



## Professor Siobhán O'Neill

### Evidence to the All-Party Group on Mental Health Inquiry into Mental Health Education and Early Intervention in Schools

Children's mental health week is a reminder that one in eight children and young people in Northern Ireland (NI) have poor mental health (Bunting, et al., 2020). The proportions of young people experiencing poor mental health has risen generally in recent years ([Co-Space Study](#); [IPPO](#)), and the rates of mental health difficulties among young people in NI are similar to other regions (Bunting, et al., 2022). However, there are concerns that many of our young people have suffered as a result of transgenerational exposure to trauma resulting from the conflict (O'Neill & Rooney, Mental health in Northern Ireland: an urgent situation, 2018). We also need to be cognisant of the mental health impact of the poverty experienced by one in four of our children. Childhood adversities remain the biggest predictor of mental illness (Felitti, et al., 1998; McLafferty, et al., 2017). The children most at risk of mental illness in NI are those children with health difficulties or Special Educational Needs, children whose parents have poor mental health, and children in families in receipt of welfare payments (Bunting, et al., 2020). These are the same groups of children who were impacted most negatively by the pandemic ([Co-Space Study](#)). Young people with disabilities or health difficulties need to have the additional and specialised support and services that they need in health and education. As always, structural factors and inequalities account for much of the variation in mental health across NI, including the mental health of our young people, and these need to be addressed through a focused and agreed Programme for Government, including Strategies addressing poverty, childcare and violence against women and girls. All aspects of the school environment affect children's wellbeing and we should ensure that children's basic needs for safety and security are met when they are at school. There is evidence that many families are unable to provide meals for children and that is again impacting on their mental health (Yang, et al., 2022). Therefore, the provision of free school meals to all children should also be considered as an investment to support mental health and wellbeing.

All young people with poor mental health or mental illness should be able to access evidence-based treatment and care in a trauma informed environment. There have been important recent policy developments which will improve services for young people with mental health difficulties. In particular, the Department of Health's 10-year Mental Health Strategy (Department of Health, 2021) which will, if implementation is continued and fully funded, deliver the necessary changes to mental health services for children and young people, and actions to support wellbeing and prevent mental illness.

I have previously written about the need for a trauma informed approach to education in NI and a system that values emotional intelligence and critical thinking ([Towards a New Definition of](#)

[Excellence](#)). I have also highlighted the harm caused by the continued use of the transfer test ([Part 2](#)). The systemic changes needed are within the remit of the Independent Review of Education and we await their recommendations in relation to this. My evidence to the All-Party Group on Mental Health Inquiry into Mental Health Education and Early Intervention in Schools is focused on two recommendations:

1. Equal emphasis should be placed on the measurement and improvement of the well-being of children and young people in education, as on academic attainment. Schools should be inspected by ETI on their ability to develop the conditions required to nurture young people's well-being.
2. We must ensure that the current programmes that provide additional support to young people in the school setting are maintained and that the Emotional Health and Wellbeing in Schools Framework is funded in full and consistently implemented in all schools.

### **Mental health in the curriculum**

Mental illness is preventable and early intervention is critical, it is important that young people learn about how their bodies respond to stress, and how to look after their wellbeing. There have been calls for mental health to be included in the school curriculum, however, there are many areas across the curriculum where mental health and wellbeing (emotional intelligence) are addressed. Such interventions may promote coping skills and resilience, and help young people understand the difference between stress and mental illness (Wei, Kutcher, Baxter, & Carr, 2022). CCEA's Wellbeing Hub provides resources to support the teaching of wellbeing and mental health in the curriculum, and "Learning for Life and Work" also addresses these topics. Physical Education is vital learning for the promotion of wellbeing, and there is strong evidence supporting physical activity to support wellbeing and improve mental health (Wicks, Barton, Orbell, & Andrews, 2022). Inclusive Relationships and Sex Education will give young people the skills and knowledge to build healthy relationships, and this also needs to be mandatory. These subjects need to be prioritised, delivered by teachers with appropriate skill sets and the quality of provision needs to be assessed. However, what we find is that the quality of the provision is not assessed, and league tables outlining how well schools are doing in relation to these aspects of the curriculum are not available.

