

## Responses from Professor Anita Thapar

### Annex: follow up questions after evidence session

Following the evidence session you attended on 8 June 2022 as part of our inquiry into mental health inequalities, we would welcome further information on the matters listed below. We would be grateful to receive your response by Friday 24 June.

#### Access to mental health services

Throughout our inquiry we have heard about the importance of co-production. To what extent are people with lived experience of neurodivergence or neurodevelopmental conditions involved in the development and delivery of neurodevelopmental services? How could this be improved?

In the service I work in and as far as I know more broadly in South Wales- people who are neurodivergent are not involved in the development and delivery. A big concern for NHS clinicians is that they have no means for changing anything given limited resources and huge demands with long wait lists- so it would create expectations that cannot be met.

#### Awareness and understanding

We have heard concerns about levels of awareness and understanding of neurodivergent conditions among the education, mental health and wider workforce. How could the development and delivery of training could be improved? Are there particular parts of the workforce, or elements of training that should be prioritised?

Training across the board is needed. In education and social care-the level of knowledge is extremely variable as reflected by the quality of referrals and information provided. Within the NHS-again expertise and knowledge is variable. Hence training needs to be improved at all levels-education, social care, NHS specialist services.

Training needs to increase awareness of the core features, impacts of NDDs and links with mental health disorders and what are the main interventions.

We have also heard that there needs to be greater public awareness and understanding of neurodiversity and neurodivergent conditions. What could be done to encourage a cultural shift in society towards 'e\_m\_b\_r\_a\_c\_i\_n\_g' \_n\_e\_u\_r\_o\_d\_i\_v\_e\_r\_s\_i\_t\_y\_?

Start with school pupils-primary and secondary to capture whole populations early-on  
And employers.

People also need to know there is a huge variability in the spectrum of severity-high functioning to extremely impaired.

#### Welsh Government policy

Is there a sufficiently joined-up approach within Welsh Government to deliver the improvements and outcomes needed for people with neurodivergent conditions? If not, what needs to change?

NDD services are divorced now from CAMHS-that is not sensible and needs to be addressed urgently.

It is good that the overlaps between different NDDs is now recognised (instead of separate pathways) but it has to be linked to mental health services.

Education and social care -still needs to be better joined up with NHS around what to do with NDDs- especially uncoupling support (other than medical/specialist services) to getting a diagnosis.