



Eating Disorders Awareness Week 2022

Key Policy Asks Northern Ireland

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Policies and research evidence cited in this briefing are accessible via hyperlinks. Quotes are included throughout from people with lived experience of eating disorders, professionals, organisations and others. All names attributed to quotes are pseudonyms.

Summary of Key Policy Asks

This document outlines our key concerns and specific policy recommendations for the following priority areas:

Medical training on eating disorders

Eating disorders are appropriately taught and assessed at all UK medical schools and all junior doctors in the UK to gain clinical experience during foundation training.

Learning about eating disorders is generally overlooked in UK medical training, with severe consequences for the prognosis and safety of patients.

Full Funding for Eating Disorders Services in Northern Ireland

The Northern Ireland Executive to allocate full funding to the implementation of the Mental Health Strategy 2021-2031.

This includes plans for specialist eating disorder services, including access without delay, investment in staffing and the development of talking therapy hubs and intensive day treatment facilities.

Campaigns to address obesity

Public health campaigns to address obesity are informed by experts from the field of eating disorders, including experts by experience.

There is a risk that campaigns to address obesity can promote messages that are harmful to people with or at risk of developing an eating disorder.

Research funding

Increased funding for eating disorder research.

Major advances are needed in our understanding of what causes eating disorders, how to prevent them developing and how best to treat them. Eating disorders accounts for just 1% of the UK's already severely limited mental health research funding.

Introduction

About Eating Disorders

Eating disorders are serious mental illnesses. Around 1.25 million in the UK have an eating disorder. This could equate to as many as 37,500 people in Northern Ireland. Eating disorders affect people of any age, gender, ethnicity or background. They have major impacts on individuals, families, the NHS, social care and wider society.

Types of eating disorders include binge eating disorder, bulimia, anorexia, other specified feeding or eating disorder and avoidant/restrictive food intake disorder. Eating disorders have high mortality rates, with anorexia having the highest mortality rate of any mental illness, and 1 in 6 people with binge eating disorder trying to end their life.

People with eating disorders typically develop severe physical health problems and overall quality of life has been estimated to be as low as in symptomatic coronary heart disease or severe depression. Without early intervention, many become unable to participate in education or employment.

However, **recovery is possible**. Access to the right treatment and support is life-changing, and early intervention provides the best chance for recovery. Delays prolong the suffering of the individual and those who care for them, as well as significantly increasing the costs to the NHS, as hospital admission becomes more likely. Despite this, those who are able to access treatment experience an average three-and-a-half-year gap between onset and start of treatment, due to delays in identification, referral, and waiting times.

Families and other carers can play an important role in recovery, yet they are often not empowered to provide this support.

The difference you can make as an MLA

In recent years the support of MLAs has helped increase the political profile of eating disorders in Northern Ireland. Going forward, this support will be crucial in unlocking much needed investment for the implementation of the Northern Ireland Mental Health Strategy 2021-2031, which includes the creation of a Regional Eating Disorders Service.

However, there is much more work to do before we have a Health and Social Care system that enables everyone affected by eating disorders to get the help they need.

MLAs can make a difference by engaging with their party and Assembly colleagues to highlight the urgent need for full funding of the Mental Health Strategy. Within their own constituencies, MLAs can also make a big difference by holding Health and Social Care (HSC) leaders and others to account.

Impact of COVID-19 on people affected by eating disorders

COVID-19 and the resulting necessary lockdown restrictions are having profound, negative impacts on people affected by eating disorders. The disruption caused to routines, living arrangements, opportunities for physical activity and access to treatment make the pandemic especially challenging for people with eating disorders and those that support them.

During recent Assembly questions, the Health Minister acknowledged that the COVID-19 pandemic has disproportionately affected people with eating disorders.

In a Northumbria University survey of people with an eating disorder conducted in 2020 during the first lockdown, nine out of ten respondents said that their symptoms had got worse as a result of the pandemic, with 30% reporting that their symptoms had got much worse.

