Greenwood Institute of Child Health

School of Psychology

College of Medicine, Psychology and Biological Sciences

ANNUAL REPORT 2012/2013
A few words by Panos Vostanis about the last 20 years

In 1993, Buckingham Palace opened its doors to the public for an adult entrance fee of £8; the EU Maasticht Treaty took effect; Bill Clinton was the US President; and the Greenwood Institute of Child Health was formed in Leicester! At the time, this was a visionary endeavour by the University of Leicester, the Leicestershire Partnership NHS Trust (then under a different name), and our benefactor Dr Hugh Greenwood, who last year (2012) celebrated his 100th birthday. The undertaking was particularly bold for a small field such as child mental health, which was beginning to make strides in academia at the time. As vision can only become reality if led by inspirational individuals, fate would have it that the Foundation Professor of Child and Adolescent Psychiatry, Rory Nicol, gave the Institution a truly international standing.

A lot has changed since those early days in attitudes towards children and mental health, the academic world, and the National Health Service. The Institute has had to adapt to a constantly evolving and not always favourable environment during those 20 years. Although our research and teaching objectives have been adjusted in response to children’s needs, the direction and philosophy of the Institute have remained consistent in applying research and teaching to practice, services and policy requirements.

Since joining the Institute back in 1998, I have been privileged to work with a fully committed core group of staff, and to be associated with numerous great contributors: service users and other research participants, undergraduate and postgraduate students, researchers, clinicians and teachers from all over the world. A big THANK YOU to all of them for adding something different, and for ensuring the continuity of our work and bright future.

Enjoy our celebration on our Open Day on 28th June!
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# Personnel

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<th>Qualifications</th>
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<tbody>
<tr>
<td>Panos Vostanis</td>
<td>Professor of Child and Adolescent Psychiatry and Honorary Consultant, Director of the Greenwood Institute</td>
<td>MB, MD, FRCPsych</td>
</tr>
<tr>
<td>Nisha Dogra</td>
<td>Professor of Psychiatry Education and Honorary Consultant in Child and Adolescent Psychiatry</td>
<td>MB, DCH, FRCPsych, MA, PhD</td>
</tr>
<tr>
<td>Michelle O’Reilly</td>
<td>Senior Lecturer in Psychology</td>
<td>BSc (Hons), MSc, PhD</td>
</tr>
<tr>
<td>Khalid Karim</td>
<td>Senior Lecturer in Child and Adolescent Psychiatry and Honorary Consultant</td>
<td>MB, ChB, BSc (Hons), MRCPsych</td>
</tr>
<tr>
<td>Pallab Majumder</td>
<td>Clinical Lecturer in Child and Adolescent Psychiatry</td>
<td>MBBS, MRCPsych, MD</td>
</tr>
<tr>
<td>Lisa Anderson</td>
<td>Senior Teaching Fellow and Training Co-Ordinator in Child Mental Health</td>
<td>BSc (Hons), MSc</td>
</tr>
<tr>
<td>Nadzeya Svirydzenka</td>
<td>Research Associate</td>
<td>BSc (Hons), MSc, PhD</td>
</tr>
<tr>
<td>Victoria Stafford</td>
<td>Research Associate</td>
<td>BSc (Hons), MSc</td>
</tr>
<tr>
<td>Sarah Cruddas</td>
<td>Research Assistant</td>
<td>BSc (Hons), MSc</td>
</tr>
</tbody>
</table>
Administrative Staff

Aisha Butt PA/Unit Administrator (Part-time)

Pratibha Patel Multi-Agency Course Administrator (Part-time)

Jo Welch Unit Administrator/ Course Administrator

Honorary Staff Members

Sajida Abdul Hassan
Honorary Research Fellow; Honorary Clinical Psychologist and Researcher, National Institute of Child Health, Karachi, Pakistan; and Research Associate, Hussaini Foundation, Pakistan; PhD MA (Clinical Psychology), MSC (Child and Adolescent Mental Health)

Claire Bone, Research Volunteer

Alistair Hay, Research Volunteer

Adheesa Ratnayake, Research Volunteer

Postgraduate and Undergraduate Students:

PhD Students (See page 34)
- Ejal Jalal
- John Hoffman
- Sarah Hogan
- Tania Morris
- Pallab Majumder
- Victoria Stafford

MSc Students (See page 41)
- Jayne Trezise
- Francis Morris

PsyD Students (See page 38)
- Lisa Anderson
- Elizabeth Hale

Psychology Undergraduate Dissertations (see page 42)
- Aysha Qureshi
- Hannah Rowley
- Rebecca Fraser-Wright
- Georgina Wright

Clin Psy (See page 40)
- Louise Brittenden
TEACHING Objectives

The Greenwood Institute of Child Health is committed to:

- Developing and delivering child mental health education for undergraduates and postgraduates to ensure it keeps pace with changing practice and knowledge.
- Contributing to undergraduate and postgraduate education in other relevant areas.
- Ensuring staff are given appropriate support to help them to deliver high quality education.
- Ensuring students are encouraged to be inquisitive and take responsibility for their own learning.
- Collaboration with other departments and agencies to raise standards in teaching.
- Integration of education with child mental health practice and research.

The objectives are met by:

- Careful monitoring and reviewing of educational programmes that the Greenwood Institute is involved in.
- Student feedback is collected in such a way as to enable course development. The student and teacher relationship is viewed as a partnership in which constructive dialogue can take part.
Staff Development

We are committed to ensuring:

- There is clear guidance and supervision of new staff tailored to their previous experience and skills.
- Peer review of experienced staff.
- External review of teaching.
- Active involvement in student assessments and their development.
- Encouraging all staff to develop their skills and responsibilities.
The Institute is involved in:

Organising the clinical Child and Adolescent Psychiatry Module, which takes place during the undergraduate Psychiatry attachment. The course is closely monitored and audited. Clinicians are encouraged to participate in course development. Academic and clinical staff deliver seminar-based teaching to students. Some students from each Psychiatry group also obtain a more in-depth experience in Child Psychiatry through attachments to clinical teams.

Following revisions in the course last year, and feedback from students and teachers, we moved from didactic lecture-based teaching towards more active, interactive and participatory learning. Instead of only providing the students with factual knowledge, we aspire to provide them with a stimulating and facilitating environment where knowledge is created from interaction between motivated, bright learners and eager facilitators. Our objective is the continuous development and efficacy of this teaching module. We shall achieve this by innovating, piloting and using different approaches and principles of group teaching, as well as introducing new audio-visual materials and other technologies to always keep the standard of our teaching on the cutting edge.

Four third year Psychology students are currently completing their research dissertation on applied studies on trauma, mental health attitudes and ethics topics.
Postgraduate Teaching Responsibilities

Training in Evidence-Based Practice

With a stronger NHS emphasis on evidence-based practice, the Greenwood Institute offers a service (through Michelle O’Reilly) to assist CAMHS staff with research. The service offers one-to-one tuition on all aspects of the research process, and group tutorials and workshops based on team needs. Both these aspects of the service have been widely used by Child and Adolescent Mental Health Service (CAMHS) practitioners to date.

A large number of CAMHS staff have made use of the time available to discuss various issues in their research. This has extended from the proposal through to the dissemination stage. Individually tailored advice and recommendations are provided in a way that promotes the importance of research and the quality of it.

The Greenwood Institute continues to offer its research service to all members of CAMHS staff, and is encouraged by how much it has already been used. The range of topics available is extensive, and further information is available upon request.

It also contributes to the Leicestershire Child and Adolescent Psychiatry (ST4/6) postgraduate training programme.
Distance Learning Postgraduate Certificate in Child and Adolescent Mental Health

After running the course for ten years, in 2011 we changed the focus of the programme from a campus-based taught course to concentrate on developing a Distance Learning Course that would be more easily available to those working in child and adolescent mental health around the world, as well as those in the UK. The new course started in October 2012.

