



Treat Them Right Campaign FAQs

What's the campaign about?

ACP registered child psychotherapists are amongst the most skilled and highly trained mental health professionals working with children and young people. They are widely recognised as an essential part of CAMHS and other mental health services, and are a crucial element of the truly comprehensive system of support everyone wants to see in place, particularly for children with complex problems.

However, that support is under threat due to the uncertainty over the funding of training for ACP registered child psychotherapists and the squeeze on resources that many CAMHS are facing. Unless we tackle that twin threat, we will never have the comprehensive system of support needed to effectively treat mental health problems among children and young people.

That's why we are launching "Treat Them Right" and calling for the government to commit to training and funding the next generation of highly skilled mental health professionals so they can play a central role in delivering the comprehensive system of support for children and young people we all want to see in place.

Why is the ACP running the campaign?

We are running the campaign because we are concerned about the current direction of children's mental health services and the impact this will have on children and young people themselves, particularly those who have more complex mental health issues.

We know the work of child psychotherapists is a crucial element to many CAMHS and there is a real danger that the uncertainty over future training and funding for the profession will lead to fewer children who really need it having access to the highly specialised and long term support that child psychotherapists can consistently provide.

Why does it matter that we don't have child psychotherapists if we are getting more investment in children's mental health generally?

The government's pledge to increase investment in supporting children's mental health is hugely welcome as it has been underfunded for far too long. However, we believe the current focus on commissioning short term treatments and shifting emphasis to getting more people with basic mental health training in schools shouldn't happen at the expense of the more specialised and longer term support needed by some children and young people with more complex mental health needs. On top of that, there is a risk that schools will recognise the need for support for some of their pupils but will not have access to the kind of support needed.





At the moment, there is no guaranteed funding in place for the training of child psychotherapists beyond the end of 2019, which means we are not going to be training the vital next generation of specialist clinicians. At the same time, the squeeze on funding for CAMHS services means many are not able to employ child psychotherapists and so aren't able to draw on their skills when needed.

Spending on child and adolescent mental health forms only 6 per cent of the total spend on mental health, itself only 6 per cent of the total NHS budget. One in five NHS trusts have either frozen or cut their CAMHS budgets every single year since 2010. CAMHS are currently under pressure to increase the number and throughput of patients seen, and to keep waiting lists down whilst reducing costs. As a result, many are prioritising brief manualised treatments. Whilst these may help some children with mild to moderate problems they are not sufficient or effective for those with severe, complex or entrenched difficulties.

Everyone with a stake in children's mental health agrees that we need to develop and deliver a more comprehensive, integrated system of support for children and young people. Focusing resources only on increasing the provision of basic support, whether in the NHS or in schools, currently comes at the expense of better support for specialist CAMHS and won't deliver the system of support we all want.

Do we support the government's current plans for improving children's mental health outlined in the green paper?

We support the Government's intention that schools and colleges should be at the heart of efforts to identify mental health problems in children and young people (CYP) and as a gateway for them to access high-quality mental health and well-being support. However, the plan significantly fails to address recognised problems in the current provision of NHS mental health services for children and young people. School-based services must be seen as an adjunct to specialist NHS provision, and as a way to support access and referral to them, not as an alternative.

With a finite budget for children's mental health, there is a danger that this new structure will draw resources away from specialist CAMHS and mean those children who really need highly skilled and expert help won't get it. The approach recommended in the green paper may lead to more young people with lower level mental health problems receiving some support, but this should not be at the expense of support needed by those with more complex issues who are best supported by specialist CAMHS teams that include CAPTs.





CAMHS teams are under an enormous amount of pressure and are concerned about the future of the support they provide. A 2017 survey of CAMHS professionals working within the NHS found that:

- 84 per cent of NHS counsellors and therapists surveyed say children now need to have more severe levels of illness in order to get help.
- 67 per cent say waiting times have got longer over the last 5 years.
- 33 per cent say their service is facing downsizing or closure.
- 76 per cent say the number of posts is inadequate to meet clients' needs.
- Over 45 per cent of respondents from children's services think the range of treatment on offer is inadequate.
- 70 per cent think staff morale is inadequate.
- 36 per cent think there has been a negative change in the level of qualifications of those providing psychological therapy in the last five years.

We are also concerned that the four-week waiting time target, in isolation from action to improve and resource specialist NHS services, is likely to lead to a deterioration in services offered to CYP who are most in need. The focus on waiting times also means that there will be a pressure to focus on resources where these can be delivered more easily, which again may come at the expense of longer term support for children and young people with more complex issues, where quick solutions may be harder to find.

The specific uncertainty about funding for future training of CAPTs and the squeeze on resources for CAMHS is a real impediment to delivering the comprehensive system of support we all want for children's mental health.

Why should CAPTs receive 'special treatment' in terms of their training being paid for by the NHS?

The NHS has long recognised the crucial role and value of specialist practitioners such as CAPTs. They provide a key element of children's mental health which is why the NHS fully funds our training in this area. Since the 1970s child psychotherapists have been recognised as a core profession within the NHS and since 1995, most trainee child psychotherapists have held a full-time post within child and adolescent mental health services (CAMHS) or another NHS setting. In this way, they make a significant contribution towards CAMH services even during the period when they are in training. Moreoever, the training has an extremely high retention rate and trainees go on to work in a wide range of public CYP mental health services. Although a relatively small profession, more senior child psychotherapists play a significant leadership roles across CAMHS and the voluntary sector, and have played a major role in supporting the well-being of children in hospitals, social care, and education, as well as within mental health services.





Do we think more should be done to prevent the root causes of mental health problems rather than focusing on treatment?

