

Institution: University of Leicester
Unit of Assessment: 17

Title of case study: Power Threat Meaning Framework: transforming the treatment paradigm in

mental ill health

Period when the underpinning research was undertaken: 2015–Present

Details of staff conducting the underpinning research from the submitting unit:

Name(s):
Professor John Cromby

Role(s) (e.g. job title):
Professor of Psychology
Professor of Psychology
Submitting HEI:
01/02/2015–Present

Period when the claimed impact occurred: 12/01/2018–31/12/2020 Is this case study continued from a case study submitted in 2014? N

1. Summary of the impact

Cromby's research is integral to the development of the Power Threat Meaning Framework (PTMF), published by the British Psychological Society's Division of Clinical Psychology (DCP) in 2018 and now extensively applied in mental health services. As a coherent alternative to functional psychiatric diagnosis, the PTMF is changing professional training and therapeutic work amongst clinical, counselling and forensic psychologists, social workers and psychotherapists. Simultaneously, PTMF offers an alternative for mental health peer workers and service users who find diagnosis unhelpful. These impacts are occurring across the UK and internationally in countries including Australia, New Zealand, Ireland, Spain and Denmark, with significant reported practitioner benefits.

2. Underpinning research

Clinical psychologists in mental health have often relied upon functional psychiatric diagnosis. In recognition of the difficulties this causes (both scientific and professional), the British Psychological Society Division of Clinical Psychology funded a project in 2013 to develop a new psychological framework for mental ill health. This project produced PTMF [R4], which proposes that:

- imbalances and abuses of power produce threats;
- we react to threats with embodied threat responses;
- threat responses are conventionally understood as psychiatric symptoms;
- PTMF understands them as (potentially) intelligible responses to adverse combinations of circumstances and events;
- the links between threat and response are not linear or predictable, because they are:
 - o complicated by mixtures of exacerbating and ameliorating factors;
 - contingently and synergistically related to other threats and responses;
 - o dynamically moderated by personal meanings.

PTMF moves the emphasis of mental health work away from the diagnostic question "what is wrong with you?" and toward a series of other questions including: "what has happened to you?", "how did it affect you?", "what sense did you make of it?", and "what did you find yourself doing, feeling and thinking?". By orienting mental health workers toward these questions, PTMF is transforming training and practice in clinical, forensic and counselling psychology, social work and psychotherapy. Simultaneously, as a novel, evidence-based alternative to unproven notions of biologically caused quasi-medical disorders, PTMF is radically invigorating debate about the causes and nature of mental ill health, both nationally and internationally. The Framework has already been translated into Spanish with Danish, Italian, Hungarian and Korean translations underway.



Cromby's input to PTMF includes being lead author of the 'Biology' chapter, and contributing substantially to the chapters on 'Philosophy' and 'Meaning and Narrative'. The direct influence of his research is apparent throughout, and his work is cited or quoted 21 times in the main PTMF document [R2, R6]. His PTMF co-authors describe Cromby's research as "greatly influential in enabling us to produce the coherent and sophisticated account of the nature and causes of mental health difficulties that the PTMF presents" [E1].

Cromby's contributions to PTMF rest upon a strand of research into social relations, embodiment and mental health that began in 2004 and has continued since he joined the University of Leicester School of Business in 2015. His single-authored paper [R1] elaborates the PTMF's concept of meaning, and demonstrates his centrality to its development, including its emphasis upon feeling rather than cognition [R6]. This emphasis highlights embodiment, both in the specific sense that distress is dynamically constituted by particular organisations of bodily, social and material influences, and in the general sense that social science and biology continuously inform each other [R5]. Part of the structure of the PTMF 'Biology' chapter was developed from Cromby's paper [R3] on schizophrenia, and the chapter also summarises his paper on epigenetics [R2], which adopts related conceptual perspectives and strikes a similarly nuanced and constructive stance.

Whilst the contribution to PTMF is Cromby's alone, some underpinning research [e.g. **R2**] during this REF period was authored with Leicester colleagues: Dr Chris Talbot (Genetics), Dr Emma Chung (Cardiovascular Sciences), and Professor Dimitris Papadopoulos (University of Leicester School of Business until 2019).

