Mental Health Awareness Week

15 to 21 May 2023

Uncertain Times: Anxiety in
Wales and how to tackle it.

Key Points

- Feelings of anxiety are a natural and important human response to stress or perceived danger. They are a feeling of unease, worry, or apprehension. Anxiety is a part of our body's natural 'fight or flight' response that helps us react quickly to potential threats.

- Anxiety can become problematic if it is persistent over a long period of time, is overwhelming, or stops us from doing things we want or need to do.

- Anxiety levels amongst the population increased throughout the pandemic and have not yet dropped to pre-pandemic levels.[i]

- In March 2023, the Mental Health Foundation worked with Opinium to conduct an online survey of 1,000 Welsh adults aged 18+ to look at anxiety in the Welsh population, its causes, and popular coping mechanisms.

- Nearly three-quarters of the Welsh population (73%) had felt anxious at least sometimes in the previous two weeks, with almost a quarter of people (23%) anxious most or all of the time.

- Some groups of people are more likely to be affected by anxiety than others. Groups more likely to report feeling anxious at least some of the time were:

  o   Single parents (85%)
  o   People with experience of a mental health problem (93%)
  o   LGBTQ+ people (92%)
  o   Carers (83%)
  o   25–34-year-olds (83%)
  o   People with a disability (86%)

- Everyone's experiences of anxiety are different, and the causes of anxiety can be complicated, but there are circumstances more likely to give rise to anxiety. These can include negative life events, social isolation, stress relating to work / education, physical and/or mental health problems, and social and societal pressures, including those experienced online.

- The cost-of-living crisis was clearly top of mind; the most commonly reported cause of anxiety in our research was being able to afford to pay bills. Those aged 35-49 years old were most anxious about finances.

- Stigma and shame play a part in how people deal with their anxiety. Nearly half of the people in our research (45%) were keeping their anxiety secret.

- Nearly a third (31%) said they were not coping well with their anxiety with higher levels noted amongst the unemployed (51%) and people living alone (40%)

- People in our study are using a variety of coping mechanisms to manage their anxiety. Some of these are healthy such as exercise, sleeping more and connecting with friends and family were the most popular. However, we also had evidence of unhealthy coping strategies for example excessive avoidance of trigger situations, increased consumption of alcohol, and smoking.

- We encourage people experiencing anxiety to try our evidence-based recommendations to help them to manage it, including getting active or speaking to family or friends.

We can't tackle anxiety by only focusing on remedies for individuals. National and local policymakers must prioritise actions to promote good mental health for all and to reduce anxiety, particularly for people at highest risk of experiencing persistent and overwhelming anxiety.

We are calling for:

1. The development and delivery of a new 10-year cross-governmental mental health strategy in Wales with a strong focus on prevention and reducing mental health inequalities.

2. Financial support schemes that alleviate financial stress for people experiencing poverty and/or financial strain, such as the Essentials Guarantee recommended by The Joseph Rowntree Foundation and The Trussell Trust.

3. All frontline workers to receive training so they know how to respond effectively to the mental health effects of financial stress and strain.

4. Support for community social networks, resources, and resilience. We recommend fast-track access to additional funding for grassroots organisations or initiatives that are likely to support them.

5. Implement at scale programmes and approaches to improve relationships, and the culture and environment in which people grow, learn, live, and work. For example, evidence-based parenting programmes, interventions to create mentally healthy workplaces and whole-school and college approaches to mental health that include anti-bullying programmes.

Introduction

Anxiety has become one of the most talked about topics in mental health. While it's good that anxiety is getting more attention, many myths and confusion surround the topic.

The Mental Health Foundation (MHF) has chosen anxiety as our Mental Health Awareness Week 2023 theme to provide a better understanding of what anxiety is, when it becomes a concern, and what we can do to help ourselves and each other when anxiety starts to become a problem.

Anxiety is a natural human response to stress or perceived danger. It's a feeling of unease, worry, or apprehension that can be caused by anything from a big event or major change to something as simple as a work presentation or meeting new people. In fact, anxiety is part of the body's natural 'fight or flight' response that helps us react quickly to potential threats.

It is important to note that feeling anxiety is not the same as having an anxiety disorder, which is a diagnosable mental health condition characterised by persistent and intense feelings of anxiety that are out of proportion to the situation or event that triggered them. Rather, anxiety is a common and natural emotion. When it becomes persistent or overwhelming and interferes with daily life, it can turn into a problematic condition, that may be diagnosed as an anxiety disorder. However, there are ways to manage it and reduce its impact.

This could involve using effective coping strategies and support, or changes to our circumstances or environment. Some of these changes require action at local and national government level to address some of the root causes of anxiety.

This briefing looks at what our research has uncovered: the prevalence and rates of anxiety amongst different groups of people, and the current key drivers and risk factors for anxiety. It then considers the main ways of coping with anxiety and provides recommendations to Welsh and UK Governments for preventing anxiety.

Anxiety Disorders

Anxiety disorders are a group of mental health diagnoses characterised by excessive, persistent, and irrational fear or worry about everyday situations or events. These conditions are prevalent in the UK, with an estimated one in six adults (16%) likely to have some form of anxiety.[ii]

There are several types of anxiety disorder. Here are some examples:

- Generalised Anxiety Disorder (GAD)
- Panic Disorder
- Agoraphobia
- Social Anxiety Disorder
- Specific Phobias
- Obsessive-Compulsive Disorder (OCD)

- Health Anxiety Disorder

Symptoms of anxiety disorders can vary from person to person and may include a combination of physical, emotional, and behavioural symptoms. In the UK, anxiety disorders are often treated with a combination of therapy and medication, such as cognitive behavioural therapy (CBT) and selective serotonin reuptake inhibitors (SSRIs). It may also help to address the causes of the anxiety, if it is arising in response to life circumstances.[iii]

Anxiety disorders are common and treatable mental health conditions that can significantly affect an individual's quality of life. If you are experiencing anxiety that is becoming disabling, seeking professional help is important to receive an accurate diagnosis and effective treatment.

What is anxiety?

Anxiety is a common emotional state characterised by feelings of unease, such as worry or fear, that can range from mild to severe. Most people feel anxious from time to time. In many cases, this can be helpful in providing motivation or keeping us safe from harm. However, when anxiety becomes excessive, it can interfere with our daily lives and lead to distress, avoidance, and even physical symptoms such as heart palpitations, stomach upsets or shortness of breath.[iv]

(NOTE: If you are experiencing physical symptoms, it is important to speak to a healthcare professional urgently as they could also be caused by another serious health condition that requires immediate treatment.)

Anxiety can arise in response to various life events or circumstances, such as work stress, financial worries, or relationship problems in your family, at work, with friends or your life partner. In some cases, anxiety can become a constant feeling, and persist even when there is no apparent stressor or threat.

Who has anxiety in Wales?

In March 2023, the Mental Health Foundation worked with Opinium to conduct an online survey of 1,000 Welsh adults aged 18+ to look at anxiety in the Welsh population, its causes, and popular coping mechanisms.[1]

What we found was that nearly three-quarters of the population (73%) had felt anxious at least sometimes in the previous two weeks, with 23% anxious most or all of the time. These levels of anxiety were highest amongst single parents, carers, people identifying as LGBTQ+, people with disabilities, and those who had experienced mental health problems.

In the past two weeks how often have you felt anxious?
(All the time, Most of the time, Sometimes)
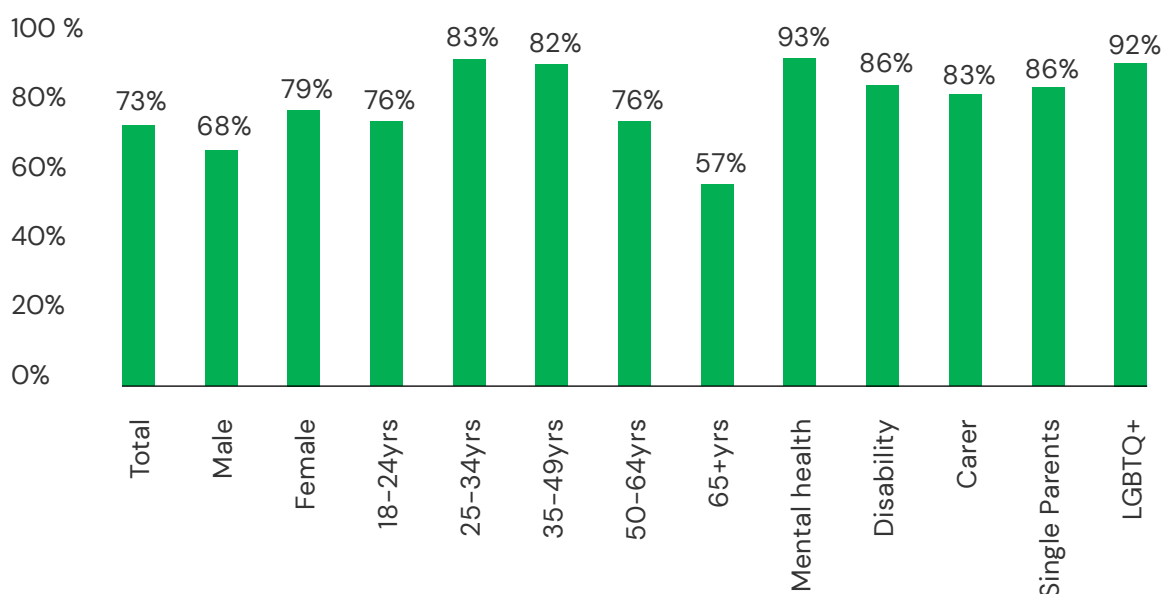
For those who had felt anxious in the previous two weeks, more than a third (34%) stated it had interfered with their day-to-day life to a great or moderate extent.

