

Chapter One: Environmental Factors

Summary

The conditions in which we 'are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life' are central to our mental health (1). The following chapter describes how these factors are important to mental health and summarises their national and local picture.

The table below gives an overview of key measures across each sub-section of this chapter, by comparing local data to the latest national averages. Green circles indicate where scores are better than the national average, orange where they are statistically similar, and red when they are worse than average.

Table 1: Summary of local environmental factors, compared to the national averages. Green indicates scores are better, orange that are similar, and red that are worse, than the national average. Data sources can be found [here](#).

	Indicator	Period	England	Peterborough	Cambridgeshire	Cambridgeshire districts				
						Cambridge	East Cambridgeshire	Fenland	Huntingdonshire	South Cambridgeshire
Environment	Fast food outlets: density per 100,000 population	2017	96.1	93.0	59.1	105.1	70.3	92.3	73.3	44.2
	Air pollution: fine particulate matter concentration PM2.5 (mean - µg/m3)	2020	7.5	7.6	7.6	7.9	7.7	7.7	7.6	7.4
Employment	Employment rate ages 16 - 64 (%)	2020/21	75.1	75.2	77.5	77.6	89.0	68.0	79.4	75.0
	Economic inactivity ages 16 - 64 (%)	2020/21	20.9	21.8	19.4	19.0	11.0	27.6	16.8	22.0
	Sickness absence: the percentage of working days lost due to sickness absence (%)	2019-21	1.0	0.8	1.5	1.3	0.6	3.6	1.2	1.3
Inequalities	Unpaid carers (% of residents), age standardised proportion	2021	8.9	8.7	8.3	7.6	8.5	9.4	8.1	8.4
Income	Dependent children aged <16 in low income families (%)	2019	17.1	20.8	11.1	12.2	8.3	20.1	10.7	7.5
	Income deprived people aged 60+ (%)	2019	14.2	16.9	9.6	11.2	9.5	14.2	8.1	6.9
Crime	Violent crime: emergency hospital admissions per 100,000	2018/19 - 19/20	41.9	53.5	26.1	36.5	21.0	38.3	22.2	22.2
Education	GCSEs (mean attainment 8 scores)	2020/21	50.9	46.6	52.6	56.2	52.2	45.3	49.9	57.9
	Pupil absence (%)	2020/21	4.62	4.7	4.25	4.1	4.0	5.2	4.2	4.0

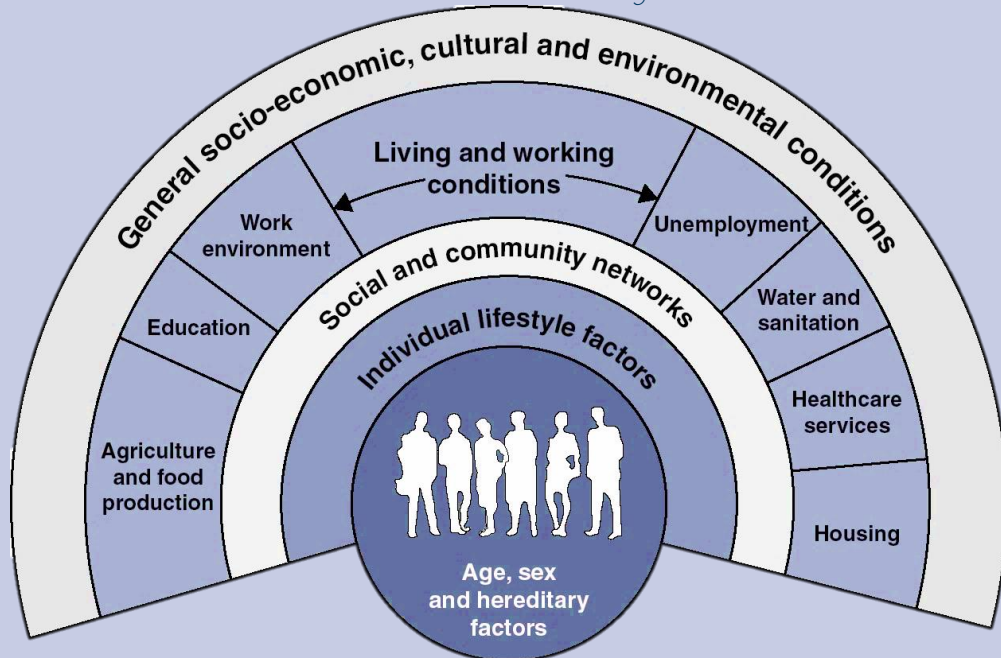
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Introduction

- The conditions in which we 'are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life' are central to our mental health (1).
- These environmental factors (known as the social determinants of health) have been estimated to determine between 80 to 90% of health outcomes, whilst the healthcare system is thought to define just 10 to 20% of health outcomes (2).
- This chapter will examine environmental factors to identify areas and population groups in Cambridgeshire and Peterborough (C & P) that are at higher risk of mental health problems, and to explore factors that lead to inequalities in mental health.
- *Figure 1: Model of health determinants. Source: Whitehead and Dahlgren 1991*



- These environmental factors are interrelated. They affect individuals over the life-course: positive and negative experiences can accumulate over time and can ultimately be maintained over generations.
- There are some gaps in locally collected data. Some information was also collected prior to the COVID-19 pandemic, which has exacerbated pre-existing inequalities in health (3), and thus may underestimate current mental health risk factors.

This chapter will report on the following factors in terms of how they impact mental health, and their national and local data trends:

- Deprivation
- Poverty and Financial Insecurity
- Housing, Homelessness and Environmental Justice
- Education and Life-long Learning
- Employment and Working Conditions
- Crime, Safety and Violence
- Community Wellbeing

Additional Resources and Data

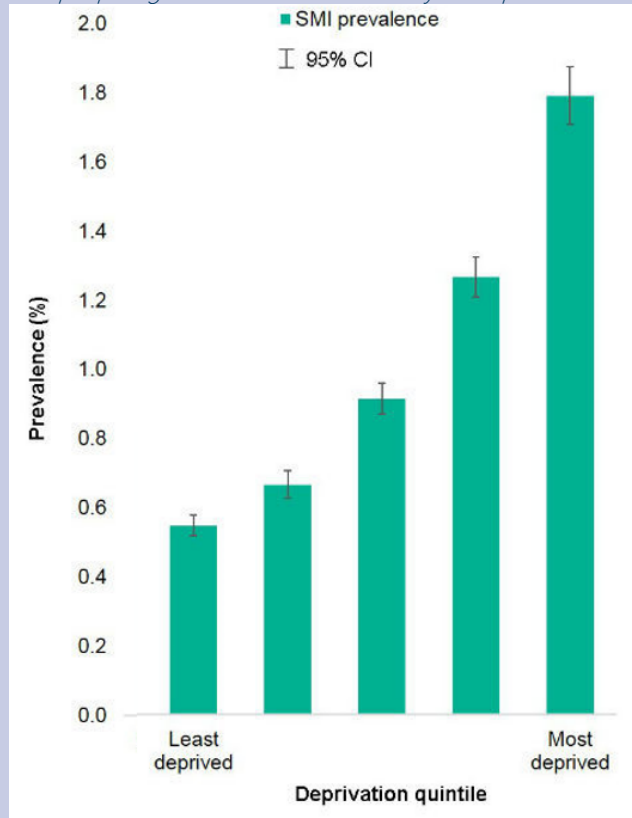
- World Health Organisation report on the [Social determinants of mental health](#)
- Professor Michael Marmot's report [Health equity in England: the Marmot review 10 years on](#)

Deprivation

Deprivation, 'a lack of money, resource and access to life opportunities' (4), is deeply intertwined with mental health (5).

Why is deprivation important?

- Deprivation and mental health are highly connected.
- For example, there is a strong link between deprivation and psychotic disorders, and depression (6,7).
- Socioeconomically disadvantaged children and adolescents are 2 to 3 times more likely to develop mental health conditions than their peers (8).
- There are higher rates of people living with severe mental illness (SMI) in more deprived communities.
 - SMI are mental health problems which severely limit people's ability to engage with work and other activities (9). They are typically long lasting and may involve hospitalisation or psychosis.
 - Most commonly, this refers to bipolar disorder, psychosis and personality disorders; but this group can also include severe depression and anxiety.
- *Figure 2: Prevalence of SMI in people aged between 15 and 74 by IMD quintile. Source: (10)*



- Although people living in deprived areas have a higher risk of mental ill health than people living in more affluent neighbourhoods, they are less likely to access mental health support, and less likely to recover following treatment (4).
- Childhood deprivation is strongly linked to experiencing deprivation in adulthood (11), highlighting the potential long-term impacts of deprivation.

Life expectancy

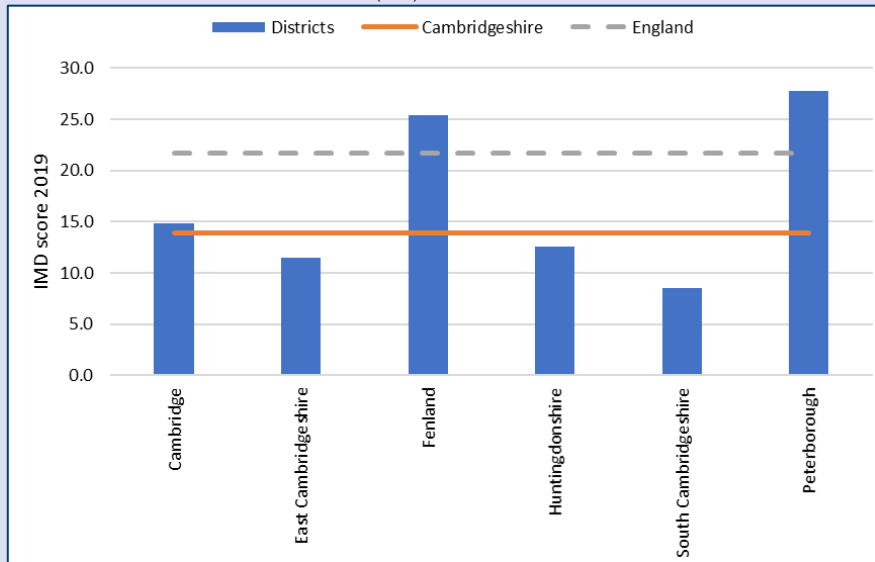
- As well as mental health and wellbeing, deprivation is linked to a range of physical health outcomes.
- There is a strong relationship between deprivation and overall life expectancy across England (12); as well as between deprivation and healthy life expectancy (how long people can expect to live in good health) (13).
- People living in more deprived areas are likely to live with multiple health problems from a relatively young age, most commonly a combination of mental and physical health conditions (14).
- Managing multiple health conditions can pose specific challenges to mental health in terms of navigating fragmented healthcare services and managing self-care (15). The links between mental and physical health are explored further in [Chapter 2](#).

What is the national picture?

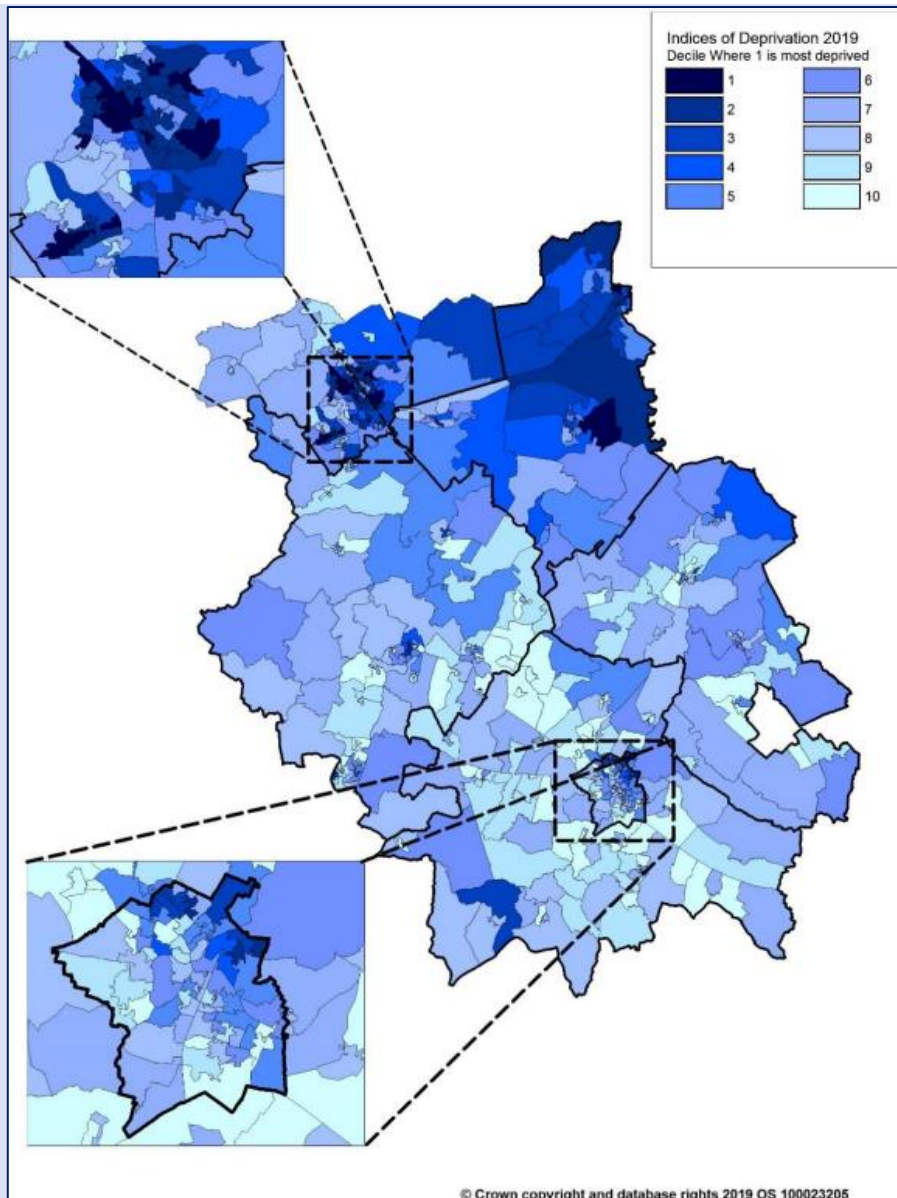
- Different types of deprivation are highly correlated, so people experiencing one type of deprivation are likely to experience a range of other deprivation types. For example, areas with high income deprivation are likely to have poor housing and environmental conditions, and high rates of crime (16).

