

Current Awareness Service

Psychological Therapies

December 2020

Contents

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General Data Protection Regulation ("GDPR")

General Data Protection Regulation ("GDPR") came into effect on May 25 2018. We have reviewed and adapted our services and policies to ensure that we comply with GDPR consent requirements.

We hope that our updates of the latest research evidence are still useful to you. You are currently receiving these services, but can unsubscribe from the lists at any time by emailing or contacting the Library Services.

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Up-to-Date Journal Abstracts on Newly Published Research

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SELECTED JOURNAL ABSTRACTS

The following section contains abstracts from selected clinical databases. If you have a particular topic which you would like us to search in more depth, please contact your nearest Trust Library and complete a '[Literature Search Request Form](#)'. A member of the Library staff will perform the search and email the results within your specified timeframe.

Full-text of any of the articles listed below is available from your nearest library. Our Document Delivery Service is free of charge to all Trust staff. Just complete an '[Article Request Form](#)' and send it in to your nearest Trust Library.

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- St Michaels Hospital, Warwick – 01926 406749 stmichaels.library@covwarkpt.nhs.uk

COVID-19 AND MENTAL HEALTH



[Is there a causal link between mental health problems and risk of COVID-19 infection?](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/mental-health/substance-misuse/mental-health-covid-19-2/>

[In his debut blog, Andrew Steptoe summarises two recent papers using electronic health record datasets, which suggest that having a psychiatric diagnosis may put people at risk of COVID-19 infection.]

Freely available online

[Pre-pandemic psychiatric disorders and risk of COVID-19: a UK Biobank cohort analysis.](#)

Yang H. *The Lancet Healthy Longevity* 2020;1(2):e69-e79.

[Psychiatric morbidities have been associated with a risk of severe infections through compromised immunity, health behaviours, or both. However, data are scarce on the association between multiple types of pre-pandemic psychiatric disorders and COVID-19. We aimed to assess the association between pre-pandemic psychiatric disorders and the subsequent risk of COVID-19 using UK Biobank.]

Freely available online

Impact of level of personality pathology on affective, behavioral, and thought problems in pregnant women during the coronavirus disease 2019 pandemic

Author(s): Gamache, Dominick; Savard, Claudia; Lemieux, Roxanne; Berthelot, Nicolas

Source: Personality Disorders: Theory, Research, and Treatment; Jan 2021

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

Abstract: Among at-risk groups for psychological distress in the context of the Coronavirus Disease 2019 (COVID-19) pandemic, pregnant women might be especially vulnerable. Identifying subgroups of pregnant women at high risk of poor adaptation might optimize clinical screening and intervention, which could, in turn, contribute to mitigating the potentially devastating effects of prenatal stress on mothers and fetus. Level of personality functioning may be a good indicator of who may be more vulnerable to distress in challenging periods like the COVID-19 pandemic, as adults with high levels of personality dysfunction may experience significant difficulties in

mentalizing threatening situations. The aims of the present study are (a) to determine the impact of level of personality pathology on affective, behavioral, and thought problems in pregnant women during the COVID-19 pandemic; and (b) to test a model where mentalization of trauma mediates the impact of personality pathology on symptomatology. Data from 1,207 French-Canadian pregnant women recruited through social media during the COVID-19 pandemic were analyzed. Latent profile analysis, using the Criterion A elements of the alternative model for personality disorders (Identity, Self-Direction, Empathy, Intimacy) as latent indicators, yielded four profiles: Healthy, Mild Self-Impairment, Intimacy Impairment, and Personality Disorder. Profiles showed significant associations with diverse indicators of symptomatology. Mediation models showed both direct and indirect (through mentalization of trauma) significant associations between level of personality functioning and affective/behavioral/thought problems. Results have clinical implications on prophylactic measures for at-risk pregnant women, especially in challenging contexts such as the COVID-19 pandemic. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

CHILD AND ADOLESCENT MENTAL HEALTH



[Children and young people's mental health – policy, CAMHS services, funding and education.](#)

House of Commons Library; 2020.

<https://commonslibrary.parliament.uk/research-briefings/cbp-7196/>

[Research briefing outlining children and young people's mental health policy.]

Freely available online

[Young people's mental and emotional health: Trajectories and drivers in childhood and adolescence.](#)

Education Policy Institute; 2021.

<https://epi.org.uk/publications-and-research/young-peoples-mental-and-emotional-health/>

[Based on data from the Millennium Cohort Study, this report reveals insights into the determinants of young people's wellbeing, including how it is affected by their relationships, background, and use of social media. The research shows that while the wellbeing of all young people declines by the end of their teenage years, there is a strong gender divide within this: girls see far lower levels of wellbeing and self-esteem than boys – driven by a sharp fall of both during mid-adolescence.]

Freely available online

Psychological intervention, antipsychotic medication or a combined treatment for adolescents with a first episode of psychosis: the MAPS feasibility three-arm RCT. [\[Abstract\]](#)

Morrison AP. *Health Technology Assessment* 2021;25(4):1-124.

[Check for full-text availability](#)

[Conclusions: It is feasible to conduct a trial comparing psychological intervention with antipsychotic medication and a combination treatment in young people with psychosis with some adaptations to the design, including adaptations to collection of health economic data to determine cost-effectiveness.]

[Child and adolescent mental health during COVID-19](#)

Parliamentary Office of Science and Technology (POST); 2020.

<https://post.parliament.uk/child-and-adolescent-mental-health-during-covid-19/>

[Charities and academics have expressed concerns that children's mental health is disproportionately affected by the intervention measures used during the pandemic. Child and adolescent mental health may be compromised by factors such as strained family relationships, academic stress and reduced social contact with friends. Child and adolescent mental health services (CAMHS) have been reduced during the pandemic. They are likely to be

under strain to meet increased demand.]

[Mental health support for young people: a reading list.](#)

House of Commons Library; 2020.

<https://commonslibrary.parliament.uk/research-briefings/cbp-9100/>

[Research briefing: links to relevant reports, policies and research on supporting children and young people with mental health issues. It also includes links to sources of further information and advice.]

Freely available online

[Can reducing loneliness help to alleviate or prevent anxiety or depression in young people?](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/populations-and-settings/loneliness/can-reducing-loneliness-help-to-alleviate-or-prevent-anxiety-or-depression-in-young-people-activeingredientsmh/>

[Anton Käll summarises a recent RCT of mindfulness training to reduce loneliness and increase social contact. Ellie Pearce then shares her recent Wellcome Trust funded #ActiveIngredientsMH review, which looked into reducing loneliness as a potential active ingredient in both alleviating and preventing anxiety and depression in young people.]

Freely available online

[Psychological decentering: seeing the bigger picture.](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/treatment/psychotherapy/psychological-decentering/>

[Marc Bennett appraises a recent meta analysis on regulating emotion through distancing, and goes on to present his own Wellcome Trust funded research on psychological decentering to prevent and treat anxiety or depression in young people.]

Freely available online

[Antidepressants and psychotherapy for adolescent depression: can they be compared?](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/treatment/antidepressants/antidepressants-and-psychotherapy-for-adolescent-depression-can-they-be-compared-activeingredientsmh/>

[Catherine Harmer summarises a recent network meta-analysis relating to her own Wellcome Trust funded research into antidepressants for young people with anxiety or depression. #ActiveIngredientsMH.]

Freely available online

[Self-compassion for anxiety and depression in young people.](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/mental-health/anxiety/self-compassion-for-anxiety-and-depression-in-young-people-activeingredientsmh/>

[Sarah Egan summarises a recent systematic review relating to her own Wellcome Trust funded research on self-compassion for the prevention and treatment of anxiety and depression in young people.

#ActiveIngredientsMH.]

Freely available online

[Behavioural activation for depression and anxiety in young people.](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/treatment/psychotherapy/behavioural-activation-for-depression-and-anxiety-in-young-people-activeingredientsmh/>

[Kanika Malik appraises a recent systematic review relating to her own Wellcome Trust funded research on behavioural activation for youth mental health problems. #ActiveIngredientsMH.]

Freely available online

[Young people report that harm minimisation strategies for self-harm are ineffective.](https://www.nationalelfservice.net/mental-health/self-harm/harm-minimisation-ineffective/)

The Mental Elf; 2021.

<https://www.nationalelfservice.net/mental-health/self-harm/harm-minimisation-ineffective/>

[Sadhbh Byrne and Jo Robinson review a recent mixed methods study exploring young people's views on harm minimisation strategies as a proxy for self-harm.]

Freely available online

Intrusive imagery in anxiety disorders in adolescents

Author(s): Ghita, Ana; Tooley, Emma; Lawrence, Peter J.

Source: Behavioural and Cognitive Psychotherapy; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Abstract:Background: Mental imagery plays an important role in models of anxiety disorders in adults. This understanding rests on qualitative and quantitative studies. Qualitative studies of imagery in anxious adolescents have not been reported in the literature. Aims: To address this gap, we aimed to explore adolescents' experiences of spontaneous imagery in the context of anxiety disorders. Method: We conducted one-to-one semi-structured interviews, with 13 adolescents aged 13–17 years with a DSM-5 anxiety disorder, regarding their experiences of spontaneous imagery. We analysed participants' responses using thematic analysis. Results: We identified five superordinate themes relating to adolescents' influences on images, distractions from images, controllability of images, emotional responses to imagery and contextual influences on imagery. Conclusions: Our findings suggest that spontaneous images are an important phenomenon in anxiety disorders in adolescents, associated with negative emotions during and after their occurrence. Contextual factors and adolescents' own cognitive styles appear to influence adolescents' experiences of images in anxiety disorders. (PsyInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

The effects of a 'pretend play-based training' designed to promote the development of emotion comprehension, emotion regulation, and prosocial behaviour in 5- to 6-year-old swiss children

Author(s): Richard, Sylvie; Baud-Bovy, Gabriel; Clerc-Georgy, Anne; Gentaz, Edouard

Source: British Journal of Psychology; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

PubMedID: 33314057

Available at [British journal of psychology \(London, England : 1953\)](#) - from Wiley Online Library Medicine and Nursing Collection 2019 - NHS

Abstract:The objective of this study was to evaluate the effects of a pretend play-based training designed to promote the development of socio-emotional competences. 79 children aged 5 to 6 years were evaluated before and after a pretend play-based training. The experimental group (39 children) received this programme on emotion comprehension, negative emotion regulation, and prosocial behaviour one hour a week for eleven weeks during class hours, while the control group (40 children) received no specific intervention. The programme was implemented by 5 teachers. The results show improvements in the ability to understand emotions in children who benefited from the training. These findings are discussed in the broader context of using this form

of play as a privileged pedagogical tool to allow children to develop these competences. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

When adolescents stop psychological therapy: Rupture–repair in the therapeutic alliance and association with therapy ending

