



Emotional well-being of children and young people in Staffordshire High schools and the effects of funding on pastoral care.

**healthwatch**  
Staffordshire

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# Emotional well-being of children and young people in Staffordshire

## High schools and the effects of funding on pastoral care

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## Introduction

According to several children's charities, there is a growing crisis within our schools, as children are under more pressure than ever before academically, with more influences in their lives that impact their mental and emotional well-being than previous generations. The Children's Society, in their 2018 Good Child report, state that children are the unhappiest they have been since 2010. Young Minds have stated that 90% of school leaders have reported an increase in the number of students experiencing anxiety or stress over the last five years. They have evidence that across the UK, child wellbeing is deteriorating whilst mental health issues are increasing. Referrals for mental health support have almost doubled between 2010-2011 and 2014-15, with no signs of decreasing.

*"pastoral care can assist students to develop positive self-esteem, healthy risk taking, goal setting and negotiation, thus enhancing their strengths and other protective factors contributing to their resiliency as well as developing a sense of social cohesion that together can improve their overall health and wellbeing"*

Ref: Nadge, 2005 and Doll & Lyon, 1998.

*An estimated three children in every classroom [Approximately three in thirty] have a diagnosable mental health problem, rising to one in four when we include emotional distress.*

*An Escalating Crisis - Evidence shows that across the UK, mental health issues in children are increasing while child wellbeing is deteriorating. Young people today have to navigate a complex and ever-changing world, facing challenges and pressures in numerous aspects of their life*

Ref: <https://youngminds.org.uk/media/1428/wise-up-prioritising-wellbeing-in-schools.pdf>

In Schools, a student's emotional wellbeing is supported by Pastoral care as well as classes on personal and social education. This can include lessons on relationships, sex education, keeping safe online, how voting works, etc. Personal and Social Education (PSE) and Personal, Social, Health, and Economic Education (PHSE) is part of the curriculum. While currently not mandatory, PSE/PHSE cover subjects designed to help children learn about the world we live in and how to survive in it. Pastoral care, which became part of national policy in 1997, is provided in many schools to support the children with their personal emotional and mental health needs during their time in school. SEN (Special Educational Needs) is usually separate from Pastoral Care. Pastoral care and PSE/PHSE lessons are, between them, supposed to support the emotional wellbeing of the students. However, this doesn't seem to be what is happening.

*Many of the factors that affect emotional wellbeing in children operate at individual, family, school and community levels. 50% of lifetime mental illness starts by the age of 14 and 75% by age 24. One in eight 5 to 19 year olds have at least one mental disorder, one in four Year 7 students have emotional wellbeing issues.*

The policies and practices of pastoral care are supposed to support the students in education and support the staff. Therefore, good pastoral care should focus on the whole student; personally, socially and academically. Ideally, schools should actively include all aspects of the school community, be the school secular or religious based, including areas such as multi-level activities which incorporate the whole school, classes and/or tutor groups, individual programmes for early intervention and support, and casework.

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Each year, secondary school pupils in England will spend approximately 16% of their waking hours in school. School life can impact hugely on emotional and mental health, from exam stress, peer to peer relationships, time management and forming the building blocks many will need as they grow into adulthood, amongst many others. Schools are there to educate, not only in academia, but also in personal, emotional and social skills. Where a child does not have a home life where this can also be learned, the school is an important environment for children to develop those incredibly important life skills.

According to an article from TES.com from 16<sup>th</sup> July 2019, a move to a wellbeing culture in schools, similar to that of the model used in New Zealand, would have economic improvements as well as a rise in positive emotional well-being and mental health.

In 2018, Stoke on Trent City and Staffordshire County Councils, alongside Staffordshire County Commissioning Groups published a document called "Starting Well, Living Well, Supporting Well 2018-2023 A Stoke on Trent and Staffordshire Approach to Children and Young People's Mental Health and Emotional Well-being". In their introduction they state:

*"The mental health and well-being of all children and young people across Staffordshire and Stoke-on-Trent is a priority for us all. Children and young people's emotional well-being impacts on every part of their lives, their education, the relationships they have with their friends and family and the choices they make. Children and young people with good emotional health are better able to learn, participate and achieve their potential."*

They go on to recognise that dealing with emotional and mental health issues when young not only enables children and young people to develop resilience and become well-adjusted healthy adults but recognises that they need to learn the ability to do this when still young.

*There are economic as well as social arguments for this, as 50 per cent of all adult mental health problems start before the age of 14, and the total cost to the economy of mental health problems is estimated to be £105 billion a year.*

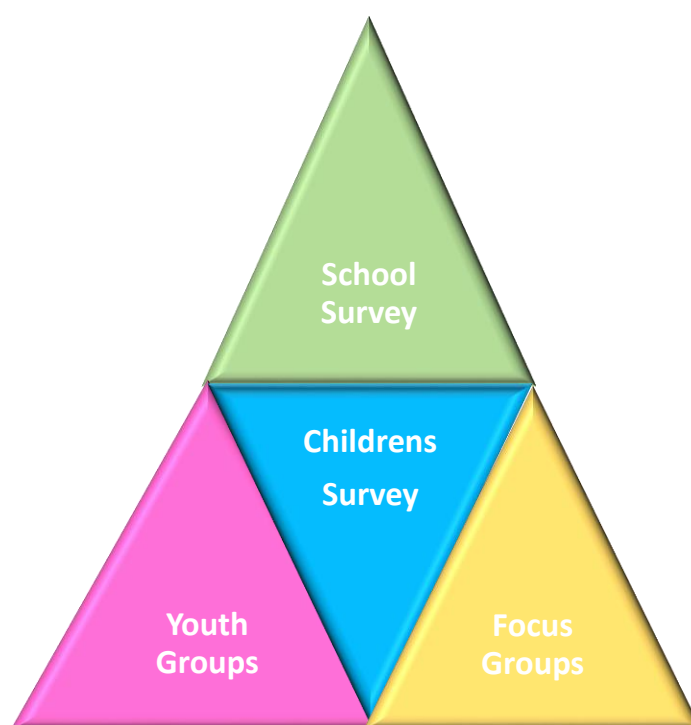
Ref: <https://www.tes.com/news/what-if-schools-valued-wellbeing-more-results>

Since 2017 it has been well documented in the media that school budget funding has been cut across the board. Schools have had to restrict or cut entirely resources they previously had, and changes to the education system have seen more emphasis on academic achievement than teaching and empowering students as a whole person. Could these cuts and changes have impacted on the emotional well-being and mental health of Staffordshire pupils?

The Councils and Clinical Commissioning Groups (CCGs) recognise the impact the school environment has on children and not just academically. They want schools to be able to support children and young people with their emotional well-being before it turns into a mental health need. If a child or young person gets adequate help and support at a young age, they can develop the tools they need to deal with issues that could affect their emotional and mental health appropriately and effectively, ideally impacting less on mental health services now and in the future.

## Methodology

Healthwatch Staffordshire have investigated the impact of budget cuts on Staffordshire High Schools, and how pastoral care has been affected. We choose to look at High Schools only, as this is when many children develop emotional and mental health issues that can affect them in later life. The education system in Staffordshire is also varied, with some areas having the two-tier system and some a three-tier system. Due to this, it was felt more balanced evidence could be obtained. Also, Children and young people tend to be more articulate and more self-aware by this age, and able to self-identify where they need support. The Study was started in November 2018 and ran until the half term of May 2019. After studying school websites for information on what the schools offer pastorally, we contacted schools by email and telephone, visited schools, met with pupils and teachers, and ran focus groups.



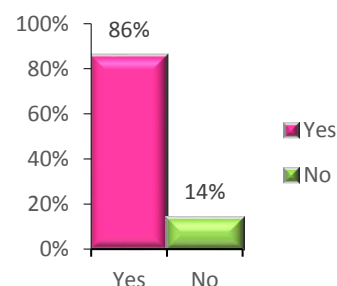
The report is based on two surveys, one for the schools and one for pupils, and visits to a variety of High Schools across Staffordshire. Out of the 56 state-funded High Schools contacted as of end of May 2019, 21 Schools had responded. We also ran several focus groups; these included School Councils, Health and Social Care students, year tutor groups, Police Cadets, Girls Venture Corps and Girl guides. Some of the focus groups had teachers or adult leaders present, others didn't. However, we found both allowed the pupils to express themselves freely. We also met with heads and leads of pastoral care in schools.

## Findings

### School Surveys

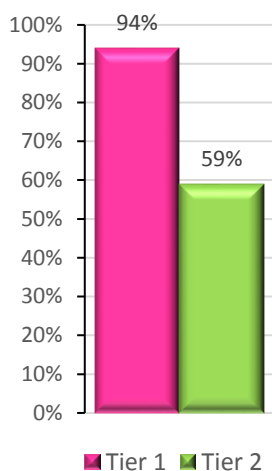
There were 21 anonymous responses from the 56 State schools that we contacted. When asked if their school offered emotional support services to their students, 86% of the respondents said that their school did. However, 14% said that their school did not offer emotional support services to students. (Figure 1).

*Figure 1: Does your school offer emotional support services (pastoral services) to your students?*



