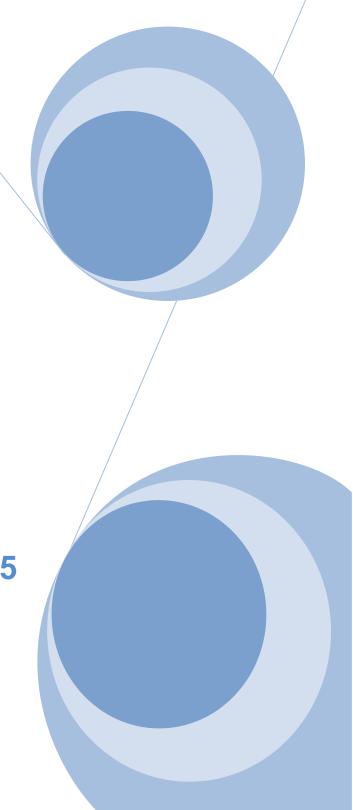


Sefton Strategic Needs Assessment 2014/15 Mental Health

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Mental Health

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Prevalence



Around 1 in 5 females and 1 in 8 males are thought to have some form of mental illness

Prevalence Projection



Expected reduction in sufferers by 2030

Benefits



Claiming benefit as a result of mental illness

Early Intervention

97%

Of patients on CPA receive a follow up within 7days of discharge

Depression



South Sefton CCG amongst top 20% of CCG's for sufferers of depression Anti Depressant Prescribing

£1.7m

Cost of anti depressant prescribing in Sefton in 2013/14 Self Harm

15-24

Years Old

Most common age range for self harming

Suicide



Three in four suicides are male

Dementia



49%

Predicted increase in sufferers by 2030

Local Authority Support



Residents in receipt of Care Packages for a mental health issue

Schizophrenia



Five year increase in emergency hospital admissions Cost of Mental Health Services

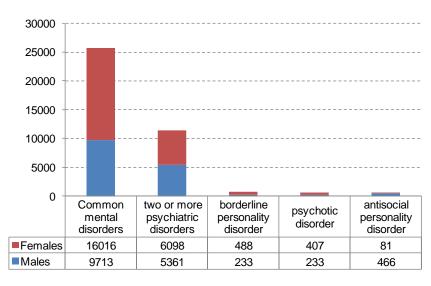
£20m+

Total spend across health, social care and public health

Prevalence of Mental Health Problems

- Data for quarter one 2013/14 shows there are 9,275 people in contact with mental health services across Sefton, 52% (4,804) of these are in the South Sefton CCG area. Despite more people in contact with mental health services living in the South of the Borough Southport & Formby has a higher rate, 4833.096 per 100,000 compared to South Sefton (3774.712 per 100,000)
- Of 211 CCG areas covered in the dataset Southport & Formby has the third highest rate of people in contact with mental health services, South Sefton is also within the top 10% of CCG's for people in contact with mental health services.
- It is thought that there are many more people suffering from some form of mental health problem than are in contact with mental health services. It is estimated that more than 39,000 people aged 18-64 suffers from some form of mental health issue
- Around 12% of men and 20% of women (one in five) are thought o have some form of common mental disorder (CMD's), this amounts to more than 25,000 people within Sefton aged 18-64 estimated to have a CMD. CMD's are mental conditions that cause marked emotional distress and interfere with daily function, but do not usually affect insight or cognition. They comprise different types of depression and anxiety, and include obsessive compulsive disorder.
- More than 11,000 Sefton residents are thought to have two or more psychiatric disorders. Psychiatric comorbidity or meeting the diagnostic criteria for two or more psychiatric disorders is known to be associated with increased severity of symptoms, longer duration, greater functional disability and increased use of health services. Disorders included the most common mental disorders (namely anxiety and depressive disorders) as well as: psychotic disorder; antisocial and borderline personality disorders; eating disorder; posttraumatic stress disorder (PTSD); attention deficit hyperactivity disorder (ADHD); alcohol and drug dependency; and problem behaviours such as problem gambling and suicide attempts

Estimated Mental Health Problems (2014)

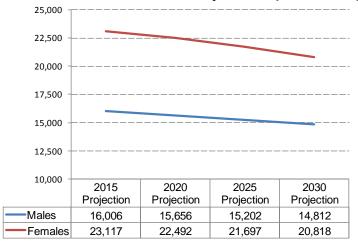


Prevalence of Mental Health Problems & Projections

	Males				Females			
	2015	2020	2025	2030	2015	2020	2025	2030
Common mental disorder	9,713	9,500	9,225	8,988	16,036	15,602	15,051	14,440
Borderline personality disorder	233	228	221	216	488	475	458	440
Antisocial personality disorder	466	456	443	431	81	79	76	73
Psychotic disorder	233	228	221	216	407	396	382	367
Two or more psychiatric disorders	5,361	5,244	5,092	4,961	6,105	5,940	5,730	5,498

- Less common are personality disorders, longstanding, ingrained distortions of personality that interfere with the ability to make and sustain relationships around 1,200 people in Sefton aged 18-64 are thought to have either borderline or antisocial personality disorder, which and around 640 are estimated to have psychotic disorders that produce disturbances in thinking and perception severe enough to distort perception of reality. The main types are schizophrenia and affective psychosis, such as bipolar disorder
- Females are more likely to suffer mental health problems than males accounting for 58% of the total estimated number of sufferers. Females are more likely to be affected across all categories of mental health problem, with the exception of anti social personality disorders (ASPD), with males accounting for 86% of those affected. People with ASPD have a pattern of aggressive and irresponsible behaviour which emerges in childhood or early adolescence. They account for a disproportionately large proportion of crime and violence committed.
- Latest projection suggest the numbers of both people suffering for mental health problems between 2015 and 2030 are expected to fall by around 9%.
 Male suffers are projected to fall by 7.5% from just over 16,000 in 2015 to around 14,800 by 2030. Over the same period the number of female sufferers aged 18-64 are expected to fall by around 10% from more than 23,000 in 2015 to under 21,000 by 2030

Mental Health Issues Projections (2015-2030)



Vulnerable Groups

Vulnerable Group*	Estimated numbers in Sefton	Proportion Estimated to be At Risk of Mental Health*	Number estimated to have a Mental Health Problem
Asylum Seekers & Refugees (2009)	15	50.0%	8
Gypsies & Travellers (Census 2011)	120	35.0%	42
Lesbian/Gay /Bisexual (2013)**	3,626	39.4%	1,429
Learning Difficulties (POPPI/PANSI 2014)	5,125	25.0%	1,281
Profound Hearing Impairment (POPPI/PANSI 2014)	752	33.3%	250
Marital Status - Seperated (Census 2011)	5,367	23.3%	1,251
Marital Status - Divorced (Census 2011)	21,124	27.1%	5,725
Looked After Children (Snapshot as at 23rd October 2014)	416	45.0%	187
Adult Survivors of Child Abuse (POPPI/PANSI 2014)	18,447	12.4%	2,287
Carers (Census 2011)	34,547	18.0%	6,218

^{*}Groups and proportions sourced from Merseyside Mental Health Needs Assessment 2011

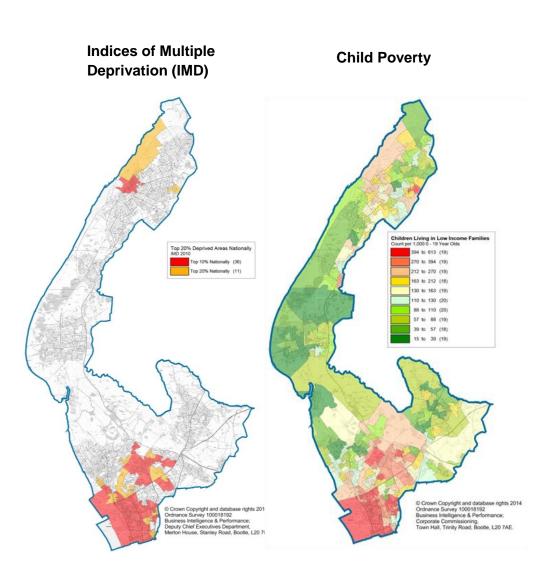
- Vulnerable groups that may be at high risk of developing mental health problems include some black and minority ethnic groups, travellers, asylum seekers, people who are homeless, people with disabilities, carers, people who are lesbian/gay/bisexual and those recently released from prison. Such people have an increased risk of developing mental health problems due to factors such as discrimination, cultural misunderstandings, limited access to services and to employment, poverty and deprivation.
- The new government mental health strategy noted that the evidence on the incidence of mental health problems in black and minority ethnic groups (BME groups) is complex. This is due to the fact that the term BME covers many different groups with very different cultural backgrounds, socio-economic status and experiences in wider society.
- The prevalence of psychotic disorder is higher among black men. The most recent National Psychiatric Morbidity Survey found a significantly higher prevalence of psychosis amongst black men (3.1%) than men from other ethnic groups However, there was no significant variation by ethnicity among women
- Outside of BME groups the table above highlights some of those groups identified and the estimated proportions within these groups that are at high risk of having mental conditions. Using the most up to date data available we have then estimated the numbers within each of these groups that are potentially at high risk across Sefton

