Institution: University of Sheffield

Unit of Assessment: A-04 Psychology, Psychiatry and Neuroscience

Title of case study: Reducing psychological distress associated with skin conditions: Impacts on policy recommendations, clinical guidelines, training, and psychological interventions

Period when the underpinning research was undertaken: 2001–2020

Details of staff conducting the underpinning research from the submitting unit:

<table>
<thead>
<tr>
<th>Name(s)</th>
<th>Role(s) (e.g. job title):</th>
<th>Period(s) employed by submitting HEI:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andrew Thompson</td>
<td>Reader</td>
<td>2001–2019</td>
</tr>
<tr>
<td>Gerry Kent</td>
<td>Senior Lecturer</td>
<td>1976–2005</td>
</tr>
<tr>
<td>Paul Norman</td>
<td>Professor</td>
<td>1996–2020</td>
</tr>
<tr>
<td>Thomas Webb</td>
<td>Professor</td>
<td>2006–2020</td>
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</tbody>
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Is this case study continued from a case study submitted in 2014? N

1. Summary of the impact (indicative maximum 100 words)

Sheffield research on the psychological consequences of skin conditions has helped to shape policy recommendations to increase psycho-dermatology services and clinical guidelines to improve patient care. Sheffield research has also been incorporated into: training for health professionals, including e-modules for NHS/social care personnel (730 completed modules) and dermatology nurses (800 views/month) and a leading practitioner handbook on cognitive behavioural interventions for visible conditions (559 sales worldwide); psychological interventions for people with skin conditions, including self-help online resources provided by the British Association of Dermatologists (6,000+ visits/year) and NHS/IAPT services (6,000+ visits/year); and collaborations with skin charities.

2. Underpinning research (indicative maximum 500 words)

Context

Skin conditions comprise the fourth leading cause of nonfatal global disease burden. 60% of the UK population suffer, or have suffered, from a skin condition (British Skin Foundation, 2020). In 2016, over 13 million people visited their GP with a skin condition, costing the NHS £723m; 85% reported that psychosocial aspects were a significant part of their condition (Dermatology Expert Working Group, 2018). Research and development (R&D) investment in skin conditions in the UK is underfunded by £155m p.a. (APPGS, 2020).

Research

Research at Sheffield led by Thompson (funded by ESRC, METRC, Healing Foundation, British Skin Foundation, Psoriasis and Psoriatic Arthritis Association, Alopecia UK) has documented the severity of psychological reactions to living with common skin conditions (e.g. alopecia, eczema, psoriasis, vitiligo), highlighted a substantial and unmet need for psychological interventions,
identified key variables underlying people’s psychological reactions, and developed and evaluated interventions to reduce psychological distress.

**Psychological consequences of skin conditions and the need for psychological interventions**

An influential review (200+ citations) of adaptation to disfigurement by Thompson and Kent identified substantial gaps in knowledge of the psychosocial consequences of visible skin conditions [R1]. These included a lack of research and understanding of the role of psychological variables and the challenges experienced by people living with appearance-related conditions, along with a lack of evidence-based interventions.

To address these research gaps, Sheffield researchers subsequently conducted: (i) qualitative studies to investigate people’s experiences of living with skin conditions – e.g. R2 highlighted the “overwhelming” experience of living with vitiligo and the use of a range of cognitive and behavioural strategies that helped people to adjust psychologically; and (ii) systematic reviews and meta-analyses on the psychological impact of skin conditions and the effectiveness of psychosocial interventions – e.g. a Cochrane review [R3] reported some positive effects of psycho-educational interventions on disease severity and quality of life in childhood eczema, but also highlighted the sparseness of evidence-based interventions.

**Psychological determinants of adjustment to skin conditions**

In response to the need to develop evidence-based interventions, Sheffield researchers have conducted research on the psychological predictors of adjustment to skin conditions (e.g. attentional bias, cognitive flexibility, mindfulness) [R4]. This research, along with our qualitative work [R2], has been used to develop interventions to reduce psychological distress associated with skin conditions, including psycho-education, attention refocusing and relaxation [R5].

**Psychological interventions for people with skin conditions**

Based on this underlying research, Sheffield researchers have developed and evaluated a number of self-help interventions for specific skin conditions. R5 found that a psychosocial self-help intervention led to clinically significant reductions in social anxiety associated with vitiligo.

Thompson was also the regional principal investigator on the UK-wide ‘Appearance Research Collaboration’ study in 2013, which was the largest study (N=1265) conducted to date on visible difference. The findings formed the empirical basis of recommended cognitive behavioural interventions for people affected by visible difference (e.g. skin conditions) that were detailed in the first, and leading, practitioner handbook in the field [R6].