We are excited to be offering a course at the forefront of child and adolescent mental health training. The course has been designed by a unique multi-disciplinary team, offering an educational experience that links academic theory with clinical practice. Students are taught by clinicians working in the field of child and adolescent mental health, and by academics who are actively engaged in research. The course is aimed at all those working with children and adolescents who have a need for an evidence-based framework in child mental health and other key issues relevant to child mental health care. It is of interest to a wide range of staff within education, health, social care and the voluntary sector.

The course is part-time and students have the flexibility to decide whether they wish to study for a Certificate, Diploma or MSc.

The four core modules studied are: Mental Health and the Community; Specific Mental Health Problems of Childhood and their Therapeutic Interventions; Research Skills; and Service Development and Provision.

Postgraduate Certificate to Improve the Access to Psychological Therapies (IAPT)

We started the Distance Learning course is October with 17 students from a variety of backgrounds and from different countries around the world. This exciting variation brings an additional element to the course and offers students an opportunity to learn about how those in other professions and from other countries work. Some of the UK students have been funded by Improving Access to Psychology Therapies (IAPT). The course is proving to be very successful, with positive feedback being received from students. We are currently recruiting students for entry in 2013.
International Training and Research Collaborations

We regularly contribute and provide child mental health workshops and seminars to international academic institutions and professional groups. At present we are collaborating with academic centres in Karachi (Pakistan); Chicago (U.S.); Vienna (Austria); Georgia (U.S.); Belgrade (Serbia); Gaza; Lagos (Nigeria).

Multi-Agency Training in Child and Adolescent Mental Health

Mental Health and Emotional Well-being of Children and Young People is everybody’s business.

The Greenwood Institute provide a multi-agency training programme for staff working in Tier 1 – that is universal, community and primary care professionals. These staff, if well trained, can provide preventative interventions to lessen mental distress, promote emotional resilience and decrease the development of mental health symptoms. Through a programme of high quality training with a focus on the promotion of child mental health and the early prevention of child mental health problems there will be:

- Improved knowledge and awareness
- Enhanced tier 1 capacity
- The facilitation of consistency of responses across agencies
- The effective uses of resources and services

The training is open to anyone with a concern for the well-being of children and young people, whether based in health, education, social care, early years, youth and community services, the voluntary sector, youth justice or other agencies.

The multi-agency training has successfully run for nearly eight years across Leicester City, County and Rutland, with a high demand for places and positive feedback. Unlike Tier 1 child mental health training projects in other regions, many of which have been discontinued, this training programme has grown and has widened interest. This is due to the continued support from all local agencies and commissioners.

The training takes place regularly in Leicester City or County. The multi-agency format is unchanged, with tutors from Education and Health. Using such an inter-agency approach to tutoring is beneficial, as the ‘Working together’ notion of Universal CAMHS is modelled, and
the range of skills and knowledge result in a more rounded and thorough learning experience.

In 2012 we trained 953 people from services across Leicester, Leicestershire and Rutland, including health, social services and voluntary agencies.

Training events included the Two Day Working Together in Child Mental Health; specialist one day events such as Anger, Anxiety, Depression, Self-Harm, Self-Esteem, Attachment, ADHD and Substance Misuse; and targeted training to schools and the youth service.

In 2012 we were awarded £30,000 funding to develop a certificate in Cognitive-Behavioural Therapy for Tier 1 staff, two courses were successfully piloted in 2012 and three further courses are being run in 2013.
Research

Research Objectives

The Greenwood Institute of Child Health is committed to:

- Undertaking high quality research in child mental health
- The interface of research evidence with policy, practice and service development
- Encouraging multi-disciplinary and multi-agency research, both within child psychiatry and across disciplines
- Planning, managing and conducting research collaboratively with other University Departments, agencies, and academic centres in the UK and internationally
- Providing research consultation to different organisations working with children and families
- Effective dissemination of research findings through academic papers, reports, conference presentations, and seminars
- Undertaking and participating in high quality educational research that improves curriculum development, delivery and student experience.
Research Governance

Research within the Institute is formally reviewed at quarterly staff meetings. Each research programme or project is either staffed or supervised by at least one senior member of the Institute. This ensures a planned, steady throughput of research. Management of research in the broader context is supported by representation at the University School of Psychology and close links with the Research & Development Department of the Leicestershire Partnership NHS Trust.

Staff and students actively participate in regular Methods and Dissemination meetings, and projects are presented at the annual Child and Adolescent Mental Health Research Fair.
Current Research Projects

1. Service Evaluation and Outcomes

Development of Payment by Results (PbR) for Child and Adolescent Mental Health Services in England

Miranda Wolpert, CAMHS Evidence-Based Practice Unit, London
Panos Vostanis
Melanie Jones, CAMHS Evidence-Based Practice Unit, London
Katy Hopkins, CAMHS Evidence-Based Practice Unit, London
Rebecca Kirk-Smyth, CAMHS Evidence-Based Practice Unit, London

Duration: 2011-2014
Funding: Department of Health

Following the long-standing development and introduction of PbR in Acute Health Care, and the more recent development and ongoing evaluation of clusters and care packages in Adult Mental Health, a number of projects are currently underway in different mental health specialist fields, including CAMHS.

Based on NICE guidelines, existing evidence, retrospective analysis of service datasets and national consultation, four preliminary clusters were developed. These are based on children’s mental health needs, as well as complexity and context (home, school, community) of their problems. A needs assessment tool is based on the instrument used by IAPT services (Improving Access to Psychological Therapies). The clusters are currently being piloted in 22 child mental health services across England. These will be refined in relation to care packages, resource allocation and outcomes.

This early phase has led to the substantive two-year project on the detailed development and evaluation of child mental health clusters and care packages. Different information and/or consultation events will be organised at critical points to incorporate wide feedback and advice. Regular updates on the progress will be provided through different means to encourage involvement at service level.

Clinical validity of the Me & My School questionnaire: A child self-report mental health measure

Praveetha Patalay, CAMHS Evidence-Based Practice Unit, London
Jessica Deighton, CAMHS Evidence-Based Practice Unit, London
Peter Fonagy, University College, London
Panos Vostanis

Miranda Wolpert, CAMHS Evidence-Based Practice Unit, London

The Me and My School Questionnaire (M&MS) is a self-report measure of general mental health for young people aged eight years and above that has been validated in a community sample (Deighton et al. 2012). It has two scales that measure emotional difficulties and behavioural difficulties in young people. To establish its utility as a screening tool and potential usefulness as a clinical tool it is necessary to establish the questionnaire’s ability to discriminate between clinic and community samples. Data from 91 young people (aged 8-15 years) attending mental health services in England were used along with a matched community sample (N=91) from seven schools.

Receiver operating curves and mean comparisons indicate that the measure satisfactorily discriminates between the clinic and community sample (area under the curve, emotional difficulties = .79; behavioural difficulties = .78). Furthermore, the sensitivity of the individual scales in light of specific diagnoses is examined and found to support their interpretability. High correlations with corresponding scales of another widely used self-report measure establishes the measures construct validity in clinical settings and the cross-informant agreement with parent–reports comparable to existing measures of mental health. Overall, the findings indicate that the M&MS has good psychometric properties and justifies its use as a self-report screening tool in community settings, and gives evidence for its potential usefulness as a clinical tool.

