

The Educational Institute of Scotland

IMPACT OF INCREASING NUMBERS OF PUPILS BEING IDENTIFIED WITH SOCIAL, EMOTIONAL AND MENTAL HEALTH ISSUES ON TEACHERS AND PUPILS

Background

At its AGM in June 2017 the EIS approved a resolution on the impact of increasing numbers of pupils and students being identified with social, emotional and mental health issues, at a time of cuts to additional support needs (ASN) provision, which stated:

"This AGM instruct Council to investigate and report on the impact of increasing numbers of pupils and students being identified with social, emotional and mental health issues, on teachers, lecturers, students and pupils at a time of budget cuts reducing the numbers of ASN teachers and learning support assistants."

Context: increasing pupil need

Pupil census data was examined to identify the demographics of the pupil population. The December 2017 data shows that 183,491 pupils (26.6% of all pupils) had an additional support need recorded. This includes pupils in special schools and those in mainstream schools with:

- a Coordinated Support Plan (CSP – 2,182 pupils)
- Individualised Education Programme (IEP – 35,164 pupils)
- Child Plan (32,009 pupils)
- some other type of support.

Many of these children will have social, emotional or mental health needs, but the census does not include data on these aspects of ASN.

Other data and information sources were used to ascertain the scale of need among pupils. The Scottish Children's Services Coalition reports that:

- 10% of children and young people (aged five to 16) have a clinically diagnosable mental health problem;
- 20% of adolescents may experience a mental health problem in any given year;
- these problems disproportionately affect those children and young people from lower income households and areas of deprivation.

An Oct 2017 study¹ by the Universities of Edinburgh, Aberdeen and Glasgow of almost 4,000 children found that children from more deprived backgrounds are

¹ *Primary schools and the amplification of social differences in child mental health: a population-based cohort study, Journal of Epidemiology and Community Health, Oct 2017*

starting school with higher levels of social, emotional and behavioural difficulties, and these are getting worse over time. The study found that:

- 4.1% of children from the most affluent backgrounds displayed social, emotional or behavioural difficulties when they started school, falling to 3.6% by primary three; and
- 7.3% of children from the most deprived areas had mental health difficulties at the start of school, rising to 14.7% by primary three.

Context: declining staff numbers

Teacher census data was examined to identify the demographics of the staff population. The 2017 census (Table 10.2, Centrally Employed Teachers by Subject) showed that 435 ASN teachers are employed across Scotland, compared with 480 in 2016 – a cut of 45 teachers.

There have also been substantial cuts to the numbers of other Support for Learning staff, e.g. Pupil Support Assistants. Unison Scotland has reported that there are 1,841 fewer support staff in Scottish schools now than in 2010.

Detailed teacher data is shown below, and shows all but two roles decreasing in number, despite increasing levels of need among the pupil population.

Centrally employed teachers by main subject taught (Source: Teacher census, table 5.2, 2017/16)²			
SUBJECT	2017	2016	Difference '16-'17
ESL (English as a second language)	97	87	+10 teachers
Learning Support	229	243	-14 teachers
Additional support needs – general	36	45	-9 teachers
Additional support needs – behavioural support	45	59	-14 teachers
Additional support needs – learning difficulties	69	74	-5 teachers
Hearing impairment	25	33	-8 teachers
Visual impairment	30	27	+3 teachers

ASN Network perspective on impact

² <http://www.gov.scot/Topics/Statistics/Browse/School-Education/teachcenssuppdata/TeaSup2017>

The terms of the Resolution were raised with the Additional Support Network, who observed that:

- there is not enough provision for this cohort of pupils, e.g. specialist units
- there are waiting lists for services
- CAMHS referrals are being rejected or appointments missed and opportunities to address mental health issues lost
- supporting suicidal children, with no resources, has a profound impact on teachers
- prevalent issues among the pupil population include self-harming, suicidal ideation, attachment disorders, the exacerbation of ASN issues such as autism because of bullying/exclusion
- teachers are being given inadequate information about pupil background, e.g. vague reports of 'difficulties at home', due to concerns about information sharing
- parents with mental health issues are adding to teacher stress
- changes to social security systems are adding to parental stress.

