Making sense of talking treatments
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This booklet explains the most common types of talking treatment available in the UK. It looks at the kind of problems they are used for and who they can help. It is designed to help you make an informed choice about what kind of treatment you want.
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What are talking treatments?

Talking treatments are a type of treatment that involve talking to a therapist about your thoughts and feelings. A therapist is a person trained in one or more types of talking treatment. Talking treatments can help you manage and cope with:

- mental health problems
- physical health problems
- difficult emotions
- difficult experiences.

The purpose of talking treatments is to help you understand your feelings and behaviour better and, if you want, to change your behaviour or the way you think about things. You may talk about things which are troubling you, and it can be a time to explore your feelings.

There are lots of different types of talking treatments, which use different styles and techniques to help you, but they all have the same goal: helping you feel better able to cope with your emotions and the things that happen in your life.

See the *How do talking treatments work?* and *What talking treatments are there?* sections for more information.

“I don’t feel so chaotic and I certainly don’t have the awful feelings I used to. I need to keep working at it though – it’s not a cure all or quick fix but it is working for me.”
Different terms for talking treatments

There are several different terms people use to refer to talking treatments, and this can feel a bit confusing sometimes. You may hear the following words used:

- counselling
- therapy
- talking therapy
- psychological therapy
- psychotherapy.

These terms can often be used interchangeably, but sometimes they can refer to a specific type of talking treatment. See the What talking treatments are there? section for more information.

Is there evidence that talking treatments work?

It is difficult to assess exactly how effective talking treatments are compared with other services, as there has been relatively little research into talking treatments until recently. Some talking treatments have been researched more than others and have received more funding.

Some therapies have been developed for certain mental health problems, and they can be more effective for some problems than others. The What talking treatments are there? section lists which talking treatments are recommended for each diagnosis.

“It depends on the person, in my opinion. Some people find specific sorts of therapy more effective than others.”
What can talking treatments help with?

Talking treatments can help with:

- **Coping with difficult life events**, such as losing your job or a bereavement.
- **Coping with upsetting or traumatic experiences**, whether it’s something recent or in your past.
- **Coping with difficult emotions**, for example if you struggle with low self-esteem or anger.
- **Coping with long-term physical health conditions**, by helping you learn how to cope with the symptoms and their impact on your mental wellbeing.
- **Depression and anxiety**. Talking treatments have been shown to be particularly useful for some people in treating and preventing common mental health problems like depression and anxiety.
- **Other mental health problems**. Talking treatments can help with a range of diagnoses, and specific talking treatments have been developed for some mental health problems. For example, Dialectical Behaviour Therapy (DBT) was developed as a treatment for Borderline Personality disorder (BPD) and Cognitive Behavioural Therapy (CBT) was developed for Phobias.

Some talking therapies are particularly helpful for certain types of problems and have been recommended specifically by the National Institute for Health and Care Excellence (NICE). See our *What talking treatments are there?* section for more information about NICE-recommended treatments for specific mental health problems.

“I had CBT one-to-one sessions but couldn’t get it to work for me, couldn’t get my head around it. I was lucky enough to be offered a place on a group course – ‘anxiety and anger management’ – and it’s changed my life.”
What can talking treatments help with?

What alternatives are there?

If talking treatments are not right for you, there are alternatives. Some people find the following helpful:

- **Medication** – there are drugs which can be prescribed to treat different types of mental health problems, or to reduce the symptoms. See the Mind website’s Medication section for more information.

- **Arts therapies** are a way of using the arts – such as, music, art, dance or drama – in a therapeutic environment. The Mind website’s Arts therapies section has more information.

- **Complementary and alternative therapy** share a belief in the body’s ability to heal itself. See the Mind website’s section on Complementary and alternative therapy for more information.

- **Ecotherapy** is the name given to a wide range of programmes that aim to promote good mental and physical wellbeing through outdoor activity in a green environment. The Mind booklet Making sense of ecotherapy has more information.

- **Electric Convulsive Therapy (ECT)** can be an effective treatment if you are seriously depressed and no other treatment has worked for you. See the Mind website’s section on ECT for more information.

"Tried CBT and it didn’t help. Mindfulness is the only thing that’s helped in over 30 years."
Talking treatments or medication?

You might be offered both talking treatments and medication as part of your treatment, and many people find that taking medication helps them feel stable enough to get the most out of a talking treatment. However, other people find medication or talking treatments alone are more helpful.

Whether you find talking treatments or medication more effective depends on you, because different people will find different things helpful. It’s important to remember that you don’t have to choose between either talking treatments or medication – it’s your choice what treatment you want to try, and this could be both together.

See our booklet The Mind guide to seeking help for a mental health problem for more information about making a choice about your treatment.

I used a conjunction of medication and CBT. I was so impressed by CBT that I decided to train as a psychotherapist myself. ”

How do talking treatments work?

