

## Ageing Well

### Mental Health (Old Age)

Revised: 01/08/2016

#### Introduction

This chapter focuses on mental health in older people (aged 65+). Maternal mental health, child and adolescent mental health and mental health in adults are in separate sections of the DNA.

There is a common misconception that mental health problems are a normal consequence of getting older but according to the Mental Health Foundation, most old people do not develop mental health problems and continue to make valuable contributions to society.

However, older people are still more vulnerable to mental health problems. Dementia and depression are common among older people as they are more at risk of experiencing events that can impact on mental wellbeing such as bereavement, illness and chronic physical health conditions, separation of a loved one or onset of illness or disability. Older people are more prone to social isolation and financial difficulty which can have an impact on their mental health.

Older people living alone or in residential/nursing care, and those with physical illnesses and/or disabilities, are more at risk.

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#### What do we know?

Depression is the most common mental health issue for older people and prevalence rises with age. Depression affects around 22% of men and 28% of women aged 65 years and over (Health and Social Care Information Centre, (2007).

The Projecting Older People Information System uses Office for National Statistics Population Projections to estimate the number of older people with depression from 2014 to 2030. Depression estimates are based on a study by McDougall et al. Around 2,385 people aged 65 and over living in West Berkshire were estimated to have depression in 2015 with number rising by over 1,000 to 3,519 in 2030.

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<b>Depression - all people</b>	<b>2014</b>	<b>2015</b>	<b>2020</b>	<b>2025</b>	<b>2030</b>
People aged 65-69 predicted to have depression	762	762	723	796	918
People aged 70-74 predicted to have depression	511	553	701	668	741
People aged 75-79 predicted to have depression	414	420	524	668	635
People aged 80-84 predicted to have depression	339	339	396	500	651
People aged 85 and over predicted to have depression	294	311	370	451	576
<b>Total population aged 65 and over predicted to have depression</b>	<b>2,321</b>	<b>2,385</b>	<b>2,715</b>	<b>3,082</b>	<b>3,519</b>

Source: *Projecting Older People Population Information System (POPPI)*,  
Department of Health

Dementia is considered ‘early onset’ when it affects people under 65 years of age. It is also known as ‘young onset’ or ‘working age’ dementia. According to the Alzheimer Society people with dementia whose symptoms started before the age of 65 are described as ‘younger people with dementia’. In the UK, there are an estimated 42,000 younger people with dementia which is about 5% of everyone with dementia.

Although they have similar diagnoses as older people, many younger people with dementia are more likely to be employed, have dependent children, have older parents to care for, have heavy financial commitments (such as a mortgage), be more physically fit and active and have a rarer or genetic form of dementia.

The Projecting Adult Needs and Service Information System uses Office for National Statistics Population Projections to estimate the number of people aged 30-64 with early onset dementia from 2014 to 2030. 43 people aged between 30-64 living in West Berkshire were estimated to have early onset dementia in 2015 with the number rising slightly to 46 in 2030.

	<b>2014</b>	<b>2015</b>	<b>2020</b>	<b>2025</b>	<b>2030</b>
Males aged 30-39 predicted to have early onset dementia	1	1	1	1	1
Males aged 40-49 predicted to have early onset dementia	2	2	2	2	2
Males aged 50-59 predicted to have early onset dementia	13	13	14	14	13
Males aged 60-64 predicted to have early onset dementia	9	9	10	11	11
<b>Total males aged 30-64 predicted to have early onset dementia</b>	<b>25</b>	<b>25</b>	<b>27</b>	<b>28</b>	<b>27</b>
Females aged 30-39 predicted to have early onset dementia	1	1	1	1	1

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Females aged 40-49 predicted to have early onset dementia	3	3	3	3	3
Females aged 50-59 predicted to have early onset dementia	8	8	9	9	9
Females aged 60-64 predicted to have early onset dementia	5	5	6	7	7
<b>Total females aged 30-64 predicted to have early onset dementia</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>19</b>	<b>19</b>

Late onset Dementia is categorized as affecting those aged 65 years and over. Dementia is a term used to describe a range of disorders in the brain that have in common a loss of brain function that is usually progressive and eventually severe. The most common types of dementia are Alzheimer's disease, vascular dementia and dementia with Lewy bodies. Some patients have both vascular dementia and Alzheimer's disease.

