Paula Lavis is the Coalition Co-ordinator Policy and Campaigns, Children and Young People's Mental Health Coalition.
For communication, please email: Plavis@mentalhealth.org.uk

Paula Lavis

Resilience and Results: How Promoting Children's Emotional and Mental Wellbeing Helps Improve Attainment

This article looks at why children and young people's[1] mental health and emotional well-being is such an issue and why it is essential that they receive appropriate support when problems first emerge. In particular it will focus on the Children & Young People's Mental Health Coalition's work connected to schools.

The Children & Young People's Mental Health Coalition (Coalition[2]) brings together 14 leading children's and mental health charities to campaign with and on behalf of young people in relation to their mental health and wellbeing. We have a shared vision of a nation where mental health is prioritised, positive mental health is promoted and early intervention practices are in place to secure mentally healthier futures for children and young people.

Our priority areas include promoting early intervention and ensuring that support is easily accessible for young people when mental health problems first emerge; and ensuring that everyone working with young people receives appropriate training about mental health and child development. With this in mind, the Coalition has been working to help schools understand the importance of mental health and how to support their students.

What is Mental Health?

People often confuse the term 'mental' with mental health problems. The World Health Organisation (WHO) defines mental health as being 'a state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community' (WHO.

2011). This definition illustrates that mental health is a positive term and a key component of health and is similar to other terms, such as, emotional wellbeing and psychological wellbeing.

Mental health problems refer to a wide range of difficulties, which vary in their persistence and severity. Mild problems are at one end of the spectrum and severe mental illness at the other.

Risk and Protective Factors for Mental Health

It is well-established that children and young people who experience certain risk factors are at a greater risk of developing mental health problems. These risk factors can be within the child, within the family and within their environment (Department of Health, 2008). The more risk factors experienced, the greater the chance they will develop mental health problems. Research has found that 28% of young children are growing up in households with more than one risk factor, and with some experiencing five or more risk factors (Sabates and Dex, 2013). Outcomes for cognitive, emotional and conduct development and hyperactivity were all worse for children exposed to multiple risks by age five (Sabates and Dex, 2013).

Conversely, there are well known protective factors, which help build resilience in the child and reduce the risk of mental health problems developing. These factors include: having higher levels of self-esteem, being securely attached to a main carer, having a good support network, having a good relationship with your

parents, good housing and having access to schools with strong academic and non-academic opportunities (Department of Health, 2008).

This is why early intervention is so crucial, both in terms of working to reduce the impact of risk factors and helping the child be more resilient and able to cope with the difficulties they may face.

Why Young People's Mental Health is an Issue

One in 10 young people are known to have a mental disorder (Green et al., 2004). Mental health problems often have their roots in childhood, so tackling problems when they first emerge is both morally right and cost effective (Department of Health, 2011). Mental health problems in childhood are associated with poor outcomes in adulthood. For instance, people who had severe conduct problems in childhood were more likely to: have no educational qualifications, be economically inactive and have been arrested (Richards et al., 2009).

How Mental Health Problems Impact on Educational Attainment

Mental health problems have a profound effect on the educational attainment of some young people.

- Young people with persistent conduct or emotional disorders are:
  o more likely to be excluded from school
  o more likely to be assessed as having special educational needs, and
  o more likely to leave school without educational qualifications (Parry-Langdon, 2008)
- Young People with emotional problems are:
  o much more likely to do poorly at school
  o they are twice as likely as other children to have marked difficulties in reading, spelling and mathematics (Green et al., 2005)
- Young people with conduct disorders and hyperkinetic disorder may be four to five times more likely to struggle to attain literacy and numeracy skills (Green et al., 2005)
- Young people with higher levels of emotional wellbeing have higher levels of academic attainment and are more engaged in school (Morrison & Vorhaus, 2012).

Training in Mental Health and Emotional Wellbeing

The Coalition is concerned that most teachers have no or little training in mental health and emotional wellbeing, and child development. This is a big issue given the prevalence of mental health problems and the impact mental health difficulties have on the child and the rest of the school, including the teachers. While we know that many schools really do understand the importance of promoting children and young people's mental health and emotional wellbeing, and see it as their business, others do not.

Anecdotally, we have heard that schools are not always good at engaging with their pupils' mental health. To support this finding, a recent study found that a problematic pupil-teacher relationship significantly increased the odds of a child having a psychiatric disorder or conduct disorder (Lang et al., 2013). While not causal, there is a clear association between developing a psychiatric condition and a poor pupil-teacher relationship. In another study concerning eating disorders, 16% of young people said that staff had little or no knowledge about eating disorders (Knightsmith et al., 2013). Worryingly only 1 in 10 young people thought that their school would provide a supportive environment for someone recovering from an eating disorder (Knightsmith et al., 2013).

This lack of training is not just the responsibility of schools. It is something that the Government needs to address through teacher training. Hopefully the MindEd e-portal (2013), which the Government are funding, will help provide school staff with some knowledge about mental health. This portal will provide free online education to help adults to identify and understand children and young people with mental health issues. The National Association of Independent Schools and Non-Maintained Special Schools (NASS) (2012) have also produced an eLearning training resource, which is called Making Sense of Mental Health. This training pack is aimed at staff working in schools with children and young people who have complex Special Educational Needs (SEN). Schools can help by encouraging their staff to complete this on-line training or to ensure that

they develop their knowledge of mental health in other ways.