What is the local picture?

- Using Indices of Multiple Deprivation (IMD), Fenland and Peterborough are more deprived than the national average. This is a multidimensional score based on 7 domains, covering crime, housing, education, income, employment, living environment, and health (16).
- This is in contrast with other areas of Cambridgeshire, in which deprivation levels are below the English average.
- *Figure 3: IMD scores across C & P. Data source: (16)*



- When broken down at Lower Layer Super Output Areas level, it becomes clear that there are other smaller pockets of deprivation within the C&P.
- *Figure 4: IMD across Cambridgeshire and Peterborough. Source: Cambridgeshire County Council 2019*

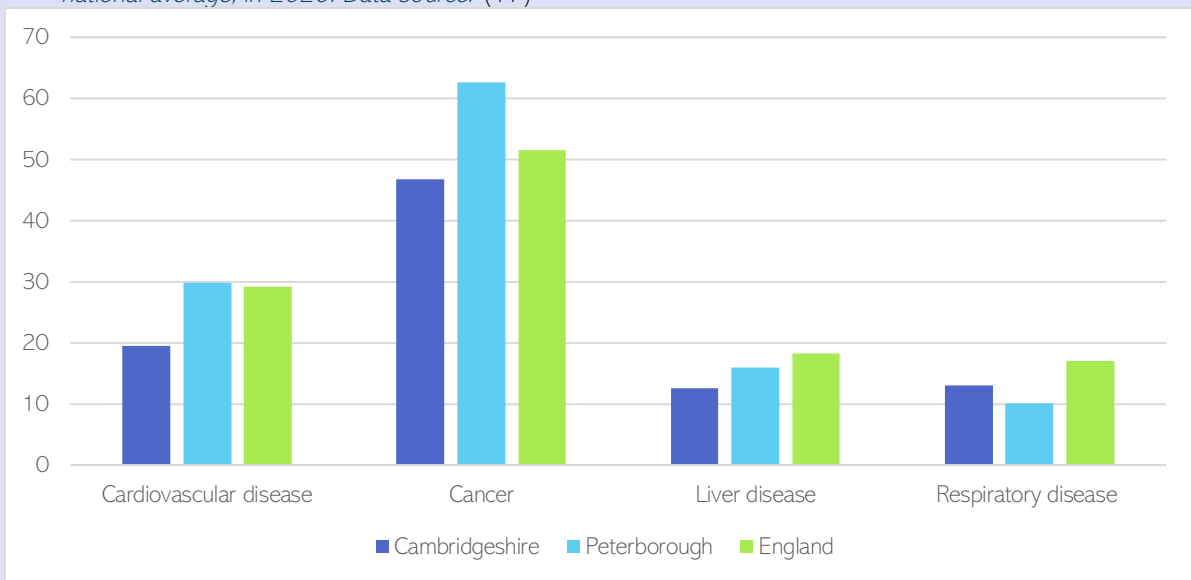


- As IMD is an area measure, there is still individual variation within these areas.
- Around a fifth of children (aged 0-15) in Peterborough (20.8%) and Fenland (20.1%) live in income deprived households, which is significantly higher than the national average (17.1%) (16).

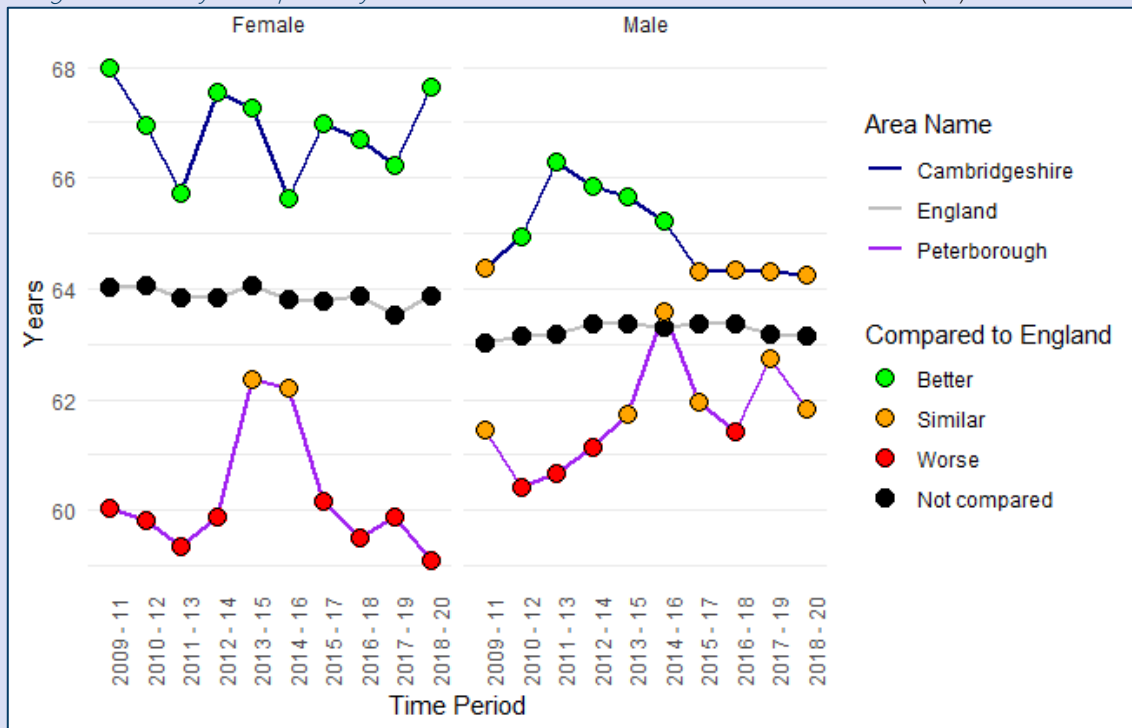
Life expectancy

- Overall life expectancy in Peterborough is significantly lower than the national average (17).
- Under 75 mortality rates from preventable causes are consistently above than the national average in Peterborough and Fenland (17).
- An above average rate of preventable deaths from cancer is a key driver of the difference in under 75 mortality rates between Cambridgeshire and Peterborough (17).

- *Figure 5: Under 75 mortality rate per 100,000 from causes considered preventable in C&P, compared to the national average, in 2020. Data source: (17)*



- Women in Cambridgeshire can expect to enjoy 9 additional years of good health compared to women in Peterborough (17).
- *Figure 6: Healthy life expectancy at birth in C & P from 2001 to 2020. Data source: (17)*



Additional Resources and Data

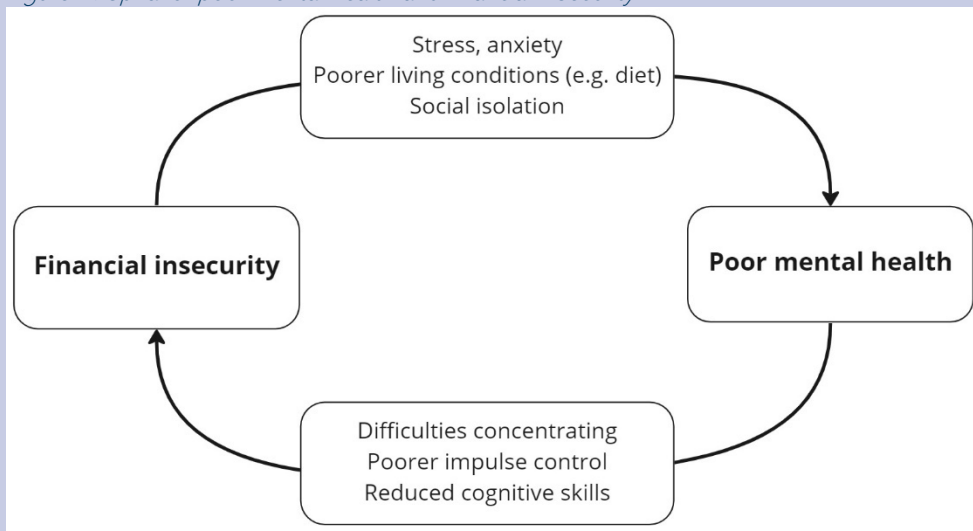
- NIHR summary of why [deprivation](#) is important to public mental health
- The Health Foundation [evidence hub](#) on health inequalities
- Further local data on [deprivation](#)

Poverty and Financial Insecurity

Poverty and financial insecurity have a significant impact on material living conditions and stress, and as a result, are strong risk factors for mental illness.

Why is poverty important?

- Poverty is when a person's resources 'are not sufficient to meet their minimum needs' (18). This prevents people from heating their homes, buying nutritious food and participating in social activities; and the resultant stress is a strong causal factor for poor mental health (19).
- Almost three quarters (73%) of people living on an income below £300 a week have experienced a mental health problem, compared to 59% of people earning over £925 a week (20).
- The poorest 20% of the population is twice as likely to develop mental health problems as those on an average income (4).
- Children in families with a gross weekly household income of under £100 are over 3 times as likely to be diagnosed with a mental health condition than those with an income of £600 or above (21).
- Growing up in poverty can have long-term impacts on children's health, by hindering their cognitive, social and emotional development, as well as their behavioural outcomes (22).
- On top of this, people with mental health conditions can be affected by a 'spiral of adversity', whereby their employment, income and relationships are negatively impacted by their condition (4). This can have a detrimental impact on their mental health and trap them in poverty.
- *Figure 7: Spiral of poor mental health and financial insecurity*



Financial insecurity

- Increasing numbers of people are affected by financial insecurity, with significant impacts on mental health. Worrying about paying the bills can exacerbate pre-existing mental health problems.
- Children and young people are also likely to be affected: being aware of family financial struggles as a teenager has a negative impact on mental health and is associated with harmful drinking patterns and depression (23).
- The relationship between financial insecurity and mental health can be bidirectional, as the psychological and cognitive impacts of mental health conditions can make it more difficult for people to manage their finances (24).
- People with mental health conditions who contact Citizens Advice face more problems with meeting their basic needs, such as housing, than those without mental health conditions.
- *Figure 8: Amongst people who contact Citizens Advice, how do people with mental health conditions compare to people who do not have mental health conditions? Source: Public Health England 2020*

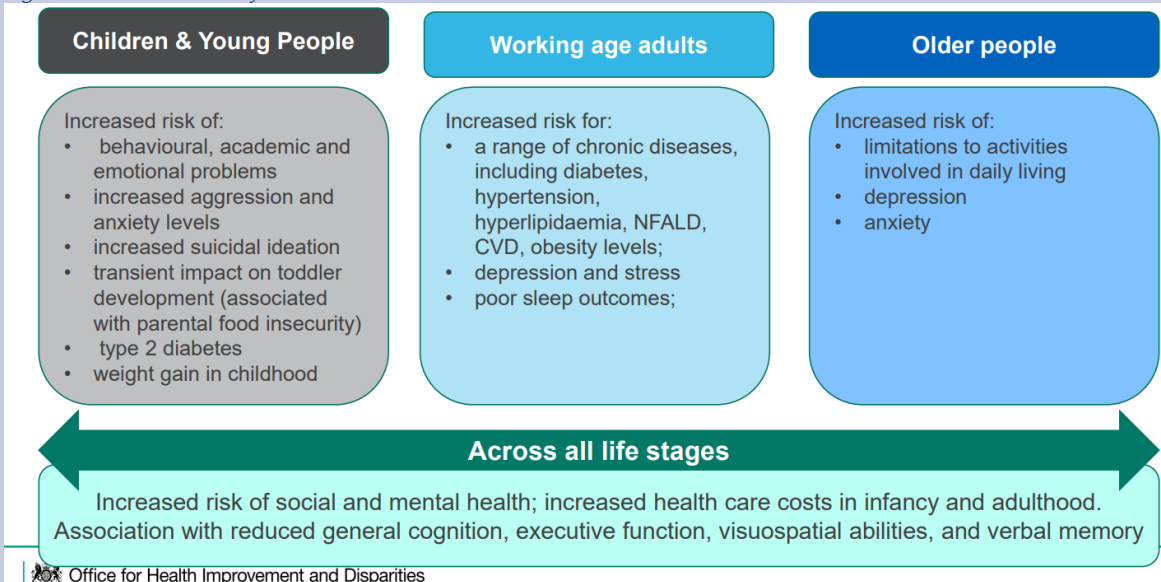


Fuel poverty

- Fuel poverty is associated with poor mental health in both adolescents and adults (25,26).
- Households living in fuel poverty often ration or turn off their heating. Living in a cold home is linked to many wider determinants of poor mental health, including reduced school performance and absences from work (27).

