



# South East applied research event: child and adolescent mental health

Summary report from joint meeting of ADPH Children, Young People and Adult Mental Health regional networks, January 2022

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## 1. Introduction

In January 2022 members of Association of Directors of Public Health (ADPH) South East networks for Children, Young People and Families and Public Mental Health met to focus on advancing applied research capacity for child and adolescent mental health in the region.

The meeting was jointly organised by the Kent, Surrey and Sussex; Wessex; and Oxford and Thames Valley Applied Research Collaborations (ARCs) and the South East Office for Health Improvement and Disparities (OHID).

The Chair was Director of Public Health from East Sussex, and CYP Public Health Consultants/Leads, Public Mental Health leads, ICS CYP Programme Leads, NHS and third sector provider service managers and Academics working in the field of children's mental health and public health attended and contributed.

This short report provides a summary record of discussions held and is being shared in order to further the opportunities to link research across organisations within the region.

If you have any questions or comments about the report please contact [jennifer.jessup@dhsc.gov.uk](mailto:jennifer.jessup@dhsc.gov.uk)

## 2. Aims and objectives

The aims for the meeting were as follows:

- to raise awareness of research opportunities presented by the ARCs across the South East in relation to child and adolescent mental health and,
- to open up new discussions on local priorities for research and joint working opportunities to improve outcomes for children and young people.

In total 75 delegates joined the meeting from across the three ARCs 18 Local Authority areas and 6 Integrated Care Systems within the South East region; academic, colleagues, NHS and third sector providers also joined.

## 3. Structure and content

The meeting lasted 1.5 hours. A narrative of the session is set out over the next few pages.

In a short introductory statement the DPH Chair welcomed the opportunity to focus on work with academic partners and gave some context for these discussions, including challenges of covid particular to CYP, recognition of the inner resilience of young people and phenomenal impact of changes leading to a new appreciation and understanding in public health.

The agenda was delivered as follows

### Presenting work of the Applied Research Collaborations (ARC) in the South East

Becca Randell, Implementation Lead for ARC Kent, Surrey and Sussex, gave a short description of the position of the Applied Research Collaborations as part of the National Institute for Health Research (NIHR) funded research infrastructure, highlighted the focus on understanding regional and local health and social care challenges.

This was followed by 20 minutes of presentation which succinctly captured research priorities and developments across the 3 ARCs in the South East, including opportunities for engagement and details of local events. A case study of applied research was presented. The Chair welcomed speakers as follows:

- Becca Randell, Implementation Lead representing ARC Kent, Surrey and Sussex
- Dr Bethan McDonald & Professor Mina Fazel, representing ARC Oxford and Thames Valley
- Professor Anne-Sophie Darlington representing ARC Wessex



ARC Public Health  
Network 20 Jan (002)

### Reflection on CYP mental health needs and research in the local public health system

Jo Tonkin and Jennifer Jessup from OHID South East gave a 10 minute presentation on mental health priorities, the challenges faced by child health and adolescent health and set some context around the public health system and research needs to lead into the locality discussions about priorities.



local context.pdf

### Summary of discussions in localities

The meeting broke for 20 minutes into groups aligned to one of the three ARC localities, colleagues who worked on regional footprint they were invited to select which group to join.

The following questions were posed to provide a broad framework for discussions:

1. What are your research priorities?

2. What CYP mental health research are you engaged in?
3. What would help you to engage and progress applied research which would benefit the mental and emotional health of your population?

For the purposes of this report, a short summary to reflect the nature of discussions held and points raised within breakout sessions held has been provided, it is not a verbatim account.

### **Oxford and Thames Valley**

Discussions within the Oxford Thames Valley group reflected the diversity of NHS, third sector and local authority roles represented. Some information on existing regional collaborations was shared as part of the discussion. Involvement in the Ox Well Survey (Berkshire West LA's, Oxfordshire and Bucks); RBWM evaluation of Wellbeing Champions; and the Reading Resilience Network, were discussed as existing research projects/initiatives.

The following topics were areas of discussion and raised as priorities by delegates on the call:

- School engagement, building relationships (in context of great pressure on schools)
- How to support parents and carers to understand and access pathways, parent/carer engagement more broadly (LA perspective)
- How to support parents and carers to help their children with neuro developmental problems (pre- diagnosis/treatment), i.e. help whilst waiting.
- Multiagency/team around the child and shared responsibility
- Finding the evidence for prevention around Eating Disorders
- Disordered eating
- Research that specifically focuses on third sector services/interventions

The brief session identified some areas of common working and links were made between delegates working across the region. Specific 'asks' in terms of research needed, prospective collaborations or signposting to existing research will be followed up following the meeting.

### **Kent, Surrey, and Sussex**

A large group led to a diverse and productive exchange both on the call and in the chat. Introductions were made on chat and some connections were made across local government and academic colleagues.

Information shared has been organised to distinguish between current activity and areas of further interest

The following local public health activities were shared as part of the discussion

- self-harm survey, views around early intervention support - launching next month - role of peers and support networks
- healthy schools programme conducting a similar survey [to the previous speaker] MojoMeter, going out to young people via schools/youth settings.

