

# Public Mental Health Learning Community Learning Set

Welcome, and thank you for joining today's event!  
We will start at 10:00

Our speakers today include:

**Jean Strelitz**

Senior Researcher –  
Public Mental Health  
Implementation  
Centre (PMHIC)

**Nancy Towers**

Senior Policy Officer –  
Healthy Communities &  
Mental Wellbeing, West  
Midlands Combined  
Authority

**Maggie McGurgan**

Consultant Psychiatrist –  
Northern Health & Social  
Care Trust (NHS).

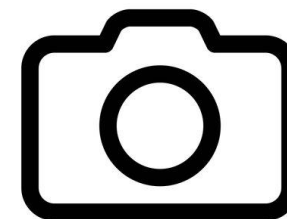
# Housekeeping points before we get started



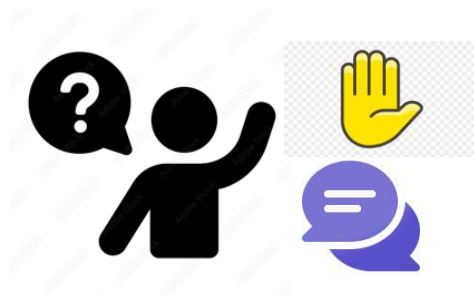
Recording the session



If not speaking, please mute

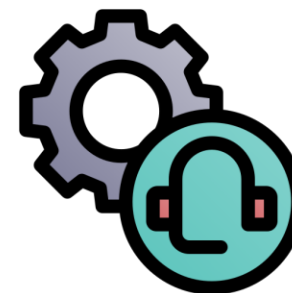


Camera on please,  
if comfortable to



Please ask Questions

- Raise your hand
- Use the chat function



Tech issues, please contact  
[public.MH@rcpsych.ac.uk](mailto:public.MH@rcpsych.ac.uk)

# Shared principles



## Listen with respect and openness

We seek to value learning from different people and stay open to new ways of doing things.



## Confidentiality

People may share something they wish to be kept confidential. We require everyone's agreement not to share anyone's information without their permission.



## Collaborate

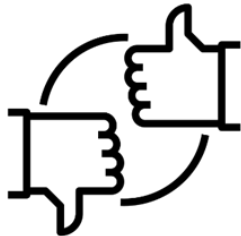
We seek to make decisions by consensus. Everyone's input is **equally** valued.

# Shared principles



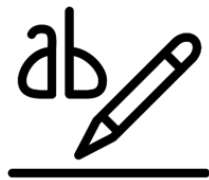
## Contribute

We seek to share ideas, ask questions and contribute to discussions. We can also choose not participate at any stage.



## Disagree with the point - not the person

We seek to resolve conflicts and tensions.



## Use plain language

We seek first to understand, then to be understood. If possible, avoid using jargon and explain acronyms if they must be used.

# Today's agenda

Time	Speaker	Affiliation	Topic
10:00-10:15	Jean Strelitz	Senior Researcher – Public Mental Health Implementation Centre (PMHIC)	Welcome and introductions
10:15-10:45	Nancy Towers	Senior Policy Officer – Healthy Communities & Mental Wellbeing, West Midlands Combined Authority	West Midlands Mental Health Commission Followed by Q&A
10:45-10.55	<b>Break (10 min)</b>		
10.55-11.25	Maggie McGurgan	Consultant Psychiatrist – Northern Health & Social Care Trust (NHS).	Crash Course in Mental Health for Teachers & School Staff – Thinking about mental health, emotional wellbeing and neurodiversity among students and staff  Followed by Q&A
11.25-11.30	Jean Strelitz	Senior Researcher – Public Mental Health Implementation Centre (PMHIC)	Thank you and closing remarks