These findings are echoed in the increased scale of demand for Beat's support services. At its peak in March 2021, **Beat support services experienced a 300% rise in the number of people reaching out for help, in comparison to pre-pandemic levels, and from 2020 to 2021 there was a 10-fold increase in numbers of safeguarding concerns across the UK identified from calls to Beat's support services, to 1117.**

Clinicians across the country are reporting that far more patients are presenting at a stage where they are already severely ill or in crisis.

Eating disorders services are, like all mental health services in Northern Ireland, under increasing

pressure, with the number of referrals between March 2019 and September 2020 increasing by 43%. The number of review patients seen has **increased by 64% during the same period.**

As there is often a delay of years, with the average time period being just under three years, between developing an eating disorder and first seeking help, **it is likely that demand for specialist treatment will endure for years after the end of the pandemic.**

Eating Disorders Awareness Week 2022: Worth More Than 2 Hours

Our key policy ask:

- Eating disorders are appropriately taught and assessed at all UK medical schools and all junior doctors in the UK to gain clinical experience during foundation training

Learning about eating disorders has been overlooked in UK medical training, with severe consequences for the prognosis and safety of patients.

This year the theme of Eating Disorders Awareness Week is medical training. Many of us rely on GPs to spot the early warning signs of an eating disorder, to intervene quickly and help us to recover.

However, on average, medical students receive less than two hours training on eating disorders in their training, with a fifth of medical schools offering no training whatsoever.

This lack of training has delayed access to treatment and leads to misdiagnosis of eating disorders for years. The consequences for people living with these mental illnesses and their families can be devastating and sometimes deadly.

This isn't good enough.

Our GPs want to provide the best quality care for people with eating disorders. But they need proper training to match the seriousness of these conditions.

This training exists. Beat has developed clear and comprehensive courses for medical students which some medical schools have started to teach.

But 'some' is not enough.

We need all UK medical schools to include comprehensive training on eating disorders. So that people like Julia get early access to treatment.

It's time for all UK medical schools to implement proper training on eating disorders. It's time to change lives.

”

The doctor who finally referred me was someone who listened - not just to what I was saying but listened to all of me... He was very attentive to my body language and non-verbal cues as well as my words. The important thing is to really focus on what the person is telling you and what their mental state is.

Julia

”

I have encountered a number of problematic, stereotypical opinions of patients with eating disorders being spread through medical training

(4th Year Medical student)

”

Overlooked in medical training

Research published in 2018 found that:

- On average just **1.8 hours** is spent on teaching about eating disorders in UK medical schools.
- **One in five** medical schools do not provide any teaching.
- Assessment drives learning, yet 50% of medical schools **do not include a question about eating disorders** in their final exams.

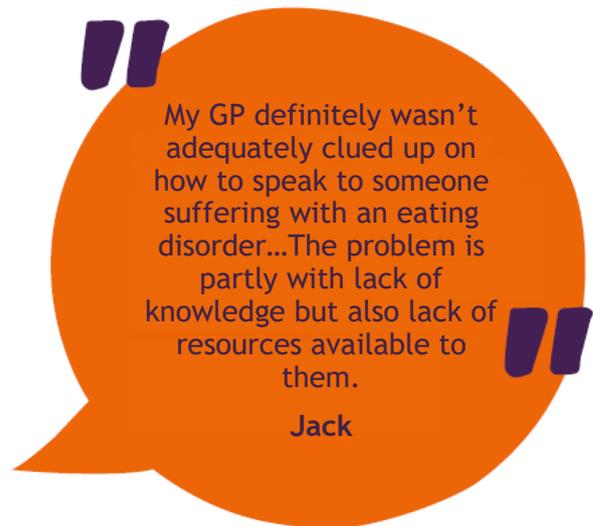
Eating disorders are serious mental illnesses and it is crucial that all doctors understand eating disorders, know how to identify an eating disorder and know how to treat someone with an eating disorder.

In a Beat survey (2021) of 1,697 people who have experienced an eating disorder, many participants reported that when they first sought help from a GP they had a negative experience:

- **60% felt that their quality of care was poor**
- **58% of respondents felt that the first GP they sought help from did not understand eating disorders**
- **Only 42% felt that their GP emphasised the importance of getting help and treatment as soon as possible**

There are many fantastic GPs delivering excellent care to people with eating disorders. Unfortunately, we have heard many accounts of GPs failing to take people's disclosures seriously, where people with eating disorders have been told "it's just a phase", "just eat a bit of toast", "you're a nice size so you don't have anything to worry about" and even some cases where people have been encouraged to lose more weight in order for them to be taken seriously. These comments highlight the importance of training.

