Children’s Mental Health Matters
Provision of Primary School Counselling

Place2Be

NAHT
FOR LEADERS, FOR LEARNERS
Place2Be is the UK’s leading children’s mental health charity providing in-school support and expert training to improve the emotional wellbeing of pupils, families, teachers and school staff.

NAHT is the largest professional association for school leaders in the UK with more than 29,000 members in England, Wales and Northern Ireland.

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Life in our primary schools...

• **One in five** children will experience a mental health difficulty at least once during their **first 11 years**

• **Two million** children live in a household with a parent who has a mental illness - Parrott et al., 2008

• **One million** children live with a problem drinker as a parent - Tunnard, 2002

• **Up to 35%** will report being physically abused in childhood - NSPCC

• **One third** of children are bullied at least once

• Children from households with the lowest incomes are **four times** more likely to have serious mental health problems than those from the wealthiest

Source: www.centreformentalhealth.org.uk
Mental health problems are more commonly associated with adolescents and adults than with children.

But one in five children will experience a mental health difficulty at least once during their first 11 years, and many adults with lifetime mental health issues can trace their symptoms back to childhood.

Head teachers in primary schools across England have raised pupil wellbeing and mental health as one of their top concerns.

In order to effectively support children and build their resilience for the future, Place2Be and NAHT believe all schools need access to or the ability to host professional mental health services. Some schools already excel, others are just beginning their journey.

Place2Be and NAHT have come together to provide a clear picture of provision across the country for the first time.

We hope that one day soon, with the right resources and support, every head teacher in every school across the country will be in a position to pledge to create a ‘mentally healthy’ school – giving pupils the chance to become the well-rounded, thriving adults of tomorrow.

Catherine Roche
Chief Executive
Place2Be

Russell Hobby
General Secretary
National Association of Head Teachers
Executive summary

To date, there has been a lack of data available on school-based counselling in primary schools across England. In the first survey of its kind, Place2Be and NAHT have partnered to provide a clear view of the current support available for pupils’ mental health in primary schools.

The context

In March 2015, the Department for Education published a ‘blueprint’ to help school leaders set up and improve counselling services in primary and secondary schools.

The blueprint sets out the Department for Education’s “strong expectation that over time all schools should make counselling services available to their pupils”.

An estimated 61–85% of secondary schools in the UK provide pupils with access to a counsellor. “In primary schools, there is robust evidence that a play-based counselling model is associated with significant reductions in psychological distress in primary school children.”

However, data on the number of primary schools providing pupils with access to a counsellor has not previously been available.

Key findings

The survey ran between 8 – 11 January 2016, and received 1,455 responses. It was sent to NAHT members who are school leaders of primary schools across England.

1. Over a third (36%) of primary schools report that their pupils currently have access to a school-based counsellor, compared to 64% who do not.

2. Nearly all of the primary schools who responded are engaging in activities to support pupils’ mental health including activities such as working with parents, signposting to specialist services and teaching lessons on mental health.

3. Financial constraints (78%), and a lack of services or qualified professionals locally (53%), are barriers to putting in place mental health services for pupils.

4. Of those that do have access to a school-based counsellor, 59% are on-site for one day a week or less.

5. Larger schools, and those with a higher proportion of pupils eligible for free school meals, were more likely to have access to a school-based counsellor.

6. Of those that do have access to a school-based counsellor, 84% are fully or partly funded by pupil premium funding.

* There are 16,756 primary schools in England

‘When I have problems, I can get advice about how to manage the situation and to find ways to calm down if I’m feeling pressured or upset.’ 

Girl, 10 – perspective on having Place2Be in school
School-based counsellors in English primary schools

- \( \frac{2}{3} \) do not have a counsellor based on-site
- 1 day a week or less is how often majority of on-site counsellors are available
- 84% use Pupil Premium funding to cover the cost of their school-based counsellor

Support for pupils’ mental health in English primary schools

- 2 in 5 have a member of staff trained on mental health issues
- 63% provide lessons on mental health
- 1/3 have a peer support programme
- 79% have advised parents to go to a GP

NAHT member

‘If we could access specialist support early for our children I think some of the issues seen later in their education could be avoided.’