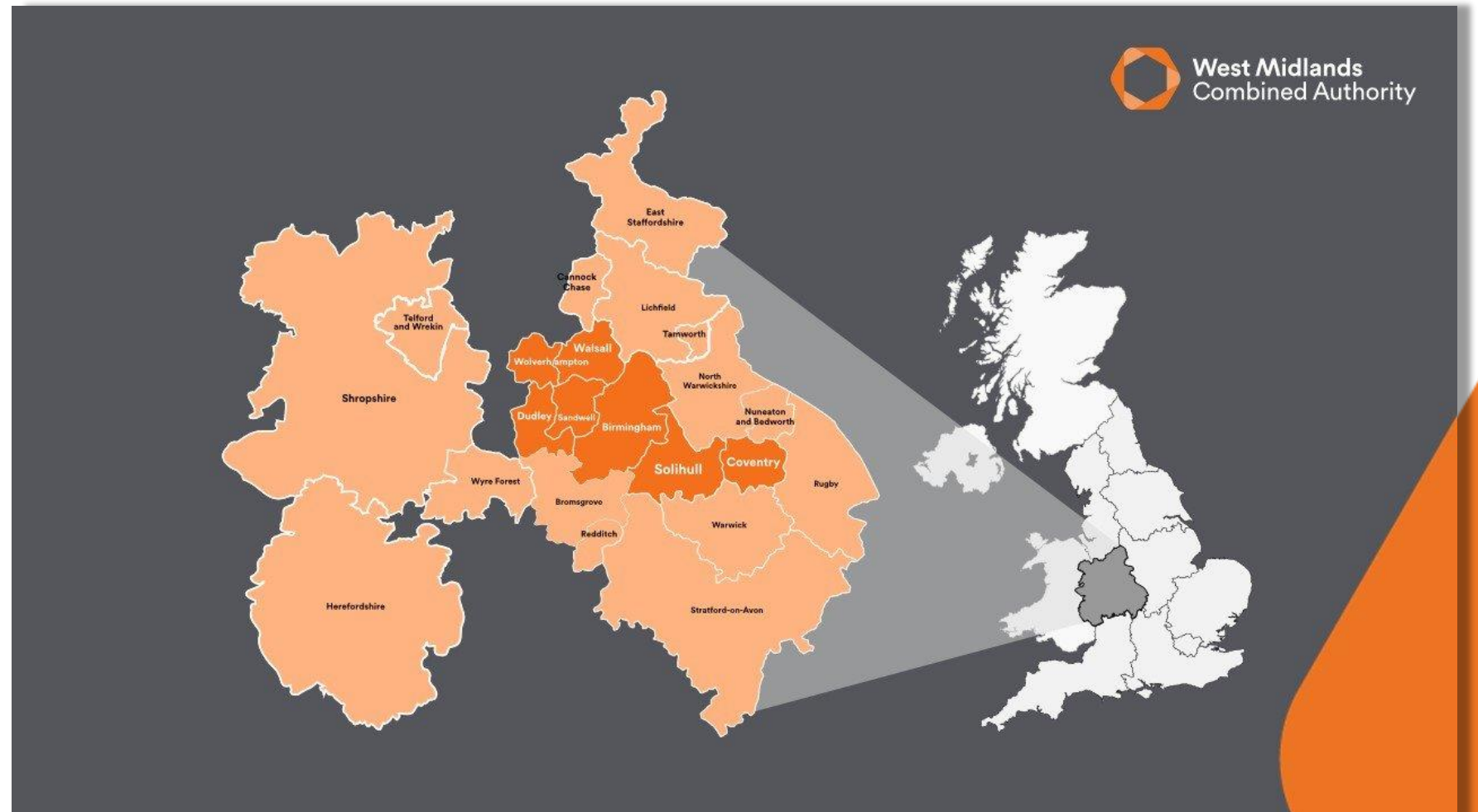
**West Midlands**  
Combined Authority



# Mental Health Commission

Nancy Towers, Senior Policy Officer, Healthy Communities and Mental Wellbeing

# The West Midlands Combined Authority





# Overview

In 2023, the West Midlands Mental Health Commission was convened to assess the impact that the coronavirus (COVID-19) pandemic had had on the mental health and wellbeing of the West Midlands population, and to understand what action could be taken regionally to respond to those impacts.





# Five thematic areas

thirteen recommendations with a system's partner lead, across five thematic areas:



1. Children and young people



2. Mental health and the cost of living crisis



3. Tackling racial inequalities in mental health



4. Sport, exercise, physical activity and mental health



5. Thriving communities and the voluntary and community sector

# Progress report – A Year On 2024



Outlined the **scale of the challenge** through regional prevalence of mental ill health and the conditions in which residents are born, work and live



Celebrates **progress** made against the recommendations as examples of good practice.

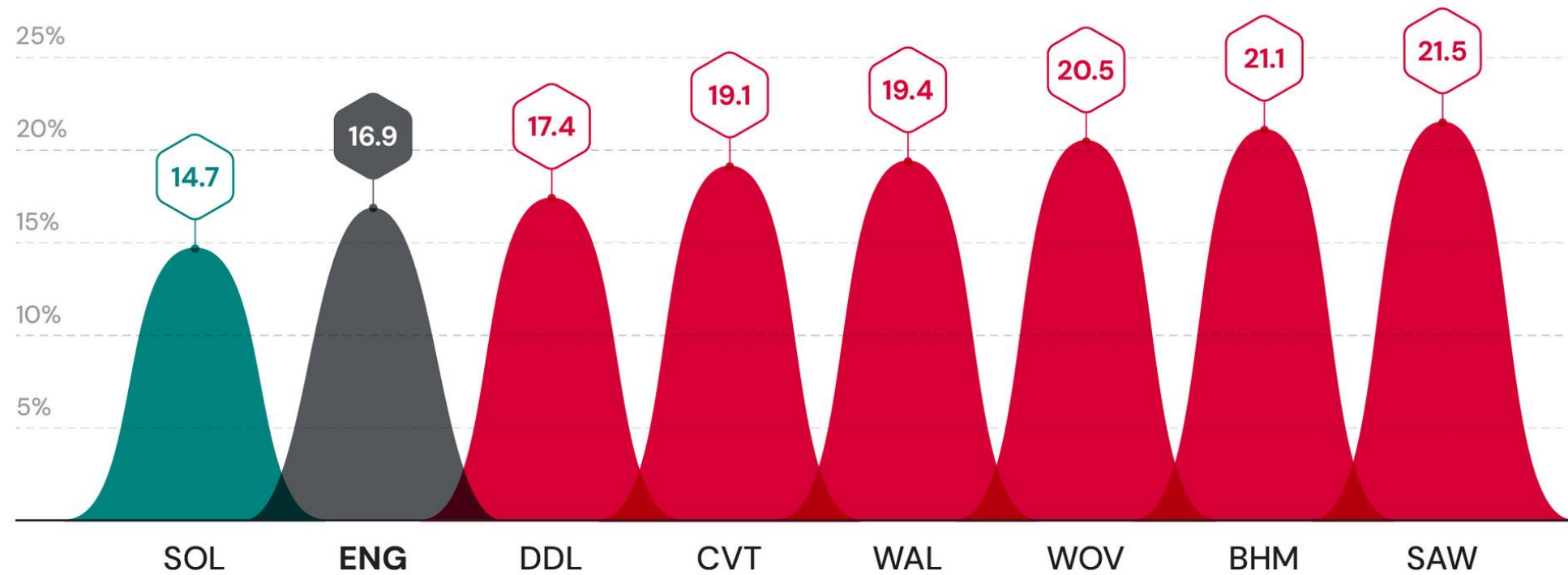


Set out **future opportunities**, outlining what more we can in the WMCA could do

