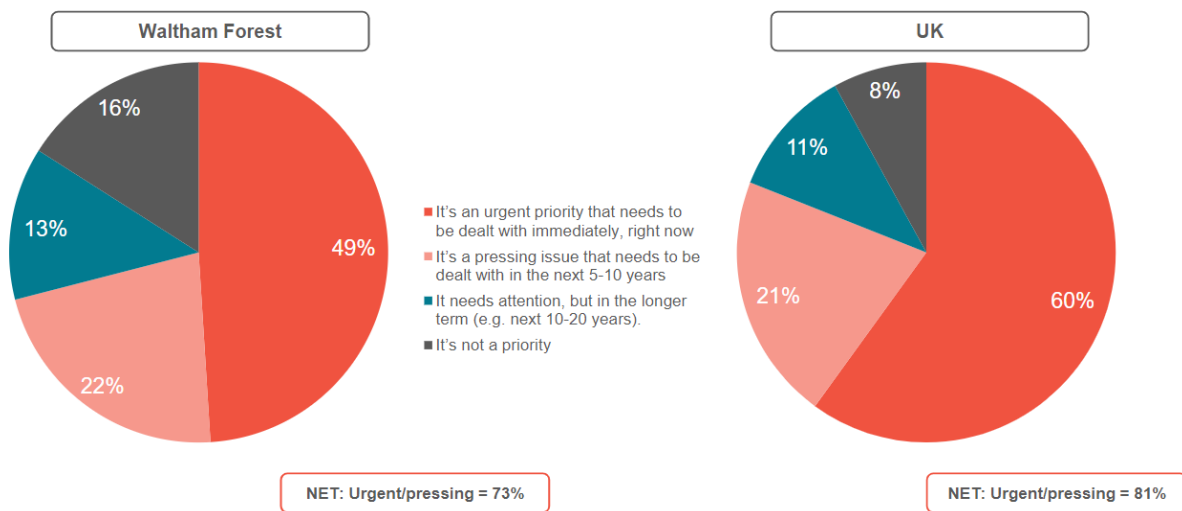


particularly young people, women, older adults, people living in poverty, people experiencing homelessness and people with long-term health conditions are particularly vulnerable to experiencing poor mental wellbeing as a consequence of climate change.

Research from the University of Manchester for Friends of the Earth has found Waltham Forest to be the 11<sup>th</sup> most vulnerable Local Authority in England to the health impacts of heat. This was calculated by combining current and potential heat exposure data with social vulnerability indicators such as resident age, amount of green space and type of housing at neighbourhood level (average 1700 residents)<sup>98</sup>. Neighbourhoods considered high-risk were then organised by local authority to produce a list of the most vulnerable local authorities. The unprecedented heatwave in summer 2022 which led to fires in Epping Forest and Bushwood, Leytonstone, and flash floods following shortly after, provides some evidence of this vulnerability.

In 2022, Waltham Forest Council conducted a local survey to understand residents' feelings around climate change. Climate change was cited as one of the top three issues facing the country in 23% of respondents, after health (including COVID-19), the economy, crime, Brexit, and housing<sup>99</sup>. However, it was considered a less pressing issue locally than it is nationally; When asked directly around the urgency of climate change, 73% of residents felt that climate change is an urgent/pressing issue, compared with 81% nationally [Figure 32

Q. Which of the following best describes your view of when action on climate change is required?



In terms of perceptions of direct impact, 63% reported that climate change is affecting the local area, but residents didn't feel that it will impact them directly: only 30% thought it will have a direct effect on them, whereas 66% think it will have a direct effect on future generations.

<sup>98</sup> Friends of the Earth (2022). Who suffers most from heatwaves in the UK?:

<https://policy.friendsoftheearth.uk/insight/who-suffers-most-heatwaves-uk>

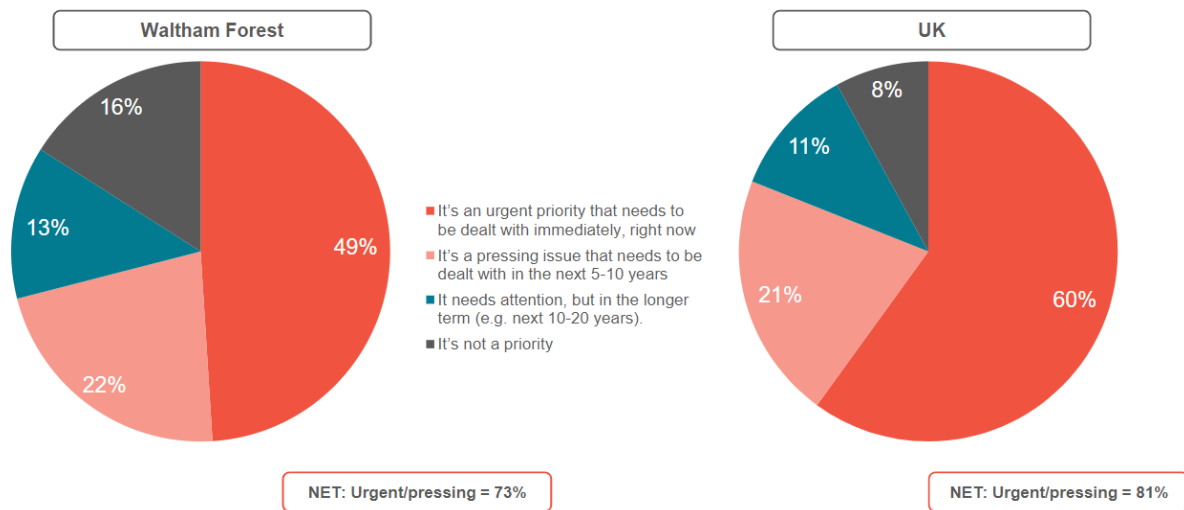
<sup>99</sup> Waltham Forest Climate Change Behaviour Report January 2022

At present there is no local data regarding the impact of the climate on the mental wellbeing of residents.

Figure 32

**Fig 32: View of action needed on climate change, Waltham Forest residents 2022**

Q. Which of the following best describes your view of when action on climate change is required?



Source: Waltham Forest Climate Change Behaviour Report January 2022

## 5.1 The COVID-19 pandemic

The impact of the COVID-19 outbreak on our lives has been profound. Although experiences over the last few years will have been different for everyone, many people will have experienced short-term or long-term effects on their mental wellbeing. These include the immediate and direct effects of infection with the virus, the long-term effects of infection (long-covid and others) as well as the wider impact of uncertainty, lockdowns and isolation, and the consequences of reduced access to mental health services.

National self-reported mental health and wellbeing worsened during the pandemic and a recent government report looking at COVID-19 mental health and wellbeing reports an overall increase in worry, loss, distress and isolation<sup>100</sup>. A MIND report from 2021 showed

<sup>100</sup> HM government (2021). COVID-19 mental health and wellbeing recovery action plan: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/973936/covid-19-mental-health-and-wellbeing-recovery-action-plan.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/973936/covid-19-mental-health-and-wellbeing-recovery-action-plan.pdf)



that of those that took part in the study, more than a quarter (26%) of adults and 18% of young people experienced mental distress for the first time during the pandemic<sup>101</sup>. Early in the pandemic it was reported that less than half of adults affected by abuse, self-harm and thoughts of suicide/self-harm accessed formal or informal support<sup>102</sup>. The direct effects have also been described: a large retrospective study of over 200,000 COVID survivors found that one in three (34%) received a neurological or psychiatric diagnosis in the following 6 months, 1 in 8 (13%) receiving their first ever diagnosis.

Young adults, women, minority ethnic communities and those with pre-existing mental health conditions were most vulnerable, and mental health inequalities were exacerbated so that those groups already vulnerable to poor mental wellbeing were made even more so. For example, COVID-19 intensified existing housing problems, making it hard for those in overcrowded households to self-isolate or shield and multiplying the effect during lockdowns – a National Housing Federation survey found that almost 1 in 3 respondents experienced mental or physical health problems due to lack of space in their home during lockdown<sup>103</sup>. Those from ethnic minority groups have also been disproportionately affected by the effects of COVID, including its effect on mental health<sup>104</sup>. The reasons for this are multifactorial. As well as being due to more obvious factors such as some ethnic groups being more likely to have certain health conditions, it is a consequence of differences in factors such as household composition, employment patterns, and occupational distributions within families.

