

# The Dawn of a New Era - Statutory Regulation for Psychological Therapies

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*I was asked to comment for Self and Society on the benefits of statutory regulation with the Health Professions Council (HPC). This is structured beneath the seven statements published by INTEGRITY: Social Responsibility in Psychological Therapies (ISRPT) earlier this year.*

- 1. Professional independent statutory regulation for talking therapies is a necessary requirement for the growing professions of all the psychological therapies.**

Since my first visit to the Health Professions Council (HPC) in 1994 when the arts therapies were applying to become a recognised and regulated profession I have always understood statutory regulation as evidence of a profession having reached a maturity in terms of a shared knowledge base, status, meaning, value and purpose. Statutory regulation appears to me as a hallmark of credibility and respect that a profession has been fully and collectively acknowledged as having an important role to play in society. With this comes greater responsibility to the public in what has been described as a "moral contract" (Allen: 2010). I have never understood why the prospect of HPC regulation was not welcomed by all as a cause for genuine celebration of everything that psychological therapies can contribute to our culture. It has represented for me the opportunity for the realisation of this potential in a world that is so clearly in need of the field of ideas and practice. INTEGRITY was born from the belief that HPC regulation could help the professions potential become more fully realised, empowered to integrate therapeutic philosophy, values and approaches to enable us to become more humane, relational and emotionally literate.

- 2. The 2007 White Paper on professional regulation 'Trust, Assurance and Safety' recommended the HPC as the regulator of choice for psychologists, psychotherapists, counsellors and other psychological therapists. The HPC has proven to be**

**the appropriate fit-for-purpose regulator of choice for several of the psychological therapies i.e. Arts (psychotherapist) Therapist and Practitioner Psychologist.**

Whilst the arts therapies and practitioner psychologists have completed their task and have secured their positions in public service delivery, it seems to me vital that all the psychological therapies can take their place at the table of the HPC. If you visit the Council in operation, which you can, because of their commitment to transparency, what you will see is a group of professions all represented in an atmosphere of equality with shared principles of professionalism. The public interest remains central to the agenda as well as care of professionals and decisions are made collectively with inter-disciplinary collaboration, mutuality and open transparent debate on all issues. As an arts therapist the aim was always to keep the client/patient/service-user at the centre of the vision promoting all that could be offered by way of quality enhancement and increasing access. We learned that across the different distinctive single modalities we had so much in common and we worked to increase employer and public confidence through developing threshold standards for training and standards of proficiency for practice. The professional associations addressed with full heart the task of promoting service delivery, the trainings and practitioners have always been committed to the development of theory and practice whilst the HPC took over the role of complaints. This seemed like a burden lifted from us as we could rely on experts in this area to address complaints. We worked with *Agenda for Change* to establish respectable salary scales and those interested in research formed together the Arts Therapies Practitioner Research Network (ATPRN). This process served to consolidate our coherence as a profession without standardising, prescribing or restricting methods or models of practice.

The HPC valued diversity of approach in principle and created a level playing field for all parties which I had thought would surely be exactly what psychotherapy has been in need of for decades. It could be a refreshing contrast to the conflicts between factions in the field, who like religious fundamentalists, have each often behaved as if they had 'the truth, the way and the light'. The bureaucratic process helped to clarify and articulate who we were and what we stood for in terms of human rights, the imagination, self-development, freedom of expression, equal opportunities, diversity and personal growth. As a practitioner who is also steeped in the traditions of integrative and humanistic psychotherapies I would suggest that we share a common philosophical base with the arts therapies and that is what inspires me in the belief that this is an achievable aim with the HPC.

I have seen the psychoanalytic and the cognitive/behavioural perspectives in the NHS polarise and seek to monopolise in different ways. This has led to the marginalisation of humanistic psychology

and integrative-humanistic psychotherapy in service provision even when we know how much these approaches have to offer the complexity of people's lives and experience. The HPC could make the employment application process fairer with HPC regulation being increasingly the criteria for job applicants. The impact of the 'third force' has yet to be fully felt perhaps because it has been systematically suppressed and undermined by groupings who maybe were serving their own self interests more than those of the public. The HPC represents equal opportunity and meritocracy which are the principles that we need to see thriving now.

