

The role of schools in promoting mental health: back to basics

Professor Neil Humphrey

Head of Manchester Institute of Education

School of Environment, Education and Development

Dr Michael Wigelsworth

Senior Lecturer

Manchester Institute of Education

Date

September 2019

Briefing Note
from **Policy@Manchester**

The role of schools in promoting mental health: back to basics

In Summary

1. The government's renewed focus on the role of schools in promoting mental health is laudable, but current policy lacks ambition and will fail to address one of the most significant public health crises in living memory.
2. A fundamental rethink is needed, in which greater policy emphasis is placed on the building blocks of wellbeing.
3. The government should incentivise and guide schools to implement evidence-informed approaches to universal support for mental health needs.
4. We recommend the careful implementation of a comprehensive school-based system to identify, assess and monitor children and young people's mental health needs.
5. The government should undertake a review of teachers' working conditions with a specific focus on reforms designed to improve their mental health and wellbeing.
6. We recommend that mental health should become a mandated component of initial teacher education programmes, and that further funding for continuing professional development at postgraduate level should be made available for those who seek to develop their knowledge and skills in this area (eg designated mental health leads).

In Detail

1. Context: the role of schools in promoting mental health

The government clearly considers schools to be central to achieving the aim of improving the mental health of children and young people in England. The most recent proposed policy, outlined in [Transforming Children and Young People's Mental Health Provision: a Green Paper](#), outlined plans to:

- a) have a designated mental health lead in all schools and colleges;
- b) fund new mental health support teams that will act as a bridge between education and health;
- c) pilot a four-week waiting time for access to specialist mental health services.

Much has been written critically examining the green paper, including a damning response from the [House of Commons Education, Health and Social Care Committees](#) and our own [Manchester Institute of Education blog](#). In sum, this and other policy and guidance documents (eg [the Department for Education's Mental health and behaviour in schools advice document](#)) are inadequate; they lack specificity, do not pay due regard to the social determinants of mental health, and fail to consider the opportunities for prevention and early intervention.

Thus, **while the renewed government focus on the role of schools in promoting mental health is laudable, current policy lacks ambition and will**

fail to address one of the most significant public health crises in living memory.

The remaining sections of this briefing note outline key areas for action.

Recommendations

2. Nurture wellbeing by making school a place where children and young people feel safe and happy

School should be a place where children and young people feel safe and happy; this is fundamental to their wellbeing. But [it is an aspect of their lives which they rate lower than almost all others \(second only to their feelings about the future\)](#). Recent years have seen [significant increases in young people reporting exam stress and problems at school](#). The pressure to perform in an increasingly micro-managed, accountability-driven education system is eroding children and young people's sense of attachment to school and their mental health ([Sharp, 2013](#); [Humphrey, 2018](#)).

Thus, **a fundamental rethink is needed, in which greater policy emphasis is placed on the [building blocks of wellbeing](#):**

- being *connected* (eg developing positive pupil-pupil and pupil-teacher relationships);
- being *active* (eg supporting physical activity in and out of the classroom);
- *giving* (eg encouraging social action and benevolence);
- *taking notice* (eg fostering curiosity and mindful reflection on experience);

- *learning* (eg provision of a broad and balanced curriculum that better reflects children and young people's interests and more adequately prepares them for life and work).

3. Provide effective universal support for mental health needs

Above and beyond the creation of a nurturing environment, schools are uniquely placed to support children and young people's mental health needs through the implementation of universal approaches to social and emotional learning and mental health education. Such approaches are proven to improve outcomes for children and young people in meaningful ways (eg [Wei et al, 2013](#); [Wigelsworth et al, 2016](#)).

Children who are able to understand, articulate, and manage their emotions, while also being better equipped to develop and maintain positive social relationships (including social problem-solving), are better equipped to successfully navigate challenges to their mental health and wellbeing ([Panayiotou, Humphrey & Hennessey, 2019](#)).

Furthermore, in developing young people's understanding of mental health and making conversations about it normal, we can reduce stigma and increase the likelihood that they will seek help when distressed ([Clement et al, 2015](#)). Thus, **the government should incentivise and guide schools to implement evidence-informed approaches to universal support for mental health needs.**

4. Identify, assess and monitor children and young people's mental health needs

Currently, less than half of schools in England collect data of any kind to inform their mental health provision. Of those that do, few make use of validated tools (opting instead for 'homegrown' surveys, which may not be reliable or valid), and most only collect data for targeted groups of students ([Marshall et al, 2017](#)).

Data produced through the application of validated tools can help schools to identify the needs of the student population (and particular subgroups, such as those eligible for free school meals), inform their decision-making about priorities for action, and evaluate the success of their efforts ([Deighton et al, 2016](#); [Humphrey & Wigelsworth, 2016](#); [Public Health England, 2015](#)). A useful case in point is the [Wellbeing Measurement Framework](#), which we have implemented successfully in nearly 300 primary and secondary schools across England, gathering data on the mental health needs of over 100,000 children and young people in the process.

We recommend the **careful implementation of a comprehensive school-based system to identify, assess and monitor children and young people's mental health needs** and the factors known to influence them (eg bullying). Such a system should be fundamentally child-centred, with further support and training made available to ensure informed and appropriate use of data.

5. Improve teachers' working conditions and provide professional development opportunities relating to mental health

Almost everything that is written in this area focuses on children and young people. The mental health of teachers and other school staff is at best a secondary consideration. But we cannot neglect the wellbeing of educators. Approximately 90% of teachers report having considered leaving the profession in the last two years ([NUT, 2014](#)), and the prevalence of work-related stress is significantly higher in education than for all occupational groups ([Health & Safety Executive, 2018](#)). We know that factors such as job demands (including workload), feelings of undermined professional autonomy, and the impact of accountability measures lead to teachers feeling stressed and demoralised ([Greenberg, Brown & Abenavoli, 2016](#); [Hutchings, 2015](#)).

The government therefore should **undertake a review of teachers' working conditions with a specific focus on reforms designed to improve their mental health and wellbeing.**

Furthermore, if schools are to play such a central role in mental health promotion, teachers need to be given appropriate professional development opportunities in this area. Thus, we recommend that **mental health should become a mandated component of initial teacher education programmes, and that further funding for continuing professional development at postgraduate level should be made available** for those who seek to develop their knowledge and skills in this area (eg designated mental health leads).

Authors



[Neil Humphrey](#) is Professor of Psychology of Education and Head of the Manchester Institute of Education. His research interests include mental health, social and emotional learning, and special educational needs.



[Dr Michael Wigelsworth](#) is a senior lecturer at the Manchester Institute of Education. His research interests include mental health and wellbeing and social and emotional learning. Michael has recently been appointed as topic expert in social and emotional wellbeing for the National Institute of Clinical Excellence.

[Policy@Manchester](#) supports engagement between Manchester academics and organisations involved in the creation or scrutiny of public policy.

For further correspondence with the authors of this briefing, information about other briefings, or to discuss the topic of a potential future briefing, please contact policy@manchester.ac.uk