Food insecurity

- Food insecurity, a lack of reliable access to affordable and nutritious food (28), is associated with stress and depression (29), and had been associated with eating disorders, particularly binge-eating disorder and bulimia (30).
- Food insecurity is also linked to unhealthy diets and poor general health (31).
- *Figure 9: Food insecurity as a Public Health issue. Source: OHID*



Office for Health Improvement and Disparities

Debt

- Compared to people without personal loans, people with unsecured debt are (32):
 - 3 times as likely to have a mental health problem
 - 7 times as likely to die by suicide
 - 9 times as likely to have a drinking problem

- There is a strong two-way relationship between mental illness and debt: research from the debt charity StepChange shows that a high proportion (39%) of people who sought support from them in 2021 had a mental health condition (33).

What is the national picture?

- Wider structural inequalities mean that some groups are more likely to be in poverty, including:
 - Refugees, asylum seekers and refused asylum seekers (34).
 - Certain ethnic groups: households where the head of the household is Pakistani or Bangladeshi are significantly more likely to live in poverty than those from White ethnic groups (35).
 - Renters: 46% and 33% of social and private renters live in poverty, compared to 15% of those who own their house and 11% who have a mortgage (35).
 - Disabled people: half of all people in poverty are disabled or live in a family that includes a disabled person, compared to 36% of those who do not live in poverty (36).

Financial insecurity

- The cost of living has been rising in the UK since the mid-2000s (37), whilst wages have stagnated (38). There is currently a recognised cost of living crisis in which many low-income households are having to choose between having enough food or heating their homes (39).
- Some households are disproportionately likely to be unable to afford essentials, particularly (39):
 - Black, Asian and mixed ethnicity households.
 - Lone parent or large families.
 - Households where everyone is of working-age.

Fuel poverty

- Increases in fuel prices have led to dramatic increases in rates of fuel poverty, with recent predictions suggesting that 2 in 3 UK households will be in fuel poverty by January 2023 (40).
- Gypsy and Traveller communities who live in mobile homes and caravans are likely to be disproportionately impacted by rises in fuel costs (41).

Food insecurity

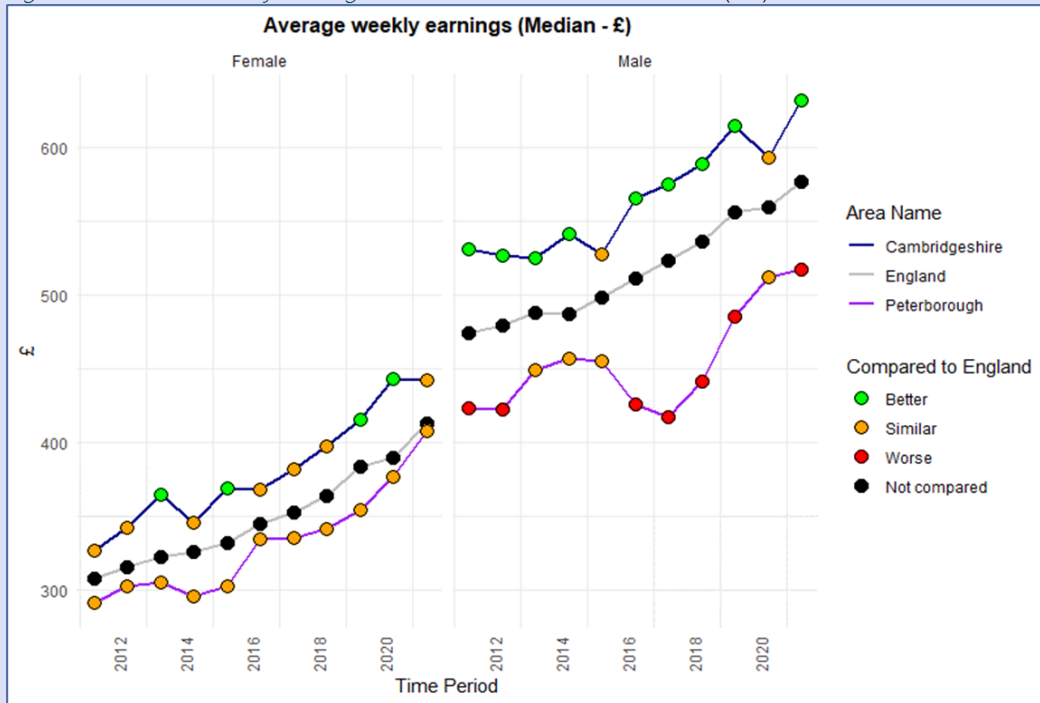
- Over 1 in 10 (13.8%) of all UK households, and 43% of households receiving Universal Credit, experienced food insecurity in April 2022 (42).
- Non-white ethnic groups, lone parent families and people with disabilities are disproportionately likely to experience food insecurity (42,43).

Debt

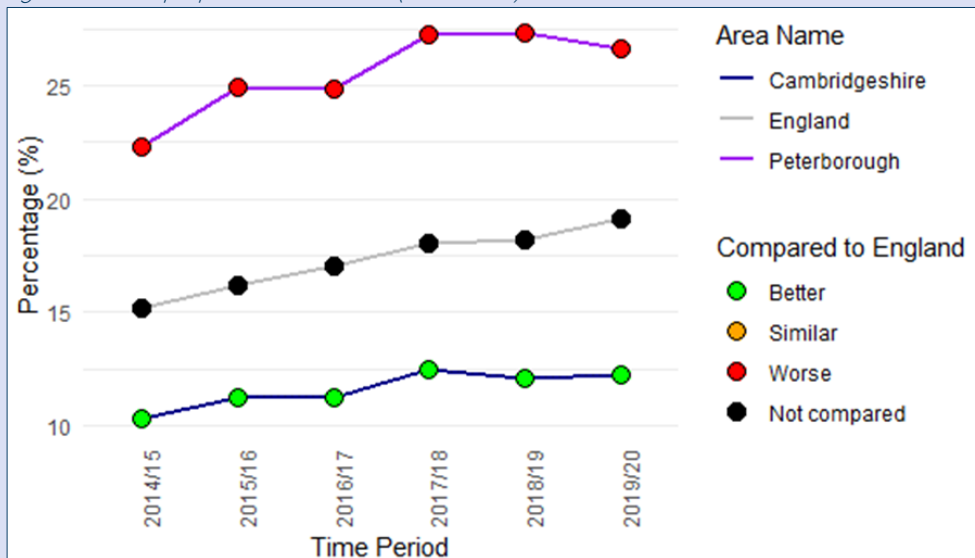
- An increasing number of people are likely to enter unsecured and problematic debt over the coming months as a result of the cost of living crisis (42).

What is the local picture?

- Several areas within Peterborough and Fenland are in the highest national quintile (20%) for low-income deprivation (44).
 - This measure captures people who are unemployed, unable to work due to disability or caring responsibilities and those in low paid employment.
- The mean income of men in Peterborough is significantly below the national average, whilst for Cambridgeshire mean income is above average (44).
- The mean income of women in both C & P was close to the national average in 2021 (44).
- *Figure 10: Median weekly earnings in C & P over time. Data source: (44)*



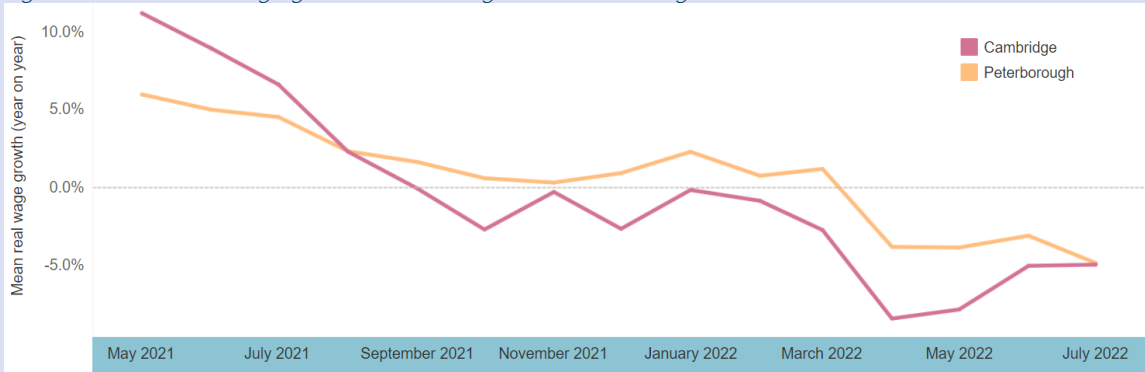
- Over a quarter of children (under 16s) in Peterborough live in low-income families (44). This is significantly higher than both the national average and the rate in Cambridgeshire.
- *Figure 11: The proportion of children (under 16s) in relative low-income families over time. Data source: (44)*



- The proportion of children living in poverty in Peterborough (36%) and Fenland (31%) is higher than most areas in East of England region; whilst East Cambridgeshire (18%) and South Cambridgeshire (17%) have relatively low rates child poverty rates (45).
 - Note that these are estimated child poverty rates which take housing costs into account.

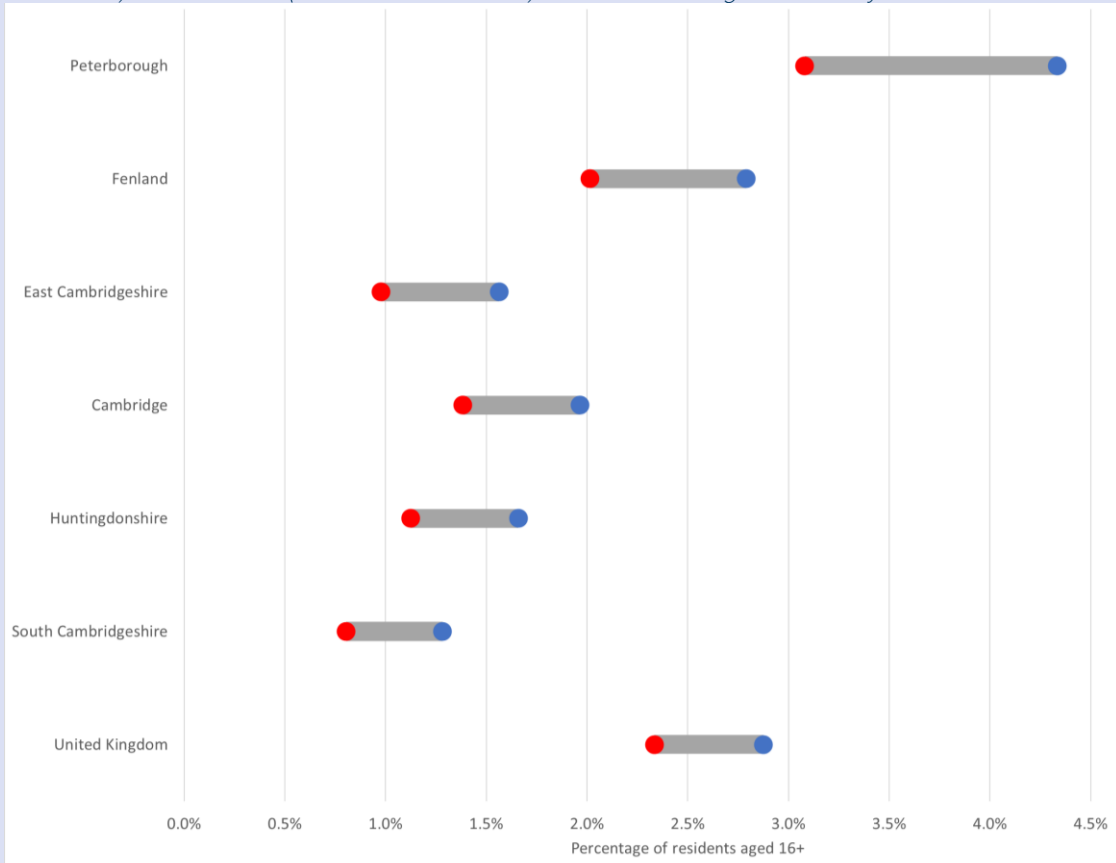
- In real terms, wages have decreased by 5% in Cambridge city and 4.9% in Peterborough city since May 2021 (46).
 - As a result, workers in Cambridge are on average £180 a month, and in Peterborough £110 a month, poorer in July 2022 than in the previous year (46).

• *Figure 12: Mean real wage growth in Cambridge and Peterborough cities. Source: Centre for Cities 2022*



- There have been increases in the proportion of people claiming Universal Credit across the whole of C&P. The largest increase has been in Peterborough.

• *Figure 13: Change in the proportion of adults (aged 16+) claiming Universal Credit from March 2020 (shown as the red dot) to June 2022 (shown as the blue dot). Source: Cambridgeshire County Council 2022*



Fuel poverty

- Around 12.3% of households in Cambridgeshire and 14.9% in Peterborough were living in fuel poverty in June 2020 (47), however this proportion is likely to have risen significantly since then.
- In October 2022, the estimated annual energy bill was (46):
 - £2380 in Cambridge city, a £504 increase compared to the previous period (April to September 2022).
 - £2358 in Peterborough city, a £499 increase compared to the previous period (April to September 2022).

Food insecurity

- Several locations in Cambridge have been identified as 'food deserts', which are poorly served by food outlets. This is a geographic risk factor for food insecurity (48).

Additional Resources and Data

- NIHR's summary of the importance of [income](#), the [welfare system](#) and [wider economic conditions](#) to public mental health
- The Health Foundation's Evidence Hub on [money and resources](#)
- A [review](#) highlighting the relationship between poverty and mental health
- King's Fund report [Poverty and the health and care system: The role of data and partnership in bringing change](#)
- The Joseph Rowntree Foundation reports: [UK Poverty 2022](#) and [Not heating, eating or meeting bills: managing a cost of living crisis on a low income](#)

Housing, Homelessness and Environmental Justice

Homelessness and poor quality housing are risk factors for mental health problems; whereas stable, good quality housing is a protective factor and can be a vital part of recovery from mental illness (4).

