



October 10, 2022

U.S. Preventive Services Task Force

The Psychotherapy Action Network (PsiAN), a national organization of 5000+ members that advocates for the efficacy and availability of psychotherapies with lasting benefits, recognizes the recommendation to screen adults for anxiety and depression as a pathway to help adults gain access to treatment for mental health problems. As mental health professionals with extensive experience providing therapy for adults who suffer from anxiety and depression, we support efforts to increase public awareness and access to effective therapy for these problems.

We would like to offer the following comments that we believe will make the screening process more usable for the people it is intended to help.

**As advocates for therapies of depth, insight and relationship (also referred to as psychoanalytic therapy, sometimes referred to as “talk” therapy or depth-therapy, and humanistic therapies), we note the absence of these forms of therapy in the evidence proposed to support screening. We recommend they be included for the following reasons:**

- There is an evidence base for the efficacy of psychoanalytic therapy in treating anxiety and depression. This form of therapy often leads to more enduring outcomes, and therefore more life satisfaction and fewer relapses, than briefer or manualized treatments.<sup>1</sup>
- The use of medication may enhance the impact of therapy, but often enough, guidelines such as these and popular narratives about treatment consider medication as the sole solution. Yet, without the support of therapy, many people cannot take medication consistently enough for it to provide a therapeutic effect.
- Depth psychotherapy, because it helps people understand the meaning of their symptoms and underlying concerns, provides an antidote to depression and anxiety, which often are incorrectly assumed to be “chemical imbalances,” by providing a rich sense of meaning and sense of personal agency.

**Screening instruments have both strengths and challenges in identifying levels of emotional distress associated with anxiety and depression.**

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<sup>1</sup> Shedler, Jonathan (2010). The efficacy of psychodynamic psychotherapy. *The American Psychologist* 65:2, pp 98-109,

- Anxiety and depression are terms that cover a wide range of conditions, some well within the range of normalcy and some signs of significant mental distress.
- The findings of screenings are generally based on manifest behaviors, conscious thoughts and symptoms and cannot identify underlying causes for symptoms, behaviors or thoughts.
- Even using DSM criteria, it may be difficult to differentiate serious depression from grief following a loss. Grief generally works itself out over an individual's timetable without intervention, whereas serious depression is best treated by a mental health professional.
- Similar difficulties arise in differentiating "normal" anxiety that motivates an individual to respond to a stressor from anxiety that covers serious mental difficulties or is a serious problem in and of itself.
- Screenings need to be followed by an evaluation done by a mental health professional who can make distinctions from the findings of a screening and work to develop a treatment plan based on the individual's needs.
- Anxiety and depression may be rooted in systemic causes related to cultural factors, pervasive racism, poverty, physical health problems and inadequate healthcare as well as other political-social-cultural-economic issues that fail to be addressed in policy initiatives, but will reinforce anxiety and depression.

**Screenings for anxiety and depression can only be effective if there are adequate resources for further intervention and amelioration.**

- Access to evaluation and treatment are inadequate in many communities, especially some of the most impoverished neighborhoods. People will need to be given resources for obtaining services that result from these screenings.
- In order to facilitate transition to therapy, people may need support to deal with the anxiety and fear of requesting treatment; it often requires a skilled professional to do this.
- Inadequate access to service is likely to lead to the over-prescription of psychotropic medication, often by a primary care physician rather than by a psychiatrist who has specialized training in mental healthcare.
- The scarcity of services must be addressed in order to ensure the success of the screening initiative.

Thank you for consideration of our concerns.

Sincerely,

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 Janice Muhr, PhD  
 Erika Schmidt, MSW

Psychotherapy Action Network  
 Executive Committee