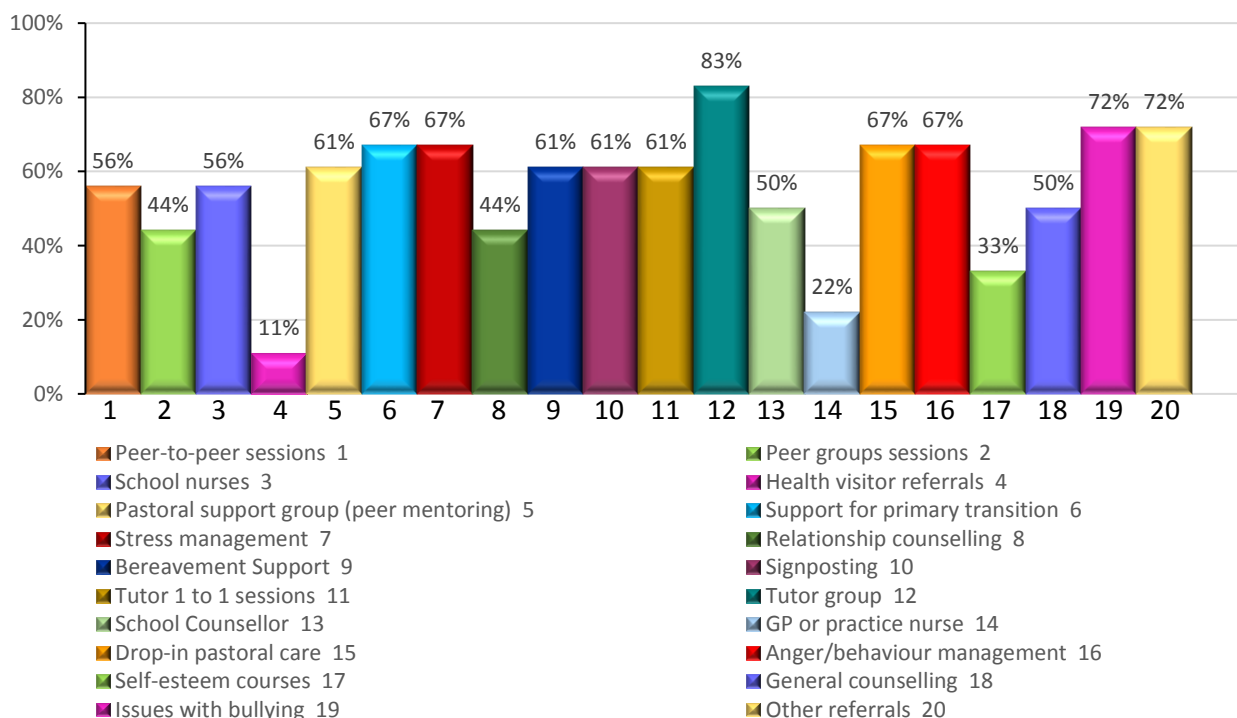
Of those that said that their school offered emotional support services to their students, 94% said that their school offered Tier 1 services to their students. 50% of the respondents who said their school offered emotional support, also said that these included Tier 2 services for their students. (Figure 2) Tier 1 services are for all children and more specialised Tier 2 services are designed for young people with mild – moderate mental health problems.

*Figure 2: If yes, are these Tier 1 or Tier 2?*



There was a wide range of emotional support that was offered by the schools that responded to the survey. (Figure 3) The highest percentage of respondents offered support through Tutor groups (83%); whilst the lowest percentages were for health visitor referrals (11%) and GP or Practice Nurse referrals (22%). It might be expected that health visitor referrals would be lower, due to the ages of the students that are involved, as it is predominantly younger children who access the health visitor.

*Figure 3: What sort of emotional support does your school provide?*





The lower level of referrals to GP practices could either reflect a lack of interaction between schools and GP practices, or suggest that there are a number of pathways that schools can access that are able to provide relevant support to their students that do not require a GP referral.

11% of the respondents to the question said that the support services that were offered at their school were commissioned; whereas, the majority (89%) said that they were not. (Figure 4)

Those that said that the services were specifically commissioned were asked how they were paid for.

(Figure 5) Respondents were asked to indicate all the funding streams that were paying for the commissioned services. All the respondents said that the school budget was being used for paying for the services that were being offered and 50% said that there was also funding coming from another source.

None of the respondents indicated that there was funding for the services that they were offering coming from the CCGs for Staffordshire.

All the respondents that answered the question said that their school had experienced a reduction in the emotional support services that were offered due to budget constraints. (Figure 6)

Respondents were asked to tell us by what percentage the reduction had affected the services offered. 12 respondents gave an answer to the question and half of these (n6) said that there had been a 50% effect on the services. For one respondent the reductions had affected 100% of the services offered. (Figure 7)

Figure 4: Are these emotional support services commissioned?

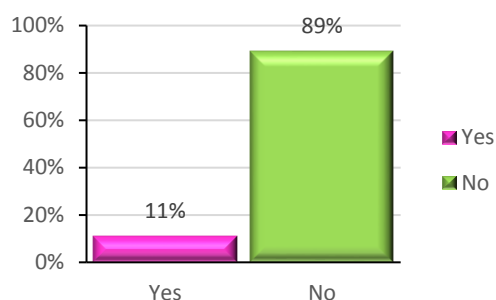


Figure 5: How are these services commissioned?

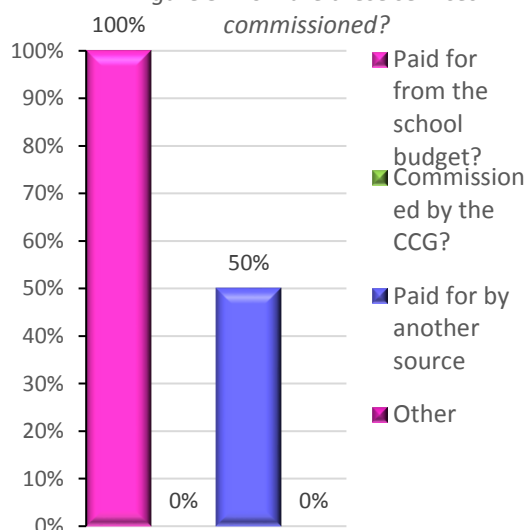


Figure 6: Has the school experienced a reduction in these services due to budget constraints?

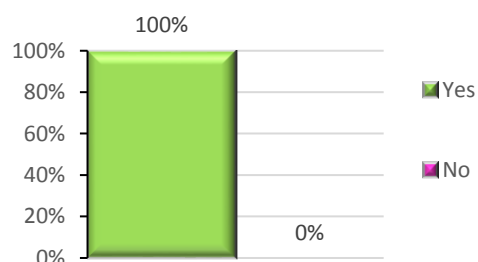
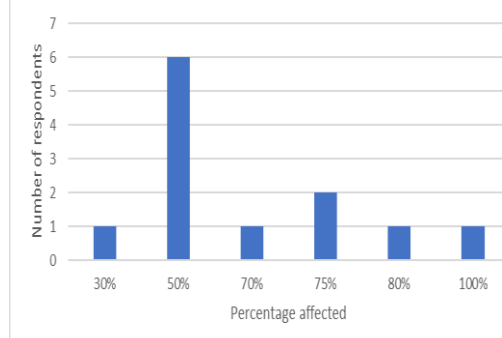
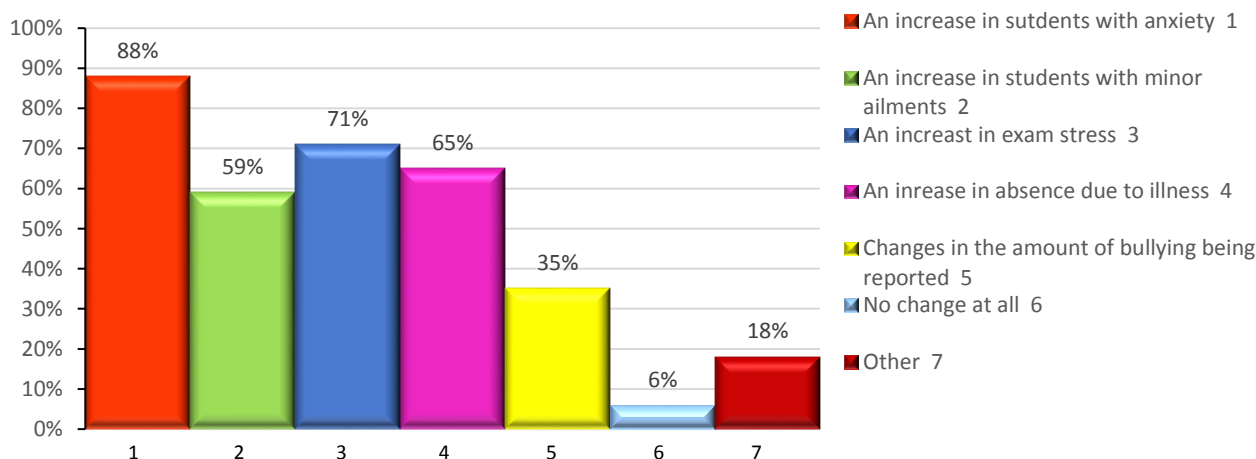


Figure 7: If yes, by what percentage have these cuts affected the services offered?



We wanted to know what the impact of the cuts had been on their students. They were asked to tick all the changes that applied. The highest percentage (88%) said that there had been an increase in the numbers of students that were suffering with anxiety. 71% reported that students had suffered an increase in exam stress. Only 6% said that there had been no change at all as a result of the reductions in services (Figure 8).

Figure 8: What impact have the reductions had on your students?



Those that answered other were asked to expand on their answers and three respondents made comments. One commented that the changes were “Forcing us to support in different ways

‘forcing us to support in different ways.’

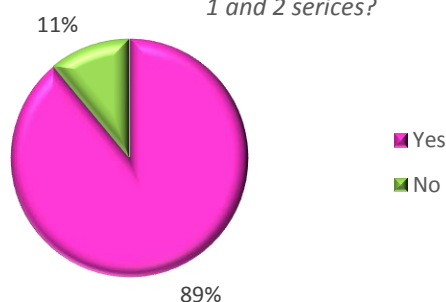
The other two commented on the way that there was an impact on teachers. One commented that

‘staff feel that they cannot cope with supporting children with their increasing needs’

and the other that

‘as staff we just have to take on more and more ourselves and [the] workload is huge.’

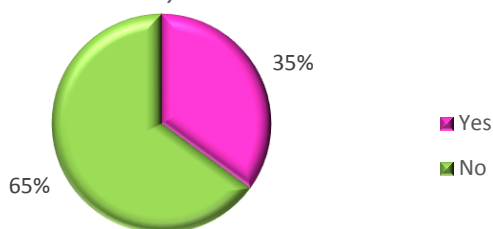
Figure 9: Have you noticed an increase in referrals into tier 3 services (CAMHS) as a result of reductions in tier 1 and 2 services?



89% of the respondents said that they had noticed an increase in referrals to Tier 3 services, Child and adolescent Mental Health Services(CAMHS), as a result of the reductions to Tier 1 and 2 services. (Figure 9).



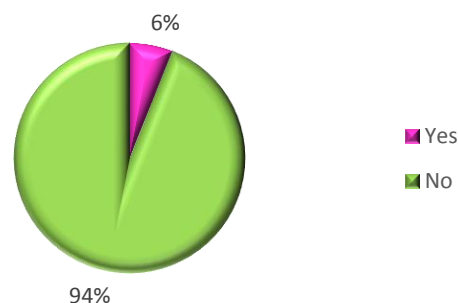
Figure 10: Do you have any plans to increase school investment into more mental health and emotional wellbeing services over the next two years



35 % of respondents said that they were planning to increase school investment into mental and emotional wellbeing services over the next two years. However, 65% said that they do not have any plans to increase investment. (Figure 10).

