

Mental Health Survey 2024

A report by Age UK Redbridge, Barking & Havering



October 2024

“Elderly people are very sidelined in every way.

Cannot speak to anyone, everything referred to the internet, causing acute anxiety.”

Local Older Person

Contents

	Page
1. Introduction	5
2. Background	5
3. Methodology	5
4. Strengths & Limitations	5
5. Executive Summary	6
6. Analysis of Feedback	7
7. Glossary of Terms	24
8. Distribution and Comment	24
Demographics	Appendix 1

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1. Introduction

Age UK Redbridge, Barking & Dagenham and Havering is a local charity, which has been working with older people for over 50 years. We have dedicated, trained staff who are making a positive difference to the lives of older people through a variety of services. This includes the Voices of Experience Project, giving older people in Redbridge the opportunity to give their feedback.

2. Background

Mental health problems have increased for a myriad of reasons in the last few years.

The impact of the pandemic, social isolation, services transferring to online, the cost of living and concerns about global stability, have all contributed to some people needing mental health support or feeling stressed and not knowing where or who to turn to.

The aim of this survey was to gauge how widespread poor mental health is amongst older people in Redbridge.

The survey also looked to evaluate how far mental health services are meeting the needs of local people.

3. Methodology

Participants who could access the internet were emailed a link to an online survey. Additionally we sent paper copies in the post. Some participants even gave their feedback over the phone. We also visited supported living establishments and community groups to collect their feedback.

4. Strengths & Limitations

The flexibility of our approach in gathering feedback from people, and the variety of methods used are among the project's strengths.

5. Executive Summary of Findings

During August - September 2024, 101 older people in Redbridge completed our survey on mental health.

This section summarises key findings - see section 6 for findings in full.

Survey Response

Current Mental Health

- A majority of respondents (71%) currently have 'good or excellent' mental health, while around a quarter (23%) describe it to be 'fair'. 6% consider their mental health to be 'poor' or 'very bad'.
- Just over half of respondents (58%) say they know what has triggered their condition.
- The main causes highlighted are physical health conditions (42%), feeling lonely or isolated (also 42%), and family issues such as bereavement or breakup (32%).
- Of those identifying with a mental health condition in the last year, two thirds (67%) have experienced anxiety, with 42% citing depression and a quarter (26%) insomnia.

Demographics and Personal Circumstances:

- Younger (50 - 64) and older (90 or over) respondents are least likely to have 'good or excellent' mental health.
- Those living alone are more likely to have 'good or excellent' mental health (79%), compared with those living with others (71%).
- Women are noticeably more likely than men to have 'good or excellent' mental health (79% comparing with 62%).
- Just 58% of respondents in poor physical health have 'good or excellent' mental health. This compares with around 75% for those in fair or good health.

Seeking Support

- Around two thirds of respondents (62%) feel comfortable to talk about their mental health, while a quarter (28%) do not.
- Most (87%) confide in the people around them (family or friends) while 28% would approach a professional.
- Around a third of respondents (30%) have discussed their mental health with their GP.
- GP support offered includes referral for therapies or counselling (57%), medication (42%) and social prescribing to community support (9%).
- A quarter of respondents (26%) have received counselling (talking therapies).
- A tenth (11%) have received mental health (psychiatric) services.
- A quarter of respondents (27%) are aware of local charities, who provide some form of mental health support. There is good awareness of Mind, Samaritans and Age UK.

Self-Help

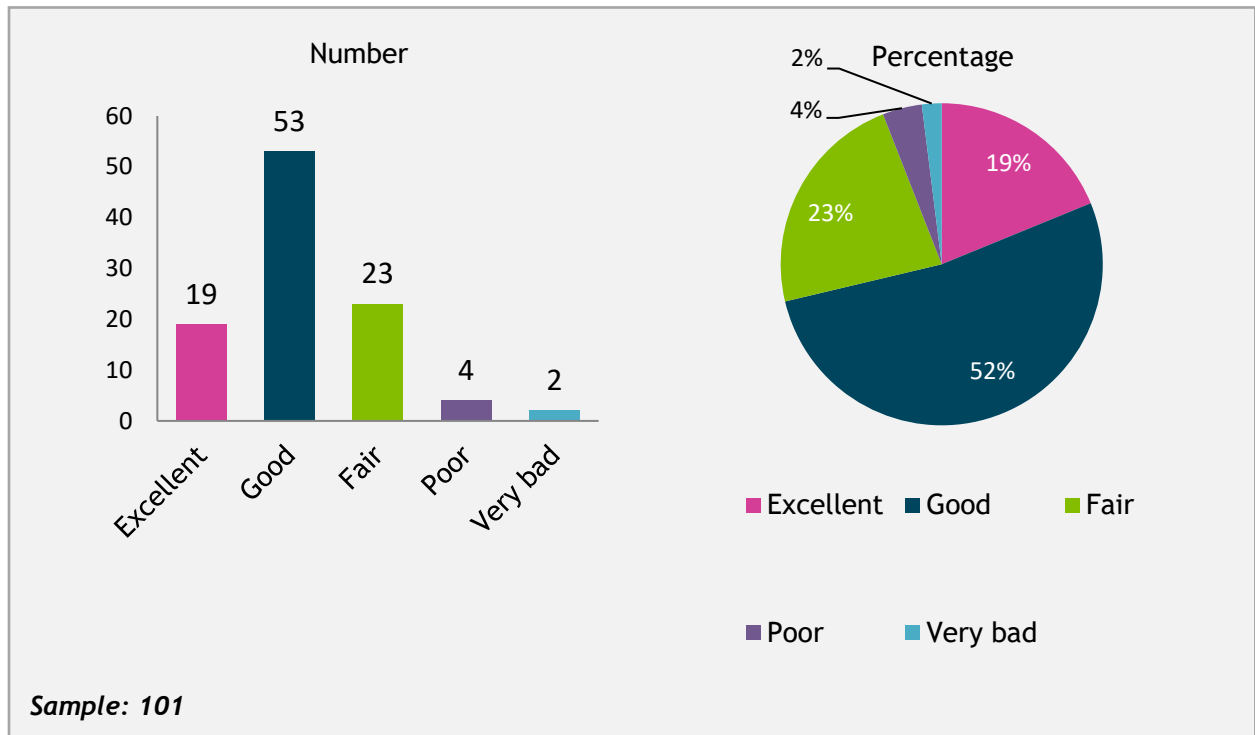
- Two thirds of respondents (64%) in some way, support their own mental health.
- This is largely through socialising (61%), walking or exercise (59%) or having hobbies or interests (36%).

6. Our Survey - Analysis of Feedback

During August - September 2024, 101 older people in Redbridge completed our survey on mental health.

We asked questions about current mental health and explored experiences of support services and networks. Additionally, we looked at what individuals are doing for themselves, to look after their mental health and wellbeing.

6.1 How would you rate your current mental health?



A majority of respondents (71%) currently have 'good' or 'excellent' mental health, while around a quarter (23%) describe it to be 'fair'. 6% consider their mental health to be 'poor' or 'very bad'.

6.1.1 Have ‘good or excellent’ mental health:

	% Yes
Aged 75 - 89	81%
Aged 65 - 74	71%
All Respondents (Baseline)	71%
Aged 50 - 64	63%
Aged 90 or over	63%

Younger (50 - 64) and older (90 or over) respondents are least likely to have ‘good or excellent’ mental health.

Household - Just you	79%
Household - 2 people	71%
All Respondents (Baseline)	71%

Those living alone are more likely to have ‘good or excellent’ mental health (79%), compared with those living with others (71%).

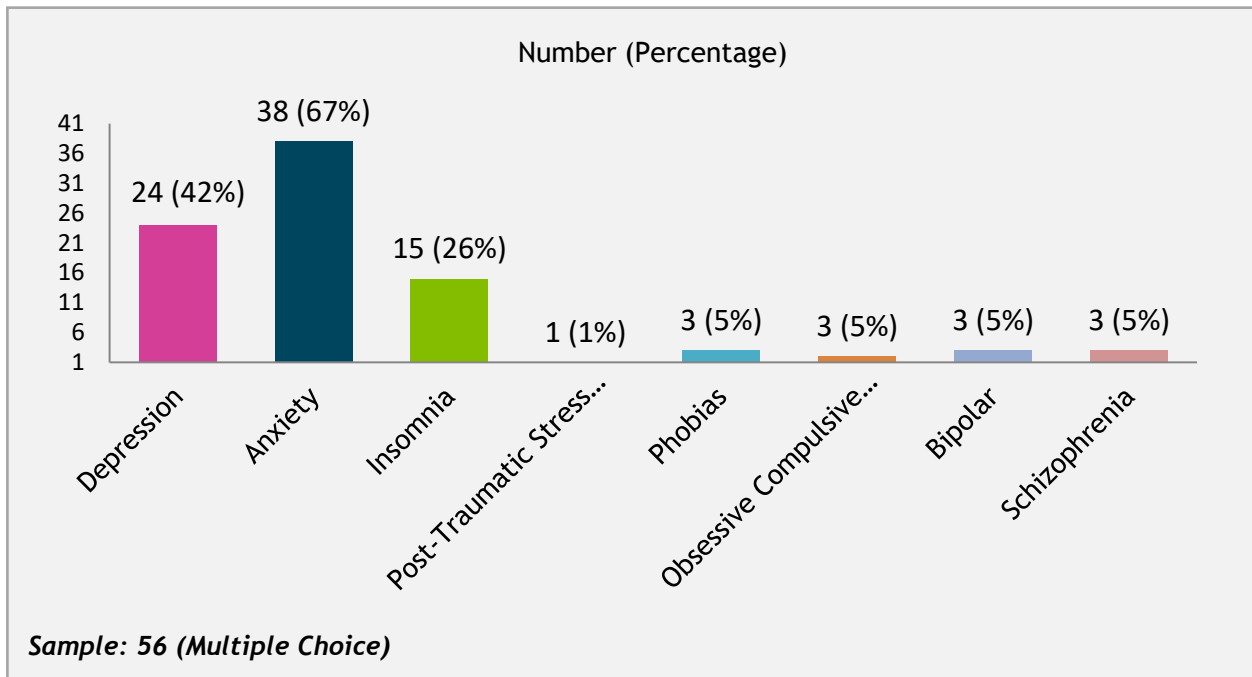
Female respondents	79%
All Respondents (Baseline)	71%
Male respondents	62%

Women are noticeably more likely than men to have ‘good or excellent’ mental health (79% comparing with 62%).

