

# Emotional Wellbeing & Mental Health for Children & Young People

## October 2019 Needs Analysis



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# Introduction

Improved emotional health and wellbeing is associated with a range of better outcomes for people of all ages and backgrounds. These include:

- improved physical health and life expectancy
- better educational achievement
- increased skills
- reduced health risk behaviours such as smoking and alcohol misuse
- reduced risk of suicide
- improved employment rates and productivity
- reduced anti-social behaviour and criminality
- higher levels of social interaction and participation

# National Drivers

- \* NHS Long Term Plan, 2019
- \* Five Year Forward View for Mental Health, 2016
- \* Delivering the Forward View: NHS Shared Planning Guidance 2016/17 – 2020/21
- \* The Five Year Forward View for Mental Health
- \* Future in Mind (2015)
- \* Achieving Better Access to Mental health Services by 2020
- \* No Health without Mental Health. Department of Health (2011)
- \* Talking Therapies, a 4-year plan. Department of Health (2011)
- \* Closing the Gap. Department of Health (2014)
- \* NHS and Social Care Act (2011)
- \* Children and Families Act (2014)
- \* Mandate to Health Education England

# National long term plans / commitments by 2023/24

- \* 345,000 additional C&YP aged 0-25 will have access to support via NHS-funded mental health services and school- or college-based Mental Health Support Teams
- \* Five Year Forward View for Mental Health commitment to have 70,000 additional C&YP accessing NHS services by 2020/21
- \* There will be a comprehensive offer for 0-25 year olds that reaches across mental health services for C&YP and adults.
- \* The 95% C&YP Eating Disorder referral to treatment time standards achieved in 2020/21 will be maintained.
- \* There will be 100% coverage of 24/7 mental health crisis care provision for children and young people which combines crisis assessment, brief response and intensive home treatment functions
- \* C&YP mental health plans will align with those for children and young people with learning disability, autism, special educational needs and disability (SEND), children and young people's services, and health and justice

# Local Plans

- \* Health and Wellbeing Strategy
- \* SEMH Strategy 2019
- \* All age Autism Strategy
- \* Rotherham Integrated Health and Social Care Plan
- \* 2018 Annual Report of the Director of Public Health
- \* Rotherham Looked After Children Sufficiency Strategy, 2019- 2022

# What we know nationally

# Mental Health of Children and Young People in England 2017 Survey

- \* Around one in four women experience mental health problems in pregnancy and during the 24 months after giving birth.
- \* 5-10% of fathers experience mental health difficulties during the perinatal period.
- \* Mental health problems often develop early and, between the ages of 5-15, one in every nine children has a mental disorder.
- \* Half of all mental health problems are established by the age of 14, with three quarters established by 24 years of age.



# Continued....

- \* Two-thirds (67%) of respondents said that they had been unable to find mental health support when they first needed it.
- \* Three-quarters (78%) of respondents said that they had had to manage their mental health on their own when they couldn't find help elsewhere.
- \* Over three-quarters (76%) cited pressure to do well at school or college having a significant impact on their mental health
- \* But only 17% of respondents felt confident in their ability to manage their mental health by themselves.
- \* The charity is publishing the results as it launches Act Early, a campaign calling for a new government strategy for young people's mental health, which would make early intervention a priority  
(Source: [Young Minds](#))

# **What we know Locally**

# The Local Picture

## Deprivation in Rotherham

- \* The English Indices of deprivation 2019 ranks Rotherham as the 44<sup>th</sup> most deprived district in England. Levels of deprivation in Rotherham have worsened since 2015 when the indices were last updated and Rotherham was Ranked 52<sup>nd</sup>.
- \* Deprivation has increased in most parts of the Borough and 22% of residents live in areas within the 10% most deprived of England.
- \* The highest levels of deprivation are concentrated in the central area of Rotherham.
- \* There is a great range of inequality of income and other life chances within Rotherham, particularly child poverty
- \* 30% of Rotherham workers earn less than the real living wage of £9 per hour (Living Wage Foundation) including 19% of full time workers.
- \* The main drivers of deprivation in Rotherham are high worklessness, low qualification levels, poor health and high rates of disability.
- \* Health in Rotherham has long been poorer than average with life expectancy below that in England as a whole, although rising. Rates of coronary heart disease have reduced significantly over the last 10 years but the Borough has high rates of disability and long term sickness. Mental health disorders and learning disabilities are above average as are suicides

