# Community Mental Health and Wellbeing Fund

Years 1-3

# About the Fund

As part of the Recovery and Renewal Fund, the Scottish Government announced a new **Community Mental Health and Wellbeing Fund for Adults (16+),** with £21m being made available in 2021-22 (Year 1), £15m in 2022-23 (Year 2), and a further £15m in 2023-24 (Year 3).

The fund was to be distributed by Third-Sector Interfaces (TSI's) to community groups and organisations within their individual district.

The funding was to reflect the importance placed on community support as part of an overall mental health infrastructure and a robust commitment by Scottish Ministers to increase direct mental health investment.

# East Ayrshire Funding

CVO East Ayrshire have distributed the sum of **£810,951** in **Years 1 and 2** of the CMHWB Fund to a total of **89** small grassroots community groups and organisations.

We are currently in the process of distributing a further **£300k for Year 3**, taking the total funding to **£1,110,951** drawn from a national level down into our local communities.

A wide and diverse range of projects have been funded throughout every corner of the district, all aligned in the development of creating a culture of mental wellbeing and prevention within our local communities.

# The Funding Process

## Defined Criteria

Eligible to small grassroots organisations (under £500k Annual Income).

Divided into two funding streams:

- **Small Grants**

(Max Grant: £2,000 in Year 1/£3,000 in Year 2/£5,000 in Year 3). Available to smaller organisations with no formal constitutional documents.

- **Large Grants**

(Max Grant: £25,000 in Year 1/£20,000 in Year 2 and Year 3). Available to a range of constituted, voluntary, not-for-profit organisations, groups or consortiums which have a strong community focus.

## Procedure

- Fund publicised well in advance of deadline for the two funding streams.

- Online funding workshops organised to support groups making applications.

- Funding aims/outcomes reflecting National Performance Framework and local need of East Ayrshire residents.

- A carefully selected Panel to process the applications, bringing a mix of lived-experience, extensive knowledge of community needs and funding expertise.

# Key Statistics

A funding comparison of Year 1 and Year 2.

- In Year 1, we had a total of 52 applicants. 46 groups were awarded funding totalling **£455,531**, demonstrating an overall success rate of **88.5%.**
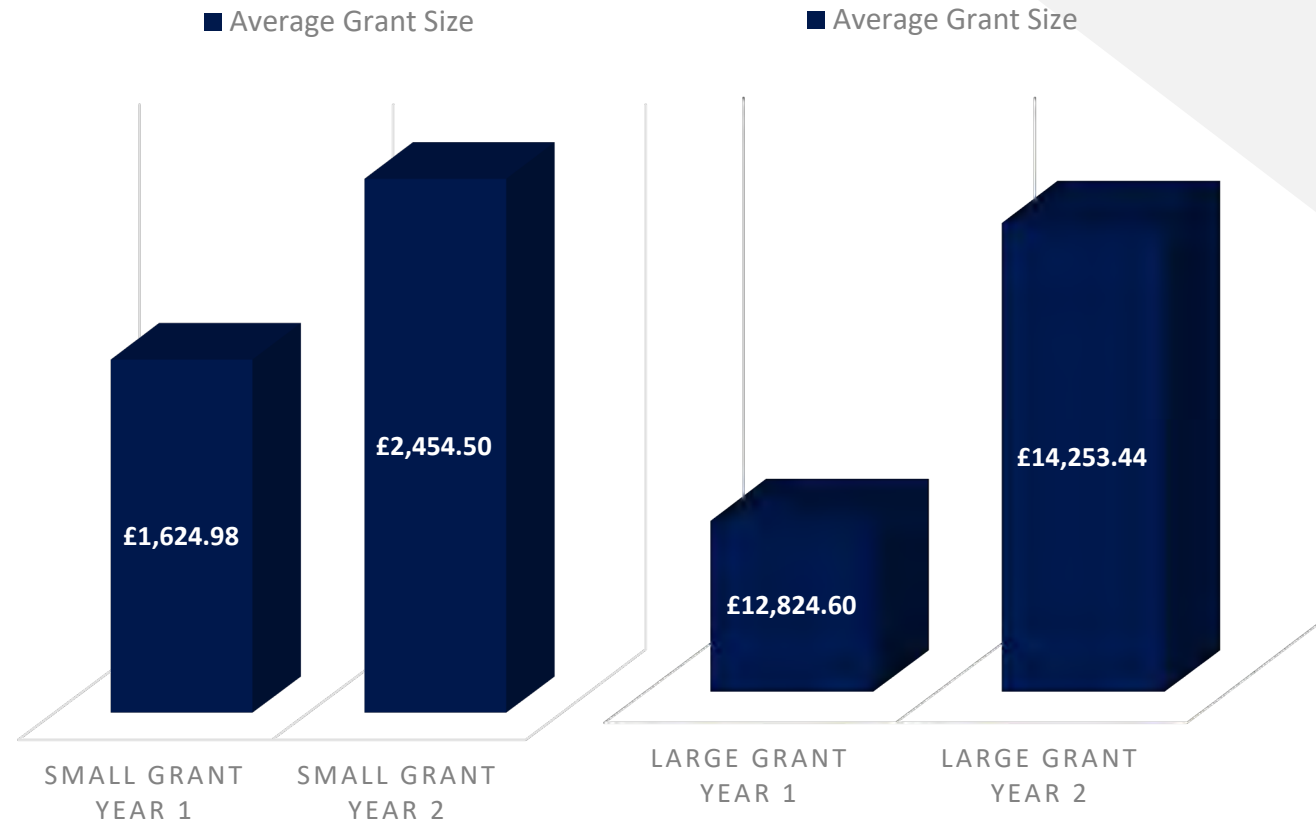
- In Year 2, we had a 24.6% increase in the number of applicants. 43 groups were awarded funding totalling **£355,321**, with an overall success rate of **62.32%.**

