

CHILDREN AND YOUNG PEOPLE IN NORFOLK - MENTAL HEALTH



Norfolk County Council



15,000

CHILDREN AGED 5 - 17 WERE ESTIMATED TO BE LIVING WITH MENTAL HEALTH DISORDERS IN NORFOLK (2017/2018)

4,155

NEW REGISTRATIONS TO MENTAL HEALTH APP KOOOTH IN NORFOLK AND WAVENEY (2021-2022)



10.4% INCREASE IN KOOOTH REGISTRATIONS FROM PREVIOUS YEAR IN NORFOLK AND WAVENEY

5.9%

OF NEW KOOOTH USERS IN NORFOLK AND WAVENEY WERE AN ETHNIC MINORITY

NEW USERS WERE MOST LIKELY TO HAVE HEARD OF KOOOTH FROM THEIR SCHOOL, A TEACHER, OR THEIR GP



69% OF NEW USERS WERE FEMALE

21% OF NEW USERS WERE MALE



5.8% OF NEW USERS WERE GENDER FLUID



3.3% OF NEW USES WERE AGENDER

16.8%

OF NEW KOOOTH USERS IN NORFOLK AND WAVENEY WERE AGED 14 YEARS OLD

ANXIETY/STRESS, SELF-HARM, AND SUICIDAL THOUGHTS WERE THE TOP THREE REPORTED ISSUES BY KOOOTH USERS IN NORFOLK AND WAVENEY



90 PER 100,000 HOSPITAL ADMISSION RATE FOR MENTAL HEALTH CONDITIONS IN UNDER 18S IN NORFOLK (2020/21)

451 PER 100,000 HOSPITAL ADMISSION RATE FOR SELF-HARM IN 10 TO 24 YEAR OLDS IN NORFOLK (2020/21)



15-19 YEAR OLDS

HAD THE HIGHEST HOSPITAL ADMISSION RATES FOR SELF-HARM IN NORFOLK IN 2020/21



62.9 PER 100,000 HOSPITAL ADMISSION RATE DUE TO SUBSTANCE MISUSE IN 15-24 YEAR OLDS

5,000

CHILDREN ARE ESTIMATED TO BE LIVING WITH PARENTS WHO ARE DEPENDENT ON ALCOHOL OR OPIATES IN NORFOLK (2021)

1,500

CHILDREN IN NORFOLK ARE THOUGHT TO BE LIVING WITH ADULTS RECEIVING TREATMENT FOR SUBSTANCE MISUSE (2021)

Contents

1. Introduction.....	3
1.1 Purpose of This Publication	3
1.2 Statement on Data.....	3
2. Mental Health Presentations in Norfolk	4
3. Hospital Admissions for Mental Health Conditions	10
4. Self-Harm.....	11
5. Substance Misuse.....	15
5.1 Children and Young People	15
5.2 Parental Substance Misuse	16
6. References, Further Resources and Acknowledgements	17

1. Introduction

1.1 Purpose of This Publication

This document and the subsequent instalments to this series of data packs produced by the Norfolk Office of Data and Analytics (NODA) are designed to centralise multiple sources of information relating to the topics featured in the pack. The purpose of this compilation of data is to provide a statement of evidence and offer insight and context to multiple aspects of the lives of children, young people, and their families in Norfolk. We have not used the data to make recommendations as this is outside the scope of this particular piece of work. Instead, this data pack is intended to provide our partners and the public with a sound evidence base from which to have these conversations.

1.2 Statement on Data

The data presented in this document has been compiled from a variety of publicly available sources including, but not limited to Public Health England, the NHS and existing Norfolk County Council publications. References to the original sources of data are made throughout the document to corroborate the information provided and signpost to the data's origin for future use by the reader, if desired.

Wherever possible, the most recent data has been included to give the most up to date picture of each of the topics covered. It should be noted that there are often differences in how frequently various data sources and indicators are refreshed or updated. As a result, some indicators and data sources may be more current than others. Furthermore, in order to ensure the veracity of data released to the public there is often a delay between data collection and data publication while all necessary verifications take place. This in turn results in lags in data publication.

In terms of comparator data, most sources included in this briefing compare figures for Norfolk with figures for all of England. Wherever possible, data has been provided at district level to shed light on differences within the county, however, it should be noted that not all data is available to the same degree of granularity meaning that some data is available only at county level, others at district.

2. Mental Health Presentations in Norfolk

The Office for Health Improvement and Disparities (OHID) approximate that half of all lifetime mental health problems start by the mid-teens, and three quarters by the mid-20s, with treatment not beginning until several years later. The latest [Mental Health of Children and Young People in England](#) survey conducted in 2017 indicated that 12.5% of those aged 5–19 living in England had at least one mental health disorder upon assessment. 5% of those aged 5-19 reportedly met the criteria for 2 or more mental disorders. The prevalence of mental health disorders in children aged 5 -15 in England reportedly also rose from 9.7% in 1999 to 11.2% in 2017.

According to the NHS Mental Health of Children and Young People survey, in 2017/18 there were around an estimated 15,000 children and young people aged between 5 and 17 living in Norfolk with mental health disorders. This included emotional disorders, behavioural disorders, hyperactivity disorders, autism spectrum, eating and other less common disorders.

[Kooth](#) is a digital [mental health service](#) and provides free and confidential support to users through online one-to-one counselling, discussion boards and signposting to articles and other support resources. User registration data can provide a more recent snapshot of how various mental health conditions may be presenting among children and young people in Norfolk and Waveney.