In August 2020, after the first lockdown, Residents Insight Surveys showed that a third of Waltham Forest residents (31%) felt they were not coping well. 75% felt more anxious/depressed, 58% more lonely, 46% were having trouble sleeping and 33% were drinking more alcohol than usual. A year later, in August 2021 68% of Waltham Forest residents were still reporting a negative impact on their mental health and 53% were feeling more lonely.

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<sup>101</sup> Mind (2021). Coronavirus: the consequences for mental health: <https://www.mind.org.uk/media/8962/the-consequences-of-coronavirus-for-mental-health-final-report.pdf>

<sup>102</sup> Job E, Steptoe A, Fancourt D (2020) Abuse, self-harm and suicidal ideation in the UK during the COVID-19 pandemic. *Br J Psychiatry*; 217(4):543-546. doi: <https://www.doi.org/10.1192/bjp.2020.130>

<sup>103</sup> National Housing Federation (2020). Poor housing causing health problems for nearly a third of brits during lockdown: <https://www.housing.org.uk/news-and-blogs/news/poor-housing-causing-health-problems-for-nearly-a-third-of-brits-during-lockdown/>

<sup>104</sup> Office for National Statistics (2020). Why have Black and South Asian people been hit hardest by COVID-19? <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/whyhaveblackandsouthasianpeoplebeenhithardestbycovid19/2020-12-14>

## 6. Stigma and discrimination around mental health

Mental health stigma refers to negative attitudes and beliefs held toward people who have a mental health problem. It often results in discrimination which may be obvious and direct, such as someone making a negative remark about someone's mental illness, or indirect like exclusion from social circles or employment.

It has a negative impact on mental health by reducing hope and self-esteem, adding to symptoms of low mood/depression, affecting relationships and preventing people feeling able to talk about their mental health or even seek help from health professionals. It also often affects not only the individuals suffering with mental health problems, but also those who support them, such as their family.

Research has identified different types of stigma<sup>105</sup>. These include:

- **Public stigma:** negative or discriminatory attitudes that others have about mental illness
- **Self-stigma:** negative attitudes including internalized shame, that people have about their own condition
- **Institutional stigma:** systemic stigma, involving policies of organisations that intentionally or unintentionally limit opportunities for people with mental illness

For example, one study of 200 people with mental illness found that those individuals with self-stigma had a poorer recovery than those without self-stigma after one and two years<sup>106</sup>.

Local research has shown that residents of Waltham Forest hold particularly strong stigmatising views about mental health compared to nationally. An intensive campaign to challenge stigmatising views in Waltham Forest began in 2018 with work targeting population groups known to hold particularly negative views. Concurrently, levels of stigma towards people with mental health conditions have been assessed yearly in Resident Insight Surveys since July 2018. There is no data to compare this with nationally.

*Since starting the campaign, the results have been positive, showing that stigmatising views have reduced over the last four years and residents have an increased willingness to accept and welcome friends, families, neighbours and colleagues with mental health problems [*

**Figure 33].** There is no national surveillance of mental health stigma and no way of comparing levels of stigma in Waltham Forest to other local authorities and England. Although the results from our surveys show positive change, research, including all our

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<sup>105</sup> American Psychiatric Association (2020). Stigma, Prejudice and Discrimination Against People with Mental Illness. <https://www.psychiatry.org/patients-families/stigma-and-discrimination>

