

Adult Psychiatric Morbidity Survey (APMS) 2014

Part of a national Mental Health Survey Programme



About the Adult Psychiatric Morbidity Survey (APMS) 2014

The Adult Psychiatric Morbidity Survey (APMS) 2014 is the fourth in a series of surveys of mental illness among adults living in private households. It is commissioned by the Health and Social Care Information Centre and funded by the Department of Health. APMS 2014 is a general population survey designed to:

- Estimate the prevalence of mental illness in the adult household population of England. The survey includes assessment of common mental disorders, psychosis, autism, substance misuse and dependence; and suicidal thoughts, attempts and self-harm.
- Screen for characteristics of attention deficit hyperactivity disorder, posttraumatic stress disorder, personality disorder, and bipolar disorder.
- Examine trends in mental illness.
- Identify the nature and extent of social disadvantage associated with mental illness.
- Gauge the level and nature of treatment and service use in relation to mental health problems, with an emphasis on primary care.
- Collect data on key current and lifetime factors associated with mental health problems, such as stressful life events, caring responsibilities, abusive relationships, and work stress.
- Collect data on factors that might support good mental health, such as social support networks and neighbourhood characteristics.

It is important to note that for some of the disorders assessed on APMS 2014, a survey of the household population is likely to under-represent adults with the condition. For example, people with psychosis and alcohol dependence are more likely to be homeless or in an institutional setting. Moreover, adults with severe mental health problems who do live in private households may be less available, able or willing to

respond to surveys. APMS 2014 retains the same core questionnaire coverage and methodological approach as the previous surveys in series, carried out in 1993, 2000 and 2007. This allows for analysis of change over time.

Content of the APMS 2014 main survey report

The main survey report is due to be published by NHS Digital in September 2016. It will be similar in format and coverage to previous survey reports (see <http://digital.nhs.uk/pubs/psychiatricmorbidity07>) in the series, and include the following chapters:

1. Introduction
2. Common mental disorders
3. Mental health treatment and services use
4. Posttraumatic stress disorder
5. Psychotic disorder
6. Autism
7. Personality disorder
8. Attention deficit hyperactivity disorder
9. Bipolar disorder
10. Alcohol use and dependence
11. Drug use and dependence
12. Suicidal thoughts, attempts and self-harm
13. Comorbidity in mental and physical illness

Each chapter focusing on a type of mental disorder will include data and discussion on: prevalence and trends; characteristics of people with the disorder (in terms of their age, sex, ethnic group, employment status, region); and extent of mental health treatment and service use among people with the disorder. Methods will be covered in the report, with further detail in appendices. The APMS 2014 dataset will be archived in the UK Data Service within three months of the report publishing.

Summary of changes between APMS 2007 and 2014

The 2007 and 2014 surveys differed from previous surveys in the series in that they:

- Were conducted in England only (1993 and 2000 were UK-wide)
- Had no upper age limit for participation (1993 went up to 64; 2000 went to 74)

- Were in the field over the course of a whole year (1993 and 2000 were carried out in the Spring)
- Included some different content, such as additional conditions and risk factors.

Table 1 summarizes questionnaire content in APMS 2014 and how this differs from coverage in the previous survey in the series, carried out in 2007. It also indicates the content that is covered in the main APMS report. Data that aren't covered in the main report are available in the UK Data Service Catalogue¹.

¹ To access the APMS datasets through the UK Data Service, you will need to register with a username and password and agree to the End User Licence (EUL), which outlines the terms and conditions of use of the Service. Full details on how to access the resources are available on the [UK Data Archive sign up page](#)

Table 1: APMS 2014 questionnaire content and summary of changes from APMS 2007					
Module	Summary of APMS 2014	Summary of changes from APMS 2007	Rationale for changes	Data used in main report?	Data available in UK Data Catalogue
Household	Details of everyone living in household	<ul style="list-style-type: none"> • Changed to ONS harmonized questions 	<ul style="list-style-type: none"> • Comparability with other surveys • Introduction of civil partnerships 	Yes	Yes
General health	Perceived general health	<ul style="list-style-type: none"> • No significant change 		No	Yes
Disability	Difficulty with activities of independent daily living and whether need assistance	<ul style="list-style-type: none"> • Cut question on who provides assistance for ADLs 	<ul style="list-style-type: none"> • Data on this available in previous waves 	No	Yes
Caring	Unpaid caring responsibilities	<ul style="list-style-type: none"> • Questions on relationship to person cared for, number of people care for and whether live in same home added • Questions on perceived stress of caring cut 	<ul style="list-style-type: none"> • To provide data on new and different aspects of supporting carers 	No	Yes
Wellbeing	Positive mental wellbeing, assessed using the WEMWBS ²	<ul style="list-style-type: none"> • WEMWBS added • Single item wellbeing questions (happiness, optimism) and SF12 cut 	<ul style="list-style-type: none"> • To capture positive mental wellbeing using a validated scale • SF12 license fee increases 	Yes	Yes
Physical health conditions	Perceived and health professional diagnosed physical health conditions	<ul style="list-style-type: none"> • Questions on key physical chronic conditions and on sensory impairments added • Item on psychiatric disorders cut as now treated in new module 	<ul style="list-style-type: none"> • Policy priority on mental health of people with chronic conditions and their access to screening and treatment 	Yes	Yes
Psychiatric diagnoses	Perceived and health professional diagnosed mental disorders	<ul style="list-style-type: none"> • New module. Questions on whether respondent believes they have ever had psychiatric, learning and 	<ul style="list-style-type: none"> • To understand people's perceptions and the extent of diagnosis 	Yes	Yes

