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**Relate’s response to the government discussion paper on**

**mental health and wellbeing**

**July 2022**

**About Relate**

Relate is the leading relationships charity and the Relate Federation is the largest provider of relationship support in England and Wales. Our services and network of local counsellors provide counselling, information, mediation and support, currently operating mainly online and over the phone but also in-person in places too. We help people of all ages, backgrounds, faiths, religions, sexual orientations, genders and disabled people. We also provide expert training for relationship support practitioners.

Our services include relationship counselling for individuals and couples, family counselling, individual counselling, counselling for children and young people and sex therapy. We work in the community, in prisons and in schools.

In addition, we work with a range of partners to ensure that their users and beneficiaries have access to free at-the-point-of-use counselling services and support, available to them when they need it most. These free services are available to many different groups and people working in a variety of sectors including RAF workers and veterans, bank workers, the seafaring community, the Royal Navy and Royal Marines, those living with a brain tumour and many more.

Along with the direct delivery of services, we campaign to see relationship support for children, adults and families at the heart of public policy and lead on ‘Relationships Week’ (5-11 September 2022), now in its third year, which brings together voices from across the UK to highlight the importance of healthy relationships in all our lives.

Our vision is a future where healthy relationships are actively promoted as the heart of a thriving society. Our mission is to make expert information and support for healthy relationships available to everyone.

For further information or to speak to one of our counsellors or people we work with, please contact sarah.osmik@relate.org.uk

**Mental health and wellbeing plan: call for evidence**

Our response to the government’s mental health and wellbeing plan has been informed by the experience of our counsellors and people we support.

**Key messages**

In summary, Relate would like the government’s new plan to recognise how crucial relationships are to our mental health and wellbeing by:

1. Funding and embedding the full range of relationship support in every community – for example, via Family Hubs and other family-centred provision. This includes relationship counselling, children and young people’s counselling, mentalisation-based-therapy (MBT) to help reduce parental conflict, online support and solutions-focused therapy via web chat.
2. The introduction of government-funded Counsellors in all primary and secondary schools in England, as there are elsewhere in the UK.
3. Ensuring regular and mandatory mental health training for GPs covers the importance and range of relationship support available locally, including Couple Therapy for Depression through Improving Access to Psychological Therapies (IAPT) services.
4. Greater utilisation by GPs of social prescribing, including referrals to relationship support and family counselling.
5. Funding for public awareness campaigns, research and resources that continue the reduction in stigma linked to mental health support and promote positive relationships as essential to a person’s mental health and wellbeing.
6. Raising the profile of counselling as a profession within and beyond the NHS (similar to government campaigns around social work); increased routes into accredited training for all counsellors; and providing bursaries for ongoing professional development, so more people can benefit from the full range of treatments and therapies that work.

**The six overarching questions**

Our response to the six overarching questions set out in the government’s discussion document are below:

1. **How can we all promote positive mental wellbeing?**

Many factors impact on someone’s mental wellbeing and we are not all starting from the same place. There is no ‘one-size-fits-all’ approach to promoting or experiencing positive mental wellbeing but factors such as safe housing, feeling financially and emotionally secure, having positive relationships and feeling connected to others, all play a part.

As a country we are talking about mental health and wellbeing more than ever. Public campaigns that are successfully destigmatising mental health mean more people are prioritising their wellbeing, checking-in on their family and friends and seeking support when needed. One of our key asks is that funding for these campaigns, along with research into new and emerging trends and treatments, continues, to help reach more people to understand and prioritise their mental health.

The Covid-19 pandemic has had a significant impact on our mental health, wellbeing, life satisfaction and happiness[[1]](#footnote-1). Recent statistics point to an increase in those who experienced anxiety and depression but a decrease in diagnoses by GPs, leading to the Health Foundation suggesting access to mental health care is in decline[[2]](#footnote-2).