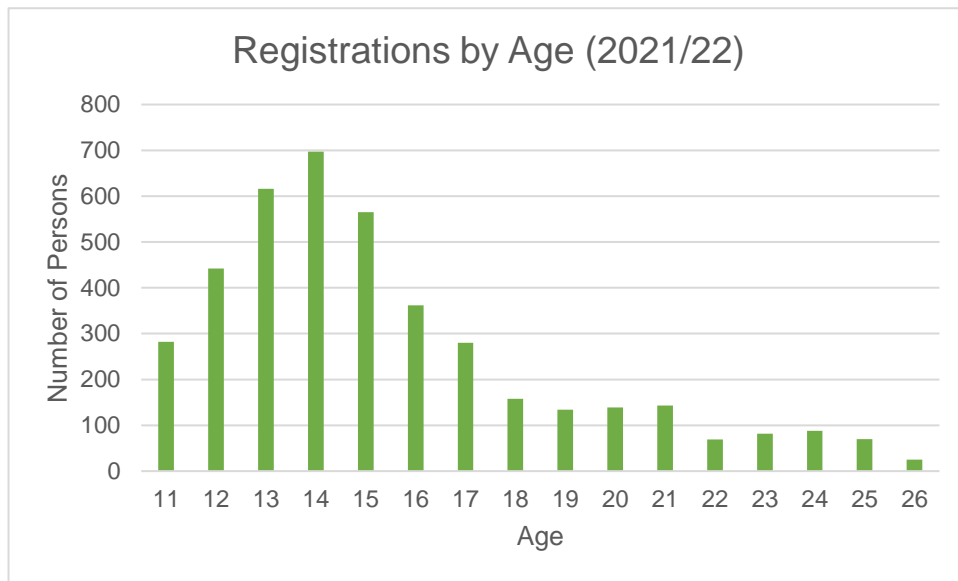
In the last financial year (2021/22) there were 4,155 new registrations to Kooth in Norfolk and Waveney. This reflects an additional 392 registrations from the previous financial year (2020/21) or an increase of around 10.4%.

New users were most likely to hear about Kooth and their services from their school, a teacher, or their GP.

In terms of the gender of these newly registered users, 2,867 (69%) identified themselves as Female, 910 (21.9%) identified themselves as Male, 241 (5.8%) identified themselves as Gender Fluid, and 137 (3.3%) identified as Agender.

In terms of age, figure 1 depicts the number of new registrations by age in the last financial year:

Figure 1: New Kooth Users by Age



Source: Kooth, User Registration Data, Norfolk and Waveney

The most common age for new registrations in Norfolk and Waveney was 14 years, reflecting 16.8% of all new users from the area for that year.

In terms of the ethnicity of these new registered users, 3,761 (90.5%) identified as White (includes British, Irish and White of any other background).

121 new users (2.9%) identified as Mixed (includes White and Asian, White and Black African, White and Black Caribbean, and any other mixed background).

69 (1.7%) new users identified as Asian/Asian British (includes Bangladeshi, Indian, Pakistani, Chinese and Asian of any other background).

31 (0.7%) new users identified as Black or Black British (includes Black African, Black Caribbean and Black of any other background).

146 (3.5%) of newly registered users did not state their ethnicity.

Figure 2 shows the top ten locations in Norfolk and Waveney for new Kooth registrations. The highest counts of new registrations in 2021/22 were observed in Norwich, Great Yarmouth and King's Lynn.

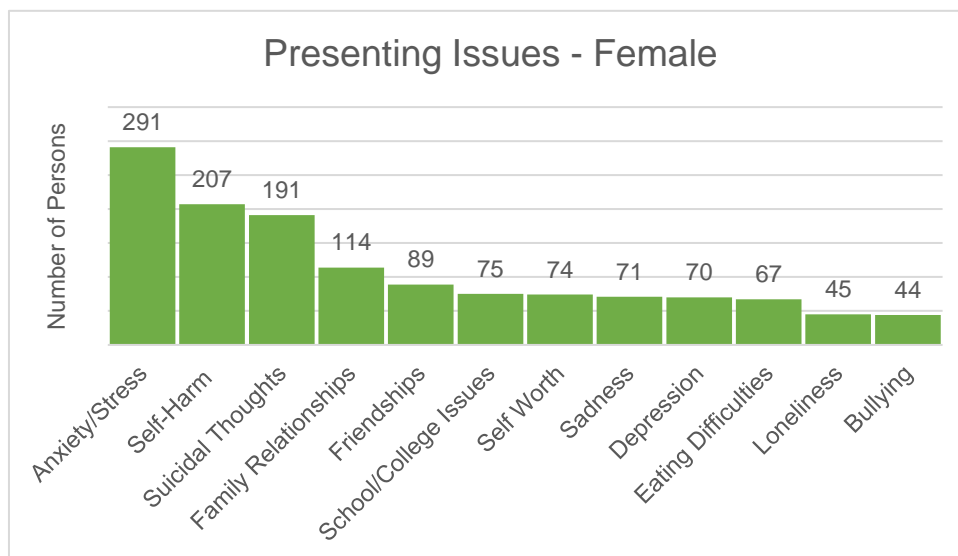
Figure 2: New Kooth Registrations by Location

