



**Making life better,  
together**

*Belfast Strategic Partnership*

# **Building Emotional Resilience Strategy 2014-17**



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*It is not the strongest of the species that survives, nor the most intelligent that survives. It is the one that is most adaptable to change. Charles Darwin, 1859*

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## Acknowledgements

Belfast Strategic Partnership would like to acknowledge the continuous work of the Mental Health and Emotional Wellbeing Thematic Group in driving and supporting the development of this Building Emotional Resilience Strategy.

## Foreword

As joint chairs of Belfast Strategic Partnership Mental Health and Emotional Wellbeing Thematic Group we are delighted to launch the First Belfast Emotional Resilience Strategy.

The development of this strategy comes from a number of initiatives undertaken to help build a healthier Belfast. Events like the Mayors' Initiative on Suicide Awareness '*Celebrating Life – Ag Céiliúradh an tSaoil*' in April 2012, as well as the '*Have Your Say Belfast*' (2012-2013) survey which was distributed to 135,000 homes across the city, have all helped to inform this publication. Our work in the city in providing Mental Health care to a wide range of Service Users also informs this strategy. This document represents a live process, under constant review and discussion. This is to ensure the actions and objectives outlined within the document fit well with relevant local and regional priorities and identified need.

This strategy sets out our vision for Emotional Resilience for Belfast citizens and over the next three years we will work collectively and in collaboration with a range of stakeholders in the community, voluntary and statutory sectors to achieve our actions and objectives.

Since the signing of the Good Friday/Belfast Agreement in 1998 the impact conflict here has had on people is well documented and a 'lived experience' for citizens. According to research, over 3,500 people were killed and over 40,000 individuals were injured during the conflict. In Belfast over 1,500 individuals lost their lives with over 1,200 deaths in the north and west of the city alone. (Sutton, 1994)

Among individuals and families affected by the conflict, high levels of post-traumatic stress, clinical depression and substance abuse remain prevalent. There is no doubt the legacy of the conflict continues to be felt to this day, including the transgenerational impact on the emotional health and psychological wellbeing of many of our people who did not grow up during those years of conflict.

Many key issues remain and are highlighted within this document, including; impact of crime & anti-social behaviour, social isolation, access to open space, access to employment opportunities and confidence building. These themes while reflective aren't exclusive.

Health and wellbeing of citizens is a crucial element in the make-up of successful cities.

As Belfast continues to grow and develop a reputation for being prosperous and vibrant, there is an onus on those responsible for health and wellbeing to work together to achieve good quality of life for our residents.

The publication of the 'Building Emotional Resilience Strategy' is the result of such an approach. It will have a positive and direct impact on the life of this city.

Its aim is to identify agreed priorities to ensure the welfare of people comes first and establishes that feeling safe, being healthy and having access to opportunities are central to quality of life.

A wide engagement process has taken place to get us to this stage and Belfast Strategic Partnership will continue to take this approach in moving forward. We aim to provide a 'citizens first' approach to health and wellbeing which is both visible



and inclusive to our city's health and wellbeing.

It is our hope this document clearly demonstrates the commitment of Belfast Strategic Partnership to enhance the health and wellbeing for the people of Belfast. We encourage continued contributions and input from the citizens of Belfast to inform and shape the future development and delivery of this strategy.

We look forward to engaging with all of you in the coming months.

Irene Sherry

Barney McNeany

Co-Chairs

Mental Health and Emotional Wellbeing  
Thematic Group

## Belfast Strategic Partnership

### Vision

‘All people and communities in Belfast can confidently expect to have access to the opportunities and resources they need to live longer, healthier lives.’

### Mission

‘To reduce life inequalities and improve the health and wellbeing of people in Belfast by changing the way we work together. We do this by jointly harnessing the enthusiasm, efficiency and experience of our stakeholders to seek health and wellbeing gains in ways we cannot do by working alone.’

