

Online Mental Health First Aid: Full references for statistics in activities

This document serves as a one-stop reference list for all updated statistics cited in the Online MHFA course activities. We provide this as an easy guide for instructors to refer to for the latest statistics. It will be revised in line with updates to activities as key reports are released.

Session 1

Activity 4: Impact of mental ill health quiz

- Mental ill health is responsible for 72 million working days lost and costs £34.9 billion each year (5)
- The total cost of mental ill health in England is estimated at £105 billion per year (1)
- 75% of mental illness (excluding dementia) starts before age 18 (6,7)
- Note: Dementia is more accurately described as a progressive neurological disorder (a condition affecting the brain's structure and subsequent function over time), and typically does not occur before the age of 30.
- Men aged 40–49 have the highest suicide rates in the UK (8)
- 70–75% of people with diagnosable mental illness receive no treatment at all (6,9,10)

Session 2

Activity 10: Prevalence of suicide quiz

- In 2018 there were 6,154 suicides in Great Britain. This means that more than 16 people per day took their life. It is estimated that 10–25 times that number attempted suicide (8,27)
- Note: These statistics refer specifically to Great Britain. The figures were calculated using data from supplementary tables released as part of the ONS's Suicides in the

UK: 2018 registrations report and adding together the 2018 suicide figures from England, Scotland and Wales. This was done to ensure that suicide statistics remained consistent and comparable across MHFA England's entire product portfolio.

- Note: 2018 saw a change in the standard of proof used by coroners in England and Wales around ruling deaths as suicides. In England and Wales, all deaths caused by suicide are certified by a coroner. In July 2018, the standard of proof used by coroners to determine whether a death was caused by suicide was lowered to the “civil standard” (i.e., balance of probabilities), where previously a “criminal standard” was applied (i.e., beyond all reasonable doubt). The change does not affect Northern Ireland or Scotland. It is likely that lowering the standard of proof will result in an increased number of deaths recorded as suicide. It is not yet possible to establish whether the higher number of recorded suicide deaths are a result of this change. Further information is available from (8).
- In GB, 1,784 people died in road traffic accidents 2018 (28)
- More men die by suicide: 75% male and 25% female (8)
- 80–90% of people who attempt/die by suicide have a mental health condition, but not all are diagnosed (17,29)
- Note: The best and most recently available evidence suggests that the figure is 80.8% overall. (17) This research notes that this figure can vary. This depends on factors such as where the studies were conducted, which mental health conditions were examined, and how recently the study was published. Older studies tend to report higher figures, e.g. Arsenault-Lapierre and colleagues published research in 2004 which reports a figure of 87.3%. (29) These studies are reviews of ‘psychological autopsy studies’ of suicide completers. The psychological autopsy method makes use of interviews with family members, medical records, and other relevant documents to assess whether the suicide completer had a mental health condition. Older studies estimated mood disorders were present in 30–90% of suicide cases. (30)
- 28% of people who complete suicide in England have been in contact with mental health services in the year before death (31)
- Drug and alcohol misuse increases the risk of suicide attempts and completions (32–35)

Further statistics relevant to this course

Mental health issues are common

- 1 in 4 people experience mental health issues each year (1)
- At any given time, 1 in 6 working-age adults have symptoms associated with mental ill health (2)
- 792 million people are affected by mental health issues worldwide (3)
- Mental illness is the second-largest source of burden of disease in England. Mental illnesses are more common, long-lasting, and impactful than other health conditions (4)
- Note: This replaces the statement 'Mental illness is the largest single source of burden of disease in the UK.' The latest available data is specific to England and suggests that musculoskeletal disorders are the top-ranked cause of burden of disease in the country.

Mental health and perceptions

- Over a third of the public think people with a mental health issue are likely to be violent (11)
- People with severe mental illness are more likely to be the victims, rather than the perpetrators, of violent crime (12–15)
- People with mental ill health are more dangerous to themselves than to others: 80-90% of people who die by suicide are experiencing mental distress (16,17)
- Poor mental health impacts on individuals and their families, in lost income, lower educational attainment, quality of life, and a much shorter life span (18–20)

What is depression?

- One of the leading causes of disability worldwide and a major contributor to suicide and coronary heart disease (23–25)
- 24% of women and 13% of men in England are diagnosed with depression in their lifetime (26)
- Often co-occurs with other mental health issues (2)

Thoughts of suicide

- Among the general population 20.6% of people have had suicidal thoughts at some time, 6.7% have attempted suicide and 7.3% have engaged in self-harm (2)
- People who identify as LGBT+ are more likely to have suicidal thoughts, and attempt suicide, than those who do not identify as LGBT+ (36–38)

Dual diagnosis

- 30–50% of people with a severe mental illness also have problems with substance use (39–41)
- Substantial numbers of people in contact with substance misuse services have mental illness (40,42,43)

What is an anxiety disorder?

- There were 8.2 million cases of anxiety in the UK in 2013 (44)
- Women are twice as likely to be diagnosed with anxiety (45,46)
- People who identify as LGBT+ are at increased risk of developing anxiety disorders (47,48)

Personality disorder (PD): What is it?

- Between 4% and 15% of people meet the diagnostic criteria for personality disorder (2,49)

Eating disorders

- At high risk of premature death and suicide (24)
- 6.4% of people in England have experienced symptoms of an ED (50)
- About 25% of those experiencing ED symptoms are male (51)
- Up to 16% of people who identify as LGBT+ experience symptoms of an ED (52,53)

Self-harm: What is it?

- More common in veterans, young people, women, LGBT+ people, prisoners, asylum seekers, and those who've been abused (54)
- The UK has one of the highest self-harm rates in Europe (55–57)
- People who self-harm are approximately 49 times more likely to die by suicide (58)

- Note: Further information on suicide risk following self-harm can be found in (59,60).

What is psychosis?

- 6% of the population say they have experienced at least one symptom of psychosis (2)
- Psychosis is more common among BAME groups (2,61–64)

Schizophrenia

- Average age of onset is lower in men (65–68)
- Males have a higher risk of developing schizophrenia during their lifetime (69)
- Affects fewer than 1 in 100 people during their lifetime (62,70,71)

Schizophrenia recovery rates

- 21st Century improvements in early intervention treatment methods and newer medicines mean better recovery rates (10 years from diagnosis):
 - 25% recovered completely from 1st episode.
 - 25% improved with treatment, recovery of (almost) all previous functioning, very few relapse events.
 - 25% improved, needed significant support to function normally and to get through relapse events.
 - 15% led chronic course with little or no improvement, repeated hospital stays over a prolonged part of adult life.
 - 10% died, usually as a result of suicide (72)

Bipolar (manic-depressive) disorder

- Around 2% of the population have experienced symptoms (2,73,74)
- Often starts between adolescence and mid-30s (75,76)
- Can take around 6 years to receive the correct diagnosis (77,78)

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