

Counsellors in School Education: Submission from Children 1st to the Education and Skills Committee

September 2020

Children 1st is Scotland's national children's charity. For many years Children 1st has been alarmed by the way that children's right to appropriate, high- quality support to help improve their mental health and emotional wellbeing is not being fully realised in Scotland.

We have written more extensively about our concerns in this area and our views on emotional distress in our initial submission to the Education Committee's Inquiry.¹ For the purpose of this short follow-up response we wanted to specifically highlight our joint work alongside East Renfrewshire Council and the Robertson Trust to develop an alternative way of supporting families.

The findings from this model, set out below, as well as the learning from the current pandemic, offers an opportunity to think about a different approach to addressing children's emotional and mental health needs at a much earlier and universal stage. **While school counsellors may be part of the solution, we believe that there needs to be a much more radical approach to helping children who are emotionally distressed that includes support for the whole family.** This has never been more important as we begin to consider the emotional toll of lockdown, isolation, distress, loss, bereavement and family breakdown on children as they begin to go back to school.

Why school counselling alone is not enough for families

We are particularly concerned by the way that some children and young people are presenting at universal services with requests for support around anxiety, depression and associated behaviours with their distress being interpreted as mental illness in need of medication or clinical diagnosis often without follow up treatment.² Our practice experience, and informed by the children and families we support, has shown that the more likely hypothesis that many of these children are presenting coping behaviours (such as self-harming) which are actually symptomatic of family stress, pressure on relationships and unresolved trauma and loss issues. With nowhere else to turn, professionals such as GPs are forced to refer children to vital but specialist clinical services like CAMHS when **we believe that more often children require skilled, relationship- based support for the entire family to help build understanding of what has led to the current issues, strengthen family relationships and improve emotional wellbeing.**

We recognise that many organisations are skilled providers of counselling and there is a determination at all levels of national and local Government to address the existing gaps in mental health provision for children and young people. However, we are concerned that a focus on school counselling for individual children leaves a **significant gap in terms of what we believe would make the biggest difference to improving children and young people's mental health and emotional wellbeing: relationship- based whole family support.** It is essential that parents and carers are supported to understand their child's distress and are included in any support plans to alleviate it.

¹ https://www.parliament.scot/S5_Education/Inquiries/20200129CHILDREN_1ST.pdf

² See, for example: <https://www.bbc.co.uk/news/uk-scotland-44934589>; <https://www.thetimes.co.uk/article/big-regional-divide-over-children-on-adhd-drugs-fvws5wbpt>, etc.

Emerging research is demonstrating that many children and young people are experiencing emotional distress following lockdown and the impact of the coronavirus pandemic. For some children it will be helpful for them to access a school counsellor to talk through their experiences and help them to recover. However, we know that children's emotional wellbeing is most often compromised within family relationships—and it is also protected and recovered within family relationships. In our view this approach may help an individual child but would not necessarily address the root causes behind their distress, which are often rooted in family relationships.

Many of the children who require support following the coronavirus pandemic will be experiencing perfectly natural responses to being at home for prolonged periods of time—sometimes when home is not a safe or nurturing environment. There is therefore an urgent need to address the significant underfunding of trauma-informed and recovery focussed approaches that encompass support for the whole family and draw on family and community strengths to alleviate the way that children's emotional distress is understood and manifests. This is opposed to medicalising children's distress and labelling them as requiring 'counselling' when their reaction is indeed line with their experiences.

We do not believe that most children need 'counselling' but rather a strong and trusting relationship with someone that can get alongside them, challenge them, believe in them, advocate for them and help them to connect better to their family and community. Support may encompass family members or may lead to a one-to-one relationship, but it must involve a flexibility and choice that is child-centred and mindful of the family and community in which a child lives.

This is why we developed the Family Wellbeing Service in East Renfrewshire.

East Renfrewshire Family Wellbeing Service

In recognition that there is an alternative way to support families to respond to and address the root causes behind emotional distress and build on their strengths Children 1st and East Renfrewshire Council have collaborated on a dynamic new project co-located in GP surgeries in East Renfrewshire.

Children 1st have worked alongside a range of young people (and their families) experiencing issues ranging from self harm, anxiety and low mood to difficulty in managing emotions, loss and bereavement, bullying and sexual violence. Some of the children we worked alongside have experienced the impact of their parents' own unresolved difficulties or adversities.

Many of these children would ordinarily have been referred by their GP to CAMHS—and potentially faced long waiting lists or been rejected for not meeting the criteria, leaving families with nowhere to turn. Instead, we have worked hard to establish relationships with both the child and the family to address the underlying causes behind a child's emotional distress and resulting behaviour. Our approach is child-centred but family-minded. It also incorporates money advice, where necessary, given the links between money worries and parents' abilities to cope with external pressures. The main framework in our approach is drawn from attachment, trauma sensitive practice and systemic family therapy.

The results have been significant. In the two years since the project has been running we have seen a 50% reduction in repeat presentations to GPs for young people referred to the Family Wellbeing Service with emotional distress. 75% of children and young people feel calmer and are less anxious while 75% parents told us that they were better able to understand and support their children emotional wellbeing. 75% of families have increased emotional warmth within their family and 75% of children, young people and families are able to cope better with stressful events and change.



We are keen to work alongside the Scottish Government to discuss our learning from this approach and how it might help us to embed a rights- based approach to responding to children's emotional distress and wellbeing concerns by working alongside the whole family. We believe that this is in line with the fundamental principles identified in the report from the independent care review, The Promise.

We urge the Parliament to consider how the funding allocated to school counsellors could be used in a much more flexible way to incorporate whole family support rather than focusing on individual children.

If you would like any further information or would like to discuss our response in detail please do not hesitate to contact Children 1st's Policy Manager Chloe Riddell:
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