Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [anghydraddoldebau iechyd meddwl](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [mental health inequalities](#)

MHI 39

Ymateb gan: | Response from: Care & Repair Cymru

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www.careandrepair.org.uk

Tŷ Mariners, Heol East
Moors, Caerdydd, CF24 5TD
Mariners House, East Moors
Road, Cardiff, CF24

Care & Repair Cymru

Mental Health Inequalities

Written evidence submitted by Care & Repair Cymru: February 2022

Introduction to Care & Repair

1. Care & Repair Cymru is Wales's Older People's Housing Champion. Our aim is to ensure that all older people in Wales can live independently in safe, warm, accessible homes. We are the national body for Care & Repair in Wales, representing 13 independent Care & Repair Agencies (CRAs) operating in every county offering a wide range of home improvement services, tailored to client's needs and local circumstances. In 2020/21 we supported nearly 43,913 older people across Wales, 32% of whom lived alone. We carried out 36,371 adaptations in homes to help prevent trips and falls and reduce pressures on the NHS – more than double of 2019/20 output – whilst delivering £14.5 million's worth of repair and improvement work to improve the health, safety, and warmth in people's homes[1].

2. Care & Repair works with older people in the private housing sector, owner occupiers and private tenants. A third of our clients live alone, a third have a disability and two thirds are over 74 years old.

3. We are committed to developing sustainable services which provide support to vulnerable, older people that helps them live independently, with dignity, and supports their health and wellbeing through improved housing conditions.

Response

Which groups of people are disproportionately affected by poor mental health in Wales? What factors contribute to worse mental health within these groups?

Older people are disproportionately affected by poor mental health. Current UK-wide estimates suggest that around one in four older people lived with a mental health condition, most commonly depression, prior to the pandemic[2]. Older people were also adversely affected by the Covid-19 pandemic and resultant lockdowns, with many older people worrying about catching Covid due

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[1] For more information, please see Care & Repair Cymru's 2020/21 Annual Report. Available at: https://www.careandrepair.org.uk/files/6916/3215/1992/Annual_Report_2020-21.pdf

[2] https://www.independentage.org/sites/default/files/2021-12/The%20Mental%20Health%20Experiences%20of%20Older%20People%20in%20the%20Pandemic%20%5BFinal%5D_0.pdf (p. 4)

Gwella Cartrefi, Newid Bywydau
Improving Homes, Changing Lives

Ariennir gan Lywodraeth Cymru
Funded by Welsh Government

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to concerns of death or serious illness[3], as well as the initial call to shield based on age leading to deep isolation and loneliness. Age Cymru conducted research into older people's experiences of lockdown during the first lockdown and found that:

- One third of older people were lonely during the first lockdown
- 55% of older people living by themselves were lonely during lockdown
- Half of older people living with a disability were lonely during lockdown
- Additionally, 22,686 people in Wales are officially diagnosed with dementia[4], the majority of which are people over 65[5]. Dementia is still poorly understood and stigmatised in the general population, leading many older people feel isolated and excluded in everyday activities and their wider communities[6].

Overall, there is very little reliable data on older peoples' mental health, and even less in a specifically Welsh context. *The Strategy for an Ageing Society* does identify mental health as a challenging area for older people, but there are relatively few actionable points to improve their mental health, and policy areas tend to be boiled down to targeting and alleviating loneliness. More rounded mental health data, stretching beyond research starting from the assumption that older people are just lonely, would be a good starting point to address this issue.

Additionally, during the Covid-19 pandemic, many older people reported loneliness having a negative effect on their mental health, and evidence shows that:

> *Loneliness and isolation can pose a significant health risk, with low levels of social support found to be associated with increased mortality, increased risk of depression and anxiety, as well as declining cognitive function[7].*

While loneliness is undoubtedly a concern among older people and third sector organisations that work with older people such as Care & Repair Cymru, older peoples' mental health depends on more than just loneliness.

Poor housing and subsequent loneliness and physical ill health contributes to poor mental health amongst older people. The Welsh Housing Condition survey conducted in 2017-2018 revealed

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[3] https://www.independentage.org/sites/default/files/2021-12/The%20Mental%20Health%20Experiences%20of%20Older%20People%20in%20the%20Pandemic%20%5BFinal%5D_0.pdf (p. 6)

[4] https://www.dementiastatistics.org/statistics/diagnoses-in-the-uk/

[5] https://www.alzheimers.org.uk/about-dementia/types-dementia/what-is-dementia

[6] https://gov.wales/sites/default/files/publications/2019-04/dementia-action-plan-for-wales.pdf (p. 9)

[7] https://www.independentage.org/sites/default/files/2021-12/The%20Mental%20Health%20Experiences%20of%20Older%20People%20in%20the%20Pandemic%20%5BFinal%5D_0.pdf (p. 26)

that 18% of older homes have Category 1 hazards present[8]. Living in a home that is unsafe leads to both physical and mental health issues, many of which could be prevented by simple repairs[9].

Poor physical health is also a cause of poor mental health: 39% of those in bad health or worse across all age groups described themselves as being lonely[10]. For older people, being stuck at home or in hospital after a fall, for example, and the fear of falling again and having to be readmitted may lead to older people staying at home and unable to socialise.