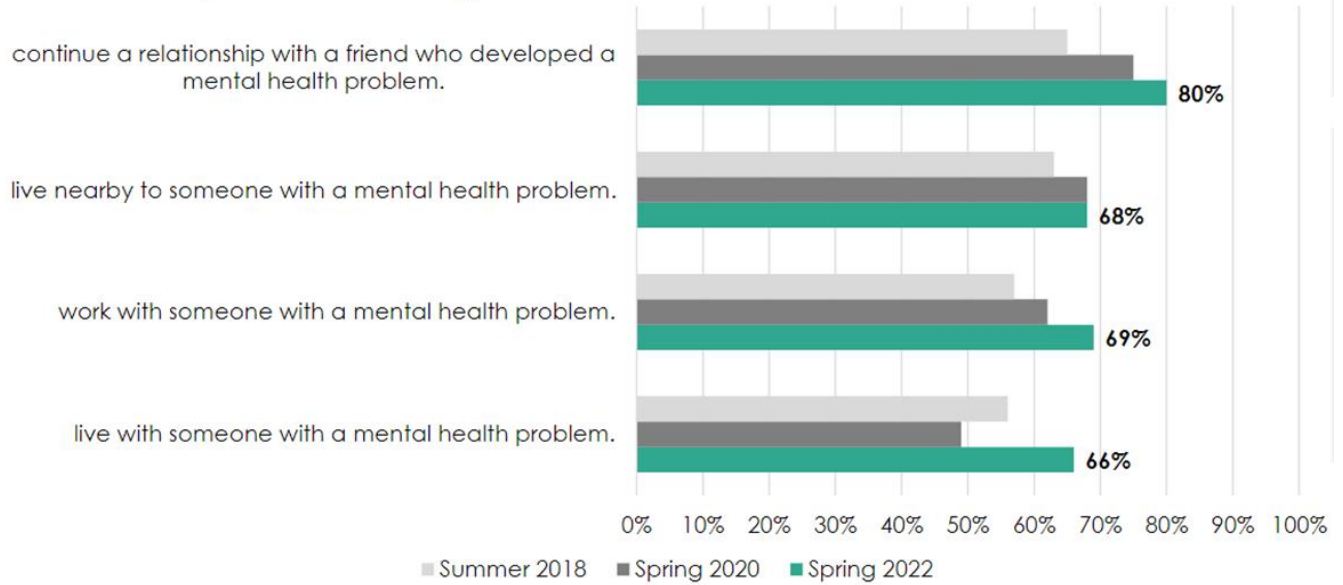
<sup>106</sup> Oexle N et al. (2018) Self-stigma as a barrier to recovery: a longitudinal study. Eur Arch Psychiatry Clin Neurosci. Mar;268(2):209-212. doi: <https://doi.org/10.1007/s00406-017-0773-2>

resident and stakeholder mental wellbeing engagement in 2022, demonstrates there is still much work to be done.

Figure 33

**Fig 33: Stigma and mental health in Waltham Forest, 2018, 2020 and 2022**

**“In the future, I would be willing to...”**



Source: Waltham Forest Resident Insight Survey, Spring 2022

## 7 What do Waltham Forest residents and stakeholders think?

### Our Residents' Voices

In February 2022, the council commissioned independent qualitative research with local residents to provide insight into mental wellbeing in the borough. Opinions were sought around perceived issues around mental wellbeing, barriers and enablers to positive mental health, local provision of services/support and the council's role. 6 video-on-line focus groups involving 6-8 participants per group were conducted, targeting residents from a diversity of backgrounds, particularly single men, young families with children aged 5 or under, older people aged 55+, residents living with a disability, residents from Black and Asian backgrounds, East and Central European residents.

Key findings about mental wellbeing included the following points:

1. The negative impact of COVID-19 on mental health with increased anxiety and isolation, and difficulties accessing support

**"I just think there's kind of a looming need for mental health support. The need has always been there, but it's got worse during the pandemic. The problem is that the services have always been underfunded in my view and not very available unless you're in crisis, which nobody wants to get to that point. The gap is even bigger now between need and provision, and Covid made it even harder than before to get to see any medical professional."** Female, aged 35-54, White British-Irish, Centre of the borough, Young family group

2. Difficulties accessing support unless in an acute issue or crisis – need for greater investment in prevention

**"People are struggling and need help. But you can only get help when you're in crisis. People should get help when they need it, not 6, 8 or 18 months later, when it's got so bad they need significant support. This is an issue for all parts of society, from young mothers, to older people and disabled people that have been isolated during the pandemic."** Female, aged 55-69, White British-Irish, North of the borough, Disability group

3. Importance of social determinants of mental wellbeing eg housing and disproportionate impact on those who are more deprived

**"Where I live it's just not a particularly nice area. It's very urban, noisy, lots of people, not much green or open space. It looks ugly with chicken shops and betting shops, dirty streets. It attacks your senses. It's definitely not good for your mental health"**. Female, aged 18-34, Non-White British-Irish, S. West of the borough, Disability group

4. Importance of social connections, community and neighbourhoods to address isolation



**“They should do more to create spaces where people can come together. Like even on my little estate they could create something where people hang out and where activities can take place. Just so you can get to know your neighbour and talk to them. Being social, talking is all really important for how you feel.”** . Male, aged 18-34, Non-White British-Irish, Centre of the borough, Single male group