Application Development Related to Clinical Decision-Making in Child Mental Health Assessments

Michelle O’Reilly
Khalid Karim
Victoria Stafford

Duration: 2011-2014
Funding: NIHR Clinical Research Networks

There is evidence that many interactions with children are not especially child-centred, and this can lead to minimal engagement, therefore, poorer outcomes. This is particularly important in respect to the Children’s National Service Framework, which placed child centred care at the core of the NHS. It has been argued that it is essential that we have a better understanding of children and families to improve service provision. There is limited evidence relating to the interactions between therapists and families in a Child and Adolescent Mental Health setting. As such there is little empirical evidence to show whether the policies are being implemented at an operational level.
On the basis of the successful pilot study funded by the Heart of England Hub we have been granted funding from the CLRN to develop a full application to continue the main project. The sustainability of the research personnel will facilitate the on-going research project and thus enhance an application to a funding body such as the ESRC, therefore, contributing to the number of portfolio studies in the LNR CLRN.

Recruitment of participants is a crucial element of the on-going research and, although the research is quite complex, the recruitment of children and families has been consistent, in line with expectations. To date we have recruited 28 families to the project and we are in the process of having these transcribed for analysis. This is including the five families recruited for the pilot phase funded by the Heart of England Hub. This project has raised the profile of research and has engaged clinical professionals in the research process. This is beneficial in creating an environment open to active research.

**Defining Quality Child and Adolescent Mental Health Services: Stakeholders’ Perspectives**

Nisha Dogra  
Pablo Ronzoni, Senior Trainee in Child and Adolescent Psychiatry, Leicestershire CAMHS  
Nadzeya Svirydzenka

**Duration:** 2012 – 2013  
**Funding:** LNR CLRN Flexibility and Sustainability Finding

**Background**

The care quality commission from 1st October 2010 has set that every health and adult social care service in England is legally responsible for making sure it meets new essential standards of quality and safety. However, these standards lack clear definition and guidelines. Furthermore, how a ‘quality’ mental health service is understood by all stakeholders of the process, from patients and their families to clinicians to service managers and commissioners, is likely to vary. Therefore, the ability of Child and Adolescent Mental Health Services (CAMHS) to provide the quality of care that is needed is questionable until these differences can be understood and systematically addressed. This project will explore stakeholder’s views on quality child and mental health service provision and their expectations from these services. Specifically, this project aims to identify gaps and discrepancies in patients, families, clinicians, clinical managers and commissioners’ understanding of quality mental health services in the following three categories: (i) referrals, (ii) assessment and (iii) treatment of patients. Each category will be assessed on the following six factors: (i) safety, (ii) effectiveness, (iii) patient-centred, (iv) timeliness, (v) efficiency, (vi) equitability (Institute of Medicine). Results of this project will provide the necessary evidence-base for the development of a comprehensive quality measure to be implemented at CAMHS.
Objectives
To establish how different stakeholders define quality and also how useful they consider the IoM factors to be in helping define quality.

Methods
Sample: The sample will consist of two main groups of participants: (i) patients and families; (ii) clinicians, managers and commissioners. We will recruit 15 families from the CAMHS database for whom a care episode is finished. We will also recruit 15 clinicians, managers and commissioners in total. Patient information such as severity of illness and duration of treatment will also be considered. The total sample will also include 2-4 clinicians, clinical managers and commissioners.

Materials: A semi-structured interview schedule will be developed to assess stakeholders’ views on quality mental health services in the referral, assessment and treatment process along a set of factors as described above.

Procedure: Participants will be interviewed at a location convenient to them and the interviews will be recorded. During the interview participants will be first allowed to free-associate with the general question on ‘What quality mental health care means to them’. After, they will be guided to provide their opinions on specific parts of mental health care (like referral process, assessment and treatment expectations). At the end of the interview, they will be presented with the six factors of quality care as defined by the Institute of Medicine, and asked whether they see them fitting within each component of mental health services discussed earlier and how.

The project is currently in the interview data collection and thematic analysis phase.

2. School Mental Health

Evaluation of School Mental Health Promotion

Nisha Dogra
Sarah Cruddas
Michelle O’Reilly
Panos Vostanis

Duration: 2013-2014
Funding: Children’s Research Fund

The study aims will address the following research questions:

a) Can young people’s mental health awareness be enhanced by school-based psycho educational interventions which focus on staying healthy and challenging stigma?
b) Is there a difference between two types of interventions (delivered by mental health practitioners to pupils; and delivered by teachers, following training, to pupils) on young people’s knowledge, understanding and attitudes towards mental health?

The project will involve representative secondary schools across the Leicester Educational Authorities, with the strategic objective of forming long-term links between schools and the child mental health service that will be of benefit to children and young people beyond the timescale of this project.

Pupils of year 8 (age 13 years) will constitute the target young population. This age group was selected for both developmental (cognitive capacity and relatively early in adolescence) and pragmatic reasons (the only secondary school year without substantial exam requirements). Secondary schools will be selected based on size, location, socioeconomic deprivation (measured by free school meals), exam results, and ethnic constitution. Year 8 pupils from each school will be divided into three groups, containing whole form classes. The form classes will be randomised to receive learning by one of the two methods. The secondary schools approached so far have an average size of 1,000 pupils, or 170 pupils in year 8. An approximate number of three participating schools will generate a sample of 340-510 pupils.

Two education methods will be used:

1. Delivered by mental health practitioners to pupils.
2. Delivered by teachers, following training by mental health practitioners and development of resources, to pupils.

Developmentally sensitive quantitative and qualitative measures will be used to assess pupils’ understanding, knowledge and attitudes towards mental health; and their experience of the learning interventions:

- A computer-based quiz, using a well validated questionnaire (Pinfold et al, 2003). A computer-based quiz will be easier to analyse and help to avoid testing fatigue, by making the assessment more fun for the pupils. This will be completed before and immediately after the intervention, and after four months. The quantitative measure will be completed by the pupils before and after the training.

- Interviews with a sub-sample of pupils who participated in each of the learning interventions, at four-month follow-up.

- Interviews with a sub-sample of teachers.

**Evaluation of School-Based Teacher Training Intervention for Common Child Mental Health Problems in Pakistan**

Sajida Abdul Hassan
Panos Vostanis
Background
An epidemiological study of school children in Karachi, Pakistan, reported high rates of common mental health problems. The findings emphasized the need to train teachers as front-line professionals in order to detect and manage common child mental health problem in schools.

Aims
To provide teachers with skills needed to recognize and manage children with mental health problems through school-based training.

Methods
114 primary school teachers participated in a two-day (10-12 hours) workshop to provide them with an understanding of mental health, and train them in skills needed to meet the children’s needs.

Results
The training sessions were associated with an improvement in teachers’ knowledge and awareness of various signs and symptoms of common child mental health problems.

Conclusion
In low-income developing countries like Pakistan, which have limited specialist resources, teachers should be trained in early intervention programmes for the identification and school-based management of emotional and behavioural problems. Positive mental health training interventions focusing on early identification can reduce social barriers and results in more effective outcomes.
A Descriptive Study of Joint Working Practice between Educational Services and CAMHS

Rummana Khan, Senior Trainee in Child Psychiatry, Leicestershire CAMHS
Helen Taylor, Trainee Clinical Psychologist, University of Leicester
Panos Vostanis
Miranda Wolpert, CAMHS Evidence-Based Practice Unit, London

National policy statements in UK increasingly emphasise the delivery of comprehensive mental health services in school age children. There is emerging evidence that child mental health outcomes can be improved by close working between Child and Adolescent Mental Health Services (CAMHS) and educational services. Although there is global recognition of this principle, there is limited evidence base on the actual nature and extent of joint working. The aim of the study was to identify the frequency of school related mental health problems in a clinical sample and the types of joint working between CAMHS and educational services. This study was part of a wider feasibility trial involving three specialist child mental health services, each covering a population of approximately 300,000. Data from 433 children aged 7-11 years, who had been consecutively referred to the service over one year was collected. A service template rated school-related problems among children under CAMHS and the level of joint working between CAMHS and educational services.