Talking treatments work by giving you space to talk about your thoughts, feelings and behaviour with someone who is professionally trained to help you understand these things better, and help you find ways to change the things you want to.

In this section you can find information about:
- the theory behind therapy
- what you might learn in therapy
- how long therapy takes to work
- how therapy might make you feel.
What’s the theory behind talking treatments?

Each type of talking treatment has its own theory about why we think and feel the way we do, and how it’s best to help you. Broadly speaking, there are two main theory traditions that started in America and Europe.

- In America, therapists focused on **how behaviour and thought patterns affect how we feel**, and so developed therapies to help us change our behaviour and thoughts to help us improve how we feel. This includes talking treatments like CBT.
- In Europe, therapists were interested in **the reasons why we think and feel things**, and developed therapies to help us understand our thoughts and feelings, and so be better able to cope with them. This includes talking treatments like psychodynamic therapy.

"Currently receiving trauma-focused CBT. The most important thing is I know the rationale behind it all, so I know why we’re doing what we are doing."

What might I learn in therapy?

What you learn in therapy can be very individual. Some people may find they learn a lot, while others may find therapy less useful. You may learn about:

- **ways of coping** — you may learn ways to understand and cope with traumatic memories, upsetting life events, difficult feelings, thoughts or behaviours
- **your thoughts** — you may learn to become more aware of your thoughts and how they affect you
- **your feelings** — you may feel more able to talk about and understand your feelings
- **relationship difficulties** — you may learn to understand difficulties you are having in relationships and ways to make sense of them.
Making sense of talking treatments

"Initially I was reluctant and sceptical but it worked. I have learnt to look at situations and my feelings and ruminations in a much healthier, constructive way."

**How Important Is my relationship with my therapist?**

Research has shown the relationship you have with your therapist is really important in how successful you find the talking treatment. This therapeutic relationship may help you feel able to open up and talk about things that are difficult or personal to you.

See the section *What should I know before I start a talking treatment?* for more information about the kind of questions you can ask your therapist and what you can expect from them.

"I’ve been seeing my therapist for over a year now. She is a wonderful lady! I do think half the battle with therapy is finding someone you trust, connect with and feel comfortable with."

**How long until I feel better?**

The time it takes for you to feel better can be individual to you, and may vary from person to person. You may feel an immediate sense of relief when you begin therapy. This might be because you are being listened to for the first time, or because you have been struggling for a long time.

You may also feel anxious or distressed at first. This may be because you have to focus on difficult feelings that you might prefer to ignore. You may find it helpful to discuss any concerns you have about how you are reacting to the therapy – at any stage.

Therapy can only help someone go as deep or as far as they want to. Addressing the root cause of things can take time and the person has to be ready to do that.
Can therapy make me feel worse?
Therapy can be challenging and upsetting. It can involve talking about difficult situations and painful feelings, which might make you feel worse in the short term. You may find this process can also be physically tiring.

If you do start to feel worse, you might find this frustrating and disappointing if you’re not reacting to your treatment as you’d hoped. If you do feel worse you can:

- **Talk to your therapist openly about how you are feeling or how you work together.** This could help you get the most from your therapy and get extra support if you need it.
- **Contact your therapist for emergency support** out of appointments, if this is something your therapist offers. Remember to check with them in advance if this is okay.
- **Call a listening service**, like the Samaritans. They can listen to anything that is upsetting you.
- **Try online peer support** for extra support in between sessions. Mind runs its own online support community, Elefriends. If you’re using the internet for support for your mental health, take a look at the *Online safety and support* pages on the Mind website.
- **Contact a crisis service** if you feel you need urgent help. See the *Crisis services* pages on the Mind website for more information on what options there are and when to use them.

What should I know before I start a talking treatment?

In this section you can find information about:

- being ready for therapy
- what to ask your therapist
- what to expect from your therapist
- talking treatments and confidentiality.
Am I ready for therapy?

Although many people can benefit from talking treatments, not everyone finds it helpful. You might find that it just doesn’t suit you, or doesn’t meet your needs at the current time. Before deciding to have therapy, it might be helpful to think about the following:

- **Do I want to talk to a therapist about something that is troubling me or would like professional help with?** Therapy can involve talking to a therapist about anything that is confusing, painful or uncomfortable that you would like help with.

- **Am I comfortable talking about my feelings?** Therapy can involve becoming aware of your anxieties and emotions. Initially, you may find this process uncomfortable or distressing.

- **Is there anything I need help with before starting therapy?** You may find there are situations or problems you want help with before you feel able to consider therapy. See the Mind website’s *A-Z of mental health* section for more information about different mental health problems and support options.

> It is essential that you are ready for therapy. It is also important that you feel at ease with the person running it.

What can I ask them?

