

## 7.24 Adult mental health and wellbeing

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Mental illness encompasses a range of illnesses spanning common conditions such as depression, anxiety and phobia, through to what were once called serious and enduring mental illnesses. This includes conditions such as psychosis and schizophrenia.

This section gives an overview of mental health and wellbeing in Barking and Dagenham. There is an increasing amount of local information that is supporting the transformation of mental health services locally. Firstly, in 2013, the Health and Adult Services Select Committee reviewed the impact of the recession and welfare reforms on mental health<sup>1</sup> and an action plan was developed, based on the recommendations<sup>2</sup>. In 2014, the Government released “Closing the Gap”<sup>3</sup> looking at priorities for changes needed in mental health services in the UK. In 2015 the Health and Wellbeing Board approved a full Mental Health Needs Assessment<sup>4</sup>.

These four pieces of work, along with recommendations from the 2013 annual public health report (LBBB, Health and Adult Services Select Committee, 2013) and the Barking and Dagenham Integrated Care Coalition’s 5 year strategy plan<sup>5</sup> will be used to inform the future direction for mental health in the borough.

Data for - 2014/15 from the Mental Health Minimum Dataset (MHMDS) provided by the Health and Social Care Information Centre (HSCIC) show that -295 adult residents of Barking and Dagenham were admitted as inpatients for mental health care, while - 4610 used adult secondary mental health services. Highest levels of secondary care demand are for the seriously mentally ill<sup>6</sup>.

The Quality Outcomes Framework contains numbers of patients with serious mental illness (referred to under a generic term “mental health”) and patients with depression. Serious mental illness refers to schizophrenia, bipolar affective disorder and other psychoses. Figure 7.24.1 shows just under one in a thousand (or 0.76%) of residents registered by GPs as seriously mentally ill in 2013/14 with slightly

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<sup>1</sup> LBBB, Health and Adult Services Select Committee, 2013 [online] available from: <http://moderngov.barking-dagenham.gov.uk/documents/s73097/Update%20Report%20-%20Scrutiny%20Review%20on%20the%20Impact%20of%20the%20Recession%20and%20Welfare%20Reforms%20on%20Mental%20Health.pdf> [accessed: 4 August 2015]

<sup>2</sup> LBBB-Health & Adult Services Select Committee. 2013. Review on the potential impact of the recession and Welfare Reforms on Mental Health. London Borough of Barking and Dagenham. Available at: <http://moderngov.barking-dagenham.gov.uk/documents/s76607/MH%20Scrutiny%20report%20DRAFT%20v1.11%20FINAL.pdf> [accessed 4 August 2015]

<sup>3</sup> DoH, 2014. ‘Closing the gap: priorities for essential change in mental health [online] available from: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/281250/Closing\\_the\\_gap\\_V2\\_-\\_17\\_Feb\\_2014.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281250/Closing_the_gap_V2_-_17_Feb_2014.pdf) [accessed 4 August 2015]

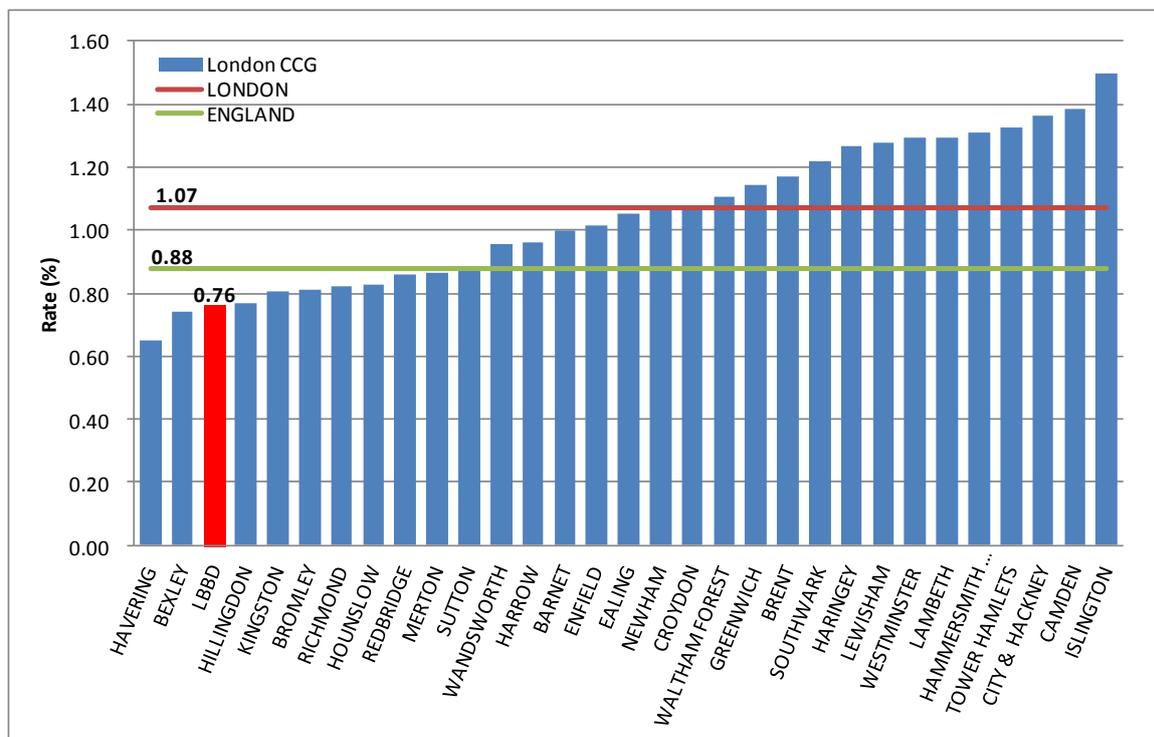
<sup>4</sup> Cole M. 2013. Director of Public Health Annual Report: Making the healthier choices the easier choice for all. London Borough of Barking and Dagenham. Available at: <http://www.lbbd.gov.uk/Health/Documents/Director%20of%20Health%27s%20Annual%20Report%202013.pdf> [accessed 4 August 2015]