Why are housing and environmental justice important?

- Housing problems are key stressors for poor mental health: 1 in 5 people have experienced mental health issues because of housing problems (49).
- Stable, good quality housing is a protective factor for mental health and can be a vital part of recovery from mental illness (4). However, poor quality housing can have a detrimental impact on mental health.
- *Figure 14: Summary of housing issues*



- Living in an overcrowded house in childhood is associated with an increased risk of stressful childhood experiences and deprivation; and is linked to a greater risk of depression in adulthood (11).
- Living in a home with limited space can negatively impact mental health by hindering privacy and family relations, and by preventing people from socialising with others outside of their household (50).
- A lack of appropriate accommodation is a well-known barrier for people being discharged from inpatient psychiatric care (51).

Homelessness

- Compared with the general population, people experiencing homelessness are twice as likely to have a common mental health condition, and up to 15 times from likely to experience psychosis (4).
- People experiencing homelessness are also over 9 times more likely to complete suicide (4).
- Rates of mental health conditions are likely to be higher among people caught in the 'revolving door' between hostels, prison, hospitals and the streets (4).
- The inequalities in mental health faced by people experiencing homelessness are explored in more detail in [Chapter 2](#).

Physical environment

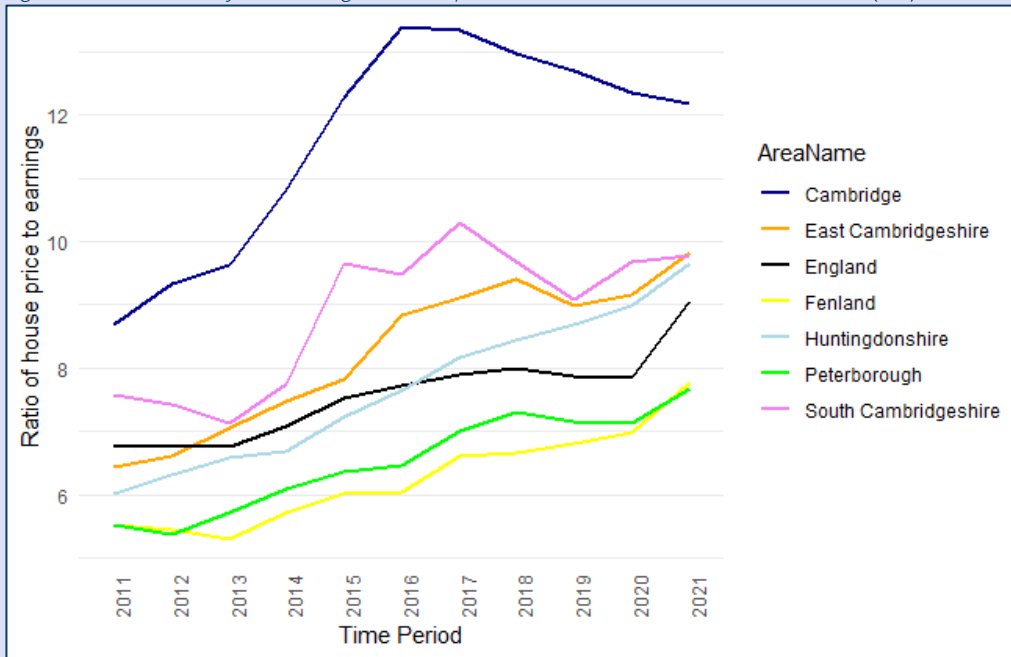
- Access to green space is consistently linked to greater wellbeing and improved mental health, as well as acting as a buffer for the effects of mental distress (52).
- Green space has positive impacts on emotional and behavioural difficulties in young people (53).
- Moving to an area with more green space produces long-term improvements to mental health (54); though the relationship between green space and mental health may be moderated by factors such as the safety of local parks (55).
- Green space can help to reduce health inequalities; yet poorer communities generally have less access to parks (56).

What is the national picture?

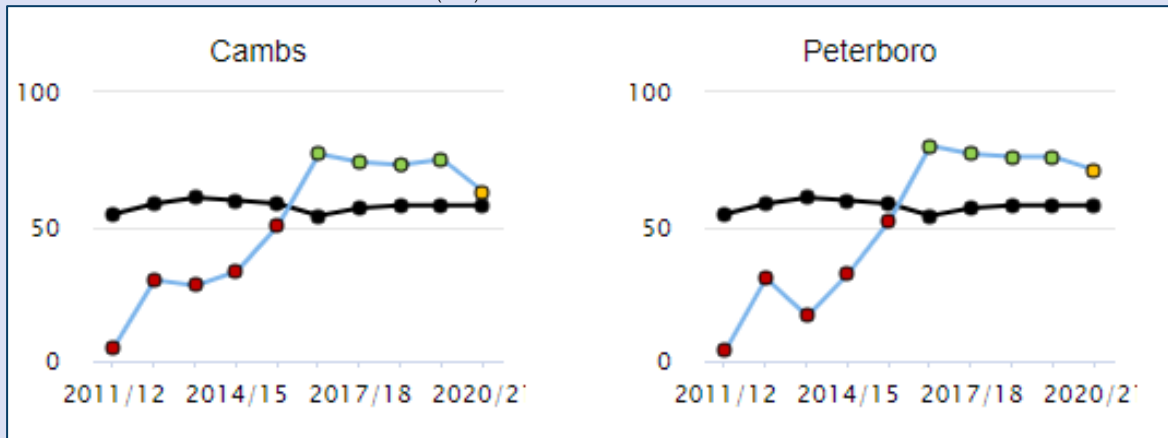
- Four million homes in England do not meet the Government's Decent Homes Standards, with privately rented homes being the most likely to fall below these requirements (57).
 - To meet this standard, homes must meet minimum standards for safety, provide reasonable 'thermal comfort', be in a reasonable state of repair, and have reasonably modern facilities.
- Renters have lower levels of life satisfaction and higher levels of anxiety than those who own their home (57). This is likely to be linked to poverty rates: a third of all private renters live in poverty, almost half (46%) of whom are pulled into poverty by their housing costs (42).
- Around 3% of houses in the East of England are overcrowded (58). A household is overcrowded if it has fewer bedrooms than it needs to avoid undesirable sharing, based on the age, gender and relationship of household members (58).
 - However, households which are Bangladeshi (24%), Pakistani (18%), Black African (16%) have much higher rates of overcrowding than White households (2%) (58).

What is the local picture?

- Housing ownership is increasingly out of reach across C & P, particularly in Cambridge.
- *Figure 15: Affordability of housing ownership across C & P over time. Data source: (44)*



- There has been a notable increase in number of households on local authorities' waiting lists for housing in Peterborough since 2018, although in Cambridgeshire, waiting lists have decreased over this time (59).
- The proportion of adults who receiving support from secondary mental health services recorded as living in appropriate accommodation was generally higher than the English average in C & P over the past 5 years (44).
- *Figure 16: Adults in contact with secondary mental health services who live in stable and appropriate accommodation, 2020/21. Data source: (44)*



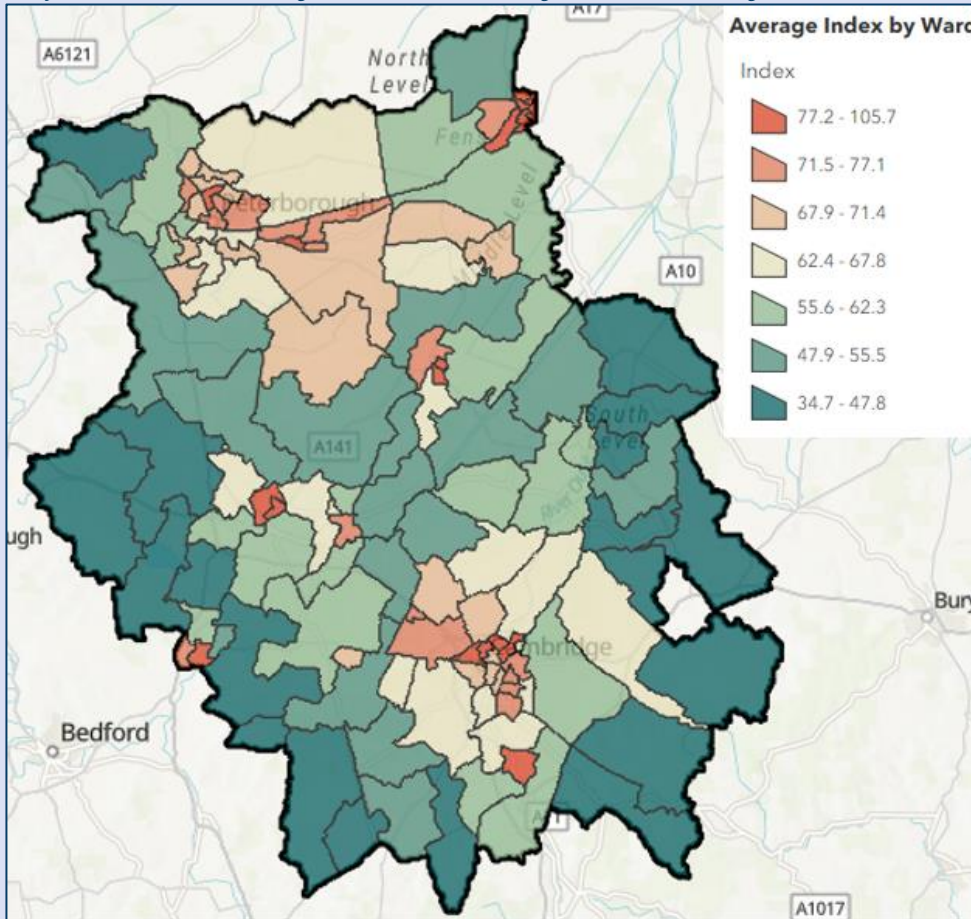
What is the local picture: homelessness?

- Peterborough was one of the top 10 local authorities in England by number of people sleeping rough on a single night (36) in 2021 (60).
- In contrast to this, the proportion of households in temporary accommodation is below the national average across C & P (44).
- The most common cause for households owed a relief duty after losing their last settled home is domestic abuse (61), which has a substantial impact on the mental health of both the victims of violence and other members of the household.

- o In 2021/22, 155 households in Cambridgeshire and 171 in Peterborough were owed relief due to domestic abuse (61).

What is the local picture: environmental justice?

- The Future Parks department has recently developed an Environmental Justice Index to measure the distribution of environmental inequalities (62). Fenland and Huntingdon have the greatest levels of environment injustice, as well as urban areas in Peterborough and North Cambridge.
 - o This index combines 10 measures, spanning health and deprivation, environmental risk factors (covering air and noise pollution, urban heat risk, and flood risk), and access to nature and green space.
- *Figure 1.7: Average environmental justice index scores across C & P, where higher scores indicate greater levels of injustice. Source: Cambridgeshire and Peterborough Future Parks Programme 2022*



Additional Resources and Data

- The Centre for Ageing Better's report on [How poor-quality homes have contributed to the pandemic](#)
- The Health Foundation's Evidence Hub on [housing](#)
- The Local Government Association's report [The impact of homelessness on health: a guide for local authorities](#)
- A summary of research showing [The importance of greenspace for mental health](#)
- The NHS report [Healthy foundations: integrating housing as part of the mental health pathway](#) highlights the importance of housing to mental health recovery
- [NIHR summaries on the importance of housing and environmental factors to public mental health](#)
- Further local data on [housing](#), [supported housing](#) and the [environment](#)

Education and Life-long Learning

Education is an important determinant of health and wellbeing across the life-course. It can improve peoples' life chances, increase their ability to access healthcare and enables them to live healthier lives (4).

Why is education important?

- Educational outcomes are strongly tied to employment opportunities, economic circumstances and thus overall health and quality of life (4). Educational levels are also linked with health behaviours (63,64).
- As such, educational attainment can be an important protective or risk factor for mental health.
- Young people with mental health problems can find it difficult to achieve their full potential at school. This can disrupt their educational attainment and reduce their ability to enter employment (65).
- Some educational outcomes are closely intertwined with existing inequalities like deprivation (66) and can therefore compound poor mental health.

School exclusions

- School exclusions exemplify the bidirectional relationship between school performance and mental health. Being excluded from school is associated with increased rates of psychological distress (67); and almost all children who are excluded from school have some form of mental health condition (68).
- Three quarters (77%) of children excluded from school have recognised special educational needs or disability (68).
- School exclusions have long-term impacts on the life chances of young people: just 1% of excluded pupils achieve 5 passes at GCSEs level including English and Maths, which limits their progression to university and employment (68).

Adult learners

- Beyond school and higher education, participation in adult learning is linked with good wellbeing (69) and can protect against age-related cognitive decline (4).
- Some evidence suggests adult learning has direct positive impacts on mental health, alongside indirect benefits from improving employment outcomes and health behaviours (70).
- Community adult education programmes have been used as social prescribing for mild/moderate anxiety and depression due the mental health benefits of social connection and taking part in activities (4).

What is the national picture?

- Pre-existing educational inequalities across all age groups have been exacerbated by the COVID-19 pandemic (71,72).

