



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**DERBYSHIRE HEALTH AND WELLBEING BOARD**

**5 October 2023**

**Report of the Director of Public Health**

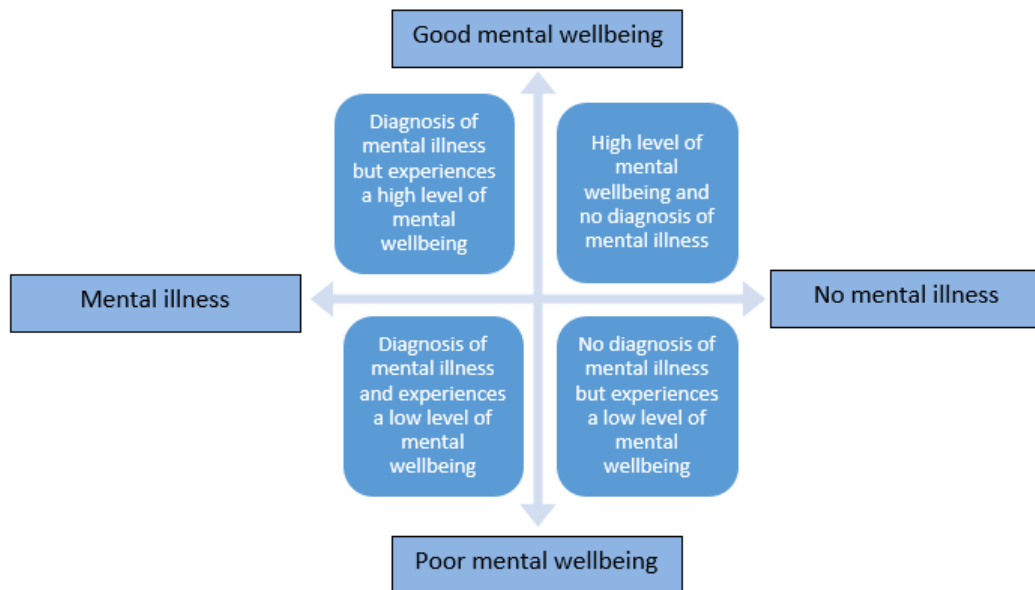
**Mental Health and Suicide Prevention**

## **1. Purpose**

- 1.1 The Health and Wellbeing Board is asked to:
- a) Agree the high need and the broad range of influencing factors about mental health in Derbyshire to inform the Joint Health and Wellbeing strategy development
  - b) Commit and enact ways in which they play a proactive role in prevention of mental ill health and suicide feedback to inform the Joint Health and Wellbeing strategy action plan

## **2. Information and Analysis**

- 2.1 'To build mental health and wellbeing across the life course' is a priority in the current 2022 the Joint Derbyshire Health and Wellbeing Strategy.
- 2.2 Everyone has mental health and wellbeing. People with mental illness can have good mental wellbeing which enables them to flourish, to be resilient and to manage their illness. Equally, those without mental illness can experience poor mental wellbeing, which can have a detrimental impact on their functioning and day-to-day life, causing them to languish. Good mental health is more than the absence of mental illness, it also requires the presence of something positive i.e. mental wellbeing. The mental health dual axis model (Keyes, C 2002) demonstrates this.



- 2.3 1 in 4 people have a mental health problem in any given year, and half of adult mental health problems start by the age of 14. The vast majority of people who have a diagnosed mental health condition is of a common mental health disorder such as stress, anxiety or depression. These conditions can be considered one that people may experience for a limited period of time and can effectively recover from. A small proportion of people have long-term severe and enduring mental health conditions.
- 2.4 The Covid 19 pandemic and cost-of-living-crisis has led to a significant increase in the number of people experiencing mental ill health with an additional estimated 60-70,000 people in Derbyshire County requiring some support. There have been increases in the risk factors which contribute to emotional distress, such as: social isolation, financial difficulties, employment issues and relationship problems. Some population groups experience a higher risk of mental illness, these include children and young people, parents, older adults, people with a disability, clinically extremely vulnerable, LGBTQ+ and people from an ethnic minority.
- 2.5 In Derbyshire County
- 99,507 (14.9%) people aged 18+ in 2021/22 were living with diagnosed depression
  - 7,117 (0.87%) people (all ages) in 2021/22 had Severe Mental Illness (SMI)
  - The suicide rate in 2019-21 is similar to the national rate at 11.5 per 100,000 people, but with significant variation between sexes (male

17.7; female 5.7). There were 244 deaths by suicide over the 3 years 2019-21.

