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MAKE IT COUNT.

Let's put health and wellbeing at the heart of Scotland's schools



Mental Health
Foundation
Scotland

Young people continue to be judged on academic performance with much less regard for their mental health and wellbeing and the nurturing and development of their emotional intelligence. Literacy, numeracy and other academic achievements are still seen as the key markers of success, yet young people are facing unprecedented pressures in their lives, which are contributing to mental health problems including anxiety, depression, self-harm and eating disorders. With more and more young people struggling to cope with their mental health, now is the time to put emotional wellbeing at the heart of what children learn in schools.



Mentally healthy schools

The incidence of mental health problems in children is increasing across the UK,¹ and a recent NASUWT survey found that 96% of teachers believe they have come into contact with pupils experiencing a mental health problem.² There are many causes of this distress, but it is well known that half of mental health difficulties are established by the age of 14 and childhood adversity has been shown to account for around a third of future mental health problems.³ With childhood carrying such importance in the formation of mental health difficulties, intervening as early as possible can help prevent children from reaching crisis and avoid more expensive, longer-term interventions.⁴ There is a pressing need for the Scottish Government to prioritise a preventative approach to children and young people's mental health; schools have a central role to play in this, as a place where children spend between 25-27 hours each week, during which time they are acting *in loco parentis*.

It is time to consider what this means in the context of children's mental health, given that the dominant political and public discussion about education continues to focus on pupils' academic achievement. While the Scottish Government has recognised that child and adolescent mental health services (CAMHS) are inadequate and has committed to providing more counsellors in schools as well as a Youth Commission to explore how services can be improved, we need to ask ourselves - are we doing enough to prevent mental ill health from arising in the first place? Are we doing enough to create schools that are nurturing and supportive environments for all children, which help them to understand and protect their mental health?

We want children to thrive in school and be able to make the most of this time of their life, but we know that there is no one single way for schools to provide such an environment. To make schools mentally healthy places for all who attend and work in them, we need to pursue a "whole-school" approach to prevention, with action aimed at all elements of the school.

Teachers, leadership, the curriculum, children and support services are five areas that contribute to creating a mentally healthy, nurturing environment for children and young people to thrive and all must be addressed.

1. Leadership and strategy

School leaders are responsible for their school's ethos and culture. To effectively promote mental wellbeing across the school, leadership needs to be strategic and evidence-informed.



This Good Childhood Report 2018 strongly makes the case that short, unobtrusive wellbeing surveys have an important role in identifying students in need of support.⁵ This is consistent with Young Minds' *Wise Up* report which asks policy makers to develop, trial and establish a wellbeing measurement framework for use in schools.⁶ While there are good examples of schools already measuring wellbeing, we recommend that all schools should have a strategic plan in place to measure the wellbeing of their pupils and to act on the information generated.

School leaders are often unable to prioritise pupil mental health and wellbeing because of constraints such as budgetary issues, but wellbeing also carries insufficient weight in accountability measures.

Education Scotland's "Applying Nurture as a Whole School Approach"⁷ framework supports schools in developing knowledge and understanding of how children and young people develop and learn, but there is insufficient information about whether and how this is being implemented across local authorities.

We believe that health and wellbeing should not be extra-curricular, but at the heart of what children learn in schools. We all have mental health and all young people should be supported to better understand emotional wellbeing, coping with stressful situations, identifying when a problem exists and how and when to seek help. We believe it is time to give schools the evidence to understand what works in supporting their own pupils' emotional wellbeing by introducing a wellbeing measure in every school. While literacy and numeracy are consistently measured across the curriculum, the same commitment is not applied to health and wellbeing.

"There is a real focus on what they need to achieve and when they need to achieve it by and I don't care what anybody says, but wellbeing should be at the centre of everything – and it's not." Teacher, Focus Group

However, a variety of measures are already available,⁸ and schools should be able to choose the measure which best suits their needs and context. An example would be the introduction of a "wellbeing check-in" where teachers and pupils explore mental health and emotional resilience. A questionnaire would address mood, social connections, family environments and other indicators that identify distress while promoting good mental health. The questionnaires should be co-produced by young people in each school to ensure that the questions reflect the real life needs of children and young people. Placing young people at the heart of this process empowers



them and allows them to feel that they're in greater control of their mental health. It would be for schools to determine the frequency and the appropriate class for the check-ins to take place.

