

# the Bridge

THE NEWSLETTER OF THE ASSOCIATION FOR CHILD AND ADOLESCENT MENTAL HEALTH

## View from the Bridge - Professor David Cottrell, Chair, ACAMH



It is flattering and daunting in equal measure to take over as the Chair of ACAMH. It is an honour to be invited to sit in the same seat as such eminent predecessors as Emanuel Miller, John Bowlby, Donald Winnicott, Jack Tizard, Elizabeth Irvine, Mike Rutter, Lionel Hersov and many others, and to have the opportunity to contribute to the advance of child and adolescent mental health and the professional disciplines it embraces. It is a little daunting because the Association appears to have been running very effectively over the last few years thanks to the efforts of previous chairs, honorary officers and staff. There is a heavy burden of responsibility to ensure that ACAMH remains successful during my term of office and that I hand over to my successor an organisation at least as healthy and successful as I have inherited.

I have taken up the Chair at a time when new charity laws have necessitated a review of internal governance procedures that have now been brought up-to-date, publications are being well-managed and financial stability has provided an opportunity to consider new initiatives, such as the conference bursaries and travelling fellowship. I would like to ensure that these exciting developments flourish but like most incoming chairs, I also have plans of my own that I would like to pursue. The change of name to ACAMH in 2005 was a response to a period of real growth and investment in CAMH services up and down the country and an acknowledgement that a comprehensive and effective CAMH service has to be truly multidisciplinary. In discussions with colleagues I am concerned that the 'name recognition' of ACAMH is still not as high as it should be. During my time as chair I would like to:

- Increase recognition of ACAMH amongst all professionals working in CAMHS as the pre-eminent organization promoting academic/scientific research and evidence-based practice
- Increase the multidisciplinary membership of ACAMH at board level as well as amongst members and add to the resources and benefits we provide to our members
- Encourage closer links between ACAMH and other similar organisations where this would bring mutual benefits
- Renew and support collaboration between branches and the provision of high quality local programmes

In the traditional spirit of the Association's Chairs, I would like to encourage you all to contact me with your ideas, thoughts or concerns; I and the Board welcome feedback and I hope that together we can make the Association even more relevant to those working within CAMH.

## JACK TIZARD LECTURE AND DAY CONFERENCE

"Psychological Aspects of Physical Illness" 8 June 2007 at the Royal Society, London

This well-attended day conference opened with the annual Jack Tizard lecture, delivered by **Elena Garralda**, Professor of Child and Adolescent Psychiatry, Imperial College London. With extensive experience in the interface between physical and mental health problems, psychosomatic disorders and psychiatric adjustment in children with paediatric conditions, Professor Garralda drew on her knowledge to provide a comprehensive overview of the developments that have drawn together physical and mental health problems. With a picture of Paddington Green children's hospital from the early days, she illustrated how things have changed in child and

adolescent psychiatry. Traditionally, attention was paid to the psychological aspects of chronic disorders such as asthma, diabetes and epilepsy; however, as the life expectancy in a number of acute disorders improved (eg cancer, cystic fibrosis, renal failure, muscular dystrophies, septic shock, traffic accidents), focus on the physical/psychological interface has correspondingly increased. The refinement of the assessing tools and instruments and the growing body of evidence of subtle neuropsychological anomalies in PICU admissions for meningococcal disease, leukaemia, central nervous system tumours, and liver transplantations have been the first steps that should lead the

way to understanding the brain changes that underlie the development of child psychopathology. Prof Garralda stressed the need for close integration between paediatric and child mental health services and advised that different stages of the illness and the psychosocial accompanying factors can shape the manifestations and degree of severity of derived psychiatric disorders, much as parents'

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reactions and ways of coping mechanisms influence the child.

The next presentation, by **Dorothy Judd**, a Child and Adolescent Psychotherapist trained at the Tavistock Clinic (London) with an additional art therapy background, helped delegates understand the outlook of the terminally ill child from a psychoanalytic perspective. She illustrated her talk with a number of different vignettes based on her sixteen years experience in child guidance clinics, teaching hospitals and her work at the Adolescent Oncology Unit at the Middlesex Hospital. The drawings done by some of the children she had worked with emphasised how the responses of parents and professionals to irreversible and progressive deterioration influence the child and help them to be as supported as possible with such a painful reality.