Area	New Registrations
Norwich	1,653
Great Yarmouth	434
King's Lynn	393
Swaffham	217
Thetford	153
Dereham	150
Diss	121
North Walsham	118
Attleborough	97
Beccles	89

Source: Kooth, User Registration Data, Norfolk and Waveney

In terms of the most commonly presented issues, figures 3 through 6 outline the most commonly occurring presenting issues as reported by service users during a chat session or message. These presenting issues are listed by gender identity:

Figure 3: Most Common Presenting Issues – Female

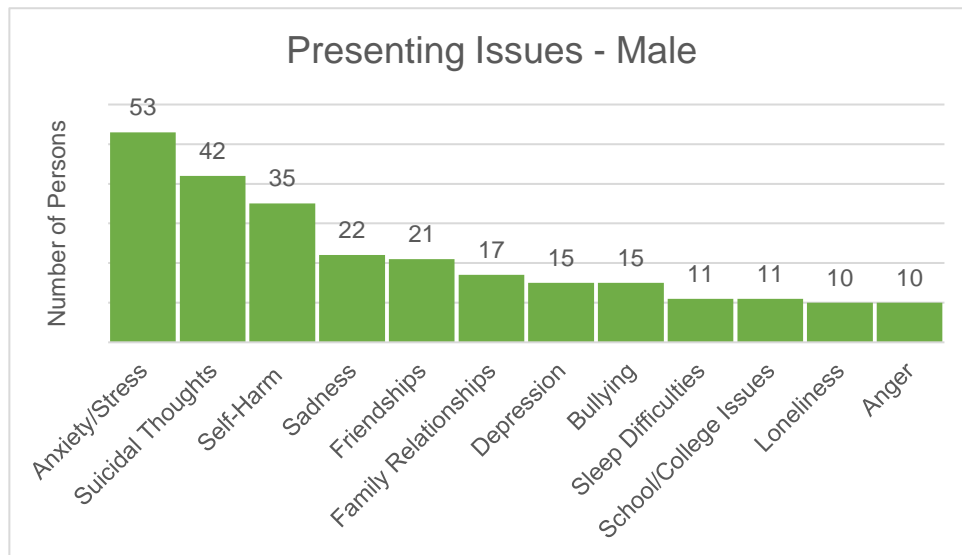


Source: Kooth, User Registration Data, Norfolk and Waveney

27.7% of the presenting issues reported by Female users were anxiety/stress. This was closely followed by self-harm which represented 15.5% of reported issues. The third most commonly reported issue was suicidal thoughts (14.3%).

Regarding presenting issues in Males, anxiety/stress reflected 20.2% of reported issues, followed by suicidal thoughts (16%) and self-harm (13.4%).

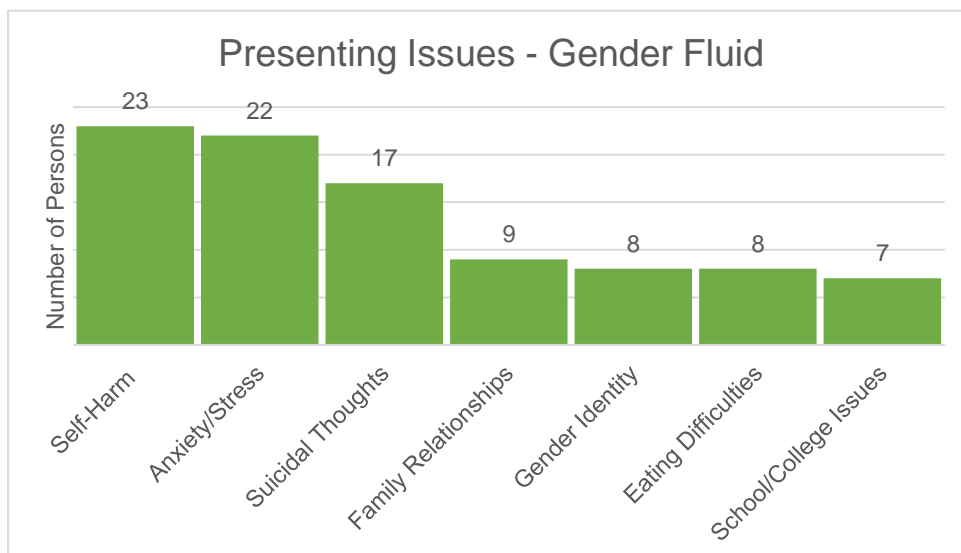
Figure 4: Most Common Presenting Issues – Male



Source: Kooth, User Registration Data, Norfolk and Waveney

For Gender Fluid users, self-harm was the most common presenting issue representing 24.5% of all presenting issues for this group. This was closely followed by anxiety/stress (23.4%) and suicidal thoughts (18.1%).

