HeadStart:
Building young people’s resilience to support their mental and emotional wellbeing

Part 1: What is HeadStart and what has been achieved so far?
Acknowledgements

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A note about language

We recognise that the language used to refer to mental health can be complicated and sensitive, not least because mental health issues can vary in their severity. Because of this we’ve tried to use a range of terms in this paper. Sometimes we’ve used specific terms, like disorder, to reflect the data source.
1. Introduction

Resilience is the ability to bounce back from adversity. We all need it to navigate and manage life’s ups and downs. It’s especially important for young people to manage the stresses and challenges of adolescence, which involves many physical, biological, emotional and practical transitions. These range from changes in school, friendship groups and family relationships, to transitions in identity, sexuality and body.

The National Lottery Community Fund sees resilience as a key element of a preventative approach to mental health and wellbeing. That’s why we launched HeadStart – a five-year, £58.7 million programme to explore and test new ways to improve the mental and emotional wellbeing of young people aged 10 to 16 and prevent more serious mental health issues from developing.

HeadStart enables young people to thrive by building their resilience and providing access to additional support when and where it is needed. It looks at how young people’s mental wellbeing is affected by their experiences at school, home and in their relationships with friends and family, and considers their access to services they need, and their interaction with digital technology.

In this briefing, you can find out more about the programme, including where and how it works, the range of interventions being offered and its underpinning philosophy. We share key results from the largest survey of young people’s mental wellbeing in England, undertaken to provide baseline data for HeadStart on how young people feel and how they’re coping with the emotional and wellbeing challenges that come their way. We offer thoughts on the programme’s initial achievements and discuss approaches to front-line practice and workforce development. Throughout, the paper includes case studies and examples of strategic and whole school change, as well as the experiences of young people and the support they’ve received.

We recommend that you read this paper together with our forthcoming learning paper, which outlines early thoughts on the practical and practice-oriented learning from this programme. The paper complements the research and evaluation work carried out by the HeadStart Learning Team, led by the Anna Freud National Centre for Children and Families.
2. What is HeadStart?

How it all began

In 2012, the Big Lottery Fund (now the National Lottery Community Fund) set up a Young People’s Investment Board, which brought together 20 young people from different walks of life. We asked them to consult their peers to identify the issues that really mattered to children and young people, and explore how National Lottery funding could help achieve their aspirations. They consulted 2,000 young people and came back with two powerful messages: we should support young people’s (mental) wellbeing and help them to find work.

We reviewed research on young people’s mental health and found that their concerns were reflected in the statistics. Many mental health problems begin in childhood or adolescence, with one study estimating that half of all mental health conditions begin before the age of 14. For many years, the estimated share of young people with a mental health problem was understood to be around one in ten. More recently, the 2017 Mental Health of Children and Young People in England survey suggested that the share among 5- to 19-year-olds is one in eight.

This weight of evidence led us to work with young people from the Investment Board, leading mental health charities and Government to design HeadStart. We learned quickly that we should focus on early action and preventative approaches to support young people’s mental wellbeing, to avoid problems during adolescence.

We responded to their second key message by launching Talent Match, a £108 million, National Lottery funded programme, to help under-24-year-olds along their journey to employment. You can read more about Talent Match in our separate briefing.

How does it work?

“HeadStart makes mental health something everyone can and does talk about.”

HeadStart participant, 2018

HeadStart is a wide-ranging programme, offering different ways to support mental and emotional wellbeing. Children and young people are integral to the programme, working with us on its design, governance, delivery and evaluation.

Six local partnerships in England were funded to take forward the programme over five years (2016–2021): Blackpool, Cornwall (known as HeadStart Kernow), Hull, Kent, Newham and Wolverhampton. They represent a geographical spread as well as diversity in terms of urbanity/rurality, deprivation, levels of mental health needs and their approaches to prevention.
Each partnership is **led by the area’s local authority** (LA). We knew this was important, because of the number of statutory agencies and services that would need to work together to **bring about lasting change**. The LAs work with young people and their families, schools, Voluntary and Community Sector (VCS) organisations, as well as health, community and (specialist) public services, including Child and Adolescent Mental Health Services (CAMHS), General Practitioners (GPs) and the police.

