



Public Health Intervention Guidance

Mental Wellbeing of Children – Additional Consultation on Evidence– Stakeholder Response Table 14th November – 12th Dec 2007

Stakeholder Organisation	Evidence submitted	Section	Page Number	Comments Please insert each new comment in a new row.	Response Please respond to each comment
British Association for Counselling and Psychotherapy		General		BACP is familiar with the hierarchy of evidence used by NICE and understands the rationale for using this hierarchy, including the need to minimise bias. As an organisation committed to the development of effective and ethical psychological therapies, BACP understands the need for a solid evidence base from which to make recommendations for treatments and service delivery. BACP values the rigour of controlled trials and regrets the lack of trials in the psychological therapies, particularly for populations without clinical diagnoses (such as unhappy children) and without manualised interventions (such as play therapy or circle time). The current guidance utilises the results from three systematic reviews; in BACP's view, this limited evidence base limits the utility of the guidance.	Thank you for your comment and we welcome the BACP contribution. NICE guidance is based on the best available evidence.
British Association for Counselling and Psychotherapy		General		In addition, BACP has submitted evidence to the Health Select Committee Inquiry into NICE, arguing that an over- reliance on controlled trials to review the effectiveness of psychosocial interventions is inappropriate in that it unduly narrows the evidence base from which to make recommendations and overlooks much high quality qualitative research that lends itself to the evaluation of psychosocial interventions.	Thank you for your comment. NICE guidance is based on the most relevant and best available evidence. However, it is important to note that evidence from qualitative sources is not excluded <i>per se</i> in the development of guidance, but in this review only studies that employed a control comparison group were included in order to address the key question of effectiveness of interventions.
Carmarthenshire Youth & Children's Association		General		It is heartening to see such a thorough review of interventions. In our work in secondary schools the impact of bullying and aggression on young people's mental health and well-being is clear. It would be interesting to also have a more detailed review of the impact of cyber-bullying. This form of bullying does not seem to follow the same pattern as physical bullying i.e. Family patterns do not exist, yet this form of bullying appears to have a particularly profound impact on the emotional well-being of young people and adults. We are not aware of any particular studies or interventions and would appreciate any information on this.	Thank you for your comment and we welcome Carmarthenshire Youth and Children's Associations contribution. Cyber-bullying, although important, is outside the remit of this piece of guidance but there is a facility on the NICE website (www.nice.org.uk) where topics for referral can be suggested

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Dept of Health	 WHO Factsheet SRV.doc  ACE study summary.doc	General		<p>Good that the review has included so much on violence and bullying as these have a significant impact on mental health and well being of children.</p> <p>The review would be strengthened by including all forms of violence and abuse that effect children – including sexual and dating violence. Many interventions encourage silo'd approaches to addressing violence (ie single issue) whilst in reality many of the risk factors and what works is similar. Therefore it would be helpful to emphasise the need to take an integrated approach. Please find attached supporting evidence.</p>	Thank you for your comments and attached reports. Due to time and resource elements it is not possible to cover all associated aspects. The issues of sexual and dating violence although associated are outside the remit of this piece of guidance. There is a facility on the NICE website (www.nice.org.uk) with which to suggest topics for referral.
Dept of Health	Background	2.3	20	2 nd paragraph, line 1: could you please insert “where” instead of “were”.	Thank you. This has been amended
Dept of Health	Background	2.6	22	1 st paragraph, line 9: could you please insert a full stop instead of a comma.	Thank you. This has been amended
Dept of Health	Background	2.7	23	1 st paragraph, lines 6-8: in our view, “enjoy and achieve” is relevant, in addition to “be healthy” and “stay safe”.	Thank you. We will consider this further.
Dept of Health	Background	2.7	23	2 nd paragraph, 2 nd bullet point: could you please note that the title of the document should be “ <i>Choosing health: making healthy choices easier</i> ”.	Thank you. This will be amended
Hampshire's CAMHS Trust		General		<p>I have not responded, since i find the focus on violence and bullying prevention programmes to have missed the key issues regarding mental well-being of children in primary schools. i agree that there are these and many other anti violence programmes that can be evaluated through the rigour that NICE offers, however there is so much more to put on to the arena when wishing to influence practice that promotes wellbeing in school - and I think NICE is misguided in not looking at the relative merits of various pastoral support arrangements and practices, set within a well articulated philosophy and based on a highly developed understanding of where poor behaviour comes from (which is symptomatic of lack of mental well being in the perpetrator), and which further affects the well-being of those around the perpetrator.</p> <p>This is a scenario in which i cannot respond to these questions, because they are the wrong questions.</p>	Thank you for your comments. The guidance document is directed by the questions outlined in the scope document. This document has been, prior to the initiation of the reviews of evidence, put out for consultation. NICE basis its guidance on the most appropriate and best available evidence.

