# Mental Health and Wellbeing Joint Strategic Needs Assessment (JSNA) & JSNA Work Programme

# A presentation in two parts...

Making the most of the JSNA

Mental health and wellbeing JSNA

# What is the JSNA?

"a **process to identify the health and wellbeing needs of local areas**, providing a basis of sound evidence for the commissioning of local services and action to be taken by local partners working together.

…providing a framework to examine all the factors that impact on health and wellbeing of local communities, including employment, education, housing, and environmental factors; providing impartial evidence on which to base local decisions "

DoH 2012

**Means by which CCGS and LAs describe future health, care and wellbeing needs of the local population and identify the strategic direction of service delivery to meet those needs.**

# What does a JSNA do?

Provides a comprehensive picture of current and future health and wellbeing needs of the population

Evidence base to inform local strategy, to improve commissioning decisions, and health and wellbeing outcomes for local residents

Looks at the wider determinants of health

Key in understanding health inequalities

# What can it tell you?

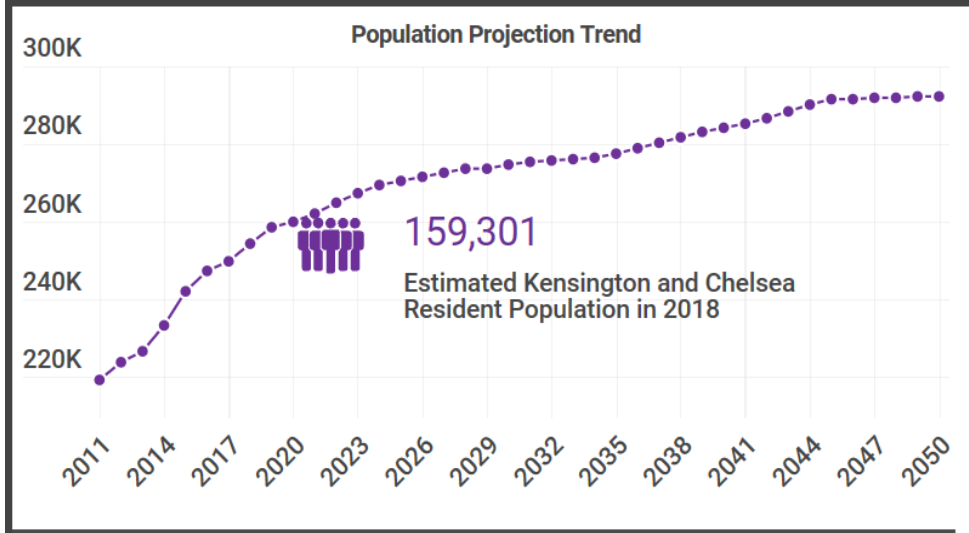
Population profile and structure

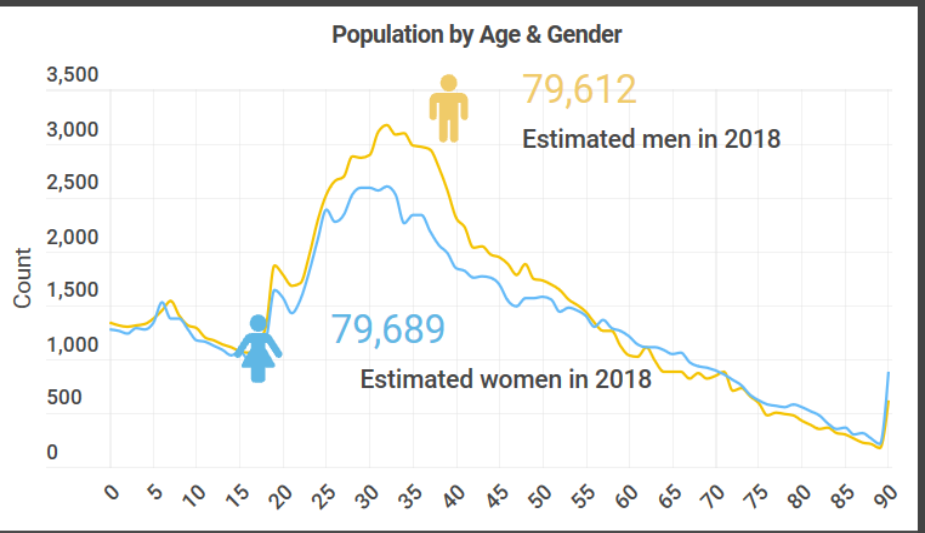
Areas of health inequality – geographic and community levels