The findings indicate that the number of school related problems in children who are under CAMHS was high. The most common problems among this group were challenging behaviour, learning problems, physical aggression and concentration difficulties. In 44% of cases contact was made with the school by requesting a school report. In 28.1% of cases there was telephone conversation with school professionals. In 32% of cases there was evidence of joint meetings with the school. In a significant number of cases there was joint working between the two services. Clearly there is a high overlap, hence the interface is important, although the indications and processes are not well understood. This study has highlighted the need to develop protocols/care pathways for more clinically and cost effective joint interventions.

3. Autism

Enhancing the Care of Children with Autism Spectrum Disorders Through Technological Provision for Parents: Exploring What Parents Need and Want from Services

Michelle O’Reilly
Khalid Karim
Autistic Spectrum Disorder (ASD) is a complex neuro-developmental condition which typically presents in childhood. Following diagnosis, parents can be left feeling overwhelmed and distressed. Often they do not know where to seek suitable information or what type of information to trust.

To explore these matters further, a stakeholder group was developed to represent the views of parents, service providers and the voluntary sector. This group was brought together to explore a suggestion made by parents of children with ASD attending the CAMH service. This suggestion proposed that there needs to be an interactive contemporary resource which they are able to access when required. Both parents and the stakeholder group report that interaction with a professional is the best way to learn about ASD, but recognise this is not feasible all the time. They were both clear about the limitations of learning from books and other purely text-based provisions, and wanted the service to look at alternative modes of psycho-education.

This project, therefore, is designed to interview parents who have a child diagnosed with autism. We use a qualitative design to explore what information parents require following diagnosis. We interviewed some parents who had received their diagnosis recently, and some who received it up to ten years previously. The analysis from these interviews will form the basis of a larger scale grant application. This will also afford an opportunity to make some initial developments on the web-based resource.

**Autism Research Proposal Development**

Michelle O’Reilly  
Khalid Karim

**Duration**: 2011-2013  
**Funding**: NIHR Clinical Research Networks

Autistic Spectrum Disorder (ASD) is a complex neuro-developmental condition which typically presents in childhood. Currently approximately 1% of children and young people are estimated to have this condition, although many go undiagnosed. ASD has a variable presentation but classically presents with a triad of impairments. These impairments include social difficulties, communication difficulties and lack of flexibility in thinking.

The funding was provided to enable a larger scale research funding bid to look at the psycho-education needs of parents of children newly diagnosed with autism. This will be greatly facilitated by the locally awarded funds to carry out preliminary interviews with parents using the current psycho-education method.
Pre-protocol Award for Autism Research

Michelle O’Reilly
Khalid Karim

Duration: 2011-2013
Funding: National Institute for Health Research

This award was provided to inform an application to the NIHR regarding children with autism. It is our intention to use the money to conduct stakeholder meetings to inform the grant application. These meetings will require a number of stakeholders to inform the project. The project idea relates broadly to psycho-education and the use of technology.

Although the research group are generally aware of the psycho-educational needs of families who care for children with Autistic Spectrum disorder, it is important to meet with this group to develop the ideas in detail. This will include the subject matter which they feel is important in this area and the mechanisms for accessibility, as this project has an information technology component.

This group has now met three times and has come up with a number of recommendations which we will consider carefully when developing the main bid for funding. An important idea that was generated was the need to conduct a preliminary investigation of the current psychoeducation resource and some local funding has been secured to conduct this. We intend to meet with this group throughout 2013 to continue developing the ideas.

4. Vulnerable Children and Young People

Substance use and quality of life among adolescents in developing countries

Dejan Stevanovic, Department of Psychiatry, General Hospital Sombor, Sombor, Serbia
Olayinka Atilola, Department of Psychiatry, University College Hospital Ibadan, Ibadan, Nigeria
Yatan Pal Singh Balhara, Department of Psychiatry, All India Institute of Medical Sciences, Ansari Nagar, New Delhi, India
Mohamad Avicenna, Faculty of Psychology, State Islamic University Syarif Hidayatullah, Jakarta, Indonesia
Hasan Kandemir, Department of Child and Adolescents psychiatry, Harran University, Sanliurfa, Turkey
Panos Vostanis
Aims
Health-risk behaviours, such as alcohol, drugs and tobacco use and high risk sexual behaviors have significant impacts on adolescents' health and quality of life (QOL). This study evaluated the relationships between different substances use and QOL among adolescents living in developing countries.

Methods
In total, 1844 adolescents participated from secondary schools in India, Indonesia, Nigeria, Serbia, and Turkey (957 (51.9%) males, age mean 15.6 (1.3) years). The Pediatric Quality of Life Inventory™ (PedsQL) was used for QOL assessments, the Strengths and Difficulties Questionnaire (SDQ) was administered to assess mental health problems, and the CRAFFT self-report questionnaire was administered for eliciting problematic alcohol/drug use.

Results
Of all adolescents surveyed, 32.4% reported substance use. Of those reporting alcohol/drugs use, the rate of occasional user was 16.5%, while the substance abuse and dependence rates were 7.9% and 5.3% respectfully. There were statistically significant differences among four diagnostic CRAFFT groups (no use, occasional use, abuse, and dependence) on the PedsQL total and across physical, emotional, and school domain (p < 0.001). Adolescents who showed alcohol/drug abuse and dependence had significantly lower scores in the PedsQL total and across the Physical and School functioning domain than those who occasional use substances. The highest difference was found in the School functioning domain for those who showed alcohol/drug dependence (d = 0.81).

Conclusions
Substance use has negative impact on in QOL general and main QOL domains, but substance abuse and dependence have more profound impacts especially on school functioning domain among adolescents living in developing countries.

Evaluation of an Attachment group for Carers and Parents of Looked After and Adopted Children

Nadzeya Svirydzenka
Dr Jeanette Bowlay-Williams, Clinical Psychologist, Leicestershire CAMHS
Panos Vostanis

Duration: 2012 - 2013
Funding: Clinical Research Networks

Background
One in ten children and adolescents in the UK has mental health problems. However, in foster or adoptive children, chances of developing a mental health problem rise to 30%-40%. In providing comprehensive mental health care for this high-risk population, Child and
Adolescent Mental Health Services (CAMHS) in Leicester have developed an attachment theory-based training for foster carers and adoptive parents.

**Research Objective**

The study will evaluate attachment group designed specifically for foster and adoptive carers. Gained insights are likely to improve current services available to a population that is four times as likely to experience mental health problems, as well as (i) inform the design of additional services; (ii) establish an effective model of service evaluation; and (iii) effectively treat mental health problems.

Evaluation will focus on three main questions:

1. Does adopted/foster carer focused training improve the mental health of the child?
2. Does attachment group training reduce adopted/foster carers’ stress and improve their well-being?
3. Can any positive changes in the carer’s management of the child’s mental health difficulties after attachment group training be perceived by the child that received the referral?

Thus, the project will provide a comprehensive account from the points of view of both carers and looked after/adopted children for the benefit of attachment theory knowledge and skills in managing mental health problems of this high-risk population; as well as build an account for patient-led improvements to the training.

**Methods**

One hundred and twenty adopted or foster carers who attended or will attend group training sessions at Child and Adolescent Mental Health Service (CAMHS) in Leicester will be recruited. They will be asked to complete parenting and mental health measures for their child that received the referral to CAMHS before and after their participation in the training group.

A smaller sample of these adoptive or foster carers and their children that received the referral to CAMHS will be recruited for a follow-up interview. These interviews will provide both the carer’s and child’s perspectives on whether attachment theory-based group training had an effect on how child mental health problems are managed and whether there have been an improvement in placement relationship.

