

Mental health for young European Coeliacs: 2026

# Mental health for young people with coeliac disease

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# Coeliac disease is more than diet

Reading food labels, monitoring food preparation, and advocacy for dietary needs

Meyer (2022; Int J Environ Res Public Health)

*“Have to think about it the whole time. You can never let it go.”*

Sverker et al. (2005; Journal of Human Nutrition and Dietetics).

Feeling different or excluded

Ford (2012; Br J Health Psychol)



# What does life with coeliac disease feel like?



## Always on guard

Constant vigilance to avoid gluten



## Social impact

Feeling different, excluded, or misunderstood



## Emotional load

Worry, stress and the fear of getting it wrong



## Daily decisions

Food choices take time, energy and planning

*Children describe living “on guard”, managing uncertainty, and navigating social situations where they depend on others to stay safe. (Maddison-Roberts et al., 2025)*



# Gluten free diet management

How young people manage their gluten free diet really varies

Flexible

Rigid/controlling

Confident

Avoidant

Balanced approach

Preoccupied with food

Gluten free diet fits into life

Gluten free diet dominates life

*~50% of adolescents show more maladaptive approaches which are linked to poorer quality of life (Cadenhead et al., 2019)*

# Mental health



## High reports of anxiety and depression

~39% of children with coeliac disease report clinically significant symptoms (Germone et al., 2022).



## Increased risk of psychological comorbidities

Systematic review shows higher rates of psychological symptoms in children with coeliac disease (Coburn et al., 2019).



## Impaired quality of life

Children with coeliac disease report lower social and emotional wellbeing, and overall quality of life (Germone et al., 2022).

*Mental health and wellbeing are closely linked to gluten-free diet management and long-term outcomes.*



# Coeliac disease is managed within families

## Families manage the condition

Food preparation and separate cooking, checking ingredients and cross contact, planning and coordination every day

## Ongoing caregiver burden

Worry about food safety, responsibility for managing the gluten free diet, mental load and vigilance always “on”

## Impact on family life

Impact on social activities and eating out, changes to daily routines and family events, financial pressures of the gluten free diet

*Families face emotional and practical burden (Satherley et al., 2020).*



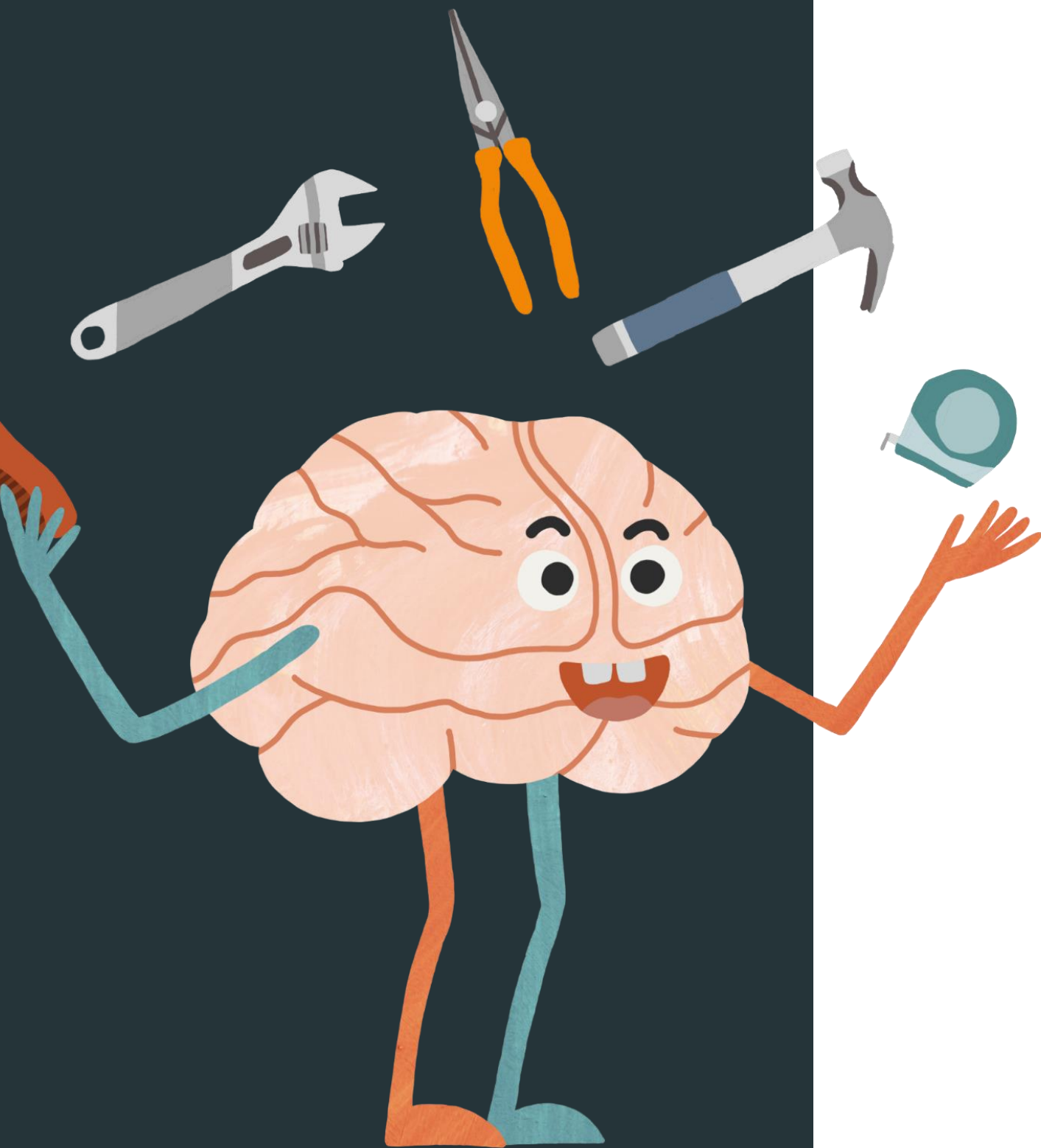


# What children want from support?

“Support often focuses on food, but not  
on how it feels to live with the  
condition.”

To be understood, support in school and social situations, help managing uncertainty,  
and support that fits real life. **Tallentire et al., (2024).**

# What can integrated services look like?



## Identify psychosocial needs early

Routine psychosocial check-ins

Recognise anxiety, avoidance, social withdrawal

Don't wait for crisis

## Join up care pathways

Dietetic and psychological support together

Clear referral pathways

Mental health included in routine coeliac care

## Support everyday environments

Schools understand coeliac disease

Safe and inclusive food environments

Support participation, not just safety

## Work with families and communities

Guidance for caregivers

Peer/community support

Youth-centred and collaborative

# Self-help support for children and families

A brief, accessible self-help intervention to support emotional wellbeing and quality of life in young people with coeliac disease (Satherley et al., 2026).

Families found the intervention helpful and relevant  
Used flexibly in real life (e.g. at home, school)  
Social QoL improved (moderate–large effect)  
Effects reduced over time

Early evidence suggests scalable, low-intensity psychological support can improve quality of life, but may need to be combined with ongoing support



# THANK YOU



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