**3. The HPC will ensure that there is increased and necessary public protection with minimal infringement on the practice of psychotherapy and counselling as it has done for the above mentioned talking therapies.**

Minimal infringement ensured that our practices as arts therapists were left in peace to grow and flourish responding safely and effectively to the presenting needs of our client populations. The spirit of the disciplines remained unscathed with fidelity to the playfulness and spontaneity that belonged to our creative and relational heritage by way of improvisation and dialogue. The emphasis that the HPC placed on diversity, anti-discriminatory and anti-oppressive practice became statutory requirements and ensured that these issues had to be covered in depth in trainings. I am not convinced that there is enough attention paid at present in psychotherapy education related to issues of working with difference with specific reference to age, gender, sexuality, cognitive and physiological differences, religion, race and culture. HPC regulation ensures that these values become a real priority.

**4. The HPC is working consultatively through the Professional Liaison Group (PLG) and its wide consultation processes ensure the best possible appropriate requirements for standards of proficiency (SOP) that recognise the diversity of modes of practice in the professions, leading to the professions working with the HPC to evolve standards for delivery of training and education provision. In addition the HPC have formed a working group to revise the SOPs and move away from the use of the medical language inherited.**

When charged with the task of regulating Psychological Therapies the HPC invited a wide range of stakeholders to be involved with their consultation process through the formation of the Professional Liaison Group. ([www.hpc-uk.org](http://www.hpc-uk.org)). Anyone and everyone can participate in their consultation processes and provide feedback to a listening organisation that documents and thinks carefully about all comments from professionals and the public. The arts therapies didn't have anything as 'fancy' in those days and relied heavily upon the voluntary labour of individuals who slowly but surely educated the

whole profession as to what was expected of them. We didn't experience anything of the kind of resistance that has been witnessed in the field of psychotherapy and counselling which has just seemed incomprehensible to me.

The style of the HPC is remarkably person-centred and process oriented for a Government appointed statutory regulator. This is evidenced in the way in which they immediately sought to develop in response to the feedback in consultation ensuring no medical language was to be imposed for the regulation of psychotherapy (HPC Education and Training Committee: 10/03/2010) The HPC welcomed this change and it corresponded to the way they wanted to develop. Just as in psychotherapy, both client and therapist can be changed by the encounter, so the HPC has evidenced they can rise to this challenge of inter-subjectivity to evolve alongside the field in response to consultation. The fact that the Government have just suggested the field of Social Work is to be regulated by the HPC is an indication that they are on the right track for today's world and are in no way only concerned with health in a very literal interpretation of the word. I believe that health is about our capacity to adapt to change and we have a real challenge now to demonstrate that this really is our area of expertise.

**5. The HPC Fitness to Practise procedures are relevant to any profession providing services to patient and client populations including psychological therapies. The HPC's procedures ensure that decision making about fitness to practise does include professional opinion and expertise, balanced with input from experienced lay people.**

In particular I am of the opinion that independent complaints procedures are simply vital to avoid the quagmire of issues that make voluntary regulation just ineffective and unsatisfactory for anyone seeking to make a complaint. I was interested to read in Ipnosis that Yvonne Bates suggests: "if a client asked me today *'should I make a complaint to my therapist's professional body?'* my answer in some cases would probably be *'expect to be traumatised all over again, and the chances are that even if your complaint is upheld, your therapist will be given a bloody essay to write and a few extra hours of supervision'*. In other cases, my answer would probably be *'whether your complaint is upheld or not will end up being a lottery as to which friends in which places in the organisation your therapist happens to have'*. She concludes "every day clients are being damaged by therapists both deliberately and whilst paving the road to hell with their good intentions. The professional bodies have had their chance and have clearly failed the public. Surely it is time to try something else which appears to be working reasonably well in allied professions." (Bates: 2009).