#### 5. Need to challenge stigma around mental ill health

**“I think we should use the phrase ‘mental wellbeing’, not mental health. Mental health makes it look like you have a problem and you become labelled. But I think we’re talking more about improving the way you feel and preventing a mental health problem starting. It’s a more positive and proactive phrase. I think using the phrase ‘mental health’ puts people off and stops them talking about it. That’s particularly the case in some communities, including my own. People don’t want to talk about it and that is a major problem in preventing people from having a mental health crisis because they don’t spot the issues no one does, they don’t talk about it, they don’t seek help and before you know it is too late”**  
Male, aged 18-34, Non-White British-Irish, Centre of the borough, Black and Asian group

#### 6. Need for better information and support for all residents, and the promotion of self-care

**“There is help out there, but it isn’t very easy to find. So the council and health services could invest in really small, digestible pieces of information about how to practice self-care, about triggers, signs of mental health, and where to go to get support. It could all be part of a larger campaign around mental health awareness in the borough”**. Female, aged 35-54, White British-Irish, Centre of the borough, Young family group

These findings compliment other data from the Waltham Forest mental wellbeing engagement survey, 2022. These results showed that over half of respondents (52%) do not think there is enough support available for mental health and wellbeing in Waltham Forest and awareness around mental health and wellbeing services in the borough is fairly low, even amongst those with poor mental wellbeing. The most recognised services by some way were Samaritans of Waltham Forest (49%) and Waltham Forest Talking Therapies (41%).

The main barriers to seeking help for mental health problems were as follows:

- People no believing the problem will be taken seriously enough (83%)
- Mental health services are hard to access (76%)
- Believing or hoping the problem will get better by itself (75%)
- Worry about what people might think (72%)
- People don’t know about mental health services (71%)



## Our Stakeholders' Voices

In January 2022 a facilitated Stakeholders workshop with 33 professionals from the council, NHS and community sector was held. The main aims were to gather opinions to inform the Mental Wellbeing Strategy for 2022-2025 and to discuss the unmet mental wellbeing needs of residents in the borough. Through large and small group discussions, a series of themes around mental wellbeing were identified.

All groups agreed the importance of the following themes:

- Tackling stigma and discrimination
- Social determinants of mental wellbeing, especially finances, housing and social isolation
- Promoting self-help approaches to mental health
- Inequalities
- COVID-19 pandemic recovery
- High risk groups including young people (and young men), unemployed, parents, disabled/those with chronic conditions, older adults, those prone to isolation

In addition, the following themes were considered important to include:

- Mental health literacy
- Improving access to mental health services
- Social isolation and loneliness

## 8 Maternal health, early years and young people

### 8.1 Why is it important?

#### 8.1.1 Perinatal mental health

Perinatal mental health problems are those which occur during pregnancy or in the first year following the birth of a child. Prior to the COVID-19 pandemic, it was generally recognised that approximately 20% of women and 10% of men in the general population would have experienced some level of mental health difficulty in the perinatal period. For Waltham Forest this was also likely to be an underestimate, due to a number of other risk factors for poor mental wellbeing in the local population.

COVID-19 has undoubtedly made things more difficult for women and their babies. Recent research from the Institute of Health Visiting describes the following lasting effects of COVID-19 in 2022, almost three years after the start of the pandemic<sup>107</sup>:

- Increased parental mental health problems continue to affect young children  
Increased risk of harm from abuse and neglect
- Smaller social networks for parents and their children
- Less access for families to enriching activities for children
- More families living in the poverty
- Substantial impact on children's communication and social skills
- Exacerbation of inequalities.

If left untreated, perinatal mental health problems can have significant and long-lasting effects on the woman and her family. The latest Saving Lives, Improving Mothers' Care report in 2022 which reviewed maternal deaths between 2018-2020 shows the devastating impact of poor mental wellbeing. Since the 2017-2019 report, there has been an overall increase in maternal mortality, with suicide now the leading direct cause of death in women who are pregnant or within 6 weeks of the pregnancy ending. This is a rise of three-fold since 2017-19 and contrasts with cardiac events being the leading cause of death previously. Severe mental health issues were a factor in 40% of the deaths between six weeks and a year after pregnancy. Many of the women who did not have a formal mental health diagnosis were facing other adversities such as childhood trauma and domestic abuse<sup>108</sup>.