### Purpose

- To shape the future health and wellbeing priorities for Belfast
- To foster and take advantage of strategic opportunities to achieve better health outcomes
- To work together on areas where we can achieve the most impact
- To inform and influence future policy development
- To focus on the prevention of ill-health
- To develop and deliver an overarching health and wellbeing action plan for the city

### Key Principles

To successfully reduce inequality and address the wider determinants of health we must

- Maximise our combined impact by working better together
- Be accountable to others based on the results of our work
- Base our decisions and actions on evidence and learning from others

- Be open to innovative approaches and be prepared to work differently
- Encourage the active involvement of all stakeholders and strengthen relationships
- Build on the success of existing partnerships and programmes of work
- Engage with communities and seek to contribute to Community Planning
- Make effective use of our collective resources through better joint planning and priority setting
- Drive Equity in Health and Well-being through all of our policies
- Share our learning to change the way the public sector works

### ‘Making Belfast a ‘Resilient City’ We will work to make Belfast a Resilient City, by

- Building and strengthening existing work which has a positive impact on emotional resilience
- Undertaking pro-active and active work around prevention, promotion and education
- Developing and enhancing emotional resilience infrastructure and activity across the city
- Working with citizens to better understand and value emotional resilience as a concept and notion
- Promotion of emotional resilience programmes as a means of support for individuals
- Better connecting emotional resilience work and activities across the city, with a focus on disadvantage and inequalities.
- Building on Belfast already being a World Health Organisation Healthy City with community resilience as one of the core themes in Phase VI (2014-2018)

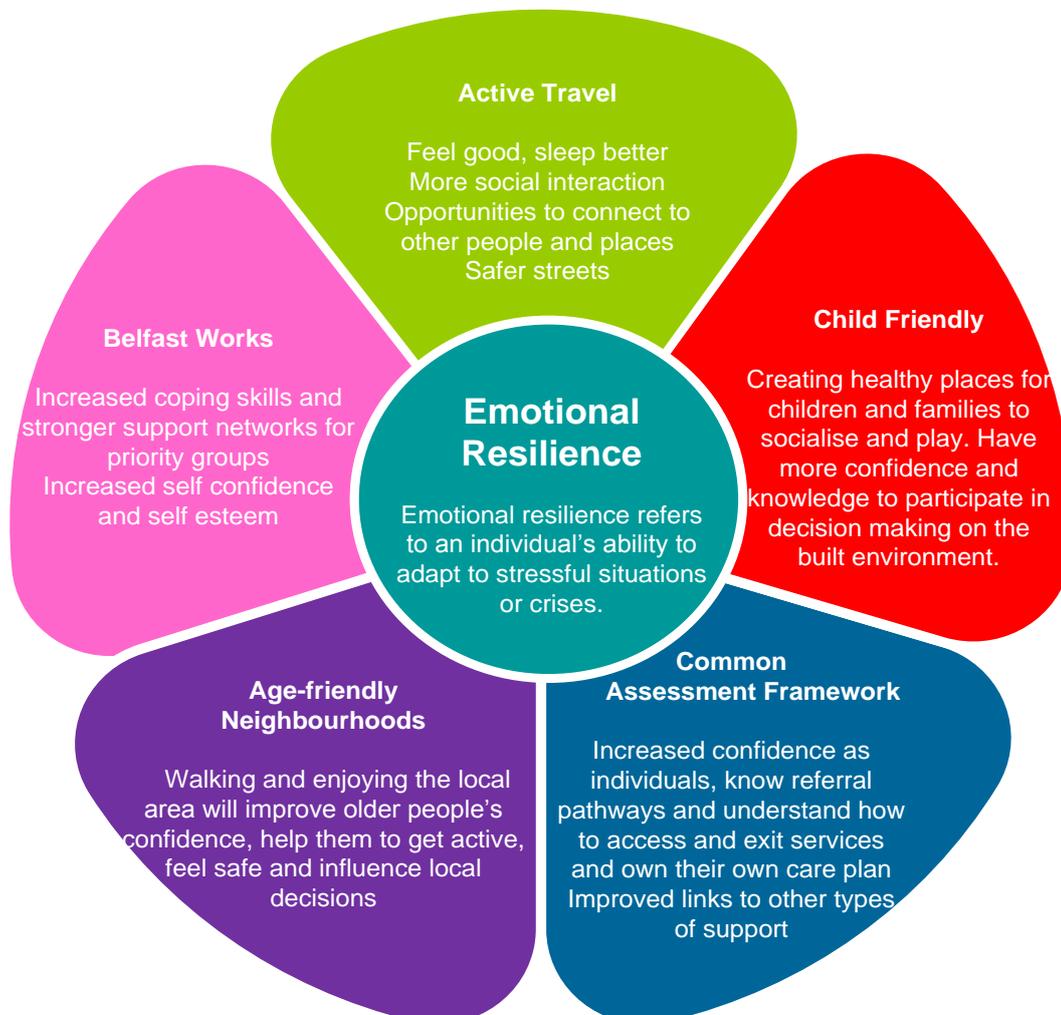
## Belfast Strategic Partnership Central Priority

