

Research into psychological therapies is supported through the Health Technology Assessment programme of the National Institute for Health Research (NIHR)

## Health technology assessment

### The NIHR Health Technology Assessment programme

The Health Technology Assessment (HTA) programme produces independent research about the effectiveness of different healthcare treatments and tests, for those who use, manage and provide care in the NHS. It identifies the most important questions facing the NHS by consulting widely with these groups, and commissions research through different funding routes.

The programme is part of the National Institute for Health Research (NIHR) and is managed by the NIHR Evaluation, Trials and Studies Coordinating Centre (NETSCC), previously known as the National Coordinating Centre for Health Technology Assessment (NCCHTA). This is part of the Wessex Institute at the University of Southampton.

The term 'health technology' covers a range of methods used to promote health, prevent and treat disease, and improve rehabilitation and long term care including:

- Drugs – such as antidepressants, contraceptives and antibiotics
- Devices – such as pacemakers, dialysis machines and hearing aids
- Procedures – such as surgical techniques, acupuncture and counselling
- Settings of care – such as general practice, hospitals and care homes
- Screening – for example for cancer, sexually transmitted diseases and stroke.

### Research into psychological therapies

This is an important, significant and prestigious funding stream. The HTA asks important questions about the aforementioned technologies – for example, when is counselling better than drug treatment for depression? – and answers these questions by investigating four main factors: whether the technology works, for whom, at what cost, and how it compares with the alternatives.

### HTA research studies in counselling and psychotherapy

There is a range of counselling and psychotherapy projects currently being undertaken and funded by the HTA programme. These include:

- *Interactive group art therapy as an adjunctive treatment for people with schizophrenia (MATISSE)* – Dr Michael Joseph Crawford, Imperial College London

This study examines the mental health, social functioning, and cost effectiveness of group art therapy for people with schizophrenia. Participants will be recruited from mental health services at four sites and randomised to one of three interventions: group art therapy plus standard care; a place in an activity group plus standard care; or standard care alone. All groups will run weekly for 12 months and participants' health and social functioning

will be assessed 12 and 24 months after randomisation. See [www.hta.ac.uk/1525](http://www.hta.ac.uk/1525)

- *A randomised controlled trial of CBT and motivational interviewing for people with type 1 diabetes mellitus and suboptimal glycaemic control (ADaPT)* – Dr Khalida Ismail, Institute of Psychiatry

Amongst other things, this study will test whether CBT is more effective than usual medical care in improving glycaemic control in a population based sample of younger adults with type 1 diabetes and persistent suboptimal glycaemic control after brief motivational interviewing (MI). As part of this it will examine cognitive, behavioural and biological predictors of outcome after MI and after CBT.

See [www.hta.ac.uk/1312](http://www.hta.ac.uk/1312)

- *Evaluation of the clinical and cost effectiveness of group CBT for post-natal depression* – Dr Matt Stevenson, University of Sheffield

This study examines the clinical and cost-effectiveness of group CBT for post-natal depression compared to currently used packages of care. The current study will employ a full systematic review of the evidence on clinical efficacy defined using a range of outcome measures (including adverse events, mother-infant interaction, quality of life, and symptoms).

See [www.hta.ac.uk/1663](http://www.hta.ac.uk/1663)

- *Randomised controlled trial of brief psychodynamic psychotherapy, CBT and treatment as usual in*

adolescents with moderate to severe depression attending routine child and adolescent mental health clinics – Professor Ian Goodyer, University of Cambridge

This RCT will compare two psychological treatments with treatment as usual over a 52-week period. One of the treatments will be ‘treatment as usual’ (generally addressing the life situation of the adolescent and the family plus fluoxetine). The other two will also receive ‘treatment as usual’, but will also have either a brief psychodynamic psychotherapy or CBT. See [www.hta.ac.uk/1731](http://www.hta.ac.uk/1731)

● **SHIFT: Self-Harm Intervention, Family Therapy: a randomised controlled trial of family therapy vs. treatment as usual for young people seen after second or subsequent episodes of self-harm** – Professor David Cottrell, University of Leeds

