

ACP Annual Conference, Glasgow 7-9 June 2019



The 2019 ACP Annual Conference is kindly being supported by the office of the Lord Provost, Glasgow and National Health Education for Scotland

About the 2019 Conference

This year's ACP annual conference is about the current state and direction of our profession. This affects all of us, and we hope that the whole membership will enter the debates and discussions.

The conference isn't just about how we can meet the challenges of today or tomorrow, it's also about celebrating and re-establishing our profession's foundation within children's mental health provision.

Child and adolescent psychoanalytic psychotherapy is a core profession within CAMHS and provides a unique perspective on the child and young person's experience.

Yesterday, Today, Tomorrow: Each day of the conference will focus on a part of the conference theme, to provide delegates with an historical arc, reaching from the past and considering our profession's future.

In 2019, the ACP turns 70, our own Scottish training turns 30. We have a wealth of history, experience and ideas to share and develop and we want to do this alongside our peers and members. By sharing our past, we might better understand our future, so this conference will provide a retrospective and prospective.

Conference Chairs

Andrew Dawson, Monica Lanyado, Graham Shulman and Joanne Young.

Presenters

Jackie Alexander, Tess Bailey-Sayer, Paul Bell, Jacky Bone, Andrew Briggs, Stephen Briggs, Francesca Calvocoressi, Judith Cousins, Andrew Dawson, Ruth Dunstan, Elizabeth Edginton, Jane Elfer, Toby Etterley, Angela Evans, Ruth Glover, Debbie Hindle, Ann Horne, Claire Hopkins, Matthew Jenkins, Mary Lindley, Marina Manassei, Monique Maxwell, Sheila Miller, Caroline Newton, Louise O'Higgins, Jemima Phorson, Emily Ryan, Andrew Satchwell, Rajni Sharma, Rinat Shemesh, John Shemilt, Graham Shulman, Lydia Tischler, Jenifer Wakelyn, Sylvia Wilson and Biddy Youell.

Scottish Organising Committee

Lynne Conway, Andrew Dawson, Debbie Hindle, Carol McArthur, Graham Shulman, Gillian Sloan-Donachy, Leanne Stelmaszczyk, and Joanne Young (Chair)



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Andrew Dawson is the Professional Lead for Child Psychotherapy in Greater and Glasgow and Clyde (GGC) CAMHS. He trained at the Scottish Institute of Human Relations. Andrew's doctoral research was into Stuck Cases in CAMHS and he continues to offer consultation, intervention and training in this area. He has developed an interest in joint formulation and the emotional regulation of the network around the child.

Andrew plays a lead role in the West of Scotland Managed Clinical Network for Harmful Parent-Child Interactions; providing training to health, social work, the Reporter to the Children's Panel, and to Panel members. Clinically his work has focused on trauma, parent-child interventions, developing personalities and perplexing cases. As well as leading the team in GGC, Andrew supports reflective practice across Tier 4 services in Glasgow.

Monica Lanyado is a training supervisor for IPCAPA at the British Psychotherapy Foundation. She was founding Course Organising Tutor of the Child and Adolescent Psychoanalytic Psychotherapy Training at Human Development Scotland - the body who succeeded the Scottish Institute of Human Relations (SIHR). She teaches, lectures and supervises in the UK and internationally.

Her publications include *The Presence of the Therapist: Treating Childhood Trauma* (2004) and *Transforming Despair to Hope: Reflections on the Psychotherapeutic Process with Severely Neglected and Traumatised Children*, (2018). She has co-edited 6 books with Ann Horne including *The Handbook of Child and Adolescent Psychotherapy: Psychoanalytic Approaches* (1999, 2009), and 4 books in the Independent Psychoanalytic Approaches with Children and Adolescents series, all published by Routledge.

Graham Shulman is a Consultant Child and Adolescent Psychotherapist and Head of Child Psychotherapy in CAMHS, NHS Lanarkshire. He is a past Joint Editor of the *Journal of Child Psychotherapy*, is an Assistant Editor of the *Infant Observation Journal*, and is Joint Editor of and contributor to *The Emotional Experience of Adoption: A Psychoanalytic Perspective* (Routledge, 2008) and *The Non-Linear Mind: Psychoanalysis of Complexity in Psychic Life* (Karnac, 2017).

He is an external tutor on the Scottish Child Psychotherapy Training, and for over 10 years has taught on a multi-disciplinary and multi-agency professional development Infant Mental Health Course. He has published several articles on clinical and theoretical themes and on links between psychoanalysis and literature and also chaos theory.

Joanne Young is a Child & Adolescent Psychotherapist, currently teaching on the Psychoanalytic Observation and Reflective Practice course at Human Development Scotland, the body who succeeded the Scottish Institute of Human Relations (SIHR). She trained at the SIHR where her M.Phil dissertation looked at the psychodynamics of school medicals and her doctoral research, conducted in a Paediatric clinic, was on the use of the Winnicott Squiggle game to shed light on the internal worlds of diabetic children. She has worked extensively in CAMHS, where much of her work was with adoptive families and children in the care system.

In addition to her psychotherapy role, Joanne is a Paediatric doctor and the Lead Clinician for Looked After Children as well as Medical Adviser to the Fostering & Adoption Panels in NHS Borders. Joanne is also the lead of the Scottish members' group of the ACP and chairs the Scottish regional group meetings.



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Conference Dates and Times

Friday 7 June

Registration opens 3pm
First Session 4pm
Evening Reception 6.45pm

The ACP is proud to announce that the Office of the Lord Provost of Glasgow is hosting a Civic Reception for ACP conference delegates

Saturday 8 June

Registration opens 9.30am
First Session 10am
Evening Reception 7pm

Sunday 9 June

Registration opens 9.30am
First Session 10am
Close of Conference 2pm
(A light lunch will be included for delegates earlier in the day)

Venues

Conference Venue

Strathclyde University, Technology & Innovation Centre, 99 George St, Glasgow G1 1RD

Friday Evening Reception Venue

Glasgow City Chambers, 82 George St, Glasgow G2 1DU

Saturday Evening Reception Venue

Merchants House, 7 West George St, Glasgow G2 1BA

WiFi

WiFi details for Strathclyde University

Network: TIC Conferences
Password: Stenhouse



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Conference Programme

Friday 7 June			
15:00-16:00	Level 2 Foyer	Delegate Registration	
16:00-16:10	Auditorium (Level 1)	Welcome to the Conference	Conference Chairs
		Main Paper	
16:10-16:40		<i>Scots in psychoanalysis and psychoanalysis in Scotland</i>	Presenter: John Shemilt
			Chair: Monica Lanyado
16:40-16:55	Comfort Break		
		Main Paper	
16:55-18:25	Auditorium (Level 1)	<i>On the Move</i>	Presenters: Debbie Hindle, Ann Horne, Monica Lanyado, Sheila Miller, Lydia Tischler and Bidy Youell
			Chair: Joanne Young
18:30-18:45	Move to Glasgow City Chambers, 82 George St, Glasgow G2 1DU		
18:45-19:00	Glasgow City Chambers	Drinks Reception	
19:00-19:10		Welcome to Glasgow	Bailie Soryia Siddique <i>representing the Lord Provost and</i> Andrew Dawson from the ACP
19:10-19:45		Drinks Reception	
Saturday 8 June			
09:30-10:00	Level 2 Foyer	Delegate Registration	
10:00-10:10	Auditorium B&C (Level 2)	Welcome to the membership	Isobel Pick, Chair ACP
		Opening remarks	Conference Chairs
		Main Paper	
10:10-11:25		<i>Time past, Time Present, Time Future: some reflections on the development of a sense of duration as a foundation for a durable object, going on being and sense of self</i>	Presenter: Graham Shulman
			Chair: Jenifer Wakelyn
11:25-11:45	Refreshment Break		



