Our clinical offer: support for children, families and the workforce
“The Anna Freud Centre has developed highly innovative clinical services, developed great national research programmes and been a fantastic partner to other organisations in this field and with the NHS. They are, without doubt, the leading charity researching and providing excellent services for children and young people with mental health problems in the UK.”

Professor Tim Kendall FRCPsych
National Clinical Director for Mental Health
NHS England and NHS Improvement

“The work of the Anna Freud Centre has a huge reservoir of world-class knowledge about child mental health - in collaboration with others, the Centre uses that knowledge to change policies and systems. The lives of children are changed for the better. That is the legacy and the future of the Anna Freud Centre.”

Alison O’Sullivan
Chair of Trustees, National Children’s Bureau
Former Advisory Board, Office of the Children’s Commissioner
Former President, Association of Directors of Children’s Services

About the Anna Freud National Centre for Children and Families

The Anna Freud National Centre for Children and Families has developed and delivered pioneering mental health care for 70 years. Our aim is to transform current mental health provision in the UK by improving the quality, accessibility and effectiveness of treatment. We believe that every child and their family should be at the heart of the care they receive, working in partnership with professionals.

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Our Patron: Her Royal Highness The Duchess of Cambridge

Our clinical offer: support for children, families and the workforce

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Introduction

Even before the coronavirus pandemic, the demand for children and families’ mental health services was growing. The pandemic has made a complex situation even more challenging, increasing stress for families and resulting in deteriorating emotional and mental health in infants, toddlers, children, young people and their families. The result is an unprecedented and sustained increase in emotional and mental health referrals by 60%.[i]

As so often is the case, the impact has been greatest on the worst-off: children living in poverty; children experiencing discrimination and exclusion; children at home, in families who have struggled to care for them or keep them safe; and children with special educational needs and disabilities.

The responsibility of meeting these needs so often falls to children’s services. Yet the scale of the challenge is such that no one can resolve these needs on their own. Instead, those of us with a shared interest in helping children and families can best serve them by pooling our resources and by sharing expertise and understanding to deliver the services and support they so desperately need.

In autumn 2021, I started a conversation with leaders in children’s services to identify how best we can harness our skills and expertise. The result is this document, the Anna Freud Centre’s clinical offer. It’s divided into five sections and is designed to support staff working with children of all ages and their families, whatever their need.

This is the beginning of an iterative dialogue with children’s services systems leaders to co-design our offer in response to the needs of children and families, with a specific focus on the most vulnerable, and to support the committed children’s workforce with tools, resources and training. This is an invitation to work together to co-design support for you and your staff, to develop sustainable change for the children and families you work with.

Please take a look at our offer and get in touch with us - clinicalenquiries@annafreud.org. We would love to start a conversation about how we can work together.

Andrea King
Director of Clinical Services
Anna Freud Centre

[i] NHS Confederation (2021). Reaching the tipping point: children and young people’s mental health

“The Anna Freud Centre has led the way in shaping the national agenda for improving the scope and quality of care of children and young people experiencing distress. The range is wide, from individual psychotherapeutic work to making schools happier places with resilient children, but all of the work is underpinned by scientific rigour, taking the field forward for the benefit of all.”

Stephen Scott, CBE FRCPych FMedSci
Professor of Child Health and Behaviour
President, Association for Child and Adolescent Mental Health
Director, National Academy for Parenting Research, Institute of Psychiatry, Psychology and Neuroscience, King’s College
Consultant Child and Adolescent Psychiatrist, Maudsley Hospital

“We’ve benefited hugely as a service from trainings offered by the Anna Freud Centre. The training courses our clinicians have attended have helped to equip them with the specialist knowledge and tools that they need in their work with children and families at the edge of care, during care proceedings, and who are Looked After. The quality of training events is always very high, in terms of the specialist content and how engaging and relevant they are.”

Dr Laura Smith
Head of Clinical Practice
Hackney Children and Families Services
Section 1: supporting adolescents

The Child Psychotherapy Service (CPS) currently offers direct clinical work with children and families at the Anna Freud Centre and is part of our Adolescent programme. Our team consists of psychoanalytic practitioners and trainees who work clinically, as well as offering training and supervision to professionals. In keeping with our historic origins, the CPS team continues to provide analytic treatment for children and young people in keeping with Anna Freud’s original psychoanalytic legacy. However, our specialist service which offers treatments across the age range (0-25 years) also strives to innovate and to diversify our offer.

As a team we aim to continue to offer traditional psychoanalytic interventions and clinical placements to doctoral psychoanalytic trainees, while also finding ways to disseminate our expertise through training and supervision. We also offer psychotherapists and practitioners a space to come together and think about clinical practice in our annual colloquium, which Anna Freud began 44 years ago. In 2021, our theme was ‘Emerging from Loss: Mourning and adaptation’, which followed our post-pandemic work and furthered our understanding and potential for dialogue about depression in young people today.

For many years there have been collaborative arrangements between the CPS team, the Under-Fives team, and the Family Trauma service. More recently with the Family Trauma team we have worked closely on the post-adoption project. As such, families may be seen individually by a child psychotherapist who works as part of CPS with parent support being offered by a Family Trauma practitioner. CPS is also part of the Mentalization-Based Treatment for Children (MBT-C) team and as such they deliver training and modality-specific intervention for adopted children.

1a Interpersonal psychotherapy (IPT) training

Target audience
Experienced mental health professionals.

Requirements for this course
- Evidence of completing a course of study in a model of psychological therapy
- A minimum of two year of post-qualification experience delivering psychological therapy
- At least two years’ employment in an NHS, private capacity or voluntary institution delivering psychological therapy with adults
- Registration with a professional body (HPC, BPC, APC, BPS, UKCP or BACP registration, or an equivalent registration outside of UK)

Focus
The six-day course will provide experienced mental health professionals with an introduction to the IPT model. The course will cover the knowledge competencies for IPT with depression and an introduction to the skills competencies, which will be developed more fully in supervised clinical casework. The course provides an overview of modifications of IPT for use with adolescent populations and with eating disorders and it application with anxiety disorders.