NAHT member

‘I believe our school, like many others, needs a higher paid, specifically trained counsellor. Counselling requires specialised, intensive training... specifically tailored for work with young people and children. This is much needed.’

NAHT member

Barriers to providing mental health support for pupils

- 78% say financial constraints are a barrier
- 53% of schools believe a lack of services or qualified professionals locally is a barrier

‘When I have a big big problem + I don’t want to tell the teacher, so I come for a different person to talk to and it makes it clearer and I know what to do if it happens again.’

Girl, 7 – perspective on having Place2Be in school
Almost two thirds of primary schools do not have an on-site counsellor and, for those that do, the majority (59%) are available for one day a week or less. Some schools were more likely to have invested in a school-based counsellor, for instance those with a large number of pupils eligible for free school meals.

Profile of respondents

The survey received 1,455 responses, with the majority (84%) from primary schools, and a smaller number of infant and junior schools (both 8%).

The most common school size was between 251 and 450 pupils (i.e. a two-form entry primary school).

Community schools (including foundation, voluntary aided and voluntary controlled) made up 82% of responses, academies and free schools represented 15%, and independent and non-maintained schools made up 3% of the sample.

Access to school-based counselling

Over a third (36%) of primary schools report that their pupils currently have access to a school-based counsellor, compared to 64% who do not.

Larger schools with more pupils are more likely to have invested in a school-based counsellor (figure 1).

According to the Centre for Mental Health, children from households with the lowest incomes are four times more likely to have serious mental health problems than those from the wealthiest.

In addition, poor mental health is a barrier to learning and is associated with lower attainment, and this is recognised by schools, as 84% of those we surveyed who have invested in a school-based counsellor say the role is fully or partly funded by pupil premium funding (funding from the Department for Education to raise the attainment of disadvantaged pupils). Schools with a greater proportion of pupils eligible for free school meals are more likely to have access to a school-based counsellor (figure 2).

The availability of school-based counselling for pupils varied greatly – with over one in six (17%) providing a counsellor to pupils five days a week, but more than half (59%) for just one day a week or less (figure 3).

The largest schools (451 pupils or more) are also much more likely to have employed a ‘full-time’ counsellor (26%) compared to smaller schools, for instance those with 151-250 pupils (5%).

‘Many students’ mental health and wellbeing issues derive from chaotic or challenging homes where parents also have mental health issues. We use many different strategies to get the children to attend school including a free breakfast club and free after school clubs (paid for by Pupil Premium).’

NAHT member
Figure 1
Access to school-based counselling by school size
Respondents: 1443

Do not have access to a school-based counsellor
Have access to a school-based counsellor

81% 68% 61% 48%
19% 32% 39% 52%

School size (number of pupils)

Figure 2
Access to school-based counselling by % eligible for free school meals
Respondents: 1436

Do not have access to a school-based counsellor
Have access to a school-based counsellor

81% 70% 68% 59% 52% 62% 64%
19% 30% 32% 41% 48% 38% 36%

% of pupils eligible for free school meals

Figure 3
Availability of school-based counsellor
Respondents: 508 with a school-based counsellor

59% 14% 7% 4% 17% 0.4%
1 day per week or less 2 days per week 3 days per week 4 days per week 5 days per week Don't know
The majority of primary schools (64%) do not have a counsellor based on-site, although they may be supporting pupils’ emotional wellbeing in other ways. When asked about the barriers to putting support in place, financial constraints and a shortage of qualified professionals locally were common causes.

**Barriers**

Financial constraints (77%) top the list of barriers to putting in place mental health support for primary schools without a school-based counsellor (figure 4). Other common barriers include the lack of services or qualified professionals locally (61%) and the lack of physical space in the school (46%).

Where primary schools do not have an on-site counsellor, most head teachers report that they will refer pupils to Child and Adolescent Mental Health Services (CAMHS), or encourage parents to visit their GP who can refer on to specialist services (figure 5). Nearly two in five (39%), have a trained member of staff to provide support at various levels, and 29% have access to a counsellor or therapist who is not based on-site.

While schools with access to school-based counsellors tend to be more likely to engage in a range of other activities relating to pupil wellbeing, such as raising awareness through lessons on mental health or peer support programmes (figure 6), the vast majority of schools without school-based counsellors were involved with at least one activity to support pupil wellbeing (89% of respondents ticked one or more options).