# Deprivation in Rotherham

- \* The Annual Population Survey shows that 17,700 people in Rotherham were either unemployed or long term sick in 2018/19. This is 11% of the working age population (16-64), well above the English average of 8%. People claiming benefits (Feb 2019) include:
  - \* 11,096 long term sick on ESA
  - \* 6,042 carers claiming Carers Allowance (8,670 entitled)
  - \* 2,854 on Income Support
  - \* 1,441 on Jobseekers Allowance
  - \* 7,709 on Universal Credit (5,299 not in employment)

# Healthy Life Expectancy

- \* Healthy life expectancy at birth in Rotherham (2015-17) is 59.3 years for men and 57.4 years for women, 4 years less than England average for men and 6½ years for women.
- \* Time spent living in poor health is 2.3 years longer than average for men and 5 years longer than average for women.
- \* Men living in the most deprived areas of Rotherham can expect to live nearly 11 years less than those in the least deprived areas; women can expect to live around 8½ years less.

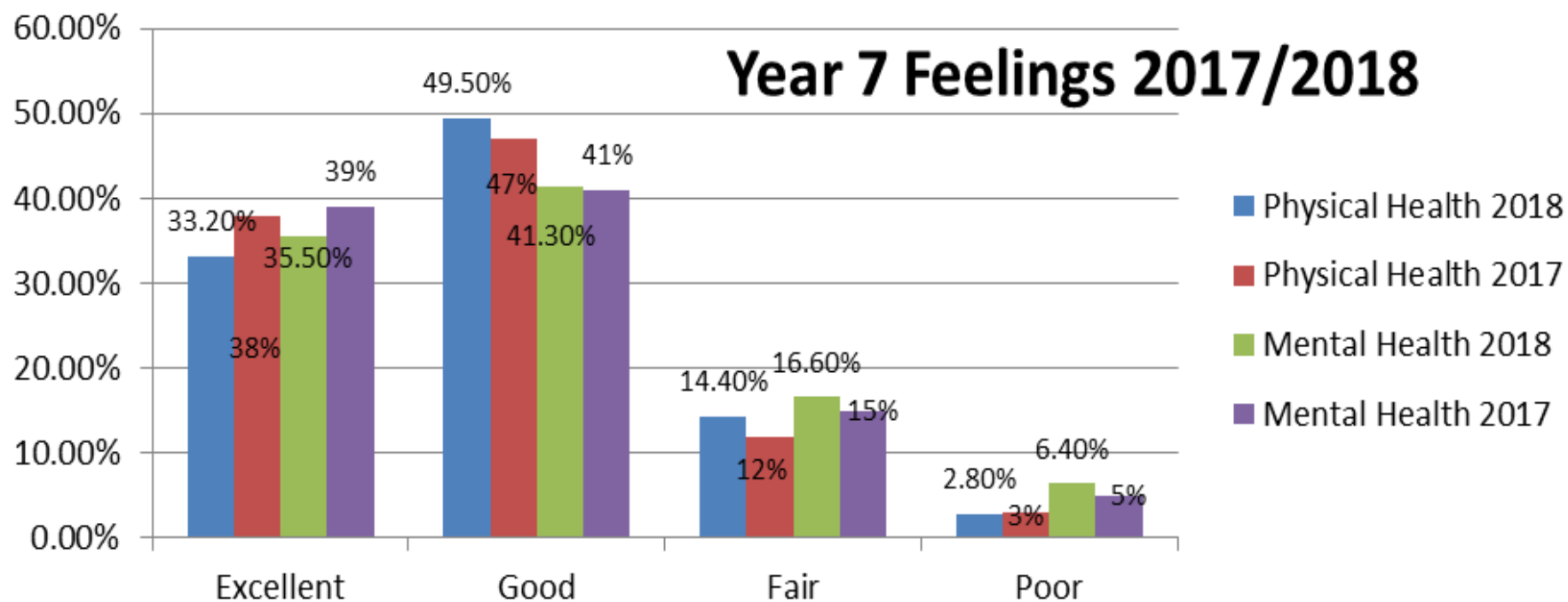
# **The needs of young people in Rotherham**

# Rotherham Lifestyle Survey - mental health data, 2017 & 2018

In 2018 out of the 720 young people who said they have a diagnosed medical condition – **38** pupils said they have a Mental Health diagnosis.

