Children and Young People’s Mental Health –

Early intervention, ongoing support and flexible evidence-based care

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Chapter 8 Mental Health Promotion in Primary Schools

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## Key learning points

* Primary schools are well placed to promote positive mental health among their children, as well as identifying those who may need more specialist help with mental health problems.
* Studies show a two-way relationship between good mental health supporting learning, and learning supporting good mental health.
* Positive mental health is best promoted on a whole-school basis where everyone in the school community benefits from an inclusive culture and ethos, that values and prioritises the emotional wellbeing of all.
* The government is placing a greater focus on mental health promotion in schools with more support being offered in the form of mental health support teams and trained designated mental health leads in schools.
* More schools are using evidence-based programmes to support their children’s mental health but they must also ensure that their staff’s mental health is supported too, especially in a climate of hyper-accountability.

## Key words: Primary school; mental health; emotional wellbeing; whole school approach; evidence-based programmes

# Introduction

The promotion of children’s mental health in primary schools is of fundamental importance for many reasons. Many teachers will tell you that the happiest children in their classrooms learn best. They are able to focus, get on well with their peers, and engage in learning better than those children struggling with emotional and mental health concerns. And there is good evidence that shows that children’s emotional development is essential in the process of learning (Greenhalgh, 1994; Weare, 2004) and that low wellbeing is linked with poor academic performance at school (Parry-Langdon, 2008). Indeed, children with emotional and behavioural difficulties are more likely to be excluded from school, or leave without any qualifications. But let’s not forget that learning is also a crucial part of developing good mental health – one of the ‘five ways to wellbeing’ according to the New Economics Foundation (Government Office for Science, 2008). So, there is a two-way relationship between good mental health supporting children’s ability to learn and learning new things being an important part in developing good mental health.

But promoting children’s mental health at school is more than just helping push their grades and attainment up. When schools invest in developing the emotional health and psychological wellbeing of their pupils, they set them up for life. Longitudinal studies show that the emotional health of children at the age of 16 is the strongest predictor of adult life satisfaction. Incidentally, the weakest predictor of adult happiness is a child’s ‘intellectual development’ (Layard et al, 2013). But can schools really have a big impact on the emotional health of children? Surely nature and parental upbringing hold all of the cards? Recent evidence suggests otherwise and that schools can actually have major effects on the emotional wellbeing of children, with the effects of primary schools and teachers lasting five years and longer (Clark et al, 2018).

The simple fact is that primary schools play a pivotal role in children’s (and their family’s) lives. They are often central to the local community and provide more than just an academic curriculum. It’s not uncommon for primary schools to provide wrap-around care and support for children in the form of breakfast clubs, after-school clubs, providing uniforms and sometimes even financial and emotional support for vulnerable families. The smaller and more intimate nature of primary schools means they are often better able to play a more supportive role than their secondary counterparts. They have almost daily face-to-face interaction with the children’s main carers and are able to pick up and act upon those initial signs that things may not be going well for certain pupils and their families.

The primary schools that are often most effective at promoting children’s mental health are those that act as extended families to their pupils. Teachers and support staff, *in locos parentis*, act as the children’s parents in school and, with the right atmosphere and culture, the classmates become supportive siblings for one another. Some experts argue that tapping into children’s primitive social instincts in this way, by fostering attachment-based relationships in schools, not only aids learning but also develops their wellbeing (Cozolino, 2013). As well as providing a safe, secure learning environment for their children, many schools also provide extra specialist provision to support those children that have poor mental health or are suffering with a mental illness. School counsellors, educational psychologists, mentors are just a few of the roles that feature in many primary schools now.

With so much flux in the educational landscape, it’s important to review what the current evidence tells us about the state of primary school children’s mental health, how current government policy supports the promotion of mental health, what works, what schools can do, and which organisations exist to support them in this endeavour.

