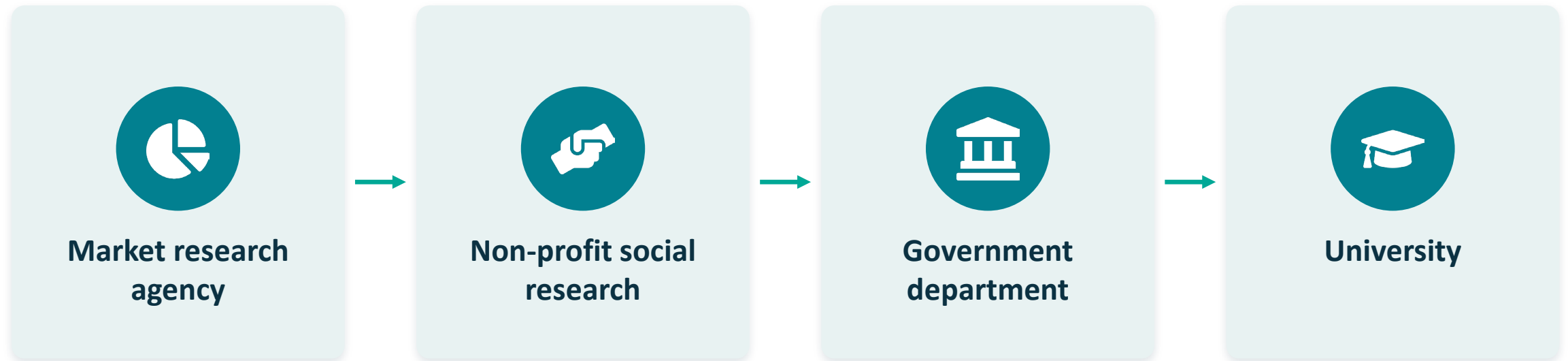


Surveying the mental health of the general population

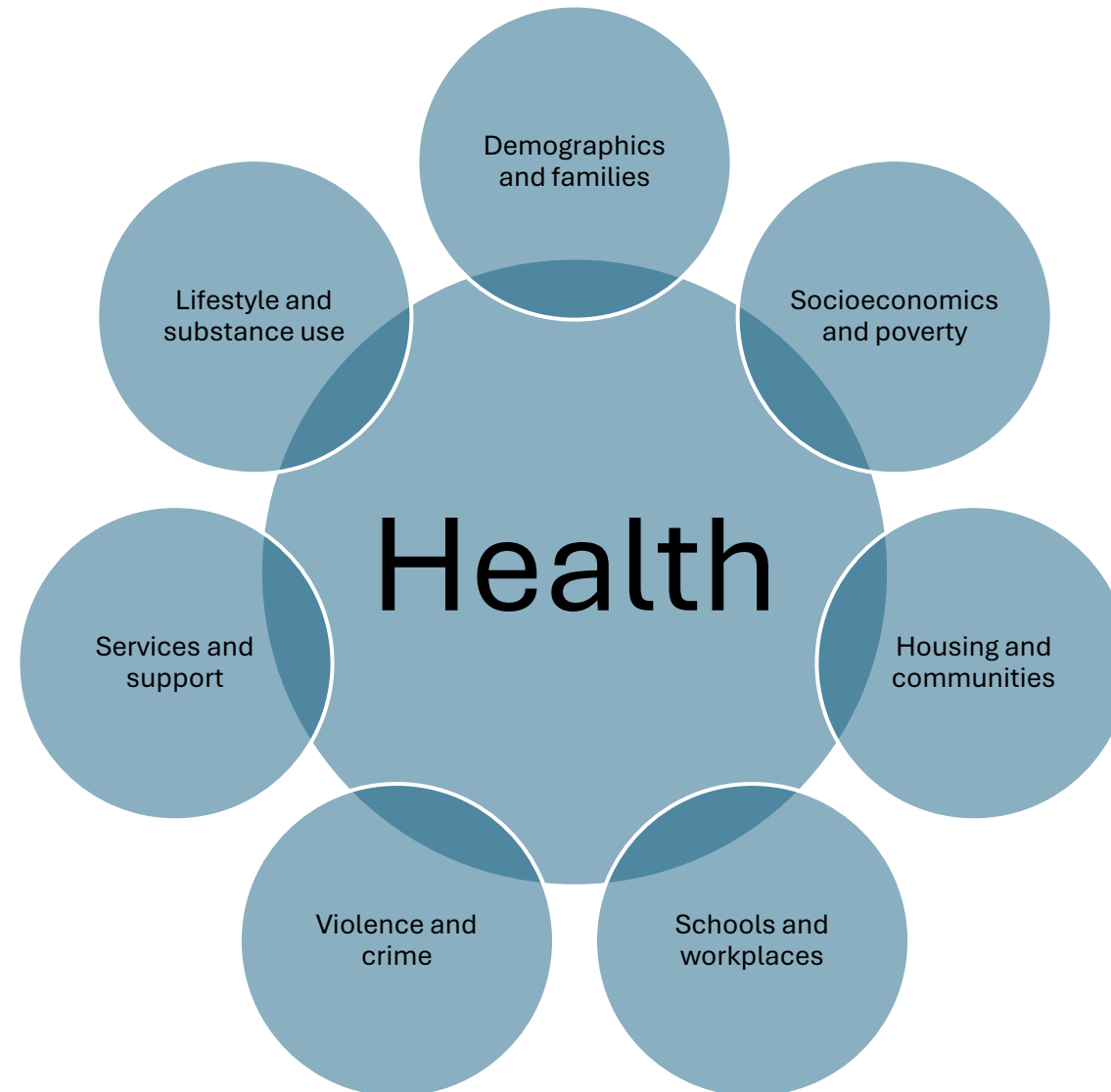
three decades of inequality and change

Professor Sally McManus, City St George's, University of London
Health Studies User Conference, June 2026

Health Studies User Conference: bringing together data producers and users from across sectors since 2004



We consider health through so many lens

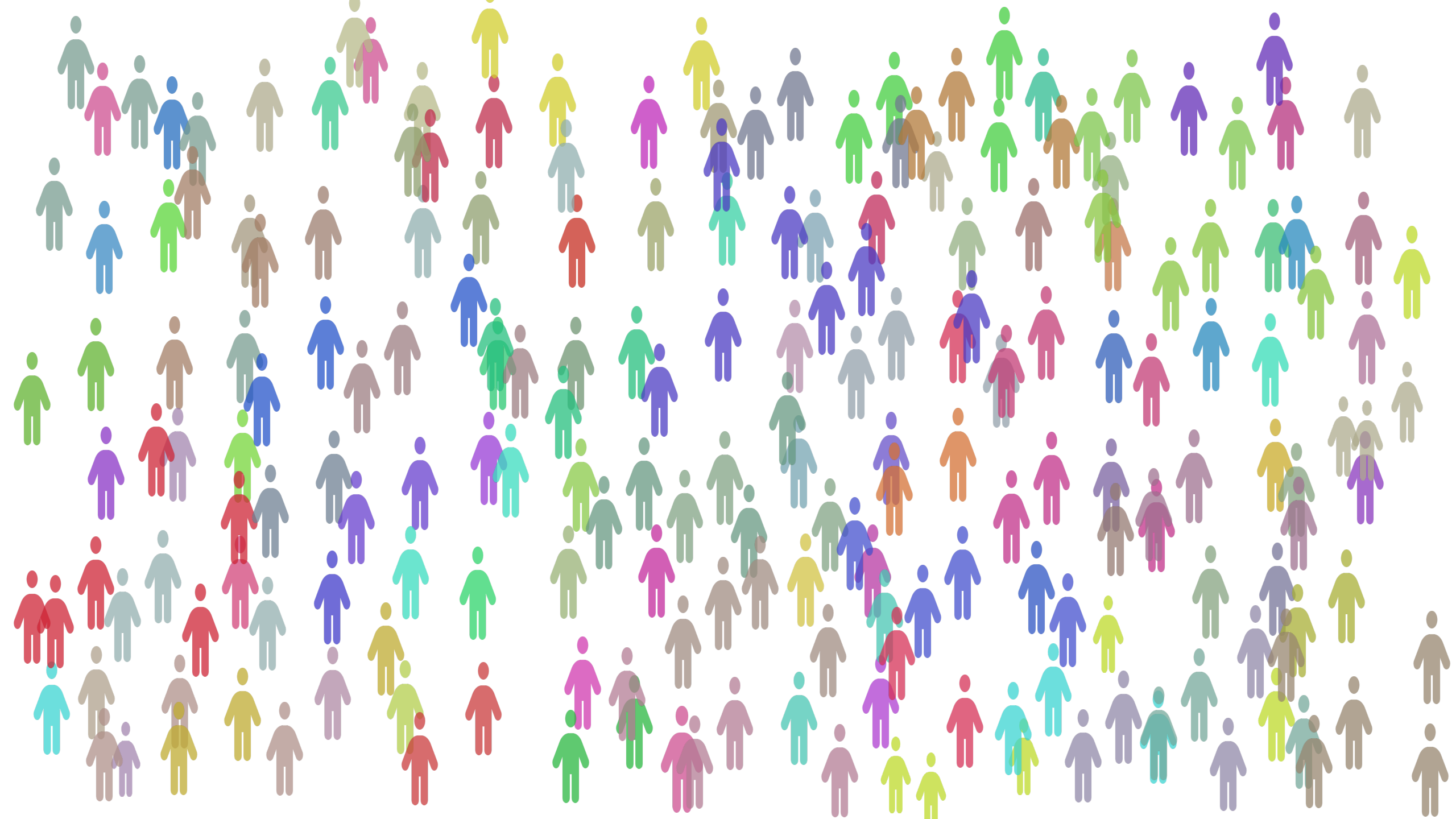




We include specialists,

and generalists





respondents



participants

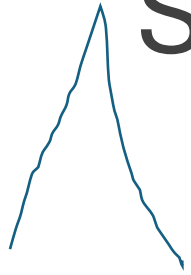


people

Surveys cost a lot and are expensive

a total bargain!

Good



Surveys cost a lot and are expensive



a total bargain!

Why spend on surveys when...

3.8 million adults experienced domestic abuse last year

A third of people found it hard to get a GP appointment

A quarter of parents can't afford family days out

A fifth of private rentals fail decent home standards

Why spend on surveys when...

3.8 million adults experienced domestic abuse last year

Crime Survey for England and Wales 2025

A third of people found it hard to get a GP appointment

GP Patient Survey 2025

A quarter of parents can't afford family days out

Mental Health of Children & YP survey 2023

A fifth of private rentals fail decent home standards

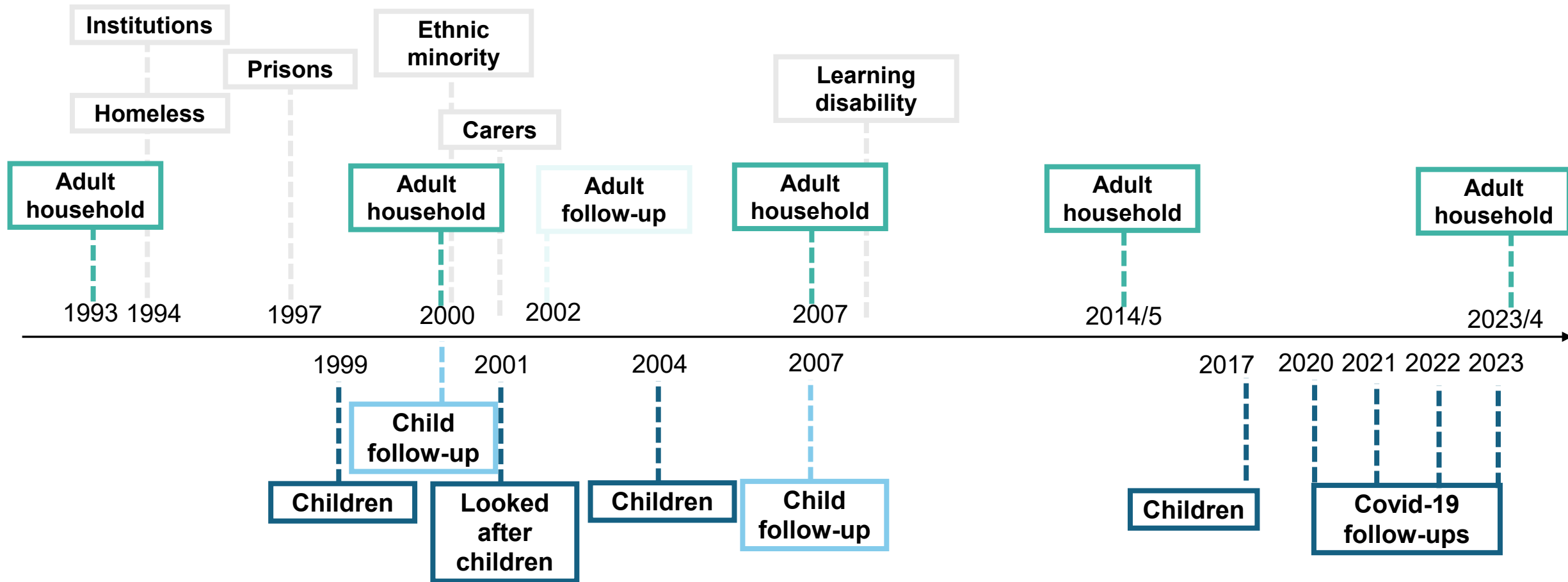
English Housing Survey 2024

What have surveys ever done for us?

OK, *other* than be our best source on...

- Prevalence: how many and who
- Change: going up or down
- Gaps: what gets missed
- Inequalities: who get missed
- Context, risk factors, impact...