Author(s): O'Keeffe, Sally; Martin, Peter; Midgley, Nick

Source: Psychotherapy; Dec 2020; vol. 57 (no. 4); p. 471-490

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 31928023

Available at [Psychotherapy \(Chicago, Ill.\)](#) - from ProQuest PsycARTICLES - NHS

Available at [Psychotherapy \(Chicago, Ill.\)](#) - from Unpaywall

Abstract:The therapeutic alliance predicts dropout from psychological therapy, and ruptures in the therapeutic alliance may also predict dropout, yet there is a dearth of research with adolescents. This study investigated whether markers of rupture–repair in the alliance were indicative of different types of treatment ending in adolescents receiving psychological treatment for depression. Data were from the IMPACT study, a trial investigating the effectiveness of therapies for adolescent depression. Participants were randomly allocated to receive a brief psychosocial intervention, cognitive–behavioral therapy, or short-term psychoanalytic psychotherapy. The sample (N = 35) comprised adolescents who had either completed their treatment (n = 14) or dropped out (n = 21) according to their therapist. Dropout cases were further classified as dissatisfied (n = 14) or got-what-they-needed (n = 7) based on posttherapy interviews with the adolescent and therapist. Selected recordings of therapy sessions were rated using the Rupture Resolution Rating System and Working Alliance Inventory (observer version). Therapeutic alliance and rupture–repair during therapy were similar for completers and got-what-they-needed dropouts, whereas dissatisfied dropouts had poorer therapeutic alliance, more ruptures, ruptures that were frequently unresolved, and greater therapist contribution to ruptures. Qualitative analysis of sessions led to the construction of three categories of therapist contribution to ruptures: therapist minimal response, persisting with a therapeutic activity, and focus on risk. Results suggest that ruptures, especially when unresolved, could be warning signs of disengagement and dropout from therapy. Future research should investigate how ruptures may be effectively identified and resolved in treatment with adolescents. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Rolling out a mindfulness-based stress reduction intervention for parents of children with adhd: A feasibility study

Author(s): Rice, R.; Ni Bhearra, A.; Kilbride, K.; Lynch, C.; McNicholas, F.

Source: Irish Journal of Psychological Medicine; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Abstract:Background: Attention-deficit/Hyperactivity Disorder (ADHD) is the single most frequent reason for attendance at Child and Adolescent Mental Health Services (CAMHS) in Ireland. Research has suggested that parents of children with ADHD experience more parenting stress than parents of non-clinical controls, yet routine treatment for ADHD rarely addresses parental well-being. Mindfulness-based interventions (MBIs) have been found to result in a reduction in parental stress. Method: An adapted Mindfulness-Based Stress Reduction (MBSR) intervention was delivered to parents (n = 23) of children with ADHD recruited from CAMHS and ADHD Ireland. Results: Following the intervention a significant improvement was documented within the social relationships domain of quality of life (WHOQOL-BREF) and a significant reduction on the child hyperactivity scale of the Strengths and Difficulties (SDQ) questionnaire. Conclusion: This pilot study suggests that an MBSR

intervention is both feasible and effective for parents whose children have ADHD. Larger scale studies need to be conducted before inclusion in routine CAMHS. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Risk of suicide and self-harm in kids: The development of an algorithm to identify high-risk individuals within the children's mental health system

Author(s): Stewart, Shannon L.; Celebre, Angela; Hirdes, John P.; Poss, Jeffrey W.

Source: Child Psychiatry and Human Development; Dec 2020; vol. 51 (no. 6); p. 913-924

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32076912

Available at [Child psychiatry and human development](#) - from Unpaywall

Abstract: Suicide is the second leading cause of death in adolescents within Canada. While several risk factors have been found to be associated with increased risk, appropriate decision-support tools are needed to identify children who are at highest risk for suicide and self-harm. The aim of the present study was to develop and validate a methodology for identifying children at heightened risk for self-harm and suicide. Ontario data based on the interRAI Child and Youth Mental Health Screener (ChYMH-S) were analyzed to develop a decision-support algorithm to identify young persons at risk for suicide or self-harm. The algorithm was validated with additional data from 59 agencies and found to be a strong predictor of suicidal ideation and self-harm. The RiSSk algorithm provides a psychometrically sound decision-support tool that may be used to identify children and youth who exhibit signs and symptoms noted to increase the likelihood of suicide and self-harm. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

LGBGTQ



Navigating the emotional contours of parenting a transgender adolescent or child

Author(s): McCullough, Maura

Source: Dissertation Abstracts International: Section B: The Sciences and Engineering; 2021; vol. 82 (no. 3-B)

Publication Date: 2021

Publication Type(s): Dissertation Abstract Dissertation

Abstract: Transgender youth and their parents encounter high levels of intolerance, harassment, and stigmatization in an American culture entrenched in a two-gender, binary society. When navigating the gender transition of their child, parents experience an array of emotions, including distress, anger, sadness, and possibly, grief and loss. Parents confront unanticipated, life-altering decisions for their transgender child, and themselves (Gregor, Hingley-Jones, & Davidson, 2015), yet the complexities of parenting a transgender child are under-researched and the needs of these parents are often unaddressed. Parental acceptance of a trans youth is essential to their mental health and well-being. The gender transition may affect family relationships, including extended family members. Understanding parents' emotional journeys and paths to parental acceptance is necessary to develop effective interventions and best practices in school counseling, clinical mental health counseling, and psychotherapy (Ryan, Russell, Huebner, Diaz, & Sanchez, 2010). To redefine themselves as advocates and protectors of their trans child, parents may need counseling, assistance, and support. This qualitative dissertation investigated the emotional journey of 21 parents during their adolescent's or child's gender transition and examined how parental emotions influenced the parental acceptance process and family relationships. The findings suggest a salient difference between the emotional experiences of parents with trans children and those with trans adolescents: disenfranchised parental grief, intense losses that are not socially recognized or supported (Doka, 1989; Rando, 1986), may be experienced by some parents of trans adolescents,

which may not be experienced by parents of trans children. The findings also suggest the importance of sibling and grandparent advocacy within the family and provide recommendations from the participants to other parents. The study aimed to assist practitioners in providing support for parents navigating the emotional contours of parenting a transgender youth. Limitations of the study, counseling implications, and recommendations for future research are provided. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

Full Text:

https://digitalcommons.lesley.edu/cgi/viewcontent.cgi?article=1004&context=counseling_dissertations

CULTURE, RACE AND ETHNICITY



Exploring cultural differences in the use of emotion regulation strategies in posttraumatic stress disorder

Author(s): Nagulendran, Amanda; Jobson, Laura

Source: European Journal of Psychotraumatology; Dec 2020; vol. 11 (no. 1)

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32158518

Available at [European journal of psychotraumatology](#) - from Europe PubMed Central - Open Access

Available at [European journal of psychotraumatology](#) - from ProQuest (Health Research Premium) - NHS Version

Available at [European journal of psychotraumatology](#) - from Unpaywall

Abstract:Background: Emotion regulation difficulties are central to posttraumatic stress disorder (PTSD). While cultural differences exist in the ways in which individuals regulate their emotions, researchers have not examined cultural differences in emotion regulation in PTSD. Objective: This study explored emotion regulation in individuals from European and East Asian cultures with and without PTSD. Method: Emotion regulation measures were administered to Caucasian Australian (n = 31) and East Asian Australian (n = 38) trauma survivors with and without PTSD. Results: Caucasian Australians with PTSD scored significantly higher on measures of worry, expressive suppression, thought suppression, rumination, experiential avoidance, and general emotion dysregulation compared to Caucasian Australians without PTSD. Similarly, East Asian Australians with PTSD scored significantly higher on measures of rumination and experiential avoidance than East Asian Australians without PTSD. However, worry, expressive suppression, thought suppression and general emotion dysregulation did not differentiate between East Asian Australians with and without PTSD. Conclusion: These findings suggest that there may be cultural differences in emotion regulation difficulties in PTSD and highlight the need for further research in this area. (PsycINFO Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

ANXIETY AND DEPRESSION



[Psychotherapy for Depression Across Different Age Groups: A Systematic Review and Meta-analysis.](#)

JAMA Psychiatry; 2020.

<https://jamanetwork.com/journals/jamapsychiatry/article-abstract/2762981>

[In a meta-analysis of 366 randomized clinical trials including 36 072 patients comparing psychotherapy with control conditions, psychotherapies had lower effect sizes in children and adolescents compared with adults, and no significant differences were found between middle-aged and older adults. However, conclusions are not definitive, given the low quality of many studies, the risk of publication bias, and the high heterogeneity among the studies.]

Available with an NHS OpenAthens password for eligible users

[Antidepressants and psychotherapy for adolescent depression: can they be compared?](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/treatment/antidepressants/antidepressants-and-psychotherapy-for-adolescent-depression-can-they-be-compared-activeingredientsmh/>

[Catherine Harmer summarises a recent network meta-analysis relating to her own Wellcome Trust funded research into antidepressants for young people with anxiety or depression. #ActiveIngredientsMH.]

Freely available online

[Self-compassion for anxiety and depression in young people.](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/mental-health/anxiety/self-compassion-for-anxiety-and-depression-in-young-people-activeingredientsmh/>

[Sarah Egan summarises a recent systematic review relating to her own Wellcome Trust funded research on self-compassion for the prevention and treatment of anxiety and depression in young people.

#ActiveIngredientsMH.]

Freely available online

[Behavioural activation for depression and anxiety in young people.](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/treatment/psychotherapy/behavioural-activation-for-depression-and-anxiety-in-young-people-activeingredientsmh/>

[Kanika Malik appraises a recent systematic review relating to her own Wellcome Trust funded research on behavioural activation for youth mental health problems. #ActiveIngredientsMH.]

Freely available online

[Sequential Combination of Pharmacotherapy and Psychotherapy in Major Depressive Disorder: A Systematic Review and Meta-analysis.](#)

Guidi J. *JAMA Psychiatry* 2020;;doi:10.1001/jamapsychiatry.2020.3650.

[This systematic review and meta-analysis included 17 randomized clinical trials of 2283 participants and showed that the sequential integration of psychotherapy following response to acute-phase pharmacotherapy, alone or combined with antidepressant medication, was associated with reduced risk of relapse and recurrence in major depressive disorder.]

