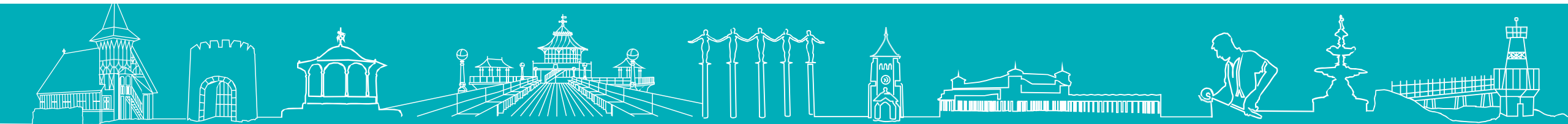# Adult Mental Health & Wellbeing

A Needs Assessment for the North Somerset Population aged over 18 years

Lewis Peake, StR Public Health; Georgie MacArthur, Consultant in Public Health

Development of the MHNA

- Quantitative data from range of national, regional and local data sets

- Patient-public involvement via secondary use of data

- Engagement with the North Somerset Mental Health Strategy Board

Scope

- Adults only - common mental health disorders, severe mental illness and suicide

- Much of the data available represents mental health and wellbeing in 2019/20

- Considers measures of need across the life cycle including risk factors, use of services, morbidity and mortality