Small Grants Awarded (Year 1): **12**
Large Grants Awarded (Year 1): **34**

Small Grants Awarded (Year 2): **22**
Large Grants Awarded (Year 2): **21**

- Despite a minute reduction in successful applicants in Year 2, the average grant size for both Small and Large Grants significantly increased.

- 14 groups were successful in securing funding in both Year 1 and Year 2.



■ Average Grant Size          ■ Average Grant Size

£2,454.50

£1,624.98

£14,253.44

£12,824.60

SMALL GRANT YEAR 1   SMALL GRANT YEAR 2   LARGE GRANT YEAR 1   LARGE GRANT YEAR 2

# Regional Distribution

A distribution of funding throughout East Ayrshire.

Regional distribution as determined by the postcode of the successful applicant from Years 1 and 2 of the fund.

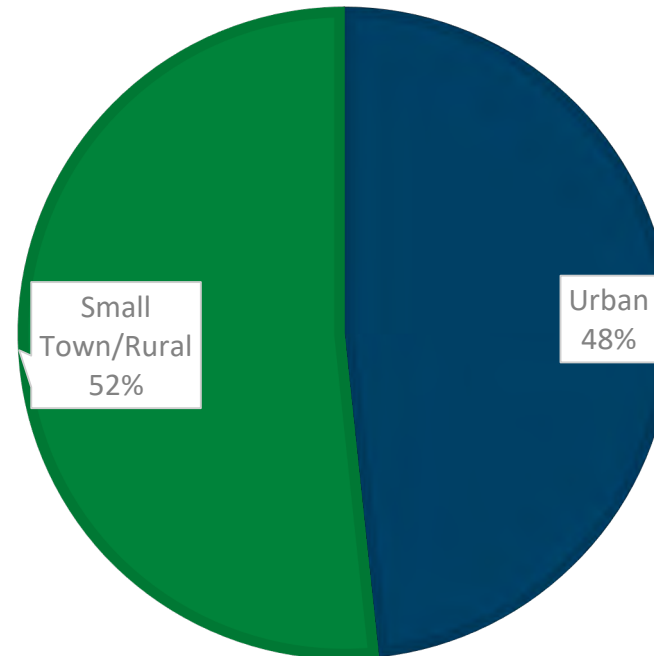43/89 applicants were located in an Urban Centre (>10,000 population size).
Kilmarnock.

46/89 applicants were located in Small Towns/Rural Settlements (<10,000 population size).
Cumnock, Dalmellington, Newmilns, Galston.

An even distribution throughout the district.