Available with an NHS OpenAthens password for eligible users

The underuse of couple therapy for depression in improving access to psychological therapies services (iapt): A service evaluation exploring its effectiveness and discussion of systemic barriers to its implementation

Author(s): Shepherd, Melanie; Butler, Lucy

Source: Journal of Family Therapy; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Available at [Journal of Family Therapy](#) - from Wiley Online Library Medicine and Nursing Collection 2019 - NHS

Abstract: Couple therapy for depression (CTfD) is an intrinsically systemic, behavioural-based, interactional model. It is underused despite recommendation by data from both the National Institute for Health and Care Excellence (NICE) and Improving Access to Psychological Therapies Services (IAPTS) demonstrating its effectiveness compared with other therapies. In 2016/17, only 1,842 CTfD interventions were delivered

nationally, compared with vastly greater cognitive behavioural therapy and counselling provision (NHS Digital, 2018). Depressed clients' access to CTfD is extremely restricted. IAPT CTfD service evaluation data for 81 couples indicated good outcomes for CTfD in terms of depression, anxiety and relationship satisfaction, despite mean interventions of 7.27 sessions. Recommendations for addressing the underuse of CTfD include increasing capacity through delivery targets, CTfD promotion and improved referral processes. Strengthened links between IAPTS, CTfD training courses and systemic therapists, and expanding systemic training and supervision, would support CTfD implementation and increase family inclusiveness and patient choice. Depressed clients deserve access to CTfD equivalent to individual therapies. Practitioner points CTfD is a NICE-recommended NHS couple therapy with equivalent effectiveness to other IAPT therapies yet is underused. A CTfD service evaluation showed good outcomes for depression, anxiety and relationship satisfaction, despite brief intervention lengths. Leadership, organisational change and training are required for IAPTS to widen patient choice and address barriers to CTfD implementation. Strengthened links between IAPTS and systemic therapists are needed. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

Utilizing placebos to leverage effects of cognitive-behavioral therapy in patients with depression

Author(s): Jurinec, Nina; Schienle, Anne

Source: Journal of Affective Disorders; Dec 2020; vol. 277 ; p. 779-784

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 33065817

Available at [Journal of affective disorders](#) - from Unpaywall

Abstract:Background: Patients with depression often experience difficulties with completing homework assignments during cognitive-behavioral therapy (CBT). In the present study, we investigated the effects of a specific placebo which aimed at improving the practice of a daily relaxation exercise during a four-week outpatient program. Methods: A total of 126 patients diagnosed with major depressive disorder were randomly assigned to one of three groups: 'Coping with Depression' course, 'Coping with Depression' course with additional daily placebo treatment, and waiting-list group. The placebo (sunflower oil) was introduced as a natural medicine to help the patients focus on their inner strengths and to mobilize their bodies' natural healing powers. The placebo was taken orally before the daily relaxation exercise. Results: The placebo improved homework quantity and quality (both $p < .001$). The placebo group practiced more often and experienced greater relaxation effects than the no-placebo group. Additionally, the placebo group showed a greater reduction of depression symptoms ($p < .001$). Limitations: The primary limitation of the study is the lack of a psychophysiological measure of relaxation. Conclusions: Placebos can be used to leverage CBT effects in patients with depression. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Group transdiagnostic cognitive-behavior therapy for anxiety disorders: A pragmatic randomized clinical trial

Author(s): Roberge, Pasquale; Provencher, Martin D.; Gaboury, Isabelle; Gosselin, Patrick; Vasiliadis, Helen-Maria; Benoît, Annie; Carrier, Nathalie; Antony, Martin M.; Chaillet, Nils; Houle, Janie; Hudon, Catherine; Norton, Peter J.

Source: Psychological Medicine; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

PubMedID: 33261700

Available at [Psychological medicine](#) - from Unpaywall

Abstract:Background Transdiagnostic group cognitive-behavioral therapy (tCBT) is a delivery model that could help overcome barriers to large-scale implementation of evidence-based psychotherapy for anxiety disorders. The aim of this study was to assess the effectiveness of combining group tCBT with treatment-as-usual (TAU), compared to TAU, for the treatment of anxiety disorders in community-based mental health care. Methods In a multicenter single-blind, two-arm pragmatic superiority randomized trial, we recruited participants aged 18–65 who met DSM-5 criteria for principal diagnoses of generalized anxiety disorder, social anxiety disorder, panic disorder, or agoraphobia. Group tCBT consisted of 12 weekly 2 h sessions. There were no restrictions for TAU. The primary outcome measures were the Beck Anxiety Inventory (BAI) and clinician severity rating from the Anxiety and Related Disorders Interview Schedule for DSM-5 (ADIS-5) for the principal anxiety disorder at post-treatment, with intention-to-treat analysis. Results A total of 231 participants were randomized to either tCBT + TAU (117) or TAU (114), with outcome data available for, respectively, 95 and 106. Results of the mixed-effects regression models showed superior improvement at post-treatment for participants in tCBT + TAU, compared to TAU, for BAI [$p < 0.001$; unadjusted post-treatment mean (s.d.): 13.20 (9.13) v. 20.85 (10.96), Cohen's $d = 0.76$] and ADIS-5 [$p < 0.001$; 3.27 (2.19) v. 4.93 (2.00), Cohen's $d = 0.79$]. Conclusions Our findings suggest that the addition of group tCBT into usual care can reduce symptom severity in patients with anxiety disorders, and support tCBT dissemination in routine community-based care. (PsyInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

IAPT



The underuse of couple therapy for depression in improving access to psychological therapies services (iapt): A service evaluation exploring its effectiveness and discussion of systemic barriers to its implementation

Author(s): Shepherd, Melanie; Butler, Lucy

Source: Journal of Family Therapy; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Available at [Journal of Family Therapy](#) - from Wiley Online Library Medicine and Nursing Collection 2019 - NHS

Abstract:Couple therapy for depression (CTfD) is an intrinsically systemic, behavioural-based, interactional model. It is underused despite recommendation by data from both the National Institute for Health and Care Excellence (NICE) and Improving Access to Psychological Therapies Services (IAPTS) demonstrating its effectiveness compared with other therapies. In 2016/17, only 1,842 CTfD interventions were delivered nationally, compared with vastly greater cognitive behavioural therapy and counselling provision (NHS Digital, 2018). Depressed clients' access to CTfD is extremely restricted. IAPT CTfD service evaluation data for 81 couples indicated good outcomes for CTfD in terms of depression, anxiety and relationship satisfaction, despite mean interventions of 7.27 sessions. Recommendations for addressing the underuse of CTfD include increasing capacity through delivery targets, CTfD promotion and improved referral processes. Strengthened links between IAPTS, CTfD training courses and systemic therapists, and expanding systemic training and supervision, would support CTfD implementation and increase family inclusiveness and patient choice. Depressed clients deserve access to CTfD equivalent to individual therapies. Practitioner points CTfD is a NICE-recommended NHS couple therapy with equivalent effectiveness to other IAPT therapies yet is underused. A CTfD service evaluation showed good outcomes for depression, anxiety and relationship satisfaction, despite brief intervention lengths. Leadership, organisational change and training are required for IAPTS to widen patient choice and address barriers to CTfD implementation. Strengthened links between IAPTS and systemic therapists are needed. (PsyInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

How accessible and acceptable are current GP referral mechanisms for IAPT for low-income patients? Lay and primary care perspectives.

Author(s): Thomas ; Hansford, L.; Ford, J.; Wyatt, K.; McCabe, R.; Byng, R.

Source: Journal of Mental Health; Dec 2020; vol. 29 (no. 6); p. 706-711

Publication Date: Dec 2020

Publication Type(s): Academic Journal

Available at [Journal of Mental Health](#) - from Unpaywall

Abstract:Background: Improving Access to Psychological Therapies (IAPT) constitutes a key element of England's national mental health strategy. Accessing IAPT usually requires patients to self-refer on the advice of their GP. Little is known about how GPs perceive and communicate IAPT services with patients from low-income communities, nor how the notion of self-referral is understood and responded to by such patients. Aims: This paper examines how IAPT referrals are made by GPs and how these referrals are perceived and acted on by patients from low-income backgrounds Method: Findings are drawn from in-depth interviews with low-income patients experiencing mental distress (n = 80); interviews with GPs (n = 10); secondary analysis of video-recorded GP-patient consultations for mental health (n = 26). Results: GPs generally supported self-referral, perceiving it an important initial step towards patient recovery. Most patients however, perceived self-referral as an obstacle to accessing IAPT, and felt their mental health needs were being undermined. The way that IAPT was discussed and the pathway for referral appears to affect uptake of these services. Conclusions: A number of factors deter low-income patients from self-referring for IAPT. Understanding these issues is necessary in enabling the development of more effective referral and support mechanisms within primary care.

Prevalence of and recovery from common mental disorder including psychotic experiences in the UK Primary Care Improving Access to Psychological Therapies (IAPT) Programme.

Author(s): Knight ; Russo, Debra; Stochl, Jan; Croudace, Tim; Fowler, David; Grey, Nick; Reeve, Nesta; Jones, Peter B; Perez, Jesus

Source: Journal of Affective Disorders; Jul 2020; vol. 272 ; p. 84-90

Publication Date: Jul 2020

Publication Type(s): Academic Journal

PubMedID: NLM32379625

Abstract:Background: Psychotic experiences (PE) may co-occur with common mental disorders (CMD), such as depression and anxiety. However, we know very little about the prevalence of and recovery from PE in primary mental health care settings, such as the Improving Access to Psychological Therapies (IAPT) services in the UK National Health Service (NHS), where most CMD are treated.Methods: We used the Community Assessment of Psychic Experiences - Positive 15-item Scale (CAPE-P15) to determine the prevalence of PE in patients receiving treatment from IAPT services. Patient-reported measures of depression (PHQ-9) and anxiety (GAD-7) are routinely collected and establish recovery in IAPT services. We studied recovery rates according to the absence and presence of PE. Multi-group growth models estimated improvement trajectories for each group.Results: A total of 2,042 patients with CMD completed the CAPE-P15. The mean age was 39.8. The overall prevalence of PE was 29.68%. The recovery rate was 27.43% compared to 62.08% for those without PE. Although patients with or without PE shared similar improvement trajectories, the initial severity of patients with PE impeded their likelihood of recovery.Limitations: We mirrored routine data collection in IAPT services, including self-report questionnaires that may affect valid reporting of symptoms. Missing data in the calculation of improvement trajectories may reduce generalisability.Conclusions: At least one in four patients receiving treatment from IAPT services in primary care experience CMD and PE. This significant group of people experience a lower recovery rate, with adverse implications not only for them but also for efficiency of services.

PMH37 Bridging the Gap Between HTA and Digital Health Technologies in England - What Are the Challenges Faced by NICE in Assessing Psychological Therapies?

Author(s): Francis L.; Walker S.; White M.