- conducting all age mental health JSNA
- working with schools and families on emotion coaching, whole school approaches
- (local authority research) around trauma informed approaches
- long standing safe and well at school survey undertaken bi-annually in primary, secondary and special schools
- jointly delivering engagement (focused interviews) with fathers and non-birthing parents re their needs as new parents

A colleague identified the following as themes from work undertaken as part of a 0-5 health needs assessment; lack of identification of poor infant mental health; sleep deprivation impact on their levels of anxiety; infant mental health impacted by parents poor mental health and lack of capacity to nurture /positive attachment.

The following areas of research interest were related by local government colleagues on chat

- early years developmental delay research re COVID impacts in particular on communication and pro-social skills. (to inform JSNA)
- trauma informed approaches
- self-harm - access to research being done
- social media and internet both on access to services and on impact on mental health
- pressures affecting wider mental wellbeing
- issues related to gender identity and diagnosed/undiagnosed ASD and how these interlink.
- CYP suffering additions

An attendee from the Centre of Resilience for Social Justice shared information on The Academic Resilience Approach resources for need assessments at schools and a related project involved they are involved in a Research an Evaluation lead which includes quite a lot of aspects mentioned including self-harm work.

The following were also identified in discussions on the call

- the research helping explore interactions between young people and adult services transition and how the 18-25 research feeds into transition and changes in adults services
- research that explores interplay between neurodiversity and eating disorders and neurodiversity and hypermobility spectrum disorder, link around self-harm and disordered eating
- looking at how research is interpreted
- evaluation of impact of digital services, recognised services moving quickly to adapt because of covid. A desire to have technology nationally around CMP digital mapped out nationally was expressed. Links to call for pump priming funding around digital and youth mental health were shared in the chat.
- provider asked how we can be useful and informed of research outcomes from a provider perspective. It was noted there was funding to support through the ARC.

## **Wessex (Southampton, Hampshire, Isle of Wight, Portsmouth)**

### Introduction to ARC priorities

For children and young people, the previously agreed ARC Wessex priorities, which we are specifically funded to focus on over the next three years are explained below:

Projects will focus on developing, implementing and evaluating strategies to identify young people at risk of mental health conditions (including addictions like alcohol & gambling), promote early intervention and successful care transitions (including for neurodevelopmental disorders like Attention-Deficit Hyperactivity Disorder, ADHD), and bolster resilience.

Key priorities in terms of mental health areas for Wessex are anxiety and depression; alcohol and substance use disorders; neurodevelopmental disorders (e.g. ADHD); gambling disorder; and the health and social care workforce.

### Notes from the discussion

Colleagues joining the Wessex group started with consideration of challenges for public health leads in identifying evidence-based interventions.

Public Health Consultants are trained in critical appraisal, consult with experts and use 'what's works centres' to identify interventions. A major issue is differences in interpretation of what constitutes prevention. Current work in Hampshire with children's services to develop a shared language re prevention and early intervention was noted.

Existing research plans/actions identified in the group were parenting interventions and research around hospital presentation and use.

Suggestions from meeting attendees for potential future priorities are identified below

- Implementation Science
- Outcomes
- Embedding evidence-based interventions across sectors e.g in schools
- Intersectoral and collaborative action
- Young people with suspected personality disorder (preventing use of secondary care settings)
- First 1000 days
- How to make the best of resources – cost effectiveness and budget management

A next step around engagement with the community and voluntary sector was identified as the development of a Mental Health Research Hub which brings together strategic leaders including in the CVS with academics and establishes a regular conversation around priorities, research and its application and outcomes.

The key themes from each of the locality groups were shared and there was opportunity for further questions.

**All questions raised during the main session and breakout rooms have been captured and taken forward for direct response through the Applied Research Collaborations**

#### 4. Reflections from the Chair

The meeting closed with a reflection from the Chair on the value of having had dedicated time to open up of new doors and build connections around research across a diverse range of organisations.

Ruth Hutchinson, chair of the ADPH South East Children, Young People and Families network recognised the work happening organically, encouraging local colleagues to continue in these collaborations with academic partners .

**The following concluding actions were captured.**

Desire to open up collaborations with research partners across the region more broadly. Opportunity to use sector-led improvement fund to drive South East wide public health research symposium to be explored

A report on the event would be shared with attendees, OHID colleagues would continue to facilitate introductions and further contact through ADPH networks.

#### 5. Next steps - getting signed up and connected

The follow up action for all who attended is confirming your contact details with colleagues within the Applied Research Collaborative (ARC) that covers your locality, as they operate independently.

Details are provided below. If you would like to link up with colleagues from other local authorities or NHS or third organisations about work discussed during the session, we are able to offer introductions. Contact [Jennifer.Jessup@dhsc.gov.uk](mailto:Jennifer.Jessup@dhsc.gov.uk)

To discuss applied research opportunities and make connections through the academic community in Oxford and Thames Valley, please contact: [bethan.mcdonald@phc.ox.ac.uk](mailto:bethan.mcdonald@phc.ox.ac.uk)

Links to booking up and joining the upcoming events and networks led though **the Kent, Surrey and Sussex** ARC were shared within the presentations. For further information on how to sign up or to make contact about how progress research in your area please contact [becca.randell@nhs.net](mailto:becca.randell@nhs.net)

To discuss applied research opportunities and make connections through the academic community in the **Wessex** area please [arcwessex@soton.ac.uk](mailto:arcwessex@soton.ac.uk)

If you did not attend, you will find introduction and summary of areas of interest and current research in the presentations and are encouraged to make use of the contacts above.

[END]