

The Role of Patient Preferences in the Arts Therapies

Emma Millard

Government guidelines recommend that patients should be involved in making decisions about their treatment as often as possible (1–3). Shared decision-making involves collaboration between patients and clinicians (4) and is an essential aspect of mental healthcare (5,6). It incorporates the patient's values and preferences as well as the clinician's knowledge of treatment options (7), and previous research implies that receipt of a preferred treatment is associated with improved engagement and outcomes (8–10). Across the arts therapies modalities there is an obvious difference in the art form being used, therefore, patients' expectations, past experiences/memories of the art forms, values and preferences may play a considerable role in their engagement and the success of the therapy. An increased understanding of this could support a more collaborative, patient-led approach in mental health care.

In this presentation I will discuss my mixed-methods PhD project relating to different aspects of patient preferences in the arts therapies. After finding important consequences of offering mental health patients their preferred psychosocial intervention (11), the project has explored which patient characteristics are associated with their arts modality preferences, such as gender or symptom severity. I investigated ways in which we can support patients to make informed decisions about their participation in the arts therapies, using leaflets, videos or taster sessions, as well as patients' experiences of making a choice. The findings can help us to understand what might be important to patients in mental health settings when making decisions about their treatment, and how we can be led by their values and preferences.

Biography

Emma Millard is a music therapist and PhD student at East London NHS Foundation Trust and Queen Mary University of London. She has a BSc in Psychology from the University of Reading and a Music Therapy MA from Guildhall School of Music and Drama. By the time of the conference, she will be in the final stages of her PhD relating to patient preferences for the arts therapies. She is also the Research Network Coordinator for the British Association of Music Therapy (BAMT). In her spare time, she is a member of the London Philharmonic Choir and enjoys reading, cooking and riding her new bike around London.

Recent publications and conference presentations

Windle E. Music Therapy in Mental Healthcare [Internet]. Circadian. 2020. Available from: <https://www.blcircadian.com/home/music-therapy-in-mental-healthcare>

Sabitova A, McGranahan R, Altamore F, Jovanovic N, **Windle E**, Priebe S. (2020) Indicators Associated With Job Morale Among Physicians and Dentists in Low-Income and Middle-Income Countries: A Systematic Review and Meta-analysis. *JAMA Netw Open*. 2020;3(1):e1913202. doi:10.1001/jamanetworkopen.2019.13202

Windle E, Tee H, Sabitova A, Jovanovic N, Priebe S, & Carr, C (2019) Association of Patient Treatment Preference With Dropout and Clinical Outcomes in Adult Psychosocial Mental Health Interventions A Systematic Review and Meta-analysis. *JAMA Psychiatry*, 1–9. <https://doi.org/10.1001/jamapsychiatry.2019.3750>

Windle E, Hickling L. M, Jayacodi S, & Carr C (2019) The Experiences of Patients in the Synchrony Group Music Therapy Trial for Long-term Depression. *The Arts in Psychotherapy*. <https://doi.org/10.1016/j.aip.2019.101580>

References

1. National Institute for Health and Care Excellence. Service user experience in adult mental health: improving the experience of care for people using adult NHS mental health services [Internet]. Clinical guideline [CG136]. 2011 [cited 2019 Mar 14]. Available from: <https://www.nice.org.uk/guidance/cg136>
2. Mental Health Taskforce, NHS England. The five year forward view for mental health [Internet]. The Mental Health Taskforce. 2016. p. 82. Available from: <https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>
3. Silverman JJ, Galanter M, Jackson-Triche M, Jacobs DG, Lomax JW, Riba MB, et al. The American Psychiatric Association Practice Guidelines for the Psychiatric Evaluation of Adults. Vol. 172, American Journal of Psychiatry. 2015. 798–802 p.
4. Coulter A, Collins A. Making Shared Decision-Making a Reality: No decision about me without me. London; 2011.
5. Perestelo-Perez L, Gonzalez-Lorenzo M, Perez-Ramos J, Rivero-Santana A, Serrano-Aguilar P. Patient Involvement and Shared Decision-Making in Mental Health Care. *Curr Clin Pharmacol* [Internet]. 2011;6(2). Available from: <https://www.ncbi.nlm.nih.gov/pubmed/21592063>
6. Nott J, Mcintosh A, Taube C, Taylor M. Shared decision-making in psychiatry: a study of patient attitudes. *Australas Psychiatry*. 2018;26(5):478–81.
7. Simmons M, Hetrick S, Jorm A. Shared decision-making: Benefits, barriers and current opportunities for application. *Australas Psychiatry*. 2010;18(5):394–7.
8. Swift JK, Callahan JL, Cooper M, Parkin SR. The impact of accommodating client preference in psychotherapy: A meta-analysis. *J Clin Psychol* [Internet]. 2018;74(11):1924–37. Available from: <http://doi.wiley.com/10.1002/jclp.22680>
9. Lindhiem O, Bennett CB, Trentacosta CJ, McLear C. Client preferences affect treatment satisfaction, completion, and clinical outcome: A meta-analysis. *Clin Psychol Rev* [Internet]. 2014;34(6):506–17. Available from: <http://dx.doi.org/10.1016/j.cpr.2014.06.002>
10. Swift JK, Callahan JL. The Impact of Client Treatment Preferences on Outcome: A Meta-Analysis. *J Clin Psychol*. 2009;65(4):368–81.
11. Windle E, Tee H, Sabitova A, Jovanovic N, Priebe S, Carr C. Association of Patient Treatment Preference With Dropout and Clinical Outcomes in Adult Psychosocial Mental Health Interventions A Systematic Review and Meta-analysis. *JAMA Psychiatry*. 2019;1–9.