You can ask your therapist questions about your treatment or their approach at any point before you start therapy, during it, or when you end. When starting a talking treatment, you may want to ask about:

- your therapist’s qualifications
- the type of therapy they practice or the treatment they have offered you
- how long the therapy will last and its structure
- if there is any cost involved
- their policy on confidentiality.

If you are thinking of seeing a therapist privately, see the *What if I want to go private?* section for more information about questions you may want to ask.
Your therapist’s qualifications

It’s good practice for a therapist to be a member of a professional body, such as the BACP, BABCP, the UKCP or the British Psychological Society (BPS). You can ask them about their professional qualifications and training. You can also check these with their professional body, whose websites have details of what membership means and any ethical guidelines their members must adhere to.

“I had to know everything before I felt okay to talk to my therapist. I wanted to know everything about how he trained so I trusted that he knew what he was doing.”

What should the therapist tell me about?

Your therapist should tell you about the talking treatment they are offering you – this is called informed consent. You should expect to be told about:

- what the treatment involves
- the benefits and risks involved
- any alternatives
- what will happen if the treatment doesn’t go ahead.

Your therapist should also work with you to develop an agreement or ‘contract’ of how you would both like the sessions to work. This may include agreeing about:

- **Frequency of sessions** – when they will take place and for how long. See our What are sessions like? section for more information about how sessions can be structured, how long they last and where they might take place.
- **Payment** – if you’re paying for therapy, you may agree how you can pay, how much and when.
- **Confidentiality and consent** – what rules they have about consent and confidentiality, and when the therapist may need to break confidentiality.
Having your say in your treatment

Making decisions about your treatment should be a conversation, involving both you and your health care professionals. This is sometimes called **shared decision making**. You should expect to have a say in what treatments you receive. See our booklet *The Mind guide to seeking help for a mental health problem* for more information about how to have your say in treatment and make yourself heard.

Is it confidential?

Therapy is always confidential, and this is an important part of the working relationship between you and the therapist, making it safe for you. However, there are some exceptions, which allow the therapist to work responsibly. For example:

- **Supervisions** — therapists always discuss clients regularly with a supervisor (an experienced therapist who is qualified to provide supervision) who also has to maintain confidentiality. Supervision is an essential part of the work and it’s seen as unethical for a therapist to work without it because:
  - it helps your therapist look after their own mental health, so they’re better able to support you
  - it means there is an impartial third party who is aware of how your therapist is treating you, and can make sure that your treatment is effective and appropriate.

- **Safety** — if, under any circumstances, the therapist is concerned that you are at serious risk of harming yourself or someone else, they may need to inform your GP, health care professional or someone else.

- **Organisational confidentiality** — if your therapist is working as part of a GP practice, confidentiality may apply to the practice as a whole rather than to the individual therapist. This may mean that information is available to your GP. If this is the case, the therapist should make it clear to you at the start.
What are sessions like?

In this section you can find information about:
• how sessions are delivered
• how sessions are structured
• what to do if you’re not happy with your treatment.

How are sessions delivered?

Talking treatment sessions can take a number of different forms, depending on your individual needs, your choice and the type of therapy you’re offered or which is available.

Your treatment might be delivered:
• individually, with just you and the therapist
• in a group
• with your family members, partner, friend or colleague (see the What talking treatments are there? section for more information about relationship therapy and family therapy).

You might get treatment at:
• an NHS clinic
• a hospital
• school
• university
• work
• your therapist’s office or home
• a charity’s therapy rooms
• over the phone
• through a computer programme or book (see the Cognitive behavioural therapy (CBT) section for more information on CBT delivered via computer or book).
As I got older and started work, I still struggled with low self-esteem and was plagued by memories of my childhood. I was lucky enough to have frequent face-to-face sessions with a person from Mind.

You might be treated by a:
- counsellor
- psychotherapist
- psychologist
- psychiatrist.

See the Mind website pages Who’s who in mental health for more information about these roles.

**How are sessions structured?**

The structure of the therapy sessions may vary, depending on:
- the type of therapy you have
- how the therapy is delivered – for example, one-to-one or in a group
- the problem you want help with – for example, your therapist may go through specific exercises designed to help you with the problem you’re experiencing, or you might have a more general discussion about how you’re feeling.

**What will they ask me?**

What a therapist asks you may vary depending on the problem you want help with and the type of therapy you are getting. Therapists may ask you about:
- your relationships
- your childhood
- your emotions
- your thoughts
- your behaviour
- situations or events you find difficult.
How long is each session?
Sessions can last between 30 minutes to an hour and a half, but most commonly sessions last for 50 minutes.

The length of sessions may vary depending on the type of therapy you have, the problem you want help with and how well you’re feeling. The way in which therapy is delivered may also affect the length of sessions – for example, group sessions may last a little longer.

How often will I have sessions?
How often you have sessions may also vary. You may see a therapist once a week, or two to three times a week. This may depend on:
• the type of therapy you have
• where you access therapy from
• how well you’re feeling – when you’re unwell, you may see a therapist more frequently.