‘We have good relationships with CAMHS staff but they are understaffed, under resourced and lack capacity to deliver any in depth therapeutic support.’

NAHT member

‘Parents are more often advised to seek a referral to CAMHS from the GP as the process via school can be a long time.’

NAHT member

‘We don’t have a lot of spare room but we would find it if we could afford to have all the counselling we need.’

NAHT member
Figure 4

Barriers to providing mental health support
Respondents: 813 without a school-based counsellor
Respondents could tick more than one option

- Don’t believe that supporting pupils’ mental health is a school’s responsibility: 0.1%
- Staff team can handle any issues themselves: 1%
- Prefer to refer to external specialist services: 4%
- Other school improvement priorities: 8%
- Difficulty securing training for staff: 15%
- Lack of relationship with Social Care: 17%
- Difficulty recruiting specialist staff: 28%
- Time constraints: 42%
- Lack of relationship with Health services: 46%
- Lack of space in the school for counselling room: 61%
- Lack of services or qualified professionals locally: 77%
- Financial constraints: 77%

Figure 5

Other sources of support for schools without a school-based counsellor
Respondents: 813 without a school-based counsellor
Respondents could tick more than one option

- Referral to specialist CAMHS: 87%
- Advise parents to visit GP: 77%
- Referral to other specialist external agencies: 40%
- Trained member of staff: 39%
- Peripatetic / off-site counsellor or therapist: 29%
- In-school CAMHS worker: 2%

Figure 6

Other activities to support pupils’ mental health
Respondents: 1242

- Peer support programme: 41%
- Mentor programme: 38%
- PSHE* lessons on mental health: 71%
- Nurture** groups: 69%
- Signposting to other services: 80%
- Working with parents: 91%
- Working with health and social care: 79%

*Personal, social, health and economic (PSHE) lessons

**Nurture groups are small, structured teaching groups for pupils showing signs of behavioural, social or emotional difficulties, particularly those who are experiencing disruption or distress outside of school. They aim to provide a predictable environment in which pupils can build trusting relationships with adults and gain the skills they need to learn in larger classes.
Schools with school-based counsellors

The Department for Education introduced a list of criteria of a good school-based counselling service in its ‘blueprint’ first published in March 2015. We asked those schools with access to a school-based counsellor to what extent their counselling service meets these criteria. (461 respondents)

Awareness

In almost all schools (98% agree or strongly agree), head teachers are confident that staff are aware that a school-based counselling service is on offer (figure 7). This contrasted with 77% of schools who think parents are aware, and 63% who think pupils are aware that counselling is available for them in school.

The counsellor

Most head teachers are confident that their school-based counsellor is suitably qualified (95% agree or strongly agree), and familiar with the school and its policies (91% agree or strongly agree) (figure 8).

However, fewer are sure that the school-based counsellor can advise on relevant legislation and procedure, such as child protection and safeguarding procedures (79% agree or strongly agree).

Only 65% of head teachers are confident that clinical supervision\(^4\) is in place for their school-based counsellor, and more than one in ten (11%) believe it is not in place. This may simply indicate that head teachers are unaware of clinical supervision as it may happen off-site and may not be paid for directly by the school.

Well-established counselling services

Finally, we asked school leaders how well-established elements of their counselling service are. The majority (86%) have a named member of staff who is the main point of contact for the school-based counsellor, and the school-based counsellor has the opportunity to meet regularly with the school’s inclusion team (75%).

Other areas were less well developed (figure 9), for instance only 21% of head teachers said it is well-established that pupils can refer themselves to a counsellor. More than half (55%) feel that pupil involvement in the development of the service is not yet in place.

In schools where self-referral by pupils is well established, awareness of the counselling service on offer is greater (99% agree or strongly agree that pupils are aware, compared to 63% across all schools).

Almost a third of respondents (30%) said that a clear complaints procedure\(^5\) for the school-based counselling service is not yet in place, or they didn’t know if one was in place.

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\(^4\) Clinical supervision is a professional requirement for counsellors, and is fundamental to ensuring safe and effective practice. It is therefore crucial that head teachers have an understanding of what supervision will take place when they are commissioning counselling services.