Headteachers' perspective on impact

Views from school management staff were gathered via the Headteachers' and Depute Headteachers' Network, both in discussions with members present at a November 2017 Network meeting, and also through colleagues' comments which were collated and shared with the Education and Equality Department. The general consensus was that demand for support is growing significantly and that most schools are struggling to meet this demand within existing provision.

One DHT with management responsibility for Pupil Support said, *"we are being asked to do more and more with some of the most vulnerable young people in Scotland, while at the same time losing EAL and ASNA (ASN Assistant) support. The pressure on PTs Pupil Support to maintain records/attend meetings/reviews...is enormous"*.

Regarding "youngsters who are experiencing real distress" and who exhibit this through challenging behaviour, the same DHT said, *"Often we have no option but to send them home. This feels like we are failing the youngsters and their families."* They also spoke of the distress caused by increased numbers of violent incidents and personal abuse/threats to staff. One Headteacher said, *"Across the board you've got children's needs not being met."*

Other Headteachers and DHTs mentioned:

- the lack of specialist support for children with English as an additional language (who may not all have social/emotional/mental health issues, but some of whom will) – these pupils can be *"thrown into the deep end"*
- the change to the demographic in mainstream schools: *"We are now dealing with young people for whom, only a few years ago, mainstream would have been considered inappropriate."*

- the lack of support from local authorities: *"Nothing is coming from the authority to help support the behaviour of youngsters who are experiencing real distress."*
- the lack of support from other external agencies, e.g. the Child and Adolescent Mental Health Services (CAMHS), NHS, Social Work, Speech and Language services, and Educational Psychology, because of cuts: one member put it that these agencies *"sit at the table, but they won't give you anything, because of the cuts they've experienced"*
- schools being inundated with offers of short, one-off interventions on e.g. mental health but no equivalent, long-term strategic investment
- deficits in professional learning on these matters, with teachers not having the necessary training to deal with mental health distress among learners, such as self-harming behaviour.

Some stark examples of the reduction in external support were provided. For example, in one school, Educational Psychology provision was down from one day a week to two hours every fortnight. One authority spoke of CAMHS waiting lists of 9-10 months and a 'massive reduction' in engagement with them as a result. One authority has a Youth Counselling Service with a waiting list of approximately eight weeks, which used to offer young people 7-10 sessions and now offers a maximum of four. The Falkirk area now has no Speech and Language therapists. One member described his area's youth service as having been 'decimated'.

The changing role of Pupil Support Assistants/Support for Learning Teachers was mentioned: *"They used to sit beside kids but all they ever do now is crisis management"*.

Local Association Secretaries' perspective on impact

Information was gathered on issues members were raising with Local Association & Branch Secretaries in relation to the rising need amongst pupils and students for specialist support against a backdrop of cuts to ASN staffing (both teachers and support assistants). The general consensus from the responses received was that this is an issue of significant concern among members, causing high levels of stress and eroding morale across school communities. Only one LA Secretary had no issues to report, although comment was made about stress-related absence.

There was a very strong theme among responses of teachers knowing that they are unable to meet pupils' needs in the current context, and of that being hugely concerning and dispiriting. Several respondents used words like, 'impossible', 'exhausting', 'stretched', 'particularly difficult times', 'frustration', and 'fire-fighting'. One teacher summed it up when she spoke of the *"overwhelming sense of being unable to provide the services that ALL the children are entitled to."* Another said, *"social inclusion is not working. It is way underfunded, understaffed, and staff are undertrained."*

Among the issues being raised with LA Secretaries are:

