

Indications of Public Health in the English Regions 7: Mental Health London Regional Summary

The London Health Observatory (LHO) regional summary accompanies the national report *Indications of Public Health in the English Regions 7: Mental Health*, published by the Association of Public Health Observatories. It compares London with the findings for England across key indicators for mental health and ill health and its determinants, and outlines the main findings of the national report. It is important to note that regional comparisons often mask sub-regional inequalities.

Key messages for London

- **Despite London's significant wealth, there is also such significant deprivation and unemployment, and this explains, in large part, why London emerges alongside England's most uniformly deprived Northern regions with very high levels of mental health need.**
- **London's mental health service provision is often better than average and sometimes excellent and innovative compared with other regions, but this does not take London's high level of need into account- or inequalities within London.**
- **London's service users however, are less satisfied with their specialist mental health services than in other regions**
- **The challenges to London's commissioners and providers are very significant given the much greater diversity and mobility of users in the capital.**

Deprivation and the risk of Mental Illness

Many of the risk factors for mental illness are linked to deprivation, and the report shows that a general pattern occurs. The three northern regions (North East, North West and Yorkshire & Humber) show worse levels of deprivation than the three regions in the south (South East, South West and Eastern England). Deprivation levels for the two midlands regions (West Midlands, East Midlands) lie somewhere in between.

London displays patterns both of extreme deprivation and wealth. Three London local authorities are in the top ten most deprived boroughs in England. The large number of ethnically diverse, mobile populations in London is also not captured in routine statistics, but they have a huge impact on the mental health and support needs in London.

- The association between rates of mental illness and population characteristics such as poverty, unemployment and social isolation is well established. Needs indicators designed to estimate likely rates of mental health problems in communities suggest that London has

higher than the national average rates of both common mental health problems and severe mental illness.

- Employment can protect mental health by boosting confidence and self-esteem. People with mental health problems can be particularly sensitive to the negative effects of unemployment. London has the lowest rate of employment in the working age population of all regions in England (69.9% compared to 75.1% for England). It also has a markedly lower proportion of people with mental illness in employment (22% compared to 24.7% for England). London also has significantly lower rates of incapacity benefit claimants for people with mental and behavioural disorders (254.6 compared to 262.6 per 100,000 for England). However, this is unlikely to be the result of more people with mental health problems in work, but rather that many people with severe and disabling mental health problems are neither working nor receiving appropriate benefits.

Mental health wellbeing and quality of life

There is strong evidence for the effect of social, community and lifestyle factors on mental wellbeing and ill-health. Some of these issues are outside the control of the health services, but they clearly affect the need for health and support services.

- A quarter (25.5%) of people who responded to the 2004/05 British Crime Survey reported a high level of anxiety about violent crime. This compared to 16.6% in England as a whole. London also had the highest rate of all reported violent crime. When compared to England overall (225.5 per 10,000) the rate of reported violent crime (342.3 per 10,000) was significantly higher in the capital.
- High levels of social cohesion and informal social networks can promote mental wellbeing and protect against mental ill health. Information from the 2005 General Household Survey suggests that people in London have poorer social networks and support overall. For example, Londoners are less likely to speak to relatives by phone or talk to neighbours on a weekly basis compared to all other regions in England. This may again, reflect the much higher diversity and movement of populations into and out of London.

Rates of mental ill health in London

London displays some of the highest rates of mental illness in England.

- Data from two community-based surveys, the Health Survey for England and the National Psychiatric Morbidity Survey, show that London has the second highest estimated prevalence of possible psychiatric disorder after North East England.
- London has significantly higher rates of admissions for schizophrenia (99.8 per 100,000 compared to 72.6 per 100,000). Notably higher rates of adults are also detained in hospital under the Mental Health Act (1983) (60.8 per 100,000 compare to 36.1 per 100,000).
- While regional comparisons in the report suggest that London has similar rates of suicide and undetermined death to the overall figures for England, additional LHO analysis shows that suicide rates are significantly higher than the England average within some inner London boroughs. (See LHO report: *Suicide in London 2002-2004: an Update*. Available at: <http://www.lho.org.uk/viewResource.aspx?id=10297>)

Mental health care in London

The high demand for mental health services in London appears to be matched with high levels of mental health service provision for some conditions and types of services compared with other regions.