Figure 5: Most Common Presenting Issues – Gender Fluid

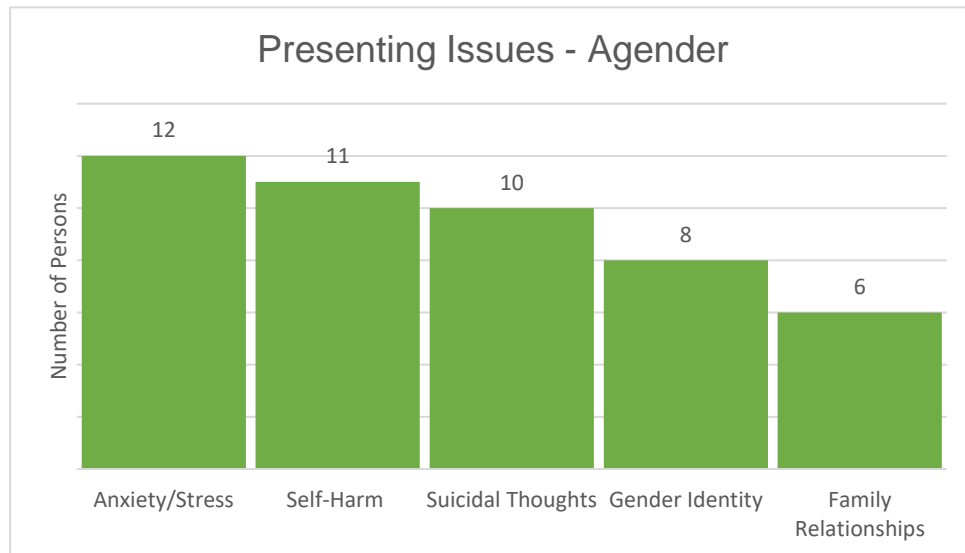


Source: Kooth, User Registration Data, Norfolk and Waveney

Regarding Agender users, over a quarter (25.4%) reported anxiety/stress as their primary presenting issue. A similar proportion (23.4%) reported theirs as self-harm.

Suicidal thoughts represented over a fifth (21.3%) of presenting issues in agender users.

Figure 6: Most Common Presenting Issues – Agender



Source: Kooth, User Registration Data, Norfolk and Waveney

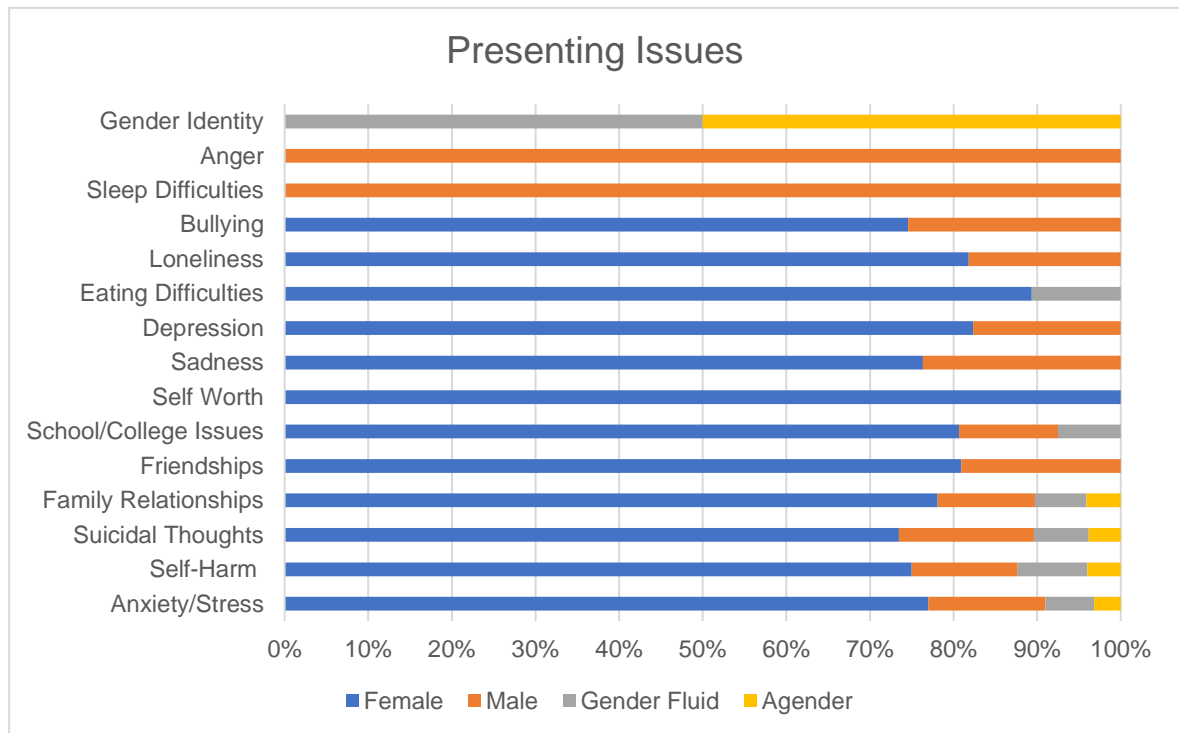
Gender identity appeared to be a unique presenting issue among Gender Fluid and Agender users, reflecting 8.5% of presenting issues among Gender Fluid users and 17% among new Agender users.

Regardless of gender identity anxiety/stress, self-harm, and suicidal thoughts were the top three most common presenting issues reported by service users in Norfolk and Waveney. For further information on Self-Harm in Norfolk see section 4.

Figure 7 provides a breakdown of these presenting issues by gender. Female users generally outnumbered those of other gender identities in most categories – however this may be attributed to the fact that the number of users identifying as Female significantly outnumbers those of other gender identities.

Anger and Sleep Difficulties appeared to be presenting issues that were unique to Male service users. Similarly, issues relating to self-worth appeared to be a unique presenting issue among users identifying as Female.