Research suggests that most non-specialist doctors lack confidence in, and knowledge of, how to help patients with eating disorders, and this leads to delays in treatment and inappropriate management.



'Ignoring the Alarms'

The Parliamentary and Health Service Ombudsman's (PHSO) 2017 report found the tragic death of 19 year-old Averil Hart could have been avoided.

The report observed that low levels of knowledge among doctors and other medical professionals was among several failings that led to the deaths of Averil and two other people from eating disorders and recommended that the General Medical Council (GMC) conduct a review of the coverage of eating disorders in medical training.

In 2019 the Parliamentary Administration and Constitutional Affairs Committee (PACAC) investigated the implementation of the PHSO's recommendations.

The investigation concluded that “two hours of training on such a complicated topic is insufficient” and recommended that the GMC use its influence to promote best practice, ensure that medical schools improve outcomes in relation to eating disorders and monitor medical schools’ progress. PACAC also recognised the need for improvements in postgraduate training and called on the Academy of Medical Royal Colleges to continue its work in this area.

Health Education England has funded Beat in collaboration with the Faculty of Eating Disorders at the Royal College of Psychiatrists to develop training packages for medical schools and foundation programmes across the UK. The package is now available to all medical schools and foundation programmes in the UK, including in Northern Ireland.

I have encountered a number of problematic, stereotypical opinions of patients with eating disorders being spread through medical training
(4th Year Medical student)

My GP never gave me advice or tips that were helpful at all. She just told me to try to start eating properly. She didn't try and understand what I was going through, the whole experience seemed as though she was rushing
Sarah

As an MLA we ask that you call on the Northern Ireland Assembly to continue to hold the GMC and medical schools to account over their responsibility to ensure that trainee doctors leave medical school with basic levels of knowledge and skills in the identification, safe management and referral of patients with eating disorders.

Full funding for Eating Disorders Services in Northern Ireland

Our key policy ask:

- **The Northern Ireland Executive to allocate full funding to the implementation of the Mental Health Strategy 2021-2031.**

This includes plans for specialist eating disorder services, including access without delay, investment in staffing and the development of talking therapy hubs and intensive day treatment facilities.

Cases of eating disorders are rising at an alarming rate in Northern Ireland. Recent research indicates that **one in six children and young people here are displaying patterns of an eating disorder.**

Eating disorders can have a devastating impact on family relationships and finances. Beat's research report 'Delaying for Years' demonstrates that, on average, each family spent over £32,000 in travel costs, buying special food, and lost income. On average, those in need of treatment find themselves in a cycle of relapse and recovery lasting, on average, six years.

However, there is hope.

The new **Mental Health Strategy for 2021-31 sets out an ambitious but achievable vision** to improve eating disorder services and provide specialist treatments that we know can transform and save lives.

Beat welcomes the ambitious plans to improve early intervention and treatment for those affected by eating disorders included in the recent report on the Review of Eating Disorders Services in Northern Ireland, in particular:

- **Supporting services to offer specialist treatment to all patients presenting with eating disorders, including mild to moderate cases, without delay**
- **The development of talking therapy hubs and intensive day treatment facilities**

- **Further investment to ensure optimum staffing levels and a skills mix to enable eating disorder services to deliver effective care**
- **Upskilling staff in general mental health facilities.**

Northern Ireland has a higher prevalence of mental illness than England, yet our expenditure on mental health services is 27% lower than England and 20% lower than the Republic of Ireland.

The allocation of resources necessary to address this disparity will not only improve quality of life for our service users and our carers, your constituents, but will also provide significant cost-savings to the HSC, and indirectly to other public services, in the longer term.

The economic case for investment in mental health is strong. According to the World Health Organisation, for every \$1 invested in scaling-up treatment for common mental health conditions there is a return of \$5 in improved health and productivity.

