

Tavistock Centre Patient Discussion Group

Does Psychotherapy Work? ...and how will I know when it has?



Many thanks to everyone who joined us. It was a large and lively crowd, although I appreciate it can be hard to properly address everyone's questions in such a big group.

In order to show that psychotherapy is effective we need to be able to demonstrate some kind of change or 'improvement'. This begs many questions:

- What is it that should change?
- How much does it need to change?
- How long lasting can we expect it to be?
- Do people have different aims when they go for treatment?
- Are therapists and patients aims the same? and so on.

Sometimes these questions can appear straightforward but when we start to unpack them, they become more complicated. For example, although we might hope for 'happiness' after a period of treatment, this may be an impossible aim. However, being able to get along with friends and family better, being able to get back to work, being able to feel good about something we do, being able to look after ourselves might be other important aims. This means that as well as questionnaires which ask about particular 'symptoms' like depression or anxiety, research into the effectiveness of psychotherapy might also ask about day to day activities; relationships; whether someone feels they have more personal resources when faced with difficult situations.

If you have thoughts about what you think researchers should ask about when they want to know whether psychotherapy has helped or not, the Trust would be very keen to hear about them. Get in touch with Keri to share your ideas.

We also acknowledged that there are many different schools of psychotherapy: apparently currently more than 400 are listed! There was some discussion about the type of psychotherapy practised at the

Tavistock and Portman NHS Trust. Although there are differences between the different teams here (for example, adults, children and families), the main therapy used at the Tavistock is psychodynamic and 'exploratory', that is it is concerned with understanding the roots and causes of our unhappiness rather than taking a 'problem-solving' approach to changing our situation. For example rather than learning how to stop unhelpful behaviour such as taking drugs or obsessive eating, we explore what has happened in our lives that has led us to this behaviour. This can be a much longer and more involved process.

It is also difficult to know when the process has finished. If you were asked to judge 'how depressed are you?' on a scale of 1 to 10 when you started therapy, you may have answered 9. Now your answer is only 5: but is that good enough? Should you stay in therapy until your reply is 3 or 1, or may that never happen? These are very individual and unique questions to answer: can someone else tell you that "you are now happy enough"?

Apart from the agenda topic: 'Does Psychotherapy Work?', a lot of other questions and issues were raised. Although we were not able to do justice to these subjects at the time, I think these would be very useful topics to revisit at future groups.

Does psychotherapy help people who are mentally ill?

There was also a concern that people with severe mental health problems (such as schizophrenia) are not offered psychotherapy. Are there reasons for this, or is it simply a lack of funding, imagination or awareness on the part of mental health professionals? This also raised the point that perhaps we should be lobbying for 'talking therapies' to be made more available for people suffering from mental health concerns. Drug therapies are clearly the first option normally explored, and this is a much cheaper treatment than psychotherapy: but does it 'work' better in the long term?

It is often harder to find funding for research into the effectiveness of therapy than it is for researching drug treatments, which are sponsored by pharmaceutical companies. Therefore we do not have as much 'evidence' about effectiveness of talking therapies for mentally ill people.

Family Discussion Group

We also had some input from patients and families within the Child & Family Dept. Some vital issues were raised, which I feel could be best addressed in a separate discussion forum for parents & children. If

there is a subject which you or your children want to know more about, please get in touch with me.

- Explaining psychotherapy to children: is there a need for a similar discussion group looking at what psychotherapy is and how it can help, aimed at children and young people?
- How can parents be involved in their child's therapy?
- I have also been asked by parents with autistic children to try and plan a support / information group.

Ideas for future Patient Events:

One suggestion was that we should arrange a series of talks, followed by 'question & answer sessions', rather than an unstructured discussion group. This group was unexpectedly larger than previous meetings, and an open discussion can be quite tricky in such a big group.

Is this something that people would prefer?

Possible subjects:

- ❖ Psychotherapy, Race & Culture
- ❖ Can people who are mentally ill benefit from psychotherapy?
- ❖ What are the main therapeutic approaches?
- ❖ How do I know which 'talking therapy' is right for me?
- ❖ Mental Health Awareness
- ❖ Understanding Mental Illness

I am very keen to get feedback from people, so please do let me know what kind of discussion group or lecture you would like. Any other suggestions for topics would be very welcome.

If I don't have your contact details please pass them onto me, then you will receive information about any future events.

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