Less than half of people with dementia receive a proper diagnosis and the Quality Outcomes Framework (QOF) data significantly under reports the prevalence of the condition. In West Berkshire, the percentage of registered patients diagnosed with dementia on the GP Dementia Register was 0.62%.

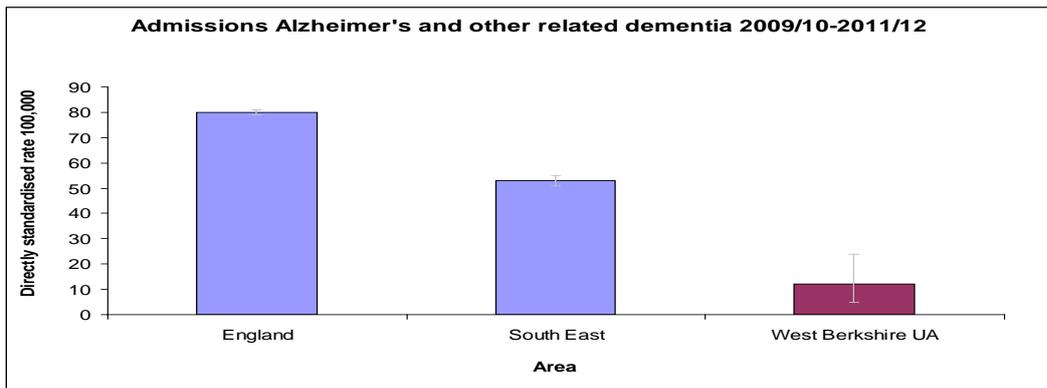
The Projecting Older People Information System uses Office for National Statistics Population Projections to estimate the number of older people with dementia from 2014 to 2030. In 2015, an estimated 1,844 people aged 65 and over living in West Berkshire were estimated to have dementia. This number is expected to rise by 1,400 people to 3,251 in 2030.

<b>Dementia - all people</b>	<b>2014</b>	<b>2015</b>	<b>2020</b>	<b>2025</b>	<b>2030</b>
People aged 65-69 predicted to have dementia	114	114	107	119	136
People aged 70-74 predicted to have dementia	170	183	233	222	247
People aged 75-79 predicted to have dementia	286	291	362	462	439
People aged 80-84 predicted to have dementia	429	429	497	631	819
People aged 85-89 predicted to have dementia	422	439	517	611	811
People aged 90 and over predicted to have dementia	360	388	477	594	801
<b>Total population aged 65 and over predicted to have dementia</b>	<b>1,781</b>	<b>1,844</b>	<b>2,193</b>	<b>2,638</b>	<b>3,251</b>

The data below shows the number of hospital admissions for Alzheimer's and other dementia. The number of people admitted to hospital for Alzheimer's and other dementia in an area will be influenced by the age and gender of the population. These factors are controlled through a process called standardisation and presented

as a rate per 100,000. This data is shown as an average over three years to control for some of the random changes in numbers that occur from one year to the next. These changes occur naturally in the data and are not due to any specific underlying cause (more information on calculation methods can be found in the user guide).

