

# Premier's Anika Foundation Youth Depression Awareness Scholarship

## Social and emotional well-being in the school context

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## **Focus of the Study**

The focus of the study was to examine how schools in the UK are incorporating social and emotional well-being into the curriculum and also to look at innovative practices that promote the social and emotional skills that underpin effective learning, positive behaviour and good attendance.

It is widely accepted in the UK (and indeed in Australia) that all organizations have a role in supporting the mental health of children and young people. Examples of best practice recognise that mental health is a continuum – from mental health promotion, through preventing mental illness, to supporting, treating and caring for young people experiencing mental health difficulties. Schools have an important role to play in mental health promotion but any attempt must address the importance of integrated whole school approaches that combine changes to school culture, staff morale and student, family and community involvement.

## **Significant Learning**

### **Leadership and Management**

Outstanding leadership was a common factor to all the schools that I visited as part of my study tour.

Principal of Newell Green High School in Manchester, Mr. Neil Wilson is an inspiration. He fully embraces the social and emotional well-being agenda and drives forward change with vigour. Neil believes that the Principal's role is that of the community leader, with a duty and responsibility to make sure the school educates the whole child; with the school becoming part of the young person's extended family and the families becoming part of the extended school.

In a similar example of a "tough area" the Principal of Evelyn Grace Academy in Brixton, Mr. Peter Walker, is seeking to break the mould of secondary education in a number of significant ways. He has the rare opportunity of developing a school culture and ethos from the ground up as the school only opened to an initial Year 7 enrolment in 2008. In his view doing what it takes to get things right means, above all, developing in every student a personal belief that learning matters and every student can be successful at the highest level. This school is based on a small school model i.e. two schools for students aged 11-14 (from 2008) and 2 schools for students aged 14 – 19 (from 2011). Each school has its own Principal, some of its own staff, learning and play areas. Among other things this model will foster the sense of belonging for students, allow them more opportunity to develop meaningful relationships with teachers and peers and produce a climate that promotes social and emotional well-being.

The way in which Scottish schools are managed and resourced ensures a superior degree of support that can be offered to students by trained professionals. Guidance teachers are based in all Scottish high school on a ratio of approximately 200 students to each guidance teacher. These staff have a non-teaching load and are classed and remunerated as executive teachers. Each guidance teacher is a qualified counsellor and holds a post graduate qualification in guidance and pupil support. Most schools have at least two guidance teachers and therefore they will specialise in different areas. The guidance teacher I shadowed, Cath, specialised in social service liaison, child protection and career guidance; where her colleague, Eileen, had responsibilities in the areas of solution oriented schools, restorative justice, police liaison and health promoting schools.

It is not only the state schools that have made a commitment to well-being in the UK. My tour included a visit to the very prestigious Wellington College where the Principal, Dr. Anthony Seldon and his staff have gone out on a limb by their decision to teach the "skills of well-being"

(colloquially called “happiness lessons”). This has sparked enormous interest and in some cases a great deal of criticism but Dr. Seldon defends the decision as he believes that lessons in positive psychology and well-being are a natural evolution of the school’s philosophy on educating the whole child. The aim is to equip students with an understanding of what makes them thrive and flourish and how they can improve their chances of experiencing happiness, good health, a sense of accomplishment and lasting companionship.

### **Partnerships**

In brief, partnerships that are effective engage the active support of parents/carers and maximise the contributions of the wider community. Nowhere was this more evident than in Newell Green High School in Manchester and Lossimouth High School in the Moray area of Scotland.

The Principal and staff at Newell Green felt that their traditional pastoral support programmes were limited by lack of intelligence and poor communication from outside agencies. The school wanted to ensure that education was the driving force of any multi-agency support. Families were prepared to engage with other agencies such as social services within the school setting because the issues were seen to be related to the education of their child, whereas the same families frequently did not engage with social services because they were reluctant to admit there was a crisis within the family.

Newell Green serves one of the most socially and economically deprived areas in England. The population of the school is predominately white British; the number of children from ethnic minority groups is very low. The proportion of children entitled to free school meals is well above the national average and around 40% are being supported by the school and a range of agencies as they are potentially disadvantaged and vulnerable to underachievement due to social or learning difficulties/disabilities. This school is a centre for severe learning difficulties with 52 pupils having statements of special educational needs and 20 students in the equivalent of out of home care. This school’s student enrolment is 900.

