

Ensuring the wellbeing and mental health of young people is an important priority both for policy makers and teaching staff in our schools, given the adverse impact both issues can have on the development and academic attainment of students. The importance of addressing a range of factors that can impact both upon wellbeing and mental health is reinforced in a range of policy and practice in the classroom as part of a holistic approach to learning. The Welsh Government focuses on two key aspects – ensuring the wellbeing of the child and responding to mental ill-health experienced by young people.

Interpreting what is meant by the term ‘well-being’ is not straight forward. The Social Services and Well-being Wales Act 2014 states that “Well-being means a person is happy, healthy and is comfortable with their life and what they do.” The United Nations International Children’s Emergency Fund (UNICEF) identifies in the United Nations Convention on the Rights of the Child (1989) that wellbeing encompasses five different strands namely; “behaviours and risk, health and safety, housing and environment, material well-being and education.” (Claveirole, 2010). The intention of the United Nations in publishing the convention was to establish international norms of wellbeing for all children to ensure that they received their rights to protection from harm, access to education with signatories to the convention doing so because they recognised the importance of wellbeing to the development of children.

Wellbeing is not only about survival or being able to cope in our everyday lives, but to be able to succeed, prosper and flourish in our daily life. Generally wellbeing is self-motivated and changeable according to circumstances and can fluctuate at different times in our life and be re-established later. Wellbeing of children and young people is often affected by the wellbeing of the adults who care for them, such as parents or guardians, whose wellbeing is affected in turn by their social and financial positions, which is affected by social and economic circumstances. According to Bradshaw “The wellbeing of the whole child must be attended to by thinking about all aspects of their wellbeing.” (Bradshaw, 2011)

Mental Health is a generic term encompassing a variety of specific clinical conditions, including anxiety, depression, obsessive compulsive disorders, schizophrenia and psychosis. “Mental Health encompasses our emotional, psychological and social wellbeing.” (Welsh Government, 2020) and mental health affects how we think, feel and behave. Mental health issues can result from environmental or genetic factors. They may derive from a child’s family or be personal to that child, and often multifactorial in nature. Good mental health is not just the lack of any mental health issues. Children and young people must be encouraged to reach their full potential in all aspects of their lives, intellectually, spiritually, physically and emotionally. For example, developing an identity of their own, to find confidence in themselves and to be resilient. The ability to have positive relationships with others, be aware of peoples’ feelings and have the maturity to participate in and sustain mutually satisfying relationships. For children to thrive they must learn to play and find pleasure in doing so; to feel they belong and have a sense of purpose. They must also grasp the difference between right and wrong. (Claveirole, 2010). “A large number of personal, physical, behavioural, social economic, cultural and environmental determinants contribute to mental health and mental well-being.” (Claveirole, 2010, p.14).

The Social Services and Well-being Wales Act 2014 sets out a legal framework clearly identifying the duties imposed on local authorities to “promote the well-being of those who need care and support.” The Act identifies that well-being is made up of eight key parts, and although applicable to both adults and children identified as being “at risk” the Act includes specific measures directly relevant to the educational setting including a requirement that children are, “being protected from abuse, harm and neglect” and have access to “education, training sports and play.” (Welsh Government, 2014)

The “Well-being of Future Generations (Wales) Act 2015” further reinforces the importance of ‘wellbeing’ by creating a statutory duty on public bodies, including education authorities, to consider well-being. Public bodies are required to publish well-being objectives that set out how they will achieve each of the well-being goals.” Ceredigion County Council has published a ‘Local Well-being Plan 2018-2023’ which sets out how it will achieve 6 key objectives, including ‘enabling people to live active, happy and healthy lives. (Welsh Government, 2015)

The importance of ensuring both wellbeing and mental health is supported in research such as Maslow’s ‘Hierarchy of Needs’ identifies the needs that must be met for a child to attain their full potential. Where the wellbeing needs of a child are not being met, for example they are not living in a safe environment or experience neglect or abuse, the failure to attain basic physiological needs, or a sense of love, and belonging means that higher developmental needs and self-actualisation cannot be achieved. “Wellbeing therefore involves experiencing healthy self-esteem and feeling worthwhile and able to contribute positively.” (Under down, 2007, p.5)

