# Health and Wellbeing Board Mental Health Themed Meeting

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Promoting good mental health and wellbeing for everyone is one of the 5 priorities in the Joint Health and Wellbeing Strategy refresh 2016 - 2021

What can my organisation do to support this priority? What action can the HWB take together to support and promote mental health and wellbeing?

> What do I want others to do to support this priority?

Health & Wellbeing Board Buckinghamshire

## The importance of good mental health

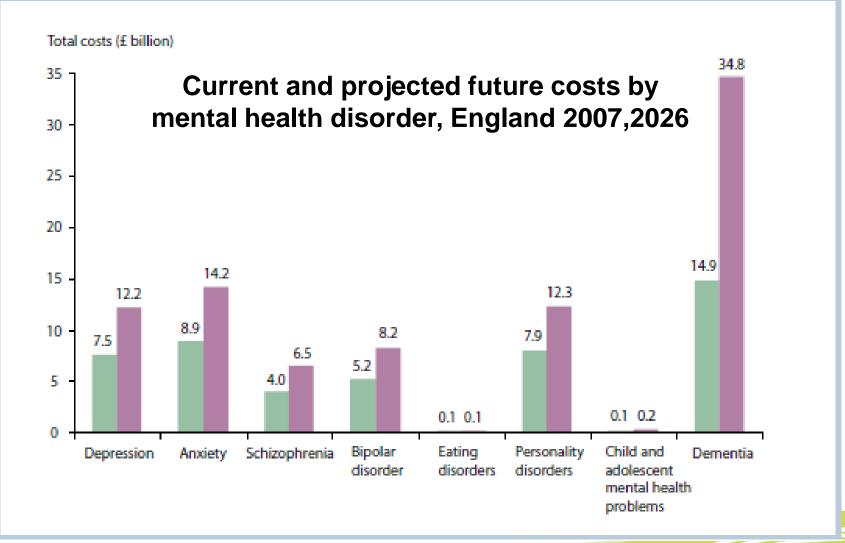
- Foundations for good mental wellbeing happen in earliest years
- Good mental wellbeing adds at least 7.5 years to your life
- Poorer mental wellbeing predicts risk of other illnesses later in life
- Poor mental health common
- Largest single cause of disability in UK costing £105bn per year
- People from all walks of life are affected but risks are higher for those living in poorer social circumstances, experiencing stressful or traumatic events marginalised groups and those having other illnesses
- 1 in 5 older people living in the community and 40% of people in care homes are affected by depression
- People with severe mental illness die 15-20 years earlier than their peers

## Figure 2

## Buckinghamshire County Council Figure 2 Schematic overview of risks to mental health over the life course

(Adapted from: Foresight project, 2008; Kieling et al, 2011; Fisher et al, 2011)<sup>456</sup>

Setting	Home / family	School	Media / information	Work	Community / home		
Culture				Discrimination / social	social inequalities		
	Low socioeconomic status	Adverse learning environment	Adverse media	influences So	cial exclusion		
Community			Neighbourhood violend	ce / crime Po	or civic amenities		
	Poor housing / living conditions		Peer pressure	lob intensity or inco	curity		
Family	Parental mental illness	Job intensity or insecurity at school Family violence					
	Substance use		or conflict	Debt / poverty			
	in pregnancy	Trauma maltreatm	Criminal o	r anti-social aviour	Bereavement		
Individual	attachment Malnutrition	Poor nutrition	Psychoactive substance use	Harmful alcohol use	Elder abuse		
	Low self-	esteem l	Physical ill-health	Physical	l ill-health		
	Prenatal period and early childhood	Childhood	Adolescence	Adulthood	Older adulthood		