When people with eating disorders are unable to quickly access effective treatment in the community, disrupted education, unemployment and costly hospital admissions often follow.

Early intervention is key. In England, the average per-day cost to the NHS for an inpatient child and adolescent mental health service (CAMHS) admission is equivalent to the cost of enabling three patients to have an outpatient appointment. It is not unreasonable to assume that there is a similar cost attached in Northern Ireland.

The Executive has the power to change this and **create a brighter future** for all those whose lives are affected by eating disorders.

It is a positive development that the draft Budget for 2022-25 prioritises funding for health and social care, and recommends full funding for the implementation for the first three years of the Mental Health Strategy, but **our service users need a firm commitment** that these resources will be allocated.

As an MLA, we ask that you engage with colleagues in the Northern Ireland Executive to highlight the urgent need for crucial investment in the implementation of the Mental Health Strategy.

Research Funding

Our key policy ask:

- **Increased funding for eating disorder research**

Major advances are needed in our understanding of what causes eating disorders, how to prevent them developing and how best to treat them. Eating disorders account for just 1% of the UK's already severely limited mental health research funding.

Why eating disorder research is so important

Major advances are needed in our understanding of what causes eating disorders, how to prevent them developing and how best to treat them.

Without this, eating disorders will continue to represent a significant public health issue, devastating lives while leading to high costs to HSC and the economy. The impacts of COVID-19 on demand for eating disorder services in Northern Ireland means that the need for advances in knowledge and innovation through research is more urgent than ever.

Research into eating disorders should be seen as a prudent investment. Often chances for early intervention are missed. Treatments are not always effective. As a result, many patients are admitted for expensive hospital treatment, including in some cases to specialist units in England.

The Northern Ireland Mental Health Strategy 2021-2031, pledges an “*increase in mental health related research*” and “*a more innovative and research focussed culture*”.

The APPG on Eating Disorders' inquiry

In 2020/21, the All-Party Parliamentary Group (APPG) on Eating Disorders conducted an inquiry into research funding. Its 'Breaking the Cycle' report sets out its findings and recommendations.

The inquiry found that despite the prevalence and severity of eating disorders, they receive very little research funding. Total UK investment (in terms of grant funding) amounted to just £1.13 per person affected per year between 2009 and 2019. From 2015-2019 just 1% of the UK's already severely limited mental health research funding went towards research on eating disorders. This is

despite people with eating disorders accounting for around 9% of the total number of people with a mental health condition in the UK.

A funding target for the UK eating disorder research field should as an absolute minimum be based on parity within mental health research. As explained in the report, this would mean an increase of 9-13 times the current funding level, to reach between £13m and £18m per year. However, to achieve the progress needed, the ambition should be much greater - at least £50m-£100m per year.

It is of note how few research groups in the UK conduct eating disorder research.

Prof. Ulrike Schmidt,
Professor of Eating
Disorders, Kings College
London

The inquiry found that **an historic lack of investment has led to a vicious cycle. As a result, there are few active researchers and research centres in the UK and therefore little research is published.** This has helped stigmatising attitudes persist, which reinforce the small capacity of the field, and its lack of funding.



Source: [APPG on Eating Disorders](#) (2021, p.15)

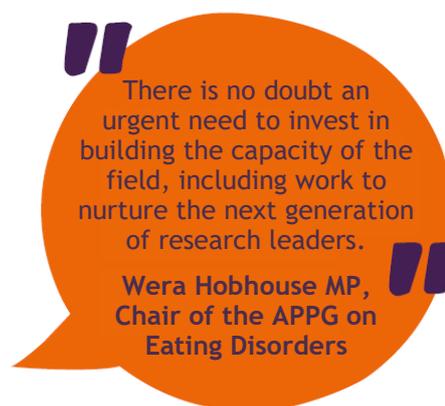
The inquiry also reported serious inequities within the UK eating disorder research field:

- **UK eating disorder research funding is highly concentrated in London.** A total of 83% of grant funding invested by UK funders was awarded to London-based institutions (as the lead institution) from 2009-2019. No other single location accounted for more than 3% of the total share.
- Within the research conducted, certain population/patient groups—including males, people with binge-eating disorder, and people from ethnic minorities—have been largely overlooked.