D Judd, D Cottrell



E Garralda, T Chalder



D Christie, M Eminson



C Eiser

**Christine Eiser**, Professor of Child Health Psychology at the University of Sheffield, focused on the significant changes in life expectancy in childhood cancer as a result of modern treatments, psychosocial care of the dying patient and family support. These changes have introduced new questions and challenges that need to be addressed, for example, the meaning of cure and the later effects of the disease or treatment, which could compromise quality of life in the immediate and longer term. She highlighted the relevance of psychoeducation and of providing continuity in follow-up appointments, given the long-term issues, in particular self-care and life style (ie non smoking advise). She also emphasized the importance of improving the transition to adult care by offering an integrated approach with joint clinics and improving training for General Practitioners and nurses at a primary care level.

To end the morning sessions, **Trudie Chalder**, Professor of Cognitive Behavioural Psychotherapy at King's College London, gave a comprehensive description of a cognitive behavioural model of Chronic Fatigue Syndrome in adolescents and its assessment in comparison to psychoeducation in a randomized control trial. She reviewed the literature about vulnerability

factors of personality, mainly related to higher sensitivity, rigidity and levels of high expectations, and reminded delegates about the tendency to attribute symptoms to physical rather than purely psychological causes and how this is a predictor of outcome. Parental influences have also to be considered as the parents have been shown to be overprotective and have high levels of expectations of the child as well. The theoretical model provided a treatment framework where Cognitive Behavioural Therapy (CBT) has a role by tackling the cognitive distortions of the child and by providing tailored family work. The results of the randomized control trial showed an improvement in social adjustment, going back to school and fatigue, with both CBT and psychoeducation. The CBT response was better at six, nine and twelve months but converged with the psychoeducation outcome at eighteen months, showing a dose-response effect. The future directions that followed these results were a need to assess the efficacy of interventions delivered by non experts, the need to test other methods of delivery (eg telephone/postal treatment, self help treatment, early intervention in primary care, etc) and further studies involving a valid control group to clarify the weight of the CBT intervention.

**Deborah Christie**, Consultant Clinical Psychologist at the University College Hospital London welcomed the afternoon session with an account of her painful experience of coming off her mountain bike whilst holidaying in Spain, to show the impact, externalization and communication of pain. Focusing on the interaction between the sick child and the multi-disciplinary teams supporting them, she emphasized the advantages of a unified approach and the importance of remaining positive and celebrating every small success. She drew frequently upon cartoons and Terpsichorean art to illustrate her message of pain management, quoting Mark Kleiman "Those who dance appear insane to those who cannot hear the music". She concluded with the five C dance steps of Collaboration, Circularity, Culture,

Communication and Championing stories to improve the understanding and management of young people experiencing pain.

**Mary Eminson**, a Consultant Child and Adolescent Psychiatrist, gave a very articulate and entertaining presentation on the "tribal" interface, as she put it, between paediatrics and child and adolescent psychiatry. She stressed how knowledge and understanding had grown in relation to, not only child mental health matters, but also medical and psychosocial assessments and interventions; and that maintaining an understanding of more than one area is correspondingly difficult. There is therefore a need for reciprocal or conjoint working between consultant child and adolescent psychiatrists and consultant paediatricians, whether hospital or community based.

**Sebastian Kraemer**, Consultant Child and Adolescent Psychiatrist at the Whittington Hospital in London filled the final slot of the day with an enlightening presentation on the nature and evolution of paediatric liaison. His view is that most liaison services have developed through personal relationships. The need for properly established professional links is greater than ever because of the increasing overlap between child and adolescent psychiatry and paediatrics, particularly in relation to ASD and ADD/HD. There is also an interesting interface between consultant paediatricians who work in hospitals and those who work in the community. Dr Kraemer invited those who wished to involve themselves further to attend ACAMH's future conference on paediatric liaison to be held at Birkbeck College on the 16 November.



Sebastian Kraemer and Lionel Hersov

*Dr Victoria Fernandez, Clinical Research Fellow,  
Hon SpR, Imperial College London  
George Crowther, Chartered Psychologist*  
References available from [acamh@acamh.org.uk](mailto:acamh@acamh.org.uk)



## The Association says farewell...

Members at the Annual General Meeting gave the outgoing Chair, Professor Patricia Howlin, a memorable send-off and a much appreciated leaving gift. During her term of office, Pat led the Association through significant developments and activities, not least the 50th Anniversary Celebrations last year, the detailed governance review and the implementation of the Charity Commission's statement of recommended practice. The focus on ACAMH's internal procedures over the last 12 months worked towards ensuring the Association has both the best systems in place to successfully manage an ever-changing external environment as well as sufficient reserves to overcome a number of uncertainties, for example the possible impact on journal revenue from open-access initiatives, the lack of CPD funding across services to support conference attendance, the additional pressures on honorary officers arising from recent legislation and the constant challenge for ACAMH to remain relevant to professionals working within child and adolescent mental health and across the disciplines. The Association thanks her for her hard work, guidance and leadership.