# Prevalence of Mental Illness

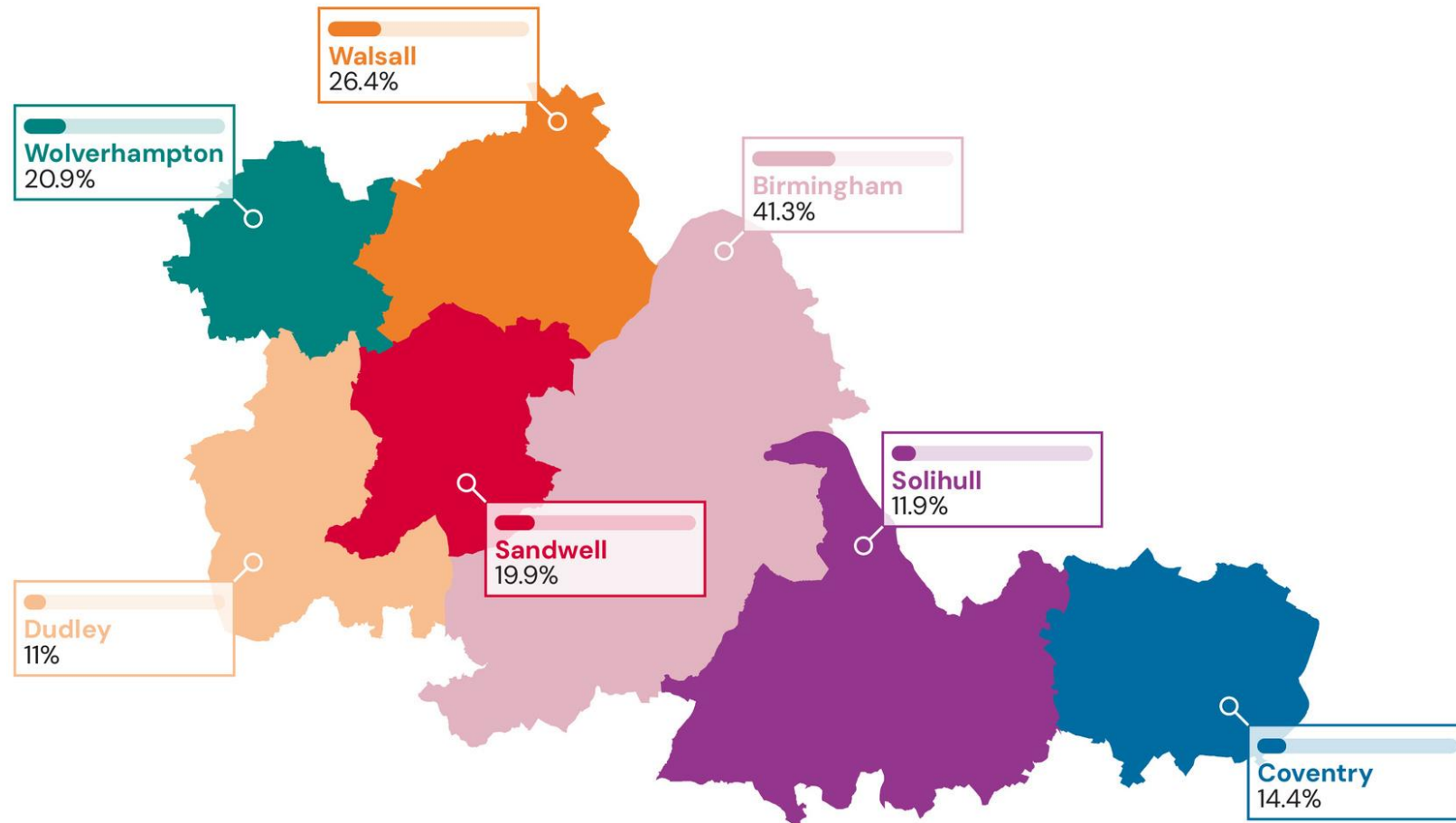
## Prevalence of common mental health problems (%)

16+ years; 2017



# Wider conditions

IMD, Proportion of LSOAs in most deprived 10% nationally  
2019





# Children and Young People

The Commission highlighted the importance of childhood in laying the foundations for good mental health across an individual's lifetime, with four key recommendations for action.

## Action

1. Schools and colleges should adopt a 'whole school approach' to mental health. This approach should include evidence-based learning about mental health within school curricula and access to counselling and other forms of support alongside the expansion of Mental Health Support Teams.

2. All schools and colleges should work towards zero exclusions. Support for this should include external advice and help for schools to improve behaviour and support children with complex needs including 'managed moves' to give students a fresh start.

3. All parents/ carers should have access to and be encouraged to take up evidence-based parenting programmes.

4. Every West Midlands council area should have an early support hub drawing on the Youth Information, Advice and Counselling Services (YIACS) model or local equivalent.

## Lead Organisation

West Midlands Combined Authority

West Midlands Combined Authority

Local Authorities

Local Authorities



## Thrive at College

Supporting student mental health and wellbeing



## Family Hubs

Single-branded, high-quality, whole-family, joined up service partnership from before pregnancy to 25 years with a network of hub buildings, outreach and a digital offer.



# Mental health and the cost of living crisis

The Commission outlined a body of evidence indicating financial wellbeing as a major determinant of mental health and the biggest single factor in explaining mental health inequalities, with three recommendations for action.

## Action

5. WMCA region should become a 'Living Wage Place' with every major public sector body achieving Living Wage Foundation Accredited by 2026 and a region-wide campaign run to get other major employers accredited.

6. Public sector organisations in the region should adopt social value principles in procurement, putting money in the pockets of local people and organisations.

7. Welfare advice should be provided to anyone in the West Midlands using mental health services, including NHS Talking Therapies. This service should include support with personal finances, housing rights, legal issues and employment.

## Lead Organisation

West Midlands Combined Authority

West Midlands Combined Authority

Integrated Care Boards



## Real Living Wage

Encouraging employers to pay the real living wage, understanding the barriers to doing so as well as exploring collaborative solutions to these challenges.



## Talking Therapies

Incorporating welfare support into Talking Therapies across the region.



# Tackling racial inequalities in mental health

Stark inequalities in mental health outcomes and mental health care between ethnic groups were evidenced within the Commission, leading to three recommendations for action.

## Action

8. The three integrated care systems in the area should support and invest in community-led infrastructure so that they are able to deliver credible and safe mental health support for people from racialised communities in the region. These organisations should be supported to build capacity, form networks for support, and become more sustainable.

9. The NHS should seek to make the mental health workforce at every level and across all disciplines more representative of the communities it serves.

10. ICS Partnerships and ICS Boards should invest in enabling the voice of marginalised communities to inform and be actively involved in decision making and this should explicitly include approaches to enable the voices of people living with mental health issues and with lived experience of these conditions.

## Lead Organisation

Integrated Care Boards

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## Patient and Carer Race Equality Framework (PCREF)

NHS England's first ever anti-racism framework and competence tool.



## Inclusive Communities Fund

Belgrade Theatre Trust; producing a play and co-created programme of community engagement activities with a focus on mental health support for black men.





# Sport, exercise, physical activity and mental health

The Commission recognised that physical activity could help prevent and manage mental health problems as a protective factor for mental ill health, with two recommendations for action.

## Action

11. Mental health services should provide ready access to physical activity opportunities for anyone who is waiting for support or currently receiving it. Physical activity should be built into treatment 'pathways' as a routine element of good mental health care. Safe and safe mental health support for people from racialised communities in the region. These organisations should be supported to build capacity, form networks for support, and become more sustainable.

12. The WMCA and local authorities in the region should work systematically to reduce barriers that may prevent local people from engaging in physical activities – cost, lack of culturally appropriate options, transport including traffic, pollution and lack of active travel infrastructure, safety, and the range of activities on offer.

## Lead Organisation

Integrated Care Boards

Integrated Care Boards



## Sport England Partnership

WMCA partnership with Sport England to drive infrastructure to support physical activity.



## Improving outcomes for people with SMI

ICB efforts to reduce the difference in life expectancy for people with SMI, utilising social prescribing.



# Thriving communities and the voluntary and community sector

The Commission acknowledged that community wellbeing is more than the sum of people's individual wellbeing and that communities that have good mental wellbeing have strong social networks, trust and reciprocity as well as power and control. This resulted in a very important final recommendation for action.