Source: http://www.liv.ac.uk/media/livacuk/instituteofpsychology/publichealthobservatory/86_Merseyside_mental_health_needs_assessment_WEB_VERSION.pdf

^{**} ONS Integrated Household data estimates 1.6% of adult population Lesbian/gay/bisexual

Factors Affecting Mental Health – Deprivation & Poverty

- Living in more deprived communities is strongly associated with lower levels of mental wellbeing. Research has demonstrated the association between poor health, including mental health and deprivation. Increased levels of deprivation are likely to result in widening inequalities in health and mental wellbeing
- The average Deprivation score across Sefton is higher than all England average, however levels of deprivation vary throughout the borough,
- The map shows the Sefton LSOAs (47 out of 189) which fall within the top 20% of areas with high levels of deprivation.
- Children of low income families have been calculated by HMRC using the number of children in families receiving Child Tax Credit only whose reported income is less than 60 per cent of median income or families in receipt of Income Support or Income-Based Jobseekers Allowance this includes all families with children between the age of 0 18.
- The map demonstrates that there is a high prevalence of lone parent families to the South of the borough, with some pockets of high levels in the North
- 19 LSOAS of the top 20 for low-income families, are within the South of the Borough
- There has been a reduction across the three years (2011 to 2009) in Sefton; however it is still higher than the North West. In total there are approximately 11,335 children living in workless households in Sefton.



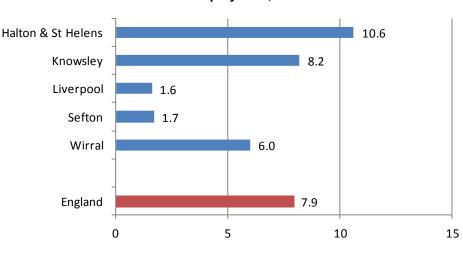
Factors Affecting Mental Health - Housing Decency

The report *According to Poor homes, poor health to heat or to eat?* in 2012 by PHA states "Lack of adequate space, unsafe, cold and poorly designed housing, neighbourhood deprivation, homelessness and instability, are known to impact on mental health, particularly contributing to anxiety and depression."

- The borough contains over 100,000 private dwellings with the private sector housing stock in Sefton being older than the national average.
- The age of a home is strongly associated with its condition and energy performance. Presently, 43% of owner occupied households have a head of household aged 65 years and over
- There are 19,394 households (19 %) that are in receipt of means tested or disability related benefits and are economically vulnerable
- It is estimated that 12,352 households in Sefton (12%) have low incomes, high fuel costs and are in fuel poverty. It is indicated that 19,448 households in Sefton (19.2%) have at least one household member affected by a long-term illness or disability.
- 15.8% of Sefton dwellings fail the Decent Homes Standard. This compares to 22.0% of private sector housing nationally (2012/13):
- Variations in Decent Homes performance reflect significantly higher rates of failure for the private-rented sector 5,051 dwellings (24%), Flats in converted buildings 3,403 dwellings (34%), Dwellings constructed pre-1919 8,122 dwellings (30%)
- Geographically, highest rates of Decent Homes failure are recorded for East Southport 2888 dwellings (26%), North Southport 2548 (22%), Linacre and Derby Committee Area. 2139 (27%)
- Elderly households comprise 39% of all private sector households yet account for 44.8% of all households in non-decent dwellings.
- Economically vulnerable households comprise 40 % of all private households yet account for 47% of all households in non-decent dwellings
- Low income households comprise 30% of all private sector households yet account for 34% of all households in non-Decent dwellings

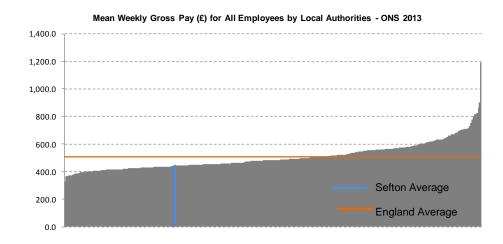
Factors Affecting Mental Health - Employment

Of those receiving secondary mental health services % in settled employment, 2009/10



- Work can have both positive and negative effects on mental health and well-being. The North West Wellbeing survey found that adults with higher mental wellbeing were significantly more likely to be in full time or part time work than those with lower levels of mental wellbeing' Mental Health Needs Assessment
- Sefton has a significantly lower rate of those receiving secondary mental health services being in settled employment than across England as a whole and has the second lowest rate of the Merseyside authorities.

Factors Affecting Mental Health - Pay



- In 2013 the average (mean) gross weekly wage for all employees within Sefton was £442.40, this was below the Sefton average of £510
- There is a difference of £751.10 when comparing the gross weekly wage in Sefton to the local authority with the highest (Kensington and Chelsea)
- Sefton has the 85th lowest gross weekly wage out of the 323 local authorities included in the dataset and is continually below the English average (mean) gross weekly wage for all employees, and below all but one of the North West averages
- Within Sefton, as with national trends males, on average, are paid more overall and in full time employment than females (a similar pattern can be seen throughout the North West and England)
- 'There is a strong body of evidence that living in poverty brings with it poorer mental health, and that the stresses of living in poverty increases the risk of developing mental health problems. In addition that living with a mental health problem brings with it increased social disadvantage, such as higher levels of unemployment.' Background Paper 3: Mental Health and Inequalities – Mental Health Foundation

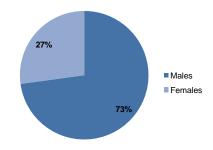
Factors Affecting Mental Health - Drug Misuse

- The National Drug Treatment Monitoring System (NDTMS) capture information on clients in drug treatment and the primary drug of choice of those in treatment at the start of their treatment journey, once this has been identified there is no opportunity to make further updates to this during treatment.
- In 2013/14 there were a total of 1,538 people who were in contact with treatment services, a reduction on the previous year of around 3%. Over the last five years, with the exception of 2011/12, the number of people in contact with treatment has continued to fall, culminating in an overall five year reduction of 6% from 1,638 in 2009/10.
- Three out of every four people in treatment in Sefton are male, with the ratio of
 males to females remaining consistent across all five years data is available for,
 this would suggests reductions in service users have been similar for both
 genders. 96% of drug treatment clients class themselves as White British, which
 in terms of ethnicity is largely representative of the overall population of the
 borough.
- Drug users are most likely to come into contact with services between the ages
 of 35 and 50 with this age group consistently accounting for more than half of
 treatment contacts during the five years analysed.
- However, there has been a shift in the age profile of those in treatment with a
 five year increase in 45-49 years olds in contact increasing by more than 70%
 and the number of 50-54 year olds more than doubling over the last five years.
 Both of these age groups have seen numbers in contact with treatment increase
 in each of the five years analysed
- The number of younger adults in treatment however has fallen over the same period with those in contact under the age of 40 falling by 27% from 967 in 2009/10 to 704 in 2013/14
- The number of 18-19 year olds during this time has fallen by 50%, 30-34 year olds by 22% and 35-39 year olds by 47%

Number in Contact with Treatment; 5 year trend



In Contact with Treatment 13-14; Sex



Number in contact by Age

rumber in contact by Age								
	09/10	10/11	11/12	12/13	13/14			
	n	n	n	n	n			
18-19	51	67	72	54	25			
20-24	119	132	186	141	126			
25-29	162	157	185	204	161			
30-34	222	203	185	148	173			
35-39	413	340	313	244	219			
40-44	399	408	389	363	355			
45-49	182	227	253	286	310			
50-54	56	66	73	91	115			
55-59	25	23	29	34	35			
60+	9	10	11	19	19			
Total	1638	1633	1696	1584	1538			

Factors Affecting Mental Health - Alcohol Misuse

 There is a great deal of overlap between alcohol and mental illness, for example suicide is eight times more likely to occur in the presence of alcohol misuse or dependency.

 The drinking habits of Sefton residents are not dissimilar to those across the country; they are also in line with drinking habits across Merseyside and the North West region. The top table shows the number of units of alcohol consumption that make up each of the risk levels.

 Almost 14% of adults in Sefton are non drinkers, which when compared to Merseyside, the North West and England is roughly in line with levels across all three comparator groups

 Around one in four Sefton residents admits to drinking at levels that put them at increasing or higher risk of alcohol related illness, which is in line with levels across the region and nationally

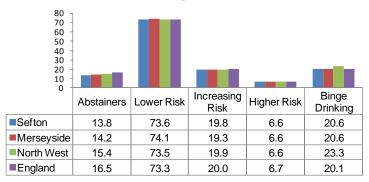
 The Sefton Health & Wellbeing Survey indicates that increasing risk drinking is more common amongst males and the 25-54 year old age group. Surprisingly the survey would suggest that the lower the levels of deprivation in an area the more likely people are to drink at levels that put them at increasing risk.