Nearly half the young people (18–24-year-olds) in the research (47%) and more than half of students (56%) indicated that anxiety had affected their day-to-day life to a great or moderate extent. Figures were also high for both single parents (51%) and carers (40%).

Our research also discovered that for just over a quarter (26%) of those suffering from anxiety, it was stopping them doing what they wanted or needed to do.

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[1]This data was collected by Opinium Research. The research sample was 1,000 Welsh adults and the data was weighted to be nationally representative. The survey took place between the 24 March and 3 April 2023.

This was more apparent in some groups than others. Unemployed people (52%) and students (46%) experienced this the most.

How often do you feel anxious to the extent that it stops you from doing what you'd like to or need to do?
(All the time, Most of the time)
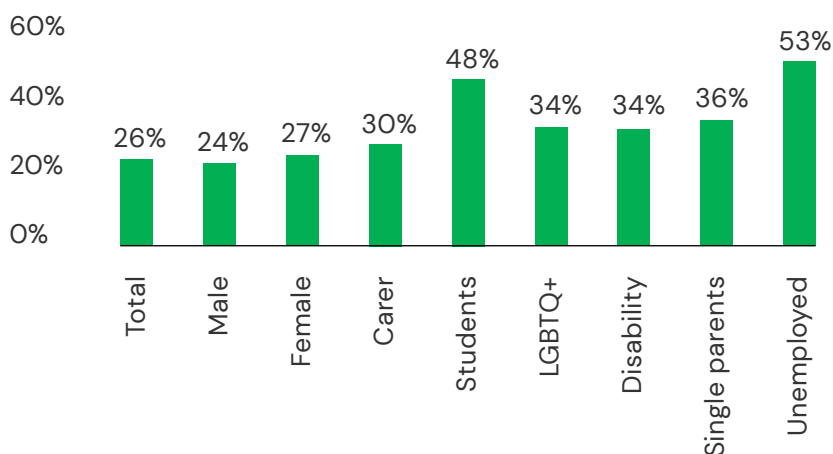
Anxiety can be particularly pronounced during adolescence and young adulthood. Changes at this time can be both new and stressful and may trigger feelings of uncertainty and fear, which can contribute to anxiety.

What causes anxiety?

Everyone's experiences of anxiety are different, and the causes of anxiety can be complicated. What is clear is that the relationship between anxiety and any social and/or environmental factors is complex and bidirectional, which is to say anxiety can aggravate social disadvantage as well as being aggravated by it.

Social and environmental factors can contribute to the development and maintenance of anxiety and affect our ability to engage effectively in social situations. These social and environmental factors can include childhood trauma, social isolation, negative life events, stress relating to work or education, physical or mental health problems, and social and societal pressures.[v] Gender can also play a part. Women are almost twice as likely to experience anxiety as men.[vi] Other studies suggest that women are more likely to experience physical and mental abuse than men, and abuse has been linked to the development of anxiety disorders.[vii]

Childhood trauma

Childhood trauma such as physical, emotional, or sexual abuse, or neglect, can cause long-lasting effects on a person's mental health. Experiencing childhood trauma can predispose people to developing anxiety. This can be due to changes in brain development affecting our fight or flight response, memory, and emotion regulation.

Childhood trauma can also lead to negative beliefs about oneself or the world, making it more difficult to manage stressful situations and increasing the likelihood of developing anxiety.

Social isolation

Individuals who experience social isolation or loneliness often have a reduced quantity or quality of social contacts compared to those who report positive social relationships. Social isolation can lead to difficulty initiating social interactions with others, often leading to feelings of rejection and insecurity. Similarly, loneliness can lead to negative self-evaluation and feelings of inadequacy, further heightening an anxiety response. While anyone can experience loneliness, certain risk factors increase our chances of severe and lasting loneliness that can affect our mental health and sometimes increase our levels of anxiety. These include:[ix]

- Death of a partner
- Being single
- Being unemployed
- Living alone
- Having a long-term health condition or disability
- Being between 16 and 24 years old
- Being a carer
- Being from a minority ethnic community
- Being LGBTQ+

Case study

Jazmine is a 21-year-old university student. She describes how feelings of anxiety can be hard to articulate and identify.

"I have felt anxiety all my life but never knew what it actually was. I experienced social anxiety in school when I was afraid to talk and eat in front of others.

I thought there was something wrong with me until I researched [it] and realised it is something most people experience.

"As a bisexual, mixed-race woman with a disability, I feel like I'm a minority in society and many groups/forces are against people like me. It's worrying to think that racism and homophobia still exist.

"Social issues that have personally heightened feelings of anxiety for me are poverty, including worrying about where and how to gain an income."

Negative life events

Negative life events can also contribute to anxiety. These are events that cause a significant emotional impact and disrupt our sense of security or well-being.

Examples of negative life events that can for some people lead to anxiety include:

- Divorce or the end of a significant relationship can leave a person feeling vulnerable and anxious.

- Experience of abuse or domestic violence can result in living with intimidation and fear in your own home (which should be a safe space).

- A car accident, physical assault, or other traumatic events can trigger anxiety symptoms such as panic attacks, flashbacks, or avoidance behaviours.

- Exposure to a stressful work, education, or community environment – for example, experiencing bullying, harassment, or discrimination in any of these environments can lead to ongoing anxiety (in particular for women and marginalised communities).

- Job insecurity or an excessive workload can also increase anxiety levels.

- Financial strain can cause feelings of anxiety and worry. Experiencing financial issues, for example being made redundant, living on benefits, or struggling with debt has been known to be associated with the presence of depression and/or anxiety.[xi]

Societal pressures

Societal pressures can contribute to feelings of stress or anxiety, as people feel the need to meet cultural or societal expectations, standards, or norms.[xi, xii] For example the idealisation of a 'perfect' body can lead to body dissatisfaction and anxiety about physical appearance.[xiii] The pressure to be successful, achieve high grades, or excel in your career can also lead to anxiety about performance and fear of failure.

Rigid gender roles and expectations can lead to feelings of anxiety or depression, particularly for those who don't conform to traditional gender roles or identify as LGBTQ+ or non–binary. Lesbian, gay, bisexual and 'other' identified adults are around twice as likely to report symptoms of poor mental health (i.e. anxiety, depression) than heterosexual adults.[xiv] In addition, although LGBTQ+ people represent only a small proportion of the total youth population, they are at increased risk of experiencing hostile environments at home and in wider society, and are subject to direct and indirect discrimination, harassment, disadvantage, and inequality, with detrimental consequences for their mental health.[xv]

Societal pressures can also be gendered. Society has different expectations of men and of women regarding emotional attunement and expression, with men being socialised to suppress their emotions and hide their vulnerability. This can make it more difficult for men to recognise and seek help for anxiety, leading to a higher prevalence of undiagnosed or untreated anxiety among men.

Financial status. Society's expectation to achieve significant milestones and acquire certain goods or services may lead to feelings of inadequacy or anxiety about financial status.

Lack of access to mental health resources and support

Many different factors can lead to unequal access to mental health resources and support. Some common barriers include waiting times, transport, education and literacy, language or cultural barriers and stigma and discrimination. When people are unable to access the right support at the right time, this can cause anxiety to worsen.

Tammie speaks of the pressure of being a student contributing to feelings of anxiety:

"The pressure to succeed and be great and not disappoint others is very prominent. Especially when the schools you have attended have fostered an extremely competitive environment. Any thought of falling short is very anxiety-inducing.

"Also, I know that for a lot of people, when they started university, their feeling of social anxiety increased greatly. It was a very new and overwhelming environment."