- Teachers finding it increasingly difficult to support children with ASN with decreasing support available to them, creating increasingly stressful working conditions and reducing morale
- Teacher wellbeing declining – both in and outside of school
- Children being intimidated and apprehensive around children known to be aggressive or unpredictable
- Lessons being disrupted
- Impacts on staff retention
- Children not getting the attention they need
- Standards in lower ability classes falling over time
- Pressure arising from the lack of support, coming at same time as teachers being asked to try new interventions to close the attainment gap
- Workload burdens, e.g. teachers doing more 'housekeeping tasks' (e.g. putting letters in bags) as no assistants to do them, during their breaks; and spending more time on photocopying, filing work, supervising formal assessments, etc
- Fewer staff equals fewer role models for children
- Less support for P1 children settling into school; more difficulties at transition times
- More expectation of helping pupils with accidents, medicines and emergencies
- Increasing complexity of needs among pupils
- No additional training on different conditions or on working with pupils who have experienced trauma
- Increasing emphasis in schools on attainment, which can be inappropriate for the children with the most severe and complex additional support needs
- Challenges surrounding differentiation of the curriculum
- No support for pupils to take part in clubs/activities, and lack of access to funds for enrichment experiences, transport etc., which damages their curricular experiences and their self-esteem
- Discontented or aggressive parents and relatives of pupils with additional support needs
- Staff purchasing resources for learning from their own money
- Reduced access to CAMHS (often only for children who are suicidal) and counselling services being limited in their offer
- Less support within mainstream classes for pupils without additional support needs
- Increased incidence of poverty and the impacts this has on pupils and staff
- Increased generalised anxiety and mental health issues among pupils.

A focus group of members was held on ASN matters to supplement independent research on changing criteria. Although not specifically addressing this topic, members present concurred with comments reported above on the vast reduction in services available to schools (e.g. one authority where there was a dedicated Support for Learning team of 10-20 staff, now depleted to one morning a week). They also reported on staff feeling stressed, de-skilled, undermined, unsupported, and *"like they are failing all the time"*. There was consensus regarding the significant impact on other children of cuts in staffing levels and rising levels of need among their peers.

Summary of impacts

Taking into account all of the above, the impact of increasing numbers of pupils and students being identified with social, emotional and mental health issues, on teachers, lecturers, students and pupils can be summarised as follows.

Impacts on teachers and lecturers' health and wellbeing

The impacts relating to teachers' health and wellbeing include:

- Reduced morale, owing to a feeling of failing young people and their families; a feeling of being 'useless'; feeling blamed for repetitive unacceptable pupil behaviour; feeling unsupported by SMT; concern for vulnerable children
- Increased stress and risk of personal injury or other health impacts, because of exposure to violent incidents, personal abuse or aggression, from pupils and students who require more support but are not getting it, and their parents
- Reduced wellbeing both at and outside of work – lack of sleep, headaches, generalised anxiety – all of which potentially contribute to more long-term absence
- Frustration caused by lack of opportunities to undertake relevant professional learning.

Impacts on teachers' and lecturers' workload burden

The impacts relating to teachers' and lecturers' workload include:

- Increased workload, owing to records creation; review meetings; meetings with parents; GIRFEC processes; curriculum differentiation; doing tasks previously done by assistants
- Workload increased by massive pressure to close attainment gaps, support achievement, and support young people to secure positive destinations
- Reduced time for preparing learning materials, marking, etc., as GIRFEC processes are using up non-contact time
- Reduced ability to plan working day, due to constant child protection/support issues, emergencies, medical issues
- Own time, beyond Working Time Agreement, spent pursuing professional learning, where available, or dealing with issues – no breaks or lunch
- Increased sense of accountability for continuing attainment gaps; workload associated with spending allocated funds; cumulative stress.

Further impacts on teachers and lecturers

A further reported impact on teachers is the erosion of their professional status and autonomy, e.g. when their task list broadens, or when support for learning tasks are undertaken by volunteers, failing to recognise the value of the qualified teacher in doing this work. They also experience a change in their status when the role becomes crisis-led and has less time for preparation of learning and teaching materials.