## Action

13. Integrated care systems should fund and commission voluntary and community sector partners to maximise their sustainability while retaining their independence, flexibility, and creativity. This may mean offering longer-term funding, encouraging provider alliance arrangements between voluntary and community sector organisations, and using grant programmes to support innovation. There is good evidence that voluntary and community sector organisations can deliver better outcomes by tailoring support to diverse communities.

## Lead Organisation

Integrated Care Boards



## Culture Inclusion Network

Bringing grassroots VCFSE organisations serving ethnic minority communities together to meaningfully shape and influence decision-making and service redesign.



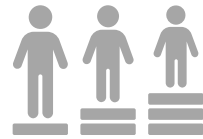
## Mental Health Collaborative

A cross organisational approach to mental wellbeing including the voluntary sector and those with lived experience at the centre of system wide decision making.

# What the WMCA has taken forward



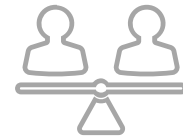
Established a West Midlands Mental Health Commission Legacy 'community of practice'



Working to become a Marmot Region, setting a benchmark for health equity



Committed to HiAP and a system wide focus on physical activity through the publication of Health of the Region



Working alongside the Young Combined Authority and Race Equality Taskforce to drive further change and reduce mental health inequality

“

Every relevant agency should be joining in the growing calls for what we politely call “**parity of esteem**”. Please call it what it is: a scandalous imbalance where mental health doesn’t come close to physical health in terms of research, funding, attention, media coverage, political interest etc... Because the alternative is something that has caused so many deaths and pain for so long: Silence.”

– Mike McCarthy



# Questions from the audience

# **A Crash Course for Teachers & School Staff**

**Thinking about  
Mental Health, Emotional Wellbeing & Neurodiversity  
among students & staff**

Dr Maggie McGurgan  
Consultant Psychiatrist  
in Child & Adolescent Mental Health &  
Intellectual Disabilities

# Mental Health – A **Crash Course**

for Teachers & School Staff ©



Dr Maggie McGurgan



# What is The Crash Course?

- Free, school-based training session, delivered the week before the start of the academic year
- To develop understanding, educate and create space for school-based staff to learn about mental health, emotional wellbeing & neurodiversity
- Fits with 'whole school approach'
- Developed in 2016, never funded
- Primary School & Post-Primary School versions – tailored to those age groups/key stages
- Special School version also available & delivered several times
- Delivered to 500+ teachers & school staff to date across N.Ireland (+350 via colleagues)



2015 - The Children and Young People's Mental Health Coalition with Public Health England

- February 2021 - Secondary Students Union of Northern Ireland called for :
  - BEd and PGCE modules on mental health/emotional support for students (i.e. to all trainee teachers)
  - Education Authority guidance for schools' promotion and managing of their counselling services
  - The current provision of one counsellor per school, half a day a week to be at least doubled.

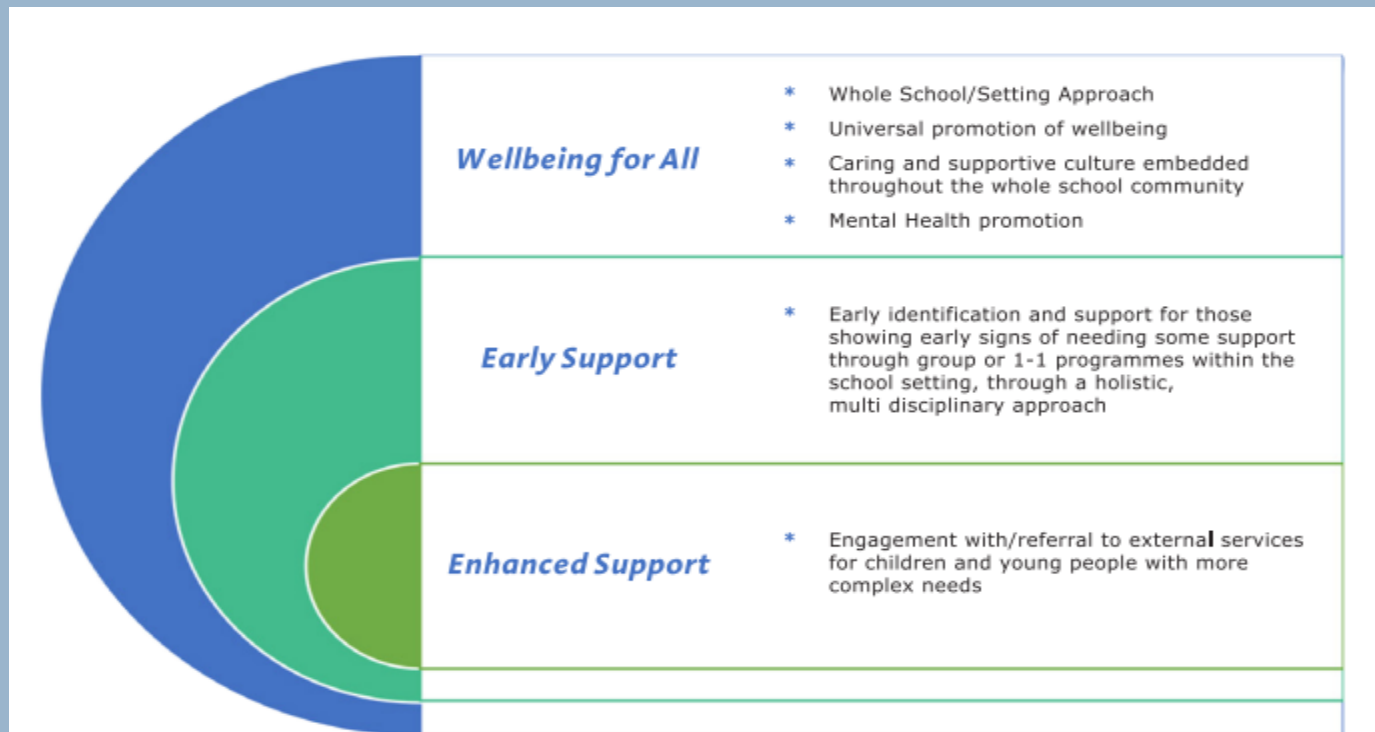
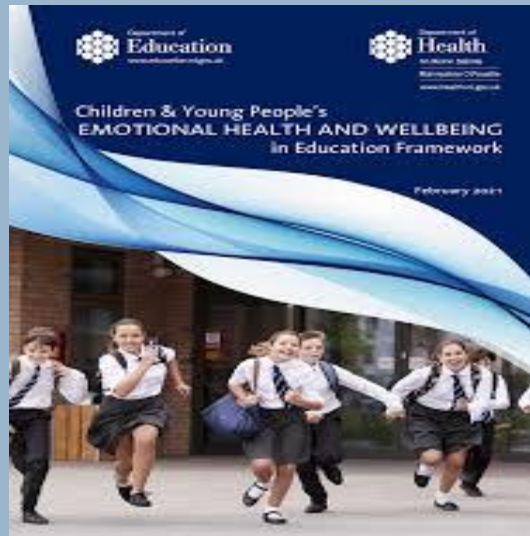
## ■ Royal Society of Medicine March 2022