Fair Health	82%
Good Health	72%
All Respondents (Baseline)	71%
Poor Health	58%

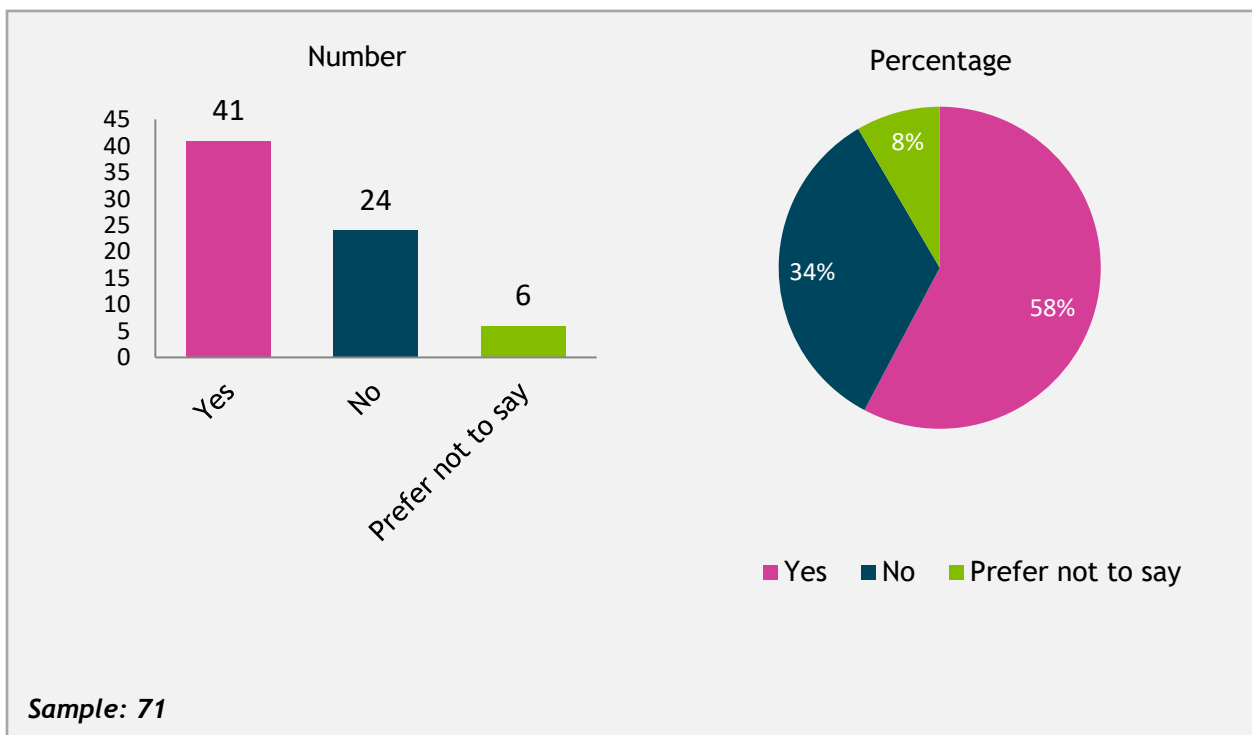
Just 58% of respondents in poor physical health have ‘good or excellent’ mental health. This compares with around 76% for those in fair or good health.

6.2 Have you suffered from any of the following mental health conditions in the past 12 months?



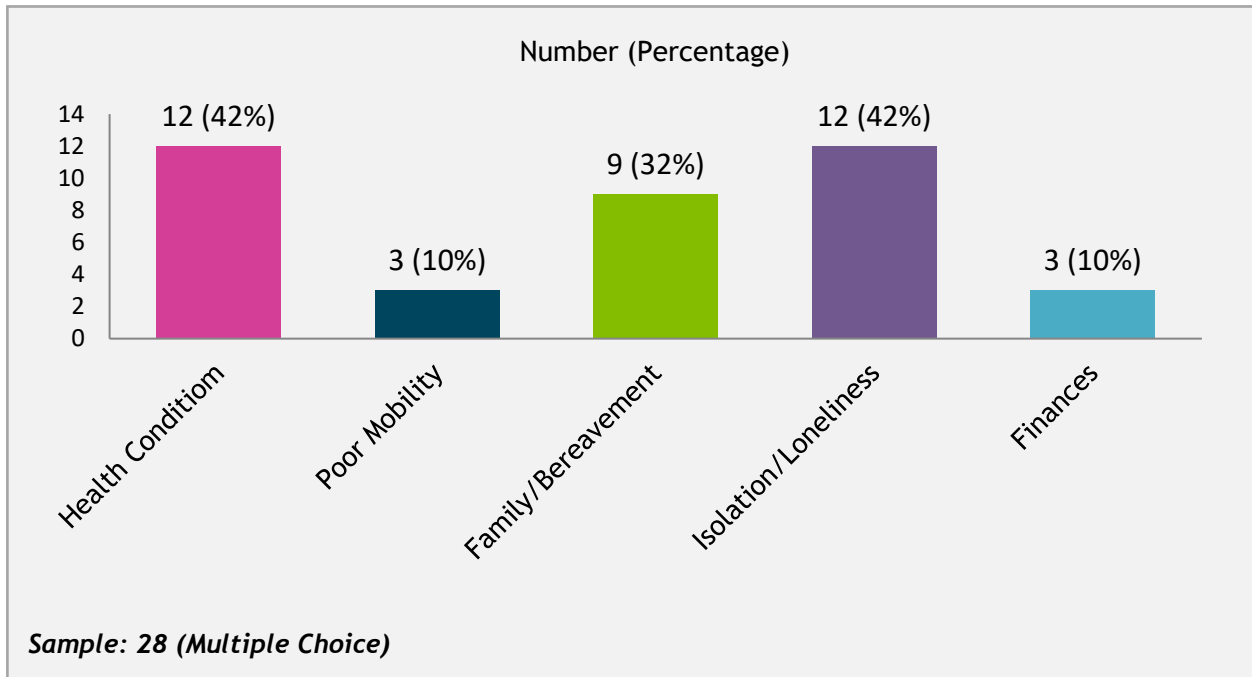
Of those identifying with a mental health condition in the last year, two thirds (67%) have experienced anxiety, with 42% citing depression and a quarter (26%) insomnia.

6.3 If you have suffered from any of the above, do you know what triggered you to have this condition?



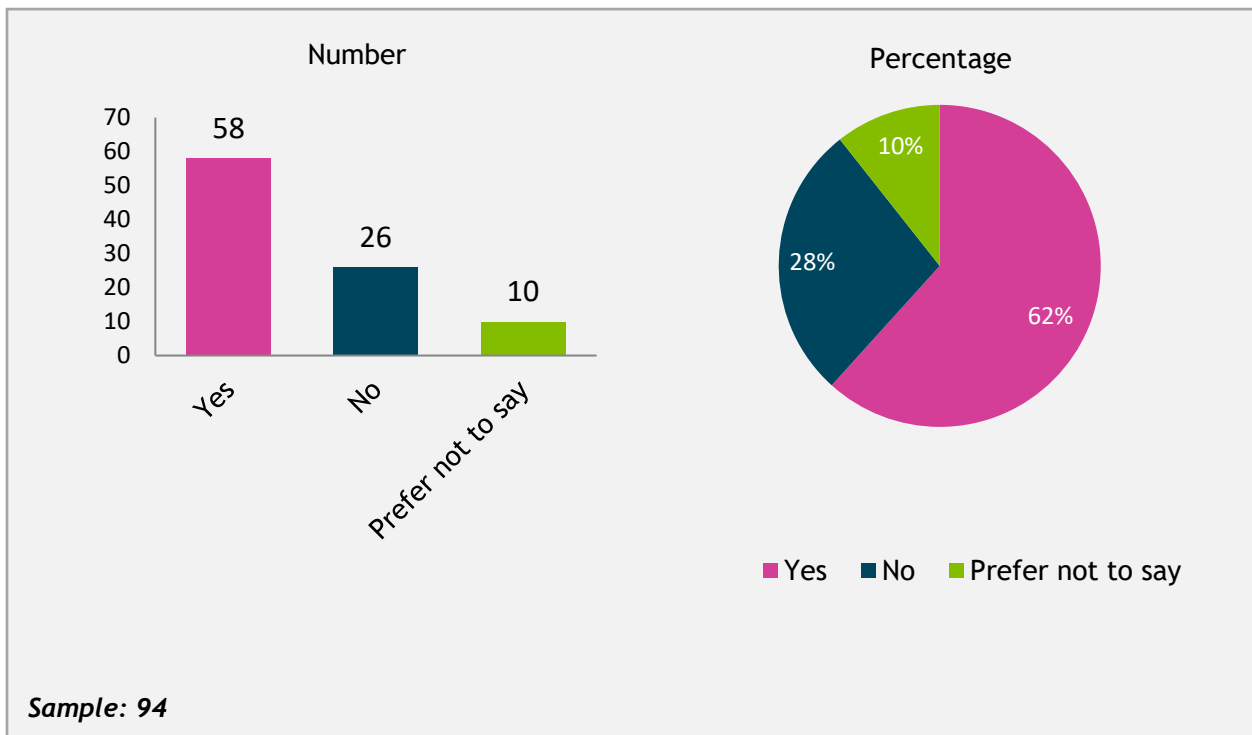
Just over half of respondents (58%) say they know what has triggered their condition.

6.4 If YES, please give details:



The main causes highlighted are physical health conditions (42%), feeling lonely or isolated (also 42%), and family issues such as bereavement or breakup (32%). To a lesser extent, poor mobility and finances are mentioned - both at 10%.