- \* 26 - Year 10 Pupils
- \* 10 - Year 7 Pupils
- \* 2 - Pupils attending a special school

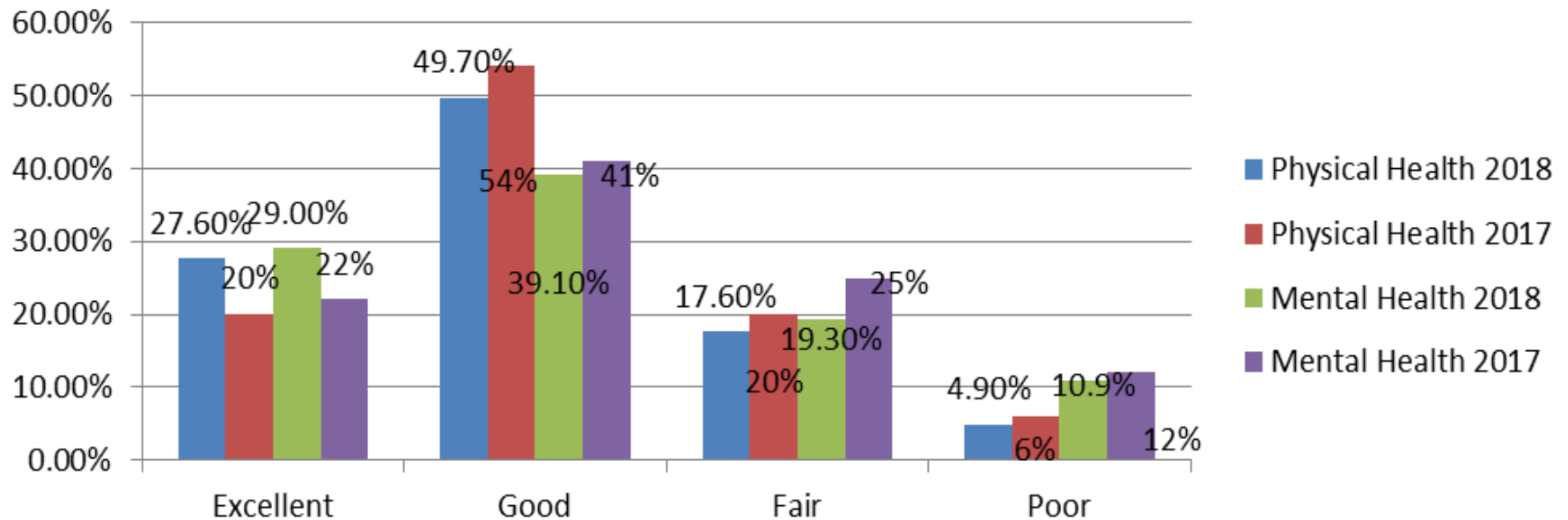
# Year 7 pupil's ratings regarding their Physical and Mental Health, a comparison of 2017/18 responses.





# Year 10 pupil's ratings regarding their Physical and Mental Health, a comparison of 2017/18 responses.

## Year 10 Feelings 2017/2018



# Bullying

- \* Pupils are asked to say whether they have been bullied in the past 6 months
- \* Overall the number of young people who said they have been bullied increased in 2018. In 2018 27% (739) of young people said they have been bullied, this increased from 26% in 2017.
- \* In 2018 more pupils in Y7 said they have been bullied 442 Y7, compared to 297 Y10.
- \* Girls are far more likely to say they have been bullied, compared to boys.

# Loneliness

- \* In 2017 – 3.2% of all young people who participated in the survey said they did not have anyone they could talk to, given an indication of loneliness.
- \* In 2018 – this had increased to 3.4%

# The experience of Loneliness for Children & Young People 2019

130 young people aged 10-25 years of took part in a consultation about loneliness commissioned by Public Health in the spring of 2019. They were from the following projects:

- \* Endeavour
- \* Clifton Learning Partnership
- \* YWCA Yorkshire
- \* Rush House
- \* United Multi Cultural Centre

# Young people were asked....

- \* What the issues are for young people in relation to loneliness?
- \* How common loneliness is among young people?
- \* If there are any triggers or sub-groups that can predict loneliness?
- \* What is working well and what could be done to alleviate the problems?

