Emotional Health and Wellbeing of Children & Young People

Summary points

- It is estimated that 10,068 children and young people in Bristol aged 5-19 and 955 children aged 2-4 experience at least one mental health disorder at any one time\(^1\).
- 95% of primary school children and 65% of secondary school pupils who responded to the 2018 Pupil Voice survey had average scores that indicated positive mental wellbeing\(^2\).
- Bristol has a low rate of hospital admissions for mental health conditions among 0-17 year olds at 58.5 per 100,000 compared to the national rate of 84.7 per 100,000\(^3\).
- Bristol has a high rate of hospital admissions for self-harm among 10-24 year olds at 618 per 100,000 compared to 421.2 per 100,000 for England\(^4\).
- Bristol has a higher than national proportion of young people who belong to groups that are vulnerable to mental health disorders.

Overview

It is estimated that 1 in 8 (12.8%) children and young people aged 5-19 years and 1 in 18 (5.5%) children aged 2-4 has a clinically diagnosable mental health problem at any one time\(^5\). This equates to 10,068 5-19 year olds and 955 2-4 year olds in Bristol. Good mental health during childhood is important so that people can achieve good outcomes throughout their lives. The mental health and wellbeing of children and young people is therefore a priority for Bristol and it is the focus of one of the work streams within the Thrive Bristol programme.

Mental Wellbeing among School Age Children and Young People

Results from the 2018 Pupil Voice school survey support the national finding that rates of mental disorder increase with age.

- 95% of primary school pupils achieved a score indicating positive mental wellbeing in the 2018 Bristol Pupil Voice survey in 2018. This was measured using the Stirling Children's Wellbeing Scale. 5% achieved a low or medium low score, indicating poor mental health. There were 2,321 valid responses.
- 65% of secondary school pupils achieved a score indicating positive mental wellbeing using the Warwick-Edinburgh Mental Wellbeing Scales (WEMWBS). 35% achieved a low or medium low score, indicating poor mental health. There were 2585 valid responses.

\(^{1}\) Estimate based on national data
\(^{2}\) BCC school survey data - not yet published
Estimated Levels of Mental Disorders among 2-4 year olds and 5-19 year olds in Bristol (2017)\(^7\)

Table 1

<table>
<thead>
<tr>
<th>Mental Disorders</th>
<th>England percentage 2-4 year olds (experimental)</th>
<th>Bristol estimated number among 2-4 year olds</th>
<th>England percentage 5-19 year olds</th>
<th>Bristol estimated number among 5-19 year olds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional disorders</td>
<td>N/A</td>
<td>-</td>
<td>8.1%</td>
<td>6,370</td>
</tr>
<tr>
<td>Behavioural (or conduct) disorders</td>
<td>2.5%</td>
<td>434</td>
<td>4.6%</td>
<td>3,620</td>
</tr>
<tr>
<td>Hyperactivity disorders</td>
<td>N/A</td>
<td>-</td>
<td>1.6%</td>
<td>1,260</td>
</tr>
<tr>
<td>Other less common disorders including Autism Spectrum Disorders, eating disorders</td>
<td>1.4% (ASD),</td>
<td>243</td>
<td>2.1%</td>
<td>1,650</td>
</tr>
</tbody>
</table>

Hospital Admissions

- The rate of hospital admissions in 2017/18 for mental health conditions among children and young people aged 0-17 is 58.5 per 100,000. There has been no significant change since 2011/12. This is lower than the rate for England, which is 84.7 per 100,000 and also lower than the average rate among Bristol’s nearest statistical neighbours, which is 67.9 per 100,000.\(^8\)

There are strong links between drug and alcohol misuse and mental disorders and rates for hospital admissions among young people in Bristol are higher than the national average.

- The rate of hospital admissions in Bristol due to drug use among 15-24 year olds is 112.9 per 100,000. This is significantly higher than the England rate, which is 89.7 per 100,000. Bristol has the second highest rate among its nearest statistical neighbours.\(^9\)

- Admission episodes for alcohol-specific conditions among people who are under 18 in Bristol are 46.4 per 100,000, higher than the rate for England, which are 32.9 per 100,000. It is also much higher than the average rate among its nearest statistical neighbours, which are 38.2 per 100,000\(^10\)

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\(^7\) Estimate based on national data

\(^8\) 2018 mid-year population estimates for Bristol

\(^9\) Public Health England Children and Young People’s Mental Health and Wellbeing Profiles, September 2019;

\(^10\) Hospital Episode Statistics (HES) 2016,

Self-Harm

There is a strong association between self-harm and mental health conditions such as depression. It is also a key risk factor for suicide. The Bristol Self-Harm Surveillance Register has been recording detailed information on patients presenting to hospital emergency departments (ED) for self-harm since 2010 and records the following ED data.