Source: Value in Health; Dec 2020; vol. 23

Publication Date: Dec 2020

Publication Type(s): Conference Abstract

Abstract: Objectives: The broad scope of Digital Health Technologies (DHTs) comprises a range of products including apps and online platforms. Evaluating DHTs and their potential benefits is challenging because they are rapidly developed and updated; consequently, there is generally less or lower quality evidence available. Since 2008, the National Institute for Health and Care Excellence (NICE) has worked with NHS England to assess digital therapies that follow NICE recommendations and address conditions managed by the Improving Access to Psychological Therapies (IAPT) programme. Here we review decisions for DHTs under the IAPT programme in England and consider strategies to overcome barriers to patient access. Method(s): A pragmatic search of the NICE website was conducted to identify DHTs assessed under the IAPT up to June 2020. Recommendations and comments on the evidence presented were extracted. Result(s): In total, 14 DHTs were assessed; nine were not recommended, five were recommended for evaluation in practice and one had already been evaluated in practice. All were online programmes, with one available as an app. Levels of evidence varied, with most DHTs investigated by a small number of randomised controlled trials and observational studies. Few DHTs had robust economic evidence, with only one DHT presenting cost-effectiveness data. Challenges arose regarding quality of evidence with criticisms that some trials failed to reflect use of the DHT in clinical practice in England, in addition to a highlighted lack of comparative evidence (versus standard of care), and an absence of relevant economic data. Conclusion(s): DHTs have the potential to reach patients for whom face-to-face therapies are inaccessible. Despite implementation of NICE's Evidence Framework for DHTs in 2018, established HTA processes remain a barrier for patient access to DHTs. NICE could accelerate patient access by introducing managed access agreements pending submission of real-world data relevant to IAPT patients in England. Copyright © 2020

Arts for the blues: The development of a new evidence-based creative group psychotherapy for depression

Author(s): Omylinska-Thurston, Joanna; Karkou, Vicky; Parsons, Ailsa; Nair, Kerry; Dubrow-Marshall, Linda; Starkey, Jennifer; Thurston, Scott; Dudley-Swarbrick, Irene; Sharma, Surina

Source: Counselling & Psychotherapy Research; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Abstract: Introduction Depression affects many adults in the UK, often resulting in referral to primary care mental health services (e.g. improving access to psychological therapies, IAPT). CBT is the main modality for depression within IAPT, with other approaches offered in a limited capacity. Arts psychotherapies are rarely provided despite their attractiveness to clients. However, the recent dropout rate of 64% within IAPT suggests that clients' needs are not being fully met. Therefore, in order to expand clients' choice we developed a new creative psychological therapy integrating evidence-based approaches with arts psychotherapies. Method A three-level approach was used: (a) thematic synthesis of client-identified helpful factors in evidence-based approaches for depression and in arts psychotherapies; (b) studio practice exploring Cochrane Review findings on arts psychotherapies for depression; (c) pilot workshops for clients with depression and therapists. Findings and Discussion Eight key ingredients for positive therapy outcomes were identified: encouraging active engagement, learning skills, developing relationships, expressing emotions, processing at a deeper level, gaining understanding, experimenting with different ways of being and integrating useful material. These ingredients were brought together as Arts for the Blues for clients with depression: a 12-session evidence-based pluralistic

group psychotherapy integrating creative methods as well as talking therapy. Conclusion The evidence-based foundation, creative content and pluralistic nature of this new approach aligned with eight client-identified key ingredients for positive therapy outcomes make it a promising therapy option that can be adapted to individual therapy. Implications include consideration for NICE approval as an additional therapy for depression. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Database: PsycINFO

An evidence-based approach to clinical supervision

Author(s): Reiser, Robert P.

Source: The Clinical Supervisor; Nov 2020

Publication Date: Nov 2020

Publication Type(s): Journal Peer Reviewed Journal

Abstract:ABSTRACT Derek Milne has developed and disseminated an evidence-based model for clinical supervision (EBCS) that is unique and differs from other approaches. Based on an integrative model of evidence-based clinical practice, Derek's research program has included a series of literature reviews, an empirical definition, a basic model of clinical supervision, and an instrument for observing and evaluating clinical supervision (Supervision: Adherence and Guidance Evaluation: SAGE). Dissemination of this work led to a manualized account of EBCS, including practical guidelines and video-demonstrations. EBCS has been particularly influential in the UK, where it has been incorporated within the IAPT initiative. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

POST-TRAUMATIC STRESS DISORDER



Effectiveness of three brief treatments for recent traumatic events in a low-SES community setting

Author(s): Ironson, Gail; Hylton, Emily; Gonzalez, Brian; Small, Brent; Freund, Blanche; Gerstein, Myriam; Thurston, Fabian; Bira, Lindsay

Source: Psychological Trauma: Theory, Research, Practice, and Policy; Jan 2021; vol. 13 (no. 1); p. 123-132

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32496104

Available at [Psychological trauma : theory, research, practice and policy](#) - from ProQuest PsycARTICLES - NHS

Abstract:Objective: To determine whether brief treatments provide psychological relief after traumatic events in low-resource communities. Method: Participants (n = 105) who had experienced a traumatic event within the past 6 months were randomly assigned to 1 of 3 4-session treatments: individual eye movement desensitization and reprocessing (EMDR), group-administered stress management with a trauma focus (SMT), or group-administered psychological first aid (PFA). Measures administered pretreatment and at 1-, 3-, and 6-month posttreatment included posttraumatic stress disorder (PTSD) symptoms, posttraumatic cognitions (PTCI), and depressive symptoms (BDI). Results: The 3 treatment groups all showed significant declines in PTSD, PTCI, and BDI symptoms over time with large prepost effect sizes (median 1-month: 0.96, 3-month: 1.38, 6-month: 1.10). However, the treatment groups showed significantly different rates of decline, with the EMDR group showing the fastest declines—interaction PTCI: $F(1, 237) = 5.85, p = .016$; depression: $F(1, 239) = 4.90, p = .028$ —followed by the SMT and then PFA group. While there were significant differences between the EMDR and PFA groups at the 1- and 3-month follow-ups, there were no significant differences in any of the 3 outcome measures at the 6-month follow-up, nor were there significant differences between groups on PTSD symptoms, $F(1, 239) = 2.30, p = .131$. Conclusion: This study provides preliminary evidence that any of these 3 approaches may be useful in low-resource community settings. Because it gives the quickest relief, EMDR is the preferred approach, followed by SMT, due its ease of administration. PFA provides a reasonable alternative. Where possible, booster sessions

should be planned. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)
Impact statement
Clinical Impact Statement—This study demonstrates that brief treatments may provide psychological relief after traumatic events in low-resource communities. We observed reductions in posttraumatic stress disorder (PTSD) symptoms, posttraumatic cognitions, and depression, after four sessions of either individual eye movement desensitization and reprocessing (EMDR), group-administered stress management with a trauma focus (SMT), or group-administered psychological first aid (PFA). This study provides preliminary evidence that any of three approaches may be efficacious in resource-limited settings, or where immediate relief is desired. As EMDR gives the fastest relief, it would be the preferred approach, followed by SMT, which was group-administered and therefore more cost-effective. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

Evaluating the effectiveness of phase-oriented treatment models for PTSD—A meta-analysis

Author(s): Corrigan, John-Paul; Fitzpatrick, Madeleine; Hanna, Donncha; Dyer, Kevin F. W.

Source: *Traumatology*; Dec 2020; vol. 26 (no. 4); p. 447-454

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Article

Available at [Traumatology](#) - from ProQuest PsycARTICLES - NHS

Abstract: It has been suggested that treatments for posttraumatic stress disorder (PTSD) be framed within a staged or phase-oriented model, particularly in cases of increased trauma symptom severity and complex PTSD. However, ambiguity remains around this model's definition and efficacy. The present literature review aimed to examine the efficacy of treatments adopting a phase-oriented model for individuals with PTSD symptoms with a subanalysis of a potential high complexity sample. A systematic search of the literature found 1,180 articles, of which 13 met predefined criteria. To analyze effect sizes, a random effects meta-analysis was conducted. The analysis showed a large effect size in the differences between the beginning and end-of-treatment timepoints on PTSD symptoms ($d = 1.77$, 95% confidence interval [CI] [1.45, 2.08], $z = 10.97$; $p < .001$) with moderate heterogeneity. A subanalysis showed that the large effect size was maintained when compared with control groups ($d = 0.82$, 95% CI [0.29, 2.29], $z = 3.04$; $p < .005$). Further subanalysis of a predefined potential high complexity population also revealed a large effect size ($d = 1.39$, 95% CI [0.99, 1.79], $z = 6.79$; $p < .001$). Results concurred with previous literature supporting the effectiveness of phase-oriented models for PTSD symptoms, but limitations existed in finding appropriate definitions of the model, symptom severity, appropriate control groups, and generalizing findings. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

Cognitive therapy and EMDR for reducing psychopathology in bereaved people after the MH17 plane crash: Findings from a randomized controlled trial

Author(s): Lenferink, Lonneke I. M.; de Keijser, Jos; Smid, Geert E.; Boelen, Paul A.

Source: *Traumatology*; Dec 2020; vol. 26 (no. 4); p. 427-437

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Article

Available at [Traumatology](#) - from ProQuest PsycARTICLES - NHS

Abstract: Experiencing a sudden/violent loss of a significant other is a risk factor for developing persistent complex bereavement disorder (PCBD), depression, and/or posttraumatic stress disorder (PTSD). Cognitive therapy (CT) combined with eye movement desensitization and reprocessing (EMDR) might be an effective treatment for bereaved people with PCBD, depression, and/or PTSD symptoms after sudden/violent loss. We tested the effects of CT + EMDR versus waitlist controls in disaster-bereaved people. In a multicenter randomized controlled trial, changes in self-rated PCBD, depression, and PTSD levels were compared between an immediate treatment and waitlist control group in 39 Dutch people who experienced loss(es) in the disaster with flight

MH17, using multilevel modeling. Associations between reductions in symptom levels and reductions in maladaptive cognitive-behavioral variables were examined using regression analyses. The immediate treatment group showed a significantly stronger decline in depression (Hedges' $g = 0.61$) compared with waitlist controls (Hedges' $g = 0.15$). No significant between-groups differences were found in PCBD and PTSD levels. Symptom reductions were correlated with reductions in maladaptive cognitive-behavioral variables. Although CT + EMDR coincided with symptom reductions associated with reductions in negative cognitions and avoidance behaviors, more research with larger samples is needed to further examine the effectiveness of CT + EMDR in bereaved people after sudden/violent loss. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

Cognitive behavioral social rhythm group therapy versus present centered group therapy for veterans with posttraumatic stress disorder and major depressive disorder: A randomized controlled pilot trial

Author(s): Haynes, Patricia L.; Burger, Sarah B.; Kelly, Monica; Emert, Sarah; Perkins, Suzanne; Shea, M. Tracie

