37% of people do not complete psychosocial treatment

Who?
People with personality disorders

Findings...
• People who do not complete treatment have poorer outcomes than those who do.
• Someone who does not complete treatment costs the NHS more than someone who does.
• Clinicians and managers need to enable service users to get the most from treatment by ensuring that the environment, the staff, and the treatments all enhance readiness to engage.
A therapy non-completion rate of 37% is comparable to that of people in therapy for other types of problems. Clinicians should, therefore, be optimistic about maintaining people with personality disorder in treatment. Nevertheless, a rate of 37% is substantial, and there are associated adverse effects on outcomes (e.g., more frequent hospitalisation) and increased service costs.

Non-completion is associated with certain client characteristics, such as younger age, lower educational attainment, and lower occupational level. Non-completers also show lower ability in the skills necessary for therapy, for example poorer social problem solving, lower levels of persistence, and greater avoidance coping. Pre-therapy preparation might be helpful in increasing readiness to engage.

There are few evaluations of pre-therapy preparation for people diagnosed with personality disorder. The CLAHRC-NDL Personality Disorder study aims to develop ways of enhancing readiness for treatment. The next stage is to identify the factors which help or hinder service users with personality disorder engaging in treatment.

References