# Young people told us.....

- \* Loneliness can be based on difference
- \* Social media is a double edged sword
- \* Having a relationship with a trusted adult was important
- \* Opportunities to alleviate loneliness including giving young people a role e.g. fund raising are important
- \* It is important to have support for their emotional wellbeing

# Concluding comments on loneliness

- \* Having supportive relationships and connections were important.
- \* Creating opportunities to celebrate diversity and difference.
- \* Educating people about loneliness signs and symptoms amongst young people.
- \* Breaking the cycle between loneliness and poor mental health.

# **Wider Determinants and Risk Factors**



# Wider determinants of Health / Risk Factors

## How does Rotherham compare to England as a whole?

Source: Public Health England

RAG rating compared to England: (R) Red/Worse, (A) Amber/Similar, (G) Green/Better, (nc) not compared.

	Period	Rotherham	England
<b>Children living in poverty (all dependent children under 20 years)</b>	2016	21.5% (R)	17.0%
<b>Children living in poverty (under 16 years)</b>	2016	21.8% (R)	17.0%
<b>16-17 year olds not in employment, education or training</b>	2017	5.9% (A)	6.0%
<b>First time entrants to the Youth Justice System (10-17 years) (per 100,000)</b>	2018	169 (G)	239
<b>Family homelessness (per 1,000 households)</b>	2017/18	0.6 (G)	1.7
<b>Children in care (per 10,000 under 18 years)</b>	2018	109 (R)	64
<b>Emotional wellbeing of looked after children (5-16 years) (score)</b>	2017/18	14.6 (nc)	14.2

# Continued.....

	Period	Rotherham	England
<b>Repeat child protection cases: % subject to a child protection plan) (aged under 18 years)</b>	2018	23.9% (R)	20.2%
<b>Children in need due to abuse or neglect (rate per 1,000 aged under 18 years)</b>	2018	480.8(R)	181.4
<b>Children in need due to family stress or dysfunction or absentee parenting rate per 1,000 aged under 18 years)</b>	2017	56.0 (G)	93.8
<b>Under 18s conceptions (rate per 1,000 females aged 15-17 years)</b>	2017	22.1 (R)	17.8
<b>Pupils with social, emotional and mental health needs (school age pupils) (%)</b>	2018	2.25% (G)	2.29%
<b>Homeless young people aged 16-24 years (rate per 1,000 households)</b>	2017/18	0.17 (G)	0.52

# Health Improvement

	Period	Rotherham	England
Excess weight in children (overweight/obese) (4-5 years)	2017/18	25.5% (R)	22.4%
Excess weight in children (overweight/obese) (10-11 years)	2017/18	36.1% (R)	34.3%
Participation in at least 3 hours of sport/PE (5-18 years)	2009/10	48.1 (R)	55.1
Hospital admissions due to alcohol specific conditions (0-17 years) (per 100,000)	2015/16 – 2017/18	22.4 (G)	32.9
Hospital admissions due to substance misuse (15-24 years) (DSR per 100,000)	2015/16 – 2017/18	75.7 (A)	87.9
Hospital admissions caused by unintentional and deliberate injuries in children (0-14 years) (per 100,000)	2017/18	82.3 (G)	96.4
Hospital admissions caused by unintentional and deliberate injuries in young people (15-24 years) (per 100,000)	2017/18	125.6 (A)	132.7