Causes of mortality and morbidity in the population

Health risks

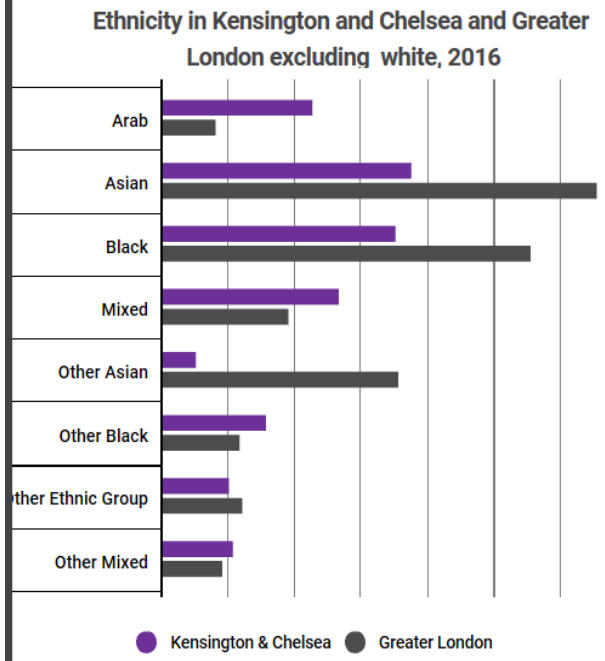
# Population profile and structure

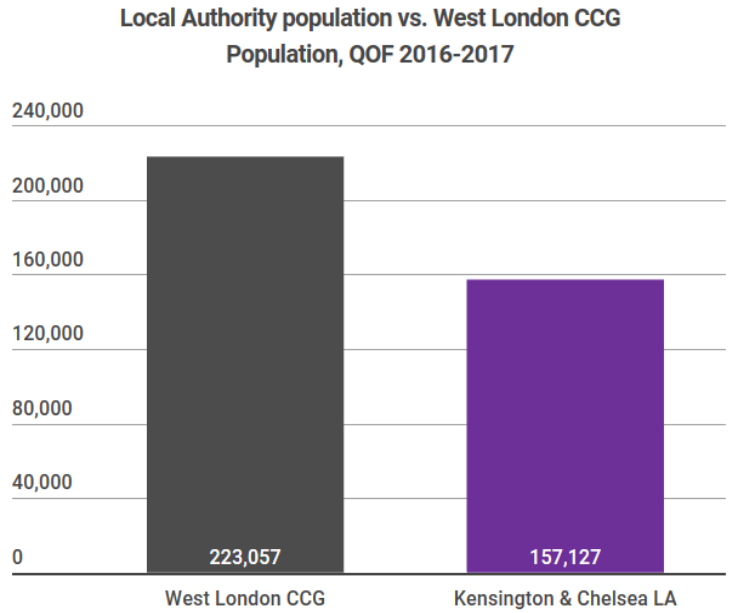


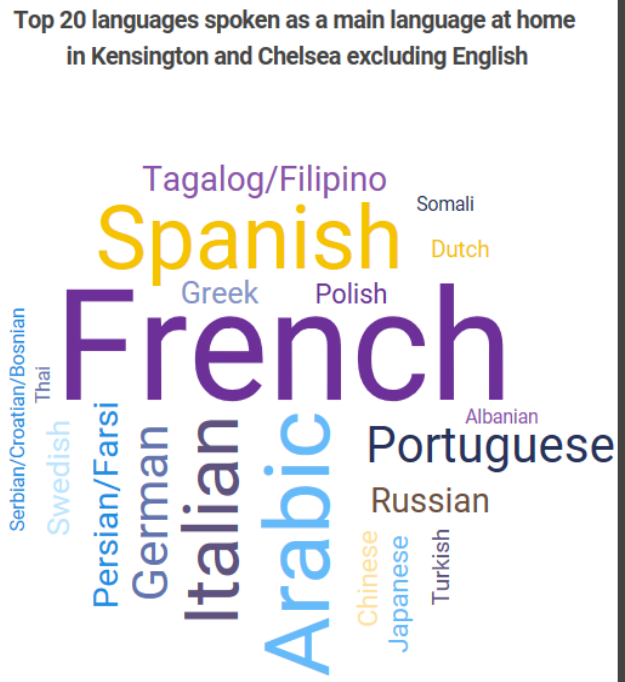



**37% of the resident population are from BAME groups**

**72% of the resident population speak English as their main language**



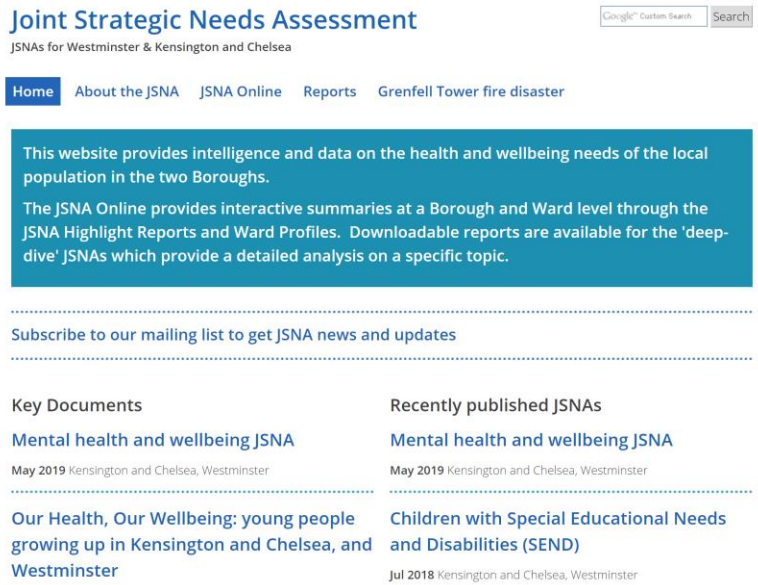
Source: https://www.jsna.info/ward-health-profiles (using data from ONS, PHE and QOF)