When asked if they were aware of any increase in funding through the CCG for emotional support for students, only 6% said that they were aware of any increase in funding. (Figure 11)

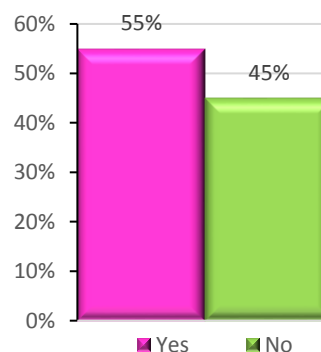
Figure 11; Are you aware of any increase in funding for the services from the CCG?



## Students survey

There were 135 responses to the survey for school students. Not all the respondents answered every question and therefore, the percentages presented are of those that answered the question, and do not include those who gave no response. The level of responses was disappointing as schools were requested to roll out the survey to students, however only 2 schools we visited said they would do this; both schools had delays in rolling this out to pupils due to time constraints and pressure on teacher workloads. Unfortunately, we had very few responses from the school role out.

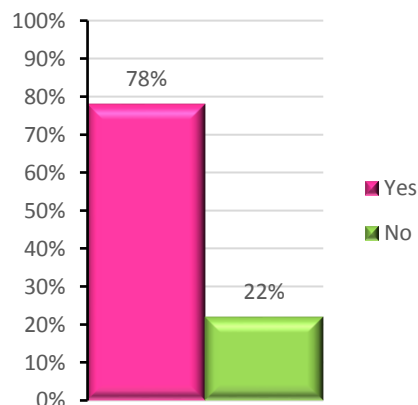
Figure 12: Since starting Year 7, have you ever been worried or concerned about something that you wanted help with?



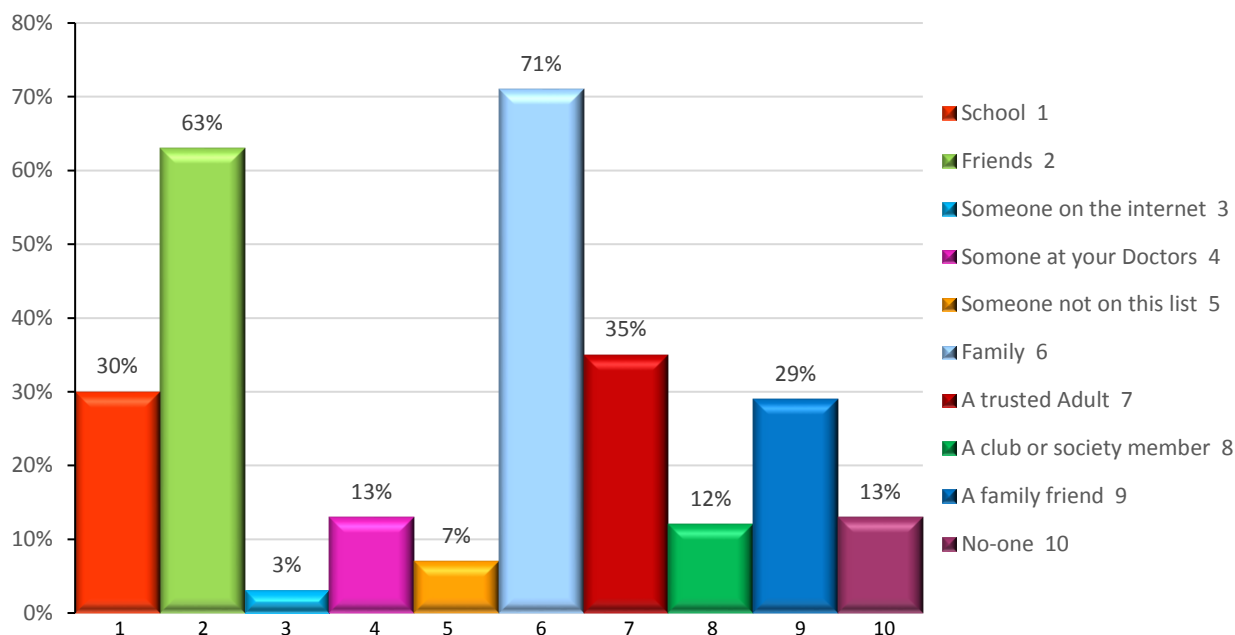
There was a slightly higher percentage (55%) of students that said that they had been worried or concerned about something that they had wanted help with since Year 7, than those who said that they had not. (Figure 12).

When asked if they knew where to go if they needed help with things that were worrying them, 78% of the respondents said that they did know. However, over a fifth (22%) said that they did not know where to go to get help. (Figure 13).

Figure 13 Do you know where to go if you need help with things that are worrying you?



*Figure 14: Who would you talk to about your worries or concerns?*



Respondents were asked who they would talk to about their worries or concerns. The highest percentage (71%) said that they would talk to their family about their worries. 63% said that they would talk to their friends and 35% would speak to a trusted adult. Only 30% said that they would speak to their school about their worries. 13% said that they would not speak to anyone about their worries or concerns. (Figure 14)

To get more information about their worries or concerns most respondents (67%) still said that they would go their family. The second highest percentage (52%) would go to their friends and 38% would go to a trusted adult. The percentage that would go to their school for information was 34%. 19% would go to a family friend; and 19% would use self-help to find out information. (Figure 15)

*Figure 15: Who would you go for more information about your worries or concerns?*

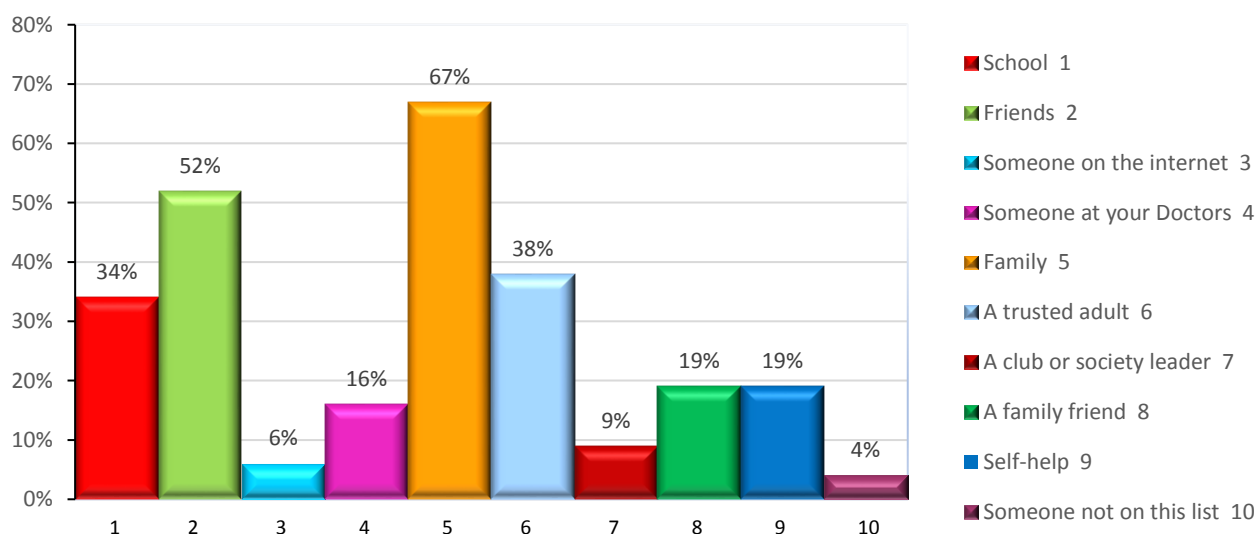
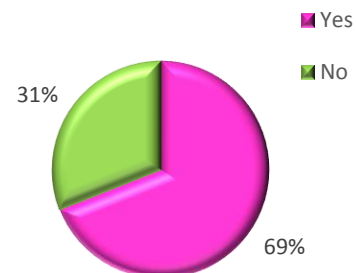


Figure 16: Is there someone you can talk to at school about your worries or concerns?

69% of respondents said that there was someone that they could talk to at school if they chose to. However, there were almost a third who said that there was not someone at school that they could talk to. (Figure 16)



Those that said that there was someone at school that they could talk to were asked who it was that they could talk to.

Figure 17: At School, who can you talk to or ask?

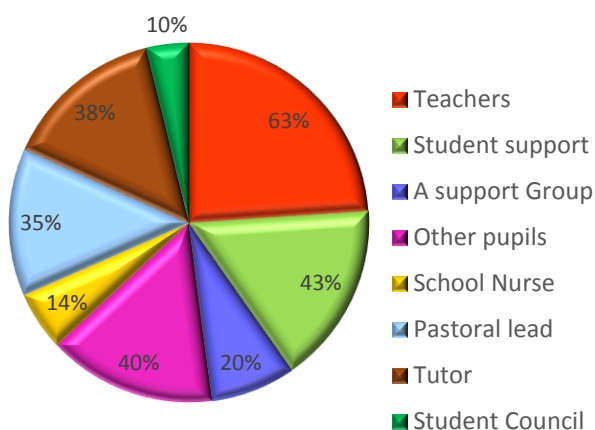
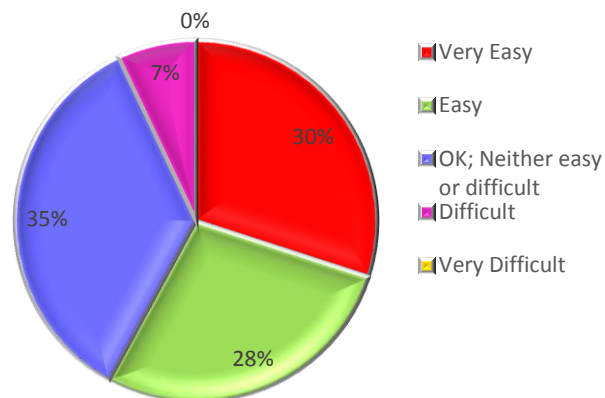


Figure 18: How easy is it to access that person or group?