Costs
Typical cost for supervision on four cases in IAPT is £3,250. The training fee is £1250.

To book a place on this course, please visit our website

This course provides introductory training for practitioners in IPT and reflects the IPT competency framework (www.ucl.ac.uk/CORE). This course is accredited with IAPT UK and is suitable for staff working in improving access to psychological therapies (IAPT) services. The course includes a series of didactic sessions, small and large group work, and clinical role play. This course qualifies participants for Level A (Basic) training in IPT.

Applicants with a range of training backgrounds are welcome, for example, clinical and counselling psychologists, counsellors, psychotherapists, psychiatrists, nurse therapists, social workers, occupational therapists, and GPs. IAPT staff can attend this course and should indicate that they require IAPT compliant training when applying.

The course is not suitable for applicants who wish to acquire basic therapeutic skills. IPT is not a Step 2 intervention, and therefore not suitable for practice wellbeing practitioners.

The course provides the first stage in working towards becoming an IAPT UK accredited IPT practitioner. Following attendance on the course those wishing to become IPT practitioners are required to undertake supervision with an IAPT UK accredited supervisor.

IAPT staff must arrange supervision that follows the IPT IAPT protocol and must confirm the supervision arrangement before attending the course. Supervision must be arranged directly with the supervisor and will involve an additional fee. Supervision can be provided face to face or remotely for example by telephone, Skype or other platforms. Trainees can be directed to qualified supervisors across the IPT UK network.

Accreditation to practitioner level requires four cases to be supervised, with recorded sessions reviewed. Each case runs for 16 sessions (unless they are CAMHS cases, in which case it is 12 sessions). We suggest leaving a one-month gap between starting each case, picking up a new case when the formulation has been agreed on the previous one. Trainees will be required to submit digital recordings of therapy sessions as well as written and verbal reports.
This course aims to:

- provide an overview of how IPT has been adapted in IPT-A to enable accredited IPT practitioners to work with adolescents with depression
- provide an introduction to the challenges and opportunities when working with adolescents with depression
- review the evidence for and modifications in practice when IPT is delivered with the family in mind

Feedback on the course from delegates

"[The trainer] was able to introduce a mind set shift for me around the perception of adolescents. Having the champion in the session too was very, very valuable."

"This course will change my practice and help to develop my practice with young people. That is invaluable thank you very much."

"The facilitators were enthusiastic and extremely knowledgeable. The genuine passion and their own experiences enhanced the learning."

To book a place on this course, please visit our website
Section 2: family trauma

The Family Trauma programme sits within our Clinical Division at the Anna Freud Centre. It comprises a multi-disciplinary team of mental health professionals, some with a background in social care and others in a CAMHS setting. Our specialist team undertakes assessments of whole families where children are on the edge of care and in care proceedings and makes recommendations about care, contact, therapy and support needs. Packages of therapy can be commissioned for children, young people and their parents, carers and whole families following family trauma including abuse (physical, emotional, sexual, domestic abuse or homicide), neglect, traumatic loss or separation. The team also undertakes assessment and therapeutic work with children living in families with high levels of conflict between parents, and families with adopted children (see below for details). In addition, there are several projects sitting within the Family Trauma programme which work with whole systems, for example social care and CAMHS.

Other services available in the Family Trauma programme:

- Training to individuals and teams.
- Packages of individual and family therapy following care proceedings, while children are in the care of the local authority, and with families affected by trauma but where safety has been established.
- Consultation to networks and organisations working with family trauma.

2a Reflective programme

The Reflective programme of work in the Family Trauma team focuses on children in care and supporting families in an early intervention format. The programme takes on three strands:

Reflective Care

The Reflective Care programme of work builds on a successful pilot funded by the Department for Education and focusing on the development of the Virtual Mental Health Lead (VMHL) role in statutory services. The aim of the Reflective Care programme is to establish and embed VMHL function, working across health and social care. To date, the Reflective Care programme has worked with nine local authorities through the Department for Education pilot programme, with positive feedback on the VMHL role throughout.

Reflective Fostering

Reflective Fostering is a group-based programme which consists of 10, three-hour sessions run by social care staff and experienced foster carers over 10-12 weeks. The main aim of the programme is to promote ‘reflective fostering’ to foster carers; that is, taking a reflective stance towards both themselves and their foster child. This enables carers to step back from situations and take a different perspective, by reflecting on their own internal states and the child’s. The programme is currently undergoing a large-scale randomised control trial, with local authorities and independent fostering agencies delivering the programme to over 300 foster carers before the end of 2022.

Reflective Fostering operates on a training and consultation model from the Family Trauma team. While current resources focus on the clinical trial, future plans for Reflective Fostering would support local authorities and independent fostering agencies to roll-out Reflective Fostering, ensuring that is a sustainable, cost-effective solution, while the development of an accreditation system for facilitators and consultants would ensure programme fidelity.

Costs

The costs are £55 per session (£440 for the eight-week course) for self-funding families. We ask that parents and carers commit to attending for the whole eight weeks, where possible and that full amount is paid prior to the group starting.

Contact us

If you would like to make an enquiry or referral to the Reflective Fostering Group, please contact:

Telephone: +44 (0) 20 7794 2313
Email: referrals@annafreud.org

Reflective Parenting

Reflective Parenting, based on the same model as Reflective Fostering, is also a group-based programme designed to support a variety of parents and carers. To date, groups have been offered to support special guardians, dads, and adoptive parents, among others. Reflective Parenting is at an earlier stage in its evaluation, and twice-yearly training is offered by the Anna Freud Centre, with follow-up consultation provided as required (by Theresa Schwaiger, Clinical Lead).

