



MRS Awards 2022
Public Policy/Social Research
Finalist

2CV
Mind

**The relationship between mental
health and poverty**

Summary

Mind's new strategy includes three interlinked strands tackling poverty, racism and youth trauma. 2CV focused on poverty and its cyclical relationship with mental health, a subject which will sadly but inevitably become ever more important in the wake of the pandemic and in the midst of a cost-of-living crisis.

Mind may be active in the most deprived parts of the country, but 2CV's research asked some tough questions about Mind's role, and about the gap between the current national conversation around mental health and the needs of people living in poverty. As well as highlighting the specific needs people in poverty have of mental health services, the findings have highlighted the dynamics between the different organisations involved in meeting their needs around finance and poverty, and the barriers to engaging with any such service.

Mind has used the insight as the foundations for its strategic blueprint, recruiting a new team to focus on this audience and directing funding to a range of projects and activities in both the short and long term. It also plans to replicate 2CV's Lived Experience Panel approach, to ensure that people in poverty are at the heart of strategic planning.

Synopsis

The relationship between mental health and poverty is cyclical: people with mental health problems are more likely to end up in poverty; people in poverty are more likely to have mental health problems. Mind has long known this – that's why local Minds are active in some of the most deprived UK communities. It's also why Mind identified the mental health needs of people in poverty as one of three priorities in their 2021-2024 strategy, the other two being young people (with a focus on trauma) and people from ethnic minority communities.

Mind commissioned 2CV to conduct the poverty strand of work. The objectives were to understand:

- Experiences of mental health among people living in poverty: stigma, discrimination, access and barriers
- What Mind can learn from how services are currently delivered: the current landscape, skills and experience needed, where Mind should focus its work
- What they want from future support and services: how Mind can engage people, empower local communities and tackle inequalities

The innovative nature of the work

A large, ambitious brief demanded a similarly expansive approach characterised by...

- Placing lived experience at the heart of the research
- Flexibility and creativity, to enable engagement on people's own terms
- True integration of qualitative and quantitative teams, as well as integration of results across different strands of research
- Sensitivity towards and empathy with marginalised groups
- An expert team, familiar with the demands of researching mental health, poverty and marginalisation

And, of course, all of the above needed to be conducted as cost-effectively as possible, given this is a charity for whom every penny counts. 2CV devised a multi-layered, iterative methodology designed to meet Mind's objectives and provide a clear snapshot of the current state of mental health among people living in poverty.

At the heart of our approach lay what might be viewed as 'traditional' techniques – workshops, interviews, groups, surveys. Yet every aspect was refined and reformatted to ensure that we brought together the most informed people on this subject, from experts working in the field to those living in poverty and experiencing mental health problems day to day. Our aim was to understand this subject and these audiences from multiple perspectives, talking about issues that, for many, feel very personal, often go unvoiced and are still taboo.

In brief, the approach comprised the following:

- Two waves of fieldwork, each involving distinct phases with expert stakeholders and people on low incomes with lived experience of mental health problems. Making the study iterative in this way meant the research would remain adaptive throughout, each element building on findings from preceding work. This played out not only in the subjects we covered but also the way we structured our samples, recruiting specific audiences as we highlighted a need to hear their voices.
- Landscape mapping ‘drop-in’ workshops to provide clear understanding of the context:
 - Internal: workshops with those who run local Minds, to understand the organisational pressures of providing mental health and poverty-related support. Conducted in full confidentiality so the teams could talk frankly about the realities of delivering services to their communities, and how Mind supports them. Some of these were reconvened in later stages to sense-check initial findings and probe further on newer areas of exploration.
 - External: stakeholder round-tables bringing together people from a range of organisations within the world of social exclusion and poverty, including money and debt specialists and representatives of sporting bodies delivering sport to deprived communities
 - This dual approach ensured a rounded, honest response which provided insight into the practicalities of reaching communities, who was best placed to do so and, crucially, the expertise that already existed in grass-roots organisations.
- Qualitative groups and depths with 56 people with lived experience of mental health problems. These were respondent-led to put respondents in the drivers’ seats and allow them to steer the conversation to the subjects that mattered most to them. As we were aware that this audience could be concerned about stigma and shame, and had often never openly discussed their own experiences, we created options for anonymous contributions via teledepths or text.