By working together towards common goals, the programme intends to make supporting young people’s mental health everybody’s business, with **schools, the community and families all understanding the importance of acting early**. We also want to **enable young people to cope better and seek early support for problems and worries**, helping to prevent long-term mental health issues from developing. Supporting young people’s resilience and raising their awareness of their own mental health, and that of their peers, are other important elements of the programme’s approach.

We want learning from HeadStart to inform future investments into mental health for young people. A comprehensive evaluation is being carried out, including the **Wellbeing Measurement Framework (WMF)**, an annual survey of young people in participating schools, which is the largest of its kind in the UK. It will help us to understand the impact of the programme and provide insights into the resilience and mental wellbeing of young people in HeadStart schools.

Of course, we recognise that systems and cultures can’t be changed overnight. Even getting to the delivery stage of a programme of this scale takes time to get right. For HeadStart, this meant developing strategies, testing ideas and putting the infrastructure in place well before starting to deliver any interventions to children and young people.

**HeadStart fundamentals**

- A five-year programme from 2016 to 2021
- £58.7 million for six areas across England
- Over 131,000 young people have access to HeadStart support
- Managed by multi-stakeholder partnerships, led by local authorities
- A different portfolio of activities in each area
- Young people (aged 10–16) are at the heart; schools, parents and communities also play a key role
- Using a test and learn approach to generate evidence to inform future policy and practice
- Ongoing evaluation to collect evidence of impact and what works
Why focus on early action and resilience?

The extent of mental health problems in children and young people isn’t well understood, but research indicates that for many people, mental health difficulties start at an early age. Eleven is the average age of onset for anxiety disorders (those characterised by fear and worry) and impulse control disorders (those characterised by troubles controlling emotions or behaviour).

The Mental Health of Children and Young People in England survey is considered England’s best source of data on trends in child mental health. The latest survey, based on data from 2017, found “a slight increase over time in the prevalence of mental disorder in 5- to 15-year-olds,” from 9.7% in 1999 to 11.2% in 2017.

The prevalence of most types of condition – behavioural disorders, hyperactivity, and less common conditions, like autism and eating disorders, has stayed broadly stable, whilst emotional disorders, like depression and anxiety, have increased since 2004.

Most of us also know from experience that adolescence can be a complex and challenging time. Teenagers face a range of pressures including exams, bullying, peers, and social media. Stigma also has a negative impact; 75% of young people believe that people with mental health difficulties are treated negatively.

Poor mental health can have a negative impact on other areas of a person’s life, including physical health, educational attainment and employment. For young people, mental health issues can affect school attendance, behaviour and engagement and consequently how well they do at school. In contrast, many children who have high levels of resilience also have high levels of academic self-efficacy, or belief in their ability to achieve.

Why early action?

- Half of all mental health conditions begin before the age of 14
- One in eight (12.8%) 5- to 19-year-olds had at least one mental disorder when assessed in 2017
- There is evidence of an association between mental ill-health in childhood and adolescence, and mental ill-health in adulthood

What is Coproduction?

- Involving young people
- Helping young people
- Examples:
  - Designing a school
  - Peer Tutoring
  - Peer Mentoring
What does HeadStart do?

“HeadStart is not one story; it’s a tapestry of interweaving stories in our communities, improving the life chances of young people.”

HeadStart Wolverhampton

For the first year of the programme, the six areas focused on setting up their partnerships and programmes, with support from the National Lottery Community Fund and external experts. HeadStart then moved to full implementation and there are now over 60 interventions in place. These range from activities based on existing evidence, to more innovative ideas which are being tested and evaluated as they go. Partnerships are actively encouraged to try out new ways of working and refine these as they learn.

Interventions are mainly delivered in schools or community settings, by the local authority or its charity partners. Most offer young people face-to-face opportunities to develop the skills, behaviours and attitudes they need to navigate their social and emotional life. This includes training in wellbeing management techniques like mindfulness; activities to build confidence and overcome emerging mental health issues; and peer mentoring to support young people through difficult times.

Others support parents, teachers, youth workers and other staff and volunteers. These include training, networking, online resources and peer support.

