Child and adolescent psychiatry

In child and adolescent psychiatry (CAP), doctors work with children, young people (up to the age of 18) and their families. They treat a range of mental health problems and conditions including autism spectrum disorders, depression, anxiety, substance misuse and eating disorders.

This page provides useful information on the nature of the work, the common procedures/interventions, sub-specialties and other roles that may interest you.

Watch a video of Ajit Kumar talking about child and adolescent psychiatry:

Note: this video is part of a longer film that can be watched from the psychiatry introductory page [1].

Nature of the work

Child and adolescent psychiatry is a specialty within psychiatry working with children and young people up to the age of 18, and their families.

Working as a child and adolescent psychiatrist provides an opportunity to make a significant difference to the lives of the next generation. It is an interesting and challenging specialty which has seen tremendous developments over the last two decades and is continuing to make great strides forward.

Working with children and young people means that early intervention at this critical period is possible with the potential for making a lifelong difference to those being seen. 75% of adult mental health problems have started in before the age of 18, and there is evidence that early interventions can reduce the likelihood of mental disorders in adulthood.

Child and adolescent psychiatry combines the rigours and science of medicine, with the art and creativity of therapy. The ability to advocate for young people and improve public mental health, both add dimensions to the work that mean the possibilities are bountiful.

Working in child and adolescent psychiatry is both varied and rewarding. There are many approaches to treatment, ranging from cognitive behavioural therapy [2] to family therapy. Medication and admission to an inpatient unit may occasionally be used, but this is less frequent than for adult mental health services.

Child and adolescent psychiatrists believe in the importance of family and community and this is reflected in service provision. The work emphasises a multidisciplinary and multi-agency
approach. This means collaborating with colleagues with skills in different areas, or with partners from other organisations such as schools, social services, hospitals, or the police. Consultation with other agencies is an important part of the work, to ensure integration of interventions at all levels.

Child and adolescent psychiatrists see a great variety of patients from all walks of life. Young people present with many different problems, including:

**Neuro-developmental problems arising in childhood:**
- attention deficit hyperactivity disorder (ADHD)
- autism and learning disability
- tic disorders

**Emotional and behavioural problems:**
- disruptive behaviour
- feeding and toileting difficulties
- depression
- anxiety and OCD (obsessive compulsive disorder)
- response to trauma or life adjustment (such as domestic violence and divorce)
- attachment disorders

**Other significant mental health problems:**
- eating disorders
- psychosis
- self-harm and attempted suicide

Sometimes work is carried out with other professionals or carers of young people, rather than directly with the young person themselves. For example, child and adolescent psychiatrists may work with teachers, foster carers, paediatricians, siblings or others involved with a young person in difficulty.

Consultant psychiatrists often provide specialist advice, leadership and support to the wider mental health team.

A good understanding of legal frameworks is also important, since child and adolescent psychiatrists may need to intervene by suggesting a particular care arrangement, educational provision or ensuring the safety of young people through legal means.

“Early intervention can make all the difference, even to potentially serious illnesses such as psychosis”. Rory Conn, Child and Adolescent Psychiatist, Whittington Health NHS Trust.

[Read Rory’s story](#)

**Common procedures/interventions**

Most interventions involve talking to children and young people and their families to gain an
understanding of difficulties and to find a way forward, within a child development perspective.

An example of a “talking therapy” used with children and young people is cognitive behaviour therapy (CBT). CBT enables the patient to look at how they think and feel about a particular situation and to see how this might influence their behaviour. It can be used to help change unhelpful thinking patterns and behaviours.

Alongside many other non-drug treatments, child and adolescent psychiatrists may prescribe medication where necessary, such as anti-depressants and drugs for ADHD. [3]

Child and adolescent psychiatrists often liaise with professionals from many other agencies to improve care for young people.

**Associated sub-specialties**

There are no formal General Medical Council recognised sub-specialties within child and adolescent psychiatry. However there are a number of growing special interest areas including the following:

- inpatient
- infant mental health
- neuro-developmental
- learning disability
- eating disorders
- forensic
- substance misuse
- liaison

**Want to learn more?**

Find out more about:

- the [working life](#) of someone in child and adolescent psychiatry
- the [entry requirements](#) and [training and development](#)

- Pay and conditions Expand / Collapse

  This section provides useful information about the pay for junior doctors (doctors in training), specialty doctors, consultants and general practitioners.

  Find out more about the current [pay scales for doctors](#) and there’s more information on the [BMA website](#).

  NHS employers [10] provides useful advice and guidance on all NHS pay, contracts terms and conditions.

  Medical staff working in private sector hospitals, the armed services or abroad will be paid on different scales.

- Where the role can lead Expand / Collapse
Read about consultant and non-consultant roles in child and adolescent psychiatry, flexible working and about wider opportunities.

**Consultant roles**

You can apply for consultant roles six months prior to achieving your Certificate of Completion of Training ([CCT](#)). You will receive your CCT at the end of your psychiatry training.