Figure 7: Presenting Issues (Overview)



Source: Kooth, User Registration Data, Norfolk and Waveney

It should be acknowledged that this data is purely a snapshot of some of the mental health issues faced by a small selection of young people in Norfolk and Waveney, and while useful for gaining insight into which groups may be experiencing which issues, it may not be wholly representative of all young people in Norfolk and Waveney.

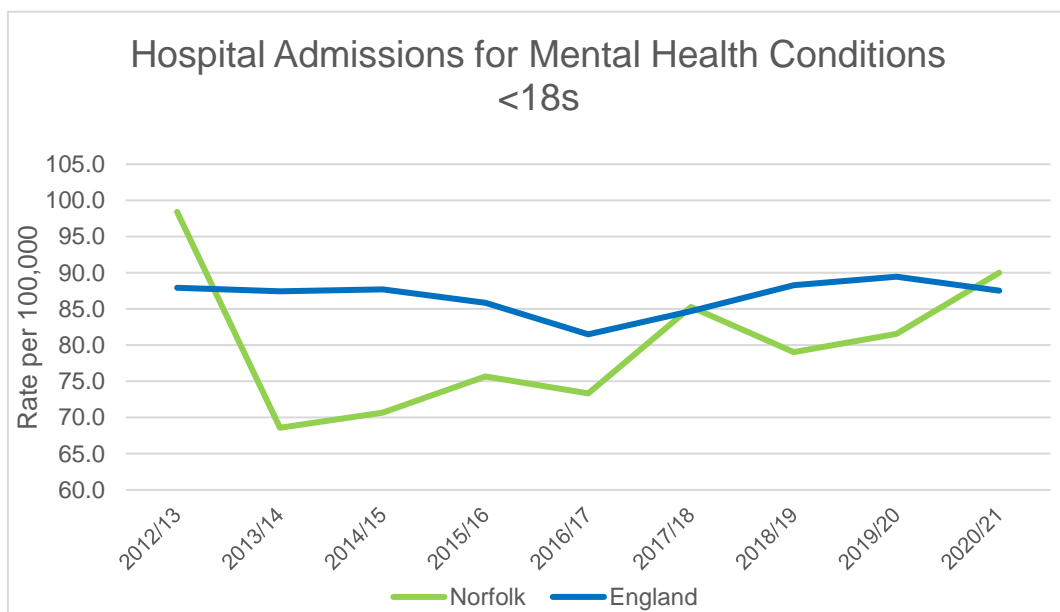
3. Hospital Admissions for Mental Health Conditions

According to OHID, one in ten children aged 5-16 years has a clinically diagnosable mental health problem and, of adults with long-term mental health problems, half will have experienced their first symptoms before the age of 14. Self-harming and substance abuse are known to be much more common in children and young people with mental health disorders with 10% of 15–16-year-olds having self-harmed. Failure to address mental health conditions in children can have a devastating impact on their future outcomes.

Data sourced from Hospital Episode Statistics (HES) details the rate of inpatient hospital admissions in Norfolk due to mental health conditions. In this instance mental health conditions includes mental and behavioural disorders due to psychoactive substance use, schizophrenia, schizotypal and delusional disorders, mood disorders, neurotic, stress-related and somatoform disorders, behavioural syndromes associated with physiological disturbances and physical factors, disorders of psychological development and unspecified mental disorder.

Figure 8 depicts the rate of hospital admissions for mental health conditions in individuals aged 0-17 years of age in Norfolk between 2012/13 and 2020/2021. It should be acknowledged that these rates refer to admission **episodes** as opposed to persons. Rates are given per 100,000.

Figure 8: Hospital Admissions for Mental Health Conditions in under 18s



Source: Hospital Episode Statistics (HES)

Since 2013/14 the rate of hospital admissions for mental health conditions in individuals aged between 0-17 years of age has steadily increased. As of 2020/21, the admission rate for mental health conditions was 90 per 100,000. This is marginally higher than the rate for England as a whole which for the same time period was 87.5 per 100,000.

It should be noted that between 2020-2021 there was a general decrease in hospital activity and admissions due to the Covid-19 pandemic. This may in turn have an influence on admission rates.

4. Self-Harm

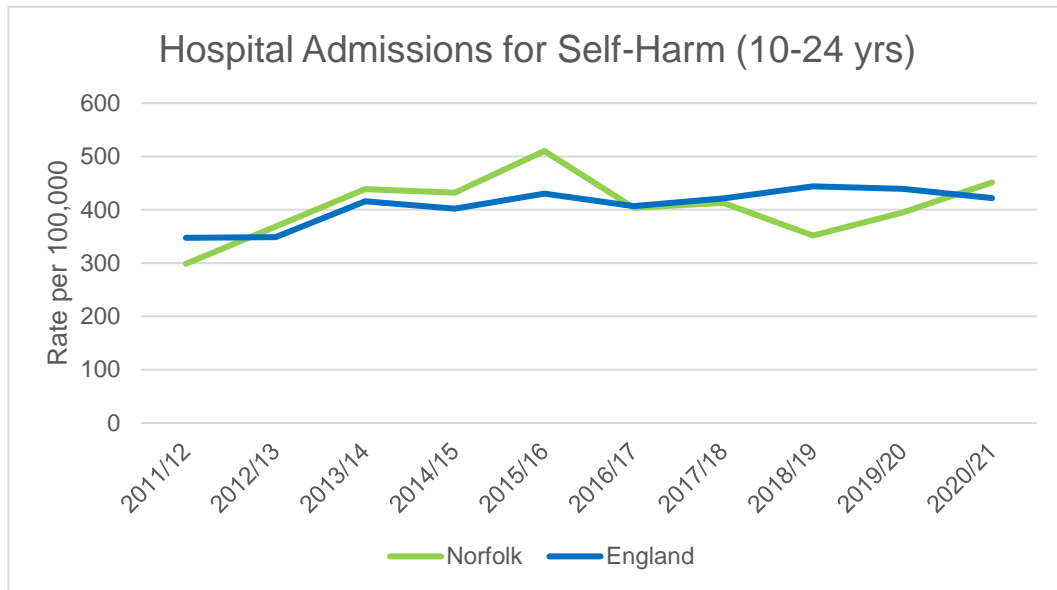
[The Mental Health Foundation](#) defines self-harm as injuring oneself intentionally, often as a way of coping with stressful or upsetting situations, or to express uncomfortable feelings such as sadness, guilt and hopelessness. Self-harm can manifest itself in a variety of ways including, cutting, burning or scratching of the skin but can also present itself as drug and alcohol abuse, undereating, overexercising, or risky behaviour.