- Prepared prior to cost-of-living crisis

Mental health needs

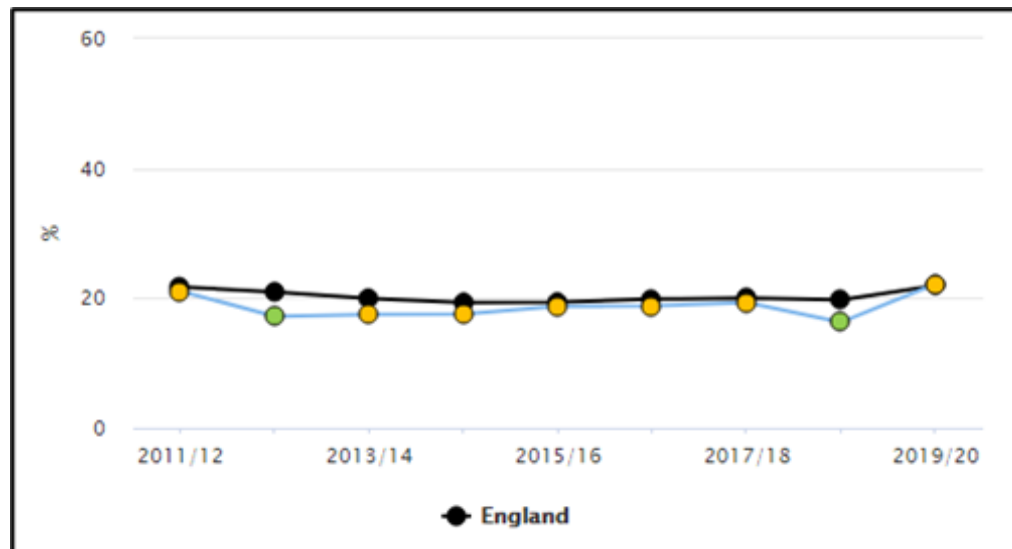## Summary of key quantitative data

1. Diagnosed depression

- Prevalence in North Somerset: 14% (SW 12%; England 12%)
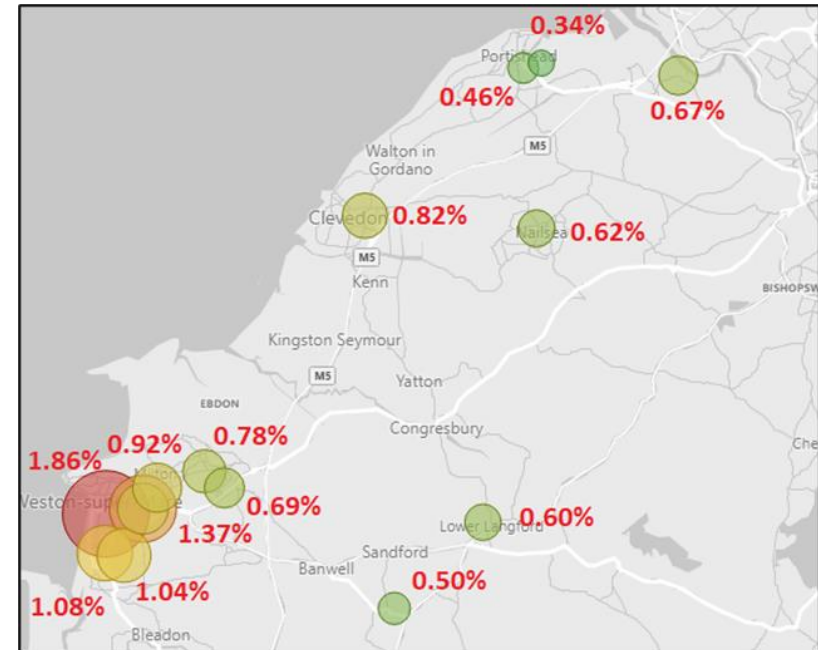- ~24,600 people
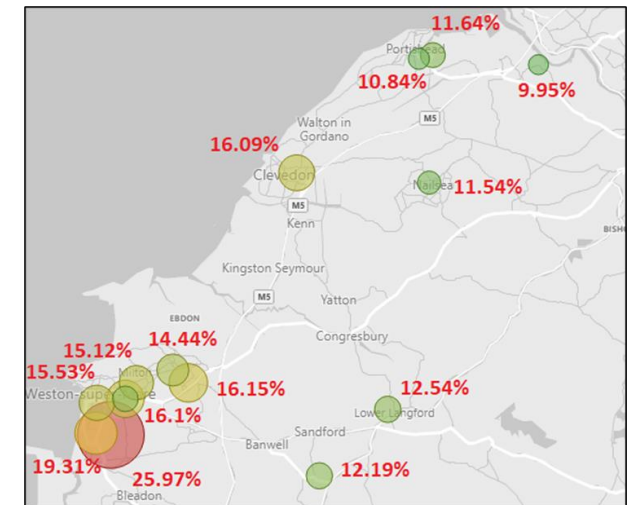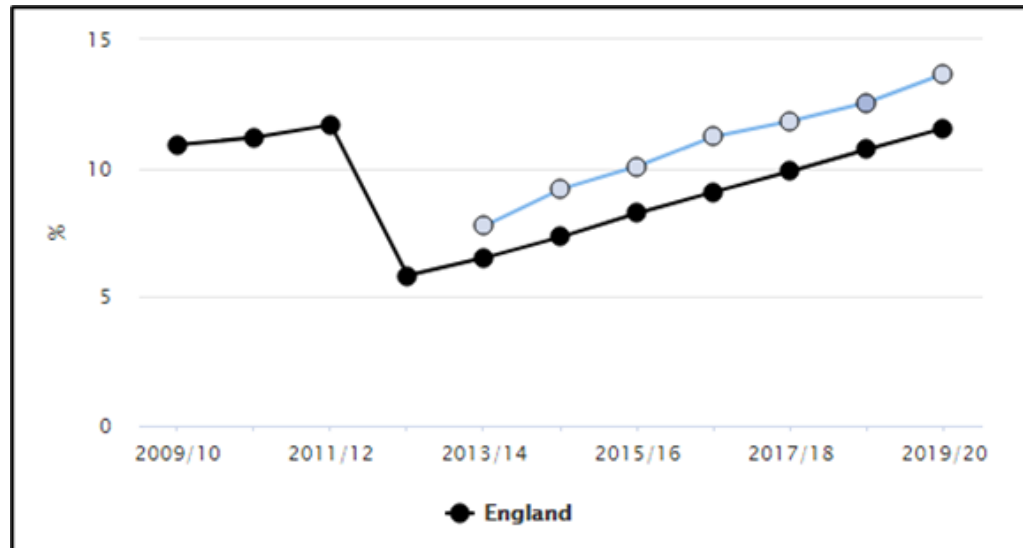
2. Self-reported anxiety symptoms

- Prevalence of high anxiety in North Somerset: 22% (SW 21%; England 22%)

5. Severe mental illness

- Prevalence in North Somerset: 0.78%
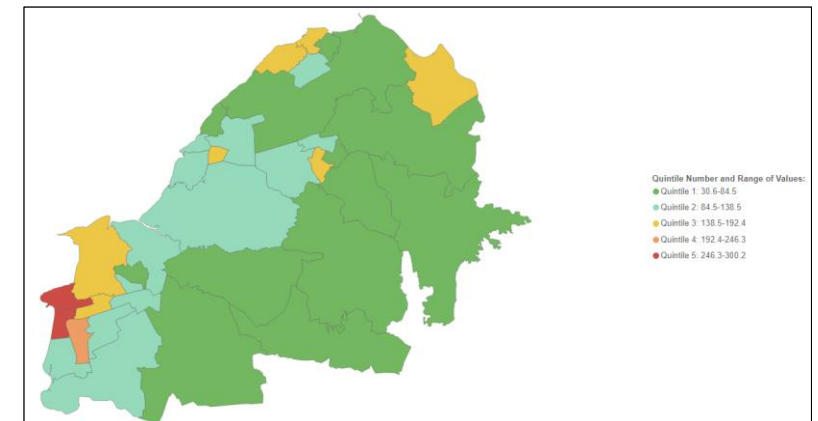- South West: 0.87%
- England: 0.93%

