

## Comment

### Commentary on 'Developing a New Psychotherapy Service and Training Scheme in the Provinces' by Mark Aveline

Written in 1989, this paper is already an historical document. Describing as it does the first 15 pioneering years of Dr Mark Aveline's being consultant psychotherapist in Nottingham, the reader might with profit study the paper, mindful that the length of time described exactly matches the period 1900–1915 and the signs are that equivalent rates of cultural change are already in process.

Dr Aveline begins by charting the way in which both the College and the NHS encouraged the development of specialist psychotherapy from the early 1970s leading to the creation of consultant psychotherapist posts without questioning why these bodies should have started espousing the cause of psychotherapy. The timing was such as to suggest that a series of Mental Hospital Enquiries and serious concerns about benzodiazepines had led to increasing recognition that British psychiatry was something of a two-legged stool, relying as it did, therapeutically, on asylums and medication and theoretically on phenomenology and biological psychiatry. It seems reasonable to assume that these posts were the principal means whereby psychotherapy would become more available as an alternative therapy and psychodynamics as an additional theoretical base.

The paper describes how Dr Aveline approached the considerable difficulties in implementing these aims with energy and innovation, combining service and teaching provision and gradually bringing the form of a discrete Psychotherapy Unit out of the near chaos of a series of loosely linked alliances. Other colleagues elsewhere took similar and others different paths to achieve their goals. All involved would easily recognise the heady Klondike days, recalling both the professional and personal achievements and tragedies of themselves and those around them as they faced great organisational forces while struggling to remain open and potentially vulnerable as practising psychotherapists.

The retreat from direct patient contact into ever-more complex managerial roles by Dr Aveline is described and acknowledged. This can be excused on the grounds that the establishment of organisational structures was essential to the survival and development of the slowly increasing numbers of multi-

disciplinary practitioners that Dr Aveline was responsible for, both in Nottingham and nearby cities. One's impression is that control was exercised more by managerial than commonly held theoretical positions. Although mention is made of the related departments forming a "critical mass", it is apparent that his broad definition of psychotherapy is such that at one point his department included both psychodynamic and behavioural therapists. However practically useful this arrangement may have been, it would have been unlikely to provide a base where like-minded colleagues could have developed their ideas, identities and practice to the highest level of expertise in their particular fields. Moreover, as emerged in the paper, this federation was vulnerable to any strengthening of external managerial control, resulting in this instance in the loss of the behavioural posts.

Formed by the activities of the NHS and the College, the future role of the posts and services described and exemplified by this paper will depend on the fate of the NHS, the developing attitudes of the College and management and, increasingly, the power of other organisations concerned with the delivery of psychotherapy service and training. Since the creation of the consultant posts in the mid-1970s, the availability of a range of psychotherapies has undoubtedly increased, particularly outside London. It is reasonable to claim that such posts were partly responsible for that increase and for the attainment of good standards of practice. It can also be fairly claimed that the level of psychotherapeutic awareness among newly-qualifying psychiatrists has risen, perceptibly, if not always dramatically. Whether such gains can be maintained within the ambit of psychiatry remains to be seen. Those concerned with the continuing place of a broadly-based psychotherapeutic approach to psychiatry would benefit from reading Dr Aveline's informative paper.

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