## "All Grown Up and Nowhere to Go – ADHD Transitions" - 20 March 2007, Glasgow



The first speaker, **Dr Dietmar Hank**, Visiting Honorary Consultant in Neuropsychiatry and Consultant Psychiatrist in Learning Disability, Bristol, opened the meeting with a presentation on "ADHD Through the Ages". He took as his starting point his clinical experience with clients and showed that there is often a pattern of co-morbidities alongside the three core areas of deficit (hyperactivity, inattention and impulsivity). A history was

recounted of the ADHD timeline, which evaluated how over-activity has been construed at different periods. A recent trend is the realisation that ADHD is not a developmentally benign condition - symptoms seem to persist in a percentage of adults and there is a high rate of co-morbidity with associated developmental disorders. At the highest level, there is an executive functioning problem, ie if you overload the working memory you will tend to wipe it clean. He identified elements of executive function as: working memory (non-verbal); working memory (verbal); self regulation and reconstitution of all these things in the correct order.

In terms of the diagnostic criteria, age of onset was generally identified as before seven years of age, though some children, particularly the inattentive types, can have an onset after the age of seven. In terms of adulthood, however, there is a range of difficulties in making a diagnosis, for example omnipresence of core symptoms, media hype giving rise in many cases to misconceptions and self diagnosis, high co-morbidity which can mask ADHD and reliance on childhood ADHD diagnosis. Dr Hank concluded by reviewing the range of stimulant and non-stimulant medication in the management of ADHD and reinforced his key message:

- ADHD Symptoms are common in adulthood
- Adult ADHD definition is not straightforward
- Developmental perspective is important
- High co-morbidity
- Treatment and compliance issues
- Obstacles include misinformation and ignorance
- Time factors are important



The afternoon presenter was **Professor Maurice Place**, a full time Child and Adolescent Psychiatrist in the North East of England and Visiting Professor at the University of Northumbria. He spoke on "The Challenge of Responding to Adults with ADHD" and showed that,

although the age of onset of ADHD is in childhood, up to 70% of children may have difficulties into adulthood (Searight et al, 2000). In relation to prevalence, the US National Co-morbidity Study (Hessler et al 2006) estimated a prevalence of adult ADHD to be 4.4%. Why is detection important? Adults with "undiagnosed" ADHD report a range of difficulties, for example driving, behaviour, personal relationships and child rearing. There are some screening questions available for adults which are reasonably focussed on adult issues and reliable and accurate diagnoses can be made despite the overlap of bipolar disorder with ADHD and Conduct Disorder. In terms of outcomes, stimulant medication shows an improvement in around 60% of adults. Psycho-educational input can be helpful at the time of diagnosis; similarly, work on confidence building/executive skills can be useful as can addressing co-morbid anxiety/depression with CBT. The Continuous Performance Test has reasonable construct validity against other measures of attention.

Overall the day served as an interesting and stimulating journey into the relatively uncharted territory of ADHD in adulthood, and was very well chaired by Dr Robyn Forster, Vice-Chair of ACAMH Scotland.

*Mr Robert Johnstone, ACAMH Scotland Committee Member*

## ACAMH Board 2007

**Chair:** Professor David Cottrell  
**Academic Secretary:** Dr Orlee Udwin  
**JCPP Editorial Representative:** Professor Tony Charman

**Honorary Treasurer:** Professor Michael Berger  
**Branch Liaison Officer:** Mrs Maureen Smillie  
**CAMH Editorial Representative:** Professor Paul Stallard