- Childhood rates of mental illness up 50% in just three years
- Only 1/4 children with a mental disorder receiving support from mental health professionals.
- Teachers are most common support for such children.
- Like overstretched professionals on the frontline of healthcare, disproportionate numbers of teachers also experience poor mental health.
- Teachers, GPs and social workers constitute 'tier 1' of the CAMHS and are considered able to offer general advice and treatment for less severe problems, as well as referring to more specialist services.
- In practice, teachers end up providing crucial support for children across the spectrum of need, because it is difficult to access specialist services.

- Royal Society of Medicine March 2022
- “It is both astonishing and alarming that teachers are not adequately trained for these roles. Given the essential role schools and teachers play in supporting children’s long-term health and wellbeing, and responding when problems arise, funding support from the health sector to equip this forgotten health workforce could be transformational.”  
Chloe Lowry the Institute of Education UCL– lead author
- (England) -The government currently funds mental health awareness training for only one teacher per school.
- Just 40% of classroom teachers in England report feeling equipped to teach children in their class who have mental health needs, and only 32% know how to help pupils access specialist mental health support outside school.
- Training in promoting children’s healthy development was omitted in the final stages of the recent teacher training reforms in England, in favour of a narrow focus on improving academic attainment.
- Regardless of socio-economic status, children with better social and emotional development achieve higher GCSE results, while those with mental health difficulties are more likely to perform poorly. Research has shown that the influence of individual teachers on pupils’ mental health is as significant as their influence on academic test scores.
- The authors go on to offer recommendations including integrating comprehensive training in child development, health and wellbeing into teacher training courses, as well as being provided free of charge to all current teachers. They also recommend investment in schools to become hubs for children’s services, from social workers to social prescribing link workers.

- 5 Teacher Unions in N.Ireland (Some overlap with UK, some ROI )
- Several signpost sources of information & support such as :
- [NASUWT | Wellbeing Tools for Teachers](#)
- Promoting and supporting mental health and wellbeing in schools and colleges - GOV.UK (2021 updated 2025)





# Content

## ■ Part 1 - What is:

- Emotional wellbeing?
- Mental illness? *And how these relate*
- Neurodiversity?
- Relevance to teachers/school staff/setting.
- Stigma
- Early warning signs in school environment.
- 'Hot topics' mindfulness, technology, social media, sleep hygiene.

## ■ Part 2 – Specific information on the more common conditions/disorders presenting in school age population (Prevalence, assessment, diagnoses, treatment + user/carer info & resources)

- Space for discussion/questions (including anonymously).

## ■ Part 3 - Specific detail about local CAMHS MDTs-

- how to access
- referrals processes
- practical guidance on what to do if a teacher has concerns.

## ■ Part 4 - Information for teachers about:

- Stress management
- How to support their own mental health/emotional wellbeing in partnership with Aware NI (the national depression charity for Northern Ireland) and their 'Mood Matters' programme.



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*And how these relate*

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## ■ Part 4 - Information for teachers about:

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# What is already being done?



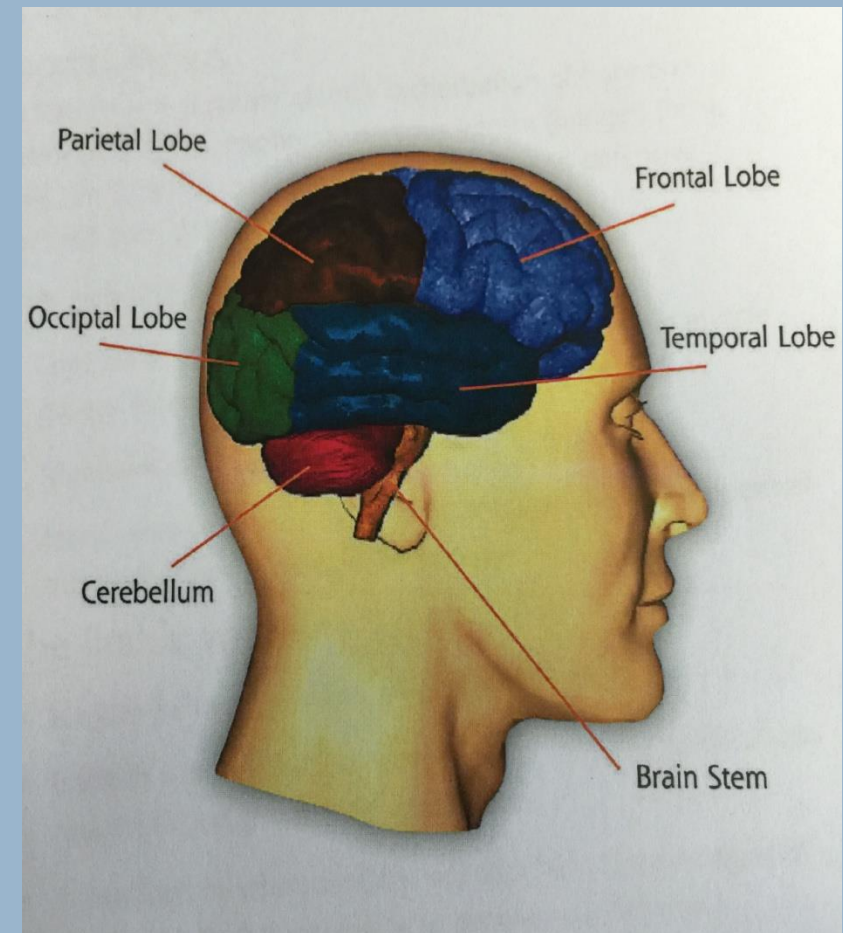
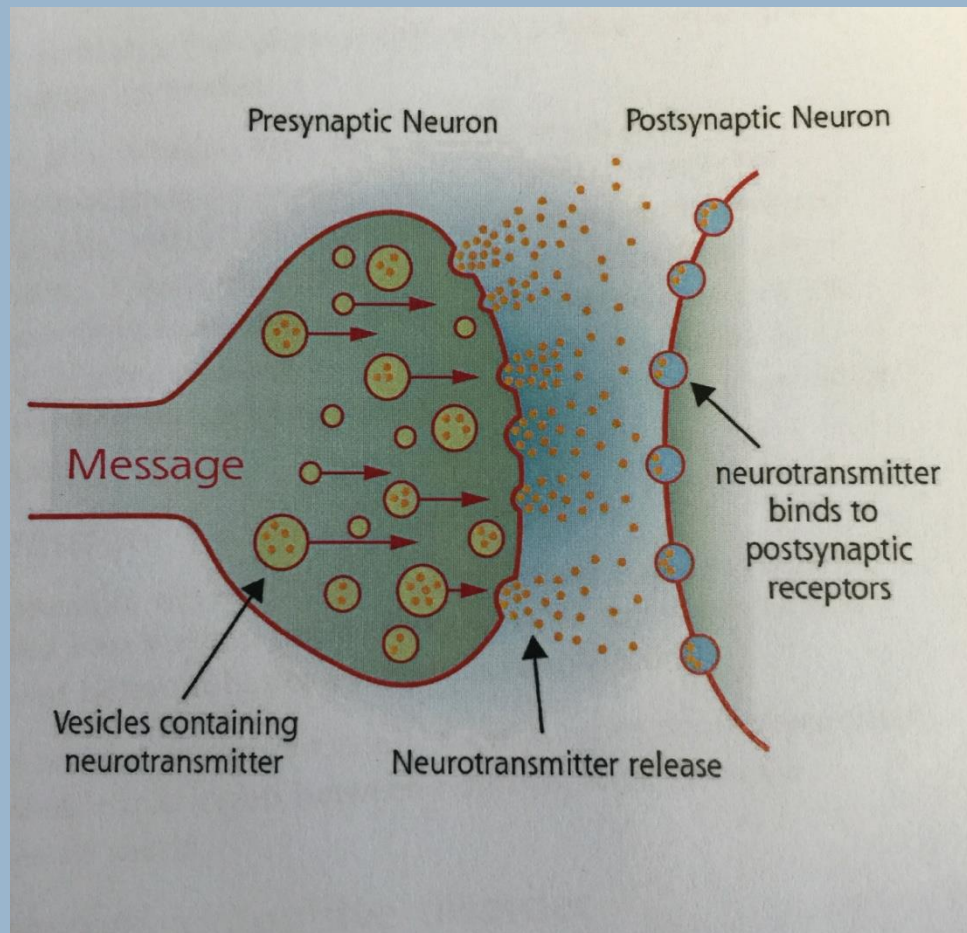


