

**Children and young people's mental health Conference Glasgow Royal Concert Hall, 15<sup>th</sup> May 2008.**

I attended this conference along with approx 250 other delegates, probably half of whom were teachers, whilst the other half represented various branches of the Medical and Nursing professions and the Voluntary Sector Organisations involved in the care of children of all ages.

Dr Tracey Bywater, a research Co-ordinator at Bangor University, gave an evaluation of the incredible years BASIC parenting programmes in Wales and their effect in reducing conduct problems.

Conduct disorder is a growing political issue; between 10-35% of children involved come from disadvantaged areas and 42% are "Looked after Children". After the age of 8, behaviours become entrenched and can lead to delinquency, mental health problems and criminal activity. This means increased costs to society of £17,000 each in service costs for Health Education, Social Services and Court Costs.

Predictors of future conduct disorders include:

- Low Income, Disadvantaged, Very Young Parents
- Single Parents
- Parental Mental Health Problems
- Large Families

Preventative Treatment Interventions.

The national evaluation of Sure Start was not positive; lots of money was put into this initiative, with no evidence base of what works.

Early intervention works best: we have to target children most at risk, but need to address access issues, as families are often not keen on intervention. Health visitors know families, visit them at home and form good relationships with them.

There is a need to offer parenting skills programmes suited to the families, not what is available in the system.

There is a new Incredible Years Infant -> Toddler Parenting Programme being trialled at present in Wales, and although short term evaluation looks promising, the longer lasting effects are yet to be assessed.

Sandra Menary Educational Psychologist, East Renfrewshire Council

Understanding the stigma of young people's mental health problems.

A research project tried to involve young people in looking at how stigma is related to their own and their parent's mental health difficulties. Stigma is shown to be a barrier to treatment with up to 59% of youngsters not seeking treatment and even recruiting for the project was difficult without lowering their already decreased self esteem.

175,000 children are thought to care for a parent or relative with mental health difficulties and it is important that we find ways to support them. The government, media, and mental health sectors must work together to provide accurate information, practical supports and involve whole families, not just the family member with the perceived problem.

Professionals must really Listen. Conditions of confidentiality should be made clear to young people when receiving support from professionals.

Dr Christine Pickering – Clinical Psychologist RHSC

Parenting and supporting families with relationship problems.

How early is early enough?

Risk factors should be identified in the Ante-Natal period. Up until 2 years of age, the brain develops as result of interactions with caring others. The best programmes to improve mental health of babies start between 6 and 12 months of age and include fathers and other appropriate carers, so that they can all work together.

The Mellow Babies programme is aimed at hard – to - engage families with a history of significant mental health and relationship difficulties and/or significant post natal depression. It includes encouragement with mother and baby interaction – baby massage, and evening sessions for fathers to support them, with information of how to support their wives with depression, and what they can do to help care for their babies.

There are serious implications for child and adolescent mental health, when a parent has mental health problems, Babies particularly can fall through the net! Their needs are often not recognised by mental health workers for adults.

Dr Mary Duffy

This speaker encouraged us to review how mainstream school staff can address behaviour issues in children of primary school age. Currently 22,000 children are excluded every year from Scottish primary schools.

Why do we recognise the children at Pre 5, who are going to be in trouble later and yet we cannot prevent it?

Throwing money at the problem is not the answer; we need evidence based interventions, which can be used in schools. There is a massive opportunity for positive interventions, particularly in primary schools. She has worked for Barnardo's for 5 years, and recently produced a training programme – a Tool which teachers can use to support children of

primary school age, with social , behavioural and emotional difficulties; Getting in early matters !

Fifteen percent of 5 year olds with behaviour difficulties, end up in offending behaviour.

Professor Jeremy Turk is a Professor of Development Psychiatry, University of London

He opened the afternoon session and gave an overview of the current status of clinical services for children and young people with learning difficulties, who also have mental health problems. Out of a population of 250,000, it is estimated that approximately 550 children and young people with learning difficulties, also experience mental health problems.

In any condition which affects the brain, up to 33% will go on to develop mental health problems, whilst deprivation and social disadvantages more than double the risk.

Alison Leask is chair of Autism Argyll

She helped us understand the challenges for children with Autistic spectrum disorder, and the challenges faced by families who live with children on the Autism Spectrum. Some are only diagnosed as teenagers, but are 20 times more likely to be excluded from school

This was a well organised, informative conference, featuring a broad range of speakers, from academia, to those involved in practical support. They provided us with updated information and statistics on the magnitude of the problem, but left us with much food for thought....

Why do we not recognise these children's needs nearly early enough?

Having recognised their needs, are there services available locally to meet these needs in an evidence based, cost effective and non-discriminatory manner?

Ann Lee  
SACP