Costs

The costs are £55 per session (£440 for the eight-week course) for self-funding families. We ask that parents and carers commit to attending for the whole eight weeks, where possible and that full amount is paid prior to the group starting.

Contact us

If you would like to make an enquiry or referral to the Reflective Parenting Group, please contact:

Telephone: +44 (0) 20 7794 2313
Email: referrals@annafreud.org

Find out more on our website
2b Parents in conflict

All parents and carers sometimes argue with one another, but sometimes, conflict between parents or carers can increase to a level that is not healthy for the family.

Our clinical team has developed a therapeutic assessment model that aims to support families where there are concerns about the impact of parental conflict or parental communication breakdown on children. We have found that when working with children in this situation, involving the whole family has a much better outcome.

Contact and residence disputes

The Contact and Residence Disputes team is a multidisciplinary team with professional expertise including family therapy, social work, child and adult psychiatry and clinical psychology. The team has developed and delivers complex interventions for high-conflict parents, primarily involved with the family courts. Our therapeutic assessment model aims to support families where one or more of the below issues are present:

- There are disagreements or concerns about contact.
- Contact with one parent has not taken place for a long time.
- There are disagreements about where a child should live.
- There are significant concerns about the impact of ongoing parental acrimony and/or legal proceedings on children.

The team is usually instructed by the court, parent, or children’s services to make recommendations about contact and residence, and to help families for whom other interventions have failed to move forward, reducing the negative impact of separation and ongoing parental disputes on their children.

Costs

For all assessments and treatments within the service, the standard expert rate is £200 per hour per clinician for privately funded parties and third parties.

Where the cost of the assessment or treatment package is part funded by parties in receipt of Legal Aid Agency (LAA) funding, LAA funded parties will be invoiced in accordance with the LAA Guidance on the remuneration of expert witnesses. Psychiatry time is charged at £108 per hour, and all other disciplines at £100.80 per hour.

Contact us

For more information, please contact isabelle.greenway@annafreud.org or submit an enquiry form.

No Kids in the Middle multi-family groups for high-conflict separated parents and their children

This approach was developed in the Netherlands and has gained popularity across Europe as an effective intervention for high-conflict separated parents and their children. We led the adaptation to a UK context and, funded by the Department for Work and Pensions Reducing Parental Conflict Challenge Fund, supported the delivery and evaluation of an initial pilot phase of the UK adaptation.

For more information, read the full evaluation report or visit our website.

Family Ties project: protecting children from parental conflict

In collaboration with Child Attachment and Psychological Therapies Research (ChAPTrE). Family Ties Online builds on the same principles of the No Kids in the Middle multi-family therapy group but is adapted for families to access virtually on an individual basis. The programme was developed in response to need during the coronavirus pandemic lockdowns. Family Ties Online is for parents who want to work on their communication, so that they reduce the impact of arguments on their children. The programme takes place through video calls between parents and the therapist over 12 weeks. Each parent will have 10 sessions, sometimes together with their co-parent, and other times with the therapist one to one. Parents will also be asked to complete ‘homework tasks’ between sessions and to think about these with their network.

Parental conflict may or may not be a result of or exacerbated by the coronavirus pandemic, associated stressors, and lockdown conditions. The parents may be living under the same roof, or they may be separated.

The intervention focuses on the child’s experience and supports children throughout lockdown and beyond by working with their parents, and their parents’ support network, to:

- minimise the negative impact of conflict on their children
- gain further understanding of their conflict and stressors (including understanding and managing different cultural expectations) in order to find more effective ways to co-parent
- build coping strategies to help them manage the stress associated with conflict, further reducing the impact of conflict on the child
- reduce anxiety and loyalty conflicts for the child
- protect the child against the possibility of their relationship with one parent breaking down as a result of parental conflict.

Costs

At present, we are working to secure funding to provide free places on this programme. Places will be offered on a first come, first served basis.

Contact us

For more information, please contact FamilyTies@annafreud.org or submit an enquiry form.
2c Family Ties: therapeutic assessment and treatment of high-conflict separated parents and their children

This course provides participants with a framework for assessing and treating families where there is:

• chronic conflict between separated parents primarily around the residency of, and contact with, their children
• a long history of chronic litigation and allegations (by each parent) around the quality of parenting provided to the child and ‘parental alienation’
• a wish to intervene early in order to protect the child and reduce the involvement of the Family Court.

The harmful impact on children of involvement in such conflict is well documented however, traditional therapy has been found to be largely ineffective and professionals often find themselves stuck having exhausted existing resources with the family having made little or no progress.

The training is delivered by a specialist team who have developed an innovative conceptual framework drawing on mentalization, systemic and attachment-based approaches, and is based on the book they have recently published, High conflict parenting post separation: The making and breaking of family ties (2020) by Eia Asen and Emma Morris.

Target audience
The course is appropriate for any professional who works with high-conflict separated parents or carers and their children in legal, social care and health settings, including:

• social workers (including children’s guardians)
• family therapists
• clinical psychologists
• psychiatrists
• psychotherapists

Focus
By the end of the course, participants will gain:

• understanding of a conceptual framework and guiding principles that they can use for assessing, decision making and treatment planning with families where there is high conflict and disputes between separated parents which is adversely affecting their children
• an overview of different interventions that can be used to help move families, their networks and professional systems away from polarised narratives about blame, including early interventions, group and individual family-based approaches and interventions to reinstate contact between children and parents
• support to think about safe and reflective practice when working with entrenched parental conflict.

Costs
The training fee is £750.

To book a place on this course, please visit our website

Section 3: early years training offer

The Early Years and Prevention programme sits within our Clinical Division at the Anna Freud Centre. It comprises a multi-disciplinary team of mental health professionals, some with a background in psychoanalytic child psychotherapy, counselling, clinical and educational psychology. We have specialisms in parent-infant psychotherapy, video-based treatments, therapy for parents, carers and toddlers (in groups and individually) as well as other mentalization-based approaches. We are also developing and delivering specialised support for fathers in the perinatal period.

