



Epilepsy Scotland Consultation Response

Towards a Mentally Flourishing Scotland: The Future of Mental Health Improvement in Scotland 2008–11

Submitted January 2008

Epilepsy Scotland involves people affected by epilepsy in raising awareness of epilepsy issues and works to ensure that services are developed to meet their varied needs. We welcome the recognition of the relationship between mental and physical health. We agree that it is important to tackle the prevention of mental illness in people with long term conditions. Thank you for this opportunity to comment on the future of the mental health and wellbeing agenda in Scotland.

Feedback: Section 6

We agree that good mental health and poor mental health are not equally distributed across the population. We also believe that specific groups should be targeted in the promotion of mental wellbeing and the prevention of mental health problems.

Feedback: Section 9.2

Epilepsy Scotland welcomes the plan to improve detection of groups at greatest risk of mental health problems and mental illness. We hope that people with epilepsy will become a targeted group. The evidence for this is that depression and suicide are four to five times more common amongst people with epilepsy than the general population. The reasons for this are:

- A psychological reaction to having the condition or to being treated differently because of it.
- Depression can sometimes be a side effect of epilepsy medication.
- Depression can be related to the cause of the epilepsy (brain injury).

- People with epilepsy and other long term conditions are therefore a key target group.

Feedback: Section 8.4.2

Epilepsy Scotland welcome plans to 're-focus' efforts to prevent mental health problems or illness in people that are at higher risk – including people with epilepsy. We would like to see a partnership approach driven by the voluntary sector. The mental health sector and condition specific organisations (such as Epilepsy Scotland) could be brought together to maximize the benefit to people with epilepsy and other long term conditions.

Feedback: Section 9.4

Epilepsy Scotland supports the links made between self management and recovery and believes that this is a vital area for development in order to reduce the severity of symptoms and improve confidence, resourcefulness and self-efficacy. We

Feedback: Section 9.6 and 8.3.3

We support the need for building capacity and mental health literacy within primary care, wider community services and agencies. We would also like to see all key workers trained in the early detection of mental health problems and mental illness in people with long term conditions such as epilepsy. As an organization we have implemented many epilepsy training sessions with key workers and feel it works very well.

Conclusion

Epilepsy Scotland supports the direction of 'Towards a Mentally Flourishing Scotland: the Future of Mental Health Improvement in Scotland 2008-11'.

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