

Impact case study (REF3)

Institution: University College London		
Unit of Assessment: 4 - Psychology, Psychiatry and Neuroscience		
Title of case study: New therapies, improved practice and better outcomes for children, families and adolescents through Mentalisation-Based Therapy		
Period when the underpinning research was undertaken: 2000 - 2020		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Peter Fonagy	Professor of Psychoanalysis and Developmental Science	1977 - Present
Pasco Fearon	Chair in Developmental Psychopathology	1998 – 2007; 2011 – Present
Anthony Bateman	Visiting Professor	2005 - Present
Camilla Rosan	Honorary Associate Professor	2019 – Present
Liz Allison	Lecturer in Psychology	2004 – Present
Nick Midgley	Professor of Psychological Therapies with Children and Young People	2011 – Present
Patrick Luyten	Professor of Psychodynamic Psychology	2010 – Present
Period when the claimed impact occurred: 2013 - 2020		
Is this case study continued from a case study submitted in 2014? No		
1. Summary of the impact		
<p>Research at UCL on the relationship between attachment and mentalisation resulted in the Mentalisation-Based Therapy (MBT) approach. This novel framework has had a transformational impact on practice and underpinned the development, evaluation and professional application in the UK and internationally of effective mental health therapies to treat several different issues that threaten the health and wellbeing of children, adolescents and families. A total of 14,931 practitioners in 22 countries have been trained to use these therapies and 13 international MBT Centres have been set up across Europe, North America, Australia and New Zealand. Nine out of 10 training participants surveyed report the interventions to be 'very' or 'extremely' helpful to their patients/clients.</p>		
2. Underpinning research		
<p>In the 1990s, researchers at UCL studying the associations between attachments (the deep emotional ties we form with others which provide us with feelings of safety, comfort and belonging) and mentalization (the ability to perceive and understand others, and oneself, in terms of mental states) developed and evidenced three key theories. Firstly, that attachment plays an important role in mental health and that insecurity of attachment is markedly increased in adults with psychiatric disorders; secondly, that insecure attachment is passed from one generation to the next; and thirdly, that a caregiver's capacity for mentalizing drives this intergenerational process.</p> <p>The UCL team have continued to test, extend and evaluate these concepts in the current REF period. A four-year randomised control trial (RCT) of the breakthrough Mentalization-Based Therapy (MBT) for Borderline Personality Disorder (BPD) concluded in 2003 demonstrating long-term positive effects on BPD symptoms and service utilisation [R1]. There have been 5 additional trials showing robust benefits of MBT relative to treatment-as-usual (TAU) in depression, self-harm, suicide risk and interpersonal problems.</p>		

The team have conducted a series of further studies adding to the theoretical and evidence base that informs the development of therapies.

- 1) **Mentalization:** The concepts that patterns of relationships become set in early life, through interactions with a primary caregiver, may be relatively stable over time, may be passed from one generation to the next, and may affect risk for psychopathology, are important when developing prevention strategies for breaking cycles of disadvantage. In 2002, Fonagy published a monograph [R2] laying out the group's central hypothesis that attachment-related trauma impairs the development of mentalizing, which subsequently leads to the patterns of emotional dysregulation and self-disturbance characteristic of Borderline Personality Disorder. The book has been highly influential, with around 7000 citations. Further research evaluated the suitability and effectiveness of the mentalizing approach in other client populations where attachment and mentalizing difficulties are considered important, including anti-social personality disorder, adolescent self-harm, children in foster care, and children on the 'edge of care'.
- 2) **Intergenerationality:** In a 2003 study, the team used behaviour-genetic methods to show that the perpetuation of insecure relationships from one generation to the next is mediated by environmental processes (i.e., not genetic transmission) and is linked to the quality of care [R3]. The team have more recently conducted meta-analysis of the considerable evidence that has accumulated to support their earlier hypothesis that it is the caregiver's capacity for mentalizing that drives the intergenerational process, and that the parent's reflective function supports their capacity to read accurately and respond sensitively to their child's cues and communications, which then promotes security of attachment. For example, a study in 2016 showed that the association between parental and child attachment is highly robust across 95 published and unpublished studies [R4].
- 3) **Attachment and mental health:** The team made a critical contribution to the demonstration that early differences in attachment security have long-term consequences for child development, which provided a key basis for focusing on attachment processes as an intervention strategy. In 2011, the team conducted a major longitudinal study of 1,364 children and found that insecure attachment in infancy predicts higher levels of externalizing behaviour across the primary school years, and that boys from socially disadvantaged contexts show increasing behavioural problems over time [R5]. In a series of influential meta-analytic reviews from 2012-14, they also showed, across all extant studies, that attachment insecurity is consistently associated with greater risk of externalizing problems, internalizing problems and lower social competence across childhood [R6].