Other services available:
• training to individuals and teams
• packages of individual and family assessment or therapy with babies, toddlers and their parents or carers, including those who have recently been adopted or in the process of adoption
• consultation to networks and organisations working in the early years
• supervision to teams and organisations working in the early years.

Find out more on our website
This two-day course will explore mentalizing and the importance of the parent or carer’s ability to mentalize effectively, to support the development of the infant’s mind, attachment to their parent or carer and their capacity to reflect and to relate to others. Using practical tools, engaging activities, and case material that you bring, we will explore the application of this approach to the parent-infant relationship and how you can support parents and carers to mentalize their babies. We will also consider how to support our own mentalizing as professionals when we face stressful and challenging situations, particularly around infant safeguarding and multi-agency working.

3a Mentalizing in practice: working with parents and infants

Target audience
This course is suitable for professionals working in the field of infant and perinatal mental health, e.g. nurses, therapists, psychologists, family therapists, health visitors, social workers, and psychiatrists.

Focus
• develop your knowledge and understanding of mentalizing
• provide you with practical tools and skills for supporting mentalizing in the parent-infant relationship
• enhance your reflectiveness as a professional, team and service, to support mentalizing during stressful and risky contexts.

Costs
The training fee is £500.

3b Foundations in infant mental health: parenting in the perinatal period

Target audience
This conference is suitable for any mental health clinician or early years practitioner who is working with families with children aged 0-2. This includes professionals working in the following teams and services:
• perinatal
• infant mental health
• parent-infant

Focus
• to enhance knowledge and understanding of the interface between parental and infant mental health
• to expand thinking about work with families in the perinatal period and applying theory and evidence to practice
• to develop specific parent-infant skills like infant observation and managing safeguarding risks to infants
• to promote an inclusive approach to practice for all families, with a specific focus on LGBTQ families and on cross-cultural practice.

Costs
£500 for both days one and two.
£250 for day one (parental complex trauma and infant safeguarding only).
£250 for day two (cross-cultural parenting, co-parenting and family forms only).

To book a place on this course, please visit our website
3c  
**Supervision in the early years**

**Target audience**
This course is suitable for any mental health clinician or early years professional who is working with families with children aged 0-5 in a managerial and supervisory role. This includes professionals working in the following teams and services:
- perinatal mental health
- infant mental health
- parent-infant
- birth
- parenting
- early years
- CAMHS
- Family Nurse Partnership
- IAPT under fives
- specialist health visitors
- early attachment services

**Requirements for this course**
- A core professional training for work with children in the early years (aged 0-5).
- Two years’ intensive practice experience working in early years (0-5s, with at least some experience with 0-2s).
- Experience of multi-agency working with babies or young children, including knowledge and awareness of safeguarding practice.
- Experience of consulting and/or supervising other staff.
- Ability to present training cases within the workshops, including video of your own supervisory practice.

**Focus**
- To develop a pathway for experienced early years practitioners to move into supervision roles.
- To develop specific skills for already experienced early years supervisors.
- To equip supervisors with knowledge and skills particular to reflective supervision that supports the mental health and development of children in the early years.
- To embed and enrich knowledge and skills in supervisory practice.

**Costs**
The training fee is £1460.

To book a place on this course, please visit our website

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3d  
**Engaging and supporting fathers in the perinatal period**

**Target audience**
This course is suitable for clinicians (counsellors, doctors, nurses, psychotherapists, psychologists, psychiatrists, social workers), mental health and health professionals (midwives, health visitors, IAPT practitioners, mental health practitioners), researchers and students. It is particularly relevant for community and specialist perinatal mental health teams.

**Focus**
- Raising awareness about the importance of paternal mental health in the perinatal period, for the father, the partner and the baby.
- Providing guidance to professionals in the perinatal field on how to work with fathers effectively and accessibly.
- Training perinatal mental health services to engage and support fathers, to meet the objectives of the NHS Long Term Plan.

Early years mental health (0-5s) is a unique area of practice in which professionals simultaneously address the needs of the young child and the wider family, while holding the needs of the former at the centre of their practice. It is well documented that it is an area of work that can be particularly emotionally taxing because of the vulnerability of the baby and the rawness of emotions in the perinatal period.

This course is designed for professionals and clinicians working in infant and early years mental health who wish to take on a supervisory role or may have been in a supervisory role for some time but want to develop their skills in this area. Through teaching seminars and smaller work discussion groups, supervisors in training will have the opportunity to reflect on and develop their supervisory practice.

To book a place on this course, please visit our website

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This course will help clinicians and professionals working with parents and babies in the perinatal period to include fathers in their work. It will cover why supporting fathers in this period is important – for them, their partners and their babies. It will also explore the barriers to engaging fathers in services and the barriers that fathers experience in accessing services, and what we as professionals can do to be father-inclusive in our practice.

Participants will be taken through how to engage fathers, what works well in assessments and what we have learnt from providing services to fathers experiencing mental health difficulties and difficulties in the parent-infant relationship.
3e
Parent-Infant Relational Assessment Tool (PIRAT)
Global Scales training

Target audience
Health professionals working with parents and infants, including GPs, social workers, health visitors, midwives, infant mental health workers, psychiatrists, clinical psychologists, child psychotherapists and researchers in the field.

Focus
• To provide an overview of assessment measures in infant mental health.
• To teach health professionals the rationale for PIRAT and the techniques for its use.
• To consider the use of PIRAT in professional, clinical and research settings.

A growing body of research from different disciplines points to the importance of the early caregiving relationship in infant mental health. Difficulties in the parent-infant relationship have been shown to risk derailing critical developmental processes in infancy and beyond. It is vital in such circumstances that health professionals are able to identify aspects of the parent-infant relationship that are a cause for concern.

