Can psycho-educational workshops help stem the tide of depression? Several randomised controlled trials suggest that they are an accessible and cost-effective option.

by Eva-Maria Bonin, Jennifer Beecham and June Brown

Depression is on the rise: It alone is currently responsible for 6% of the total burden of disease in Europe (Ustun et al. 2004) and is expected to be the second highest cause of disease burden worldwide by 2020 (World Health Organization 2008).

More than 2.5 million people in England suffer from depression and on top of the obviously high amount of suffering experienced by those people, the costs to society were estimated at over £9bn for the year 2000 (Thomas & Morris 2003).

At the same time, there are treatments that are successful in helping people with depression at a cost that is much lower than the burden of depression, making them excellent value for money. One example of such treatments is cognitive behaviour therapy (CBT), and the Increasing Access to Psychological Therapies programme (IAPT) was set up in 2006 to basically do what it says on the tin – increase access to psychological therapies such as CBT.

Last month, however, a report published by the LSE Mental Health Policy Group (The Centre for Economic Performance's Mental Health Policy Group 2012) highlighted that only a quarter of those with mental illness currently receive treatment and much work remains to be done if IAPT is to achieve its stated goal of treating 900k people with depression and anxiety by 2014.

One possible solution to this problem is being tested in several London boroughs by a research team based at the Institute of Psychiatry (IoP) and the evidence is encouraging. CBT is being delivered in a workshop format to up to 30 people at a time by a team of two therapists and an assistant. The one-day "self-confidence" workshops are run at the weekend in community locations like leisure centres and libraries. The workshops cost around £160 per person and produce better results after 3 months than some other primary care interventions or self-help can achieve (Horrell et al. 2012).

Why run self-confidence workshops when this is about treating depression? It appears that people are generally reluctant to seek help for their depression, but talking about improving selfconfidence is easier and the same techniques that help with self esteem also help with depression. The study also found that the workshops reached people who are unlikely to seek help through their GP or other traditional services, for example members of ethnic minorities and people seem to enjoy them - 96% of participants were mostly or very satisfied with the workshops.

Another study that looked at one-day workshops for insomnia, another common mental health problem that is related to depression, found that the workshops helped people sleep more soundly (Swift et al. 2012).

Given the low cost of these workshops and their success in reducing depression and related problems, research carried out by PSSRU suggests that they are very likely to be cost-effective and are an attractive option to include within IAPT – and this is without accounting for the longterm cost savings that can be made by reducing depression and other mental health problems.

Findings from the evaluation of the self-confidence workshops and similar interventions have been presented by June Brown (IoP) and colleagues at the BABCP conference in Leeds (June 26-29). For further information about the workshops, please contact June Brown. For information about the cost-effectiveness analysis, please contact Eva-Maria Bonin.

References

Horrell L, Goldsmith K, Tylee A, Schmidt U, Murphy C, Brown J (2012) One-day CBT selfconfidence workshops for people with depression: a randomised controlled trial to assess clinical outcomes and investigate access by difficult to engage groups. In submission.

Swift N, Stewart R, Andiappan M, Smith A, Espie CA, Brown JS (2012) The effectiveness of community day-long CBT-I workshops for participants with insomnia symptoms: a randomised controlled trial, Journal of Sleep Research, 21, 270-280.

The Centre for Economic Performance's Mental Health Policy Group (2012) How Mental Illness Loses out in the NHS, Centre for Economic Performance, London School of Economics and Political Science, London.

Thomas CM, Morris S (2003) Cost of depression among adults in England in 2000, British Journal of Psychiatry, 183, 514-519.

Ustun TB, Ayuso-Mateos JL, Chatterji S, Mathers C, Murray CJ (2004) Global burden of depressive disorders in the year 2000, British Journal of Psychiatry, 184, 386-392.

World Health Organization (2008) The Global Burden of Disease. 2004 Update, WHO, Geneva.

July 9th, 2012 | Mental Health | 0 Comments

23