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11:45-12:45		Parallel Paper	
	Conference Room 1 (Level 3)	<i>Taking the depressive position in future Child Psychotherapy research: A qualitative case study from the TIGA-CUB Randomized Controlled Trial feasibility study</i>	Presenters: Jackie Alexander, Elizabeth Edginton and Jemima Phorson Chair: Nick Midgley
		Parallel Paper	
	Conference Room 2 (Level 3)	<i>Two is more than double one</i>	Presenters: Jacky Bone, Louise O'Higgins Chair: Debbie Hindle
	Conference Room 3 (Level 3)	<i>Child Psychotherapy Today: Where is the Father?</i>	Presenter: Andrew Briggs Chair: Graham Shulman
		Parallel Paper	
	Conference Room 4/5 (Level 3)	<i>The Taboo of Love for Children in Care: Its emergence through the transference relationship and in the system around the child</i>	Presenter: Angela Evans Chair: Lynne Conway
	Parallel Paper		
Conference Room 6/7 (Level 3)	<i>Observation and attention: psychoanalytic infant observation and contemporary practice in mental health services for children in care.</i>	Presenter: Jenifer Wakelyn Chair: Katie Lewis	
12:45-13:45	Lunch		
13:05-13:45	Conference Room 4/5 (Level 3)	Leadership Workshop for ACP Members see details on page 8	Facilitator: Eve Grainger
13:45-14:00	Group Photo - Level 2 by the ACP Reception desk		
14:00-15:00		Parallel Paper	
	Conference Room 1 (Level 3)	<i>The alarming truth about truth seeking in the therapeutic process - Are our profession and body of knowledge under attacks?</i> <i>Truth to Tell - the impact of lies and distortions on the developing mind</i>	Presenters: Rinat Arnsberg and Francesca Calvocoressi Chair: George Crawford



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		Parallel Paper	
	Conference Room 2 (Level 3)	<i>Give us a place to stand: how can child psychoanalytic psychotherapists secure a position of influence in a radically changing healthcare landscape?</i>	Presenters: Ruth Dunstan, Claire Hopkins and Mary Lindley
			Chair: Jill Mackenzie
		Parallel Paper	
	Conference Room 3 (Level 3)	<i>Working Together: Issues and Dilemmas of Intensive Case Work and Supervision in Training</i>	Presenters: Debbie Hindle, Rajini Sharma and Andrew Satchwell
			Chair: Janet Shaw
		Parallel Paper	
	Conference Room 4/5 (Level 3)	<i>I like it when people fall down. Violence, Self-harm and sex work: constructive, destructive or reconstructive? Reflections on Psychotherapy with three adolescent girls with emerging borderline presentations, within an inner London, Voluntary-sector, self-referral service for 12-25 year olds</i>	Presenters: Paul Bell and Ruth Glover
			Chair: Gillian Sloan-Donachy
15:00-15:30	Refreshment Break		
15:30-17:00	ACP Annual General Meeting		
17:00-18:30	Delegate Break		
18:30-18:45	Move to Merchants House, 7 West George St, Glasgow G2 1BA		
18:45-19:00		Welcome drink at Merchants House	
		Short Paper	
19:00-19:30	Merchants House (Main Hall)	<i>A Personal Reflection of the Early History of Child Psychotherapy</i>	Presenter: Sylvia Wilson
		Celebration for 30 years of the Scottish Training	Presenter: George Crawford
			Chair: Annie Baikie
19:30-20:30	Dinner		
20:30-11:30	Ceilidh		



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Sunday 9 June			
09:30-10:00	Level 2 Foyer	Delegate Registration	
10:00-10:10	Auditorium B&C (Level 2)	Welcome to the Conference	Conference Chairs
		Main Paper	
10:10-11:25		<i>Getting Child Psychotherapy Right for Every Child: A clinical formulation and care planning tool to integrate a well-being and developmental approach for practice.</i>	Presenter: Andrew Dawson Chair: Monica Lanyado
11:25-12:00	Refreshment Break		
12:00-13:00		Parallel Paper	
	Conference Room 1 (Level 3)	Time-Limited Adolescent Psychotherapy (TAPP): A manualised, evaluated, BPC-accredited, evidence-based, 20-session adolescent psychotherapy	Presenters: Monique Maxwell and Stephen Briggs Chair: Rajni Sharma
		Parallel Paper	
	Conference Room 2 (Level 3)	Child Psychotherapy in Schools: a psychodynamic impact model for child mental health in disadvantaged areas	Presenters: Matthew Jenkins and Emily Ryan Chair: Francesca Calvocoressi
		Parallel Paper	
	Conference Room 3 (Level 3)	Thinking outside the room	Presenters: Jane Elfer and Caroline Newton Chair: Annie Baikie
		Parallel Paper	
Conference Room 4/5 (Level 3)	When Love Needed a Road': themes of loss, restoration and re-imagining in work with adopted children and their parents, and in the development of a small not-for-profit organisation.	Presenters: Tess Bailey-Sayer, Judith Cousins, Toby Etterley and Marina Manassei Chair: Andrew Dawson	
13:00-13:50	Auditorium B&C (Level 2)	Plenary and Thanks	Conference Chairs



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Leadership Workshop for ACP Members

Saturday 8 June
13:05-13:45pm

What does career progression mean to you? Is it something you would hope/want the ACP to help you think about/prepare for? Does your idea of career progression include thinking about leadership positions – either in the NHS, the independent and private sector, or the ACP? Are you feeling stuck in your career and not sure which way to go?

If you have answered yes to any of the above questions, the workshop at the Conference is a space where we would like to hear your thoughts about these matters.

This workshop is a preliminary conversation to help inform whether a more substantial ACP event on career progression might be something members would want to attend, and, if so, what content they would want to see included.

The 40-minute workshop will take place in the one hour lunch break on **Saturday 8 June**, and members are, of course, encouraged to bring their lunch to the workshop!



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**Taking the depressive position in future Child Psychotherapy research:
A qualitative case study from the TIGA-CUB Randomized Controlled Trial
feasibility study**

Jackie Alexander, Dr Elizabeth Edginton, Jemima Phorson

About the Session:

This presentation will propose that, rather than empirical research - and the Randomised Controlled Trial (RCT) in particular - being seen as the antithesis of Psychoanalytic Child Psychotherapy, the future lies in researchers and clinicians working together, using robust and suitably adapted quantitative and qualitative research methodologies which are acceptable to clinicians, the academic community, funders, and commissioners alike.

The presentation will explore some of the challenges this proposition raises, including the need for understanding and adaptability, and the importance of genuine reflection on different approaches and viewpoints. The presentation will endeavour to illustrate this using a qualitative conversation analysis case study based (with full ethics) on audio-recorded session material and supervision notes from the manual adherence in TIGA-CUB (Trial on improving Inter-Generational Attachment for Children Undergoing Behaviour problems) - a feasibility RCT comparing 12-week manualised Psychoanalytic Child Psychotherapy and Treatment as Usual as second-line treatment for children aged 5-11 with treatment-resistant conduct disorders and their primary carers.

The presentation will start with a clinical vignette, using a familiar approach to engage the audience. The wider context will then be provided via a brief outline of the methodology and key results from the TIGA-CUB feasibility study, with the aim of demystifying some of the terms and research methods used, e.g. 'two-arm, pragmatic, parallel-group, multi-centre, individually randomised (1:1) controlled feasibility trial (n=32) with blinded outcome assessment at 4 and 8 months', which aimed to develop an 'optimum practicable protocol for a confirmatory, pragmatic RCT (primary outcome child's behaviour)'.

The methodology of the qualitative conversation analysis introduced in the clinical vignette will then be outlined, and the Child Psychotherapists who worked on the case will provide the clinical background to the material. The findings from the conversation analysis will be presented, illustrating with clinical material the linguistic strategies used by the Child Psychotherapists to achieve a successful outcome.

The lead researcher and the Child Psychotherapists will then converse about the meaning and interpretation of the conversation analysis findings, and what the conversation analysis and participation in the wider feasibility RCT contributed to their understandings of this case, of similar cases, and of the empirical research process overall.

It is hoped that, by increasingly intertwining the empirical and the clinical throughout, the presentation will stimulate questions and debate from the audience about how researchers and Child Psychotherapists can work together, with a view to the development of a potential interim sub-study and then a large-scale trial in this area which it is hoped will enhance the future research credibility of the profession.



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Jackie Alexander trained as a Child and Adolescent Psychotherapist at Birmingham Trust for Psychoanalytic Psychotherapy and qualified in 2009. Since qualifying, Jackie has worked as a Child and Adolescent Psychotherapist at Dudley CAMHS where she is currently a Consultant Child and Adolescent Psychotherapist and Pan-CAMHS Team Manager for both Dudley and Walsall CAMHS. Jackie specialises in Under 5s, Looked After Children and complex cases. Prior to training as a Child Psychotherapist, Jackie's background was working in MLD special schools.