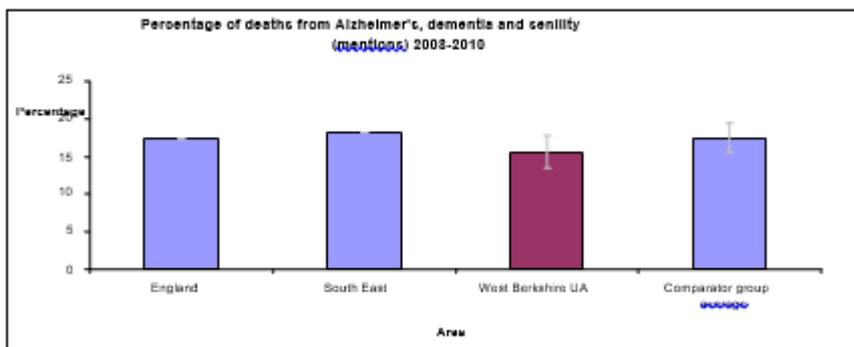
12 people in every 100,000 living in West Berkshire are admitted to hospital with Alzheimer’s and other dementias each year. This figure is below that of England and the South East (Source: Public Health England – Community Mental Health Profiles)



Source: Public Health England – Community Mental Health Profiles

The percentage of deaths from Alzheimer’s, dementia and senility are the number of deaths where the underlying or contributory cause of death is recorded as such on the death certificate of an individual. This data is shown as an average over three years to control for some of the random changes in numbers that occur from one year to the next. These changes occur naturally in the data and are not due to any specific underlying cause (more information on calculation methods can be found in the user guide).

Approximately 15% of deaths in people from West Berkshire had a contributory cause of death as Alzheimer’s, dementia, or senility in 2008-10. This is fewer than the proportions for England and the South East Region as a whole.



Source: Public Health England – End of Life Care Profiles

Social isolation and loneliness has a detrimental affect on health. Regular contact with friends and family has been shown to be beneficial to the mental health of older people. Poverty and mobility problems may impact on the ability to maintain an active social life, and the death of friends or absence of family members living nearby may increase social isolation of older people.

Although feelings of loneliness can affect all age groups, older people are particularly vulnerable to loneliness and social isolation, which can have an impact on their health and wellbeing, and could lead to depression and/or decline in physical health. People can become socially isolated for a range of reasons including; retirement, death of spouses and friends, through illness or disability. Key risk factors for loneliness include; being in late old age (aged 75 and over), on low income, in poor physical or mental health, and living alone or in an isolated rural area or deprived urban communities (LGA, 2016).

According to the Local Government Association (LGA), research has shown that around 10 to 13 per cent of older people feel lonely often or always. As we are living longer lives, it is apparent that more people will report feelings of loneliness.

The Projecting Older People Information System uses Office for National Statistics Population Projections to estimate the number of people aged 65 and over living alone. In West Berkshire, an estimated 9,920 people aged 65 and over lived alone in 2015. This is expected to increase to 15, 306 people in 2030.

	2014	2015	2020	2025	2030
Males aged 65-74 predicted to live alone	1,500	1,540	1,660	1,720	1,940
Males aged 75 and over predicted to live alone	1,734	1,802	2,210	2,788	3,230
Females aged 65-74 predicted to live alone	2,340	2,430	2,640	2,700	3,060
Females aged 75 and over predicted to live alone	4,087	4,148	4,941	6,222	7,076
Total population aged 65-74 predicted to live alone	3,840	3,970	4,300	4,420	5,000
Total population aged 75 and over predicted to live alone	5,821	5,950	7,151	9,010	10,306

Source: Projecting Older People Population Information System, Department of Health

According to the 2011 Census, 6,820 people aged 65 and over living in West Berkshire are living alone.

The annual Personal Social Services Adult Social Care Survey (ASCS) asks adult social care service users the following question, “Thinking about how much contact you’ve had with people you like, which of the following statements best describes your social situation?” This is a multiple choice response question with four categories. The results are shown as a percentage of all respondents aged 65 and over. In 2014/15, 45% of respondents from West Berkshire felt that they had as much social contact as they would like.