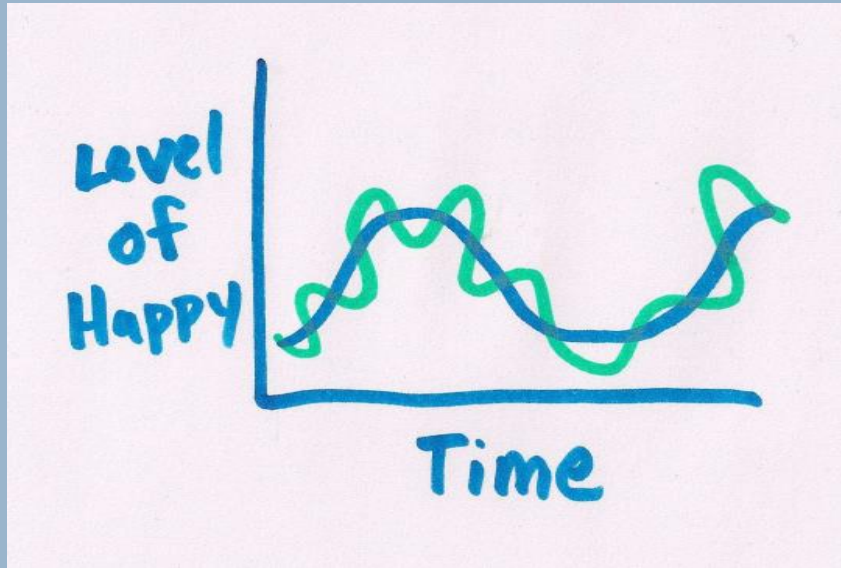
**Be accidentally mindful, but do it  
on purpose.....**



**Without emotional literacy....children & young people cannot express their needs.**







Covid world...



Teenagers....



**How deep  
is the mud?  
Depends on  
who you ask.**

**We all go through the  
same stuff differently.**





# Mental Illness v Mental Distress



We can work on looking after our emotional wellbeing in order to protect our mental health just as we might work on physical exercise to protect our physical health.

You might do your very best to look after these....but you can still become unwell.



