



Working Together for Mental Wellbeing

Transcript:

The Mental Health and Wellbeing of Elders in Black and Minority Ethnic Communities:

Working Together for Mental Wellbeing

Narrator: According to a 2009 Barnet Primary Care Trust report, older people in the Chinese community feel there is a lack of information about social care services and more needs to be done.

Ed Gowan: We did some analysis of a number of people who were coming to us and asking for help about a year ago, and what we found was that certain groups in society, the Chinese ethnic group within Barnet being one of them, had relatively low take-up of services and weren't coming to ask us for help on a regular basis.

What we saw with a lot of groups was that these groups where there was a low request for help, was linked to a very high cost when people did come and ask for help, which suggests that people were waiting until things were just too impossible to manage and only then looking for assistance.

Narrator: Mr Yang lives alone and, like many older people, has mobility problems so he rarely goes out unassisted. He's had trouble accessing appropriate services.

Koonshin Yang: It's very difficult. I cannot go out alone because once I fall down on the pavement and could not get up. I went to the hospital, Royal Hospital, to see the doctor. He said, "Oh, because you're old man so you will have these problems." That's the answer, he said, "We cannot do anything." Finally the doctor offered me a stick.

Leon Lee: Mainstream services have failed them in terms of not providing enough language support, as well as failing to understand their cultural needs. These are the two main areas that prevent them from accessing services as much as they should.

So, for example, a homecare person might turn up in the house and service up, say, fish and chips, when their diet consists of mainly less oil and no fried food. So in that sense the elderly person might feel that their needs are completely being ignored.

Narrator: So how have the Barnet Local Authority tackled personalisation for elders in the Chinese community?

Ed Gowan: We decided that we needed to run a project, which wasn't the State saying you have to change but was asking communities to tell us

how they wanted to change, and then to make those changes themselves. So we created the Innovation Fund, which was an opportunity for a large number of groups to bid for seed money so that they could try something new, they could set up new services, or they could improve services that were already being run in the Borough, and that they could use that money to create something which was appropriate for their community or for the group of people they were working with.

- Narrator: The Chinese Mental Health Association provide community based mental health assistance to Chinese people living in the UK. They were one of those groups asked by the local authority to develop a personal, flexible service for Chinese elders, one which could promote the personalisation agenda.
- Leon Lee: This will give us the opportunity to engage with them, to get them on board to tell us exactly what the problems are or how they see it as the problem, and why they are not basically accessing services as and when they should, and what they would like to see improve.
- Narrator: They've set up a pilot lunch club and health centre based at Age UK Barnet, at which the topics for discussion are chosen by the users.
- Female: *[Speaking in Chinese] My hip is weak. It cannot support my body and I feel pain.*
- Male: *[Speaking in Chinese] Osteoarthritis won't cause you pain, but if the bone density is low enough the bone can crack, which can cause pain.*
- Stephen Hiew: We decided to give them some added value by putting in this health advice session. It's not so much to give them treatment but actually to help them do two things: one, to maximise what they get out of the healthcare they get from the NHS, because they're confused and we're trying to demystify things for them; and secondly, to give them some ideas how to keep themselves healthy in ways that are practical to them, because of cultural background, dietary habits. That's how it also ties in with the personalisation agenda.
- Female: *[Speaking in Chinese] Hello, how are you? Please sit.*
- Narrator: Recognising the link between physical health and mental wellbeing, the Chinese Mental Health Association have Chinese and Western trained doctors on hand to offer advice through translators. Users can also access Chinese therapy.
- Stephen Hiew: The language barriers, the obvious cultural barrier, we could say we'll send in a care worker, but if the carer doesn't speak Chinese what could she do?
- Narrator: Mr Yang, originally from Taiwan, was a Fleet Street journalist with a wide circle of friends, but now, aged 86 and with his family living abroad, he has lost touch with most people.

Koonshin Yang: I stay at home all day. I can do nothing except reading books. Reading has become my habit. So every day I spend reading my Chinese books in this room.

Male: *[Speaking in Chinese]*

Koonshin Yang: *[Speaking in Chinese]*

Male: *[Speaking in Chinese]*

Koonshin Yang: *[Speaking in Chinese]*

Narrator: To offer people like Mr Yang a more personalised approach to home care, the Chinese Mental Health Association have introduced a befriending scheme.

Alexis Chung: I come to see Mr Yang at least once a week or more than that, basically to see how he is getting on in his daily life, whether he has a good sleep, whether he has take medicine, and whether he needs any needs in his house, because his house is running down and I am concerned about his staying alone on himself.

Koonshin Yang: The social worker tried to take me to meet some other old people. But they're all old ladies and I cannot talk to them.

Alexis Chung: The most important thing for me is to listen to him, to let him share his feelings and his stories, so that all his emotional needs can be expressed out. Otherwise he will get depression and that will cause him a lot of problems. As we build up the relationship he trusts me, and in terms of the background he is a journalist, ex-journalist, I am a scientist, but we can have dialogues. My family matters I just share with him, we're just like close friends.

Narrator: Alexis is now helping Mr Yang access Direct Payments. The Chinese Mental Health Association are developing pamphlets in Chinese to help users understand and access Direct Payments more easily. So how will schemes like these work in the future?

Cllr. Sachin Rajput: In relation to the Innovation Fund specifically, it is funding for one year to really kick-start the proposals that all of these organisations and groups have wanted to do, and specifically with the Chinese community for them to try and find, amongst other things, areas where service users could maybe purchase more services that they might need than are currently available.

Ed Gowan: So we're giving people personal budgets, we're giving people money which they decide how they spend on social care services. So it may well be that we as an institution don't pay a lump sum to a specific charity for them to help, but that lots of individuals do decide to put part of their personal budget towards it.

Alexis Chung: *Blessed is the man who does not walk in the counsel of the wicked or ...*

Leon Lee: I think personalisation is all about shifting the choice and control over to the service users and involving them in the decision making

process in the assessment of what their needs are, and also in choosing the best care package that would best suit their circumstances.

Ed Gowan:

To create a society where people help each other is for me the key when it comes to good health and wellbeing. The State can help make that reality, but in the end it's down to individuals and it's down to communities taking on projects like this to help themselves and help each other. And that's what creates a healthy society within which people have good health and wellbeing.

[End of Recording]