This RCT will compare family therapy with the treatment usually offered by the NHS child and adolescent mental health services to adolescents aged 11–17 years who self-harm. The main outcomes will be repetition of self-harm needing hospital treatment 18 months after entering the study. Other important outcomes are repetition at 12 months, the nature of further self-harm, suicidal thoughts, cost effectiveness and quality of life. See [www.hta.ac.uk/1733](http://www.hta.ac.uk/1733)

● **A single blind randomised controlled trial to determine the effectiveness of group CBT in the prevention of depression in high-risk adolescents** – Professor Paul Stallard, University of Bath/Avon

This study will examine whether a school based depression prevention programme developed in

Australia, the Resourceful Adolescent Programme (RAP), is effective in reducing depressive symptoms in high-risk children in the UK. Whole classes of children aged 13–16 years will be randomly assigned to receive RAP, a placebo intervention or treatment as usual (Personal Health and Social Education – PHSE). The study will assess children’s mood, negative thoughts and self-image before the start (at baseline) and again at six and 12 months. See [www.hta.ac.uk/1667](http://www.hta.ac.uk/1667)

● **CBT as an adjunct to pharmacotherapy for treatment resistant depression in primary care: a randomised controlled trial** – Dr Nicola Wiles, University of Bristol

This study will examine whether patients who have not got better on antidepressants and go on to receive CBT as well as their medication are more likely to get better than patients who just continue to take their antidepressants over 12 months. The primary outcome is the Beck Depression Inventory (BDI) score at six months post-randomisation. Secondary outcomes will include remission of symptoms, quality of life and use of antidepressants. The study will also look at how much this treatment costs and patients’ views and experiences of it. See [www.hta.ac.uk/1656](http://www.hta.ac.uk/1656)

#### **HTA funding**

The HTA programme commissions research in three different ways: by advertising standard calls for research proposals that address specific topics; by advertising special calls for research proposals that

address themed areas; and by funding HTA clinical trials and evaluation studies that are proposed directly by researchers.

Anyone, anywhere, who considers that they can carry out high quality health-related research, and who is prepared to submit a proposal, can apply for funding. The HTA programme welcomes applications which are within the HTA’s remit from all sectors for consideration. Applicants from non-academic or non-clinical sectors are strongly advised to consider collaborating with these sectors in their application to the HTA programme.

#### **Change of name**

From April 2009 the NIRH Coordinating Centre for Health Technology Assessment (NCCHTA) will be known as the NIHR Evaluation, Trials and Studies Coordinating Centre (NETSCC). This name change will not affect the running of the Health Technology Assessment (HTA) programme. The renamed NETSCC will continue to oversee this, ensuring it funds independent research that is important to the NHS. The website, contact details and other working arrangements will also remain unchanged. NETSCC has been created to manage evaluation research on behalf of the NIHR and facilitate a more coordinated approach to the handling of research applications; ensuring publicly funded research is carried out in the most efficient way. For more information visit [www.netsc.ac.uk](http://www.netsc.ac.uk) and [www.hta.ac.uk](http://www.hta.ac.uk)

## Training the trainers Summer School 2009

Based on the success of last year’s ‘training the trainers in research methods’ summer school, BACP in association with the University of Leicester is hosting a summer school again this year between 27–31 July 2009.

The programme aims to enhance the capacity of counselling and psychotherapy academics and trainers to feel more competent and confident in the teaching and use of research methods. Evaluation of last year’s event highlighted how the course offered participants the opportunity of a hands on experience of a range of research methods. The quality of the training team, the range of resources provided and the group dynamics were all noted as highlights of the week. The importance of the week for participants in terms of the knowledge they would transfer to their teaching and their own research was widely expressed. The importance for many was captured by the reflection from one participant: ‘This week has been the most important since my diploma training itself 15 years ago.’

For further details of the event visit [www.bacp.co.uk/events](http://www.bacp.co.uk/events) or tel 01455 883300.