

Mental Health in the Community - The current state of mental health in our communities

KEY:

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PF: Patricia Ferrin
T: "Tom"
MB: Muriel Bailey
PF(A): Pauline Flanagan
GP: Members of the general public

(MUSIC)

PMB: In Northern Ireland, in terms of mental health, prevalence of mental illness here is 20% higher than the rest of the UK. So Northern Ireland is in many ways a very special case in terms of mental health. The experience of mental illness here is higher and the chances of people getting better here are less than the rest of the UK.

What do we mean by mental health issues?

PMB: As a whole population, the way we relate to one another, the way we think about ourselves, the way we describe identity, the way we understand our future and our history, those are all mental health issues and those have all been profoundly affected by living with violence for that period of time.

Who is affected?

PF: Niall was 15 years of age, and he was a victim of a sectarian beating. When he got that beating, that changed his life, but not in a million years did we ever think that Niall would take his life. You didn't know it if you're sitting at a table. I actually was at one funeral and there were seven boys at the next table to me and I remember looking over at them thinking, which one of them is going to be next? Within the following week, two of them wee boys, actually one died after the other one's funeral.

The other brother Kieran, he was devastated after the death of Niall, he couldn't cope with that. Tried everything to keep Kieran safe on this earth, but he didn't, at the end of the day it was his choice he decided to go. Nothing was keeping him on this earth cos he wanted to join the others. His last words were I have to go and I asked him where he was going. He says I'm going to be with my brother Niall, I'll be happier. Death does come like a thief in the night and it did come. Once you turn your back that's it. Two minutes. Three minutes. It's all over.

T: It's a stigma, young guys aren't allowed to talk about their emotions. It was unheard of when I was growing up, you know, 19, 20, 21, in the pub to turn to your mate and go look my head's away. It just wasn't done. And I'm not saying that girls have it easier but, well girls just tend to be a wee bit more vocal. That's why we've so many young men, who when they hit that crisis point, they take their own life.

PMB: If you think of it in terms of resilience there are groups that are probably less resilient to some of the pressures that are around than other. So a lot of the evidence shows that people who grow up with poverty, where there's deprivation, where there's not good education or if people are out of education. The prison system is another place where there are high levels of mental illness. If you have a mental illness, you're more likely to end up in prison because of some of the behaviours that you can find, or the way that society treats you but also if you go into prison, it will badly affect, it can badly affect your mental health. Mental health issues have an impact on how welcoming we are to people from other countries, how open we are with difference in terms of specifically the LGBT community and mental health issues also compromise our ability to make a meaningful peace in this place.

MB: Parents own mental health will have an impact on their children and young people's mental health because they're not able to parent to the best of their ability and children then find that they're having to, maybe take on issues, deal with situations that normally a parent should actually take control of. So children actually then find that their mental health will suffer because of those reasons.

PF(A): It doesn't matter whether you're Protestant or Catholic. It doesn't matter what religion you are. It doesn't matter what sex you are - male, female, working class, it's in all classes, in all societies. So really everybody, we all have mental health and we all have to look after our mental health.

Why is Northern Ireland a "special case"?

MB: Issues that are coming up over and over again are lack of funding within Northern Ireland to support mental health groups and organisations.

PF(A): The stigma that's attached to mental illness means that people working in the community are afraid to state that they have mental ill health. They are prevented maybe, from accessing certain types of jobs.

PMB: We talk about it more and therefore if we're talking about it more, the stigma should be going down. What is actually happening is people are talking about it more and are becoming more prejudiced about it. We all live with the legacy of "the Troubles" psychologically, and what is happening now, is we're seeing now young people coming through who were born after the Good Friday Agreement, have never the known "the Troubles" as they were 20, 30 years ago but whose lives now are disrupted as a consequence of the transgenerational communication of trauma.

T: Northern Ireland is unique. We talk about a statistic, where from 1969 through to 1998 there were 3,300 people murdered in "the Troubles". Where from 1998 through to 2014 there's been 3,400 suicides. So since the peace process has come in to place we've killed ourselves instead of killing each other. The co-incidence that if you go from the Carlisle Circus down, a mile down the Antrim Road was known as "murder mile" during "the Troubles". Well that mile's also the area that has the highest suicide rate in North Belfast.

Where is mental illness most prevalent?

PMB: There are particular issues that people living in the middle of cities and in deprivation experience and the challenges they face. There are a different set of circumstances, people who are living rural isolation face.

PF(A): In terms of rural areas I would say that there is lack of equality in services, in terms of access to services, they seem to be clustered in the cities.

How does mental illness affect our community?

PMB: I think it affects our community in a whole variety of ways. I think it really affects our ability to make peace. I think we in Northern Ireland are different to the rest of the UK. We have a history. We have a history of violence. We have history of killing one another and really doing damage to each other's communities.

PF(A): People with mental health difficulties sometimes do not access services and self-medicate and turn to drugs and alcohol which affects their physical health and in turn affects the whole mental health system or the general health system.

PF: There's still attempted suicides to this day, one not so long ago and they all seem to be in and around the same age - young men between the ages 16 to 24. It seems, this is a terrible thing to say, it seems to be the norm around this area.

How can we change this?

PF: I think to me, there should be more services out there. There should be more people on the ground talking to them, people who've survived suicide and who've come through the other end to tell them exactly how to help.

T: Charities like PIPS need to be more visible so that young guys when they come to that crisis point they know that, right, this is where I have to go.

PF(A): It is seen as a Cinderella service and it is not adequately resourced at all.

PMB: By supporting mental health and wellbeing we improve education, we improve people's sense of wellbeing. We improve their health, not just their mental health, but also their psychological health. All these other benefits are around by improving a population's mental health and I would argue it's a single most important thing.

What if we do nothing?

PMB: If we don't do anything about this, in my view, it's going to repeat the same pattern and in my view it's going to get worse, because these things are insidious they eat away at us. They eat away at us as individuals and they eat away at communities, like community cohesion and at community resilience.

Mental health affects us all but who really cares?

GP: I care. We care. (REPEATED)

(MUSIC)