# Health inequality

# How do I access the JSNA?

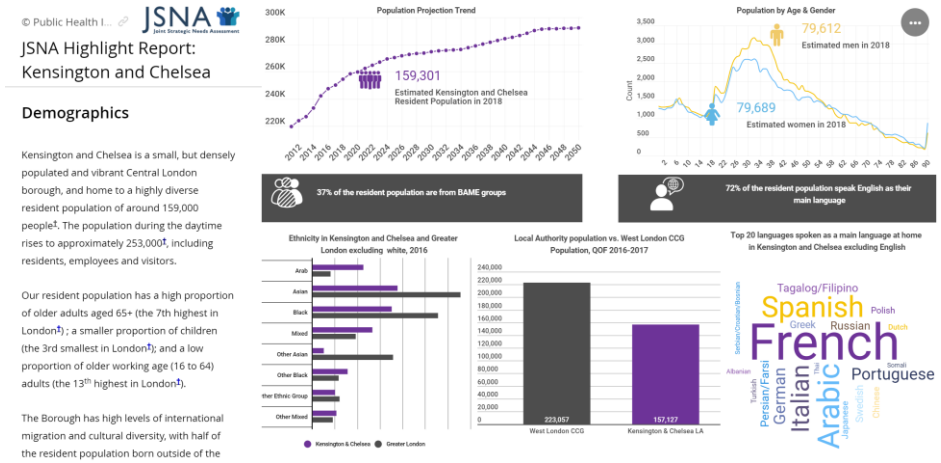
## JSNA website

https://www.jsna.info



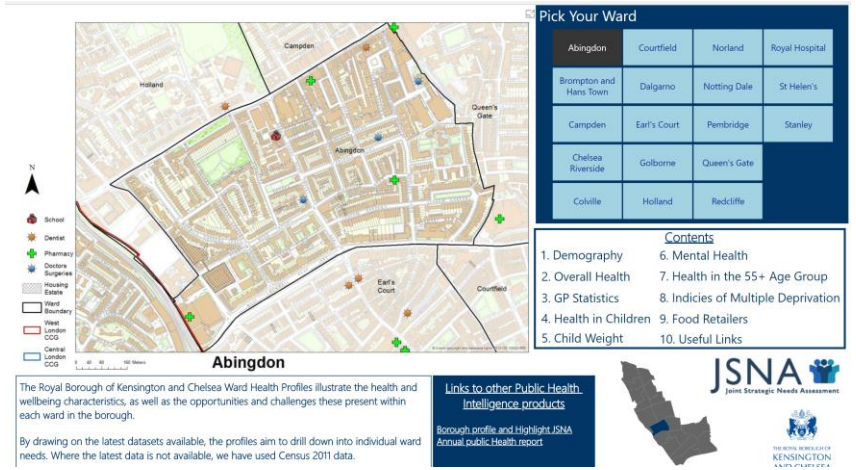

## RBKC Highlight Report (Borough Profile)

https://www.jsna.info/online/highlightreports




## RBKC Ward Profiles

https://www.jsna.info/ward-health-profiles



# Questions?

- Do you use the JSNA website?
- If so, do you find the information that you need
- What is good about the website
- How could we improve the website?

# Slido - #U465

1. What percentage of older people live alone in RBKC?

a. 8.2%

b. 9.6%

c. 10.5%

d. 7.8%

