Psychotherapists dedicate their professional lives to improving the mental health and general health of those they serve. Unfortunately, many individuals in need of these services do not seek out or receive them. Numerous barriers exist that reduce access to care for many. For those who do receive psychotherapy, the services they receive are often provided in isolation and not part of an integrated health care delivery system.

This reflects a larger reality of health care in America today. Recent reports highlight the inefficient, disjointed, and often ineffective health care delivery system in which we function. Despite spending more per capita on health care than any other industrialized nation, the United States falls far below average on most major indices of health and quality of health care (Commonwealth Fund Commission, 2006). Health care is often poorly integrated, professionals infrequently work together to coordinate care, access to treatment records in a timely manner is often limited, and in general, the current approach to health care in America is largely one of symptom and disease management rather than one that emphasizes health promotion and integrated care (Barnett, in press).

Collaborative Psychotherapy

In The Collaborative Psychotherapist: Creating Reciprocal Relationships With Medical Professionals, authors Ruddy, Borresen, and Gunn provide a glimpse of the future. Fortunately, for these psychotherapists and a small but hopefully growing number of colleagues, the future is now. These authors tap into an essential component of a much-needed new phase in American health care. As they note, a significant portion of visits to primary care physicians have no organic etiology and are primarily motivated by emotional, behavioral, relationship, and lifestyle issues (Mosen, Cannon, & Reiss-Brennan, 2001). While the authors highlight the important role primary care physicians have in each patient's effective treatment, they further emphasize all that is missing and that could be added by collaborative work with psychotherapists.

Ruddy, Borresen, and Gunn present a comprehensive model for collaborative health care in which psychotherapists play an integral role in patients' overall health promotion and treatment. They expertly make the case for at least some degree of collaboration between psychotherapists and their patients' primary care physicians. This book articulates the change of mindset needed so that psychotherapists focus on the whole person and see the larger health picture that they may participate in for each of their patients. Far too often, psychotherapists focus on their role in isolation and focus on the symptoms they address in isolation. Setting up a false dichotomy of mental and physical health (and
If one becomes a collaborative psychotherapist, patients' health needs are more effectively addressed, treatment among health professionals is coordinated, and better outcomes are achieved. Further, increased referrals and enhanced professional satisfaction for the psychotherapist are likely. On a broader level, collaborative psychotherapists help improve health, reduce health care costs, and increase the efficiency of our health care system. It is interesting that the practice of collaborative psychotherapy can dramatically reduce barriers to needed treatment for many patients who might not otherwise seek and benefit from psychotherapy.

**Guidance for Moving Forward**

This book provides a well-articulated rationale in support of the need for collaborative psychotherapy. It shares the most recent research to support all assertions made. The authors make a very logical and compelling argument in favor of moving one's practice toward collaborative psychotherapy. They further provide a thoughtful review of the many levels of collaboration: from minimal collaboration, to basic collaboration at a distance, to on-site basic collaboration, to close collaboration in a partly integrated system, and to close collaboration in a fully integrated system.

The pros and cons of each are clearly laid out, and, perhaps more important, tangible steps for moving one's practice along this continuum are provided. These include the basics, such as how to initiate contacts with primary care physicians, understanding their culture and approach to health care, how to effectively communicate with them, and how to present this collaborative approach to patients, as well as how to implement a fully integrated psychotherapy practice in a medical setting. Valuable information is shared in a user-friendly manner to assist psychotherapists in deciding how far along this collaboration continuum they can proceed, with practical steps for how to do so.

A number of very useful forms, sample letters, and integrated health care tracking materials are provided in an appendix very appropriately titled The Collaborative Psychotherapist’s Toolbox. Other useful appendices include sample interview questions to aid in collaborative psychotherapy, lists of commonly prescribed medications that have side effects that may mimic symptoms of psychiatric disorders, and lists of other useful resources.

**Collaborative Psychotherapy in Action**

While this book is well researched and provides many useful resources for psychotherapists interested in evolving professionally into collaborative psychotherapists, perhaps two of its most useful and compelling features are its use of case examples and interviews with collaborative psychotherapists to bring to life the information shared in the text. The case examples bring collaborative psychotherapy to life for the reader, demonstrating its effects and impact in a very real way. The interviews with collaborative psychotherapists provide practical information on how they developed their collaborative psychotherapy practice, their day-to-day activities, the challenges they face, and the steps they take to address them.

The authors do an excellent job of highlighting how timely and effective communication between the psychotherapist, primary care physician, and patient is essential. They recommend the use of letters, telephone calls, and even e-mails to promote more integrated care, stressing the importance of the timely sharing of information. The use of e-mail is described as an excellent way to quickly share information with busy primary care physicians. While the authors correctly mention the need to be sensitive to confidentiality issues when using e-mails, they fail to provide practical information to guide psychotherapists in their ethical and appropriate use. This is a small criticism, and it may go beyond the intended scope of this book; nevertheless, readers should take active steps to preserve patient confidentiality such as by using passwords, encryption, and virus protection (Barnett & Scheetz, 2003).

**Conclusions**
This book is an important contribution that should be read by all practicing psychotherapists. While not all psychotherapists will choose to colocate their practice in a medical setting and practice the highest level of collaboration described, all can benefit from using this book to enhance their level of collaborative psychotherapy practice. In doing so, their patients' overall health care needs will be better addressed, and their overall long-term health will be enhanced. The time is now for mental health professionals to take the lead in improving health care delivery in America as well as in improving America's health overall. While no one book can address every aspect of health care or aspire to solve every issue in the nation's complex health care delivery system, this book expertly tackles one significant aspect of it and teaches the reader how to evolve to play an important role in the much-needed transformation of our profession.

References