3. References to the research

- **R1**. **Cromby, J.** (2020). Meaning in the Power Threat Meaning Framework. *Journal of Constructivist Psychology*, 1-13. DOI: 10.1080/10720537.2020.1773355
- R2. Cromby, J., Chung, E., Papadopoulos, D., & Talbot, C. (2019). Reviewing the epigenetics of schizophrenia. *Journal of Mental Health*, 28(1), 71-79. DOI: 10.1080/09638237.2016.1207229
- **R3**. **Cromby, J.** (2016). Developing schizophrenia. *Theory & Psychology*, 26(5), 607-619. DOI: 10.1177/0959354316661430.
- **R4**. Johnstone, L., & Boyle, M. with **J. Cromby**, J. Dillon, D. Harper, P. Kinderman, E. Longden, D. Pilgrim and J. Read (2018). *The Power Threat Meaning Framework: Towards the identification of patterns in emotional distress, unusual experiences and troubled or troubling behaviour, as an alternative to functional psychiatric diagnosis. Leicester, British Psychological Society. ISBN-13: 978-185433-758-0. Pages: 414.*
- **R5**. Meloni, M., **Cromby, J.**, Fitzgerald, D., & Lloyd, S. (Eds.). (2018). *The Palgrave handbook of biology and society*. London: Palgrave Macmillan.
- **R6**. **Cromby, J.** (2015). *Feeling bodies: Embodying psychology*. London, Palgrave Macmillan. ISBN-13: 978-1137380579. Pages: 224.

4. Details of the impact

PTMF is now an increasingly significant part of mental health workers' training and Continuing Professional Development (CPD) and, as a result, is directly impacting their practice. Widespread grass roots uptake and application by mental health workers in a range of settings, both formally and informally, is driving a sector-wide, paradigmatic, shift in therapeutic conceptualisation and practice away from diagnosis and toward the more patient-centred, personalised approaches that PTMF facilitates.

EMBEDDING PTMF IN THERAPEUTIC PRACTICE

Between January 2018 and May 2019, Cromby and others in the PTMF author team undertook a programme of training and CPD delivery to mental health practitioners and trainees across the world **[E2]**.



Internationally, PTMF training workshops were delivered to over 1,300 professionals, mainly working in mental health, in Ireland, New Zealand, Australia, Denmark, Greece and Spain. Feedback from the Australian workshops, delivered by Cromby and PTMF author Johnstone, included statements from participants attesting that the learning from the workshops was "very helpful and empowering for our clients", "great for my personal and professional development" and "potentially liberating/life-changing for the people we work with" [E3].

Within psychology, in January 2018, the BPS funded a high-profile PTMF launch [400 attendees] **[E4]**. Subsequently, PTMF training was delivered to more than 500 clinical psychology trainees at 13 HEIs. Training for over 200 clinicians and mixed cohorts of more than 1,600 clinical psychologists and trainees was delivered across the UK. Talks were given to over 400 forensic and counselling psychologists and trainees in three different venues in England **[E2]**. To facilitate uptake and adoption of PTMF across the range of metal health support the PTMF author team presented talks and training sessions to ~2,000 other mental health professionals and trainees including social workers, psychiatrists, art therapists, probation officers and psychotherapists across the UK **[E4]**.

The author team also sought to raise awareness more generally and presentations about PTMF were given in England to over 500 people comprising mental health workers, service users and the general public. The 2019 'Hay Festival' hosted a PTMF talk by Cromby and Johnstone with an audience of 180 attendees [E2].

PRACTICE

The January 2019 issue of the *Clinical Psychology Forum* journal **[E5]** describes the application of PTMF in eight settings: the National Centre for Youth Mental Health (Dublin); mental health peer-support work (York); teacher education (Maynooth); clinical psychology training (Edinburgh University); work with prisoners given personality disorder diagnoses (Brixton); social work education (University of Nottingham); trauma-literacy workshops for women (various UK locations); and an autism and learning disability service (London). Specific impacts of this work as detailed in **[E5]** include changing data recording practice to align with PTMF concepts; positive changes in understanding and attitudes of trainee teachers; and useful insights amongst male prisoners **[E5]**.