The need for a child to be loved and have a sense of belonging is an important factor identified by Bruner who conducted research in post war German orphanages. He identified that those children growing up experiencing harsh and strict conditions “grew more slowly and gained less weight” (Under down 2007) than those children who experienced a more loving and affectionate environment, even though both groups of children received the same food rations. The importance of a warm, loving and sensitive relationship between a child and their primary care giver was reinforced by Bronfenbrenner’s “Ecological Systems Model’ which suggests, all relationships in the microsystem are seen as “bi-directional and reciprocal.” Factors such as depression, mental health disorders, smoking and stress affecting the mother can have detrimental effects on the unborn child. He believed warm, loving, sensitive, and supportive interactions between babies and their main caregiver can affect attachment, and have long-term repercussions for health and wellbeing. (Under down, 2007).

Such a lack of love and care and other ‘Adverse Childhood Experiences’ (ACE’s) such as neglect and abuse impact on both the wellbeing and mental health of children, and in turn adversely affect outcomes achieved in life. Research demonstrates that experience of ACE’s can have a detrimental impact on both the mental health and well-being of the child, who is more likely to have poor performance at school and go on to develop violent behaviour, and possibly have a criminal record. The child is also more likely to develop psychological problems from being exposed to ACE’s, which can leave them feeling anxious, depressed with low self-esteem, and an inclination towards destructive behaviour, offering short term respite at the cost of longer-term health. “Preventing ACEs can improve health across the whole life course, enhancing individuals’ well-being.” (NHS Wales, 2015)

The Coronavirus pandemic required the UK government to force communities all over the United Kingdom to ‘lockdown’ and close all schools. Consequences of ‘lockdown restrictions’ have been varied and considerable, including increased feelings of isolation and loneliness amongst children who are missing normal interaction with friends and staff. In normal circumstances children spend more time at school with children of a similar age. Research suggests “students spend up to one-third of their waking hours per week at school where learning academically and socially takes place.” (Huberty, 2012) This very important developmental setting is key to good mental health and well-being.

Economic impacts of closing shops and businesses include a significant loss of jobs. According to the Guardian, two hundred and sixty-two thousand, two hundred and seventy-nine people have been made redundant, and nine million, six hundred and two thousand people have been furloughed as a result of the pandemic. The impact for families from disadvantaged neighborhoods is even greater, as many are being forced into inadequate housing as they struggle to pay bills and buy food for their children.

The impact of 'lockdown restrictions' includes families being required to 'stay at home' for long periods of time resulting in increased family tensions and abusive situations. For example, students living in a hostile environment where they have suffered abuse, would be more vulnerable, and have higher probability of developing emotional difficulties if the student continues to live in the same hostile environment. However, the student who has suffered abuse, but removed to a caring, loving, helpful environment is highly likely to stick to an adaptive developmental track, and will not experience any major negative effects. (Huberty, 2012)

For nearly all children, the school community is a key part of their social environment and offers an important support network. A lack of connections, and resources leave large numbers of children and young people socially excluded, which in turn can lead to mental health problems. Research by Maslow suggests that "social exclusion is the most common and important cause of anxiety, because it is accompanied by feelings of isolation, loneliness and depression." (Taormina & Gao, 2013) whilst children who experience depression are more prone to experiencing anxiety and learning difficulties such as Attention Deficit Hyperactivity Disorder (ADHD).

Children and young people who have ADHD are also prone to other mental health difficulties, especially depression in adolescence. (Child Mind Institute, 2020) In the United States of America comorbidity is very high, ranging from twenty five percent to eighty percent. Large numbers of children who are referred to mental health professionals have two or more comorbid disorders, which is the rule rather than the exception. (Huberty, 2012) For these children following the National Curriculum can be challenging and stressful, many leave school altogether. The National Council for Curriculum and Assessment (NCCA) suggests well-being must emphasise how children progress in both 'psychological and 'physical' ways. Therefore, children's interactions and relationships with their schools and communities are key areas in supporting their wellbeing. In the 'Every Child Matters' report the intention was for every school to become an 'Extended school' offering pupils a range of services that "go beyond their core educational function." (Every Child Matters, 2003) Many schools in Wales are lacking such facilities to provide community services such as childcare and children's information services. Included in Bronfenbrenner's mesosystem are community involvements such as children's centers, research suggests mothers who have a strong network surrounding them and the family, are less likely to experience depression and mental health disorders. (Under down, 2007)