2. What are some of the challenges for achieving good mental health and wellbeing in RBKC?

# Slido - #U465

1. What percentage of RBKC residents are diagnosed with severe mental illness?

a. 0.9%

b. 0.7%

c. 1.5%

d. 1.8%

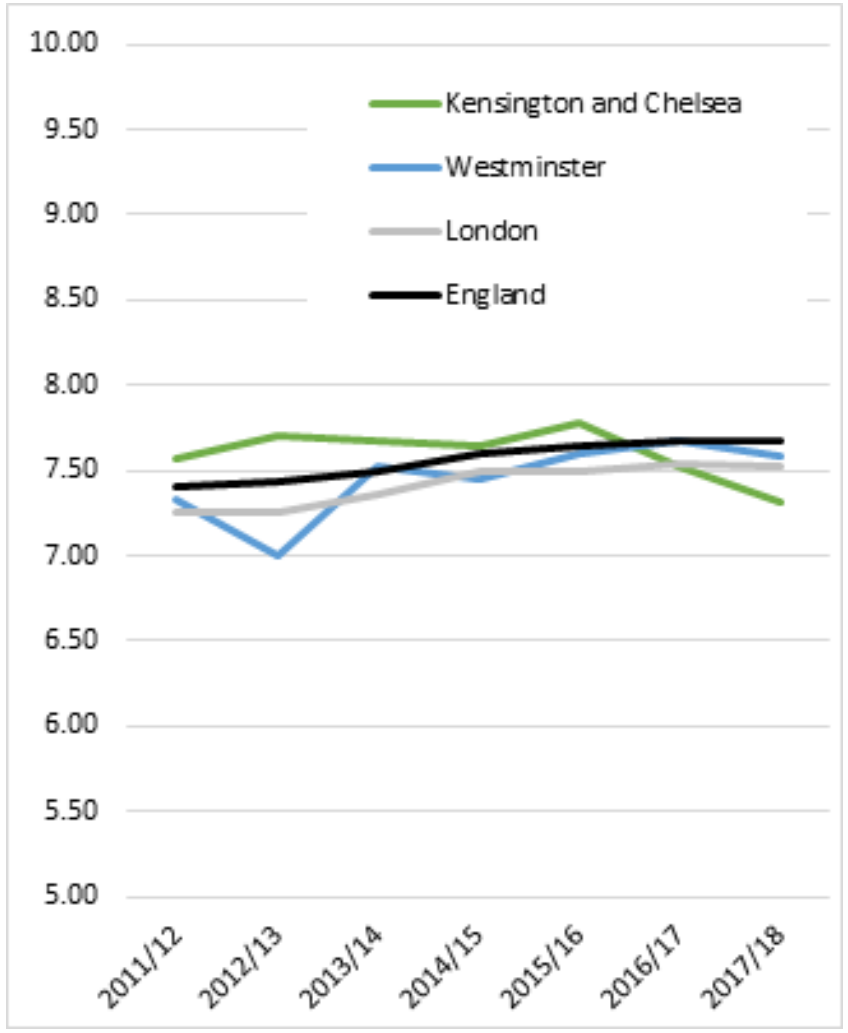
# Focus on... mental health and wellbeing

JSNA takes a life course approach to describe:

- prevalence of mental health and wellbeing
- determinants and factors (risk and protective) for poor mental wellbeing and illness
- services and assets available to meet needs
- what works to promote or protect mental wellbeing
- views and experience of patients accessing services
- potential gaps or areas of unmet need