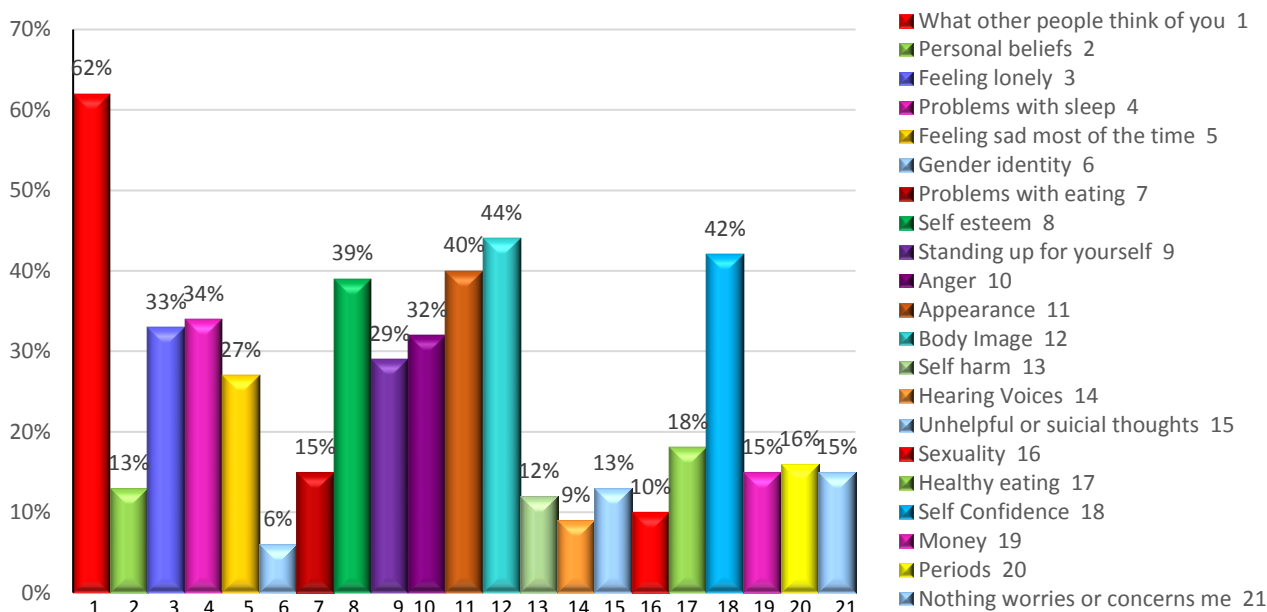
The highest percentage (63%) said that they could speak talk to teachers; 43% said that they could speak to student support and 40% said that they could speak to other pupils. Only 14% said that they could speak to the school nurse and 20% said that they could speak to a support group. Only 10% said that they could speak to student council about their worries or to get information to help them. (Figure 17)

When asked how easy it is to access the people that they identified that they could talk to, 58% said that it was either very easy or easy to access that person or group. 35% said that access was ok. 7% said that it was difficult; and none said that it was very difficult. (Figure 18)

### Specific concerns

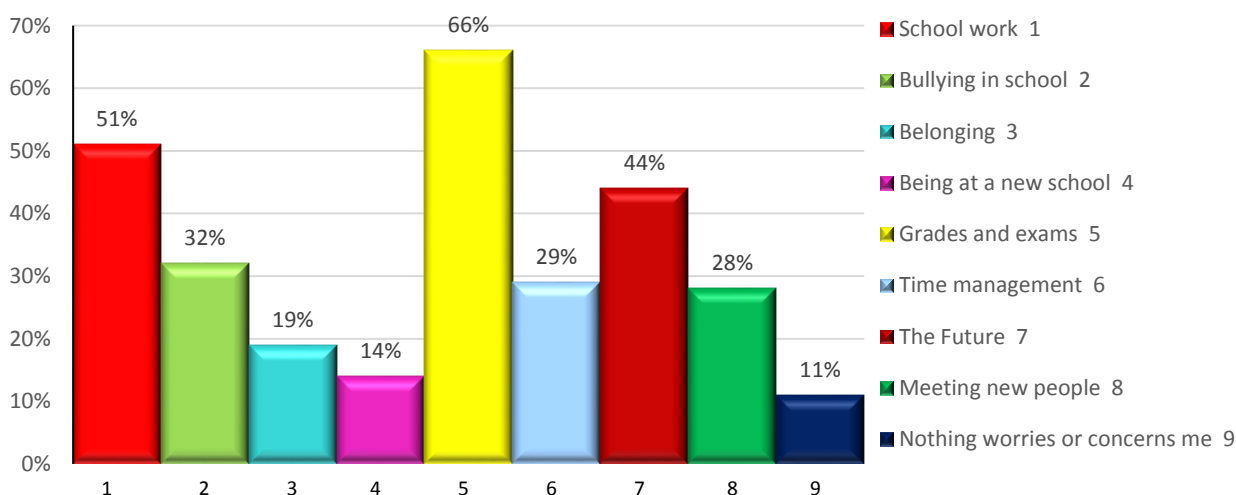
Respondents were asked about what sorts of thing they were worried or concerned about. These were broken down into categories. The categories were 'yourself', 'school', 'home' and 'other' types of worries or concerns. When responding to the what worried or concerned them about themselves, the highest percentage (62%) said that they were worried about what other people think of them. 44% said that they were worried about their body image and 42% were concerned about their self-confidence. 15% said that nothing worried or concerned them about themselves. (Figure 19)

Figure 19: What are the sort of things that worry or concern you about yourself?



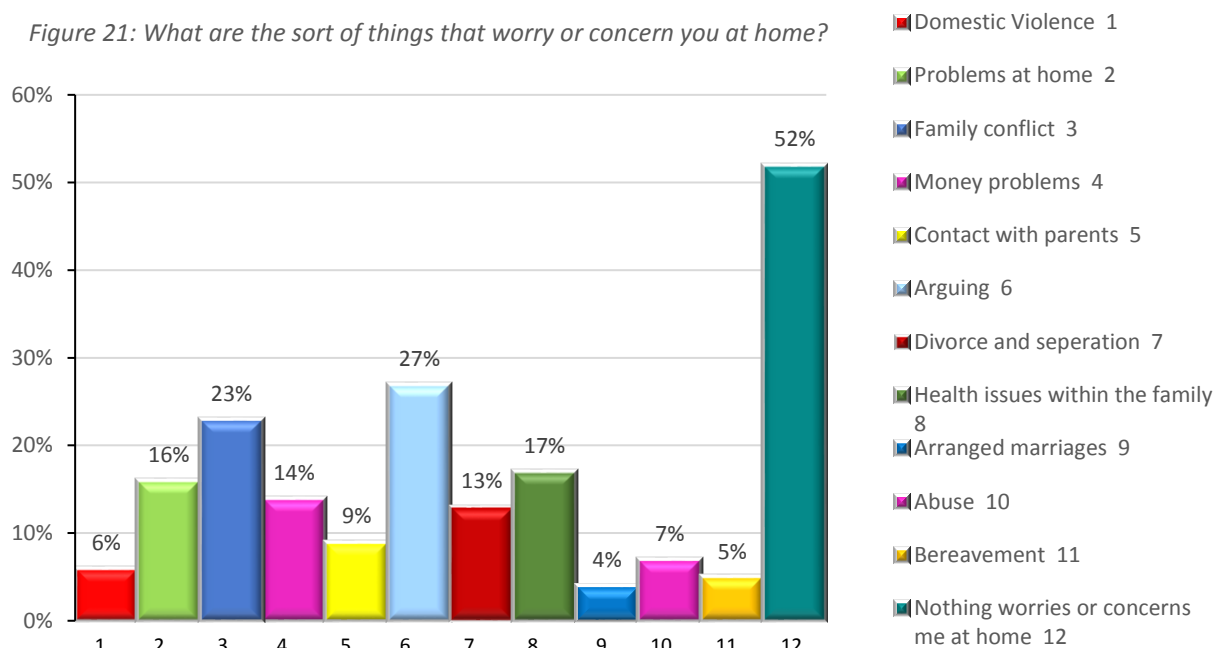
Grades and exams were a concern at school for 66% of respondents and 51% said that schoolwork was a worry or concern. 44% said that they were worried or concerned about the future. 32% said that they were worried about bullying at school. However, 11% said that nothing worried or concerned *them at school*. (Figure 20)

Figure 20: What are the sort of things that worry or concern you at school?



When asked about what worried or concerned them at home the highest percentage (52%) said that nothing worried or concerned them at home. However, 27% said that arguing at home worried them and 23% said that family conflict worried them. (Figure 21)

Figure 21: What are the sort of things that worry or concern you at home?



When asked what worried or concerned them about their friends and relationships almost 40% said that nothing worried or concerned them. However, 27% said that belonging to a group of friends was something that worried them and 25% said that peer pressure concerned them. (Figure 22)

Figure 22: What are the sort of things that worry or concern you about your friends and relationships?

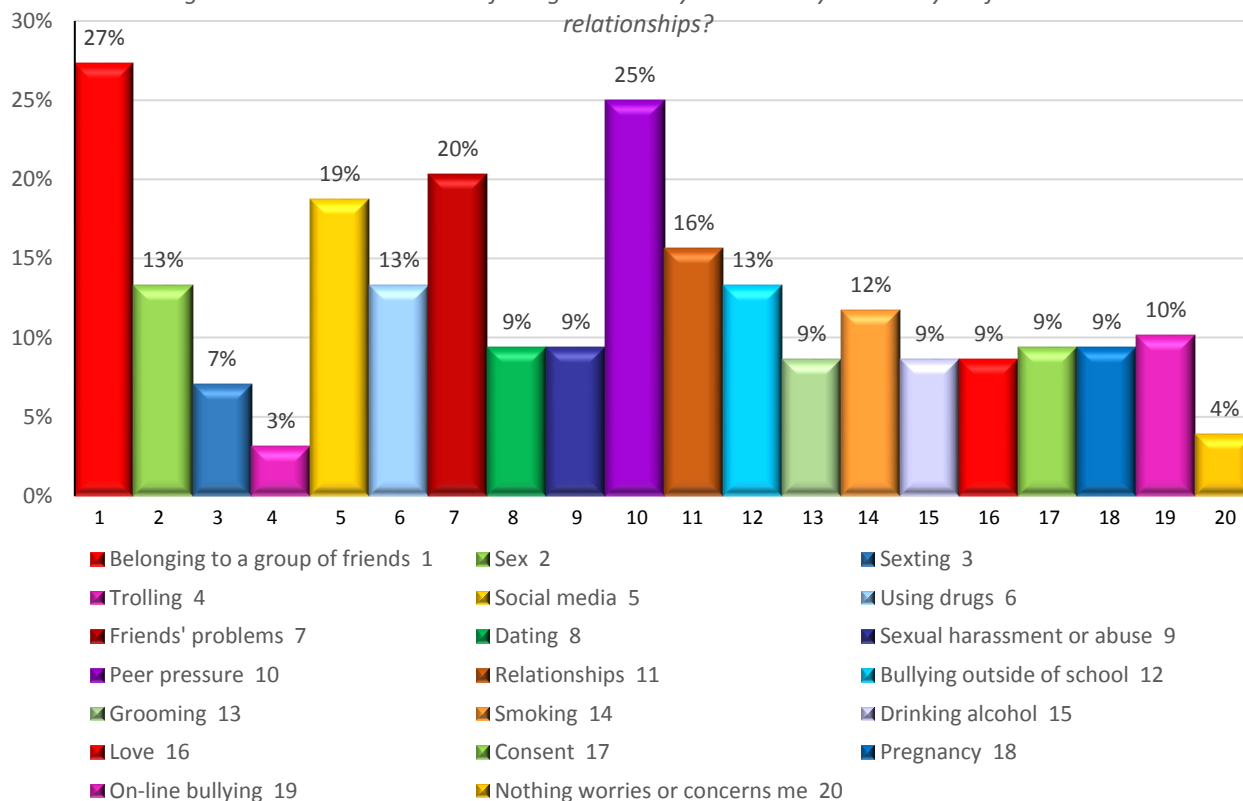
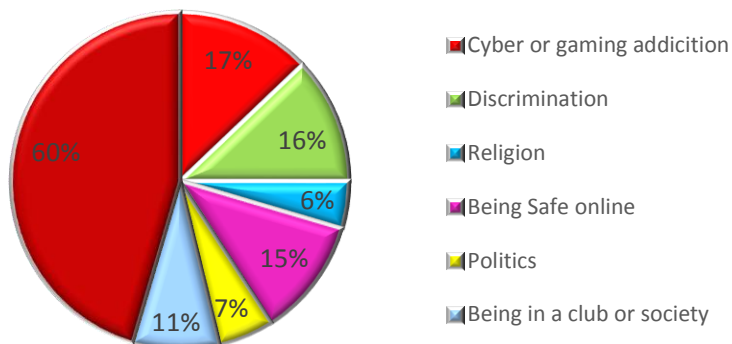


Figure 23: What other issues worry or concern you?