Professionals working within the field of infant development such as GPs, health visitors, social workers and community nurses are well placed to identify parents and infants where the primary relationship is in difficulties at the earliest opportunity. Grounded in the clinical practice of the Parent-Infant Project at the Anna Freud Centre, PIRAT has been specifically developed to enable a range of health professionals to observe and rate qualities of parent-infant interaction and identify infants at risk.

It is a flexible tool designed for use in everyday practice, in the consulting room, clinic or home. PIRAT can be used as a risk assessment tool and to elucidate the quality of the parent-infant relationship: it is time-efficient to learn and provides a shared language for health professionals from various professional backgrounds.

• PIRAT offers a systematic evidence-based framework for assessing risk to babies with their carers.
• Focused on infants aged 0–2 years, it offers a global rating of parent-infant and infant-parent interactions (affects and behaviours), which includes ratings of optimal behaviour and risk behaviour.
• Grounded in clinical practice, it has been adapted and developed to provide a flexible tool—easily incorporated into the health professional’s toolkit of expertise and efficient to use in everyday practice in the consulting room, clinic or home.
• Participants will learn the PIRAT manualised method of coding and assessing parent-infant interaction, using DVD material to practice the coding of the measure.

Optional reliability test
This training course is the first part of the reliability training. To receive PIRAT accreditation, participants can choose to take part in the additional reliability training day and complete the first reliability test which includes coding of 10 videotaped parent-baby interactions.

Feedback on the first reliability test will be provided before participants complete the second reliability set comprising 20 more parent-baby interactions. Reliability is tested on two levels, the screening of risk and global reliability scores.

3f
Think Baby training programme

Target audience
It is designed for nursery nurses, health visitors, play workers, and social workers.

Focus
To support outcomes for practitioners:
• improvement in knowledge, confidence and competence in facilitating attachment focused (drop-in) groups
• application of learned parent infant therapeutic techniques.
To support outcomes for the families:
• provide positive family experience and improved parental understanding of their child’s learning and development
• reduced parental isolation
• improved community engagement
• improvement in achieving parenting goals
• increased parental confidence in play activities with their child.

Get in touch at:
EarlyYears@annafreud.org

The Think Baby training programme is a six-session taught course, with interactive elements, aimed to support practice that is more infant mental health informed and focused on strengthening parent-child interactions and relational security.

The manual for the Think Baby training sessions has been developed by the Early Years team (it draws significantly on evidence-based, attachment-informed approaches in the early years such as psychoanalytic parent-infant psychotherapy and mentalization-based treatment (MBT). The training includes role plays, exercises, some observation tasks with video clips etc. Strengthening reflective practice is key and we suggest this training goes hand in hand with reflective practice groups.
Principles and practice of psychoanalytic parent-infant psychotherapy

Target audience
Professionals working with infants and their parents or carers, who are interested in developing specialist therapeutic skills in this area. This course is particularly suitable for those offering work to parents/carers and their babies in specialist perinatal mental health teams, early years services or CAMHS under-fives teams – child psychotherapists, child or adult psychiatrists, clinical or counselling psychologists, systemic or art psychotherapists, social workers, psychiatric nurses, nursery nurses and allied professions.

Focus
The aim of this course is to extend the understanding and skills relevant to therapeutically-based early intervention with families experiencing attachment difficulties, with infants that may already be showing signs of disorganised relating strategies or defences. The course will examine the complexity of working therapeutically with infants and their parents or carers, and will focus on the psychoanalytic framework as set out in this model.

This training is based on the therapeutic model developed by the Anna Freud Centre’s Parent-Infant Project, as described in the book: The practice of psychoanalytic parent-infant psychotherapy. This model is designed for babies 0-12 months and their parents or carers and will be introduced in this intensive 3.5-day training. Each training day will include seminars and technique-based discussions, anchored in clinical therapeutic video material.

The following topics will be addressed:
• Theory and principles of psychoanalytic parent-infant psychotherapy.
• Engaging the family in parent-infant psychotherapy.
• Baby, parent/s, and therapist – the therapeutic encounter.
• The process of ending in parent-infant psychotherapy.
• Working with families experiencing intergenerational relational trauma.
• Therapeutic mother-baby groups.

Running groups for infants and parents, virtually and beyond

Target audience
This training is ideal for clinicians working in NHS CAMHS and perinatal mental health services. This will include clinical and counselling psychologists, nursery nurses, individual and group psychotherapists, psychiatrists, play therapists, community psychiatric nurses, art therapists, speech and language therapists, and occupational therapists.

The training is also for practitioners working in local authorities – particularly public health and early help teams. This will include health visitors, social workers and children’s centre workers.

Focus
The training offers group therapy skills to develop parental sensitivity and mentalization skills to parents and carers with children under five. The training is skills-orientated and supports participants to plan and facilitate parent/carer-baby/child groups within perinatal mental health, CAMHS under-fives teams, early help and public health teams.

The aims of the course are for professionals working with parents and children under five to develop:
• applied knowledge of attachment, psychoanalytic and mentalization-based models of group work relevant to the early years.
• therapeutic skills to facilitate parent-infant and parent-child groups.
• confidence to deliver relational group on-line and in person.
• the ability to meet the needs of vulnerable families in a variety of group settings.

Costs
The training fee is £250.

To book a place on this course, please visit our website

Section 4: Adaptive Mentalization-Based Integrative Treatment (AMBIT)

AMBIT is a mentalization-based approach designed to help teams and networks improve their capacity to help clients with multiple needs who find helping relationships hard to trust. AMBIT is designed to be applicable to teams who work across a wide range of sectors, including health, social care, justice, education, youth work, secure settings and the voluntary sector. It has been developed to address the challenges that workers in these sectors have told us they experience in their helping work. AMBIT offers a number of principles and tools to support teams with four key aspects of their work:

• working with your client
• working with your team
• working with networks
• learning at work

AMBIT is a team approach and as such, we only offer training to teams or networks (i.e., several teams who work within a shared locality), rather than to individual workers. All AMBIT training is preceded by a consultation day which is split into two sessions. The morning session is attended by leaders, commissioners and other relevant senior stakeholders and the afternoon session is attended by frontline practitioners.