There has been very little research into just how frustrated and disillusioned the public are (as well as students in training) and we

cannot afford any more to be so complacent about these matters. Look at the MIND survey: *The Protection We Deserve*, which has documented what those who use mental health services think (<http://isrpt.org/the-mind-survey/> ). Have we not all had someone in our practice 'abused' by a psychological therapist one way or another? I am becoming increasingly aware that we have a good deal of work to do in educating ourselves about what the public actually think about our complaints procedures. We need to come out of denial about the extent of the problems with current complaints systems that are so inconsistent and the fact that those responsible for operating complaints procedures may well have no formal education in this area whatsoever. The study of boundaries and boundary violations is central to the development of our understanding in this area and an organisation that has emerged out of Witness, where Jonathon Coe is now the Managing Director, is *The Clinic for Boundary Violations*. Dawn Devereux works at the clinic with fifteen clients a week who present as having been 'abused' by therapists. ([www.professionalboundaries.org.uk](http://www.professionalboundaries.org.uk)). Regulation is not for our benefit as much as the public which is why we need to sacrifice our own interests, defences and needs for theirs.

Currently complaints can be dealt with in small 'closed' systems riddled with dual relationships on many different levels and there is not even a minimum requirement for training for people who manage them. The field is seen by some as defensive and not interested in hearing about difficulties or taking action where required. My view is that it is time to wake up to the gender political issues that can underpin the debates on regulation. As someone influenced profoundly by feminist politics I think regulation protects vulnerable women in particular. I do not think there has been enough consideration or thought about this with specific reference to boundary violations of a sexual nature in psychotherapy. The history of the humanistic tradition reveals that there was perhaps a good deal of sexual 'acting-out' in the past. Group leaders 'slept' with those they facilitated. I have heard only recently of a male psychotherapist who facilitates groups encouraging nakedness and for me that is just off the scale of what is appropriate.

### **A Psychological Professions Council**

I personally cannot think of anything worse for our field than the idea of a Psychological Professions Council as the way this field has managed its professional politics (left to its own devices) has been something to behold for me over the last twenty years. I think such a proposal is based on a notion of narcissistic 'specialness'. That quality of "no-one can understand us" which I would suggest all professions believe to be true about themselves at a point in their development. I think that cultivating ordinariness is a virtue that we could all aspire to further. Psychotherapeutic thinking and process is the wrong text in the wrong context for so much of the business of regulation. There can be mundane aspects to regulation which complement the arcane aspects, particularly of transpersonal work,

and I think that the common sense approach of those who are not psychotherapists can be very helpful indeed.

Being in a group of 'other' professions helps us to learn to contend better with some of the realities of our world rather than trying to inhabit a different one. I recall as a novice in this field being deluded that psychotherapists would be self aware, altruistic, caring in essence and I have spent many years feeling disappointed to discover that this is certainly not always the case. I recall in UKCP AGMs and EGMs, where for thirteen years I was delegate representing the Institute for Arts in Therapy and Education (IATE), living through the incredibly painful dynamics and enactments that were constellated in this group. Continual group processing wasn't always in any way helpful. The work achieved was epic, involving so much reflection, communication, compromise, adaption and sacrifice in the midst of all the many differences and this has contributed to where we are today in our readiness for HPC regulation. Believe me there were times when we could have perhaps done with some 'other' kinds of professionals in the room. The agonies of the unconscious process between psychotherapists are often not good news for anyone for obvious reasons. I suggest that involvement and relationship with other professionals from other disciplines can prevent these dynamics from becoming implosive, explosive or destructive.