Managerial opportunities for consultants include:

- clinical lead - lead NHS consultant for the team
- clinical director - lead NHS consultant for the department
- medical director - lead NHS consultant for the Trust

Most NHS consultants will be involved with clinical and educational supervision of junior doctors.

Here are some examples of education and training opportunities:

- director of medical education - the NHS consultant appointed to the hospital board who is responsible for the postgraduate medical training in a hospital. They work with the postgraduate dean to make sure training meets GMC standards
- training programme director - the NHS consultant overseeing the education of the local cohort of trainee doctors eg foundation training ([programme director](#)). This role will be working within the LETB/deanery
- associate dean - the NHS consultant responsible for management of the entirety of a training programme. This role will be also be working within the LETB/deanery

**SAS doctor roles**

SAS doctors (Staff, Associate Specialists and Specialty Doctors) work as career grade specialty doctors who are not in training or in consultant posts. You will need at least four postgraduate years training (two of those being in a relevant specialty) before you can apply for SAS roles.

Further information on the SAS doctor role ([is on this site](#)).

**Other non-training grade roles**

These roles include:

- trust grade
- clinical fellows

**Other opportunities**

Child and adolescent psychiatrists undertake research, which includes collaborating with colleagues in the UK and overseas, writing papers and presenting work at conferences.

There are good opportunities for research, for example in genomics ([how understanding individual genetics can affect prescribing](#)) and identifying the most
effective components of different psychotherapies with children and young people

It is also possible to work as a clinical academic, where a large percentage of the working week is assigned to research.

Research within this specialty, as is often the case, is subject to financial constraints. There is not always sufficient money to carry out all the necessary work.

There may also be opportunities to work in the private sector and overseas.

**Academic pathways**

If you have trained on an academic psychiatry pathway or are interested in research there are opportunities in academic medicine.

For those with a particular interest in research, you may wish to consider an academic career in psychiatry. Whilst not essential, some doctors start their career with an Academic Foundation post. Entry is highly competitive. This enables them to develop skills in research and teaching alongside the basic competences in the foundation curriculum. [17]

Entry into an academic career would usually start with an Academic Clinical Fellowship (ACF) at ST1-2 and may progress to a Clinical Lectureship (CL) at ST3 and beyond. Alternatively some trainees that begin with an ACF post then continue as an ST trainee on the clinical programme post-ST4.

After completion of the academic foundation trainees can then apply for academic core training posts (instead of normal core training). A PhD is often taken, either during core or specialty training.

Applications for entry into Academic Clinical Fellow posts are coordinated by the National Institute for Health Research Trainees Coordinating Centre (NIHRTCC). [18]

There are also numerous opportunities for trainees to undertake research outside of the ACF/CL route, as part of planned time out of their training programme. Find out more about academic medicine. [19]

The Clinical Research Network (CRN) actively encourages all doctors to take part in clinical research.

There are opportunities to undertake research within the field of child and adolescent psychiatry.

**Other opportunities**

There may also be opportunities to work in the private sector and overseas.

- Job market and vacancies  Expand / Collapse
  This section provides useful information about the availability of jobs, how to find vacancies and sources of further information.
Job market information

Psychiatry is the fifth largest medical specialty in the UK. Consultant psychiatrists comprise 4.5% of the mental health workforce and 10.5% of the total NHS consultant workforce (Health and Social Care Information Centre, HSCIC 2014). Most areas of psychiatry have seen considerable growth in the consultant workforce in the last ten years, and child and adolescent psychiatry is no exception.

16% of consultant psychiatrists specialise in child and adolescent psychiatry.

Child and adolescent psychiatrist had 649 consultants and 139 medical registrars in England ([21]NHS Digital, 2016 [22]).

In 2016, the competition ratio [23] for CT1 Core Psychiatry Training was 1.50 and the competition ratio [23] for child and adolescent psychiatry training for ST4 was also 1.50 (NHS specialty Training 2016) [24].

On this section we have information for England only. For information regarding Scotland, Wales and Northern Ireland please click on the links below.

NHS Scotland medical and dental workforce data [25]
NHS Wales medical and dental workforce data [26]
Department of Health, Social Services and Public Safety workforce information for Northern Ireland [27]

Where to look for vacancies

Specialist child and adolescent training is open to those who may want to train flexibly on a less than full-time basis (LTFT). You can request and apply for this after you have been offered the job. Restrictions apply.

Recruitment into specialist psychiatry training (excluding Northern Ireland) is coordinated by the North Western Deanery, Health Education North West [29].

Registration and applications for psychiatry core and higher specialist training is online via Oriel [30].

Northern Ireland has its own recruitment process for psychiatry. For further details please visit the Northern Ireland Medical and Dental Training Agency [31] website.

- Further information Expand / Collapse
  - The Association for Child and Adolescent Mental Health [32]
  - British Medical Association [33]
  - BMJ Careers [34]
  - General Medical Council [35]
  - Royal College of Psychiatrists [36]

Other roles that may interest you

- General practice (GP) [37]
• Paediatrics [38]
• Neurology [39]
• General psychiatry [40]

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