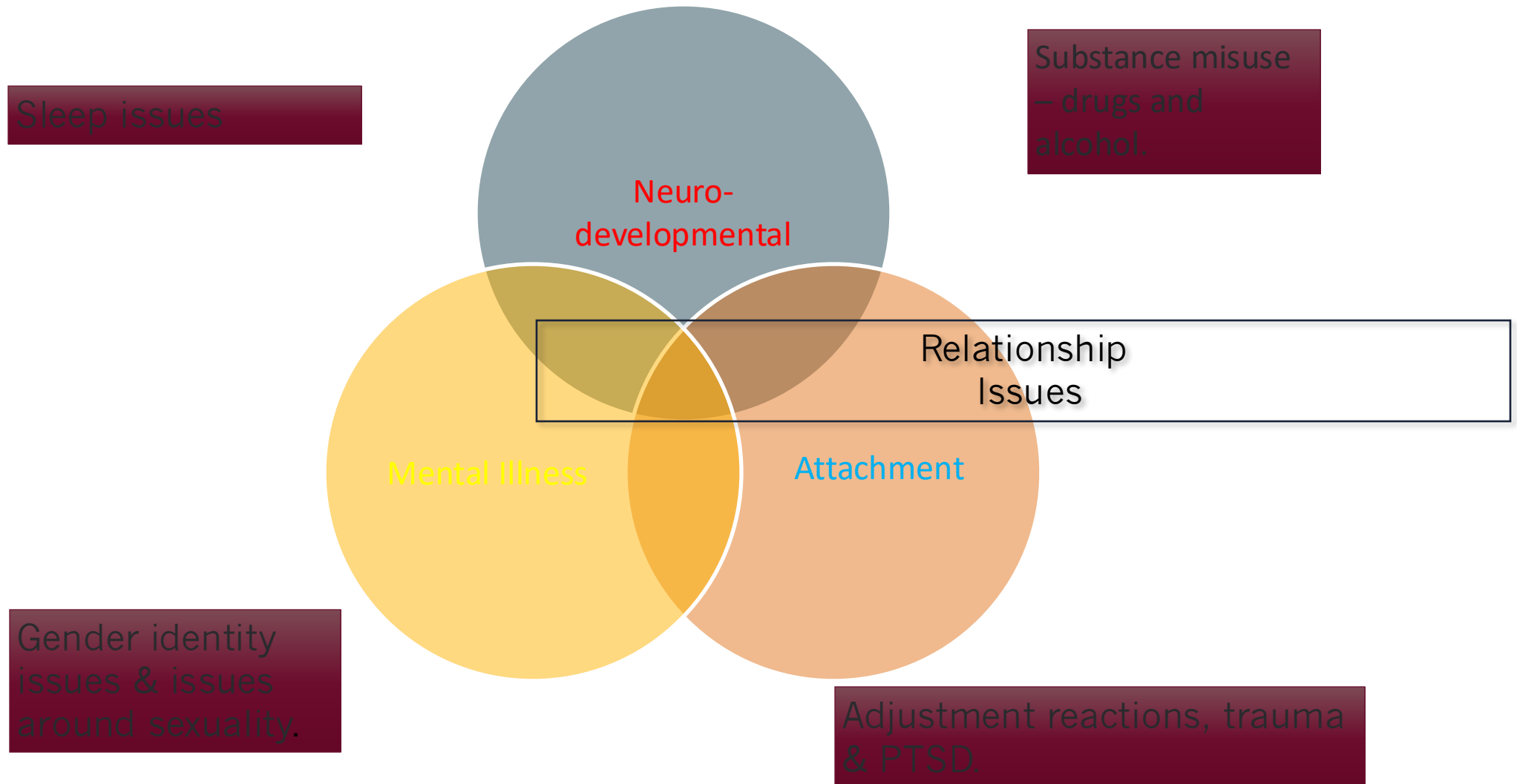


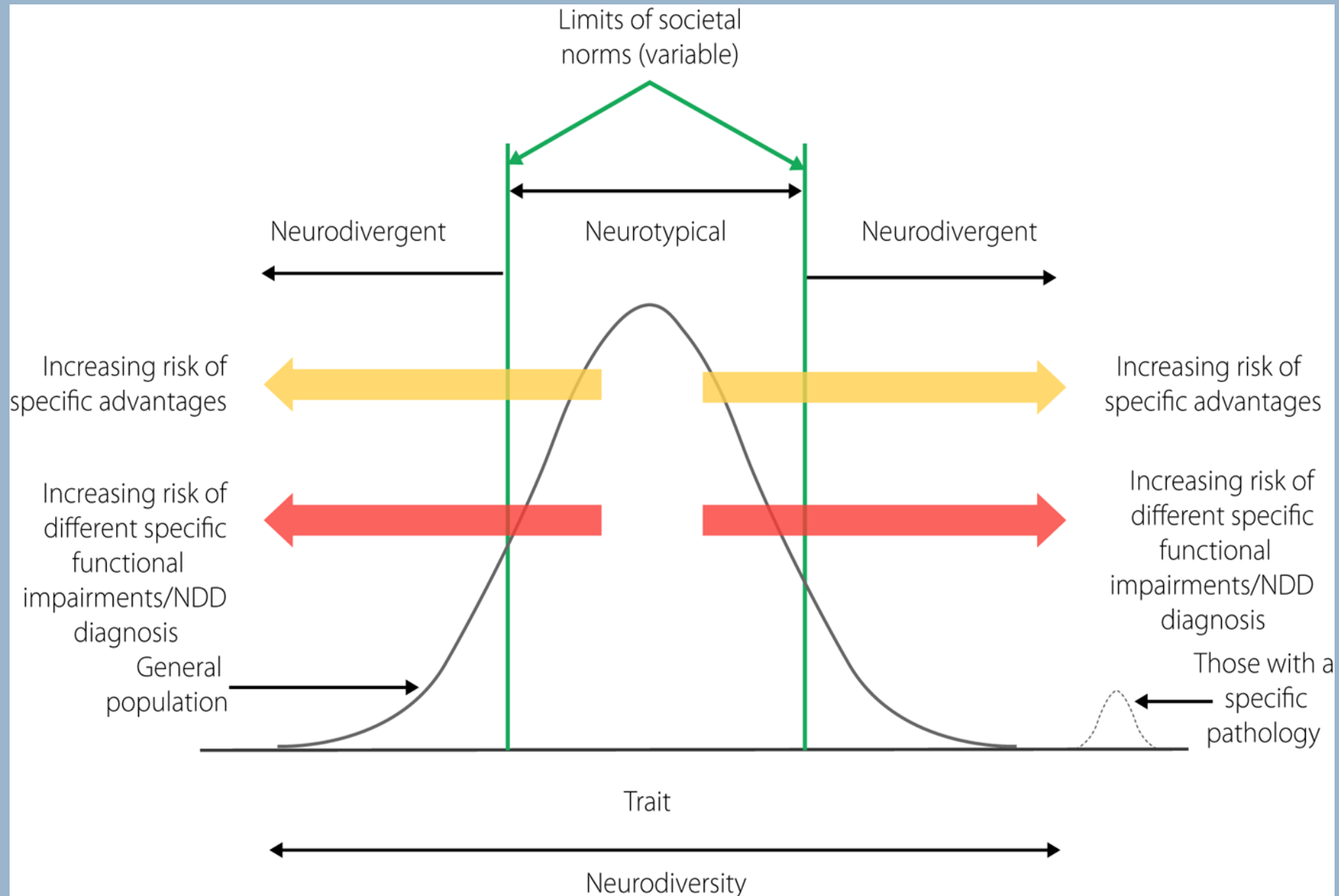
Medicalisation of 'typical'  
challenging life experiences