“Taught me how to reinforce positivity.”

Teacher, Blackpool

HeadStart is a chance to find out which interventions work well for young people and the adults who support them. Once the National Lottery funding comes to an end, these are the activities which the partnerships will seek to sustain. They will do this by raising awareness, collecting evidence, building capacity and working to influence commissioning and policy. In this way, the partnerships want to change the way schools and other services work with young people, and to improve the wider community’s understanding of mental health and emotional wellbeing.

HeadStart interventions

- Increased mental wellbeing (51)
- Improved school engagement (20)
- Reduced mental health difficulties (20)
- Reduced risky behaviour (4)

(Total interventions: 62)
Principles underpinning the programme

HeadStart works on the basis of proportionate universalism which means activities are available to all children and young people, with more specialist support for young people experiencing emotional problems, difficulties in school or with peers. Young people describe this as, “everyone gets something but some get more than others.”

The geographical scope of the six local areas’ provision is based on an analysis of the local context and need: some deliver HeadStart in specific localities or schools, others are trying to bring about change across their whole area.

Schools have an important part to play in ensuring the mental and emotional wellbeing of their pupils and are the focal point of HeadStart. Partnerships are working with over 400 primary, secondary and special schools as well as alternative providers such as Pupil Referral Units (PRUs). The focus is on secondary-age pupils and those making the transition from primary to secondary school.

HeadStart schools are encouraged and supported to adopt a whole school approach to mental health and emotional wellbeing. This approach is supported by the National Institute for Health and Care Excellence (NICE) and the Department for Education (DfE) and means moving beyond teaching and learning to encompass all aspects of the life of a school and its community. This can be done, for example, by, “providing an emotionally secure and safe environment that prevents any form of bullying or violence,” and by, “including social and emotional wellbeing in policies.”

All HeadStart partnerships are required to have voluntary and community sector representation, in recognition of the vital role the community plays in the chain of support between the family, schools and statutory services. There are currently nearly 300 community-based organisations and around 40 statutory services engaged in the programme, either directly delivering services or as programme partners (which means they are involved in the governance of the programme and/or provide referrals to HeadStart).

HeadStart principles

- Proportionate universalism
- Designed to meet local context and need
- Whole school or organisation approach
- A shift in culture and mindset, so that anyone working with young people keeps mental health and emotional wellbeing in mind
- Schools, statutory services and the community working together: all partnerships have VCS representation
- Co-produced with young people and the people who work with them
- Sustainability
3. How do young people feel about their mental health today? Baseline data and stories

Through HeadStart we are committed to collecting and evaluating learning to add to the evidence base and further our understanding of children and young people’s mental health.

In 2017, HeadStart conducted the largest ever survey of young people's mental wellbeing in England to establish baseline data and insights for the programme. The response rate across 114 schools was around 85%, with 30,843 11- to 14-year-olds completing the survey.

Each HeadStart school receives a bespoke report from the survey, enabling them to compare how their pupils are feeling with (anonymised) results from other HeadStart schools. This gives them an opportunity to assess what they are doing well and where they could be doing better. The reports are interactive, so they can look at different sub-groups of their pupils – by gender, ethnic grouping, and other criteria – to understand if and how they are affected.

A HeadStart Kernow school explained that although the data raises lots of questions, it has “helped us to direct our attention and resources to those areas that can have greatest impact.”

To complement the learning from the survey, a first round of in-depth interviews with young people revealed more about the difficulties they face, the ways in which they cope with these and the types of support they use. The findings from these 63 interviews, together with the quantitative study, give us a better understanding of which groups of young people need help and what for. We outline some of the key findings below, and make some suggestions as to what they might mean for practice and policy on young people’s mental health.

Worries, fears, anger and sadness: difficulties are common

Just under a fifth (18.4%) of the young people who responded to the survey indicated they were experiencing emotional problems, such as feeling anxious, experiencing low mood, being nervous, low in confidence, or easily scared. The same proportion (18.8%) indicated they were exhibiting behavioural problems, for example feeling very angry, being aggressive, or “acting out”.

