



Uned 443 - Deall ffactorau sy'n
cyfrannu at unigolion a/neu ofalwyr
sydd angen gofal a chymorth

Unit 443 - Understanding factors that
contribute to individuals and/or carers
needing care and support

Learning outcome: 5. Understand mental ill-health



Mae'r adnodd hwn wedi'i ddatblygu mewn partneriaeth â'r Consortiwm Ymarferwyr Gwasanaethau Cymdeithasol (SSP) ar ran Gofal Cymdeithasol Cymru. Mae'r consortiwm yn cynnwys y partneriaid canlynol:

This resource has been developed in partnership by the Social Services Practitioner (SSP) Consortium on behalf of Social Care Wales. The consortium is made up of the following partners:



Gofal Cymdeithasol Cymru a'i gyngorwyr penodedig sy'n berchen ar hawlfraint y deunyddiau hyn. Gall darparwyr dysgu, awdurdodau lleol a darparwyr gwasanaethau gofal yng Nghymru gopïo, atgynhyrchu, dosbarthu neu drefnu bod y Rhaglen Ddysgu Ymarferwyr Gwasanaethau Cymdeithasol (SSP) ar gael fel arall i unrhyw drydydd parti arall ar sail ddielw yn unig. Rhaid i unrhyw bartïon eraill sy'n dymuno copïo, atgynhyrchu, dosbarthu neu fel arall wneud y Rhaglen Ymarferwyr Gwasanaethau Cymdeithasol (SSP) ar gael i unrhyw drydydd parti arall geisio caniatâd ysgrifenedig Gofal Cymdeithasol Cymru ymlaen llaw.

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Sgiliau Astudio / Study Skills



Cyfeirnod / Referencing



Darllen / Reading



Ysgrifenu / Writing



Myfyrdod Beirniadol /
Critical Reflection



Cyfathrebiad /
Communication



Gwaith Grŵp / Group Work



Cyflwyniad / Presentation



Ymchwil / Research



Sgiliau rhyngpersonol /
Interpersonal Skills



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Yn ôl ym
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Sgiliau Astudio Cudd / Hidden Study Skills

Peidiwch ag anghofio bod amrywiaeth o sgiliau wedi'u gwreiddio, gan gynnwys...

Trefniadaeth

Cadw amser

Cynllunio

Cymryd nodyn

Cynllunio Traethawd

Gwrandawriad

Datrys problemau

Penderfyniadau

Cwestiynu

Siarad yn effeithiol

Cyfathrebu llafar

Efallai y bydd rhai o'r rhain yn rhan o'ch sgiliau rhyngpersonol hefyd.

Don't forget there are a range of skills embedded including...

Organisation

Time keeping

Planning

Note taking

Essay planning

Listening

Problem solving

Decision making

Questioning

Effective speaking

Verbal communication

Some of these may form part of your Interpersonal Skills too.

Meini prawf asesu

Rydych yn deall:

- 5.1 Beth yw ystyr y term 'afiechyd meddwl'
- 5.2 Mathau o broblemau iechyd meddwl a'r symptomau y gall unigolion eu profi
- 5.3 Ffactorau a all ddylanwadu ac effeithio ar les unigolyn ac a all arwain at gyfnod o afiechyd meddwl
- 5.4 Arwyddion a symptomau posibl afiechyd meddwl
- 5.5 Yr ystod o wasanaethau, asiantaethau a gweithwyr proffesiynol sy'n darparu cymorth i unigolion sy'n profi afiechyd meddwl
- 5.6 Modelau a dulliau y gellir eu defnyddio i gefnogi cyfathrebu ac ymgysylltu effeithiol ag unigolion sy'n byw gydag afiechyd meddwl

Assessment criteria

You understand:

- 5.1 What is meant by the term 'mental ill-health'
- 5.2 Types of mental health problems and the symptoms that individuals may experience
- 5.3 Factors that can influence and affect an individual's well-being and may result in a period of mental ill-health
- 5.4 Potential signs and symptoms of mental ill-health
- 5.5 The range of services, agencies and professionals which provide support for individuals experiencing mental ill-health
- 5.6 Models and approaches that can be used to support effective communication and engagement with individuals living with mental ill-health

5.1 Diffinio afiechyd meddwl

Pan glywch chi'r geiriau afiechyd meddwl, rhestrwch gynifer o eiriau ag y gallwch chi feddwl amdany'n nhw yr ydych yn cysylltu â'r term

Defnyddiwch eich dyfeisiau i ddod o hyd i **ddiffiniad dibynadwy** ac ymarfer defnyddio cyfeirnod.