“I had 12 weeks of face to face CBT sessions and I wouldn’t now be in such a positive place without them.”

How long will I stay in therapy?
How long you have therapy for may depend on where you go and who you see. Therapy can be:
• time-limited, meaning it may last a set number of sessions. Most therapists through the NHS offer time-limited sessions.
• open-ended, meaning it can continue for as long as you need it. Most private therapists will take clients on for open-ended work.

How will I feel when it ends?
You may find when therapy comes to an end, you can feel a mixture of feelings. You may feel:
• sad that therapy and the relationship with your therapist has ended
• positive to move on.
This may depend on the experience you’ve had of therapy and the therapeutic relationship you’ve formed with your therapist. If you are concerned about how you will feel when therapy ends, you can talk to your therapist about this at any time during treatment.

“I’m nearing the end of my time in therapy... May sound silly but I’ll be slightly lost and a bit sad when it ends.”

**What should I do if I’m not happy with the therapy?**

It’s important to remember that therapy can be challenging, and hard work. Therapeutic relationships can be challenging because they often involve talking about difficult feelings, thoughts and situations. It can also take time to build trust and feel comfortable.

“It took many sessions before I was able to begin to let go and trust the therapist, nice as he was.”

However, you may not be happy with the therapy you are getting for a number of reasons. For example, you may be unhappy with:
- the type of therapy you are getting
- the relationship with the therapist.

If you are not happy with any aspect of your therapy, you may want to consider:
- asking your therapist whether they can offer a different type of therapy
- talking to your therapist about the difficulties you are having in the therapeutic relationship
- seeking another therapist, if accessing therapy privately
- asking your GP or the NHS service if there is another therapist you can work with.

If you are very unhappy with the treatment you have received, you can make a complaint or seek further support:
• The Clinic for Boundary Studies (professionalboundaries.org.uk) provides support services for people who feel they have been harmed by someone in a position of trust.

• The British Association for Counselling and Psychotherapy (BACP) (bacp.co.uk) has a service called ‘Ask Kathleen’ where you can ask questions about any concerns you have about good practice in therapy.

• Your therapist should also tell you their complaints procedure if you ask.

See our booklet The Mind guide to seeking help for a mental health problem for more information.

What talking treatments are there?

This section covers:
• Deciding which treatment is right for you
• A-Z of types of talking treatment.

Which talking treatment is right for me?

It can feel daunting trying to work out which talking treatment is right for you, especially if there are several options available. How effective any treatment is differs from person to person, and you might need to try different things before you find out what works for you. You might want to think about:

• **What you want the therapist to help you with.** For example, is it a diagnosed mental health problem, an upsetting event, or your feelings more generally?

• **How much time you want to spend in therapy.** Some types of therapy have a fixed number of sessions, while others can continue until you feel ready to stop.

• **What sort of work are you okay with trying.** For example, some
types of therapy might set you homework or tasks between sessions, while others might involve trying out exercises like visualisations.

**Do therapists just use one type of talking treatment?**

Some therapists prefer to use one type of therapy over another, while other therapists are trained in many types and may choose an approach they think will work best for you. You may hear them use words like ‘eclectic’ or ‘integrative’ when they describe how they work.

See the *How can I access a talking treatment?* section for information about accessing talking treatments through the NHS, and the *What if I want to go private?* section for more information about accessing private therapy.
A-Z of types of talking treatment

Here are some of the forms of therapy you might encounter. If you’re looking for information about a therapy not listed here, the BACP (itsgoodtotalk.org.uk) also has an A-Z of therapy, which covers many more types of therapy, and explains the different beliefs and approaches behind each one.

- Art therapy (see the Mind website’s *Arts therapies* section)
- Bereavement counselling (see the Mind website’s *Bereavement* section)
- Cognitive Analytic Therapy (CAT)
- Cognitive Behavioural Therapy (CBT)
- Counselling
- Couples counselling (see *Couples and relationship therapy*)
- DBT
- Drama therapy (see the Mind website’s *Arts therapies* section)
- EMDR
- Family therapy
- Gestalt (see the BACP’s A-Z of therapy (itsgoodtotalk.org.uk))
- Group therapy – this can be part of various types of therapy and counselling; your GP will be able to tell you more
- Hypnotherapy (see nhs.uk/Conditions/hypnotherapy)
- Interpersonal therapy (IPT)
- Mindfulness
- Music therapy (see the Mind website’s *Arts therapies* section)
- Play therapy – developed to help children express their feelings and communicate complex and challenging problems (see the British Association of Play Therapists (bapt.info))
- Psychoanalysis (see *Psychodynamic therapy*)
- Relationship counselling/therapy (see *Couples and relationship therapy*)
- Systemic therapy (see *Family therapy*).
## Cognitive Analytic Therapy (CAT)

