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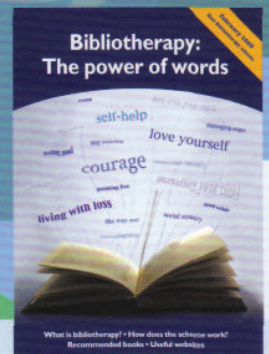


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Talking therapy

Why Ireland lags behind



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Talking therapy – why Ireland lags behind

Cover Story

Forum

A new accreditation system may offer one way of giving GPs confidence in referring patients to suitable psychotherapists. Joanne McCarthy reports

IT IS WELL ACCEPTED that psychotherapy should be the first line of response when dealing with certain mental health issues, and medication should only be considered afterwards or as an adjunct to treatment.

According to the Irish Association for Psychotherapy in Primary Care (IAPPC), psychotherapy should be integrated into general practice to the same extent that psychiatry is, with GPs making referrals and psychotherapists reporting back. The organisation was established following the publication of the mental health report *A Vision for Change* to facilitate co-operation between the psychotherapy profession and the medical profession.

To this end, the IAPPC has set up a comprehensive accreditation system for highly qualified psychotherapists, in order to assist GPs in referring patients to suitable psychotherapists in their area.

Psychotherapy in Ireland

Edward Boyne, vice-president of the IAPPC, believes that primary care is the key to dealing with mental health issues.

"People go in to their GPs to talk about anxiety and depression and other symptoms of mental health difficulties. We want to focus attention on how that gets dealt with from that point on. In other countries, for example in Germany, the protocol is that someone has talking therapy first

for at least six sessions before medication is even considered," Mr Boyne said.

In Ireland, patients are often prescribed medication without being referred to psychotherapists.

"The NICE guidelines advise that there should be talking therapy first, and medication only afterwards. In practice that is often not observed," he said.

According to Mr Boyne, the IAPPC has been examining very closely the reasons why that doesn't happen.

"One scenario is that the GP makes the assessment that the patient can't afford psychotherapy. When the patient can't afford it, all the GP can do is prescribe.

"Another scenario is that GPs don't know who the good practitioners are, or who they can rely on. They don't yet feel fully supported by their own medical establishment in making that referral," he explained.

Accreditation

To address the latter problem, the IAPPC has established its own accreditation system. According to the IAPPC, its standards for specialised psychotherapy training and for accredited membership are among the highest in Europe. Senior accredited practitioners must be educated to at least masters degree level or equivalent, they must have undertaken at least three years of specialised clinical training in psychotherapy, and they must have at least five years of



practice as a psychotherapist with appropriate supervision. Furthermore, they must have undertaken their own personal psychotherapy for at least three years and for a minimum of 250 hours.

Mr Boyne hopes that because the system is strictly overseen by both doctors and psychotherapists (the current president of the IAPPC is well-known GP, Prof Bill Shannon), it will give GPs some professional reassurance in terms of referrals.

"The system will give GPs reassurance that the referrals can be relied upon. We're trying to break new ground. We are hoping that people who have never been referred to a psychotherapist and who are relying on psychiatry or medication, as is the norm in Ireland, will have an alternative," said Mr Boyne.

"There are all sorts of counsellors and therapists who have done a weekend course and set themselves up as qualified. Doctors know this and don't want to take a risk. We're trying to deal with that issue.

"This is an integrated organisation. We will be able to provide a referral to someone in your area who has been approved by the Association. It's a very practical step," he explained.

Cost of treatment

Irrespective of the success of the accreditation system, however, the issue remains that many people simply cannot afford psychotherapy. According to Mr Boyne, the medical card doesn't effectively cover any kind of psychotherapy.

"There is a waiting list, but it's two to three years long, so it's not actually a real option," he explained.

"Areas of lower income in particular see more medication and less psychotherapy. The difficulty with that is that the areas of lower income are generally the areas of higher need in relation to mental health.

"Often they are five or six times more in need, so the difference is quite significant. There's a very real divide there," he added.

However, Mr Boyne is optimistic that the future will bring more equality in terms of the options offered to patients with mental health problems.

If the accreditation system succeeds in encouraging greater co-operation between GPs and high standard psychotherapy, the IAPPC believes that it will then be in a position to argue for funding for medical card patients.

"That step won't be such a hard one to take because we can organise our argument in that direction. Quite a lot of money could actually be saved by appropriate intervention, rather than having someone on long-term medication, as often happens. We will be making those arguments so that people can get access to psychotherapy with a medical card, but we're not making them yet," he said.

Priorities

"What we're trying to do now is encourage doctors who haven't made this kind of referral before to start making it. We also need to help doctors determine which patients are going to be suitable.

"We have lectures and conferences planned this year to help doctors understand how psychotherapy works and assess what kind of patients would be appropriate for it," he added.

The organisation is trying to focus awareness on mental

health difficulties, and to reiterate that certain patients can be helped using psychotherapy. According to Mr Boyne, more mental health problems could be dealt with in the community and in primary care if the right support services were available to GPs. The doctor should be the 'gatekeeper' so that patients are referred to reputable practitioner.

"We think it's going to be a long road, but at the moment our priorities are to educate GPs as to what psychotherapy is, encourage them to make referrals, ensure they find reliable and good referrals and work with them in primary care," said Mr Boyne.

The ICGP has had a mental health programme running for many years and is involved in encouraging 'talking therapy', developing its own courses in CBT.

A lack of confidence of doctors in psychotherapy is part of the reason why we don't have the system here that exists in other countries, Mr Boyne believes. If you go to your GP with mental health issues, you're more likely to get a prescription in Ireland than in Germany, Holland or even the UK, he said.

Benefits of psychotherapy

A stronger tie between psychotherapy and primary care could have benefits for the entire community. Psychotherapy has been shown to reduce dependency on medicine, thereby making an individual more independent and able to deal with mental health issues.

"One of the things about medication that we know, is that it can have a dependency-inducing effect. Psychotherapy, on the other hand, has more of a potential for leading towards autonomy, and for resolution of issues rather than the management of difficulties," said Mr Boyne.

Resolving issues and living autonomously means better mental health for the individual, and ultimately better mental health in general, according to Mr Boyne.

Successful treatment of mental health problems in an individual can also have benefits for the rest of the family.

"We know that if a father or mother is treated successfully in mental health terms, and they overcome difficulties, it has a knock-on effect on the family and on other people.

Mental health problems tend to have a serious impact on everyone around the individual. So whereas with certain chronic diseases the emphasis is on self-management, in mental health there is huge importance placed on 'treating' the whole family,

"We would be very optimistic that if you can get the right treatment and the right therapists in place at the right time, especially early on, then there is a good chance that mental health will improve right throughout society," Mr Boyne said.

The IAPPC's plans are very much in line with *A Vision for Change*, and Mr Boyne and his colleagues are resolute that a proper system of psychotherapy referrals will not prove costly.

In the long-term, in fact, Mr Boyne believes that the plans will save money. Moreover, according to the IAPPC, by encouraging doctors to avail of its accreditation system and refer patients to psychotherapists, there is a very real potential for improving mental health.

For more information on the accreditation system and the lectures and conferences being held by the IAPPC, please see its website at www.iappcare.com. 