Tammie also spoke about the effect racism can have on mental health:

"Being a Black British young person has brought on many intense feelings of anxiety. There have been environments throughout my life that have been less than welcoming, and it becomes such an intense thought when I anticipate entering those environments again."
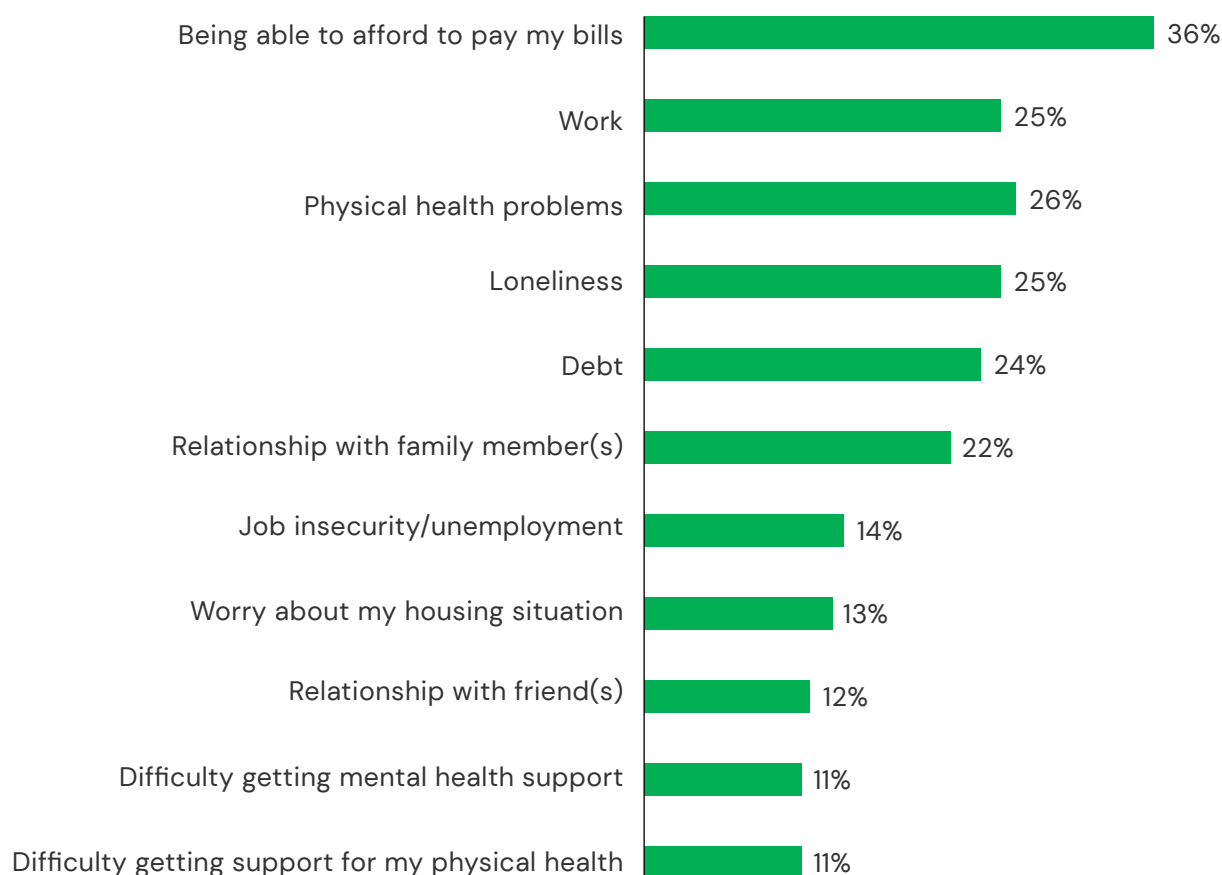
Socio-economic factors

The relationship between socio-economic status and anxiety is complex, and influenced by a variety of individual, familial, and environmental factors. However, the evidence is clear that experiencing material deprivation and financial strain increases a person's risk of having a mental health problem such as anxiety. Specifically, poverty, unemployment, and low education levels can all increase the risk of someone developing anxiety. People experiencing financial stress and being unable to afford essentials including food, heat, and mortgage/rent due to rising inflation report higher levels of anxiety.[xvi]

Deprivation is about more than a lack of money. It can include lack of access to resources such as adequate housing and exposure to negative stressors such as violence, abuse and crime, or lack of public green space. A growing body of evidence suggests the relationship between deprivation and mental health is not just about absolute lack of resource for individuals.[xvii]

In our research we asked those that had been anxious in the past two weeks what was the cause of their anxiety. The most common reported cause of anxiety was being able to afford to pay bills, reported by 36% of respondents. The top ten causes of their anxiety are detailed below:

What have you been anxious about in the last two weeks?

Category	Percentage
Being able to afford to pay my bills	36%
Work	25%
Physical health problems	26%
Loneliness	25%
Debt	24%
Relationship with family member(s)	22%
Job insecurity/unemployment	14%
Worry about my housing situation	13%
Relationship with friend(s)	12%
Difficulty getting mental health support	11%
Difficulty getting support for my physical health	11%

We found that some specific groups of respondents were more likely than others to be anxious about paying bills.

In the past two weeks how often have you felt anxious?
(All the time, Most of the time, Sometimes)
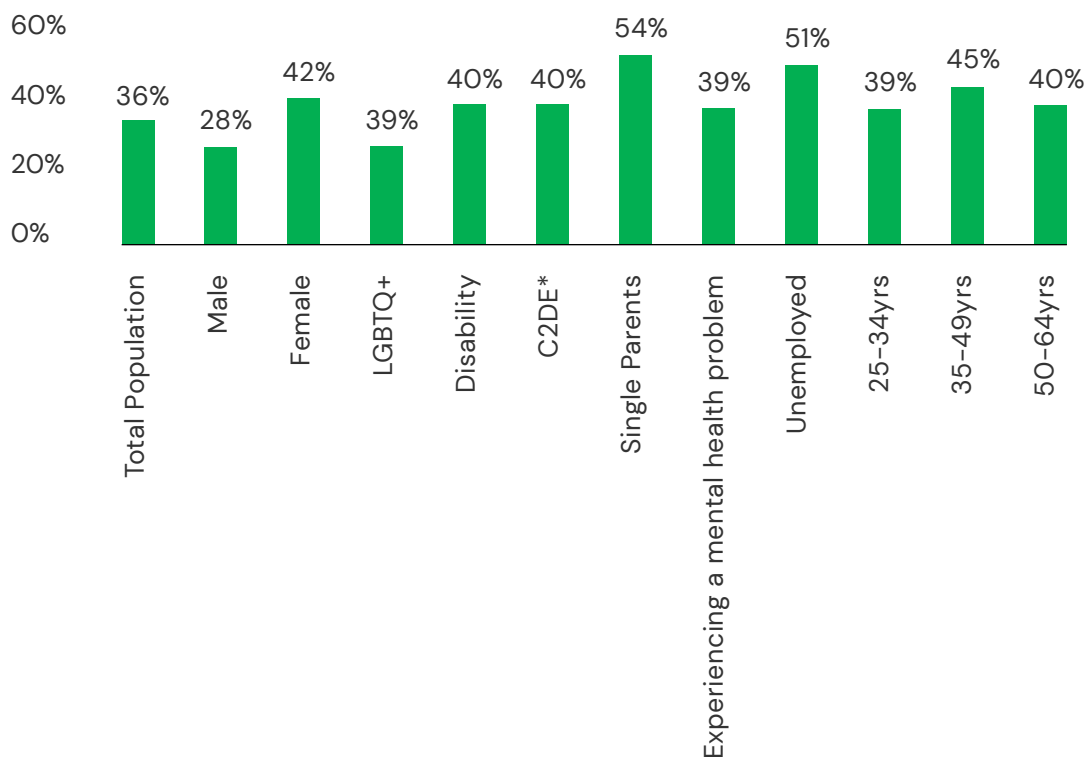
The cost-of-living crisis has undoubtedly led to increased levels of material deprivation and financial strain in the UK population, which is putting people's mental health at risk. Our research provides new evidence of the extent that financial strain is negatively affecting people's mental health, specifically their experience of anxiety. Worryingly, some of the behaviours that are protective of mental health (for example, getting enough sleep and maintaining connection with family and friends) are the very behaviours that people may be reducing to cope with the increased cost of living.

* Approximate social grade allocates respondents to their most likely category based on the Standard Occupational Code 2010 code, Employment status, Qualification, Tenure and whether they work full time, part time or not working. Social grade C2 includes skilled manual worker categories and social grade DE includes all semi-skilled and unskilled manual workers, those on state benefit and unemployed categories.

Case study

Huma's anxiety was brought on as a young person by a health condition.

"With anxiety, you can feel quite tired, very overwhelmed. Growing up in school, I would sometimes zone out in lessons if I was getting tired or anxious. It was like my brain could not cope and I would get dizzy and lightheaded, and get a headache.

"Anxiety impacts your relationships and friendships. Growing up I never told my friends. I couldn't really express how it made me feel. In school, I would leave a classroom to go and have a panic attack away from my friends so they would never ever see the anxiety symptoms. I found it hard to explain this to [my] friends and family – what it feels like.

"I think in today's day and age, it's important to talk about how we're feeling. There's a lot of stresses and pressures. A lot of people who might not have felt anxious before are feeling anxious now. I think it's really important to be as open and honest as you can with others, to help each other."

What does anxiety feel like?

Anxiety can cause many different symptoms. It can affect how a person feels physically and mentally and how they behave. It's not always easy to recognise when anxiety is the reason behind feeling or acting differently, but it is useful to be aware of the symptoms. Anxiety can affect everyone differently.