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A deep dive into results from 28,160 of the respondents showed results that indicated elevated or high risk, including a quarter (25.3%) at risk of difficulties in managing hyperactivity or inattention and one in thirteen (7.3%) facing peer relationship problems. Around 25 out of 63 interviewees said they experience worries and fears. They talked about school-related issues (like exams, or the transition to secondary school), concerns about their peers (such as not being liked), family problems (like worries about parents splitting up), and safety (for example due to gangs and violence). Many (about 40%) said they experience feelings of extreme anger. Things that could cause this anger included the actions of teachers (being told off, picked on or targeted), peers (talking behind their back, spreading rumours, making fun), siblings and parents (such as arguments). Anger and sadness were sometimes reported to be interchangeable.

“It feels bad because it’s just like getting angry I don’t like doing it because it, as much as it hurts me, it hurts the people around me like my mum, she doesn’t like [seeing me] getting angry.”

Increased awareness of and discussion about mental health issues may have an impact on self-reporting. But these findings echo some other recent studies, which suggest that mental health and emotional wellbeing problems among adolescents have increased. HeadStart schools have slightly higher levels of deprivation than the national average but this doesn’t fully account for the higher estimates compared to previous studies. The HeadStart survey also covers a narrower age group than other research, making it difficult to compare the results. HeadStart’s ongoing commitment to exploring the prevalence and scale of these issues will be an important contribution to understanding these messages from young people. And these findings emphasise, without need for caveats, that many young people feel they are struggling and need support.

**Relationships between mental health and gender, age and ethnicity**

The survey raises a range of interesting messages about how different groups of young people experience mental health issues. Gender is a significant factor and is most evident in relation to emotional problems. One in four (24.9%) of the girls who responded to the survey indicated they were experiencing emotional problems, compared to one in ten (10.9%) of the boys. Conversely, more boys indicated that they were exhibiting behavioural problems, than girls (23.1% and 15.1% respectively).

More boys than girls told our researchers that they experience feelings of extreme anger. This can make them lose control and shout, punch or kick others and objects. As a consequence, they can be disciplined at home or in school, have difficulty concentrating in lessons or hurt themselves or others.
Girls said they are affected more by **worries and fears**, including chronic worrying or anxiety. They talked about **lack of confidence** making it more difficult to build friendships, or fully participate in school.\(^{55}\) One confided, “Sometimes when I’m with people that I don’t really know, I’m not really confident and I don’t really say much ’cause I don’t want to embarrass myself or something. And I, or I don’t want them to … not like me … ’cause I want everyone to like me.”\(^{56}\)

These stories echo other research findings, which have found that girls tend to internalise their symptoms or problems, while boys externalise them.\(^{57}\)

The survey showed that Year 9 pupils (13- and 14-year-olds) were more likely to experience emotional and behavioural difficulties than Year 7s (11- and 12-year-olds).\(^{58}\) **Older children** were also more likely to be affected by attention difficulties, like finding it hard to concentrate or keep still, or being easily distracted – 26.9% of Year 9 children, compared to 24.4% of Year 7s.\(^{59}\)

Conversely, the survey showed that difficulties with peers are slightly more common amongst Year 7s than Year 9s.\(^{60}\) We’d suggest this may be due to the transition to secondary school, when young people have to find their way around a new school community and often settle into new friendship groups.

Results from the HeadStart survey suggest that young people from most **minority ethnic groups** are less likely to experience **emotional problems** than young white people, the largest ethnic grouping in the sample.\(^{61}\) Young people from white ethnic backgrounds are also more likely to experience **behavioural difficulties** than young people from an Asian, Chinese or “any other” ethnic group.\(^{62}\)

“It should not be assumed that young people from minority ethnic groups are at greater risk of mental health problems; this is not the case based on current evidence. In addition, those from different minority ethnic backgrounds should not be grouped together in analysis of the prevalence of mental health problems, as important differences exist.”\(^{63}\)

The survey also confirms the results of earlier studies\(^{64}\) that have found a link between young people’s mental wellbeing and low income, having special educational needs, and child in need (CIN) status.\(^{65}\)

Linking HeadStart survey data and national data on attendance and attainment, has also shown that young people with higher levels of mental health difficulties, have lower levels of school attendance and attainment.\(^{66}\) These findings replicate those of previous studies.