 Higher risk drinking shows little variation by gender and is most prevalent in the youngest age group (18-24 year olds). While increasing risk drinking increases as deprivation decreases, higher risk drinking is most prevalent in the least and most deprived areas.

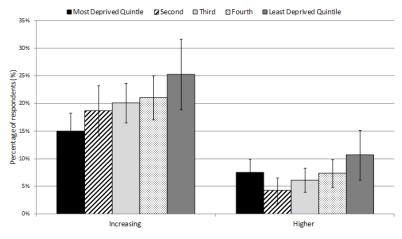
 As with increasing and higher risk drinking, binge drinking in Sefton is in line with levels across Merseyside and nationally with one in five adults across the borough binge drinking.

	Units Per Week				
Risk Level	Men	Women			
Lower Risk	0-21	0-14			
Increasing Risk	22-50	15-35			
Higher Risk	Over 50	Over 35			

Drinking Habits

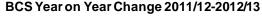


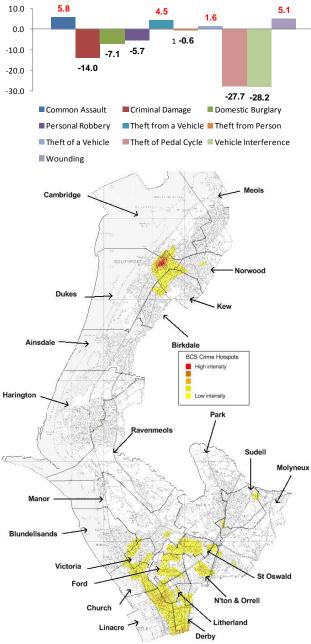
Sefton Lifestyle Survey 2012: Alcohol Risk Levels by Deprivation (With 95% Confidence Intervals)



Factors Affecting Mental Health - Crime

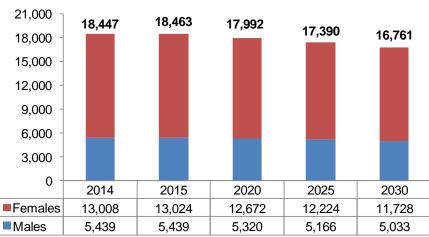
- Fear of crime and feeling your neighbourhood is unsafe/ violent can have a negative effect on mental health. Knowledge of actual violent crime levels in the area will contribute to fear of crime and feeling unsafe. Being a victim of crime can lead to mental health problems, such as in domestic abuse. People with mental health problems are significantly more likely than the general population to be the victims of crime. In addition, people with mental health problems are said to also 'face barriers at every stage of getting a crime brought to justice'
- When crime across all Sefton wards is standardised per 1,000 population Linacre ward is the worst affected area with 137 crimes per 1,000 population. Compared to the least affected ward, Meols, where there were just 17 crimes per 1,000 population, and a borough wide average of 54.6 crimes per head of population.
- In Linacre ward this equates to one in seven residents being a victim of crime in 2012/13, compared to 1 in 59 in Meols and 1 in 18 across Sefton as a whole.
- British Crime Survey comparator crimes, the measure the government uses to compare areas based on crime most likely to be reported to police, have also shown a year on year reduction, down by 7% on 2011/12. The map shows that the largest concentration of crimes is in Duke's ward around Southport Town Centre.
- Both violence categories (common assault & wounding) had the biggest increase up by 5.8% and 5.1% respectively. These are offences strongly linked to the night-time economy with almost a third of these offences alcohol related and more than a quarter committed between 11pm and 3am





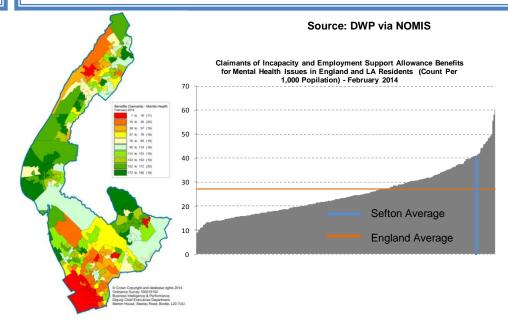
Factors Affecting Mental Health – Sexual Abuse

Survivors of Sexual Abuse (Age 18-64)



- Research shows that both male and female victims of abuse have significantly higher rates of psychiatric problems than the general population. Studies demonstrate an association between child sexual abuse and a subsequent increase in rates of childhood and adult mental disorders
- It is estimated that there are in excess of 18,000 Sefton residents aged 18-64 that are survivors of sexual abuse more than 70% (13,008) of whom are estimated to be females.
- Latest projections suggest that the number of sexual abuse survivors will reduce by 9% between now and 2030, with a slightly greater reduction in female victims, falling by 10% from more than 13,000 to less than 11,800. Over the same period the number of male victims is expected to fall by 7.5% from more than 5,400 to a little over 5,000

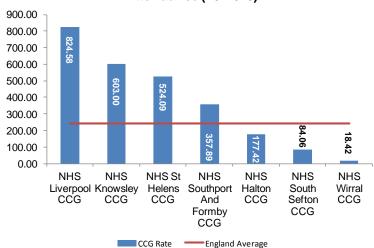
Factors Affecting Mental Health - Benefits



- People between the ages of 16 to 64 were awarded Incapacity Benefit & Severe Disability Allowance (IB & SDA) if they had an illness or disability. This form of benefit is currently being phased out and replaced by Employment and Support Allowance (ESA)
- There were 6860 residents within Sefton claiming either IB or ESA, due to mental and behavioral disorders, this equates to a 41 per 1,000 16 64 year old population within Sefton in February 2014, this is above both the North West and English claimant rates
- Sefton's rate per 1,00 population in February 2014 is the highest it
 has been in the past three years and the 22nd highest (of 325) Local
 Authorities for Mental Health benefits claimants out
- The map shows the distribution of people claiming benefits due to mental illness, areas with high levels of claimants are predominantly areas with high levels of deprivation, poverty and crime and highlights the linkages between socio-economic factors and poor mental health

Psychiatric Disorder Accident & Emergency Attendance

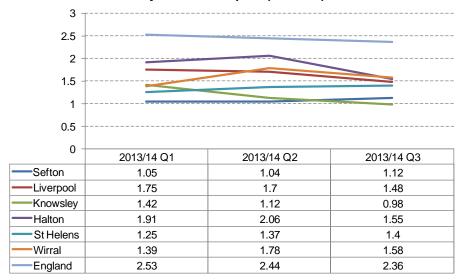
Psychiatric Disorder Accident & Emergency Attendance (2012/13)



- In 2012/13 there were a total of 543 accident and emergency attendances across Sefton, predominantly these were from the Southport and Formby CCG, which accounted for three quarters (409 of 543) of Sefton A&E attendances
- The rates of attendances per 100,000 differ across the two Sefton CCG's. For Southport & Formby the rate of attendances in 2013/14 was 357.89 per 100,000 population, the 60th highest of the 211 CCG's included in the dataset and far higher than the national average across England of 243.54.
- For South Sefton CCG the rate of psychiatric disorder attendances is 84.06 per 100,000, far lower than the England average and putting it 152nd on the list of 211 CCG's
- With the Exception of Wirral, South Sefton has the lowest rate of psychiatric A&E attendances of all wider Merseyside CCG's and while Southport & Formby has a far higher rate than the national average, only Halton, South Sefton & Wirral have lower rates across Merseyside

% Mental Health Service Users Who Were Inpatients in a Psychiatric Hospital

% Mental Health Service Users Who Were Inpatients in a Psychiatric Hospital (2013/14)

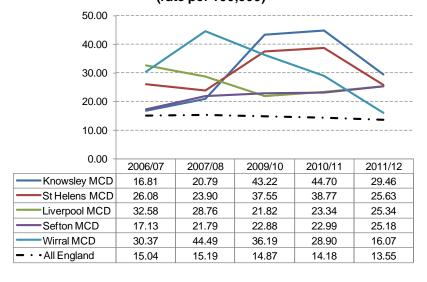


- The above chart shows the proportion of mental health service with an open hospital spell at the end of the each quarter of 2013/14 (no figures available for Q4)
- Sefton has consistently had the lowest proportion of service users in hospital cross the Merseyside areas, at around the 1% mark, this equates to an average of 102 patients in both in each quarter.
- As with all the Merseyside areas the proportion of service users in hospital at the end of each quarter is below the average across the whole of England were more than 2% of mental health service users are inpatients at the end of each period.

