



# GOOD THERAPY — FOR ALL —

COSRT STRATEGY  
2024 - 2029

# Vision

That everyone can access high-quality specialised Psychosexual and Relationship Therapies regardless of their background or context.

# Mission

To maintain the best professional standards, increase specialist knowledge, and support access to services.



## **Good Therapy for All**

### COSRT Strategy 2024 - 2029

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# Our work

COSRT is the UK's professional body for specialist therapists delivering psychosexual and relationship therapies.

Our central purpose is to ensure that the public benefit from the best therapy possible. We do this by working in three main ways:

- Setting and maintaining high professional standards
- Providing and overseeing high quality training
- Promoting research and knowledge creation

## The first of those involves us carrying out a regulatory function.

This means we work to protect the public. Practically it includes holding public registers of properly qualified therapists; ensuring therapists act within ethical frameworks; and carrying out rigorous complaints when there are concerns over professional conduct or fitness to practice.

## The second and third involve us carrying out an enabling function.

This means we work to support therapists, advance their professions, and help the public benefit from better services. Practically it includes delivering multi-platform training and conferences; accrediting qualifications; publishing an academic journal; and providing information to the public.

# Our values

Together, we do what we can to help people in need of therapeutic help. Our COSRT values help us to do that – with equality, diversity and inclusion underpinning them all.

They are what make sure that our actions contribute to people receiving the best psychosexual and relationship therapies possible – no matter who they are, or where they are.



## Ambition

We constantly seek to develop our knowledge and skills. We take opportunities to try new approaches. We learn what works and what doesn't work. We constantly strive to improve.



## Fairness

We treat people equally. We value and respect people's ideas, experience, and diversity. We are impartial and make judgements based on evidence.



## Collaboration

We work across boundaries. We share ideas, knowledge, and capacity. We foster open communication and maximise impact through productive partnerships.



## Empathy

We treat people as people. We value and respond to individual circumstances and experiences. We treat people with kindness, dignity and respect.

# Our journey

In 2019 COSRT created a new strategy. It was ambitious and proportionate. It pointed to growth. It pointed to an increased focus on public protection. It pointed to training and knowledge creation being key opportunity areas where the organisation could create impact.

## **Now in 2024, COSRT is unrecognisable from its former self.**

The organisation now operates with public protection and benefit at the core of all its work. Two public registers show the therapists who meet stringent standards to carry out relationship and psychosexual therapies. An additional public register details supervisors who meet standards to supervise specialist therapists. Standards are upheld through comprehensive Conduct Procedure, Code of Ethics and Sanctions Protocols.

The organisation now maximises professional standards through a holistic approach to training. Professional Qualifications are accredited for psychosexual and relationship therapies, including private and university providers. Thematic training courses are accredited to provide pathways to accreditation and additional routes to knowledge development. COSRT itself delivers dozens of self-access classes and seminars each year, covering diverse topics.

The organisation now operates in an outward-facing manner. The Journal of Sex and Relationship Therapy acts as a bridge to academic research around the world. Increased collaboration with other organisations sees COSRT have a voice on issues such as Conversion Therapy or NHS planning. Social media is better used to disseminate information and opinion on a range of channels.

COSRT now has a foundation from which to push for greater outcomes for the public. And we can do this because our approach is needs and evidence-based, collaborative and rooted in the explicit desire to protect the public. This helps us gain the trust of charities, decision makers, the NHS and other partners to create the change we need.

This document is our vision. Our vision not just for our own organisation but for the system in which we operate – a future where everyone can get the proper support they need when they need it, regardless of their background or situation delivering multi-platform training and conferences; accrediting qualifications; publishing an academic journal; and providing information to the public.

# What must change?

COSRT operates in an ever-evolving, often-progressive landscape. With change underpinned by social, technological, and economic shifts.

Old social norms are being challenged and moved away from. The way in which many people identify is changing. Models of personal relationships are adapting and becoming more diverse. People's individual and collective attitudes and behaviours are changing.

Simultaneously, the way that people can and do get therapeutic support is changing. Technology presents opportunities for new platforms and tools. Organisations such as the NHS face huge structural pressures. Individuals face new barriers, opportunities, and challenges.

In this context COSRT is not just working to continue business as usual. We are also seeking to adapt. To reflect and support positive change. To improve knowledge and awareness. And to tackle barriers that can stop people receiving the very best care and support that they deserve.