5.1 Defining mental-ill health

When you hear the words mental ill-health list as many words as you can think of that you associate with the term

Use your devices to find a **reliable definition** and practice using referencing.



5.1 Diffinio afiechyd meddwl

Yn ôl Sefydliad Iechyd y Byd

"Mae iechyd yn gyflwr o les corfforol, meddyliol a chymdeithasol cyflawn ac nid dim ond absenoldeb afiechyd neu lesgedd."

Felly, mae iechyd meddwl yn fwy na dim ond absenoldeb anhwylderau neu anabledau meddyliol.

Mae iechyd meddwl yn gyflwr o les lle mae unigolyn yn sylweddoli ei alluoedd ef/hi ei hun, yn gallu ymdopi â straen arferol bywyd, yn gallu gweithio'n gynhyrchiol ac yn gallu cyfrannu at ei gymuned/chymuned.

5.1 Defining mental ill-health

According to The World Health Organisation

"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."

Therefore, mental health is more than just the absence of mental disorders or disabilities.

Mental health is a state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.



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5.1 Diffinio afiechyd meddwl

Mae problemau iechyd meddwl yn amrywio o bryderon a gofidiau dyddiol i iselder difrifol a meddyliau hunanladdol.

Mae llawer o unigolion yn cael problemau a phryderon iechyd meddwl o bryd i'w gilydd.

Mae problem iechyd meddwl yn dod yn anhwylder neu'n enghraifft o **afiechyd meddwl** pan fydd iddo arwyddion a symptomau parhaus sy'n achosi tralod sylweddol ac yn effeithio ar weithrediad o ddydd i ddydd. Mae'n effeithio ar y ffordd y mae unigolion yn teimlo, yn ymddwyn ac yn rhyngweithio ag eraill. Gall rhai cyfnodau o afiechyd meddwl fod yn rhai dros dro tra bod eraill yn achosi anawsterau parhaus a hirdymor.

(CBAC, 2019)

5.1 Defining mental ill-health

Mental health problems range from daily worries and anxieties to serious depression and suicidal thoughts.

Many individuals have mental health problems and worries from time to time.

A mental health problem becomes a disorder or an example of **mental ill-health** when it has ongoing signs and symptoms which cause **considerable distress and affects day-to-day functioning. It affects the way that individuals feel, behave and interact with others.** Some periods of mental ill-health may be temporary while others cause persistent and long-term difficulties.

(WJEC, 2019)

5.1 Diffinio afiechyd meddwl

Ar unrhyw un adeg bydd **1 o bob 4** o bobl yn y DU yn profi afiechyd meddwl.

Nid oes gan bob unigolyn sy'n profi problemau afiechyd meddwl ddiagnosis o anhwylder meddwl.

Mae ystod eang o ddiagnosisau, pob un â'i feini prawf diagnostig ei hun sydd wedi'u dosbarthu gan Sefydliad Iechyd y Byd:

<https://www.who.int/classifications/icd/icdonlineversions/en/>

Nid yw pawb yn cytuno bod defnyddio diagnosis i ddeall neu ddisgrifio trallod ac afiechyd meddwl yn ddefnyddiol.

Trafodwch – pam y gallai hyn fod yn wir?

5.1 Defining mental ill-health

At any one time **1 in 4** people in the UK will be experiencing mental ill-health.

Not all individuals who are experiencing mental ill-health problem have a diagnosed mental disorder.