**Members:** Dr Patrick Byrne, Mr Ian Higgins, Professor Michael Kerfoot, Dr Sebastian Kraemer, Dr Stephen Scott

**Co-opted Member:** Dr Blanaid Gavin

## NEW FACES AT ACAMH



### Professor Tony Charman - Board Member and Editor in Chief JCPP

Tony Charman read Natural Sciences at Cambridge University before completing his clinical psychology training and a PhD at the Institute of Psychiatry, University of London. He was then a Lecturer in Clinical Psychology in the Psychology Department, University College London before moving to the Behavioural & Brain Sciences Unit at the Institute of Child Health, University College London in 1998. He is an Honorary Clinical Psychologist at Great Ormond Street Hospital for Children NHS Trust where he works in a diagnostic service for children with complex neurodevelopmental conditions. His main research interest is the investigation of early social cognitive development in children with autism and the clinical application of this work via screening, early intervention and epidemiological studies. Before he became Editor-in-Chief of the Journal of Child Psychology and Psychiatry he was Associate Editor with responsibility for Practitioner Reviews. He is also an Associate Editor of the Journal of Autism and Developmental Disorders and is on the Editorial/Advisory Boards of Autism: The International Journal of Research and Practice, the Journal of Intellectual Disability Research, the British Journal of Developmental Psychology and Research into Autism Spectrum Disorders. He has served on a number of expert panels for the Medical Research Council in the UK and NIH in the USA. He is a scientific member of the Advisory Group to the All Party Parliamentary Group on Autism. Outside of work his main passions are Arsenal (FC), mountains and pop/rock music.

### Professor Michael Kerfoot - Board Member

Michael Kerfoot is Professor in Child and Adolescent Policy & Research, in the Mental Health Research & Practice Development Unit, Psychiatry Research Group, University of Manchester. He is also Director of Graduate Studies for the Faculty of Medical and Human Sciences. He has worked as a social scientist in Medicine for 25 years, and has conducted research into adolescent suicidal behaviour for over 20 years. He has published and lectured widely, both nationally and internationally. He is the author (with Alan Butler) of Problems of Childhood and Adolescence (Macmillan 1988), and author and editor (with Richard Williams) of Child and Adolescent Mental Health Services: Strategy, Planning, Delivery and Evaluation (OUP 2005). During a secondment to the NHS Health Advisory Service he was co-author of Suicide Prevention: The Challenge Confronted (HMSO 1994), and Together We Stand: The Commissioning, Role and Management of Child and Adolescent Mental Health Services (HMSO 1995). He has twice been a visiting research associate at the Los Angeles Suicide Prevention Centre and is currently a visiting professor in the School of Public Health and Social Work, National Kiev "Mohyla Academy" University, Ukraine. In 2005-06 he was appointed as specialist adviser to the House of Commons Defence Committee for its Inquiry into the "Duty of Care" of the Armed Forces towards young recruits.



Mike and his wife Penny met on the Manchester PSW programme in 1971 and after periods working in London, Newcastle and Leeds returned to Manchester where Mike headed up the PSW team at Booth hall Children's Hospital. He later became director of the Manchester PSW programme, and also the R & D Unit. Mike has been involved in mountaineering since his early teens and is a regular visitor to the Lakeland Fells, and also the Pennines where for 10 years he was a member of the Mountain Rescue Team. He has also climbed when it hasn't been raining, mainly in the Californian Sierras, Yosemite, and the Pyrenees. For the last 10 years much vacation time has been spent exploring archaeological sites in southern Turkey, and he is not ashamed to confess that his heavy work schedule is really only there to fill in the gaps between holidays. Having first joined ACPP in 1976 he is looking forward with enthusiasm to serving as a Board member.



### Dr Blanaid Gavin - Board Member (Co-opted)

Blanaid Gavin is a Senior Registrar in Child Psychiatry in her final year of training on the National Training Scheme in Ireland. Blanaid completed her undergraduate training in University College Dublin in 1998. Since finishing her internship, she has been training in psychiatry, completing her general training on the St John of God scheme, Dublin, in 2003 before moving on to specialise in child psychiatry where she has worked in the Lucena Clinic, also in Dublin. Blanaid is currently based in the New York Psychiatric Institute, Columbia University, where she is undertaking an observership.

She has a particular interest in psychosis and works with DETECT, the only adult mental health service for early detection of psychosis in Ireland. Blanaid is currently helping to establish a similar pilot in child psychiatry services. Her research focus has primarily been the recognition of mental illness in the community and pathways to care. She has contributed to the development of the first Mental Health in Primary Care course in Ireland through the Irish College of General Practitioners and is currently developing practical mental health assessment tools for use in an Irish primary care setting.

Blanaid is completing her MSc in Cognitive Behavioural Therapy. She has a particular interest in training and trainee issues. She is a member of the National Senior Registrar Training Committee which coordinates trainee input into academic train-

ing and is secretary of the Trainee section of the Irish College of Psychiatrists.

