

FROM THE EDITOR

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Last year, in its review of the availability of NICE-recommended therapies for depression in IAPT services,¹ BACP highlighted the paucity of non-CBT offerings. The next few issues of the journal will showcase the other IAPT therapies for depression, in the hope of raising awareness of the full range of options available. We begin in this issue with couple therapy for depression, an IAPT therapy aimed at working with couples, where the relationship dynamics are contributing to depression in one of the partners. This type of therapy is also suggested in cases where it is deemed that working with the relationship can help a person to recover from depression. Kate Thompson highlights the paradox that, despite the high success rates of this treatment, it has only been made available in half the IAPT services in the UK.

When couples come for therapy, one of the issues which often raises its head is sexuality. Many therapists may feel uncomfortable exploring this aspect of their clients' personal lives, not least because most training courses do not equip them to address it. Psychosexual therapists, who have undergone specialist training in this area, have an extremely important role to play in helping clients to address sexual issues. Sue Burridge outlines the work of Bedfordshire Psychosexual Service and describes her own personal journey to becoming a psychosexual therapist in the NHS. It is imperative that other mental health professionals in NHS-funded services are aware of the important work of psychosexual teams, so that they are able to make appropriate referrals and ensure that this important aspect of their clients' personal lives is not overlooked.

Another form of intervention that has been approved for NHS use, but is perhaps still vastly underutilised, is mindfulness. Robert Marx and Fergal Jones' article demonstrates how this can help clients by teaching them to focus on the present, rather than ruminating on the past or making predictions about the future. The practice of mindfulness involves just noticing thoughts, feelings and sensations, without trying to change them, in contrast to CBT. Mindfulness has been shown to help alleviate stress, prevent depressive relapse and increase wellbeing, through helping clients to disengage from worry and rumination, and through the development of greater self-compassion. This article provides an overview of the history of mindfulness and explores how mindfulness interventions are used in NHS services.