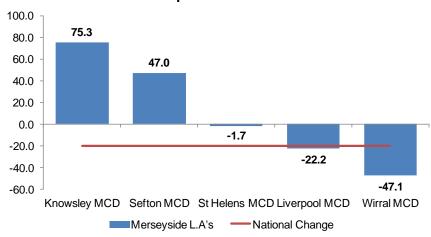
Schizophrenia

- Schizophrenic disorders result in moderate or severe disability in 60% of cases. Schizophrenia ranks fifth among men and sixth among women as a leading cause of years lived with disability. However, more than 50% of people with schizophrenia are not receiving appropriate care and 90% of people with untreated schizophrenia are in developing countries
- Approximately 220,000 people in England and Wales have a diagnosis
 of schizophrenia and the condition is estimated to account for
 approximately 30% of the total expenditure on adult mental health and
 social care services
- Mortality among people with schizophrenia is approximately 50% above that of the general population, partly as a result of an increased incidence of suicide (about ten percent die by suicide) and violent death, and partly as a result of an increased risk of a wide range of physical health problems.
- The rate of emergency admissions for schizophrenia sufferers across Sefton in 2011/12 is 25.18 per 100,000, which is the second lowest across Merseyside local authority areas, however this is significantly higher (almost double) than the national rate across England of 13.55 per 100,000
- Along with Knowsley, Sefton is one of only two Merseyside authorities to have seen an increase in the rate of admission since 2006/07, with the rate rising from 17.13 in 2006/07 to the current rate of 25.18, an increase of more than 47%.
- Year on year increases across each of the five years analysed, combined with an overall five year reduction of more than 20% across England have seen the rate in Sefton go from similar to the national rate to significantly higher

Emergency Hospital Admissions for Schizophrenia (rate per 100,000)



Change in Emergency Hospital Admissions for Schizophrenia 2006/07-2011/12

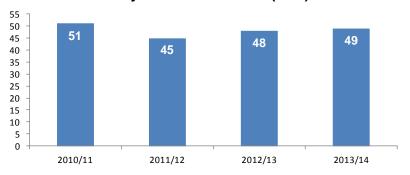


Mental Health Community Teams

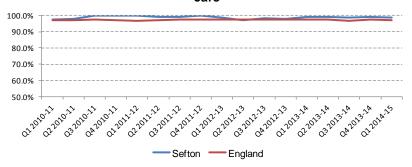
- The top chart show that the number of new psychosis cases being served by community health early intervention teams has remained fairly consistent between 2010/11 and 2013/14. At a CCG level there is a fairly even split in the number of new cases for 2013/14 (CCG level data not available before this) with South Sefton having slightly more cases with 26 (53%)
- Across Sefton the proportion of patients on Care Programme Approach (CPA) followed up within 7 days of discharge from inpatient care has been consistently above 97% for each quarter from 2010/11 Q1 onwards, with an average across all quarters of 98.8%. While across England levels have also been consistently above 97% the average is slightly below that of Sefton at 97.3%
- Similarly the proportion of acute ward admissions that have been gate kept by teams in Sefton since 2010/11 have been high, with the exception of Q1 2010/11 when 95.8% were seen by the teams levels have been above 97% for each quarter, at an average of 98.9%, compared to an average across England of 97.9%.
- Indeed in nine of the 17 quarters since 2010/11 Sefton has achieved 100% of acute ward admissions being gate kept by teams

Source: NHS England

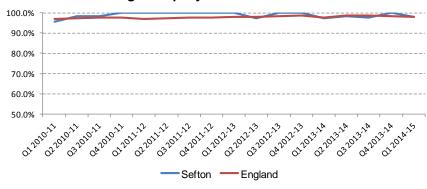
Number of new cases of psychosis served by Early Intervention teams (YTD)



Proportion of patients on CPA who were followed up within 7 days after discharge from psychiatric inpatient care



Proportion of admissions to acute wards that were gate kept by the CRHT teams

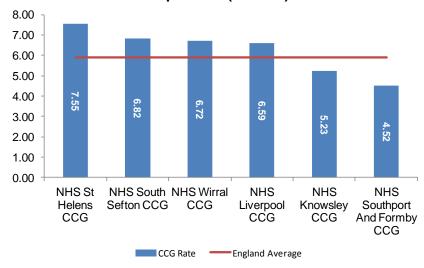


Depression

- Depression is a common mental disorder that causes people to experience depressed mood, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, and poor concentration. Depression can happen to anyone. Many successful and famous people who seem to have everything going for them battle with this problem. Depression also affects people of every age
- Half of the people who have depression will only experience it once but for the other half it will happen again. The length of time that it takes to recover ranges from around six months to a year or more.
- In 2012/13 there were more than 13,000 patients aged 18 and over with depression recorded on practice disease registers for the first time, which equates to around one in twenty of the adult population. This represents a year on year reduction of 60% from 2011/12 figures
- Within Sefton there are differences in the level of first time recordings of depression, with South Sefton accounting for almost two thirds of all recorded cases in 2012/13, having accounted for 61% of cases in the previous year.
- Both Sefton CCG's have had significant year on year reduction. In South Sefton
 the number of patients aged 18 and over with depression recorded on practice
 disease registers for the first time fell by 57%, while in Southport & Formby CCG
 the number fell by 64%
- In 2011/12 South Sefton CCG had the 11th highest rate of first time recordings of depression and as a result year on year reduction was the 41st highest in 2012/13 (Still in the top quintile). Similarly reductions in Southport & Formby CCG has seen cases go from the 88th highest to the 187th highest (lowest quintile).
- Data for 2012/13 shows that Southport & Formby CCG has a rate of recorded depression cases lower than any other Merseyside CCG and considerably lower than the national average, while South Sefton has the second highest rate behind St Helens

	201	1/12	201	2/13
	Count	% of Population	Count	% of Population
South Sefton	19962	16.04	8497	6.68
Southport & Formby	12603	12.61	4531	4.52
Sefton Total	32565	14.52	13028	5.8

First Time Recording of Depression as % of Population (2012/13)

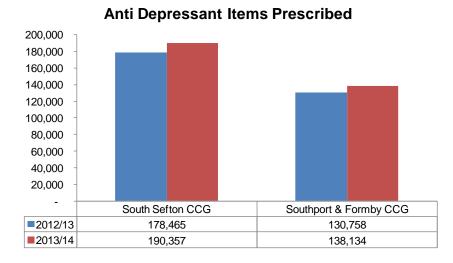


 One in ten of all respondents to the question "What is the state of your health today?" in the 2012/13 GP Survey who answered "moderately anxious or depressed", "severely anxious or depressed" or "extremely anxious or depressed" in Southport & Formby, while in South Sefton CCG more than 16% (one in six) gave these answers, putting it in the top 10% of CCG'S for people feeling depressed or anxious.

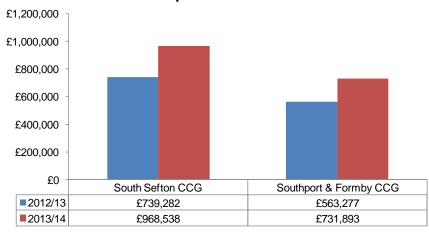
Source: PANSI

Anti Depressant Prescribing

- For some people, drugs are a short-term solution used to get them over an immediate crisis. For other people, drugs are an ongoing, long-term treatment that enables them to live with severe and enduring mental health problems
- In 2013/14 total of 328,491 anti- depressant items were prescribed across Sefton, an increase of 6% on 2012/13 when a total of 309,223 items were prescribed
- Around 60% of anti depressant items were prescribed to patients in South Sefton CCG in 2013/14. The number of items prescribed in 2013/14 in South Sefton has shown a year on year increase of 6.7% since 20012/13, rising from 178,465 to 190,357 in 2013/14. While the level of prescribing in Southport & Formby CCG is lower than in South Sefton there has still been a year on year increase of 5.6%, rising from 130,758 in 2012/13 to 138,134 in 2013/14.
- As a result of increasing levels of prescribing and an increase in the average cost per item overall costs have increased from £1,302,560 in 2012/13 to £1,700,431 in 2013/14, a year on year increase of more than 30%. As would be expected as a result of increased prescribing both CCG's have seen increasing costs for anti depressants.
- In South Sefton CCG, where the average cost per item has risen from £4.14 in 2012/13 to £5.09 in 2013/14, the cost of anti depressant prescribing has increased by 31% from £739,282 in 2012/13 to £968,538 in 2013/14. In Southport, where average item costs have increased from £4.30 to £5.29 per item the overall cost has risen from £563,277 to £731,893, an increase of 30%



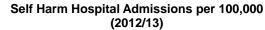
Cost of Anti Depressant Items Prescribed