## DISTRIBUTION OF FUNDING PER SETTLEMENT.

■ Urban   ■ Small Town/Rural
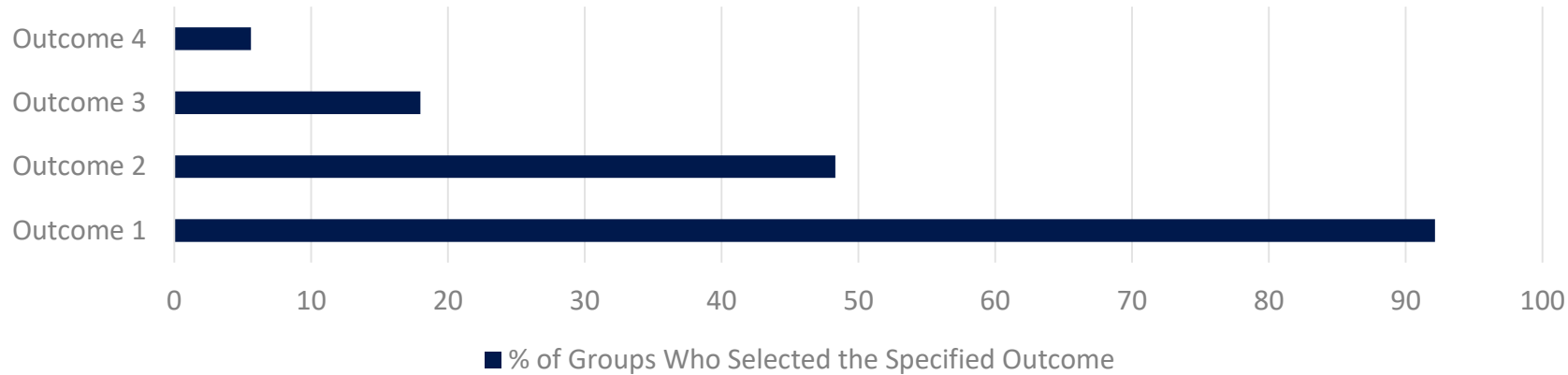
Small Town/Rural 52%

Urban 48%

# Fund Outcomes

**The fund sought to contribute to 4 key areas of the Mental Health Transition and Recovery Plan:**

•Outcome 1: Promoting and Supporting the Conditions for Good Mental Health and Wellbeing at Population Level.

•Outcome 2: Providing Accessible Signposting to Help, Advice and Support.

•Outcome 3: Providing a Rapid and Easily Accessible Response to Those in Distress.

•Outcome 4: Ensuring Safe, Effective Treatment and Care of People Living with Mental Illness.

Each applicant was asked to demonstrate how their project or organisation could contribute to at least one of the four outcomes.

# Fund Outcomes Pt.2

## % of Groups Who Selected the Specified Outcome



Horizontal bar chart showing % of Groups Who Selected the Specified Outcome. Outcome 4: ~5; Outcome 3: ~18; Outcome 2: ~48; Outcome 1: ~92. X-axis from 0 to 100.

- % of Groups Who Selected the Specified Outcome

- Outcome 1: Promoting and Supporting the Conditions for Good Mental Health and Wellbeing at Population Level.

- Outcome 2: Providing Accessible Signposting to Help, Advice and Support.

- Outcome 3: Providing a Rapid and Easily Accessible Response to Those in Distress.

- Outcome 4: Ensuring Safe, Effective Treatment and Care of People Living with Mental Illness.

# Priority Cohorts

**Research has shown that the Covid-19 pandemic has exacerbated existing mental health inequalities and has shown a disproportionate impact on the mental health of a range of groups within society. We looked for a focus on initiatives which are inclusive of the following "at risk" groups:**

•Women;

•People with long term health condition or disability (People at the highest risk/previously shielding);

•People from ethnic minority background;

•Refugees with no recourse to public funds;

•People affected by psychological trauma;

•People with diagnosed mental illness;

•People who have experienced bereavement or loss;

•People disadvantaged by geographic location;

•Elderly (Aged 50>);          **Year 2 Additions:** • u25's;
                                            •Unpaid Carers.