According to OHID, hospital admissions for self-harm in children have increased in recent years, with admissions for young women being much higher than admissions for young men. With links to other mental health conditions such as depression, the emotional causes of self-harm may require psychological assessment and treatment.

Figure 8 outlines the trend in the rate of admission episodes in children and young people aged between 10 and 24 years where the main recorded cause is intentional self-harm. Data refers to episodes of admission and not persons and covers the period of 2011/12 through 2020/21. It should also be acknowledged that these statistics do not include admissions to Accident and Emergency (A&E). As previously stated, between 2020-2021 there was a general decrease in hospital activity and admissions due to the Covid-19 pandemic. This may in turn have an influence on admission rates.

In 2020/21, the rate of hospital admissions for self-harm in 10-24 year olds in Norfolk was approximately 451 per 100,000. This is marginally higher than the rate for the whole of England which was around 422 per 100,000. It should be noted that although this rate is not as high as it has been historically (510 per 100,000 in 2015/16), the rates of hospital admission for self-harm have steadily increased for the past 3 years for this age group.

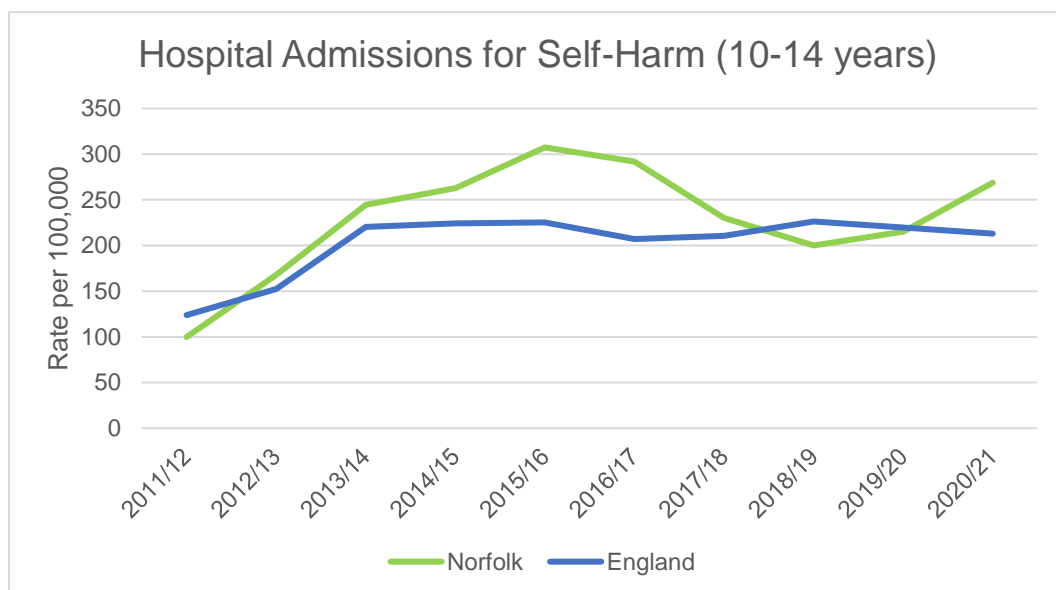
Figure 9: Hospital Admissions for Self-Harm (10 – 24yrs)



Source: Hospital Episode Statistics (HES)

Figures 10 through 12 provide a breakdown of rates of admission by the following age groups: 10-14 years, 15-19 years, and 20-24 years, respectively. Among these, the age group with the highest prevalence of hospitalisations for self-harm was 15 to 19-year-olds.