Source: Journal of Affective Disorders; Dec 2020; vol. 277 ; p. 800-809

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 33065820

Abstract:Background: Cognitive Behavioral Social Rhythm Group Therapy (CBSRT) is a chronobiologically-informed group therapy designed to stabilize social rhythms in veterans with comorbid combat-related PTSD and major depressive disorder (MDD). This randomized controlled pilot trial is the first to examine feasibility and preliminary efficacy of group CBSRT as compared to group Present Centered Therapy (PCT), a well-characterized active attention, psychotherapy condition. Methods: A total of 43 male veterans with combat-related PTSD, MDD, and disruptions in sleep or daily routine were randomly assigned to CBSRT or PCT. Therapy was provided weekly in a group modality for 12 weeks. Follow-up feasibility and gold-standard PTSD, MDD, and subjective/objective sleep assessments were conducted at post-treatment, 3 months, and 6 months post-treatment. Results: Feasibility results demonstrated that veterans assigned to CBSRT had higher rates of attendance than veterans assigned to PCT. Both CBSRT and PCT were associated with improvements in PTSD and MDD symptoms, sleep efficiency, and number of awakenings; there were no differences between group therapies on these indices. Veterans in the CBSRT group had a greater reduction in the number of nightmares than veterans in the PCT group. Limitations: Preliminary results must be qualified by the small sample size. Conclusions: Group CBSRT may be more feasible for veterans than PCT. Both CBSRT and PCT were associated with improvements in psychiatric symptoms with few differences between conditions. CBSRT is a promising new group therapy that may help address the high-rate of PTSD therapy attrition in combat veterans. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Exploring cultural differences in the use of emotion regulation strategies in posttraumatic stress disorder

Author(s): Nagulendran, Amanda; Jobson, Laura

Source: European Journal of Psychotraumatology; Dec 2020; vol. 11 (no. 1)

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32158518

Available at [European journal of psychotraumatology](#) - from Europe PubMed Central - Open Access

Available at [European journal of psychotraumatology](#) - from ProQuest (Health Research Premium) - NHS Version

Available at [European journal of psychotraumatology](#) - from Unpaywall

Abstract:Background: Emotion regulation difficulties are central to posttraumatic stress disorder (PTSD). While cultural differences exist in the ways in which individuals regulate their emotions, researchers have not examined

cultural differences in emotion regulation in PTSD. Objective: This study explored emotion regulation in individuals from European and East Asian cultures with and without PTSD. Method: Emotion regulation measures were administered to Caucasian Australian (n = 31) and East Asian Australian (n = 38) trauma survivors with and without PTSD. Results: Caucasian Australians with PTSD scored significantly higher on measures of worry, expressive suppression, thought suppression, rumination, experiential avoidance, and general emotion dysregulation compared to Caucasian Australians without PTSD. Similarly, East Asian Australians with PTSD scored significantly higher on measures of rumination and experiential avoidance than East Asian Australians without PTSD. However, worry, expressive suppression, thought suppression and general emotion dysregulation did not differentiate between East Asian Australians with and without PTSD. Conclusion: These findings suggest that there may be cultural differences in emotion regulation difficulties in PTSD and highlight the need for further research in this area. (PsycINFO Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

MENTAL DISORDERS



[What do people with bipolar really pay attention to when they are monitoring their mood?](#)

The Mental Elf; 2021.

<https://www.nationalelfservice.net/mental-health/bipolar-disorder/mood-monitoring-bipolar-disorder/>

Charlotte Walker reviews a recent qualitative study on monitoring mood in bipolar disorder, which suggests that people with lived experience should customise monitoring questions to create a more responsive, personalised approach.

[Parental involvement in CBT for anxiety disorders: a help or a hindrance?](#)

The Mental Elf; 2021.

<https://www.nationalelfservice.net/treatment/cbt/parental-involvement-in-cbt-for-anxiety-disorders-a-help-or-a-hindrance/>

Lucy Purnell summarises a recent systematic review which finds little support for parental involvement in cognitive behavioural therapy for adolescent anxiety disorders.

Freely available online

[Is it feasible to use apps to support people with first episode psychosis?](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/treatment/digital-health/is-it-feasible-to-use-apps-to-support-people-with-first-episode-psychosis/>

[In her debut blog, Rosa Pitts summarises the ARIES trial, which suggests it may be feasible to use a smartphone app (My Journey 3) to help prevent relapse in psychosis, although questions remain about long-term participant engagement with the app.]

[Stigma and discrimination in people at risk of psychosis.](#)

The Mental Elf; 2021.

<https://www.nationalelfservice.net/mental-health/psychosis/stigma-risk-psychosis/>

[Dave Steele explores a systematic review which finds that people who are at risk of psychosis are likely to experience stigma and discrimination.]

Freely available online

Comparing the magnitude of improvement for patients with and without personality disorders in open-ended psychotherapy

Author(s): Nordmo, Magnus; Monsen, Jon T.; Høglend, Per Andreas; Solbakken, Ole Andre

Source: Personality Disorders: Theory, Research, and Treatment; Jan 2021

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

Available at [Personality Disorders: Theory, Research, and Treatment](#) - from Unpaywall

Abstract:There is limited evidence that patients with a personality disorder (PD) have poorer psychotherapy outcomes compared to those without, but the majority of these studies are from short-term and symptom-focused interventions. In contrast, the present study provided open-ended psychotherapy to a sample of patients (N = 370), half of which had a PD at pretreatment. The results revealed that patients with PD demonstrated equal symptomatic improvement and greater interpersonal improvement than patients without PD. Similarly, observer-rated diagnostic changes were equivalent across the two groups. The PD group needed significantly higher therapy doses to reach this level of change. Both groups demonstrated enduring improvements when assessed at a 2.5-year follow-up. However, patients with a PD at pretreatment were more likely to relapse and regain their Axis I clinical disorder during follow-up. The degree of personality pathology was positively related to magnitude of change. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

Borderline patients before and after one year of transference-focused psychotherapy (TFP): A detailed analysis of change of attachment representations

Author(s): Tmej, Anna; Fischer-Kern, Melitta; Doering, Stephan; Hörz-Sagstetter, Susanne; Rentrop, Michael; Buchheim, Anna

Source: Psychoanalytic Psychology; Jan 2021; vol. 38 (no. 1); p. 12-21

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

Available at [Psychoanalytic Psychology](#) - from ProQuest PsycARTICLES - NHS

Abstract:In a mixed-methods approach, this study applies qualitative analysis to Adult Attachment Interview texts of 11 patients with borderline personality disorder, who changed from an insecure attachment representation to security after 1 year of treatment with transference-focused psychotherapy (TFP). Analyses were guided by 3 research questions about changes in (a) attachment strategies, (b) narrative content, and (c) themes to form a theory about the way psychic structure in the form of attachment representation changes during TFP treatment, encompassing the changes of self- and other-representations and of defense mechanisms such as splitting and idealization as they appear in the discourse about attachment-related themes. Analyses yielded 2 groups of changes. Patients who changed in a "straightforward" way reduced their defenses and were able to produce more balanced and detailed narratives. These patients changed from an insecure–preoccupied attachment representation to a secure attachment representation with preoccupied aspects, or from an insecure–dismissing to a secure representation with dismissing aspects. On the other hand, some insecure–dismissing patients changed in a "diverted" way to a secure attachment with preoccupied aspects, that is, originally dismissing defenses were reduced while attention toward negative aspects of attachment was somewhat intensified. Exact comparisons of narratives from the beginning and from after 1 year of therapy also revealed relevant thematic changes above and beyond attachment, showing that patients could use TFP to gain deeper and more significant understanding of their early experiences. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

Alliance rupture and repair in early sessions of dialectical behavior therapy: The case of Rachel

Author(s): Boritz, Tali; Varma, Sonya; Macaulay, Christianne; McMain, Shelley F.

Source: Journal of Clinical Psychology; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Abstract: Emotional and interpersonal instability are core features of borderline personality disorder (BPD) and can pose a challenge for the therapeutic relationship. In dialectical behavior therapy (DBT) for BPD, ruptures in the therapeutic alliance are considered through a behavioral lens that examines the client's relational learning history, the function and context of the rupture, as well as the patterns of emotional processing difficulties that underlie interpersonal conflict. In this article, we use the case of Rachel to illustrate how alliance-focused approach can be integrated with DBT case formulation to enhance treatment planning and the successful negotiation of alliance ruptures. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Disentangling beliefs about emotions from emotion schemas

Author(s): Veilleux, Jennifer C.; Chamberlain, Kaitlyn D.; Baker, Danielle E.; Warner, Elise A.

Source: Journal of Clinical Psychology; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

PubMedID: 33319397

Abstract: Objective The current study sought to empirically evaluate a new clinical tool, the Individual Beliefs about Emotion (IBAE) which assesses nine beliefs about emotion. The goal was to examine the overlap of the IBAE with the Leahy Emotional Schema Scale (LESS), indices of psychopathology, and emotion dysregulation. Method Participants (n = 513) completed the IBAE, the LESS, and measures of affective distress, borderline personality features, and emotion dysregulation. Results Results indicated that both emotion beliefs (IBAE) and schemas (LESS) were influenced by age and gender. Both measures significantly predicted variance in affective distress, borderline symptoms, and emotion dysregulation, although the LESS was a stronger predictor. Conclusion We conclude that the LESS total score is a particularly useful measure of maladaptive schematic attitudes toward emotion, with additional evidence that the IBAE is a clinical tool that can be useful in psychotherapy to quickly assess a variety of emotion beliefs. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Prediction of psychosis: Model development and internal validation of a personalized risk calculator

Author(s): Lee, Tae Young; Hwang, Wu Jeong; Kim, Nahrie S.; Park, Inkyung; Lho, Silvia Kyungjin; Moon, Sun-Young; Oh, Sanghoon; Lee, Junhee; Kim, Minah; Woo, Choong-Wan; Kwon, Jun Soo

Source: Psychological Medicine; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

PubMedID: 33315005

Available at [Psychological medicine](#) - from Unpaywall

Abstract: Background Over the past two decades, early detection and early intervention in psychosis have become essential goals of psychiatry. However, clinical impressions are insufficient for predicting psychosis

outcomes in clinical high-risk (CHR) individuals; a more rigorous and objective model is needed. This study aims to develop and internally validate a model for predicting the transition to psychosis within 10 years. Methods Two hundred and eight help-seeking individuals who fulfilled the CHR criteria were enrolled from the prospective, naturalistic cohort program for CHR at the Seoul Youth Clinic (SYC). The least absolute shrinkage and selection operator (LASSO)-penalized Cox regression was used to develop a predictive model for a psychotic transition. We performed k-means clustering and survival analysis to stratify the risk of psychosis. Results The predictive model, which includes clinical and cognitive variables, identified the following six baseline variables as important predictors: 1-year percentage decrease in the Global Assessment of Functioning score, IQ, California Verbal Learning Test score, Strange Stories test score, and scores in two domains of the Social Functioning Scale. The predictive model showed a cross-validated Harrell's C-index of 0.78 and identified three subclusters with significantly different risk levels. Conclusions Overall, our predictive model showed a predictive ability and could facilitate a personalized therapeutic approach to different risks in high-risk individuals. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Emergence of insight in psychotherapy for early psychosis: A qualitative analysis of a single case study

Author(s): Pattison, Michelle L.; Leonhardt, Bethany L.; Abate, Jacqueline F.; Huling, Kelsey S.; Belanger, Elizabeth A.; O'Connor, Hannah M.; Lysaker, Paul H.