There isn’t enough evidence yet to understand all the reasons behind these results, but they have **implications for schools and front-line services, as well as commissioners and funders**. We need to recognise the complexity of this issue, which affects young people in different ways. To do so, we need to train and equip all those working with and around young people with skills to understand and respond to these differences. Schools also need to consider whether pupils who are struggling academically may be experiencing a mental health problem and to ensure that there is support in place for those who need it.
4. How is HeadStart building young people’s resilience and wellbeing?

Early support for those who need it

Worries and anger affect us all, but sometimes they can be a symptom of an underlying mental health issue. While some young people can manage these emotions with help from their family, friends, school and other networks, others need more support. By teaching resilience and raising the awareness and skills of adults who work with young people, HeadStart aims to prevent problems becoming more serious, so they don’t reach the crisis point where specialist support is needed.

HeadStart provides a range of resources for schools and communities to step in early to support children and young people who are struggling or showing early signs of mental health difficulties. Methods like counselling and peer support help young people to tackle mental health issues head on, while others use techniques such as arts and drama to support and enhance wellbeing.

Partnerships have been working to strengthen support networks. For example Blackpool’s Friend for Life project matches looked after children with adult volunteers who can offer them friendship, support, fun and days out. Although initiatives like these are small-scale, we’ve been told that their impact on individual children can be considerable.

HeadStart has also improved access to safe spaces in schools and open-access drop-in services for young people who are feeling worried, stressed, fed up or anxious. Turn 2 Us provides one-to-one support for secondary school pupils in Hull. It gives them a chance to discuss their concerns with youth workers through lunchtime drop-in sessions in schools (term-time) and parks (holidays). In 2018, they listened to, helped, and reassured 1,760 young people.

Creative arts have an important role in wellbeing and we’ve heard stories of young people who’ve been able to express themselves through art and create new social connections. “The quietest young person in the room became the noisiest person”, explained Darren, who’s been involved in running the Art Break festival in Wolverhampton, giving young people an opportunity try out dance and film-making.

Although creative activities are popular and important, they work best as part of a wider set of activities. An evaluation looking at the experiences of 33 young people and eight members of staff in sports and creative activities in Newham, concluded that such activities, “developed new or existing hobbies, skills and interests, and [...] broadened their social circle,” but they, “[...] did not directly change young people’s connection to their community.”
A small number of HeadStart initiatives support young people with **diagnosed mental health difficulties**, or who may be involved in risky behaviours like self-harm. They offer one-to-one and group counselling in schools and in the community, using talking therapies, cognitive behavioural therapy (CBT), restorative practice and conflict resolution.

In Cornwall, Bloom panels bring together a multi-disciplinary group of practitioners who consider what support can be provided to young people who have been referred for support, but whose needs are not at a level which requires the specialist support offered by CAMHS. They find a solution to help the young people, which can include community-based services and activities. The Bloom model shows how cross-sector working and the use of non-clinical interventions can help to prevent young people from falling through the net.

In Kent, an intervention for young men with mental health problems has been co-produced with a consortium of domestic abuse services. So far, 17 young men who have experienced domestic abuse in their families and were showing signs of needing support, have taken part in both one-to-one and group activities. The resources used during these sessions have been compiled in an implementation toolkit, called, “I can”.

**Empowering and supporting parents**

Lots of young people give their parents cause for concern at some point, because of their moods, behaviours or actions. Parents might worry, but not know how to help, may not be in the right place in their own lives to give support, or not have the skills or relationships to know how to deal with these challenges. Young people need a seamless network of support, stretching from school into the community, including at home.

HeadStart offers initiatives for parents that explore effective communication, positive behaviour, resilience, change management, and boundaries. These are facilitated by trained coaches or peers, and are delivered as open forums, time-limited courses or specific interventions.

In Cornwall, a toolkit is being developed for practitioners to use when working with groups of parents, carers and families to improve their awareness of available resilience and mental health resources. It builds on the common language developed by the programme so that practitioners can use a consistent approach when delivering training for, or working with, parents and families.