- 2.6 A population health approach is important to help reduce health inequalities. Health inequalities are ultimately about differences in the status of people's health. The term health inequalities is also commonly used to refer to differences in the care that people receive and the opportunities that they have to lead healthy lives.

Health inequalities related to mental health include:

- People with SMI die 15-20 years early
- People with mental illness are less likely to be employed
- Black and Asian males have much higher rates of psychotic disorder

A Health Needs Assessment (HNA) on the access to mental health services in Derbyshire for black people and deaf people has been completed. The HNA contains recommendations which were welcomed by the JUCD Mental Health, Learning Disability, Autism and Children's Board and are applicable to other key forums to enable a narrowing of the gap in equality. Once published the HNA will be circulated to the HWB.

- 2.7 Due to all of the influencing factors 2.1-2.7, the approach to preventing mental ill health and supporting people with mental ill health extends far beyond a clinical approach and access to mental health services.

The approach can be categorised at 3 levels:

- Primary prevention: to prevent the onset of mental health problems by addressing the wider determinants of health and using 'upstream' approaches across the whole population, or those that can be targeted to population groups at higher risk of mental illness.
- Secondary prevention: identifying the early signs of mental illness or suicide risk and early intervention to prevent progression.
- Tertiary prevention: working with people who have diagnosed mental health problems to promote recovery and prevent (or reduce the risk of) recurrence.

- 2.8 What are we doing in Derbyshire?

To enable everyone to play a role in mental health and suicide prevention an approach has been designed to raise awareness,

decrease stigma, and increase skills and confidence across our population. Targeted work is undertaken with cohorts of people who may be at higher risk of mental ill health. The approach is delivered through engagement via schools, health settings, workplaces and communities with an aim of empowering and enabling others.

- Campaigns: public-facing awareness raising utilising national campaigns such as Time to Talk Day, World Suicide Prevention Day, or locally developed campaigns based upon local need and coproduced with local stakeholders, for example Let's Chat. Resource toolkits enable individuals, groups and organisations to take ownership and deliver awareness raising themselves.
- Training: a comprehensive training offer is free to the public and voluntary sectors in Derbyshire. This ranges from e-learning to full Mental Health First Aid courses. The skill and confidence development gained during training is supported by regular communication, newsletters and Mental Health First Aider Networks to help people remain proactive. Over 1,000 people from 290 different organisations attended interactive training in 2022/23.
- Information: development of the Derby and Derbyshire Emotional Health and Wellbeing website as the central source of local information. Development of mental health booklets in partnership with stakeholders including Derbyshire Police, Derbyshire Fire and Rescue and East Midlands Ambulance Service.

The campaigns, training and information are delivered via outreach and engagement including;

- in schools via the Whole School Approach programme, School Nursing and Mental Health Support Teams
- with young people in communities via locality health and wellbeing partnerships
- across JUCD through the Suicide Prevention Programme and staff wellbeing approach
- with community groups, clubs and other organisations through the Mental Health and Suicide Prevention project
- supporting VCSE organisations with the mental health and wellbeing of their staff and volunteers
- Mentell engaging men through outreach with settings such as pubs, workplaces and businesses