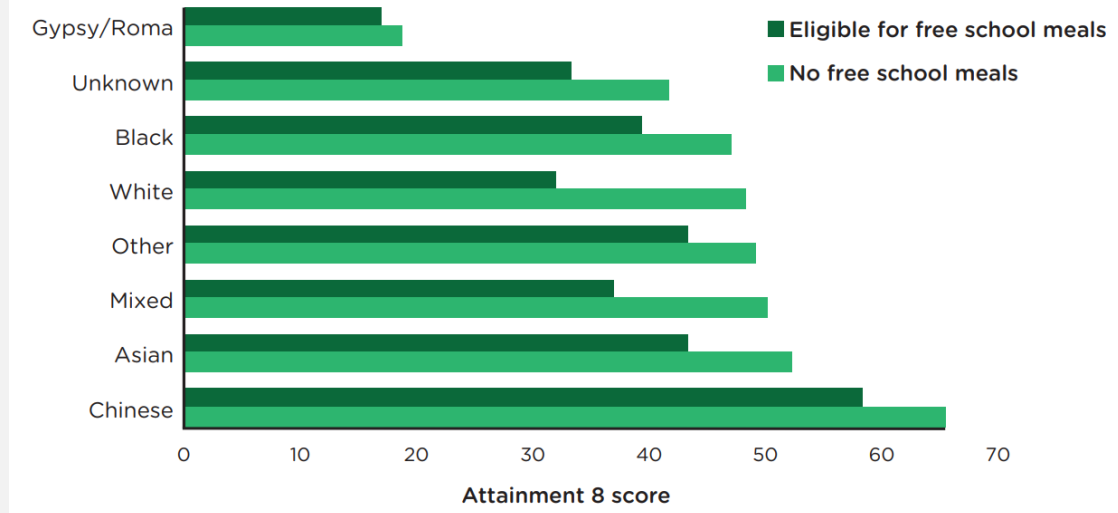
Primary school

- When children begin primary school, there is a strong socioeconomic gradient in the proportion of those who are 'school ready' (this refers to children reaching the expected level of development for their age group).
- 92% of children who do not meet expectations in English and Mathematics at the end of primary school, do not pass English and Mathematics GCSE (73), and thus face significant challenges when entering employment.

GCSEs

- There are significant inequalities in attainment 8 scores linked to ethnicity and free school meal eligibility (children are eligible for free school meals if their parents are in receipt of certain benefits, hence this identifies children in out-of-work and many low income households) (74).
 - Attainment 8 scores are calculated by adding together pupils' highest GCSE scores (measured from 1 to 9, where 9 is the highest grade), across 8 government approved school subjects.
 - Children are eligible for free school meals have lower attainment 8 scores than those who are not eligible, across all ethnic groups. Children from Gypsy/Roma ethnic groups have the lowest attainment 8 scores (74).

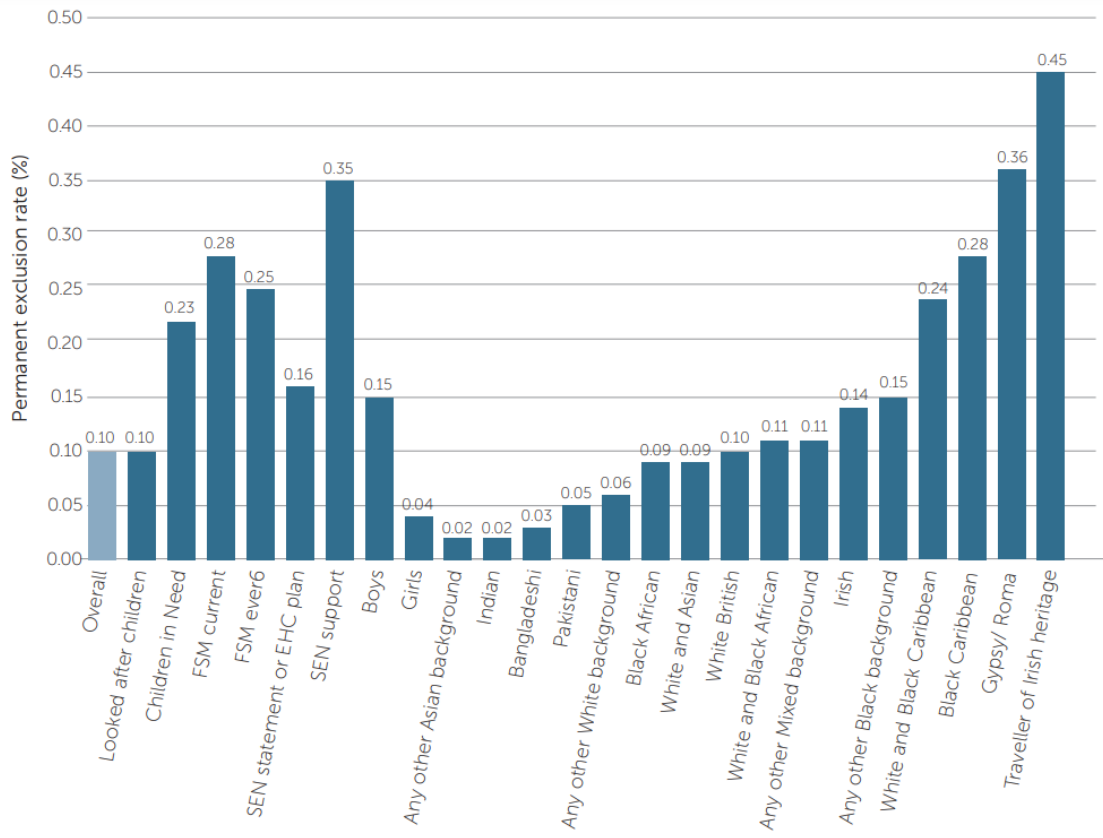
- *Figure 18: Average Attainment 8 score, by ethnicity and free school meal eligibility. Source: Marmot 2020*



School exclusions

- Children from Black Caribbean ethnic groups and Gypsy, Roma and Irish Traveller children are more likely to be excluded from school than the general population (75).
 - Children who currently receive free school meals (FSM current) or have received free school meals in the past year are also more likely to be excluded (FSM ever6).

- *Figure 19: Permanent exclusion rates by pupil characteristic. Source: Timpson 2019*



University progression

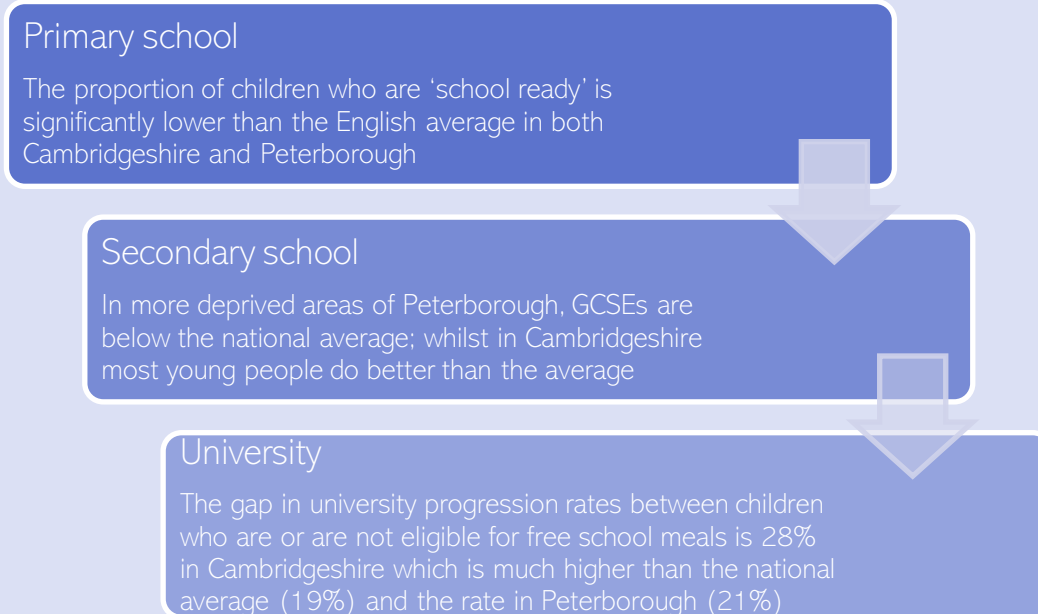
- There are substantial inequalities in the proportion of young people who progress to university. At a national level, just 28% of young people eligible for free school meals (FSM) entered higher education in 2021, compared to 47% of their non-FSM peers (73).
- This disparity is likely to have long-term impacts on the life opportunities of young people. People without a university degree are more likely to become trapped in poverty: 4 in 10 of working-age adults with no qualifications (below GCSE) are living in poverty, compared to 1 in 10 with a degree (42).

Adult learners

- Rates of adults participating in adult education have remained stable over the last few years (76).
- People who are already highly qualified are most likely to participate in adult learning. For example, people in managerial or professional jobs are twice as likely to participate in learning after completing full-time education than those in unskilled or casual work (77).

What is the local picture?

Figure 20: Educational outcomes across C & P



Primary school

- The proportion of children who are 'school ready' is significantly lower than the English average in Cambridgeshire and Peterborough (44).

GCSE

- At GCSE level, there are disparities in attainment 8 scores across C & P.
 - Mean attainment 8 scores are calculated by adding together pupils' highest GCSE scores (measured from 1 to 9, where 9 is the highest grade), across 8 government approved school subjects, and dividing this total by 8.
- Fenland, Peterborough and Huntingdonshire have lower scores than average, whilst in most areas across Cambridgeshire young people do better than the national average (2).
- *Figure 21: Average Attainment 8 scores in C & P. Data source: (2)*

Area Name	Mean - Score
Cambridge	56.2
East Cambridgeshire	52.2
Fenland	45.3
Huntingdonshire	49.9
South Cambridgeshire	57.9
Cambridgeshire	52.6
Peterborough	46.6
England	50.9

- For children in care, the pattern is reversed: the average 8 attainment score of these children in Cambridgeshire is lower than the national average, whilst it has been higher than average in Peterborough for the last 2 years (2).

School exclusions

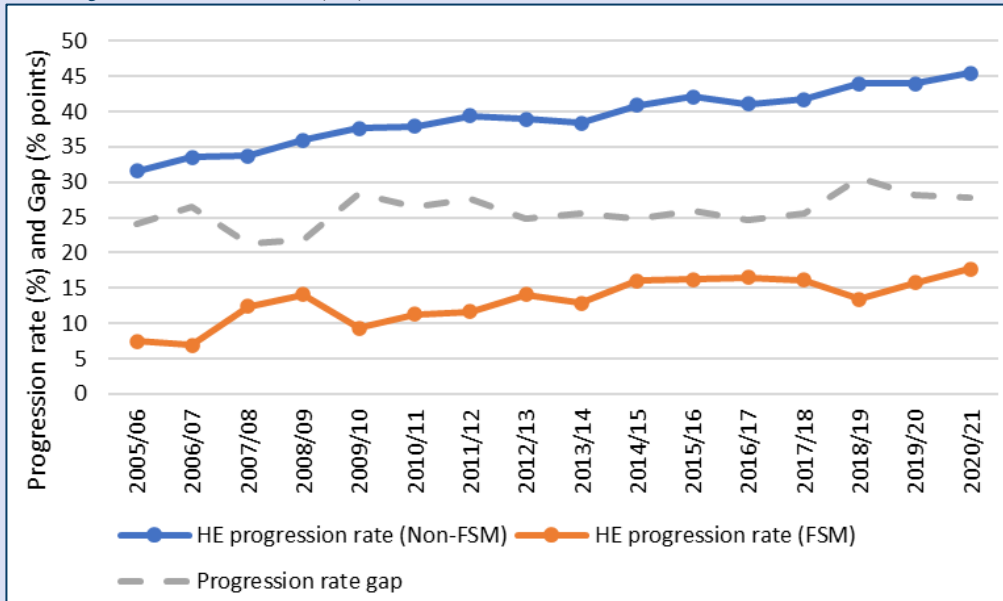
- Pre-pandemic data shows that exclusion rates in Peterborough were twice the national average, whereas in Cambridgeshire they were significantly below (78).

University progression

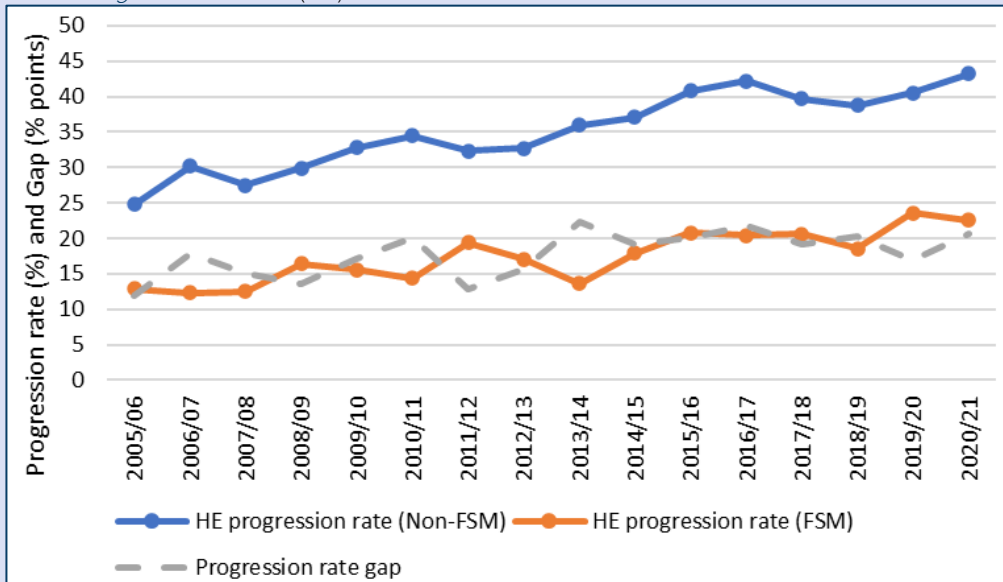
- Young people who are eligible for free school meals are less likely to progress to university than the rest of their classmates.