The impact of the pandemic on young people is particularly important to understand. According to NHS figures, one in six children said they were affected by a mental health condition in October 2020, up from one in nine prior to the pandemic. They also reported loneliness, disrupted sleep and anxiety about leaving the house[[3]](#footnote-3). Studies have shown the impact of missing school, the loss of support systems and the poor emotional outcomes young people experienced. One study, however, did show that while many experienced a deterioration in mental health, others experienced improvement. According to Kings College this ‘makes sense; for people with a positive home life and financial stability, spending more take at home will have been easier and more enjoyable.[[4]](#footnote-4)’

We know how important relationships are to our mental wellbeing and how detrimental poor-quality relationships can be[[5]](#footnote-5). Relationships have one of the biggest impacts on our quality of life and happiness[[6]](#footnote-6). Evidence suggests that people in troubled relationships are three times as likely to experience depression as those who are not[[7]](#footnote-7). Unhappy or unsupportive relationships are a risk factor for depression. Some studies have found that over 60% of those with depression consider relationship problems to be the main cause of their illness[[8]](#footnote-8).

Children’s wellbeing, mental health, physical health and outcomes, such as educational attainment, are also affected by the quality of the relationships they witness, and experience, as they grow up. The Government’s Reducing Parental Conflict programme has shown that therapeutic interventions can improve the mental health and relationship quality/co-parenting relationship of parents, whether together or separated. Economic analysis of this programme by Dr Allan Little at Pro Bono Economics for Tavistock Relationships, found that every £1 spent on it generates £10.15 in return[[9]](#footnote-9).

At Relate we work with people at every stage of life and would like to see a life course approach to wellbeing. Starting with pre-natal support and throughout schools, workplaces and community services, wellbeing and self-care should be understood and encouraged, including a greater focus on the importance of strong and positive relationships.

That is why we would like to see the government fund and embed the full range of relationship support in every community, via for example Family Hubs and other family-centred provision. This includes relationship counselling, children and young people’s counselling, mentalisation-based-therapy (MBT) to help reduce parental conflict, online support and solutions focused therapy via live chat. We are also supporting the BACP call for counsellors to be in all schools in England, as they are elsewhere in the UK, to help promote positive relationships and wellbeing as early as possible. It is also important that workplace support includes access to relationship support, as we know from the people we support that work stresses can have an impact on a person’s relationships outside the office.

1. **How can we all prevent the onset of mental ill-health?**

**Education** is essential if we are to prevent the onset of mental ill-health. Being aware of how to prioritise our mental health, what impacts it and what to do when we start to feel worried about it, are all essential if we are to prevent issues arising. Public campaigns are important, as is the development of apps and online support that focus people on their own wellbeing, mindfulness, self-care and resilience.

**GPs** have a central role in preventing the onset of mental ill-health and social prescribing is an important tool Relate would like to see utilised a lot more consistently across the country. Charities deliver much of the prescribed activity and therefore would need to be adequately funded to meet the increased demand we are likely to see[[10]](#footnote-10).

Physical activity, social interactions, healthy eating, good sleep and healthy relationships all have a direct impact on our mental health and can help to prevent issues arising. **Social prescribing** to community services, apps or relationship support like that delivered by Relate can help prevent initially small issues from escalating.

There is a vast amount of research on the causes of good and bad mental health and evidence on effective treatments. However, our experience is that the system is currently fragmented to the point that a postcode lottery exists. This means people’s access to mental health support, including relationship support for young people, families and couples, is often dependent on a person’s GP and local commissioning structures.

One way to prevent the onset of mental ill health is to do what works, by **scaling initiatives, proven treatments and partnerships** across the country, rather than each area re-inventing the wheel. We know, for example, that being physically active can lead to positive mental health. The same can be said for having strong and healthy relationships which can improve health outcomes[[11]](#footnote-11). By recognising and focusing in these areas, someone may well avoid having to access mental health provision.

Through our work with children and young people, we know how important **schools** are in preventing issues from escalating. Our counsellors would like to see a far greater focus on wellbeing in schools as well as speedier access to support. This could include having counsellors in every school (primary and secondary), further the promotion of wellbeing alongside academic achievement, and the establishment of strong peer-support networks. Not all anxiety is bad, fear is a necessary part of life, but how we manage our anxiety can be the difference between prevention and escalation of need.

While Scotland, Wales and Northern Ireland all have government-funded schools counselling services, England lags behind. A recent poll on behalf of the British Association for Counselling and Psychotherapy (BACP) found 82% of parents with children aged four to 17 believe counselling or psychotherapy should be freely available to all school children, throughout all schools[[12]](#footnote-12). Relate agrees this should be a priority for the Government as it seeks to improve the mental health and wellbeing of children and young people.