England has the world's longest running mental health survey series



The Adult Psychiatric Morbidity Survey (APMS) 1993



<https://datacatalogue.ukdataservice.ac.uk/studies/study/3560#documentation>

REC1 SEQ 1 SC unless MC specified. N1361 1-4 = '0101' Sift Schedule MASTER SCHEDULE CASENO 5 DIGITS 6-10

IN CONFIDENCE

REGION ADDRESS HHD Hhd No NAs INTDAY INTMTH INTYEAR Date of Interview

REGION AREA ADDRESS No NAs

01-16 01-19 01-99 1-9 21 01-31 04-09 9 3 22-23 24-25 26-27

Interviewer's Name _____ Auth no. 1001-3999 AUTHNO 28-31

1. Interviewer: code at start of interview

Record from observation

Urban A1

Semi-rural

Rural

1 2 3 NA 32

Go to question 2, page 2

Interviewer: code at end of interview schedule

Eligible for long interview (Subject interview)

Coded 1 at 11(b), page 6 INTCHM1 - M7

Coded 1 at 13(b), page 7

Coded 1 at 14(b), page 7 MC = 7

Coded 1 at 17(b), page 8

Screened positive (coded 1) at P6, page 45

Has a score of 12 or more on check card

01 02 03 04 05 06 33-34 45-46

Go to Schedule B (Yellow)

Eligible for long interview (Proxy interview)

Coded 1 or 2 at Q2(b), page 46

Coded 1 at Q4(b), page 47

Coded 1 at Q5(b), page 47

Coded 1 or 2 at Q8(b), page 48

07 08 09 10

Go to Schedule B (Yellow)

Others - eligible for short interview

Subject interview

Proxy interview

11 12

Go to Schedule C (Green)

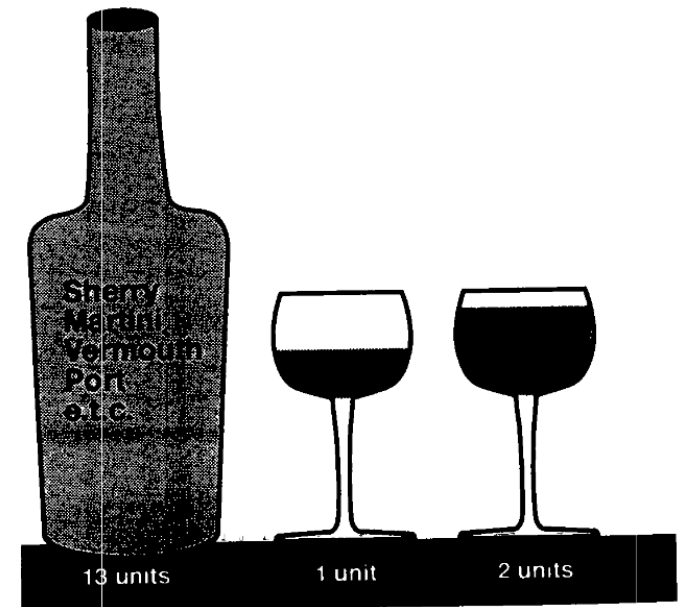
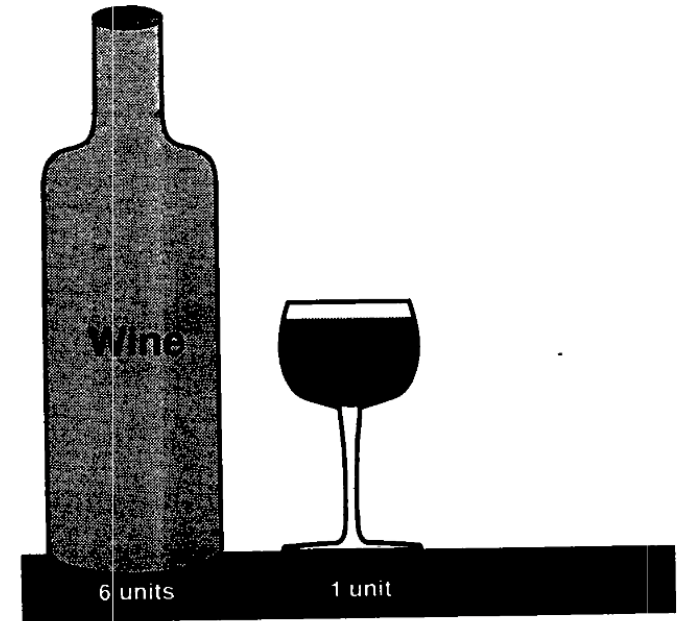
1

76

Gross income - Before deductions

<u>Per week</u>		<u>Per year</u>
Less than £20	1	Less than £1,000
£20 to £39	2	£1,000 to £1,999
£40 to £59	3	£2,000 to £2,999
£60 to £79	4	£3,000 to £3,999
£80 to £99	5	£4,000 to £4,999
£100 to £119	6	£5,000 to £5,999
£120 to £139	7	£6,000 to £6,999
£140 to £159	8	£7,000 to £7,999
£160 to £179	9	£8,000 to £8,999
£180 to £199	10	£9,000 to £9,999
£200 to £219	11	£10,000 to £10,999
£220 to £239	12	£11,000 to £11,999
£240 to £259	13	£12,000 to £12,999
£260 to £279	14	£13,000 to £13,999
£280 to £299	15	£14,000 to £14,999
£300 to £349	16	£15,000 to £17,499
£350 to £399	17	£17,500 to £19,999
£400 to £499	18	£20,000 to £24,999
£500 to £599	19	£25,000 to £29,999
£600 or more	20	£30,000 or more

SHERRY WINE



THE HEALTH AND WELL-BEING OF THE NATION

What the survey is about

This survey on the health and well-being of the nation is being conducted by the Office of Population Censuses and Surveys on behalf of the Department of Health. The main purposes of the survey are to find out:

- * how people all over England are coping with the strains and stresses of everyday life
- * what things make people nervous, anxious or depressed
- * what people do for help or support when they need it

Why the survey is taking place

The Department of Health needs a clear, up to date picture of the health and well-being of the nation. The information obtained from this survey can help in the development of policies aimed at providing services, help and support to those in need of them.

How your address was chosen

All households in this survey have been chosen purely by chance by taking a random sample of addresses from a list of all addresses in the country and then approaching the people who happen to live at those addresses.



What is the study about?

Since 1993, the National Study of Health and Wellbeing has been finding out how everyday stresses, strains and joys affect our lives.

How did you sleep yesterday? Did you have a good week at work or college? Do you look after other people? By asking questions like these we can improve understanding of how such experiences can impact on our health and wellbeing.

We are going to interview around 11,000 adults aged 16 or over across England. This information will inform local and national planning and improve the services you use.

What is involved?

Taking part is voluntary. If you agree to take part, one of our interviewers will ask you some questions about your everyday life and your physical and mental health. For the most personal questions they will ask you to directly answer so the interviewer will not know your answers. You can choose to answer as few or as many questions as you like. The interview will take around 90 minutes and can be arranged at a time that suits you.

To find out more information about the survey and what is involved ask your interviewer or visit our website www.natcen.ac.uk/wellbeing



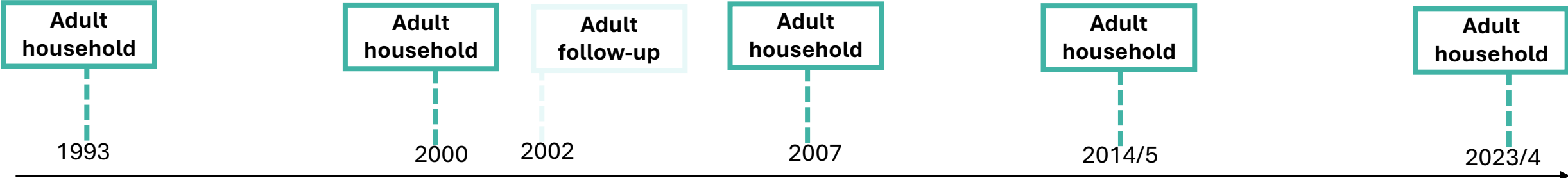
Why take part?

The study is mapping the nation's health and wellbeing. It's really important that we talk to all kinds of people. You have been chosen at random to make sure we get a representative picture of everyone in England which means we cannot replace you with anyone else. Your voice is important to us. Whatever your situation, we want to hear about your experiences and opinions.

Who is carrying out the research?

NHS Digital have commissioned NatCen Social Research to carry out this study with the University of Leicester. The Department of Health and Social Care are funding it. NHS Digital is the national digital, data and technology delivery partner for the NHS and social care system in England. It supplies information and data to the health service, provides vital technological infrastructure, and helps different parts of health and care work together. In early 2023, NHS Digital will be merging with NHS England.

The Adult Psychiatric Morbidity Survey (APMS) – England’s survey of the mental health in the general population



APMS is the source for England's accredited Official Statistics on mental health

Repeated cross-sectional survey series

Comparable methods each wave

Random sample of adults (16 to 100+)

Detailed interviews, in person at home

Conditions assessed to diagnostic criteria

Two-phase design



Covers a range of conditions: some clinical assessments and some brief screening tools

- Alcohol dependence: AUDIT, SAD
- Attention-deficit/hyperactivity disorder: ASRS
- Autism: AQ, ADOS
- Bipolar disorder: MDQ
- Common mental disorders: CIS-R
- Drug dependence: DSM-criteria
- Eating disorder: SCOFF, EDE-QS, SCAN-ED
- Personality disorder: SCID-II-SC, SAPAS
- Posttraumatic stress disorder: PCL-C
- Problem gambling: PGSI
- Psychotic disorder: PSQ, SCAN
- Suicidal thoughts, suicide attempts, self-harm: CIS-R

Four short stories only a survey like this can tell...

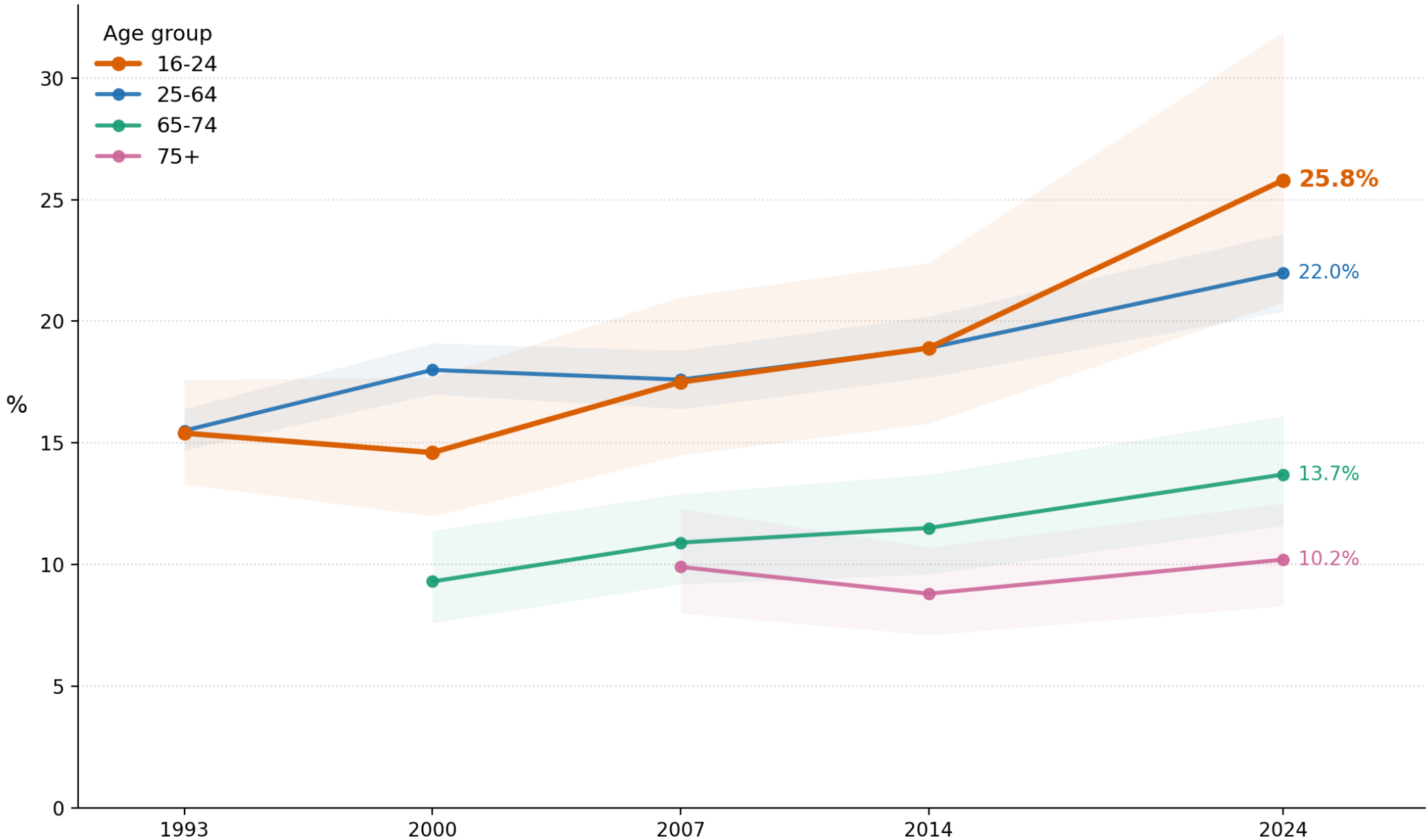
**Specific forms of distress:
diverging trends**

