

This response was submitted to the consultation held by the Nuffield Council on Bioethics on *Public Health: ethical issues* between May and September 2006. The views expressed are solely those of the respondent(s) and not those of the Council.

The British Psychological Society

General Comments:

This response has been prepared by the British Psychological Society's Research Board in conjunction with the Ethics Committee.

The British Psychological Society is the learned and professional body for psychologists in the United Kingdom. It has a total membership of over 42,000 and is a registered charity. Under its Royal Charter, the key objective of the Society is "to promote the advancement and diffusion of the knowledge of psychology pure and applied and especially to promote the efficiency and usefulness of members by setting up a high standard of professional education and knowledge". The Society maintains the Register of Chartered Psychologists and has a code of conduct and investigatory and disciplinary systems in place to consider complaints of professional misconduct relating to its members. The Society is an examining body granting certificates and diplomas in specialist areas of professional applied psychology.

We very much welcome the opportunity to contribute to this consultation document. However, we were disappointed that there is very little, if any, reference to psychology throughout the paper.

Given that some of the issues under discussion relate to implied moral judgments on those engaging in high risk health behaviour (excessive alcohol and tobacco consumption etc), the inclusion of reference to the growing body of psychological research on the psychology of choice, risk-taking and health behaviour change, is of fundamental importance.

We note that no psychologists were involved in the working group and would strongly recommend that this be re-considered. Indeed, we would be willing to put forward the names of a number of individuals with significant expertise in the aforementioned areas to assist the group.

We were also concerned to note that psychological wellbeing is not listed as a public health problem. Given the increased recognition of the long term impact of stress on public health, and the current reforms to increase access to psychological services (with particular reference to the initiatives being put forward by Lord Layard etc), we believe that it is crucial that psychological wellbeing be recognised in this document as an escalating public health problem.

We also note that due attention is not paid to diversity and equality issues. Religious, ethnic and other differences that impact on approaches to health and health behaviour must be acknowledged.

As a result of our general concerns outlined above, we do not wish to submit responses in relation to the specific questions at this time.

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