**Preliminary Results**

Thematic analysis of the carer interview data showed strong support for attachment-based group training for foster carers and adoptive parents as an effective way of supporting mental health needs of a high-risk population of children and adolescents experiencing such problems. Specifically, carers note the value of (i) practical strategies in managing difficult behaviours, (ii) increased understanding of child attachment history, and (iii) shared companionship with other carers on the course. Analysis also revealed that closer integration of carers and children as a part of training and a more rigorous and long-term follow-up on its effects by
CAMHS as well as take-home reference material may be good ways to improve training outcomes and facilitate long-term effects.

Engagement of Youth Offenders Attending CAMHS: Factors that may Influence their Attendance

Jugjinder Singh  
Sophia Shenthil  
Sophie Davies, Senior Trainees in Child Psychiatry, Leicestershire CAMHS  
Panos Vostanis

Background

Youth offenders are at a high risk of mental health problems. They may have had difficulty accessing services in the past. When engaged with the Youth Offending Service (YOS), a screening tool, the ASSET, is completed, and this is an opportunity to identify problems and needs that may have gone unmet. At this opportunity to intervene it is important to maximise the chances of the young person engaging with mental health services. Attendance is one of the first steps towards successful engagement and therapy outcomes.

Aims

This study aims to explore the factors particular to the Youth Offending Service that may impact on the young persons’ initial and continued attendance at CAMHS. This study will also explore risk factors they face. We aim to identify those at greater risk of not attending and for whom, therefore, additional efforts or input may be required.

Methods

This is a retrospective study using the Young Offenders Service completed ASSET screening tools and the CAMHS case notes to capture details of appointments offered and duration of attendance. Young people consecutively referred from YOS to CAMHS over one year will be included in this study.

Measures

A checklist has been devised following discussion with CAMHS clinicians and YOS Team Leaders, and a review of the available literature. The YOS ASSET screening tool was used to identify young people’s demographic information and risk factors. The CAMHS system was used to collect information on the appointments offered to the young person and how many of which they attended / cancelled / did not attend. The case notes were required to look at the referral form detailing the concerns about the young person’s mental health, the details of the first appointment, and what interventions were offered.

Collected data has been analysed and a paper is being written up.
Evaluation of the Impact of a Parenting Course on Improving Skills for Parents of Deaf Children

Joanna Downes, Freelance Consultant and Researcher  
Panos Vostanis

The aim of the study was to pilot an evaluation methodology for a Parenting Course that was developed by National Deaf Children’s Society (NDCS), with input from the Parent Company and Parent Link. The course aims to support parents of deaf children to develop practical strategies to support their child, communicate effectively, and improve their own and their child’s self-esteem. The course is being delivered to parents across the UK. We administered the Strengths and Difficulties Questionnaire, Home Observation Measure of Environment, Parenting Stress Index and semi-structured interviews pre-intervention, post-intervention and at three-month follow-up.

The nature of measuring the impact of a parenting course in a culturally diverse sample with confounding variables of previous intervention received, language use, parenting skills and degree of hearing loss is a challenge. We piloted the use of a range of validated measures that will capture data on a wide range of variables, to hopefully identify key factors that demonstrate improvement due to the parents’ engagement in the course.

Impact of Trauma on Children Living in War Zones

Abdel Aziz Thabet, Assistant Professor of Psychiatry, School of Public Health, Al Quds University, Gaza Strip  
Panos Vostanis

A number of epidemiological studies by this research group in the Gaza Strip have established high prevalence rates of PTSD and other mental health problems, which were strongly associated with exposure to traumatic events and socioeconomic deprivation. Recent studies have investigated the prevalence of ADHD, and difficulties in differentiating some ADHD symptoms from PTSD; and the evaluation of a community intervention for women who suffered domestic violence.

Development of a user-led intervention for homeless children and parents

Nadzeya Svirydzenka  
Panos Vostanis

Duration: 2013-2014  
Funding: Clinical Research Networks
Despite the evidence, largely from this research group, that homeless children and families, including victims of domestic violence, have high levels of mental health needs, there is limited evidence of effective interventions. A number of trauma-focused programmes for victims of domestic abuse could form a useful baseline, but would need to be adapted to the context and circumstances of homeless children. The aims of this study will be to capture homeless children’s and parent’s views and experiences in modifying existing training programmes for service purposes; develop such a child-centred intervention; and evaluate its effectiveness.

5. Teaching Evaluation

Student Life Events and their Impact on Academic Progress

Nisha Dogra
Jonathan Hales, Senior Lecturer, Medicine and Social Care Education, University of Leicester
Jon Scott, Director of Biological Studies, University of Leicester

Background
There is limited evidence on whether student performance is related to life events they experience. There is also little information on life events experienced by the student body, and particularly those who fail to make academic progress and cite life events as the reason. Such reports are usually retrospective. It is difficult to propose suitable solutions when the nature of the problems experienced by the student body is undocumented, although anecdotally familiar. We need better data if we are to improve student support. We also need information on those students who experience life events, and manage these to reduce the potential impact on their studies.

The aims of this project were to:

- Identify the numbers and types of life events experienced by first and second year Medical and Biological Sciences students.
- Gain information on students’ perceptions of the impact of these life events.
- Use the findings to support and/or develop appropriate University policy to support students.

Methods
We designed a study specific questionnaire to collect information on whether students experienced life events, and to indicate their perceived impact. Students had the option to add other life events that we may have failed to consider. The list of life events was compiled from previous literature and from our own experiences of dealing with students. Linden’s questionnaire was validated for use in Canadian students, and although validated for use in the UK, it was not directly transferable to our context. Basic demographic details were also collected. The questionnaire was piloted on students for face validity and timing.
Developing an Instrument to Measure Law Students’ Understanding of the Impact of Culture on the Lawyering Process

Andrea Curcio, Law Professor, Georgia State University College of Law, US
Nisha Dogra
Teresa Ward, Senior Research Associate, Georgia State University, US

In today’s multi-cultural world, one critical lawyering skill is the ability to understand how people’s diverse cultural backgrounds affect the lawyering process. The health care professions have long recognised the need to train their students to be more culturally aware. They have developed empirical measures to assess students’ cultural awareness and the impact of interventions designed to enhance that awareness. Law schools have yet to do the same.

Using the literature and models developed in the health care professions, we are designing an instrument that seeks to assess law students’ awareness of the role that cultural background plays in the lawyering process. Our research team includes health care professionals, law professors and cultural anthropologists from the U.S. and the U.K.

Our goal is to develop a valid and reliable instrument that can be used by in the U.S., U.K. and other countries to measure law students’ cultural awareness and sensitivity as it relates to the lawyering process, and to measure the impact of interventions designed to raise that awareness and sensitivity. We also hope that the instrument itself will prompt students who participate in the survey consider the role culture plays in the lawyering process, thereby the instrument itself serves an educational purpose.

We have successfully published the pilot work and are working on dissemination of the findings about student perspectives.

An Evaluation of Secondary Care Training Provision and Support in the East Midlands Strategic Health Authority

Nisha Dogra
Dr Robert I Norman, Director of Medical Education Research & Development

Duration: 2012 - 2013
Funding: East Midlands Strategic Health Authority

Background

Clinical education is provided largely by non-academic clinical teachers, most of whom undertake this work as a part of their clinical service contract to the NHS. The understanding
between NHS Deaneries and Medical Schools is that their relationship is mutually beneficial, but increasing pressures in both domains to improve efficiency and quality in their respective activities place strain on this relationship. Students’ experiences of medical teaching have been evaluated at both undergraduate and postgraduate levels. In contrast, only limited attention has been given to the views and attitudes of teachers of medical undergraduates, and almost none of teachers/trainers at the postgraduate clinical level. While teachers report their enjoyment of teaching in general, issues that have been raised include a potential disjunction between contractual expectations and the perceived teaching experience of teachers, as well as the status of teaching and the subsequent rewards (financial and otherwise).