When asked about other worries or concerns 60% said that there was nothing that worried them. 17% said that they were concerned about cyber or gaming addiction; 16% worried about discrimination and 15% were worried about being safe on-line. (Figure 23)

69% of respondents said that they had been able to get support for their worries or concerns. However, this means that almost one third had not been able to get support. (Figure 24)

Figure 24: Have you been able to get support or help for your worries of concerns?

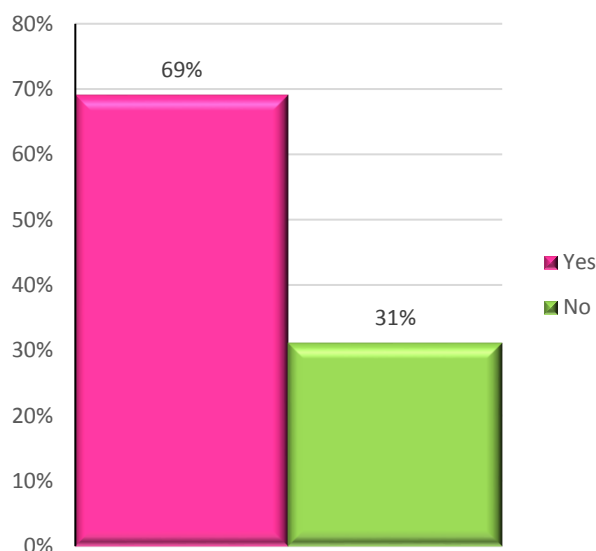
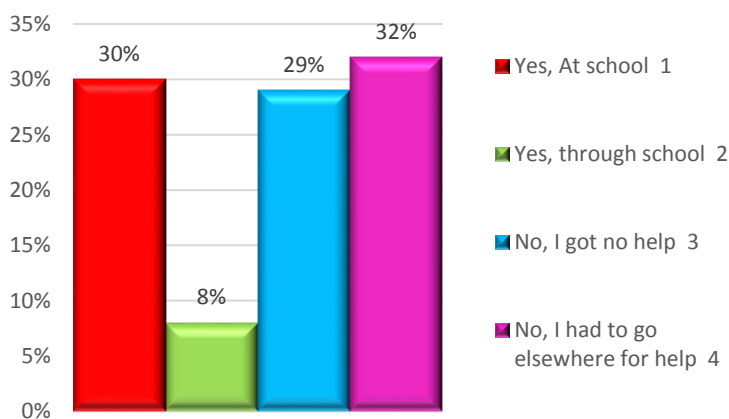


Figure 25: Did you get support or help for your worries or concerns at or through school

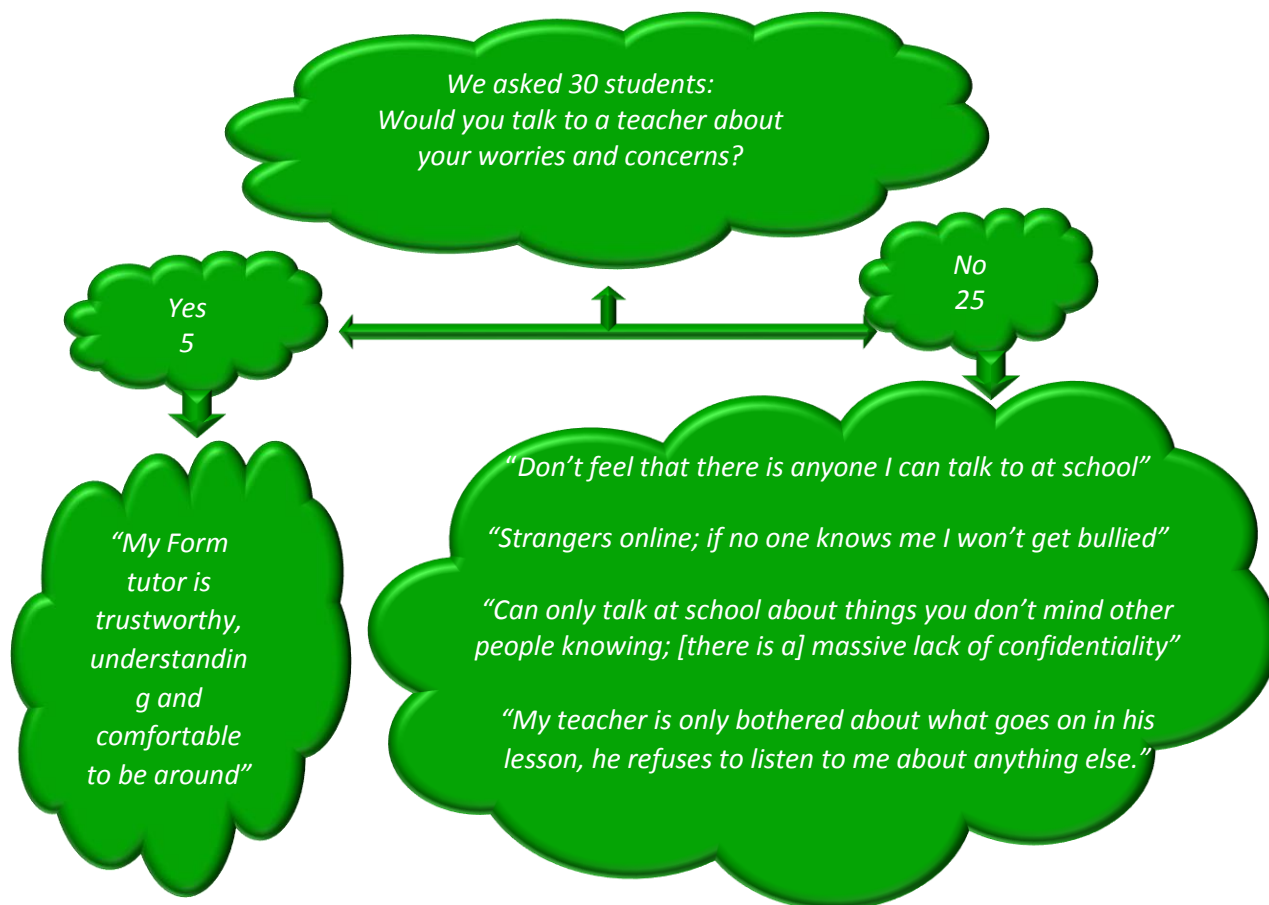


When asked if they had been able to get help through school, 32% said that they had needed to go elsewhere to get help. 30% said that they had received help through school, whilst 29% said that they had received no help for their worries or concerns at all. (Figure 25)



## Focus Groups

During the research for this project we held focus groups to get a more personal viewpoint of the pastoral care. The feedback we had was varied; while some participants felt the pastoral care in their school was adequate or they hadn't needed it, many felt it wasn't good enough.



One of the biggest issues that the focus groups felt they really struggled with at school was Bullying. Many felt that their school's way of dealing with the issue was often clumsy and never got down to the route of why someone was being bullied. They felt not enough was done to stop the bullying from happening again.