## Specialist therapies must be better understood

Many people understand - to greater or lesser extents - what therapy is. Although even then, the complex variation of tools and models can be opaque to non-experts. Psychosexual and relationship therapies are advanced specialisms within the broader field of talking therapy. And there is little doubt that in many instances they are even less understood than standard therapy.

Terms like sex therapy, couples' therapy, or marital therapy are regularly used. They appear in search engine results. They appear in popular culture. They can appear accessible. But these terms can sometimes be outdated or over-simplified. They do not properly reflect

the significance and uniqueness of specialist therapies. And Service Users miss opportunities to benefit from the best possible help when proper, accessible explanations of therapies are not available.

More must be done to ensure that service providers and commissioners understand the rigour and impact of psychosexual and relationship therapies.

More must be done to help Service Users understand what these therapies involve and what they can help with.

More must be done to help demonstrate the scientific evidence base behind these therapies.



## Specialist therapy must be provided by specialist therapists

The provision of psychosexual and relationship therapies requires significant, dedicated training. That equips practitioners with the skills and knowledge required to properly understand and deal with often complex presentations. It integrates biological, psychological, and sociological knowledge within a talking therapy framework.

It seems obvious that anyone providing specialist therapies would have such training. But that is simply not the case in practice.

Today we see medical professionals engage in providing specialised talking therapy with minimal training. We see general therapists provide

specialised therapy without proper training. Providing services without the necessary specialist, in-depth training in psychosexual and relationship therapies places the public at risk of harm.

More must be done to ensure that anyone providing psychosexual and relationship therapies have gold-standard training.

More must be done to ensure that employers in all sectors require specialist training and accreditation for their practitioners.

More must be done to ensure that it is seen as unacceptable for practitioners to provide specialist therapy without the proper training and accreditation.



## Specialist therapies must be integral to accessible service provision

Providing specialised psychosexual and relationship therapies can have transformational effects on Service Users. Diverse challenges can be addressed in a non-invasive manner. Services can be integrated to link specialist talking therapy with others such as Cancer treatment or sexual health.

Yet therapy provision is often uneven, under threat and inaccessible.

Across the UK, there is unevenness regarding the commissioning and provision of specialist services. Some areas see services emerge and grow; others see them decommissioned. Some services are provided within NHS structures, but others are outsourced. Some services have high levels of specialised staff, others do not.

At the same time, high-level policies and planning procedures often see the emphasis placed on medical-focused services such as sexual health or medicine. With talking therapies made secondary or excluded entirely.

Private sector provision becomes relied upon by those unable to access public services. But that is profit-driven by its very nature. And it shifts what can be unaffordable costs onto people in need of mental health support.

Current and potential Service Users can miss out on life changing services, and their outcomes can suffer.

More must be done to help decision makers understand the need for specialist services.

More must be done to share information and evidence on good practice and outcomes to drive service development.

More must be done to help ensure access to private services for all when needed.



## Specialist therapies must evolve and improve

The experiences, choices and contexts of Service Users are changing all the time. Knowledge and evidence on clinical presentations and suitable treatments are changing all the time. Practitioners therefore face a challenge of ensuring their expertise and resulting service provision keeps pace.

Yet information can be segregated and ring fenced. Rigorous academic research can appear geographically or culturally specific. Evidence on the impact of good quality services can be inaccessible. Advances in therapeutic theory and practice can be kept private rather than shared as common goods.

Training models and content can be closely guarded.

Consequently, Service User outcomes may be risked by services not based on the latest possible knowledge.

More must be done to open-up research and translate it to different contexts.

More must be done to access and share good practice and lessons from service provision to drive excellence.

More must be done to erode barriers to information sharing and collaboration between practitioners and organisations.



## COSRT must be more visible and identifiable

COSRT has had enormous success in recent years. It has grown and put in place the structures, policies and procedures needed to support the public and professionals. Its Members are better served than ever before. And the products produced by the organisation are better than ever before.

But the landscape is complex. And it can be challenging for any organisation to be seen or heard. There are many organisations offering professionals and the public often similar services. The public and professionals alike can find it difficult to understand what differentiates professional bodies and what they stand for.

Consequently, the continued growth and reach of any organisation needs constant and ambitious work.

More must be done to create and solidify a unique voice for COSRT in public discourse.

More must be done to highlight the uniqueness of COSRT's expertise and focus.

