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OPTIMISING ALLIED HEALTH PSYCHOLOGICAL TREATMENTS IN PRIMARY HEALTH CARE: PILOTING A RANDOMISED CONTROLLED TRIAL OF SOCIAL WORKER TRAINING IN FOCUSED PSYCHOLOGICAL STRATEGIES (THE SW-fps STUDY)

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AIM AND POLICY CONTEXT

The SW-fps Study was part of a broader body of research which aims to improve access to evidence-based psychological treatments in primary health care. Over the last decade, major mental health reforms in Australia, such as the Better Outcomes and Better Access programs, have greatly increased community access to psychological treatments through a range of funding models designed to support provision of psychological treatments by allied health providers.

More recently social workers, amongst other allied health professionals, are beginning to utilise the Medicare incentives to provide psychological treatments in primary mental health care, defined as focused psychological strategies. However, a 2007 APHCRI funded review titled "Optimising the primary mental health care workforce", noted a lack of research concerning the effectiveness of social workers in delivering psychological treatments.

The aim of this study was to evaluate the impact of training for social workers in focused psychological strategies. The central hypothesis was that social workers receiving the training for skills in focused psychological strategies would show greater improvements in competence in psychological skills than untrained social workers.

KEY FINDINGS

On average the sample was relatively experienced, averaging 43.8 years of age and 12.4 years of experience in social work practice. Eighty per cent of the social work participants were female and 43.3 per cent worked in the non-psychiatric health sector.

The SW-fps Study provided evidence that, with a targeted training intervention in focused psychological strategies, social workers can become competent at applying cognitive behavioural strategies. The training intervention had a substantial and statistically significant effect on both subjective confidence and objective competence. On average, participants in the intervention group scored 14.2 points higher than their control group counterparts at follow-up, when adjusting for baseline competency scores.

60 55 50 45 Competency 40 Threshold 5 35 30 25 20 15 10 5 0 Baseline Follow-up Baseline Follow-up Intervention (n=16) Control (n=14)

Figure 1 - Change in mean competence⁺ from baseline to follow-up, by group (error bars indicate standard error)

As displayed in Figure 1, those social workers who received the training intervention moved from well below to above the base competency threshold, on average. Additionally, the social work participants reported statistically significant increases in confidence in applying cognitive behavioural strategies.

DISCUSSION

POLICY OPTIONS / FURTHER RESEARCH

The findings of this study are highly relevant to Australian mental health reforms which fund social workers to deliver focused psychological strategies, and also have implications more broadly for social work practice worldwide especially in primary mental health care settings. The significant increases in subjective confidence and objective competence amongst the training participants are favourable to the goal of increasing workforce participation and optimising allied health delivered psychological interventions in primary mental health care. Social workers appear to have an untapped capacity, with a base set of skills that allows them to competently utilise focused psychological strategies once exposed to targeted training.

Whilst the research indicates improvements in both subjective confidence and objective competence amongst those social workers who received the training, there remains a clear need to further examine the effect of the training on patient outcomes. Research on patient outcomes would provide further evidence to substantiate the efficacy of social work delivered focused psychological strategies. Further research may also explore the effect of this training on undergraduate and postgraduate social work students, who may well use these skills in a variety of social work contexts if not necessarily in primary mental health care.

^{*} Measured by video-taped simulated consultations rated by blinded reviewers using the Cognitive Therapy Scale; 11-item scale with a maximum possible score of 66

^a A score of 39 out of a possible 66 on the Cognitive Therapy Scale is considered the base competency threshold

IMPLICATIONS FOR MENTAL HEALTH SOCIAL WORK EDUCATION AND PRACTICE

Most social workers in the mental health sector work with the more severely disabling low prevalence disorders such as schizophrenia and bipolar disorder. The SW-fps approach to training provided an opportunity for social workers to gain practical skills for working with high prevalence disorders such as depression and anxiety. Furthermore, the training represented a significant shift for social work education. Much of social work education in mental health is based on theoretical models rather than evidence-based skills. Yet in direct practice, social workers are required to work within a skills based professional context.

The paradigm of the training, based on the policy terminology of focused psychological strategies, creates an accessible skills base for social workers seeking to deliver effective brief psychological strategies rather than cognitive behavioural psychotherapy. The training was positioned within a commonly accepted domain for social work practice through the eco-systems framework, and sought to establish an integrated approach to psychosocial assessment and brief psychological strategies.

This approach is complementary to the bulk of social work direct practice which requires a practical skills base and to the increasing opportunities for social workers in the primary mental health care context. This preliminary work provides a foundation to further refine social work training in mental health.

METHODS

The SW-fps Study was a randomised controlled trial designed to measure the impact of a mental health training intervention for social workers. The 15 hour training program was adapted from an existing focused psychological strategies training model used in general practice, where cognitive behavioural strategies are taught for use in brief psychological treatments for high prevalence mental health issues like depression and anxiety.

A training DVD and workbook targeted at training social workers in focused psychological strategies was created for The SW-fps Study. The training DVD included brief role-play examples and expert interviews. In addition to focused psychological strategies, the training covered additional topics including mental health social work in primary health care, logistical issues for social workers operating in private practice, and the use of eco-mapping as a social work psychosocial assessment tool.

40 Victorian social workers participated in the study and were randomly allocated between the intervention and control groups. 95 social workers made contact about the study demonstrating a high level of interest, and recruitment had occurred through an advertisement distributed through the Victorian branch of the Australian Association of Social Workers.

The primary outcome measure was objective competency in cognitive behavioural strategies, measured using videotaped standardised simulated consultations which were rated by blinded reviewers using the Cognitive Therapy Scale. The secondary outcome measure was subjective confidence in applying focused psychological strategies, as measured by a series of Likert scales in a pre and post-training survey.

Data was analysed using SPSS version 17. There was sufficient inter-rater agreement and internal consistency of the Cognitive Therapy Scale. Statistical significance was calculated at the 95% level.

For more details, please go to the full report

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