**Beyond consumption:
emerging dependence risks**

**Mental health on the margins:
including people with psychosis**

**Risk factors and context:
violence and abuse**

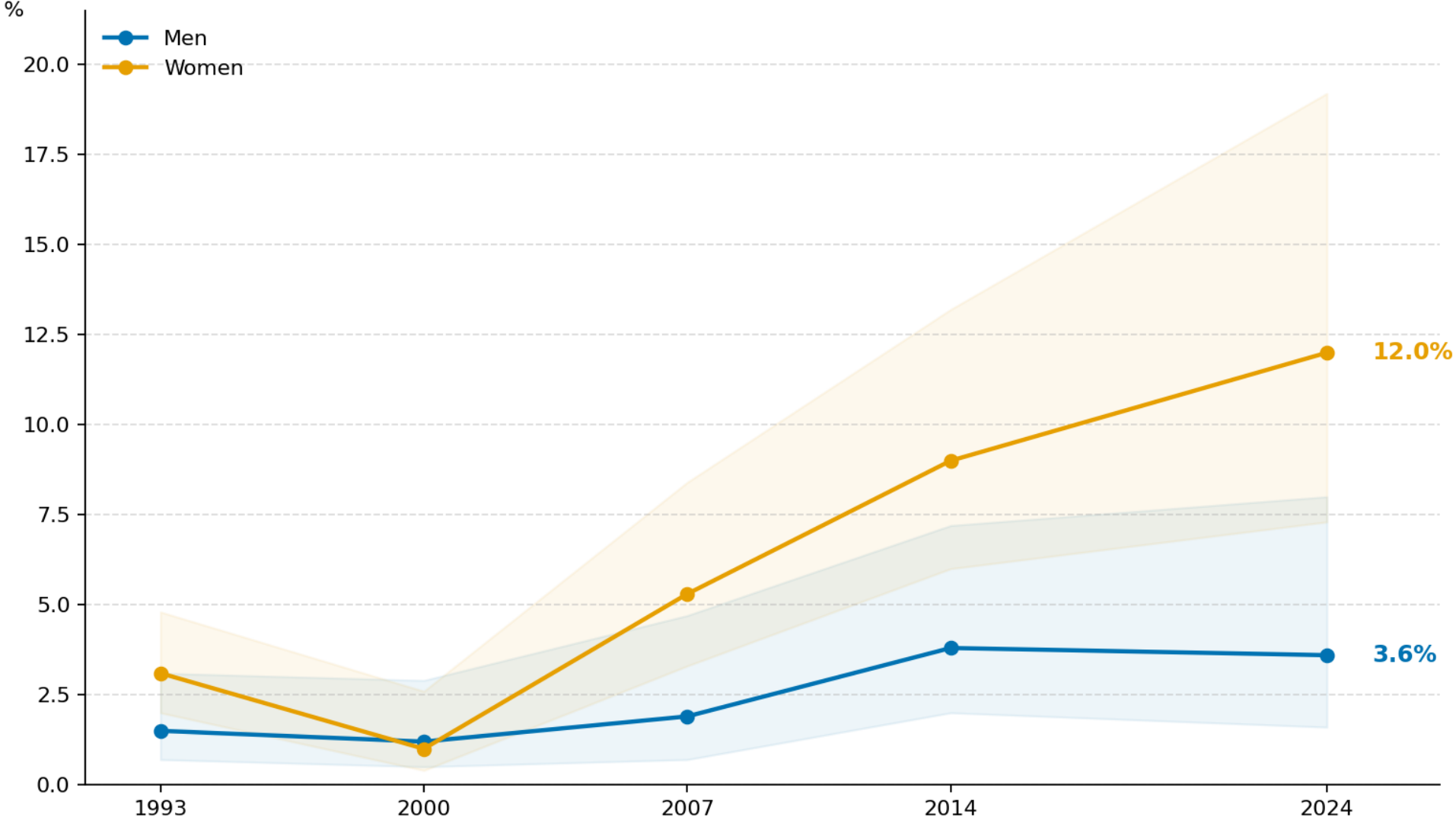
Proportion of adults with depression or an anxiety disorder (CIS-R) by age group, APMS 1993-2024



Generalised Anxiety Disorder (GAD, CIS-R) in 16 to 24 year olds by sex, APMS 1993-2024

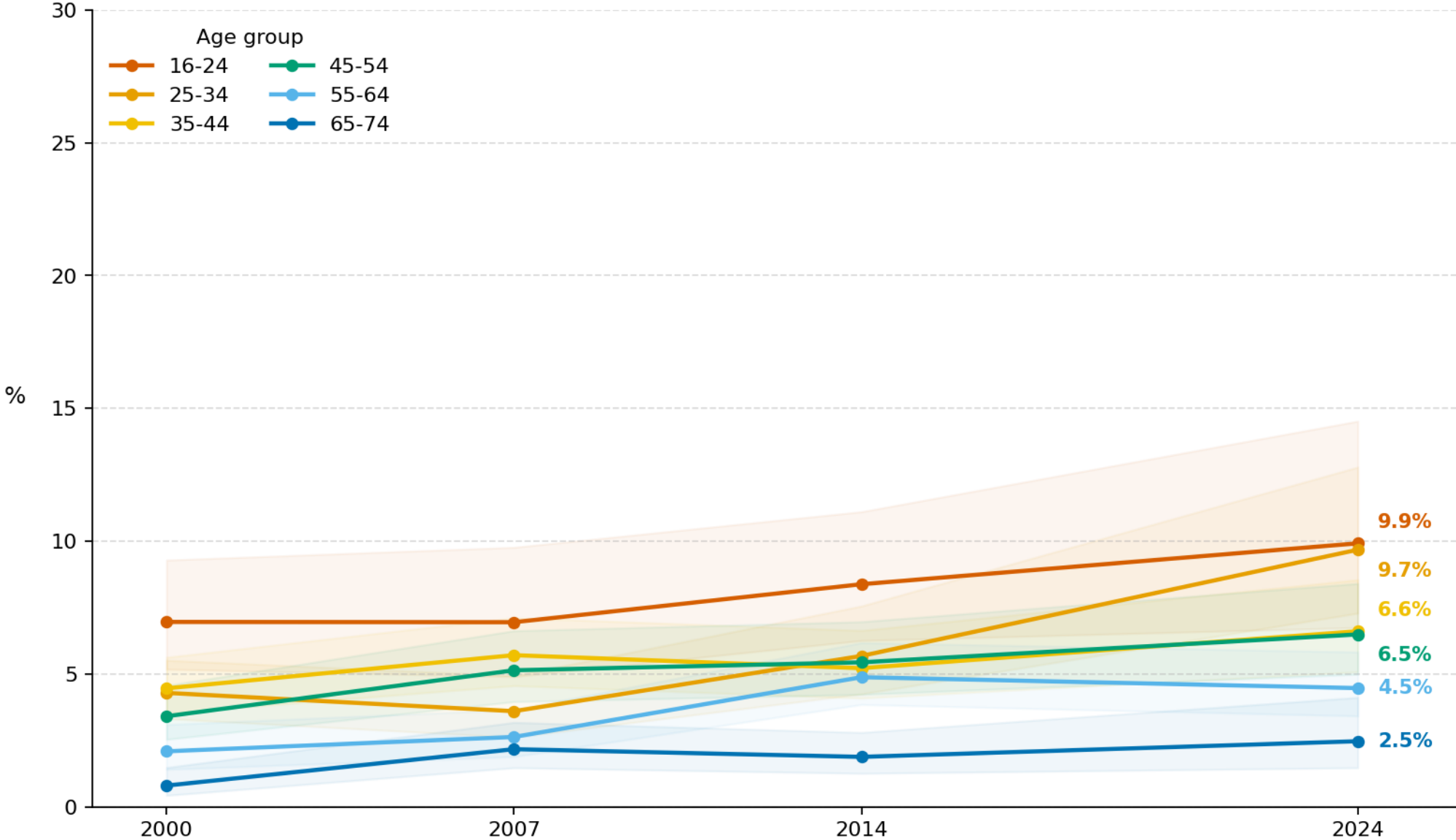
Most common CMD

- Excessive worry
- across many areas of life
- physical symptoms (palpitations, nausea)
- lasting at least six months.



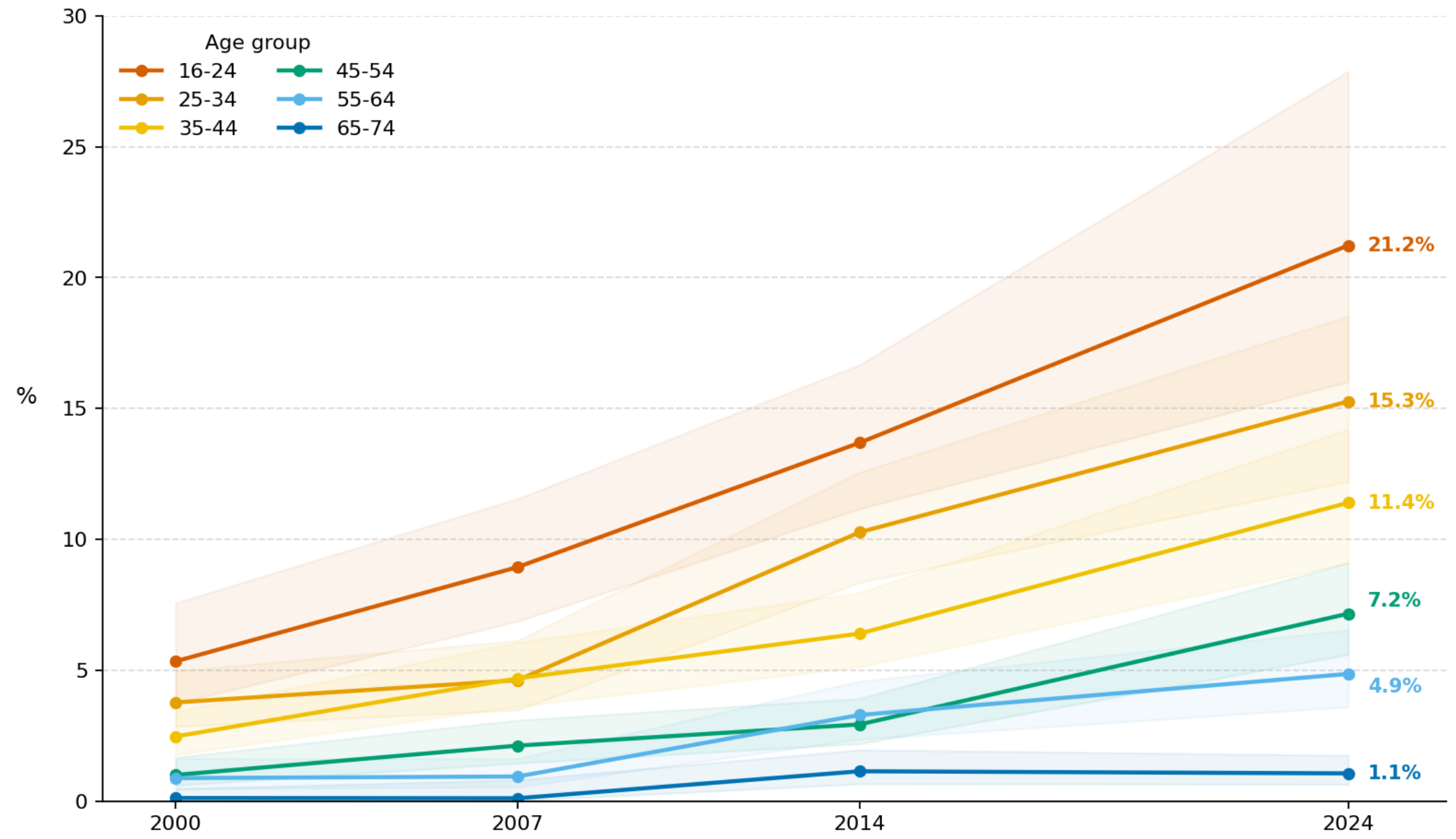
Source: Adult Psychiatric Morbidity Surveys 1993, 2000, 2007, 2014, 2024. Adults aged 16 to 24 in England. 95% confidence intervals shown.

We see a slight upward trend in reporting having had suicidal thoughts in the past year, APMS 1993-2024



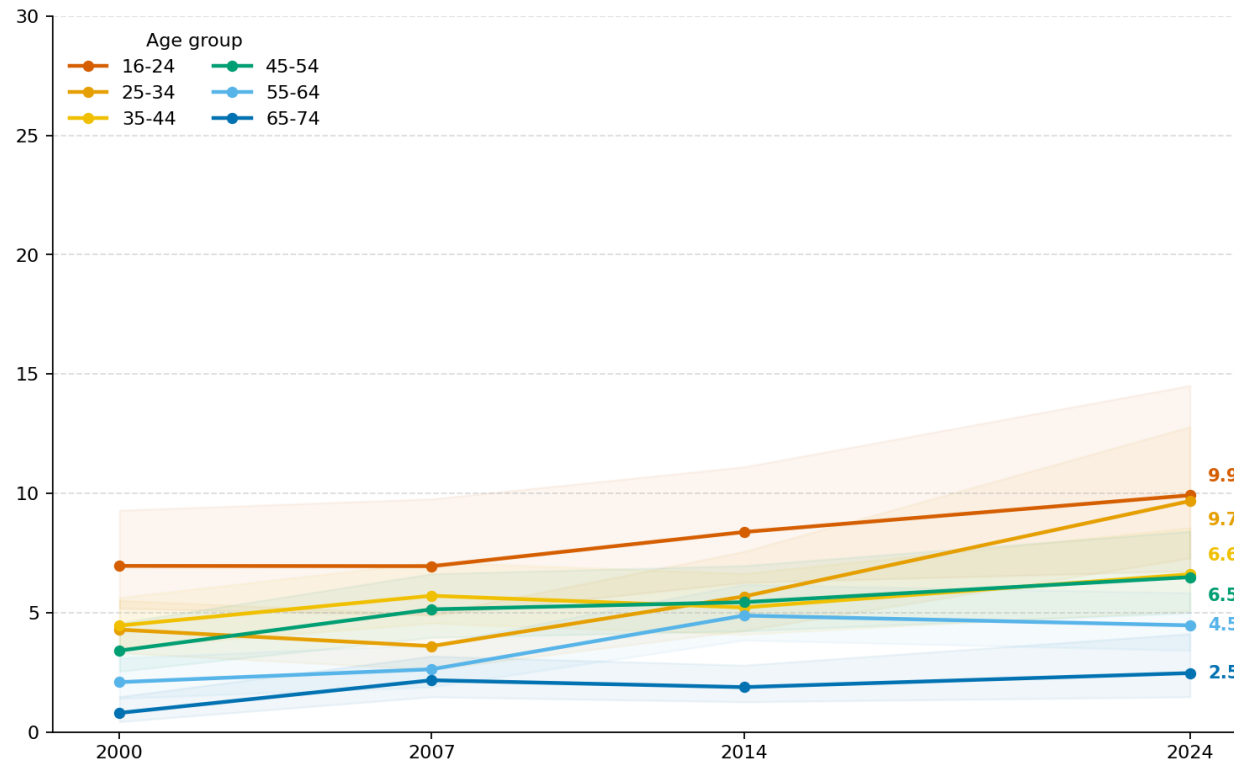
Suicidal thoughts in the past year, by age group. Face-to-face responses, adults 16-74 (for comparability across waves). Shaded bands are 95% CIs. Source: Adult Psychiatric Morbidity Survey 2023/4, Tables 4.2 and B1 (waves 2000, 2007, 2014, 2023/4).

