



SilverCloud[®]
by Amwell[®]

Healthier Minds for Healthier Outcomes in Long-Term Condition Care

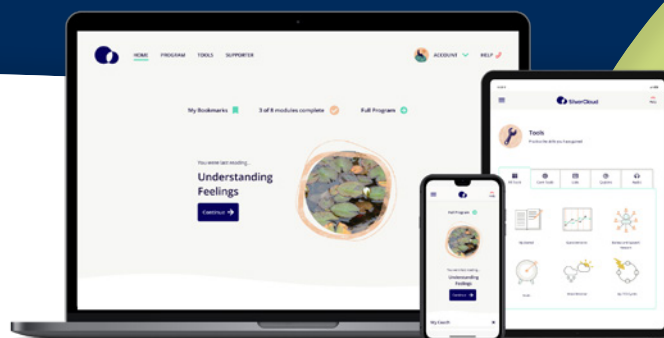
Delivering specialised support with
digital mental health solutions

For governments and health services, the statistics are alarming. In the Scottish Health Survey 2022, 48% of adults reported living with a long-term condition.¹ In the NHS, more than half of all GP consultations, 65% of out-patient visits, and 70% of in-patient bed days relate to the care of people with long term conditions. By the age of 50, half the population of England has a long-term condition, rising to 80% by the age of 65 years.² And with an aging population, plus increases in other risk factors such as obesity, unhealthy lifestyles and socioeconomic challenges, the burden on health systems is only set to get worse. The World Health Organisation described the care and management of people with long-term conditions as “the health care challenge of this century” for good reason.³

Being diagnosed with a long-term condition can have a profound and multidimensional impact on an individual's life. People experience a loss of control as they are forced to change their lifestyle or rethink their plans for the future. They will be required to self-manage their condition, taking medication and monitoring their health, constant reminders of their disease even when they are feeling well.⁴ And for many, work becomes harder or impossible, adding financial stress into an already challenging mix.⁵

Given all of this, it's probably not surprising that common mental health issues such as anxiety and depression are two to three times more likely to occur in people with physical long-term conditions compared with the general population.⁶ Mental health conditions typically affect about 1 in 4 people, so in some cases a pre-existing mental health issue is exacerbated by the consequences of being diagnosed with a physical illness.⁷ In others, a mental health problem could develop as a response to the burden of living with their disease.⁸ Either way, around 5 million people in England have a comorbid long-term condition and mental health problem, resulting in significantly poorer health outcomes and reduced quality of life.^{9, 10, 11}

Addressing the psychological needs of patients living with a long-term condition is a priority for governments and health services, but progress towards this goal is slow. In 2018, the Improving Access to Psychological Therapies Pathway for People with Long-term Physical Health Conditions (IAPT-LTC) was rolled out in England.¹² The goal was to improve care for people with long-term conditions by providing integrated mental and physical services.¹³ Yet several years on, a study published in the British Journal of Health Psychology concluded that “Effective psychological treatment for patients with a long-term condition remains an unresolved priority”.¹⁴



Inevitably there are cost implications to this. Where mental health issues become a barrier to effective self-management of a long-term condition, the risk of complications increases.^{15, 16} A report by the King's Fund estimated that healthcare costs rise by at least 45% for each patient with a long-term condition who is experiencing comorbid mental health problems. As a result, between 12% and 18% of all NHS expenditure on long-term conditions is linked to poor mental health.¹⁷

So, the need for a more holistic approach, with mental health support offered from the point of diagnosis of a long-term condition, remains.¹⁸ But in a context in which health services are facing challenges on many fronts, with growing demand combined with staffing challenges contributing to a system in crisis, scaling mental health services to offer easily accessible evidence-based treatments to everyone diagnosed with a long-term condition can only be achieved by enabling digital pathways.

The purpose of this whitepaper is to explore the experience of living with a long-term condition and the impact it has on quality of mental health. We'll consider how some of the challenges health services are facing when it comes to supporting this group of patients with their mental health can be overcome with digital mental health solutions, and hear from Chris Wright, National Advisor and National Programme Lead Digital Mental Health at Scottish Government, about how the SilverCloud® by Amwell® platform is being used by NHS Scotland to support patients with chronic pain.

“I had to grieve for my previous life.”

The impact of living with a long-term condition.

Being diagnosed with a long-term physical health condition can prompt a wide range of emotional responses. For some people it's a shock. For others, it can be a relief particularly if they have been struggling with their symptoms for some time.