- Measuring in 5 year age bands from age 15 to 75+, ED presentations in Bristol are consistently highest among females aged 20-24 and second highest among females aged 15-19.
- In 2018 15.8% of those attending ED in Bristol for episodes of self-harm were students, representing a rise in proportion compared to previous years. From 2010 to 2017 the proportion that was made up of students ranged from 8% to 13%.
- 78.5% of student presentations for self-harm in 2018 were female.
- The rates of hospital admissions for self-harm among 10-24 year olds in 2017/18 in Bristol are shown in Table 2 and are significantly higher in Bristol than in England. It has the third highest rate among 16 nearest statistical neighbours. However, when this is divided into different age groups, it can be seen that the rates are similar to England in the younger group and are much higher in older groups.

<table>
<thead>
<tr>
<th>Age band</th>
<th>England rate per 100,000</th>
<th>Bristol rate per 100,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 - 24</td>
<td>421.2</td>
<td>618.0</td>
</tr>
<tr>
<td>10 - 14</td>
<td>210.4</td>
<td>201.4</td>
</tr>
<tr>
<td>15 - 19</td>
<td>648.6</td>
<td>1,071.0</td>
</tr>
<tr>
<td>20 - 24</td>
<td>406.0</td>
<td>584.7</td>
</tr>
</tbody>
</table>

- One possible explanation for relatively high levels of hospital admissions for self-harm is that Bristol may be more compliant with NICE guidelines, which state that all people who present to hospital having self-harmed should be admitted for assessment. However, the data shows an increased trend over the last 5 years and a widening gap compared to national rates.

Vulnerable Groups

Bristol has high proportions of vulnerable groups who are at increased risk of mental health disorders.

- Census data records 1.09% of 0-15 year olds in Bristol providing unpaid care, compared to 1.11% for England. 0.2% of 0-15 year olds in Bristol provide more than 20 hours of unpaid care.

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The rate of Children in Care in Bristol is 69 per 10,000, which is close to the England rate of 64 per 10,000. 42.3% of children in care in Bristol aged 5 -16 had a mental health assessment score that indicated a cause for concern, using the Strengths and Difficulties Questionnaire. This compares to 38.6% of children in care in England.16

Bristol has a high rate of children who are first time entrants to the criminal justice system. Although the numbers have fallen significantly since 2010 it remains much higher than the national rate with 402.6 per 100,000 in Bristol compared to 238.5 per 100,000 for England.17

15.1% of school age children in Bristol have special educational needs. This proportion has decreased since 2014 but not as quickly as the proportion for England, which is lower at 14.4%

Bristol has a high rate of children who are excluded from school. In 2017/18 18.3% of secondary pupils in Bristol received a fixed term exclusion according to 2016/17 figures, which was almost twice the national figure of 10.1% and significantly higher than the average 11.8% of secondary pupils among Bristol’s nearest statistical neighbours.19

In 2017 8.8% of 16 and 17 year olds in Bristol were not in education, employment or training (NEET). This is much higher than 6% of 16 and 17 year olds in England who were NEET and higher than all but two of its nearest statistical neighbours.20

The rate of homelessness among young people aged 16-24 in Bristol is 0.81 per 1000. This is higher than the rate for England, which is 0.52 per 1000. Among its nearest statistical neighbours the average rate is 0.68 per 1000 and Bristol has the 8th highest rate out of 16 in this group.21

Risk and Protective Factors
NHS Digital identifies some specific risk factors for poor mental health among young people and Pupil Voice data gives some insight into these factors among children and young people in Bristol schools:

- 72% of primary respondents reported experiencing bullying during the previous month and 30% experienced this often or every day.
- 67% of secondary respondents reported experiencing bullying during the previous month and 29% experienced this often or every day.
- 10% of primary school respondents said there was no one they could talk to about anything that worried them.

