


**Prifysgol Cymru**  
 Y Drindod Dewi Sant  
**University of Wales**  
 Trinity Saint David

# Contemporary Context of Counselling Skills M4X00954



Module leader: Andrea Williams

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Contemporary Context of Counselling Skills Module Learning Outcomes:

Module Learning Outcomes:

- Evaluate a range of theories of causality relating to emotional distress and its impact on wellbeing
- Recognise links between individual experience of health and health issues and the wider structural elements relevant to health and wellbeing

Lesson Aims:

- Explore Counselling and Psychotherapy within the Third Sector

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What do we mean by the Third Sector?  
Give Examples of services provided?

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### Access to Psychological Therapies

- The voluntary sector offers therapy through a huge variety and range of organisations from localised to formally organised, nationwide agencies.
- Some voluntary agencies might operate under an informal structure, whereas others might operate under strict regulation
- Include counsellors and psychotherapists who work in many specialities (bereavement, cancer care, women's shelters, youth centres) to national and international pressure groups (Substance misuse, prisoner's, relationship guidance)
- All therapy services, even those that are free at the point of delivery, demand some sort of personal outlay from their users and investors, even if it is only time and effort. This inevitably influences the service provided, such as 'time-limited' or 'solution-focused' therapy
- Some believe that counselling is a purely altruistic service and should remain independent of any external attempts to influence it. (Claringbull, 2010)

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### Psychological Therapies within Third Sector Agencies




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## Access to Psychological Therapies in Wales

- Together for Mental Health 2012
- The Review Access to and Implementation of Psychological Therapy Treatments 2015 –
- Together for Mental Health Delivery Plan 2016-19
- We Need to Talk (Wales) Coalition 2016

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## We Need to Talk (Wales) Coalition 2016

Campaign for improved access to psychological therapies for people with mental health problems in Wales. It comprises of third sector mental health charities and professional organisations including:

- BACP; BPS; BPC; UKPC
- Bipolar UK [www.bipolaruk.org](http://www.bipolaruk.org)
- Diverse Cymru [www.diversecymru.org.uk](http://www.diversecymru.org.uk)
- Gofal [www.gofal.org.uk](http://www.gofal.org.uk)
- Hafal [www.hafal.org](http://www.hafal.org)
- Mental Health Foundation [www.mentalhealth.org.uk/wales](http://www.mentalhealth.org.uk/wales)
- Mental Health Matters Wales [www.mhmbcb.com](http://www.mhmbcb.com)
- Mind Cymru [www.mind.org.uk](http://www.mind.org.uk)
- Samaritans Cymru [www.samaritans.org](http://www.samaritans.org)

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## MIND CYMRU 2016

- ❖ Research based on 400 service users
- ❖ 70% of people said they weren't offered any choice in the type of therapy they received;
- ❖ 66% of people said that no one had explained different types of therapies to them at any point;
- ❖ 48% had to request psychological therapies, rather than being offered them;
- ❖ 39% were satisfied overall with the therapy they received; and
- ❖ 19% of people felt like they received enough sessions to stay well
- ❖ Improving access to psychological therapies was a key priority in Welsh Assembly election manifestoes

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#### WE NEED TO TALK 2016

- ❖ The National Prescribing Indicators 2014-2015 (The Annual Primary Care Prescribing Report) report an average increase of 8.11% of anti-depressant prescriptions over the years 2013/14 to 2014/15, with all health boards showing an increase.
- ❖ Mental health charities and professionals, while valuing the role that medication can play in mental health treatment, have raised concerns about the increased use of antidepressants, with many citing a lack of talking therapies as a contributing factor.

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#### WE NEED TO TALK 2016

- ❖ The Improving Access to Psychological Therapies (IAPT) programme in England has provided well over a million people with access to psychological therapies on the NHS (IAPT three-year report: the first million patients, 2012), with benefits to individuals and the public purse.
- ❖ Research has found that there have been reductions to individual healthcare usage and use of long-term repeat prescriptions (IAPT three-year report: the first million patients, 2012).

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#### WE NEED TO TALK 2016

- ❖ The IAPT programme has not been perfect and we are not calling for IAPT to be replicated in Wales. However, it demonstrates what can be achieved when a Government invests and focuses on psychological therapies.
- ❖ We believe that the people of Wales deserve a similar focus that is capable of delivering real change by improving access to psychological therapies.

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### WE NEED TO TALK 2016

- ❖ The main aim of the Coalition, through this report is to promote four key priorities;
- ❖ Timely access;
- ❖ Choice;
- ❖ Outcomes through the lens of the service user;
- ❖ Measuring lasting impact.
- ❖ All four of these priorities require improvements in the collection and availability of meaningful data. We believe this is crucial to inform the provision of psychological therapies and improve access for people with mental health problems in Wales.