More must be done to highlight the work of COSRT and its Members to the public and wider world.

# What we will focus on

**We want everyone in the UK to benefit from easy access to excellent support to deal with psychosexual and relationship issues when needed. To do this we will focus on five key priorities:**

## 1. Improving Awareness of Therapies

**“Ensure that psychosexual and relationship therapies are better understood by the public and those responsible for delivering services.”**

Over the past 40 years we have sought to build knowledge of psychosexual and relationship issues in the UK and beyond. This has included the provision of information to the public through tailored documents and signposting.

The world is changing though. And simple models of information sharing are no longer enough. Our approach will therefore adapt to take advantage of technological opportunities. And it will focus on tailoring information and products to identified needs and opportunities.

- We will consistently use all relevant communication channels and models to raise high-level awareness on what psychosexual and relationship therapies are and why they matter.
- We will develop communication outputs to raise awareness on all aspects of the therapeutic journey, tailored to audiences and their needs.
- We will use training and events to demonstrate the wider relevance of psychosexual and relationship therapies beyond the treatment room.



## 2. Increasing the Impact of Evidence

**“Help all stakeholders have better access to relevant, high-quality evidence on what services work, why they work and why they are needed.”**

COSRT has long sought to drive research and evidence to inform practice. We own an international academic journal ‘Sex and Relationship Therapy’ which continues to develop a theoretical evidence base. And we have supported individual research projects carried out in and out of university settings. But there is still a disconnect between research and practice, whilst impact evidence can be scarce.

Our approach will be focused on improving the impact of good quality evidence, disseminating in suitable ways to target audiences.

- We will help disseminate academic evidence to practitioners in accessible, meaningful ways to help improve service quality.
- We will support researchers in translating evidence findings to different contexts to broaden and increase impact.
- We will identify evidence on service impacts and lessons, sharing them with service commissioners and policy makers to help increase service provision.

## 3. Spreading Professional Standards

**“Ensure that is only acceptable for practitioners to deliver specialist therapies with the proper training and accreditation.”**

Our Members must adhere to a detailed code of ethics, conduct procedure, and membership criteria. We hold two public registers of therapists who meet quality standards to deliver specialist services. All our work is dedicated to the quality of psychosexual and relationship therapies. But it is still acceptable, for Service Users and employers alike, for non-specialists to deliver psychosexual and relationship therapies. Our approach will now be outward facing, ensuring all stakeholders are aware of the need for the best standards possible.

- We will influence increase engagement with NHS decision makers to ensure COSRT’s ‘gold standards’ are met by relevant practitioners.
- We will engage with practitioners to improve awareness of COSRT’s standards and their positive impact on Service User outcomes.
- We will work with other organisations to share standards and increase the adoption of COSRT standards in setting such as insurance markets.
- We will pursue appropriate external accreditation for COSRT’s public registers.

## 4. Improving Professional Training

**“Improve access to and the quality of psychosexual and relationship therapy training.”**

The range of formal education courses available in the fields of psychosexual, relationship and related therapies is limited. And there is significant variation in quality between those that do exist. When people graduate from university courses in fields such as psychology, they often do so without awareness of professional pathways to psychosexual and other forms of counselling therapy. And still the public is all too often unaware of what constitutes truly high-quality specialist training.

We are focused on ensuring that those working in or seeking to work in the fields of psychosexual and relationship therapy have ready access to high quality training throughout their careers.

- We will act as convener of training providers to help share experience, expertise and good practice.
- We will work with training providers to extend existing courses to new geographies across and beyond the UK.
- We will continue to develop our training offer through the provision of new products including qualifications that complement those provided by other organisations.



## 5. Reinforcing COSRT's Position

**“Build visibility and understanding to maximise impact and reach.”**

The impact of COSRT and its work is amplified by its growing reputation and position in the sector. We already have robust relationships with a range of stakeholders. And we have a strong reputation as a reputable, specialised professional body. Now we will complement our thematic work with an approach focused on increased and more cross-cutting external engagement.

- We will convene peer organisations in collaborative exchanges and activities on challenges and opportunities of common interest.
- We will increase our public presence by creating diverse outputs drawing on research evidence and practitioner-led lessons.
- We will develop organisational positions and rapid responses to more contemporary social challenges.
- We will increase our rapid engagement on relevant issues in the public eye.
- We will improve the visibility and understanding of our Members' work and impact.



