



A practitioner's guide to weight management and severe mental illness

Introduction

People with severe mental illness have a substantially reduced life expectancy compared to the general population. It is increasingly widely recognised that this inequality is unacceptable and there is growing determination to close the gap. This has led to commitments by government and national health organisations to make the physical health of people with severe mental illness a higher priority, and an important aspect of this is weight management.

Weight management is a complex problem, and this is especially true for people with severe mental illness. They are more likely to have common risk factors for being overweight, such as reduced access to healthy food, lower incomes and health conditions that limit their mobility. In addition, they have risk factors not typically faced by the general population, such as weight gain related to psychiatric medication and admission to inpatient wards with few opportunities to be physically active.

This briefing introduces practitioners, commissioners and policymakers to some of the key themes and evidence around the needs of people with severe mental illness and what is known about effective approaches to healthy weight management. It summarises the findings of a report based on a review of published evidence alongside interviews and focus groups with people living with severe mental illness, families and carers, and practitioners in statutory, voluntary and community health and care services.

About this guide

This project has been commissioned by the VCSE Health and Wellbeing Alliance (HWA), a partnership between the Department of Health, NHS England, and Public Health England, and 20 national voluntary sector organisations and consortia. The Alliance aims to bring the voice of the voluntary sector and people with lived experience into national policy making, to promote equality, and to reduce health inequalities.

The Association of Mental Health Providers, Centre for Mental Health, and Rethink Mental Illness, as members of the Mental Health Consortium, led this project alongside HWA partners Friends, Families and Travellers, The National LGB&T Partnership and Race Equality Foundation. Together, we have carried out extensive engagement with people with lived experience, the VCSE sector, the NHS, local government and academic bodies.



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Challenges

In focus groups, interviews and workshops, we heard from people with severe mental illness about their experiences with weight management. We heard about the difficulties of remaining motivated during fluctuations in their mental health; the complicated ways in which people's eating was related to their emotions; and the lack of long-term support with weight management.

We also heard from practitioners and commissioners about some of the challenges of providing weight management support to people with severe mental illness. We heard that weight management was often sidelined because services were focused solely on people's mental health care. And some practitioners feared that discussing weight management – for example when they are prescribing medication that can cause weight gain – would get in the way of mental health treatment.

Even without these additional challenges, we know that sustained weight loss is hard to achieve. Our research suggests that, if this is the only criterion of success, we are setting people up for failure which, in turn, can lead them to become discouraged and feel hopelessness about weight management.

Helpful steps and actions

Practitioners in mental health services, primary care, acute, community and public health services can make a difference. By listening to the views and experiences of people who have first hand experience, we have identified three steps that can be helpful.

1 Weight gain prevention: Maintaining a healthy weight is not only easier than losing weight, it also avoids the negative effects on physical and mental health caused by weight gain.

The people we spoke to wanted services that were proactive, instead of reactive, and intervened early, for example when people are first diagnosed with a mental illness.

2 Setting achievable goals: Losing weight is difficult and takes time.

For someone with a mental illness it may be especially difficult when they are unwell. But taking up healthy habits and maintaining weight can be important and more achievable markers of progress. Celebrating achievements, for example spending more time outdoors or eating more healthy food, can help. Avoid focusing solely on numbers, such as kilograms lost or gained, or BMI.

3 Building people's intrinsic motivation to adopt healthier activities: Weight management is a life-long process.

Support from a trusted person, flexible options for engagement and more emphasis on enjoyment (for example of physical activities they liked) than on weight loss, can help people feel more motivated over longer periods of time.