# Some stats...

**Life satisfaction scores**



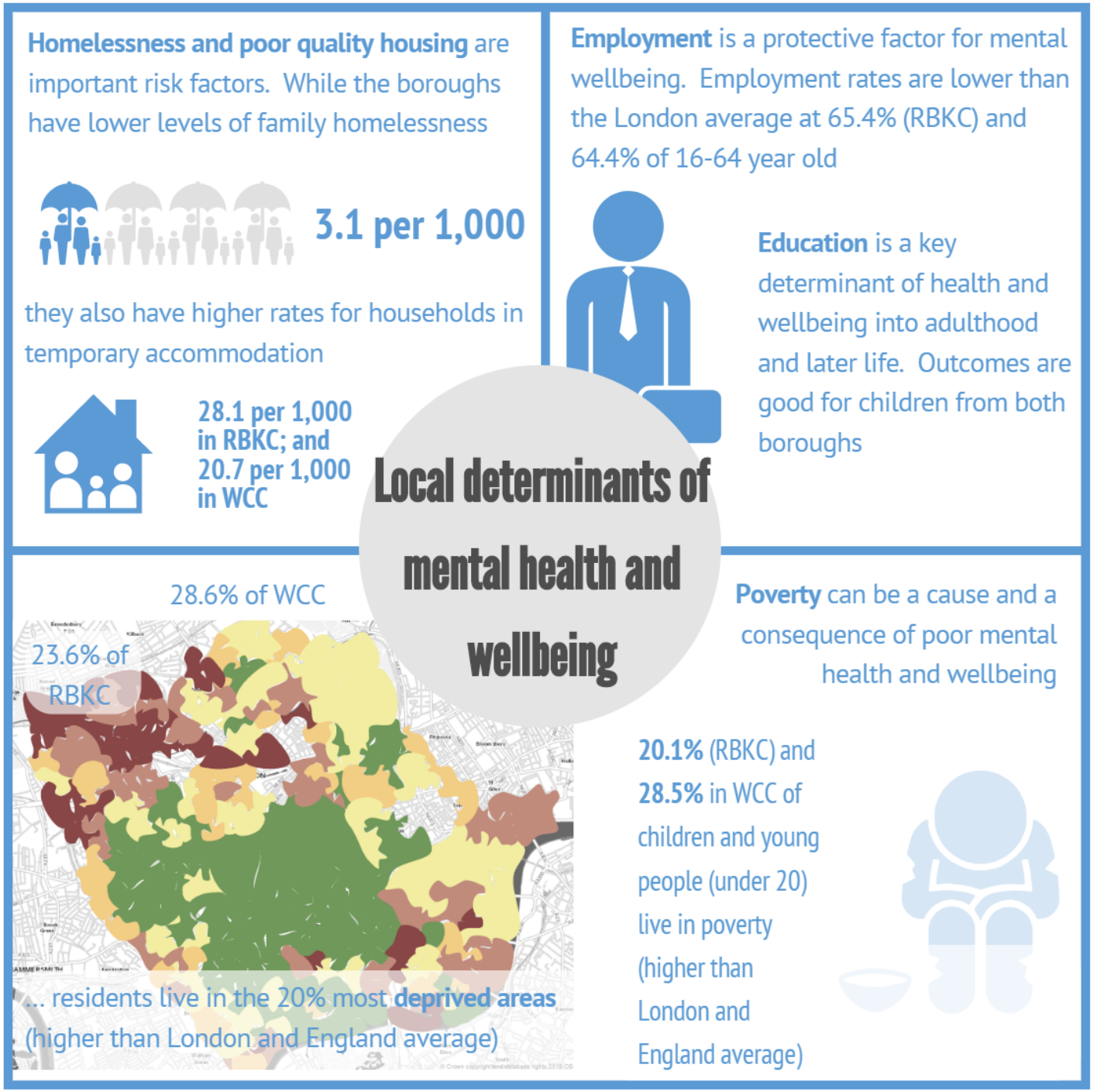

| Prevalence (GP recorded) | | | |
|---|---|---|---|
| | **Area** | **Depression** | **Severe mental illness** |
| **Rate** | RBKC | 8.5% | 1.5% |
| | WCC | 5.7% | 1.4% |
| | London | 7.1% | 1.1% |
| | England | 9.9% | 0.9% |
| **Count** | RBKC | 14,341 | 3,851 |
| | WCC | 13,562 | 3,215 |