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<thead>
<tr>
<th><strong>Focus</strong></th>
<th>CAT combines Cognitive Behavioural Therapy’s focus on your current thoughts and feelings, with psychodynamic therapy’s focus on your past experiences. This can help you understand why you think and feel the way you do, and learn how to change the things you want to.</th>
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<tr>
<td><strong>Good for</strong></td>
<td>CAT can treat a range of mental health problems, emotional and relationship difficulties. There is some evidence to show it is particularly helpful in treating Borderline Personality Disorder (BPD) and eating disorders.</td>
</tr>
</tbody>
</table>
| **Duration** | • Sessions usually last 50 minutes.  
• You might be offered between four to 24 sessions, though 16 sessions are most common.  
• You are likely to be asked to do some ‘homework’ between sessions, which could be filling in a diary or other worksheets. |
| **Who’s involved** | You and your therapist. |
| **Availability** | Some availability on the NHS, depending on your area. Check with your GP. You can also find a private CAT therapist through the UK Council for Psychotherapy (psychotherapy.org.uk) or the Association for Cognitive Analytic Therapy (acat.me.uk). |
## Cognitive Behavioural Therapy (CBT)

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<th><strong>Focus</strong></th>
<th>CBT looks at how your feelings, thoughts and behaviour influence each other and how you can change these patterns.</th>
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</table>
| **Good for** | • There’s evidence that CBT is particularly effective in treating depression and anxiety, but it can also help most mental health problems.  
• CBT can also help you cope with some chronic health problems.  
• See the Mind website’s section on *Cognitive Behavioural Therapy* for more information. |
| **Duration** | • Sessions often last between 30 to 60 minutes.  
• You’ll usually be offered four to 16 sessions.  
• You are likely to be asked to do some ‘homework’ between sessions. |
| **Who’s involved** | You and your therapist. |
| **Availability** | Available through the NHS, often delivered through your local IAPT service. May be long waiting lists. Find a private therapist through the British Association for Behavioural and Cognitive Psychotherapies (babcp.com). |
| **Variants** | • CBT with exposure response prevention for OCD  
• CBT with exposure therapy for OCD or phobias  
• Trauma focused CBT for PTSD  
• Mindfulness Based Cognitive Therapy (MBCT)  
• Rational Emotive Behaviour Therapy  
• Dialectical Behaviour Therapy (DBT)  
• Cognitive Therapy  
• Behaviour Therapy. |
### Counselling

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<tr>
<th><strong>Focus</strong></th>
<th>Counselling aims to give you a safe, confidential space to talk about your thoughts and feelings with someone who’ll listen to you. Counselling is often a shorter, more focused treatment than psychotherapy. You are likely to focus on one or two particular issues you want to work on, and you might not go into too much depth about your past or difficult thoughts and feelings.</th>
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</thead>
</table>
| **Good for** | • Counselling can help you cope with mild versions of common mental health problems, like depression and anxiety.  
• Counselling is also often offered to help you handle a specific issue, like bereavement or stress at work. |
| **Duration** | • Counselling sessions usually last 30 to 60 minutes.  
• Counselling can last anywhere from one session to several months’ treatment.  
• How long you continue to see your counsellor depends on the issue you’re seeking help with and how you access counselling. |
| **Who’s involved** | You and your counsellor. |
| **Availability** | Available through the NHS, often through your local IAPT service. You can find a private counsellor through the British Association of Counselling and Psychotherapy’s website (itsgoodtotalk.org.uk).  
You can also access counselling through charities like Cruise Bereavement, Rape Crisis and Relate if you want help with the issue each charity deals with. See the *Useful contacts* section. |
# Couples and relationship therapy

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<th><strong>Focus</strong></th>
<th>Relationship therapy can use techniques from a range of therapeutic styles, with the aim of helping you both better understand your relationship and reflect on how to change and problems you would like to tackle.</th>
</tr>
</thead>
</table>
| **Good for** | Any issues that you want to address as part of a relationship. This might include:  
• mental health problems as they impact family relationships  
• physical health problems as they impact family relationships  
• other relationship issues like breakdown in your relationship, divorce, becoming parents, bereavement, and other conflict. |
| **Duration** | • Sessions may last 50 to 90 minutes.  
• If you are offered relationship therapy through the NHS, this is likely to be for a fixed number of sessions.  
• If you seek relationship therapy privately, you are more likely to be able to carry on seeing your therapist indefinitely. |
| **Who’s involved** | • you  
• your therapist  
• another person. Often this is your partner, but it can be a family member or colleague, depending on the relationship you want help with. |
| **Availability** | Some availability on the NHS. You can find relationship therapy through the British Association of Counselling and Psychotherapy’s website (itsgoodtotalk.org.uk). |
**Dialectical Behaviour Therapy (DBT)**