The purpose of the day is to help the team or network to reflect together on the challenges of their work and clarify what they might want a training to help with. A brief overview of AMBIT is shared in order to help the attendees assess how far AMBIT might be able to help them with their goals. Following the consultation day, the AMBIT programme produces a report which summarises the themes from the day, offers suggested training objectives and what the most appropriate format for the training might be. Any subsequent training is then adapted to the goals that have been agreed upon.

4a AMBIT single- or multi-team training (four days)

Target audience
For a single team or several teams who are local to each other who want to improve their capacity to work together or develop a shared approach to their work with clients with multiple needs who find help hard to trust or engage with. The teams may work across a range of sectors including health, social care, justice, secure settings, youth and community settings or education. The training is open to workers from any professional background.

Focus
To train the team/s in how to apply AMBIT in their local context. The training will be adapted to the training goals that were set at the consultation day. There will be a focus on learning about AMBIT, as well as practicing how to use the tools and ideas. Time is also dedicated to helping teams develop an implementation plan which covers how they will use AMBIT when they return to work. Post-training supervision sessions are offered to support the team to put their implementation plan into practice and to work through any barriers that they encounter in doing so.

Costs
Consultation day: £1500 (full day) or £1300 (half day - for a smaller team).
Four days of team training: £6900 (up to 16 people) plus £400 for each additional person up to a total maximum of 30 people.
Supervision: £1200 for six hours or £2100 for twelve hours.

Contact us
The first stage of training will be a 30 minute engagement call between an AMBIT trainer from the Anna Freud Centre, and your team and service manager(s) to discuss your training needs further. For any AMBIT enquiries, please contact: ambit@annafreud.org.
4b AMBIT Local Facilitator training

(previously known as AMBIT Train the Trainer)

Target Audience
This training is suitable for workers from any background who work in teams who support clients with multiple needs and who find it hard to trust. No prior AMBIT experience or training is required.

Focus
Attendees will attend with at least one other person from their team to be trained in AMBIT, as well as in how to share AMBIT with others. An implementation and training plan will be developed during the training focusing on how AMBIT will be shared and embedded beyond the training. Post-training supervision will support the attendees to put this implementation plan into practice.

Costs
Consultation day: £1500 (full day) or £1300 (half day).
Five days of team training: £10500 (up to 16 people) plus £625 for each additional person up to a maximum of 25 people.
Supervision: £1200 for six hours or £2100 for twelve hours.

Contact us
The first stage of training will be a 30 minute engagement call between an AMBIT trainer from the Anna Freud Centre, and your team and service manager(s) to discuss your training needs further. For any AMBIT enquiries, please contact: ambit@annafreud.org.

4c Motivational interviewing and mentalizing

Target Audience
This course is suitable for all practitioners who work with children, young people and families in the areas of health, social care, education and youth services. It will be of particular interest to those who would like to introduce MI interventions into their existing practice and already use mentalization-based practices in their work. But prior knowledge and experience of mentalizing approaches and MI are not required.

Focus
The course aims to help practitioners in a variety of settings to support people to engage in help and make change by:
• learning the core principles of MI and how they connect with mentalizing and mentalization-based practice
• developing skills in client-centred communication and maintaining a mentalizing stance
• developing skills that address ambivalence and elicit clients’ own motivation to change.

Costs
The training fee is £500.

This course presents an overview of the theory and practice of motivational interviewing (MI) – a client-centred approach to strengthen clients’ motivation to change and to support clients in making changes. In this unique course, the theory and practices of MI are underpinned and complemented by the concept of mentalization and a description of how such work can be supported by the maintenance of a mentalizing stance. In this highly practical course, participants will be given the opportunity to practice motivational interviewing and mentalizing skills.

This course covers:
• the ethos/principles of MI
• the cycle of change and how to apply it to your work
• mentalizing and the mentalizing stance: how they relate to MI and the cycle of change
• the principles of motivational work
• recognising and working with ambivalence
• recognising and responding to sustain talk and change talk in ourselves and with clients.

This is a live online training, with trainers present throughout. The training consists of an engaging combination of live teaching, group discussion, skills practice, and interactive online activities.

To book a place on this course, please visit our website
Section 5: mentalization-based treatment for children and young people (MBT-CYP) national and international training

If we are mentalizing successfully, we are able to understand what is going on in our own minds and in the minds of other people, and realise how this is affecting the emotions, thoughts, and actions of ourselves and others. This understanding of our own perspectives as well as those of other people leads to more successful interactions and social relationships.

In some mental health disorders, such as personality disorders, individuals can be impaired in their ability to mentalize. This can lead to misunderstandings regarding emotions, thoughts and actions, and result in breakdowns in interactions and relationships. It is vital that individuals learn to mentalize successfully in order to improve mental health and social function.

Teaching individuals to mentalize as a therapeutic intervention forms the core of MBT. This evidence-based treatment has been shown to be highly effective in treating borderline personality disorder (BPD), and as a result has gained national and international attention.

Find out more on our website

5a Mentalization-based treatment with children (MBT-C) - a time-limited approach

Target audience

This training is suitable for professionals working in the field of child and family mental health. Ideally, applicants should have a mental health qualification, for example; child psychotherapy, psychology, psychotherapy, arts therapies, family therapy, counselling, psychiatry, mental health nursing, social work and have experience of working therapeutically with children and families. The course assumes prior experience of therapeutic work with children.

