

Training in Metacognitive Therapy (MCT)

Please let me first express my gratitude to you for giving me the opportunity to begin this training – it has so far been a very rewarding experience for both my own professional development and also the young people that I have been working with.

I have completed the first two workshops of my training which has focused on the theoretical basis of metacognitive therapy, how to conceptualise and introduce this form of therapy to the young people I work with, and more specifically how to use it with Generalised Anxiety Disorder (GAD). I have so far been working with two young people with GAD who have fortunately found this approach acceptable and helpful. Unlike CBT, which focuses on the detail and content of thoughts, MCT focuses on the specific thinking styles (such as rumination and worry) that people adopt when they are subsumed by emotional distress. This allows us to sidestep the sometimes messiness of getting into the details of thoughts and helps us directly target the ‘process’ by which emotional suffering comes about. I have asked for feedback from my first two young people and they have expressed a desire to continue with this form of therapy and feel that it gives them strategies to deal with their issues in a different way.

In terms of my own professional development, it has changed the way I approach my GAD cases and I feel I have benefited immensely so far. In addition, the influence of this new skill is also apparent in my supervision where I have been helping my colleagues (through supervision) reconceptualise some of their difficult cases by beginning to take notice of the ‘thinking processes’ that our young people are stuck in. This again is having an influence (more indirectly) with our young people in that it allows them to take advantage of this insight during their recovery.

My aim is to hopefully continue this journey by applying for the second half of the funding so that I can continue this training and have the opportunity to offer our young people more therapy options. The next round of workshops are due to cover OCD, PTSD, and Depression and I already have young people on our therapy waiting list that I would hope to offer this to.

Please again accept my sincere gratitude for this opportunity and I hope to be able to submit another report next year if given the opportunity.