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17Public Health England Children and Young People's Mental Health and Wellbeing Profiles, September 2019; [https://fingertips.phe.org.uk/irstimeentrants](https://fingertips.phe.org.uk/irstimeentrants)


19Department for Education School Census 2018


21Public Health England Children and Young People's Mental Health and Wellbeing Profiles, September 2019; [https://fingertips.phe.org.uk/homelessness](https://fingertips.phe.org.uk/homelessness)
• 9% of secondary school respondents said they never feel close to other people, 12% said they rarely feel close to others and 30% said they felt close only some of the time.
• 5% of secondary school boys and 11% of secondary school girls said that they harm or cut themselves as a means of dealing with their problems.
• 17% of secondary school pupils identified as gay, lesbian, bisexual, other, questioning, unsure or prefer not to say. This is significantly higher than the proportion within the whole population, as suggested by national data.

Protective factors included:
• There are high levels of participation in activities outside of school time, with 95% of pupils in both primary and secondary school reporting that they take part in these activities at least once a week.
• More than half of respondents in primary and secondary schools talk to parents, carers and family members when they have a problem.
• 52% of primary school pupils said there was someone they could talk to about almost anything or about most things.

Adverse Childhood Experiences (ACEs)

There is a strong link between poor mental health and ACEs. These include child maltreatment and household factors such as parental separation, domestic violence, parental substance misuse, parental mental illness and parental imprisonment.

• The rate of children in need in Bristol due to abuse or neglect is 193.6 per 10,000. This rate has fallen over the last 3 years but is still higher than the rate for England, which is 181.4 per 10,000.
• The rate of children who started to be looked after due to abuse or neglect in Bristol has fallen significantly over the last three years and is now 14.4 per 10,000 close to the national rate of 16.4 per 10,000.
• Bristol has a very high rate of children aged 0-15 whose parents are in drug treatment at 241.4 per 100,000, compared to 110.4 per 100,000 for England. The average rate among Bristol’s nearest statistical neighbours is 136.9 per 100,000 and Bristol has the highest rate in this group.
• Bristol has a low rate of children aged 0-15 whose parents are in alcohol treatment at 83.9 per 100,000, compared to 147.2 per 100,000 for England and an average rate of 158.8 per 100,000 among Bristol and its nearest statistical neighbours. This may represent less successful targeting of these parents, rather than low need. Services have been recommissioned with a bigger focus on alcohol since this data was published.

22 https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2017
Accessed Sept 2019
Accessed Sept 2019
26 Health & Wellbeing – Alcohol & Drugs, Public Health England updated Jan 2015
Equalities data:

- NHS Digital found that nationally, rates of emotional disorder among 5-19 year olds are higher among girls (10%) than boys (6.2%).
- In Bristol girls have higher rates of hospital admission than boys for mental health conditions (63 per 100,000 compared to 54.3 per 100,000), for self-harm (998.6 per 100,000 compared to 231.2 per 100,000) and for alcohol specific conditions (63.2 per 100,000 compared to 30.1 per 100,000).
- Young adults (aged 15-24) have much higher numbers of presentations to emergency departments for self-harm than older people in Bristol.
- Young men aged 15 to 24 years have higher admission rates due to drug misuse (119.6 per 100,000) compared to girls same age (106.4 per 100,000).
- Nationally behavioural disorders among 5-19 year olds are higher in males (5.8%) than in females (3.4%). Boys in Bristol have higher rates of behaviour related factors such as fixed period exclusions. Hyperactivity disorders are also higher in boys (2.6%) than girls (0.6%).
- Among 5-10 year olds boys are twice as likely as girls to have a disorder. Among 17-19 year olds, young women are more than twice as likely as young men to have a mental disorder.
- NHS Digital found that mental disorders were more common in children living in lower income households, with the exception of hyperactivity and eating disorders. Public Health England fingertips data shows a direct correlation between the prevalence of mental health disorders among children and young people and deciles of deprivation. This data is not available at a local authority level, often because numbers are too small.
- NHS Digital found that rates of mental health disorder in 5 to 19 year olds varied between ethnic groups but tended to be higher in White British children and lower in those who were Black/Black British or Asian/Asian British (Fig 1). This data is not available at a local level.

Fig 1: Mental health disorder by ethnic group

Further data / links:

- Children and Young People's Mental Health and Wellbeing: [https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh](https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh)
- Child and Maternal Health: [https://fingertips.phe.org.uk/profile/child-health-profiles](https://fingertips.phe.org.uk/profile/child-health-profiles)

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