Manchester Interdisciplinary Collaboration for Research on Ageing (MICRA) Seedcorn grant 2015

Title: Interdisciplinary research to develop the evidence base for the 'Psychological Interventions for People with Severe Mental Illness in Later Life' (PIPSMILL) project.

Research team:

Dr Katherine Berry, Psychological Sciences, University of Manchester Dr Laura Brown, Psychological Sciences, University of Manchester Dr Marie McDevitt, retired doctor previously specialising in Public Health Dr Dawn Edge, Institute of Brain Behaviour and Mental Health, University of Manchester Professor Gillian Haddock, Psychological Sciences, University of Manchester Professor Karina Lovell, Nursing, University of Manchester Dr Catherine Cross, Clinical Psychologist, Manchester Mental Health and Social Care Trust Dr JS Bamrah, Psychiatrist, Manchester Mental Health and Social Care Trust Dr Richard Emsley, Biostatistics, University of Manchester Miss Gemma Shields, Health Economics, University of Manchester

People with severe mental health problems, such as schizophrenia are often very distressed and disabled by their symptoms. Severe mental illness costs society more than £11.8 billion per year, much of which could be spent more wisely (Centre for Economic Performance's Mental Health Policy Group, 2012).

It is well known that psychological or 'talking' therapies, such as Cognitive Behavioural Therapy (CBT) can help people with severe mental health problems by reducing their symptoms and improving the quality of their lives. Investing money in psychological therapies can also reduce health and social care costs in the longer term (NICE, 2014). However, people in later life are less likely than younger people to be offered psychological therapies. There are a number of reasons why people in later life are less likely to receive psychological therapies, such as barriers linked to transport, physical morbidity and negative staff attitudes.

This study aims to systematically explore the experiences of NHS staff, informal carers and people with severe mental health problems in later life to identify barriers and facilitators to psychological therapies in the NHS. Using semi-structured interviews we will talk to 20-25 patients, 15-20 carers and 20-25 staff. We will purposively sample participants to ensure we capture key aspects of diversity within the patient, carer and staff groups including ethnicity. Topics guides for the interviews have been developed from published literature and in consultation with patient and carer groups, and focus on the perceived barriers and facilitators associated with accessing psychological therapies within the NHS. Interviews will be transcribed and transcribed data will be analysed using thematic analysis to identify key barriers and facilitators to accessing therapy in later life for severe mental illness.