Staff are more likely to leave teaching; teachers with years of experience are leaving due to stress and unreasonable expectations. Remaining teachers have fewer colleagues and even greater workload burdens due to shortages; this damages morale across the school community. (This also means there are fewer positive role models for young people).

Impacts on pupils' and students' wellbeing

There are multiple health and wellbeing impacts being reported both for pupils with social, emotional and mental health (SEMH) issues, and for the wider pupil population. It is noted that some SEMH issues fluctuate and that pupils will have different needs at different times, so simplistic distinctions between pupils with and without SEMH needs and any 'othering' of pupils with more acute needs should be avoided.

Some of the wellbeing impacts reported for pupils are:

- Reduced morale among pupils with SEMH, due to:
 - receiving less support to have their needs met than is required;
 - being in larger class size(s) than is optimal;
 - being less supported to take part in enrichment/after-school activities than is required;
 - lower self-esteem caused by all of the above;
 - higher levels of generalised anxiety;
 - being more likely to display challenging behaviour;
 - being involved in more violent incidents, fights and low-level disruption to learning; and
 - experiencing a loss of dignity e.g. when they exhibit high levels of distress ("a meltdown").

All of this is exacerbated by teacher shortages and teacher absences.

- Among the general pupil population, higher levels of anxiety due to a stressful atmosphere in school; disrupted learning; intimidation/apprehension; potential distress caused by witnessing peers' violent behaviour; and overall, reduced enjoyment of school
- Not being understood/having needs met as fully as they could be, when SEMH needs are caused by specific conditions/experiences
- Poor mental health exacerbated by lack of support
- Becoming demoralised by an excessive focus on attainment rather than social skills/emotional and behavioural development.

Impacts on pupils' and students' educational experiences

- Some pupils being unable to access learning due to social/emotional issues
- Less access to learning support among pupils who do not have SEMH, as this is diverted to supporting the most complex and severe additional support needs , e.g. there is less support for children with dyslexia
- Some pupils having longer waits for work to be marked or new work set
- Some pupils having fewer positive interactions with SMT and other teachers who are dealing with large numbers of acute cases/crises
- Some pupils receiving less attention from teachers but also feeling more stress caused by constant formal assessment in senior phase classes
- Risk of reduced attainment for pupils with SEMH, due to increasing non-attendance/opting out of school
- Risk of reduced attainment for pupils who don't currently have SEMH, due to disruption of learning and less time with teachers
- Falling standards in some classes
- Differential impacts depending on socio-economic status: children from higher income families often getting more support than those from poorer backgrounds, owing to more strident parental advocacy
- Less support available to the general pupil population, e.g. literacy and numeracy groups not having PSA support because they are diverted to the children with the most complex social, emotional and behavioural needs
- Less support available at transition times
- Less exposure to demonstrations, discussions, etc. as these are curtailed when teaching is adapted to suit the needs of pupils whose difficulties, from being inadequately supported, have the potential to disrupt learning.

Recommendations

It is recommended that the EIS:

- continue to support mainstreaming and inclusive education in principle, but to highlight whenever possible the phenomenon of mainstreaming without adequate resources to support effective implementation, raising the wide range of impacts caused by under-resourcing;
- continue to support the provision of special schools or specialist units for the children with the most severe and complex ASN, and sufficient numbers of specialist teachers in all settings with the expertise requisite to the range of additional needs that children and young people have;
- campaign on an ongoing basis for adequate resourcing of Additional Support for Learning (ASL) legislation and any resultant guidance, especially when changes are introduced;
- maintain its advocacy for smaller class sizes across the education system;
- continue to advocate for a statutory national minimum staffing standard and to support efforts to enhance teacher numbers, where these align

with EIS policy on workforce planning (i.e. resisting any accelerated models which would undermine the profession);

- continue to advocate for schools to have access to appropriate services which can help meet the needs of children with social, emotional and mental health issues.
 - continue to advocate for enhanced offers from employers regarding professional learning opportunities, noting the deficits in provision on ASN.
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