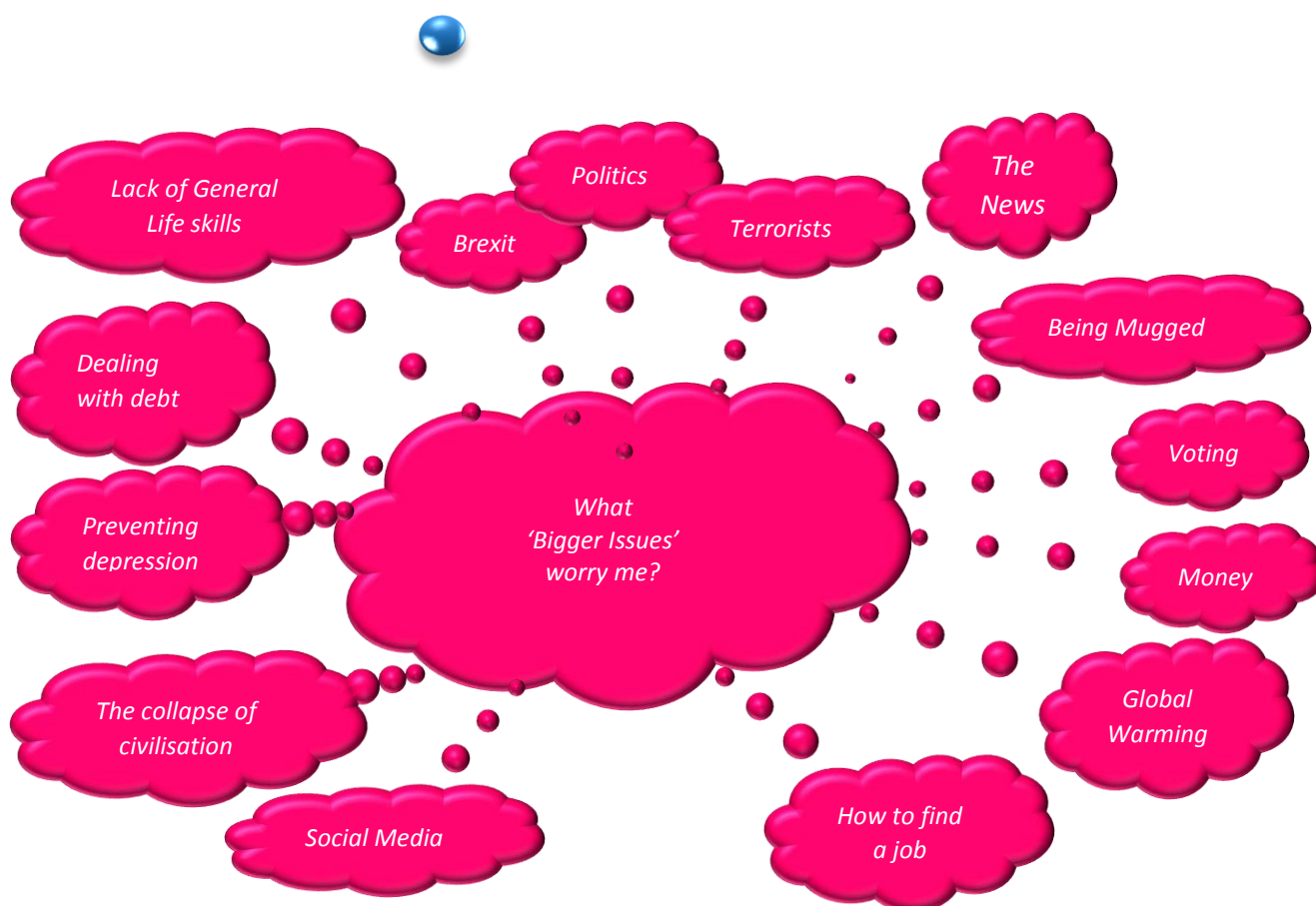
<i>In house Counsellors: Comments from Focus Groups</i>	
<i>Nobody wants to report problems to a website</i>	<i>Group counselling would be helpful on certain issues</i>
<i>Someone to talk to about worries about my weight</i>	<i>Learn about suicide prevention and self-harm</i>
<i>Could oversee peer mentoring and manage it properly</i>	<i>Someone to teach about issues such as how to deal with a family death</i>
<i>They'd be able to help students learn how to cope with mental and emotional health issues</i>	<i>Feel safer and happier in school as you'd know there was someone who would listen</i>
<i>They would need to be accessible at any time</i>	



Life and Soul days are a name used by some schools for 'enrichment days' as part of the PSE curriculum

Life and Soul days – What people said about them:

- Life and soul days are pointless
- Talks are done in assembly, we're talked at, not to
- Because we're talked at, no-one takes the talks seriously
- Things should be dealt with in smaller groups. This would lead to discussions; being able to ask questions and get more information
- It could also be year appropriate, and if split into sexes it would be easier to ask questions



Another group we spoke to had 25 participants from 8 High schools in North Staffordshire:

- 10 had lessons on relationships, mental health and wellbeing
- 13 admitted to being bullied at some point at school
- 2 had been bullied from Year 7 for being LGBT
- On a whole, schools were not doing anything unless it affected their lessons
- Approximately half had heard of the analogy about tea when regarding consent
- All of them thought that schools should cover LGBT in lessons
- Limited number of the group had lessons on domestic abuse
- 1 said they could talk to the school about domestic abuse at home if they needed too
- 17 said they needed more information or lessons on how to deal with exam stress
- 8 said they needed more information or lessons on dyslexia or dyspraxia

#### School 1:

- They report issues online through a link
- Due to the cuts the head of year is restricted in what they can offer
- Don't feel they can trust the form tutor with personal issues as no relationship has been built with them as they only see them for 20 minutes a day and 3 times a week
- Individual stated: *"they feel like a letter in a book and more of a number to the school than individuals."*
- Only gets sorted out if the abuse becomes physically violent
- If bullying occurs the school deals with it by calling the victims' parents to explain what has gone on and gives the bully a detention and no further action is taken.
- Counsellor from young minds comes in on Tuesday mornings only so there's never enough appointments
- They had limited information on how to get an appointment

#### *Uniform at School*

- *5 girls have been told to cover up because it might distract the boys, 8 girls got pulled up for having too tight trousers*
- *Some of the schools refused to allow girls to wear skirts*
- *Some schools allowed skirts, but boys were not allowed to wear shorts*
- *Most had to wear blazer or jumper at all times, even in very hot weather*
- *7/25 thinks that strict uniform affects their emotional wellbeing*

- *They also felt they could not speak to the pastoral team at the schools as no relationship was built with them so didn't feel like they could trust them*
- *They felt more comfortable talking to adults at the youth groups rather than teachers at school*

#### *Educational needs or support:*

- *Lots of negative comments about autism, ADHD, etc and little is done about it*
- *Schools not educating students on Autism, ADHD and dyslexia*
- *Special educational needs give the student something to help concentration and teachers take it away*
- *Students believe schools should show how negative comments to people with autism etc can affect them*

#### *Who they feel they can talk too:*

- *They didn't think talking to someone high up helped as nothing was done, head of years had other priorities*
- *Most felt there was not many teachers they could talk to as relationships were not built*



- There is no private space at the school to go to have a minute if they are feeling anxious - all private rooms such as a nurse, medical and conference room are locked
- The school focuses on their reputation rather than the individual

#### School 2

- Taught information about safe sex, consent, relationships, mental health and wellbeing etc. by power-point and had no discussion or opportunity for questions
- Has long sleeve tops and were not allowed to roll them up in hot weather

#### School 3

- Had an LGBT club but the school cancelled it

#### School 4

- School ignored people's issues and gave limited support
- People were fearful of pastoral teams as they were also the behaviour team
- The head of year stated: "They're not there for friendship issues only for their year group functioning"
- Assemblies focused on global issues rather than student health and wellbeing
- PSHE did news quiz's rather than addressing issues

From visiting the school councils and focus groups, we found the students really want the help to deal with situations they know they're going to encounter as they grow older as well as the situations, they find themselves in now. We had several people speak out about situations they've found themselves in, have friends involved with or just want to know more about so they can behave and act in a manner they feel is appropriate.

*I want to learn more about consent and appropriate relationships. They haven't even shown the "Cup of Tea" video at school. They've done "Being Safe Online" to the extent it feels like we've done it every month for the past couple of years! I'm fed up of it. They don't teach you about relationships though, about consent and what abuse is. I think we need that because a lot of what we see on the TV and the internet gives mixed messages.*

*I want to learn more about autism and its different aspects. We've got a few SEN kids in this school and I want to be able to understand their behaviour more. That way I won't think they're being weird or scary. I might be able to see if they're upset and be able to help. Most of all I want to understand what it's like for them as everyone on the spectrum is different. I want to be able to treat them with respect and not be scared to be friends with them.*

*There needs to be more follow up on bullying; too often the teachers just look at what is going on at the surface and not what's going on underneath. They don't check up to see if it's stopped. I wish there were classes on how to handle it and to make people see how it feels to be bullied.*

*I really worry about how I'm going to manage when I go to Uni'. I'm not very good with money and I want to know how to budget properly. I really think life skills like that ought to be taught as part of PSHE/PSE.*

*I want to be able to talk to someone about how to support my friend. She self-harms, and I want to make sure she's safe. I want to understand why she's doing it. I've got quite a few friends with depression who have said they've had suicidal thoughts, and it worries me as I don't know what to do or say. I don't want to lose my friends because they've gone too far and had an accident.*

*I want there to be somewhere safe you can go and talk when things have gone further than you want them to; like if the person you're seeing pushes you further than you wanted to go. I don't want to go to the police, or my parents to know. But I want to be able to talk to someone about what's happened. And I want us to be educated that it's not ok to make someone do what they don't want to.*

We've also heard really good feedback:

*"I'm trans; my school have been so supportive. I've never once been bullied because of it. There's been lots of assemblies about it, so people understand. I've not even had people asking me personal questions about it as it's all been dealt with in assembly. "*

*"I was getting bullied by this boy; I'd been trying to deal with it myself. At one point it got to the stage where he was pestering me so much, I lost my temper. The school dealt with it really well; we have vertical tutoring so the tutor group looked out for me and the teachers dealing with it didn't just look at the one incident, they really listened to my side of things and that it had been building up for ages. It's helped me feel safe. They've also made the bully apologise properly and he leaves me alone now."*

*"My school is pretty good; there's a comfy sofa to sit on which makes you feel more like talking, and there's always someone to talk to when you need to. They take you seriously and there's always a follow up to make sure you're ok."*

The complaints about pastoral care varied. However, these were the common themes:

- Not being able to access pastoral care; "the teachers are always too busy to listen as there's so many people with problems".
- Issues being dealt with at face value only or not being taken seriously.
- "The SEN kids get priority, if you've not got any special needs then we get neglected"
- Little or no follow up.



Every group we questioned spoke of the need for pastoral care on a one to one level. Many wished that there was a school counsellor or a designated member of staff they could talk to, who wasn't involved in teaching. It was evident that they all preferred talking to someone one on one as opposed to using an app or reporting issues online. Many just wanted a one-off session just to be able to talk to clear their heads, some wanted regular sessions so they could talk about anything. They all felt that there was too much pressure on the achievement and academic side, and not enough emphasis on well-being. We asked the focus groups for their ideas and solutions to improve the pastoral care in their schools. This is what they thought of:

*"Staggering exams so they don't all come at once and so they're not all in the middle of hay fever season."*

*"Have a separate area away from the SEN room/area for people to go to for pastoral care."*

*Talking about male mental health; "It doesn't get promoted and talked about enough in school, I think it would be a big help as there's lots of lads about with problems, but we're not encouraged to talk"*

*"To have someone you can go to that is accessible anytime"; many pastoral teams seem to have a very full workload, and teachers even more so.*

*"To have someone that genuinely listens and doesn't fob you off."*

*"Being able to get a referral to a doctor or nurse without having to go through parents."*

*"Guided revision would be a big help to those of us who are struggling to revise; it's not just the SEN kids who struggle. "*

*"When dealing with issues such as consent/abuse/sex/relationships etc etc, have smaller, single sex groups; that way people are more likely to open up, ask questions and to listen."*

*"Having mentors for those who are struggling or are having issues."*

*"To have more lessons on life skills such as managing money, healthy relationships, what abuse and consent is, work/life balance."*

*"Teachers need to be aware of triggers for SEN/LD students; "we're supposed to have things in place to help, but they often get ignored and then wonder why we kick off, which then disrupts the class and impacts on others. If the teachers followed through with the support we're supposed to get, there would be less disruption; I can't help being the way I am, and they need to understand that."*

*"Setting aside time to talk or deal with exam stress."*

## Other research and findings

Ofsted have also recognised that children and young people want to learn how to keep themselves emotionally healthy and take care of their emotional well-being:

*"Ofsted has highlighted that children and young people themselves say that they want to learn more about how to keep themselves emotionally healthy. The National Institute for Health and Care Excellence (NICE) advises that all schools should be supported to adopt a comprehensive, 'whole school/college' approach to promoting the social and emotional wellbeing of children and young people. Public Health England highlights the value for schools in promoting health and wellbeing as an integral part of a school effectiveness strategy and highlights the important contribution of a whole school /college approach."* Ref: Promoting emotional health, wellbeing and resilience; a whole school approach toolkit, Central Bedfordshire Council.