3. References to the research

- [R1] Bateman, A. & Fonagy, P. (2003). Health service utilization costs for borderline personality disorder patients treated with psychoanalytically oriented partial hospitalization versus general psychiatric care. *American Journal of Psychiatry*, 160(1), 169-171. doi:[10.1176/appi.ajp.160.1.169](https://doi.org/10.1176/appi.ajp.160.1.169)
- [R2] Fonagy, P., Gergely, G., Jurist, E., & Target, M. (2002). *Affect regulation, mentalization and the development of the self*. New York: Other Press. [Available upon Request]
- [R3] Bokhorst, C. L., Bakermans-Kranenburg, M. J., Fearon, R. M. P., Van IJzendoorn, M. H., Fonagy, P., & Schuengel, C. (2003). The importance of shared environment in mother-infant attachment security: a behavioral genetic study. *Child Development*, 74(6), 1769-1782. doi:[10.1046/j.1467-8624.2003.00637.x](https://doi.org/10.1046/j.1467-8624.2003.00637.x)
- [R4] Verhage, M. L., Schuengel, C., Madigan, S., Fearon, R. M. P., Oosterman, M., Cassibba, R., . . . van IJzendoorn, M. H. (2016). Narrowing the transmission gap: a synthesis of three decades of research on intergenerational transmission of attachment. *Psychological Bulletin*, 142(4), 337-366. doi:[10.1037/bul0000038](https://doi.org/10.1037/bul0000038)
- [R5] Fearon, R. M. P. & Belsky, J. (2011). Infant-mother attachment and the growth of externalizing problems across the primary-school years. *Journal of Child Psychology and Psychiatry*, 52(7), 782-791. doi:[10.1111/J.1469-7610.2010.02350](https://doi.org/10.1111/J.1469-7610.2010.02350).

[R6] Groh, A. M., Fearon, R. P., Bakermans-Kranenburg, M. J., van IJzendoorn, M. H., Steele, R. D., & Roisman, G. I. (2014). The significance of attachment security for children's social competence with peers: a meta-analytic study. *Attachment and Human Development*, 16(2), 103-136. doi:[10.1080/14616734.2014.883636](https://doi.org/10.1080/14616734.2014.883636)

4. Details of the impact

Impact on patients

The President of the International Society for the Study of Personality Disorders (ISSPD) which represents the global practitioner community, states that MBT has had “transformational impact” on practice in the treatment of personality disorder and brought “immense benefit to many of those suffering from this painful and debilitating set of mental conditions” in highly vulnerable groups [S1]. MBT was the first therapy to offer clear evidence from RCTs [e.g. R1] of lasting patient benefit (including five- and eight-year follow up). This evidence confirms that those receiving treatment enjoy a more fulfilling and gratifying quality of life in terms of less use of services and a greater likelihood of being involved in full-time education or employment. The benefits were confirmed by a Cochrane review [S2], making it one of only two therapies for BPD identified by Cochrane as having a substantial evidence base [S1]. It takes a non-stigmatising approach towards its client group, giving hope to patients by promoting kindness and understanding. This makes it relatively easy to implement with patient groups made suspicious by disappointment with the support they have previously received. These factors make MBT highly popular among members of the ISSPD and the mental health field in general [S1].