Non-suicidal self harm (CIS-R) ever in adults by age group, APMS 2000–2024



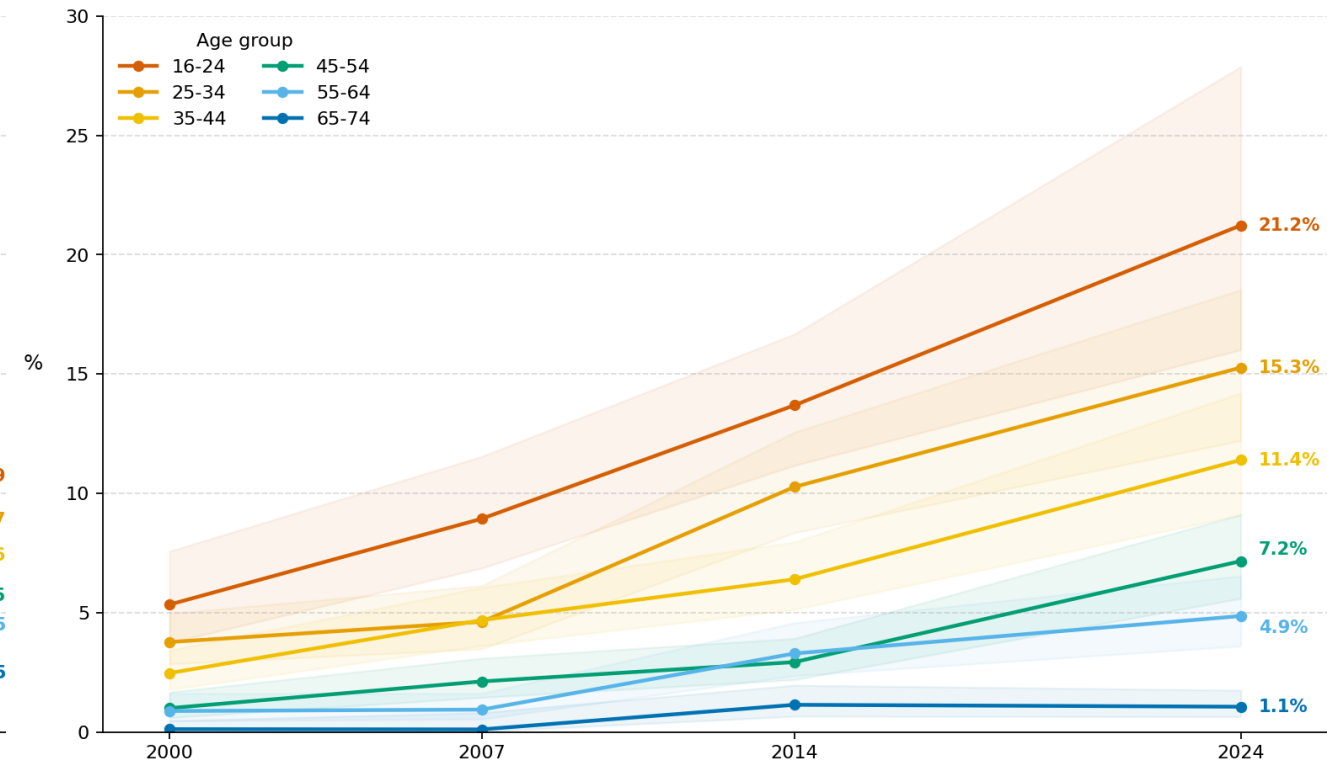
Non-suicidal self-harm (ever), by age group. Face-to-face responses, adults 16-74 (for comparability across waves). Shaded bands are 95% CIs. Source: Adult Psychiatric Morbidity Survey 2023/4, Tables 4.2 and B1 (waves 2000, 2007, 2014, 2023/4).

Past year suicidal thoughts by age, 2000-2024



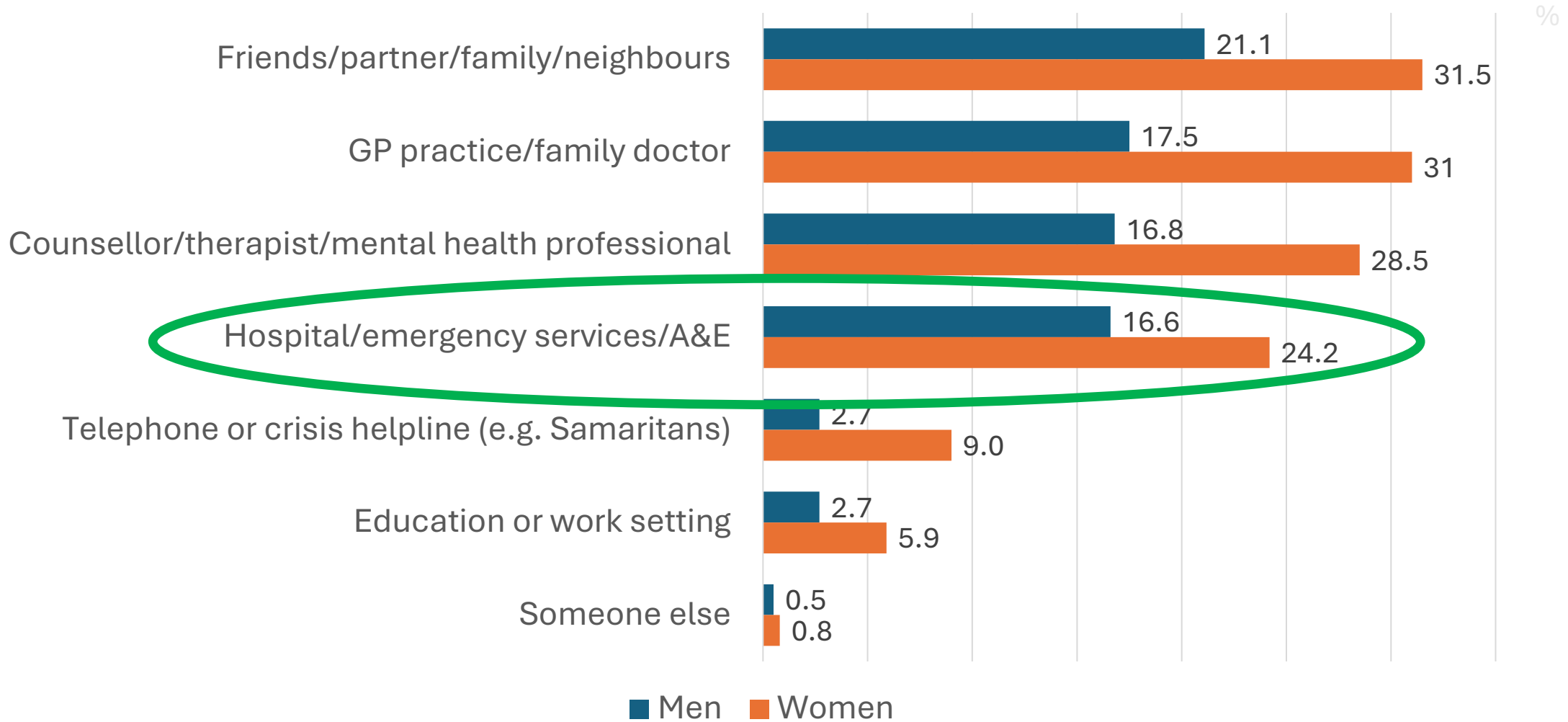
Past year suicidal thoughts in the past year, by age group. Face-to-face responses, adults 16-74 (for comparability across waves). Shaded bands are 95% CIs. Source: Adult Psychiatric Morbidity Survey 2023/4, Tables 4.2 and B1 (waves 2000, 2007, 2014, 2023/4).

Non-suicidal self harm ever by age, 2000-2024



Non-suicidal self-harm (ever), by age group. Face-to-face responses, adults 16-74 (for comparability across waves). Shaded bands are 95% CIs. Source: Adult Psychiatric Morbidity Survey 2023/4, Tables 4.2 and B1 (waves 2000, 2007, 2014, 2023/4).

Not everyone gets support after a suicide attempt... implications for interpreting health service data



Self-completion reports

Four short stories I think only a survey like this can tell...

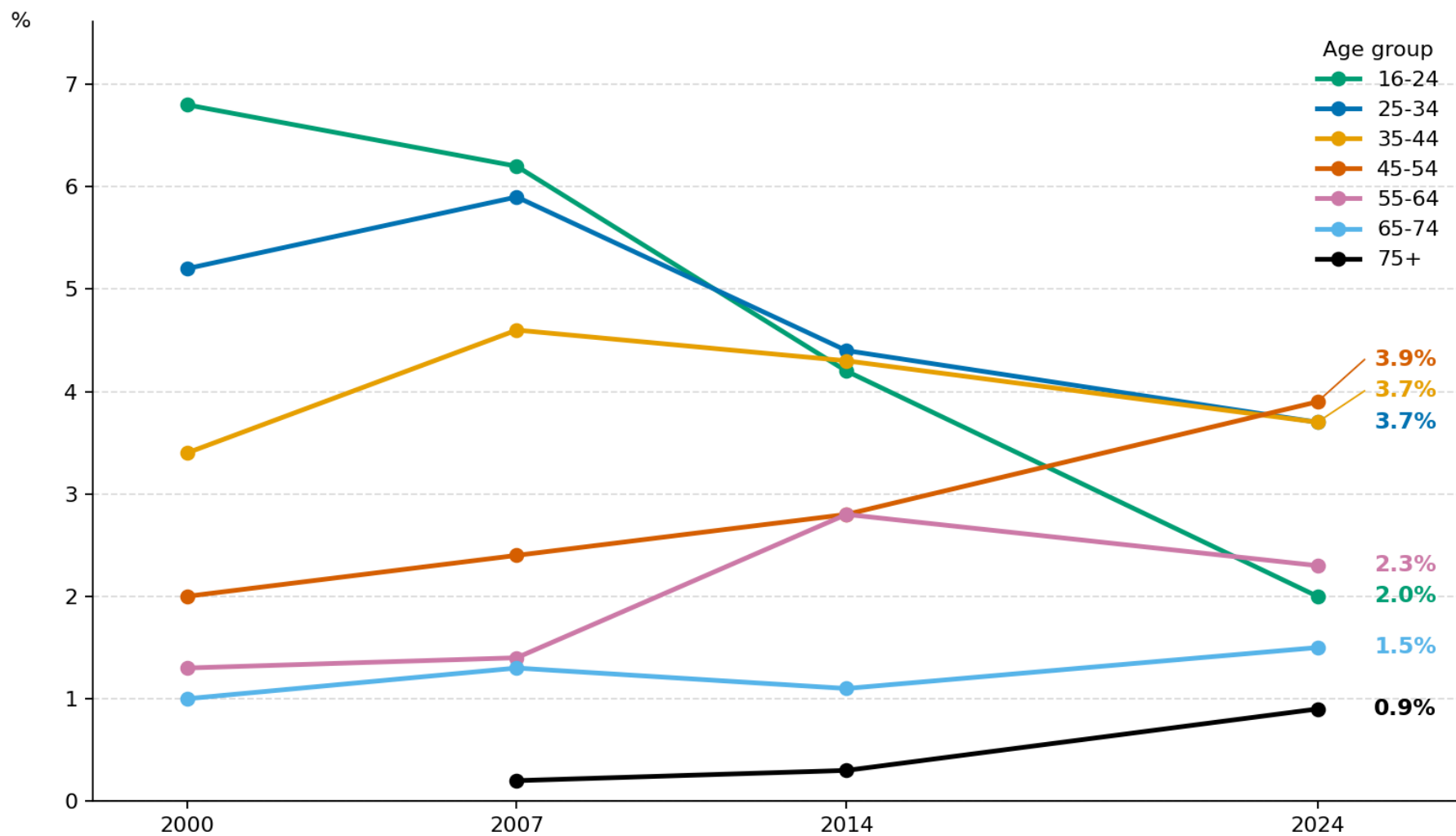
**Specific forms – and who's missing
from health service data**

**Beyond consumption:
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**Mental health on the margins:
including people with psychosis**