² Warwick-Edinburgh Mental Well-being scale

		neurological conditions added, with age of onset and whether currently symptomatic or treated; and whether they have been diagnosed by a health professional			
Medications	Current mental health medications prescribed	<ul style="list-style-type: none"> List of medications asked updated, both generic and brand names covered. 	<ul style="list-style-type: none"> To reflect current prescribing practice 	Yes	Yes
Therapy and service use	Counselling, health care and community services received over different time frames for a mental health reason	<ul style="list-style-type: none"> Questions on requesting but not receiving treatment added; questions amended to reflect current treatment and service use terminology and context, with addition of mindfulness therapy, substance misuse tr 	<ul style="list-style-type: none"> To reflect current context, while maintaining comparability for trends 	Yes	Yes
Common mental disorders (CMD)	Depression and anxiety disorders, assessed using the CIS-R ³	<ul style="list-style-type: none"> Questions on social phobias added 	<ul style="list-style-type: none"> Measure of social phobias added for better comparability with IAPT⁴ screening 	Yes	Yes
Suicidal thoughts, attempts and self-harm	Suicidal thoughts and timing, recency, method and support seeking after a suicide attempt or episode of self-harming	<ul style="list-style-type: none"> Questions on recency of self-harm and on support received added Some items moved from face to face to administration to self-completion 	<ul style="list-style-type: none"> To benefit from the improved data quality in self completion data collection (key items retained in face to face for trends) 	Yes	Yes
Psychotic disorder	Assessment of psychotic disorders using phase one	<ul style="list-style-type: none"> No significant changes 		Yes	Yes

³ Clinical Interview Schedule-Revised

⁴ Improving Access to Psychological Therapies

	(PSQ ⁵) and phase two (Scan ⁶) data				
Attention deficit hyperactivity disorder (ADHD)	Screening for attention deficit hyperactivity disorder (ADHD) characteristics using ASRS ⁷	<ul style="list-style-type: none"> • Questions added to phase one and phase two 	<ul style="list-style-type: none"> • Improved identification of ADHD 	Yes	Yes
Work-related stress	Psychosocial working conditions	<ul style="list-style-type: none"> • Questions on workplace bullying, work-life balance and other aspects of work-related stress added • Some work-related stress questions cut 	<ul style="list-style-type: none"> • To provide data on new and different aspects of work-related stress 	No	Yes
Smoking	Smoking behavior and signs of nicotine dependence	<ul style="list-style-type: none"> • Questions on smoking cessation and e-cigarette use added 	<ul style="list-style-type: none"> • Policy interest in access to smoking cessation support among people with mental disorders 	Yes	Yes
Alcohol	Usage and signs of dependence on alcohol	<ul style="list-style-type: none"> • Questions on alcohol dependence treatment added 	<ul style="list-style-type: none"> • To improve understanding of treatment gap for this area 	Yes	Yes
Drugs	Usage and signs of dependence on illicit drugs	<ul style="list-style-type: none"> • Additional drug types covered - ketamine and mephedrone – and slang terms extended and updated. 	<ul style="list-style-type: none"> • Reflect current patterns of drug use, and comparability with British Crime Survey 	Yes	Yes
Personality disorder	Screening for general personality disorder (SAPAS ⁸) and for borderline and antisocial personality disorder (SCID-II ⁹)	<ul style="list-style-type: none"> • Screening for general personality disorder traits added to phase one. • Personality disorder assessment cut from phase 	<ul style="list-style-type: none"> • SAPAS included for improved comparability with IAPT screening 	Yes	Yes