The report also highlighted the stark effects of deprivation and ethnicity; Women living in the most deprived areas of the UK are more than twice as likely to die than those in the

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<sup>107</sup> Institute of Health Visiting (2022). Casting Long Shadows. The ongoing impact of the COVID-19 pandemic on babies, their families and the services that support them: <https://ihv.org.uk/wp-content/uploads/2022/11/F1001D-Casting-Long-Shadows-FINAL-NOV-22.pdf>

<sup>108</sup> MBRRACE-UK. Saving Lives, Improving Mothers' Care Core Report - Lessons learned to inform maternity care from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity 2018-20. (2022): [Reports | MBRRACE-UK | NPEU \(ox.ac.uk\)](#)



most affluent areas and maternal mortality of black women is 3.7 times that of white women.

### **8.1.2 Impacts of perinatal mental health problems on the child**

Pregnancy and the early years are critical periods for both parent and children's mental health. Good physical and mental health in pregnancy is associated with better outcomes for children. Anxiety, depression and maternal stress – especially the experience of domestic abuse – have been linked to impaired emotional, cognitive and language development in infants. During infancy, a child's secure attachment to their main caregiver creates expectations in the child and provides a mental model for future relationships. Secure attachment promotes a child's self-esteem and resilience and influences the way in which the child relates to and behaves with others. It gives the child an internal working model of the world as a safe and secure one in which the main caregiver will respond to its needs. This supports the development of neural pathways.

Maternal depression (both in the antenatal and postnatal period) is one of the strongest predictors of poor attachment and emotional and mental health difficulties in childhood and later in life. Over 50% of lifetime mental illness (excluding dementia) manifests by age 14 with 75% of all adult mental illness manifesting by age 24.

## **8.2 What is the current picture?**

### **8.2.1 Perinatal mental wellbeing and breastfeeding**

Given there is no local data available around prevalence rates of maternal mental health problems in Waltham Forest, estimates can be made using local birth rates and national prevalence rates. Using this technique, it is estimated that in Waltham Forest, over 900 women per year experience mental health difficulties in the perinatal period<sup>109</sup>.

Breastfeeding has both physical and mental health benefits, promoting close parent-infant relationships and secure attachment which support the mental health of both baby and mother. Breastfeeding initiation rates are high in Waltham Forest (79%), compared to the London (75%) and England (69%) averages. However, breastfeeding rates decrease significantly by 6-8 weeks, at which point only 48% are exclusively breastfed and 26% receive some breast milk. National breastfeeding rates are highly correlated with level of deprivation and age of the mother.

### **8.2.2 Pre-school mental wellbeing**

There is little data available in pre-school-aged children and a relative lack of research on pre-school psychopathology compared with studies of the epidemiology of psychiatric

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<sup>109</sup> Waltham Forest Child & Adolescent Mental Health Transformation Plan 2015-2024 (Refresh September 2021)

disorders in older children. Despite this, the available evidence convincingly shows that the rates of common psychiatric disorders and the patterns of comorbidity are similar in pre-schoolers as seen in later childhood. A recent review of the prevalence of mental disorders in children between one and seven years from eight countries found the pooled prevalence of mental disorders in this age group to be 20.1%, with the most common disorders being oppositional defiant disorder and attention-deficit hyperactivity disorder, followed by anxiety disorders and depressive disorders<sup>110</sup>.

By applying national prevalence rates to the population of Waltham Forest, an estimated 2,550 children aged 2 to 4 years inclusive are thought to be living in Waltham Forest with a mental health disorder<sup>111</sup>.

### **8.2.3 Child and adolescent mental wellbeing**

The Good Childhood Report from the Children's Society focuses on children's own view of how their lives are going. National ONS measures of overall well-being in 10- to 17-year-olds appear to have returned to pre-pandemic levels, with average ratings for life satisfaction, happiness and life being worthwhile remaining between 7 and 8 out of 10<sup>112</sup>. Yet the Understanding Society survey which concentrates on 10 to 15-year-olds and asks children in more detail around overall happiness, family, friends, appearance, schoolwork, and school shows a decline in overall children's happiness since 2011, with young people less happy today with their life as a whole, school, friends and how they look than ten years ago. Happiness with school and schoolwork is also significantly lower among children in lower income households<sup>113</sup>.