Focus

• To learn about the key features of time-limited MBT-C with school-age children and their parents and carers, including adaptations to online and remote therapy.
• To develop practitioner skills in assessment and case formulation.
• To promote practitioner abilities in employing a mentalizing stance in work with school-age children and parents and carers.
• To develop practical skills in employing MBT-C techniques for working with children and parents and carers to support the ‘building blocks’ of mentalizing – attention control, emotion regulation and explicit mentalizing.

Costs

The training fee is £500.

To book a place on this course, please visit our website

2 We use ‘personality disorder’ and ‘borderline personality disorder’ here because they are widely recognised diagnoses. However, we recognise that this term is felt to be deeply stigmatising by many people.
5b Mentalization-based treatment with families (MBT-F)

Target audience
This training is suitable for professionals working in the field of child and family mental health. Ideally, applicants should have a mental health qualification, for example, child psychotherapy, psychology, psychotherapy, arts therapies, family therapy, counselling, psychiatry, mental health nursing, social work and have experience of working therapeutically with children and families. The course assumes prior experience of therapeutic work with children.

Focus
- To develop practitioner skills in assessment and developing a mentalizing family profile supporting case formulation.
- To promote practitioner abilities in employing a mentalizing stance in work with families.
- To develop practical skills in employing MBT-F techniques for working with families including using games and activities to promote mentalizing between family members, techniques to disrupt non-mentalizing patterns of relating and interventions to help families identify unhelpful ways of interacting.

Mentalization-based treatment for families (MBT-F) focuses on the application of mentalizing ideas in work with families, to enhance communication and minimise misunderstandings leading to stressful interactions and controlling behaviours. MBT-F is an integrative approach bringing together psychodynamic principles, systemic theory, cognitive behavioural therapy practices and a social-ecological framework to understanding and working with families. It is a flexible and time-limited approach for use in clinical settings to address a range of difficulties experienced in families, including emotional and behavioural problems, anxiety, depression, relational difficulties, and family conflict.

This training will introduce MBT-F, offering a practical approach to the key elements of the model. The training includes a focus on employing the core mentalizing stance with families, approaches to assessment including developing a mentalizing profile as well as the opportunity to develop specific skills and techniques for working with families from a mentalizing perspective.

A useful companion text for this training is Mentalization-based treatment with families. 1

Costs
£750 training fee for those who have already completed: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.

£850 training fee including: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.

5c Mentalization-based treatment with adolescents (MBT-A)

Target audience
This training is suitable for professionals working in the field of child and family mental health. Ideally, applicants should have a mental health qualification, for example, child psychotherapy, psychology, psychotherapy, arts therapies, family therapy, counselling, psychiatry, mental health nursing, social work and have experience of working therapeutically with children and families. The course assumes prior experience of therapeutic work with children.

Focus
- To understand why adolescence is a critical period and how mentalizing theory can help us to understand the developmental needs of young people.
- To learn about the key features of MBT-A and how to apply them in your work with adolescents.
- To promote practitioner abilities in employing a mentalizing stance in work with adolescents and families.
- To develop practical skills in employing MBT-A techniques in working with adolescents to support the young person in restoring and maintaining their ability to accurately represent the minds of others as well as themselves, lessening impulsivity, and interpersonal distress.

Requirements for this course
This training will assume a working knowledge of the concept of mentalization. Prior to starting this training, you must complete the self-guided online training “An Introduction to Mentalizing and Mentalization Based Treatments with Children, Young People and Families” (MBT-CYP). You will be given access to the MBT-CYP training one month before the training start date of your MBT-A training.

Costs
£750 training fee for those who have already completed: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.

£850 training fee including: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.

This training will provide an introduction to mentalization based treatment for adolescents (MBT-A) offering a practical approach to the key elements of the model and how it can be applied in work with young people in clinical settings. Participants will gain an understanding of the specific complexities in working with adolescents and the relevance of mentalizing in relationships and in the maintenance of a self-esteem, affect regulation and impulse control. The course will also touch on issues such as working with self-harm, trauma, and supporting participants to develop skills in using a mentalizing approach with adolescents which they can integrate into their clinical work.

After completing the online introduction to MBT CYP training and the MBT-A training you will have a sound understanding of mentalizing theory, its relevance in relationships and adolescence and its importance in practice with adolescents. You will have developed a range of skills in assessment and case formulation for adolescents as well as having developed skills in understanding and managing self-harm. We hope you will be able to bring this knowledge to your current practice, whatever setting you are working in.

For those who want to be registered as an MBT-A practitioner, ongoing support and supervision will be important. This will help you to continue to develop your skills in implementing MBT-A techniques and support your ability to hold a mentalizing stance in working with adolescents. If you’d like to be recognised as an MBT-A practitioner, supervision with an MBT-A approved supervisor on two cases is essential.

5d Mentalization-based treatment: Reflective Fostering

Target audience
The course is suitable for anyone working with looked after children in either a social care, mental health, or private fostering setting. Reflective Fostering works particularly well when training up a whole team in this mentalizing approach. Local authority looked after children services may wish to initiate participation in the training for groups of foster parents following care proceedings. If you would be interested in commissioning a training locally, please email training@annafreud.org.

Focus
- To learn about the key features of Reflective Fostering and specific techniques associated with mentalizing.
- To promote practitioner abilities in employing a mentalizing stance with professionals working with children in care, foster carers and adoptive parents.
- To help professionals working with foster carers and children in care in their observations of the parent-child/young person relationship and to identify breaks in mentalizing and how to address these.
- To gain knowledge in providing psychoeducation to foster carers and adoptive parents on the impact of developmental trauma and how this understanding can help in understanding current relational dynamics.

Requirements for this course
This training will assume a working knowledge of the concept of mentalization. Prior to starting this training, you must complete the self-guided online training “An Introduction to Mentalizing and Mentalization-based Treatments with Children, Young People and Families” (MBT CYP). You will be given access to the MBT CYP training one month before the training start date of your Reflective Fostering training.

