

What needs to happen in Scotland



In Scotland over 298,000 people are diagnosed with diabetes¹. Living with diabetes can be tough, and keeping on top of it can be a struggle. People have told us that good emotional and psychological wellbeing is critical to managing their condition.

In a survey of more than 2,000 people living with diabetes across the UK, 7 in 10 told us that they feel overwhelmed by its day-to-day demands. They told us that they wanted more support for their emotional and psychological wellbeing as part of their routine diabetes care. Of those we surveyed who had felt they needed specialist care from a mental health professional, 7 in 10 couldn't access it.

“Emotional support should be discussed when first diagnosed with the condition.”

Person with diabetes

Healthcare professionals echoed this call. But they need more backing to be able to offer this support for everyone affected by diabetes in Scotland.

In recent years, increasing attention has turned to the role of emotional and psychological support in care, as well as awareness of the link between mental and physical health. The Diabetes Improvement Plan highlighted that where mental health professionals were involved, people living with diabetes experienced better and more tailored support while staff also benefited from training from the resident mental health professional.

However, this has not happened uniformly across Scotland and is the exception rather than the rule.

Things have to change. We want diabetes care that sees and supports the whole person. The emotional and psychological impacts of diabetes should be recognised in all diabetes care. And everyone affected by diabetes must have access to the support they need, when they need it.

¹ NHS Scotland (2017), Scottish Diabetes Survey. Accessed at link: <http://www.diabetesinscotland.org.uk/Publications/SDS%202017.pdf>



The emotional and psychological impact of diabetes to be recognised in all diabetes care, through systematic care and support planning² and better conversations. To support this, we call for:

- The Scottish Government to explicitly link the **Mental Health Strategy 2017–2027** commitment “to meeting the needs of those who require access to mental health services” to diabetes and include this in the evaluation extended to primary care.
- Scottish Intercollegiate Guidelines Network (SIGN) and National Institute for Health and Care Excellence (NICE) guidance on Type 1 and Type 2 diabetes³ to be updated to include stronger guidance on providing emotional and psychological support in routine diabetes care.
- Decision makers to put resource into providing emotional and psychological care as standard within diabetes care.
- Healthcare professionals delivering diabetes care to ask about emotional wellbeing during appointments. Resources such as our Information Prescription **Your Emotions and Diabetes**⁴ and the Diabetes UK and partners⁵ guide **Diabetes and Emotional Health**⁶ should be used within care and support planning conversations.



An integrated care pathway for diabetes and emotional and psychological wellbeing to be developed and implemented in Scotland. To support this, we call for:

- The Scottish Diabetes Group and NHS Scotland to develop and endorse an integrated care pathway, and indicators, for diabetes and mental health. This will help to show what services and support are needed and support consistent implementation across the country.
- Local decision makers to implement the pathway.
- Increased recognition in diabetes structured education programmes on the importance of emotional and psychological wellbeing in diabetes, and signposting to other information and support.



Services providing diabetes care to be supported by specialist mental health professionals, including psychologists and liaison psychiatrists, to ensure effective provision across all levels of need.

To support this, we call for:

- The Scottish Government to increase funding for the provision of psychological and emotional support across all fourteen Health Boards.
- Diabetes services to have access to a mental health team with knowledge of diabetes who can both give advice and provide care.



Mental health professionals providing care for people affected by diabetes should have knowledge of diabetes and an understanding of the impact the condition can have on physical, emotional, and psychological wellbeing. To support this, we call for:

- Community Mental Health Teams, and other mental health professionals to have training to understand the emotional, physical and psychological impact of diabetes and its associated mental health problems specific to diabetes, such as diabetes distress, or diabulimia.
- Mental Health Counsellors in schools across Scotland to complete training in diabetes to allow them to care properly for pupils affected by the condition.



All healthcare professionals providing general diabetes care to have the training and skills to identify and support the emotional and psychological wellbeing of people affected by diabetes. To support this, we call for:

- Healthcare professionals working in primary care to undertake the Motivation Action Prompt (MAP) training adopted by the Scottish Diabetes Group and used in secondary care.
- National Education Services Scotland, academic institutions, and local training providers to increase funding for training for diabetes staff to include management of emotional and psychological care.
- Mental health professionals who are integrated into diabetes services to support staff by sharing their expertise.



The NHS and the third sector at a national and local level to work together to provide services such as peer support, community groups, education and self-help resources for people affected by diabetes. To support this, we call for:

- NHS Scotland and local decision makers to increase access to social prescribing, including implementing peer support services, and referring to Diabetes UK services.
- The third sector and local organisations to connect with national and local NHS services, ensuring healthcare professionals are aware of the services and support they offer for referral and signposting.

² Year of Care. Year of Care House. Accessed at: www.yearofcare.co.uk/house

³ NICE. CG91 Depression in adults with a chronic physical health problem: recognition and management, CG138 Patient experience in adult NHS services: improving the experience of care for people using adult NHS services, CG136 Service user experience in adult mental health: improving the experience of care for people using adult NHS mental health services, NG3 Diabetes in pregnancy: management from preconception to the postnatal period, NG17 Type 1 diabetes in adults: diagnosis and management, NG28 Type 2 diabetes in adults: management. SIGN (2017) management of diabetes: a national clinical guideline. Accessed at: www.sign.ac.uk/assets/sign116.pdf

⁴ Diabetes UK Information Prescription: Your Emotions and Diabetes. Accessed at: www.diabetes.org.uk/professionals/resources/resources-to-improve-your-clinical-practice/information-prescriptions-qa

⁵ This resource was adapted from the original Diabetes and emotional health A handbook for health professionals supporting adults with Type 1 or Type 2 diabetes which was developed by the Australian Centre for Behavioural Research in Diabetes (ACBRD), the National Diabetes Services Scheme (NDSS) and Diabetes Australia in 2016

⁶ Diabetes UK (2019) Diabetes and Emotional Health – a practical guide for healthcare professionals supporting adults with Type 1 and Type 2 diabetes. Accessed at: www.diabetes.org.uk/emotional-health-professionals-guide

Join us

We've spoken to thousands people affected by diabetes and they told us that when people are struggling, too often the support they need is missing.

Help us make emotional and mental health support a part of everyone's diabetes care.

Visit our website at: www.diabetes.org.uk/emotional-wellbeing