There are a wide range of diagnoses, each with their own diagnostic criteria which have been classified by the World Health Organisation:

<https://www.who.int/classifications/icd/icdonlineversions/en/>

Not everyone agrees that using diagnoses to understand or describe mental distress and ill-health is helpful.

Discuss – why might this be?

5.2 Mathau o broblemau iechyd meddwl a'r symptomau y gall unigolion eu profi

5.2 Types of mental health problems and the symptoms that individuals may experience

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/mental-health-problems-introduction/types-of-mental-health-problems/>



WELSH

Cyswllt Fideo – <https://www.mind.org.uk/information-support/types-of-mental-health-problems/mental-health-problems-introduction/types-of-health-problems/>

ENGLISH

Video Link - <https://www.mind.org.uk/information-support/types-of-mental-health-problems/mental-health-problems-introduction/types-of-health-problems/>



Beth sy'n cyfrannu at afiechyd meddwl?

What contributes to mental ill-health

Mae 1 o bob 4 oedolyn yn profi problemau iechyd meddwl ar ryw adeg yn ystod eu bywyd



1 in 4 adults experience mental health problems at some point during their lifetime.

5.3 Influencing factors

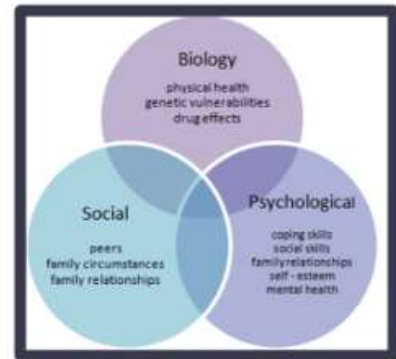
Many factors can contribute to developing mental ill-health including work, diet, drugs and lack of sleep, however if an individual experiences mental ill-health there are usually other factors as well.

Factors can be divided into three main categories - biological, psychological and environmental/social

5.3 Ffactorau dylanwadol

Gall llawer o ffactorau gyfrannu at ddatblygu afiechyd meddwl gan gynnwys gwaith, diet, cyffuriau a diffyg cwsg, fodd bynnag os yw unigolyn yn profi afiechyd meddwl mae ffactorau eraill yn bodoli hefyd fel arfer.

Gellir rhannu ffactorau yn dri phrif gategori - biolegol, seicolegol ac amgylcheddol/cymdeithasol



Biolegol
iechyd corfforol
breusrwydd genetig
effeithiau cyffuriau
Cymdeithasol
cymheirjaid
amgylchiadau teuluol
perthnasoedd teuluol
Seicolegol
sgiliau ymdopi
sgiliau cymdeithasol
perthnasoedd teuluol
hunan-barch
iechyd meddyl

Trefnwch ffactorau yn categorïau

Arrange factors into category

Amcangyfrifir mai cyfanswm cost problemau iechyd meddwl yng Nghymru yw £7.2 biliwn y flwyddyn



The total cost of mental health problems in Wales has been estimated at £7.2 billion a year.

5.4 Arwyddion a symptomau afiechyd meddwl

Mewn paruau neu grwpiau bach, defnyddiwch adnoddau dibynadwy i ymchwilio i **arwyddion a symptomau** un o'r anhwylderau isod.

- Iselder
- Gorbryder
- Problemau tai
- Sgitsoffrenia
- Anhwylder Obsesiynol Cymhellol
- Anhwylder Personoliaeth
- Anhwylder deubegynol

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/mental-health-problems-introduction/types-of-mental-health-problems/>

5.4 Signs and symptoms of mental ill-health

In pairs or small groups, use reliable resources to research the **signs and symptoms** of one of the disorders below.

- Depression
- Anxiety
- Eating problems
- Schizophrenia
- Obsessive Compulsive Disorder
- Personality Disorder
- Bipolar disorder

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/mental-health-problems-introduction/types-of-mental-health-problems/>

5.5 Gwasanaethau, asiantaethau a gweithwyr proffesiynol sy'n darparu cymorth i unigolion sy'n profi afiechyd meddwl

Mae amrywiaeth o wasanaethau a chymorth i deuluoedd.