Dr Elizabeth Edginton trained as a Child and Adolescent Psychotherapist at Birmingham Trust for Psychoanalytic Psychotherapy and qualified in 2010. Since qualifying, Elizabeth has worked as a Child and Adolescent Psychotherapist in Sure Start, Harrogate CAMHS, York CAMHS, and Oxford Health NHS Foundation Trust CAMHS. From 2011-2016 she was Research and Development Lead at NSCAP and from 2013-2018 also worked as a Clinical Studies Officer and Research Fellow for COMIC under Professor Barry Wright.

From 2015-2018, Elizabeth was Chief Investigator on TIGA-CUB, mentored by Professor David Cottrell. She also taught on the MSc DPCP at the Anna Freud Centre and was joint chair of the ACP Research Committee. Elizabeth is currently a Senior Child and Adolescent Psychotherapist at Dudley CAMHS working with Under 5s with attachment difficulties and teaches on the IPCAPA/Anna Freud Clinical Doctorate. Prior to training as a Child Psychotherapist, Elizabeth was a university lecturer.

Jemima Phorson trained as a Child and Adolescent Psychotherapist at Birmingham Trust for Psychoanalytic Psychotherapy and qualified in 2014. Since qualifying, Jemima has been a Child and Adolescent Psychotherapist at Dudley CAMHS and is currently a Specialist Child and Adolescent Psychotherapist in CSE. Jemima has been ACP Treasurer since 2018. Prior to training as a Child Psychotherapist, Jemima worked in financial services and as a teaching assistant in schools.



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‘When Love Needed a Road’: themes of loss, restoration and re-imagining in work with adopted children and their parents, and in the development of a small not-for-profit organisation.’

Tess Bailey-Sayer, Judith Cousins, Toby Etterley and Marina Manassei

About the Session:

We’d like to contribute to the debate at conference on the adaptations that are required of us as a profession currently. While recognising the need to resolve issues from the past, the focus of our presentation will be about allowing the future to emerge in a hopeful and creative way. As Rilke wrote, ‘The future enters into us, in order to transform itself in us, long before it happens.’

We are a multi-disciplinary team working as a not-for-profit company and Charitable Trust in Shropshire, where historically there has been no Child and Adolescent Psychotherapy in the local CAMHS teams and existing services are increasingly overloaded.

We will offer a presentation exploring parallel themes of loss, restoration and re-imagining in the lives of the adopted children we work with and their parents, and in our own working lives. How do we make space to mourn the potential which will always remain unfulfilled, accept the situation we are in with all its challenges, and embrace the new opportunities which lie before us? How do we develop an organisation in which the souls of therapists and families can thrive?

We will make links between clinical case examples and aspects of our own experience as we explore the ways in which adoptive parents and their children work through the loss of damaging or longed for relationships and find a new way of relating and imagining the future, and alongside this, consider the work we are engaged in as an organisation in developing a clinical setting which is a true reflection of our values and aspirations.

Just as adoptive families have to find ways of understanding and resolving old relationships whether in external reality or in the internal world, while forming new relationships and a new family system, so we have to bear in mind our previous working lives and relationships while building a new clinical organisation.

As part of this discussion, we will include ideas that inform and guide our thinking, which come from our own analytic tradition, but also from current thinking about organisations and leadership: using the model of ‘self-managing teams’, promoting Teal values within an ecologically and emotionally healthy workplace (1), and leading from the emerging future (2). Within this, we will describe how we have used ideas from Quakerism in implementing methods of discernment both individually and as a team as a means of reaching shared and spirit-led decisions.

- (1) ‘Reinventing Organisation’ A guide to creating organisations inspired by the next stage of human consciousness. Frederic Laloux
- (2) ‘Leading from the Emerging Future’ From ego-system to eco-system economies. Ottoe Scharmer and Katrin Kaufer



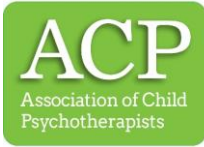
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Sea Change Psychotherapy, a small not-for-profit organisation, was born in Shrewsbury in December 2016, founded by Tess Bailey-Sayer. The aim was to provide specialist services not otherwise available in Shropshire, to local families at a rate they could afford.

Tess was working at the time with one other Child and Adolescent Psychotherapist, and an art Psychotherapist. Since then she has been joined by two more Art Psychotherapists, two more Child and Adolescent Psychotherapists, a Counselling Psychologist, an Adult Psychotherapist and an Integrative Adult and Child Psychotherapist in Training. Our work is predominantly with Adopted children and their families, but also with fostered children and self-referring families.

The Sea Change Trust was founded in January 2019 in order to offer targeted interventions to vulnerable groups, free at the point of delivery.



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Two is More Than Double One

Jacky Bone, Louise O’Higgins

About the Session:

In this presentation we will explore the task of developing professional identities as Child and Adolescent Psychotherapists (CAPTs) in Child and Adolescent Mental Health services (CAMHs) within the National Health Service. We share the experience of having worked in the NHS throughout our adult lives and each having worked in a CAMH service as a lone qualified CAPT without any senior colleagues physically present to share the responsibility of developing and maintaining a mature professional identity within our respective multi-disciplinary teams.

We suggest that one way of conceptualising the task is to acknowledge the internal and external pulls between ideology and compromise, isolation and collaboration, status and personal authority, power and responsibility, exclusivity and inclusivity, self-interest and a shared responsibility for the service, narcissism and tolerance of difference. We will share some of our experiences within our respective multi-disciplinary teams within a changing NHS and discuss situations that bring to life the above struggles.

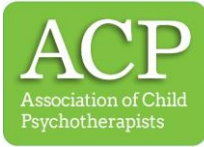
We will go on to describe how we come together to work with CAMHs colleagues (working in the most socially and economically deprived areas, covered by our Trust, with some of the most unwell children, young people and families) in collaboration with the Northern School of Child and Adolescent Psychotherapy by drawing upon some of the time served riches of our profession (seminars on work discussion and psychoanalytic theory). Through these seminars we endeavour to think and maintain focus on the needs of families from a relational perspective.

We hope delegates attending the presentation will share their own experiences of developing and maintaining their professional identities and working collaboratively with colleagues within their own services.

Biographies:

Jacky Bone trained at the Tavistock and worked clinically in a Child and Adolescent Mental Health Service in Durham. She taught on the Psychoanalytic Observational Studies Course at Northumbria University and was a Service Supervisor for the Northern School of Child and Adolescent Psychotherapy. She currently works for Teesside Children and Young Peoples Service in a teaching and supervisory role.

Louise O’Higgins trained as a Registered General Nurse and later a Midwife. She completed the Psychoanalytic Observational Studies Course during her midwifery career, which inspired her to complete clinical training. She trained at the Northern School of Child and Adolescent psychotherapy and currently works clinically in a Child and Adolescent Mental Health Service in Northallerton and in a teaching capacity in Teesside Children and Young Peoples Service.



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Child Psychotherapy Today: Where is the Father?

Andrew Briggs

About the Session:

The history of psychoanalytic thinking demonstrates a conceptual development away from the centrality of the father, and to the centrality of the infant and the mother and infant. Attempting to understand the various ways fathers present in clinical work today one is severely hampered when seeking guidance from the available modern literature. This is because this one half of the parental couple is under-represented in what is an often overly mother-centric approach to understating clinical work.

Recognizing the secondary role allotted the father by Fairbairn (1941), Meltzer (1988) and Winnicott (1964), I will be offering a re-conceptualisation of the father, giving him greater parity with the mother. Through re-visiting the Oedipus complex, and reviewing our understanding of the child's development of the capacity to develop a concept of self, I will discuss the role of the father mainly through Freud, Britton and Loewald.

Although focusing upon the father the emphasis is the father in context; with his partner and their children. This context will include the role of the mother in the father's mind, the role of the father in the mother's mind, the role of their fathers in their minds, and the external and internal father for the children. These complicated permutations of internal and external relationships are the basis of a clinical model used to work fathers and their families, the foundation of which is seeing each individual protagonist in terms of a three-person psychology.

One of the key aspects of the father's role is taken to be boundaries. How individuals keep their own boundaries within themselves and with others is fundamentally important to their mental health. The paper's clinical component is the discussion of the boundaries between a mother and her 11 year old son in the absence of the father. Already known to CAMHS through his ADHD diagnosis, the boy was referred for psychotherapy following a temporary exclusion from school for persistently intrusive behaviour towards girls. The clinical work was exclusively with his mother, to help her recognise how his behaviour expressed her relationship with him. Mainly through her transference use of me as a male psychotherapist, we eventually arrived at a point where she was able to ask the boy's father to attend addendum sessions designed to help them work together as parents. In this way the boy's intrusive behaviour diminished, as the mother now realised she could rely upon the father to help her draw and maintain appropriate boundaries with their son.