Vs

Minimisation of actual mental illness

# Mental Health & Other Support Services – What do they see?





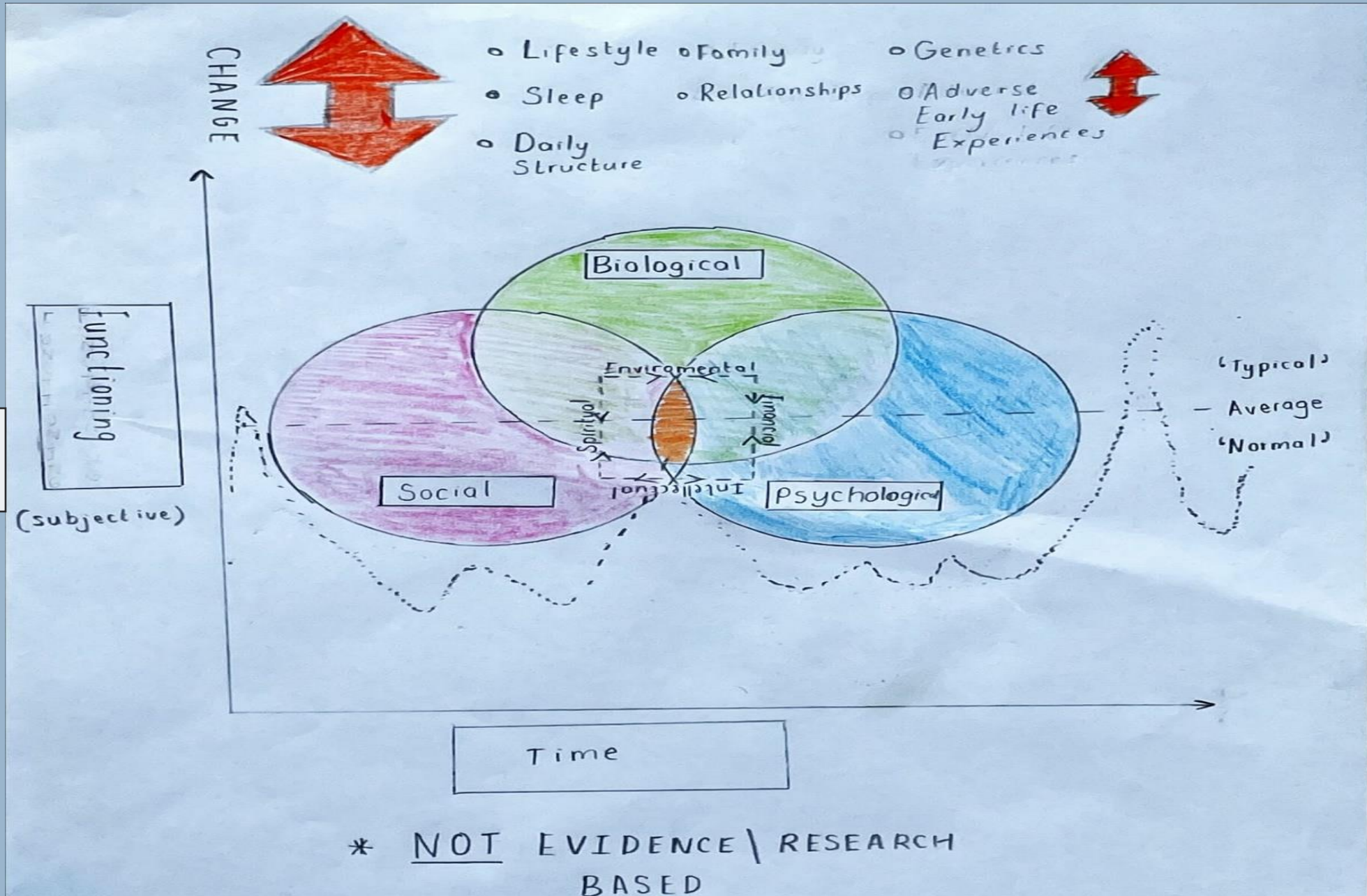
- 'looked after children'
- children with intellectual disabilities
- children on the autism spectrum
- children from disadvantaged backgrounds
- children with their own history or family history of previous mental health difficulty



**V  
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# How do these things all relate?




Open to all criticism!

# Breadth of 'conditions'

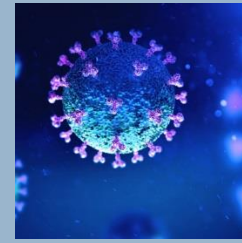
- Neurodevelopmental
  - Autism spectrum condition
  - Attention Deficit Hyperactivity Disorder (ADHD)
  - Tics & Tourette's syndrome
- Sleep Issues
- Gender Identity Issues & Issues around sexuality
- Drugs & Alcohol
- Trauma
- Attachment difficulties and disorders
- Intellectual Disability
- Behaviours experienced as challenging
- ✕ Mental Illness
  - Depression
  - Bipolar Affective Disorder
  - Anxiety
    - Selective Mutism
    - School refusal
    - Trichotillomania
  - Obsessive-compulsive disorder (OCD)
  - Mood disorders
  - Deliberate self-harm
  - Suicidal Ideation
  - Eating disorders
  - Psychotic illnesses/Schizophrenia
  - PTSD





At least 3  
in every classroom

# Covid-19/Post-Covid Period



WE ARE NOT ALL  
IN THE SAME BOAT



BUT WE ARE IN THE SAME STORM





# Why?

## TEACHERS...



What my friends think I do



What my mother thinks I do



What society thinks I do



What my students think I do



What I think I do



What I really do

## Psychiatry



What patients think I do.



What my mom thinks I do.



What psychologists think I do.



What my friends think I do.



What I think I do.



What I actually do.

Schizo, psycho, nutter, freak;  
Crazy, loser, loner, geek.  
Mental, oddball, spacer, mad;  
Loony, bonkers, dangerous,  
bad.  
Wacko, threat, capable of  
killing;  
Insane, scary, not the full  
shilling.  
Animal, maniac, wrong in the  
head;  
Violent, evil...better off dead.



*stigma (noun)*

a mark or characteristic  
indicative of an abnormality

# Stigma

- Diabetes
- Epilepsy
- Asthma.....

- 
- Depression
  - Anorexia
  - Bipolar Affective Disorder....





# Stigma

- Diabetes
- Epilepsy
- Asthma
- Depression
- Anorexia
- Bipolar Affective Disorder







What

RESISTANCE



- RCPsych NI have presented to the Stormont All Party Group & various health ministers
- We would like to see development of **accredited, evidence based, regional models of mental health and emotional wellbeing training for teachers and school staff accessible to all schools** across Northern Ireland with a broad and balanced focus (to include neurodiversity) and to include local service structures as well as how and when to access help or seek advice.
- Training should be relevant / tailorable to different key stages (and include Special Schools) and using a whole school approach
- Delivery of this as integral to teacher training



# Questions from the audience

# Upcoming Events

➤ **Workshop (virtual)**

Thursday 17<sup>th</sup> April 2025, 11.00-12.00

➤ **Learning Set (virtual)**

Thursday 22<sup>nd</sup> May 2025, 10.00-12.00

*If you would like to share your experiences of public mental health practice, including challenges and best practice at one of our future events, please email us at*

**[public.mh@rcpsych.ac.uk](mailto:public.mh@rcpsych.ac.uk)**

# Thank you and closing remarks

Jean Strelitz

Senior Researcher | Public Mental Health  
Implementation Centre (PMHIC)