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FROM THE EDITOR

One of the strengths of BACP, in my view, is the multiplicity of ways in which it is able to support its members. These include producing guidance on ethical practice, keeping us updated on relevant developments and lobbying on our behalf at national level. Recently, BACP has been closely following and contributing to the National Institute for Health and Care Excellence (NICE) consultation on *Depression in adults: recognition and management*.¹ The draft guidance for consultation was published in July and, while there was initial concern that counselling might not be included, this has happily proved unfounded. This underlines the fundamental role that counselling has to play in treating depression. In a timely article in this issue, Rinde Haake explains the counselling for depression model, exploring how its person-centred roots have been adapted to fit within a short-term, evidence-based framework for treating depression within IAPT services.

Counselling for depression focuses on helping clients to access and deepen their emotions, for example by helping them to feel them in their body, and by using images and metaphors to access the emotion. The utilisation of imagery as a bridge to emotion is also at the heart of art psychotherapy. Dominik Havsteen-Franklin explores the contribution that art therapy makes to mental healthcare within the NHS, highlighting how art can often provide a way into the client's inner world, giving access to themes which are outside of the client's conscious awareness. The art therapist cleverly facilitates a process in which the client can reflect on these themes in a way that gives them meaning and relevance.

Art psychotherapy is just one example of the myriad ways of working with mental health issues within NHS-funded services that lie outside of the IAPT model and have the potential to make such a huge contribution to client wellbeing. A focus on client wellbeing, rather than 'illbeing' is at the heart of Jolanta Burke's article on positive psychology. In the past, mental health treatment has focused almost exclusively on curing the malaise, rather than working towards optimal wellbeing. This brings me back to the person-centred approach, which is based upon the belief that human beings are striving to be the best that they can be. Jolanta describes how each of us has the resources at our disposal to optimise our wellbeing, and often simply need someone to help us focus on what these are and how to utilise them. It seems to me that, whatever tribe of therapy we belong to,