In response to the perceived shortcomings of the existing pastoral programmes and the obvious diverse needs of the students and their families the school developed a full service school (FSS) team. In addition to teaching staff on the team (special education coordinator, pastoral head) the school uses its own funds to employ a social worker, a school health advisor, senior learning mentors, a school attendance officer, a police officer and a senior manager for administration. All of these team members operate within the school premises either on a full-time or part-time basis.

The FSS Team take referrals from the head of year, from this point the team makes the decision to take the case on and who the key worker should be. An action plan is developed and this almost always involves working with the family. Student and staff’s understanding of the work of FSS took some time to develop but is now reported to be good. Year 7 students are provided with written information and inputs that help them understand how FSS works. Through the use of scenarios drawn from everyday school life, with which most of them can readily identify, they learn to appreciate that there are different adults to whom they can turn to when they are troubled.

The “Lossimouth Project” involves integrating mental health link workers into schools. The Project is the result of a commitment by the Mental Health Division (Scotland). The link workers will aim to create within their school and wider community, a supportive and resilient environment which can promote mental health for both pupils and staff. Lossimouth High School has been identified as the pilot school for the project and will be responsible for

identifying an existing staff member to perform the role of the link worker. The link worker will receive extensive training and on-going support and mentoring as they perform the role.

The role of link worker will further strengthen the partnerships that the school has already developed. Lossimouth High School has a very strong affiliation with CAMHs (Child and Adolescent Mental Health service) which is based in nearby Moray and the two are working together to see the link worker become a reality in Lossimouth High School and beyond.

The Health Promoting Schools is a Scottish Government initiative which states that there is a responsibility to look after the physical, social, spiritual, mental and emotional well-being of all pupils and staff. It places health promotion at the heart of a schools activities. The appointment of a mental health link worker within every school would enhance the experience of all pupils in mainstream education, in addition all schools should have been health promoting by 2007. Therefore, this initiative as an essential component of a school's health promoting activities will also enable schools to fulfil their legal requirements.

### **The Work of Mentors**

In all of the comprehensive high schools that I visited in the UK the work of the non-teaching staff is clearly of the highest value to not only the school but families and most significantly students themselves. Significant non-teaching staff includes mentors, school health advisers, home-school link workers. What they do have in common is the potential to make a real difference in the life of a vulnerable student. A particularly effective model of support was being implemented at Newell Green High School. Each learning mentor is assigned to work principally with one year group and develops over time a close working relationship with the respective head of year. The mentor "moves up" with his or her year group. This arrangement provides continuity and stability for the mentees, who know that the mentor is there for the long term, not just to offer temporary support and challenge.

Mentors meet twice daily with their linked head of year; discussion includes the impact of mentoring programmes on student's achievement, progress and personal development. Wherever the programme involves in-class support, the mentor checks with the subject teacher, talking through the causes that may explain a particular student's attitude or behaviour in a lesson rather than focussing on the symptoms. This is one of the first steps to providing the help to remove barriers to learning.

The mentors and school-link workers across the schools that I visited all have backgrounds that are firmly rooted in the community. They know their area well and are well known to local residents. Specifications for the job of learning mentor highlight just three essential abilities; to develop constructive relationships with young people and their families; to work well with and command the confidence of all staff; and to understand young people's needs so as to be able to improve their life chances. All in all, the mentors are the embodiment of the schools belief that the local community has talent and expertise of great potential value. The post of health adviser is based for the majority of their working time at the local primary health care trust. A significant part of their work is dealing with routine medical interviews as well as being available for immediate concerns. Staff are able to log health issues about particular students with them and students are encouraged to self-refer.

In discussions with the school health adviser at Newell Green High School it is apparent that her belief is that students need someone to turn to "in the moment" when they have a concern about physical or mental health. A significant aspect of the school culture is not passing judgements on students or staff; this is reflected in the poster on the health adviser's door, "there

to listen, not to tell". The following excerpt is taken from a publication in relation to the multi-agency approach at Newell Green High School and demonstrates the health worker assisting a student to overcome the health implications of being jilted.

Student D was a young man in year 11 who became very distressed after the breakdown in his relationship with his girlfriend of two years. He had developed a close relationship with her family, and his breakdown meant that he would no longer have contact with them.