The central priority of the partnership is to strengthen the emotional wellbeing and resilience of individuals and communities in Belfast. Emotional Resilience refers to an individual's ability to adapt to stressful situations or crises that may have occurred in the past, present or into the future.

Other Belfast Strategic Partnership Key Demonstration Projects, which contribute to building emotional resilience, are outlined below in Diagram 1.

**Diagram 1**

### Key Demonstration Projects - Contribution to Emotional Resilience





## Emotional Resilience

'Emotional resilience refers to an individual's ability to adapt to stressful situations or crises'.

### Characteristics of emotional resilience

#### 1. Self awareness

Resilient people are aware of the situation, their own emotional reactions and the behaviour of those around them. In order to manage feelings, by remaining aware, resilient people can maintain their control of the situation and think of new ways to tackle problems.

#### 2. An understanding that setbacks are part of life

Understanding that life is full of challenges and while we cannot avoid many of these problems, we can remain open, flexible, and willing to adapt to change.

#### 3. Self Reliance

Generally, resilient people tend to have what psychologists call an internal 'Locus of Control'. Those with a high external 'locus of control', believe powerful others, fate, or chance primarily determine events. Those with a high internal 'locus of control', tend to believe events result primarily from their own behaviour and they have the power to influence their environment.

#### 4. Strong problem-solving skills

Problem-solving skills are essential when a crisis emerges; resilient people are able to spot a solution that will lead to a safe outcome. In danger situations people sometimes develop

tunnel vision. They fail to note of important details or take advantages of opportunities. Resilient individuals, on the other hand, are able to calmly and rationally look at the problem and achieve a successful solution.

#### 5. Social connections

Whenever you're dealing with a problem, it is important to have people who can offer support. Talking about the challenges you are facing can be an excellent way to gain perspective, look for new solutions, or simply express your emotions. Friends, family members, co-workers and support groups can all be potential sources of social connectivity.

## Factors contributing to Emotional Resilience include

1. Close relationships with family and friends
  2. A positive view of yourself and confidence in your strengths and abilities
  3. The ability to manage strong feelings and impulses
  4. Good problem-solving and communication skills
  5. Seeking help and resources
  6. Seeing yourself as resilient
  7. Coping with stress in healthy ways and avoiding harmful coping strategies
  8. Helping others
  9. Finding positive meaning in your life despite difficult or traumatic events.
- Belfast Strategic Partnership recognises the need to work at a number of levels which are independent and interdependent.