The £7 million announced by the Department for Education earlier this year to create Senior Mental Health Leads in schools is a good start and we wholly support the ambition to create a culture of greater openness around mental health[[13]](#footnote-13). From our work providing counselling in over 100 schools across England, we know a lot about the pressures children and young people face including issues such as bullying, body image and parental conflict. A growing body of research has also found the pandemic has had a worrying impact on young people’s wellbeing. The Senior Mental Health Leads promise to play a crucial role in building relationships with local health services but alongside this, targeted support for children and young people is really vital.

1. **How can we all intervene earlier when people need support with their mental health?**

As highlighted previously:

1. Continuing **public and targeted campaigns** that reduce stigma and encourage people to seek help sooner, in ways that work best for them. At Relate, for example, we offer webchat, webcam and online services, email with councillors, over the phone and face-to-face counselling as well as online self-help services. We have recently seen a huge up-take in online support. In 2020/21 2,398,537 people used our online self-help services, but these require ongoing investment to ensure initiatives remain sustainable and accessible for all.
2. **Social prescribing of wellbeing support including relationship support, and recommended self-care, mediation and mindfulness apps** can also help to provide low level early intervention.
3. The **Improving Access to Psychological Therapies (IAPT) programme** has significantly improved people’s access to talking therapies, however it remains oversubscribed[[14]](#footnote-14) and there are therapies such as Couple Therapy for Depression, which have good success rates and are available through IAPT but are not utilised enough by GPs and other referrers.

**CASE STUDY: IAPT Couples Therapy for Depression**

We know there is a strong link between our relationships and our mental health, with people in troubled relationships three times as likely to experience depression as those who are not.

In recognition of this, Relate provides a service called Couple Therapy for Depression in several parts of England, which couples affected by depression and anxiety can access for free as part of the NHS’ Improving Access to Psychological Therapies (IAPT) programme.

The training helps counsellors to work more effectively with couples, of varying ages and backgrounds, where depression and anxiety are an issue. In Relate Derby, for example, the results have been really promising. It works so well partly because it is very focused on the depression, how it’s impacting the relationship and how the relationship itself can have an impact on the mental health problem.

By working closely with the couple to improve the way they communicate and manage any depression or anxiety together, they are usually able to make positive changes to their relationship and overall wellbeing. Official IAPT statistics suggest that 56% of people who access the service recover from their depression and anxiety[[15]](#footnote-15).

1. We would like to **see GPs refer patients to couples and family interventions more**, and earlier, as we know that 18% of partners in the UK are in distressed relationships, rising to 22% for parents with children under 16[[16]](#footnote-16). This distress can have a huge impact on a person’s physical and mental health, the stability children feel at home and productivity at work and school.
2. Particularly since the pandemic, more counselling and talking therapy services have moved online or over the phone, making them more accessible to many. It has, however, bought into sharp focus the need for these services to be **fully resourced, so that support can match demand.** Currently many free counselling services have waiting lists, potentially missing the opportunity to support someone early on, we also know there is a shortage of specialist mental health clinicians and CAMHS workers, putting pressure elsewhere on the system and meaning people are having to go without the support they need.

**CASE STUDY: RelateHub**

During the Covid-19 pandemic we created a brand-new short intervention service called RelateHub, which offers free thirty-minute web chats with Relate counsellors.

As well as securing funding from the government via the National Lottery Community Fund for this service, we also received funding from the NHS to provide free web chats, phone chats, and counselling to their staff members in the Midlands and London via RelateHubNHS. Currently we are providing the service to NHS staff members in Cheshire and Merseyside, Sussex, Kent and Medway and the South West of England.

We are currently in a pilot with a GP federation in London to support patients offering 30 minute phone chats and ongoing counselling to discuss relationships and wellbeing issues[[17]](#footnote-17).

*“My advisor was a very empathetic councillor who made me feel comfortable straight away. She was very understanding and gave me time to speak about how I feel. This is a brilliant service and I would highly recommend it to my colleagues…”* (NHS staff member).