•LGBTQ+

% of Responses Per "At Risk" Group
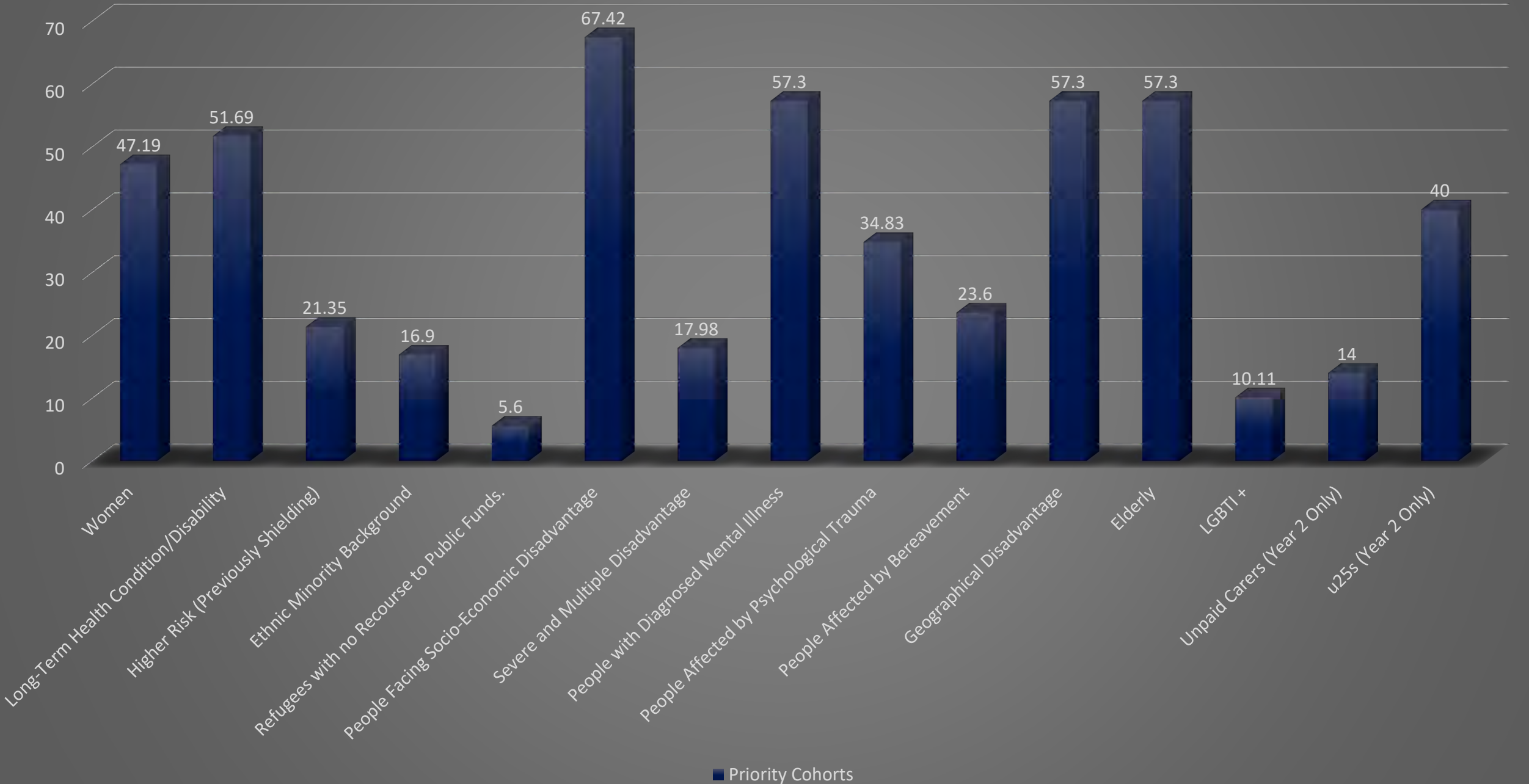
# Priority Group Data Analysis

The most selected **"at risks"** groups of the 89 applicants were:

• *People Facing Socio-Economic Disadvantage* (67.42%)

• *People Diagnosed with Mental Illness* (57.3%)

• *People Disadvantaged by Geographic Location* (57.3%)

• *Elderly* (57.3%).

These results reflect a community response to the local socio-economical and intersectional needs of East Ayrshire, an area which heavily features rural and old-industrial/coalfield regional inequalities which impact both on socio-economic status and mental wellbeing.

East Ayrshire is also projected to have a **demographic shift** between 2020-2040, with a 48% increase of people living over the age of 75, creating a significant demand for service planning and provision to meet health needs.

# Community Mental Health and Wellbeing Fund Year 3.

# CMHWB Fund: Year 3



- **Small Grants (Now CLOSED)**

- **Large Grants** (Apply for up to £20,000)

- **Deadline: Monday 29th January**

# Year 3: Thinking of Applying?

**The overarching aim of the Fund is to:**

Support community-based initiatives that promote and develop good mental health and wellbeing and/or mitigate and protect against the impact of distress and mental ill health within the adult population (aged 16 or over), with a particular focus on prevention and early intervention.

**The intended outcomes of the Fund remain the same as in Years 1 and 2:**

• Develop a culture of mental wellbeing and prevention within local communities with improved awareness of how *we can all stay well and help ourselves and others*.

• Foster a strategic and preventative approach to *improving community mental health*.

• Support *the resilience of communities* and investing in their capacity to develop their own solutions, including *through strong local partnerships.*

• Tackle the social determinants of mental health by targeting resources and collaborating with other initiatives to *tackle poverty and inequality*.

# Year 3: Changes from Year 1/2

**There will be a local focus on initiatives which:**

• Tackle mental health inequalities, including support to 'at risk' groups as well as support to the general population. (Changes made to at risk groups: **Veterans**, **Care Experienced**)

**Address priority issues of:**

• **Social Isolation and Loneliness**,

• **Suicide Prevention &;**

• **Poverty and Inequality** with a particular emphasis ***on responding to the cost-of-living crisis*** and support to those ***facing socioeconomic disadvantage***.

# Need Further Information or Just a Chat?

Please Reach out:

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