- o The gap in university progression rates between young people who are and are not eligible for free school meals is much larger in Cambridgeshire (28%) than the national average (19%) or rates in Peterborough (21%) (79).

- *Figure 22: University progression rates for pupils who are/are not eligible for free school meals (FSM), in Cambridgeshire. Data source: (79)*



- *Figure 23: University progression rates for pupils who are/are not eligible for free school meals (FSM), in Peterborough. Data source: (79)*



Additional Resources and Data

- NIHR's summary of the importance of [education](#) to public mental health
- The Differences' report [Making The Difference: Breaking the link between school exclusion and social exclusion](#)
- Further local data on [early learning and educational attainment](#)
- The most recent national survey on adult learners: [Adult Participation in Learning Survey 2019](#)

Employment and Working Conditions

High quality employment can promote good mental health by providing fulfilment and economic benefits; whereas poor working conditions, low pay and unemployment significantly harm mental health.

Why is employment important?

Unemployment

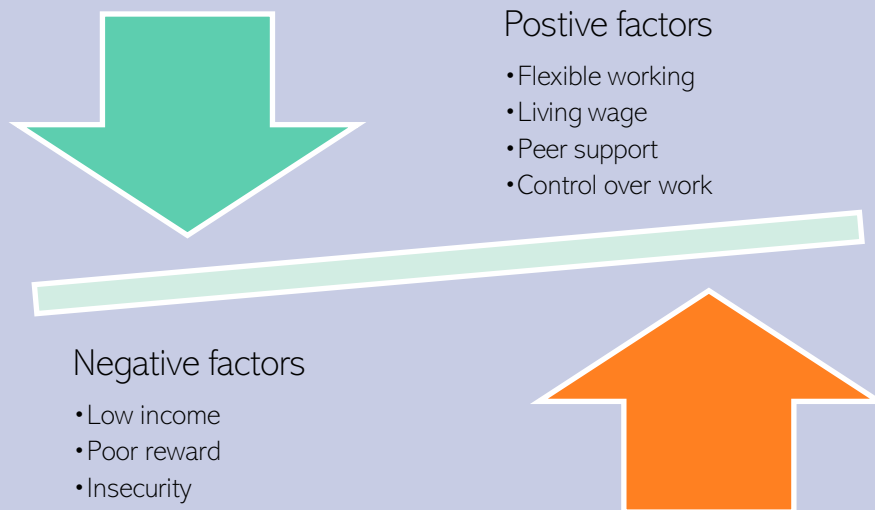
- Unemployment has an enduring and multidimensional detrimental impact on mental health and wellbeing (80), including social exclusion and increased alcohol consumption (5).
- Long-term unemployment can be particularly harmful and has a long-lasting increased suicide risk (81).
- Young adults who experienced economic disruption during the first 18 months of the pandemic were at higher risk than their peers of reporting suicidal thoughts, as well as feeling defeated or trapped, key antecedents to suicidal feelings and behaviour (82).
- There is a negative impact on children of unemployed parents: 20% of children in families without a working parent have a mental health condition, over twice the rate in children where one (9%) or both (8%) parents work (21).
- There is evidence suggesting that the claims process for Universal Credit is in itself harmful to mental health (83), including increasing the risk of suicidal ideation (84).
- There are substantial inequalities in employment rates for people with mental health problems, which can compound poor mental health.

Young people who are not in employment, education or training (NEET)

- There seems to be a bidirectional relationship between mental health conditions and NEET status. Amongst young people who are NEET, there is a high prevalence of mental health problems and substance abuse issues (85).
- Youth unemployment has a long-lasting negative effect on mental health, partly due to its enduring impact of employment, with one study estimating that it results in an 8% to 15% reduction in wages at age 42 (86,87).

High- and low-quality employment

- Job roles and workplace environments can be beneficial or harmful to mental health (88).
- *Figure 24: Employment factors with positive and negative impacts on mental health*



- Positive factors include:
 - Flexible working, as this improves work-life balance and helps people manage their health conditions (89).
 - A living wage, the introduction of which is associated with improved wellbeing and reduced alcohol consumption and depression rates (90).
 - Peer support, job control and low levels of insecurity (65).
 - Positive relationships with co-workers (91).
- Negative factors include:
 - Low wages, which are a key cause of in-work poverty (92).

- Having a poor sense of rewards and little control over workload, which can lead to stress-related health conditions such as depression (5).
- Job insecurity (93): Contract types including short term, temporary or zero-hour (contracts with no minimum of paid hours) are associated with increased anxiety (5).
- Night shifts (94).
- Low satisfaction, which is associated with anxiety and depression (95).

What is the national picture?

- Many disabled people face barriers to accessing and maintaining employment, and as a result, only half of disabled people are in work, compared to 75% of non-disabled people (96).
- People with common mental health conditions are 4 to 5 times more likely to be permanently unable to work, and 3 times more likely to be receiving benefits payments, than those who do not have a mental health condition(8).
 - There can be a number of barriers to gaining or retaining employment, for example the symptoms of the mental illness or discrimination by employers or stigma in the workplace.
- People with a mental health condition are twice as likely to lose their job than those without a mental health condition. Around 300,000 people with a long-term mental health condition lose their job each year (85).

Young people who are not in employment, education or training

- Young people living in more deprived areas, children in care and care leavers are at a much higher risk of becoming NEET than the general population: in 2021, 41% of care leavers aged between 19 and England were NEET, compared to around 9% of the general population (98).

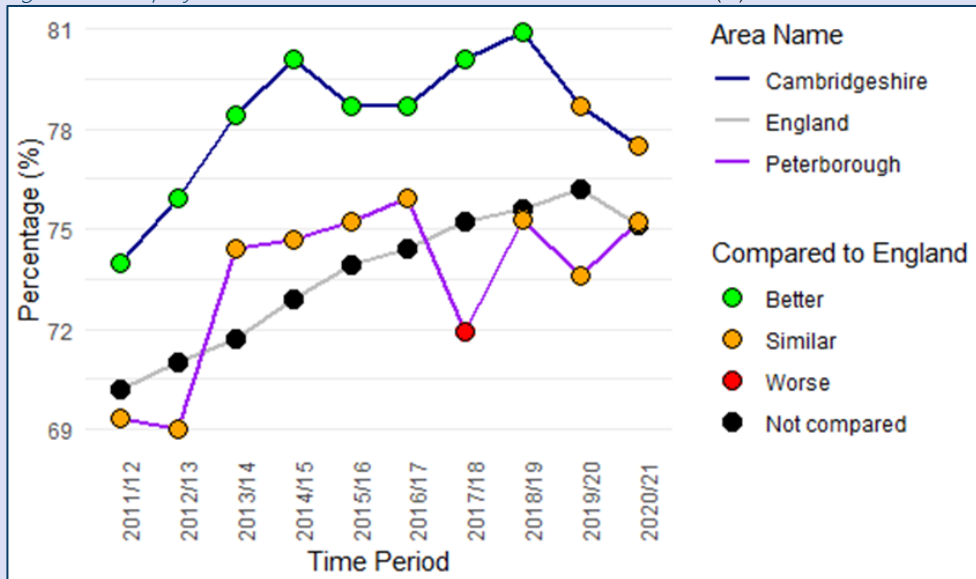
High- and low-quality employment

- National rates of in-work poverty are rising, with 2 in 3 working-age adults in poverty living in a household where at least 1 adult is in work (94).
- Low-income workers are more likely to be aged between 16 to 21 years; to work in food and accommodation services; and to be women (95).
- Low paid workers are at least twice as likely to lose their job than higher paid workers (93).

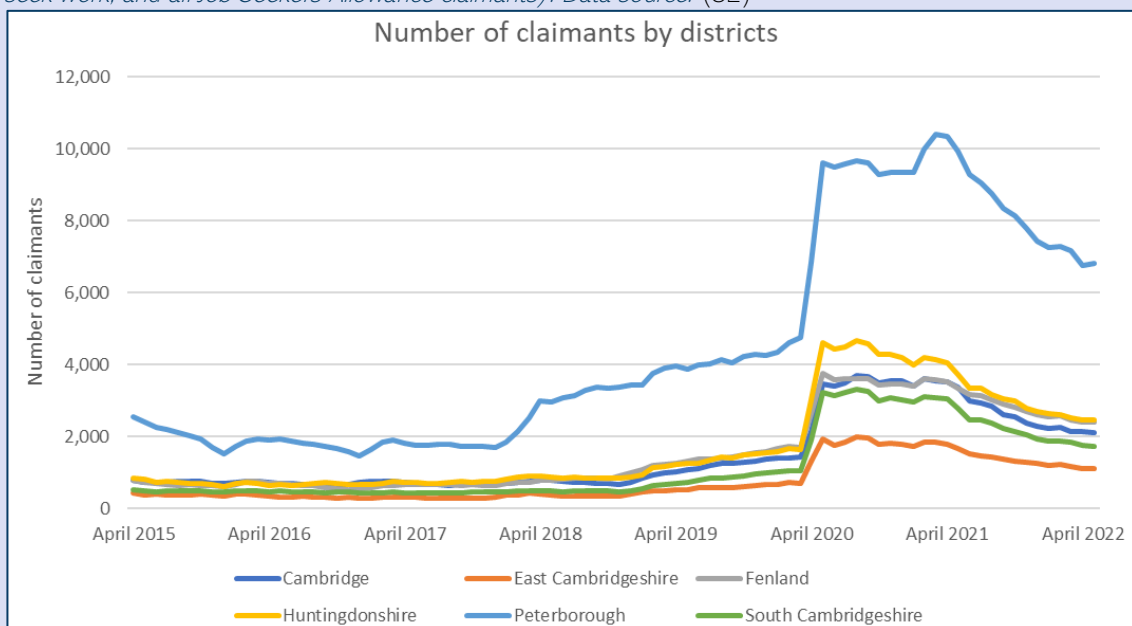
What is the local picture?

Unemployment

- Across C & P, employment rates have generally increased over the past 10 years (2).
- However, the proportion of people in employment has declined in Cambridgeshire over the past 2 years (2).
- *Figure 25: Employment rates across C & P, over time. Data source: (2)*

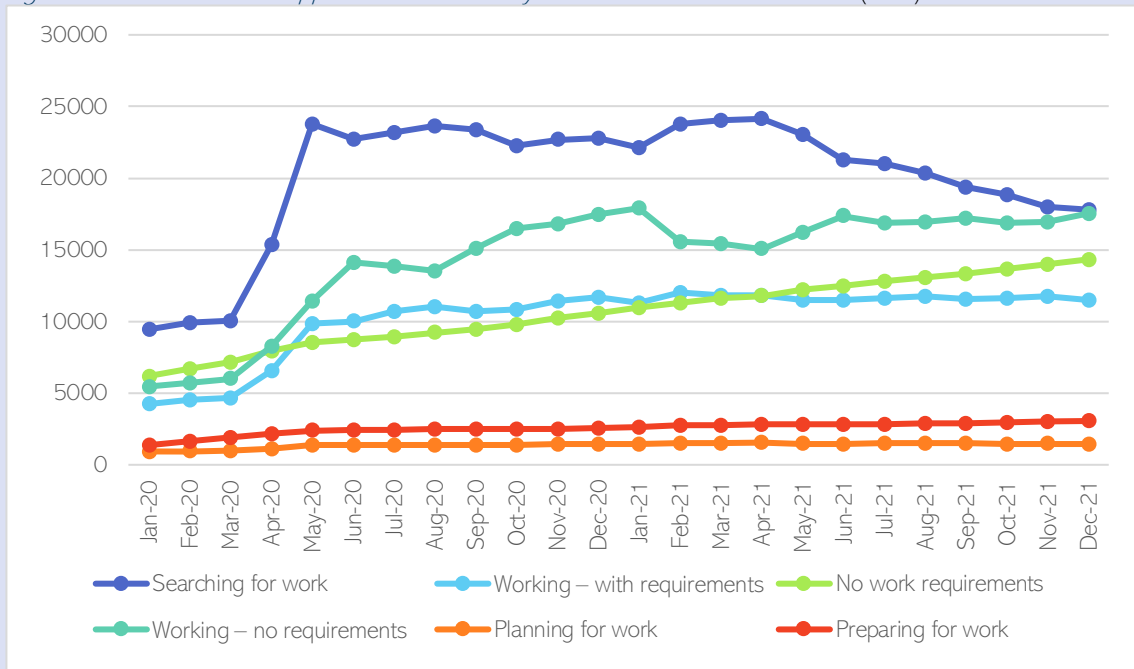


- When unemployment trends are broken down by district, this exposes regional disparities. Claimant counts, which are a strong indicator of unemployment rates, are substantially higher in Peterborough compared to all other Cambridgeshire districts (Figure 26).
 - The Claimant Count measures the number of people claiming benefit principally for the reason of being unemployed: from April 2015, the Claimant Count includes all Universal Credit claimants who are required to seek work and be available for work, as well as all JSA claimants.
- *Figure 26: Number of people claiming unemployment benefits (Universal Credit claimants who are required to seek work, and all Job Seekers Allowance claimants). Data source: (82)*

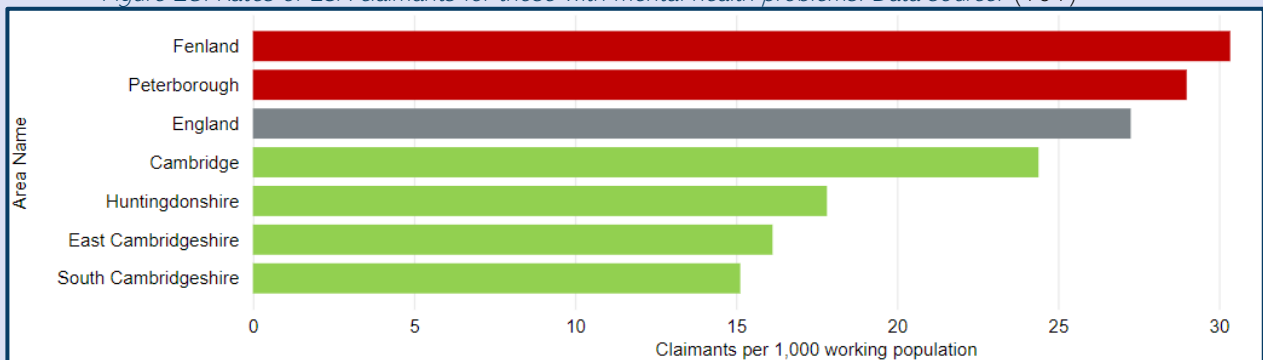


- The majority of claimants are aged between 25 and 49 (82).