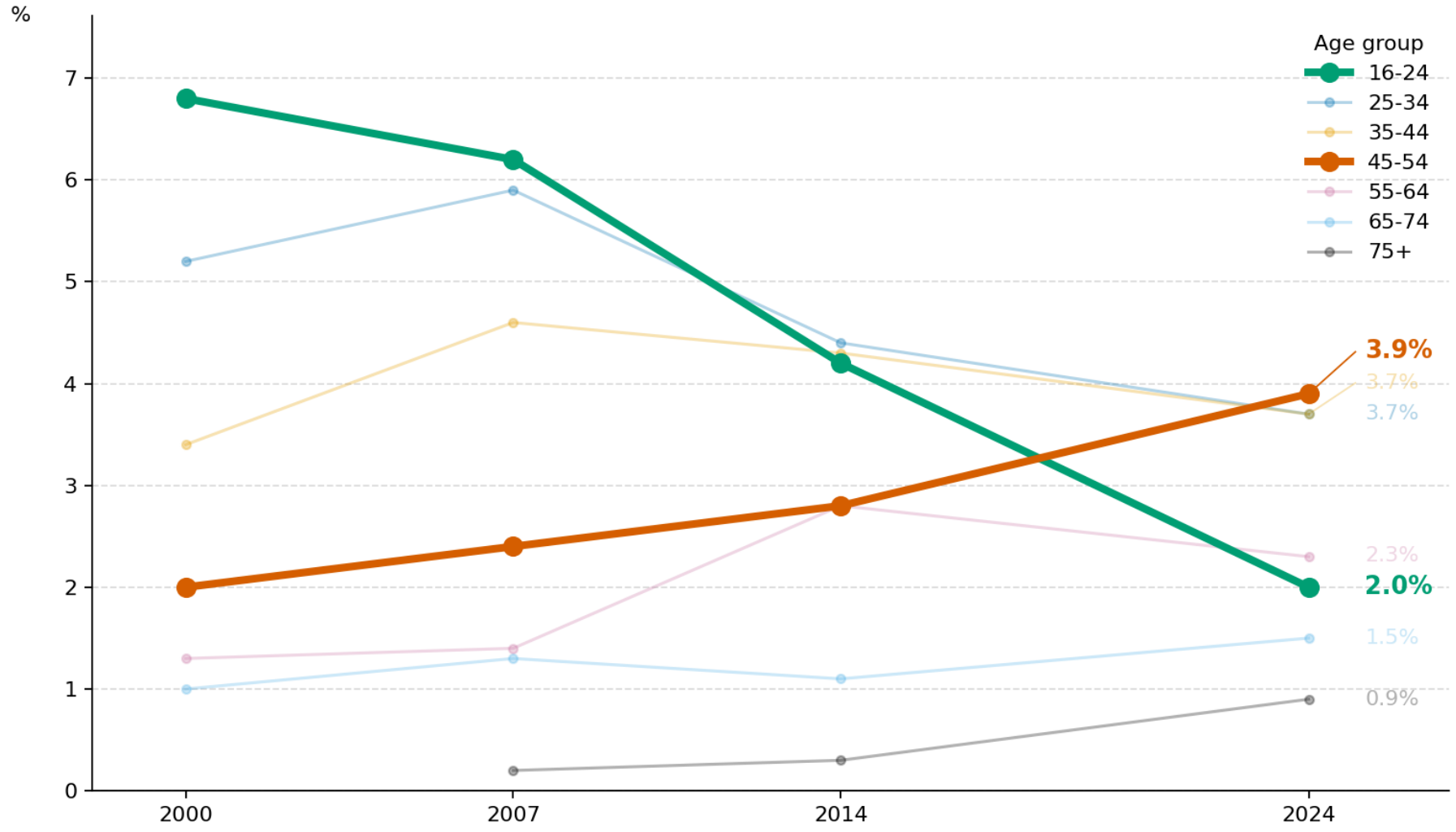
**Risk factors and context:
Violence and abuse**

There's a lot going on in this slide showing us the proportion of adults scoring 16+ on the AUDIT by age group



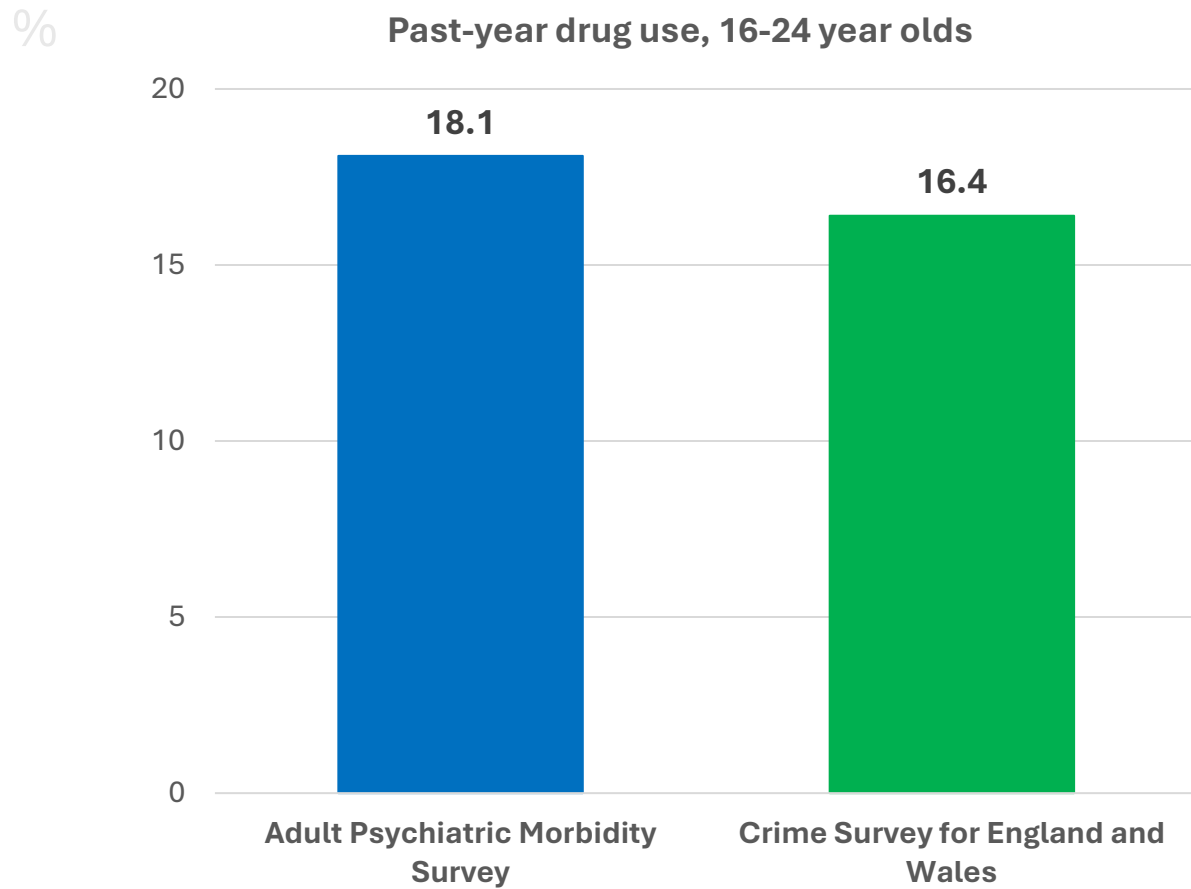
Source: Adult Psychiatric Morbidity Surveys 2000, 2007, 2014, 2024.
Adults aged 16 to 74 in England. Alcohol dependence: AUDIT score 16 or more (harmful or dependent drinking).

We may need to worry about how mid-lifers will age – they are twice as likely to score AUDIT 16+ cf 2000. But can we assume emerging adults are ok in terms of their substance?



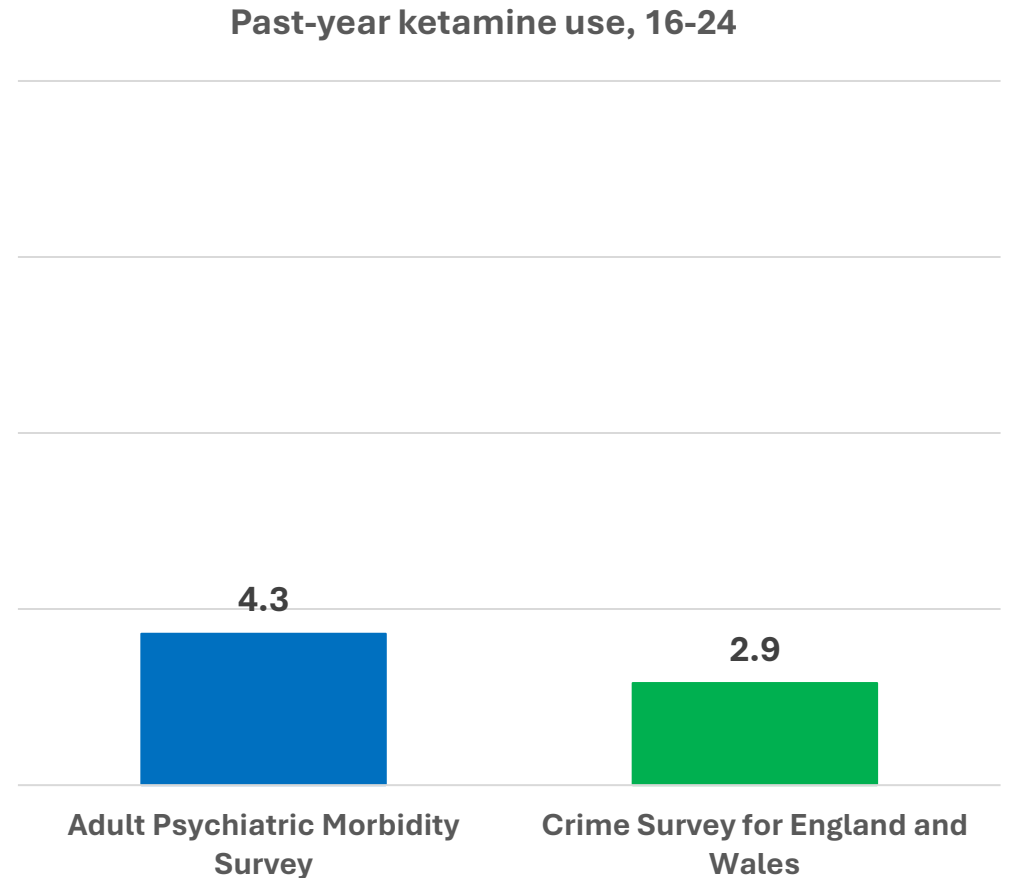
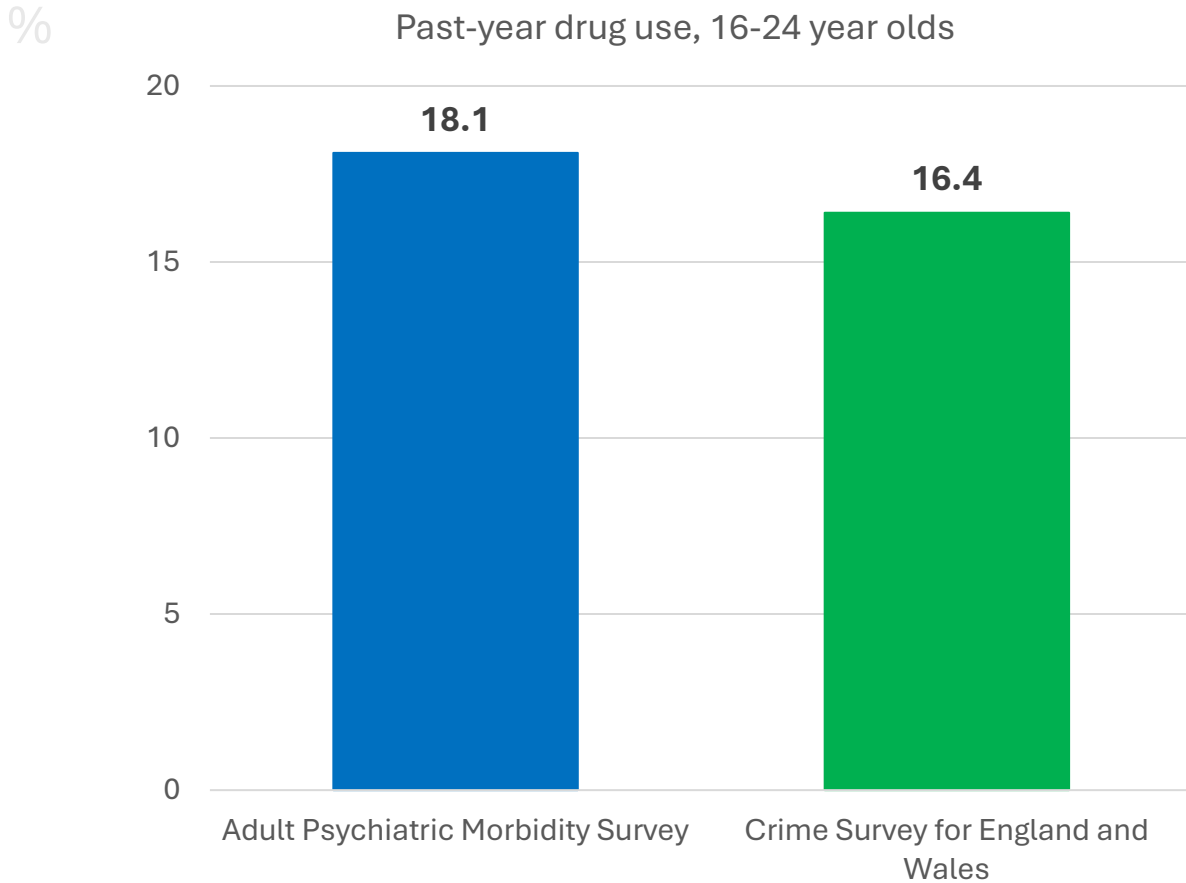
Source: Adult Psychiatric Morbidity Surveys 2000, 2007, 2014, 2024. Adults aged 16 to 74 in England. Alcohol dependence: AUDIT score 16 or more (harmful or dependent drinking).

Drug use may be more common than official statistics suggest: people more willing to report illicit drug use in a health survey, than a crime survey?



Proportion of 16 to 24 year olds reporting use of any illicit drug as measured on the 2024 APMS and 2024 CSEW

Drug use may be more common than official statistics suggest: people more willing to report illicit drug use in a health survey, than a crime survey?