HeadStart Wolverhampton trialled a Creative Parents Support Group which works with families to support creative, shared play as a way of building more positive relationships between parents and their children.

**From one parent to another**

HeadStart Newham offers free, peer-led courses for parents. These are led by locally-trained parent facilitators who have completed Empowering Parents, Empowering Communities (EPEC) accreditation and receive ongoing training, supervision and support from parenting specialists.

The courses build parents’ communication skills and help them to support their children’s emotional resilience. To ensure equal access to the course, HeadStart Newham provides a free crèche.

During the sessions, parents talk to their peers about their experiences and work through their concerns in a non-judgemental space. They talk about understanding feelings, building listening skills, setting boundaries, and creating family quality time.

“I feel more relaxed and happy as a parent and better able to cope with the struggles of parenting,” 69 reflected one parent. “Every parent with a teenager should do this course!” 70 said another.
Supporting staff to build skills, confidence and capacity

For young people who do need specialist support, there can be a long wait, leaving schools, communities and parents to fill the gap. They need the time, people, skills and confidence to do this well, which includes having a better understanding of how to identify young people who need to be referred on to specialist provision, and those that can be helped in their existing environment. This would help to reduce the number of inappropriate referrals and ensure each young person gets the right support at the earliest opportunity.

Over 18,460 professionals and volunteers have received training through HeadStart, giving them an opportunity to refresh and build their skills and knowledge. Hull, Kent and Newham run Mental Health First Aid training, Newham has introduced academic resilience coaching, and Kent and Hull offer training in mindfulness. Training on self-harm (awareness and responses), suicide prevention and cognitive behaviour therapy (CBT) are also available.

Linking theory to practice

HeadStart Kernow’s training helps staff and the wider school community to understand the underlying causes behind behaviours that affect a child’s learning and development. It takes a trauma-informed approach which is built on the core values of safety, trustworthiness, choice, collaboration, and empowerment. The training covers emotional development, the role of childhood stressors that result from abuse and neglect, or exposure to domestic violence or people with alcohol and other substance use problems (known as Adverse Childhood Experiences (ACEs)), neuroscience, and the importance of the arts. Importantly, it also conveys the role of trusted adults and how evidence now demonstrates the positive protective influence they have.

The training is available to all school staff, from administrators and catering staff, to teachers and teaching assistants. It was also extended to adults in local community groups, including sports coaches and youth workers, to create a whole-system approach, designed to give all local children access to an emotionally available adult to boost their resilience. Different levels are offered, from two-day whole-staff training to a 10-day course for staff working closest to children in schools and communities, who then become qualified practitioners in trauma-informed approaches.

So far, more than 750 professionals, from over 220 organisations across the county, have qualified as practitioners in trauma-informed approaches.

“[…] Rather than shy away and make inane comments, I can talk and be with students knowing that I can now support and enable students to feel heard and begin to repair,” explained one teacher about the impact of the training. She continued, “even though I know I can’t fix their problems and solve issues, I now know that being attuned and empathic is a good start … Linking theory to practice proves I am doing the right thing…”
Teachers aren’t expected to take on more work or become counsellors or therapists. The training builds skills and helps staff feel more confident to identify and support young people who are struggling. They also get access to practical tools. For example in Cornwall, schools have completed 4,000 individual assessments of pupils’ mental health needs, using an online tool developed with HeadStart Kernow, which also offers basic advice and suggested activities for both groups and individual children, supported with a step-by-step guide and ways to track progress.75

Making difficult conversations easier

HeadStart Kent gives teachers and early help76 workers training in resilience conversations which offer a way to draw out what’s going on in a young person’s life.77 The practitioner helps the young person to think about their own world and to categorise each of five key areas of resilience (feeling secure, emotions and behaviours, education, friendships, talents and interests) with a red, amber or green rating. They then work together to develop protective factors so a young person becomes as resilient as possible. For example, if a young person is struggling with friendships, but likes playing football, this might mean finding a football team where he/she can meet new people.

The resilience conversation tool has been updated following feedback from young people and those working with them. It’s now written in more accessible language and a self-reflection tool has been developed for use in schools and communities, prior to a conversation.