Source: Psychiatric Rehabilitation Journal; Dec 2020; vol. 43 (no. 4); p. 327-334

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32406705

Available at [Psychiatric rehabilitation journal](#) - from ProQuest PsycARTICLES - NHS

Available at [Psychiatric rehabilitation journal](#) - from EBSCO (MEDLINE Complete)

Abstract:Objective: Engaging individuals experiencing early psychosis (EP) in mental health treatment is broadly recognized as a challenging endeavor, especially when persons with EP experience impaired insight or relative unawareness of the psychiatric challenges they face. With limited insight they may see little point to treatment and have difficulties forming an alliance with providers. Tackling the issues of poor insight in EP is further complicated by a lack of knowledge of the processes within psychosocial interventions that lead to improved insight. Method: To explore this, qualitative methods were used to identify content, process, and therapist factors that appeared before and seemed to support insight in a patient experiencing EP as well as the frequency with which insight and psychological problems emerged. The case examined was a 6-month psychotherapy from a pilot study examining the use of metacognitive reflection and insight therapy in EP. Results: Five prominent codes were identified across 24 psychotherapy transcripts that appeared to support the development of insight: narrative details, interpersonal relationships, therapist curiosity, therapist support, and therapist challenges. These appear to have allowed for the emergence of psychological problems first and then finally insight into mental health needs. Conclusions and Implications for Practice: Addressing metacognitive capacity in psychotherapy may allow persons with low insight to recognize psychological problems and then develop a complex idea about their psychiatric challenges. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Impact statementImpact and Implications—Addressing metacognitive capacity in the psychotherapy for individuals with early psychosis and poor insight may lead to improvements in insight. In a detailed case study, we found that these procedures enabled him to first recognize general psychological problems and then to form a more nuanced picture of the psychiatric challenges he had been facing for several years, integrating his experience of mental illness. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

Elements that enhance therapeutic alliance and short-term outcomes in metacognitive reflection and insight therapy: A session-by-session assessment

Author(s): Lavi-Rotenberg, Adi; Bar-Kalifa, Eran; de Jong, Steven; Igra, Libby; Lysaker, Paul H.; Hasson-Ohayon, Ilanit

Source: Psychiatric Rehabilitation Journal; Dec 2020; vol. 43 (no. 4); p. 318-326

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32271073

Available at [Psychiatric rehabilitation journal](#) - from ProQuest PsycARTICLES - NHS

Available at [Psychiatric rehabilitation journal](#) - from EBSCO (MEDLINE Complete)

Abstract:Objective: Preliminary evidence has found metacognitive capacity is associated with therapeutic alliance and with other outcomes in psychotherapy among persons with schizophrenia. The current study explored: (a) before to after changes in clients' metacognition capacity following Metacognitive Reflection and Insight Therapy (MERIT) and (b) whether the use of specific therapeutic elements of MERIT were followed by higher ratings of therapeutic alliance at the end of each session as well as with short-term outcome as measured prior to the next session, in a session-by-session intensive data collection. Method: Two hundred twenty-one sessions of 10 completers with schizophrenia who took part in an ongoing MERIT trial were analyzed. Measures of therapeutic alliance (short version of the Working Alliance Inventory), general outcome (Outcome Rating Scale), and metacognition (Metacognition Assessment Scale–Abbreviated) were used. Results: Findings showed significant change in 2 domains of metacognition, self-reflectivity and mastery, following therapy. In addition, the presence of 2 specific MERIT elements, the introduction of the therapist's mind and reflecting on the progress in therapy within a given session, were related to better outcomes in the following week. Finally, reflecting on the progress was also followed by higher therapeutic alliance. Conclusions: Metacognitively oriented therapy may positively affect both therapeutic alliance and short-term outcome. Specifically discussing the therapist's and client's experiences of what is occurring in therapy may positively affect short-term outcome and could be applicable to other psychotherapy approaches. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract) Impact statementImpact and

Implications: Findings showed significant change in clients' metacognitive capacity for self-reflectivity and mastery following therapy. In addition, specific therapeutic elements of Metacognitive Reflection and Insight Therapy, that is, discussion of the therapist's and client's experiences of what is occurring in therapy, were followed by either higher rating of therapeutic alliance at the end of the sessions or better outcome in next-session assessment, thus indicating the importance of metacognitively oriented therapy. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

ALZHEIMER'S / DEMENTIA



[Dementia profile: February 2021 update.](#)

Public Health England (PHE); 2021.

<https://www.gov.uk/government/statistics/dementia-profile-february-2021-update>

[Updated statistics on dementia prevalence, hospital admissions, care and mortality, at the national and subnational geographical areas in England. The dementia profile is designed to improve the availability and accessibility of information on dementia. The data is presented in an interactive tool that allows users to view and analyse it in a user-friendly format.]

COMPULSIONS AND PHOBIAS



[Family and couple integrated cognitive-behavioural therapy for adults with OCD: A meta-analysis.](#)

Stewart KE. *Journal of Affective Disorders* 2020;277:159-168.

[Family-integrated treatments (FIT) improved OCD, depression, anxiety, antagonism, and accommodation. FIT

improved patient and family relational satisfaction and family mental health. Integrating family into treatment led to greater improvements than individual exposure and response prevention. Family members reported greater relational improvements than patients. Fewer sessions and female sex were associated with a reduction in antagonism.]

Available with an NHS OpenAthens password for eligible users

Optimizing Smartphone-Delivered Cognitive Behavioral Therapy for Body Dysmorphic Disorder Using Passive Smartphone Data: Initial Insights From an Open Pilot Trial.

Author(s): Weingarden ; Matic, Aleksandar; Calleja, Roger Garriga; Greenberg, Jennifer L; Harrison, Oliver; Wilhelm, Sabine

Source: Journal of Medical Internet Research; Jun 2020; vol. 22 (no. 6)

Publication Date: Jun 2020

Publication Type(s): Academic Journal

Available at [JMIR mHealth and uHealth](#) - from Europe PubMed Central - Open Access

Available at [JMIR mHealth and uHealth](#) - from EBSCO (MEDLINE Complete)

Available at [JMIR mHealth and uHealth](#) - from Unpaywall

PSYCHOLOGICAL ASSESSMENT**Disentangling beliefs about emotions from emotion schemas**

Author(s): Veilleux, Jennifer C.; Chamberlain, Kaitlyn D.; Baker, Danielle E.; Warner, Elise A.

Source: Journal of Clinical Psychology; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

PubMedID: 33319397

Abstract:Objective The current study sought to empirically evaluate a new clinical tool, the Individual Beliefs about Emotion (IBAE) which assesses nine beliefs about emotion. The goal was to examine the overlap of the IBAE with the Leahy Emotional Schema Scale (LESS), indices of psychopathology, and emotion dysregulation. Method Participants (n = 513) completed the IBAE, the LESS, and measures of affective distress, borderline personality features, and emotion dysregulation. Results Results indicated that both emotion beliefs (IBAE) and schemas (LESS) were influenced by age and gender. Both measures significantly predicted variance in affective distress, borderline symptoms, and emotion dysregulation, although the LESS was a stronger predictor. Conclusion We conclude that the LESS total score is a particularly useful measure of maladaptive schematic attitudes toward emotion, with additional evidence that the IBAE is a clinical tool that can be useful in psychotherapy to quickly assess a variety of emotion beliefs. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

PAIN, PHYSICAL ILLNESS AND LONG TERM CONDITIONS

BRAIN INJURY AND STROKE

**Suicide risk assessment tools: what's the current state of the evidence?**

The Mental Elf; 2020.

<https://www.nationalelfservice.net/mental-health/suicide/suicide-risk-assessment-tools/>

[Gabrielle Beaudry reviews a new national mixed methods study from the UK on suicide risk assessment tools used in mental health services.]

Freely available online

The environmental, interpersonal, and affective context of nonsuicidal self-injury urges in daily life

Author(s): Hepp, Johanna; Carpenter, Ryan W.; Freeman, Lindsey K.; Vebares, Tayler J.; Trull, Timothy J.

Source: Personality Disorders: Theory, Research, and Treatment; Jan 2021; vol. 12 (no. 1); p. 29-38

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32881575

Available at [Personality disorders](#) - from ProQuest PsycARTICLES - NHS

Abstract: Urges for nonsuicidal self-injury (NSSI) are important precursors to NSSI acts and may serve as a point of intervention. A close understanding of the phenomenology of NSSI urges and the contexts in which they occur is therefore warranted. We used ambulatory assessment to examine the environmental, interpersonal, and affective contexts of NSSI urges. We recruited 56 participants with borderline personality disorder who reported on urges and contexts for 21 days with six random daily prompts, resulting in 5,750 completed assessments. Twenty-two participants reported 160 NSSI urges. We provide extensive descriptive results characterizing the interaction partners, activities, and events participants reported in association with NSSI urges. Results from a logistic multilevel model using the full sample (testing associations between all contexts and urges simultaneously) revealed that urges were more likely to occur at higher levels of negative affect, when rejection was experienced, and later in the day. Urges were not associated with disagreements or feeling let down, being at home versus away, being alone versus in company, socializing versus doing another activity, and it being a weekday versus weekend. Additional growth curve analysis for negative affect using the subsample of 22 participants who reported urges showed that, over the course of urge days compared with nonurge days, negative affect increased before urges, peaked during the urge, and then decreased, approximating a quadratic curve. We conclude that urges occurred primarily in the context of negative affect and rejection, which is consistent with theories on intra- and interpersonal functions of NSSI. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

Interventions for suicide and self-injury: A meta-analysis of randomized controlled trials across nearly 50 years of research

Author(s): Fox, Kathryn R.; Huang, Xieyining; Guzmán, Eleonora M.; Funsch, Kensie M.; Cha, Christine B.; Ribeiro, Jessica D.; Franklin, Joseph C.