# Children’s mental health today

The term ‘mental health’ has become an umbrella term within education. Are we talking about happiness? Does mental health mean the same thing as mental wellbeing? Are mental health and mental illness the same thing? These and many other questions can arise for people working with children.

Mental health is about how children handle and relate to the feelings, moods and emotions that affect their lives. Child mental health is about the capacity for the child’s mind to grow, develop and learn with confidence and enjoyment. It is about developing resilience and learning how to cope with life’s inevitable difficulties. It is built on foundations of physical and emotional wellbeing, with children gradually understanding more about themselves and the people around them, allowing them to develop secure and healthy relationships. A child with good mental health is able to make the most of their abilities and live a full and happy life.

Conversely, a child with poor mental health may find it difficult to access and take part in the everyday activities that many children enjoy. They may become overwhelmed by anxieties, thoughts and feelings, or continuous low mood makes it hard for them to find the motivation to want to engage in what life has to offer. Friendships may prove harder to establish and maintain. Sometimes children with poor mental health exhibit erratic behaviour - appearing lively and engaged on some days, and aggressive or isolating on others.

But poor mental health does not mean the same thing has having a mental illness or mental health issue. We all have times when we feel down, low or anxious and, quite often, these feelings are temporary and pass naturally. A child could have a diagnosable mental illness such as obsessive compulsive disorder (OCD) but display good levels of mental health (in the same way that someone with diabetes can manage their illness and lead a full and healthy life). For someone to be diagnosed with a mental health issue (for example, emotional, behavioural, hyperactivity), their symptoms have to be sufficiently severe to cause distress to the child or impair their functioning (World Health Organization, 1993).

Turning our attention towards the statistics on children’s mental health in the UK, what do we know about the current situation? The fact that it has been well over a decade since children’s mental health has been surveyed on a large scale and in a systematic way (Green et al, 2005) gives an indication of how children’s welfare is viewed in the UK. The latest report from NHS Digital certainly suggests that the mental health of young people is getting worse (NHS Digital, 2018). There has been a slight increase in the prevalence of mental health issues in 5 to 15-year-olds, rising from 9.7% in 1999, to 10.1% in 2004, and 11.2% in 2017. More children in this group are experiencing clinically impairing anxiety or depression. One in eight 5 to 19-year-olds has at least one mental health issue now. And we know that children are experiencing more mental health issues as they get older. The research shows a prevalence of one in ten (9.5%) five to 10-year-olds. This increases to one in seven (14.4%) for secondary school aged children (11 to 16-year-olds) and rates of mental health issues were highest in 17 to 19-year-olds, with one in six (16.9%) experiencing at least one.

This trend is deeply concerning especially when you consider that many children with mental health issues are still not getting timely access to the specialist help they could benefit from (Office of the Children’s Commissioner for England, 2018). What the data doesn’t tell us are the reasons why more children appear to be suffering from poor mental health. Is it due to the effects of social media, or austerity, or school and exam pressure? We just don’t know. It is certainly true that the research shows that children with mental health issues spend more time on social media and have more concerns about it than those children without a mental health issue, but we have no idea which way the causality runs. What this does mean, however, is that there is a greater need to measure children’s mental health over time to get a better feel for what may be behind the causes of mental health issues and, just as importantly, what promotes good mental health in children.

# National policy

Given this concerning trend of worsening mental health among children, what is the government doing in response? At the end of 2017, the government published a mental health Green Paper, detailing proposals to create a network of support for children and young people, and their educational settings (Department of Health, 2017). The Green Paper made three main proposals:

**1. That every school and college will have a designated lead in mental health by 2025**

Their remit will be to:

* oversee the help the school gives to pupils with mental health problems
* help staff to spot pupils who show signs of mental health problems
* offer advice to staff about mental health
* refer children to specialist services if they need to.

**2. Mental health support teams should work with schools and colleges**

These support teams will offer individual and group help to young people with mild to moderate mental health issues including anxiety, low mood and behavioural difficulties. The idea is that the support teams will work closely with the designated mental health leads and provide a link with more specialist mental health services.

