



## Psychotherapists warn against describing the needs of children with mental health problems as “low level”

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Services provided in the community to children and young people with mental health needs should not be described as “low level,” psychotherapists have pointed out after the children’s commissioner described them this way.

Many children and young people seen in the community have complex mental health needs that require skill and experience to manage and complicated networks of care, the Association of Child Psychotherapists says.

The report that the children’s commissioner for England, Anne Longfield, published this week found that just over £14 (€16.30; \$18.30) a child is spent by local authorities and the NHS in England on preventive “low level” mental health support, and that over a third of areas are seeing a cut in spending.<sup>1</sup>

Longfield said that these services were vital because they could prevent conditions from developing into much more serious illnesses which would need specialist intervention.

The report defines low level services as non-specialist preventative and early intervention services for children and young people around mental health and emotional wellbeing which fall below the Tier 3 and Tier 4 specialist referral thresholds. These include preventive, universal services which help children protect their emotional wellbeing—such as support provided by school nurses and in children’s centres—but also targeted services with qualified mental health professionals—such as school counsellors, online counselling, or GPs—aimed at children with emerging mental health difficulties who would be unlikely to meet the thresholds for specialist services.

Nick Waggett, chief executive of the Association of Child Psychotherapists, emphasised that the association welcomed the report which provides further evidence that children with anxiety, depression, and other mental health conditions face a postcode lottery when seeking treatment. But added, “We would,

however, caution against the use of the phrase ‘low level’ in relation to the difficulties that are being seen in primary care.”

“Mild” presenting symptoms, whether emotional, relational, or behavioural, may mask some underlying problems which need specialist services, such as child and adolescent psychotherapy, to be plugged in to support primary care and universal services, he said. “If these needs are not met with effective early intervention then difficulties can quickly escalate with serious costs for the individual, their family, schools, emergency departments, and inpatient care,” he said.

“There seems to be an assumption that there are lots of low level needs and that is therefore where the funding should go,” he told *The BMJ*.

“In addition to what the government are doing [extra funding for universal services] they should also be funding increasing access to specialist services—both in its own right for children with more severe needs but also in its role in supporting these universal services.”

A spokeswoman for the children’s commissioner for England said that the association was absolutely right to draw attention to the complexity of the level of need of children being seen in primary care.

“We have raised concerns that too many children are turned away from specialist services, even those with a high level of need. That’s why we’re calling for early access to support for these children in schools and in the community—but these services need to be joined up with specialist NHS support working in partnership,” she said.

1 Thornton J. Children’s mental health: getting early support “leaves much to chance,” says commissioner. *BMJ* 2019;365:l1732. doi:10.1136/bmj.l1732-30971415

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