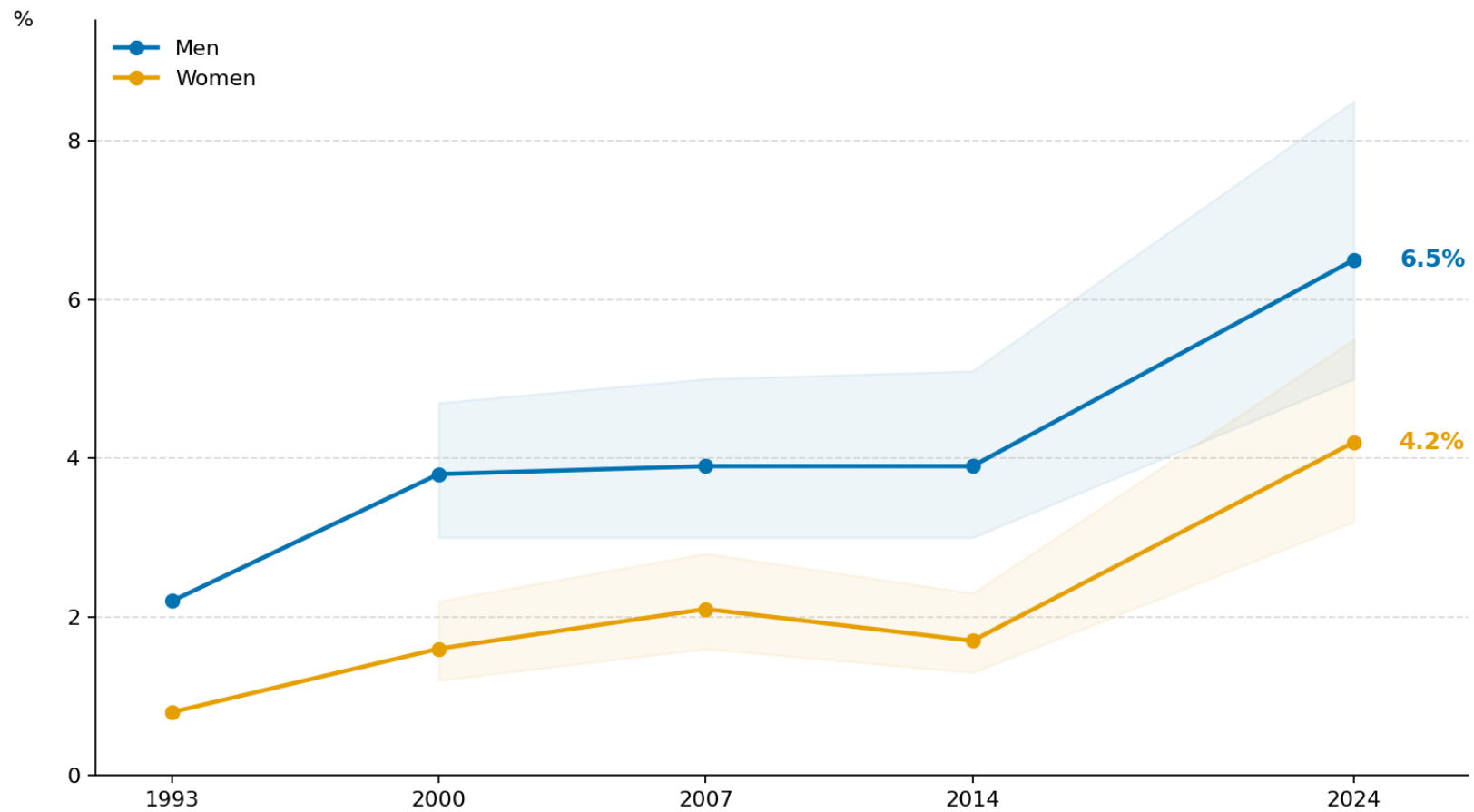


Proportion of 16 to 24 year olds reporting illicit (non-medical) use of any drug or if ketamine as measured on the 2024 APMS and 2024 CSEW

Still, surveys measuring drug use show stability...

- does that mean levels of harm are stable too?

Signs of dependence - specifically on cannabis - almost doubled this decade

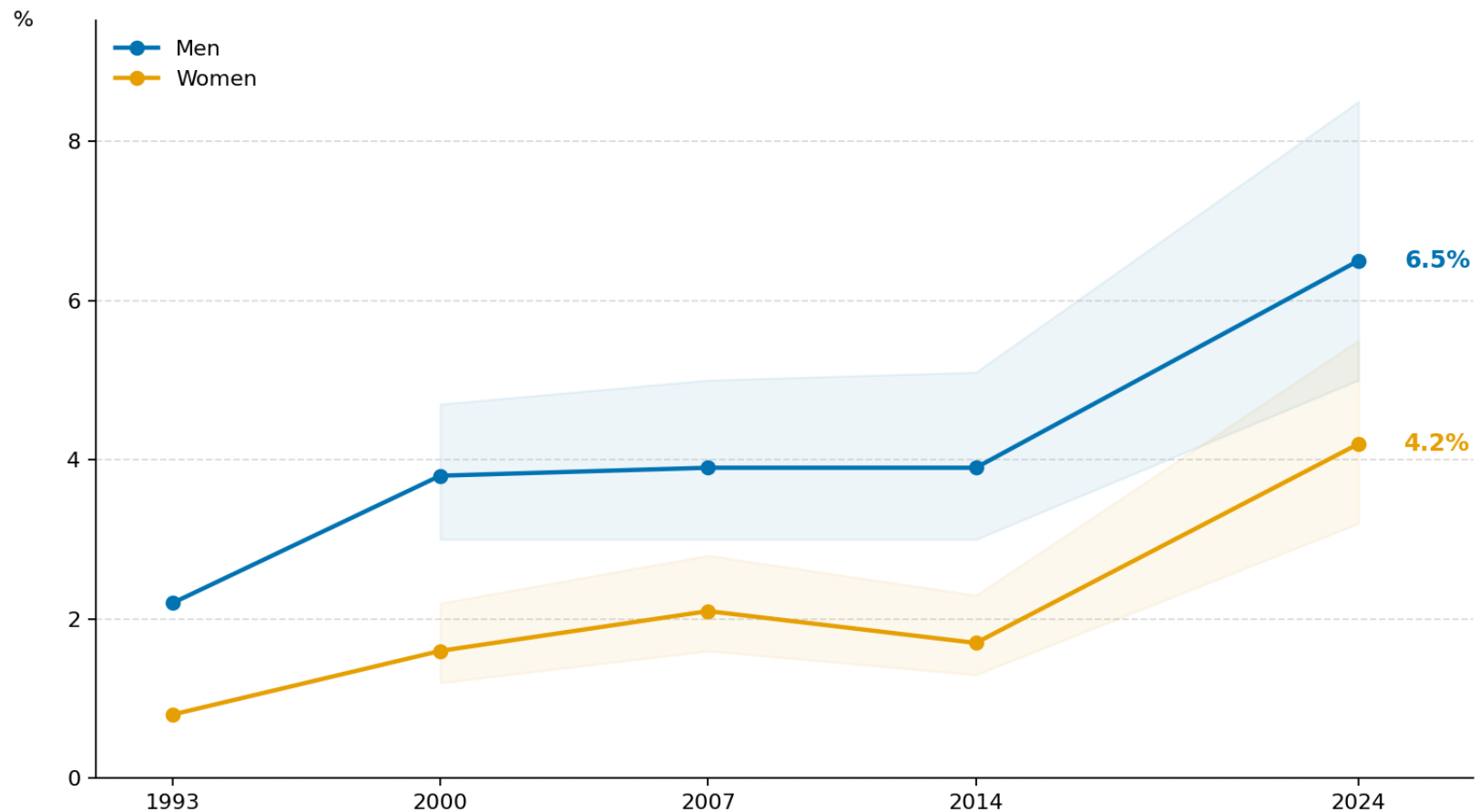


Source: Adult Psychiatric Morbidity Surveys 1993, 2000, 2007, 2014, 2024.
Adults aged 16 to 64 in England. 95% confidence intervals shown from 2000 (not published for 1993).
Signs of dependence on cannabis only (excludes those also dependent on other drugs).

Signs of possible dependence on illicit drugs in the past year asked about:

- Daily use for two weeks or more
- Sense of need or dependence
- Inability to abstain
- Increased tolerance
- Withdrawal symptoms

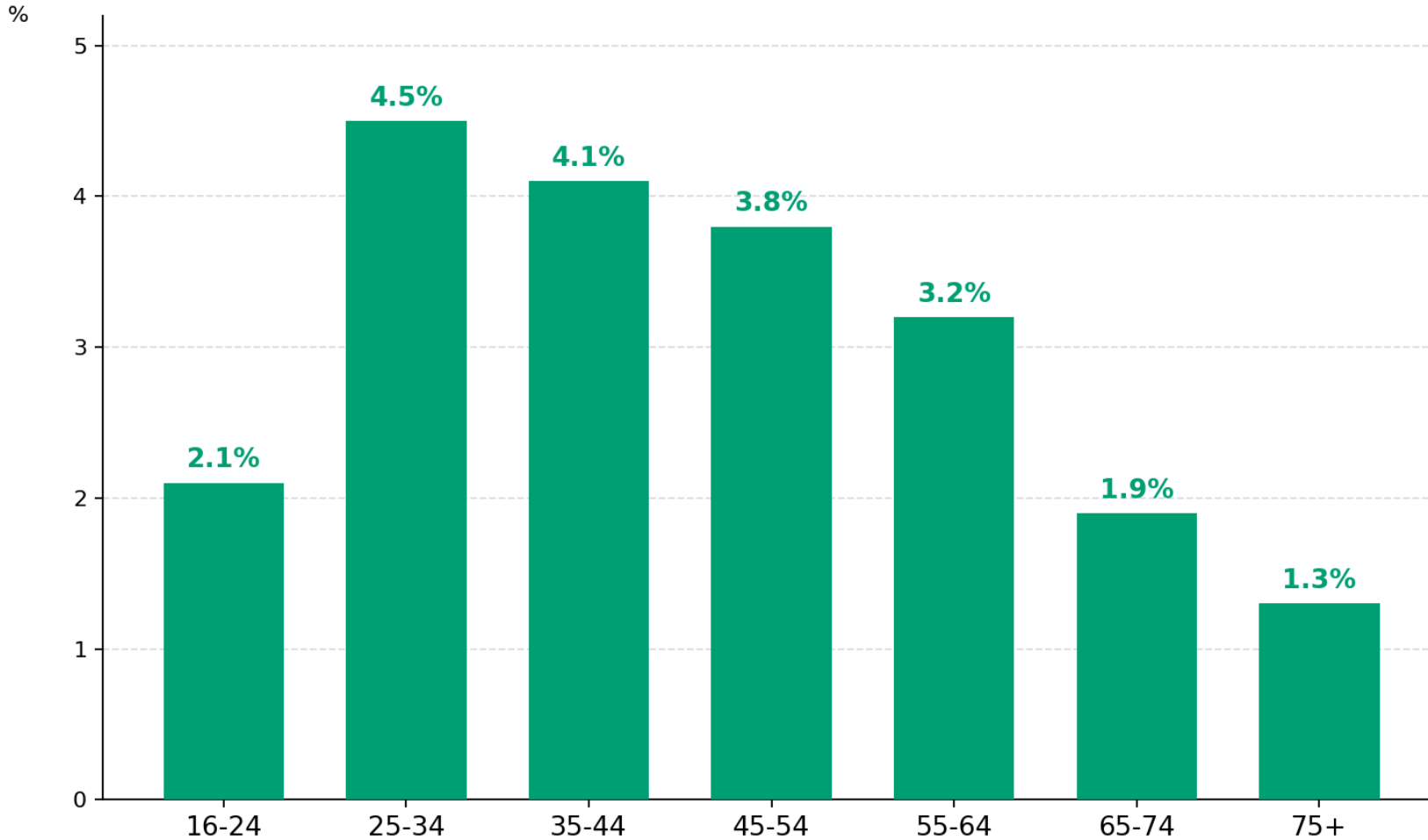
Signs of dependence - specifically on cannabis - almost doubled this decade



- Despite proportion *using* cannabis being stable.
- signs of *dependence* rising steeply
- Changing potency, impurities, vaping devices...

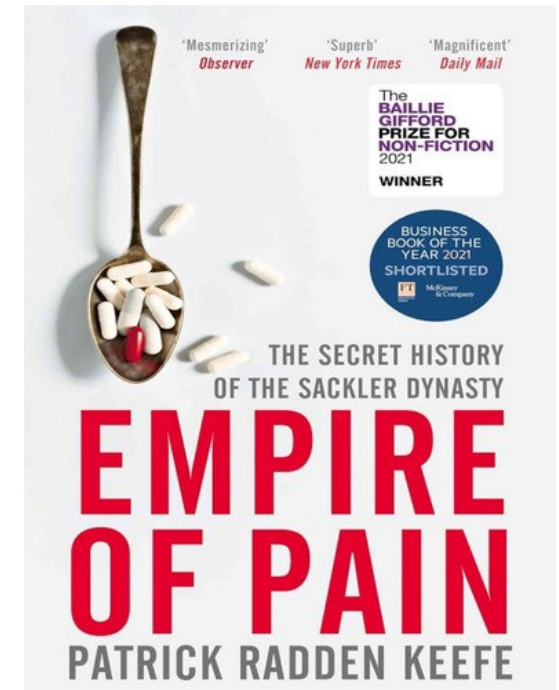
Source: Adult Psychiatric Morbidity Surveys 1993, 2000, 2007, 2014, 2024.
Adults aged 16 to 64 in England. 95% confidence intervals shown from 2000 (not published for 1993).
Signs of dependence on cannabis only (excludes those also dependent on other drugs).