The paper will be read to stimulate participant discussion of its clinical context within the framework idea that – not better understanding the role of the father compromises our understanding of child development. One conclusion it arrives at is the realisation that even a male therapist is no substitute for the inclusion of the real father. Further, that more research and papers are needed about fathers in contemporary society, to fill the gap in the literature, and to encourage the inclusion of fathers in therapeutic interventions.

Biography:

Andrew Briggs is the retired Head of Child Psychotherapy, Sussex Partnership NHS Foundation Trust.



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**Time-Limited Adolescent Psychotherapy (TAPP):
A manualised, evaluated, BPC-accredited, evidence-based,
20-session adolescent psychotherapy**

Stephen Briggs, Monique Maxwell

About the Session:

We present and discuss a new, protocol-driven, CAMHS-embedded, in-depth adolescent-centred, time-limited psychodynamic psychotherapy (TAPP), supported by clinical material to illustrate the model, and outcome data from recent Audit and Service Evaluations in Leicester CAMHS.

TAPP is an in-depth psychodynamic psychotherapy in which problems, and difficulties are formulated as disturbances of the adolescent developmental process. Collaboratively, with the young person, the aim is to identify and work with a developmental focus. TAPP consists of 20 weekly sessions (4 Assessment; 16 Treatment) followed by a post-treatment review. By identifying, together, and then working with a developmental focus for therapy, within a clinical formulation, the aim of TAPP is to increase the young person's capacity to engage with their developmental challenges - and opportunities - and thus reduce problematic feelings, thoughts, symptoms, behaviours and risk.

The TAPP therapeutic model recognises and addresses evolving contexts for adolescence: societal changes mean adolescence can be increasingly fraught, pressured and complex: young people negotiate a world of apparent infinite choice, online and social media, divergence masking inequalities, and persistent uncertainty compounding underlying vulnerabilities - alongside new ways of relating, of friendship, of experiences of intimacy and separateness, and of relating to the body, sexuality and gender.

In this presentation we will introduce the model, its current applications and BPC-accredited training. We will discuss findings from the 2018 Audit and Service Evaluation of TAPP in Leicester CAMHS. This involved, a retrospective analysis of case files with data extracted by using an audit tool for both quantitative and qualitative analysis, analysis of outcome monitoring data and assessment of patient experiences.

Key feasibility questions for a future clinical trial were also examined and will be discussed. TAPP processes will be illustrated through clinical examples.

Findings from the audit and service evaluation showed that, for a cohort of young people presenting with severe clinical problems, distress and risk (as measured by CORE-OM), there were high rates of attendance (65% attended all sessions) and completion (100% those starting treatment sessions completed). Levels of problems, risks and distress reduced between the start of assessment and end of treatment (CORE-OM).

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Post-therapy qualitative assessment of young people’s experiences showed high levels of satisfaction and reflections on the changes they experienced through TAPP. For some young people, interest fostered in the therapeutic process led towards a wish to undertake further therapy in due course.

TAPP is one of several innovative time-limited therapies offered by Child and Adolescent Psychotherapists. TAPP appears to be a promising intervention, working to achieve change, growth and reduction of problems through focus on the developmental processes of adolescence. It appears to be experienced by young people and clinicians, as a timely and helpful intervention, including for those who have had previous interventions and those who present with severe and complex difficulties and problems.

Biographies:

Stephen Briggs is a Professor of Social Work at the University of East London, and Honorary Professor, University of Nottingham. Member of the Tavistock Society of Psychotherapists, Fellow of the Academy of Social Sciences. Formerly Consultant Social Worker in the Adolescent Department, Tavistock and Portman NHS Foundation Trust.

Monique Maxwell is a Child and Adolescent Psychotherapist, Leicester CAMHS



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Truth to Tell- the impact of lies and distortions on the developing mind
Francesca Calvocoressi

The alarming truth about truth-seeking in the therapeutic process –
Are our profession and body of knowledge under attacks?
Rinat Shemesh

About the Session:

Francesca's Presentation

The purpose of this paper is to consider the impact of lies and distortions on the developing minds of children and young people. Parents and carers, for many complex reasons, may distort or hide important and unpalatable truths from and about their children. The unspoken and hidden, however, lurk in the shadows of these families, and may come to be expressed by children and young people in a variety of symptoms for which they are referred. 'Knowing what you are not supposed to know and feeling what you are not supposed to feel', as Bowlby put it, has a profound impact on the emotional development of children and adolescents. The subject of family taboos will be considered in the light of Klein's theory of the epistemophilic urge and Bion's theory of thinking linked to the container-contained relationship with primary object.

Some short clinical examples will illustrate the ways in which three particular families were unable to face the truth, and where the distortion of reality was at the root of the child's problems. The task of the psychotherapist is to help the patient to find a way to the truth, as Hannah Segal expressed eloquently. In these cases, however, I suggest that it is the parent work above all that is central in helping families overcome denial, which may be linked to a deep sense of shame and grief, as well as rage. The child's disturbance, being connected to the denial of truth, can then come to be understood as an extreme communication to the parent or carer where open communication has not been possible. Where this is not possible, permanent psychological damage may result.

In parallel, I would like to suggest that, today, we are profoundly affected and confused by the Post Truth or Post Reality political world we find ourselves in. We no longer have trust in our political leaders / parental figures, as they appear either not to listen or to tell brazen lies, and then deny that they have lied. Debate is framed by appeals to emotion and facts are relegated to the rubbish heap. This has the effect of either disillusionment in the voting population and a disillusioned turning away, or alternatively and more worryingly a search for certainty, to be found in the extreme wings of existing or new political parties.

Rinat's Presentation

Hanna Segal (2001) states: *"the analyst is a good object in the sense of being a more truthful object."*

At the core of my paper is an attempt to truthfully tackle and reveal the current 'today' predicament of child psychotherapy as a truth-seeking process. I will begin with a description of the development of our core – the significance and importance of maintaining the setting for truth-seeking experience through the establishment of transference relationships as the core of our work as child psychotherapist and its parallel significance on the therapeutic work of discovering and understanding of our patients' core - the reality of their being, as it developed through their early experiences. I would then suggest a platform to discuss the threats to the viability of these relationships in the current climate.



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On one hand I will suggest that our core identity and tool lie in our internal setting, our ‘frame of mind’. I will be following on this view Hanna Segal (2001): *“It is only in a particular setting that we can study the evolution of the transference. The setting, she continued, reflects the psychoanalyst’s frame of mind.”*

I will suggest that the therapist’s frame of mind is the crucial aspect of the setting for allowing the establishment of a transference relationship. It enables the understanding of, mobilising and reliving of the child’s inner processes. However, I will further stress that what is currently emerging from our patients, in today’s caseloads, is a living environment which works against the therapist’s transference enabling state of mind; our frame of mind—the core of our profession is under threat either of dropping the ‘truth – seeking’ process or of dropping the clinical case.

I will then suggest the start of a discussion about the threats to the viability of these relationships and to our profession in the current universal climate. I will try to think what the care system’s truth is and to wonder whether we need to take up truth-seeking within the system as part of our core role. I will suggest that we should consider in this discussion what are CAMHS’ truths and motivations; what are the care system’s truths and motivations and what happens when dishonesty gets into those systems, through flexibility and contradicts the truth-seeking process.

I will try to initiate an understanding of the way the system’s needs are being defined. What is it that we are required to offer under the current climate: to provide necessary albeit minimal treatment to keep the system from complete collapse? Is our role, to relieve the system of the anxiety of having a child on the waiting list or something else?

Lastly, I will suggest some possible solutions for moving from these predicaments to enable truth-seeking for both patient and therapist but more important I would hope to initiate a conversation that will develop further after the conference.

Biographies:

Francesca Calvocoressi was formerly the Organising Tutor for the Child Psychotherapy Training in Scotland. She retired from her post as Principal Child and Adolescent Psychotherapist CAMHS in Lanarkshire a few years ago. She worked for many years as an external organisational consultant to a residential school in Scotland. She is currently Lead for Service Supervision CPD at NSCAP Leeds, and Tutor on pre-clinical at CAPPNI in Belfast. She is an Associate Editor of the Journal of Child Psychotherapy and has recently been appointed ACP Director of Professional Standards.

