Editorial

Increased access to psychological therapies: no longer a dream now a work in progress

Following a great deal of careful and thoughtful work by a number of key individuals and organizations, including the BABCP, the initiative to increase access to psychological therapies (IAPT) has become a reality. As the readers of this journal will now know, this is not an exercise in redistributing resources but rather the creation of an entirely new high quality way of delivering evidence-based psychological therapies to the maximum number of people possible, and doing so in their local area. This is being fully resourced both in terms of training and service provision. The details are being worked out as this piece is being written. What is clear is that evidence of good outcomes will be crucial, and that is why this journal is part of the process.

Cognitive-behaviour therapists and psychological treatments researchers have been working closely with Professor Sir Richard Layard in ensuring that this investment in psychological therapies makes sense from the point of view of economics, socio-political factors, and the science and practice of psychological therapies. Where there has been criticism (and there has been criticism), this has tended to focus on the gaps and flaws in the evidence base used to inform the IAPT initiative. These gaps clearly exist, but so do the resources and information needed to plug them.

As the scientific journal of the lead body for cognitive-behaviour therapy within the UK, Behavioural and Cognitive Psychotherapy has an important role to play in further informing the development and implementation of the increasing access to psychological therapies initiative. In previous statements we have indicated that we would particularly welcome journal submissions related to the clinical guidelines produced by the National Institute for Clinical Excellence. We now wish to extend this and are calling for submissions relevant to and improving the evidence base for psychological therapies, including, but not confined to, cognitive-behavioural treatments. From this point forward we will consider relevance to the IPT initiative as grounds to submit an article for Accelerated Review and publication and will generally prioritize relevant research. We also hope that contributors will increasingly send us articles relevant to the range of issues surrounding the IAPT. These will include (but again are not confined to) pathways to care, stepped care (low intensity through to high intensity interventions for common psychological problems), training, outcome monitoring and effectiveness, treatment integrity and its measurement, service-delivery issues, and so on. The journal has always been prominent in these areas, and we wish to strengthen our contribution even further.

The IAPT initiative confronts us with a range of choices and responsibilities that as a community of clinicians and researchers we must respond to. This journal intends to play a key role in disseminating the necessary basic and applied research that will make this possible. We will also seek to influence the process in ways consistent with the aims of the organization and this journal. Thus articles relevant to how therapies are accessed, what those therapies are composed of and how they might be delivered are all priority areas. Patient choice and service user involvement also need to be prioritized.

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We are entering a period of colossal change for the delivery of evidence-based psychological therapies. High quality information and thoughtful synthesis will be crucial. *Behavioural and Cognitive Psychotherapy* will be a big part of the BABCP strategy in these areas.

Paul Salkovskis