3. Self-harm

Emergency hospital admissions (rate) – all ages
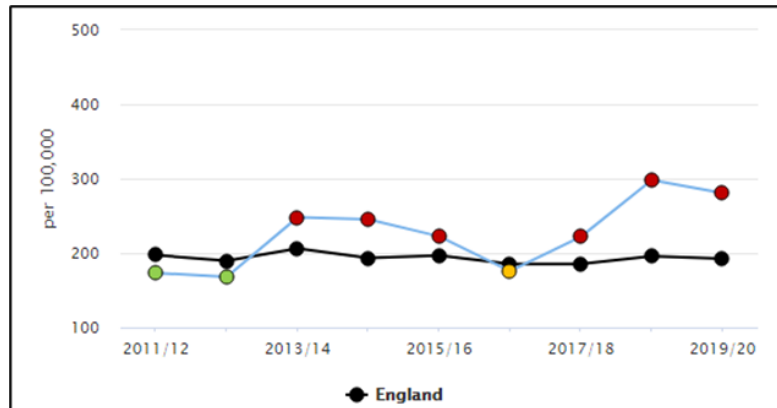
Emergency hospital admission for self-harm, standardised admissions ratio, by ward (2015-19) [12]

4. Suicide

Suicide rate (all persons)
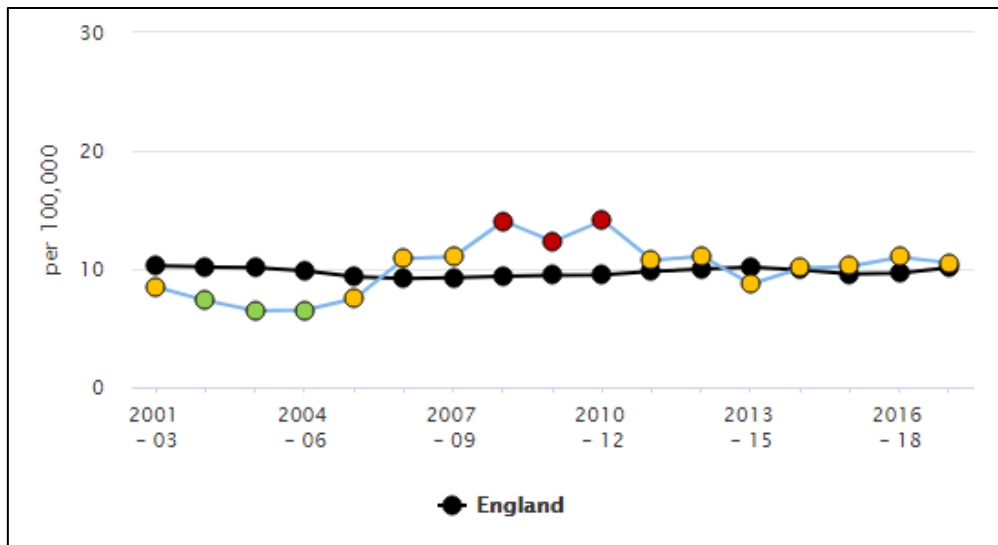
- North Somerset (rate): 10.5/100,000
- South West: 11.3/100,000
- England: 10.1/100,000

- Rate of suicide 3-fold higher among males higher vs females

Physical health

Proportion of adults with a long-term mental health condition who smoke (2019-20)

North Somerset	South West Region	England
24.9% (17.8% - 32.0%)	24.3%	25.8%

Mortality rate in adults with severe mental illness (aged 18-75 years) as excess risk (2016-8)

North Somerset	South West Region	England
454.0% (394.0% - 521.0%)	417.6%	365.2%

Wider determinants/ risk factors

Including:

- Poverty
- Deprivation
- Fuel poverty
- Unemployment/ insecure employment
- Housing and homelessness
- Social isolation
- Domestic violence and abuse
- Crime