⁵ Psychosis Screening Questionnaire

⁶ Schedules for Clinical Assessment in Neuropsychiatry

⁷ Adult ADHD Self-Report Scale

⁸ Standardised Assessment of Personality – Abbreviated Scale

⁹ Structured Clinical Interview for DSM Disorders

		two			
Social functioning	General level of social functioning gauged using the SFQ ¹⁰	<ul style="list-style-type: none"> No change 		No	Yes
Autism	Assessment of autism drawing on data collected at phase one (AQ20 ¹¹) and phase two (ADOS).	<ul style="list-style-type: none"> Selection of AQ20 items revised to ensure most predictive items used. 	<ul style="list-style-type: none"> Improved identification of autism. 	Yes	Yes
PTSD	Trauma and symptoms of posttraumatic stress screened for using the PTSD Checklist (PCL)	<ul style="list-style-type: none"> Change of screening tool from the Trauma Screening Questionnaire (TSQ) to the PCL 	<ul style="list-style-type: none"> Improved comparability with other surveys of military and general population 	Yes	Yes
Military experience	Experience of working for the armed services	<ul style="list-style-type: none"> Questions on deployment added Questions on branch of armed forces served in cut 	<ul style="list-style-type: none"> Improved understanding of nature of link between combat exposure and mental health 	No	Yes
Domestic violence and abuse	Experience of interpersonal violence and abuse, including threat, coercive control, sexual abuse and physical violence.	<ul style="list-style-type: none"> Questions on gender of and relationship to assailant; and on belittling and injury added 	<ul style="list-style-type: none"> Improved understanding of nature of interpersonal violence 	No	Yes
Child neglect	Experience of having been neglected by a parent or carer when a child.	<ul style="list-style-type: none"> New module added drawing on questions adapted from the NSPCC Survey of Child Abuse and Neglect 	<ul style="list-style-type: none"> Childhood adversity is a key driver of adult mental health, and there is a lack of data on this area. 	No	Yes
Discrimination	Perceived discrimination on the basis of characteristics such as age, sex, ethnicity, sexual identity and health	<ul style="list-style-type: none"> No significant changes 		No	Yes
Sexual Identity	Perceived sexual identity	<ul style="list-style-type: none"> Questions amended to ONS harmonized format 	<ul style="list-style-type: none"> Comparability with other surveys 	No	Yes
Sexual behaviour	Risk-taking sexual behaviour	<ul style="list-style-type: none"> New module added 	<ul style="list-style-type: none"> To capture links between 	No	Yes

¹⁰ Social Functioning Questionnaire

¹¹ Autism Quotient 20

	in terms of numbers of same and opposite sex partners, and condom use		areas of risk taking		
Intellectual functioning	Cognitive functioning assessed using NART (all ages) and TICS-M and Animal Naming (those aged 60 and over)	<ul style="list-style-type: none"> Slight adjustments to how administered 	<ul style="list-style-type: none"> To improve comparability with other surveys 	Yes	Yes
Stressful life events	Events and experiences likely to impact on mental health	<ul style="list-style-type: none"> Revised two response options (assault/illness; police contact) 	<ul style="list-style-type: none"> To clarify what these items mean and to separate out two different types of experience previously grouped together. 	No	Yes
Debt	Being 'seriously behind' in paying for each of a range of types of expenditure	<ul style="list-style-type: none"> No significant changes 		No	Yes
Parenting	Experience of being parented and of being a parent	<ul style="list-style-type: none"> No significant changes 		No	Yes
Social support	Social network size and quality of social support	<ul style="list-style-type: none"> Additional question on contact with acquaintances 	<ul style="list-style-type: none"> To extend range of types of social contact captured 	No	Yes
Religion and spirituality	Range of religious and spiritual beliefs and practices.	<ul style="list-style-type: none"> Questions from the Religious Beliefs and Values Scale added Questions on extent of religious belief cut. 	<ul style="list-style-type: none"> To cover new and different aspects of religion and spirituality 	No	Yes
Social capital and participation	Perceptions of neighborhood, local environment and community engagement	<ul style="list-style-type: none"> Questions on social participation and other parts of the module cut 	<ul style="list-style-type: none"> Refreshed to meet current needs, cuts made to release space for other priority areas 	No	Yes
Socio-economics	Socio-economic and demographic classification, including ethnicity, educational qualifications, employment status, occupation, and debt and	<ul style="list-style-type: none"> Module reviewed and updated, including: Questions on benefits, material deprivation and country of birth added. Response categories on 	<ul style="list-style-type: none"> Updated to meet current benefit regime and other changes and to ensure protected characteristics are covered in most up to date format where 	yes	Yes

	housing conditions	ethnic group revised • Questions on property type cut	possible		
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To ensure sufficient space for new topics, some topics covered in 2007 were not repeated in 2014. Sometimes questions were asked in previous survey, where it was not a priority to ask the same questions again because the data was available now and because trends in that area are not anticipated. Modules covered in 2007 that were not included in 2014 are gambling; eating disorder and self-reported height and weight. Some may return should APMS be repeated again in the future.