Physical symptoms*

- Faster, irregular or more noticeable heartbeat
- Feeling lightheaded and dizzy
- Headaches
- Chest pains
- Loss of appetite
- Sweating
- Breathlessness
- Feeling hot
- Shaking

Psychological symptoms

- Feeling tense or nervous
- Being unable to relax
- Worrying about the past or future
- Feeling tearful
- Not being able to sleep
- Difficulty concentrating
- Fear of the worst happening
- Intrusive traumatic memories
- Obsessive thoughts

Changes in behaviour

- Not being able to enjoy your leisure time
- Difficulty looking after yourself
- Struggling to form or maintain relationships
- Worried about trying new things
- Avoiding places and situations that create anxiety
- Compulsive behaviour, such as constantly checking things

Impact of anxiety on everyday life

Anxiety can have a significant impact on how a person interacts with the world around them. For example, anxiety can lead to social withdrawal, decreased productivity, and reduced quality of life. In some cases, it can cause avoidance behaviours that prevent individuals from pursuing education, work, or social opportunities, or from accessing essential resources such as health or social care or other forms of support.[xviii]

It can make it difficult to maintain interpersonal relationships, to conduct everyday activities independently and to work, and it can impact on the relationship we have with our environment.

Work and career

People with anxiety are more likely to miss days from work and are less productive. Young people with anxiety are also less likely to enter school and complete their education – translating into fewer life chances.[xix]

Cycle of anxiety

Anxiety can cause vicious circles where the impact of anxiety can affect people in a way that exacerbates the causes of anxiety. In our survey, 29% of people identified work as a source of anxiety. The figure below shows how this might cause anxiety to escalate. A similar cycle can be illustrated by financial strain. Worries about money can have an impact on your mental health, making you more anxious, and anxiety can affect how you manage your money.

- I'm having difficulties at work
- This makes me anxious
- The anxiety is affecting my sleep
- Poor sleep is affecting my concentration
- Poor conentration is affecting my work
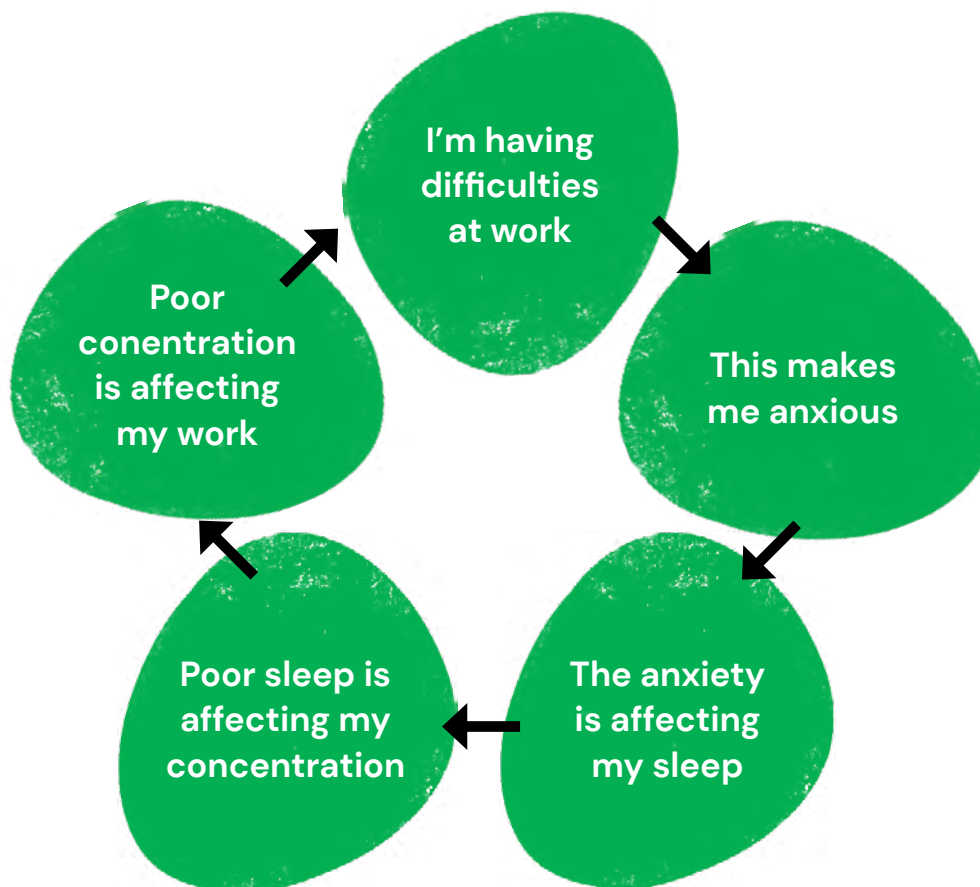
Social life

Anxiety can have a significant impact on people's social life and may create its own vicious circle. People experiencing anxiety may avoid social situations that they perceive as threatening or uncomfortable. This can lead to isolation and decreased social interaction.

Anxiety can also impair an individual's ability to communicate effectively in social situations, resulting in feelings of discomfort, self-consciousness, and embarrassment, which can further exacerbate social anxiety. This may combine with negative self-image, which can damage self-confidence and self-esteem in social situations. All of which can lead to reduced social support, as people become less likely to reach out to others for help or support.

Relationships

Anxiety can have a significant impact on relationships with others in several ways.

It can interfere with effective communication, causing misunderstandings and disagreements with partners, family members, or friends. Anxiety can make it challenging for us to express ourselves clearly or make it difficult to listen to and understand other people.

Anxiety can lead to trust issues, leading to doubt and suspicion of partners, friends, or family members. It can create a vicious cycle in which people assume their loved one is dishonest, leading to a decrease in trust and ultimately affecting the whole relationship. It can also affect an individual's ability to establish and maintain intimacy with their partner or friends. Anxiety can lead to a fear of intimacy, distancing from others, and an avoidance of emotional closeness.

An individual suffering from anxiety may try to avoid conflict, leading to pent-up frustrations and ultimately a more significantly damaged relationship. Conversely, however, anxiety can also lead to higher levels of conflict in relationships as it can make people more defensive or quick to be hurt by small things.

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Physical health

Anxiety can have an impact on physical health. One of the most common is by disrupting sleep. Anxiety can make it difficult for people to fall asleep, stay asleep, or get restful sleep, which can lead to a wide range of negative health consequences. Poor sleep has been linked to increased risk of obesity, diabetes, cardiovascular disease, and other chronic health conditions.[xx]

Research has also found a more direct link between anxiety and increased risk of cardiovascular disease. Anxiety can cause the release of stress hormones, which can increase blood pressure and heart rate, leading to chronic stress on the cardiovascular system. Anxiety can lead to unhealthy behaviours such as smoking, overeating, and sedentary lifestyles, all of which can contribute to the development of cardiovascular disease.[xxi]

In addition, anxiety can have adverse effects on the immune system.[xxii] Anxiety has been shown to activate the body's stress response, which can lead to a release of stress hormones such as cortisol. When cortisol levels are elevated for extended periods of time, it can weaken the immune system, making individuals more susceptible to infections, illnesses, and other health problems.

Stigma and shame

When people feel anxious, they anticipate and worry about something 'bad' happening, such as something harmful to themselves or those they care about. What is anticipated as 'bad' or harmful will be different for different people and will depend on a range of factors including what experiences they have had in their lives.

So, for people who have experienced a lot of shame (being judged, criticised, excluded, ignored, rejected) their anxiety may focus on their fear of further shaming experiences. As well as this 'anxiety about shame', anxiety can itself be shamed through being dismissed, ridiculed, laughed at, deemed 'weak' – including in a gendered way – or ignored.

For people experiencing anxiety, the perception that 'most people' will have a negative attitude towards their condition reduces the chance they will seek support, both formally (e.g. from GPs or counselling) and informally (e.g. from family and friends).

This was evidenced in our own research where we found that nearly half of those experiencing anxiety (45%) kept their anxiety secret – this was more likely in men (48%) than women (42%).

We also found that many of those with anxiety (45%) would not tell their employer – again this is more pronounced in men (53%) than women (39%).

With which of the following statements do you somewhat agree/strongly agree?

Statement	%
There is nothing I can do about my anxiety	36%
I wouldn't tell my employer about my anxiety	45%
I don't think my colleagues at work would be sympathetic if I told them I was anxious	31%
I don't think people can tell when I am feeling anxious	55%
I keep my anxiety secret. I wouldn't tell anyone	45%
I feel ashamed to talk about my anxiety to anyone	38%
I feel able to talk about my anxiety to my family	47%
I feel able to talk about my anxiety to my friends	45%
I feel able to talk about my anxiety to colleagues at work	26%
I feel able to talk about my anxiety to whoever I want to	31%

Coping with anxiety

Living with anxiety can be difficult and dealing with it can be hard. Not being able to cope with feelings of anxiety means they can get out of control and affect everyday life. The more often and the longer we feel anxiety, the more it can become a problem.

With this in mind, we asked those who had been anxious the previous two weeks how well they were coping with their anxiety. Nearly a third of respondents (31%) stated they were not coping with their anxiety. Those more likely to admit they were not coping were those that were unemployed (51%) followed by people living alone (40%) and people with a disability (38%).