- When breaking down Universal Credit applications in C & P by claimant counts, increasing numbers of people on Universal Credit have no work requirements (102). This means that people are not required to look for work, for example they may be receiving Universal Credit to top up their wages.
- *Figure 27: Universal credit applications in C & P by claimant counts. Data source: (102)*

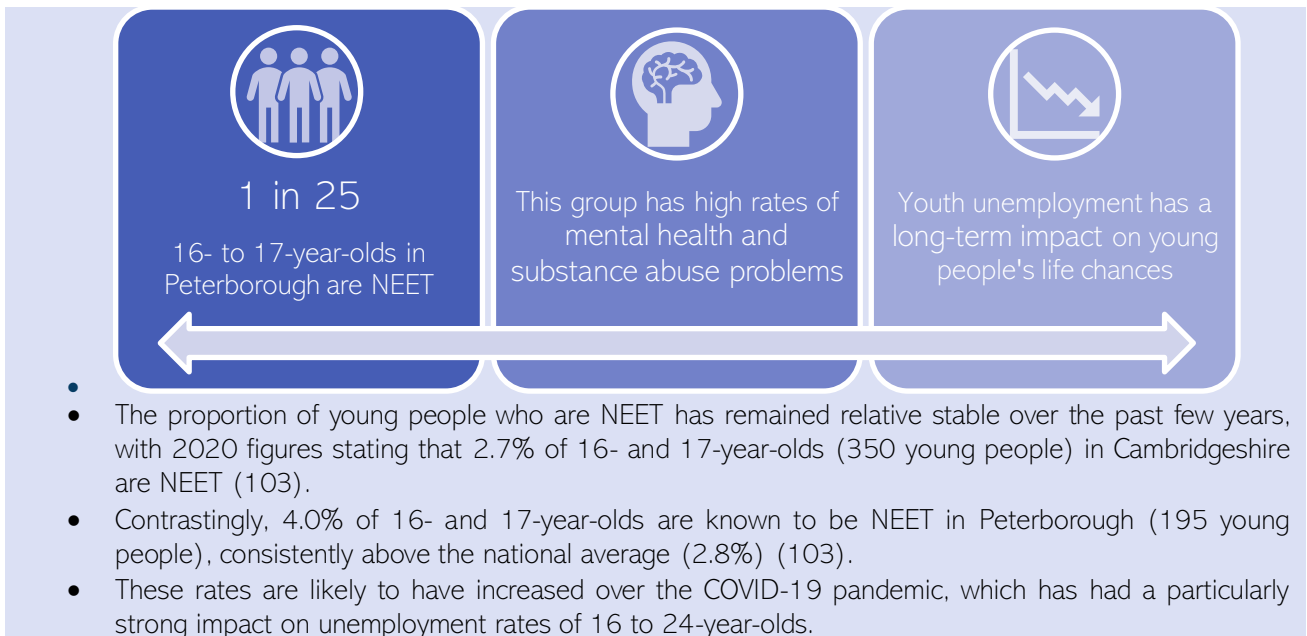


- The rate of Employment Support Allowance (ESA) claimants with mental health problems is significantly higher than the national average in both Fenland and Peterborough.
 - This data covers ESA claimants who are designated as having a 'mental and behavioural disorder', which is based on their primary disabling condition as decided by their GP. There may be claimants with mental and physical health conditions who are not included in these figures.
- *Figure 28: Rates of ESA claimants for those with mental health problems. Data source: (101)*



Young people who are not in employment, education or training

- *Figure 29: Summary of NEET prevalence and the impact on mental health*



Additional Resources and Data

- NIHR's summary of the importance of [employment](#) to public mental health
- The Health Foundation's Evidence Hub on [work](#)
- The Department for Work and Pensions report [Thriving at work: a review of mental health and employers](#)
- A meta-analysis of the [psychological and physical impacts of unemployment](#)
- Further local data on [employment](#) and [youth unemployment](#)

Crime, Safety and Violence

There is a complex relationship between crime and mental health, both in terms of victims of crime and offenders.

Why is crime, safety and violence important?

- High neighbourhood crime rates are associated with psychological distress and depression (104).
- Higher levels of perceived neighbourhood safety are linked to good wellbeing (105).

Victims of crime

- Being a victim of violent crime is a risk factor for mental illness, particularly post-traumatic stress disorder (PTSD) and depression (106).
- Compared to the general population, people with mental health problems are:
 - 3 times more likely to be a victim of crime (4).
 - 5 times more likely to be a victim of assault, rising to 10 times more likely for women (4).
 - More likely to report negative experiences when reporting crimes, including police being unfair and disrespectful (107).
- Being a victim of intimate partner violence or domestic abuse increases the risk of mental health problems. There are high rates of mental health conditions, particularly PTSD, among people who have been raped (4).
- Living in a family with inter-parental violence in childhood is a strong predictor of adult mental illness (108).
- Sexual violence is a strong risk factor for poor mental health: it has been estimated that if young people were not subject to sexual violence, the prevalence of serious mental health outcomes in 17-year-olds would be 4 to 11% lower in young men and 14 to 19% lower in young women (109).

Offenders

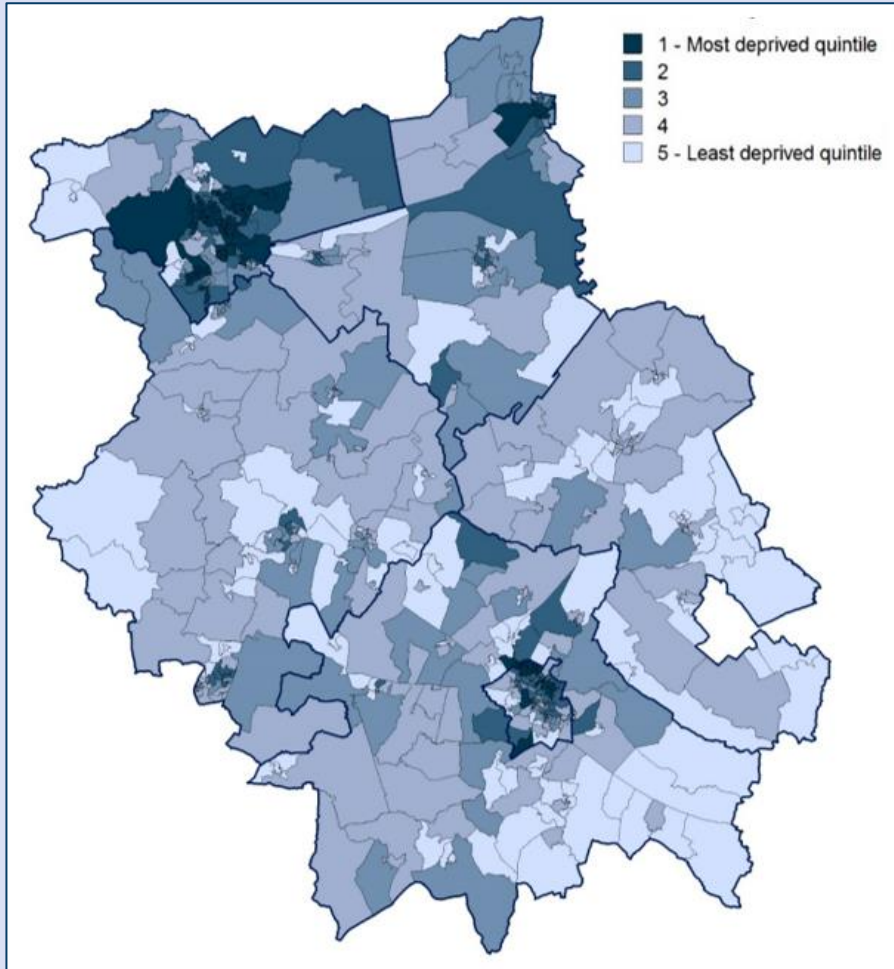
- There are high rates of mental health and learning disability need in the prison population: 71% of women and 47% of men in prison report having mental health problems (110).
- These disorders are often more severe and complex than those in the general population and can be combined with poor physical health and substance misuse (4).
- Rates of mental health conditions in offenders, and the barriers this group face when accessing mental health support, will be discussed in more detail in the [next chapter of this report](#).

What is the national picture?

- Cuts to legal services have had significant impacts on the mental health of victims of crime and their families, leading to people feeling 'stressed, powerless and unable to get on with life' (111).
- There is an increasing backlog of court cases, which has grown over the pandemic (112).

What is the local picture?

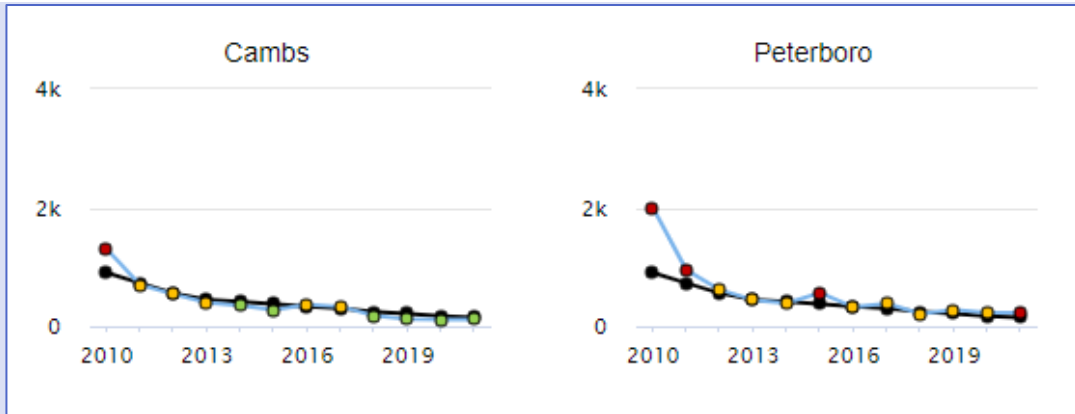
- There are areas of high rates in crime deprivation C & P (16).
 - This measure combines rates of violent crime, burglary, theft and criminal damage, with high levels of deprivation indicating high levels of crime.
- *Figure 30: Crime deprivation across C & P. Data source: (16)*



-
- The overall crime rate in C & P is similar to regional and national trends over time (113). However, the violent crime rate in Peterborough is significantly higher than the national average (44).

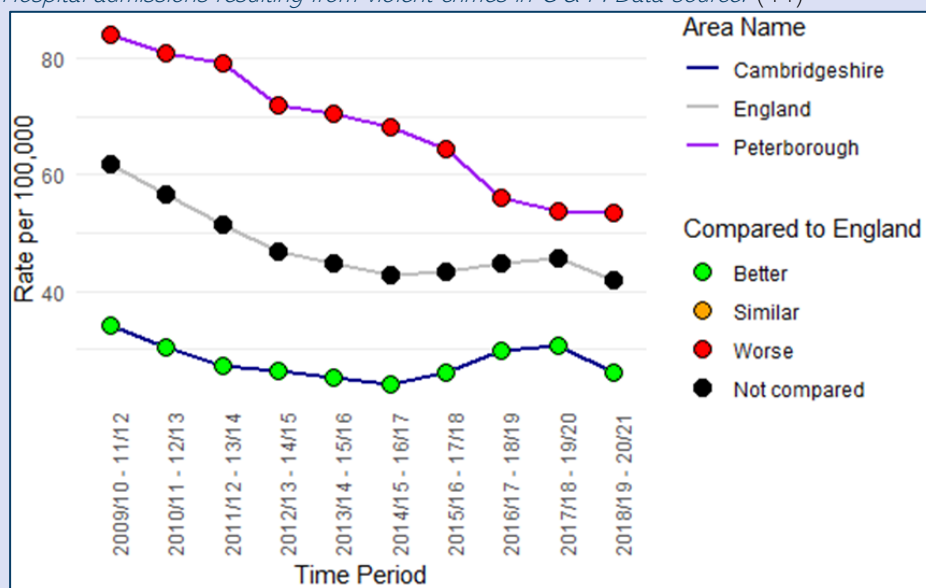
Offenders

- The proportion of offenders who go on to reoffend is higher than the national average (27.9%) in Cambridge (33.7%) and Peterborough (30.5%) (44).
- The rate of 10 to 17-year-olds receiving their first reprimand, warning, or conviction per 100,000 population is higher than the national rate in Peterborough, and lower than the national average in Cambridgeshire. However, an overall decline has been seen in Cambridgeshire and Peterborough since 2010 (44).
- *Figure 31: First time entrants to the youth justice system, rate per 100,000. Data source: (44)*



Victims of crime

- There was a peak in referrals to the local Independent Domestic Violence Advisor service in the first quarter of 2021/22, though rates have since reduced (114). This service supports medium-high risk victims of domestic abuse.
 - There were 270 referrals to this service in Cambridgeshire and 161 referrals in Peterborough in 2021/22 (114).
- The number of admissions to hospital resulting from violent crimes has fallen since 2010.
- *Figure 32: Hospital admissions resulting from violent crimes in C & P. Data source: (44)*



- Rates of sexual offences are increasing in all local districts except East and South Cambridgeshire (44). Rates of sexual offences in Peterborough are higher than both levels in all Cambridgeshire districts and the English average (44).