As have the NSPCC; their top issue in 2017-2018 was mental and emotional health, closely followed by family relationships, then suicidal thoughts and feelings.

Out of the over 3 million children and young people who got in touch with ChildLine in 2017-2018, 32,006 said ChildLine was the first place they had contacted. This means that over 98 percent of children and young people had tried to get help elsewhere before contacting Childline. It indicates that children and young people are not getting the help or advice they need when they seek it in the first instance.

### *Top 10 reasons in 2017-2018 that children and young people called ChildLine:*

- 1. Mental/emotional health: Low self-esteem, lack of confidence, anxiety, feeling sad, low mood, lonely, mental health issues, loss and bereavement*
- 2. Family relationships: Conflict/arguments with family members, parents' divorce/separation*
- 3. Suicidal thoughts or feelings: Suicidal thoughts or feelings, or actively suicidal.*
- 4. Bullying Peer-to-peer bullying, either face-to-face or online*
- 5. Sex/relationships/puberty/sexual health: Sexual development, relationship issues, body changes, sexually transmitted infections (STIs), contraception etc*
- 6. Friendship issues: Falling out with friends, difficulty making friends*
- 7. Self-harm: Self injury that is intentional*
- 8. Problems in school/: Exam pressures, concerns about performance, not coping with workload, dislikes school, new school worries, problems with teacher, truancy*
- 9. Sexual abuse*
- 10. Physical abuse*

The Children's Society publish an annual report. The 2018 report focuses on the emotional well-being of children. They found that:

"The common thread running through this report is that children's interactions with those around them – and the way in which children make sense of those interactions – are fundamentally important to how they feel about themselves and their lives. If children feel supported by the people around them and feel at ease with how their emerging identity 'matches up' to the norms of gender and sexuality that they perceive to be important within their social circles, they may be able to retain a positive view of themselves and cope with the difficulties of growing up and building an identity that they feel comfortable with.

On the other hand, if they have internalised gender norms that are at odds with their emerging identities and witnessed negative interactions and bullying about identities that are different to the norm, retaining a positive view of themselves will be harder. In case we needed any more reason to address the powerful norms of gender and sexuality that pervade children's lives from a young age, this report provides more evidence to do so.

The finding that at age 14, 1 in 5 girls – and almost half of children saying that they have been attracted to the same or both genders – have self-harmed is deeply worrying. Children should not be expected just to 'brush off' criticism and bullying related to being different. This does not need to be part of growing up." Ref: The Children's Society: The Good Childhood Report 2018.

*Information from the Children's Society: Children and young people who take part in some kind of physical activity three times a week or more are more likely to have better emotional well-being*

*Girls are twice as likely to self-harm than boys and have much lower general life satisfaction  
Children and Young People from a white or white mixed background are more likely to self-harm than those from an Asian or African/Afro-Caribbean background. Those who are LGBT are also much more likely to self-harm.*

*Body shaming, name calling or comments due to sexual activity (perceived or otherwise, lack of or promiscuous)*

*Gender stereotyping is still having a great effect on how young people think and act.*

*Girls happiness on a whole was lower than boys; this included appearance, schoolwork, family and friendships. Society and social pressure on girls to look a certain way, and that looks come before intelligence or character is still very oppressive towards girls and young women; this can even start as early as primary school as if you're not "a girly-girl" you can become socially ostracised by your peers; this becomes more predominant in High School where there is even more emphasis and pressure to 'look' a certain way. However, it is important to note that when given a choice of certain traits, being good looking also came out top of what was important for boys. However, their reputations and emotional health was less impacted.*

Other agencies and organisations have noticed similar issues e.g. Young Mind, Barnardos. Issues of emotional wellbeing for those of school age have long been on the agenda for those who work with children and young adults, and while changes in technology have changed our interactions, and have both benefits and hindrance, the overall issues are still the same as they have been for years. From our focus groups we have found the same plea; they want help, they want someone to talk to and they want more information and education on the things that matter to them; their bodies, their minds, their lives and futures, and interpersonal relationships. As mentioned at the beginning of the report, if the issues are dealt with while at school age, then there is less impact later in life. Education needs to be put in place to provide the knowledge of how to stay mentally well, physically well, have appropriate and respectful meaningful relationships. Also having the fiscal knowledge to avoid getting into debt, to educate them to allow them to become the adults they have the potential to be. A lot less pressure will be put on both child, adolescent and adult mental health services if children are taught how to manage their lives and be more resilient. Most importantly, families, adults and children will be happier and have better emotional well-being.

### Statutory Guidance and other findings

In the research document “Relationships Education, Relationships and Sex Education, and Health Education in England; Government consultation responses” for the revision of PSE/PHSE curriculum, the Government approached schools at both primary and secondary level about student well-being.

#### *Relationships and Sex Education (RSE) in secondary schools.*

*“The aim of RSE is to give young people the information needed to develop healthy, nurturing relationships of all kinds, not just intimate relationships. Effective RSE does not encourage early sexual experimentation but teaches young people to understand human sexuality and respect themselves and others.”*

*“The aim of teaching pupils about physical health and mental wellbeing is to give them information they need to make good decisions about their own health and wellbeing with a clear focus on reducing stigma attached to health issues.”*

*“Pupils should be taught to make well informed, positive choices for themselves that seek to support their own health and wellbeing. There should be opportunities for teaching pupils about problems and challenges, including more serious mental and physical health conditions such as substance and alcohol misuse, with a focus on providing information about effective interventions. Schools may also choose to teach about issues such as eating disorders.”*

Their findings seem to be very similar to ours. Young people want more education in diversity, healthy relationships (both intimate and non-intimate e.g. friends/family), information on LGBT issues, Health education - particularly more on menstruation and financial education. There were also requests for less emphasis on how they look rather than what they do, education on gender-based issues (E.g. girls being bullied for not being 'typically girly'), on puberty. The NSPCC website says:

During the consultation the Department of Education received many requests for financial education, especially for those aged 16 and over.

*"Teachers should also demonstrate awareness of common adverse childhood experiences such as bereavement, family breakdown and exposure to domestic abuse, and how these might impact on pupils and influence how they experience these subjects. "*

*"Pupils should be taught how to judge when they or someone they know needs support and where they can seek help if needed."*

*"All of these subjects should be set in the context of a wider whole-school approach to supporting pupils to be safe, happy and prepared for life beyond school. For example, the curriculum on relationships and sex should complement, and be supported by, the school's wider policies on behaviour, inclusion, respect for equality and diversity, bullying and safeguarding"*

*"At the heart of Relationships Education, Relationships and Sex Education and Health Education, there is a focus on keeping children safe and the role that schools can play in preventative education."*

*"Teachers should be aware of the risks in teaching about sensitive subjects such as self-harm and suicide and give particular considerations to planning around these issues and ensuring material is focused on prevention rather than being instructional."*

*"Good practice allows children an open forum to discuss potentially sensitive issues. This in turn can lead to an increase in children disclosing abuse, or of teachers becoming aware of concerns about a child's wellbeing. Teachers should all understand how to respond to disclosures of abuse and report any concerns they may have, following the school's safeguarding procedures."*

## Conclusions and Recommendations

### Conclusion: School surveys

The aim of this report is to examine how cuts to funding has affected pastoral care in schools, what schools provide with the funding they have and what their students think. From the schools that responded, we found:

- 100% have found that their budgets for pastoral care have been affected.
- 100% fund pastoral care themselves, with 50% finding extra funding from other sources
- 89% said their services weren't commissioned.
- 86% can offer pastoral care, which means 14% aren't able to offer anything.
- Very few were aware of any funding available from the CCG and none had accessed this funding.
- 35 % had plans to increase funding to improve services.

The evidence suggests that low level support in these areas will have a huge impact on whether students are referred onto the next level of services. Our findings indicate pupils aren't getting the support they need to stay emotionally well. School staff reported that:

- 89% had noticed an increase into tier 3 referrals
- 88% said that they have noticed an increase in students suffering with anxiety
- 71% reported an increase of students suffering with exam stress

The findings indicate that staff must try to find different ways to support pastoral care, and while they're looking after the emotional and mental wellbeing of the students, there is little or no support for them. From the responses of the surveys and the responses of the focus groups, it is evident that staff are struggling to meet the needs of their students.

Funding cuts have heavily affected schools' abilities to provide the necessary support for both students and staff. Unfortunately, the schools aren't aware of increases in funding available from the CCGs or statutory bodies. What our surveys can't tell us is how and why they are unaware of this funding.

### Conclusion: Student surveys

We found the range of pastoral care differed greatly between schools. Some simply signposted their students to online apps or charities that specialise in supporting children, such as ChildLine. All the children and young people we spoke to in the focus groups said the same thing; we want more support to keep mentally well, we want more understanding of things that affect us emotionally and mentally, we want to be able to talk to someone and have people talk 'TO' or 'WITH' us not 'AT' us. All the students we spoke to felt that pastoral services needed improving. From those who responded, our surveys found that:

- 30% would talk to someone at school
- 71% would talk to family.
- 63% said they could talk to a teacher.



An issue we found is although 63% would talk to a teacher, the teachers are not adequately trained or have adequate support to deal with the issues that arise and are feeling this impact on top of an already substantial workload. However, that still leaves over a third of children who have no adult to talk to. Many children feel that they cannot discuss matters than worry them with a family member, friends or a significant adult.

### Focus Groups

Much of what the students are asking for is being addressed in the new curriculum for PSE/PHSE, known as RSE (Relationship education, relationships and sex education). As part of statutory guidance for delivery and teaching strategies updated 27th June 2019, the Department of Education actively encourages pupil and student participation in how pastoral care and the new RSE course is delivered. Hopefully this will mean that issues such as consent, different types of healthy and non-healthy relationships, mental health and emotional well-being will be addressed. The students we spoke to became very passionate about the gaps in their 'life' education, which is again echoed in the government study that led to the changes in the curriculum.