How well are you coping with your anxiety?
(Not very well / Not at all well)
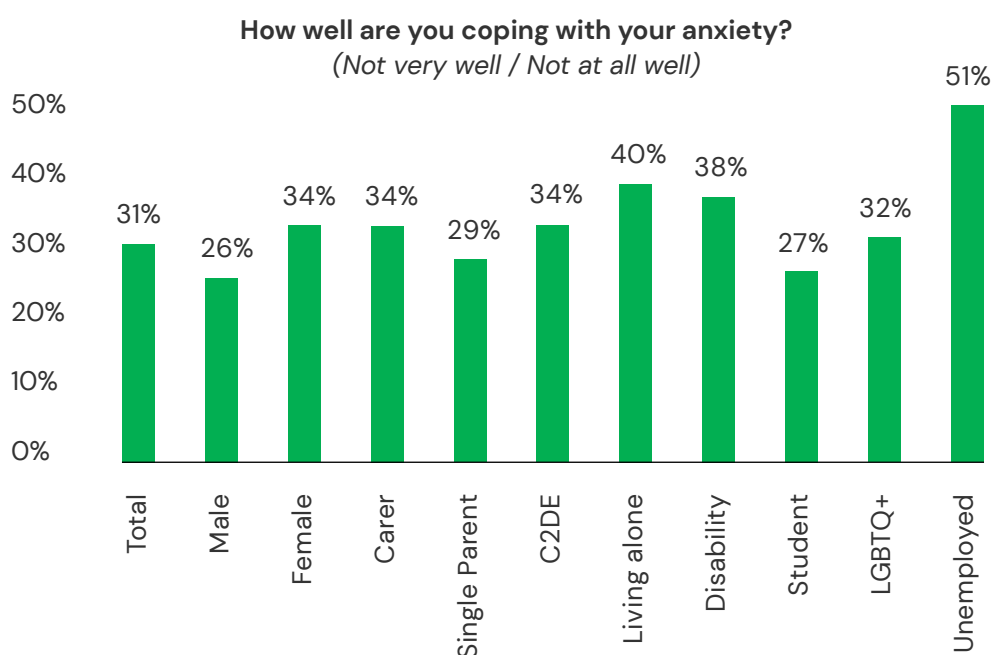
There are many coping strategies that people use to manage their anxiety. For example, looking after their physical health by moving more and eating healthily; talking to someone they trust; using stress management and relaxation techniques; and making sleep a priority.

In our study respondents used a variety of healthy coping mechanisms to manage their anxiety including exercise (32%), connecting with friends / family (24%) and talking with trusted people (24%).

There are, however, a number of unhealthy coping mechanisms that are commonly adopted. These are reflected in the behaviours reported by our respondents. The most common was avoiding trigger situations (21%), which can be very disabling and life–limiting and is one of the ways that anxiety can feed into isolation, loneliness and even phobias.

It is also common for people to drink more alcohol or smoke more in response to anxiety – again we see these responses reported by our survey respondents, with 17% reporting drinking alcohol and 10% smoking as a way of coping with their anxiety. Women were more likely to avoid trigger situations (23% v 17%), while men were more likely to drink alcohol (22% v 12%).

Do you do any of the following to cope with your anxiety?

Response	Percentage
Exercise	32%
Spend time in nature (countryside, park, beach etc.)	30%
Spend time with my pet(s)	28%
Sleep more	27%
Talk with someone I trust	24%
Connect with friends/family	24%
Use mindfulness/breathing techniques	22%
Avoiding trigger situations	21%
Drink alcohol	17%
Manage my diet/eat well	16%
Speak to my GP	12%
Smoke more cigarettes	10%
Write in a journal/diary	6%
Avoid caffeine	6%
Take recreational drugs	5%
Participate in a community group	2%

Case study

People alleviate anxiety in different ways. For Tim, photography and photo editing has proved beneficial. He leads a photography group – 'Artful Minds' – in his hometown, sharing his love for photography and its mental health benefits with other people.

Our research has shown the positive impact that being creative, socialising, learning and doing positive things for other people can have on our mental health, and this is evident in Tim's experience.

"I've found channelling my anxiety into something creative really helps. One thing I've really taken to is photography and editing photos to create art. Looking at the world through a lens can really change your perception of what you see. I find beauty in things I was oblivious to before, and I see possible photo opportunities all the time."

Sources of support

When you have anxiety, it is important to get support before it becomes a debilitating problem. There are many sources of support for anxiety such as the NHS, mental health charities, online support and telephone helplines. In addition, social support is important for managing anxiety

In our study respondents had indicated a wide range of support sources including social support from friends (27%) and siblings (18%) and more clinical support such as the GP (31%) and NHS mental health services (16%).

Have you already sought help or support from any of the following sources for your anxiety?

Source	Percentage
GP	31%
Friends	27%
Therapist	19%
Siblings	18%
NHS doctor specialising in my physical health condition	18%
NHS Mental Health Services	16%
Parents	16%
Other self-help online	14%
NHS online	12%
Mental health charity	11%
Employee assistance programmes	11%
Co-workers	10%
Money advice services	8%
Community or support group	8%
Pharmacist	8%
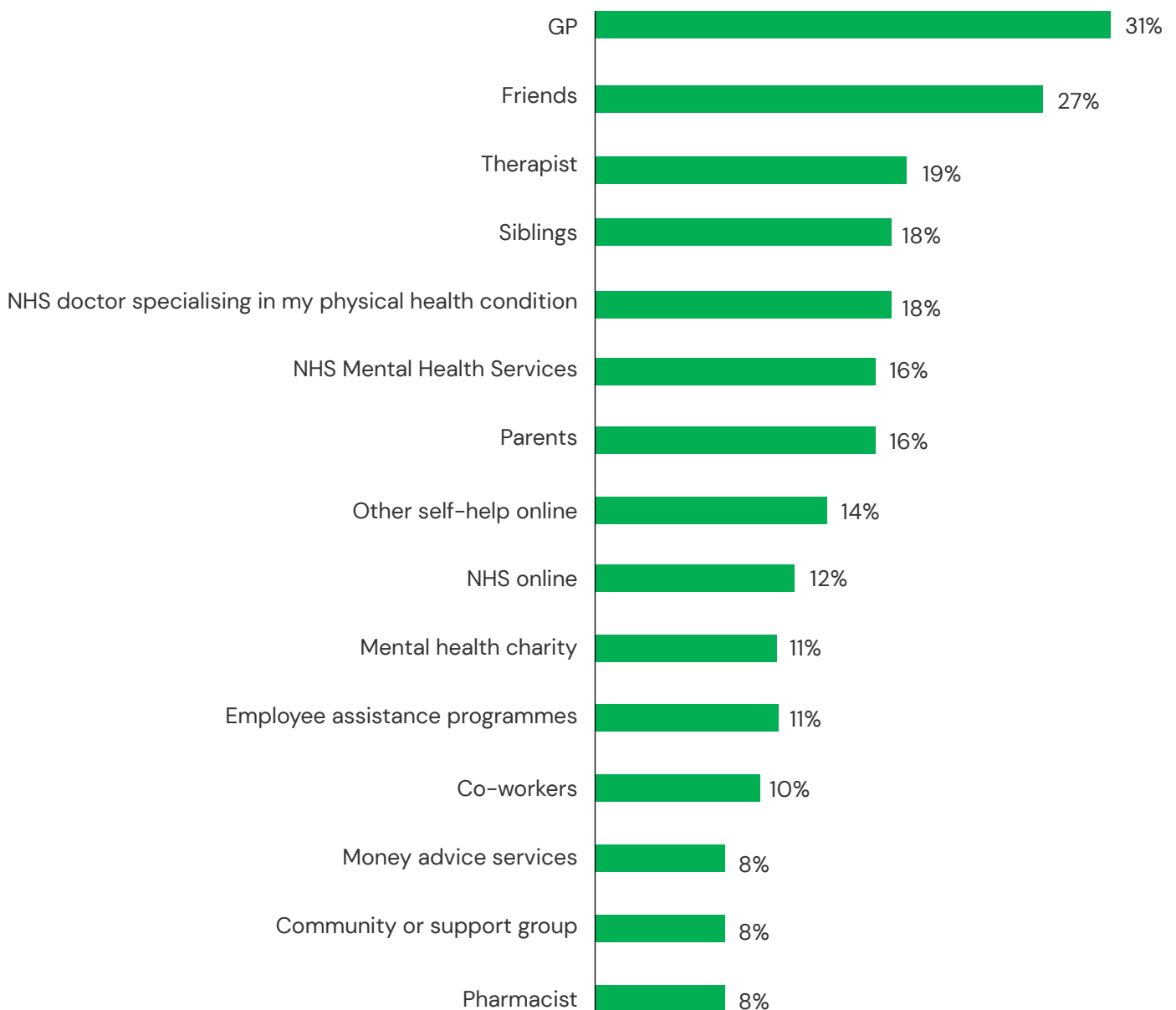
There is a body of evidence around men's reluctance to seek help for mental health problems and many studies support the generally–held assumption that men are less likely than women to get assistance from professionals for mental health problems.[xviii] This was also reflected in our study where we noted that men were less likely to go to their GP (25% vs 35%). We also found men were less likely to have sought support from friends (27% vs 33%).
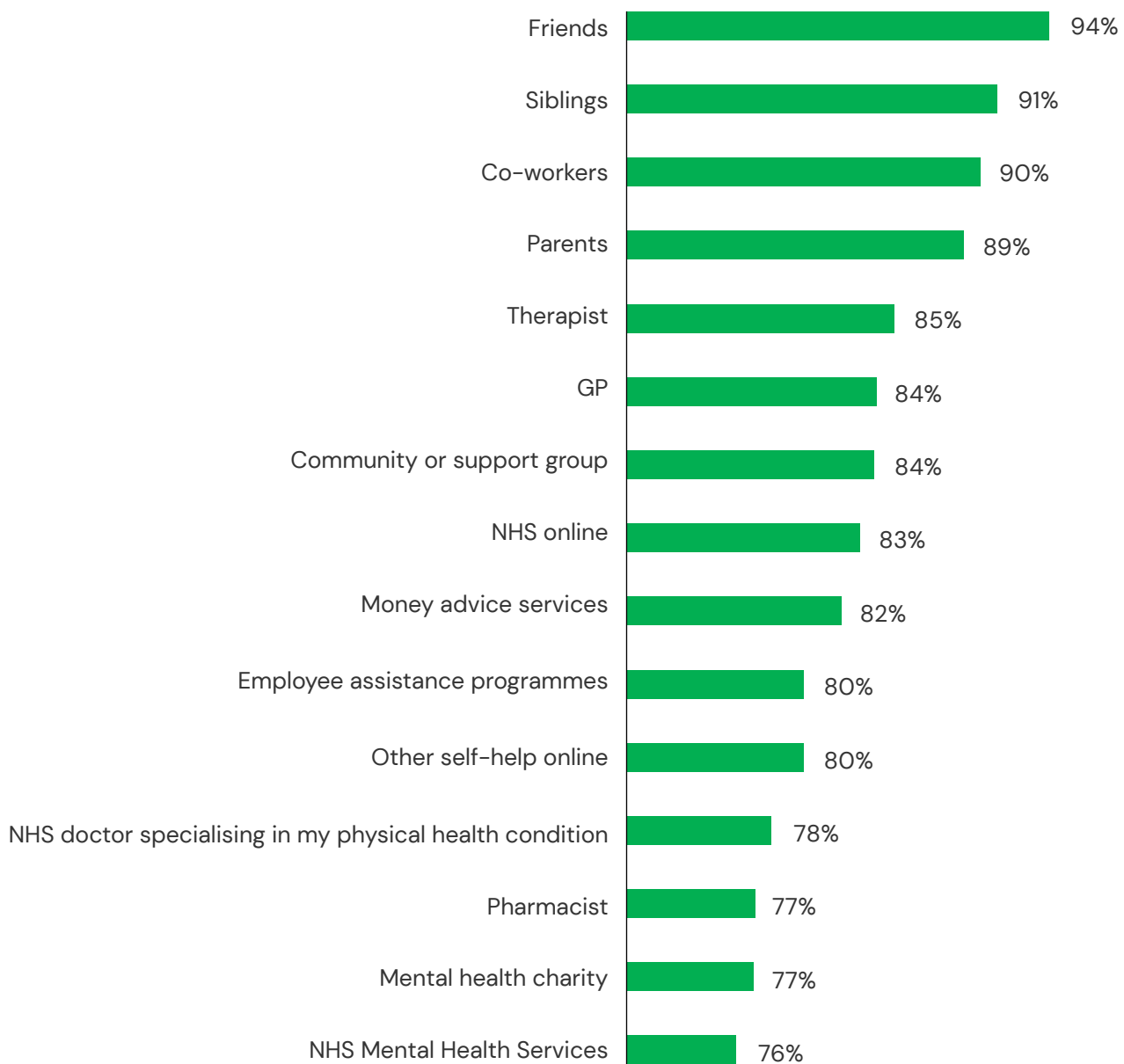
Seeking help is an important step towards accessing support and improving quality of life.

