

Appendix 1

Understanding the needs of our population

A comprehensive mental health needs assessment has been carried out which measures the current scale of mental health needs for the population of Bournemouth, Dorset and Poole. It also estimates the expected need over the next 5 years, which allows us to inform our commissioning decisions through the life of this strategy.

Common mental health problems such as depression and anxiety, affect around one in six of the UK adult population at any one time. (DH 2006). In addition, people living with a long-term mental health problem are more likely to suffer a range of physical illnesses, including musculoskeletal conditions and long-standing physical illnesses. Depression and anxiety affect nearly 40% of people on incapacity benefit and a third of all GP consultation time is spent on patients with these conditions (ibid).

However there is substantial evidence of wide under-treatment of depression and anxiety. Only one third of people with diagnosable depression and less than a quarter of those with anxiety disorders are in treatment at any one time, according to survey estimates of met need (NEPHO 2009). One aim of national and local strategy is to improve the awareness of the importance of mental; wellbeing and to reduce the stigma associated with mental health problems – and so to encourage more people to seek help, and at an earlier stage in the development of their problems

Bournemouth and Poole population of 298,100 is expected to rise to 300,200 by the year 2015 (0.7% population rise) whereas the population of Dorset is expected to rise to 414,900 by the year 2015 (1.7% population rise). The overall picture conceals a much bigger increases on the size of the older adult population. Bournemouth and Poole will see an older adult population increase of 4,800 from 617,000 to 66,500 (7.2%). Dorset will see an older adult population increase of 15,500 from 104,400 to 119,900 (12.9%).

These increases will present particular challenges to mental health services particularly in the increased prevalence of organic disorders such as Dementia. Bournemouth and Poole already has the highest prevalence rate for dementia in the region and is in the top decile nationally, whilst Dorset is in the top quartile nationally.

The total number of older people suffering from other mental health problems, such as depression, anxiety and schizophrenia will also rise as the population increases.

The prevalence of mental health problems among the overall population is greater than could be anticipated from an initial examination of its social and economic makeup. Bournemouth and Poole has the second highest prevalence rate in the region of people with severe mental health problems recorded on GP registers and are in the top quartile nationally, whilst Dorset has below average rates, both nationally and regionally

There has been a significant increase in spending on mental health services locally in recent years, with Bournemouth and Poole PCT spending 12.3% of its budget on mental health and Dorset 12.1%. Bournemouth and Poole PCT rank third highest in the country for the number of average occupied beds for adult mental health.

Whilst Dorset PCT is below average Bournemouth and Poole is in the top quintile nationally for standardised admission rates to hospital due to substance misuse in 2007/8, for both PCTs programme budget data indicates that expenditure on this area is substantially below comparator PCTs, and is in the bottom decile.

In planning mental health services it is important to understand and anticipate changes in the mix of local populations particularly the growing ethnic and cultural diversity of urban populations of Bournemouth and Poole The most recent estimates (2006) show that there has been a significant increase in the BME population of Bournemouth Dorset and Poole's over the last 5 years. The BME population is now estimated to make up 7.1% of the population. The most significant increase has been in the proportion of Black or Black British which has more than doubled from 5% to 10.2% of the BME population. These changes are and will continue to present particularly challenges to mental health services in ensuring both access to and take up of services.

The rapid and continuing growth of higher education, particularly in Bournemouth has resulted in an increasingly important population of students who bring both general and specific issues relating to mental health.

It is also important to understand the process by which some adults with complex needs gravitate to larger coastal resorts, particularly to areas of multi occupied housing. This can result in concentrations of need in relatively small geographic areas, particularly relating to substance misuse, addictions and mental health.

It is estimated that within the Bournemouth, Dorset and Poole population, 2% of that population will have some level of learning from mild to profound. Within that number 0.39% of the population will have a moderate to profound learning disability. People with a more serious learning disability are significantly greater risk of also having mental health difficulties. It is therefore vital that local mental health services recognise this and ensure that services are both accessible and appropriate to meet the needs of these individuals

During 2009/10 work has been carried to identify the number of people with a diagnosis of Aspergers or ASD (autistic spectrum disorder). This has been, to date carried out across Bournemouth and Poole and separately across Dorset. This work will inform the development of specialist services.

Overall national indices of mental illness needs indicate that Bournemouth is significantly above the national average whereas Poole and Dorset generally are below. Source: Glover G. Mental Illness Needs Indices. Centre for Public Mental Health, Durham University.

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