Rinat Shemesh is a Child and Adolescent Psychotherapist working in Islington CAMHS within the Whittington Hospital Trust. I completed the observation course at the Tavistock and my clinical training at BTPP (Birmingham Trust for Psychoanalytic Psychotherapy). Rinat arrived at her training from a combined career which encapsulates Psychological Treatment for Children and Young Adults in various places but began in 1992 in Israel; a busy Managerial post within early Years and Education again in Israel. Rinat has also been a business Consultant in Europe, mainly Denmark and Israel. Rinat have particular interests in psychoanalysis, quantum physics, dancing and the challenges of working as a psychotherapist in the NHS.



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Getting Child Psychotherapy Right for Every Child: A clinical formulation and care planning tool to integrate a well-being and developmental approach for practice.

Andrew Dawson

About the Session:

This innovative paper contrasts the different legal frameworks in Scotland and other areas of the UK to demonstrate how a focus on well-being and development can clarify the task of psychotherapy within a multi-disciplinary and multi-agency context.

The Scottish Government's 'Getting it Right for Every Child' (GIRFEC) legislation has been controversial in some ways, as it asserts a shared responsibility to ensure that a child's well-being needs are met. Some parents have complained that this infringes on their rights. There has been an interesting legal process to test the limits of government power in this area. The legislation has also required all services to work within a National Practice Model, sharing language and agreeing on meaningful outcomes that demonstrate positive progression in relation to the child's well-being. This has been a challenge to some professionals, including those in mental health, who have found it difficult to change from a diagnostic treatment model toward a developmental model, arguing that this legislation doesn't easily cross over to mental health.

Using practice examples from work in Greater Glasgow and Clyde CAMHS, this paper will describe how the formulation tool was developed and how it has helped to clarify the role and task of child psychotherapy. The paper gives clinical examples of the meaningful outcomes that child psychotherapy can facilitate, and describes how to work with children, families, multi-disciplinary teams and in a multi-agency context to create a shared formulation that supports the work with even the most vulnerable children.

In the discussion, the paper raises questions about the profession's readiness to respond to the contexts in which we practice. In particular the paper considers the benefits and stresses when we articulate, prospectively, the positive contribution we think child psychotherapy will make to the day to day life and well-being of our patients.

Biography:

Andrew is the Professional Lead for Child Psychotherapy in Greater and Glasgow and Clyde (GGC) CAMHS. He trained at the Scottish Institute of Human Relations. Andrew's doctoral research was into Stuck Cases in CAMHS and he continues to offer consultation, intervention and training in this area. He has developed an interest in joint formulation and the emotional regulation of the network around the child.

Andrew plays a lead role in the West of Scotland Managed Clinical Network for Harmful Parent-Child Interactions; providing training to health, social work, the Reporter to the Children's Panel, and to Panel members. Clinically his work has focused on trauma, parent-child interventions, developing personalities and perplexing cases. As well as leading the team in GGC, Andrew supports reflective practice across Tier 4 services in Glasgow.



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Give us a place to stand: how can child psychoanalytic psychotherapists secure a position of influence in a radically changing healthcare landscape?

Ruth Dunstan, Claire Hopkins, Mary Lindley

About the Session

After 70 years there is much to celebrate in recognising the efforts of our forebears in working to establish child psychotherapy as a core profession within the NHS. Given the struggles involved in securing a psychoanalytic ‘home’ for ourselves in the NHS it is painful to feel our profession becoming increasingly marginalised in an era of ‘evidence-based’, short-term, quick-fix interventions where there is little scope to offer an extended, thoughtful perspective on complex casework. There has always been change, of course, in the NHS, and child psychotherapists have shown themselves to be both resilient and adaptable over the years. Such qualities may be needed more than ever in response to the NHS Long Term Plan and the development of Integrated Care Systems which raises the worrying spectre of illegal privatisation of NHS services, where drives for commercial profit may reduce quality of care. We argue that there is a real opportunity here to take up the gauntlet of this challenge, and will show how, by extending our field of work beyond CAMHS, we have greater autonomy to practise and to demonstrate that what we do works, leading to real appreciation of child psychotherapy and on-going commissioning of such services.



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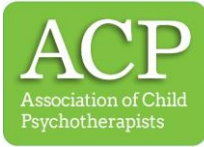
Biographies:

Claire Hopkins is an NSCAP trained Child and Adolescent Psychotherapist and Co-Director of Impact North (social enterprise specialising in psychotherapy in the community). She is passionate about ensuring that all children, young people and families have access to highly skilled, experienced psychotherapists and that they get this support as early as possible in the development of their difficulties. *“I am proud to be working alongside such fantastic and committed therapists and that together we are able to champion psychotherapy in children’s mental health”.*

Ruth Dunstan is a Child and Adolescent Psychotherapist and Co-Director of Impact North. Previously from a Social Work background she has worked in CAMHS teams for over 20 years in Bradford, Keighley, Wakefield, Newcastle and Halifax. Ruth left the NHS in 2017 to take up the role of Director, having worked part time with the Impact North team for the past five years. She completed her clinical training at NSCAP and is a seminar leader on the Personality Development across the life cycle series held there.

Mary Lindley worked as a primary school teacher and Consultant for Special Educational Needs in Calderdale before training as a child and adolescent psychotherapist at the Northern School of Child & Adolescent Psychotherapy (NSCAP). She worked in Wakefield and Leeds CAMHS before leaving the NHS in order to co-found, with three child psychotherapy colleagues, a not-for-profit company called Impact North Ltd, with a social mission to improve children’s mental health, building hope and aspiration for the future.

The company is now well established in schools and Children’s Centres in Leeds and its therapeutic services are co-commissioned by the CCG and local authority. Mary was a tutor on the MPsych Observational Studies programme at NSCAP for six years, where she also chaired the Personality Development seminar series. She also works in independent practice on Leeds. Her interests include developing community-based qualitative research projects that can show measurable improvement, both in children’s emotional functioning and quality of professional practice in the network, which demonstrate to commissioners in the marketplace the public benefit of psychoanalytic child psychotherapy.



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Thinking outside the room

Jane Elfer, Caroline Newton

About the Session:

Jane Elfer, Child and Adolescent Psychotherapist and Caroline Newton Clinical Nurse Specialist will present their work in the Teenage and Young Adult cancer service in a large London hospital. They will describe, using clinical vignettes, their work in clinic, on the ward and in the Out Patient department with teenagers and young adults (aged 13-25) who have been diagnosed with cancer. They will discuss how multidisciplinary working influences the patient's experiences and is of benefit to the wider medical team.

It will look at the importance of recognising the adolescent and the more ordinary behaviours as well as addressing the ruptures in development that can occur after such a shocking diagnosis. Issues such as body image, sexuality and fertility will be thought about both in the immediate time of diagnosis and in the years following treatment. Separation issues are often complicated by the illness and Jane and Caroline will discuss how this is managed in the psychological sense but also by the medical team.

Finally, we will look at the importance of the support offered to the medical teams who must inform young people and their families of the cancer diagnosis. The news of a cancer diagnosis will produce different reactions both in the young person and their family. The experiences of the young person's early years and their parents own back grounds may produce responses that are unexpected and can at times leave medical staff upset and confused. The close working relationship between medicine and psychological care can mean that these responses do not get in the way of a good enough journey through treatment

Biographies:

Jane Elfer is a qualified as a child and adolescent psychotherapist in 2003. She has worked in a hospital setting since then predominantly in paediatric, adolescent and young adult cancer services. Jane became an assessor for the Human Tissue Authority in 2006 and successfully completed her professional doctorate in 2017 which addressed the emotional impact on adolescents donating bone marrow to a sibling.

Caroline Newton is a Macmillan Clinical Nurse Specialist who works with teenagers with cancer. She has been a nurse for 18 years and recently completed an MA in psychological therapies for children, families and adolescents at the Tavistock Centre. She has a particular interest in mindfulness and has co facilitated groups for teenagers and young adults who have experienced being treated for cancer.



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The Taboo of Love for Children in Care: Its Emergence Through the Transference Relationship and in the System Around the Child

Angela Evans

About the Session:

A taboo is a social custom setting a thing apart, prohibiting association with a person, place, or thing (OED 2012). Love can become a taboo for children in care, something that they unconsciously forbid themselves from experiencing due to fears of further loss and pain.