The effect of COVID-19 on the mental wellbeing of young people has also been pronounced. The Children's Commissioner has stated that there is 'very strong evidence' that COVID-19 had a big impact on children's mental health<sup>114</sup>. A data Insight Report from Kooth – the online counselling service commissioned in Waltham Forest – found that nationally there was a 170% increase in sadness and depression in young people, as well as a sharp increase in the number of young people experiencing sleep problems.

In Waltham Forest, 24% of the total population of the borough is aged 0-19 years<sup>115</sup>. Nationally, it is estimated that 18% of 11 to 17-year-olds have a diagnosable mental health disorder and when this figure is applied to Waltham Forest this amounts to well over 4000

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<sup>110</sup> Vasileva, M et al. (2021), Research review: A meta-analysis of the international prevalence and comorbidity of mental disorders in children between 1 and 7 years. *J Child Psychol Psychiatr*, 62: 372-381. <https://doi.org/10.1111/jcpp.13261>

<sup>111</sup> Waltham Forest Child & Adolescent Mental Health Transformation Plan 2015-2024 (Refresh September 2021)

<sup>112</sup> Department For Education (2022) State of the Nation Children and Young People's Wellbeing: <https://www.gov.uk/government/publications/state-of-the-nation-2021-children-and-young-peoples-wellbeing>

<sup>113</sup> The Children's Society (2022). The Good Childhood Report: <https://www.childrensociety.org.uk/good-childhood/>

<sup>114</sup> Children's Commissioner (2021), The state of children's mental health services 2020/21: <https://www.childrenscommissioner.gov.uk/report/briefing-on-childrens-mental-health-services-2020-2021/>

<sup>115</sup> Census 2021

children. Between 2017 and 2020, the proportion of children aged 11-17 years diagnosed with a mental health disorder increased by 23% across North East and Central London<sup>116</sup>, but it is likely that the actual prevalence of mental health problems in the borough is even greater than estimated, due to our local social and economic determinants.

Across the UK, the prevalence of school pupils with social, emotional, and mental health needs is rising; 2.8% of school-age children are currently identified as having such needs compared to 2% in 2015. In Waltham Forest, rates of children and young people with moderate learning difficulties, visual and multi-sensory impairments, behavioural issues, and speech language/communication difficulties are higher compared to London and England averages<sup>117</sup>.

### 8.3 Risk factors

There are certain risk factors that predispose some children and young people to mental health problems than others. Such factors include:

- Long-term physical illness
- Parental mental health, substance or alcohol dependency or criminal justice issues
- Close or family bereavement
- Family breakdown due to loss or separation of parents through divorce
- Experience of bullying
- Physical or sexual abuse
- Living in poverty, homeless, dislocation, uncertainty
- Experience of discrimination due to race, sexuality, identity or religion
- Acting as a carer for a relative, taking on adult responsibilities
- Childhood trauma

Waltham Forest has higher rates of some such risk factors than national average meaning that children and adolescents in Waltham Forest are particularly vulnerable to poor mental wellbeing.

For example, the following indicators compare statistics in Waltham Forest with England: the proportion of children under 16 living in poverty (19.2% vs. 17.2%), family homelessness (4.6 vs. 1.7 per 1,000 households), families with dependent children owed a duty to prevent homelessness (21.7 vs 11.6 per 1,000), and first time entrants to the youth justice system (207.8 vs 146.9 per 100,000). As a result, the Local Authority is working across a variety of areas such as gangs, antisocial behaviour, youth offending, child

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<sup>116</sup> East London NHS Foundation Trust (2021) NCEL CAMHS Provider Collaborative Strategic Health Needs Assessment.

<sup>117</sup> *ibid*

sexual exploitation, domestic violence, radicalisation and teenage pregnancy to help improve the wellbeing of young people.

Waltham Forest's local mid-teen survey in 2017 found that 44% of 14-15 year olds have experienced bullying, 24% cyberbullying, 25% have family issues that affect emotional wellbeing and 6.5% self-reported taking drugs regularly<sup>118</sup>. On the other hand, although historical, the Social Mobility Index (2016), which looked at the chances of a child from a disadvantaged background has of doing as an adult (by combining indicators around educational attainment of those from poorer backgrounds with outcomes achieved by adults), found Waltham Forest to be in the top 20% of all authorities, demonstrating opportunity for positive change for the young people in the borough<sup>119</sup>.