### **Universal mental health programmes**

There is a need for further research to establish which school-based interventions work to prevent mental illness, and some evidence that universal programmes focusing on mental health may not be as effective as hoped (Andrews et al., 2022; Wei et al., 2022). I would therefore recommend that we proceed with caution when considering which if any of the many available mental health programmes to use. It is important that the programmes are delivered by qualified leaders in reputable organisations. Worryingly, some studies show that universal mental health interventions in schools can have a detrimental impact (e.g., in school-based mindfulness training Montero-Martin et al., 2022; Maynard et al., 2017), with some pupils reporting an increase in internalising symptoms. Young people have told me about the distress and hurt caused by the use of tokenistic mental health "classes" delivered in an insensitive manner, in an environment that was viewed as being toxic to wellbeing. As always, these approaches can only have a positive impact in a trauma-informed setting. There needs to be meaningful collaboration with pupils, a context of psychological safety,

and recognition of prior trauma, cultural, historic and gender issues. The impact of mental health interventions should therefore be monitored carefully with due consideration given to how programmes are delivered, the impact of the setting, fidelity to the model and the validity of underlying theoretical framework and theory of change.

### **Interventions to support young people with poor mental health**

There is stronger evidence of the value of psychological interventions which provide support to young people with symptoms of poor mental health. Research undertaken by the International Public Policy Observatory's Covid-19 and Population Mental Health project highlights the importance of scaling up psychological interventions to reduce the negative mental health impact of the pandemic ([IPPO : Effective, Scalable Interventions for Tackling Population Mental Health](#)). However, for these to be effective they need to be delivered discreetly in a way that does not cause further stigma. Families have told me that their children would need to miss particular classes to access therapeutic interventions, and young people have highlighted concerns about the confidentiality of the consultation, as well as stigma associated with others knowing that they were receiving support. The skill sets of teachers is also important, all teachers need to be able to respond appropriately when young people demonstrate signs of dysregulation, and they must be able to identify children at risk of poor mental health who would benefit from further assessment and support. Interventions focusing on teacher training and classroom management may have a positive impact (Fort et al., 2019). Furthermore, school based anti-bullying programmes are recognised by (McDaid & Park, 2022) as a “good buy” in terms of preventing mental illness across the lifespan and in NI we have a strong set of resources provided by the NI Anti-Bullying Forum, ([Home - End Bullying](#)) these need to be implemented across all Northern Ireland's schools.

### **The Emotional Health and Wellbeing in Schools Framework**

In 2021 the Department of Education produced the Emotional Health and Wellbeing in Schools Framework (Department of Education, 2021), and funding was provided by the Departments of Health and Education, to support its implementation and evaluation. The Framework presents a “Whole School” approach to wellbeing through the development of a caring and supportive culture. It includes early support and intervention in the school setting using a holistic, multidisciplinary approach, and measures to support early intervention and treatment for young people with mental health problems. The Emotional Health and Wellbeing in Schools Framework is an important development; however, it needs to be implemented across all schools and fully funded. In the last two years addition, the Education Authority's Flare and Reach programmes, the Engage programme, and the pilot schools counselling programme “Healthy Happy Minds” meant that more support was available. The proposed cuts to the Department of Education's budget are extremely concerning, and as Mental Health Champion I need to highlight that the possible removal of the programmes would have a devastating impact on our young people, particularly to those young people who suffered the most during the pandemic and are continuing to be affected by the cost of living crisis.

### **Inspection and Measuring Outcomes**

In her 2018 “Still Waiting Report, the Commissioner for Children and Young People called for equal emphasis to be placed on the measurement and improvement of the well-being of children and young people in education, as on academic attainment. Schools should be inspected by ETI on their ability to develop the conditions required to nurture young people's well-being. I reiterate that call,

we must create a system where positive mental health and wellbeing are fundamental to schools' values, mission, and culture, where the wellbeing of the whole school community is the priority. This requires the measurement and independent inspection of key outcomes in relation to this, and a change in culture to drive forward a trauma informed approach to education.

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