### Overview

Overall, we have found very similar finding to those carried out by various children's charities and the Department of Education. If funding is made available, and is known about, it could positively impact the school's ability to provide pastoral care and the quality of that care. Teachers need support to be able to deliver the pastoral care. The initial difficulty with this is that the money needs to be there to pay for the extra training, staff and supervision to support the students. However, as the pupils receiving this care could, in turn need less referrals to Tier 2 and 3 support and other healthcare, this could significantly relieve the strain on already overstretched services and save money in the long run.

## Recommendations

According to NICE guidelines, a young person's well-being should include:

- happiness, confidence and not feeling depressed (emotional wellbeing)
- a feeling of autonomy and control over one's life, problem-solving skills, resilience, attentiveness and a sense of involvement with others (psychological wellbeing)
- the ability to have good relationships with others and to avoid disruptive behaviour, delinquency, violence or bullying (social wellbeing).

*Schools should consider how their teaching can help support the development of important attributes in pupils, such as honesty, kindness, tolerance, courtesy, resilience and self-efficacy, as well as how those attributes are also developed by other aspects of the school's provision. The curriculum should proactively address issues in a timely way*

Ref: <https://www.gov.uk/government/publications/relationships-education-relationships-and-sex-education-rse-and-health-education/delivery-and-teaching-strategies>

To achieve this a school could help its pupils by:

- helping them develop self-awareness
- developing their problem solving skills
- developing their conflict management and resolution skills
- advising them on understanding and managing feelings
- helping them to manage relationships with parents, carers and peers
- developing their social and emotional skills
- developing partnerships between pupils and staff to promote emotional wellbeing

*"In drawing together research across these aspects of personal development, it appears that it is not so much individual actions of the school, but attention to climate and culture that matter. School climates that are supportive and nurturing, while also promoting discipline and boundaries, and that actively nurture belonging to school and pupil involvement, show widespread benefits"*

Ref: Ofsted Education inspection framework: overview of research Reference no: January 2019, No. 180045

The new guidelines also recommend teaching about mental health as part of health education, which will be part of and complement each school's "healthy lifestyles through physical education, food technology, science, sport, extra-curricular activity and school food". The new guidelines also discuss financial education; one of the issues our focus groups were concerned with, which can cause adult mental ill-health.

Extracts from GOV UK

*Mental wellbeing*

*Pupils should know:*

- *how to talk about their emotions accurately and sensitively, using appropriate vocabulary*
- *that happiness is linked to being connected to others*
- *how to recognise the early signs of mental wellbeing concerns*
- *common types of mental ill health (e.g. anxiety and depression)*
- *how to critically evaluate when something they do or are involved in has a positive or negative effect on their own or others' mental health*
- *the benefits and importance of physical exercise, time outdoors, community participation and voluntary and service-based activities on mental wellbeing and happiness*

Ref: <https://www.gov.uk/government/publications/relationships-education-relationships-and-sex-education-rse-and-health-education/physical-health-and-mental-wellbeing-primary-and-secondary#physical-health-and-mental-wellbeing-secondary>

*Q: Will teachers receive training before delivering these subjects?*

*A: The department is committed to supporting schools to deliver these subjects to a high standard. We know that training is a priority for teachers, and we will be consulting with teachers, trade unions and other key stakeholders over the coming months on how we structure the training.*

*In addition, we are encouraging schools to act as early adopters for this curriculum and to start teaching the subjects from September 2019. To help early adopter schools, we will provide further advice on how they can improve their practice. Lessons learned from the early adopters and best practice from schools will be shared with all schools from September 2020.*

Ref: <https://www.gov.uk/government/news/relationships-education-relationships-and-sex-education-rse-and-health-education-faqs>

A possible issue is the implementation of the new system within schools. The Department of Education has published a response:

Included in the government recommendations are the suggestion of working with outside agencies such as the CCGs, Commissioners, Providers and Charitable organisations that support children, to help deliver the new mandatory curriculum.

Whilst the new curriculum does not address all the issues raised, such as exam stress, it does cover many of the other issues which came to light in our surveys and focus groups.

As part of the statutory guidance for delivery and teaching strategies, updated 27 June 2019, the Department of Education actively encourages pupil and student participation in how pastoral care and the new Relationships Education, Relationships and Sex Education (RSE) and Health Education is delivered. Schools and commissioners should focus on preventative measures that enable young people to develop strategies to care for their own mental wellbeing. These could include information, apps, being able to talk to someone one to one, and other support mechanisms.

While the new curriculum does cover many of the concerns raised in our focus groups, there is a need for additional areas to be addressed:

#### Exams:

Recommendations we would like to offer in finding ways to limit exams stress.

- Schools should explore how to help pupils with stress levels etc. This may be by buying resources from external providers, if the budget allows, or researching techniques and activities that could be run “in-house”, with the possibility of appropriate staff receiving training from external providers if necessary.
- There are a number of revision apps available and schools could investigate whether these may be helpful, whether to assist students to regulate their revision timetable and break down their revision into more manageable segments or as an information capture aid.
- Consider whether revision groups, mentored by a teacher, may also be helpful for those that really struggle to manage their time and their revision at home.
- Talk to the students; find out how they best revise or learn. Not everyone can study in the same way. If student is struggling, they may need to approach their revision differently.

#### Apps that may aid revision:

Keep	Spark Post	Clips	Remember the Milk
Quizlet	Texting Story	Gajimo	Classic Explain Everything
Padlet	Trello	Todolist	Paper by FiftyThree
IMindMap	Todoist	Headspace	Mindmeister
Forest App	Oxford A-Z of Grammar and Punctuation		

### Talking:

One of the major issues was that many students found that the pastoral care were often too busy to be able to help or listen. Some students didn't like having to ask to speak to someone via an app or to explain the issue over a computer. All those spoken to prefer the one to one, face to face, approach. There are several ways to address this issue. Two or more could be implemented to complement each other, and support those who like to communicate in differing ways.

- *Peer mentoring*; which has been successfully used in some schools. Training students to actively listen and support their peers can boost friendships, self-esteem and help students learn to boost their own emotional well-being as well as others.
- *Vertical tutor groups*; also successful in schools who support it. Having pupils of different years in a Tutor group allows the pupils to talk to each other about the issues different years face. It also promotes friendships and support networks out of year.
- *Buddy Systems*: Buddy systems have been proven to work in Primary Schools; taking the idea into High Schools, where older students can mentor the younger ones, especially those with issues settling in, making friends or with academic work. Mentoring other students can range from supporting doing homework to actively encouraging physical exercise by training alongside them.
- *Counselling*: Research local and national services which may be able to provide one to one counselling, whether in person or by telephone. Knowing what is available will enable staff and student to be better informed about what help can be accessed.
- *Active listening skills*: Training for staff and volunteers in active listening skills would also be beneficial; sometimes all the students need is to talk to someone who is genuinely listening. They may be able to reason the solution out for themselves but having someone to talk it through with is very beneficial (and is the basis of person-centred counselling). Having someone external from the school may also benefit the students with issues about confidentiality.

### Educating the teachers and staff:

Some of the topics that came up in our research are going to be covered by the new curriculum, and there will be staff training on these areas. However, having organisations come in and talk to the staff about issues can be very beneficial. Organisations such as Women's Aid often offer training. It may also be worth having someone come to talk about family law, solicitors, social work, courts and Cafcass (Child and adolescent family court services) in reference to ending of family relationships, fostering and adoption as if someone hasn't been through that situation they won't necessarily have the empathy to support a student or young person.

Mental Health workers, Occupational Therapists and other people who work within mental health could also be a possible source of support and education for staff, to be able to talk about self-harm, body-positivity and other issues that affect student emotional well-being. It is vitally important that staff are adequately supported in being able to offer pastoral care; not only for the students but for their own emotional well-being.

Midland Partnership NHS Foundation Trust, one of the Mental Health Trusts in Staffordshire, announced on 18th July 2019 that they will be rolling teams out across East Staffordshire as part of a new programme to support teachers with emotional wellbeing and mental health in schools. They also offer “5-19”, an element of the Families' Health and Wellbeing Service (0-19), which is an integrated programme which brings together health visiting and school nursing. It will support schools by being able to book appointments, have drop in sessions, groups sessions at schools and in the community, and chat health; a text service and app, manned between 9am-5pm, Monday to Friday, allowing parents and young people to ask questions about health and wellbeing. There is also “the Hub”; a central point of contact, accessed by telephone, providing advice, guidance and signposting to families, young people and professionals.

A holistic view of emotional well-being, where the schools and the health service look at the whole student, from year 7 until that person leaves school, can only be beneficial. Teaching not only academic subjects, but also how to be a fully functioning adult, able to deal with adult issues such as relationships and maintaining physical and mental health, should benefit both the schools and the individuals themselves and ultimately reflect in a lessening of those needing a referral into the mental health system.

*Midlands Partnership NHS Foundation Trust (MPFT) has been successfully selected to introduce Mental Health Support teams in a trailblazing government programme which will put mental health experts into schools and colleges across the country.*

*In a bid to support children and young people who struggle with their mental health, the programme will see 124 new Mental Health Support teams created across 48 areas.*

*Each team will support approximately 20 schools and colleges with the aim of speeding up access to specialist services and building on support already in place from professionals such as school counsellors, nurses, educational psychologists and the voluntary sector. Supporting more children and young people to get the help and care they need, when they need it.*

*Neil Carr, Chief Executive of MPFT today said: “The mental health and wellbeing of children and young people should never be underestimated and I am extremely pleased to see the national commitment which has been made to children, young people and their families through the introduction of Mental Health Support teams.*

*“The aim of staff who specialise in working with children and young people experiencing mental health struggles is to provide care that will enable them to thrive in the future. Therefore, I am confident that the joined up work of Mental Health Support teams and our partners in education and the voluntary sector will play a vital role in enhancing the mental health and wellbeing of local children and adolescents.”*

*MPFT, which provides physical and mental health care, learning disabilities and social care services, will introduce Mental Health Support teams in Staffordshire and Shropshire and Telford & Wrekin following successful bids across both areas.*

*The successful bids will see two teams set up in Shropshire; one covering Shropshire and another covering Telford. An additional two teams will be established in East Staffordshire. Teams will include roles such as educational mental health practitioners, primary mental health workers, therapists and team managers.*

*The launch of Mental Health Support teams, which aim to be operational by December 2020, is part of the Government’s plans to transform children and young people’s mental health through the NHS Long Term Plan.*

Ref: <https://www.mpft.nhs.uk/about-us/latest-news/trust-launch-mental-health-support-teams-trailblazing-government-scheme>



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