However, evidence suggests that young people are less likely to seek help from others, particularly professional help from GPs.[xxiv] This was borne out by the young people (18–24) in our research who were more likely to have sought support from their friends (39%) than their GP (36%).

When asked if this support had helped, overwhelmingly respondents indicated that the support they accessed had helped them to some extent. Interestingly, support from friends, parents and siblings polled the highest, indicating the importance of social and family support in helping people with their anxiety:

And did this help or support you manage your anxiety?
(Helped a great deal; Somewhat; A little)

Support	%
Friends	94%
Siblings	91%
Co-workers	90%
Parents	89%
Therapist	85%
GP	84%
Community or support group	84%
NHS online	83%
Money advice services	82%
Employee assistance programmes	80%
Other self–help online	80%
NHS doctor specialising in my physical health condition	78%
Pharmacist	77%
Mental health charity	77%
NHS Mental Health Services	76%

Most people had positive experiences of seeking support. Only a few respondents were unhappy with the support they had received. As the vast majority of those who sought support found it helped them, there is a need to encourage those who feel they are suffering from anxiety to seek support that could help them.

Encouragingly, when asked where they would consider going for help or support, health professionals were top of the list.

Would you consider seeking help or support from any of the following sources for your anxiety?

Source	Percentage
GP	40%
NHS doctor specialising in my physical health condition	40%
NHS online	39%
NHS Mental Health Services	37%
Other self-help online	34%
Therapist	33%
Mental health charity	32%
Friends	30%
Pharmacist	26%
Community or support group	24%
Siblings	22%
Employee Assistance Programmes	21%
Money advice services	20%
Parents	19%
Co-workers	16%
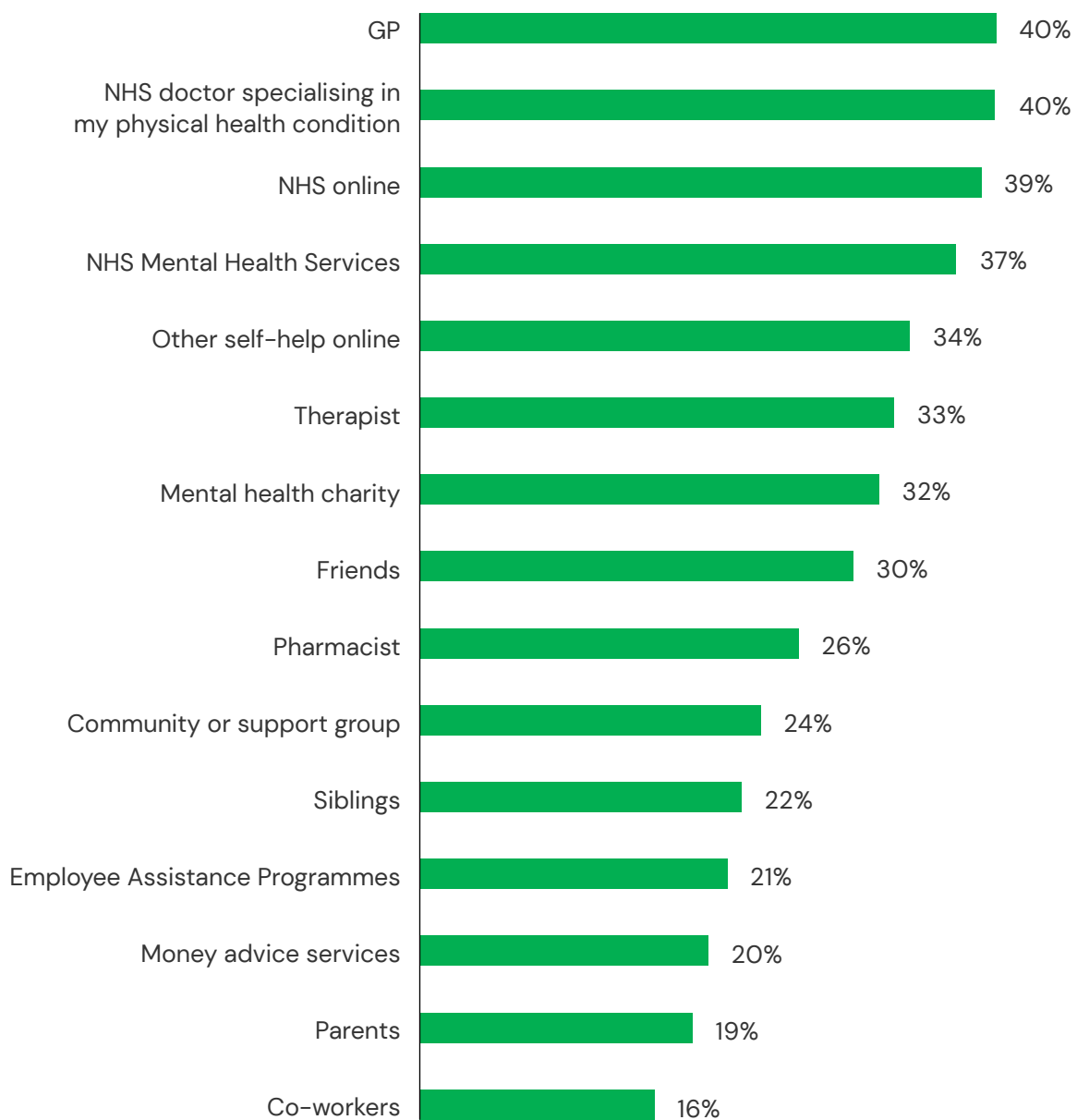
Case study

For Jenna, feelings of anxiety were made worse after she was affected by COVID–19. Since falling ill with COVID–19 in 2019 she's had continuing symptoms, [long COVID] and fibromyalgia. This effect on her health has contributed to feelings of anxiety, as have her experience of understanding or recognition of long COVID from other people, clinicians and Government.

