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Access to Child and Adolescent Mental Health Services (CAMHS) for Children with Social Work Involvement: A Study of Electronic Health Records

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CAMBRIDGE

COACHES

Date: 20/03/2025

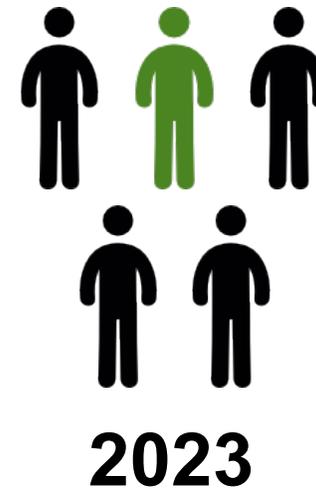
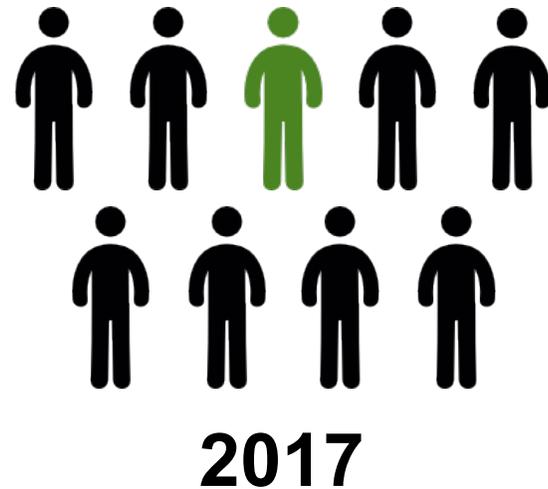
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Overview: COACHES

- A 4-year study funded by the National Institute for Health and Care Research (NIHR) and The What Works Centre for Children's Social Care
- Collaboration between the University of Cambridge, Kings College London, Kingston University, National Children's Bureau, Care Leaver's Association, and British Association of Social Workers
- Continued involvement from experts by experience, practitioners, and policymakers, including development of research questions

Background

- Mental health difficulties for young people in England have been increasing over the past five years (Newlove-Delgado et al., 2023)



Background

Children and young people with social workers may be particularly vulnerable to mental health difficulties

49% of young people with social workers met criteria for a diagnosable mental health difficulty (Bronsard et al., 2016)

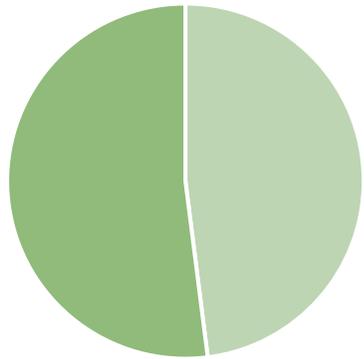
CPP and CLA are **2 to 3 times** more likely to be in contact with CAMHS (Coughlan et al., 2024)

Gaps in our knowledge

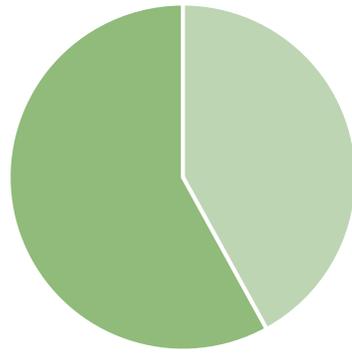
1. Are young people with social work involvement (CYPwSW) more likely to be accepted into CAMHS than peers?
2. Are there additional inequalities that affect the likelihood of acceptance into CAMHS?
3. How are CYPwSW characterised by CAMHS?

The CAMHS cohort

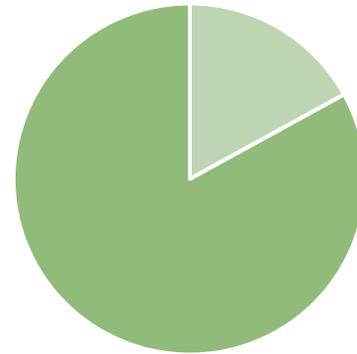
- 71,735 young people
- Mean age 11.7 years



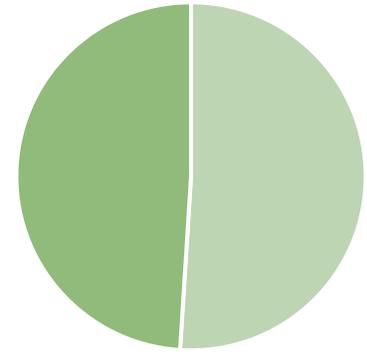
48% female



42% white



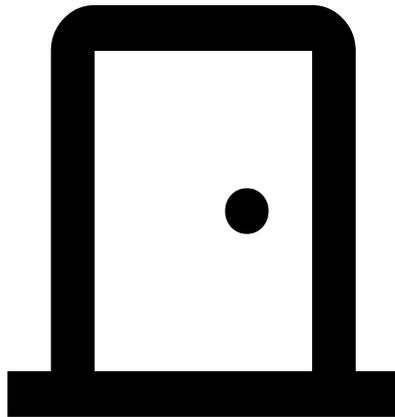
17% involved in
social care



51% rejected by
CAMHS

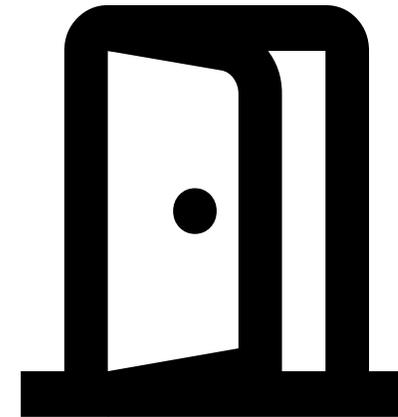
Defining “rejection”

Rejection



0 Events

Acceptance



≥ 1 Event

Findings

In comparison to children *without* social work involvement:



CPP were **1.94**
times more
likely

&



**CYP with other
current SW** were
2.54 times more
likely

to be rejected from CAMHS

- CLA and those with past social work involvement were a bit more likely to be rejected from CAMHS than those without social work involvement.
- Children living in the most deprived areas were nearly twice more likely to be rejected from CAMHS than those living in the most affluent areas.