3. References to the research (indicative maximum of six references)

**Sheffield authors are in bold.**


Impact case study (REF3)


4. Details of the impact (indicative maximum 750 words)

Policy recommendations and clinical guidelines

The *All-Party Parliamentary Group on Skin (APPGS) 2020 Report* [S1] cited Sheffield research on the psychological impact of skin conditions [R1, R2, R4] and educational and psychological interventions [R3, R5] as evidence for policy recommendations for the routine psychological monitoring of people with skin conditions and increased access to specialist mental health support. The report specifically recommended including skin-specific care pathways in all IAPT services, highlighting a "model service" based on Sheffield research.

*British Association of Dermatologists (BAD) 2020 clinical guidelines for the management of vitiligo* were presented in 2020 at the European Academy of Dermatology and Venereology Congress [S2]. The updated guidelines cited Sheffield research on the psychological impact of vitiligo [R2] and the benefits of self-help [R5] as evidence for recommendations that: clinicians discuss the psychosocial impact of vitiligo with patients (#3); quality of life and psychological distress are routinely monitored (#5); and self-help resources are provided for those experiencing mild psychological distress (#23). BAD has 1,000+ members. The guidelines were due to be published in 2020 but delayed until 2021 due to the coronavirus pandemic.


Training for clinicians

*NHS e-health learning dermatology modules* on psychosocial management, assessment, and interventions for dermatology patients, developed in collaboration with Thompson in 2017 and incorporating Sheffield research, form part of the British Association of Dermatologists’ consultant curriculum (there are 650 UK consultant dermatologists). They are freely available to
Impact case study (REF3)

NHS and social care workers in the UK and to international and private health and social care providers via a fee-paying provider. To date, [Text removed for publication] modules have been completed by NHS/social care personnel and fee-paying users [S4].

**British Dermatological Nursing Group (BDNG) training materials.** Thompson has produced clinical skills training materials for nurses on the assessment and management of psychological issues in dermatology that incorporates Sheffield research. These have been published in the BDNG’s professional journal [Text removed for publication] and are available as clinical skills e-resources [Text removed for publication]. Thompson delivered associated training to 300+ practitioners at the 2018 Annual Dermatology Nursing Conference. These activities have “positively contributed to the strategic aims of the BDNG” to promote high quality care for dermatological patients [S5].

The leading practitioner handbook on CBT for people affected by visible difference [R6] with 559 sales across all world regions [S6]. Recommended by the skin charity, Changing Faces, as “required reading” for practitioners [S10].

Since 2013, Thompson has delivered 30+ training sessions based on Sheffield research to dermatologists, dermatology nurses, and NHS/IAPT staff [S5, S10]. Thompson has also developed specific training for NHS/IAPT Psychological Wellbeing Practitioners (PWPs) on the assessment and management of conditions affecting appearance. [Text removed for publication].

**Psychological interventions**

**The British Association of Dermatologists Skin Support website** launched in 2015 contains resources and self-help materials developed by Sheffield researchers [R5]. 2019 usage data indicates 6,313 visits to pages containing self-help materials. These materials can also be accessed via a Skin Support Personal Evaluation questionnaire (40,941 visits) [S8]. Evaluations indicate very positive ratings: 80% of users would use the website again and 87% of dermatology professionals would recommend the website to someone with a skin condition [S9].

**Sheffield Health and Social Care NHS Foundation Trust** introduced a skin-specific pathway into their health and wellbeing IAPT in 2018, based on Sheffield research and including Sheffield self-help materials [R5] [Text removed for publication]. The APPGS 2020 Report highlighted this “model service”, recommending that all Clinical Commissioning Groups implement such a care pathway as part of IAPT provision [S3]. [Text removed for publication].

**Work of skin charities**

Thompson has long-term collaborations, including advisory roles, with UK and international skin charities - Changing Faces (2019-present), Katie Piper Foundation (2013-2018), Alopecia UK (2018-2020), Vitiligo Society (2017-present), International Vitiligo Foundation (2014-present), and Vitiligo Support and Awareness Foundation, Nigeria (2013-2017). In these collaborations, Thompson has used Sheffield research to provide training materials and events for clinicians, develop and evaluate psychosocial support services, and support public awareness campaigns. As an example, Changing Faces concluded that Sheffield research “has had a significant impact on our work as the leading charity in the area of disfigurement that, in turn, has impacted on the services we provide to people living with visible differences” [S10].
5. Sources to corroborate the impact (indicative maximum of 10 references)

Clinical guidelines and policy recommendations

S1. All-Party Parliamentary Group on Skin Report (2020) that cites Sheffield research as evidence for policy recommendations (p.14-16,35) and highlights the Sheffield IAPT “Living Well with a Skin Condition” care pathway as a model service (p.54-55).

S2. British Association of Dermatologists updated clinical guidelines for the management of people with vitiligo cite Sheffield research were presented at the 29th European Academy of Dermatology and Venereology Congress, 2020.


Training for clinicians

S4. [Text removed for publication].

S5. [Text removed for publication].


Provision of psychological Interventions

S7. [Text removed for publication].


Work of skin charities

S10. Testimonial from Changing Faces. Covers evidence of support to charity, the impact on practice of specific Sheffield research and of the usefulness of the CBT practitioner book.