It isn't a case of either/or — the government's green paper outlines the approach they want to see taken on improving our understanding of children's mental health and how we can do more to prevent children and young people developing mental health problems. Child psychotherapists have a key role to play in this area as they work with parents and infants to help build supportive relationships and intervene effectively when there are early signs of mental health problems.

Early intervention and prevention are crucial, but we also must ensure we are doing everything we can to effectively treat and support those children and young people who have developed mental health problems. The long term cost of not doing so, for them as individuals and for society as a whole, is enormous and we cannot afford that to happen.

What evidence do you have of the effectiveness of CAPTs in treating children with mental health problems?

CAPTs offer therapeutic help to CYP and their parents/carers and families from age 0-25. They also support their colleagues in mental health services and networks around children through consultation and training. We recently surveyed CAMHS professionals to find out their views on the importance of CAPTs within children's mental health. Key findings were:

- 88% per cent of respondents who currently work with a child and adolescent
 psychotherapist within their CAMHS service believe losing access to one would reduce their
 ability to offer effective, appropriate support to all the children they work with.
- 78 per cent of all respondents believe it is very important to have access to a child and adolescent psychotherapist as part of a CAMHS services.
- In relation to children and young people with more complex mental health issues, 80 per cent believe it is very important to have a qualified child and adolescent psychotherapist working as part of the CAMHS team.
- 67 per cent of respondents think that outcomes for children with more complex mental health issues would be affected if they didn't have access to a child and adolescent psychotherapist.

It is estimated that 60-70 per cent of children and adolescents who experience clinically significant difficulties have not had appropriate interventions at a sufficiently early age. For every £1 invested in a child psychotherapist's training, between £7 and £23 of net benefits can be expected. The net benefits arising from the work of a child psychotherapist in the first 10 years of practice are expected to be between £1m and £5m.





Recently, Midgley et al. (2017) conducted a systematic review of the evidence base on the impact of psychoanalytic psychotherapy for children and young people. They concluded:

- Evidence suggests that child psychotherapy is effective with a range of disorders, including emotional disorders such as anxiety and depression, which are among the most common mental health problems in children and young people.
- Although designing long-term evaluations is complex, there is a growing evidence base for effectiveness with children who have experienced abuse, maltreatment and trauma
- Several important studies looking at treatment of child and adolescent depression, including
 a major HTA-funded study by Goodyer et al. (2016), have indicated that psychodynamic
 treatment is equally clinically- and cost-effective as other well-known treatments, such as
 CBT, and may be more acceptable to many young people than medication alone. These
 studies led to the National Institute for Health and Care Excellence (NICE) identifying
 psychodynamic treatment as an evidence-based treatment in its guidelines on child and
 adolescent depression

Child and adolescent psychotherapists offer a specialist function as part of a multidisciplinary team, offering competences including:

- Specialist assessment and treatment options, both short-term and long-term
- An ability to work with and treat the most complex cases and the network of agencies surrounding them
- An ability to work with the most disturbed and disturbing children and young people and contain the anxiety they create within the family and wider network, including school
- An extensive knowledge of child development and an understanding of attachment issues that can create difficulties in a child's relationships with others
- The depth of training and experience to manage organisational dynamics and processes
- Supervision and training of workers in specialist CAMHS as well as in universal service

Competence framework: http://childpsychotherapy.org.uk/competence-map-child-and-adolescent-psychoanalytic-psychotherapists-point-qualification

What do we think the focus for children's mental health services should be?

We believe we need to concentrate on building on the high-level skills, expertise and commitment of CAMHS staff that we currently have in place and remove the pressure and uncertainty they face through guaranteed longer term funding and support. A key element of that is the long term funding commitment for training CAPTs and ensuring that all CAMHS can call on the support of CAPTs to support the children and young people who are referred to them. Alongside that, we need better integration of all the services that work with families and children and young people, from early years development through schools, colleges, universities and employers, to create a much more joined up system of support with CAMHS services at its heart.





This relies on the presence of skilled clinicians in CAMHS who are able to understand and communicate the challenges facing CYP with complex emotional, behavioural and mental health difficulties.

Are we against investment in mental health support in schools?

Not at all. We just don't want to see it done at the expense of supporting CAMHS teams who play a key role in building a more comprehensive system of support for children's mental health. There is a real risk with the current approach, that those children and young people who most need specialist help are going to miss out. There are also clearly going to be those children with the most complex and challenging difficulties and behaviours, who cannot access support in schools. These children and young people find the school environment challenging enough and would need access to multidisciplinary teams and treatment, provided in a safe and separate space to the school environment.

It takes a lot of time and resources to train an CAPT – would that time and money be better spent in other areas?

The government has rightly committed to parity of esteem between mental health and physical health, but that rhetoric is not reflected in the commitment to training highly skilled professionals. No-one would question the need to train expert surgeons and doctors, alongside nurses and other key health professionals, and that is how we should approach mental health training. We believe CAPTs are a crucial element of a truly comprehensive system of support for children's mental health and other CAMHS professionals strongly agree with us, as our recent survey pointed out. Our children and young people need access to the type of specialist and long term support that CAPTs provide.

Isn't this just a self-interested campaign, to preserve the role and status of CAPTs in the CAMHS system?

Our focus is on what we can do as a profession to help create a truly comprehensive system of support for children's mental health. We believe the current uncertainty over the funding of training for CAPTs and the continuing squeeze of resources on CAMHS is a real danger to ever getting that system in place.

That's why we're campaigning for all CAMHS services to have access to an ACP registered child psychotherapist, so every child can benefit from their skills, expertise and experience as part of a truly comprehensive system of support.

For all enquiries

please contact the ACP office on 0207 922 7751 or at treatthemright@childpsychotherapy.org.uk