Underpinning new interventions

The team's breakthrough linking attachment and mentalizing to social functioning [R1, R2, R5, R6], coupled with the core elements of MBT practice, is “precipitating a colossal wave of development in psychological treatments” [S3]. Unlike the majority of psychotherapy models it is theoretically grounded, with a clearly articulated mechanism of change that makes it easy to operationalise across the full translational spectrum [S1]. In addition, the same model can be used to treat children, adolescents, young people and adults. New therapies based on the research have been developed, trialled and rolled out in practice for the treatment of specific groups. These include *Adolescent Self-Harm* (MBT-A), trialled in 2012 and now used by practitioners in England, Scotland, N. Ireland and 15 other countries [S4], with a further group-based adaptation being trialled in 2019 with good evidence of improved patient outcomes. Therapies for adults with Antisocial Personality Disorder; children and families (MBT-C, MBT-F); and *Adaptive Mentalization-Based Integrative Treatment* (AMBIT), also use the mentalization approach to optimise functioning of mental health and social care teams caring for children. A mentalization-based parenting intervention, the *Reflective Fostering Programme*, was developed in collaboration with the NSPCC and implemented in 2017 in interventions with 28 families, with foster carers reporting benefits of reduced stress, foster child behavioural and emotional wellbeing and meeting self-defined goals [S5]. In 2020, the NIHR funded a full-scale RCT (GBP91,736,095.21) involving over 700 foster carers recruited from local authorities across England and Wales.

In addition to their own interventions, the team's research has underpinned novel interventions developed by others for a range of clinical groups and at-risk populations. In the early 2000s colleagues at Yale developed *Minding the Baby Home Visiting* [MTB-HV] to serve at-risk young families, most of whom have high economic and social needs, as well as histories of adverse childhood experiences and developmental trauma. MTB-HV is both inspired by and grounded in the UCL work [S6]. Benefits of the programme (as demonstrated in two RCTs) include: lower rates of obesity in toddlers, more on-time paediatric immunization, lower rates of rapid subsequent childbearing, a trend toward lower rates of child protection referrals, higher levels of reflective parenting, higher rates of secure attachment, lower rates of disorganized attachment, and less disrupted teen mother-child interactions. At 1 to 3-year follow-up there were significantly lower rates of maternally reported externalizing disorders. Longer-term analysis of data from families with 4 to 9 year-old children indicates that parents who had received the intervention are more supportive and reflective, and that their children have fewer internalizing, externalizing, and total problem behaviours [S6].

MTB-HV was designated as an Evidence-Based Home Visiting model by the U.S. Department of Health and Human Services in 2014 (one of only 19 models with this federal designation). It has since been implemented by other sites in Connecticut and Florida; in total, over 250 families have been served by MTB-HV in the US, with approximately 200 families served in the UK through a collaboration with the National Society for the Prevention of Cruelty to Children and the Anna Freud Centre. It is currently being implemented in nine municipalities in Denmark, where well over 100 families have been served to date. Over 300 individuals have received intensive introductory training in MTB-HV, with over 800 registrants in recent months to webinars on the programme's foundations of reflection and the core approaches used [S6].

The *Lighthouse MBT Parenting Programme* (developed by the Head of Attachment and Perinatal Services in Oxford Health NHS Foundation Trust [S3]) is an innovative, intensive programme that aims to prevent child maltreatment by promoting sensitive caregiving in parents. It is a direct translation of the UCL team's attachment and reflective parenting framework and was developed in close collaboration with Fearon and Fonagy. Its creator describes it as "a lifesaving and life enhancing revolution in mental health" that re-conceptualises the mechanisms through which children come to be harmed in order to prevent such harm. Since 2015 more than 100 parents have been supported by the MBT programme through clinical services in Oxford, Wiltshire, Bath & North East Somerset and Buckinghamshire. The programme is now run in Australia, Germany, Poland, Ireland and Spain, and a RCT on six UK sites is testing roll out of the programme into social care [S3].