"Day to day not knowing how you'll feel when you wake up is exhausting and anxiety inducing. Horse riding, my husband and the long COVID support group have helped me greatly, I'm pleased to be back on the horse and slow[ly] building up my fitness".

Jenna has benefitted from participating in MHF Wales's long COVID peer support group and spoke of the positive effect meeting people with shared experience has had.
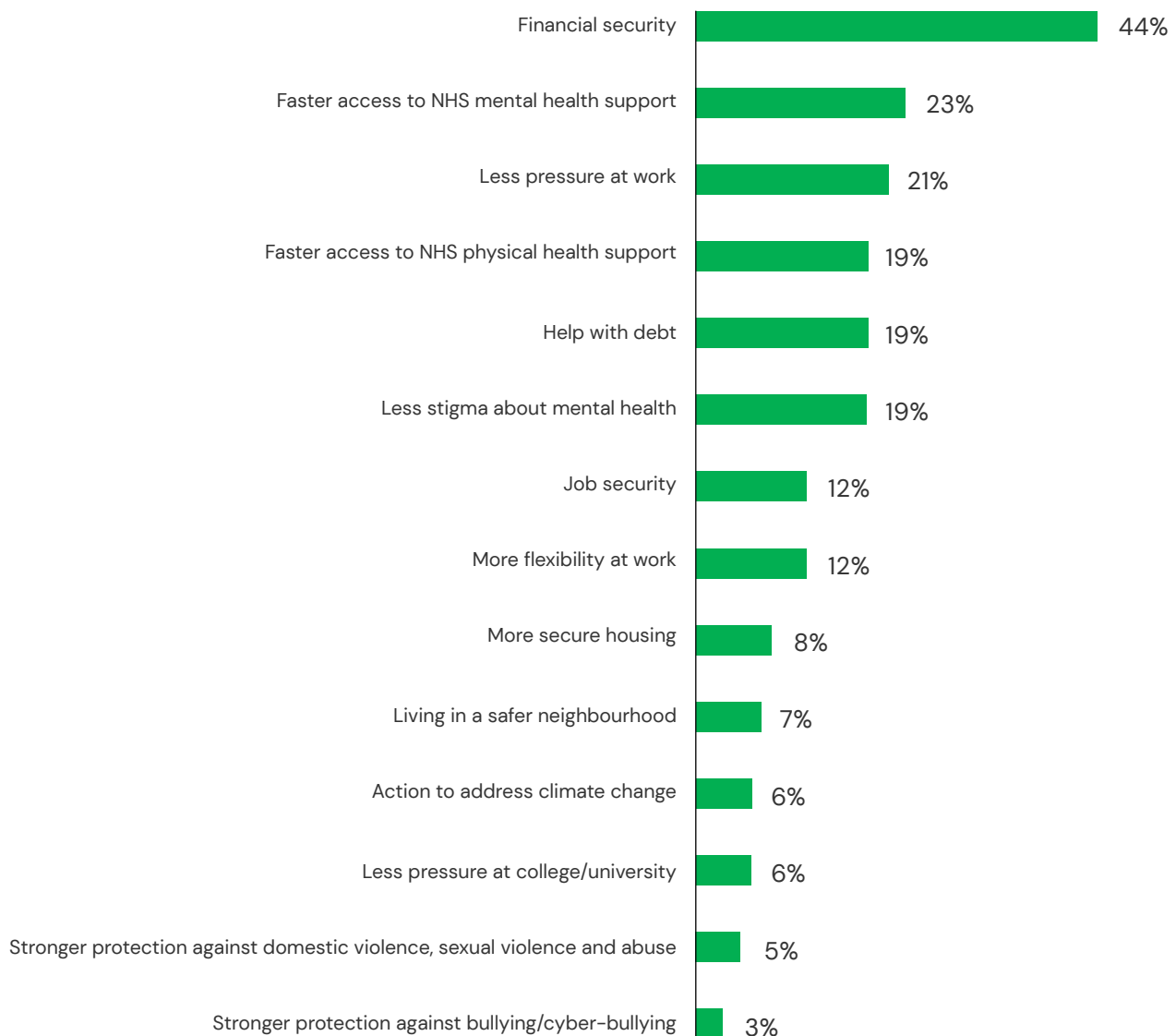
Broader actions to help with anxiety in the population

This briefing has examined the causes of anxiety and illustrated how anxiety can affect many aspects of people's lives, including their education and employment, their social life and pressures, and their personal relationships. It can also affect their overall wellbeing.

In our research we asked all respondents what top three actions would help with their anxiety. Financial security topped the list at 44%.

Top three actions that you think would help with your anxiety?

Action	Percentage
Financial security	44%
Faster access to NHS mental health support	23%
Less pressure at work	21%
Faster access to NHS physical health support	19%
Help with debt	19%
Less stigma about mental health	19%
Job security	12%
More flexibility at work	12%
More secure housing	8%
Living in a safer neighbourhood	7%
Action to address climate change	6%
Less pressure at college/university	6%
Stronger protection against domestic violence, sexual violence and abuse	5%
Stronger protection against bullying/cyber-bullying	3%

What can the Welsh Government and others do to tackle anxiety?

There are actions people can take to help manage their anxiety on their own, but many of the factors influencing anxiety are beyond an individual's control.

National and local governments and others must play an important role in creating the conditions to reduce the risk of experiencing unhealthy anxiety, and not only within the health sector. For example, employers, schools, and colleges/universities have an important role in creating environments that promote and support good mental health. Action to reduce anxiety and promote good public mental health must be a priority across all government departments.
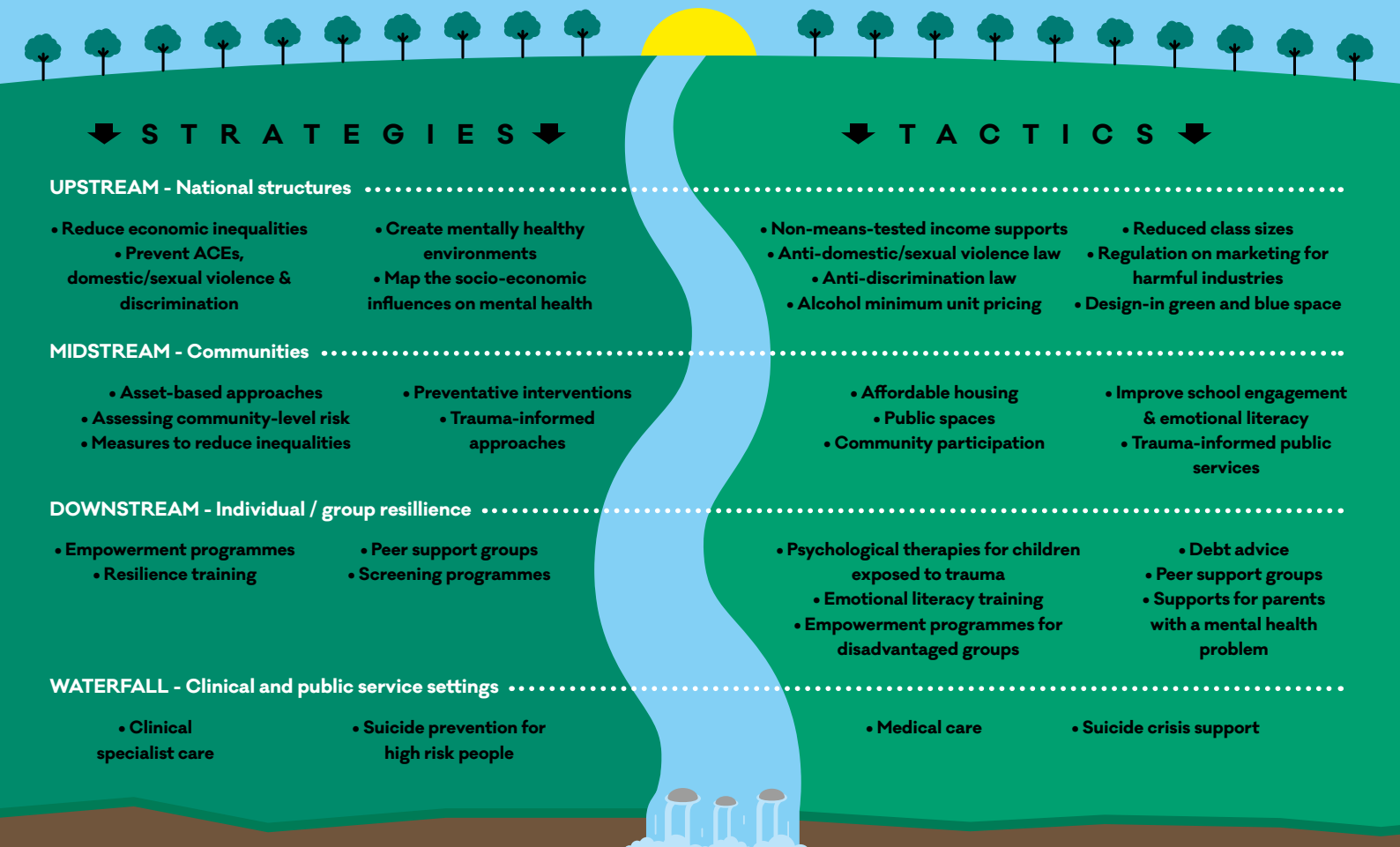
- **We call for the development and delivery of a new 10-year cross-governmental mental health strategy in Wales with a strong focus on prevention and reducing mental health inequalities.**