1. For parents, children and young people, the pandemic has been a uniquely difficult time, with pressures at home and school, lack of social interactions and the sometimes-negative impact of social media, all taking a toll[[18]](#footnote-18). Many people have felt anxious and we know that parental anxiety can lead to children being more worried and stressed[[19]](#footnote-19). Through our family support, we know how important it is for parents and children to have coping strategies in place to help manage pressures. Awareness raising, opportunities for family discussions and access to coping tools are all important for strong and resilient families, from before a child is born.
2. **Family Hubs[[20]](#footnote-20)** have an important role to play in ensuring services are integrated, available and targeted, to help young people overcome the range of difficulties they might face. One aim of Family Hubs is to strengthen families, help prevent family breakdown or support separating families, and to help reduce conflict. This is fundamental, given that poor quality parental relationships and inter-parental conflict have a negative impact on children’s mental health and a range of other child outcomes, including school achievement and behaviour.[[21]](#footnote-21) Relate see Family Hubs as a huge opportunity to promote healthy relationships and champion good mental health through our counselling and mediation provision and would like to see relationship support offered via every hub.

**CASE STUDY: Reducing Parental Conflict**

Relate led on the delivery of the North East of England’s Reducing Parental Conflict (RPC) Programme, working in partnership with ten local authorities, and two other voluntary sector organisations, as well as front line practitioners and referral agencies.

We have direct experience of working with families where conflict is frequent, intense and poorly resolved, and we have witnessed first-hand the positive impact the RPC interventions have had on family resilience. We have learned significant lessons, and have a wealth of knowledge, understanding and skill in designing and delivering these evidence-based services aimed at reducing conflict between parents.

Whilst we cannot release the results of the programme yet, as the Department of Work and Pensions are still in the process of evaluation, at Relate we have seen very positive outcomes in relation to individual mental health of parents, reductions in parental conflict and the impact on children.

1. Along with the British Association for Counselling and Psychotherapy (BACP), Relate would like to see **counsellors in every primary and secondary in England**, as they are in other parts of the UK. Currently the provision of counselling in schools is very patchy. As well as counsellors in schools, providing support directly, they could also offer a training and clinical supervision to teachers who already help children to manage grief, parental conflict or separation, and through distress. We would also like to see greater mentorship of students by students and formal buddying arrangements, so if someone is in need of support it is recognised early.

**CASE STUDY: Support in Schools**

Relate in Wiltshire offers specialist counselling services within the school environment for children aged 7-11 years. We provide a safe and confidential space where children are supported to communicate and think around their worries. They are given a range of strategies to practice and improve their self-confidence, develop resilience, to help recover or cope better with their difficulties. By locating in schools, we are able to provide equality of access to all. Early intervention when problems emerge, can avoid entrenched behaviour, and more serious emotional difficulty later in life.

Recent evaluation of Relate’s delivery has highlighted that we deal with more complex cases, supporting moderate to high level clients who do not reach CAMHS thresholds, and remain unsuitable for group intervention work.

We see in schools and our ‘Talkzone’ (which is an out of school’s service) increased anxiety, depression, bereavement, divorce, self-harm, ill health, low self-esteem/confidence, poverty, alcohol or drug using parents, bullying, school pressure and relationship issues within their families.

'Time to Talk' includes a parent pre-meeting with our counsellor to discuss the process, and understand the family dynamic. The child then receives up to 6 'face-to-face' counselling sessions at the same time and day weekly. Referrals come from the schools, health professionals, parents, or by self-referral.  All children complete a feedback questionnaire at the end of counselling and using last year's feedback, we have found that family relationships followed by anxiety and depression are the top issues being brought to counselling.

A head teacher in Chippenham said about the service: *"Time to Talk gives children the opportunity to talk, in full confidence, about things that are affecting them. As well as the obvious benefit to the individual children who individually access the service, the effects are also apparent in the classroom, as teachers feel supported should one of their pupils self-refer, rather than having to try to deal with the situation themselves."*

1. By placing **the importance of relationships at the heart of the new mental health plan**, people of all ages would be able to access the advice they need to develop strong relationships that prevent mental health deteriorating and avoidable issues escalating. This can be done by embedding relationship support in every community via Family Hubs; funding counsellors in every school in England; ensuring all families have access to support, not just workless families, and promoting the links between positive relationships, mental health and wellbeing.
2. **How can we improve the quality and effectiveness of treatment for mental health conditions?**

**Current gaps in treatment** too frequently mean that a mild or moderate issue becomes more serious without support. At Relate we know that positive separation has less impact on children going forward. Unfortunately, we see many missed opportunities where relationship counselling at an early stage might have been able to reduce the likelihood of loneliness, depression, abuse, homelessness, debt and many other life-shattering events that can happen when relationships go wrong.