- 2.9 Other programmes work to embed mental health within practice and raise awareness through different mechanisms. For example, a cross-system piece of work to embed trauma informed practice in different roles, teams and organisations is taking place from September 2023 to August 2025.
- 2.10 The Director of Public Health Annual Report 2023 focusses on Mental Health. The report, [Let's Chat About Mental Health and Wellbeing](#) builds on the Let's Chat campaign, with mental health and wellbeing being a priority for Public Health in Derbyshire and provides a snapshot of how the Public Health team, along with partners and communities, have worked together to support people with their mental health and wellbeing, but much more work is needed.
- 2.11 Public Health lead the Derbyshire Self-harm and Suicide Prevention Partnership Forum (DSSPPF) which is a strategic system delivery group under the JUCD Mental Health, Learning Disability, Autism and Children's. This multi-agency group drives forward a common approach to reduce the number of deaths by suicide.
- 2.12 Organisations can play a role in two main aspects.
- Through the functions they hold. Examples include:
    - A district council incorporating mechanisms for mental health and suicide prevention in licensing processes for alcohol venues or taxi driving
    - Upskilling housing tenancy and environmental health officers in mental health, as a core part of their role
    - Placing promotional materials and information support in public-facing areas
    - Ensuring a supportive process in police custody and criminal justice
  - Focus on staff wellbeing. Examples include:
    - Establishing an in-house Mental Health First Aider Network
    - Ensuring that HR policies and procedures are conducive to good mental health and recovery
    - Ensuring that postvention support can be accessed for people affected by a death by suicide

### **3 Alternative Options Considered**

3.1 Not Applicable

### **4 Implications**

- 4.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **5 Consultation**

- 5.1 No

## **6 Partnership Opportunities**

- 6.1 Member organisations can explore ways in which they can play a proactive role in the prevention of mental ill health and suicide utilising methods such as the examples in 2.9.

## **7 Background Papers**

- 7.1 Derbyshire Health and Wellbeing Strategy Refresh 2022  
<https://www.derbyshire.gov.uk/site-elements/documents/pdf/social-health/health-and-wellbeing/derbyshire-health-and-wellbeing-strategy-2022.pdf>
- 7.2 Derbyshire Director of Public Health Annual Report 2023 - Let's Chat about Mental Health and Wellbeing  
<https://www.derbyshire.gov.uk/social-health/health-and-wellbeing/about-public-health/public-health-annual-reports/public-health-annual-reports.aspx#:~:text=This%20year%27s%20Director%20of%20Public, and%20wellbeing%20of%20Derbyshire%20residents.>

## **8 Appendices**

- 8.1 Appendix 1 – Implications.

## **9 Recommendation(s)**

That the Health and Wellbeing Board:

- a) Agree the high need and the broad range of influencing factors about mental health in Derbyshire to inform the Joint Health and Wellbeing strategy development
- b) Commit and enact ways in which they play a proactive role in prevention of mental ill health and suicide feedback to inform the Joint Health and Wellbeing strategy action plan

## **10 Reasons for Recommendation(s)**

10.1 To enable and support a whole system approach to mental health and wellbeing, focussed on the prevention of mental ill health and proportionate holistic support for people experiencing mental ill health. The support the reduction in the number of suicides by recognising and impacting the key root causes. Reinforcing the role that each person and each organisation can play.

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**Organisation:** Derbyshire County Council Public Health

**HWB Sponsor:** Ellie Houlston, Director of Public Health

### **Implications**

#### **Financial**

1.1 There are no financial implications of this report.

#### **Legal**

2.1 There are no legal implications of this report.

#### **Human Resources**

3.1 There are no human resource implications of this report.

#### **Equalities Impact**

4.1 An opportunity to help prevent and reduce health inequalities.

#### **Partnerships**

5.1 Member organisations can explore ways in which they can play a proactive role in the prevention of mental ill health and suicide utilising methods such as the examples in 2.9

#### **Health and Wellbeing Strategy priorities**

6.1 This report directly concerns the priority of building mental health and wellbeing across the life course by outlining the current issue, what is being delivered and an opportunity for member organisations to play a further role.

The topic of mental health is also an influencing factor in the 3 other priorities:

- Enable people in Derbyshire to live healthy lives.
- Support our vulnerable populations to live in well-planned and healthy homes.
- Strengthen opportunities for quality employment and lifelong learning.



## **Other implications**

7.1 NA