## What does the joint health and wellbeing strategy say about mental health ?

## For children and young people

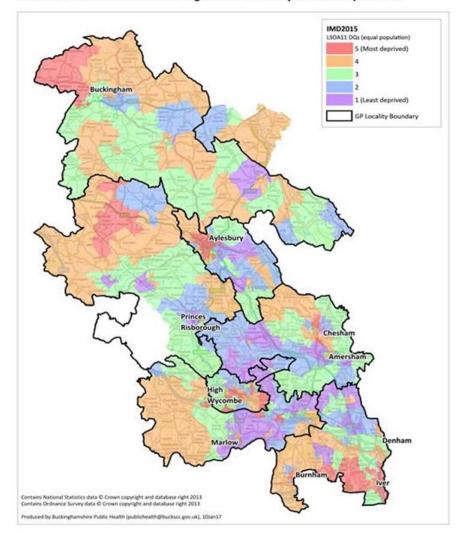
- Ensuring good support for maternal and paternal mental health
- Access to high quality parenting advice and support
- Early detection and support for people experiencing domestic violence
- Keeping children safe from harm through universal and targeted services
- Promoting whole school approach to health and wellbeing
- Ensuring emotional resilience of young people is supported and developed
- Improving physical health including physical activity
- Help to reduce substance misuse
- Improve detection and treatment for maternal mental health problems
- Improve children and young peoples' mental health by delivering targeted support, improved access to CAMHS and early intervention

## Joint Health and Wellbeing Strategy - Mental Health

### For adults

- We will promote adult wellbeing and resilience in all partner work places as part of wider workplace health initiatives
- We will promote good mental health and emotional wellbeing by working in partnership to identify and work with groups who are vulnerable to poor mental health
- We will work with partners to improve the physical health of people with mental illness and/or learning disability
- We will review existing services for people with mental health and substance misuse problems to improve outcomes for these people
- We will implement plans to reduce the risk of suicide and minimise selfharm
- And action listed under children's section will improve mental health for the adults they become but also specific actions apply to adults too e.g. domestic violence, maternal mental health, substance misuse

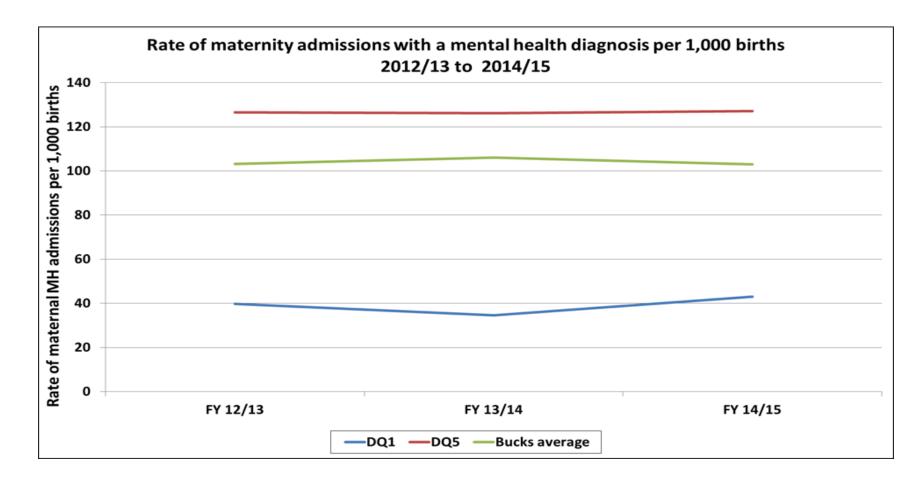
# Index of Multiple Deprivation Quintiles for Bucks CC with CCG Localities



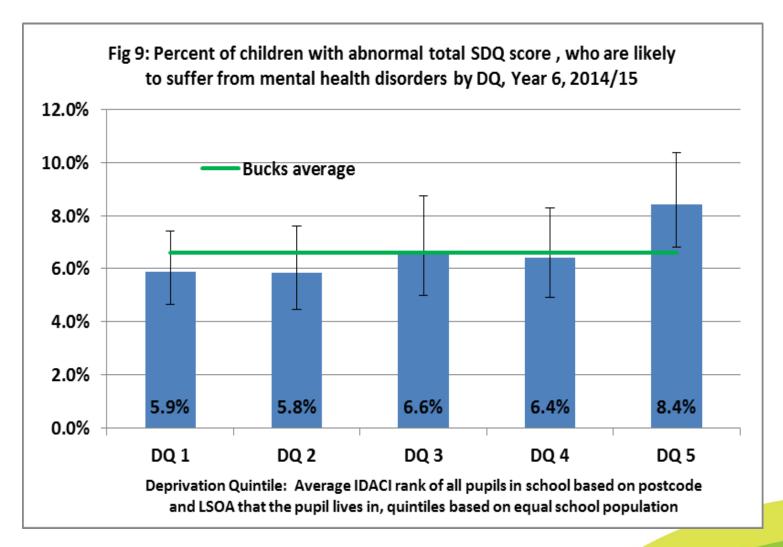
Bucks CCG Localities with Buckinghamshire County IMD2015 quintiles

The deprivation quintiles reflect 100K people in each quintile. Red zones are in most deprived quintile.