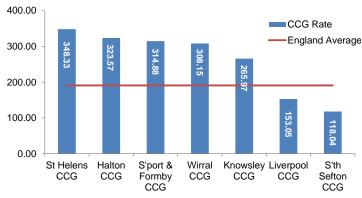


Self Harm

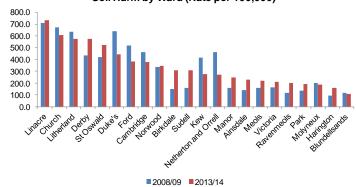
- Self-harm is a symptom of underlying mental or emotional distress. Young people who self-harm mainly do so because they find it helps relieve distressing feelings and helps them cope with problems in their lives. It is rarely about trying to end their life. A wide range of factors may be involved. Very often there are multiple triggers, or daily stresses, rather than one significant change or event. Factors can include: feeling isolated, academic pressures, family problems, low self esteem. eating disorders, depression, anxiety disorders, substance abuse, conduct and oppositional disorders
- People with current mental health problems are 20 times more likely than others to report having harmed themselves in the past. (National Collaborating Centre For Mental Health)
- In 2012/13 there were a total of 517 hospital admissions for Self Harm across the two CCG's that make up Sefton, almost two thirds of which (332 of 517) were from Southport and Formby CCG. The rate per 100,000 population in Southport & Formby of 314.89 Puts it amongst the 10% of English CCG's with the highest rates of self harm hospital admissions, and significantly higher than the England rate of 190.99 per 100,000.
- The rate of 118.04 in South Sefton is significantly lower than the England rate and far lower than the rate within Southport & Formby. In addition South Sefton CCG has the lowest of the wider Merseyside CCG's and one of only two Merseyside areas below the national average
- At ward level there are clear links between self harm and deprivation with the six most deprived wards across the borough all in the seven wards with the highest rates of self harm. However analysis of trend over a five year period shows it is the least deprived areas of the borough that have seen the biggest increases in cases of self harm, with Birkdale seeing a 105% increase and Harington a 72% increase. This may be a result of the recession and residents in these areas being impacted more severely.
- Research shows that the most common age for both males and females to self harm is between the ages of 15 and 24. Within this females are most likely to self harm between the ages of 15 and 19 years, while males are more likely to self harm between the ages of 20 and 24 years.
- Overdose is the most common reason for hospital admission for self harm, account for 75% amongst females and 62% amongst males. In almost half of all self harm cases admitted to hospital alcohol is involved

Source: Mental Health Foundation / HSCIC

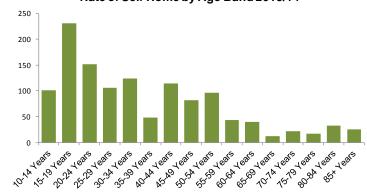




Self Harm by Ward (Rate per 100,000)

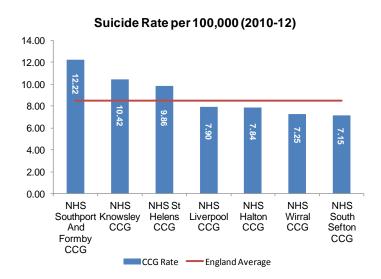


Rate of Self Home by Age Band 2013/14

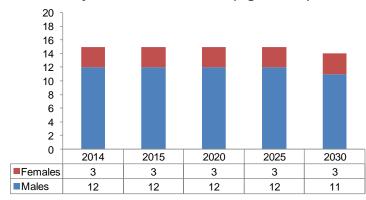


Suicide

- Around 75% of suicides are men and in almost all cultures, the suicide rate rises with age.
 The highest rates of suicide in the UK are among people aged over 75 and it remains a common cause of death in men under the age of 35.
- People with a diagnosed mental health condition are at particular risk. Around 90% of suicide victims suffer from a psychiatric disorder at the time of their death. Those at the highest risk of suicide are people suffering from alcoholism, clinical depression or schizophrenia. Previous suicide attempts are also an indication of particular risk. Up to 20% of survivors try again within a year, and as a group they are 100 times more likely to go on to complete suicide than those who have never attempted suicide. In Sefton and across Cheshire and Merseyside approximately 50% of those taking their life by suicide were known to mental health services
- Certain factors are known to be associated with increased risk of suicide. These include: drug and alcohol misuse, unemployment, social isolation, poverty, poor social conditions, imprisonment, violence, family breakdown.
- For young people, bullying, family turmoil, mental health problems, unemployment and a
 family history of suicide can play a part in increasing the risk of suicide. Amongst the young,
 80% of suicides are male, and one in three young people who take their lives are
 intoxicated at the time of death.
- For older people, poverty, poor quality housing, social isolation, depression and physical health problems are factors which can increase the risk of suicide. Over 1,000 men aged 50+ end their own lives every year in England and Wales.
- Family and friends of people committing suicide are 6 times more at risk of taking their own lives. Their health, quality of life and ability to function well at work and in their personal lives are also severely affected following the suicide of a friend or relative
- Between 2010 and 2012 there were a total of 72 suicides recorded across Sefton, 42 in Southport & Formby CCG at a rate of 12.22 per 100,000 population, and 35 in South Sefton CCG at a rate of 7.15 per 100,000.
- Southport and Formby CCG has the highest rate of suicide across Merseyside and is higher than the national average. Southport and Formby has one of the 10 highest rates of suicide, per 100,000 population across England



Projected Suicide Rates (Age 18-64)



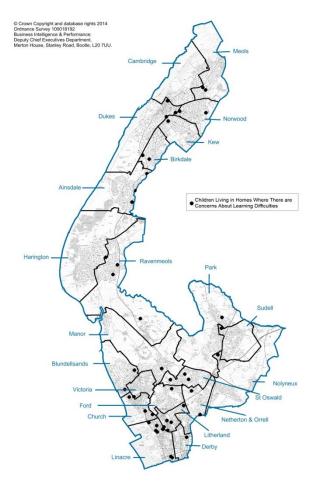
Source: Mental Health Foundation / HSCIC / PHE Mental Health Profiles

Children Living in Homes Where There is Concerns About Mental Health

Mental Health	Number of Cases	% of cases with factor types answered	Cases with more than one Factor Type	% of cases with more than one Factor Type
Total Number of Cases	300	100	190	100
Total Number of Cases with Mental Health as a Factor	76	25	67	35
Concerns about the mental health of the child	21	7	19	10
Concerns about the mental health of the parent/carer	59	20	52	27
Concerns about the mental health of another person in the family/household	10	3	10	5

The three concerns will not add up to the total number of individual cases known for Mental Health because they are not mutually exclusive i.e. More than one concern can be recorded per case e.g. the child and the Parent / Carer may have been identified as both having Mental Health concerns within the same case

- In all cases with factors identified, Mental Health was recorded as a concern in 25%
- Of the 76 cases which had Mental Health identified, 67 had one or more other factors identified (88%)
- Parent / Carer with Mental Health concerns were the most common Mental Health concern recorded, accounting for 78% (59) of all cases citing Mental Health
- Domestic Violence was the largest secondary factor reported, approaching half (43%)
 of cases which cited Mental Health also had Domestic Violence cited
- Alcohol was the second largest additional factor for cases which cited Mental Health (42%)
- The map shows there is a large cluster of cases with Mental Health factors in the middle to South of the borough, particularly around the boarders of Linacre and Litherland wards
- There is a smaller cluster in the North of the borough specifically bordering the town centre.



Dementia

Dradiated Demantic	Sefton						
Predicted Dementia	2014	2015	2020	2025	2030		
People aged 65-69	215	220	207	231	253		
People aged 70-74	378	381	459	434	486		
People aged 75-79	714	714	741	895	855		
People aged 80-84	1,146	1,156	1,206	1,270	1,549		
People aged 85-89	1,094	1,133	1,328	1,467	1,578		
People aged 90 and over	899	957	1,194	1,549	1,903		
Total	4,446	4,561	5,135	5,846	6,624		

Sources: POPPI

- Dementia is a decline in mental ability which affects memory, thinking, problem-solving, concentration and perception. It occurs as a result of the death of brain cells or damage in parts of the brain that deal with our thought processes. People with dementia can become confused and some also become restless or display repetitive behaviour. They may also seem irritable, tearful or agitated which can be very distressing for both the person with dementia and their family and friends
- Dementia costs the UK economy £23 billion per year. This is more than cancer (£12bn) and heart disease (£8bn) combined (www.alzheimersresearchuk.org)
- There are a total of 2,191 patients with Dementia registered with GPs within the two Sefton CCGs,
 - 1,060 (48%) are within the South Sefton CCG
 - 1,131 (52%) are within the Southport and Formby CCG
- However, figures produced by Oxford Brookes University predict there
 are considerably more people affected by dementia than are registered
 with GP's. Current estimates suggest there are almost 4,500 people aged
 over 65 affected by dementia, more than double the number registered
 with GP's
- As a result of an aging population it is forecasts that by 2030 the number of over 65's in Sefton affected by dementia will increase by 49% to 6,624.

Early Onset Dementia

Predicted Early Onset of	Seton						
Dementia	2014	2015	2020	2025	2030		
People aged 30-39	2	2	2	2	2		
People aged 40-49	9	8	7	7	7		
People aged 50-59	39	39	40	35	32		
People aged 60-64	27	28	30	33	30		
Total	77	77	79	77	71		

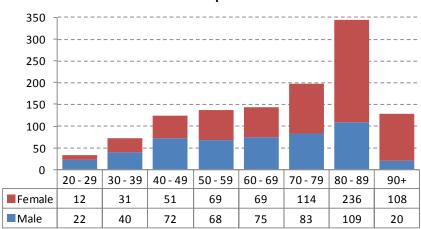
Sources: PANSI

- As well as the 4,446 dementia sufferers over the age of 65 in Sefton, it is estimated that there are 77 people who are affected by Early Onset Dementia (2014)
- While the number of dementia sufferers over the age of 65 is set to increase considerably by 2030, the number of residents that suffer from early onset dementia is predicted to fall slightly, by around 8% to 71
- Available data would suggest that males will be more prone to Early Onset Dementia than females. In 2014, 58% of all patients with Early Onset Dementia are males. Projection for both males and females show the number of sufferers is set to reduce by 2030.