Gallai'r rhain gynnwys - iechyd, asiantaethau tai, Awdurdod Lleol, addysg, gwasanaethau cyfiawnder (e.e. yr heddlu, tîm troseddau ieuenctid, gwasanaethau prawf) sefydliadau trydydd sector (e.e. Gweithredu dros Blant, Canolfan Cyngor ar Bopeth, NSPCC, Barnardos, Cymorth i Fenywod, CAIS, Shelter Cymru), cyngorwyr budd-daliadau, eiriolwyr teulu, gweithwyr gofal plant, gweithwyr gofal cymdeithasol, gweithwyr cymdeithasol

5.5 Services, agencies and professionals which provide support for individuals experiencing mental ill-health

There are a range of services and support for families.

This could include - health, housing agencies, Local Authority, education, justice services (eg police, youth offending team, probation services) third sector organisations (eg, Action for Children, Citizens Advice Bureau, NSPCC, Barnardos, Women's Aid, CAIS, Shelter Cymru), benefits advisors, family advocates, childcare workers, social care workers, social workers



Cynllunio

Mae'r broses gynllunio yn cynnwys cynlluniau a allai fod yn **Gynllun Gofal a Thriniaeth o dan Fesur Iechyd Meddwl (Cymru) 2010**, neu yn **Gynllun Gofal a Chymorth o dan Ddeddf Gwasanaethau Cymdeithasol a Llesiant 2014**.

Byddai'r rhain yn cynnwys nodi **nodau neu ddeilliannau** a galluogi cyfranogiad mewn gweithgareddau, triniaeth, monitro, adolygu a gwerthuso cynlluniau.

Mae cynllun personol yn nodi anghenion gofal unigolyn, y mathau o wasanaethau y bydd yn eu derbyn i ddiwallu'r anghenion hynny, pwy fydd yn darparu'r gwasanaethau a phryd.

Planning

The planning process involves plans which could be either a **Care and Treatment Plan under the Mental Health (Wales) Measure 2010**, or a **Care and Support Plan under the Social Services and Well-being Act 2014**.

These would include identifying **goals or outcomes** and enabling participation in activities, treatment, monitoring, reviewing and evaluating plans.

A personal plan identifies an individual's care needs, the types of services they will receive to meet those needs, who will provide the services and when.



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Cydgynhyrchu

Mae Rhwydwaith Cydgynhyrchu Cymru yn diffinio 'cydgynhyrchu' fel:

Dull sy'n seiliedig ar asedau at wasanaethau cyhoeddus sy'n galluogi pobl sy'n darparu ac yn derbyn gwasanaethau i rannu pŵer a chyfrifoldeb, ac i gydweithio mewn perthnasoedd cyfartal, dwyochrog a gofalgar.

Mae'n creu cyfleoedd i bobl gael cymorth pan fydd ei angen arnynt, ac i gyfrannu at newid cymdeithasol.

Co-production

The Co-production Network for Wales defines 'co-production' as:

An asset-based approach to public services that enables people providing and receiving services to share power and responsibility, and to work together in equal, reciprocal and caring relationships.

It creates opportunities for people to access support when they need it, and to contribute to social change.

5.6 Modelau a dulliau o gefnogi cyfathrebu ac ymgysylltu effeithiol ag unigolion sy'n byw gyda afiechyd meddwl

Enghraifft 1 – Y model adferiad

Mae'r model adferiad yn ddull cyfannol, sy'n canolbwyntio ar yr unigolyn, tuag at ofal iechyd meddwl ac mae'n dod yn fodel safonol ar gyfer gofal iechyd meddwl.

Mae'r model adferiad yn seiliedig ar ddau syniad syml; yn gyntaf, mae'n bosibl gwella o afiechyd meddwl ac mae'r adferiad mwyaf effeithiol yn cael ei gyfeirio gan y claf. Yn ail, nod y model adferiad yw helpu unigolion â salwch meddwl i edrych y tu hwnt i oesoedd a bodoli yn unig.