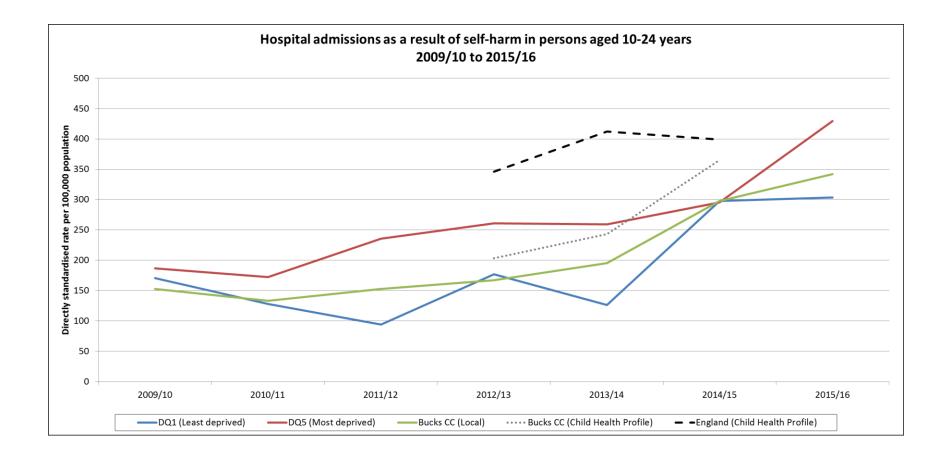
### Maternity admissions with a mental health diagnosis



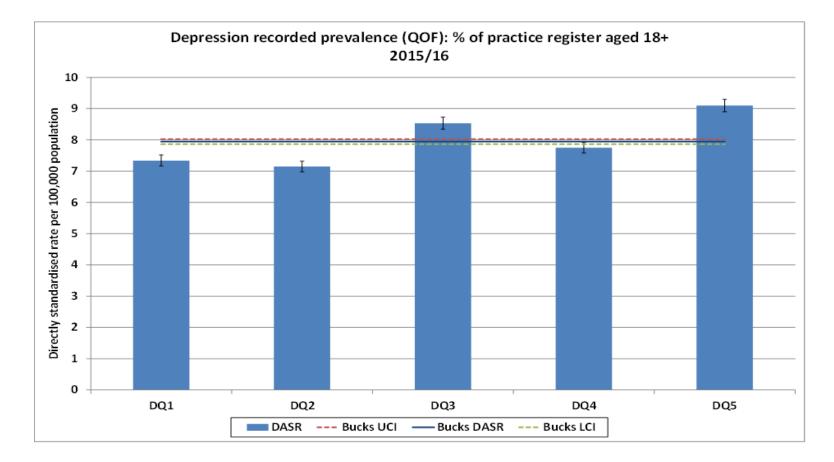
# Risk of mental health problems by school deprivation quintile year 6 in Buckinghamshire



