

Fonagy, P; (2014) Thrive: The Power of Evidence-Based Psychological Therapies. **The PSYCHOLOGIST**, 27 (11) 882 – 882

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Review

Thrive: The Power of Evidence-Based Psychological Therapies

One sentence on page 51 captures the vital purpose of Layard & Clark's new book: "*The scale of mental illness may be mind boggling, but what is really shocking is the lack of help*".

This book presents an erudite, brilliantly evidenced and absorbing case for improving access to psychological therapies. Most of us are nowadays frequently involved in having to make an argument for the services we provide. Most of us were not trained for this and would welcome support. Along come Layard and Clark with a volume filled to the gunnels with brilliantly selected facts that our North American colleagues refer to as 2x4s (as in pieces of wood optimized by its dimensions for hitting people over the head but in this context better thought of as immediately compelling data with the potential to intrigue, disrupt and reorient). For example, 'nearly 80% of morbidity in 15-29 year-olds is due to mental illness'. Or 'training therapists in CBT can improve recovery rates from 20% to 65%'. 'Seven weeks of group CBT is almost three times more effective in helping long-term unemployed people back to work as an equal amount of time of generalised social support'. 'CBT implemented in a breathlessness clinic costing £300 can generate savings of £2,600 over a year', etc.

Layard and Clark have provided a book which we all need to read, take careful notes on, and where possible commit to memory. It is simply the best book around to help psychologists in the increasingly challenging task of ensuring that services for our patients are maintained and increased in line with what we all experience as increasing demand.

The book is easy to read but also reflects outstanding scholarship. The facts cited are not selected at random, they are chosen with a careful eye to that which meets the dual criteria of being scientifically robust at the same time as being persuasive. The facts are around us and Layard and Clark's compilation is excellent because it is finely honed by a decade of debate that these two excellent scholars have undertaken on all our behalves to ensure that resources are made available for the provision of psychological help.

The book ends with the story of IAPT, having taken the reader along a journey covering the epidemiology of mental health, health economics, a brief review of disease mechanisms, a consideration of the nature of psychological therapy, the process of developing new therapies and an overview of their evidence base. The journey is exciting, even for someone like the present reader who has been travelling the same landscape for four decades. Even in a familiar resort there is something special to be gained from being led down the slopes by an experienced local ski guide!

The final destination is Improved Access to Psychological Therapies (IAPT) – a unique service which our profession should feel proud of. The book is far from an uncritical

endorsement of the model. Rather it is a surprisingly balanced appraisal of its achievements alongside a consideration of its limitations and strong suggestions for its improvement alongside a case for expansion into work with children in intervention and prevention. IAPT is an international first in providing an outcome-focused, population level quality improvement programme for psychological therapies. It is remarkable in its transparency, a point forcefully made in *Thrive*.

To this reader's mind the most important contribution of this book is the link that it is able to make in its final chapters between the provision of appropriate psychological care and parity of esteem for mental health. "Under-treatment is a gross injustice" (p.252) and is incompatible with *parity of esteem* however conceived.

Layard and Clark are going into battle not just for psychologists or psychological services but for the return of human dignity for those with mental illness. These considerations place "*Thrive*" beyond the petty tribalism which has, at least in the past, at times undermined the progress of psychological therapies in mental health care. We have scientifically evolved and tested effective interventions for the treatment of mental disorder. Let's join Clark and Layard on the rooftop and shout as loud as we are able for the increased availability of evidenced based psychological therapies