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				apologies for seeming altogether unhelpful.	
Institute of Brain Chemistry and Human Nutrition. North Campus, London Metropolitan University,				<p>I am surprised firstly that</p> <p>That the Oxford Durham Study was not represented in this review.</p> <p>Richardson AJ, Montgomery P. Pediatrics. 2005 May;115(5):1360-6. The Oxford-Durham study: a randomized, controlled trial of dietary supplementation with fatty acids in children with developmental coordination disorder.</p> <p>Portwood MM Nutr Health. 2006;18(3):233-47. The role of dietary fatty acids in children's behaviour and learning.</p> <p>I am also curious about the prescription for the study to the authors which is a matter of greater concern..</p> <p>It is well established that child intelligence and behaviour is a function of neural order.</p> <p>The development of proper neural order is dependent on prenatal conditions and those of the first two or so years post-natally.</p> <p>Bearing in mind this clear cut dependence of brain development and subsequent function on pre and early post-natal conditions, why was the review restricted to trials of children in whom such functions would have been largely predetermined.</p> <p>The recent UNICEF review puts the UK in a rather poor light for school children's behaviour and abilities, so I would have expected to see some reference to the conditions that led to poor cognitive function; learning ability and behavioural disorder.</p> <p>This comment does not reflect on the excellent quality of the review but on the omission of pivotal conditions that determine behaviour. This omission could be a result of the too narrow brief given to the authors.</p>	<p>Thank you for your comments. Issues relating to dietary supplementation, child intelligence, behaviour and subsequent neural order are important and related but outside the remit of this scope. Due to limited time and resources NICE are unable to cover all associated aspects related to this piece of guidance. There is a facility on the NICE website (www.nice.org.uk) that allows you to suggest topics for future referral.</p>

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				Michael Crawford. -- Dr. Michael A. Crawford, PhD, CBiol, FIBiol, FRCPATH Institute of Brain Chemistry and Human Nutrition. North Campus, London Metropolitan University,	
Kent Children's Trust	Systematic review of the effectiveness of interventions to promote mental wellbeing in primary schools Report 3: Universal Approaches with focus on prevention of violence and bullying	General		Effectiveness: this document gave no clear guidance about best practice. The central message appeared to be that there was insufficient data available at present. It is not easy to determine how this could or should be used to guide commissioning or service development, and this is made harder by the layout.	Thank you for your comment. The reviews of the evidence are based on the most appropriate and best available evidence and at this stage is not guidance but a review of the available evidence on universal approaches with a focus on prevention of violence and bullying. The findings of this and the other reviews will be considered by Stakeholders and PHIAC and used to generate NICE guidance on Mental wellbeing and children. For a fully overview of NICE processes please visit www.nice.org.uk .
Kent Children's Trust		General		Economics: again the central message was that there was insufficient data to offer guidance on best value for money.	Thank you for your comment. The NICE process accounts for the fact that there may not be sufficient data to offer guidance on cost effectiveness and initiates a separate economic modelling process which will generate cost effectiveness based on a generated economic model.
Kent Children's Trust		General		Previous NICE guidance has used case studies as exemplars of good practice, and this approach would have been very valuable here.	Thank you for your comment. This is not the final guidance document but a review of the evidence on universal approaches with a focus on prevention of violence and bullying.