**Table 1: Emotional Resilience Factors at Individual, Social/Community and Structural Level Protective Factors**

Individual level	Social/Community level	Structural level
<ul style="list-style-type: none"> <li>• Positive sense of self</li> <li>• Good coping skills</li> <li>• Attachment to family</li> <li>• Social skills</li> <li>• Good physical health</li> <li>• Spirituality</li> </ul>	<ul style="list-style-type: none"> <li>• Supportive caring parents/family</li> <li>• Good communication skills</li> <li>• Supportive social relationships</li> <li>• Sense of social belonging</li> <li>• Community participation</li> <li>• Access to social networks</li> </ul>	<ul style="list-style-type: none"> <li>• Safe and secure living environment</li> <li>• Financial security</li> <li>• Employment/meaningful activity</li> <li>• Positive educational experience</li> <li>• Access to support services</li> <li>• Tolerance and respect for diversity</li> </ul>

*Adapted from Margaret M. Barry and Rachel Jenkins (2007) Implementing Mental Health Promotion Churchill Livingstone Elsevier*



## Stakeholder Engagement

As part of the stakeholder engagement process and consultation, 135,000 surveys were sent to homes in Belfast. Alongside this a number of other consultations were held across the city within the community sector, community of interest sectors, post primary schools and youth sector.

The response to the 'Have Your Say Belfast' survey was one of the highest ever received of any survey across the city.

## 'Have Your Say Belfast' 2013 Report and Findings

The 'Have Your Say Belfast' survey was issued in August 2012 as part of a three month consultation process.

Belfast Strategic Partnership acknowledges while there is significant investment in mental health and crisis response services across the city for when people become ill, there is a need to develop a focused and life course approach to developing services and strategies that intervene early and prevent people's mental health and wellbeing deteriorating.

In total 3,065 questionnaires were returned for analysis. 708 of these were completed through an online survey and 2,357 people in the Belfast area completed paper returns.

Of the respondents

- Two-thirds were female
- There were high proportions of 36-50 and 51-70 year olds
- Most of those completing the questionnaire were 'employed'
- 17% said they had a disability

- 5.6% of those responding said they identified as gay, lesbian, bisexual or transgender
- More than one-quarter of those completing the questionnaire live in the top 20% deprived areas in Belfast.

## What the HYSB survey told us

- More than 27% of respondents indicated they had treatment for anxiety or depression in the previous 12 months.
- 53% of respondents who considered themselves to have a disability indicated they had received treatment for anxiety or depression. Further compounded when they live in the top 20% most deprived areas – 66.7% had received treatment.
- A higher proportion of people living in the top 20% most deprived areas indicated they had received treatment for anxiety or depression than those living in other areas throughout Belfast (36.2% compared to 24.3%).
- A higher percentage of people who identified as gay or lesbian indicated they had received treatment for anxiety or depression in the year preceding the consultation. More than 42% compared to 27% of people who identified as heterosexual.
- Mental wellbeing was significantly higher among those categorised as being heterosexual compared to transgender
- No significant gender differences or differences with older people on mental wellbeing scores. (SWEMWBS)

(SWEMWBS) Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS) a set of validated questions, their experience of the seven questions combined to make a score which can be used as a measure of mental wellbeing



## Important issues for improving Quality of Life

- A higher proportion of people living in the top 20% most deprived areas indicated lower levels of crime and anti-social behaviour would help improve quality of life than those living in other areas throughout the city.
- Better employment opportunities and activities for children also showed a difference in terms of more people in the top 20% deprived areas indicating those things which would improve quality of life.
- 23% of respondents identified the need to have greater levels of confidence in order to help make them feel better about themselves.

## Coping mechanisms

- The research highlighted the importance of interpersonal relationships and their impact on emotional wellbeing.
- Respondents highlighted having the love and support of a family was a major contributing factor to their health and wellbeing.
- Money was also an issue for respondents but didn't feature as highly, suggesting family, love, and interpersonal relationships were more important.

