













York Health & Wellbeing / Mental Health

# Mental Health Download this section

This section covers anyone who experiences mental ill health or who is affected by its impacts. Over the course of a lifetime this is pretty much everyone.

## Areas where York is doing well

#### Self reported happiness



Self reported measures are a good way of assessing the wellbeing of the general York population, not just people who are in contact with services. As part of the annual population survey, more people in York report moderate or high levels of happiness than their peers nationally, regionally, and against York's statistical neighbours. This is a fairly stable trend; over the last five years York has tended to be similar to slightly better than the national average.

## Areas where York needs to improve

#### Caring for people with dementia

By caring for a family member, friend, or neighbour, unpaid carers provide significant support that can be difficult to replace or replicate through social care services. However, being the role of a carer is demanding and can impact substantially on a person's life and health. It is therefore important that we work to support carers and protect their health. Since 2014, carers have reported a decline in their quality of life. Whereas previously the score has been statistically better than the England average, carer quality of life is now similar to current averages in both England and statistical neighbourhood areas at an average score of 7.6. It is worth noting that this data is to be used with caution owing to the small sample size and that this indicator has only been measured a few times.

Carer-reported quality of life score for people caring for someone with dementia 2018/19

Area	Recent Trend	Neighbour Rank	Count	Value		95% Lower Cl	95% Upper Cl
England	-	•		7.30	н	7.20	7.40
Neighbours average	-	•				•	
Warrington	-	1		8.40		7.60	9.20
Calderdale	-	8		7.70		7.00	8.40
Bath and North East Somerset	-	3	-	7.70	H	7.30	8.10
York	-			7.60	H	7.20	8.00
Stockport	-	6		7.40	H-1	7.00	7.80
Swindon	-	5		7.40	H	6.90	7.90
South Gloucestershire	-	2		7.40	H	7.00	7.80
Shropshire	-	15		7.30	<b>—</b>	5.50	9.10
Bedford	-	13		7.30	H	6.40	8.20
Bury	-	9		7.20	H-1	6.70	7.70
Plymouth	-	12		7.10	H	6.50	7.70
Solihull	-	11		7.00	H	6.60	7.40
Cheshire East	-	14		6.90	H	6.50	7.30
Cheshire West and Chester	-	4		6.70	H-1	6.30	7.10
Trafford	-	7		6.60	H	6.00	7.20
Bournemouth, Christchurch and Poole	-	10					

#### Suicide

Suicide is an indicator of the prevalence of unmanaged serious mental illness and mental distress. The rates of death in York are currently in line with the national average, but have been high in recent years. The rates of death in York are also higher than the majority of York's statistical neighbours. This is true for both men and women.

#### Children and young people admissions to hospital

The proportion of young people from York who are admitted to hospital as the result of a mental health condition or as a result of self harm is now back in line with the national average after a significant peek last year.

#### Self-harm

Admissions to hospital as a result of self-harm injuries is a proxy measure for serious self harm injuries. It is recognised that there will be many more self-harm incidents which go unrecorded but, it remains an important indicator of population mental health. York has a higher proportion of residents who are admitted to hospital as a result of self-harm injuries than the national average as well as the majority of York's statistical neighbours. The rates are particularly high for self-harm admissions in young people aged 10-24, but most notably in those under the age of 20.

#### Self-reported anxiety

Self-reported measures are a good way of assessing the wellbeing of the general York population, not just people who are in contact with services. In the annual population survey, a similar proportion of people in York report high levels of anxiety as the national and regional average. However, people in York were more likely to report high anxiety than the majority of York's statistical neighbours. Over the last five years the national trend has been stable, and York's data has either been similar to or slightly higher than the national picture.

# Areas of particular inequality in York

#### Employment

The majority of adults with mental health conditions are able to work, and should have equal opportunity to gain employment. The difference in employment rates between people in contact with secondary mental health services and the general adult population in York is similar to the national average. This means that people in York who are in contact with mental health services are less likely to be in employment than the general adult population of York, but the size of this gap is the same as the national average. Nationally, there has been a small but sustained narrowing of the employment gap over the last five years, and York has kept pace with this positive trend, however the inequality remains.

#### Accommodation

Among adults in York who use secondary mental health services, only a small number live in 'stable and appropriate' accommodation. This proportion is substantially lower than the region and most of York's statistical neighbour areas. Until 2013/14 the proportion of adults found to be living in stable and appropriate accommodation was similar to or better than the national average, however this has dropped off steeply in the last two years. This may be due to a reporting issue, and may not reflect the actual provision in York. This is being investigated.

Homelessness and mental health are intertwined issues. In 2016/2017 well over half of people who were referred to York homelessness services through the single point of access scheme were judged to have a mental health vulnerability by the professional making the referral.

# Other important health areas

#### The mental health of school age children

York has a lower proportion of school age children with a formally identified social, emotional, or mental health need than the national average, and this has been consistently true for the last four years. However, looking specifically at primary school age children, York's data is much closer to the national average.

#### Access to psychological therapy

Overall, the data shows that fewer people enter IAPT in York than in other parts of the country, and this has been true for the majority of the time in the last five years. As a percentage of the total adult population, the proportion in York who enter into IAPT is lower than the national average. Similarly, against those specifically estimated to have anxiety and depression in York, a smaller proportion enter into IAPT than the national average.

#### Impact of psychological therapy

Recovery outcomes are recorded for people who complete the standard 6-week IAPT treatment program. A smaller proportion of people in the Vale of York are recorded as displaying 'reliable improvement' after the final week of IAPT. In the past, this proportion has been closer to the national average. A separate indicator set so that in the Vale of York, the proportion of people recorded as 'moving towards recovery' is overall similar to the national average.

#### Dementia diagnosis

Getting a diagnosis of dementia means that people and their families have greater access to information and support. However, not everyone with dementia will get a timely diagnosis. For the Vale of York, the prevalence of recorded dementia diagnosis in older adults (65+) is lower than the national average regional average; this has been consistently true for the last three years.

#### Social care users

Everyone deserves good mental health, but some people, such as people who use social care services, are at greater risk of poor mental health. However, residents in York who use adult social care services have significantly less anxiety and depression than their peers nationally, and the lowest level of anxiety and depression of any of their peer groups in York's statistical neighbour areas. This indicator has not been recently updated and so the information may no longer be an accurate reflection of York.

#### **Related Topic Specific Needs Assessments:**

- 1) Mental health report into equity of access to services
- 2) York Suicide Safer Community Strategy 2018
- 3) Self Harm Needs Assessment 2016
- 4) Alcohol Needs Assessment 2016
- 5) Suicide Audit 2016
- 6) Mental Health Needs Assessment 2015

### In this section

Supporting data

This page was last updated on 30 June 2022 This page will be reviewed by 30 June 2023

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