These interviews helped highlight the gaps between the national conversation about mental health and the day to day experiences of people living in poverty. The dominant, middle-class, white narrative may be increasingly open and focused on constructively maintaining wellbeing, but this audience sees this as a luxury that doesn’t offer any long-term solutions. Instead, shame and stigma around both poverty and mental health are corrosive, leading people to feel ‘undeserving’ of support and meaning they are often desperate before seeking help.

- The Lived Experience Panel (LEP): a participatory research technique in which we recruited 8 people representing a cross section of those living in poverty, all of whom had experienced some form of mental health problem or illness. This group was recruited at the outset and accompanied us throughout acting as sounding boards, peer researchers and experiential analysts.

We trained them in basic research techniques and asked them to create their own discussion guides, focusing on the issues they thought most important, and conduct their own fieldwork with people they knew. They also collaboratively designed their own ‘ideal mental health support service’ and worked in tandem with the research team in the analysis sessions.

The LEP helped highlight that a major challenge for anyone offering support is the lack of faith in formal support services, especially for the less well off. People expect to get ‘sucked into the system’, losing agency and self-respect. They assume they will lose hours waiting to see people who talk down to them and dismiss their needs; they don’t know what effective support might look like and find it hard to imagine long-term support of any kind.

- A 15 minute online survey with over 500 people experiencing poverty, including 420 who have personally experienced mental health problems and 106 who have been affected by mental health problems through someone close to them. We understood their journey considering both their current experience and also what they want for the future through sensitive questioning, feeding in learnings from the earlier qualitative phases to size barriers to support and identify where it is falling short.

The quantitative work demonstrated that on a practical level, while there are various organisations that offer assistance around poverty or mental health, there are few if any services addressing poverty that take mental health seriously. This underlined the point that understanding this audience is crucial – they need services that are accessible (practically, emotionally, financially and timely) and approachable too (relatable, immediately relevant, understandable and joined up with other services).

Demonstrable outcomes

Mind have embraced this research, placing it at the heart of their strategy for the coming years. The insight has been used to create a “blueprint” for the provision of support to those facing poverty and social exclusion, using 2CV’s model of the ‘ideal’ mental health support for this audience as a starting point. It has renewed focus on four critical areas, including avoiding stigmatisation and stereotyping of people in poverty, embedding support services in communities, integrating mental health, financial and other services accessed by people in poverty and speaking directly to the lived experience of people in poverty through mental health stories in the public domain.

It’s still early days in how Mind responds to this work, but the impact will be significant. One of Mind’s first actions was to increase funding and resource allocation to a range of projects including a Campaign for Welfare Reform, producing money and mental health information and various Local Mind, Citizens Advice and Trussell Trust partnerships. Mind will also be funding a Benefits Advice Line, additional Benefits Advice through local Minds and National Media Campaigns and policy work around benefits and other important information for people in poverty.

Mind has also recruited its own team focused entirely on rolling out this blueprint, who will be conducting their own research into understanding this audience in even greater detail. An initial step is likely to involve them building on 2CV’s LEP to develop their own ongoing panel to inform their activities.

Why 2CV and Mind should win

This approach genuinely broke new ground, helping the nation’s experts on mental health problems understand the needs of an audience who fall through the cracks all too often. By fostering honest, open conversations and through a willingness to hear what their stakeholders say ‘behind closed doors’ Mind gave themselves the opportunity to truly make a difference to the lives of people living in poverty, without disregarding or overruling the expertise and experiences of experts who have already been working with people in poverty and within deprived communities for years. The research also identified a new way of conducting research with an audience who are hard to reach simply because life has placed too many barriers in the way, placing lived experience at the heart. Most importantly, Mind has a path forwards for meeting the needs of an audience only likely to grow in the face of an unprecedented cost-of-living crisis.

The ‘ideal’ mental health support for people in poverty is underpinned by the principles of Accessibility and Approachability

ACCESSIBILITY APPROACHABILITY