Source: Health and Social Care Information Centre/ PANSI / POPPI

Local Authority Support - All

AllSefton Mental Health Patients Reciving Services from LA - 30th April 2014

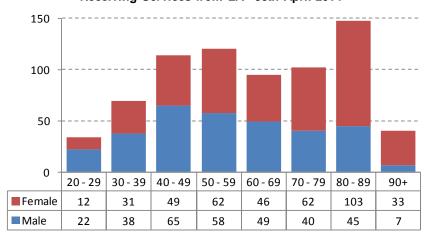


- There were a total of 1,179 individuals receiving care packages relating to Mental Health within Sefton, 42% (497) of those were receiving services relating to Dementia
- There are more female service users across the borough, 59% (690) of those in receipt of support are female.
- The chart shows the highest age band for those receiving mental health services from Sefton were between 80 and 89 years of age, with this ten year age range accounting for almost 30% of all service users
- Three out of four of those aged 80-89 receiving support in the 80-89 age group are receiving services for Dementia.

Source: Sefton MBC

Local Authority Support - Community

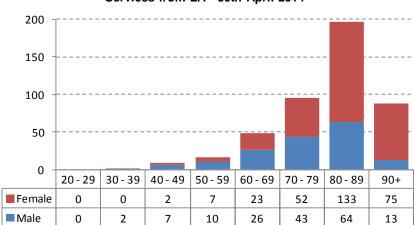
Sefton Mental Health Patients Living in the Community Receiving Services from LA - 30th April 2014



- Of the 1,179 individuals receiving care packages relating to Mental Health from Sefton, 722 (61%) received services and lived within the community
- 70% (503) were receiving service for a mental health condition,
 30% (219) were receiving services relating to Dementia
- 55% (398) of the cohort were females
- The chart shows the highest age band for those receiving mental health services from Sefton and residing within the community were again between 80 and 89 years of age (20%)
- Of the total (148) 80 to 89 year olds 78% (115) were receiving services for Dementia
- The age band with the highest number of female service users was 80 – 89, with the highest age band for males being between 40 – 49 years.

Local Authority Support - Residential

Sefton Mental Health Patients Reciving Residential Services from LA - 30th April 2014

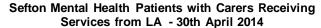


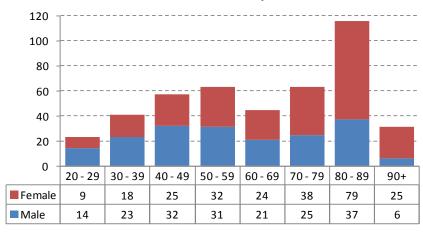
- Of the 1,179 individuals receiving care packages relating to Mental Health within Sefton, 457 (39%) received residential services
- 61% (278) were receiving service relating to Dementia, 39% (179) were receiving services for a mental health condition
- 64% (292) of the cohort were females
- The chart shows the highest age band for those receiving mental health residential services from Sefton were again between 80 and 89 years of age (43%).

Qualitative

Source: Sefton MBC

Local Authority Support - Carers





- Of the 1,179 individuals receiving care packages relating to Mental Health from Sefton, 439 (37%) receiving services from a carer
- 59% (260) were receiving service for a mental health condition,
 41% (179) were receiving services relating to Dementia
- 57% (250) of the cohort were females
- The chart shows the highest age band for those receiving mental health services from Sefton with a care were again between 80 and 89 years of age (26%)
- Of the total (116) 80 to 89 year olds 81% (94) were receiving services for Dementia
- As previously reported (Vulnerable People Section) it is estimated that 18% (5886) carers may suffer from Mental Health problems as shown by Liverpool Public Health Observatory August 2011.

Young Peoples Mental Health - Factors influencing and influenced by mental health

Looked-after children

• Looked-after children are more likely to experience mental health problems. It has been found that among children aged 5 to 17 years who are looked after by local authorities in England, 45% had a mental health disorder, 37% had clinically significant conduct disorders, 12% had emotional disorders, such as anxiety or depression, and 7% were hyperkinetic. Variation was shown depending on the type of placement with two-thirds of children living in residential care found to have a mental health disorder compared with four in ten of those placed with foster-carers or their birth parents.

Homelessness and sleeping rough

- Homeless adolescents and street youths are likely to present with depression and attempted suicide, alcohol and drug misuse, and are
 vulnerable to sexually transmitted diseases, including acquired immune deficiency syndrome (AIDS). Two major studies of this group found
 significant histories of residential care, family breakdown, poor educational attainment and instability of accommodation. These were
 associated with sexually risky behaviours, substance misuse and co morbid psychiatric disorders, particularly depression.
- The estimated number of young people aged 16 to 24 sleeping rough in England in 2008/9 was 3200, giving a rate of 51.3 per 100,000. In a study of 16 to 25 year olds who were sleeping rough in London, 67% had mental health problems. Applying these rates to the population in Sefton provides an estimate of 10 young people with mental health problems who are sleeping rough.

Suicide and self-harm

- Three times as many young men as young women aged between 15 and 19 committed suicide
- Only 14% of young people who committed suicide were in contact with mental health services in the year prior to their death, compared with 26% in adults.
- Looking at the difference between sexes, 20% of young women were in contact with mental health services compared to only 12% of young men
- Levels of self-harm are higher among young women than young men. The rates of self-harm in young women averaged 302 per 100,000 in 10 to 14 year olds and 1,423 per 100,000 in 15 to 18 year olds. Whereas for young men the rates of self-harm averaged 67 per 100,000 in 10-14 year olds and 466 per 100,000 in 15 to 18 year). Self-poisoning was the most common method, involving paracetamol in 58.2 % of episodes
- Presentations, especially those involving alcohol, peaked at night. Repetition of self-harm was frequent (53.3 % had a history of prior self-harm and 17.7 % repeated within a year) Common characteristics of adolescents who self-harm are similar to the characteristics of those who commit suicide
- As many as 30% of adolescents who self-harm report previous episodes, many of which have not come to medical attention. At least 10% repeat self-harm during the following year, with repeats being especially likely in the first two or three months

Source: http://atlas.chimat.org.uk/IAS/profiles/profile1e34&geoTypeId=2

Young Peoples Mental Health

Please Note information on young people's mental health is based on national research and data. As part of the ongoing development of the SSNA it is hoped that through the LSCB more localised information will be available in the near future

	Aged 16 to 19 with neurotic disorders									
	Mixed anxiety and depressive disorder	Generalised anxiety disorder	Depressive episode	All phobias	Obsessive compulsive disorder	Panic disorder	Any neurotic disorder			
Males	345	110	65	45	65	35	580			
Females	790	70	175	135	60	40	1,220			
Total	1135	180	240	180	125	75	1800			

Type of Disorder	Boys	Girls	Total
Conduct Disorders (Age 5-10yrs)	595	230	825
Conduct Disorders (Age 11-16yrs)	780	475	1255
Emotional Disorders (Age 5-10yrs)	190	210	400
Emotional Disorders (Age 11-16yrs)	385	570	955
Hyperkinetic Disorder (Age 5-10yrs)	235	35	270
Hyperkinetic Disorder (Age 11-16yrs)	235	40	275
Less Common Disorders (Age 5-10yrs)	190	35	225
Less Common Disorders (Age 11-16yrs)	155	105	260

School-age children

• Prevalence varies by age and sex, with boys more likely (11.4%) to have experienced or be experiencing a mental health problem than girls (7.8%). Children aged 11 to 16 years olds are also more likely (11.5%) than 5 to 10 year olds (7.7%) to experience mental health problems. The table shows the estimated prevalence of mental health disorder by age group and sex in Sefton..

16-19 Year Olds

• A study conducted by Singleton et al (2001) has estimated prevalence rates for neurotic disorders in young people aged 16 to 19 inclusive living in private households. The tables below show how many 16 to 19 year olds would be expected to have a neurotic disorder if these prevalence rates were applied to the population of Sefton.

Autistic Spectrum Disorder (ASD)

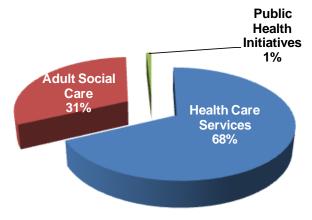
- The European Commission (2005) highlights the problems associated with establishing prevalence rates for Autistic Spectrum Disorders. These include the absence of long-term studies of psychiatric case registers and inconsistencies of definition over time and between locations.
- Nevertheless the Commission estimates that according to the existing information, the age-specific prevalence rates for 'classical autism' in the European Union (EU) could be estimated as varying from 3.3 to 16.0 per 10,000. These rates could however increase to a range estimated between 30 and 63 per 10,000 when all forms of autism spectrum disorders are included. Debate remains about the validity and usefulness of a broad definition of autism. The EU definition of rare diseases focuses on those diseases lower than 5 per 10,000. The Commission notes that ASD could be considered as a rare disease using the most restrictive diagnosis criteria but it seems more appropriate to not refer to ASD as a rare disease.