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### World Health Organisation

- The World Health Organisation has predicted that by 2030, depression is projected to be the number one cause of disability, ahead of cardiovascular disease, traffic accidents, chronic pulmonary disease and HIV/AIDS. In this context, improving access to mental health services is increasingly important.
- The cost of mental health problems in Wales is estimated at £7.2bn per year.
- The cost associated with poor mental health in the workplace amounts to nearly to £1.2 billion a year alone, equivalent to £860 for every employee in the Welsh workforce.

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### The Cost of Mental Health

- People with mental health problems are more likely to face a number of inequalities, including poorer physical health.
- Research shows that compared with the general population, people with a serious mental illness have twice the risk of:
- Diabetes (Royal College of Psychiatrists, 2013),
- Three times the risk of dying of heart disease (Osborn et al, 2007)
- Life expectancy of up to 20 years shorter (Chesney et al, 2014).
- This is, in part, due to the side effects of some medication.

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### Talking Therapies: A four year plan of action, 2011).

- Mental health problems are also common in people with a long term physical health conditions. Compared with the general population, people with diabetes, hypertension and coronary artery disease are twice as likely to suffer from mental health problems,
- Those with chronic obstructing pulmonary disease, cerebrovascular disease and other chronic conditions are three times more likely
- The report goes on to state that untreated depression leads to worse health outcomes and increased healthcare spending among those with long term conditions

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### Early Access to Psychological Therapies

- ❖ In 2011, the UK Government estimated that £400m investment in psychological therapies would result in over £700 million of savings to the public sector in healthcare, tax gains and welfare
- ❖ reduction in long-term repeat prescriptions for antidepressants due to the greater enduring effect of talking therapies compared with medication
- ❖ Reduction in GP appointments
- ❖ Reduction in outpatient appointments and procedures
- ❖ Reduction in inpatient bed days.

*IAPT three-year report: The first million patients, 2012*

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### Early Access to Psychological Therapies

- ❖ In February 2016 Mind surveyed over 400 people in Wales who had requested or accessed psychological therapies in Wales in the last three years.
- ❖ The survey results showed that:
  - ❖ 57% of people faced a wait of more than three months just to get an assessment with the service
  - ❖ 21% faced a wait of more than a year to be assessed.
- ❖ After being offered therapy following an assessment, 50% of people had to wait more than three months to receive their first session, with 24% waiting for over a year.

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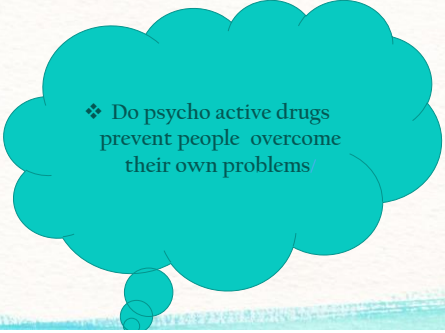
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❖ Do psycho active drugs prevent people overcome their own problems

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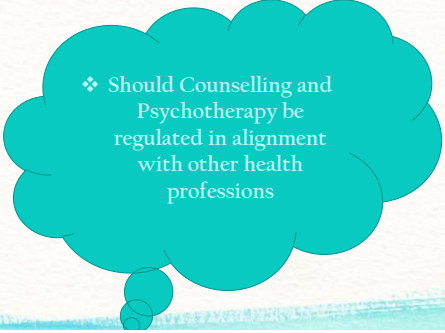
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❖ Should Counselling and Psychotherapy be regulated in alignment with other health professions

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#### Recommended Links

- A Review of Talking Therapies in Wales.  
<http://gov.wales/topics/health/publications/health/reports/therapy/2?lang=en>
- <http://gov.wales/docs/dhss/publications/120326psychologicalen.pdf>

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## Reading

- ◆ Bond, T. 2015. Standards and Ethics for Counselling in Action. 4th ed. London: Sage Chapter 4
- ◆ Charingbull N., 2010. "What is Counselling and Psychotherapy?" Euster Learning Matters.
- ◆ Fehhman, C. and Horton, L. eds. 2012. *The Sage Handbook of Counselling and Psychotherapy*. 3rd ed. London: Sage.
- ◆ Glasby, J., 2012. *Understanding Health and Social Care*. 2nd ed. Bristol: Policy Press.
- ◆ Hartley, D., 2010. *Understanding Human Need (Understanding Welfare Series: Social Issues, Policy and Practice Series)*. Bristol: Polity Press.
- ◆ McLeod, J. 2013. *An Introduction to Counselling and Psychotherapy*. 9th ed. Buckingham: Open University Press.
- ◆ McLeod, J. and McLeod, J., 2011. *Counselling Skills a Practical Guide for Counsellors and Helping Professionals*. Maidenhead: McGrawHill/Open University Press.
- ◆ Morrison, V. and Bennett, P., 2012. *An Introduction to Health Psychology* 3rd ed. England: Pearson Education Limited.
- ◆ Wootle, R., Stravbridge, S., Douglas, R. and Dryden, W., 2010. *Handbook of Counselling Psychology* 3rd ed. London: Sage p63-175
- ◆ You will need to register online events:  
◆ <http://www.onlinevents.co.uk/wp-login.php>

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