Non-prescribed use of prescription opioids (e.g. buprenorphine, fentanyl, morphine, oxycodone and tramadol): 3.1% of adults

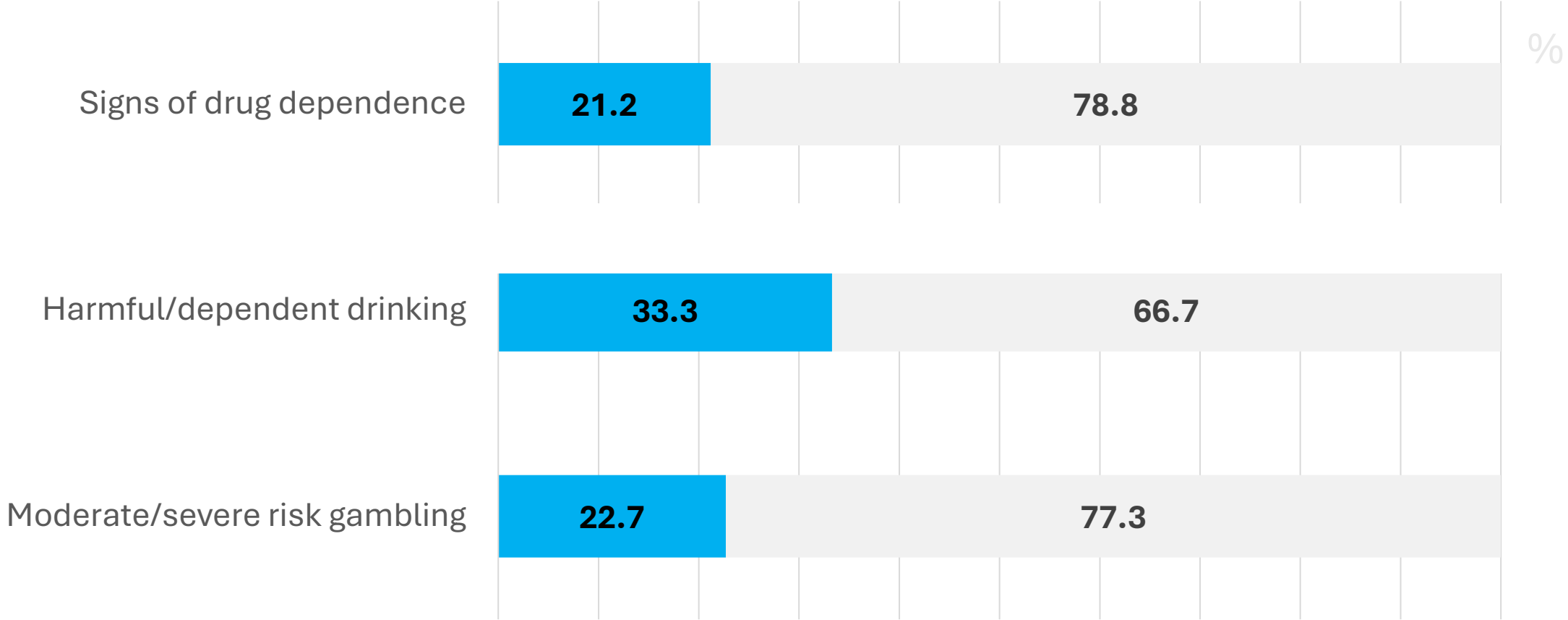


Source: Adult Psychiatric Morbidity Survey 2024. Adults aged 16+ in England.
Lifetime non-medical use of prescription opioids (e.g. buprenorphine, fentanyl, morphine, oxycodone, tramadol).

Highest in 25-34 year olds,
so perhaps less likely to be
using for medical reasons?

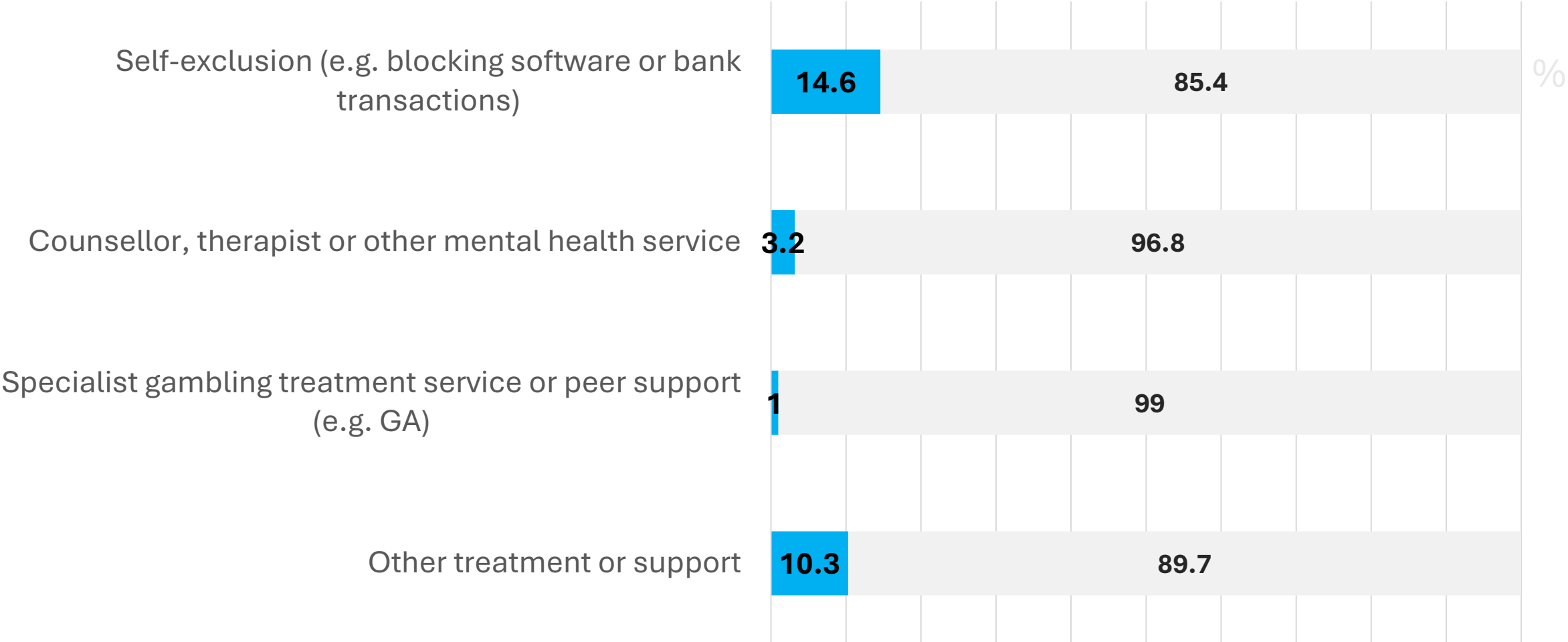


Ever received treatment or support specifically related to **alcohol, drug use, or gambling**, among people with that need



Proportion of adults (16+) with signs of drug dependence who report having ever received any treatment or support related to their drug use, 2024 APMS.

Among adults with moderate/severe risk gambling, types of treatment or support ever received for gambling



Proportion of adults (16+) with PGSI 8+ who report having ever received each type of treatment or support related to their gambling, 2024 APMS.

Four short stories I think only a survey like this can tell...

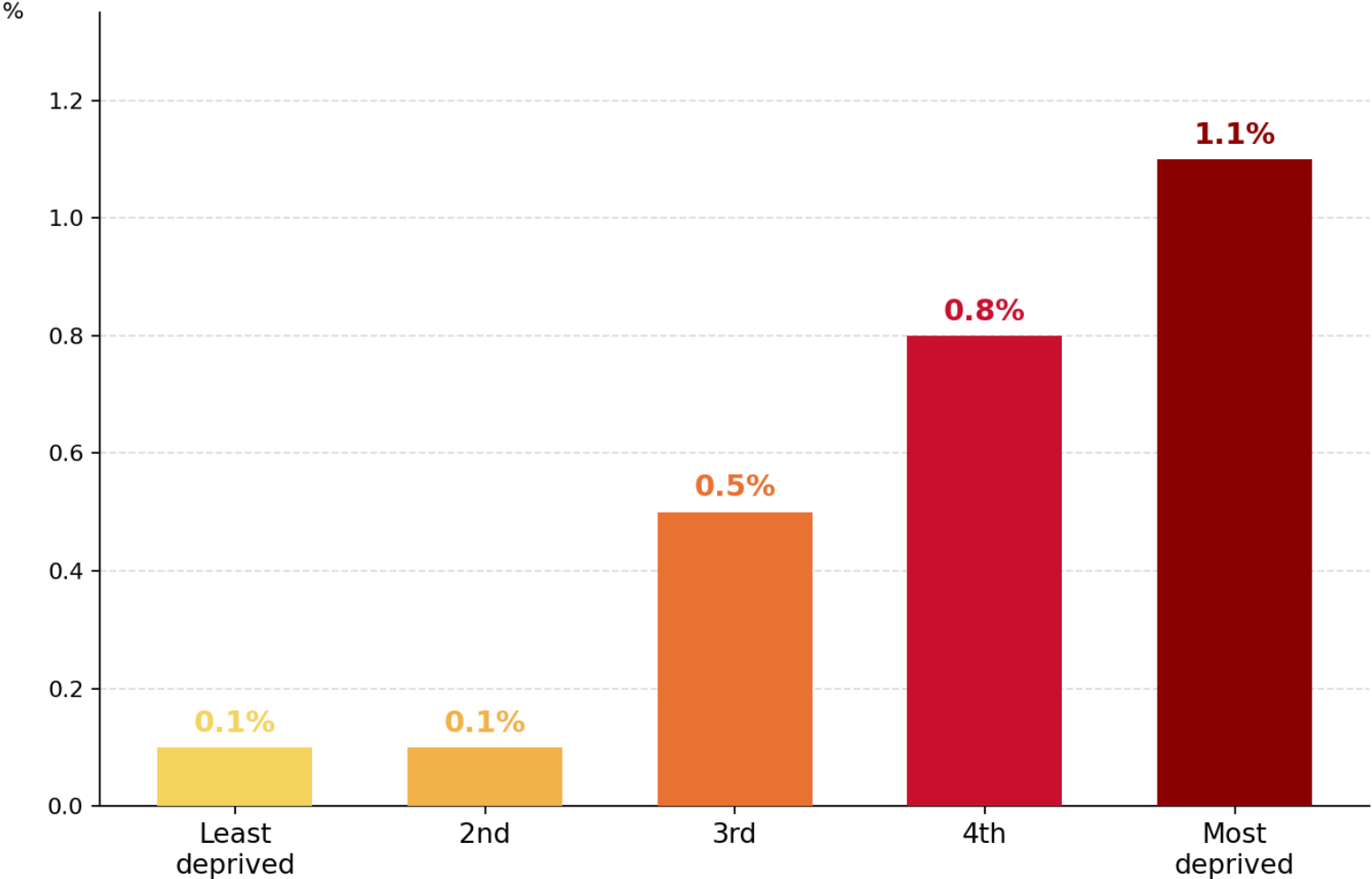
**Specific forms – and who's missing
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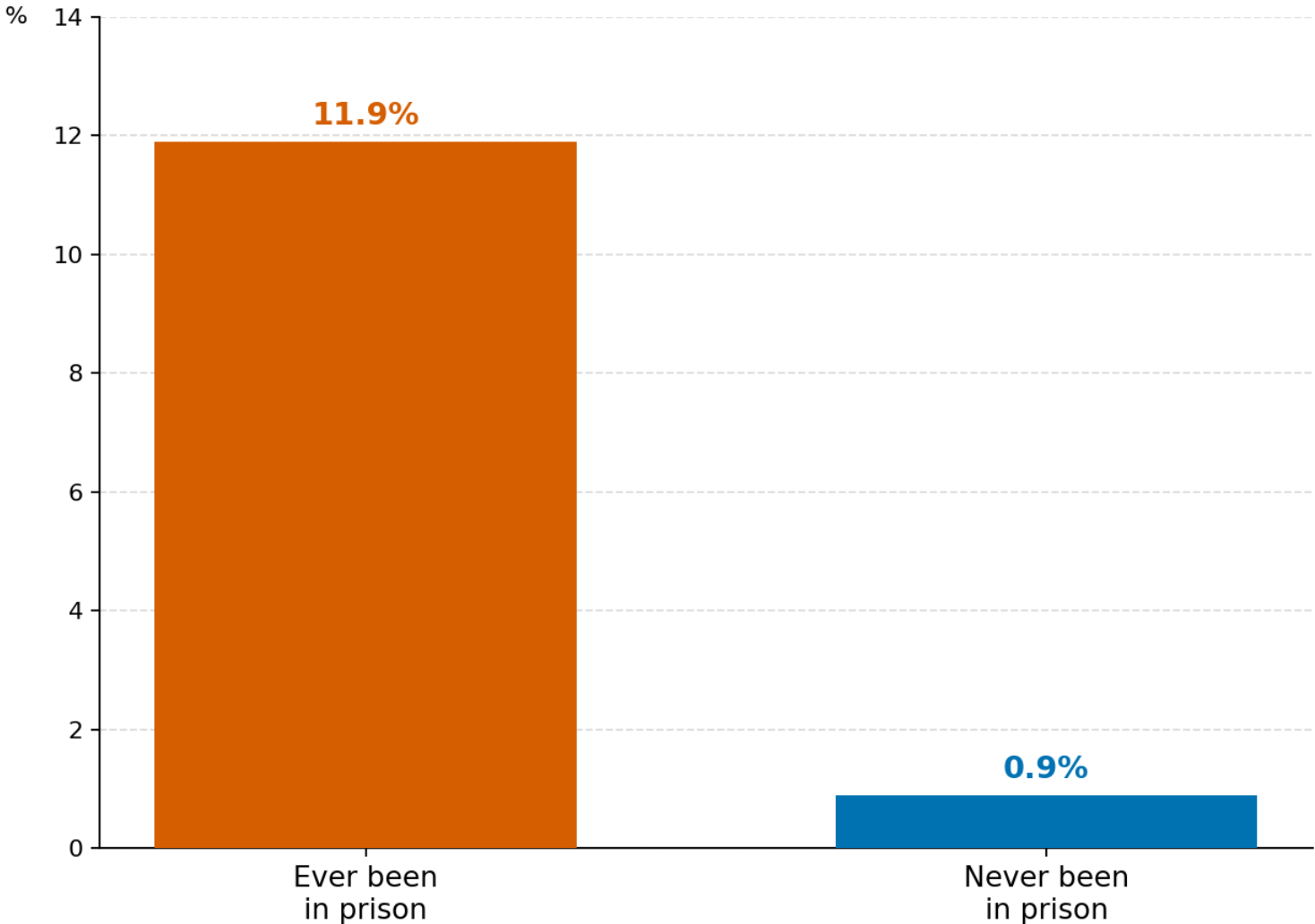
**Risk factors and context:
Violence and abuse**