### **The Cult of the Personality**

I have always been conscious of the problems of 'the cult of the personality' in our traditions and teachings. What other fields of ideas call themselves so 'tribally' after their ancestors such as Jungians or Freudians? Some agreed generic standards for training and education do much to displace the human ego and the transference issues that have led to all manner of injustices in our histories. (Gabbard G. and Lester E. 1995). I would suggest that sexual exploitation remains a shadow in the history of every orientation in this field and I think we need to be far more critically reflective and socially responsible now to make amends for the past. In *New Associations* in an interview between Jonathon Coe, former Co-ordinator of *Witness*, and Glen O. Gabbard there is some compelling reading about these issues. (British Psychoanalytic Council, *New Associations* 2, February 2010). Whilst HPC regulation certainly leaves the sovereignty of the individual in-tact the seeming 'divine authority' of the 'trainer guru' or the 'font of wisdom' practitioner can be challenged to the benefit of everyone. It seems to me time to make a conscious and collective analysis of our narcissism, egotism and power-drives.

### **Evidence-Based Practice and Practice-Based Evidence**

The HPC appear to be liberal in their interpretations of evidence based practice and practice-based evidence, particularly in contrast to the National Institute of Clinical Excellence (NICE) which is more influenced by medical/behavioural science and the dominance of the so-called gold standard of randomised control trials (RCTs). The HPC draws from social science and education in their approach

adhering to sensible ethics and principles of practice in this regard. Whilst I entirely oppose the way in which the CBT hegemony has been engineered through NICE we cannot equate this with the HPC, as people at times clearly have done perhaps for political purposes. I think the HPC have got the balance just right for now and that we need their inclusive stance to counter-balance the specific style of fast-fix outcome driven obsessions of the Increasing Access to Psychological Therapies (IAPT) project as it has often been administered to date. In humanistic psychotherapy research we have always been concerned with the search for truths whether they are narrative, theoretical, existential, transcendent or indeed empirically scientific. Let's mobilise our collective resources and start articulating our research strategies so that clients can determine their own aims and desired outcomes rather than these being pre-determined by a Government seeking to address financial matters related to the bills for anti-depressants and benefits. Let's stand by the public in being able to formulate their aims for therapy individually and with self responsibility and lets work collaboratively with them to review if their needs are being met in a more consumer driven quality assurance model.

**6. The HPC is an efficient and cost effective option for regulation of psychological therapies offering practitioners an accessible registration fee and value for money at no cost to the Government and a very modest cost to registrants.**

This is an important issue and cannot be under-estimated. The Osteopaths appear to be canvassing their members at present to suggest that the HPC would be a far more appropriate, safe, effective and cost efficient regulator of choice than the independent regulation they sought over ten years ago now. Fees for registrants can be over one thousand pounds per annum and mounting whilst HPC fees are less than one hundred pounds a year. How we manage these economic issues requires far more thought and consideration and voluntary regulation cannot easily budget for what lies ahead. The so-called 'multi-track' approach of the UKCP has not yet been thoroughly researched or properly debated, let alone voted upon and I have deep reservations with reference to moral, ethical, legal and operational implications. This is not just an anti-regulatory stance but has the potential to undermine the very professionalism that the UKCP has worked towards for over two decades. (<http://isrpt.org/background>).

**7. By not moving forward with the regulation of all the talking therapies there is currently an inequality and lack of consistency between psychological therapies. This distorts funding, recognition and availability of diversity of thought and philosophical base that has been available to meet the diverse needs of clients and patients. The current regulatory framework has the potential to be detrimental to the variety of traditions of psychological therapies that have been**

**a part of British culture. Regulation with the HPC will increase possibilities for service provision in public and private sectors. It will enable public-private partnerships to serve the psychological needs of the public.**

At a conference this year on the subject of regulation I was astonished to hear the mantra 'against the state'. I simply could not relate to this or identify with it in any way. It disturbed me and embarrassed me deeply. I couldn't understand it and I felt it belonged to another era of which I am not a part. Who is this 'state' and what 'self states' are being projected on to it?

