

Impressive result for mental health therapy

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The researchers evaluated the NewAccess program, which is an Australian adaptation of the United Kingdom's IAPT (Improving Access to Psychological Therapies) approach of delivering low intensity therapies for symptoms of depression and anxiety—and the results have underlined its effectiveness.



"The timeliness of this study is significant, as its findings tie in to current COVID-19 situation and service delivery," says Professor Michael Baigent, from the Department of Psychiatry at Flinders University.

Due to the study results, Professor Baigent is urging for more widespread acceptance and use of NewAccess in our <u>health system</u>. Professor Baigent is a board director of mental health organisation Beyond Blue, which has been trialling NewAccess around Australia.

The results—The Australian version of IAPT: Clinical outcomes of the multi-site cohort study of NewAccess, by Michael Baigent, David Smith, Malcolm Battersby, Sharon Lawn, Paula Redpath and Alicia McCoy—have been published in the *Journal of Mental Health*.

Better Access, was introduced to Australia in 2006 with the aim of providing Australians with equitable access to psychological therapies. However, GP referrals of psychological therapy for anxiety and affective disorders is not straightforward and is a time-consuming practice, with services not within reach for many Australians.

A 2015 analysis of national Australian data reveals that only 26% of those with an anxiety or depressive illness were receiving an evidence-based treatment.

Many people can be helped by the evidence-based treatments provided by the re-modelled NewAccess treatment, which can be provided by phone or face to face and can be accessed easily.

Referring to this type of service does not require a lengthy mental health care plan and should be at least as easy for a GP as writing a script. People can also self-refer.

Professor Baigent says the new Flinders University study has shown that



the NewAccess treatment—the new name for the re-modelled Australian program, since 2013—shows itself to be effective in addressing the known barriers to access of evidence-based early intervention for depression and anxiety in Australia, which are:

- Affordability: NewAccess is free and has no co-payment.
- Access: NewAccess therapy is available by telephone as well as face to face and by self-referral or referral.
- Stigma: It provides a less confronting alternative to traditional service-based treatments.
- Workforce constraints and distribution: Greater uptake of NewAccess will develop an effective new workforce for its specific tasks, thereby enabling mental health professionals to focus on more complex cases commensurate with their expertise.
- Transparent outcomes: Clinical progress is measured every contact, shared with the client (which they find highly motivating), and outcome recovery rates are visible to program funders.

Of the 3900 people assessed for the study, there was a clinically meaningful improvement shown by reliable recovery rates in both depression and anxiety symptoms at post-treatment assessment.

The study concludes that because NewAccess has demonstrated positive clinical outcomes in Australia, that compare favourably with international studies with the same methodology, it has a broad reach—which is necessary to address large mental health needs in Australia.

Presently, large numbers of Australians will experience—at some stage in their lives—affective disorders (depression, dysthymia, bipolar affective disorder; 15%) and anxiety disorders (26%, but higher if specific phobias are included).



Approximately, 80% of people who have an anxiety disorder and 50% of those with an affective disorder have mild to moderate severity levels—for which the initial recommended treatment is by psychological rather than pharmaceutical methods. And this is where Professor Baigent says NewAccess can prove particularly effective.

More information: Michael Baigent et al, The Australian version of IAPT: clinical outcomes of the multi-site cohort study of NewAccess, *Journal of Mental Health* (2020). DOI: 10.1080/09638237.2020.1760224

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