The Northern Ireland Executive is a significant funder of health research and a partner in various UK-wide forums that agree research priorities. It has committed to ensuring that mental health conditions are treated with the same level of importance as physical health conditions. **This principle must be applied in its approach to research funding.**

The APPG’s recommendations include:

- UK Research and Innovation (UKRI) to collaborate with a group of universities to establish an inter-disciplinary training programme for early-career researchers in eating disorders
- Establishment of a working group to develop and oversee implementation of a long-term UK eating disorder research strategy



- Health and Social Care Northern Ireland (HSCNI) to incorporate a skills and capacity audit and research into future workforce planning for eating disorder services. In addition, to ensure sufficient investment so that time for clinicians to lead or support research can be protected
- Health and Social Care Northern Ireland (HSCNI) to support Health and Social Care Trusts to establish eating disorder research clinics or other innovations to build the capacity of eating disorder services to lead and support audit and research. This would assist with implementation of the recommendations made in the recent review of eating disorders services in Northern Ireland.

Implementation of the APPG’s recommendations, by research funders (including Government departments/agencies), universities, HSC and researchers, would enable us to break the cycle of underfunding in eating disorder research and achieve the much-needed advances in knowledge that research can deliver.

As an MLA you can support our campaigning on this issue by asking questions in the Assembly about implementation of the recommendations made in the APPG’s ‘Breaking the Cycle’ report.

Campaigns to Address Obesity

Our key policy ask:

- **Public health campaigns to address obesity are informed by experts from the field of eating disorders, including experts by experience.**

There is a risk that campaigns to address obesity can promote messages that are harmful to people with or at risk of developing an eating disorder.

Beat recognises the importance of addressing obesity. However, public health campaigns must be evidence-based and avoid causing harm to people with eating disorders.

Campaigns to address obesity must:

- Do no harm to people with eating disorders.
- Be informed by people with lived experience of eating disorders, and experts from the field of eating disorders.
- Avoid the use of reductionist and stigmatising language.
- Be evidence based and understand obesity as a complex interaction involving multiple factors, rather than an individual's choice or something to be ashamed of.
- The action plans that will emerge from the Northern Ireland Mental Health Strategy should specifically address the interactions between obesity and Mental Health.
- The Public Health Authority should consult with Beat and other eating disorders experts, including experts by experience, when designing campaigns such as 'Choose to Live Better'.

Research has found that campaigns to address obesity have the potential to exacerbate eating disorder behaviours, and cause harm to people at risk of developing an eating disorder.

Calorie labelling

Research has found that when making hypothetical food choices, if a menu includes a calorie count, individuals with anorexia and bulimia are more likely to order food with significantly fewer calories, whereas people with binge eating disorder are more likely to order food

with significantly more calories.

There is only a small body of low-quality evidence supporting the idea that calorie counts on menus will lead to a reduction in calories purchased by the general population.

From my own experience of an eating disorder, which I am in mid recovery of, I always struggled to shop for food and studied every nutrition labelling on everything I tried to buy. I often got defeated and was unable to even touch/hold products in the supermarket if they were 'unhealthy' as it would cause panic attacks.

Grace

About Beat

Beat is the UK's eating disorder charity. We exist to end the pain and suffering of eating disorders, and we are here to help anyone affected by these serious mental illnesses.

We provide information and support through Helplines, which people can call, text or email. We also run online support groups and HelpFinder, an online directory of support services.

We provide expert training, resources and consultancy to health and social care professionals and schools, and support and encourage research into eating disorders.

Beat's Helpline and other support services

Beat provides Helplines for people of all ages, offering support and information about eating disorders no matter where you are in your journey. These Helplines are free to call from all phones.

Individuals contacting our Helpline speak to trained advisors who are experienced in listening and talking to people affected by eating disorders.

Anyone affected by an eating disorder can call, email or contact Beat's Helpline Advisors via one-to-one webchat.

Northern Ireland: 0808 801 0434
NIhelp@beateatingdisorders.org.uk

Our Helplines are open 365 days a year from 9am-midnight during the week, and 4pm-midnight on weekends and bank holidays.

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