I have a long held vision that our local General Practitioners need supporting and educating so that with newly devolved commissioning and referring powers they can make use of really sound local private practitioners to deal with the extraordinary extent of psychological issues that are presenting in their surgeries. With regulation in place and new local consortia evolving GPs could be confident to make referrals and those seeking help could be offered psychological support. People struggling with depression and anxiety as well as a whole host of existential and psychosocial problems could be offered more than just a woefully inadequate 'tick box' approach which the NHS just simply cannot afford to fund anymore in so many cases. We know that those suffering from misery, pain, loneliness, trauma, isolation, alienation, bereavement, life-crisis despair and much more can benefit greatly from psychotherapy and I feel that we cannot afford to let people down by not taking responsibility for our duty of care.

The time is ripe for public-private partnerships and we can move into this arena with confidence at the level of local communities. If I were a GP I just would not feel confident to refer to any psychotherapist who was not statutory regulated and that is perhaps a cultural issue with reference to my age. I belong to today's world and I will not lend my support the process of encouraging GP referrals without proper independent statutory regulation in place. I've often found myself in the position of being a generation younger than so many of my colleagues. I went into therapy in my late teens and was already a member of the profession teaching in my twenties. This means that I have had the benefits of listening for many years and being educated by those elders who have imparted their wisdom to me. Now perhaps, in this instance, it is time for the elders to listen to the next generation and what I believe to be crucial in managing the future prospects of our field.

Psychotherapeutic paradigms have so much to offer the transformation of our health, education, social services and prisons. My own vocation has always been directed towards children and young people as I know how effective early intervention can be to address the issues of crime, violence, drugs and mental illness and we need statutory regulation to earn the trust of head teachers and



local education authorities. We cannot any longer continue without the kind of transparency and accountability that is commonplace in our world.

We are clearly at a crossroads. As custodians of a body of knowledge and practice I believe we have a duty and responsibility to preserve this for future generations who we know are facing profound emotional distress, psychological plagues and social turmoil which need to be 'processed' in order for society and its individuals to survive and adapt. There are in the region of five thousand registrants and students in the Humanistic and Integrative College (HIPC) of the UKCP and thirty original and innovative Training Institutes who have had no Government funding or support and have set the most demanding standards. We have increasingly been becoming the market leader for psychotherapy education which is an expression of consumer confidence. At the Savoy Conference in 2009 they suggested that it might be useful to teach from a range of theories to begin with at a foundation level of training and my heart sank because I know that we have been doing this for years in our integrative approaches. My concern is that without HPC regulation our field will become de-potentiated and atrophied. We will see employment and referral prospects drop rapidly and with that student numbers will diminish, perhaps even faster than any of us could ever have imagined. The field of ideas and practice could degenerate and lose all momentum and confidence. I would suggest that public respect is being lost as a result of the anti-regulation movement and that will lead to degeneration and an overall loss of esteem.

This Government has given no reassurance about statutory regulation for psychological therapies and that is a tragedy as far as I am concerned. The CBT hegemony followed by the anti-regulation movement has left me feeling despairing and I often feel like giving up. Perhaps psychotherapy will not be able to fulfil its promise and will prove not to be the vehicle through which to make a difference in our world. I dread witnessing so many of our beautiful and unique specialist approaches disappear before they ever reached maturity by way of contribution to society, not because of statutory regulation. To the contrary, because of our attitude towards it when the opportunity presented itself, which is, I believe what will have destroyed what it came to give us. If the Government will still afford us that chance, which at this time of writing is being considered in the context of their comprehensive spending review, and only then if the HPC will still have us, after the way it has been so wrongly maligned and publicly 'attacked' by our field, then there is work to be done. To successfully manage such a transition and rite of passage we need to start preparing and not get frozen in 'fight and flight'. We need to get down to actual literal work so we can move towards a new dawn with a sense of urgency, social responsibility and perhaps even that sense of spiritual emergency that has always inspired and characterised the field of humanistic psychotherapy.

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