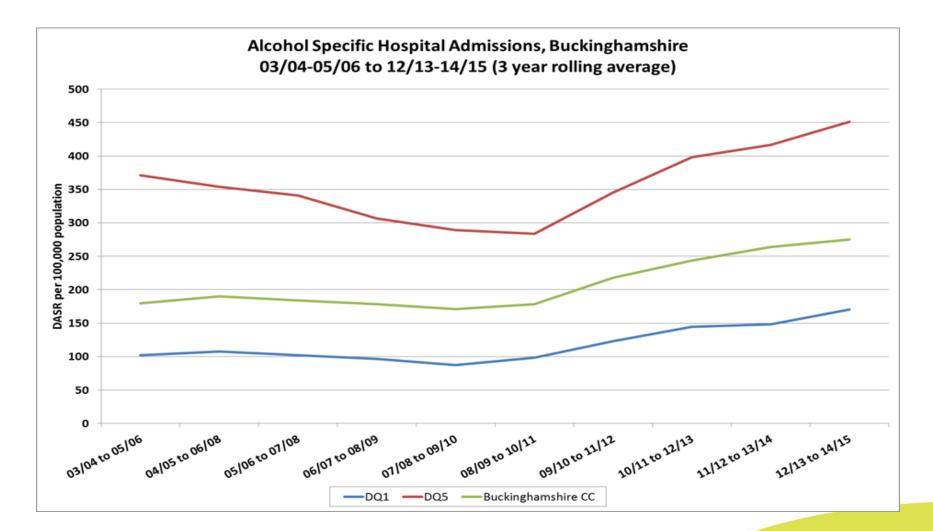
## Hospital admissions for self harm aged 10-24 years



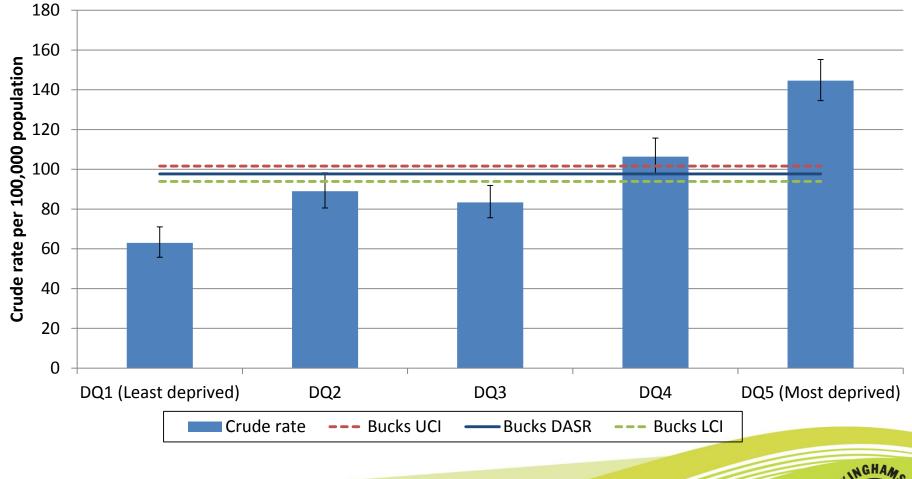
# Proportion of adults over 18 with recorded depression in primary care 2015/16