## Techniques respondents use to help them think positively

- Talk to and have the support of family and friends
- Talking to someone openly about problems or issues
- Exercising regularly

## Techniques respondents use to help them connect better with others included

- Attendance at community events, services or activities
- Community support, attendance at community centres and groups
- Focus on positive, fulfilling life
- Involvement in family and communal activities
- Focus on the importance of family connections

## Impact on Social Connections

- Almost 46% said they get together with family members every day and almost 30% once per week.
- Almost 30% of respondents indicated they get together with friends every day and more than 40% said once per week.
- It is important to note those in the 25-50 age band presented as higher needing support, however this group identified as the lowest in relation to daily contact with friends.



## Further Observations

- Those who responded feeling they had a good social life were less likely to have received treatment for anxiety or depression in the past 12 months.
- Talking to and having the support of family and friends is the technique used by most people to help them think more positively.
- There were no significant gender differences on mental wellbeing scores.
- Mental wellbeing was significantly higher in those identifying themselves as heterosexual compared with those identifying as transgender.
- Future planning should take account of the issues identified by individuals and communities within Have Your Say Belfast.

For further information on the 'Have Your Say Belfast' summary report visit [www.belfastcity.gov.uk/healthandwellbeing](http://www.belfastcity.gov.uk/healthandwellbeing)



## Key Principles and Aims

### Principles

#### Outcome-focused

- Have an outcome evidence-based approach, establish measures of need and prioritise on that basis

#### Inclusive

- Engage people and communities at every level to address the social gradient of inequalities
- Work to ensure the wider community has the opportunity to be part of, and input into BSP work

#### Approach

- Our approach will be focused on early intervention, including raising awareness of and building emotional resilience and working across the key areas of promotion, prevention and education.
- It is also important to note our approach should take cognisance of and learn from other work that can contribute too and inform the outworking of our strategy.
- Take a partnership focused approach to our work, working closely with Tier 1 service providers.

#### Measuring Effectiveness

- Develop effective measurement tools in partnership with Tier 1 service providers and others

## Aims

### Aim 1

**Raise awareness and enhance individual emotional resilience and wellbeing**

#### Action 1

#### We will do this by

- **Developing and implementing a communications and marketing framework for the 'Take 5' Campaign**

#### We will build on extensive work already underway, including;

- [www.mindingyourhead.info](http://www.mindingyourhead.info) website, and promotional campaign
- Tools for Life programme (Appendix 1)
- BSP Lifelong Learning (Draft) Strategy
- Primary Care mental Health Hubs
- Family Support Hubs
- BSP Active Belfast Strategy
- Pupils Emotional health and Wellbeing
- Pupils Emotional Health & Wellbeing (programme) Dept of Education
- The Belfast HSCT Learning & Development Strategy
- Area based mindfulness programmes; leading to train the trainer approach
- Better connections to mental health locality Hubs across Belfast.
- Neighbourhood Renewal Partnerships
- Communities of interest groups
- Making Life Better (DHSSPS 2013-2023)



## Action 2

### Develop an Emotional Resilience Resource Toolkit

- Work with Tier 1 service providers to develop a Take 5 `Starter` Toolkit for use by Individuals, Community and Business.
- Implement a range of training programmes which will enable/enhance individual's capacity to understand their own emotional wellbeing and how to protect and promote it
- Deliver a number of community engagement workshops across the city in partnership with Tier 1 service providers looking at the range of services provided.
- Look at current work undertaken around the development of an App to support mental health and Emotional Wellbeing, this may be specific to young people and adults separately
- Develop a 'Train the Trainer' programme of work to support activities including Mindfulness and Life Coaching
- Work with Business in the Community to develop an Emotional Resilience award as part of their 'Rewarding Good Business' awards
- Work with Business Sector to develop mindfulness and emotional wellbeing training programmes for businesses

### We will link to work already taking place through

- Tier 1 Service Providers
- The New Economics Foundation
- Public Health Agency
- Belfast Health and Social Care Trust
- Other relevant agencies and literature