Source: http://atlas.chimat.org.uk/IAS/profiles/profile1e34&geoTypeId=2

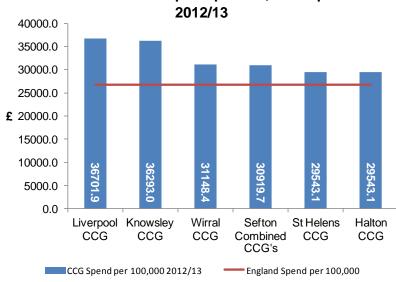
Cost of Mental Health

- Spending on adult mental health services in Sefton currently amounts to £20,809,842 across health, social care and public health (excluding the block contract with Mersey Care).
- The Council spends in the region of £6.5 million per year (31%) on mental health services through the adult social care and supporting people budgets, and a further £173,000 on public health initiatives. It is worth noting that these figures can vary as people enter and leave services.
- The level of service provision in social care has historically been staid but the last few years has seen a dramatic increase in spending on supported living schemes which now amounts to £3.2 million of the above spend.
- This could indicate either an increase in needs for individuals requiring 24 hour supported living of that there is a lack of other provision that could meet needs in a less costly way with an element of positive proactive risk taking.
- To allow comparison with other areas and the nations average CCG Mental Health spend for 2012/13 has been calculated to a rate per 100,000 population over the age of 18. The combined spend per 100,000 across both Seftron CCG's is £30,9191.70, the third lowest across the wider Merseyside CCG'S. However, as with all the Merseyside CCG's this is above the rate across England as a whole

Breakdown of Mental Health Spend



CCG Mental Health Spend per 100,000 Population



Mental Well Being

WEMWBS is a methodology for assessing the population's wellbeing. The seven item WEMWBS uses a five point Likert scoring system, with responses ranging from 'none of the time' through to 'all of the time'. A score is attributed to each response for each of the seven items in the scale:

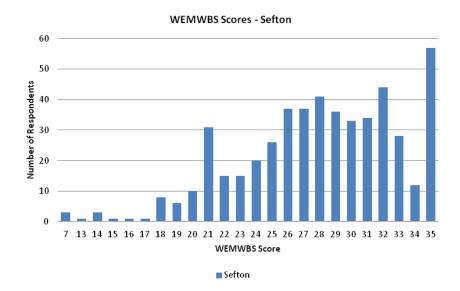
- I've been feeling optimistic about the future
- I've been feeling useful
- I've been feeling relaxed
- I've been dealing with problems well
- I've been thinking clearly
- I've been feeling close to other people
- I've been able to make up my own mind about things

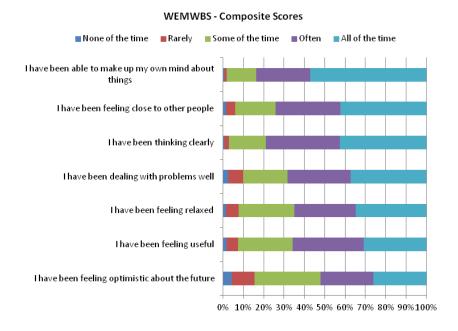
From the sample size of 500 respondents within Sefton, it was possible to determine a local mean WEMWBS score. The mean WEMWBS Score for Sefton was 28.15, which was above the North West average of 27.66. The mean WEMWBS Score for Sefton has increased from the 2009 survey, which was 27.59 and below the North West average.

The highest possible WEMWBS score is 35, and the lowest score is 7. The distribution of scores across the region is shown in the WEMWBS Scores chart

Within Sefton, 14.6% of those surveyed had low levels of mental wellbeing, 62.2% had moderate levels of mental wellbeing and 21.2% had high levels of mental wellbeing. The proportion of those surveyed with high mental wellbeing was greater than the North West average and the proportion with low mental wellbeing was less that the North West average.

Considering the statements that contribute to WEMWBS, 84% of the population say that they are able to make up their own minds about things. Similarly, approximately 79% say that they have been able to think clearly. A large proportion of the Sefton population (74%) say that they have been feeling close to other people. A similar proportion of the population report that they have been dealing with problems well and feeling useful (68% and 66% respectively). Approximately 65% of the population reported that they have been feeling relaxed, while just over 50% of the Sefton population say that they are feeling optimistic about the future.





Source: North West Mental Wellbeing Survey

Life Satisfaction

Approximately 80% of adults stated that they were satisfied with their life as a whole. This has increased from just over 60% in the 2009 mental wellbeing survey. Approximately 65% of adults across the North West region say that they are satisfied. This suggests that the adult population within Sefton are more satisfied with their live when compared with the North West average.

Some key findings:

- Approximately 60% of the population with low mental wellbeing say they are satisfied with their life
- Approximately 80% of those with moderate mental wellbeing say they are satisfied with their life
- Almost 94% of those with high mental wellbeing say they are satisfied with their life.

Relationships

Speaking to neighbours

Approximately 40% of residents say that they speak to their neighbours most days and a further 40% speak to their neighbours once or twice a week. The proportion of adults who speak to their neighbours on most days has fallen from 57% in 2009; however the proportion who speak to their neighbours once or twice a week has increased from 27%. This trend is similar to the North West average trend, which has seen a fall in the numbers of adults speaking to their neighbours on most days. The proportion of adults who never speak to their neighbours has increased from 2% in 2009 to 4% in 2012/13.

Some key findings:

- Approximately 30% of those with low wellbeing speak to their neighbours most days and 10% never speak to their neighbours
- Approximately 40% of those with moderate wellbeing speak to their neighbours most days and 3% never speak to their neighbours
- Almost 50% of those with high mental wellbeing speak to their neighbours most days, however 5% never speak to their neighbours

Meeting with friends and relatives

Just over 40% of the Sefton population see friends or relatives who do not live with them most days, which is similar to the North West average. Approximately 4% of Sefton residents meet with friends or relatives less frequently that once per month, which is slightly worse than the North West average.

Some key findings:

- There appears to be very little difference between those with low, moderate or high mental wellbeing who see their friends or relatives most days
- Approximately 10% of those with low mental wellbeing see their friends or relatives less than once a month, compared with 4% of those with high mental wellbeing.

Ability to rely on others

Ability to rely on others was consistently high for the four domains, however the proportions of adults who say they can rely on others has worsened since the 2009 survey.

Some key findings:

- Approximately 90% of adults say they can rely on others if they needed a lift somewhere urgently. This was similar to the North West average.
 The Sefton average varied when analysed with mental wellbeing: Approximately 80% of those with low mental wellbeing could rely on others, 91% of those with moderate wellbeing could rely on others and 97% of those with high mental wellbeing could rely on others.
- Approximately 85% of adults within Sefton say they can rely on others if they are ill in bed and need help at home. This was worse than the
 North West average of 90%. The Sefton average varied when analysed with mental wellbeing: Approximately 75% of those with low mental
 wellbeing could rely on others, 85% of those with moderate wellbeing could rely on others and 97% of those with high mental wellbeing could
 rely on others
- Approximately 78% of adults within Sefton say they can rely on others if the needed to borrow £100 urgently. This is better than the North West average. The Sefton average varied when analysed with mental wellbeing: approximately 60% of those with low mental wellbeing could rely on others, 77% of those with moderate mental wellbeing could rely on others and 94% of those with high mental wellbeing could rely on others

Approximately 83% of adults within Sefton say they can rely on others for comfort and support after a serious personal crisis. This was worse than the Sefton average of 94%. The Sefton average varies when analysed with mental wellbeing: approximately 68% of those with low mental wellbeing say they could rely on other, 83% with moderate mental wellbeing could rely on others and 99% of those with high mental wellbeing could rely on others.

Satisfaction with personal relationships

Sixty-five percent of Sefton adults say they are very satisfied with their personal relationships. This is broadly similar to the Sefton average from the 2009 survey and slightly better than the North West average of 60%. Approximately 1% of Sefton adults say they are very dissatisfied with their personal relationships, which is similar to the North West average and the Sefton average from the 2009 survey.

Some key findings:

- Approximately 30% of the population in Sefton with low mental wellbeing are very satisfied with their personal relationships, which is similar to the North West average. Approximately 3% are very dissatisfied with their personal relationships, which is better than the North West average
- Approximately 68% of the population in Sefton with moderate mental wellbeing are very satisfied with their personal relationships, which is better than the North West average. One percent of the population say they very dissatisfied with their personal relationships. This is worse than the North West average
- Approximately 81% of the population in Sefton with high mental wellbeing are very satisfied with their personal relationships, which is similar
 to the North West average. However, 2% say they are very dissatisfied, which is worse than the North West average.

Source: North West Mental Wellbeing Survey

Health

General Health

In total, 41% of the adult population say they have good health, which has improved since the 2009 survey. This is also better than the North West average. A further 30% of the population in Sefton say they have good health. Around 20% say their health is fair and 6% say their health is bad. Finally, approximately 1% of the population say their health is very bad. This is similar to the North West average.