Staff have said that the resilience conversations are a useful tool to enable a constructive conversation with students; “... having the [resilience] conversations has enabled me to be more targeted and succinct in my supportive conversations to young people.”78
**Tiered training for different practitioners**

HeadStart Hull reviewed their training and found that although there were many relevant courses, these weren’t well attended. A new programme was put together offering a range of topics, across four levels. This acknowledges the diverse roles and backgrounds of professionals working with young people in schools and the community.

**Level 1: Respond.** People who don’t have a specific pastoral role, like administrative staff, don’t need an in-depth understanding of mental health. They need to be able to respond if a young person comes to them with an issue.

**Level 2: Initiate.** Those who work closely with individual young people or small groups, like youth workers or teaching assistants, might need to do more. They may be able to spot early warning signs and be an initial source of support for young people who are starting to struggle and so may need to initiate a conversation with a young person they are concerned about.

**Level 3: Intervene.** This level is specifically for staff who directly deliver mental health and wellbeing interventions for young people.

**Level 4: Influence.** This tier is for staff who are a resource for the support, training and education of others and can influence policy or practice. They could be involved in designing new approaches, sharing practice, or supporting colleagues to develop their practice.

The revised training offer has been well received, with 745 staff attending mental health and wellbeing training in the first year. Training has been offered to schools as inset days or short, twilight sessions during or after school hours. And as part of the whole school approach, HeadStart Hull is developing ways to embed wellbeing training in the induction programmes for teachers.

HeadStart training courses are aimed at the whole spectrum of staff working with children and young people. In some places existing provision has been restructured, to recognise that not everyone needs, or can commit to, the same level of training.

**Supporting whole school approaches to wellbeing**

Schools in England have a statutory duty to promote the welfare of pupils and have been called on to implement a whole school approach to wellbeing. From September 2020, it will be mandatory for them to teach the characteristics of good physical health and mental wellbeing, and the steps pupils can take to protect these, as part of Relationships Education (primary) and Relationships and Sex Education (secondary).
HeadStart came at the right time, providing schools with resource, impetus and support that mean they are better prepared to meet these new statutory requirements, with some leading the way and acting as role models for schools outside the programme.

Partnerships have helped local schools to design an evidence-informed approach to the development of wellbeing that works for their school community. HeadStart Kent developed a resilience toolkit to help schools and other settings look at how they are doing and make informed changes. Since its introduction in early 2019, three schools have received a “School Award for Resilience and Emotional Wellbeing”, recognising their achievement in building a coherent and inclusive approach to wellbeing.

In Blackpool, local stakeholders have access to resilience experts from Boingboing, a social enterprise that works, “as, with and for people who have lived experience of adversity and challenges which make life more difficult.” They hold open forums where practitioners have a chance to discuss and debate their experiences in developing resilience. They’ve supervised and given feedback to local resilience coaches, enabling them to learn and develop their practice.

Working together to build a whole school approach

The HeadStart Hull Mark of Excellence is a quality mark that shows that a school, youth club or other community setting understands the importance of supporting children and young people’s emotional health and wellbeing. It demonstrates that they have taken practical steps to develop and adopt a whole organisation approach. It’s awarded by young people, who play a key role in verifying that core assessment criteria are being met, by mystery shopping the organisation as part of the assessment. HeadStart staff also provide regular support and challenge, guiding schools along the process.

As a result, schools have said accreditation has:

- Helped them to build a genuine whole-school approach to wellbeing covering support, training, policies and systems. The template policies and tools developed by HeadStart, save them time and help with ideas.
- Led to schools making changes to their offer, such as access to, and organisation of, pastoral care.
- Helped build networks with other schools, through buddying to support one another on different aspects of the whole school approach.

By July 2019, seven schools had achieved the award and another 32 were working towards achieving it. This is 40% of schools in the city. In addition, one youth centre has been accredited and eight others (including sports clubs, youth services) are working towards it.
In Kent, schools value the opportunity to meet as a community to discuss emotional wellbeing. Similarly, HeadStart Newham’s school networks provide a way to share learning and exchange ideas. Newham also hosts a termly parent and community forum, where parents can come together to develop and hone their skills and access peer support.