Measuring wellbeing would give teachers and school leaders a better understanding of stress levels among pupils as well as staff and help identify individual pupils' needs at an earlier stage. School leaders should be trained in how to interpret and act upon the data generated.

We also believe that health and wellbeing should feature prominently in Education Scotland's school inspection reports. While elements of health and wellbeing are included in the questionnaires, no direct question on mental health is explicitly asked to pupils, parents, teachers and non-teaching staff respectively. For example, "my school teaches me how to look after my emotional health" would be a pertinent question to ask pupils, and we recommend this be included in the questionnaire.

Notwithstanding this, schools should never be ranked based on the wellbeing of their pupils, as adversity is not equally distributed and will vary widely by cohort and location and could lead to unhelpful "league tables of well-being". Instead, we recommend that Education Scotland inspects the process by which schools collect information about their pupils' wellbeing and how they act on that information, which must be kept internal and confidential.

Recommendation: Every school in Scotland should introduce a mental wellbeing measure, such as a "wellbeing questionnaire," by 2020 to identify and address problems early.

2. Children

To promote a truly inclusive, mentally healthy school culture, children need to be an integral part of the whole-school approach.

Our research has found that around half of children in Scotland (49%) would talk to their friends at school if they were feeling worried or sad, compared to 36% who say they would talk to a teacher.

We have found that one way of engaging pupils in a whole-school approach to mental health and wellbeing is through peer delivery of mental health education. Delivered alongside other forms of mental health support and education, peer education can increase the likelihood that interventions and approaches to wellbeing are effective and



sustained.⁹ Peer education helps empower young people to become active participants in the education process,¹⁰ giving them a sense of ownership of the course content, and there is some evidence that it is more acceptable to children and young people to learn about and discuss sensitive topics with their peers.¹¹

The Mental Health Foundation has developed and trialled a Peer Education Project that we have delivered to over 40 schools, which has seen pupils become more comfortable talking about mental health and improved their knowledge of issues such as stigma. We recommend that all local authorities explore the benefits of peer-delivered mental health education, in the context of a wider whole-school approach, and deliver programmes to all secondary schools by 2020.

Studies of peer-delivered health education suggest that peer educators can be effective because young people find them to be credible sources of information. Young people may feel more comfortable asking questions of peer educators who are of a similar age and share similar experiences and challenges.¹²

Our focus group research found that stigma is still very present in school environments and young people said that this is partly due to a lack of knowledge and understanding of mental ill health. Some young people perceived mental illness as a very serious problem where there is no means of prevention or recovery. This reinforces the need for building greater knowledge of mental health in school environments.

Our research also found mixed views about who young people would turn to for help, some citing their parents or siblings, others suggesting that they would be comfortable discussing a problem with a teacher while others would turn to their friends. But the uniting factor was the concept of trust and whether their situation would be understood.

It was also recognised that gender and social norms play a significant role in how young people deal with expressing their feelings.

"I think as a boy, I felt that growing up, you didn't talk to other boys, it's just something you didn't do and probably continues to this day. It's something I struggled with." Pupil, Focus Group

The Mental Health Foundation is a managing partner of See Me – Scotland's Programme to tackle mental health stigma and discrimination.



Stigma prevents people from seeking help and discrimination means children and young people can't realise their potential. See Me's work in schools has been pivotal in empowering people to take action, to change attitudes and behaviours around mental health. We believe that See Me must continue to be funded in the long-term to support the development of an education system free from mental health stigma and discrimination.

Recommendation: Every school should adopt a peer-led mental health programme by 2020 to help young people support one another and break down the stigma on mental health.