## Aim 2

### To reduce life inequalities and develop emotional wellbeing at a community level

## Action 3

### Take the lead with local communities to identify an innovative project aimed at releasing community capacity and measuring the effectiveness of the evaluation model

- Identify, link into and promote the innovative work currently being delivered in the community and create a process for sharing this information
- Review regional, national and international innovative practice that has worked to improve emotional resilience
- Work with local communities and communities of interest to develop a community based settings approach to improving emotional resilience



## Action 4

### Deliver a 'Conference using the 'Take 5' Messages

- Work with BSP partners, thematic group members and Tier 1 service providers to deliver a Coaching for Health Conference.
- Follow up on conference outcomes and recommendations and link closely with BH&SCT and more specifically with the primary care talking therapy hubs

### We will link to work already taking place through

- Tier 1 Service Providers
- Public Health Agency
- Belfast Health and Social Care Trust
- Other relevant agencies and literature

## Action 5

### Develop a research proposal to look at and identify why individuals do not use 'Tier 1' services. This will include identification of barriers and solutions.

- To develop a research proposal.
- Learn from existing processes to ensure and minimise duplication
- Canvass support from committed agencies and link with identified research bodies to progress proposal

### We will link to work already taking place through

- Tier 1 Service Providers
- Public Health Agency
- Belfast Health and Social Care Trust
- Other relevant agencies and literature

## Aim 3

### Develop Emotional Wellbeing policy and practice across sectors and within all organisations in BSP

## Action 6

### Use the 'Emotional Resilience Resource Toolkit' to influence others to incorporate building emotional resilience into key areas of work

- The thematic group will proactively encourage all BSP partners and Sub Groups to influence strategies and service development to include emotional resilience activities.
- The thematic group will work closely with BH&SCT to create sustainable connections with the other BSP key demonstration projects to ensure improved emotional resilience is an explicit outcome for each project.
- The thematic group will work in partnership with communities of interest to support and develop emotional resilience within localities.
- The thematic group will work with the Police and Community Safety Partnerships to build emotional



resilience into programmes aimed at reducing crime and anti-social behaviour in local areas

- The thematic group will work with partner organisations to build emotional resilience into programmes aimed at improving parks, community gardens and open spaces in the city.
- The thematic group will work with BHC to ensure improved emotional resilience (individual and community) is an explicit outcome of the health literacy project

### **We will link to work already taking place through**

- PSNI/Policing Board Plan 2014/17
- BCC Police and Community Safety Partnership plan 2014-15
- District Police and Community Safety Partnership plan 2014-15
- Suicide prevention community response planning
- Pilot workplace emotional wellbeing training programmes
- Community resources / development work
- Development of Tools for life programme
- Making Life Better (DHSSPS 2013-2023)

### **Action 7**

#### **Develop a model for evaluating and measuring the impact and outcomes of work to build emotional resilience**

- Identify and implement an accredited outcomes framework for emotional resilience, do this work in partnership with Tier 1 service providers.
- Review current or existing evaluation tools used across the Tier 1 services
- Develop an easy to use 'evaluation tool basket' in partnership with Tier 1 providers designed to support groups and organisations to complete their own internal evaluation on the delivery of their emotional resilience work.
- Develop a facilitative approach / model for ensuring emotional resilience is a key element explicit in preventative and promotional strategies

### **We will link to work already taking place through**

- PHA
- BHSCT
- Wider BSP Partners



## **Action 8**

### **Establish a process to continuously measure the extent of the shift in resources to preventative services**

- Work closely with the Public Health Agency and the Local Commissioning Group to support this process

