DCP UK Chair's update

Roman Raczka

BEFORE the Pandemic the greeting 'Hello, how are you?' usually elicited a response along the lines 'Fine, how are you?'. Now the response will, more than likely, include details as to whether they, or their family, have contracted Covid, whether they have been vaccinated (and with which vaccine) and how they are coping mentally as well as physically. Worried, sad, scared, anxious, depressed are commonly expressed emotions. If this openness about our wellbeing is a consequence of the ways we have had to lead our lives during the pandemic then it should be seen as a healthy one which we must support.

Mental health services

The pandemic has affected the delivery of mental health services in many ways. The first lockdown impacted on referral routes and access rates, however as the pandemic has progressed referrals have returned to pre-pandemic levels. Local services have worked rapidly to respond to the changing context. The mental health Help Us Help You campaign which launched towards the end of 2020 encouraged people to continue to access services.

Evidence from other emergency situations – and the increase in referrals following the first lockdown – strongly indicates that the pandemic will result in increased mental health needs for the foreseeable future, resulting in pressures on the system and demonstrating the need for continued expansion of mental health services – including Psychology services. The recently announced increase in clinical psychology training places (in England) is welcomed but we also need an increase in commissioned qualified posts.

In Scotland 'Good Mental Health for All' is an initiative developed by NHS Scotland and endorsed by the Scottish Government and the Convention of Scottish Local Authorities which sets out a vision to improve mental health and wellbeing. It links to the Scottish Government's Mental Health Strategy and encourages action at national, local and community levels. The Coronavirus (Covid-19): mental health – transition and recovery plan published at the end of 2020 outlines the Scottish Government's response to the mental health impacts of Covid-19. It addresses the challenges that the pandemic has had, and will continue to have, on the population's mental health. It lays out key areas of mental health need that have arisen as a result of Covid-19 and lockdown, and the actions that the Scottish Government will take to respond to that need.

Wellbeing

It is of great concern that our annual wellbeing surveys have highlighted impaired wellbeing of psychological practitioners year on year. The DCP have been working in partnership with others to better understand the key factors at play, and to develop supportive guidance and strategies to enable change.

Although written before the pandemic, the recently published DCP paper *Building a caring work culture – What good looks like* is a resource which is more valuable than ever as we continue to navigate a world that has changed so quickly and so radically, impacting on wellbeing in both obvious and more subtle ways.

Prior to the pandemic our annual staff wellbeing surveys had shown us that for psychological

services staff the primary problem was a culture of unrealistic top-down targets. These problems were acknowledged but were not resolved. Work undertaken by the BPS and DCP exploring the impact of the pandemic on the psychological workforce has highlighted both positive and negative experiences: work has offered positive opportunities to many, including increased influence, job satisfaction, learning opportunities and social connections. However, the pandemic has also posed a number of challenges including anxieties around health risks, uncertainty, adjustment to digital working and new roles, pressures around work-life balance, home schooling, loss of extended support, and exposed racial and social inequalities.

This paper provides a context for further discussion on the workforce needs for sustainable wellbeing to deliver effective and safe psychological services. The paper calls for action built upon what we know from the wellbeing survey findings, discussions with staff teams and leaders of psychological services, and the research on staff wellbeing in healthcare more generally.

The 2021 Psychological Professionals Wellbeing survey will be launched in the next few weeks and I would encourage as many people as possible to complete the survey.

Prevention and public health
Whilst it is vitally important to provide support on an individual, clinical level, as psychologists we are also very aware of the social determinants of mental health and wellbeing. Public health practitioners have highlighted that social determinants have a very significant impact on physical health. There has been an increasing focus on the impact on mental health too, including the impact of poverty and other social inequalities as well as identifying effective action that can be taken.

Across all four nations the covid pandemic has significantly raised the profile of psychologists' contribution to public health and prevention.

The NHS England long term plan and its equivalents in Wales, Scotland and Northern Ireland all highlight the need for new partnerships to build community resilience and prevent disease and injury, and reduce premature death and avoidable suffering.

The DCP Prevention and Public Health task and finish group set out the following aims include:
- To develop a broad conceptual model of prevention in clinical psychology
- To identify the range of prevention and public health work currently being undertaken by clinical psychologists across all four nations, and specialties drawing on a range of models including community psychology
- To support the development of a network within the division to support clinical psychologists working in this area
- To identify areas for future development including implications for training, research, service development
- To increase the visibility of a clinical psychology approach to prevention
- The DCP website now has a page on Public Health and Prevention https://www.bps.org.uk/member-microsites/division-clinical-psychology/public-health

Climate change
The climate and environmental crisis is having enormous impacts on peoples' wellbeing both nationally and globally. Many of us are just emerging from our homes, in the context of the significant personal and social changes caused by Covid-19's significant threat to human wellbeing and life. However, more complex systemic change will be needed if we are to avert the worst of the underlying slow and severe impact of climate change and ecological breakdown.

There is strong evidence to indicate that climate change affects the social and environmental determinants of good health, however the mental health impacts of climate change are less well described. Several forms of impact on mental health have been proposed, namely;

direct (the acute or traumatic effects of being involved in a disaster event e.g. after Hurricane Katrina, half of survivors developed an anxiety or mood disorder. 1 in 6 developed post-traumatic stress disorder (PTSD), and suicide and suicidal thoughts doubled),

indirect (threats to wellbeing due to observed impacts, living in a constant state of uncertainty, and chronic concern), and

psychosocial impacts (the social and community impacts of lost homes, livelihoods, and cultural identity). Regardless of the class of impact, what is known is that those with pre-existing mental health disorders are the most vulnerable to the mental health impacts of climate change. The poor often bear the greatest burden of mental health disorders due to the increased risk of having a mental health disorder in addition to inadequate access to treatment and other health inequalities.

The BPS has established a Steering Group on the Climate and Environmental Crisis as part of a workstream reporting to the Ethics Committee and will be running two task and finish groups, one on health impacts and the other on social change. There are a range of potential actions that all psychologists may take in addressing the global emergency posed by climate change. These include:
contributing to the discussions about how to communicate about the crisis,
- educating others on how to encourage behaviour change,
- evidencing the risks posed to everyone's mental health especially those most vulnerable
- taking collective action as part of the issue of climate justice actions.
- the NHS in each nation has published a version of a 'net zero plan' (England https://www.england.nhs.uk/greenernhs/a-net-zero-nhs/, Scotland https://www.legislation.gov.uk/asp/2009/12/contents Wales https://gov.wales/nhs-wales-decarbonisation-strategic-delivery-plan and Northern Ireland http://www.niassembly.gov.uk/globalassets/documents/raise/publications/2017-2022/2021/aera/1421.pdf), psychologists could link with these plans and promote engagement to support the implementation.

Finally, leading up to the UN Climate Change Conference COP26 https://ukcop26.org/ conference in Glasgow in the Autumn, the DCP Executive will identify a 'Climate Emergency Champion' to take leadership in our profession to identify actions that clinical psychologists may take to address the risks presented by climate change.

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