<sup>5</sup> BHR. 2014. Integrated Care Coalition: Strategic Plan final submission. Barking and Dagenham, Havering and Redbridge CCGs, University Trust and North East London Foundation Trust.

<sup>6</sup> HSCIC, Mental Health Bulletin, Annual Report - 2014-15, October 2015 [Online] available from: <http://www.hscic.gov.uk/catalogue/PUB18808> [Last accessed: 4th May 2016]

decrease (-0.08%) in 2014/15 <sup>7</sup>. The London wide level of serious mental illness in 2014/15 increased by 2.14% (to 1.07%) compared to the previous year. Registration of serious mental illness locally may be less than expected in view of levels in other London boroughs with similar levels of deprivation.

**Figure 7.24.1: Prevalence of Serious Mental Illness, Percent, London CCGs, London and England Average, - 2014/15**



Source: HSCIC

Nearly 1 in 5 adults in the UK experience anxiety or depression, according to figures from the Office for National Statistics<sup>8</sup>. A higher proportion of women than men suffer from these conditions, with the highest indication of anxiety or depression occurring in the 50-54 age groups. Numbers being treated for depression in primary care are lower: around 4.14% in 2014/15 of adults in Barking and Dagenham (with 9.5% increase compared to 3.8% in 2013/14).

Specifically QOF data for 2014/15 show 6,158 people from the local CCG responsible population to be registered with depression. Prevalence is lower than the England average (7.33%), and also lower than the London average (5.33%)<sup>9</sup>. In the most recent period with available data (quarter 3, 2014/15), 34000 antidepressant items were prescribed by Barking and Dagenham GPs<sup>10</sup> at a cost of £120,000. This translates to an annual total of 135000 items, close to 1 item per head of adult population.

<sup>7</sup> <http://www.hscic.gov.uk/qof>

<sup>8</sup> ONS, 2013. 'Measuring National Well-being - Health, 2013' [online] available from: [http://www.ons.gov.uk/ons/dcp171766\\_310300.pdf](http://www.ons.gov.uk/ons/dcp171766_310300.pdf) [accessed 4 August 2015]

<sup>9</sup> HSCIC 2015, Quality and Outcomes Framework (QOF) - 2014-15, [Online] available from: <http://www.hscic.gov.uk/catalogue/PUB18887> [Last accessed; 4th May 2016]

<sup>10</sup> HSCIC. Clinical Commissioning Group Prescribing Data - October to December 2014

## **Accommodation and employment for people with mental illness**

Mental health problems are recognised as both a cause and outcome of social exclusion, which can affect all other aspects of life including housing and employment. In recognition of, and in an attempt to improve this, the Government made it a priority to increase the number of people with mental illness who were in settled accommodation. That is, that they were not in a hostel or temporary accommodation, but where they were living, they had security of tenure. For LBBB this figure stands at 91% in 2013/14, above the England average (61%), the average for London boroughs (80%)<sup>11</sup>.