### **We will link to work already taking place through**

- BSP Mental Health and Emotional Wellbeing Thematic Group
- Wider BSP Partners



## Appendix 1: Examples of 'Tools for Life'\* Programmes and 'Take 5' Activities

### Tools for Life programmes

- Emotional resilience/coping skills
- Confidence/self esteem building
- Personal development
- Breaking down social isolation – e.g. friendship/walking groups/Men's Sheds
- Dealing with stress and anxieties
- Health improvement (Sexual health, Cook It, physical activity groups)
- Active citizenship and inter generational work (community cohesion outcomes)
- Respect programmes - cultural awareness/valuing diversity
- Mindfulness
- Complementary Therapies
- Family Support Mood Matters
- Mental Health Awareness
- Knit & Natter
- Yoga Laughter
- Nutrition
- Self Management Programme
- Mental Health First Aid
- Beating the Blues
- Life coaching
- Mood Matters, In Pregnancy, In Young people, Adults and later Life.
- Living Life to the Full/Life Skills Programmes
- Top Tips for Looking After Yourself

### 'Take 5' Activities

What we know people in Belfast do regularly to maintain and enhance resilience

- Regularly eat breakfast
- Sit down with other people to eat meals
- Get a good night's sleep
- Be active
- Take a friendly stroll
- spend time with family
- Play sport
- Laugh
- Walk the dog
- Play with their children/grandchildren
- Talk to their neighbour
- Meditate
- Listen to music
- Relax and wind down
- Read a book
- Bake a cake
- Learn a new skill
- Work through issues in small steps
- Get involved in their community
- Volunteer and make time for others
- Think positively, think straight
- Cut down on tea, coffee and 'energy' drinks

\*Tools for Life programmes include the range of programmes available to the population at the early stages of support services



## Appendix 2: Mental Health Emotional Wellbeing Thematic Group Members

<b>Name</b>	<b>Organisation</b>	<b>Role</b>
Irene Sherry	Ashton Community Trust	Co-Chair
Barney McNeany	Belfast Health & Social Care Trust	Co-Chair
Jim Morgan	Belfast Health Development Unit	Lead Officer
Martina Mullin O'Hare	Belfast Health & Social Care Trust	Partnership & Comm Development Officer
Daniel Jack	Age NI	Member
Dympna Johnston	Belfast Area Partnerships Health & Wellbeing Representative	Member
Dara McGaughey	Public Health Agency	Member
Valerie Brown	Belfast City Council	Member
Maria Morgan	Belfast Health & Social Care Trust	Member
Anne McCusker	Belfast Healthy Cities	Member
Lekan Ojo-Okiji Abasi	Black Minority Ethnic Representative	Member
Michael Culbert	Coiste na nIarchimí	Member
Neil Foster	Commission for Victims and Survivors	Member
Anne Bill	Forum for Action on Substance Abuse	Member
Stephen Barr	N&W Belfast Protect Life Group	Member
Rebecca Reid	Probation Board NI	Member
Séamus Mullen	Public Health Agency	Member
Amy Pepper	Public Health Agency	Member
Malachai O'Hara	LGB&T Sector Rep	Member
Glenda Davies	South & East Belfast Community of Interest	Member
Brian Mullan	Victims and Survivors Service	Member
Elaine Park	PSNI	Member
Geraldine Hamilton	BHSCT (Primary Care Mental Health Hub Manager)	Member
Stephen Sheerin	Safer City Co-ordinator, Belfast City Council	Member
Valerie McConnell	HSCB	Member

## References and Sources

1. Belfast Strategic Partnership Framework for Action 2011-15
2. Sutton, M (1994), (2002), An Index of deaths from the conflict in Ireland 1969-2001
3. 'Have Your Say Belfast' Survey 2013, Report and findings, Belfast Strategic Partnership
4. SWEMWBS 2006, Short Warwick-Edinburgh Mental Wellbeing Scale, NHS Scotland, University of Warwick and University of Edinburgh
5. Troubled Consequences Report. 2013 Commission for Victims and Survivors NI (CVSNI) University of Ulster

### **Diagram 1**

Belfast Strategic Partnership Key Demonstration Projects

### **Table 1**

Barry, M, M and Jenkins, R. 2007. Implementing Mental Health Promotion, Churchill, Livingstone Elsevier



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