Source: Psychological Bulletin; Dec 2020; vol. 146 (no. 12); p. 1117-1145

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 33119344

Available at [Psychological bulletin](#) - from ProQuest PsycARTICLES - NHS

Abstract: Self-injurious thoughts and behaviors (SITBs) are major public health concerns impacting a wide range

of individuals and communities. Despite major efforts to develop and refine treatments to reduce SITBs, the efficacy of SITB interventions remains unclear. To provide a comprehensive summary of SITB treatment efficacy, we conducted a meta-analysis of published randomized controlled trials (RCTs) that have attempted to reduce SITBs. A total of 591 published articles from 1,125 unique RCTs with 3,458 effect sizes from the past 50 years were included. The random-effects meta-analysis yielded surprising findings: The overall intervention effects were small across all SITB outcomes; despite a near-exponential increase in the number of RCTs across five decades, intervention efficacy has not improved; all SITB interventions produced similarly small effects, and no intervention appeared significantly and consistently stronger than others; the overall small intervention effects were largely maintained at follow-up assessments; efficacy was similar across age groups, though effects were slightly weaker for child/adolescent populations and few studies focused on older adults; and major sample and study characteristics (e.g., control group type, treatment target, sample size, intervention length) did not consistently moderate treatment efficacy. This meta-analysis suggests that fundamental changes are needed to facilitate progress in SITB intervention efficacy. In particular, powerful interventions target the necessary causes of pathology, but little is known about SITB causes (vs. SITB correlates and risk factors). The field would accordingly benefit from the prioritization of research that aims to identify and target common necessary causes of SITBs. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Impact statement Public Significance Statement: This meta-analysis found that many interventions produce small reductions in SITBs and that these effects endure across a range of sample and study characteristics. No interventions consistently produce large or moderate SITB reductions, and intervention efficacy has not improved across 50 years of research. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

Risk of suicide and self-harm in kids: The development of an algorithm to identify high-risk individuals within the children's mental health system

Author(s): Stewart, Shannon L.; Celebre, Angela; Hirdes, John P.; Poss, Jeffrey W.

Source: Child Psychiatry and Human Development; Dec 2020; vol. 51 (no. 6); p. 913-924

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32076912

Available at [Child psychiatry and human development](#) - from Unpaywall

Abstract: Suicide is the second leading cause of death in adolescents within Canada. While several risk factors have been found to be associated with increased risk, appropriate decision-support tools are needed to identify children who are at highest risk for suicide and self-harm. The aim of the present study was to develop and validate a methodology for identifying children at heightened risk for self-harm and suicide. Ontario data based on the interRAI Child and Youth Mental Health Screener (ChYMH-S) were analyzed to develop a decision-support algorithm to identify young persons at risk for suicide or self-harm. The algorithm was validated with additional data from 59 agencies and found to be a strong predictor of suicidal ideation and self-harm. The RiSsK algorithm provides a psychometrically sound decision-support tool that may be used to identify children and youth who exhibit signs and symptoms noted to increase the likelihood of suicide and self-harm. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

EATING DISORDERS



[Eating disorder symptoms and suicidality: is there a significant association within the student population?](#)

The Mental Elf; 2021.

<https://www.nationalelfservice.net/mental-health/eating-disorders/eating-disorders-suicidality/>

[In his debut blog, Jack Wainwright explores a study that finds an association between eating disorders and suicidality in US college students.]

Freely available online

Applying emotion-focused therapy to work with the "anorexic voice" within anorexia nervosa: A brief intervention

Author(s): Hibbs, Rebecca; Pugh, Mathew; Fox, John R. E.

Source: Journal of Psychotherapy Integration; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

Abstract: Existing treatments for anorexia nervosa (AN) have produced dissatisfactory outcomes. Research suggests that many people with AN experience an internal "voice" that is related to eating disorder symptoms and relapse. This study was designed to consider the feasibility and acceptability of a new emotion-focused therapy (EFT) of AN, which is designed to work directly with the anorexic voice (AV; EFT-AV). Six adult clients diagnosed with AN who were experiencing an AV and awaiting psychological treatment were recruited from an adult outpatient service. Informed by EFT and previous AV research, the intervention involved six weekly individual sessions that focused on transforming AV experiences and promoting self-compassion. Participants completed standardized measures of eating disorder symptoms, relating to the AV, illness beliefs, motivation to change, and hope of recovery. Participants were also interviewed at the conclusion of the intervention to ascertain their views of its acceptability. Findings suggested good recruitment, retention, and treatment adherence, which supported the feasibility of the EFT-AV intervention. Thematic analysis of participant interviews indicated the intervention was acceptable and tolerable. Future directions for the treatment of AN, including the potential value of EFT-AV as an adjunct to existing therapies, are discussed. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Eating disorders in adolescent boys and young men: an update.

Abstract: Purpose of review: To review the recent literature on eating disorders and disordered eating behaviors among adolescent boys and young men, including epidemiology, assessment, medical complications, treatment outcomes, and special populations.

Recent findings: Body image concerns in men may involve muscularity, and muscle-enhancing goals and behaviors are common among adolescent boys and young men. Recent measures, such as the Muscularity Oriented Eating Test (MOET) have been developed and validated to assess for muscularity-oriented disordered eating. Medical complications of eating disorders can affect all organ systems in male populations. Eating disorders treatment guidance may lack specificity to boys and men, leading to worse treatment outcomes in these population. Male populations that may have elevated risk of eating disorders and disordered eating behaviors include athletes and racial/ethnic, sexual, and gender minorities.

Summary: Eating disorders and disordered eating behaviors in boys and men may present differently than in girls and women, particularly with muscularity-oriented disordered eating. Treatment of eating disorders in boys and men may be adapted to address their unique concerns.

A new treatment for eating disorders combining physical exercise and dietary therapy (the PED-t): Experiences from patients who dropped out

Author(s): Bakland, Maria; Rosenvinge, Jan H.; Wynn, Rolf; Sørli, Venke; Sundgot-Borgen, Jorunn; Mathisen, Therese Fostervold; Hanssen, Tove Aminda; Jensen, Franziska; Innjord, Kjersti; Pettersen, Gunn

Source: International Journal of Qualitative Studies on Health and Well-being; Dec 2020; vol. 15 (no. 1)

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32081086

Available at [International journal of qualitative studies on health and well-being](#) - from Europe PubMed Central - Open Access

Available at [International journal of qualitative studies on health and well-being](#) - from ProQuest (Health Research Premium) - NHS Version

Available at [International journal of qualitative studies on health and well-being](#) - from Unpaywall

Abstract: Purpose: Eating disorders (ED) are complex and severe illnesses where evidence-based treatment is needed to recover. However, about half of the patients with ED do not respond to treatments currently available, which call for efforts to expand the portfolio of treatments. The aim of this study was to explore experiences from patients who dropped out of a new treatment for bulimia nervosa and binge ED, combining physical exercise and dietary therapy (PED-t). Methods: We conducted open-ended face-to-face interviews. The interviews were transcribed verbatim and the data were analysed with a phenomenological hermeneutical approach. Results: Three themes emerged: "standing on the outside", "unmet expectations" and "participation not a waste of time". Feelings of standing on the outside were elicited by being different from other group members and having challenges with sharing thoughts. Unmet expectations were related to treatment content and intensity, as well as the development of unhealthy thoughts and behaviours. Finally, some positive experiences were voiced. Conclusion: A need to clarify pre-treatment expectations and refining criteria for treatment suitability is indicated. The findings have contributed to the chain of clinical evidence regarding the PED-t and may lead to treatment modifications improving the treatment and thereby reducing drop out. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

ATTACHMENT



MINDFULNESS AND WELL-BEING



Frequency of self-reported unpleasant events and harm in a mindfulness-based program in two general population samples

Author(s): Baer, Ruth; Crane, Catherine; Montero-Marin, Jesus; Phillips, Alice; Taylor, Laura; Tickell, Alice; Kuyken, Willem

Source: Mindfulness; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Available at [Mindfulness](#) - from Unpaywall

Abstract: Objectives Evidence-based mindfulness programs have well-established benefits, but the potential for harmful effects is understudied. We explored the frequency and severity of unpleasant experiences and harm in two nonclinical samples participating in an adaptation of mindfulness-based cognitive therapy (MBCT) for the general population. Methods Study 1 included 84 schoolteachers; study 2 included 74 university students. Both studies were uncontrolled. Participants completed self-report questionnaires about psychological symptoms before and after the 8-week mindfulness course. After the course, they responded to a survey designed for this study that included Likert ratings and free-text questions about unpleasant experiences and harm. All data were collected online. Results In both samples, about two-thirds of participants reported unpleasant experiences associated with mindfulness practice during the course. Most participants (85–92%) rated these experiences as not at all or somewhat upsetting; some indicated that difficult experiences led to important learning or were beneficial in some way. The proportion of participants reporting harm from the mindfulness course ranged from 3 to 7%. The proportion showing reliable deterioration on symptom questionnaires ranged from 2 to 7%. Those

reporting harm and those showing reliable deterioration on questionnaires were largely separate subgroups; only one participant fell in both. Conclusions Findings highlight the need for mindfulness teachers to manage expectations about benefits and difficulties that may occur in mindfulness-based programs and to work skilfully with participants experiencing difficulties. Experiences of harm may not be captured by symptom questionnaires and should be explicitly assessed in other ways. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

[Inclusion health: applying All Our Health.](#)

Public Health England (PHE); 2021.

<https://www.gov.uk/government/publications/inclusion-health-applying-all-our-health>

[Guidance to help health professionals prevent ill health and promote wellbeing of individuals in inclusion health groups. This resource includes guidance on: why and how to take action on inclusion health in your professional practice; understanding local needs; measuring impact. It provides recommendations for frontline workers, team leaders, managers and senior or strategic leaders.]

STRESS

[Stress and mental wellbeing among PhD students: what are the predictors and how can we help?](#)

The Mental Elf; 2020.

<https://www.nationalelfservice.net/education/wellbeing/stress-wellbeing-phd-students/>

[Tayla McCloud reviews a recent paper which finds that imposter syndrome might be at the heart of both poor wellbeing and high stress levels in PhD students.]

Freely available online

AUTISM / ASPERGER'S SYNDROME



[Autism and social anxiety: qualitative research shows how we can help.](#)

The Mental Elf; 2021.

<https://www.nationalelfservice.net/learning-disabilities/autistic-spectrum-disorder/autism-social-anxiety/>

[Rachel Symons summarises a qualitative study that explores the relationship between autism and social anxiety in male adults.]