**3. To pilot a four-week waiting time for access to specialist NHS children and young people’s mental health services**

This would dramatically reduce current waiting times for children who desperately need access to child and adolescent mental health services (CAMHS).

However, these proposals were not without criticism. The Education and Health and Social Care Committee criticised the Green Paper, saying it lacked ambition and would fail to help the majority of children who really needed help (Education and Health and Social Care Committee, 2018). They argued that the plans would put more pressure on schools, that funding for the proposals was not guaranteed, that pilot schemes would only cover up to a quarter of the country by 2022/23, and that not enough focus was being put on promoting positive mental health and preventing mental health problems.

Other developments include the new Ofsted inspection framework which has gone out for consultation and places a greater emphasis on children’s ‘personal development’ (Ofsted, 2019). Inspectors will want to see what schools are doing to develop children’s ‘character and resilience’. Additionally, plans have been published by the DfE, to make ‘health education’ compulsory by 2020, which would see schools having to teach children about the benefits of a healthier lifestyle, what determines their physical health and how to build mental resilience and wellbeing.

All of these proposals are certainly welcome, placing a greater emphasis on schools promoting good mental health, with greater access to services and additional support. Whether schools, who are already under great financial and political pressure, will be able to take advantage of these initiatives, only time will tell.

# Whole school approaches to good mental health and school environment

There is no doubt that promoting good mental health in primary schools needs a whole school approach to be most effective. An ‘emotionally literate school’ (Weare, 2006) looks at the whole school context. It regards the total experience of school life as contributing to the emotional wellbeing of everyone who learns and works there. Without a supportive whole school culture and ethos, any mental health interventions are likely to be severely limited in their impact.

**Emotionally literate schools are typically strong in four key areas (Weare, 2000):**

* Firstly, relationships are at the heart of them and there is a strong sense of belonging. Everyone feels listened to and respected, and that they can contribute to their school community.
* Secondly, there is a strong sense of engagement and all members of the school community are working cohesively guided by strong values and common goals.
* Thirdly, these schools promote autonomy and independence. Rather than being rigidly hierarchical, schools that promote good mental health allow staff and children to feel like they are in control of important aspects of their lives and are given a voice.
* Lastly, mental health in schools is promoted by having high expectations of all children and clear boundaries and rules. Everyone knows what is expected of them and what the rewards and consequences are of certain behaviours and choices.

It is important to bear in mind, however, the intense pressure many primary schools face at present. Financial pressures, accountability measures, performance targets, league tables – all of these factors can undermine the wellbeing of staff which, in turn, has been shown to have a negative effect on children’s wellbeing and attainment (Black, 2001). So, emotionally literate schools must be aware of the pressures they are under and consciously work to ameliorate the effects of this pressure by prioritising staff and pupil wellbeing.

### Oldham Council

Oldham Council have developed a framework called The Whole School and College Approach to Emotional Health and Mental Wellbeing. The framework offers practical guidance to schools and colleges to develop the knowledge and skills needed to promote mental health, and to prevent minor problems from escalating into more serious long-term issues.

As part of the framework, Oldham Council have set up a Mental Wellbeing Team, with co-ordinators allocated to a number of schools and colleges, assisting head teachers and college principles to embed a whole school approach to emotional health and mental wellbeing.

For more information visit: <https://www.oldham.gov.uk/info/200807/mental_health/1795/the_whole_school_and_college_approach_to_emotional_health_and_mental_wellbeing>

## What schools can do to promote good mental health

As well as the school environment being important, schools can enhance their offering by adopting specific programmes to promote good mental health among their learners and staff. Well-designed programmes teach children about mental health, tackle risk factors often associated with mental health problems, and promote protective factors such as happiness, resilience and optimism, relationship skills, and stress management. The research shows that children with mental health problems benefit the most from universal approaches targeted at everyone, rather than those focused just on them (Weare, 2006). This doesn’t mean that schools cannot offer targeted interventions for groups of children struggling with mental health, but what these children need most is what is good for all children.