For Rachel, an editorial manager, her diagnosis brought an initial sense of relief and validation. After five years of chronic pain, she could finally put a name – fibromyalgia – to the symptoms that had been making her life a misery and start to get the right treatment.

Fibromyalgia is a long-term condition that causes pain all over the body. It affects around 2% of the population but with no specific tests to confirm the condition, getting a diagnosis can be a real struggle.¹⁹

Without a diagnosis I felt I had to keep going, even though I was in terrible pain. I would drive to work crying because it hurt so much. I would do a full day at my desk, then cry in my car before I had to drive home. In the evening, I would take strong pain killers and lie on the floor for three hours with a hot water bottle on my neck just trying to prepare to get ready to go to bed. That was my normal.



Rachel,
Diagnosed with Fibromyalgia

There's no cure for fibromyalgia but treatment can help relieve some of the symptoms and make them easier to live with. These can include pain medication, antidepressants, and self-management approaches. For Rachel, treatment helped to relieve some of her physical symptoms but radically altered her sense of self. “I literally had to grieve for my previous life. A big sticking point for me is the way I look. I couldn't exercise so I found it hard to manage my weight, and the medication made my face really puffy. So then you lose your confidence and that became a big problem. It feels a bit like a Whac-A-Mole with new issues popping up unexpectedly.”

It's common for people to mourn their previous identity or life, and for some that grief can be compounded by feelings of shame or guilt if there is a sense that their illness was somehow self-inflicted. As well as contending with the restrictions the functional deterioration a chronic condition can impose, they may also need to adopt a whole new lifestyle in which the challenges of learning to manage their condition and simultaneously navigating the healthcare system loom large. Communicating and building relationships with healthcare professionals is not always easy and even explaining your needs to family and friends can be an embarrassing or frustrating experience.^{20, 21}

“No one really understood how hard it was,” recalls Arran, who was diagnosed with Type 2 diabetes last year.

When I was first diagnosed I was in a pretty rough place. I kept thinking, ‘Why is this happening to me? It's not fair!’. I needed help to process something that had fundamentally changed the course of my life.



Arran,
Diagnosed with Type 2 diabetes

The overwhelming feeling Arran experienced was anxiety. “I just didn't feel safe,” he recalls. “Every time I ate I panicked. I kept worrying that I didn't feel right.”

Without careful management of their condition, people with diabetes risk short and long-term complications. There are the immediate issues relating to poorly controlled blood sugar, including hypos (when your blood sugars are too low), hypers (when blood sugars are too high), and in rare cases diabetic ketoacidosis (DKA) a life-threatening emergency caused by a build-up of ketones, a chemical produced by the liver to break down fat. And then there are the longer term, or chronic, complications such as heart disease, kidney disease, nerve damage, and problems with feet, oral health, vision, and hearing.

“You do feel the burden,” says Natasha, who also has type 2 diabetes. “When I first became aware of the consequences of not taking responsibility for managing my diabetes, it was traumatic.”

As with many long-term conditions, managing diabetes requires a high level of personal responsibility. Treatments vary depending on the individual and the type of diabetes but can involve making lifestyle changes, taking medication, monitoring blood glucose levels and carb counting, a highly laborious process which involves estimating the amount of carbohydrate you are going to eat and drink so you can calculate how much insulin you need to take.

“You have to be good in mathematics,” says Natasha. “It’s very complicated and there’s a lot of maths involved in working it all out.”

Many people with long-term conditions experience this constant and indefinite need to factor the management of their health into their lives as a loss of autonomy.

“Diabetes is in control at the end of the day. It doesn’t matter what you are doing, you could be giving a speech at a conference or hiking with friends. If diabetes is telling you to stop, there’s nothing you can do. You have to stop.”



Natasha,
Diagnosed with Type 2 diabetes

Natasha refuses to let diabetes limit her life. But it’s not hard to see how things might be different. Social isolation is a real risk for people living with a chronic condition, particularly if they feel embarrassed about their symptoms or how they look, or are fearful of developing complications if they leave home.²² And that, in itself, can cause a downward spiral in physical and mental health as people live increasingly sedentary lifestyle and withdraw from the family and social networks that might typically support their efforts to remain active and follow their treatment recommendations.²³

Increasing access to mental health support for people with long-term conditions

Despite a widespread recognition of the complications that can arise when depression and anxiety co-exist with a long-term condition, they are still underdiagnosed.²⁴

There are many reasons for this. Patients may find it hard to identify symptoms of a mental health problem, ascribing their feelings to a natural response to their physical health condition and assuming that nothing can be done. Concern about stigma relating to mental health issues remains, despite the increasing profile of mental wellbeing in the general population. And without being invited to talk about their mental health, a patient may simply not feel there is time to raise it in appointments and check-ups that can already feel rushed.^{25, 26}

With health services under so much pressure, a lack of time is undoubtedly a significant barrier to clinicians’ ability to support patients beyond their physical symptoms.

