**MEETING 07/09/2018** 

**ASSESSMENT CATEGORY - Improving Londoners' Mental Health** 

Beat Adv: Geraldine Page

Base: Camden

Ref: 14694

Amount requested: £254,676 Benefit: London-wide

Amount recommended: £254,600

## The Applicant

The Eating Disorders Association was formed in 1989 as the result of a merger of two local charities: Anorexic Aid and Anorexic Family Aid. It has grown and developed over time to become Beat, the UK's leading charity supporting people affected by eating disorders and campaigning on their behalf. In recent years it has tripled the number of people it helps and has set an ambitious target to serve 100,000 people a year by 2021. In 2018-19, together with its beneficiaries, it will be reshaping its five-year strategy around three key priorities:

- Early intervention so all sufferers receive good quality treatment as quickly as possible
- Family empowerment so families can effectively support their loved one into, through and after treatment, towards a sustained recovery
- Prevention and cure growing understanding so that prevention and better cures move closer

Beat provides information and support through Helplines which people can call, text or email; a UK-wide network of self help and support groups; online support including information, message boards and online support groups; and Helpfinder, an online directory of support services.

## The Application

The project aims to improve young Londoners' mental health by supporting them into specialist eating disorder treatment in the shortest possible timeframe which is when evidence shows it is the most effective. Beat is requesting funding for a number of strands of activity which together form its 'London Strategy'.

- i. Provide training and ongoing professional telephone support to 540 key professionals across London's 498 secondary schools. This will enable them to spot the early signs of an eating disorder and to support young people and their families to seek and get help as soon as possible after they fall ill.
- ii. Alongside the training, Beat will contact all 1,900 London GPs so they can expect more patients to present with eating disorders, know how best to support them in line with the NICE best practice guidance, and have posters and leaflets to display for young patients and families.
- iii. Recruit 8-10 London based Ambassadors each year to maintain the cohort of 25 Ambassadors (already in place), who have either recovered from an eating disorder or supported or cared for someone. They will support the training by speaking during sessions as well as spreading the message of hope and recovery to young people thought their local boroughs.
- iv. Deliver a London-wide promotion campaign to highlight the early signs of eating disorders, the importance of prompt treatment, and where to get help. This will involve placing news stories and Ambassador case studies in local media, as well as the distribution of online and printed information.

## The Recommendation

Beat is a renowned leader, both nationally and internationally, in the field of eating disorders. Its use of IT and new technologies to communicate with young people and their families is impressive. Their web site had 919,831 visits in 2017/18 and 17,082 people were supported by phone, email, message boards, social media, one-to-one webchat and online support groups. Each element of the project has been piloted elsewhere and the learnings brought together to inform the 'London Strategy'. This is a considerable level of grant request, but it is a significant opportunity to make a real impact across London, on a growing issue and with Beat the charity leader in this area. It fits very well with your programme outcome - more children and young people receiving specialist help, resulting in improved mental health - therefore a grant as requested is recommended:

£254,600 over 3 years (£77,200, £85,000, £92,400) for the London Strategy to support young Londoners affected by eating disorders to begin specialist treatment as early as possible and so achieve a rapid and sustained recovery.

Funding History

| Meeting Date | Decision  |
|--------------|---|
| 20/10/2011   | £111,700 over three years (£38,000; £36,500; £37,200) towards a programme providing targeted support for Londoners who have an eating disorder. |