| | | Relationship to: | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Illness/ presentation | Prevalence 16+ | Age | Sex | Ethnicity | Household type | Employment status | Benefit status | Region |
| Bipolar disorder | 2.0% | Clear gradient - Higher at younger ages: 16-24yrs: 3.4% vs. 65-74yrs: 0.4% | Higher among Males: 2.1% vs. Females, 1.8% | Highest among Black/ Black British 3.5% vs. lowest in Asian/Asian British, 1.4% | Highest - Single person household: 5.5% vs. Lowest: 2 adults 60yrs+, no children, 0.4% | Highest among economically inactive: 4.3% lowest in employment, 1.9% | Higher on benefits than not Highest on ESA: 12.4% | Higher in London, 2.3% vs. England, 2.0% |
| Personality disorder - Antisocial | 3.3% | Clear gradient - Higher at younger ages 16/18-24yrs: 4.9% vs. 55-64yrs: 2.2% | Higher among Males: 4.9% vs. Females, 1.8% | Highest among Mixed ethnicity 4.8% vs. lowest in Asian/Asian British, 1.4% | Highest - Single person household: 6.6% vs. Lowest: Adults with children, 2.9% | Highest among economically inactive: 4.7% lowest in employment, 2.8% | Personality disorder: Higher on benefits than not Highest on ESA: (3-48% vs. 12-14%), ESA: 48% | Higher in London, 4.4% vs. England, 3.3% |
| Personality disorder - Borderline | 2.4% | Clear gradient - Higher at younger ages 16/18-24yrs: 5.7% vs. 55-64yrs: 1.0% | Higher among Females: 2.9% vs. Males, 1.9% | Highest among White British % vs. 2.6% lowest in Black/Black British, 1.4% | Highest - Single person household: 3.9% vs. Lowest: Adults with children, 2.0% | Highest among economically inactive: 5.3% lowest in employment, 1.5% | | Lower in London, 2.2% vs. England, 2.4% |
| PTSD | 4.4% | Clear gradient - Higher at younger ages 16/18-24yrs: 8.0% vs. 55-64yrs: 0.6% | Higher among Females: 5.1% vs. Males, 3.7% | Highest among Black/Black British 8.3% vs. lowest in White Other, 2.2% | Highest - Single person household: 10.8% vs. Lowest: 2 adults 60yrs+, no children, 1.4% | Highest among economically inactive: 10.5% lowest in employment, 2.7% | Higher on benefits than not Highest on ESA: (16-34% vs. 3.4-4.2%), ESA: 34% | Lower in London, 4.0% vs. England, 4.4% |
| Common Mental Health Disorders | 15.7% | Higher at younger ages peaks at: 35-44yrs 19.3% vs.75 yrs+: 8.8% | Higher among Females: 19.1% vs. Males, 12.2% | Highest among Mixed ethnicity 19.8% vs. lowest in White Other, 1.4% | Highest - Single person household: 29.4% vs. Lowest: 2 adults 60yrs+, no children, 10.4% | Highest among economically inactive: 33.1% lowest employed full-time, 14.2% | Higher on benefits than not Highest on ESA: (35-66% vs. 15-17%), ESA: 66% | Higher in London, 18.0% vs. England, 15.7% |
| Psychotic disorders | 0.5% | Parabolic, peaks at: 35-44yrs 1.0% vs.75 yrs+: 0.1% | Higher among Females: 0.6% vs. Males, 0.5% | Highest among Black/Black British 1.4% vs. lowest in White, 0.5%. No data on Mixed ethnicity | Highest - Single person household: 1.1% vs. Lowest: adults no children, 0.4% | Highest among economically inactive: 2.3% lowest employed full-time, 0.1% | Higher on benefits than not Highest on ESA: (5-13% vs. 0.2-0.3%), ESA: 13% | Higher in London, 0.6% vs. England, 0.5% |
| Self- harm | 7.3% | Most common at 16-24yrs: 17.5% vs. 75yrs+:0.3% | Higher among Females: 8.9% vs. Males, 5.7% | Highest among White British 8.1% vs. lowest in White, 5.5%. | Highest - Single person household: 14.9% vs. Lowest: adults no children, 1.5% | Highest among economically inactive: 14.6% lowest employed full-time, 7.6% | Higher on benefits than not Highest on ESA: (15-34% vs. 7-8%), ESA: 13% | Lower in London, 7.1% vs. England, 7.3% |
| Suicidal thoughts | 20.6% | Most common at 16-24yrs driven female prevalence, men most common at- 55-64yrs | Higher among Females: 22.4% vs. Males, 18.7% | Highest among White British 21.6% vs. lowest in Asian/ Asian British, 13.1%. | Highest - Single person household: 40.2% vs. Lowest: adults no children, 11.4% | Highest among unemployed: 30.5% lowest employed, 20.8% | Higher on benefits than not Highest on ESA: (37-66% vs. 19-22%), ESA: 66% | Lower in London, 20.6% vs. England, 21.3% |
| Suicide attempts | 6.7% | Most common at younger ages 16-34yrs, peaks at 16-24 yrs, 9.0% driven female prevalence, men - 55-64yrs | Higher among Females: 8.0% vs. Males, 5.4% | Highest among White British 6.9% vs. lowest in Asian/ Asian British, 5.3%. | Highest - Single person household: 16.0% vs. Lowest: adults no children, 2.5% | Highest among economically inactive: 16.1% lowest employed full-time, 5.8% | Higher on benefits than not Highest on ESA: (5-7% vs. 20-43%), ESA: 43% | Lower in London, 6.4% vs. England, 6.7% |