Blanaid joined ACAMH in 2004 and has greatly enjoyed working with both long-standing and many new members of the Irish committee who have contributed to the growth of ACAMH in Ireland. She very much looks forward to her new role on the Board.



#### Dr Tamsin Ford - Editor CAMH

Tamsin completed her undergraduate training as one of the first intake to the United Medical School of Guy's and St Thomas, now subsumed into GKT. The "united" part had not quite bedded in the mid 1980s, at least on the Guy's campus, where rude remarks were made by lecturers about "our colleagues down the river" on more than one occasion.

After completing her house jobs, Tamsin moved to the East of London for her general training in psychiatry before joining what was then the Bethlem and Maudsley training rotation as a senior registrar in 1995. Reminiscence groups in the East End with the cohort who had lived through two world wars and the Kray twins might have contributed to an early desire to be a psychiatrist for older adults. However, a brilliant experience with Alyson Hall, Navina Evans and the multi-disciplinary team at the Emanuel Miller Centre in Limehouse focused her attention on the other end of the age span. After completing her specialist training in child and adolescent psychiatry, and working as a clinical rater with Robert Goodman on the 1999 British Child and Adolescent Mental Health Survey, Tamsin was awarded a Wellcome clinical training fellowship. This included a year studying for an MSc at the London School of Hygiene; an experience that she would highly recommend for the quality of the course and the teaching. During the next five years she completed a PhD investigating the rates and predictors of service use among children in the 1999 British Mental Health survey at the Institute of Psychiatry; and had twin daughters. Before obtaining her Clinician Scientist Fellowship from the Medical Research Council, she worked for a year as a locum consultant psychiatrist at Croydon CAMHS.

In September 2007, she transferred her fellowship from the Institute of Psychiatry to the Institute of Health and Social Care at the Peninsula College of Medicine and Dentistry, where she is looking forward to collaborating with academics and practitioners from a wide range of disciplines. Having been a senior registrar at the Bethlem Royal Hospital during its 750th year, and working at what had been the first child guidance unit, she finds the prospect of joining such a new institution intriguing. She will retain a strong link with the Institute of Psychiatry as a visiting senior lecturer, and with the CAMHS Outcome Research Consortium, which she joined at its inception.

Tamsin's main research interests are child psychiatric epidemiology, and optimising interventions and services for children with impairing psychopathology. Her current clinical work is in a team for children who are looked after. Outside work, she is kept pretty busy by her five-year old daughters and her husband, but she slopes off to yoga classes and "indie" music gigs at every opportunity.



#### Deborah Ceccarelli - Office Assistant

Deborah joined ACAMH in April 2007 as the new Office/Admin Assistant. Her role is to provide general office support across the Association and interdepartmental admin assistance as required. She is therefore the first point of contact for those calling or visiting ACAMH's Head Office in London, answering the phone, dealing with queries and providing advice as required. She plays an important "linking" role between the departments and deals with much of the routine work, so allowing other staff to concentrate on their key responsibilities. The main focus of her work is assisting the Events-Coordinator and Membership Secretary by operating the Association's database system and taking event bookings, and helping out in Publications with the Book Review section for JCPP and CAMH.

Deborah is originally from Italy but has been here with her Dutch partner for seven years. She has two young sons who occupy much of her time outside of work.

## Editor Writes

Maureen Smillie



### The Bridge is changing ...

It is not always easy to know what our members would like to see or read about and we have been grateful for your feedback over the last twelve or so months – it helpfully confirmed that you like receiving the newsletter; it also indicated what you do not like .... the grey photos, the heavy text, the small titles, the rather inconsistent format .... These are all easily-changeables which we have tried to accommodate in the current issue. What do you think? However, what you would like in terms of 'content' is not so clear so, in order to ensure we feature relevant information, we have organised a small working group to consider what may work best .... and we have come up with lots of ideas, for instance, "expert"-interviews, a trainee section, letters page, curious pearls of wisdom, good practice guidelines, managing challenging situations and so forth. To successfully include these more targeted sections would ideally require "grass-roots" resources and, if you would like to get more involved with writing or sourcing content for the Bridge or indeed, if you have ideas for other types of content, please do let us know .... We can, and do, manage a tremendous amount from the office, but additional input from members on content would give The Bridge that extra special touch.