*His mother, a single parent, was an alcoholic with significant mental health issues. He had very little support from her and had no contact from his father.*

*Although his attendance at school had previously been good, it now deteriorated and he started to fall behind in his coursework. It was reported that he had stopped paying attention to how he looked.*

*He went to see the school health adviser wanting to talk about how low he felt. He also admitted that he had started to self-harm. He had not spoken to anyone about this and did not think his mother had noticed. With the student's permission, the school health adviser spoke to his mother who had been unaware of his mood. They both consented to his case being discussed at our school CAMHS meeting.*

*The school health adviser had started to see this young man on a weekly basis prior to this meeting and it was agreed that she would commute to do so. We established the situation on confidentiality and he was able to talk openly about his loss.*

*After eight sessions he had stopped self-harming. His attendance had improved and he was beginning to apply himself to his schoolwork.*

*Contact had been kept up with his mother throughout and their relationship improved significantly. He reported that he felt she understood him more and he was now able to talk to her about his feelings.*

*He started to feel more confident and we worked on one of his aims, which was to get a part-time job. He applied for several jobs, initially becoming very distressed when rejected from some of these. However he was eventually successful.*

At the end of our sessions he was presenting as a much happier, more confident young man. He was now reaching his targets in school. He had managed to get a part-time job outside the area in an Indian restaurant, which gave him some financial independence. He used some of this to buy clothes for his year 11 leaving party, which in his case was a positive sign of renewed self-esteem.

## **The SEAL Agenda**

The UNICEF paper (2007) on child well-being in rich nations put young people in the UK at the bottom of the league table. Mental health and well-being problems are occurring at a time when there is also concern over young people's behaviour and attitudes. In response to these types of issues the Department for Children, Schools and Families has (in England) endorsed SEAL (Social and Emotional Aspects of Learning). Secondary SEAL aims to provide opportunities for pupils to learn social and emotional skills in three ways:

1. Discrete lessons that focus on the social and emotional skills of self-awareness, managing feelings, motivation, empathy and social skills.
2. The encouragement of a review of the social and emotional climate and conditions for learning to ensure pupils can learn, practise and consolidate skills across the school
3. The encouragement of teachers to review their approaches to learning and teaching to ensure that the approaches implicitly promote social and emotional skills.

While the SEAL agenda sounds like a move in the right direction, there are a growing number of educationalists and psychologists who are concerned about schools 'teaching' social and emotional skills on a whole-school basis. The centre for confidence and well-being in Glasgow has published a paper in response to SEAL and I was able to spend some time with the Director of the centre Carol Craig to clarify their position. At the heart of the concerns around SEAL is that it is seen to be a diversionary short-cut or a band-aid measure. There is a real danger that such a psychological approach will be used by inadequately trained teachers, be part of profiling and have a controlling feel to it. Some other interesting questions to consider with the implementation of such a program: Do we want to encourage parents to believe that schools are responsible for the development of young people's social and emotional skills? Do we want to give young people the message that feelings/relationships are something which we need to learn formally from "experts"? Do we want to encourage young people to be overly concerned with how they feel? These of course are all valid questions and I certainly share some of the centre's concerns about such a systematic approach which has now been mandated in England. I fear that many schools will simply teach the discrete lessons and "tick the box" to comply with the Department guidelines without examining the school environment and culture and/or conducting a review of teaching and learning practices that promote student well-being.

### **Getting it Right – Some Considerations**

Schools that appear to be getting it right in terms of promoting social and emotional well-being are succeeding, to a large extent, because of the climate that has been carefully developed and nurtured. It is essential that the Principal and *all* staff are clear about the schools aims and that the vision for improving student outcomes is a shared one. The intentions of a school around social and emotional well-being must be emphasised regularly through policy documents, school management plans, staff meetings, staff development days and other professional development opportunities. Once a school takes this approach staff will readily understand the inextricable links between young peoples well-being, their personal development and their educational achievements. Considering the whole needs of the young person and showing resourcefulness and imagination in meeting them are clearly the key to raising standards and levels of achievement.

Partnerships with parents and carers are crucial, as they are a key influence on a young person's social and emotional development and usually the experts on their own child. If schools are going to meet the challenge of producing well balanced individuals who possess the skills of confidence, resilience and persistence then the school cannot perform its duties in isolation. It must interact with and be part of the community at all levels.

It makes little sense to consider teaching the skills of social and emotional well-being until these guiding principles are firmly entrenched into school practice.

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