6.5 Do you feel comfortable discussing your mental health with others?



Around two thirds of respondents (62%) feel comfortable to talk about their mental health, while a quarter (28%) do not.

6.5.1 Feel comfortable discussing mental health with others

	% Yes
Aged 50 - 64	63%
Aged 65 - 74	62%
All Respondents (Baseline)	62%
Aged 75 - 89	54%
Aged 90 or over	50%

Older respondents (75 or over) feel notably less comfortable to discuss their mental health.

Household - 2 people	63%
All Respondents (Baseline)	62%
Household - Just you	55%

Those living with others are more likely to feel comfortable (63%) than single occupants (55%).

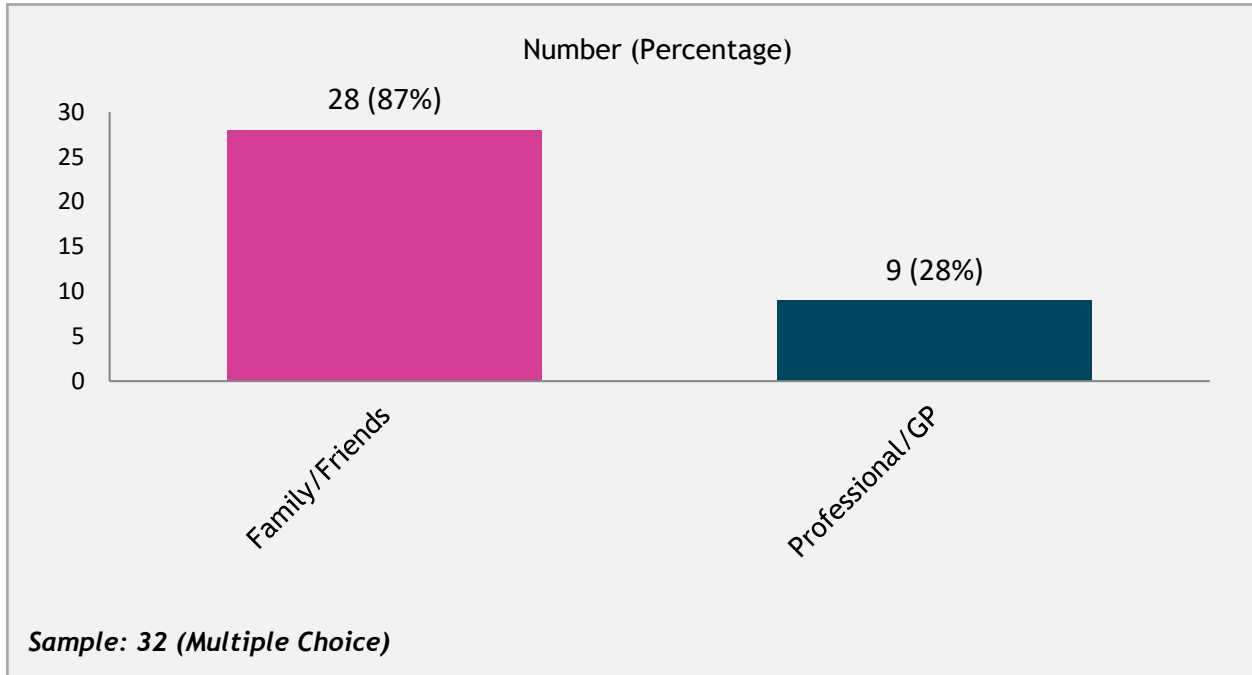
All Respondents (Baseline)	62%
Female respondents	59%
Male respondents	52%

Women are more likely to feel comfortable, than men (59% comparing with 52%).

Good Health	64%
All Respondents (Baseline)	62%
Poor Health	58%
Fair Health	53%

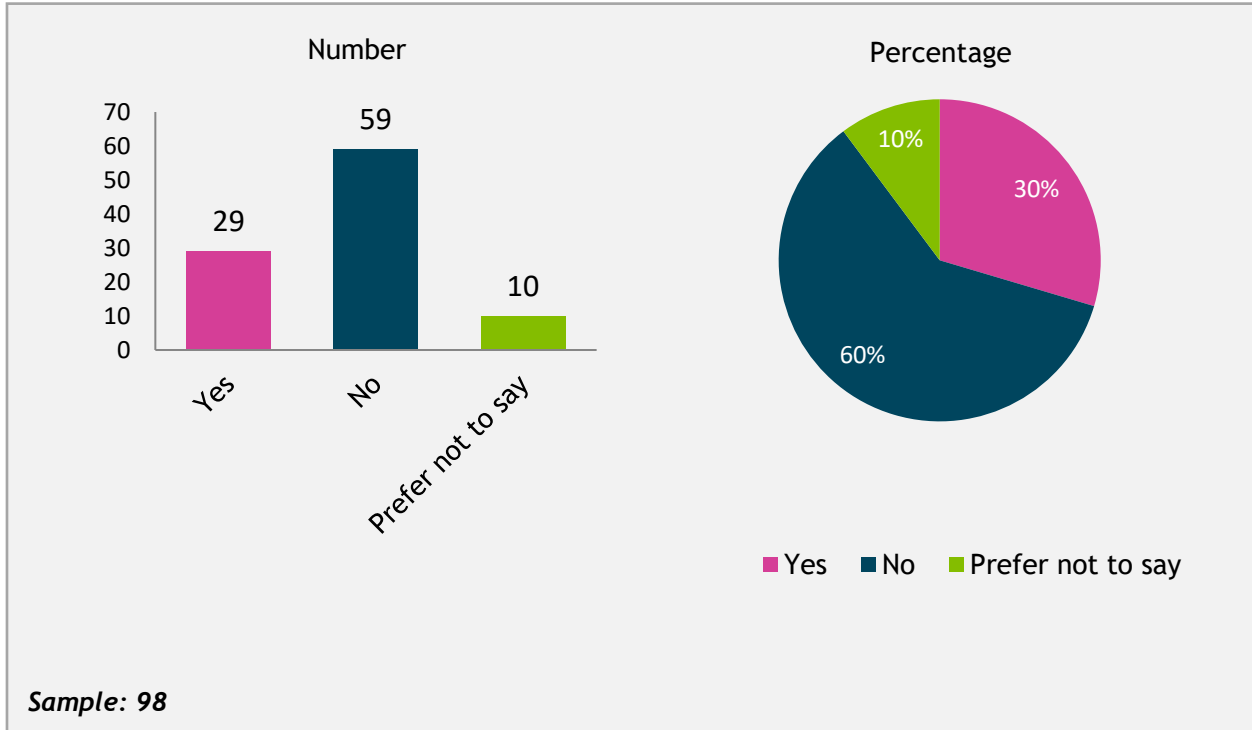
Those in good physical health are most likely to feel comfortable.

6.6 If YES who do you discuss it with?



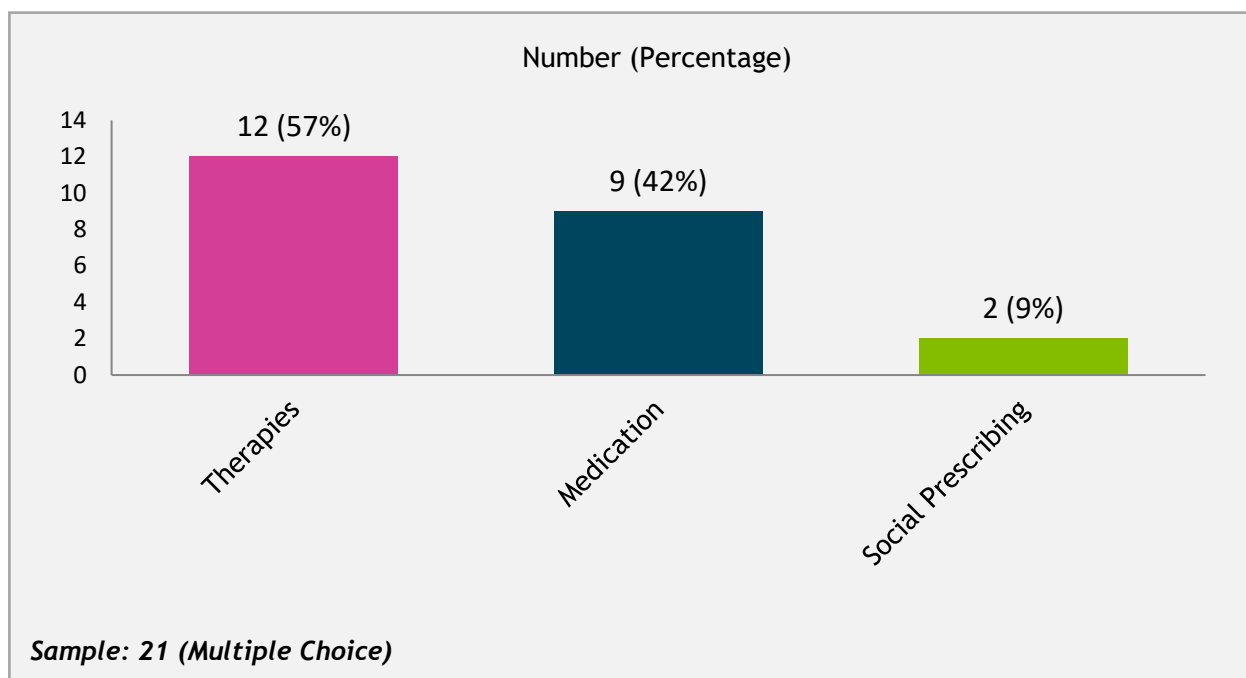
Most (87%) confide in the people around them (family or friends) while 28% would approach a professional.

6.7 Have you ever discussed your mental health with your GP?



Around a third of respondents (30%) have discussed their mental health with their GP.

6.8 If YES - What support did your GP offer you? How helpful did you find the discussion?



Support offered by GPs includes referral for therapies or counselling (57%), medication (42%) and social prescribing to community support (9%).

Comments about the service are largely negative. We hear that support can be difficult to access, and that services are more interested in acute needs - such as suicidal thoughts.

