

# A Manifesto for Improving Mental Health from the Coalition for Psychoanalysis in the NHS

Psychoanalysis has made and will continue to make a major contribution, nationally and internationally, to the understanding of mental distress and the development of mental health services. The major organisations representing psychoanalysis in the UK have come together to raise the profile of psychoanalytically informed interventions in the NHS. We believe the distinctive contribution of psychoanalytic skills within multi-disciplinary NHS teams, working alongside other team members, can extend their reach and strengthen their impact so that today's NHS services can deliver the aspirations of the NHS Long Term Plan.

This prospectus sets out the Coalition's case for how we see psychoanalysis adding value by making ourselves relevant to the challenges of 21<sup>st</sup> century health care. It shows briefly how commissioners and decision makers in the public sector can best use skilled psychoanalytic practitioners in new and existing roles to support policy objectives for the whole population.

1. **Prevention not cure.** We ask for recognition that mental health is different from physical health: parity yes, but respect for difference. Tackling social causes of distress, understanding our thinking, feelings and behaviours, and how good relationships support wellbeing, can help break the cycle of misery that still affects too many. Our work with children, families and couples pursues this. Our practice today yields valuable insights into stigma in mental illness intersecting with ethnic and social inequality, gender and sexuality, and in professional power structures.
2. **Social responsibility.** Problems such as knife crime will not be solved by 20,000 more police officers alone. But if we could deploy 20,000 more therapists working alongside our blue light services, and in our schools and with young people, that would make a real difference. We want a psychologically-trained 'care force' and new multi-disciplinary teams tasked to promote and maintain safer communities.
3. **Right therapy, right place, right time.** Both the NICE guidelines for depression and the IAPT Manual recognise that 'availability of choice improves clinical outcomes.' And yet there is still very limited choice: CBT, counselling, or an unacceptably long wait. For children and young people with depression, and for those who suffer abuse and neglect, as well as for adults with depression, and for some medically unexplained symptoms, NICE guidelines recommend psychoanalytic therapies.

The 5-Year Forward View said that services would offer patients their preferred choice of NICE-recommended therapy so that they would get the right therapy for them. But in large parts of the NHS the gaps in access to NICE-recommended psychodynamic therapies have grown. Workforce planners should see Dynamic Interpersonal Therapists in IAPT, and Child and Adolescent Psychotherapists in CAMHS, as core members of all such NHS multi-disciplinary teams. We need investment in funded training to expand their numbers. Our offer is to work with decision-makers and providers locally, regionally and nationally to develop realistic plans to incorporate brief psychodynamic therapies into local services.

4. **Supporting each other.** There are serious problems of recruitment, retention and poor staff wellbeing in NHS mental health services. We can help. Firstly, we are trained to support reflective practice for staff teams, and this improves wellbeing and retention. Secondly our practitioners in the 3<sup>rd</sup> and private sectors can help reduce pressure on local NHS services. Our offer is to go wherever workforce problems in mental health services are most acute to help them find solutions.
  
5. **A new Mental Health Act.** We support the recommendations of Professor Sir Simon Wessely's review, which looked at coercive treatment, and its disproportionate use with NHS patients from BAME backgrounds. The government has accepted Advanced Choice Statements as one way forward. To make this a viable reality for patients who ask for psychoanalytic psychotherapy in their future care plan, we would like to see Consultant Psychiatrists being able to offer access to longer-term, more intensive psychoanalytic psychotherapy groups, as well as family and individual treatment options in supported community-based settings.

If our ambition is to deliver the aspirations of the NHS Long Term Plan for the NHS to be a world leader in psychological therapy services then we must work together to achieve that.

We also aim to secure funding to invest in research into effective psychoanalytic approaches and we are committed to a continued effort to promote evidence-based practice. To this end, our Coalition seeks to ensure that contemporary psychoanalytic psychotherapies can add value at the heart of our NHS, and to its future service development and training plans.