Ensuring that school staff have training in mental health and emotional wellbeing is important in light of the SEN reforms. Government have proposed in the SEN Code of Practice that the Behaviour, Emotional and Social Difficulties (BESD) category be revised and renamed as Social, Mental and Emotional Health (Department for Education, 2013). Schools will need to be able to identify emerging mental health problems. So additional training in mental health will be essential if school staff are to be able to do this.

Helping Schools promote their Pupil's Mental Health and Emotional Wellbeing

Schools have a responsibility to look after and nurture their pupils. There is some research that shows that young people would rather speak to their teacher about their problems, than go to their GP or a mental health professional (Right Here Brighton and Hove, 2012; Green, et al., 2004). School staff are in a good position to help reduce the stigma around mental health, identify emerging mental health difficulties and work with local statutory and voluntary sector providers to help ensure that young people access specialist support when they need it.

There are lots of things that schools can do to help support young people's mental health, and for that reason the Coalition (2012) have produced a guidance document for schools called Resilience and Results. This document aims to encourage schools to think about how they can promote mental health within their school and provide additional support for those with mental health problems. It includes case studies, which illustrate what support is available, and quotes from young people, parents, and teachers.

A whole school approach to promoting mental health within schools is a way of putting in place the right systems and developing the right culture for this to be implemented. It has been shown that to achieve this head teachers and senior staff need to be effective leaders and champion mental health (Durlak and DuPre, 2008). Research has found that a lack of leadership around emotional and mental wellbeing has a detrimental impact on the implementation of this vital work (Kendall,

et al., 2013). The study by Kendall et al. (2013) found that staff often didn't feel they were supported by managers to participate in the mental health promotion project being implemented within their school. A school culture that doesn't support help-seeking may discourage pupils accessing emotional support.

There are opportunities to use existing lessons and other systems that already exist within the school. A good pastoral system and staff such as learning mentors, teaching assistants, higher level teaching assistants and school nurses are all important resources to draw on to help children and young people who are experiencing difficulties.

PSHE lessons could potentially be used to increase young people's knowledge of mental health and wellbeing, increase their emotional literacy and reduce stigma. The young people that Coalition members work with have all experienced mental health problems; and they told us that they didn't learn about mental health within their PSHE lessons. Most of these young people were very frightened and distressed when they started to experience mental health difficulties, and if they had learnt about this subject at school, they said they would have felt less frightened and more empowered to help themselves.

OFSTED (2013) has reported that 40% of schools' PSHE provision required improvement or was inadequate. OFSTED (2013) also asked a panel of young people what they would like to learn about in school, but currently didn't. Young people told them that mental health issues were at the top of their list, with:

- 38% wanting to learn how to deal with bereavement
- 33% wanted to know how to cope with stress
- nearly a third wanted to know more about eating disorders such as anorexia

Embedding mental health and emotional wellbeing education within other subjects is one additional method of ensuring young people learn about this important topic. For example, English lessons could cover literature and poetry that deals with distress; students could learn about the mind, brain, emotions and medication through science lessons; the importance of exercise and nutrition in the context of mental health could be covered in

physical education and food technology; and pupils could be encouraged to identify and express emotions through their music, art and drama classes.

Commissioning External Support

These days head teachers have more control over their own budgets, so are in a position to develop or commission services that are tailored to the needs of their school. There are a number of different types of support that the school can commission. This might be commissioning an external organisation to provide mentors, or a mindfulness course. Some schools already employ their own counsellor, or commission an agency to provide counselling. The Coalition would advocate the latter, as there are a number of safeguarding issues that need to be addressed, such as whether they are suitably qualified, how their practice is supervised and so on.

While this work isn't free, there is good evidence to show that you get a good return on your money. A cost-effectiveness analysis conducted on behalf of the Department of Heath found that every £1 spent on the prevention of conduct disorders through social and emotional based interventions in school gave a total return of nearly £84 (Knapp, et al., 2011). So in the current economic climate, investing in school based services to support children and young people's mental health makes both financial and clinical sense.

Resilience and Results from the Coalition (2012) gives schools some guidance about commissioning external services and provides links to other resources which have more of a focus on commissioning, such as the BOND Consortium (2013). The focus in *Resilience and Results* is on how the voluntary sector can help and, with that in mind, it includes examples of how these organisations are working to support schools. However, there will also be statutory services such as educational psychology services and possibly private sector services that will also be able to help schools support the mental health of their pupils.