The presenter initially looks at the impact of the absence of love in early childhood. She quotes research by Rutter et al (2003-2009) into a group of 165 Romanian orphans adopted in Britain; one of their ground-breaking findings was that the lack of love in infancy for these orphans had a *bigger impact on development than the infants' physical neglect*.

The presenter discusses her work with individual children and the network of adults around them from the perspective of being part of a multi-disciplinary team. She examines the tasks of the professionals involved in the care of this population and explores some reasons why many adults working with traumatised young people feel that promoting love in their work is taboo.

The role of the Child and Adolescent Psychotherapist is given as helping the growth of love through containment, attendance to detail and working closely with Social Workers, Foster Carers and Teachers with a view to modifying the impact of the trauma. The therapist absorbs the terrifying processes of transference and acting out. A typical growth of love for a young person in the care system is traced through this process and outlined in three stages.

This is followed by a presentation of an adolescent girl in residential care given the pseudonym Tanya. The presenter focuses on Tanya's powerful projections into the Psychotherapist, the Foster Carer and Social Worker, and evidences how Child Psychotherapy can help to contain these projections. Tanya has a hard, defensive self but clearly feels that she is forsaken by the world. The work with Tanya moves through hatred towards the beginnings of a belief that she can be loved for herself. She reaches a sense of gratitude which is so much a part of love.

The presenter then focuses on two powerful emotions, loss and fear, in the care system. To protect everyone against intense loss, love is avoided as a concept and as a reality in the care system. Fear is powerfully projected from fearful children into the system around them and is linked to our culture of suspicion and surveillance.

The presenter proposes that love is not a central theme in the care system, despite its direct relevance to children who have not experienced adequate love in crucial developmental months and years.

The implication of this proposition is that unloved children are at risk of remaining unloved within the care system, seriously compromising their development. The application of this to professional practice is immense. The therapeutic processes outlined can be invaluable and life-changing for so many children and young people, and the author calls for more support and funding for professionals to perform their vital work in promoting a loving approach in the system.



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Biography:

Dr Angela Evans worked for fifteen years in an NHS Child and Adolescent Mental Health Service (CAMHS), specialising in Looked After Children, after working as a teacher and SENCo in schools.

She practises privately in East Sussex, working with organisations such as Children’s Services, Fostering Agencies and Child and Adolescent Mental Health Trusts. She works with young people, parents and carers, families and the wider system around them. She specialises in children and young people with developmental trauma.

She provides supervision to other professionals, teaching and examining. Her doctoral thesis focused on consulting work with Special Educational Needs Co-ordinators (SENcos). The findings evidenced the intensity of the feelings that professionals who work with vulnerable children experience.



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I like it when people fall down.’ Violence, self-harm and sex work: constructive, destructive or reconstructive? Reflections on psychotherapy with three adolescent girls with emerging borderline presentations, within an inner London, voluntary-sector, self-referral service for 12-25 year olds.

Ruth Glover, Paul Bell

About the Session:

This paper will consider the psychotherapy of three girls at different points in their adolescence. Two in early adolescence and one in young adulthood. All three girls were seen at Open Door and came to us through self or family referral and engaged for different lengths of time and with different outcomes.

The two young adolescents were involved in violence and on the edge of gangs and the young adult had also found disturbing ways of managing her distress and trauma which included sex work and attacks on her own life. All three could be considered to have emerging personality disorders and we consider the passionate pulls between life and death drives, connection and disconnection, development and regression at work in these presentations which often emerge in adolescence.

We look at how they each expressed muddled attempts to feel more and to feel less within their therapy, and how traumatic re-enactment could be contained to varying degrees to help facilitate different types of development.

We will contextualise the place of this work and these types of presentations in the UK today. These presentations are currently 'hot' topics politically, in the press and in the national psyche.

We will consider the context of past, present and future child and adolescent mental health and psychoanalytic psychotherapy provision. And touch on the role of developmentally informed longer and shorter-term psychoanalytic work for impulsive young people along with the importance of accessible, flexible psychotherapy services which can see adolescents who may not make it to mainstream CAMHS or adult services.

At Open Door we can work with young adults up to age 25 whose identities are still very much steeped in an adolescent battle between progression and regression and who often fall through the gaps of 'transition' in current NHS provision.

Working with young people up to 25 is in line with our training as ACP child psychotherapists past and present, and links with current ideas of the NHS 10-year plan which aims for this to be a direction for CAMHS teams of the future. Understanding the needs of this age group brings together the experience and ideals of past and present, clinical work and neuroscience.

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However, we are also working in a current context of austerity, and like with the patients described, there seems to be a wish when commissioning services for there to be both more of everything and less of everything all at the same time. We are overwhelmed by referrals as other local services are forced to close their doors, and our waiting list is unacceptably long for adolescents who need help now.

We have to struggle to balance the needs of the patients we have in treatment (like those above) and the needs of those left waiting. We will touch on this and how just as with our therapeutic work with adolescents, on a service level too we must navigate our way through stuckness and rapid change around us. We do this while also trying to keep learning, being creative, and maintaining some hope for and influence on, the course of future development.

Biographies:

Ruth Glover trained at the Tavistock Clinic and Great Ormond Street Hospital. She has worked in inpatient and outpatient services and with children with disabilities.

Ruth is currently Co-Principal Child and Adolescent Psychotherapist at Open Door, a charity which provides psychotherapy for adolescents in Haringey and Senior Child Psychotherapist at Gloucester House, Tavistock and Portman Children's Day Unit. She has taught on various parts of the pre clinical course at the Tavistock and currently teaches and supervises on their Child and Adolescent Psychotherapy doctoral training.

Paul Bell trained at the Tavistock Clinic, where he worked in North Camden Community CAMHS teams. Prior to training Paul worked in Key Stage 4 Pupil Referral Units, as well as in a CAMHS research capacity.

Paul currently works at Open Door, an NHS England commissioned charity, providing psychotherapy for adolescents and young adults. At Open Door Paul is lead clinician for both the parenting and schools service. Paul has also held posts in CAMHS, as a secondary school based clinician, managing and developing an in-house CAMHS service for a central London school.

Paul teaches and supervises at the Tavistock Centre and works in independent practice.

The Presentation will be introduced by **Julia Britton**, Consultant Child and Adolescent Psychotherapist and Director at Open Door.



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Working Together:
Issues and Dilemmas of Intensive Case Work and Supervision in Training

Debbie Hindle, Andrew Satchwell, Rajni Sharma

About the Session:

Intensive case supervision is a cornerstone of training which holds an important boundary position. With the task of deepening and developing the trainee's psychoanalytic learning, the intensive case supervisor usually has a focused experience of the trainee – patient dyad, free from too many impingements. The presenters aim to discuss this supervisory process and the different roles around an intensive psychoanalytic intervention. The tensions of differing priorities and tasks will be considered drawing on experience of the interlocking aspects of intensive case supervisor, trainee, service supervisor and parent worker.

We will use the example of a pre-latency intensive training case of a three year old boy diagnosed with autism. The different perspectives of the trainee (Andrew), the parent worker/ service supervisor (Rajni) and the intensive case supervisor (Debbie) will highlight the dynamics in relation to each other. The three of us also represent three 'generations' of child psychotherapy in terms of our training and experience (one could say, the past, present and future).

The clinical work offers vivid material which posed particular challenges – How to engage and sustain this little boy's attention? How to communicate with him? Whether to see him with his parents or on his own? How to work with his parents? How best to support the trainee's learning? How to think about and address cultural issues? Different ways of thinking about work with children with autism and the supervisory process and experience will be discussed from our different perspectives.

Undertaking an intensive case and an intensive case supervision involves a number of new beginnings and new relationships within a specific context. This is not only for the trainee and his or her young patient, but for the parents or carers, the parent worker, and intensive case supervisor as well as the supportive staff surrounding the trainee – their tutor and course lead. We discuss how these beginnings were worked out and the complexities that arose along the way. One issue that has concerned us all is the time-limited nature of the work as well as the on-going clinical need. How can this be prepared for and negotiated given the pressures on services?



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Biographies:

Dr Debbie Hindle is a consultant child and adolescent psychotherapist, trained at the Tavistock Clinic. She worked extensively in CAMHS services in the NHS and for ten years was Head of the Clinical Training in Child Psychotherapy at the Scottish Institute of Human Relations in Edinburgh and worked clinically in a specialist CAMHS in Glasgow for children who were fostered or adopted. Now retired from the NHS, she continues to teach and supervise.