Caring responsibilities: Many older people have caring responsibilities either for a partner, an adult relative or grandchildren. Caring for someone with a physical or

mental health problem can be stressful and impact the mental health and wellbeing of the care giver. It is estimated that 1.5 million people care for someone with a mental health problem and that a third of carers will experience depression at some stage. The mental health of carers is essential for maintaining older people in the community for as long as possible. According to the 2011 Census, in West Berkshire, there are around 3,111 unpaid carers who are aged 65 years and over. More information about unpaid carers can be found in the Carers chapter.

### **What is the data telling us?**

West Berkshire has an increasing ageing population and some of the data has shown that some older people are socially isolated and would like more contact with people (figure 3). A substantial number of older people aged 65+ also live alone which also hinders the amount of social contact they have (Table 4). Hospital admissions for Alzheimer's and other related dementia are low in West Berkshire but around 15% of deaths in West Berkshire are due to Alzheimer's, dementia and senility.

Generally, it is important to recognise that, among older people there are inequalities in terms of deprivation, health outcomes, life expectancy and general health. Older people who live in poverty will be less likely to follow a healthy diet and participate in social activities. Consequently having poorer health outcomes.

Older people living in rural areas will be more likely to be socially excluded due to social isolation, loneliness, exclusion from services and fear of crime. This could be due to access issues and lack of public transport availability.

Research by the Social Care Institute of Excellence (2006) has shown that older people are often reluctant to seek help for mental health problems. In addition, depression in older people is often under diagnosed and under treated. Older people living in residential and nursing homes are more likely to experience depression than older people in the community.

### **Recommendations for consideration**

- Support organisations that promote good mental health and well-being among older people.
- Encourage and support older people to take advantage of and participate in meaningful activity, social activity and physical activity. Identify risk groups in the older population where this might not be possible.
- Provide information, advice and support to older people to claim the benefits they are entitled to.
- Ensure that health promotion programmes include older people.
- Improve the early diagnosis of dementia.

- Ensure that younger people with dementia have access to dedicated age-appropriate services that are able to meet their specific needs
- Provide support for carers.
- Follow recommendations on older people's views on what is important to healthy ageing.

### **Other services and partner organisations**

People with a mental health problem can seek advice and support from their General Practitioner/ Primary Care.

#### [Talking Therapies](#)

People can self refer or be referred to Talking therapies by their GP. Talking therapies provides support for people experiencing anxiety, stress, depression, obsessive compulsive disorder and phobias. They provide self help resources, face to face Cognitive Behavior Therapy, counselling, interpersonal therapy and wellbeing groups. Talking therapies can be contacted on 0300 365 2000 or [talkingtherapies@berkshire.nhs.uk](mailto:talkingtherapies@berkshire.nhs.uk)

#### [Community Mental Health Team](#)

The Community Mental Health Team (CMHT) provides secondary mental health care for people with mental illness who are aged under 75.

#### [Older People's Mental Health Service](#)

The Older People's Mental Health Service (OPMHS) provides secondary mental health care for adults over the age of 75. They provide mental health assessments and ongoing care for people with dementia or other mental health conditions such as depression, psychosis and severe anxiety.

#### [Memory Service](#)

The Memory Clinic can help anyone who feels they have memory problems. People can ask their GP for a referral to the Memory Clinic who will provide an assessment of your memory skills if you think you might have dementia.

### **National and local strategies**

#### [Department of Health \(2013\), Improving care for people with dementia](#)

#### [The Dementia Challenge \(2012\)](#)

#### [Living Well with Dementia: a national strategy \(2009\)](#)

This strategy, developed by the Department of Health, provides a guide to services for dementia.

[The Five Year Forward View for Mental Health for the NHS in England \(2016\)](#)

**Other chapters you might be interested in**

Mental health

Adults with a learning disability

Adults with learning disabilities in employment

Adults with Autism

If you have any questions about this chapter, please contact Public Health and Wellbeing Team on [publichealthandwellbeing@westberks.gov.uk](mailto:publichealthandwellbeing@westberks.gov.uk) or 01635 503437