Developing a preventative approach

Introduction to the case study practice examples

This practice example is aimed at school staff and policy-makers wanting to understand how schools and colleges develop a preventative approach to promote good mental health. It is part of a series of five practice examples focused on mental health provision in settings. The other four practice examples are:

- Developing a whole organisational approach;
- Identification and assessment of needs;
- Working in partnership; and
- Engaging parents and families.

They draw on learning from case studies which formed part of research on support for mental health and character education in schools, colleges and alternative provision across England [1,2,3,4]. The case study schools were selected based on their reported active engagement in provision for mental health and character development. The case study settings included mainstream (both LA maintained and academy) primary and secondary schools and further education colleges. Where there was transferable learning for mainstream settings, the practice examples also contain findings from special schools and Pupil Referral Units (PRUs).

This practice example provides a brief overview of how the case study schools improved awareness of, and understanding about, mental health amongst children and young people, and the activities that were included in a preventative approach to mental ill health. The facilitators and challenges encountered while developing a preventative approach are discussed, along with the benefits and resources needed to create the approach. Finally, some top tips on how to develop a preventative approach, drawing on the experiences of staff at the case study schools and colleges are provided as well as a short resources section of further suggested reading.

Overview

The key drivers for pursuing a preventative approach were schools' perceived responsibilities to promote good mental health, whilst educating the 'whole child'; and to ensure social and emotional needs did not become more acute and present barriers to learning. In the context of difficulties they experienced in accessing *external* support for early intervention, schools considered themselves well-placed to implement preventative approaches, and that it was important that they do so.

Case study schools and colleges described a number of elements of a preventative approach, including raising awareness of mental health and promoting wellbeing via universal and targeted support. A preliminary step – outlined more fully in another practice example – *Developing a whole organisational approach* – was to raise *staff* awareness, through training and provision of relevant resources.

Improving student awareness and understanding

Schools and colleges aimed to improve student awareness and understanding by providing information about mental health and where to go for advice, in such a way as to tackle stigma and remove taboos around discussing the subject and seeking support. This involved, variously:

- **Delivering information** through: visual displays (paper/electronic); leaflets; student diaries; newsletters; talks from visiting speakers; videos; awareness-raising days/weeks; library resources, including self-help books; and websites or virtual learning platforms.
- **PSHE lessons, form time or assemblies** which included structured sessions, for example around resilience, self-esteem or managing stress, and tackled issues relevant to particular groups. Some lessons or assemblies were delivered by NHS CYPMHS[a] practitioners or school student support staff, and presented material from mental health charities (e.g. MIND).
- **Peer messaging** – for example, in one LA maintained secondary school, KS4 and KS5 'Health Champions' were trained in physical, emotional and mental health; wrote fortnightly for a student and parent newsletter on mental health and wellbeing; helped organise events such as Mindfulness week and produced a booklet on emotional literacy for feeder primary schools.

Preventative support

Schools had implemented whole organisational and targeted approaches to preventative support. As one member of staff stressed: *"We have to reinforce that mental health is not just mental illness - it's about having a healthy mental state"*. In line with this, they aimed to promote wellbeing and prevent mental health problems from arising or escalating by equipping students with skills that could enable them to self-regulate, articulate their feelings, and cope better with challenges. Activities used to promote such skills included:

- extra-curricular activities and tutor/house systems, designed to build staff-student and peer relationships as well as confidence, communication, teamwork and other skills;
- approaches to teaching which rewarded effort, such as Growth Mindset[5];
- physical activity;
- dedicated spaces to promote relaxation;
- emotional literacy, problem-solving or mindfulness sessions;
- self-esteem and resilience programmes;
- worry boxes (mainly primary schools) or drop-in services (e.g. student support centres at secondary schools and colleges);
- recommended (phone) apps;
- online counselling via Kooth (https://kooth.com/); and
- support programmes for vulnerable children, including group sessions and buddying or peer mentoring.

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[a] Mental health provision for children and young people in England is provided under the umbrella of Children and Young People's Mental Health Services (CYPMHS). The CYPMHS framework incorporates all professionals working with children and young people, from universal provision through to specialist inpatient and outpatient services. The services that are funded by the NHS are known as NHS CYPMHS. These are services that were previously (and still are in many areas of the country) called NHS Child and Adolescent Mental Health Services (CAMHS).

Facilitators

A key facilitator for implementing a preventative approach was having a strategic lead (e.g. head teacher or deputy) driving the agenda forward. This involved creating an open, accepting environment whereby *staff* as well as students felt able to discuss their concerns and problems – and securing resources for a range of provision (see below).

Training to boost staff confidence in raising and addressing mental health issues was identified as making a real difference. In addition, staff having the skills and capacity to be approachable and accessible to students in and outside the classroom, and seeking and responding to students' views on topics *they* wanted to tackle (for example, in PSHE) was important to facilitating students' engagement.

Benefits

Staff at schools believed the main benefit of having a preventative strategy for mental ill health focused on improving children and young people's emotional literacy and wellbeing. It was hoped that the preventative strategy would reduce the chances of children and young people reaching crisis point and needing more targeted support.

Challenges

Challenges identified across case study sites included:

- **Students, in particular at secondary schools, had to manage their time in the context of achieving academic results**. Homework and studying could limit students' ability and willingness to engage in optional activities, especially if they had long journeys to school. However, secondary schools, that had embedded preventative approaches within the school day, using form time and PSHE lessons for example, were able to minimise the amount of additional 'free' time that students were encouraged to spend on activities that promoted good mental health.