Background and detail of proposal

Eating disorders include anorexia, bulimia and binge eating disorder. They are serious mental illnesses, which often first occur during adolescence. Symptoms are first recognised under the age of 16 in 62% of cases and around 1.25 million people in the UK suffer from an eating disorder at any one time - and this number increases to at least 5m when family and friends are included. The number of sufferers in London is thought to be between 160,000 and 200,000 people. As the UK's most populous city, and with a higher than average student population, London has the largest group of affected young people. These illnesses seriously disrupt education. employment and relationships, they can destroy someone's future opportunities if they are not recognised and dealt with early. Eating disorders cause both physical and psychological problems and are highly stigmatised. The multifaceted impacts include damage to organ systems, infertility, osteoporosis, type 2 diabetes and difficulty in maintaining relationships. There is also a high risk of suicide. Anorexia has the highest mortality rate of any mental illness, without treatment an estimated 20% of people with Anorexia will die from complications related to it. There is also an enormous impact on family and friends as well as the person affected. Whole families are shaken - with mental illness caused by stress, and divorce both common. We know that the sooner someone seeks and can access treatment. the more likely they are to make a full and sustained recovery, with resulting savings to the public purse. But rapid treatment is difficult, sufferers typically wait for a year or more after recognising their symptoms before seeking help. Sufferers are often turned away, and those that are referred for treatment commonly sit on a waiting list for several months, and sometimes years. The result is that most people experience a cycle of waiting, treatment, partial recovery and relapse. This cycle lasts for six years on average, with many people never fully recovering. GPs are commonly untrained in identifying eating disorders meaning that around half fail to refer.

Unmet need for specialist treatment is a key concern to Beat and all those who work in the field of eating disorders. The proposed schools training and advice to GPs

would aim to close this gap for young people by improving early detection and referral to specialist treatment. Schools and educators can play a significant role in the early identification of eating disorders in children and adolescents as signs and symptoms may be especially apparent in the school environment. Research has highlighted the importance of information and advice being accessible to GPs about identification, safe management and referral of patients with eating disorders.

With mental health inequalities being particularly prevalent in London, this project will increase the number of young people accessing help and support at an earlier stage of their eating disorder. This in turn can reduce the need for costly and in-depth, potentially intrusive treatment. Beat has an existing network of trainers, volunteers and ambassadors which provides a foundation to begin work immediately and upon which it can expand quickly to deliver across London. Its 365 day a year telephone and digital helpline service and comprehensive directory of eating disorder services mean Beat are well placed to support and guide people who respond to this project. The project therefore has the potential to make a real difference to the mental health and quicker access to specialist treatment for young Londoners who are suffering from one of the most traumatic of conditions.

## Financial Information

Beat is funded by a good balance of statutory and charitable sources, supplemented by donations and sponsored events. Beat received legacy income of £3.63 million over the two financial years to March 2015, and is investing these funds in its services, campaigns and fundraising so that it can meet the future needs of the increasing number of people with eating disorders. This also accounts for the higher than usual cost of raising funds. As a result, its expenditure will exceed income until 2018-19, in order to reduce the level of free reserves in line with its current policy.

| Year end as at 31 March                     | 2017 Audited Accounts | 2018<br>Draft | 2019<br>Budget |
|---|-----------------------|---------------|----------------|
|   |                       |               |                |
|   | 2                     | £             | £              |
| Income & expenditure:                       |                       |               |                |
| Income                                      | 1,409,131             | 1,531,377     | 2,182,467      |
| - % of Income confirmed as at 11/7/18       | n/a                   | 100.00%       | 22%            |
| Expenditure                                 | (1,958,575)           | (2,266,480)   | (2,652,297)    |
| Total surplus/(deficit)                     | (549,444)             | (735,103)     | (469,830)      |
| Split between:                              |                       |               |                |
| - Restricted surplus/(deficit)              | (401,835)             | (241,313)     | (172,184)      |
| - Unrestricted surplus/(deficit)            | (147,609)             | (493,790)     | (297,646)      |
|   | (549,444)             | (735,103)     | (469,830)      |
| Cost of Raising Funds                       | 412,086               | 478,187       | 463,277        |
| - % of income                               | 29.2%                 | 31.2%         | 21.2%          |
| Operating expenditure (unrestricted funds)  | 1,280,662             | 1.409.674     | 2,288,076      |
| Free unrestricted reserves:                 |                       |               |                |
| Free unrestricted reserves held at year end | 1 863 580             | 1,369,790     | 1,072,144      |
| No of months of operating expenditure       | 17.5                  | 11.7          | 5.6            |
| Reserves policy target                      | 900,000               | 900,000       | 900,000        |
| No of months of operating expenditure       | 8.4                   | 7.7           | 4.7            |
| Free reserves over/(under) target           | 963,580               | 469,790       | 172,144        |

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