In my setting after coming out of 'lockdown' together with Headteachers, Ceredigion County Council helped to ensure all schools in the area promoted wellbeing, and school staff helped the children to explore feelings of distress, and anxiety by devoting the whole month of September to holistic learning and wellbeing, easing them gently back into school life. "Give some time to talk and process what is happening." (Ceredigion County Council, 2020) Such a 'whole school approach' was successful in reducing pupil's mental ill-health and increasing "prosocial behaviour and adoptive behaviours such as coping and being resilient." (Welsh Government, 2019) Holistic learning has been the focus of the new curriculum which is due to be rolled out in 2022. Health and wellbeing will replace the personal, health and social education lessons which should significantly improve outcomes for children's awareness of mental health.

Schools attempt to tackle the issues children and young people face by providing interventions early on to support the well-being of their students such as personal, social, health education (PSHE) and substance misuse. Interventions such as The Healthy Schools programme are often commonplace in schools. However, lessons on these subjects are too few and far between, and staff are not sufficiently trained to deal with often complex issues the children are having to face. According to (Will, 2020) "teachers are tasked with implementing new social-emotional learning practices in their classrooms without adequate, ongoing support, which can tank the effectiveness of the initiative." The Covid 19 pandemic has made

supporting students with mental health issues even more challenging as their learning moves online. At times the issues faced are far too great for the student and education authority to cope with alone and may require further assistance from agencies such as Child Adolescent Mental Health Service (CAMHS).

The CAHMS Services undertake assessments of a child's needs and provide treatment to children and young people with mental health, emotional or behavioural difficulties. The importance of early intervention and effective protection is promoted in 'Every Child Matters' guidance, the aim of which is to ensure that "Every child has the chance to fulfill their potential." The importance of effective protection and early intervention is identified in 'Every Child Matters' and reflected in the proposed investment to increase CAHMS capacity by 10% each year, however this has not been sufficiently achieved. (Every Child Matters, 2003) Insufficient resources, together with lack of information sharing and shortage of space to accommodate children within their facilities the service is often insufficient to meet demand, and long waiting times for support are experienced. Research identifies that one in four children referred for specialist CAMHS support are turned away, whilst other children must wait between 14 and 200 days for an appointment. More than 338,000 children were referred to CAMHS in 2017, however less than a third had received treatment within a year, with the result that 75 experienced a deterioration in their condition. (Local Government Association, 2020)

A joint follow up review by the Wales Audit Office, and Healthcare Inspectorate Wales concluded, the action taken by the Welsh Government and the relevant health boards have reviewed procedures and revised policies, but failure to improve "practice on the ground" continues. Huw Vaughan Thomas, the auditor general for Wales said, "Despite the steps taken to address concerns in the report, children and young people continue to be put at risk." (Healthcare Inspectorate Wales, 2009) Children and young people accessing such agencies like CAMHS need strong support networks around them. Bronfenbrenner's mesosystem identified that families cannot exist in isolation. Settings such as school and nursery play a crucial role in supporting the child's wellbeing. According to Underdown "the child's well-being could easily be affected by either the positive involvement or the tension between parent and the school." (Underdown, 2007)

In conclusion education authorities and schools have a critical role to play in enabling children to experience good mental health. The constraints of the National Curriculum mean that the individual needs of a child cannot always be fulfilled and may result in increased mental ill-health. Many referrals to mental health professionals are related to school associated problems such as bullying, peer relationships and exam pressure. Students who lack skills either socially, academically or both in some cases, are more likely to develop forms of psychopathology at some point during their young lives, including depression, behaviour problems, substance misuse and anxiety. The specialist nature of the support required can't always be met within existing resources. As a result, it is essential for all staff across educational settings to receive adequate training on mental health issues and disorders. Progress has been made, and teachers and staff are cognisant of the indicators of mental health issues in children, such as anxiety, self-harm and sleep difficulties, which have negative effects on their education, which in turn lowers their life chances. The weight of following the National Curriculum and the stress on children to conform to educational standards, and constant assessments have left schools unable to adopt broader community interactions. The lack of funding and resources also puts considerable strain on teachers and support staff who are trying to help children navigate their way through difficult periods in their young lives. The school is not just an important setting for the academic development of the child, it is also key to good mental health and well-being, particularly given a large amount of referrals to mental health professionals are related to school associated problems such as bullying, peer relationships and exam pressure.

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