\(^5\) A clearly articulated complaints procedure through an external organisation or professional body gives assurance to schools that the counsellor is held accountable for their practice. Again, head teachers should be aware of this when commissioning counselling services.
Figure 7
Awareness of in-school counselling services  Respondents: 461 schools with a school-based counsellor

Figure 8
School-based counsellors  Respondents: 461 schools with a school-based counsellor

Figure 9
School-based counselling service  Respondents: 461 schools with a school-based counsellor
The extent to which schools had an on-site counsellor varied across regions (figure 10). Availability was highest in London (57% of responding schools in the region had a school-based counsellor), whereas in the East Midlands only one in five (21%) schools have an on-site counsellor.

In terms of barriers to providing pupils with mental health support, financial constraints top the list across every region, although this seems to be of greatest concern in London (86% compared to 78% on average). A lack of access to services or qualified professionals locally is perceived as a significant problem in Yorkshire and the Humber (62%) and the West Midlands (61%), but is less of a concern to head teachers in London (34% compared to 53% on average).

### Has access to a school-based counsellor

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<tr>
<th>Region</th>
<th>East</th>
<th>East Midlands</th>
<th>London</th>
<th>North East</th>
<th>North West</th>
<th>South East</th>
<th>South West</th>
<th>West Midlands</th>
<th>Yorkshire</th>
<th>England</th>
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</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>48%</td>
<td>21%</td>
<td>57%</td>
<td>40%</td>
<td>31%</td>
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<td>34%</td>
<td>28%</td>
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<td>36%</td>
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### Does not have access to a school-based counsellor

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<th>London</th>
<th>North East</th>
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<tr>
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<td>66%</td>
<td>72%</td>
<td>76%</td>
<td>64%</td>
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</table>

Percentage of responding schools in each region
Figure 10
Proportion of English primary schools with access to a school-based counsellor

21-30%
31-40%
41-50%
51-60%

‘We used to have a counselling service in school which was amazing but due to budgetary pressures we had to stop this service. Now there is virtually no accessible provision in our area.’
NAHT member

‘If there was more funding we would provide even more as we feel this is the key to supporting our children. If they are not feeling emotionally safe, secure and happy then they are not in a place to learn.’
NAHT member

‘There is a big gap in provision in this area for primary age children. When we feel we need more specialist intervention or advice than we are able to provide, there is not much else to access’
NAHT member
**Recommendations**

**Place2Be’s Ambition for ‘Mentally Healthy’ Schools**

Our ambition is for all schools to be ‘Mentally Healthy’ and provide excellent mental health support for all their pupils.

To achieve this ambition we need:

→ **Teachers** to receive training and develop their understanding of children’s mental health and behaviour as part of Initial Teacher Training and Continuing Professional Development.

→ **Schools** to have resources to put children’s emotional wellbeing at the heart of their education, to tackle stigma and provide professional support by appointing a school-based counsellor, with the capacity to take a ‘whole school’ approach.

→ **Counsellors** to receive high quality training to deliver first-class child counselling and ensure a high calibre workforce of professionally trained counsellors around the country.

→ **Government**, both Education and Health, to invest in early intervention and school-based support and ensure continuity of support between schools and specialist CAMHS.

→ **Ofsted** to further recognise the importance of mental health, and building children’s resilience, both in its own right and for the role this plays in underpinning academic progress.

**NAHT Policy & Campaign Goals**

To make sure children and young people with mental health issues receive the support they need by:

→ Improving the effectiveness of partnership working between education, health and social care.

→ Supporting the development of CAMHS services to ensure timely access is available to all pupils who need specialist services.

→ Ensuring school leaders, teachers and other school workers have the training, information and resources they need to support pupils in their schools.

→ Recognising the importance of investing in mental health at a young age to help prevent problems later in life, and to allocate adequate funding.

To promote good mental health and emotional wellbeing in schools by:

→ Securing the delivery of high quality, statutory PSHE in all schools, giving teachers dedicated time to teach about good mental health.

→ Developing strategies to protect the mental health of all school staff.
With thanks for generous support from

ALLEN & OVERY

and

CAMPAIGN FOR MENTAL HEALTH AND WELLBEING IN SCHOOLS