

Argyll and Bute

Meeting the mental health needs of Scotland's children and young people: Identifying good practice and areas for development through a survey of schools and educational psychology services

What did we ask?

- 1. What are educational psychology services (EPSs) and secondary schools doing to promote mental health and support children and young people with mental health difficulties?
- 2. What is the level of need for mental health intervention in EPSs and secondary schools?
- 3. How are mental health needs recognised and assessed by psychological services and secondary schools?
- 4. How do schools, via EPSs and other agencies, access support within and beyond universal services for children and young people with mental health difficulties and how effective/valued are these services?
- 5. What best supports EPSs and secondary schools to implement strategies to meet mental health needs effectively and what are the barriers to effective implementation?
- 6. Are authorities, EPSs and secondary schools implementing written policies/ procedures for the support of mental health in schools?

What is the evidence base?

The mental health and wellbeing of children and young people is increasingly recognised as a key priority in Scotland, both in terms of increasing the capacity of services such as CAMHS (Scottish Government, 2016a), and in terms of raising the profile of children's wellbeing within universal services through the curriculum and the principles of Getting it Right for Every Child (GIRFEC) (Children and Young People Act, 2014; Scottish Government, 2016b).

Children report that they value person-centred support in their everyday community contexts comprising a mixed package of support including both teaching and support



staff and onsite specialists. Nevertheless, some children continue to desire access to mental health specialists out-with school, thus avoiding the potential stigma associated with seeking support within the school context (Spratt et al., 2010; Scottish Youth Parliament, 2016).

While improving children's mental health and wellbeing is and should be an aim in itself, it is also an essential consideration in terms of how we close the attainment gap (Coleman et al., 2009; DeSocio & Hootman, 2004; Humensky et al., 2010; MacKay et al., 2009; Martin et al., 2005; Masi, 2001). The current survey method research aims to establish the perceived needs and capacities for this across Scotland in terms of EPS provision, sedcondary schools, and outside services.

There is no established evidence base in Scottish authorities, EPSs and secondary schools regarding current approaches to supporting the mental health of children and young people. At the time of writing, there are a number of Scottish Government surveys gathering information, but only minimal consultation with EPSs at a national level has not been done. There is an emerging and strong evidence base for the importance of the role of educational psychologists in helping to meet the needs of those young people struggling with mental health within the education system.

What did we do?

Surveys were designed to gather both qualitative and quantitative data, comprising scaling, multiple choice, and extended response questions.

Following an initial stage of creating and piloting surveys with local EPS and staff in secondary schools in Argyll & Bute, separate and specific surveys were sent electronically to all EPSs and secondary schools in each local authority in Scotland (n=31). The survey aimed at EPS was piloted with the principal psychologist in Argyll & Bute, and was thereafter distributed electronically to all EPS (n=32) through the Association of Principal Educational Psychologists (ASPEP) mailing list. Of 32 services, returns from 19 services, 21 in total, were received.

What have we found so far?

EPS surveys:

Results suggested that EPSs are confident in their knowledge and skills in relation to mental health (including direct and indirect work with schools and parents as well as direct therapeutic intervention with pupils), and that they currently make good use of these. These skills appear less utilised in the areas of mental health risk assessment and development work.

In terms of training for EPSs to be able to meet demands associated with mental



health, services do better through CPD than initial training and only around one third felt they had appropriate supervision in place for practitioners.

In terms of young people with apparent mental health difficulties, EPSs reported that they would tend to refer to general self-help or CAMHS (85% of respondents). The survey indicates, however, that around one third of EPSs find links with other agencies to present considerable barriers to provision of appropriate mental health support to pupils.

In view of the capacity issues, for example with regards to CAMH services, it is encouraging that EPSs report a high level and considerable variability in the ways in which they are currently responding to meeting mental health needs. Most are highly involved in evidence based, specific training for whole school systems such as 'nurturing' environments; support in implementing universal CBT packages that can be used at curriculum, group, class and whole school levels (e.g., PATHS); direct and indirect use of other therapeutic approaches such as solution-focused techniques; there is also evidence of EPSs supporting LAs with policy/guidance development.

Around half of EPSs reported confidence in the practice areas of skills training, supervision and family interventions. Only a minority of EPSs reported offering work in relation to mental health awareness raising and assessment, although school survey results suggest that stakeholders value these functions.

School surveys

Despite the small sample size, a number of fairly consistent themes have emerged, and these have indicated that schools show high levels of concern regarding young people's mental health, with barriers to effective service delivery in terms of within-school resources and access to and capacity of outside agencies. With regard to the impact of mental health difficulties on young people, the majority of schools reported moderate to major impacts on educational attainment, attendance, onward destinations, peer relationships and behaviour, with impact on pupils' relationships with teachers reported to a lesser extent. Professional awareness of the link between mental health difficulties and pupil outcomes requires to be recognised and addressed.

In terms of policies and procedures, although schools may be evolving in response to mental health issues and beginning to link policy and practice, there was little evidence of cohesion between policies and the role of school staff development, for example, in terms of early intervention. The results suggest instead a focus on onward referral pathways to outside agencies such as CAMHS. There appears to be a policy gap in terms of a focus on improving staff skills in mental health awareness, monitoring and assessment. Without this early intervention focus, procedures to access within-school counselling and onward referral through a staged intervention process are limited in utility.



Although there are potential limitations in terms of staff capacity and skills to deliver programmes, and limited awareness of the usefulness of different individual programmes and curricular approaches, school responses indicate an appetite for delivering their own evidence-based interventions and implementing programmes that are known to support mental health. This may be indicative of an attitude change within education in terms of schools' role in mental health, perhaps showing that there is motivation in schools to improve their knowledge and skills in this area to obtain better outcomes for their pupils.

Educational psychology services are well placed to support school in developing mental health assessment skills alongside competences in evidence-based therapies such as CBT and other interventions at group, class and universal levels. In particular, they may helpfully explore curriculum-friendly approaches that are economic for teachers in terms of delivery and expertise, with time for new initiatives and staff training being limited. Schools rate psychological services as effective in supporting mental health needs, but they note that there are barriers to accessing this support.

General Discussion and Practice Implications

The surveys indicated that EPSs have good confidence in their knowledge and skills regarding mental health. With reducing numbers of EPs in Scotland, it may be prudent to consider how EPS can build upon building upon their existing unique skill set in assessment and intervention in the areas of mental health assessment and in terms of competences in evidence based therapies such as CBT and other interventions at individual, group, class and universal levels.

What do we plan to do next?

At a local level this is likely to include feeding in to Argyll & Bute's *Mentally Healthy Schools* project and providing a rich source of information for the review of wider mental health services within the area, as well as the formation of a mental health and wellbeing strategy for Argyll & Bute education service. It is hoped that the information can also feed into national conversations about the provision of mental health services and the prioritisation of children's mental health and wellbeing, including the role of EPS in this crucial area.

Full exploration of both the school and the EPS survey results will be made available in separate journal articles (pending).



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