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British Psychological Society ME/CFS Guidelines

September 2026 Update by volunteer Katherine Langford

Welcome to the third British Psychological Society ME/CFS Guidelines update. We have been carrying out further analysis of the responses to our survey about what people with ME/CFS want psychologists to know to support both the guidelines and a planned research paper. Participants have said very clearly that the guidelines must recognise ME/CFS is a biological illness that cannot be cured by psychological methods. The role of psychology is support. The survey has identified multiple different ways that psychologists can potentially give that support and help people with ME/CFS:

- **Build trust:** by believing people, listening compassionately, respecting lived expertise and taking limits seriously.
- **Support life with ME/CFS:** including grief, identity change, loss of autonomy, loneliness, uncertainty, hope and changed relationships.
- **Support pacing:** by helping people recognise limits, plan around exertion and reduce guilt, shame, self-blame or pressure to push through.
- **Adapt care:** so psychological support is accessible, paced, flexible and appropriate for the person's severity and energy limits.
- **Support mental health safely:** by adapting work on anxiety, depression, trauma or other difficulties so ME/CFS symptoms are not misinterpreted.
- **Work with wider systems:** including families, carers, schools, employers, healthcare, benefits, social care and voluntary-sector support to help support and educate others.
- **Reduce harm:** challenge psychologization, coercion and patient blaming. Avoid minimising comments and inappropriate pressure to increase activity.
- **Help process trauma:** disbelief, dismissal, psychologisation, delayed diagnosis, medical gaslighting, coercion and previous harmful treatment can impact mental health.
- **Signposting to resources:** help with practical problem solving and system navigation, including benefits, social care, mobility aids, workplace adjustments, education, housing and finances where appropriate.

Psychology won't help everyone

Not everyone with ME/CFS will benefit from seeing a psychologist. Some people do not need psychological support, already have support, want or need to prioritise practical or medical help, or are not well enough to participate in therapy. For some, therapy itself can worsen symptoms because of the physical exertion of attending, the cognitive effort of talking and processing information, or the emotional exertion of discussing difficult experiences.

Last time, we introduced you to some of the team working on the guidelines. Dr Jo Greer is a Chartered Educational Psychologist and another of our amazing volunteers. She is also a carer for her daughter, who has very severe ME. Here Jo shares her experience:

Following COVID Pneumonia in 2021, my teenage daughter (previously fit and well) suddenly became very ill. She has a diagnosis of very severe ME and is one of the estimated 25% of people with ME/CFS who are categorised as 'severe' or 'very severe'. Her dad and I are currently her full-time carers.

Despite my professional background and experience of multi-disciplinary working, nothing had prepared me for trying to secure support as a parent for my own daughter who was suddenly so unwell and yet faced a system with no treatments, no pathway, and a dangerous lack of awareness of ME/CFS among professionals. I soon learned that our experience as a family was far from unique.

In 2024 I launched The Red Tree and ME: www.theredtreeandme.com. It brings together lived experience and artistic expression to raise awareness and support for the research led by Professor Chris Ponting at the University of Edinburgh, which ultimately aims to find effective treatments and a cure.

"Nothing had prepared me for trying to secure support as a parent for my own daughter"

As an Educational Psychologist with lived experience as a carer for a young person with very severe ME, I know I have a somewhat unique vantage point. I was really pleased to be invited to join the writing group for the British Psychological Society ME/CFS Guidelines for Psychologists, especially contributing to sections relating to children and young people.

For too long, people with ME/CFS have faced misunderstanding and minimisation. Misinterpretation of physical symptoms has often led to inappropriate treatments, pressure to increase activity, and physical and emotional harm. Clear, evidence informed guidelines for professionals will help prevent this. I believe the ME/CFS Guidelines for Psychologists are an important step towards creating meaningful change - not just in clinical settings, but also in schools, families, and communities.

Future plans

We want to increase consultations with people who have ME/CFS and need to consult BPS members. This is likely to take several months as we want to give people with severe ME/CFS time to submit feedback. We hope final publication will be in 2027.

Please feel free to contact us at katherine.volunteer@actionforme.org.uk

I am a volunteer with ME myself, so it may take a while to respond.