Care & Repair previously ran The Attic Project, which supported older people in Cardiff & the Vale and Newport to declutter their homes. As well as causing safety problems, clutter in the home had led to the deterioration of some clients' mental health. Some clients interviewed stated that the clutter had been causing them distress and anxiety for some time, but they had not been able to remove these items on their own or with help from other family members. One client, pointing out that she knew the house had got into a state, explained that 'when you get older it's not like you aren't aware, you do know, and you can see it – you just don't know how to cope with it.'[11] An independent evaluation following the completion of the project found that The Attic Project helped people feel more independent, safer and relaxed in their home thus improving their mental health and quality of life.

While loneliness is a contributing factor in older peoples' mental health, there are many – often overlapping – causes of poor mental health in older people. Loneliness needs to be examined from a wider perspective and consider health and housing issues. All of these areas are interlinked: poor housing will exacerbate or create new health issues, which could lead to loneliness or be a cause of poor mental health in itself. Any policy in this area needs to make these considerations.

For the groups identified, what are the barriers to accessing mental health services? How effectively can existing services meet their needs, and how could their experience of using mental health services be improved?

Mental health issues are often overlooked or seen as a part of getting older, and many older people may have chosen to avoid seeking help for their mental health because of this. We have seen similar trends in physical health: many older people did not get healthcare they needed due to concerns about contracting Covid-19, leading to deterioration of health conditions, including the knock-on effect on mental health, throughout the pandemic.

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[8] https://gov.wales/sites/default/files/statistics-and-research/2019-02/181206-welsh-housing-conditions-survey-headline-report-2017-18-en_0.pdf (p. 10)

[9] https://www.ageing-better.org.uk/sites/default/files/2020-03/Home-and-dry-report.pdf (p. 4, p. 13)

[10] https://gov.wales/sites/default/files/statistics-and-research/2019-02/national-survey-wales-loneliness-2016-17.pdf (p. 5)

[11] https://www.careandrepair.org.uk/files/7116/2739/3129/The_Attic_Projec_Evaluation_2021___FINAL.pdf (p.13)

Some older people face barriers accessing any kind of healthcare services, including mental health services. Covid-19 precautions meant that many older people faced an online or telephone consultation by default, which was overcomplicated for many older people[12] Our experience of using telephone appointments with our clients during the pandemic is that phone appointments were often longer and more protracted and owing to the nature of self-reporting, many clients underestimated the extent of their situation or the help available to them.

Care & Repair signposts to local mental health services for older people such as befriending services to alleviate loneliness – however many people who use these services may already be accessing help from organisations such as Care & Repair.

To what extent does Welsh Government policy recognise and address the mental health needs of these groups? Where are the policy gaps?

Poor mental health amongst older people is touched upon in *The Strategy for an Ageing Society,* but proposed solutions focus on existing policies such as the *Communities Facilities & Activity Grant* which encourages social participation of older people in their communities rather than developing new initiatives. We believe that limited policy recognition of mental health amongst older people is due to lack of Wales specific information. Although we are grateful for the recognition of loneliness as a driving factor behind poor mental health amongst older people, it is not the sole reason and taking a person-centred approach responsive to individual needs and contexts is essential.

A campaign to increase awareness of help available to older people and destigmatise feeling low or lonely could help increase uptake of mental health services. To reach those who are not already on third-sector radar or referral pathway, Welsh Government could work on targeted campaign initiatives with far reaching organisations such as Welsh Water to incorporate information leaflets and services into literature customers receive.

Concerns we raised in our original response to the Strategy's consultation remain, including the lack of focus on the housing needs of older owner occupiers or private renters and a lack of focus on digital. While the importance of housing is raised in the Strategy, its links to poor physical and mental health are not fully established. Improving housing conditions is a preventative measure which will help to tackle other root causes of mental health, ensuring that all older people can live independently in safe, warm homes that are free from hazards and adapted where necessary. We consistently advocate for a selection of policy measures to achieve this, available in our manifesto: underlined improving homes to change lives.

What further action is needed, by whom/where, to improve mental health and outcomes for the groups of people identified and reduce mental health inequalities in Wales?

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[12] https://www.independentage.org/sites/default/files/2021-12/The%20Mental%20Health%20Experiences%20of%20Older%20People%20in%20the%20Pandemic%20%5BFinal%5D_0.pdf (p. 11)

Greater focus should be given to housing. As well as costing the Welsh NHS £95m per year, poor housing has a negative effect on mental health[13]. The link between housing on mental and physical wellbeing needs to be more widely accepted and considering in Welsh Government strategies moving forward. Our *Hospital to a Healthier Home* service has also shown that housing adaptations are integral to ensuring the safe discharge of patients back into their own homes. Whether ensuring the house is free of clutter and safe and accessible for carers, or installing preventative adaptations to reduce the risk of repeat falls or accidents, when older people can return home and not remain in hospital for extended periods of time, it is clearly beneficial to their mental wellbeing.

Digital methods of receiving health care and support look likely to remain post-pandemic. Should this be the case, older people must be able to access mental health services in a way that best suits their needs: as only 49% of people in Wales aged 75 and over use the internet, a solely digital-first approach will not meet their needs. Ensuring older people can access devices, connections, and skills that they need digitally is important to allow them to connect and socialise; and can be used around the house in numerous ways to support independent living.

For more information on any of the points raised in this response, please contact

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[13] https://www.ageing-better.org.uk/sites/default/files/2020-03/Home-and-dry-report.pdf (p. 4, p. 13)