“Time is a massive issue for clinical staff. To support an individual’s mental health you would need longer appointments and that’s really difficult with the pressures that exist within healthcare.”



Chris Wright,
National Advisor and National Programme Lead Digital Mental Health at Scottish Government

Some clinicians may feel they don't have the skills and confidence to engage in conversations about mental health. And without clear pathways to access timely and relevant support, clinicians may feel that there is simply no point in opening the door to a conversation in the first place. "In Scotland, we know that health psychology is a valuable but rare resource across a lot of our health boards. So for some specialist physicians, they may be thinking that there's not really much they can do with that patient when they identify a mental health issue. There just isn't a service route open to them."

In order to open up these new service routes, in 2019 Wright introduced SilverCloud® digital programmes designed specifically to address mental health issues in a range of long-term physical health conditions.

Digital therapy for common mental health disorders was already well established in Scotland. Following a national rollout which kicked off ten years ago and has expanded incrementally, referrals to digital therapy now run at about 74,000 per year, compared to 78,000 referrals to a one-to-one intervention. With a highly dispersed rural population, digital has a particularly valuable role to play in increasing accessibility to mental health care.

Scotland's about as remote and rural as it gets but if you use digital in the right way, it can break down some of those geographical barriers.



Chris Wright,
National Advisor and National
Programme Lead Digital Mental Health
at Scottish Government

For example, it can give people in rural areas access to more specialised treatments that otherwise might be unavailable to them. "In the cities you might have ten or 11 psychology specialities but as you progress up into the Highlands and islands, then those specialties become pretty scarce."

In a drive to expand the provision of digital therapy, Wright had identified people with long-term conditions as a clinical population with a very high level of need which is predicted to grow exponentially year on year.



At the time, out of 1,400 psychology staff in Scotland, there were only 150 working in physical health, so there was little specialist resource despite long-term conditions being a focal point of Scotland's healthcare delivery.

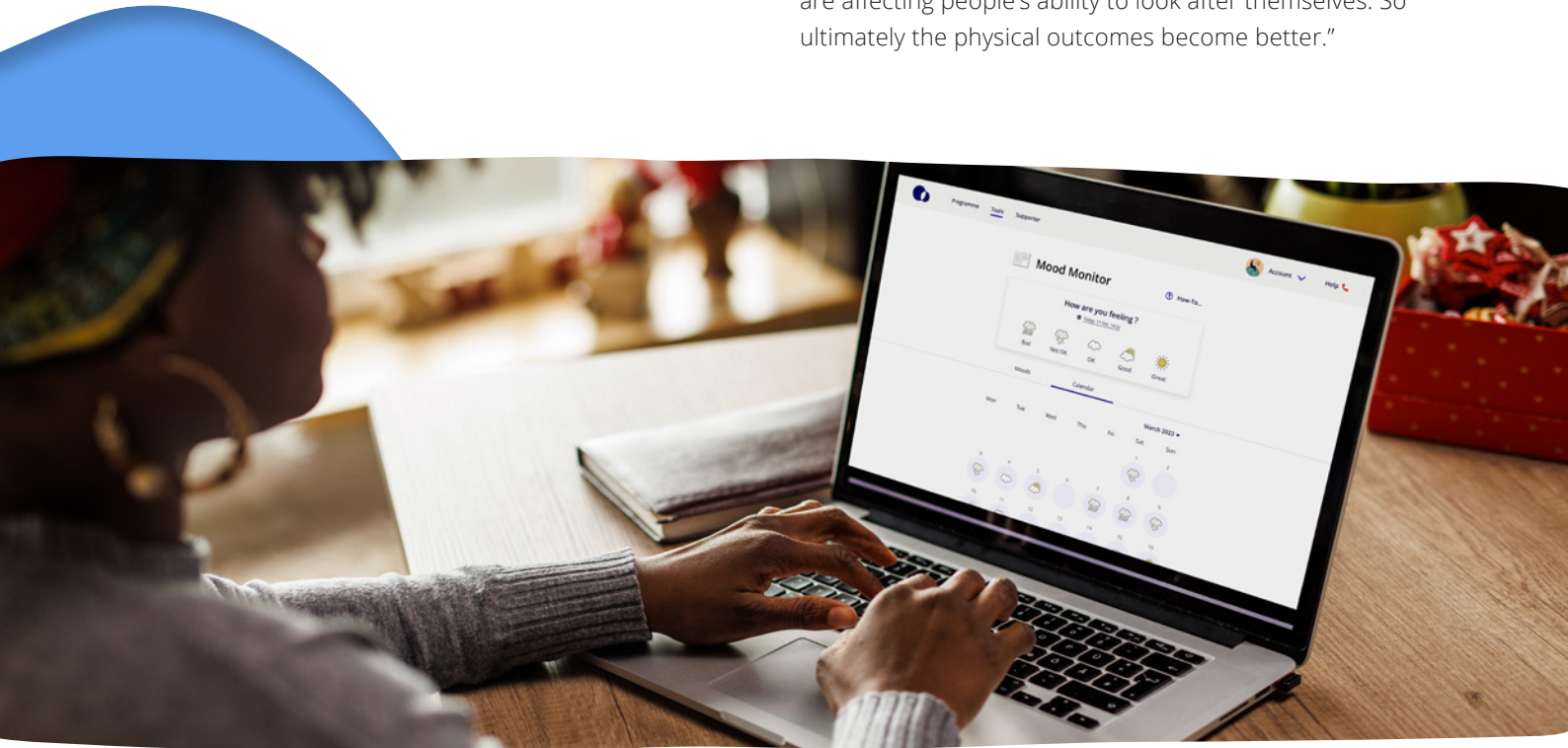
There is a wealth of evidence behind the use of low-intensity psychological interventions, particularly internet-based Cognitive Behaviour Therapy (iCBT), for treating depression and anxiety in patients with long-term conditions. These interventions have been shown to improve coping skills and quality of life for people with co-morbid long-term conditions, as well as reducing the use of health services.^{27, 28, 29}