## 8.4 Protective factors

Protective factors for mental wellbeing, such as the child's attachment, security and positive stimulation from their main carer, are also crucial. These form the foundation of a child's emotional development and go on to impact health behaviours and educational attainment.

Waltham Forest has significantly higher compared to national rates of the following indicators: breastfeeding as a first feed (78.8% vs 67.4%), school readiness (76.4% vs. 71.8%), educational attainment (average attainment 8 score at age 15-16 years) (53.1% vs. 50.9%), and educational attainment (as above) among children eligible for Free School Meals (46.0% vs 39.1%).

## 8.5 Stigma

Stigma around mental wellbeing exists for children and young people as it does for adults. In Waltham Forest, young people often do not come forward early with problems thought fear of ridicule amongst their peer groups. The need to change the perception of mental wellbeing within the young population was recognised and since 2018, Waltham Forest has developed an anti-stigma campaign for children and young people alongside the work being carried out with adults.

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<sup>118</sup> Mid-teen health survey summary, August 2017

<sup>119</sup> Social Mobility and Child Poverty Commission. (2016) The Social Mobility Index: <https://www.gov.uk/government/publications/social-mobility-index>

## 9 Recommendations

### General

- Monitor mental wellbeing and associated indicators in the borough to assess progress over the duration of the mental wellbeing strategy.
- Track levels of anxiety in the borough and consider developing evidence-based strategies that support residents to manage their anxiety.

### High risk groups

- Consider the needs of the high-risk groups identified in this document and ensure that interventions to support mental wellbeing are targeted to support these groups, either by design or via communication strategies.
- Utilise information around the coping mechanisms of high-risk groups to develop targeted interventions that will support residents using positive coping mechanisms, and help residents move away from negative coping mechanisms.

### Stigma and discrimination around mental health

- Continue to deliver and evaluate a coordinated programme of work to reduce stigma around mental health conditions, with a particular focus on identified priority groups, children and young people.
- Continue to track and publish levels of stigma in the borough.

### Wider determinants of mental health and wellbeing

- Start conversations about inequalities in mental wellbeing in Waltham Forest with partners, making use of the recent Marmot report from the Institute of Health Equity to engage partners and prioritise the reduction of mental health inequalities across the borough. Ensure all mental wellbeing interventions report on and have a plan to reduce inequalities.
- Work closely with the Council and our partners during the cost-of-living crisis to support residents' mental wellbeing both by offering services that aim to directly improve mental wellbeing and by establishing increased support for residents as they face challenges across income deprivation, food poverty, housing and other areas.
- Continue to strengthen our 'health in all policies' approach by working together with partners across the Council, NHS, voluntary sector and beyond to reduce the impacts of wider determinants on mental health and wellbeing.
- Continue to develop and evaluate programmes such as Social Prescribing, that aim to link those at risk of poor mental wellbeing as a result of issues such as being

housed in temporary accommodation, debt, unemployment and social isolation with available support services.

- Engage the Council and partners around the mental wellbeing impacts of climate change.

### **Mental wellbeing promotion and self-help**

- Promote evidence-based approaches to help residents develop positive coping mechanisms to life challenges and consider barriers to participation for those at higher risk of poor mental wellbeing.
- Develop evidence-based approaches to help residents move away from using negative coping mechanisms, in particular eating unhealthy food and drinking alcohol, using a whole system approach.
- Continue to use existing mental health promotion campaigns and offers, such as the 5 Ways to Wellbeing, ensuring there is a focus on high risk groups.

### **Maternal health, children and young people**

- Work with partners to ensure women are fully supported in the perinatal period; prioritise maternal mental wellbeing and improve borough breastfeeding rates at 6 weeks and beyond.
- Continue to support educational settings in promoting mental health and emotional wellbeing to children and young people, through a variety of services and offers such as Schools Mental Health Advisors.

### **Early intervention**

- Deliver a wide offer of mental health first aid training to the borough, including for young people, front-line staff and adult residents in order to identify early signs of stress and psychological distress and ensure individuals are signposted to appropriate services.