The preparation of a new mental health strategy for Wales is underway and should be completed as a matter of priority. Good mental health should be the benchmark for a thriving society. We need a mental health strategy in Wales that addresses all the factors which influence mental health at an individual, family, community, and structural level. This would allow for mental health to be considered across a wide range of local policies, services, systems, and datasets that affect the mental health and wellbeing of individuals and communities.

The strategy should be wide-ranging and include action to create safer neighbourhoods, providing well-resourced adult social care and children's services, providing income supports to reduce financial stress and housing supports to eliminate housing insecurity, investment in community groups that reduce isolation and increase peer support, and promoting good mental health by supporting education settings to increase mental health literacy.

We cannot hope to reduce rates of anxiety and poor mental health without addressing its root causes, including tackling inequality. The illustration on page 30 demonstrates how to deliver strategies and tactics at every level to promote good mental health for all.

Tackling inequalities to improve mental health: we need to move upstream

↓ S T R A T E G I E S ↓

UPSTREAM - National structures

- Reduce economic inequalities
- Prevent ACEs, domestic/sexual violence & discrimination
- Create mentally healthy environments
- Map the socio-economic influences on mental health

MIDSTREAM - Communities

- Asset-based approaches
- Assessing community-level risk
- Measures to reduce inequalities
- Preventative interventions
- Trauma-informed approaches

DOWNSTREAM - Individual / group resilience

- Empowerment programmes
- Resilience training
- Peer support groups
- Screening programmes

WATERFALL - Clinical and public service settings

- Clinical specialist care
- Suicide prevention for high risk people

↓ T A C T I C S ↓

UPSTREAM - National structures

- Non-means-tested income supports
- Anti-domestic/sexual violence law
- Anti-discrimination law
- Alcohol minimum unit pricing
- Reduced class sizes
- Regulation on marketing for harmful industries
- Design-in green and blue space

MIDSTREAM - Communities

- Affordable housing
- Public spaces
- Community participation
- Improve school engagement & emotional literacy
- Trauma-informed public services

DOWNSTREAM - Individual / group resilience

- Psychological therapies for children exposed to trauma
- Emotional literacy training
- Empowerment programmes for disadvantaged groups
- Debt advice
- Peer support groups
- Supports for parents with a mental health problem

WATERFALL - Clinical and public service settings

- Medical care
- Suicide crisis support

Source: Mental Health Foundation, Tackling Social Inequalities to Reduce Mental Health Problems (2020)

There is a tendency for governments to focus either on universal campaigns and messages or on targeted interventions for specific at-risk groups. However, both are needed, and they should be adopting a 'universally proportionate' approach. This means ensuring support for everyone, because we all have mental health, but focusing targeted support to address the greater risks that some groups face due to societal inequalities.

Such approaches balance universal action for everyone with targeted action, allocating resources according to levels of need and risk for particular social and economic groups, to achieve the greatest gains for the resources available. In our study, young people, single parents, people who are unemployed, and people with long-term conditions emerged as high-risk groups who need targeted action.

Addressing the cost–of–living crisis

Financial strain and anxiety about being able to pay essential bills is prevalent across the UK. We urge governments to take action to mitigate the negative impact on people's mental health.

- **For people experiencing poverty and/or financial strain, an important preventative intervention is financial support schemes that alleviate financial stress.**

In our survey, 36% of respondents said they had been anxious about being able to pay their bills in the previous two weeks; 44% said that financial security would help prevent anxiety, and this was the highest proportion of any of the solutions offered. Current financial support schemes clearly have not been adequate to prevent financial stress and must be strengthened.

We support the Essentials Guarantee campaign being led by the Joseph Rowntree Foundation and the Trussell Trust, which calls for a level of Universal Credit that provides claimants with enough income for life's essentials. We call upon the Welsh Government to use all powers at its disposal to mitigate the effects of the Cost of Living Crisis and to reduce financial stress in the population.

Also in our survey, 24% of respondents identified debt as the reason for their anxiety, underscoring the need for adequate debt relief schemes. One study found that having an additional–debt account paid off reduces the likelihood of exhibiting anxiety by 11%.[xxv] We previously called for adequate debt relief schemes in our briefing paper on the cost–of–living crisis and mental health (see Mental Health and the Cost–of–Living Crisis Report: Another pandemic in the making? | Mental Health Foundation).

- **Ensure that frontline workers know how to respond effectively to the mental health effects of financial stress and strain.**

Frontline workers have regular contact with individuals who may be experiencing mental distress due to financial stress. It is important to ensure that this communication is a supportive experience for people and does not stigmatise or cause distress. This can be done by building the capacity of frontline workers in a variety of community and service settings to be able to sensitively respond to mental distress and signpost to support. This should include frontline workers in health, social care, money and debt advice services, and antipoverty, and other community organisations, as well as energy companies, water and telecoms services, and private financial services companies.

- **Support community social networks, resources, and resilience. We recommend fast–track access to funding to sustain and grow grassroots organisations or initiatives that are likely to support them.**

Efforts should focus on building up people's assets, rather than focusing on their needs and problems. Assets are strengths that are identified as valuable to a community or family and can be used to make positive changes to their lives. Assets can be physical resources (land, money, buildings), but, more often in public health, assets tend to be psychosocial, such as self–esteem, confidence, knowledge, skills, social networks, and collective value.[xxvi] There is some evidence that asset–based approaches at the community level can improve mental health outcomes such as self–esteem and social isolation.[xxvii]

Investing in cost-effective support

We all need support to live well. We urge national governments, local authorities, and others to commit to programmes and interventions that promote improved relationships and better mental health at home, at work, in education settings, and in communities.

- **Implement at scale programmes and approaches to improve the culture and environment in which people grow, learn, live, and work.**

The Welsh Government should ensure provision at scale of well-evidenced programmes to improve emotional and mental wellbeing and relationships and help prevent the development of mental health problems, including persistent anxiety. These include cost-effective programmes that can create more positive, supportive cultures in which children, young people and adults are living and working, in the family and in workplaces[xxviii]:

- **Providing evidence-based parenting programmes** for the whole population and for those where a specific need for parenting support has been identified. Such programmes can help infants, children, young people, and their parents to thrive within families.[xxix]

In our survey, 25% of respondents cited loneliness as a source of anxiety and 22% cited relationship(s) with family member(s).

- **Encouraging employers to provide access to brief psychological support in the workplace for those who need it,** alongside actions to change workplace cultures so that they promote and protect mental health, in particular improving the knowledge of line managers and workers risks for mental health.[xxx] In our survey 45% of respondents said they wouldn't tell their employer about their anxiety, and 31% said they didn't think their colleagues at work would be sympathetic if they told them they were anxious. Further, 21% said that less pressure at work and 12% said more flexibility at work would help their anxiety.

- **Ensuring consistent implementation of the Whole School Approach to mental health and wellbeing in all primary, secondary, and further education settings.** This approach should include the provision of well-evidenced anti-bullying programmes.[xxxi]

Support

A mental health emergency should be taken as seriously as a medical emergency.

You should seek help if you're struggling to cope with anxiety, fear or panic; or if things you're trying yourself are not helping. You can find a range of sources of help here:

www.mentalhealth.org.uk/explore-mental-health/get-help

See a GP if:

- You're struggling to cope with anxiety, fear or panic.
- Things you're trying yourself are not helping.
- You would prefer to get a referral from a GP.

Urgent advice
ask for an urgent GP appointment or call 111 if:

- You need help urgently, but it's not an emergency.
- You need to see someone. 111 can tell you the right place to get help. Go to NHS 111 online or call 111.

Immediate action required
Call 999 or go to A&E now if:

- You or someone you know needs immediate help.
- You have seriously harmed yourself – for example, by taking a drug overdose.

End notes

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iii https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/feelings-and-symptoms/anxiety-fear-panic/

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