3. Teachers

Teachers spend the greatest amount of time with children while they are at school and are often their first point of contact. Despite their potential to support the early identification of mental health risk factors, 60% of surveyed trainee teachers across the UK are not confident about identifying mental health needs in students and 73% feel that mental health is given insufficient priority in teacher training.¹³

Teachers are already overburdened in what they are expected to do. They should not be asked to take on new roles or become trained counsellors on top of their existing jobs and schools have a responsibility to protect staff wellbeing and avoid work overload. However, teachers consistently tell us that they lack the confidence to explore mental health in their classrooms or to respond to instances of emotional distress.

Considering the significant increase in mental ill health in young people, we believe that schools must be able to respond to this reality.

For teachers to feel comfortable supporting children with their emotional wellbeing and mental health needs, training for all teachers needs to be sustained and long term. For new teachers, learning about mental health and wellbeing must be embedded and prioritised in Initial Teacher Education (ITE). Training should include understanding child development, including adolescent brain development, alongside more traditional mental health and wellbeing topics.

For existing teaching staff, we recommend that all teachers are trained in mental health literacy and child development. While we welcome the Scottish Government's commitment to train teachers in Mental Health First Aid – equipping teachers to respond to crisis or distress – the training programme does not provide teachers with the wider knowledge on



resilience, child development and root causes of ill health. It's crucial that teachers are not only trained on how to respond to crisis, but on creating the nurturing environments that allow young people to thrive and prevent mental ill health in the first place.

Qualitative research undertaken by Mental Health Foundation Scotland shows that teachers want more training to be able to offer effective support and know what to say. Several teachers have told us that, while they have been trained in bereavement and suicide, they lack the knowledge on exploring broader issues.

*"We never had formal training. We had the bits and pieces about suicide and bereavement but there are so many more complex things that we are dealing with on a daily basis and you don't always know what to say".
Teacher, Focus Group*

We recommend that one day of Continuing Professional Development (CPD) each year should focus on children and young people's emotional wellbeing and mental health. We would like this to be part of a longer-term aim to reduce workload and deliver more time for professional development.

Teachers should also be taught how to look after their own mental health and supported in doing so. Alongside teacher training to support teachers' own mental health, the Scottish Government should also look at mental health in schools as a workplace issue and should develop policies that make schools a healthier place for teachers and other staff.

Recommendation: All teachers should be trained in mental health and adolescent brain development by 2020 to make schools mentally healthy places.

4. Curriculum

Mental health and wellbeing education is too important to be left to chance – it must feature meaningfully in the school curriculum. Children have many opportunities to develop their social and emotional understanding at school, from the playground to extra-curricular activities. However, more structured learning, embedded in the curriculum, is also crucial for helping children and young people develop this.



One of the greatest barriers to children getting mental health support is low levels of mental health literacy; in a recent report, 51% of surveyed young people said that they did not ask for help because they did not understand what they were going through.¹⁴ Personal, Social and Health Education has provided some opportunity for schools to deliver teaching about mental health and wellbeing and how children experience it. However, while there are schools that teach it well, the subject can be haphazardly delivered, frequently with irregular lessons and often rolled into other subjects like careers education. We want to see regular, timetabled sessions delivering good quality mental health education in the context of a curriculum that shows how the knowledge learned applies practically to real life.

Our research published during Mental Health Awareness Week earlier this year identified some of the root causes that leads to distress in young people's lives. 60% (of 18-24-year-olds) said that pressure to succeed led them to feel overwhelmed or unable to cope, and 58% have felt so stressed because of fear of making mistakes they have felt overwhelmed or unable to cope.¹⁵ Exam stress, body image, comparing themselves to others and relationships also contributed to significant distress.

We believe that PSE must reflect these findings and aim to address the root causes of distress. We support the current review of Personal and Social Education instigated by the Mental Health Strategy. It's time for a robust PSE programme that explores and tackles the root causes of emotional distress with a view to building resilience.

Education Scotland's Thematic inspection of personal and social education report (August 2018)¹⁶ states that only a third of primary schools are making good use of the wellbeing indicators while secondary pupils have fed back mixed views on PSE with some citing the repetitiveness of the programme and a lack of relevance to their experiences and knowledge. We agree with the report that young people's learning experiences in PSE must be improved.