Acceptance and Commitment Therapy (ACT), a third-wave cognitive-behavioural therapy which forms the basis of the SilverCloud® **Chronic Conditions** programmes, is particularly well-suited to patients with long-term conditions, as it supports psychosocial adjustment to life with their condition, as well as addressing symptoms of depression and anxiety.³⁰

While iCBT employs the same elements as face-to-face CBT, it has some additional features that are potentially beneficial to people with long-term conditions. iCBT takes place online with asynchronous support. That means it bypasses the need for in-person attendance, negating problems such as mobility and fatigue challenges or last-minute therapy appointment cancellations due to symptom flare-ups. And as patients can complete the modules in their own time, it becomes much easier for them to fit their therapy around other healthcare appointments.^{31, 32}

Clearly, the needs of an individual with, for example, diabetes are very different to someone with coronary heart disease. One of the key benefits of the SilverCloud platform is that it offers a suite of programmes that are tailored to mental health in the context of specific long-term conditions.

“The more relevant the treatment appears to the individual, the better the engagement and the better the outcome,” says Wright. “And with specialist treatments, you can begin to have wider conversations about the impact of mental health conditions on self-management. You can look at how things like depression and anxiety are affecting people’s ability to look after themselves. So ultimately the physical outcomes become better.”



Forging New Pathways: The Challenge of Integrated Care

Many healthcare systems around the world are moving towards integrated models to improve access to services and enhance quality of care.³³ This is often described as a holistic or whole-person approach, where care is delivered according to an individual’s or community’s needs rather than a rigid organisational structure.

Addressing mental health issues as part of the treatment of long-term conditions plays a central role in this strategy. But it requires systemic change to infrastructure and culture, and that is not an easy thing to make happen.

“We still have some way to go in terms of cultural change,” says Wright. “We need to be considering mental health as a core element within acute settings. There’s an acknowledgement that mental health plays a big part in how people manage their long-term conditions and I suspect a lot of clinicians do have conversations around mental health in terms of seeing how the patient is getting on. But those conversations may not be leading to action due to limited options.”

Training, implementation reviews and internal marketing all have a role to play in increasing referrals to digital mental health programmes for patients with long-term conditions. But empowering patients to proactively manage their mental health is also part of the plan. “We need to ensure that when people recognise they have a mental health condition that they’re aware of these treatments that they can access.”

Wright talks about “stacking the deck to ensure there are multiple points of access to good quality mental health treatments” for people with long-term conditions. That could mean opening up self-referral pathways, and also working with the third sector “which is where a vast majority of self-management information and support sits”.

“We need mental health support to be there when the patient needs it most. And because the patient journey will not be a straight, linear process through a healthcare system, if we only focus on that healthcare system, we will be excluding a lot of people. We need to be more thoughtful about how we are making these services accessible, and digital allows us to do that.”