# CBT with Children and Adolescents

Joint ACAMH - BABCP conference, 21 - 23 March 2007, Oxford

The joint ACAMH-BABCP conference, held in Oxford in March this year, provided a unique opportunity for two organisations sharing a wide area of interests and complementary specialisms, to draw together their skills, knowledge and experience to create a varied programme, taking as its focus CBT with children and families.

## Pre-conference Workshops

The three day event opened with a popular day of interactive pre-conference workshops, focusing on different aspects of CBT. Workshop One on OCD, presented by **Catherine Gallop and Linda Atkinson**, looked at the potential benefits of a more cognitive approach to the treatment of childhood OCD, using cognitive-behavioural strategies and the role of cognitions, to assist delegates to develop practical assessment, formulation and interventions skills for working with young people with OCD.



L Atkinson, C Gallop

“Great workshop, very informative and full of clinically-useful metaphors and techniques that can be applied in practical settings”

OCD participant

Workshop Two, a skills-based workshop presented by **Nicky Dummett**, focused on the importance of integrating systemic factors (including attachment processes) into therapy together with developmental factors, and encouraged delegates to consider how systemic CBT working might complement the range of other systemic therapies more traditionally available within CAMHS. The workshop presented opportunities for case-based practice, consideration of process factors and practice issues arising from systemic CBT and set forward formulation processes to facilitate such working.

“Excellent, incredibly useful and very interesting to consider how to combine systemic and cognitive behavioural approaches”

Systemic CBT participant



Nicky Dummett

“Excellent presenter; clearly very skilled and knowledgeable, willing to critique own practice and humorous enough to make the subject not feel too heavy”

CBT for Trauma participant



David Trickey

Workshop Three, led by **David Trickey**, used the Meiser-Stedman (2002) cognitive framework of PTSD for children and presented methods for intervening with various different parts of the systems in which traumatised young people find themselves (family work, schools and direct work with the young person), with particular reference to developmental and systemic aspects. The workshop showed that evidence available indicates that in general clients need to “remember” the trauma before they can “forget”, and discussed the ethical and clinical dilemma of encouraging young people to do something that they do not want to do.



## Two-day Main Conference

The format of the main two-day event was a selection of four keynote presentations, combined with a varied programme of parallel workshops, symposiums, round tables, debates and open papers.

The keynote presentations, two on each day, were very broad in their subject matter. The first speakers, **Lynne Murray and Peter Cooper** from the Winnicott Research Unit, University of Reading, looked at **intergenerational transmission of social phobia** and reported from two studies – a longitudinal study on the development of children of mothers with social phobia (N = 96) and an experimental study examining the transmission of social fear from mother to infant, and the infant’s response to strangers, following their observation of the mother-stranger interaction (fearful/friendly). Both studies showed that social anxiety is transmitted from

mother to child, and that the mother’s expressed anxiety and her encouragement of the child’s positive social responses are important in this transmission.

**Professor Keith Hawton** of the University of Oxford, looked at **Self-Harm by Adolescents** and presented the results and implications of a school-based study. Almost 7% of children sampled displayed actual deliberate self-harm and 15% had had thoughts of self-harm at some stage during the previous year. He advised that more adolescents with deliberate self-harm had a variety of problems as well as more maladaptive coping strategies. He concluded with an outline of the best prevention and intervention strategies.

Professor **Peter Muris**, Clinical and Health Psychologist at Erasmus University in Rotterdam, who has developed numerous measures for use with children, looked at **normal and abnormal fear and anxiety in children**. The final keynote speaker of the conference, **Dr Tim Williams**, provided a fascinating and informative overview of the **future of CBT for OCD**, in particular areas where CBT needs improvement.

The parallel sessions which ran during the two day main event looked at the use of CBT across a variety of disorders – eating disorders, depression, anxiety, suicide, aspergers, psychosis, stress and anger management – as well as within a number of different settings – schools, families, groups and police treatment service. The spectrum of interventions, evidence base for treatment, outcome measures, current research, clinical perspectives and future directions were covered both within the UK as well as the wider European and international setting.