- **Coping with the increasing numbers presenting with complex needs** around mental health. In the context of limited availability of external support, this put further pressure on student support services to focus on those in crisis rather than early intervention. This challenge was predominately out of the settings' control. However, schools and colleges with a leadership team that prioritised support for mental health often already had developed a whole organisational approach and increased staff awareness about mental health (see practice example *Developing a whole organisational approach*), which was crucial for the preventative approach at the setting to be successful.

- **Prioritising investment in prevention** rather than other activities, without solid evidence to support the use of particular resources or provision. While the case study schools and colleges were aware of the benefits of developing a preventative approach, staff still raised concerns about assessing the quality of resources and provision. Settings with a trained mental health professional or with experienced staff in terms of providing mental health support, and who had senior leadership buy-in were more able to justify the investment in preventative approaches despite the lack of evidence supporting a particular resource or provision.

Resourcing

Resourcing was a key challenge, including for staff training and capacity building and the provision of after-school sessions or trips aimed at character development. Case study schools and colleges had tried to address budgetary constraints and sustainability issues in a number of ways, including:

- **Accessing additional capacity and funding via pilot schemes** (such as Thrive Hub schools, Extra Life, and the Mental Health Services and Schools Link pilots). This enabled improvement of staff skills and provided opportunities for students, although schools did have concerns about the time limited nature of this support and the need to identify continuing or replacement funding.
- **Training key staff not only to support students, but to train their colleagues.** For example, in one school where Mental Health First Aid training was considered invaluable, but unaffordable on an ongoing basis, the lead planned to become a trainer herself in order to share the learning more widely.
- **Sourcing free or low cost resources.** For example, staff sourced information and materials from mental health and children's charities (such as Papyrus[7], MIND and the Children's Society) as well as YouTube/TrueTube[6] clips, and shared these with colleagues. Those collaborating with other schools also exchanged resources with them.
- **Approaching external organisations and individuals** to act as visiting speakers.
- **Applying to foundations, trusts or businesses** for funding, materials, or skills development opportunities for students. In addition, local charities and practitioners or volunteers, such as mentors seeking experience, provided some input for free or at reduced rates. However, such input required management time and schools were not always confident about being able to provide this or appropriate quality control.

Key learning

There were some useful areas of key learning and top tips provided by the case study schools and colleges, including:

- Preventative approaches could be further developed through collaboration with other schools and mental health organisations.
- Promotion, awareness-raising and character-building activities need to be embedded in the curriculum and structure of the school day, as well as through 'one-off' activities.
- Information and advice about mental health should be shared on an ongoing basis, to help normalise pastoral issues and address stigma associated with talking about mental health.
- It helps to accumulate a bank of resources, 'ready to use' – this can be led by one person but contributed to, and used by, other staff.
- Any new promotional material should focus on 'being well' or 'wellbeing' rather than mental health. It also needs to engage both young men and women – which can best be done by involving students in its development.
- Existing space can be used creatively (for example, equipping a school library or student support hub with a relaxation or 'time out' area).

References

1. Marshall, L; Rooney, K; Dunatchik, A and Smith, N. (2017) *Survey of Character Education in Schools in England.* London: DfE

2. Marshall, L; Wishart, R; Dunatchik, A and Smith, N. (2017) *Supporting Mental Health in Schools and Colleges – Quantitative survey.* London: DfE

3. White, C, Gibb, J, Lea, J and Street, C. (2017) *Developing Character Skills in Schools. Qualitative case studies.* London: DfE

4. White, C, Lea, J, Gibb, J and Street, C. (2017) *Supporting Mental Health in Schools and Colleges – Qualitative case studies.* London: DfE

5. Dweck, C. (2017) Mi*ndset - Updated Edition: Changing The Way You think To Fulfil Your Potential.* Little, Brown Book Group.

6. TrueTube: *Ideas, Lesson Plans & Assemblies for RE, PSHE & Citizenship.* https://www.truetube.co.uk/

7. Papyrus (Prevention of Young Suicide): https://www.papyrus-uk.org/

Resources and further reading

The EIF Guidebook - an online resource for those who wish to find out more about how to commission and deliver effective Early Intervention: http://guidebook.eif.org.uk

Knapp, M: McDaid. D and Parsonage, M. (2011) *Mental health promotion and mental illness prevention: the economic case.* London: LSE PSSRU, Institute of Psychiatry and Kings College London. A report discussing the costs and economic pay-offs of a range of interventions in the area of mental health promotion, prevention and early intervention.

NICE (2009) *Social and emotional wellbeing in secondary education: Public health guideline [PH20].* Manchester, National Institute for Health and Clinical Excellence. www.nice.org.uk. This guideline covers interventions to support social and emotional wellbeing among young people aged 11-19 years who are in full-time education. It aims to promote good social, emotional and psychological health to protect young people against behavioural and health problems.

Weare, K. and Nind, M. (2011) Mental health promotion and problem prevention in schools: what does the evidence say? *Health Promotion International* Vol 26, No.S1, pp.i29-i67. A systematic review to identify evidence-based interventions and programmes that promote good mental health.

MindEd: www.minded.org.uk – is a free resource on children and young people's mental health written for all professionals working with children and young people. The online portal provides over 200 e-learning modules including a session 'Communicating with Families' which provides an overview of the basic principles for engaging families, information about listening skills and ideas for questions that can aid effective communication with families.