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Luton Borough Council	Report 3 - Aims and objectives	<u>general</u>	16- 25	This additional study is helpful – page 25. Bullying is a significant issue affecting young peoples mental health and wellbeing. A focus on published literature has meant most studies considered are US based. Nonetheless this section of the Report is helpful. And the references to the UK legislative contexts on page 23 are useful. The reference to SEAL – page 24 – is also helpful. We need more evaluation of what is undoubtedly a popular whole of school approach.	Thank you for your comments
Luton Borough Council		<u>general</u>		I think this Report valuably sits alongside the two earlier reports into targeted and universal approaches. Thanks for providing the opportunity to comment.	Thank you.
Luton Borough Council	Study design / Applicability to UK population	3.2.7./ 4.5	28 / 52	The explanation for what was included and excluded – across page 28 – is clear. Somewhere in the document – perhaps cross referenced to this – a statement bridging where good UK practice is now with the type of, primarily US based studies under consideration here, would be helpful. Practitioners and managers would welcome encouragement and support in developing robust UK studies arising out of this report and the earlier two NICE studies re mental wellbeing in 5-11s – as in page 52.	Thank you for your comment. As this is a review of the evidence it would not be appropriate to make any comments that deviated from the commentary on the evidence itself, but issues of development and support of practitioners and managers in developing robust UK studies may be highlighted in the main NICE guidance document.
Luton Borough Council	Discussion	5	54-61	Peacebuilders programme details and value of whole of school approaches linked to parental involvement accord with manager and practitioner experiences in Luton.	Thank you for your comment
NSPCC		General		<u>Introduction</u> The NSPCC welcomes the opportunity to respond to the consultation on the Additional Evidence on the effectiveness of interventions to promote mental wellbeing in primary schools. The NSPCC is the UK's leading charity specialising in child protection and the prevention of cruelty to children. The NSPCC exists to end cruelty to children through a range of activities designed: <ul style="list-style-type: none"> To help children who have suffered abuse overcome the 	We welcome the NSPCC contribution.

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				<p>effects of such harm</p> <ul style="list-style-type: none"> To prevent children from suffering abuse To prevent children from suffering significant harm as a result of ill-treatment To help children who are at risk of such harm To work to protect children from further harm. <p>We have more than 180 teams and projects throughout England, Wales and Northern Ireland and the Channel Islands. Their work includes:</p> <ul style="list-style-type: none"> Family support, assessment, counselling and therapy to children and families experiencing abuse Investigations into allegations of child abuse Work within schools and other youth organisations to provide a voice for children and advocate their rights. <p>The aim of our FULL STOP Campaign is to end cruelty to children. We believe that, given the will, most abuse can be prevented. In order to achieve this, it is vital that all children, whatever their needs, have a range of services that are flexible and offer them support and protection.</p>	
NSPCC		General		<p>1. The NSPCC welcome the rigorous nature of conducting a systematic review into interventions designed to promote children's mental wellbeing in schools. Given that the recent UNICEF report has highlighted the low level of wellbeing experienced by UK children and that research (Wolke 2001) suggests that bullying is more common in UK schools than in other cultures, it was disappointing that all trials included in the review were conducted outside of the UK.</p> <p>The NSPCC considers that this further underlines the urgent need for prevalence data of violence and bullying and comprehensive research trials of interventions to be fully funded in the UK. Although the report argues that the reviewed interventions could be modified to be applied in the UK we would question exactly how these would be made culturally appropriate to the UK population. It would be</p>	Thank you for your comments. The review of the evidence is based on the best and most appropriate available evidence.

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				advantageous to have more reports of the experiences of students themselves as young people are able to offer clear insights into what works within their contexts.	
NSPCC		General		1.1 The NSPCC considers the report of the effectiveness of the wide ranging intervention, the PeaceBuilders Programme, as very encouraging. We would suggest that this programme might be developed in this country as part of the PSHEE programme or as a tool to gain the Healthy Schools Standard in relation to health and well-being (including bullying). The report authors point out that more long term studies are required but early results (2 years post implementation) of the PeaceBuilders Programme are encouraging. The NSPCC would suggest that the positive outcomes of this intervention seem plausible due to the holistic approach to changing the whole school ethos and environment. The PeaceBuilders programme included peer mentoring schemes and offers a powerful approach particularly in combination with the components of the multicomponent programmes, including parent education and teacher training. We would fully support development of these schemes as the NSPCC's experience in practice suggests their effectiveness in developing pro-social behaviour. The NSPCC'S programme 'ChildLine in Partnerships' works with schools and other youth settings to provide adults and young people with opportunities to improve the support available to young people. Its ethos is that children and young people can play a part in making changes to improve their own lives and the lives of other young people. It does this through training opportunities and resources in areas such as anti-bullying and peer support and works with a network of schools and youth settings across the UK to share ideas and good practice.	Thank you for your comments
NSPCC				1.2 The report highlights the well established impact of 'poor' parenting as a risk factor for mental health problems. The NSPCC would strongly suggest that any programmes to promote mental wellbeing in schools are closely linked with parenting programmes and parent-school partnership working. The systematic review notes that the PeaceBuilders programme does not focus very much on supporting positive parenting at home. We would endorse the view	Thank you for your comments