Freely available online

SLEEP DISORDERS



ANGER MANAGEMENT/INTIMATE PARTNER VIOLENCE



COUPLES AND FAMILY THERAPY



GROUP THERAPY



ADDICTION/SUBSTANCE MISUSE



TRANSFERENCE

Countertransference as a reflection of the patient's inner relationship conflict

Author(s): Abargil, Maayan; Tishby, Orya

Source: Psychoanalytic Psychology; Jan 2021; vol. 38 (no. 1); p. 68-78

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

Available at [Psychoanalytic Psychology](#) - from ProQuest PsycARTICLES - NHS

Abstract:Countertransference may reflect the patients' diagnosis and can be used to better understand patients' inner worlds and core conflictual relationship themes (CCRTs). Thus, the changing emotions of therapists can serve as a marker of treatment processes. This exploratory study aims to identify how the interaction between patients' CCRT patterns and their respective therapists' emotions associate with working alliance postsession and patient symptoms. The data analysis is based on 17 subjects who received supportive–expressive therapy. Therapists' emotional reactions were assessed using the Feeling Word Checklist. The Working Alliance Inventory—Short Revised and the Outcome Questionnaire were completed at each session. The relationship between the patients' CCRTs and (a) the therapists' emotional profile, (b) therapists' rated working alliance, and (c) patient symptoms was analyzed using mixed models. Results show that patients' CCRT moderated the correlation between therapists' feeling engaged and time. In addition, patients' CCRTs and therapists' emotions together was associated with therapists' rated working alliance and patient symptoms. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

THERAPEUTIC RELATIONSHIP

Predicting the working alliance over the course of long-term psychodynamic psychotherapy with the Rorschach Ego Impairment Index, self-reported defense style, and performance-based intelligence: An evaluation of three methodological approaches

Author(s): Stenius, Jaakko; Knekt, Paul; Heinonen, Erkki; Holma, Juha; Antikainen, Risto; Lindfors, Olavi

Source: Psychoanalytic Psychology; Jan 2021; vol. 38 (no. 1); p. 58-67

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

Available at [Psychoanalytic Psychology](#) - from ProQuest PsycARTICLES - NHS

Abstract:Better therapeutic alliances are known to predict better treatment outcomes, but little knowledge still exists on the patient characteristics that lead to better alliances. In a sample of 128 outpatients assigned to long-term psychodynamic psychotherapy and suffering from mood and/or anxiety disorder, this study evaluated how the alliance, measured using the Working Alliance Inventory (WAI), is predicted by three different measures for assessing psychological resources and vulnerabilities: the Wechsler Adult Intelligence Scale—Revised (WAIS–R), the Defense Style Questionnaire (DSQ), and the Rorschach-based Ego Impairment Index (EII-2). All the three measures showed some ability to predict the development of the alliance during long-term therapy. The WAIS–R was found to be the strongest independent predictor, with higher intelligence scores predicting favorable development of both the patient- and therapist-rated alliance. Lower DSQ values, indicating less use of immature defenses, predicted greater improvement in the patient- but not the therapist-rated alliance. Higher EII-2 values, indicating more problematic ego functioning, predicted likewise greater patient-rated alliance improvement over the course of treatment. These findings support the value of pretreatment multimethod psychological assessment when tailoring treatment to the individual needs of patients. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

The association between therapeutic alliance and outcome in internet-based psychological interventions: A meta-analysis

Author(s): Kaiser, Julia; Hanschmidt, Franz; Kersting, Anette

Source: Computers in Human Behavior; Jan 2021; vol. 114

Publication Date: Jan 2021

Publication Type(s): Journal Peer Reviewed Journal Journal Article

Abstract:Background: Internet-based psychological interventions have proven effective and yield advantages that make them a viable alternative to face-to-face therapy in many fields. Yet, the role of therapeutic alliance in technologically mediated interventions has been discussed critically. The aim of this meta-analysis is to summarize the association between therapeutic alliance and outcome in therapist-assisted online interventions. Methods: A systematic search of the databases PubMed, Web of Science, PsycINFO and PubPsych was conducted for articles published before February 2020 that assess the association between therapeutic alliance and outcome in internet-based interventions involving remote therapist contact. Results were systematically screened and information on the alliance-outcome-association was extracted. A multilevel meta-analysis was conducted. Results: Overall, 51 effect sizes were extracted from 20 included studies. The average weighted effect size is $r = 0.203$ ($p < .0001$). The correlation was larger when alliance was measured near the end of an intervention. There was no impact of therapist contact frequency or mode and availability of self-help content on the effect size. Conclusions: Therapeutic alliance and outcome are significantly correlated in internet-based therapy. This points to the relevance of a stable alliance in internet-based interventions and suggests that fostering alliance might be beneficial to treatment success. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Alliance rupture and repair in early sessions of dialectical behavior therapy: The case of Rachel

Author(s): Boritz, Tali; Varma, Sonya; Macaulay, Christianne; McMMain, Shelley F.

Source: Journal of Clinical Psychology; Dec 2020

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal

Abstract:Emotional and interpersonal instability are core features of borderline personality disorder (BPD) and can pose a challenge for the therapeutic relationship. In dialectical behavior therapy (DBT) for BPD, ruptures in the therapeutic alliance are considered through a behavioral lens that examines the client's relational learning history, the function and context of the rupture, as well as the patterns of emotional processing difficulties that underlie interpersonal conflict. In this article, we use the case of Rachel to illustrate how alliance-focused approach can be integrated with DBT case formulation to enhance treatment planning and the successful negotiation of alliance ruptures. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

When adolescents stop psychological therapy: Rupture–repair in the therapeutic alliance and association with therapy ending

Author(s): O'Keeffe, Sally; Martin, Peter; Midgley, Nick

Source: Psychotherapy; Dec 2020; vol. 57 (no. 4); p. 471-490

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 31928023

Available at [Psychotherapy \(Chicago, Ill.\)](#) - from ProQuest PsycARTICLES - NHS

Available at [Psychotherapy \(Chicago, Ill.\)](#) - from Unpaywall

Abstract:The therapeutic alliance predicts dropout from psychological therapy, and ruptures in the therapeutic alliance may also predict dropout, yet there is a dearth of research with adolescents. This study investigated whether markers of rupture–repair in the alliance were indicative of different types of treatment ending in adolescents receiving psychological treatment for depression. Data were from the IMPACT study, a trial investigating the effectiveness of therapies for adolescent depression. Participants were randomly allocated to receive a brief psychosocial intervention, cognitive–behavioral therapy, or short-term psychoanalytic psychotherapy. The sample (N = 35) comprised adolescents who had either completed their treatment (n = 14) or dropped out (n = 21) according to their therapist. Dropout cases were further classified as dissatisfied (n = 14) or got-what-they-needed (n = 7) based on posttherapy interviews with the adolescent and therapist. Selected recordings of therapy sessions were rated using the Rupture Resolution Rating System and Working Alliance Inventory (observer version). Therapeutic alliance and rupture–repair during therapy were similar for completers and got-what-they-needed dropouts, whereas dissatisfied dropouts had poorer therapeutic alliance, more ruptures, ruptures that were frequently unresolved, and greater therapist contribution to ruptures. Qualitative analysis of sessions led to the construction of three categories of therapist contribution to ruptures: therapist minimal response, persisting with a therapeutic activity, and focus on risk. Results suggest that ruptures, especially when unresolved, could be warning signs of disengagement and dropout from therapy. Future research should investigate how ruptures may be effectively identified and resolved in treatment with adolescents. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Using termination as an intervention (UTAI): A view from an integrative, cognitive-existential psychodynamics perspective

Author(s): Shahar, Golan; Ziv-Beiman, Sharon

Source: Psychotherapy; Dec 2020; vol. 57 (no. 4); p. 515-520

Publication Date: Dec 2020

Publication Type(s): Journal Peer Reviewed Journal Journal Article

PubMedID: 32658525

Available at [Psychotherapy \(Chicago, Ill.\)](#) - from ProQuest PsycARTICLES - NHS

Abstract:Treatment termination is, arguably, one of the most important events in the course of psychotherapy. In the present article, we present an approach to termination that views the latter as a key intervention. Developed from an integrated, cognitive-existential psychodynamics (CEP) perspective (Shahar & Govrin, 2017), Using Termination as an Intervention (UTAI) is a prescheduled, albeit tentative, treatment termination that may be used as an intervention for patients' remoralization (Howard, Kopta, Krause, & Orlinsky, 1986). Specifically, for some psychotherapy patients, prescheduling a treatment termination is useful in instilling a sense of responsibility and agency and in deepening a therapeutic examination of patients' interpersonal schemas and scripts (i.e., "object relations"). The integrative nature of Using Termination as an Intervention is delineated, and caveats are discussed. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Impact statementClinical Impact Statement—Question: How should treatment with highly demoralized, often treatment-resistant, patients coming to therapy be terminated? Findings: Drawing from Using Termination as an Intervention, clinicians may inquire about the smallest therapeutic achievement that would still render—according to the patient—worthwhile and set a deadline for attaining this goal, and then—tentatively—terminate. Meaning: Tentatively prescheduling a termination date that is tied to what the patient deems as the smallest, but still worthwhile, therapeutic gain may bolster remoralization, instill a sense of agency, and—paradoxically—encourage continuation. Next Steps: We aim at testing Using Termination as an Intervention in the context of a randomized clinical trial, to identify patient characteristics that render it either counter indicated or particularly pertinent for some patients. (PsycInfo Database Record (c) 2020 APA, all rights reserved)

INTELLECTUAL DISABILITIES



[Can sensory integration have a role in multi-element behavioural intervention' An evaluation of factors associated with the management of challenging behaviour in community adult learning disability services](#)

Ciara Mc Gill Cathal J. Breen. *British Journal of Learning Disabilities* 2020;48(2):142-153.

[Adults with complex needs and severe learning disability present as a serious management problem within the community. The use of restrictive intervention is still an issue. Nearly all the studies reviewed stressed the issue of placing individuals with severe challenging behaviour. Behavioural studies have successfully utilised sensory integration strategies within a structured behavioural format to manage challenging behaviour in a community setting for adults with a learning disability]

Available with an NHS OpenAthens password

["It was emotional"—A group for people with learning disabilities to talk about end of life](#)

Chris O'Donnell. *British Journal of Learning Disabilities* 2020;48(3):199-205.

[People with learning disabilities are not routinely supported to learn about end-of-life issues or make plans for the end of their lives. This group was a valuable exercise that was very much needed by local people with learning disabilities. The group will run again and should be offered in other areas. Groups of this kind can offer unmet needs that are highlighted by national guidance in England, UK such as the NHS long-term plan and the Learning Disability Mortality Review Programme.]

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TRAINING AND EDUCATION



An evidence-based approach to clinical supervision

Author(s): Reiser, Robert P.

Source: The Clinical Supervisor; Nov 2020

Publication Date: Nov 2020

Publication Type(s): Journal Peer Reviewed Journal

Abstract: ABSTRACT Derek Milne has developed and disseminated an evidence-based model for clinical supervision (EBCS) that is unique and differs from other approaches. Based on an integrative model of evidence-based clinical practice, Derek's research program has included a series of literature reviews, an empirical definition, a basic model of clinical supervision, and an instrument for observing and evaluating clinical supervision (Supervision: Adherence and Guidance Evaluation: SAGE). Dissemination of this work led to a manualized account of EBCS, including practical guidelines and video-demonstrations. EBCS has been particularly influential in the UK, where it has been incorporated within the IAPT initiative. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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