How Schools are Promoting Mental Health

The Coalition held a competition in 2013 to find out how their guidance, *Resilience and Results*, was being implemented in schools and to identify good practice in supporting pupil's emotional and social development. A panel of educational and health professionals, with input from young people, picked the winners. The competition was generously funded by the Zurich Community Trust

The competition winner was the Kings Hedges Educational Federation, which is a Cambridgeshire primary school and nursery for 357 pupils aged 3-11. This school impressed the judges by really putting wellbeing at the centre of their work. They have used their Pupil Premium money and other funds to help all pupils by providing universal support, and they have commissioned targeted services aimed at those who are more vulnerable. For instance, they provide lessons to help all early years' pupils to relax; they have commissioned a counseling service called *Blue Smile*; and they also have the *Red Hen project*, which works with parents.

The runner ups were the Newall Green High School, which is a mixed sex secondary school and sixth form centre in Greater Manchester; and the Epsom Downs Primary School & Children's Centre, which is based in Surrey.

A highly commended award was given to The Harbour School, a special school in Portsmouth, which adopted a collaborative approach across the school to facilitate inter-agency working.

Further information about the winners can be found on our website - http://www.cypmhc. org.uk/schools_competition_2013/

References

BOND Consortium (2013). http://www.youngminds.org.uk/ training_services/bond_voluntary_sector Accessed 27 January 2014.

Children and Young People's Mental Health Coalition (2012). *Resilience and results: how to improve the emotional and mental wellbeing of children and young people in your school*, London: Children and Young People's Mental Health Coalition. http://www.cypmhc.org.uk/resources/resilience_results/ Accessed 27 January 2014.

Department for Education (2013). *Draft Special Educational Needs (SEN) Code of Practice: for 0 to 25 years*, London: Department for Education. https://www.gov.uk/government/ uploads/system/uploads/attachment_data/file/251839/Draft_SE N_Code_of_Practice_-_statutory_guidance.pdf Accessed 27 January 2014.

Department of Health (2008). *Children and young people in mind: the final report of the National CAMHS Review*, London: Department of Health. http://tinyurl.com/ozdltt6 Accessed 27 January 2014.

Department of Health (2011). No health without mental health, London: Department of Health. https://www.gov.uk/government/publications/the-mental-health-strategy-for-england Accessed 27 January 2014.

Durlak, J. A. and DuPre, E.P. (2008). 'Implementation matters: a review of research on the influence of implementation on program outcomes and the factors affecting implementation', *American Journal of Community Psychology*, 41, pp. 327-350.

Green, H., McGinnity, A., Meltzer, H., et al. (2005). *Mental health of children and young people in Great Britain 2004*, London: Palgrave. See http://www.statistics.gov.uk/downloads/theme_health/GB2004.pdf Accessed 27 January 2014.

Kendal, S. et al. (2013). 'Students help seeking from pastoral care in UK high schools: a qualitative study', *Child and Adolescent Mental Health*, online early.

Knapp, M. et al. (2011). *Mental health promotion and mental illness prevention: the economic case*, London: Department of Health. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/215626/dh_126386.pdf Accessed 27 January 2014.

Knightsmith, P. et al. (2013). 'My teacher saved my life' versus 'Teachers don't have a clue: an online survey of pupils' experiences of eating disorders', *Child and Adolescent Mental Health*, online early.

Lang, I.A. et al. (2013). 'Influence of problematic child-teacher relationships on future psychiatric disorder: population survey with 3-year follow-up', *British Journal of Psychiatry*, 202, pp. 336-341.

Royal College of Paediatrics and Child Health (2013). *MindEd e-portal*, http://www.rcpch.ac.uk/minded Accessed 27 January 2014.

Morrison, L.M. & Vorhaus, J. (2012). *The impact of pupil behaviour and wellbeing on educational outcomes*, London: Department for Education. http://dera.ioe.ac.uk/16093/1/DFE-RR253.pdf Accessed 27 January 2014.

The National Association of Independent Schools and Non-Maintained Special Schools (NASS) (2012). *Making sense of mental health,* http://www.nasschools.org.uk/making_sense_of_mental_health.aspx Accessed 27 January 2014.

OFSTED (2013). *Not yet good enough: personal, social, health and economic education in schools*, London: OFSTED. http://www.ofsted.gov.uk/resources/not-yet-good-enough-personal-social-health-and-economic-education-schools Accessed 27 January 2014.

Parry-Langdon, N. (eds) (2008). *Three years on: survey of the development and emotional well-being of children and young people*, London: Office for National Statistics. http://tinyurl.com/qzlwlxm Accessed 27 January 2014.

Richards, M. et al. (2009). *Childhood mental health and life chances in post-war Britain,* London: Sainsbury Centre for Mental Health. http://www.centreformentalhealth.org.uk/publications/life_chances.aspx?ID=596 Accessed 27 January 2014.

Right Here Brighton and Hove (2012). *Young people's views and experiences of GP services in relation to emotional and mental health, London: Right Here.* http://www.righthere.org.uk/home/assets/pdf/young-people-views-experiences-gp-services-report.pdf Accessed 27 January 2014.

Sabates, R. & Dex, S. (2013). *'The impact of multiple risk factors on young children's cognitive and behavioural development',* Children and Society, Online Early.

World Health Organisation (2011). *Mental health: a state of wellbeing,* http://www.who.int/features/factfiles/mental_health/en/ Accessed 27 January 2014.