Mae'r model yn annog unigolion i symud ymlaen a gosod nodau newydd. Mae'r model yn cefnogi'r farn y dylai unigolion wneud eu gorau i fwrw ymlaen â'u bywydau, gwneud pethau a datblygu perthnasoedd sy'n rhoi ystyr i'w bywydau.

Nod y model adferiad yw annog datblygu sgiliau a hybu annibyniaeth ac ymreolaeth, gan roi gobaith i'r dyfodol i bobl ag afiechyd meddwl, hybu byw'n llwyddiannus yn y gymuned a dinasyddiaeth bwrpasol.

5.6 Models and approaches to support effective communication and engagement with individuals living with mental ill-health

Example 1 – The recovery model

The recovery model is a holistic, person-centered approach to mental health care and is becoming the standard model for mental health care.

The recovery model is based on two simple ideas; firstly, it is possible to recover from mental ill-health and the most effective recovery is patient-directed. Secondly, the recovery model aims to help individuals with mental ill-health to look beyond just survival and existence.

The model encourages individuals to move forward and set new goals. The model supports the view that individuals should try their best to get on with their lives, do things and develop relationships that give their lives meaning.

The recovery model aims to encourage skills development and promote independence and autonomy, serving to give people with mental ill-health hope for the future, promote successful community living and purposeful citizenship.

5.6 Modelau a dulliau o gefnogi cyfathrebu ac ymgysylltu effeithiol ag unigolion sy'n byw gyda'r afiechyd meddwl

Enghraifft 2 – Rhagnodi cymdeithasol

Mae rhagnodi cymdeithasol yn golygu bod meddygon, meddygon teulu, nyrsys a gweithwyr iechyd proffesiynol eraill yn cyfeirio unigolion at ystod o wasanaethau lleol, anghlinigol ee dosbarthiadau ymarfer corff neu ddysgu mewn grŵp. Mae'n ceisio mynd i'r afael ag anghenion unigolyn yn gyfannol, gan gydnabod ystod o ffactorau cymdeithasol, amgylcheddol ac economaidd.

Nod rhagnodi cymdeithasol yw mynd i'r afael ag anghenion unigolion ar draws meysydd fel gweithgarwch corfforol, diet a maeth, iechyd meddwl a chymorth cymdeithasol. Cyfeirir ato'n aml fel dull 'mwy na meddyginiaeth' at iechyd a lles yn seiliedig ar y ffaith y gellir atal y mwyafrif o gyflyrau hirdymor trwy newidiadau syml i'ch ffordd o fyw.

5.6 Models and approaches to support effective communication and engagement with individuals living with mental ill-health

Example 2 – Social prescribing

Social prescribing involves Doctors, GPs, nurses and other health professionals referring individuals to a range of local, non-clinical services e.g. exercise classes or group learning. It seeks to address an individuals' needs holistically, recognising a range of social, environmental and economic factors.

Social prescribing aims to address an individuals' needs across areas such as physical activity, diet and nutrition, mental health and social support. It is often referred to as a 'more than medicine' approach to health and well-being based on the fact that the majority of long-term conditions can be prevented by simple lifestyle changes.

Gweithgaredd ymchwil

DISGRIFIWCH - Gwasanaethau ymchwil sydd ar gael yn eich ardal sy'n cefnogi unigolion sy'n profi afiechyd meddwl.

EGLURWCH – Gan ddefnyddio'r wybodaeth a ddarperir ganddynt ar eu gwefan neu drwy drefnu ymweliad rhwydweithio â'r gwasanaeth esboniwch un model y maent yn ei ddefnyddio i gefnogi defnyddwyr gwasanaeth

GWERTHUSWCH – Defnyddiwch ymchwil ac ystadegau i werthuso effeithiolrwydd y model. Ystyriwch beth sy'n gweithio'n dda a lle mae meysydd i'w datblygu

Research activity

DESCRIBE - Research services available within your area that support individuals experiencing mental ill health.

EXPLAIN – Using the information they provide on their website or via arranging a networking visit to the service explain one model that they use to support service users

EVALUATE – Use research and statistics to evaluate the effectiveness of the model. Consider what works well and where there are areas for development

Diolch
Thank you