Improving national and international practice

The Anna Freud National Centre for Children and Families [S4] (one of the UK's leading children's mental health charities) strongly supports MBT-based therapies and has partnered with the UCL team to devise professional training to enable practitioners around the globe to incorporate the research into their practice. So far, a total of over 14,900 practitioners from 36 different countries have received training in one or more of the MBT family of interventions, with demand for training places outstripping supply and sessions regularly selling out within 24 hours of being advertised [S4]. Training sessions have been held in all the nations of the UK as well as the United States, Austria, Finland, Japan, Italy, The Netherlands, Germany, Chile, Spain, Hong Kong, Sweden and Canada [S4]. MBT training centres have been established in seven European countries (Belgium, Denmark, Germany, Ireland, The Netherlands, Poland and Switzerland), three North American locations (Boston, Los Angeles, Canada), Australia and New Zealand [S4]. These figures include MBT training for 143 Mental Health Service practitioners to increase the skill base of community mental health services as part of the NHS Long Term Plan launched by Health Education England in 2019 [S4].

In a recent follow-up survey of practitioners who had received training in the family of MBT interventions 87% of the 290 respondents reported that MBT had been either very useful or extremely useful to their practice, and 89% reported that MBT had been very beneficial or extremely beneficial to their patients/clients. [S7]

Fonagy led the establishment of NHS England's *Child and Young People's Increasing Access to Psychological Therapies Under 5s* programme in 2015 and Fonagy and Fearon made a significant contribution to developing the national training curriculum, which had attachment-based interventions at their core [S8]. Since its inception, 89 CAMHS Under 5s practitioners have undergone the training so they can use attachment-based interventions in their practice.

Informing Care and Mental Health Policy and Guidelines

MBT has been highlighted as an evidence-based intervention for BPD in the reviews of clinical guidelines for BPD in Denmark, Sweden and Switzerland [S9] in the impact census period. In 2015, Fonagy and Fearon were key members (Fonagy as Chair) of the NICE Guideline Development Group on *Children's Attachment: attachment in children and young people who are adopted from care, in care or at high risk of going into care*, which published guideline NG26 in 2015 reflecting the UCL team's input [S9]. Since 2015 Fearon has been a member of the expert advisory group for Big Lottery's Better Start programme to support attachment and children's

socio-emotional development across the city of Blackpool, and shared learning from the programme with practitioners in Nottingham [S10]. He is also a trustee of Foundation Years Information and Research, a charity supporting evidence--based policy for the early years within Parliament [S10]. Fearon gave evidence to the All -Party Parliamentary Inquiry on the First 1001 Critical Days in 2015 [S10] and in 2017 Fonagy chaired NHS England's Perinatal Parent-Infant Pathway group, of which Fearon was also a member, and they continue to advise NHSE on the implementation of the Long-Term Plan's Perinatal Programme.

5. Sources to corroborate the impact

- [S1] Supporting statement from the President of the International Society for the Study of Personality Disorders
- [S2] Storebø, O. J., Stoffers-Winterling, J. M., Völlm, B. A., Kongerslev, M. T., Mattivi, J. T., Jørgensen, M. S., Faltinsen, E., Todorovac, A., Sales, C. P., Callesen, H. E., Lieb, K., & Simonsen, E. (2020). Psychological therapies for people with borderline personality disorder. *The Cochrane Database of Systematic Reviews*, 5(5), CD012955. doi:[10.1002/14651858.CD012955.pub2](https://doi.org/10.1002/14651858.CD012955.pub2)
- [S3] Supporting statement from the Head of Attachment and Perinatal Services, Oxford Health NHS Foundation Trust
- [S4] MBT training figures provided by Anna Freud Centre
- [S5] *Feasibility Evaluation of the Reflective Fostering Programme (RFP)*. NSPCC. 2018. <https://www.annafreud.org/media/7748/lay-summary-nspcc-formatted.pdf>
- [S6] Statement from Minding the Baby Co-Founder, Yale Child Study Centre
- [S7] Survey and feedback data from MBT training attendees
- [S8] Children and Young People's Improving Access to Psychological Therapies Programme: Under 5s National Curriculum 2015
- [S9] Collated guidelines published in the REF period and mentioning MBT
- [S10] Websites/reports of enquiries/groups citing Fearon and Fonagy's evidence/involvement