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<th><strong>Focus</strong></th>
<th>DBT was developed from CBT specifically to help people experiencing borderline personality disorder. See the Mind website’s pages on DBT for more information about the goals and process of therapy.</th>
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<tr>
<td><strong>Good for</strong></td>
<td>DBT was specifically developed to treat borderline personality disorder, but it can also be successful for people experiencing eating disorders and self-harming behaviour.</td>
</tr>
</tbody>
</table>
| **Duration** | A course of DBT usually lasts for about a year. This consists of:  
  • Weekly one-to-one therapy sessions lasting 50 to 60 minutes.  
  • Group skills training, which can be as often as once a week.  
  • Homework between sessions.  
  • Crisis counselling by telephone when you need it. |
| **Who’s involved** | • you  
  • a group of people also on the same course of DBT  
  • a team of therapists. |
| **Availability** | DBT is available on the NHS in some areas, though waiting lists can be long. There is also some limited availability of DBT privately. See the Mind website’s pages on DBT for more information. |

*DBT has changed my life! It’s hard work, intensive, time-consuming... but ultimately, if you’re committed, it works.*
Eye Movement Desensitisation and Reprocessing (EMDR)

| Focus | EMDR combines talking to your therapist about traumatic experiences with a technique where you make rapid rhythmic eye movements while recalling traumatic events to help you process them. The rapid eye movements are intended to create a similar effect to the way your brain processes memories and experiences while you’re sleeping. |
| Good for | EMDR was specifically created to help people with difficult traumatic memories, including people experiencing PTSD. |
| Duration | • How long your treatment lasts will depend on the traumatic memories you want help with.  
• Treatment can last three to five sessions for simpler or less traumatic events, and longer for more complex traumas.  
• An EMDR session will usually last around 60 minutes. |
| Who’s involved | You and your therapist. |
| Availability | Some limited availability on the NHS. You can find a private EMDR therapist through the British Association of Counselling and Psychotherapy’s website (itsgoodtotalk.org.uk). |

“My therapy has consisted of talking and EMDR. I was very sceptical that EMDR would work at all but it seems to be making processing past experiences so much easier.”
## Family therapy (or Systemic Therapy)

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<th><strong>Focus</strong></th>
<th>Family therapy can use techniques from various therapeutic styles, with the aim of helping you to understand as a family any difficulties you’re going through, particularly in your relationships to each other. The therapist can then help you reflect and identify how you can change any problems you might want to.</th>
</tr>
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</table>
| **Good for** | Any issues that you want to address as part of a whole family. This might include:  
- mental health problems as they impact family relationships  
- physical health problems as they impact family relationships  
- other family issues like bereavement, adoption, divorce, abuse and other conflict. |
| **Duration** | • Sessions may last 50 to 90 minutes.  
• If you are offered family therapy through the NHS this is likely to be for a fixed number of sessions.  
• If you seek family therapy privately, you are more likely to be able to carry on seeing your therapist indefinitely. |
| **Who’s involved** | • you  
• your therapist  
• any members of your family who feel they would benefit from talking through problems with a trained professional. |
| **Availability** | Available on the NHS in some areas. You can find a family therapist through the British Association of Counselling and Psychotherapy’s website (itsgoodtotalk.org.uk). |
# Interpersonal therapy (IPT)

<table>
<thead>
<tr>
<th><strong>Focus</strong></th>
<th>Interpersonal therapy focuses on your relationships with other people and how your thoughts, feelings and behaviour are affected by your relationships, and how they affect your relationships in turn.</th>
</tr>
</thead>
</table>
| **Good for** | • IPT has been shown to be particularly effective in treating depression.  
• IPT has specifically adapted versions to treat:  
  - eating disorders  
  - mild depression and depression during and after pregnancy  
  - bipolar disorder  
  - borderline personality disorder (BPD).  
• IPT has not been shown to work as well in treating anxiety. |
| **Duration** | • Sessions usually last 50 minutes.  
• You’re likely to be offered a set number of sessions, usually 16, through the NHS.  
• IPT for BPD lasts 24 sessions. |
| **Who’s involved** | You and your therapist. |
| **Availability** | Most IPT therapists work in the NHS, often in your local IAPT service. However, you can find private dynamic interpersonal therapy (DIT) through the British Psychoanalytic Council (itsgoodtotalk.org.uk). |
| **Variants** | • Brief dynamic interpersonal therapy (DIT)  
• IPT for eating disorders  
• IPT for borderline personality disorder. |
# Psychodynamic therapy