Andrew Satchwell is a Child psychotherapy trainee in his fourth year at the Northern School of Child and Adolescent Psychotherapy. Andrew works at Central Manchester CAMHS, which is part of Royal Manchester Children's Hospital. He previously worked as an advanced clinical carer for children who have complex health needs and life-limiting conditions.

Dr Rajni Sharma is a Consultant Child and Adolescent Psychotherapist and professional Lead for Child & Adolescent Psychotherapy in Manchester and Salford Child CAMHS. She primarily works with children and adolescents who have experienced extreme neglect, trauma and displacement as well as with children presenting with complex somatising and neurodevelopmental disorders.

Rajni leads the Masters programme in Psychoanalytic Observational Studies run at NSCAP in collaboration with the University of Leeds. She is also academic tutor on the Clinical Training in Child and Adolescent Psychotherapy.



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Child Psychotherapy in Schools: a psychodynamic impact model for child mental health in disadvantaged areas

Matthew Jenkins, Emily Ryan

About the Session:

What role does Child Psychotherapy have to play in addressing the mental health needs of children in areas of disadvantage?

The paper will discuss an innovative programme of school-based mental health work, led by child psychotherapists in Bristol. Referencing child psychotherapy's early work with severely deprived children (Boston and Szur, Williams, Emmanuel), and the pioneering work in schools of colleagues such as Youell and Jackson, the paper describes how the Bridge in Schools has developed a Bristol-based response to the high level of unmet mental health needs of children especially in deprived areas of the city.

We consider the challenges and opportunities to be found in building partnerships with school teams and applying child psychotherapy in a school environment. We explore the relevance of child psychotherapy both to developing therapeutic approaches to learning and behaviour management that provide containment for vulnerable children, and to providing effective and timely therapeutic interventions. We draw on evaluation data to show that this approach can significantly improve access and outcomes for families who currently do not reach CAMHS. Finally, we consider how these developments in child psychotherapy give us unique opportunities to contribute to the government's current re-design of child mental health services.



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Biographies:

Matthew Jenkins Matthew Jenkins is a Child and Adolescent Psychotherapist who trained at BTPP in Birmingham. Matthew works at the Bridge Foundation, a psychoanalytic mental health charity based in Bristol, where he is the Deputy Manager of the Bridge in Schools programme.

The programme employs trained clinicians to provide specialist therapy and mental health services to children and families through local schools. Matthew teaches on the Birmingham M7 course, and is also a visiting tutor for the BTPP clinical child psychotherapy training.

Dr. Emily Ryan is a Child and Adolescent Psychotherapist who trained at the Tavistock Clinic in London. She holds a Professional Doctorate in Child and Adolescent Psychoanalytic Psychotherapy from the University of East London.

Emily works at the Bridge Foundation, a psychoanalytic mental health charity based in Bristol, where she is the Manager of the Bridge in Schools programme. The programme employs trained clinicians to provide specialist therapy and mental health services to children and families through local schools.

Emily currently teaches on the Wessex- Bridge Diploma in Psychodynamic Approaches to Counselling Children and Young People in Education and Community Settings. She is also a member of the Sino-British programme offering psychoanalytic training to clinicians in China. She is a contributor to ME and MJ Rustin (eds) *New Discoveries in Child Psychotherapy: Findings from Qualitative Research*. Tavistock Clinic Series/Routledge. (2019) due out in July this year.



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On the Move

Sheila Miller

With Debbie Hindle, Ann Horne, Monica Lanyado, Lydia Tischler and Biddy Youell

About the Session:

The panel hopes to explore the question of how child psychotherapy ‘moved on’ from a small, mainly London based profession to being a recognized profession within the NHS and CAMHS services, now covering a wide geographical area. While there are many concerns about the future of the profession, it is worth noting how far we have come. While the panel is neither comprehensive nor representational, the members all held unique positions and contributed in different ways to what cumulatively became significant steps in the growth of the profession. Some of the developments were sequential, others coincidental, but in thinking about this together, most involved the help and collaboration of a wide range of other professionals, managers and institutions, as well as enthusiastic and strategically minded child psychotherapists working together to create posts, training schools and new opportunities for sharing psychoanalytic ways of thinking and working.

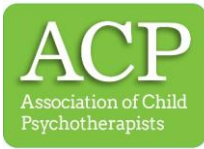
Biographies:

Sheila Miller completed the Child Psychotherapy Training at the Tavistock in 1974 . Sheila worked in Loughton Essex Child Guidance Clinic and the Tavistock until 1985 when she took a fulltime post, at the time quaintly named ‘Top Child Psychotherapist’, at the Tavistock, which she held until returning to South Africa from 1994 until 2001. While there she taught Infant Observation and psychoanalytic theory as well as consulting to several community projects. Currently she is a visiting teacher at the Tavistock and the Birmingham Psychotherapy Training School. Since qualification she has taken a keen interest in the ACP; serving on several committees and chairing both the Training Council and the Executive. Developing child psychotherapy services outside London has always been a preoccupation.

Dr Debbie Hindle is a consultant child and adolescent psychotherapist, trained at the Tavistock Clinic. She worked extensively in CAMHS services in the NHS and for ten years was Head of the Clinical Training in Child Psychotherapy at the Scottish Institute of Human Relations in Edinburgh and worked clinically in a specialist CAMHS in Glasgow for children who were fostered or adopted. Now retired from the NHS, she continues to teach and supervise.

Ann Horne was head of the child psychotherapy training at the BAP (now IPCAPA at the BPF) where she trained. Retired from clinical work, latterly at the Portman Clinic, she edits the Independent Psychoanalytic Approaches with Children and Adolescents series, teaches, writes, consults and talks in the UK and abroad.

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Monica Lanyado is a training supervisor for IPCAPA at the British Psychotherapy Foundation. She was founding Course Organising Tutor of the Child and Adolescent Psychoanalytic Psychotherapy Training at Human Development Scotland. She teaches, lectures and supervises in the UK and internationally. Her publications include *The Presence of the Therapist: Treating Childhood Trauma (2004)* and *Transforming Despair to Hope: Reflections on the Psychotherapeutic Process with Severely Neglected and Traumatised Children, (2018)*. She has co-edited 6 books with Ann Horne including *The Handbook of Child and Adolescent Psychotherapy: Psychoanalytic Approaches (1999, 2009)*, and 4 books in the Independent Psychoanalytic Approaches with Children and Adolescents series, all published by Routledge.

Lydia Tischler B.A. is a Fellow of the British Psychotherapy Foundation (BPF), and currently a teaching member of the staff of the Independent Psychoanalytic Child and Adolescent Psychoanalytic Psychotherapy Association (IPCAPA). Lydia joined the BPF (Formerly the British Association of Psychotherapy) in 1984 and was Chair of the Child and Adolescent Training committee, 1991–94 and 2001–05, and Chair of Council 1995–98. Between 1991 and 2003, Lydia held various positions within the ACP of which she is an Honoured Member, including Chair of the Training Council 2001–04. She was a founder member of EFPP (European Federation of Psychoanalytic Psychotherapy), initiated the training programme in child and adolescent psychotherapy in the Czech Republic in 1995, and over the years taught in Estonia, St Petersburg, and in Croatia at the Psychoanalytic Institute for Eastern Europe summer school for child and adolescent psychoanalysis. Lydia has published a number of articles on her work at the Cassel Hospital and co-edited *The family as inpatient* (Free Association Press, 1987). Her article *Anna Freud: A new look at development* was published in the British Journal of Psychoanalysis in 2014. *Reflections of a Holocaust Survivor* was published in the JCP Dec. 2018 Vol 44,3

Biddy Youell is a retired child and adolescent Psychotherapist who remains involved in teaching, supervision and training on a range of courses. She was involved in the project which established the Northern School and worked there as Head of Training until 2009. She was Head of Child Psychotherapy at the Tavistock from 2009-2016. She is also a former chair of the ACP.



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Scots in psychoanalysis and psychoanalysis in Scotland

John Shemilt

About the Session:

The establishment of a school of Child Psychotherapy in Scotland reflected a long association of Scotland and the Scots with psychoanalysis. Significant contributions to psychoanalytic theory and practice at home and abroad are often overlooked, including by the Scots themselves. Books by Adam Smith and James Clerk Maxwell appeared in Sigmund Freud's dreams.