Prevalence of psychotic disorder (SCAN) in the past year, by Index of Multiple Deprivation for where the person lives



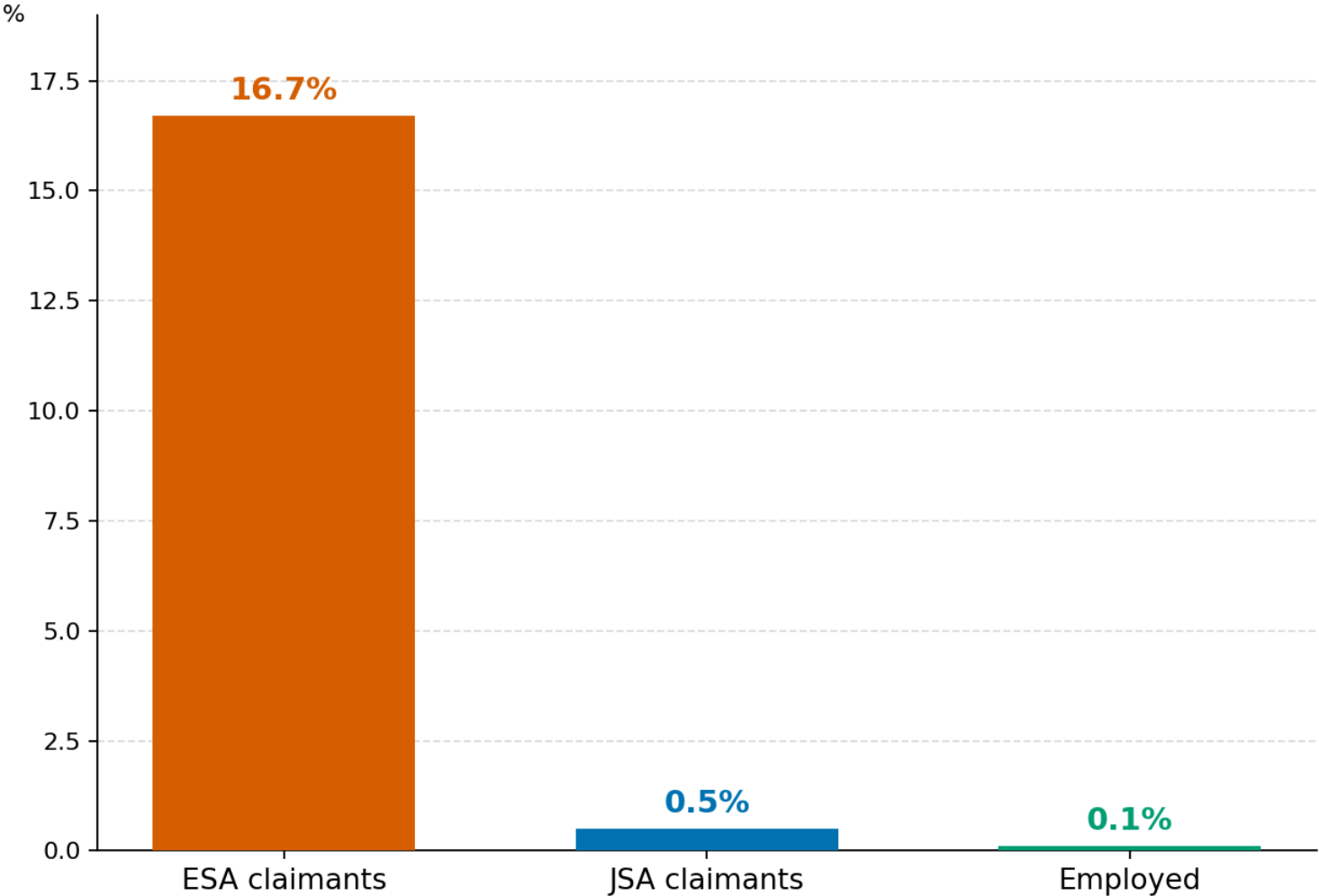
Source: Adult Psychiatric Morbidity Surveys 2007, 2014, 2024 (combined). Adults aged 16+ in England. Psychotic disorder in the past year (observed prevalence), by Index of Multiple Deprivation quintile.

Prevalence of psychotic disorder (SCAN) in the past year, by whether someone has been in prison



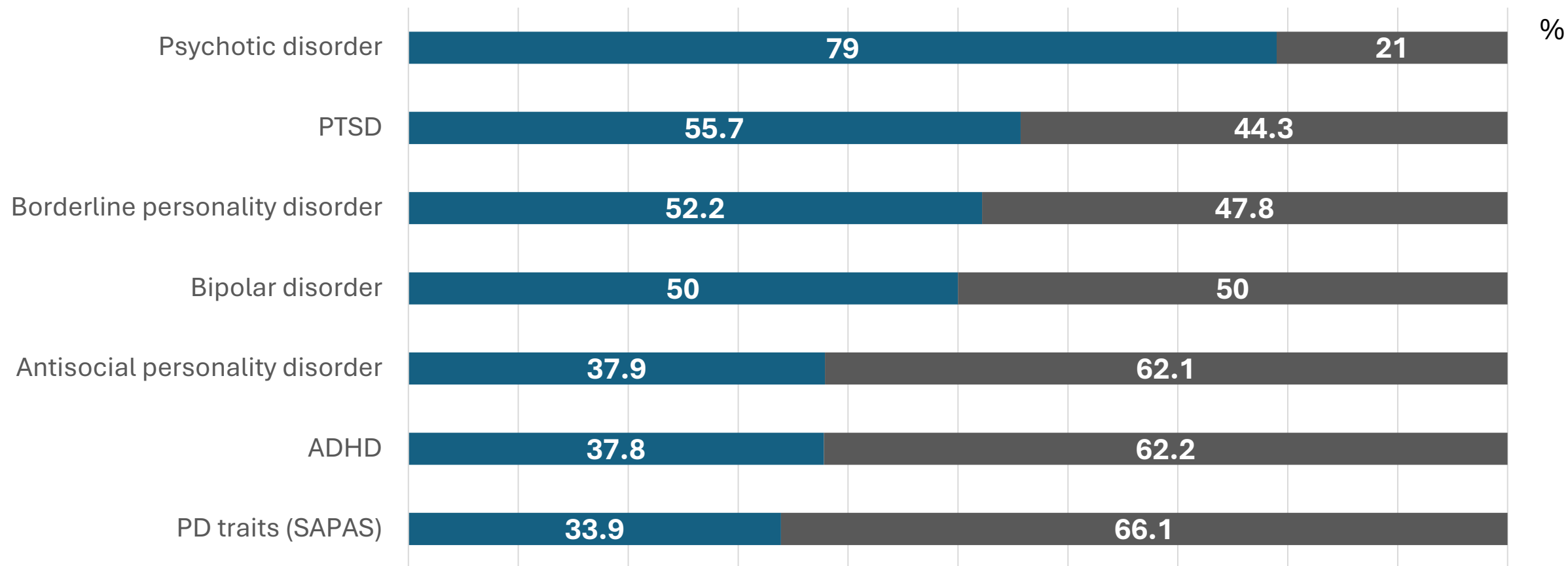
Source: Adult Psychiatric Morbidity Survey 2014 (Bebbington et al., 2021). Adults aged 16+ in England. Probable psychosis assessed with the SCAN. Ever in prison n=103; never been in prison n=7,417. p<0.001.

Prevalence of psychotic disorder (SCAN) in the past year, by benefit receipt (2014)



Source: Adult Psychiatric Morbidity Survey 2014. Adults aged 16+ in England.
Probable psychosis assessed with the SCAN. ESA = Employment and Support Allowance; JSA = Jobseeker's Allowance.

Mental health treatment receipt among adults with specific conditions



Proportion of adults (16+) identified by the survey with each type of condition reporting being currently in receipt of any mental health treatment by ethnic group, APMS 2023/4

Among the one-in-hundred people assessed as having psychotic disorder

- One in three (37%) *did not report thinking that they had it*, or had been diagnosed with it
- One in five (21%) were not receiving any mental health medication or psychological therapy

Paul Bebbington's work with APMS 1993-2014

- Moved the field beyond genetics to show a social contribution to aetiology
- In particular, the role of victimization and childhood sexual abuse



Psychosis, victimisation and childhood disadvantage

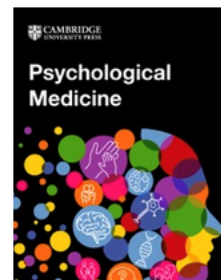
Evidence from the second British National Survey of Psychiatric Morbidity

Published online by Cambridge University Press: 02 January 2018



Childhood sexual abuse and psychosis: data from across-sectional national psychiatric survey in England

Published online by Cambridge University Press: 02 January 2018



Sexual abuse and psychotic phenomena: a directed acyclic graph analysis of affective symptoms using English national psychiatric survey data

Published online by Cambridge University Press: 24 July 2023

Four short stories I think only a survey like this can tell...

**Specific forms – and who's missing
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Intimate partner violence perpetration and mental health service use in England: analysis of nationally representative survey data

Published online by Cambridge University Press: 12 April 2023

[Vishal Bhavsar](#) , [Sally McManus](#), [Katherine Saunders](#)  and [Louise M. Howard](#) 

Show author details 

Intimate partner violence, suicidality, and self-harm: a probability sample survey of the general population in England

Sally McManus, Sylvia Walby, Estela Capelas Barbosa, Louis Appleby, Traolach Brugha, Paul E Bebbington, Elizabeth A Cook, Duleeka Knipe

Violence against older people and associations with mental health: A national probability sample survey of the general population in England

[Anastasia Fadeeva](#)^a  , [Ladan Hashemi](#)^a, [Claudia Cooper](#)^b, [Rob Stewart](#)^{c d}, [Sally McManus](#)^a

Prevalence and nature of workplace bullying and harassment and associations with mental health conditions in England: a cross-sectional probability sample survey

Research | [Open access](#) | Published: 24 April 2024

Health morbidities in carers with experience of domestic violence and abuse

Research | [Open access](#) | Published: 16 July 2025

Childhood sexual abuse and psychosis: data from across-sectional national psychiatric survey in England

Published online by Cambridge University Press: **02 January 2018**

[Paul Bebbington](#), [Sarah Jonas](#), [Elizabeth Kuipers](#), [Michael King](#), [Claudia Cooper](#), [Traolach Brugha](#), [Howard Meltzer](#), [Sally McManus](#) and [Rachel Jenkins](#)

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Perpetration of intimate partner violence and suicide attempt, suicidal ideation, and non-suicidal self-harm: a cross-sectional secondary analysis using the Adult Psychiatric Morbidity Survey

Published online by Cambridge University Press: **26 March 2026**

[Sophie Carlisle](#) , [Rachel Whyte](#), [Katherine Saunders](#), [Sally McManus](#), [Sian Oram](#) , [Louise Howard](#) and [Vishal Bhavsar](#) 

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Intimate partner violence and physical health in England: Gender stratified analyses of a probability sample survey

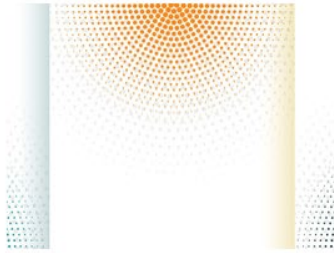
[Ladan Hashemi](#)  , [Anastasia Fadeeva](#), [...], and [Sally McManus](#)   [View all authors and affiliations](#)



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12 June 2026 | 12:42 GMT

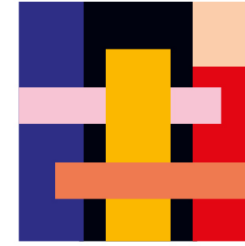
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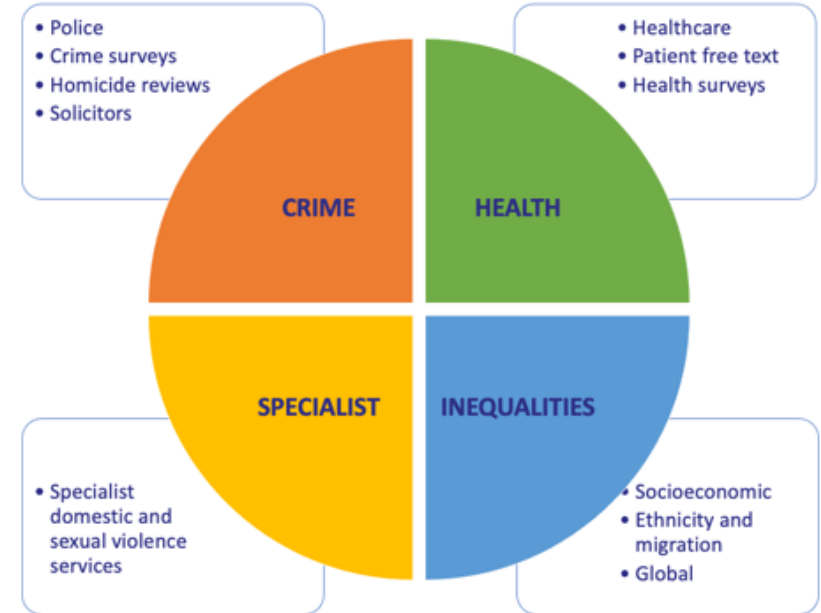
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Publication, Part of Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England

Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England, 2023/4

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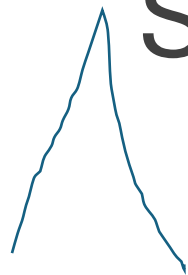
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