Selected Feedback

“Not much - my GPs seem to be too busy looking after lots of patients.”

“Not helpful. No help offered.”

“So so. Can't see them unless you tell them you have a lump somewhere or you are bleeding or have chronic pain.”

“Bereavement, gave me a phone number, who said was I suicidal, if not, very long wait.”

“After a bereavement, the GP was helpful, gave me a number to call. They asked if I was suicidal, if not would help sometime!!”

One person's condition was dismissed as 'old age'.

Selected Feedback

“The GP said it was old age causing my issue, not very helpful.”

We also hear about long waiting lists, and an inadequate number of therapy sessions.

Selected Feedback

"I joined Talking Therapy. I had to wait about 3 months before I got an appointment."

"Counselling for husband's bereavement - 6 months of feeling low - given 1 session - it didn't help."

Signposting to community groups (such as Age UK) has been helpful.

Selected Feedback

"I got a lot of support - she put me in contact with Age UK, who contacted me and I joined a class."

6.8.1 - If NO, why not?

Of those not approaching their GP for support, many cite a lack of appointments.

Selected Feedback

"Unable to get an appointment so gave up in the end."

"Never get through. No confidence in doctors (it is through my inability to speak to a doctor let alone see one that has been the cause of my ill health)."

GPs are considered to be too health focussed - as a result, a lack of confidence is expressed in their ability or inclination to help.

Selected Feedback

"Always discussing health issues."

"It has never been a subject for discussion."

"No trust or confidence."

"It's nothing they can help with."

"Didn't feel serious enough."

“GPs don't have time to listen.”

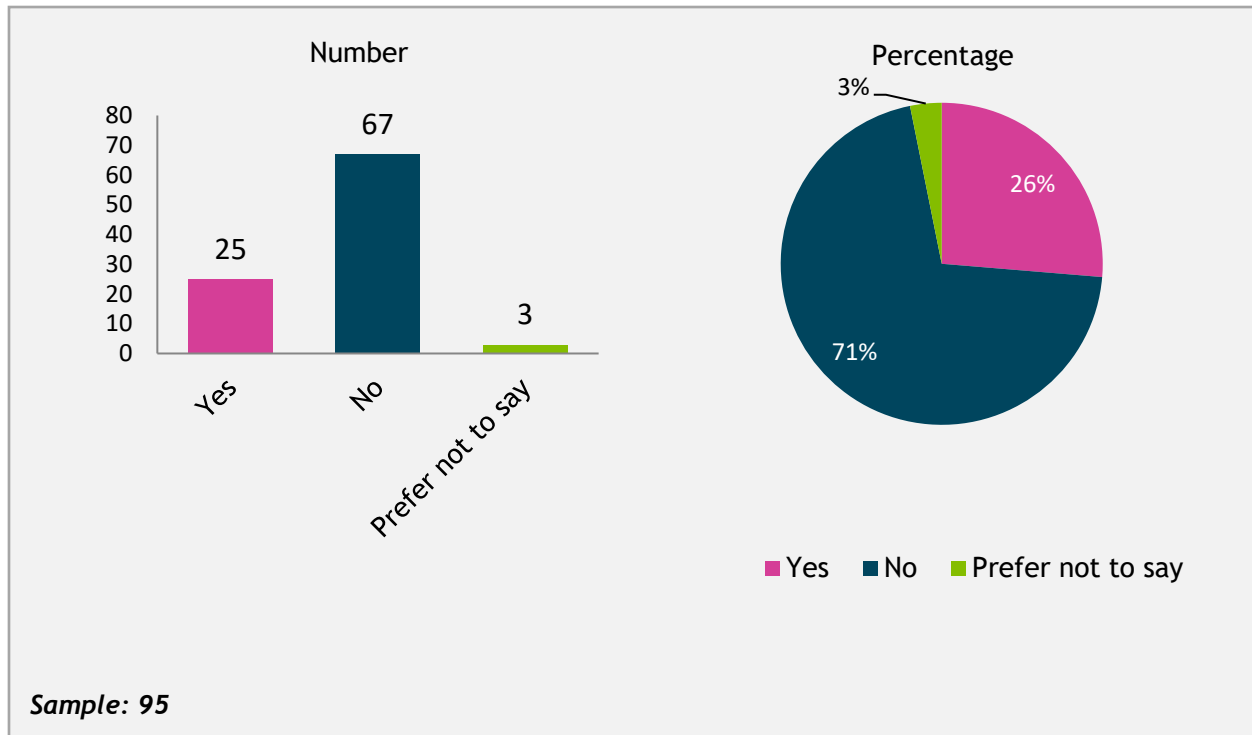
Some prefer to consult with family or friends instead - in part this is down to feeling embarrassed or inadequate.

Selected Feedback

“I have other means of support.”

“Because I feel silly and I have family who help.”

6.9 Have you ever had counselling via Talking Therapies, the NHS Counselling Service?



A quarter of respondents (26%) have received counselling (talking therapies).

The service is widely complimented, and has been effective for most.

Selected Feedback

“It helped me a lot, gave me a different perspective on my situation.”

"I had Talking Therapies for a few years, once a week on the phone. Unfortunately, it stopped about 3/4 months ago. I miss it very much. Can I have it back please."

Waiting lists are mentioned.

Selected Feedback

"Very useful, had to wait quite a long time to be seen."

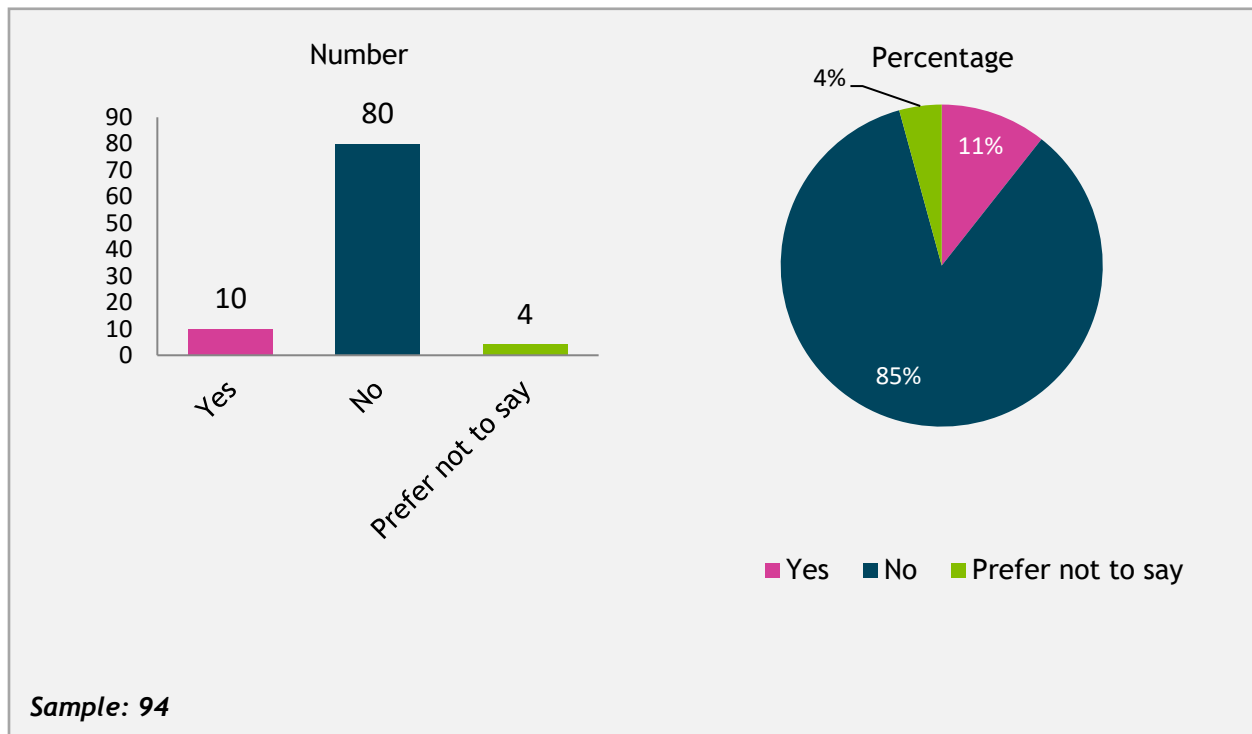
Those accessing online sessions would prefer an in-person option.

Selected Feedback

"Good, but I would have preferred it face to face. I like to see who I am talking to."

"Short term, "sticking plaster", soothing enough on the day & it's all online too."