Pioneers of Scottish social anthropology influenced Freud's thinking on group and family customs and taboos. Edinburgh from 1910 was amongst the first places in Britain where psychoanalytic psychotherapy was practised. Freud and Ferenczi planned to visit Scotland in 1912 but were prevented by events back in Vienna. Scottish brothers James and Edward Glover worked closely with Ernest Jones in London to build the international reputation of the British Psychoanalytical Society in its early years.

Klein came to Scotland in 1940-41 where she made detailed notes on her work in Pitlochry with 'Richard', later published as the *Narrative of a Child Analysis*. Hannah Segal and Paula Heimmann both gained their British medical qualifications in Edinburgh. Ronald Fairbairn's work on object relations theory and schizoid structures was widely influential and incorporated in Klein's formulation of the paranoid-schizoid position.

During World War II what was later called the 'Tavistock Group' worked in Edinburgh on Army Officer selection, chaired by John Sutherland with Fairbairn as visiting consultant. This group included Wilfred Bion and John Bowlby amongst other prominent figures in the post-war Tavistock. When Sutherland stood down as Director of the Tavistock clinic in 1968 he returned to Edinburgh and set up the Scottish Institute along with a group of Scottish based psychoanalysts, and psychoanalytically oriented social workers, educationalists, and psychiatrists. Their concern was with the welfare of children as well as adults, and this paved the way for the creation of a formal training in child psychotherapy in 1989.

Biography:

John Shemilt is a psychoanalyst who trained at the Scottish Institute of Human Relations and the Institute of Psychoanalysis. An Edinburgh medical graduate, he was formerly Consultant Child and Adolescent Psychiatrist in Glasgow at Yorkhill Hospital and founded the Scottish Centre for Autism.

He is now retired from medical practice. He is a member of the Training Committee of the Scottish Training in Psychoanalytic Psychotherapy, and former Chair of both the Scottish Institute of Human Relations and the Scottish Association of Psychoanalytic Psychotherapists.

He was the founding Chair of the Child and Adolescent Psychotherapy Training Committee at the Scottish Institute of Human Relations, a position he held during the first ten years of the training programme



ACP Annual Conference 2019
Friday 7 June – Sunday 9 June
Yesterday, Today, Tomorrow

Time past, Time Present, Time Future: some reflections on the development of a sense of duration as a foundation for a durable object, going on being and sense of self

Graham Shulman

About the Session:

Alvarez (1997) asks, “how does a sense of a durable object get built up?” This paper considers one aspect of the earliest processes of post-natal primitive psychic life and organisation: the formation and development at a micro level of a sense of duration (of object and self), leading to a sense of continuation and continuity, and how this forms a foundation for the experience of going on being and sense of self. Material from clinical work in a multi-disciplinary NHS CAMHS Looked After Team focusing on the Observational Emotional State Assessment of a 20-month-old Looked After infant, and the 4 x weekly individual psychotherapy of a Looked After 2-year-old – both of whom had experienced severe trauma and disruption – is used to illustrate these processes.

The clinical material illustrates one example of the wider theme of the distinctive contribution that psychoanalytic child psychotherapy can make to CAMHS in the modern world. There are increasing numbers of infants in care in the UK who have experienced severe neglect, trauma, abuse and disrupted care; and there is growing recognition and identification of severe mental health problems in these infants. There is an unmet need for highly specialist mental health assessment and interventions for such infants. For this early identification and intervention to occur, there needs to be a wider workforce with the necessary professional knowledge and skills to recognise severe mental health problems in infants, and a CAMHS able to provide clinical assessment and interventions geared to severe mental health problems in infants and very young children.

The context for the clinical work discussed is the reorganisation of a Child Psychotherapy Service in an NHS CAMHS, following a nearly 30% cut in funding and staffing. This involved relocating child psychotherapists to specific clinical teams compatible with a strategy of targeting a highly limited highly specialist resource at the most high tariff, severe cases, in conjunction with a parallel programme of delivery of multi-agency infant mental health training by child psychotherapists to the wider workforce, alongside a programme of active promotion of awareness and understanding of mental health problems in infants within the NHS and other agencies. This strategy and consort of activities draws on the core knowledge and skills of child psychotherapists: infant mental health as a foundation for later stages of development and psychic life, and psychoanalytic observation and its clinical applications. It is closely tied to the policy drivers of Early Years and Early Intervention.

The paper illustrates the distinctive contribution of psychoanalytic child psychotherapy both at the micro-analysis level of understanding of primitive and unconscious mental processes relevant to the foundations of mental health and functioning, and at the macro-analysis level of ‘added value’ of psychoanalytic child psychotherapy to mental health service provision. It is suggested that these two are closely connected, that their interconnection is a foundation of the profession’s experience of ‘going on being’ and ‘sense of self’, and that this interconnection is a unifying thread that links and lends coherence to the profession’s past, present and future.



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Biography:

Graham Shulman is a Consultant Child and Adolescent Psychotherapist and Head of Child Psychotherapy in CAMHS, NHS Lanarkshire.

He is a past Joint Editor of the *Journal of Child Psychotherapy*, is an Assistant Editor of the *Infant Observation Journal*, and is Joint Editor of and contributor to *The Emotional Experience of Adoption: A Psychoanalytic Perspective* (Routledge, 2008) and *The Non-Linear Mind: Psychoanalysis of Complexity in Psychic Life* (Karnac, 2017).

He is an external tutor on the Scottish Child Psychotherapy Training, and for over 10 years has taught on a multi-disciplinary and multi-agency professional development Infant Mental Health Course.

He has published several articles on clinical and theoretical themes and on links between psychoanalysis and literature and also chaos theory.



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Observation and attention: psychoanalytic infant observation and contemporary practice in mental health services for children in care.

Jenifer Wakelyn

About the Session:

What are the principles that underlie psychoanalytic infant observation and how can they contribute to therapeutic support for babies and young children in care?

This presentation will explore how observation can help us to approach work with infants and young children in care whose needs may be hard to understand. Young children who are looked after may be exposed to the stresses of placement moves and attachment difficulties, in addition to the traumas that bring them into the care system.

The presentation will begin with a review of classic psychoanalytic texts on observation and will link Freud's thinking about attention and Klein's clinical practice of closely following the child's communications with applications in clinical work today in services for children at risk, in care or post-adoption. I will outline and illustrate a brief intervention that can be used with parents, foster carers and prospective adoptive parents.

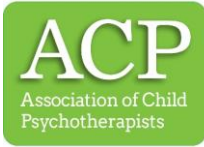
Watch Me Play! has been developed in a specialist mental health service for children in care to promote child-led play in foster placements in order to enhance relationships between child and carer, improve placement quality, and contribute to child-centred care planning. The approach promotes child-led play in the home, observation of and reflection on the child's play, and sharing observations in therapeutic network meetings with professionals to inform care planning.

There will be opportunities to engage in exploring the potential for ways of working based on observation to enhance the capacity of caregivers and professional networks to provide containment for children who have experienced trauma and instability.

Biography:

Dr Jenifer Wakelyn is lead child and adolescent psychotherapist in a mental health service for children in care in London. She teaches and supervises at the Tavistock Centre and privately and has presented research on interventions for children in care in the UK, Europe and the Ukraine.

She has particular interests in transitional psychotherapy for children in care and in therapeutic support for babies and young children in care. Her current work on a Watch Me Play! manual is funded by the Tavistock Clinic Foundation. Her book *Therapeutic Approaches with Babies and Young Children in Care: Observation and Attention* will be published by Routledge in July.



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A Personal Reflection of the Early History of Child Psychotherapy

Sylvia Wilson

About the Session:

This pre-dinner address to Conference is a personal reflection on the experience of training as a child and adolescent psychotherapist; and on the challenges of developing child and adolescent psychotherapy training and services in NHS Scotland, in circumstances where the training had not hitherto existed. Sylvia Wilson will briefly describe something of the background to her own wish to train as a child and adolescent psychotherapist and make reference to the wisdom of Freud.

Biography:

Sylvia Wilson qualified as a Child and Adolescent Psychotherapist in the first cohort of trainees at SIHR; after which she worked as a Consultant Child and Adolescent Psychotherapist in a CAMHS team in NHS Lanarkshire and taught on the clinical training at SIHR. She has worked in Education, Health, Social Services and the voluntary sector. She has a 1st class degree in Literature from the Open University, an MPsychPysch from the Tavistock/UEL, and is a qualified teacher for blind and visually impaired children. She is now enjoying retirement, in which she paints, writes, plays the piano and enjoys time with her friends and family, including her 5 grandchildren.