<table>
<thead>
<tr>
<th><strong>Focus</strong></th>
<th>In psychodynamic therapy you’ll talk to your therapist about what’s going on in your life now, what’s happened to you in the past, and how your past experiences can affect how you think, feel and behave in the present. Your therapist will also help you reflect on how you can start to make decisions and behave based on how you are feeling now instead of what has happened in the past.</th>
</tr>
</thead>
</table>
| **Good for** | • Psychodynamic therapy can be most beneficial to people experiencing depression, anxiety, personality or eating disorders, or other personal difficulties – although it can be useful for a wide range of mental health problems.  
• You’re likely to get the most out of psychodynamic therapy, if you’re willing to and interested in exploring your past and your subconscious motivations. This can be a difficult and upsetting process. |
| **Duration** | • Sessions usually last 50 minutes.  
• Therapy delivered through the NHS is often for a limited number of sessions of six to 18 months.  
• Private therapists will often continue treatment until you both decide you’re ready to end therapy. |
| **Who’s involved** | You and your therapist. |
| **Availability** | Some availability on the NHS, often through your local IAPT service. You can find a private therapist through BACP (itsgoodtotalk.org.uk). |
| **Variants** | • Focul psychodynamic therapy for eating disorders.  
• Psychoanalysis. You might hear the terms ‘psychodynamic’ and ‘psychoanalysis’ used to mean the same thing. Psychodynamic therapy developed from psychoanalysis. |
How can I access a talking treatment?

You can access a talking treatment in different ways. This page has information on accessing talking treatments through:

- the NHS
- a charity or organisation.

You can also access talking treatments through a private therapist or clinic. See the Private Treatment section for more information.

Through the NHS

You can access free talking treatments through the NHS, although this may depend on what’s available in your local area and the nature of the problem you want help with.

You can get talking treatments on the NHS through:

- **self-referral** — some services offer self-referral options, where you can contact the service directly to refer yourself for a talking treatment. This is more common for IAPT services. See the NHS service finder (nhs.uk/service-search) to search for services near you and find out if you can self-refer.
- **your GP** — see the booklet *The Mind guide to seeking help for a mental health problem* for more information on how to talk to your GP about getting help for your mental health.

What is IAPT?

Improving Access to Psychological Therapies (IAPT) is a programme offering talking treatments for common mental health problems, such as anxiety and depression. This programme is also called ‘psychological services (IAPT)’ in some places, as the government is in the process of changing its name.

Most areas have an IAPT service, however, some talking treatments are not available in all areas and the waiting times can be long. See the NHS
Making sense of talking treatments

Choices website (nhs.uk/service-search) to find your local IAPT service. Also see the booklet The Mind guide to seeking help for a mental health problem for more information about having your say in your treatment.

If you are finding it very difficult to access the service you want on the NHS, you could think about exploring options through the private sector. See the What if I want to go private? section for more information.

**Mind is actively campaigning** to make sure that everyone has access to talking treatments when they need them. You can find out more about what we’re doing on the Mind website campaign pages (mind.org.uk/news-campaigns/campaigns) and see how you can get involved.

“I had CBT when I was first diagnosed with depression, but due to limits I only had four sessions – it ran out when I was starting to feel better.”

**Through a charity or organisation**

Some voluntary, community and charity sector organisations can offer you more affordable access to talking treatments, for example:

- Your Local Mind (mind.org.uk/information-support/local-minds) may be able to offer you talking treatments.
- Organisations, such as Cruse Bereavement Care (cruse.org.uk), offer free counselling services if you have experienced the death of someone close to you.
- Mental Health Matters (MHM) (mentalhealthmatters.com) also offers a telephone counselling service and talking therapies in some areas.
- Your university or educational institution (if you are a student) may have counselling services they can offer you.
- Your workplace might offer an Employee Assistance Programme that could help you access a limited number of free therapy sessions.

You may also find websites offering free talking treatments online, but be aware that these sites might not offer professionally-trained therapists or
adhere to an ethics policy. See the What should I know before starting a talking treatment? section for more information on making sure you’re confident in the therapy you choose.

You can also take a look at the Online safety and support pages on the Mind website for more information about how to safely find information and support for your mental health online.

What if I want to go private?

Private therapists usually charge for appointments and can be expensive, although some therapists may offer reduced rates for people on low incomes. You may consider seeing a therapist privately for a number of reasons, for example:

- the variety of talking treatments available to you may be greater
- you may be able to access treatment more quickly
- you may want to continue therapy over a longer period of time than you can on the NHS.

How can I find a therapist?

You can find a therapist through the British Association for Counselling and Psychotherapy (BACP) (itsgoodtotalk.org.uk). Any therapist you find through this website will have signed up to the BACP’s ethical framework, which means they must:

- behave in a professional and safe way towards you
- explain their responsibilities regarding confidentiality
- tell you their complaints procedure if you ask for it.

What should I ask when arranging an appointment?

Before you decide whether you want to book an appointment, you may want to ask about the following:

- How much do they charge per session? Do they offer reduced rates for people on low incomes?
• Do they still charge for missed appointments?
• Do they offer a free introductory session to allow you to decide whether you can work together?
• When and where would the sessions take place?
• You can also ask them for details of their qualifications and to explain what the qualifications mean.