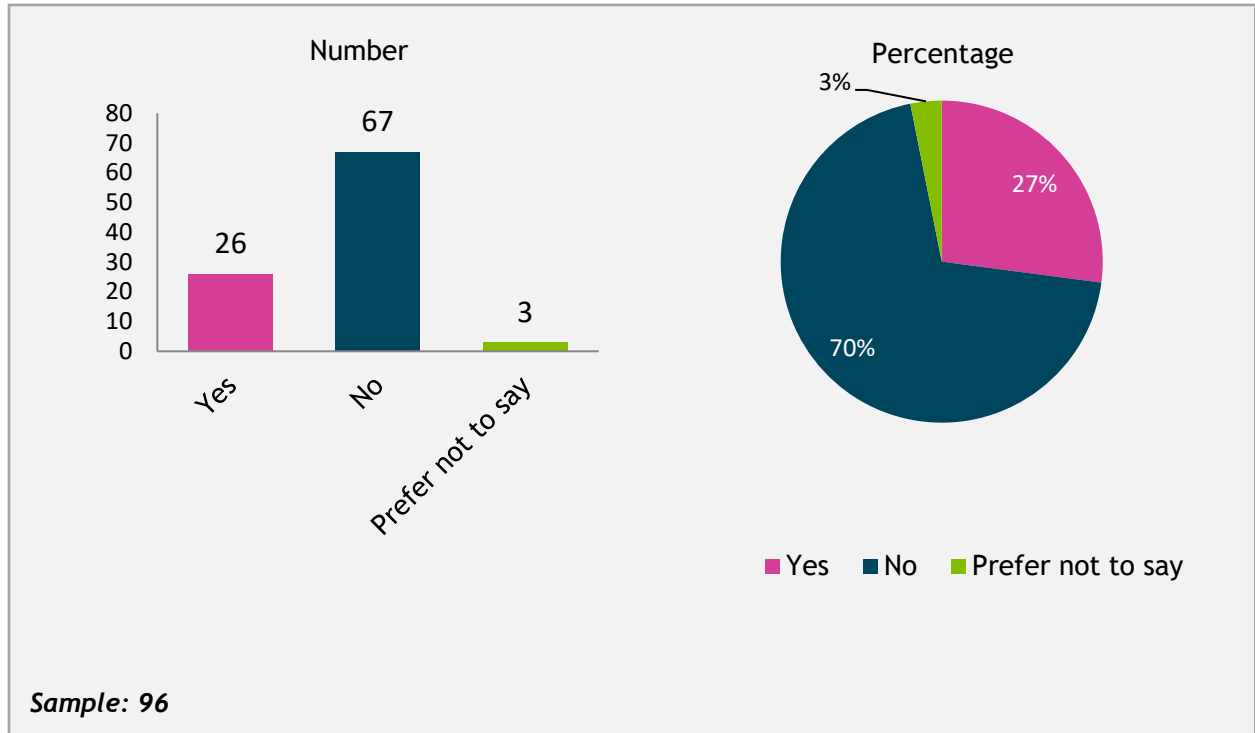
6.10 Have you ever been referred to Mental Health Services? (to see a psychiatrist etc.)



A tenth of respondents (11%) have received mental health (psychiatric) services.

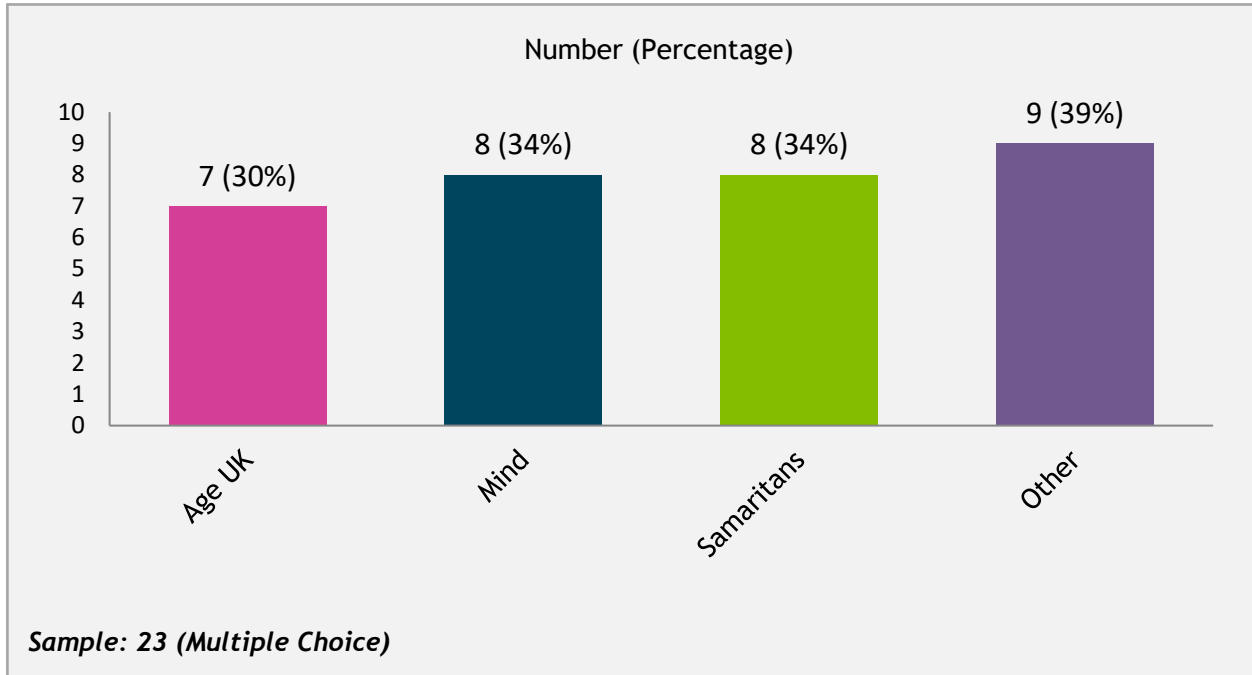
When asking for feedback - we find the vast majority of experiences were many years ago (during childhood in particular).

6.11 Are you aware of any local charities who support people with mental health issues?



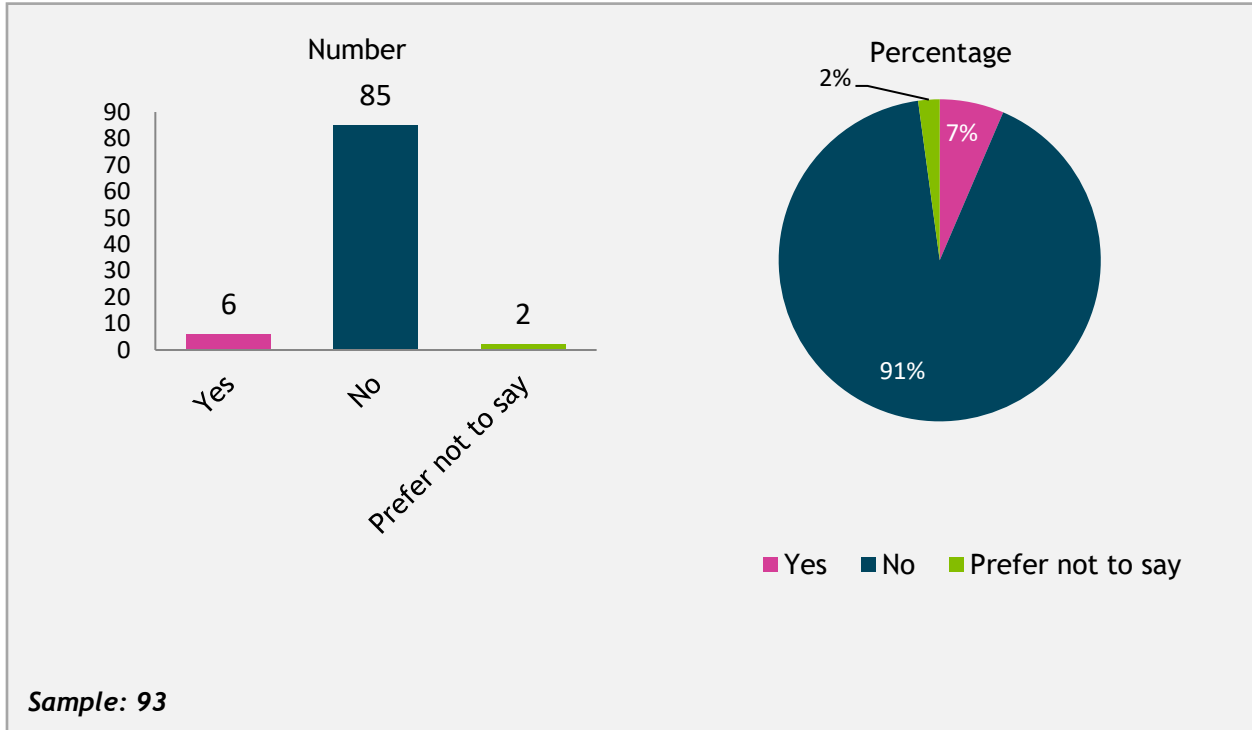
A quarter of respondents (27%) are aware of local charities, who provide some form of mental health support.

6.12 If YES - please specify which ones



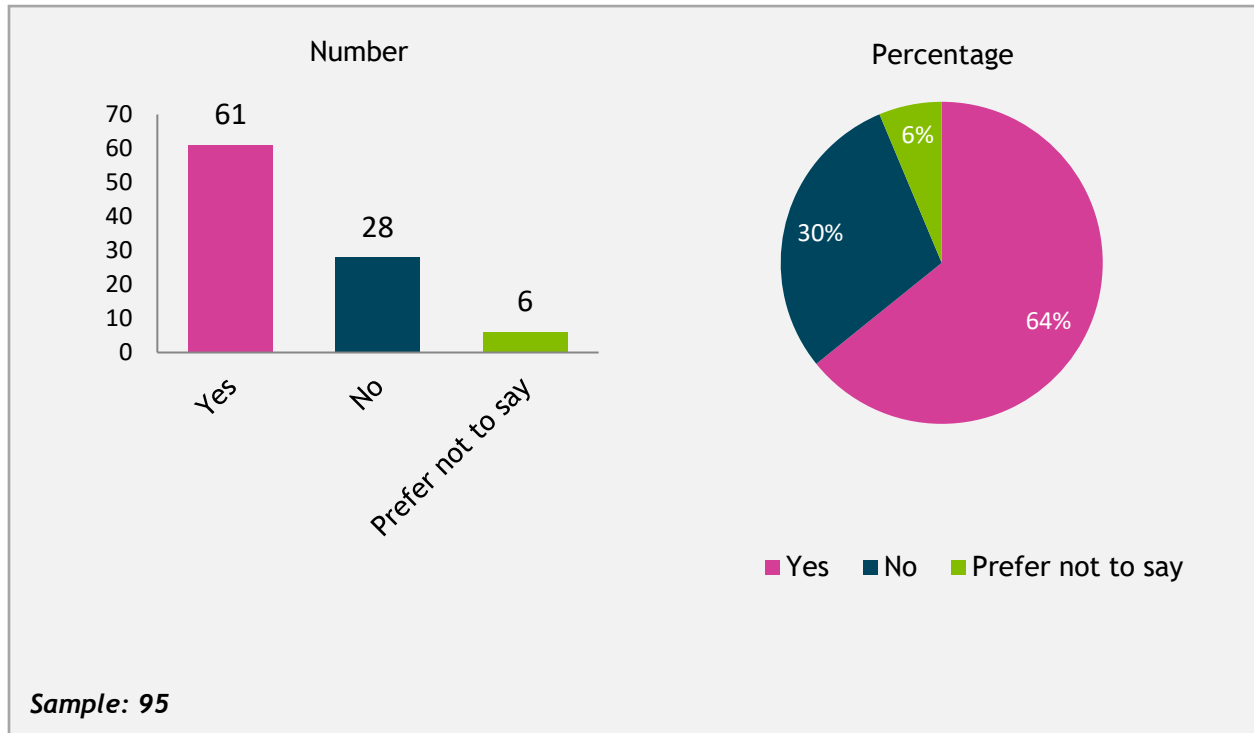
There is good awareness of Mind (34%), Samaritans (also 34%) and Age UK (30%). Other organisations mentioned include faith, fellowship and carers groups.