This proposal is for a survey of trainer engagement, the quality of support for clinical teaching and of trainer experiences and attitudes across secondary care providers in the East Midlands Strategic Health Authority to provide baseline data on the postgraduate training environment.

**Aims**

This on-line survey of all supervisors/trainers involved in postgraduate clinical training in secondary care providers in the East Midlands SHA (EMSHA), will determine:

1. The time commitment and level of engagement of supervisors/trainers in postgraduate and undergraduate education and training.
2. The nature of the education environment and the quality of support for education/training of postgraduate trainees.
3. The training received in medical education by consultant postgraduate trainers.
4. The views of supervisors/trainers on their contracted postgraduate teaching/training responsibilities with regard to the:
   a. importance of the trainer role
   b. ability to balance educational and other duties
   c. experience of the environment and support for postgraduate education
   d. involvement in the curriculum design and delivery
   e. feedback received on teaching/training quality
   f. esteem for teaching
5. The quality and preparation of trainees.

**Methods**

An on-line survey will be designed and distributed electronically to all secondary care postgraduate supervisors/trainers in the EMSHA using the SurveyMonkey licence held by the East Midlands Healthcare Workforce Deanery. The survey will comprise predominantly of evaluation of 5-point Likert scale statements, with some open free form questions. A high response rate is expected, since some of the data requested in the survey will be requested for statutory purposes.

The data has now been collected and the findings are being disseminated.
**Postgraduate Students**

**PhD Students**

**Ejalal Jalal, PhD student**


**Background**

In 2005, the National Family Safety Programme (NFSP) was developed by the Royal Decree of the King. Between 2007 and 2008, the NFSP established a child protection centre in one of the major hospitals. This project received the full support and approval of the National Health Council (NHC), the highest health service authority in the Kingdom of Saudi Arabia.

The centre offers several basic training courses annually in collaboration with other agencies. The objective of these training courses is to provide participants with basic skills to identify signs, causes and consequences of child abuse and neglect, and in managing child protection within their professional remit.

**Aims**

To establish participants’ views on the impact of this training on their practice.

**Methods**

Stage 1: Quantitative component containing pre- and post-training questionnaire, assessing knowledge, attitudes and competence in dealing with abuse cases.

Stage 2: Qualitative component of interviewing a sub-sample of participants.

**John Hoffman, Lecturer, School of Social Work**

**A critical examination of the associations between foster carer attachment style and disruption**

The study will undertake a critical examination of the associations between foster carer attachment style and disruption. Secondary analysis of key demographic characteristics, adolescent attachment style, and developmental factors will also be considered as well as their implications for social work practice. The study will focus on looked after children thought most likely to experience placement disruption, i.e. children in middle childhood through to adolescence.
The aim of this study is to establish how child and adolescent mental health services (CAMHS) are working in partnership with schools and educational services, and how the two organisations are set up and prepared to meet the new partnership-driven initiatives.

Background
The importance of partnership working has been specifically defined in several policy documents. For example, the NHS Plan announced the new agreement to pool budgets in new health and social care organisations. In others, partnership working has become inherent in the description of future services and expectations. Despite this continued policy drive, how prepared are child mental health and education services for this change of direction and practice?

Aims
This qualitative research project explores the following research questions:
- Are CAMHS working in partnership with schools and education services?
- Do both services have sufficient knowledge and awareness of how each service supports the well-being of children and young people?
- How is the partnership working organised?
- Are CAMHS and educational services equipped to participate in the new planned service initiatives that outline the necessity for partnership working?
- Is partnership being valued?
- Are the goals of partnership working compatible with other goals?

Methods
The above will be established from the perspectives of key professional groups and managers across statutory health, and educational services. The definition of partnership working for this study thus includes a broad perspective, from a fully integrated multi-agency team to collaboration between agencies. This covers the breadth of policy, research and practice in this field.

Tania Hart, Senior Lecturer, University of Northampton

Qualitative Study Exploring how Young People with Mental Health Difficulties can be Better Supported in Mainstream Education

This study explores how young people with mental health difficulties can be 'better' supported in mainstream education. It focuses on the school experiences of young people, aged 14 to 16 years of age, who are attending CAMHS.
Limited evidence is available into how young people with mental health difficulties view and interpret their school experiences. This study recognises the intrinsic link made between a young person's academic achievement and mental health wellbeing, noting the research, which suggests that young people with mental health difficulties are more likely to underachieve, placing them more at risk of social exclusion, unemployment and adverse mental health outcomes.

Data will be obtained from three groups: young people, their parents, and their teachers, using a semi-structured interviewing technique. Consenting young people and their parents were recruited via Northamptonshire Specialist CAMHS. Parents and children were interviewed in order to explore their perspectives of how learning can be 'better' supported. Permission was also requested from the young person to contact a supporting teacher. Their teacher was then interviewed to ascertain their perspectives on how they felt children with mental health difficulties can be best supported. Eighteen participants from each sample group were be interviewed. The data has been collected and is being analysed with the aid of specialist software (NVivo).

The research findings will be disseminated, and it is hoped that this information will be used by specialist CAMHS practitioners and teachers to enable them to better support the education of young people with mental health difficulties.

**Pallab Majumder, Clinical Lecturer in Child and Adolescent Psychiatry**

**Experiences of Unaccompanied Refugee Minors of their Contact with CAMHS**

This qualitative study aims to fill the gap in the knowledge on the experiences of unaccompanied asylum seeking young persons of their contact with specialist mental health services. The research questions are:

1. What are the unaccompanied refugee minors’ experiences of specialist mental health services?
2. Are these experiences perceived to influence the overall effectiveness of the service provided?
3. What are the factors perceived to influence these experiences?
4. Is there anything that this population believe needs to be changed in services to make their experience and contacts more effective?

Children are a unique research group who are particularly vulnerable. This applies even more in unaccompanied children seeking asylum, many of whom will have been persecuted by authorities in the past, making a careful ethical consideration ever more important for this group. This project has a full ethical approval by the NHS Research Ethics Committee.
The sample consists of refugee children and young people who are unaccompanied. The initial piloting of the interview schedule, as well as the data collection by interviewing the study participants, have been completed. Data has been collected by interviewing 15 young people and their carers from consecutive referrals to a Tier 2/3 Children and Adolescent Mental Health (CAMHS) team for looked after children. Young people and their carers were interviewed using a semi structured schedule. All interviews were audio taped, transcribed verbatim, and are currently being analysed by a thematic framework. QSR NVivo software is being used to analyse the data.

Victoria Stafford, Research Associate at Greenwood

The organisation of access in child mental health assessments: A conversation analysis of initial assessment appointments in a Child and Adolescent Mental Health Service

The purpose of this study is to explore communication between families and clinicians at initial assessment (triage) appointments at the Leicester Child and Adolescent Mental Health Services (CAMHS), with a conversation analytic focus. In particular, the study will look at how families and clinicians ‘negotiate’ access to the service through their interactions.

Background

Despite a wealth of research into communication in health related settings, there is very little that has focused specifically on CAMHS. Triage appointments provide a particularly rich environment in terms of the discursive strategies employed. The main purpose of the appointment is to act as a screening process for non-emergency cases referred to the service. After hearing from the family regarding the child’s medical history and the problems they are encountering that have led to their attendance at CAMHS, the clinician has to determine whether CAMHS is the right service to be treating the child, or whether another outside service would be more applicable, or indeed, whether the family’s concern about the child warrants any form of treatment.

From the perspective of this research, the fact that the clinician is making a decision relating to the child’s future course of treatment based on the perceived severity of their problem and how the family presents this is of particular interest. The notion that many families are attending CAMHS seeking a particular diagnosis and further help through the service changes the dynamic of the appointment, leading to particular interactional techniques being employed.