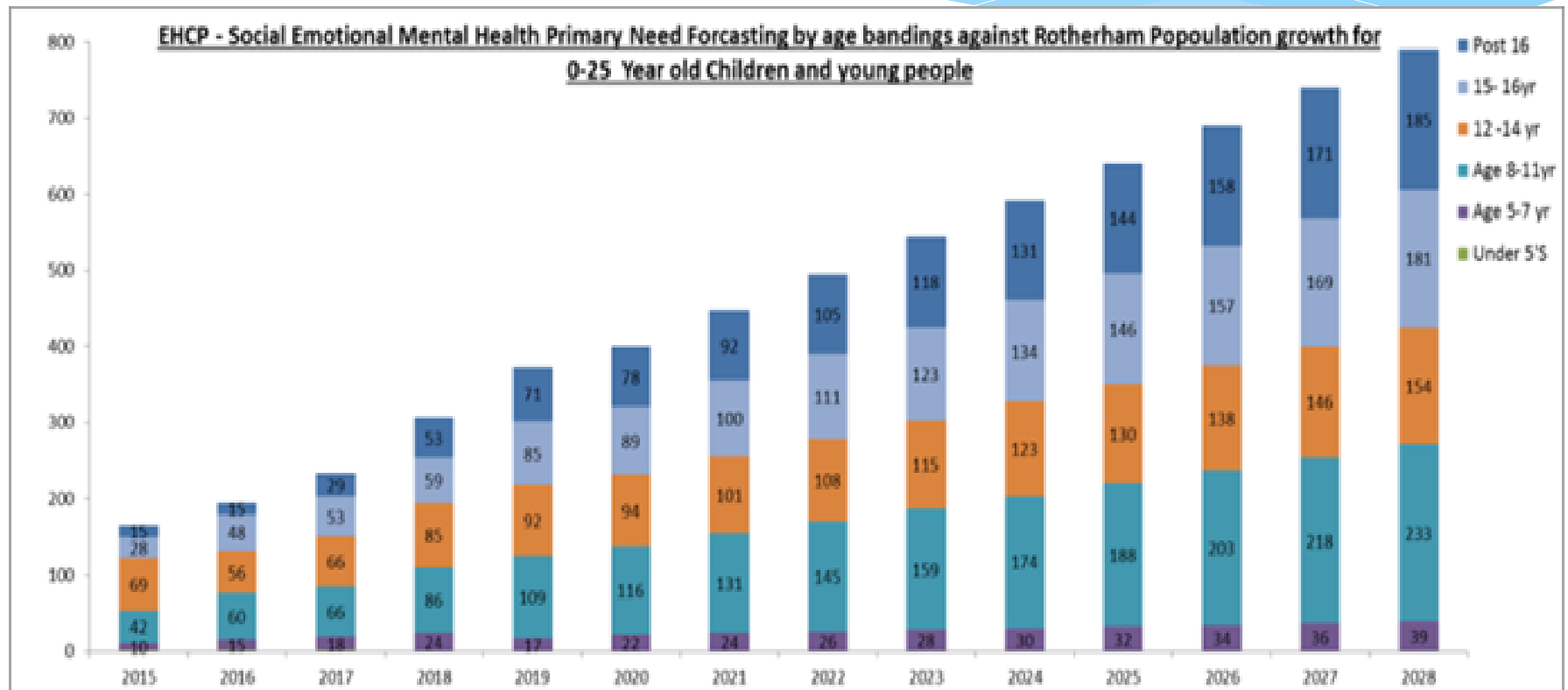
# Levels of Mental Health & Illness

	Period	Rotherham	England
Hospital admissions for mental health conditions (0-17 years) (per 100,000)	2017/18	42.1 (G)	84.7
Hospital admissions as a result of self-harm (0-17 years) (rate per 100,000)	2017/18	325.8 (G)	421.2
Looked after children (0-17 years) (rate per 10,000)	2018	109 (R)	64
Looked after children:% considered of concern (score 17+) (age 5-16 years)	2017/18	44.5% (A)	38.6%
Mental wellbeing in 15 year olds: Mean wellbeing (WEMWBS-14) score	2014/15	47.5 (A)	47.6
Pupils with social, emotional and mental health needs (school age pupils) (%)	2018	2.25% (G)	2.39%

# Mental Health prevalence, Rotherham and National Rates

Children and Young People aged 8-15	Rotherham Rates		National Rates	
	Boys	Girls	Boys	Girls
Any disorder	2930	2580	2570	2260
Emotional Disorders	1430	1860	1250	1630
Behavioural Disorders	1610	950	1410	830
Hyperactivity Disorders	680	160	600	140
Less common Disorders	480	320	420	280

# Forecasting the Social Emotional and Mental Health (SEMH) needs



# Vulnerable Groups

# National and Local Research

National and local research suggest that some groups of Children and young people are more at risk of experiencing poor mental health:

- \* Care-givers / Young Carers
- \* Those from deprived or disadvantaged backgrounds
- \* Looked after Children
- \* Gypsy travellers, Roma
- \* Those with special educational needs or disabilities
- \* Those with one or more Adverse Childhood experiences
- \* Those who are LGBTQ+
- \* Those in contact with the justice system
- \* BME groups



# Rotherham Lifestyle Survey

## Young Carers

- \* The percentage of pupils who thought of themselves as a young carer decreased in 2018.
- \* 15.3% (536) of pupils said they are a young carer.

### Trend Information

- \* 2017 (715) – 19% of young people identified themselves as a young carer
- \* 2016 (478) – 17% of young people identified themselves as a young carer
- \* The data from the Lifestyle survey shows a higher percentage of young people identifying themselves as a young carer than in the Rotherham census figure, but with the reduction from 2018 it is closer to the Rotherham census figure for 2011 that shows 12% of young people in Rotherham are a young carer.