6.13 Have you ever received support for your mental health from a charity?



Fewer than a tenth of respondents (7%) have received mental health support from a charity.

6.14 Do you do anything to look after your mental health?



Two thirds of respondents (64%) in some way, support their own mental health.

6.14.1 Support own mental health

	% Yes
Aged 50 - 64	88%
Aged 75 - 89	72%
All Respondents (Baseline)	64%
Aged 65 - 74	38%
Aged 90 or over	25%

On levels of self-support, there is a clear gap between the youngest (88%) and oldest (25%) respondents.

Household - Just you	68%
All Respondents (Baseline)	64%
Household - 2 people	54%

Those living alone are more likely to self-support (68%) than those living with others (54%).

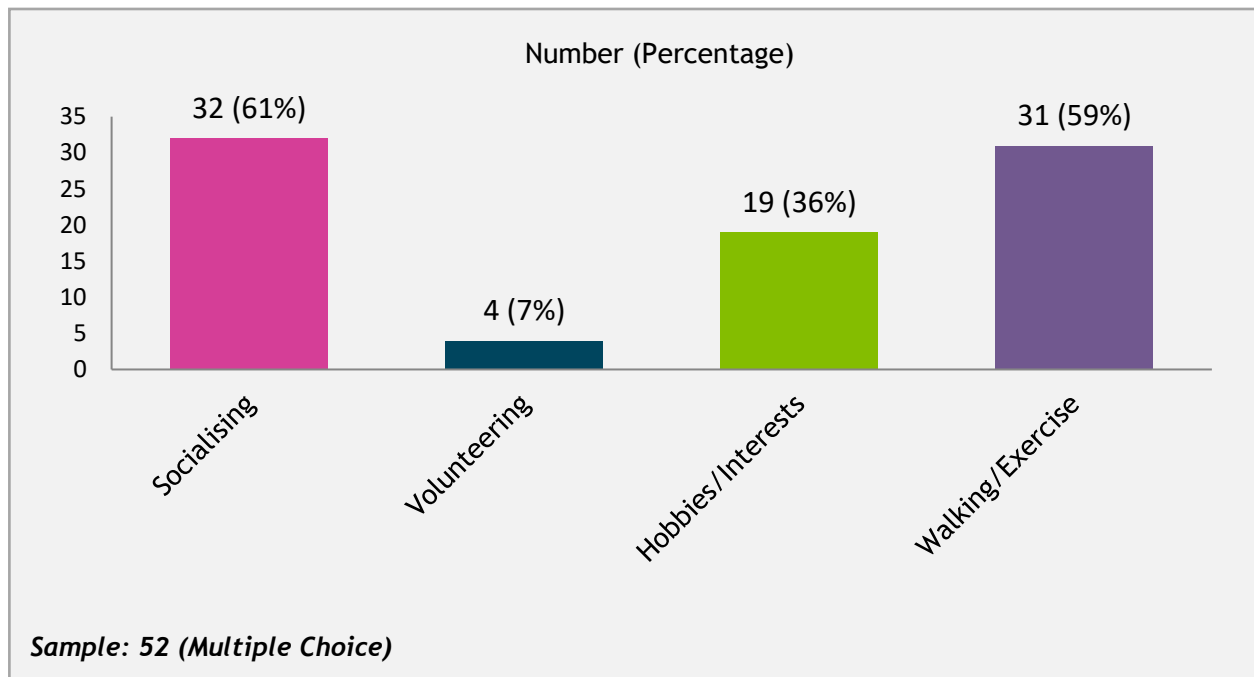
Female respondents	68%
All Respondents (Baseline)	64%
Male respondents	43%

Women are noticeably more likely to self-support (68%) than men (43%).

Good Health	69%
Poor Health	67%
All Respondents (Baseline)	64%
Fair Health	56%

We find there is little difference between respondents in good or poor physical health.

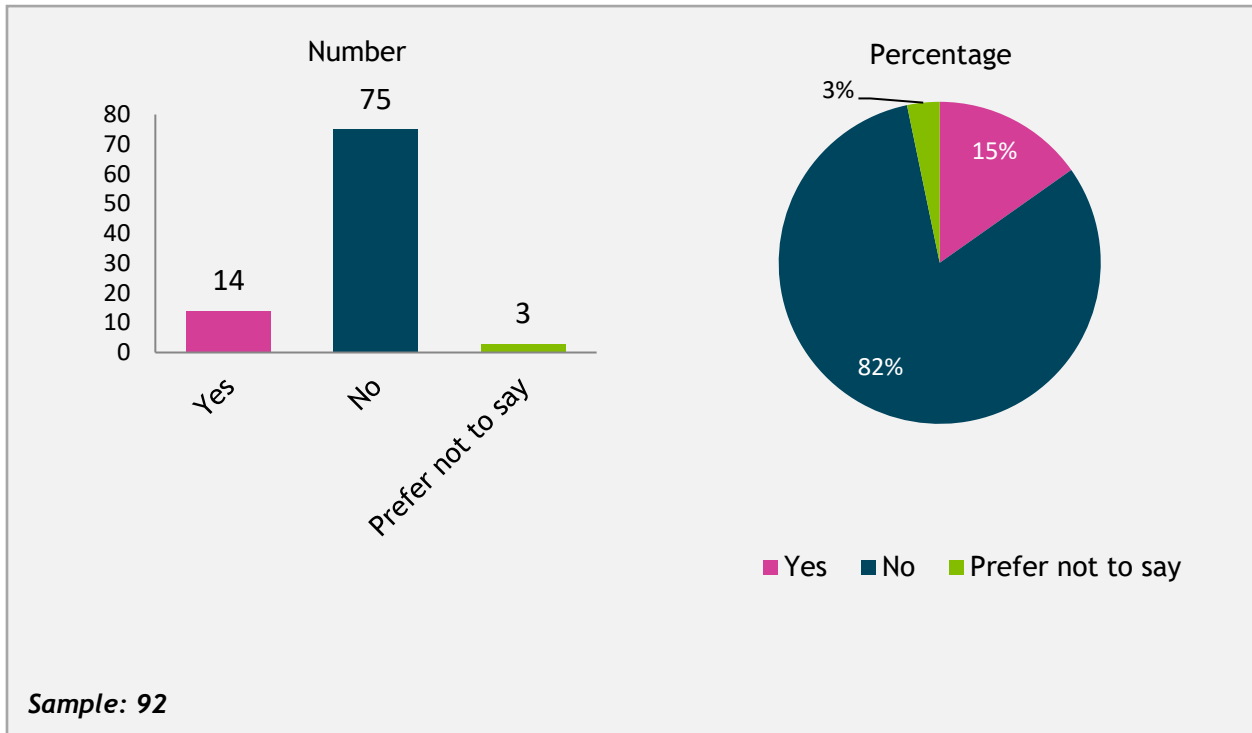
6.15 If YES, please give details:



The self-support described is largely socialising (61%), walking or exercise (59%) or having hobbies or interests (36%).

Specific interests mentioned include colouring, crosswords and puzzles, meditating, faith and choirs, music, gardening, park visits, exercise (walking, swimming, cycling), diet and generally ‘keeping active’.

6.16 Do you care for anyone who suffers with their mental health?



15% of respondents care for someone with a mental health condition.

Situations are varied, with full-time and occasional support outlined.

Selected Feedback

“All daily tasks.”

“My husband has dementia and bipolar disorder.”

“Visit regularly and support financially.”

“My husband has dementia and lives in a care home. I take him out to give him stimulation which the home does not provide.”

“I don't care for them but support a friend who is having a problem.”

“Two friends who suffer with anxiety. Phoning, listening and company from time to time.”

6.17 If YES - do you receive any support to carry out your caring role?

Just three respondents receive additional support.

6.18 Do you have any other comments on mental health and mental health services?

In general feedback, we hear that services are ‘overstretched’ and can be difficult to access. A lack of in-person provision is noted.

Selected Feedback

“I think the hospitals and local mental health charities are too overstretched.”

“They seem completely overstretched. My husband used to attend a day hospital until it shut down and he deteriorated rapidly.”

“All services are stretched both during & after the pandemic & I believe they are still struggling to cope.”

“Waiting over one year for husband’s referral for poor mental health. He is now in a care home.”

“From conversations with friends, it needs to be easier to access.”

“It’s very difficult to get help. It is very difficult to get GP face to face appointments.”

For some, support received has not been holistic or adequate. An over-reliance on medication is suggested.

Selected Feedback

“When he was still living at home the support was not at all adequate.”

“20 years of repeat prescriptions and a constant churning out of anti-depressants even though there was no improvement, reviews were often missed or delayed. Psychiatric services need to work holistically with physical health service as the root cause of this person’s poor mental health was poor physical health but this was never explored.”

It is felt that older people are often ‘sidelined’ and this can be systemic.

Selected Feedback

“Elderly people are very sidelined in every way, cannot speak to anyone, everything referred to the internet, causing acute anxiety.”

“Long waiting list. Not readily available. Not interested if you are old.”

The importance of training and communication is emphasised.

Selected Feedback

“Lack of communication in the first instance.”

“GPs and other NHS people need to be trained more to help people with a mild depression.”

“Mental health awareness training in schools and work places.”

Reasons for poor mental health include social media and substance misuse - according to some.