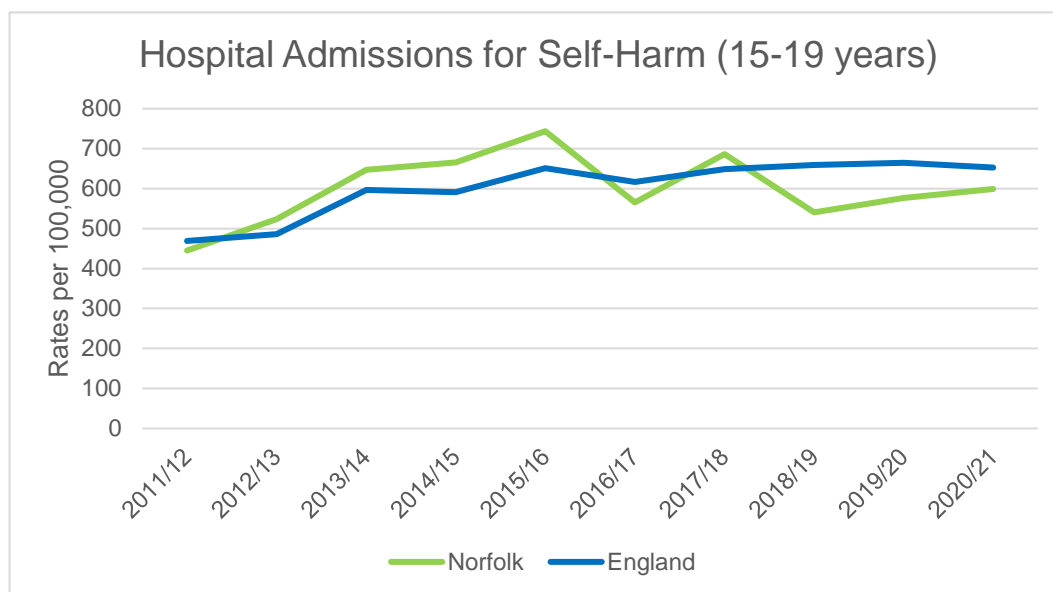
Figure 10: Hospital Admissions for Self-Harm (10 – 14yrs)



Source: Hospital Episode Statistics (HES)

As of 2020/21 the rate for hospital admissions for self-harm among individuals aged 10 to 14 in Norfolk was approximately 269 per 100,000. In contrast, the rate for the whole of England for the same period stood at 213 per 100,000. The rate for hospital admissions for self-harm among this age group in Norfolk would appear to be more variable when compared to the whole of England. Since 2011/12 the rate of hospital admissions for self-harm for 10 to 14 year olds in Norfolk increased from 99.8 per 100,000 to 269 per 100,000 in 2020/21, peaking in 2015/16 at approximately 307 per 100,000 before gradually declining. However, since 2018/19 rates in Norfolk have gradually increased whereas the rate for the whole of England has largely remained relatively consistent since 2013/14 by comparison. See figure 10.

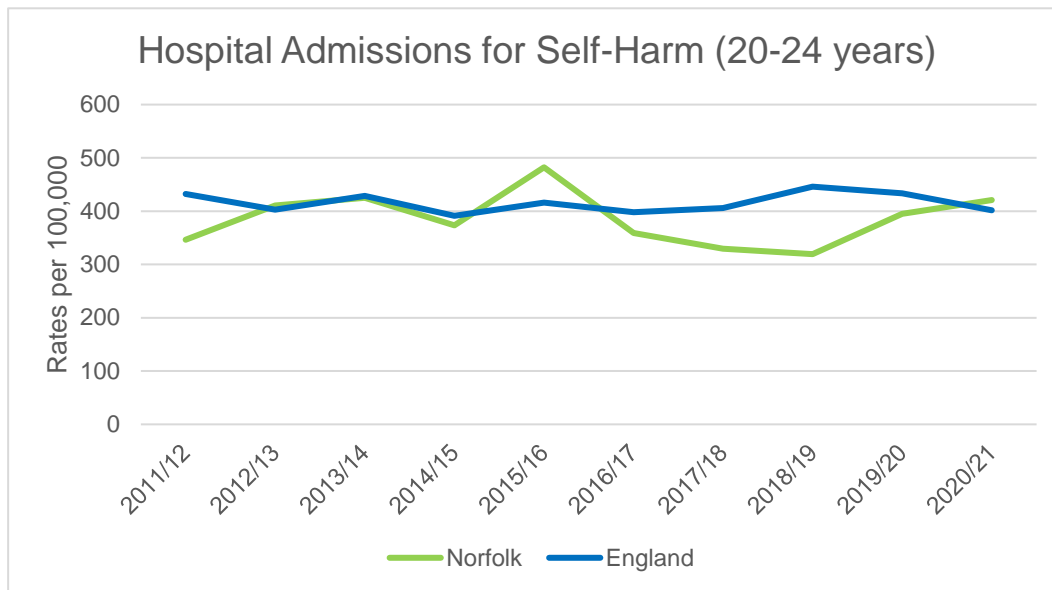
Figure 11: Hospital Admissions for Self-Harm (15-19 years)



Source: Hospital Episode Statistics (HES)

For those aged between 15 and 19 in Norfolk, the rate of hospital admissions for self-harm as of 2020/21 stood at approximately 599 per 100,000. This is marginally lower than the rate for the same age group across the whole of England which stood at approximately 653 per 100,000. As with other age groups, a gradual increase in admissions rates for this age group can also be observed from 2018/19 onwards.

Figure 12: Hospital Admissions for Self-Harm (20-24 years)



Source: Hospital Episode Statistics (HES)

As for people aged 20-24 living in Norfolk, the rate of hospital admissions for self-harm stood at approximately 421 per 100,000. This is slightly above the rate for the whole of England which for the same period stood at approximately 402 per 100,000. While the most recent rate of admission was not as high as it has been historically (482 per 100,000 in 2015/16), as with other age groups the rate of admission has been increasing year on year since 2018/19.