Emerging pattern

Children with social work involvement are more likely to experience mental health difficulties than peers



They are **more likely to be in contact** with CAMHS



They are **more likely to be rejected** from CAMHS

Findings

Following discussions with:

- Experts by experience
- Social work and mental health practitioners

Possible explanation: Stability

- Young people with social care involvement and facing economic challenges may be considered “too unstable” by CAMHS to access therapeutic support

Examples of “instability ”

Economic (e.g. housing & transport)

Breakdown/changes in placement

Proceedings around custody or domestic abuse

Parental mental health



Case Note Analysis

- Reflexive thematic analysis
- Analysis guided by three experts - by - experience, representative from the Care Leaver's Association and researchers.
- Weekly analysis meetings to ensure our approach grounded in lived experience
- Read cases together and discussed summaries of case notes and identified themes.



The Social Must be Stabilised

Rejected

- Too social
- Too unstable
- Too chaotic

Accepted but
secondary

- Wider context for a psychological condition
- Or put on long waitlist

Outsourced

- To other organisations
- To young people themselves

Contained

- Tier 4 Mental Health ward
- Deprivation of Liberty Order

Case Note Insights: Rejection

- **Young people framed as too unstable**

Z has been open to [the service] since her referral in 2018, she has not had the opportunity to experience a stable placement on a consistent basis... Z has not been in a settled enough placement to allow her to engage in any therapeutic process (06HSWFMR).

“CAMHS would not be able to act in this matter until it is clear that safeguarding issues are dealt with, and the [sexual abuse] allegations have been properly investigated” (29HSWO; 1LSWFMR)

Case Note Insights: Rejection

- **Family framed as too chaotic or young person as too complex**

Family framed as “chaotic environment ...had to be tackled before any further diagnoses could be explored”. Mother told “develop prioritization and organization skills” even though she explained she could not afford to travel to CAMHS (30HSWOO).

Case Note Insights: Rejection

- **Young people’s emotional distress was identified as too “social” or “contextual”**

“Z does not meet the criteria for a moderate to severe mental health difficulty and initial assessments around possible underlying neurodevelopmental difficulties have been inconclusive...Z’s lack of contact from his father and bereavement of his grandmother may be predisposing factors to his emotional dysregulation”

(12HSWMWB)

Case Note Insights: Rejection by outsourcing

- **Needs often framed as social and solvable by other organisations**

A 10-year-old boy's CAMHS assessment mentioned a history of self-harm, restrictive eating, hearing voices, and aggression to others. Nevertheless, because the root of his difficulties was located with mother's cultural difficulties of accepting his sexuality, he was deemed to not have "any significant mental health issues". This assessment was also made on the basis that he was also already engaged with a counselling charity and his case with CAMHS was closed (2LSWMB).

- **Suicidal teenagers asked to sign-post themselves to online apps and other charities often reappeared in A&E.**



Conclusions

- Requiring “stability” before CAMHS support creates unfair access to services.
- Psychological care focused only on individual isolated needs excludes children with social work involvement.
- This leads to young people missing support during critical times, like after placement breakdowns, domestic violence etc.
- Relying on families, schools, or charities for care risks leaving psychological needs unaddressed.





A call for change

Tackling inequalities in access to mental health support for children with social work involvement and those living in poverty

Julia Mannes, Barry Coughlan, Yeosun Yoon, Tessa Morgan, Tallah Drayak, Francesca Crozier-Roche, Jack Smith, David Graham, Ben Fraser, Dustin Hutchinson, Luke Geoghegan, Rick Hood, Matt Woolgar, Matthew Broadbent, Pampa Chakravarti, and Robbie Duschinsky

August 2024



'Many vulnerable children can't get mental health help'

15 August 2024

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Lewis Adams & PA Media
BBC News, Cambridgeshire



PA Media

The study into mental health support for vulnerable children analysed more than 71,000 records held by an NHS trust

Some of the most vulnerable children are more likely to be rejected for mental health support than their peers, new research has suggested.

The study - by the University of Cambridge and National Children's Bureau - analysed thousands of records at an NHS trust in London.

Children from the most deprived areas were about two times more likely to be turned away from services than those from the least deprived areas, it concluded.

The government and NHS England have been contacted for comment.



Department for Education



What next...

- 1) What interventions work, for whom, and what is the cost effectiveness?
- 2) What are the long-term outcomes for children that are accepted *or* rejected?
- 3) What recommendations and improvements do young people have for CAMHS and social work?



Acknowledgements

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Views expressed are those of the author(s) and not necessarily those of the NIHR, Department of Health and Social Care, Department of Education, NHS or WellcomeTrust.

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