Selected Feedback

“Social media has created an online world where people now reside, parents are finding it difficult to monitor what their children are seeing and the amount of time they spend online, this is leading to chronic loneliness and a lack of face to face communication along with a breakdown in the community.”

“More money needed to sort substance misuse issues.”

Potential solutions include being socially, and generally active.

Selected Feedback

“Social activities are important.”

“Keep busy, try to keep up activities.”

7. Glossary of Terms

There are no acronyms in this report.

8. Distribution and Comment

This report is available to the general public, and is shared with our statutory and community partners. Accessible formats are available.

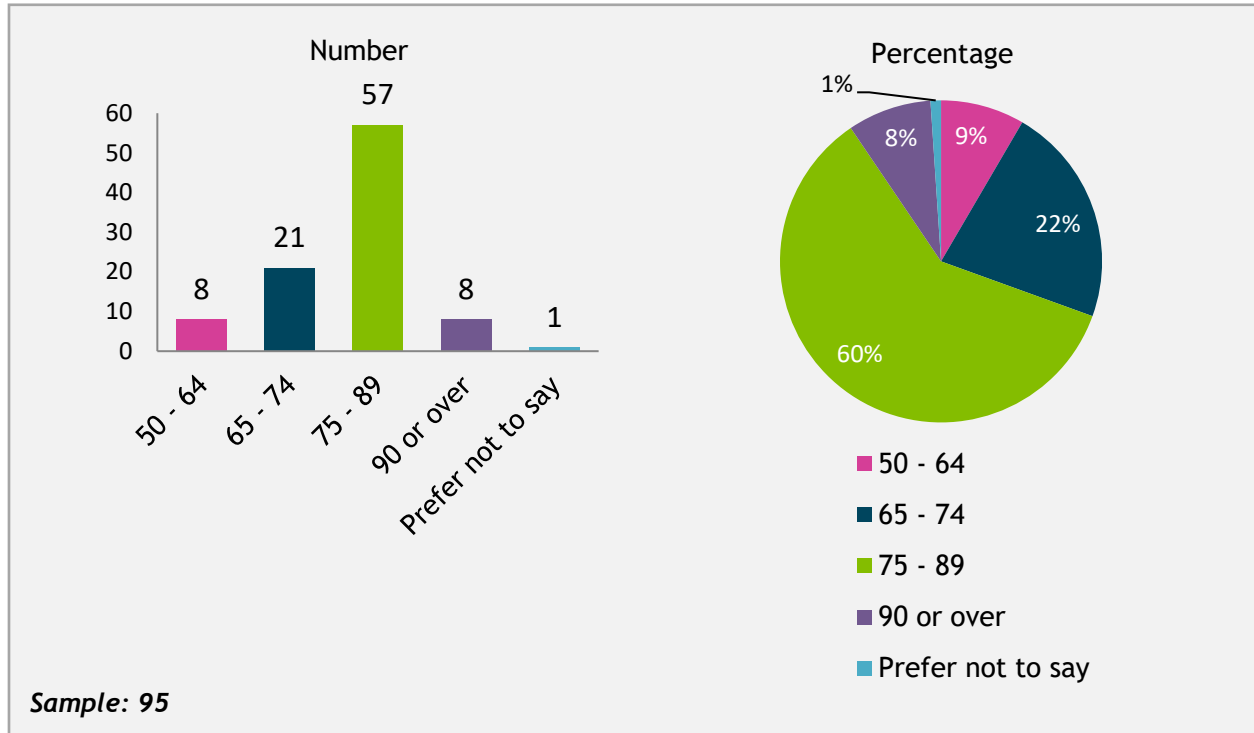
If you have any comments on this report or wish to share your views and experiences, please contact us.

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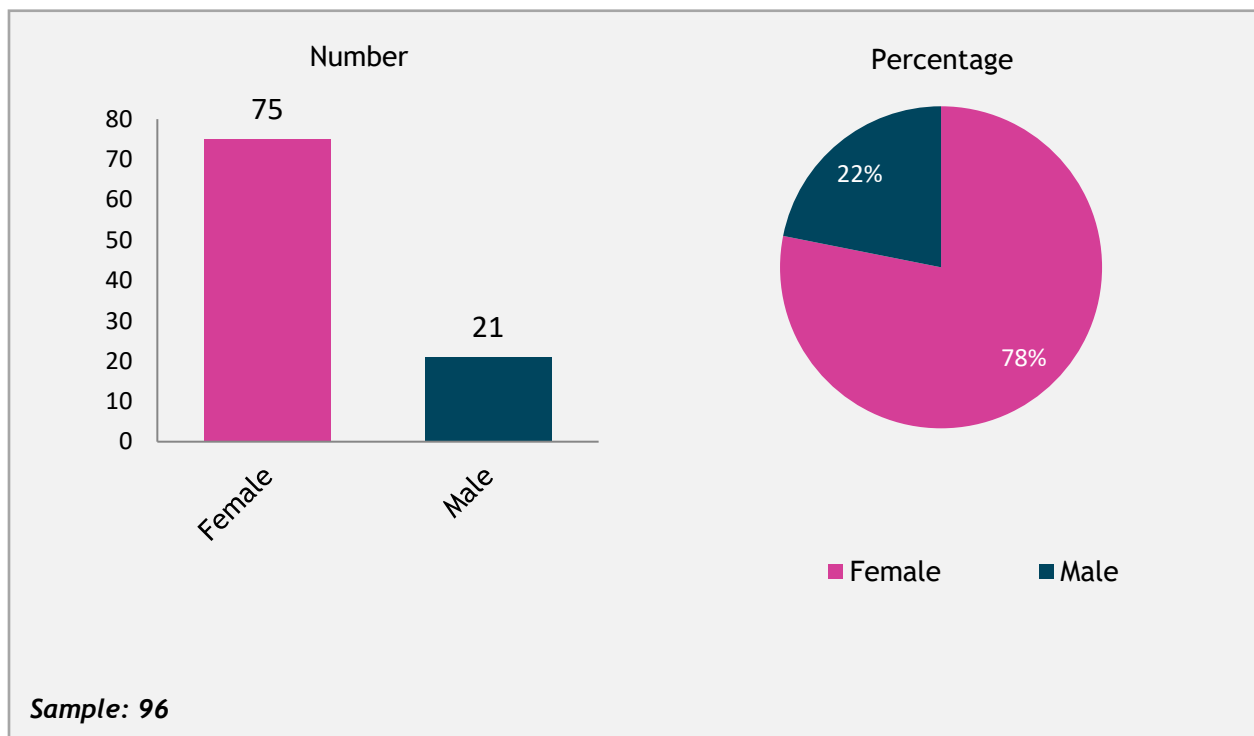
Appendix - Demographics

The demographics of participants are stated as follows:

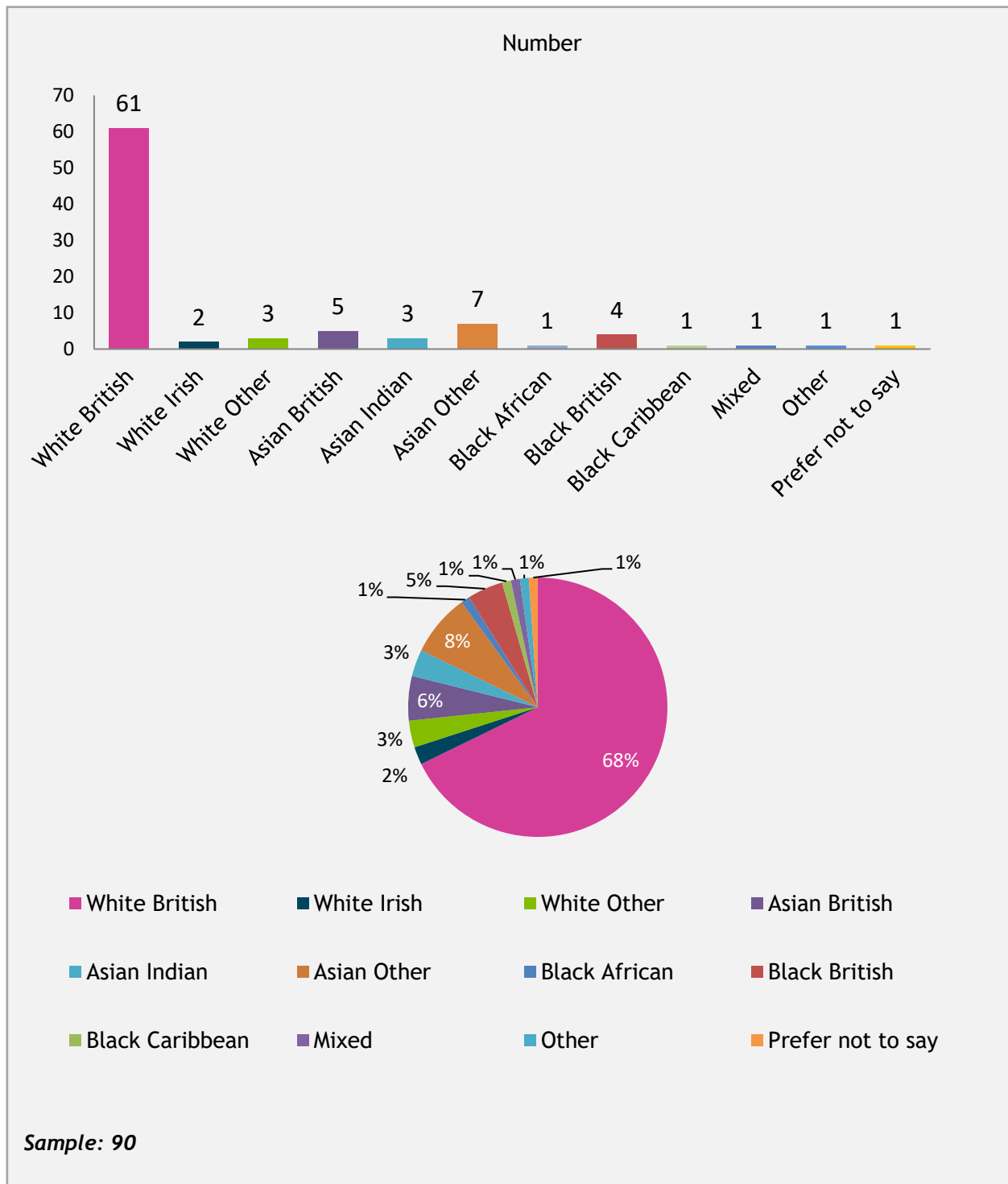
Age



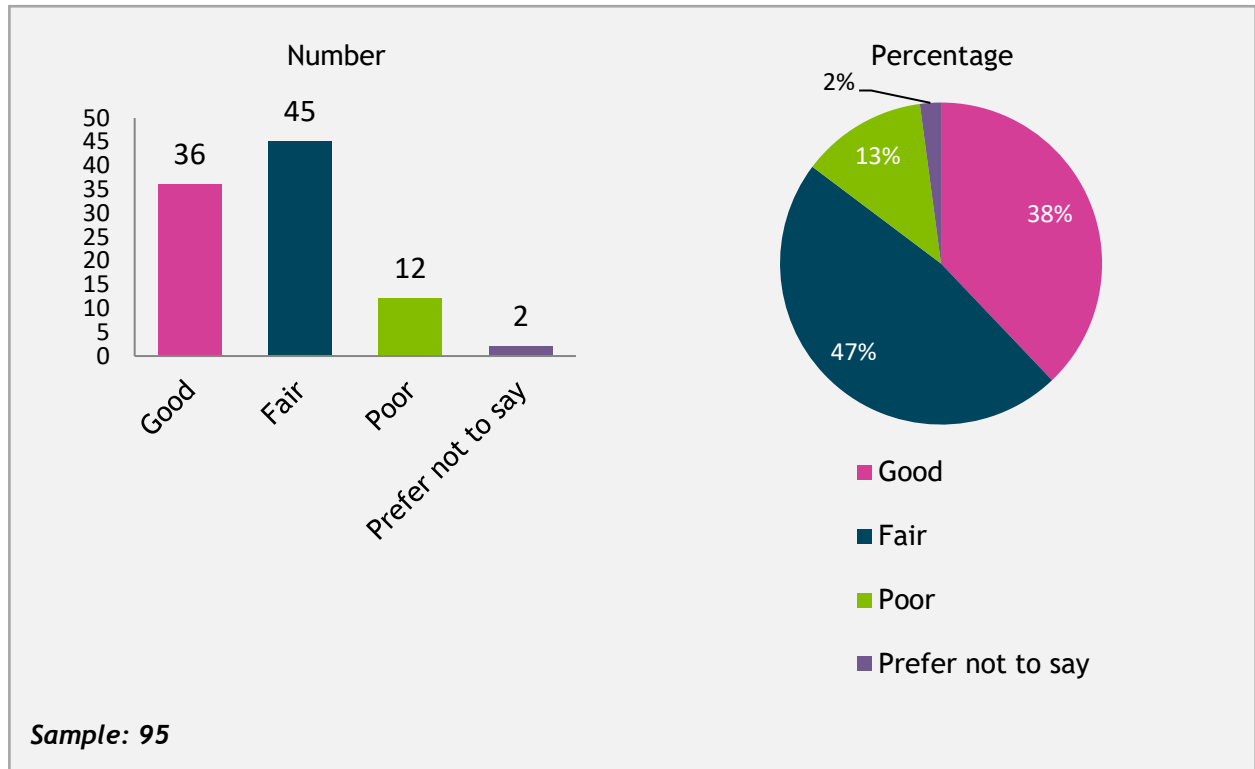
Gender



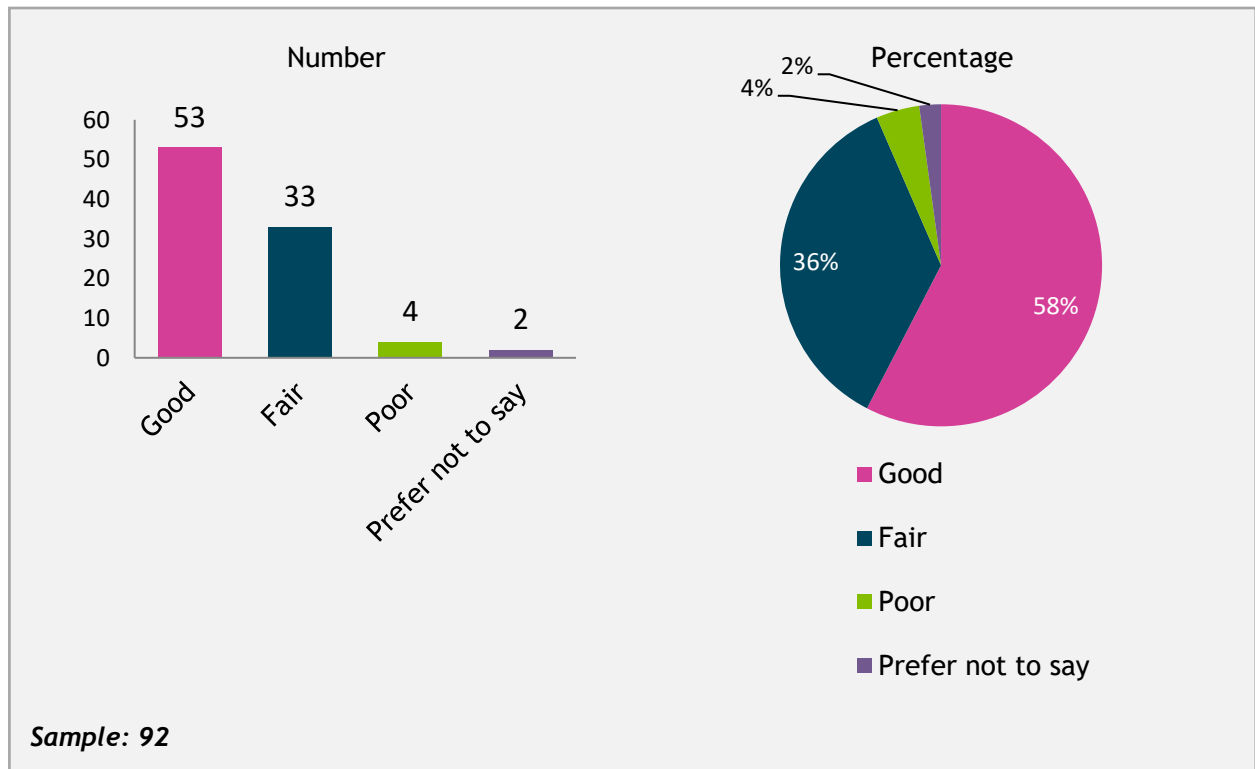
Ethnicity



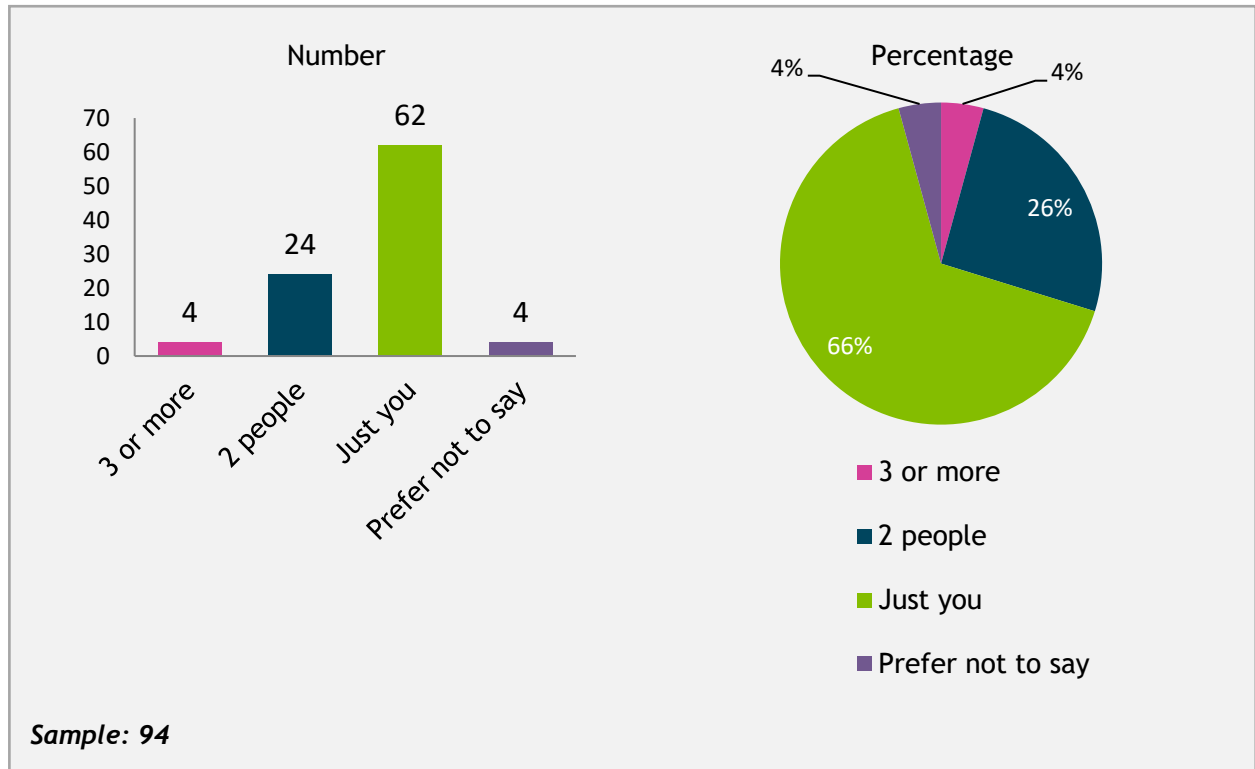
Physical Health



Mental Health



Household



“Talking therapy helped me a lot.

It gave me a different perspective on my situation.”

Local Older Person