Proportion of working age (18-64) service users in LBBB who received long-term support during the year with a primary support reason of learning disability, who are living on their own or with their family for 2014/15 was 91%, compared to 69.1% for London and 73.3% for England. These figures in the same order for 2013/14 was 85.3%, 68.6% and 74.9%, show a 5.5% increase for LBBB, 0.5% increase for London and 1.6% decrease for England<sup>12</sup>.

On the other hand access to paid employment is problematic. A DWP review "Is work good for your health and wellbeing"<sup>13</sup> concluded that work was generally good for both physical and mental health and wellbeing. With around 3.2% of mental health patients in paid employment (compared to an England figure of 6%) in 2014/15, the gap in employment between this group and the rest of the population remains wide in Barking and Dagenham<sup>14</sup>.

## **Projecting future needs for mental health services**

It is expected that there will be an increase in numbers of people needing to access mental health services in the coming years. Based on a 1.8% rate of secondary service use in 2013/14 taken from the MHMDS, locally modelled estimates predict that the number will increase by 20% by 2025 (Table 7.24.1).

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<sup>11</sup> HSCIC. Adult Social Care Outcomes. <http://ascof.hscic.gov.uk/>

<sup>12</sup> HSCIC, October 2015, "Measures from the Adult Social Care Outcomes Framework (ASCOF), England 2014-15", Table 1G, [Online] available from: <http://www.hscic.gov.uk/catalogue/PUB18657> [Last accessed: 4 May 2016]

<sup>13</sup> Waddell G and Burton AK. 2006. Is work good for your health and well-being? London: The Stationery Office Available at : [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/214326/hwwb-is-work-good-for-you.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/214326/hwwb-is-work-good-for-you.pdf)

<sup>14</sup> Adults in contact with mental health services who are in paid employment (HSCIC. Adult Social Care Outcomes. <http://ascof.hscic.gov.uk/> )

**Table 7.24.1: Projected number of clients accessing mental health services, Barking and Dagenham, 2014-2025**

Year	Estimated/ Projected population	Projected number of people accessing mental health services [1]	Projected number of patients on Mental Health Register [2]
2014	199,990	3,500	1,562
2015	204,335	3,576	1,596
2016	208,576	3,650	1,629
2017	212,709	3,723	1,661
2018	216,365	3,787	1,690
2019	219,916	3,849	1,718
2020	223,361	3,909	1,745
2021	226,707	3,968	1,771
2022	229,952	4,024	1,796
2023	233,095	4,079	1,821
2024	236,112	4,132	1,844
2025	239,028	4,183	1,867

Source: GLA SHLAA 2013 population estimates.

[1] Projected from number of clients accessing services (1.8% rate for 2013/14)

[2] Based on Quality and Outcomes Framework (QOF) GPs Register, with a borough prevalence of 0.78% in 2013/14.

### **Older populations: mental health services for those over the age of 65 years**

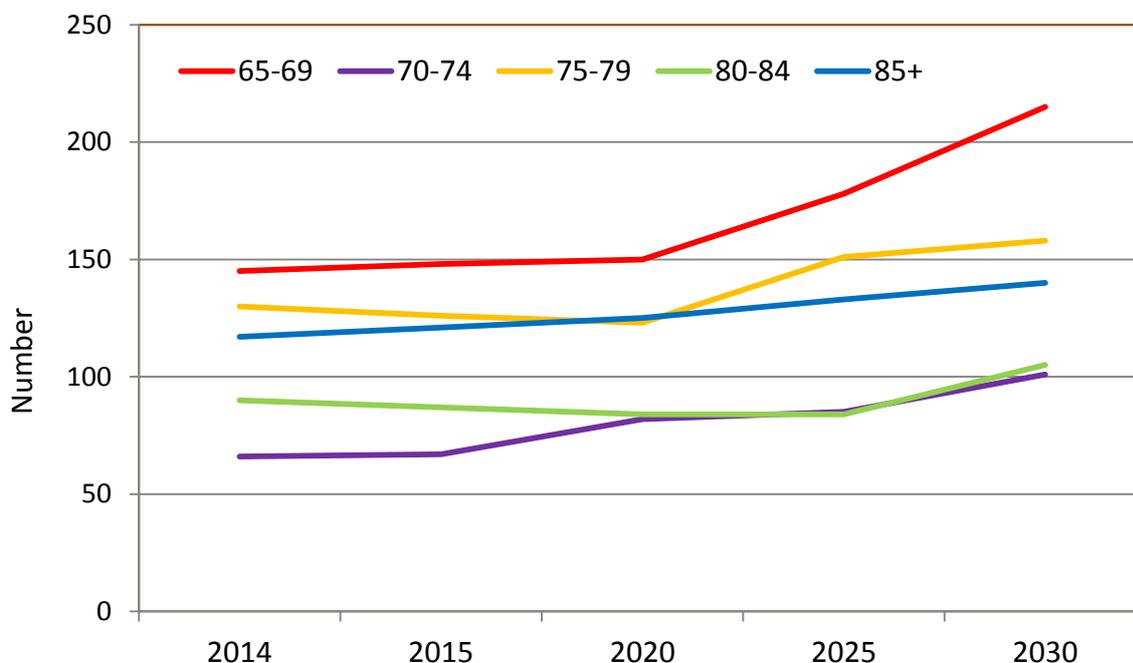
Older people (aged over 65 years) may have additional needs and experience poor outcomes if those needs are not met. Depression is more common in older women than older men in Barking and Dagenham (Table 7.24.2). The number of cases of severe depression is projected to increase among residents aged 65-69 (Figure 7.24.2) as the population in this age group grows over the coming years.