## Variation in the prevalence of mental illness

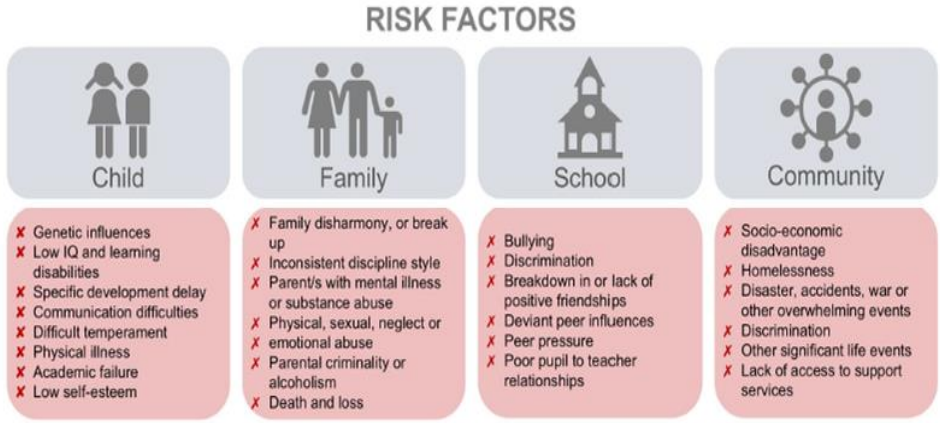
# What determines mental health and wellbeing?

- Deprivation
- Employment
- Education
- Poverty
- Housing
- Crime and justice
- Community wellbeing
- …



# Risk and protective factors

Risk factors for children and young people's mental health and wellbeing




Local factors for working age adult mental health and wellbeing

Marital break-up is higher than the London average (by 0.8%)

The percentage of residents living alone is around 10% higher than the London average

Alcohol dependence is the same as the London average (1.4%)

Higher rates of hospital admissions for mental and behavioural disorders due to the use of alcohol.

Opiate and/or crack cocaine use among adults is up to 4% higher than the London average

Social isolation among some service users is indicated to be higher

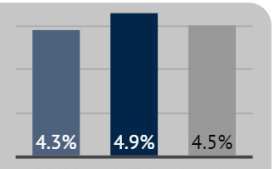
5% less of Adult Social Care clients reporting enough social contact compared to the London average

Local factors for older adults mental health and wellbeing

The percentage of older people living alone is above the London average (10.5% in RBKC; 10.4% in WCC; 9.6% in London)

The percentage of social care users with enough social contact is lower than the London average (35.8% for RBKC; 34.3% WCC; 41.4% London)

Diagnosed dementia among the GP registered population (65+)




More residents aged 60+ live in poverty compared to the national average (21.6% in RBKC; 24.9% WCC; 16.2% England)

# JSNA findings... for the health and wellbeing system

# Any questions?

# Thank you!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- For more information on the JSNA please visit https://www.jsna.info/