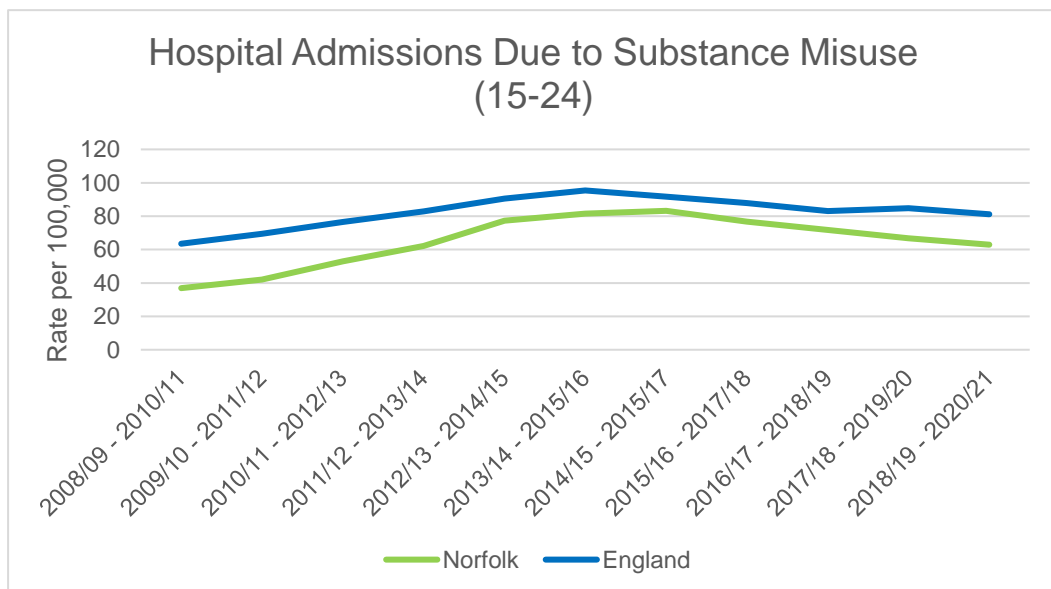
5. Substance Misuse

OHID suggests that there is evidence that young people who use recreational drugs run the risk of damage to mental health including suicide, depression and disruptive behaviour disorders. Regular use of cannabis or other drugs may also lead to dependence. Among 10 to 15 year olds, an increased likelihood of drug use is linked to a range of adverse experiences and behaviour, including truancy, exclusion from school, homelessness, time in care, and serious or frequent offending.

5.1 Children and Young People

Figure 13 depicts the rate of hospital admissions for substance misuse in individuals aged between 15 and 24 years of age in Norfolk. Statistics include admissions where the primary diagnosis is mental and behavioural disorders due to use of opioids, cannabinoids, sedatives, cocaine, stimulants and solvents. Data refers to episodes of admission and not persons.

Figure 13: Hospital Admissions for Substance Misuse (15-24 years)



Source: Hospital Episode Statistics (HES)

The rate of hospital admission for substance misuse between 15 and 24 years olds in Norfolk was approximately 63 per 100,000 for the period 2018/19 to 2020/21. This is below the rate for the whole of England for the same timer period (approximately 81 per 100,00).

5.2 Parental Substance Misuse

According to the [NSPCC](#), parental substance misuse is the long-term misuse of drugs and/or alcohol by a parent or carer. This includes parents and carers who consume harmful amounts of alcohol, are dependent on alcohol, use drugs regularly and excessively or are dependent on drugs. It also includes parents who aren't able to supervise their children appropriately because of their substance use.

In January 2021, Norfolk County Council produced a [Joint Strategic Needs Assessment \(JSNA\) briefing](#) on parental substance abuse in Norfolk. It was reported that in total there were an estimated 5000 children in Norfolk living with parents who are dependent on alcohol or opiates, according to Public Health England. Of these, 1500 children in Norfolk were thought to be living with adults that are receiving substance misuse treatment, therefore suggesting that around a third of parents with substance abuse issues are receiving treatment.

6. References, Further Resources and Acknowledgements

References and Information:

[NHS Digital](#), Mental Health of Children and Young People in England (2017), Accessed October 2022

[Norfolk County Council](#), Parental Substance Misuse, JSNA Briefing

[NSPCC](#), Parental Substance Misuse, Accessed October 2022

Office for Health Improvement & Disparities. Public Mental Health Dashboard <https://khub.net/group/phe-local-knowledge-and-intelligence-services/group-wiki/-/wiki/Main/Public+Mental+Health+dashboard> © Crown copyright 2022

Office for Health Improvement & Disparities. Public Health Profiles. Accessed October 2022. <https://fingertips.phe.org.uk> © Crown copyright 2022

[The Mental Health Foundation](#), A-Z of Topics, Accessed October 2022

Further briefings and publications released by Norfolk County Council can be accessed [here](#).

NODA would like to thank Kooth for providing the local registrations data included in this pack and would also like to thank Norfolk County Council Children's Services for their help in verifying the data featured in this pack.

Norfolk's Children and Young People's Strategic Alliance, which is made up of representatives from Children's Services, health, police, education, family groups and the voluntary sector, has signed up to the vision, that every child and young person in our county should FLOURISH. They believe that everyone in our county has a role to play in making Norfolk the very best place to grow up.



Contact Details:

[Sophie Bitten](#) – Information Assistant, NODA

[Eliska Cheeseman](#) – Head of NODA