# Young Carers continued....

Pupils were asked for the first time in the 2018 survey, in what way does caring affect you emotionally.

In what way does caring affect you emotionally?

Out of the 536 young people who identified themselves as a young carer, 84% (451) of them answered the follow-up question about how caring affects them emotionally.

- \* I sometimes feel I can't cope 8.6% (39)
- \* I sometimes feel stressed 25.4% (115)
- \* I don't get to see my friends as often as I would like to, due to leaving the cared for person on their own 13.1% (33)
- \* It makes me feel like I am doing something good 44.3% (200)
- \* It make me feel that I am not important 3.5% (16)
- \* I lose sleep worrying about the person I care for 5.7% (26)
- \* I can't concentrate at school because I worry about the person I care for 4.8% (22)

# Adverse Childhood Experiences (ACE)

- \* Parental separation
- \* Domestic violence
- \* Physical abuse
- \* Verbal abuse
- \* Sexual abuse
- \* Mental illness
- \* Alcohol abuse
- \* Drug abuse
- \* Incarceration

# Adverse Childhood Experiences

- \* The following national report suggests that nearly 1 in 2 children may have suffered from at least one of the ACE categories defined in the study:

<https://bmcmmedicine.biomedcentral.com/articles/10.1186/1741-7015-12-72>

# Looked After Children in Rotherham

- \* In March 2019 there were 112.7 LAC per 10 000. This is significantly higher than statistical neighbours, Yorkshire and Humber and all England Averages.
- \* There are more males being looked after than females.
- \* The majority of our Looked After Children fall into the 10-17 year old age bracket.
- \* The majority being White British.

# Length of time children have been looked after in Rotherham

LAC Duration	Number
Under 6 Months	104
6 Months to Under 1 Year	104
1 Year to Under 2 Years	159
2 Years to Under 3 Years	78
3 Years to Under 4 Years	43
4 Years to Under 5 Years	28
5 Years to Under 7 Years	37
7 Years to Under 9 Years	38
9 Years to Under 11 Years	22
11 Years to Under 13 Years	15
13 Years Plus	6
<b>Total</b>	<b>634</b>

# Rate of LAC per 10,000 under 18 population 2011 - 2017

	Children looked after rate, per 10,000 children aged under 18						
	2011	2012	2013	2014	2015	2016	2017
Rotherham	69	68	70	70	72	76	86
Yorkshire & Humber	65	67	65	65	64	63	67
Statistical Neighbours	62	67	70	73	73	76	81
England	58	59	60	60	60	60	62

# **Self Care and Five Ways to Wellbeing**



# Self Care

*“Mental health is the greatest health burden of the 21st Century and it will never be tackled by specialist mental health services alone. As a community we need to continue to strengthen established services, but also to be curious about approaches that do not involve mental health specialists.”*

Professor Peter Fonagy, CEO of the Anna Freud Centre, 2019

[www.rotherham.gov.uk/health](http://www.rotherham.gov.uk/health)

# Five Ways to Wellbeing



# Key Findings

- \* The prevalence of low mental wellbeing in adults has been shown to increase with the number of adverse childhood experiences suffered.
- \* Levels of deprivation in Rotherham have worsened. Rotherham was ranked as 52<sup>nd</sup> most deprived district in England in 2015, in 2019 Rotherham is ranked as 44<sup>th</sup> most deprived district.
- \* Rotherham's looked after children population is significantly higher than statistical neighbours, Yorkshire & Humber and all England Averages.
- \* Health in Rotherham has long been poorer than average with life expectancy below that in England as a whole, although rising.
- \* Mental health disorders and learning disabilities are above average as are suicides.
- \* The number of young people reporting that they have nobody to talk to has increased.

# Recommendations

- \* Prevention and early intervention should be a key focus within all services that have a role in supporting the wellbeing of young people and families. Rotherham's campaign 'Five Ways to Wellbeing' should be used in conversations with young people and families about prevention and promoting wellbeing.
- \* Organisations should promote best practice by adopting the principles of the Five Ways to Wellbeing campaign within their workplaces.
- \* Services in Rotherham should be accessible to the vulnerable groups identified.
- \* Staff should be alert to the signs that young people may be experiencing loneliness.
- \* To mitigate against loneliness young people need to have a good relationship with one trusted adult and know that their mental wellbeing is supported.