Below are some suggestions of programmes and interventions that have a good and growing evidence-base and may provide a useful starting point for thinking about promoting mental health in school settings.

### Social and Emotional Aspects of Learning (SEAL)

The primary SEAL programme (ages 4–11) was very popular in primary schools in the mid-2000s. Studies showed it was having a clear impact on social and emotional learning, on behaviour, and even on pupils’ reading and science test scores (Hallam et al, 2005). It has lost favour in recent years (especially after resources were archived in 2011) but the programme is well-designed and many schools still use the programme as a staple part of their Personal, Social and Health Education (PSHE) lessons. The archived resources can be found here at: <https://webarchive.nationalarchives.gov.uk/20110812101121/http://nsonline.org.uk/node/87009>

### Mindfulness in schools

Mindfulness is a type of mind training that helps develop children’s present-moment awareness of their thoughts, feelings, body sensations and what’s happening in their external environment, with an attitude of kindness and curiosity. There is a growing body of evidence that shows that teaching children the skills of mindfulness can really benefit their mental health. One recent meta-analysis of mindfulness-based interventions with young people showed significant positive effects, relative to controls, for the outcome categories of mindfulness, executive functioning, attention, depression, anxiety/stress and negative behaviours (Dunning, et al, 2018).

The leading providers of mindfulness interventions in schools are the Mindfulness in Schools Project (www.mindfulnessinschools.org), MindUp ([www.mindup.org/u-k](http://www.mindup.org/u-k)), Mind With Heart (www.mindwithheart.org), and Youth Mindfulness ([www.youthmindfulness.org](http://www.youthmindfulness.org)). Importantly, many of these providers all request that teachers have an established personal mindfulness practice before they begin learning to bring mindfulness into the classroom.

### Lessness Heath Primary School

Lessness Heath Primary school is the first school nationally to be awarded the ‘Wellbeing Award for Schools’, an award created by the National Children’s Bureau and Optimus Education.

The school had identified that staff wellbeing was being adversely affected by the demands of the job. As a result, they introduced measures to protect the mental health of their staff, such as termly CPD with a focus on wellbeing, regular supervision for staff, and creating a wellbeing team with members from the whole school community.

Workshops were held for pupils, staff and parents on the importance of developing good mental health. A family-empowerment programme was created to support families with introducing wellbeing practices at home. Children were selected as ‘wellbeing ambassadors’ to champion the school’s vision to incorporate the ‘Five Ways To Wellbeing’ into daily life.

Promoting positive mental health has been given centre stage at Lessness Heath. To find out more visit <https://lessnessheath-bexley.co.uk/wellbeing/>

### Resilience training

Organisations such as Bounce Forward (formerly How To Thrive) are training teachers to deliver programmes in schools that develop children’s (and teacher’s) levels of psychological wellbeing by teaching them the skills of resilience and accurate thinking. Their programme for primary schools is aimed at 9 to 11-year-olds and is based on the Penn Resilience Programme, an evidence-based intervention originating from the University of Pennsylvania in America. An impact review of the programme showed significant improvements in children’s anxiety and depressive symptoms, along with improvements in behaviour (Challen et al, 2011). The evidence showed that the benefits of the programme only lasted in the short term, which highlights the needs for programmes like this to be delivered on a rolling basis, with children being taught the material more than once. For more information see [www.bounceforward.com](http://www.bounceforward.com)

### Physical activity

Regular physical exercise is a fundamental part of the jigsaw of developing and maintaining good physical and mental health. It is a deep concern, therefore, that the vast majority of young people in England do not meet the minimum daily requirements of 60 minutes of moderate to vigorous exercise (Townsend et al, 2015). But an increasingly popular physical activity intervention called ‘The Daily Mile’ (www.thedailymile.co.uk) is taking root in primary schools across Britain. Children simply walk, jog or run for 15 minutes every day at school. They do not need to get changed, and teachers can decide when to fit it into the school day. It is a low-cost, high autonomy intervention. Studies show it can improve children’s mood, attention and memory (BBC Learning, 2018) as well as increasing children’s fitness and body composition (Chesham et al, 2018).