Charlie Wilson, Nicky Dummett, Catherine Gallop, Linda Atkinson, Ingrid King

# Assessment and Treatment of PTSD

ACAMH Master Class, 15 June 2007, London

The second in ACAMH's Master Class series was on Assessment and Treatment of PTSD and was led by Bill Yule, Emeritus Professor of Applied Child Psychology, the Institute of Psychiatry. The programme provided a comprehensive mix of the main issues relating to this disorder: diagnosis, prevalence, incidence and long-term outcome; methods of assessment including interviews and questionnaires; recent models of PTSD; treatment approaches, for instance CBT, EMDR, group exposure and narrative exposure therapy; and national/international interventions. The potentially long-lasting impact of PTSD and its implications in terms of CAMH services was illustrated with a number of examples, not least the sinking of the Jupiter where follow-up at year one showed that 50% of the survivors displayed symptoms of PTSD and between 5-7 years later, that figure still remained above 10%. How services should respond to such large-scale needs was discussed and it was recommended that firstly, every CAMH service should have a structure to deal with trauma, secondly all professionals should have a minimum training in disaster, crisis and trauma psychology and thirdly, that some should have specialist training. Feedback on the day showed it had been informative, practical and stimulating, and had provided an opportunity to gain a deeper understanding of the disorder as well as look at individual cases in greater detail.



Bill Yule

## The First Relationship: Understanding Infant Mental Health

London and South East Branch, 18 April 2007, Birkbeck College, London

The London branch had another successful Day Meeting on 18 April 2007, when nearly 80 delegates attended a Day Conference on the subject of Infant Mental Health.



L. Green, D. Wolke, L. Meins

**Dr Elizabeth Meins**, Durham University, gave a wonderfully clear and very interesting presentation on her work on "mind-mindedness", the concept of assessing the

caregiver's tendency to treat the young child as an individual with a mind. Dr Meins explained how this concept grew from a rethinking of Ainsworth et al's notion of maternal sensitivity, and involves the mother's ability to perceive things from her child's point of view and respond appropriately. It seems that children whose mothers are more mind-minded during the first year of life are more likely to be securely attached, to have superior language and play abilities at 24 months, and to show a better understanding of other people's minds at age 4. There was a discussion about how maternal mental illness may impact on the mothers' mind-mindedness, as well as implications for future research.

**Professor Dieter Wolke** from the University of Warwick then gave us another instructive presentation, on the long-term development of preterm babies. Professor Wolke reviewed find-

ings from studies (including the EPICare Study) that suggest that, below the age of 31-32 weeks, there are significant difficulties in a number of areas, including attention regulation and cognition. Eating difficulties and oral hypersensitivity in those born below 30 weeks gestation are also common, possibly reflecting their early experiences of feeding whilst in neonatal intensive care. Language difficulties seem related to general IQ deficit but speech difficulties may be related to oro-motor dysfunction, and attention problems do not appear to be simply related to cognitive ability. Professor Wolke talked about the ethical discussion that needs to take place on a national basis regarding interventions in very preterm infants, as well as stressing the need for making decisions about interventions that will promote optimum outcomes in the longer term.

**Dr Lucinda Green**, Consultant Psychiatrist, described the role of perinatal mental health services, with particular reference to her team in the South London and Maudsley NHS Foundation Trust.

**Dr Christy Wellings**, from Lambeth CAMHS, described working with families in the context of Sure Start. She included a useful discussion of the culture clash that can sometimes arise when local commissioners seek services based on local needs. Dr Wellings argued that local commissioners may use a broader definition of evidence, and with an emphasis on the individual delivering services, whereas provider Trusts offer

evidence-based practice, according to clinical guidelines, with an emphasis on programme delivery. There was a need to weigh the risk of using ineffective interventions against the risk of missing the needs of those with the highest needs.

**Dr Shirley Gracias**, Consultant in Infant, Child and Adolescent Psychiatry in Wiltshire and Chair of the AIMH UK, described the development of Watch, Wait and Wonder. She explained how it can improve problems in mother-child attunement and attachment, helping the mother to reflect on the communications initiated by their babies.

Finally **Louise Emanuel**, a Consultant Child and Adolescent Psychotherapist and Head of the Under Fives Service at The Tavistock Clinic, then described brief interventions with parents, their babies and young children.