The advantages of PTMF in secure settings are emphasised by a Senior Forensic Psychologist, whose statement describes beneficial changes for both staff and clients: "The PTMF has also been useful in my work with helping wing staff to view service users differently. The staff who have had awareness training in PTMF find adopting a compassionate approach to be a more robust approach. Previously many found a compassionate approach to be "soft" or "giving in" to the service user. Now they have first-hand experience of how using PTMF as a structure leads to ... significant progress with service users who hitherto were unprepared to engage with staff." [E6]. Two further articles in the February 2019 issue of the Clinical Psychology Forum journal [E7] described how PTMF can be used in clinical work with profoundly traumatised clients, including its incorporation into a workbook for clients. At the January 2020 DCP annual conference [E8], a clincial psychologist and occupational therapist from the Central and North West London NHS Foundation Trust described applying PTMF in an acute adult mental health inpatient service, finding that it led to increased levels of staff satisfaction, a better reported understanding of patient's difficulties, and statistically significant reductions in the use of restraint and seclusion. At the same conference, a Clinical Psychologist Consultant explained how PTMF can be used in work with women who have survived sexual violence and abuse, showing how it facilitates multi-level interventions and avoids stigmatisation [E8].

In an interview study **[E9]**, clinical workers described using PTMF to create a jigsaw of core needs; to help clients understand threats they have faced; with traumatised and abused clients, where it helped them identify positive life changes; with adults, children, and people with learning disabilities, where it supported producing constructive narratives with clients; to better manage a client who was self-harming; with a client traumatised by a relationship, where it countered self-blame and stigmatisation; and in a secure service, to engender insights by a man described as paranoid. Following COVID-19 it has been used to structure rapid initial mental health



assessments in a substance misuse service, again to structure assessments and in therapy with a severely traumatised woman, to help her understand why she feels unsafe [**E9**].

One Occupational Therapist (OT) outlined how using PTMF has enabled patients to make significant breakthroughs. Using PTMF, one patient "managed to understand her own situation, because I feel, sometimes, [patients]... don't really reflect on what they're going through ... So I think that was a big difference. I think the patient stopped feeling guilty for self-harming because she realised that it was a response to trauma from the past, and she gave a meaning to those traumas as well. So... understood more why she was doing it and it didn't make her feel like she was punishing herself and therefore feeling guilty. So it ... helped her accept it, acknowledge it, and... [move] forward towards stopping doing it". The same OT went on to state that PTMF "helps you to be more client centred...nursing staff, HCAs, everyone, the way they approach the patients is different...Because we have very difficult cases here... [we meet] once a week where we discuss a patient using this framework, it helps staff understand them and improves their interventions" [E9].

Despite having only been available since 2018, the PTMF has already had far-reaching impact. Confirming the national and international impacts documented above, the open access PTMF documents have received the highest number of page hits on the large BPS website [E10]. With the DCP PTMF working party, Cromby constructed an email survey about the clinical uptake of PTMF, which the DCP helped distribute to clinical psychologists. Over 80% of the 244 respondents worked in adult mental health. In the survey [E11], over 50% of respondents said they had used PTMF ideas in their practice, with over 50% of those agreeing that PTMF was associated with positive change. Caseloads per adult mental health clinical psychologist in this country vary widely but are often in the region of 35-50 cases/year. With such numbers, the survey demonstrates how, in the UK alone, interventions for distressed people are being positively transformed as a result of clinicians using the PTMF. Given that training has been delivered to an excess of 5,500 clinicians, mental health professionals and trainees [E2], it is clear that this work has significantly improved client experiences for tens of thousands of people.

5. Sources to corroborate the impact

- **E1.** Statement by PTMF lead authors.
- **E2.** Summaries of PTMF talks and training by contributors.
- E3. Australia workshops feedback.
- **E4.** A short film summarising the London launch PTMF: https://www.bps.org.uk/power-threat-meaning-framework/introduction-ptmf
- E5. Clinical Psychology Forum, January 2019.
- E6. Statement by Senior Forensic Psychologist.
- **E7.** Clinical Psychology Forum, February 2019.
- E8. DCP conference presentations, January 2020.
- E9. PTMF interview study data (excerpts).
- **E10.** Access figures provided by British Psychological Society (email testimonial).
- **E11.** Quantitative survey data summary.