Objectives

The purpose of this research is to gain a better understanding of the interactional and conversational processes involved in these initial appointments, particularly exploring the ways clinicians manage their responsibility with regards to access to future treatment and
services. The research will also look to the needs of the family, and the mechanisms they use to achieve what they feel is best for their child.

**Methods**

Video recordings of the appointments were collected with consent from the families and clinicians involved. The recordings were then transcribed verbatim and had Jeffersonian transcription conventions added to them. The transcripts will be subject to conversation analysis to look further into the objectives outlined above.

**Psy D Students**

Lisa Anderson, Senior Teaching Fellow and Training Co-Ordinator in Child Mental Health

**Childrens’ and Adolescents’ Understanding of Different Mental Health Therapeutic Interventions**

**a) Main Research**

Despite recent interest in children’s participation, perceptions and understanding of Child and Adolescent Mental Health Services (CAMHS), this is limited to service opinions, consent and aiding in development of services. In contrast, there is limited evidence of their understanding of the treatment options and therapeutic approaches, such as Cognitive Behavioural Therapy, Family Therapy, Psychodynamic Therapy or Interpersonal Therapy. This would have a significant impact on their ability to provide informed consent and engage in the therapeutic process.

This study aims to investigate children’s and adolescents’ understanding of different mental health therapeutic interventions. This will be achieved through semi-structure interviews with a non-clinical sample cohort (not currently involved with CAMHS) of children selected from Schools and Youth clubs.

**b) Service Evaluation**

Evaluation of a five-day introduction to Cognitive Behavioural Therapy (CBT) for Tier one staff.

The CBT course was developed for the local Improving Access to Psychological Therapies Initiative (IAPT) in Leicestershire, which is a government initiative to improve the skills of workers in therapeutic interventions across all services. The course has been piloted twice in 2012, for a total of 27 participants. Three more courses are to be run during 2013, with 20 participants per course.
The learning outcomes for the course are.

By the end of the course, participants should:

- Have a general understanding of the basic fundamentals of CBT
- Be able to carry out a basic assessment
- Be able to produce a conceptualisation
- Be able to formulate a treatment plan
- Demonstrate a sound understanding of behavioural techniques and be able to apply these with children and adolescents
- Demonstrate a sound understanding of cognitive techniques and be able to apply these with children and adolescents
- Demonstrate the ability to apply CBT principles to low level anxiety and depression

Pre- and post-training questionnaires to measure their understanding of CBT and relevance to practice and training feedback questionnaires will be administered to all applicants immediately before and after completion of the course. A subsample of 40 participants will then be contacted at six months for a semi-structured telephone interview to measure the impact of the training, asking for examples of how the training has changed their current practice.

**Elizabeth Hale**, Chartered Health Psychologist, Department of Rheumatology, Dudley Group of Hospitals NHS Trust

**Funding: Arthritis Research UK**

**Children of Parents with Chronic Inflammatory Musculoskeletal Diseases: Experiences, Needs and Resources**

The aim is to establish how a parent’s musculoskeletal condition is perceived to impact upon individual and family life from the perspectives of the child(ren), parent and partner. Also to ascertain what kind of information the child(ren) would like to have about their parent’s condition, the format this should take, how and when they would like it given to them, and who should give them this information.

This will use a qualitative methodology to conduct semi-structured interviews with adult patients (>18) attending a hospital rheumatology service who have children aged between 7 and 11 years. The researcher will interview the patient, partner (if there is one) and child(ren). The children will also have the opportunity to produce artwork such as posters and storyboards.

The results of the project will be made available to the funding organisation Arthritis Research UK and will be disseminated via peer reviewed journals and at conferences. It is
hoped that future work will develop relevant materials which can then be piloted and assessed in an appropriate sample.

**Clin Psy**

**Louise Brittenden**, Trainee Clinical Psychologist, University of Leicester

**The Mental Health Needs of Adopted Children: Understanding the Experiences of Adoptive Parents Navigating the Mental Health Assessment Process**

**Background:**
The Children and Families Bill 2013 aims to improve support for vulnerable children and their care givers. Within this framework, current government policy is encouraging more children to be adopted from care. Whilst adoption is clearly regarded as a positive intervention, the realities of a life-long process involving issues of profound loss, separation, identity and belonging can often present significant difficulties. Consequently, there has been increasing concern that the mental health needs of older children adopted from care have been overlooked. Adopted children are twice as likely to be in contact with mental health services and to have received counselling compared to non-adoptees. Older children adopted from care are exposed to similar adverse experiences as those suffered by looked after children. Whilst government initiatives and research have tended to focus on the needs of looked after children, there is limited evidence or specific guidance regarding the mental health needs of children adopted from care. The costs of unsuccessful transitions can be considerable for the child and family as well as society more generally.

In recent years, adoption research has focused on international adoptees and adoptees from overseas institutions. The literature concerning domestic adoption is limited, and has employed quantitative analyses to investigate mental health outcomes and mechanisms of psychopathology. A richer understanding of the experiences of adoptive families dealing with mental health difficulties is needed to help clinicians identify risk factors at an early stage so that interventions can be targeted and timely.

**Aims**
This study aims to explore and understand how parents of older children adopted from care experience the mental health assessment process, from the point of initial help-seeking through to completion of the assessment.

Data from interviews will be analysed using Interpretive Phenomenological Analysis (IPA), a qualitative approach. The findings will facilitate a deeper understanding of how adoptive families experience mental health assessment and help to inform clinical practice.
MSc in Child Mental Health Students

Jayne Trezise, Child Mental Health Specialist

Parents’ Perceptions of Theraplay to Manage Children’s Behaviour

The aim is to ascertain parents’ perceptions of Theraplay to manage children’s behaviour. Theraplay is the registered trade mark of the Theraplay Institute in Chicago and was devised to help manage behaviours related to attachment difficulties. Parents that have gone through the Theraplay program were interviewed to gain their views of the intervention; whether they have experienced improvements in their child’s behaviour; and whether the improvements have been sustained.

Frances Morris

CAMHS Clinicians’ Management of Parental Mental Health and how that may Affect the Child’s Therapeutic Involvement

The aim is to ascertain CAMHS clinicians’ management of parental mental health and how that may affect the child’s therapeutic involvement. The clinical team is diverse with clinicians from different professional backgrounds, and with varying levels of training in relation to adult mental health. Information will be collected to gain understanding of the approaches and management of such cases, and whether there is a need for a more structured approach. The study findings may highlight areas for training or a service protocol.
Psychology Undergraduate Dissertations

Aysha Qureshi

Investigating the Association Between Adverse Life Events and Mental Health and the Role of Optimism

This study looked into whether Life events impact mental health and whether optimism plays a role in this association. Life events were measured using Coddington’s Life Events Scale. Mental health was measured using the 12-item General Health Questionnaire. Optimism was measured using the Life Orientation Test. The research also explores whether optimism is associated with mental health. Participants were University of Leicester students.

Hannah Rowley

Contact with, Knowledge of and Attitudes Towards Mental Illness

This project investigated whether having previous contact with those suffering from mental illness (in a variety of contexts) is associated with an individual's current attitudes towards the mentally ill; and whether a person's knowledge of mental illness also influences their attitudes. Furthermore, it aimed to examine the potential interaction between contact and knowledge and whether they have an individual or combined influence on attitudes. Undergraduate participants were recruited from the University of Leicester, School of Psychology and were asked to complete a series of questionnaires assessing their attitude towards mental illness, contact with the mentally ill and knowledge of mental illness. It is hoped that by distinguishing the factors potentially associated with attitudes towards mental illness, those prone to a more positive or negative attitude can be better identified. This would therefore aid in the effective targeting of interventions aimed at improving attitudes towards mental illness.