**Table 7.24.2: Estimated prevalence of depression and severe depression in adults aged over 65, Barking and Dagenham, 2015<sup>15</sup>**

Age range	% people diagnosed with depression		% people diagnosed with severe depression
	% males	% females	
65-69	5.8%	10.9%	2.5%
70-74	6.9%	9.5%	1.6%
75-79	5.9%	10.7%	3.5%
80-84	9.7%	9.2%	3.0%
85+	5.1%	11.1%	3.9%

Source: POPPI – Projecting Older People Population Information system (POPPI).

**Figure 7.24.2: Patients aged over 65 years with severe depression, by age, Barking & Dagenham, projected to 2030**



Source: Older People Population Information system (POPPI)

Dagenham, Chadwell Heath and Whalebone wards have higher numbers of people aged 65 and over, so services in these areas need to anticipate care needs for over 65s. Although only a small increase in the size of this population across the borough is predicted over the next five years, it is important that service provision takes into consideration the needs of especially vulnerable residents.

<sup>15</sup> Based on a study by McDougall et al, Prevalence of depression in older people in England and Wales: the MRC CFA.

## **Inequalities in mental health**

The risk to a person's mental health varies by factors such as gender, age and ethnicity. Women are more likely to experience common mental health problems and to attempt suicide; however men are more likely to actually commit suicide. One Scottish study<sup>16</sup> on the incidence of severe mental illness, gives a figure of between 11 and 24 per 100,000 for the total population, depending on the definition used. However, men had a higher incidence than women (210 versus 60 per 100,000) at ages 15 to 24, and again at ages 25 to 34 (440 versus 175 per 100,000).

Nationally there are differences in the experience of mental illness in people from BME groups, which is suggested to be due in part to the over-representation of people of Afro-Caribbean origin in poorer socioeconomic groups. Locally, there are large ethnic inequalities in admissions to adult psychiatric inpatient services. The admission rate for White ethnic groups in Barking and Dagenham is 24% higher than the England average for all ethnic groups, whilst the admission rate for Black ethnic groups in Barking and Dagenham is 54% higher than the England average.

Considerable evidence is emerging of the impact of inequalities on mental health, but the relationship between these factors is not well understood. Although certain social circumstances may lead to mental health problems, it is also likely that experiences of long-term and severe forms of mental illness will impact on the socioeconomic status of individuals and so there is reverse causality. Employment is a major factor in a person's wellbeing, and loss of employment and the financial security employment brings is associated with higher rates of mental and physical ill health. Unemployment in men of working age is a very significant factor in the development of depression and suicide.

## **Recommendations for Commissioners**

Along with the information included in this section of the JSNA, in order to ensure a robust systematic approach is taken to improving both mental health and appropriate support services in the borough, the following workstreams need to be integrated:

- Health and Adult Services Select Committee action plan
- "Closing the Gap" assessment and remedial action
- Mental Health Needs Assessment findings
- Crisis care concordat
- The 2013 Annual Public Health Report recommendations
- The Barking and Dagenham Integrated Care Coalition's 5 year strategy plan recommendations and BHRCCG mental health commissioning framework. This will be co-ordinated through the Mental Health Subgroup of the Health and Wellbeing Board.

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<sup>16</sup> Geddes, J., Black, R., Whalley, L. et al "Persistence in the decline in the diagnosis of schizophrenia among first admissions to Scottish Mental Hospitals from 1969 to 1988" British Journal of Psychiatry 1993; 163, 620.