### Lessons in mental health

The Anna Freud National Centre for Children and Families (ANCCF) has created ‘Schools In Mind’ ([www.annafreud.org/what-we-do/schools-in-mind](http://www.annafreud.org/what-we-do/schools-in-mind)), a free network for school staff and allied professionals which shares practical, academic and clinical expertise regarding the wellbeing and mental health issues that affect schools. Similarly, the mental health charity, Heads Together, has also created a website to support schools – [www.mentallyhealthyschools.org.uk](http://www.mentallyhealthyschools.org.uk). Both websites contain a bank of resources with lesson plans and animations that help teachers and children talk about mental health, understand what it is and what contributes to it. There are resources for parents and staff so they can look after their own mental health, and even a wellbeing directory for young people so they can access additional help they may need. The resources are comprehensive and well-designed and will really support school leaders in prioritising the mental health of the whole school community.

### Measure children’s mental wellbeing

Schools have a strong tradition in gathering academic data and measuring progress in attainment but not so much when it comes to measuring the emotional and mental wellbeing of their children. Many schools simply wouldn’t know where to begin. The ANCCF has created a ‘Mental Health Toolkit’ for schools which includes an online tutorial in how to measure and monitor pupil wellbeing effectively, along with a summary of validated wellbeing measures schools could use. Similarly, the Child Outcome Research Consortium (CORC) has created a robust wellbeing measurement framework for schools. The toolkit and the framework are easy to use and should provide schools with the right tools to begin to systematically measure and review their pupils’ wellbeing. Not only can this help identify children who may need additional support but it will also help schools evaluate their own ‘emotional literacy’ and identify areas for improvement. To access the AFNCCF toolkit go to <https://www.annafreud.org/what-we-do/schools-in-mind/resources-for-schools/mental-health-toolkit-for-schools/>, and to access the CORC framework go to www.corc.uk.net/wellbeing-measurement-framework/

### Trained mental health workers in schools

Organisations such as the mental health charity Place 2 Be (www.place2be.org.uk), place highly trained clinical staff and counsellors in schools. They work one-to-one with children offering them counselling, including drop-in sessions at lunchtime for children who wish to talk. They work with groups and whole classes delivering lessons on topics like friendship, self-esteem and bullying. They also provide support for parents too. Research into the impact of these interventions show large improvements in friendships, learning and home life (Place 2 Be, 2018).

The NHS is also currently training Education Health Practitioners (EHPs) to go into schools to support children with mental ill health. The intention is that these practitioners will deliver high-quality, evidence-based early interventions for children and young people experiencing mental health problems within their educational setting, referring them to specialist support as necessary. To find out more about EHPs visit <https://www.healthcareers.nhs.uk/news/could-you-be-education-mental-health-practitioner>.

# Conclusion

Primary schools are in a pivotal position to promote good mental health among their children and help support those with mental health difficulties. But they face their own intense pressures which are certainly affecting the mental health of teaching staff. Government policy is slowly catching up with the growing mental health problems that an increasing number of young people face today and more focus is being placed on what we can all do to support children’s mental health from an early age. An increasing number of organisations are offering evidence-based interventions that schools can employ to promote positive mental health at school and there are more support services placing trained mental health workers in schools. Arguably though, the most important way that primary schools can support the mental health of everyone in the school community is by being an extended loving and supportive family. When relationships are at the heart of schools, when expectations are high and boundaries are clear, and when the mental health of everyone is talked about and prioritised, schools can do a lot to ensure than their children grow up to be happy and healthy.

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