## **Alcohol specific hospital admissions**

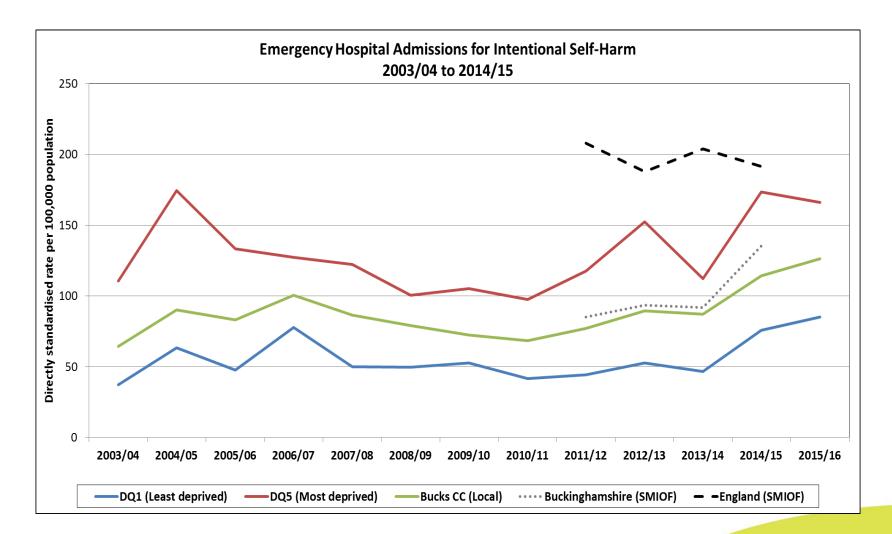


## Emergency Hospital Admissions for Intentional Self-Harm 2011/12 to 2015/16 all ages

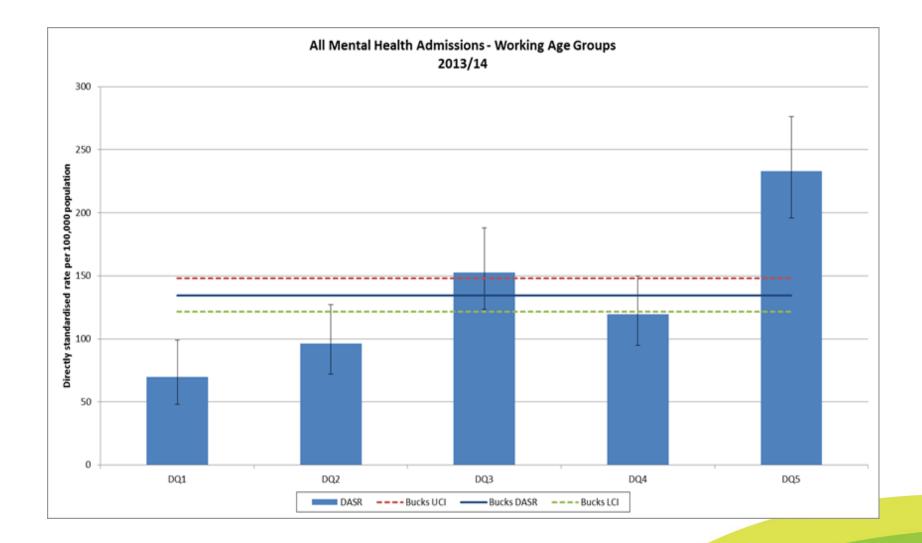




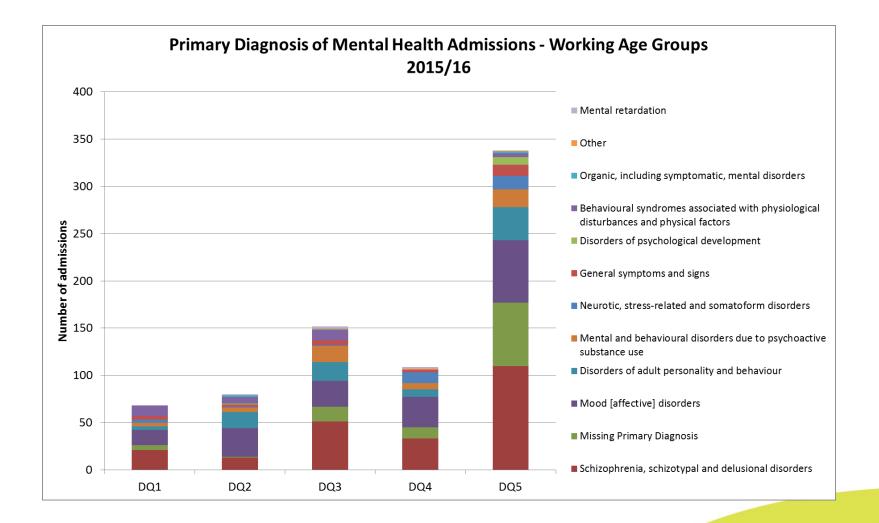
## Hospital Admissions for self harm (all ages)