- London has a higher rate of people aged 18-64 who were in contact with specialist mental health services (2,666 per 100,000 compared to 2,309 in England).
- London has significantly higher rates of GP-registered patients who have been identified as having severe mental illness and who are receiving follow-up GP care (0.63% compared to 0.55% across England).
- London has the highest levels of antipsychotic drug prescribing in primary care, and the highest rates of hypnotic (sleeping medication) and anxiolytics (anti-anxiety drugs) (based on average daily quantity per 1,000 patients).
- London is leading the way in providing new services under the National Service Framework for Mental Health. As a result, London has significantly higher numbers of people receiving care through assertive outreach and crisis resolution services. Only the North East provides greater levels of such community-based services .
- London (99.3%) has many more community mental health teams (CMHT) that are fully integrated locally with NHS and social service partners compared to England (93.6%).

Serving diverse Users

However, London is not doing so well on other important aspects of mental health care such as early intervention services for people with severe mental illness and provision of Community Development workers (CDWs) to support culturally appropriate care.

- London has significantly lower rates of people receiving early intervention services for psychosis (49.8 per 100,000 compared to 60.7 for England). This does not reflect the high need for inpatient schizophrenia services.
- Overall London has significantly lower numbers of CDWs in relation to the black and minority ethnic community- when compared to the England average (18.5 compared to 35.8 per million of the BME (Black and Minority ethnic) population). Community development workers are a core feature of the Delivery Race Quality Action Plan for Mental Health, which aims to reduce extreme inequalities in access to, and experiences of, mental health care for ethnic minority groups. For more detailed information on inequalities in ethnic minority mental health care, see LHO's recent report: *Equal Access, Equal Care? Can London Deliver the Race Equality Action Plan for Mental Health?* Available at: <http://www.lho.org.uk/viewResource.aspx?id=11962>
- The Indications report shows that ethnicity recording within the Mental Health Minimum dataset is poor in London and elsewhere. However recent data reviewed by the LHO on inpatient services provided by London's mental health trusts shows that London leads the way with almost 97% complete ethnicity records in the second quarter of 06/07 (see table 3 in *Equal Access, Equal Care? Can London Deliver the Race Equality Action Plan for Mental Health?* Available at: <http://www.lho.org.uk/viewResource.aspx?id=11962>)

- Patients in London mental health trusts were significantly less likely to rate their care as good, very good or excellent when compared to the England average (73.1% compared to 77.3%).
- Patients in London were also significantly less likely to have out-of-hours contact telephone numbers for use in case of psychological crisis/psychiatric emergency (42.1% compared to 49.5%).

Staffing levels in London mental health services

Overall, London's mental health services are well staffed compared with other regions. Workforce Census and Adult Mental Health Service Mapping information shows that London has significantly higher rates (per 100,000) of psychiatric nursing and medical staff, counsellors, psychotherapists and clinical psychology staff than other regions.

However, the picture should be seen in the context of increased need for services in London and the concentration of services and training institutions in capital which often provide highly specialised services to a wide catchment beyond Londoners. For example:

- London has several teaching hospitals and medical schools, which may inflate overall staffing rates. The proportion of filled posts/vacancy rates may be a better measure of staffing.
- London has several specialised services that provide services for non-London residents such as psychotherapy services at the Tavistock and Portman NHS Foundation Trust.
- Clinical psychology staff can spend considerable amounts of time on research. Better information on the amount of clinical time/sessions provided to the capital's residents is needed to judge whether London residents have better access to psychological services.

Related online resources on Mental Health

1. *Indications of Public Health in the English Regions 7: Mental Health* and associated regional data can be downloaded from: <http://www.nepho.org.uk>
2. The national Mental Health Observatory website contains a range of resources about mental health and can be accessed at: <http://www.mentalhealthobservatory.org.uk>
3. London Health Observatory mental health pages contains a range of information on mental health in London: http://www.lho.org.uk/HIL/Disease_Groups/MentalHealth.aspx
4. The Local Basket of Health Inequality Indicators can be found at: http://www.lho.org.uk/HEALTH_INEQUALITIES/Basket_Of_Indicators/BasketOfIndicators.aspx
5. *Indications of Public Health in the English Regions. No.4: Ethnicity and health* <http://www.lho.org.uk/viewResource.aspx?id=9840>
6. *Suicide in London 2002-2004*. London Health Observatory and the London Development Centre: <http://www.lho.org.uk/viewResource.aspx?id=10297>
7. *Equal Access, Equal Care? Can London Deliver the Race Equality Action Plan?* London Health Observatory and the London Development Centre: <http://www.lho.org.uk/viewResource.aspx?id=11962>