Additional Resources and Data

- The most needs assessment in this area: [Cambridgeshire & Peterborough Needs Assessment: Victims, Suspects and Offenders: 2019/2020](#)
- NIHR summary of the importance of [community safety](#) and the [criminal justice system](#) to public mental health
- Further local data on [crime and community safety](#)

Community Wellbeing

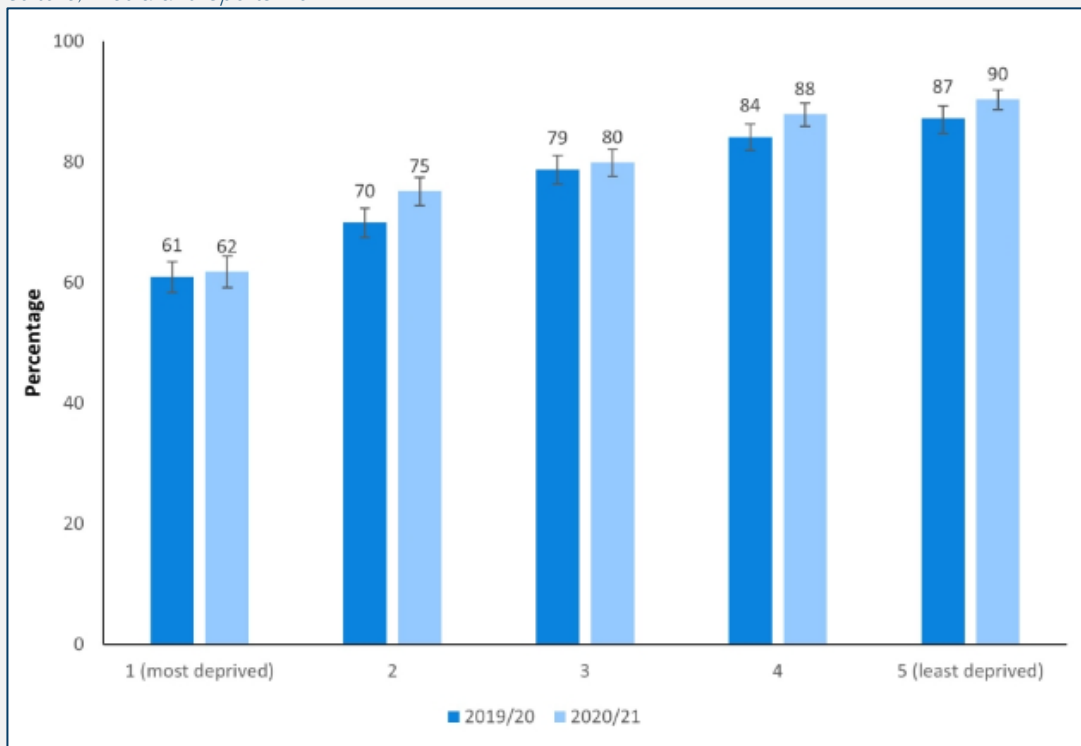
Good mental health and wellbeing is an important health outcome in its own right and can improve resilience to mental and physical illness.

Why is wellbeing important?

- Wellbeing is a subjective measure of how people feel about their lives. It can be defined using a range of measures, spanning people's day-to-day satisfaction and happiness, to how they feel about their future.
- Wellbeing is related to, yet distinct from, mental health.
 - Some people may have poor wellbeing without having a diagnosable mental health condition.
 - Equally, people with long-term mental health conditions who manage their symptoms well can have a good quality of life and high wellbeing.
- Children and adults with better wellbeing are more able to deal with stressful events, recover faster from illnesses, and are less likely to put their health at risk (4). People with higher wellbeing are 1.14 times more likely to recover and survive from an illness than those with lower baseline wellbeing levels (115).
- Loneliness is an important risk factor for poor mental health (116). Older adults who feel isolated have a greater risk of later showing symptoms of anxiety and depression (117).

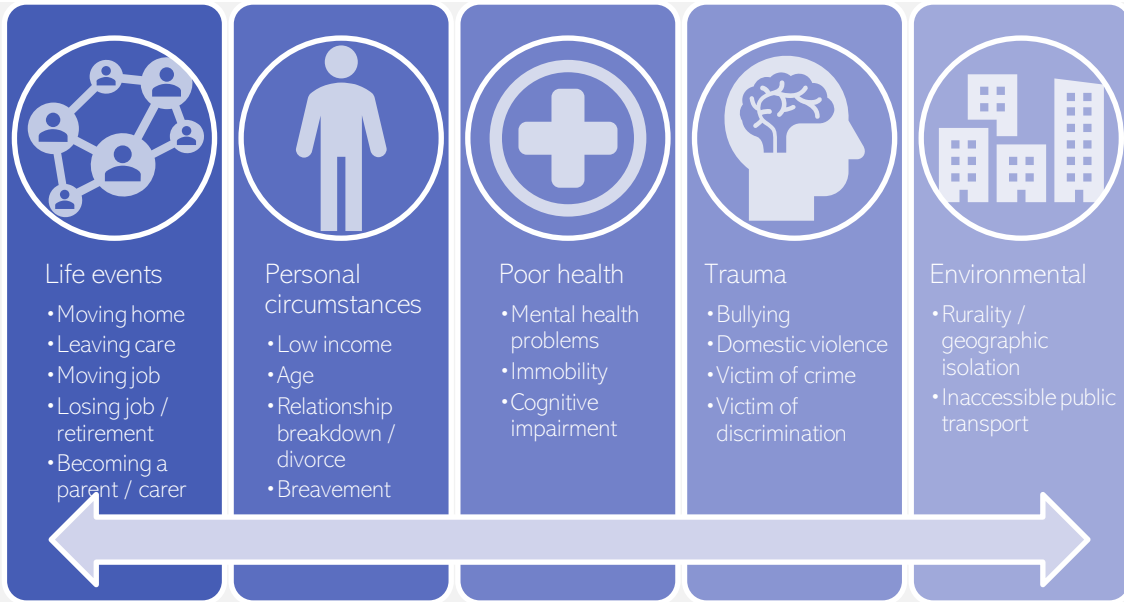
What is the national picture?

- National wellbeing has returned to pre-COVID levels across 4 different indicators (life satisfaction, feeling things done in life are worthwhile, happiness, and anxiety) (118).
- The vast majority (83%) of people feel like the areas they live in is a place where people from different backgrounds get along well together, which is fairly consistent with data over the last 7 years (119).
- 65% of people agree that 'people in their neighbourhood pull together to improve the neighbourhood'. This is a substantial rise from 2019/20 figures (59%) (119).
- Children in the UK are ranked among the most unhappy and least likely to have a positive sense of purpose of life in Europe. Poor wellbeing in children is strongly linked to fear of failure (120).
- There are inequalities in wellbeing (119):
 - People living in more deprived neighbourhoods are significantly less likely to be satisfied by their local area.
 - Similar disparities are present in the proportion of people who 'feel a sense of belonging' to their local community.
- *Figure 33: Percentage of people satisfied with their local area by IMD quintile. Source: Department for Digital, Culture, Media and Sports 2022*



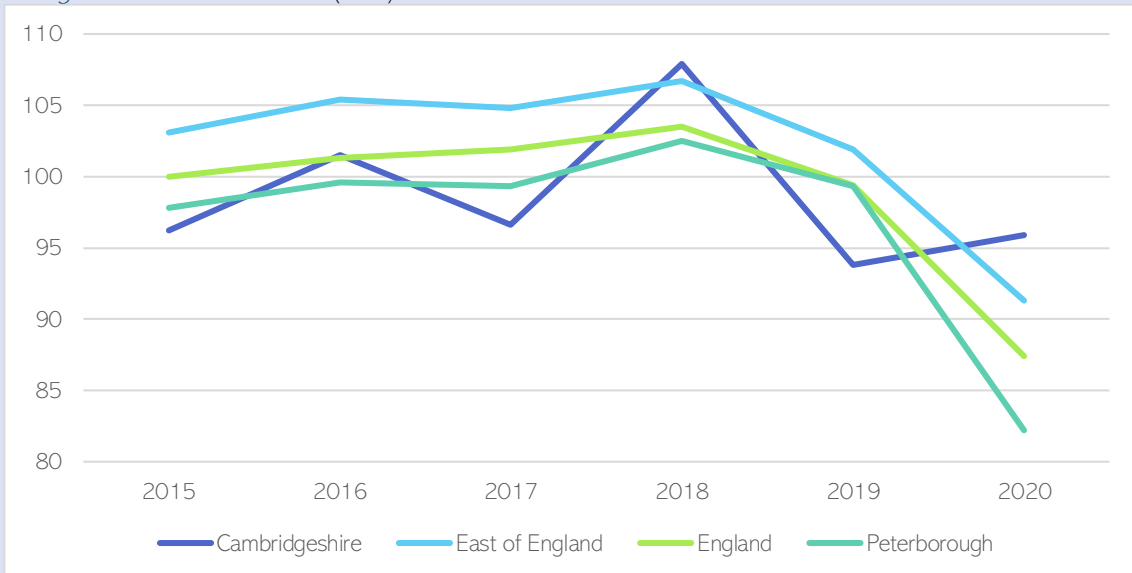
Loneliness

- 87% of adults (over 16s) in Great Britain agreed that they can rely on people in their life if they have a serious problem and 66% reported that they generally trust most people (121).
- In England, 6.5% of adults reported feeling lonely often or always in 2020/21, a similar proportion of 2019/20 (6.4%) (121).
- There are a wide range of risk factors for loneliness:
- *Figure 34: Risk factors for loneliness.*



What is the local picture?

- In Peterborough personal wellbeing has declined since 2015 and falls substantially below the national average (122). In contrast, personal wellbeing increased in Cambridgeshire from 2019 to 2020, going from the bottom 5% of local authority areas to being in the top 5% (122).
 - Personal wellbeing is a combined score of feelings of anxiety, happiness, life satisfaction, and people's belief that activities in life are worthwhile.
- *Figure 35: Personal wellbeing Health Index scores from 2015 to 2020. A score of 100 represents the English average in 2015. Data source: (122)*



- Data collected from Cambridgeshire secondary schools in 2021 indicates pupils have lower resilience and poorer wellbeing on many measures compared to previous years, and that overall life satisfaction has fallen (123).

Loneliness

- 6 to 13% of the population aged over 65 are likely to be lonely most or all of the time (124). For Cambridgeshire, this would constitute between 7,100 and 15,400 adults aged over 65.
- Only half (47% in Cambridgeshire and 48% in Peterborough) of adult social care users in in C & P report having as much social contact as they would like (44).

Additional Resources and Data

- A review of the link between [social ties and mental health](#)
- [Safeguarding the Convoy: A call to action from the Campaign to End Loneliness](#)
- Further local data on [wellbeing](#)

Evidence-based interventions

There is a large evidence-base of interventions targeting the wider determinants of health, that prevent poor mental health and promote good mental wellbeing. This subsection of the needs assessment is based on Campion's 2012 evidence review on public mental health (125).

Interventions that improve have been shown to improve the wellbeing of children and young people include:

- Social support is a strong predictor of wellbeing (126). Interpersonal skills training and emotional regulation have shown consistently positive effects on mental health outcomes in teenagers (127); whilst there is mixed evidence for peer support schemes aimed at young people (128).
- Community engagement (such as empowering communities and peer-delivered interventions) has been shown to improve self-efficacy and health outcomes across all ages (129). 8 actions have been identified for community engagement to be successful, including acknowledging and addressing power imbalances between citizens and professionals and creating a safe environment for citizens to give input into services (130).
- Physical activity has been shown to improve self-esteem in children, and well as reducing depression and anxiety (131). Physical activity can be promoted through infrastructure investments (such as access to parks and improving neighbourhood walkability) and group-based activities (such as youth groups) (125).
- Housing interventions can improve mental health and wellbeing. For example, tackling fuel poverty has been shown to improve social relationships and the mental health of teenagers and adults. There have been limited studies assessing the impact of these interventions on children (25).
- Access to green space is consistently linked to greater wellbeing and improved mental health, as well as acting as a buffer for the effects of psychological distress (52). Green space has positive impacts on emotional and behavioural difficulties in young people (53). Moving to an area with more green space produces long-term improvements to mental health (54); though the relationship between green space and mental health may be moderated by factors such as the safety of local parks (55).
- Mindfulness-based interventions haven shown to improve mindfulness, and reduce depression and anxiety, in children and young people (132).
- Community-based creative activities have been shown to have positively impact on young people's self-esteem and self-confidence (133).

The evidence base of interventions for adults will be added shortly.

Ongoing Questions

The following questions were raised in the writing of this chapter and highlight potential future areas of research.

- What is the local picture of unsecured debt and financial insecurity?
- How has the backlog in court cases impacted victims' mental health?
- How many adults are participating in learning locally, and what are the demographics of this group?
- What is the best way of collaborating with local partners to involve mental health in local work improving environmental factors such as housing and employment?

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