- Alcohol use
- Drug use
- Overweight/ obesity
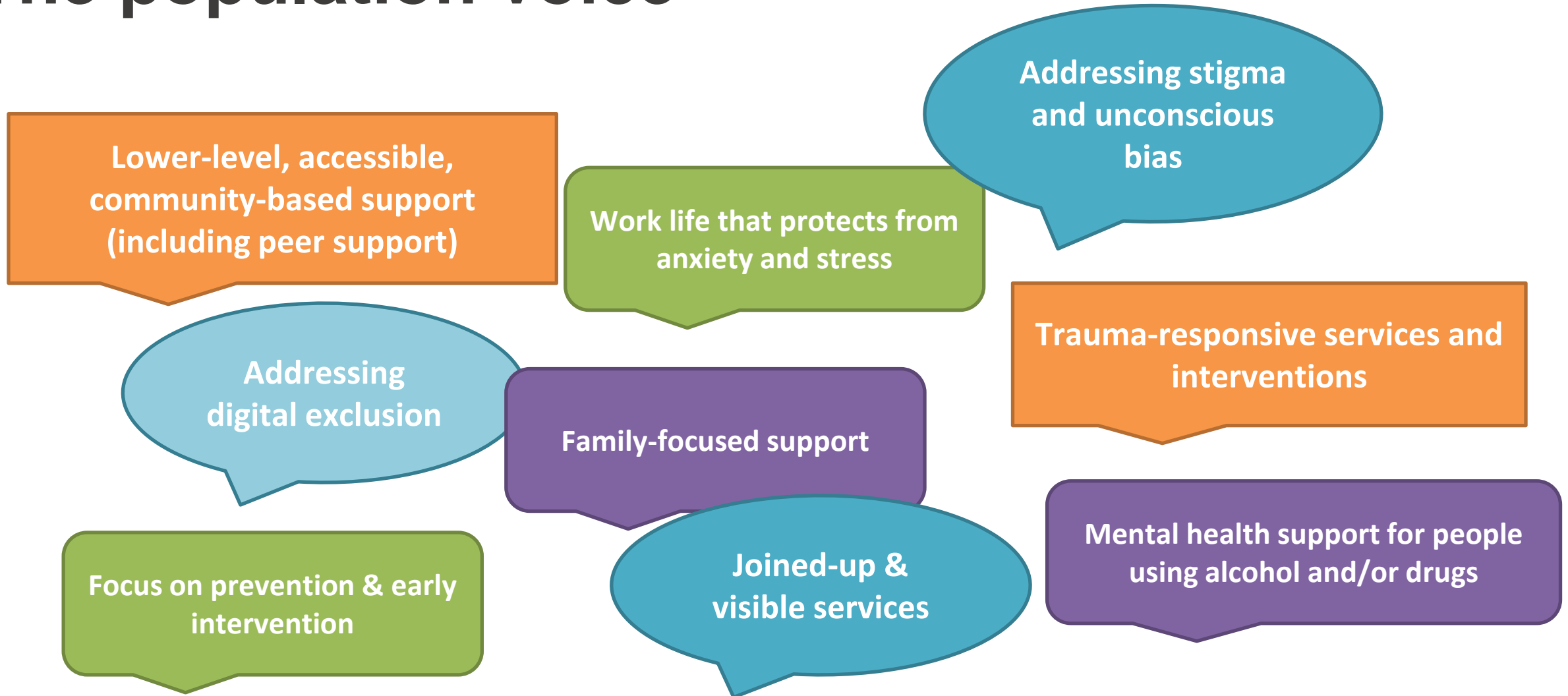
Recommendations

1. **Strategic direction and system**

- Focus on prevention, using proportionate universalism and addressing wider determinants of health, consolidating holistic support and targeted work to address inequalities
- Incorporate involvement of people with lived experience
- Consider evolving evidence about impact of COVID-19
- Delivery of trauma-responsive services across the system
- Understanding the prevalence of adversity and trauma in the population

2. Commissioners and providers

- Greater focus on physical and mental health
- Holistic support, including community services and addressing determinants of mental ill-health e.g. social isolation, housing, finances
- Action to address admissions for self-harm (including audit of practice)
- Review of social prescribing (underway)

3. In response to consultation and feedback

- To address mental health need among those dependent on alcohol and/or drugs
- Provision of accessible, locally available services, including drop-in (underway)
- Consistent framework for assessment of impact around stigma, wellbeing, holistic support
- Common branding and ready signposting between services
- Family focus in mental health services
- Action in the workplace
- Transitions between CYP and adult services

4. Data and monitoring

- In-depth analysis about self-harm
- Ward-level data for certain metrics and protected characteristics – consider how best to collect data and monitor impact

Emergent themes (in development & on the basis of the MHNA only)

Prevention	Early intervention	Supported and Living Well

Lifecourse perspective
Tackling inequalities

Prevention
- Wider determinants
- Protective factors and resilience
- Adversity and trauma
- Community & strengths-based initiatives

Early intervention
- Support following self-harm
- Trauma-responsive services
- Effective integration
- Stigma and unconscious bias
- Signposting and advice
- Workplace health
- Family focused services

Supported and Living Well
- Dual diagnosis
- Addressing physical health alongside mental health
- Wider determinants

Thank you

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North Somerset Mental Health Strategy Board

With thanks to Dr Lewis Peake, StR Public Health