**Funding** is critical for the ongoing provision and improvement of treatment. There have been many years where mental health provision has not been funded to the level needed to meet demand. As a provider of relationship support services including relationship and children and young people’s counselling, we are seeing clients who receive a diagnosis but no referral to support, have faced long waiting lists for IAPT support, rising eligibility criteria in CAMHS, a lack of available clinicians and pressure in the system that means that those able to self-fund support can access it, while those less fortunate are left waiting.

**Early intervention** is often crucial to the quality and effectiveness of treatment. Public awareness of people accessing support for relationships and wellbeing at the earliest possible stage is key and requires support to be available where, when and how it’s most needed.

**Routes into becoming a counsellor** could be opened up, with greater awareness raised of what counsellors do and why it is so important. There then needs to be enough funding to not only attract more people into the profession from all backgrounds, but to work and stay in the sector. There are high burn-out rates across the sector, meaning people often leave to work in less demanding, better paid jobs. We would therefore like this to be addressed through a targeted recruitment campaign, training funding and bursaries to attract and retain more counsellors from diverse backgrounds.

**Mental health training** **for GPs, practice staff and community health workers** should include a focus on the links between positive relationships and wellbeing, along with the full range of treatments available locally. Relationship support is often overlooked as a treatment option but has significant benefits at every stage in someone’s life. The latest feedback from our clients shows that 82% have found their situation was better or much better following counselling and the majority had improved coping strategies, mental wellbeing and physical wellbeing because of the support we provide. 77% of Adult Relationship Counselling clients said their communication had improved and 72% said their ability to manage conflict had improved.

**Training of counsellors** in particular treatments is also key, and barriers to this should be lifted. For example, trauma-based therapies can be very effective, but training is expensive and difficult to access. Providing this training to counsellors but also teachers, social workers and other frontline workers would lead to greater early intervention. Similar barriers exist in regard to eye movement desensitisation reprocessing (EMDR) therapy which we know is very effective in supporting someone who has experienced trauma but requires a counsellor to be BACP accredited to access the training.

1. **How can we all support people living with mental health conditions to live well?**

‘Living well’ means different things to different people and changes throughout a person’s life. It is important when supporting people to ‘live well’ that this is personalised, that they are in control of their aims and any support they may need to achieve them.

Having a holistic approach that promotes greater awareness and early access to wellbeing support, physical health services, community and social events, as well as support around relationships, is all important. We know that people who are socially connected, to friends and family, are ‘happier, physically healthier and live longer, with fewer mental health problems than people who are less well connected.[[22]](#footnote-22)’ Therefore relationship support, including 1:1 and couples therapy, is a helpful option for people to have access to, whether that’s in a family hub, at school, via their GP, as part of existing health and care provision or through the workplace.

1. **How can we all improve support for people in crisis?**

Early intervention and prevention are critical to reducing the likelihood of someone reaching a crisis point. By continuing to raise awareness of mental health, promoting talking therapies, raising the profile of the different things that may impact our mental wellbeing (like relationships, housing, physical activity) and removing the stigma associated to mental health support, people who feel their mental health deteriorating, are more likely to seek help early. Recognition, inclusion and reliable funding of the charity and social enterprise sector in regard to crisis support is key if we are to reach as many people as possible as early as possible.

At Relate we are increasingly seeing young people coming to us experiencing suicidal ideation. At a time when their brain is still developing and therefore behaviours are more impulsive, something seemingly ‘small’ can be the last straw. That is why family support, access to young people’s mental health provision and counselling in schools, is so vital, and an important part of the government’s new mental health plan.

We also support people facing crisis when their relationship ends, which emphasises the importance of raising awareness of and access to relationship support, as early as possible.

We have undertaken a lot of work to help our counsellors to feel more confident and assertive during conversations with those who are experiencing a crisis. Counsellors face some incredibly difficult situations, where clients may be talking about self-harm, suicidal ideation, or attempted suicide.

While we can help our counsellors be as equipped as possible to support someone in crisis, many agencies have a role to play. Local, multi-agency suicide prevention plans are essential to ensuring an integrated response but must be shared with and include all relevant agencies, across the NHS, public and private agencies.

Supporting someone in crisis must be a whole system commitment, adequately resourced and integrated across different services. It requires all partners, as well as wider society, to work together to act as swiftly and as sensitively as they can. Only by working together will we be able to improve support for those in crisis, and ideally, prevent crises from occurring.

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