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				that a whole school approach should be closely linked with parent education and teacher training. The NSPCC produces a range of parenting material through schools, for example, 'Think Positive' magazine is provided free to parents and offers information about where to get help and advice and keeping children safe from harm.	
NSPCC				1.3 While the NSPCC would favour universal approaches, we note that isolated targeted interventions were not included in the systematic review. We would consider targeted approaches may be particularly valuable as components of developing whole school approaches. It is important that there is clear research evidence about what works in both targeted and universal interventions.	Thank you for your comments. Targeted approaches have been addressed in another review for this guidance project , which can be viewed on the following link http://www.nice.org.uk/nicemedia/pdf/MentalWellbeingTeesideReview.pdf
NSPCC				1.4 We note that the terms of reference for this systematic review were to include trials of interventions to support children's wellbeing in the 4 – 11 years age range. Many children are in nursery provision well before their first birthday and bullying does occur in nursery. The NSPCC considers that fostering a caring, respectful, pro-social ethos in all early years' provision to be crucial to forming a strong foundation for later educational provision and suggests that the remit for further studies is expanded to include this age group.	Thank you for your comments. Due to time and resource constraints this guidance only covers children aged between 4-11 years of age (primary school aged children). There is a facility on the NICE website to suggest topics for referral (www.nice.org.uk)
NSPCC				1.5 Interventions such as "The Good Behaviour Game" have been identified as instrumental in developing staff attitudes towards positive discipline and behaviour management. The NSPCC consider that it is crucial that staff are supported to develop tried and tested methods of developing positive environments where pupils and staff can work together to develop a respectful, valuing pro-social ethos. Concentration on this in initial and continuing teacher training would not only ensure wellbeing but also underpin access to the curriculum. The NSPCC provides a range of materials to support positive behaviour, for example the popular "Behave Yourself" leaflet.	Thank you for your comment.
NSPCC				1.6 The review notes the widespread effects of bullying on morbidity and mortality and this underlines what children and young people	Thank you for your comments

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				share on calls received by ChildLine staff. Part of improving the whole school ethos should include further research and mapping of the role of school nurses and other non-teaching staff and the part that they should play in ensuring a safe environment that promotes wellbeing.	
The Nurture Group Network		General		We have read the Report which is a well researched document on an important topic.	Thank you for your comment.
The Nurture Group Network		General		We do not wish to respond to it, however, because we regard violent behaviour in a well – run primary school as evidence of a child's inability to make healthy relationships.	Thank you.
The Nurture Group Network		General		Helping children to grow through these difficulties is a central part of nurture group work. It is almost always successful as the child begins to develop a better self concept, to succeed academically, to make friendships, and as family relationships improve. .	Thank you for your comment.
The Nurture Group Network		General		In the few cases where the child's behaviour cannot be changed it is usually a sign of serious, intransigent problems in the home, so that the child needs special provision, sometimes residential.	Thank you for your comment
The Nurture Group Network		General		We shall be responding to the document on Draft Guidance by the date requested	Thank you.
Royal College of Nursing				<p>With a membership of over 400,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.</p> <p>There are no further comments to be submitted on behalf of the RCN on the additional evidence considered for the development of this guidance.</p>	Thank you and we welcome the RCN contribution

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Royal College of Paediatrics and Child Health		General		The fact that multi-component interventions were more effective highlights the fact that this is a cultural and societal problem. Nearly all the studies were from the US or Canada, with only a few from one European country and this raises the question of applicability for us. As applicability was addressed by judging each study separately, we assume this was on a pragmatic rather than a philosophical basis.	Thank you for your comment. This review of the evidence considers this the most appropriate and the best available evidence.
Royal College of Paediatrics and Child Health	Report 3 Universal Approaches with focus on prevention of violence and bullying	4.4.1	51	There is data missing from the end of Table 9 at the top of this page.	Thank you. This will be amended.
Royal College of Paediatrics and Child Health		5	56	Studies with parent components where the parents have been offered a 'large sum of money' to participate seem very dubious.	Thank you for your comment