Our focus group research found that PSE classes would largely focus on drug and violence prevention with mental health rarely discussed.

"You get stuff on violence and stopping people fighting and drug talks but there's never really any talk about mental health. I think support is implied, there is never any straight out – we are here, this is how you prevent stuff – there is never any of that". Pupil, Focus Group



The Scottish Government should set a national target of one hour per week of quality PSE, with a minimum of 50% of those classes focusing on mental and emotional health and resilience. It should equally give greater attention to training teachers delivering the course content and producing high quality, evidence-based resources to aid lesson delivery.

Recommendation: The Scottish Government should introduce a new national target of one hour of quality PSE per week with a minimum of 50% of those classes dedicated to building emotional resilience and tackling the root causes of mental ill health by 2020.

5. Access to support in schools

For some children, pastoral support and universal approaches will not be enough.

We believe that all schools should have independent, trained counsellors on site for children who need their support. Counsellors are an important resource for children who need additional support and can identify emotional problems and provide children with a safe space to discuss their difficulties. They have an important role in early intervention and preventing mental health problems from developing further. Pro Bono Economics has estimated that every £1 invested in primary school counselling services results in benefits of £6.20 in terms of improved long-term outcomes.¹⁷

Latest figures show that more than 8,000 children in Scotland with severe mental health problems were waiting to see a specialist at the end of June 2018 and 2,116 of them had been waiting for more than 18 weeks.¹⁸ As the recent Audit Scotland report on CAMHS found, referral pathways to CAMHS are still patchy and inconsistent across the country, referrals are increasingly rejected with few alternatives provided by professionals, data gathering is limited and waiting lists are getting longer.¹⁹ The status quo is simply not acceptable.

While we welcome the Scottish Government's commitment to introduce 350 counsellors and 250 additional school nurses, this measure alone will not turn the tide of more and more young people struggling with their mental health. We also question whether 350 counsellors are enough to resource all schools in Scotland while providing young people with the adequate number of interventions required.

Crucially, we're not doing enough to lessen the impact of early experiences of poor mental health and to ensure that young people who



are struggling learn positive help-seeking strategies. We can do this by upskilling non-medical staff such as teachers and youth workers, but equally by empowering young people's existing support networks: their peers and their parents or carers.

That's why, in addition to the provision of counsellors, we're calling on the Scottish Government and Local Authorities to embed a mental health support worker in every school. There are a range of support workers, including emotional support workers and family support workers. The purpose of this approach is to intervene as early as possible and assess young people's needs in the context of their environments – including family environments if appropriate.

Our latest research found that one in seven children have felt worried or sad about problems at home while around a quarter said that they've felt worried or sad about their family not having enough money. That's why it's important that a wider range of support, in addition to counsellors, is available in every school. This provision will also ease pressure from teaching staff who say that they are overwhelmed due to capacity and competing demands.

"I think we are overwhelmed and I feel there are children who need support who are not getting it... We need to act sooner, rather than getting to a crisis point where we need to phone CAMHS " Teacher, Focus Group

Our research has found that children are more likely to talk about a problem with someone that they can trust. We therefore think it's important that mental health support workers are embedded and fully participate in the school environment. We're pleased that, according to Education Scotland, around half of primary schools have nurture rooms or quiet spaces to support children with social and emotional needs.²⁰ We recommend that all schools move in this direction and ensure that safe spaces are available to address specific needs.

Recommendation: Mental health support workers should be embedded in every school by 2020 so that young people who require targeted support receive it, when they need it.



Making space to reflect – how you can be involved

World Mental Health Day represents the start of our campaigning work on children and young people’s mental health in schools. As our campaign develops, we want to make a space for reflection, and to hear the experiences and views of children, teachers and parents, and from other organisations with expertise on mental health in schools.

You can contribute by signing our petition and telling us how and why you think the Scottish Government should act. As we launch our campaign our message to policy makers is clear: mental health is not extra-curricular – make it count.

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