Costs
£500 training fee for those who have already completed: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.
£600 training fee including: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.

To book a place on this course, please visit our website

Reflective Fostering is a new approach to working with children and young people in foster care and aims to support their emotional wellbeing through working with foster carers, adopters, and the wider professional network.

Reflective Fostering focuses on supporting foster carers to understand and manage their own emotional responses to having children and young people in their care. This is a psychoeducation approach, aimed at improving the core components of secure attachment, including increasing carer sensitivity and reflective capacity, developing reflective practice within the professional network, promoting collaboration around the child or young person and with the eventual aim of helping to stabilise placements where there has been a history of placement breakdown or instability.

A key feature of the Reflective Fostering model is the focus on the need to pay particular attention to the foster carers’ state of mind and support their mentalizing of the children in their care. This focus supports a carer’s ability to remain reflective and emotionally regulated in the face of high conflict situations or when a child is experiencing emotional disturbance. It is expected that almost all foster carers will, at some time, find it difficult to keep their mentalizing going when they are challenged by a child in their care who has had a history of unstable attachments and who has not learned how to mentalize themselves or others in their early development.

5e Mentalization-based treatment: Reflective Parenting

Target audience
This course is suitable for anyone working in primary or secondary care, early years mental health workers, health visitors, children’s centre staff and other professionals who are interested in parent-child relationships in the early years and perinatal mental health workers. It is equally applicable to services just working with parents. It would be of interest to centres wanting to train their whole staff group in an intervention aimed at increasing parental sensitivity and reflectiveness to improve parent-child relationships, particularly where there are difficulties in the attachment relationship. If you would be interested in commissioning a training locally, please email training@annafreud.org.

Focus
- To learn about the key features of Reflective Parenting, its theoretical link to reflective functioning, attachment and theory of mind, and its application to working with parents with young children.
- To promote practitioner abilities in employing a mentalizing stance in work with parents.

To develop practitioner skills in providing practical tools to parents to help explain and practice Reflective Parenting including the Parent APP and Parent Map.

To describe and part train professionals in the running of a Reflective Parenting Group.

Costs
£500 training fee for those who have already completed: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.
£600 training fee including: Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP) - an introduction.

This two-day course aims to introduce Reflective Parenting: a model of parenting based on theoretical ideas from mentalization and attachment theory. Reflective Parenting is based on the principles of attachment theory, and the course will explain its link with the concept of reflective functioning and the positive outcomes for children’s emotional and behavioural functioning. The model of Reflective Parenting makes distinct and explicit the need for self (parental) mentalizing and other (parent to infant, child, or adolescent) mentalizing. Based on research showing that it is parental self-mentalizing that has the greater impact on the quality of parent-child interactions.

This course is intended for professionals working in primary and secondary care settings who want to identify difficulties in the parent-child relationship and intervene directly to improve the connection between parent and child. This work can be with parents with new infants, or with parents and children who are struggling to manage behavioural and/or emotional problems and where there are tensions in the parent-child relationship. Equally, the model has been extended to work with parents struggling with adolescents.
Online practitioner development groups: mentalization-based treatments with MBT-CYP, MBT-A, MBT-C, MBT-F

Target audience
Those with an existing mental health qualification, for example, child psychotherapy, psychology, psychotherapy, arts therapies, family therapy, counselling, psychiatry, mental health nursing, social work and have experience of working therapeutically with children and families.

Requirements for this course
• You have completed your basic training in MBT-C, MBT-F or MBT-A.
• You are able to attend the 10 group sessions.
• You will need to have identified or be working with at least two cases where you are using the MBT CYP model you trained in.
• You will need to permission to share material, this will be through video, audio or written session notes, or transcripts. At least one case needs to be video/audio recorded and consultation/supervision offered based on those recordings.

Costs
The training fee is £850.

To book a place on this course, please visit our website

Mentalizing and mentalization-based treatments with children, young people and families (MBT CYP): an introduction

Target audience
This training is suitable for professionals working with children, young people, parents, carers and teams who are interested in learning more about mentalizing and mentalization-based treatments with children, young people and families.

This course is also a prerequisite for attending the following MBT-CYP trainings:
• MBT for Families (MBT-F)
• MBT for Children (MBT-C)
• MBT for Adolescents (MBT-A)
• MBT: Reflective Parenting
• MBT: Reflective Fostering

Focus
The training consists of a series of short videos, presentations and activities that span four hours and can be worked through at the learner’s pace. Topics covered include what is mentalizing and why it’s important; identifying effective and ineffective mentalizing; how mentalizing develops; its relevance in childhood, adolescence, and family contexts; and will introduce the mentalizing stance which underpins mentalization-based treatments.

Costs
The training fee is £125.

To book a place on this course, please visit our website
“The Anna Freud Centre is the leading charity in child and adolescent mental health and a nationally recognised organisation for teaching learning and research. A unique set of complementary skills amongst the staff has delivered marked improvements in our understanding of mental illnesses in young people. The Centre has also established an outstanding track record in service delivery design and implementation. The positive impact on national policy development and service planning by the Centre has been outstanding. It has been a privilege to work with the Anna Freud Centre improving the lives of vulnerable young people.”

Ian M Goodyer OBE MD FRCPsych FMedSci
Professor Emeritus of Child and Adolescent Psychiatry
University of Cambridge

“Few charities in the UK have anything like the level of scientific expertise and excellence in child mental health across such a range of disciplines as the Anna Freud Centre. Their work in neuroscience in collaboration with UCL, evaluating therapeutic interventions and innovating services in child and family mental health has had a huge impact on educational and clinical services and represents a vital asset to this country.”

Professor Alan J Thompson, FMedSci, FRCP, FRCPI
Garfield Weston Professor of Clinical Neurology and Neurorehabilitation
Dean, Faculty of Brain Sciences, UCL