Chris Wright,
National Advisor and National
Programme Lead Digital Mental Health
at Scottish Government

How SilverCloud® *Chronic Conditions* programmes are increasing access to evidence-based health support in Scotland.

Organisation:

NHS Scotland

Year of implementation:

2019

Number of people completed LTC programmes:

4,615 activations since 2019

A wide range of programmes were implemented including:

- *Chronic Pain*
- *Diabetes*
- *Heart Conditions*
- *Lung Conditions*

“The programme is a fantastic learning tool; it greatly helps me understand my situation and the fact there are others who are the same has given me hope. I do enjoy the programme.”

Chronic Pain programme user

NHS Scotland is a pioneer in using digital mental health programmes to support people with long-term conditions. Integrating the SilverCloud® by Amwell® platform, they introduced the *Chronic Conditions* programmes to give access to treatment for clinical populations that might not have access via other routes due to:

- A dispersed population in Scotland creating barriers to accessing services
- A high level of demand but little specialist health psychology resource



On-Demand Webinar: Chris Wright discusses the NHS Scotland experience. **Watch now!**

A key advantage of the SilverCloud® platform to NHS Scotland was the ability to buy and implement one product and cater for lots of clinical populations because of the suite of programmes and tools available.

The SilverCloud *Chronic Conditions* programmes were originally introduced with “test of change” funding with a goal of making them available across all 14 regional NHS Boards. That has been achieved and the programmes are now supporting more than 1000 patients per year with very positive results.

About SilverCloud® by Amwell®

SilverCloud® by Amwell® is a clinically proven digital platform offering evidence-based programmes and tools to deliver mental health support at scale. We have worked closely with health systems such as the NHS across England, Scotland & Wales, and the HSE in Ireland and over 600 global health providers for over ten years to transform mental health support for patients.

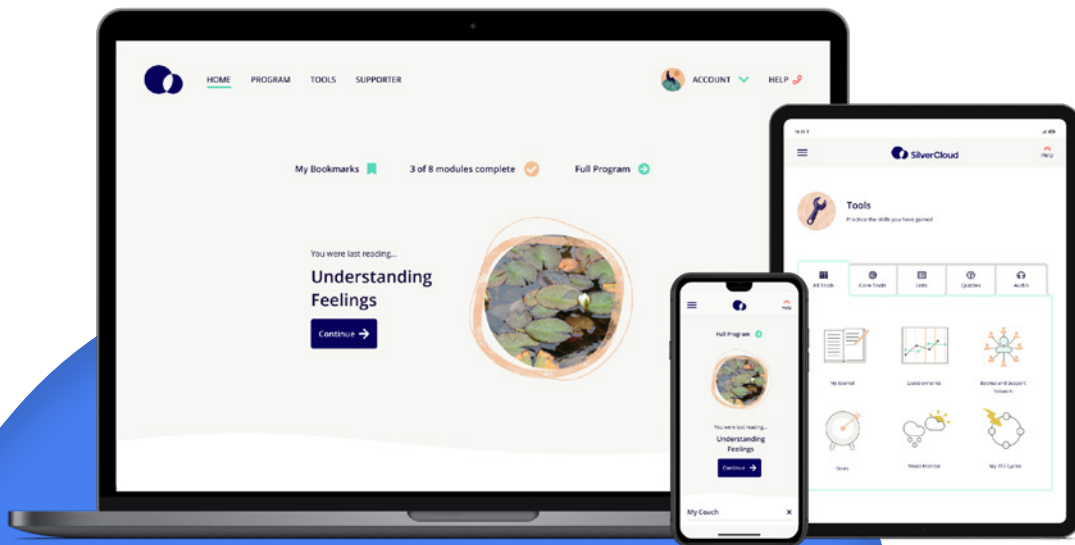
The SilverCloud® platform is backed by robust evidence delivering industry-leading effectiveness and engagement, plus a range of clinical programmes that encompass the full spectrum of mental health needs.

Digital, On-Demand Programmes for Chronic Conditions

SilverCloud *Chronic Conditions* programmes support patients to increase awareness and understanding of emotions related their long-term condition while learning positive lifestyle changes.

Programmes include:

- Chronic Pain
- Diabetes
- Heart Conditions
- COPD & Lung Conditions



[Book a demo](#)

Proven to treat

4x

people at ¼ the cost of face-to-face therapy

65%

of users achieve clinically significant improvement

93%

user satisfaction

Helped

1.2M

users to think and feel better

Trusted by

500+

organisations

SilverCloud
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