For more information about seeking help through the private sector see the booklet *The Mind guide to seeking help for a mental health problem*.

“I got a reduced rate for private therapy. It’s still expensive, but it was really important to me to be in control of when I started therapy, who I saw, and how often I saw them.”
<table>
<thead>
<tr>
<th>Useful contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Association for Cognitive Analytic Therapists</strong></td>
</tr>
<tr>
<td>web: acat.me.uk</td>
</tr>
<tr>
<td>Information and details of accredited cognitive analytic therapy practitioners.</td>
</tr>
<tr>
<td><strong>British Association for Behavioural and Cognitive Psychotherapies (BABCP)</strong></td>
</tr>
<tr>
<td>tel: 0161 705 4304</td>
</tr>
<tr>
<td>web: babcp.com</td>
</tr>
<tr>
<td>Provides details of accredited cognitive behaviour therapists.</td>
</tr>
<tr>
<td><strong>British Association for Counselling and Psychotherapy (BACP)</strong></td>
</tr>
<tr>
<td>tel: 01455 883 300</td>
</tr>
<tr>
<td>web: bacp.co.uk</td>
</tr>
<tr>
<td>Ask Kathleen (BACP service)</td>
</tr>
<tr>
<td>web: bacpregister.org.uk/public</td>
</tr>
<tr>
<td>Information and details of accredited practitioners.</td>
</tr>
<tr>
<td><strong>British Association of Play Therapists (BAPT)</strong></td>
</tr>
<tr>
<td>web: bapt.info</td>
</tr>
<tr>
<td>Information and details of accredited play therapists.</td>
</tr>
<tr>
<td><strong>British Psychological Society (BPS)</strong></td>
</tr>
<tr>
<td>tel: 0116 254 9568</td>
</tr>
<tr>
<td>web: bps.org.uk</td>
</tr>
<tr>
<td>Provides a list of chartered psychologists.</td>
</tr>
<tr>
<td><strong>The Clinic for Boundaries Studies</strong></td>
</tr>
<tr>
<td>helpline: 0203 468 4194</td>
</tr>
<tr>
<td>web: professionalboundaries.org.uk</td>
</tr>
<tr>
<td>Support services for those harmed by a professional in a position of trust.</td>
</tr>
<tr>
<td><strong>Cruse Bereavement Care</strong></td>
</tr>
<tr>
<td>helpline: 0844 477 9400</td>
</tr>
<tr>
<td>web: cruse.org.uk</td>
</tr>
<tr>
<td>Support for anyone affected by a death.</td>
</tr>
<tr>
<td><strong>IAPT (Improved Access to Psychological Therapies)</strong></td>
</tr>
<tr>
<td>web: iapt.nhs.uk/services</td>
</tr>
<tr>
<td>Information about your local NHS services.</td>
</tr>
<tr>
<td><strong>It's Good To Talk</strong></td>
</tr>
<tr>
<td>web: itsgoodtotalk.org.uk</td>
</tr>
<tr>
<td>Directory of therapists provided by the British Association of Counselling and Psychotherapy.</td>
</tr>
</tbody>
</table>
Useful contacts

Local Minds
web: mind.org.uk/information-support/local-minds
Directory of Local Minds across England and Wales.

Mental Health Matters (MHM)
tel: (0191) 516 3500
email: info@mhm.org.uk
Provides a counselling helpline and talking therapies in some areas of the UK.

National Institute for Health and Care Excellence (NICE)
web: nice.org.uk
Information and clinical guidelines on recommended treatments for different conditions, including anxiety disorders.

NHS Choices service finder
web: nhs.uk/service-search
Search facility which allows you to look for a health service, including a GP, in your area.

Rape Crisis
web: rapecrisis.org.uk
Information and support for anyone affected by rape and sexual violence. Counselling is offered in many of their local centres.

Relate
tel: 0300 100 1234
web: relate.org.uk
Support and information for anyone affected by problems around relationships, including offering relationship counselling.

United Kingdom Council for Psychotherapy (UKCP)
tel: 020 7014 9955
web: psychotherapy.org.uk
A professional body for the education, training and accreditation of psychotherapists and psychotherapeutic counsellors. It has an online register of psychotherapists offering different talking treatments privately.
We publish over 40 printed titles and many more online resources on a wide range of topics, all available to read and download for free at mind.org.uk

If you found this booklet useful, you may be interested in the following titles:
- Understanding depression
- Understanding anxiety and panic attacks
- How to improve and maintain your mental wellbeing
- How to manage stress
- The Mind guide to seeking help for a mental health problem

You can telephone 0844 448 4448 or email publications@mind.org.uk and request up to three of our professionally printed information booklets free of charge. Additional copies are charged at £1 each plus delivery.
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web: mind.org.uk/donate  

This information was written by Katherine Dunn and Lily Marsh.

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