Rebecca Fraser-Wright


Despite the proliferation of drug addiction in today’s society, and the magnitude of devastation caused to healthcare and families, the nature and causation of the disease remains to be understood. Drug addicts’ experience of dependency could reveal valuable insight, and inform more successful methods of treatment for the disease. A documentary analysis of ten autobiographical accounts drug addictions were analysed using a Thematic Analytic framework.
The aim of this study was to explore the views of mental health experts and non-experts of appropriate consequences for individuals committing crimes who have mental health difficulties. The research also explored whether the differing nature of the illness or type of crime affects the different type of punishment or treatment. There are many misconceptions about mental health, and much stigma related regarding whether people with mental health issues are violent and dangerous, and this research aimed to investigate some perceptions regarding why this might be the case. Participants were over the age of 18 and were interviewed using a semi-structured interview that was audio recorded. This was then transcribed using Jefferson transcription, and analysed using Discourse Analysis.
Publications

Research Papers (in press)


O’Reilly M (in press) “We’re here to get you sorted”: parental perceptions of the purpose, progression and family outcomes in family therapy. *Journal of Family Therapy*.

Parker N and O’Reilly M (in press) “We are alone in the house”: A case study addressing researcher safety and risk. *Qualitative Research in Psychology*.


2013


O'Reilly M and Parker N (2013) 'You can take a horse to water but you can't make it drink': Exploring children's engagement and resistance in family therapy. *Contemporary Family Therapy*, doi: 10.1007/s10591-012-9220-8

O'Reilly M and Parker N (2013). 'Unsatisfactory Saturation': A critical exploration of the notion of saturated sample sizes in qualitative research. Qualitative Research. DOI: 10.1177/1468794112446106


2012


2011


**Books**


**Book Chapters**


**Reports**


**Lectures and Presentations 2012/2013**


O’Reilly M, Karim K, and Parker N (2013) “So when you ↓said that you were going to take a knife to yourself (0.99). Yeah (1.15) what were you ↓hoping would happen?“: an exploration of ‘you said’ questions in clinical encounters. Paper presented at ‘CA and Psychotherapy’ July conference. York: University of York.


Majumder P (2012) Presented methodology of the project “Experience of unaccompanied refugee minors of their contact with a specialist mental health service” in the discussion
session on “Child Refugee and Trauma” as a Panel Member in International Conference on Displaced Childhood organized by the Oral History Society at Southampton Solent University, 14th July 2012.


Panos in Oviedo, Spain
Open Day – 28th June 2013

This year our Annual Research Fair will have a user focus, with all presenters being young people and parents. The theme of the Open Day, which will also celebrate the 20th anniversary of the Greenwood Institute of Child Health, will be the promotion of child mental health in the community, and the value of research in implementing good practice.

Poster Event

“What is good mental health?” poster competition

The Greenwood Institute of Child Health initiated a Greenwood Prize among a few selected local schools for the best design of a digital poster that demonstrated: “What is good mental health?” The poster needed to show what good mental health is and/or how young people can look after their mental health. The entries were judged by a panel comprised of members of staff from the University of Leicester, Leicestershire Partnership Trust and primary care staff.

On 31st of January 2013 we held a poster presentation and an award ceremony at the University of Leicester for participating students and their families, as well as school teachers and staff. The event was well attended and three prizes were awarded. The winning entries will be produced into posters for use in the wider community and also displayed at Westcotes House, the clinical base of the City Child and Adolescent Mental Health Service (part of Leicestershire Partnership Trust).
Mosaic Donation

The mosaic on the front cover of the report is titled ‘Every Child Matters’. This was produced by Mr Gary Drostle and donated by Mrs Frances Nicol to Westcotes House, for the benefit of children attending the service. Frances’s late husband Professor Rory Nicol was the founder of the Greenwood Institute, held the first Chair of Child and Adolescent Psychiatry at the University of Leicester, and was the Clinical Director of Leicestershire CAMHS. Rory was an inspiration to academics and practitioners around the world and established the Institute as an international research and teaching centre.

Visitors from overseas

Dagmar Feddern, Centre for Alcohol and Drug Research, Aarhus University, Denmark

Dagmar visited in the autumn 2012, as part of her Ph.D. degree. She studied the relationship between post-traumatic stress symptoms, attachment structures and substance use in 2,029 randomly selected Danish 15- to 18-year-olds. The data is quantitative and collected from a battery of self-report questionnaires completed in an online survey. Underlying attachment structures were explored and are hypothesized to contribute to a better understanding of how some individuals exposed to traumatic events are more likely to develop post-traumatic stress symptoms and/or problematic substance use.

During her stay she met with psychologists, nurses and psychiatrists specializing in adolescent mental health, where she learned about the clinical application of attachment research; and also gained a better understanding of how childhood traumatic experiences often play a complex part of diagnostic mental health assessments, especially within groups of adopted, homeless, in care and juvenile adolescents. The stay at the Greenwood Institute of child health also gave Dagmar a good insight to the adolescent mental health service in the United Kingdom.

Ana Sainero, University of Oviedo, Spain

Ana graduated in Psychology and is a member of the Child and Family Research Group since 2008, where she has participated in various projects concerning several areas such as residential and foster care, behavioural and mental health issues.
Her main research topic is the assessment of mental health in out-of-home care children and youths. She carried out the first study in Spain concerning The Assessment of the Mental Health of Children in residential care in the autonomous community of Extremadura. In 2009 Ana obtained a grant for a Phd program called Severo Ochoa in order to perform a longitudinal study of the assessment of development, welfare and mental health in children and youths in care. She is currently working on various papers and issues relating to this subject in Spain.

Prof. Dr. H.W.E. (Hans) Grietens & Dr. M. Lopez Lopez, University of Groningen, Holland

Professor Hans W.E. Grietens (°1965) has studied clinical child psychology and developmental psychology at the University of Leuven (Belgium). In 1999, he obtained a PhD in social sciences at the University of Groningen, where he is since September 2010 full professor in the Centre for Special Needs Education & Youth Care. Until then he was associate professor in the Parenting and Special Education Research Unit of the University of Leuven. He is conducting research on child welfare, in particular foster care. Core interests are 1) children’s perspectives on care, 2) caring for sexually abused and traumatised children, 3) mental health needs of children in care and 4) historical child (sexual) abuse in care.

Dr M.Lopez is a researcher at the same University Department with interests in child welfare, foster and residential care.

Hans and Dr Lopez visited between 16th -19th June 2013.
Congratulations

Nilesh Chauhan, from Judgemeadow School, for winning The Greenwood Institute Prize for best mental health poster.

Taught Postgraduate Students

These students were all funded by IAPT and successfully completed the Postgraduate Certificate in Child and Adolescent Mental Health during 2012:

- Sophie Turner
- Andrea Fiford
- Phil Harbour
- Catherine McKillop
- Alexandra Pitman
- Michelle Martin
- Penny Boyd
- Gurjit Basi
- Kelly Winson
- Melanie Godfrey
- Andrea Kabi

One student was awarded the MSc in Child and Adolescent Mental Health:

- Mark Palmer
This year was marked by the sad loss of Howard Meltzer, Professor of Mental Health and Disability at the University of Leicester.

Howard was one of the most renowned psychiatric epidemiologies in the world. In both his earlier capacity at the Office for National Statistics (ONS) and in his subsequent academic Chair, Howard influenced policy, research and practice by establishing evidence on prevalence of disorders and needs, as well as service utilization for child, adult, learning disability and prison populations. We were particularly fortunate to collaborate closely with Howard for more than ten years in the planning and dissemination of two National Child Mental Health Surveys, and one for ‘Looked After Children’.

The University of Leicester will celebrate Howard’s contribution on 14th October 2013. We greatly miss Howard, but we are also extremely proud of his influence in our field, his position at the University of Leicester, and his productive association with our Institute:


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