C. Wellings, P. Hindley, S. Gracias, L. Emanuel

Dr Martin Newman and Alison Wintgens  
London and South East Branch Committee

References available from [acamh@acamh.org.uk](mailto:acamh@acamh.org.uk)

## Forthcoming Branch Events

For further details please visit [www.acamh.org.uk](http://www.acamh.org.uk) or contact:

Rosemary Mackenzie: [rosemary.mackenzie@acamh.org.uk](mailto:rosemary.mackenzie@acamh.org.uk), Tel 0141 445 4340 for events in NORTH EAST, NORTH WEST, SCOTLAND, WALES, YORKSHIRE

Marie-Christine Rieder: [marie-christine.rieder@acamh.org.uk](mailto:marie-christine.rieder@acamh.org.uk), Tel 020 7403 7458 for events in DEVON & CORNWALL, EAST ANGLIA, IRELAND, LEICESTER, LONDON & SOUTH EAST, MIDLANDS, SOUTHERN

<b>18 Sept 2007</b>	<b>“GOOD PRACTICE EXAMPLES IN YORKSHIRE CAMHS LD”, Yorkshire Branch Day Conf.</b>
<b>Leeds</b>	Speakers: Balvinder Kaur, Dr Ann Alcorn, James Marsh. Afternoon workshops.
<b>26 Sept 2007</b>	<b>“DISORGANISED ATTACHMENT AND ADHD”, London and South East Twilight Meeting</b>
<b>London</b>	Speakers: Dr Penelope Turton and Dr Carmen Pinto
<b>2 Oct 2007</b>	<b>“FAMILY SUPPORT IN THE COMMUNITY”, Welsh Branch Half Day Meeting</b>
<b>Cardiff</b>	Speaker: Mike Hendy, Sure Start Dad's Advisor, Rhondda Cynon Taf
<b>10 Oct 2007</b>	<b>“RESEARCH CONFERENCE”, Southern Branch Full Day Meeting</b>
<b>Southampton</b>	Further details to be announced
<b>11 Oct 2007</b>	<b>“DIET, NUTRITION AND BEHAVIOUR”, East Anglia Branch Day Conference</b>
<b>Ely</b>	Speakers: Dr Alex Richardson and Dave Rex (tbc). Joint Event with the AEP
<b>16 Oct 2007</b>	<b>“EVIDENCE-BASED PARENTING PROGRAMMES”, North East Branch Half Day Meeting</b>
<b>Newcastle</b>	Speakers: Dr Judy Hutchings and Dr Christine Puckering
<b>7 Nov 2007</b>	<b>“CHALLENGING BEHAVIOUR SERIES II”, Devon and Cornwall Branch Day Conference</b>
<b>Torquay</b>	Focus on what works with offending or anti-social behaviour, substance misuse and family issues.
<b>16 Nov 2007</b>	<b>“JOINING FORCES: PSYCHOLOGICAL WELLBEING OF CHILDREN IN HOSPITAL SETTINGS”</b>
<b>London</b>	London and South East Branch Day Conference. Keynote Speaker: Professor Anne Kazak
<b>27 Nov 2007</b>	<b>“ATTACHMENT AND BIO-BEHAVIOURAL CATCH-UP: helping young foster children cope with early adversity”</b> Ireland Branch Day Conference. Speaker: Professor Mary Dozier
<b>28 Nov 2007</b>	<b>“ATTACHMENT AND BIO-BEHAVIOURAL CATCH-UP: helping young foster children cope with early adversity”</b> Wales Branch Day Conference. Speaker: Professor Mary Dozier
<b>29 Nov 2007</b>	<b>“ATTACHMENT AND BIO-BEHAVIOURAL CATCH-UP: helping young foster children cope with early adversity”</b> Scotland Branch Day Conference. Speaker: Professor Mary Dozier
<b>Nov 2007</b>	<b>“ADHD” East Anglia Branch Study Day</b>
<b>Cambridge</b>	Confirmed speaker: Dr Charlotte Wilson
<b>5 Dec 2007</b>	<b>“BIPOLAR DISORDER IN CHILDREN AND ADOLESCENTS” London and SE Twilight Meeting</b>
<b>London</b>	Speaker: Dr Paramala J Santosh
<b>7 Dec 2007</b>	<b>“MENTAL HEALTH IN BABIES AND YOUNG CHILDREN” Southern Branch Day Conference</b>
<b>Southampton</b>	Further details to be announced

## Dates for your Diary - ACAMH National Events

### ACAMH Master Class

Obsessive Compulsive Disorder (OCD)

Dr Isobel Heyman, Consultant Child Psychiatrist

Friday, 16 November 2007, ACAMH Head Office, London

### Emanuel Miller Day Conference

Attachment: Current Position and Future Directions

Emanuel Miller Lecture: Prof Sir Michael Rutter

Friday, 14 March 2008, Regent's College, London

An annual bursary is available to fund a member working in a developing country to attend an ACAMH National Conference. Please contact [ingrid.king@acamh.org.uk](mailto:ingrid.king@acamh.org.uk) for further details.