Some key findings:

- Approximately 20% of those with low mental wellbeing state that their health is very good and 5% state their health is very bad.
- Approximately 42% of those with moderate wellbeing state that their health is very good and around 1% state their health is very bad
- Approximately 60% of those with high mental wellbeing say that they have very good health. No respondents with high mental wellbeing stated that they had very bad health

Mobility

Around 81% of the Sefton population state that they have no problems walking around. This is similar to the North West average and to the Sefton average. Approximately 18% said they have some problems walking, which is similar to the North West average. Finally, approximately 1% said they were confined to bed. Again, this is similar to the North West average.

Pain

Around 75% of adults in Sefton said they have no pain or discomfort, which is better than the North West average of 70%. However, it is worse than the Sefton average from the 2009 survey. Approximately 20% say they have moderate pain. Again, this is worse than the Sefton average from the 2009 survey. Finally, almost 5% say they are in extreme pain. This is better than the North West average.

Anxiety and Depression

Around 85% of adults in Sefton say that they are not anxious or depressed. This is similar to the North West average. Approximately 3% of adults say that they are extremely anxious or depressed. This is similar to the North West average

Some key findings:

- Around 68% of adults with low mental wellbeing said that they are not anxious or depressed. Approximately 13% of adults say that they are extremely anxious or depressed
- Approximately 89% of Sefton adults with moderate mental wellbeing say that they are not anxious or depressed. Around 1% say that they are extremely anxious or depressed
- Approximately 93% of Sefton adults with high mental wellbeing say that they are not anxious or depressed. No respondents with high mental wellbeing said they were extremely anxious or depressed.

Lifestyle

Physical Activity

Overall, approximately 30% of Sefton adults were currently meeting the Government's physical activity target. This has improved since Sefton's 2009 survey and better than the 2012 North West average.

Some key findings:

- Of those adults with low mental wellbeing, approximately 18% were meeting physical activity targets. This is similar to the North West average
- Of those adults with moderate mental wellbeing, approximately 30% were meeting physical activity targets. This is better than the North West average
- Of those adults with high mental wellbeing, approximately 45% were meeting physical activity targets. Again, this is better than the North West average.

Sedentary Behaviour

In total, approximately 6% of adults spend more than 8 hours sitting or reclining on a typical day. This has improved since 2009, when the figure was 9%. The 2012 figure is broadly similar to the North West average. Those with low levels of mental wellbeing were more likely to spend more than 8 hours sitting or reclining and those with high levels of mental wellbeing spending the least amount of time sitting or reclining.

Smoking Status

Overall, approximately 19% of Sefton adults state that they are a current smoker. This has improved slightly when compared with the 2009 survey figures and better than the 2012 North West average. There appeared to be little fluctuation between current smokers and levels of mental wellbeing within Sefton.

Alcohol Consumption

In total, 32% of adults within Sefton said they abstained from alcohol, 59% presented lower risk alcohol consumption, 5% presented increasing risk alcohol consumption and 3% were classified as a high risk drinker. The figures for increasing risk and higher drinkers were better than the North West average.

Some key findings:

- Approximately 2.5% of the population with low mental wellbeing were increasing risk drinkers and a further 5% were high risk drinkers.
- Approximately 6% of the population with moderate mental wellbeing were increasing risk drinkers and a further 3% were high risk drinkers
- Approximately 4% of the population with high mental wellbeing were increasing risk drinkers and a further 1% were high risk drinkers

Source: North West Mental Wellbeing Survey

Cannabis Use

Across Sefton, 92% of the population have never used cannabis. Less than 1% of Sefton's population use cannabis more than once a month. The figure for those with low mental wellbeing is worse at 2.5%, but it is broadly similar to the Sefton average for those with moderate or high mental wellbeing. The rate of regular cannabis use reported in Sefton is less than the North West average.

Money

In total, 37% of the Sefton population say that they never worry about money. This has improved since the 2009 survey and now similar to the North West average. However, approximately 4% of Sefton's population say that they worry about money all the time, and a further 14% worry about money quite often. These figures are better than the North West average. Those with low mental wellbeing are more likely to worry about money often than those with high mental wellbeing.

<u>Place</u>

Satisfaction with local area as a place to live

Within Sefton, 71% of the population are very satisfied with their local area as a place to live. This is better than the North West average of 57%. In addition to this, 22% of the population are fairly satisfied with their local area as a place to live. At the other end of the scale, just over 2% of the population are very dissatisfied with their local area as a place to live. This is worse than the North West average.

Some key findings:

- Those with low mental wellbeing are more likely to be dissatisfied with their local area when compared with those with high mental wellbeing.
- Almost 80% of those with high mental wellbeing are satisfied with their local area. This compares with 60% of those with low mental wellbeing who are satisfied with their local area.

Sense of belonging to immediate neighbourhood

• Just over 62% of the Sefton population feel strongly that they belong to their immediate neighbourhood. This is better than the North West average of 38% and has improved since the 2009 survey results for Sefton. Almost 5% of the population say they feel strongly that they do not belong to their immediate neighbourhood. This is less than the North West average. Those with high mental wellbeing are more likely to feel that they belong to their immediate neighbourhood when compared with those with low mental wellbeing.

Decisions affecting local area

Approximately 44% of the Sefton population either tended to disagree or definitely disagreed that they could influence decisions within their local
area. This is lower than the North West average of 52%. Approximately 13% of Sefton's population definitely agree that they can influence
decision making in their local area. This is higher than the North West average. Those with low mental wellbeing were less likely to feel they
could influence decision making than those with high mental wellbeing.

Respondent Characteristics

Age

The age of respondents split by age with low, moderate and high mental wellbeing described below:

- Over 40% of the population with low mental wellbeing were aged over 65. Almost 23% were aged between 25 and 39, and over 15% were aged between 40 and 54:
- Just over 30% of those with moderate mental wellbeing were aged over 65. Approximately a quarter were aged between 40 and 54 and similar proportions (approximately 18%) were aged between 25 and 39 and 55-64;
- Almost a quarter of those with high mental wellbeing were aged over 65 and the same proportion was aged between 40 and 54. Approximately 20% were aged between 25 and 39.

Work status

In total, just over 45% of those surveyed were in either full time or part time paid employment. A further 2% were in full time education and almost 37% were retired. Just over 12% were out of work and the remaining 4% has an employment status classified as other.

Deprivation

In total, almost 24% of those surveyed lived from the top 20% most deprived communities within Sefton. A further 19% lived in the second most deprived communities, 26% lived in the third most deprived communities, almost 18% lived in the fourth most deprived communities and finally 13% lived in the least deprived communities.

Risk factors (taken from Sefton Mental Health Profiles)

Within the Sefton Mental Health Profiles, there are two additional factors defined as 'risk factors'. These are statutory homeless households, limiting long term illness and first time entrants to the youth justice system:

- The rate of statutory homeless households per 1,000 households in Sefton is 0.38. This is significantly better when compared with the England average of 2.03 and better than the North West average of 1.32
- The number of first time entrants into the youth justice system within Sefton between 2001 and 2011 was 1,166. This is significantly worse than the England average of 876 and also worse than the North West average

Levels of Mental Health and Illness (taken from Sefton Mental Health Profiles)

Within the Sefton Mental Health Profiles, there are a number of additional factors that describe mental health and illness within Sefton. These are outlined below:

- The percentage of adults with dementia within Sefton is 0.73. This is worse than the North West average of 0.57
- The percentage of adults with learning difficulties within Sefton is 0.57. This is higher than the North West average of 0.48

Mental Health Treatment in Sefton (taken from the Sefton Mental Health Profiles)

Within the Sefton Mental Health Profiles, there are a number of additional factors that describe mental health treatment within Sefton. These are outlined below:

- Within Sefton, the directly standardised rate for hospital admissions for mental health between 2009/10 and 2011/12 was 289. This is worse than
 the North West average of 256
- Within Sefton, the allocated average spend for mental health per head in 2011/12 was £216. This is similar to the North West average
- The rate of people using adult and elderly secondary mental health services per 1,000 population within Sefton is 3.1. This is higher than the North West average of 2.5
- The rate of people contacting mental health services per 1,000 population in 2010/11 within Sefton is 800. This is higher than the North West average of 440.

Mental Health Outcomes (taken from the Sefton Mental Health Profiles)

Within the Sefton Mental Health Profiles, there are a number of additional factors that describe mental health outcomes within Sefton. These are outlined below:

- The percentage of people with mental illness in settled accommodation within Sefton is almost 71%. This is better than the North West average
- The directly standardised rate for self harm hospital admissions was 192 in 2011/12, which was similar to the North West average
- The indirectly standardised mortality rate for suicide in 2010/11 within Sefton was 129, which was similar to the North West average
- The Improving Access to Psychological Therapies Recovery Rate in 2011/12 within Sefton was 26.1, which was worse than the North West average of 34.9