## Mental health hospital admissions in working age adults

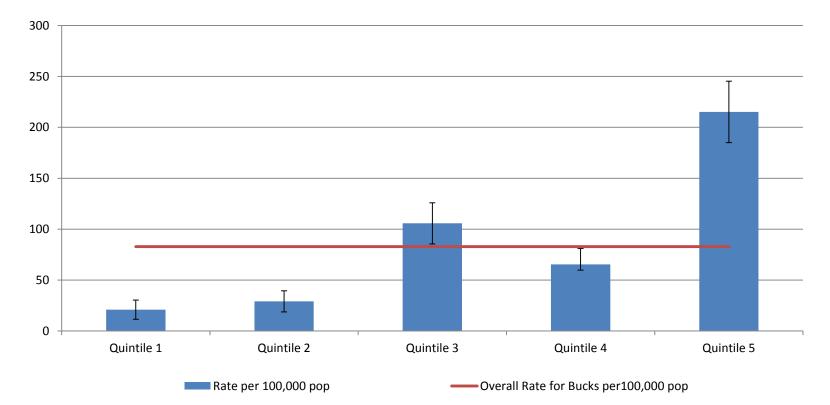


## Diagnosis of mental health admissions in working age adults

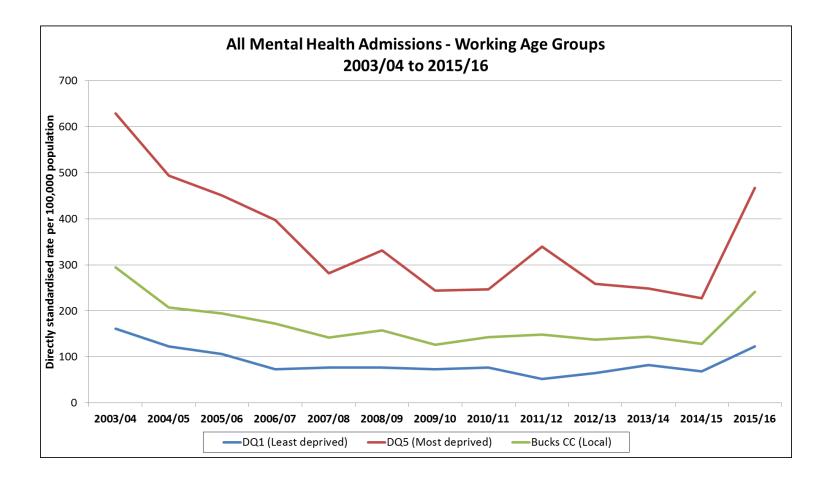


## Adult mental health social care support

**Clients accessing Adult Mental Health services (DASR)** 



### Mental health admissions – working age group



## Best buys for supporting mental health

- Supporting parents and early years with parenting programmes to improve skills and the home learning environment, and pre-school education
- Supporting lifelong learning with school-based programmes to promote mental health and increased educational opportunities for adults
- Improving working lives with workplace-based programmes to promote mental wellbeing and reduce the impact of the workplace on mental health
- Positive steps for mental health with changes in lifestyle, such as diet, exercise, alcohol, which impact on mental health as well as physical health. Social support and contact are factors in mental wellbeing
- Supporting communities and environmental improvements to the natural world, the built environment and public spaces all influence mental health; access to green spaces is associated with reduced health inequalities
- Promoting mental health and preventing mental illness: the economic case for investment in Wales. Freidli& Parsonage (2009) <u>www.publicmentalhealth.org/Documents/749/Promoting%20Mental%20He</u> <u>alth%20</u> Report%20%28English%29.pdf)

Economic pay-offs per £1 invested in each intervention	NHS	Other public sector	Non- public sector	Total
EARLY IDENTIFICATION AND INTERVENTION AS SOON AS MENTAL DISORDER ARISES				
Early intervention for conduct disorder	1.08	1.78	5.03	7.89
Health visitor interventions to reduce postnatal depression	0.40	-	0.40	0.80
Early intervention for depression in diabetes	0.19	0	0.14	0.33
Early intervention for medically unexplained symptoms	1.01	0	0.74	1.75
Early diagnosis and treatment of depression at work	0.51	-	4.52	5.03
Early detection of psychosis	2.62	0.79	6.85	10.27
Early intervention in psychosis	9.68	0.27	8.02	17.97
Screening for alcohol misuse	2.24	0.93	8.57	11.75
Suicide training courses provided to all GPs	0.08	0.05	43.86	43.99
Suicide prevention through bridge safety barriers	1.75	1.31	51.39	54.45
PROMOTION OF MENTAL HEALTH AND PREVENTION OF MENTAL DISORDER				
Prevention of conduct disorder through social and emotional learning programmes	9.42	17.02	57.29	83.73
School-based interventions to reduce bullying	0	0	14.35	14.35
Workplace health promotion programmes		-	9.69	9.69
ADDRESSING SOCIAL DETERMINANTS AND CONSEQUENCES OF MENTAL DISORDER				
Debt advice services	034	0.58	2.63	3.55
Befriending for older adults	0.44	-	-	0.44
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