

# We need to build 'stronger' children: Laurence Baldwin discusses issues that came to the for whilst working on the CAMHS taskforce

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## Opinion – Mental Health Practice

It wasn't until my second year as a student that someone suggested I might enjoy working in child and adolescent mental health. I think the Sister on 'Soc and Rec' at Saxondale Hospital was a bit frustrated that my painfully introverted self (I've got better over the years) wasn't a great match for organising reluctant patients into enjoying their social and recreational time. But she did me a big favour in suggesting it because the following year I did a placement on the children's residential unit at what was then St. Ann's Hospital in Nottingham and loved it. So began a career spent mostly in CAMHS, which included recently representing the RCN on Norman Lamb's Ministerial Taskforce on CAMHS. Amongst the recommendations of that taskforce are lots on early intervention. Not just early intervention in psychosis, which has been recognised for a long while as being important, reducing the delay in getting started with treatment and leading to better outcomes. In the taskforce report it generally refers to getting in early to stop problems in children and young people developing emotional difficulties and ultimately getting mental ill health or mental illnesses. So a lot of emphasis on developing resilience and coping skills, helped by teachers and others in schools knowing more about emotional literacy and spotting problems before they get out of hand. This will need a lot of help from school nurses, counsellors (where schools have chosen to employ them) and links through to specialist CAMHS to support them and to take over when problems develop beyond what primary care or universal services can deal with. Of course there remain issues about whether this, and the promised reinvestment in children's mental health will be enough to stave off the present crisis in out-patient community CAMHS and in residential units across the country. The scandal of young people being held on Section 136 in police cells may be averted but will this stop the increase in use of inappropriate placements on adult wards or young people being sent literally hundreds of miles to the nearest (or only) available bed, far from home and friends?

But what this process has also made me think about early intervention more generally, and how much do we, as mental health nurses, really think about intervening early in mental health problems? As I mentioned at the beginning I didn't really know there was a CAMHS (and it wasn't even called that in those days), and as we prepared for our specialist placements in our final year there were options in children's mental health, drug and alcohol services and forensic services, so most of us only did one speciality placement when really we could have done with knowing about all of these areas, not because we would necessarily ever work in them, but because of what we needed to know which we could apply to the people we were seeing. I work now with young people who have substance misuse issues, or who have offending problems, and in adult services we work with people who have children or grandchildren. Of course the 'Think Family' agenda has helped a lot with this, we do now tend to know if our adult service users have children in their homes, but the impetus has come mostly from safeguarding services to ensure this happens. Young people who have parents with mental health problems are known to be at risk of developing issues of their own, but mental health nurses are also in a great position to be working with younger people on developing good emotional coping skills, and preventing later problems in life. Yet we seem to have very little in our trainings to give nurses the skills to do this. I believe mental health branch training and post registered trainings ought to have more in them to give us the confidence to deal with younger people, and begin the early intervention that should give better long term outcomes. Many of the nurses I talk to don't have the confidence to talk to younger people because they never learnt about child development and what issues are important to deal with at what age. Some of the nurses and others I talk to seem to have forgotten what it was like to be a young person, and the relative powerlessness that they sometimes feel, and the need they have to be valued for themselves as individuals with opinions and feelings, however irrational they might seem at times. American orator and campaigner Frederick Douglass said "It is better to build strong children than to

repair broken men”, and this is the real message of the CAMHS Ministerial Taskforce, that we all, as nurses, should be better able to do our part in building stronger children and young people.