Some partnerships have worked with young people to draft standards for the development of a whole school approach, recognising that cultural, behavioural, process and relationship changes may need to happen. HeadStart Kent has outlined expectations for resilient schools, stressing that, “it’s everybody’s business to understand what resilience is.” They’ve also called on all schools to set up, “a systematic process to identify vulnerable students, ensure every student has a named pastoral lead, and provide a safe space.”

Championing a whole school approach has led schools to make changes to wellbeing processes. In Hull, HeadStart schools now have a named strategic lead for mental health. Having someone from the senior leadership team with responsibility for mental health means that it is seen as a priority. If this person works together with other staff members, in a dedicated team, this can help to ensure continuity if and when there are staffing changes.

Raising awareness about resilience

Through HeadStart, young people have a key role in making their communities aware of what resilience is and why it’s important. They’ve started to make it easier for people to talk about mental health and made people aware of the services available to support them.

In Newham, Team Social Action offers pupils opportunities to give something back to their school or community. For example, young people carried out research to find out what support services were available to them in their communities to help identify gaps. In Wolverhampton, a theatre company scripted and performed a play about resilience in schools across the city. The Superhero Within explores resilience, self-confidence, and peer relationships in an amusing and engaging way.

Young people’s standards on resilient schools and communities, HeadStart Kernow

- Help is reliable and consistent; we will know who we can trust to help us to help ourselves.
- We can understand our own thoughts and emotions and can talk openly when we need help.
- People around us know the signs and know what to do when we are struggling.
- We are helped to cope with the pressures of life, including online.
- Learning is shared and acted on.
Young people have also initiated, produced and run campaigns within their local areas. In Hull, young people wanted to raise awareness of suicide prevention. The resulting campaign, called You Are Not Alone, placed a sound system on the Humber Bridge to broadcast inspirational and supportive messages. The campaign attracted local media attention and was identified as a model of good practice by Papyrus, a national youth charity dedicated to suicide prevention. Phase 2 started in September 2018, on World Suicide Prevention Day, with positive messages and poems broadcast on the pier of Hull Marina. The pupils who developed the campaign have also recorded films and trained staff who work with young people in Hull.

Skills to handle setbacks

Pupils in HeadStart schools have benefited from whole-class resilience training like Bounce Forward, a whole-class resilience course for pupils in Year 5 in Blackpool, helping them to prepare for their transition to secondary school. It’s an activity-based 10-week classroom programme for pupils and their parents. In 2017/2018, over 1,200 young people from 25 schools took part. Two thirds of participants (68%) said their wellbeing had improved as a result. Half (50%) reported an improvement in their resilience and almost all (98%) felt positive about the course. Many pupils referred to improvements in their ability to deal with emotions. One teacher talked about improvements in confidence, “it’s made them realise the skills they’ve got already and brought them to the surface so they can feel confident applying them.”

Partnerships have also introduced activities that create a shared language to enable practitioners, pupils and parents to talk about issues.

Overcoming setbacks and making the most of opportunities

HeadStart Wolverhampton trialled Stop, Understand, Move On (SUMO) in schools. This cognitive behaviour and solution-focussed approach helps people reflect on and move on from challenges. It uses simple, practical language and a set of memorable principles, plus awareness-raising activities (including assemblies, posters, films) and training for pupils, teachers, social workers and the wider school community.

The “Hippo Time is OK” principle makes it clear that it’s OK to feel mad, bad or sad. Having time out – to wallow like a hippo – when life’s challenges hit us is fine. “Change Your T-shirt” encourages participants to take responsibility for the way they respond to life events by emphasising that “wearing” a negative T-shirt and expressing its message in thoughts and actions can mean we miss out on the opportunities that life presents.
5. What difference is HeadStart making?

We don’t yet have formal evidence that shows the impact of HeadStart at individual, programme or system levels. But we have started to build a more detailed picture of young people’s mental and emotional wellbeing by collecting data and stories from young people in HeadStart schools. As a result, we have a greater insight into how and why young people feel the way they do.

We also have many stories and anecdotes from young people, parents and staff that talk about the impact of individual HeadStart interventions on individuals and small groups of young people, their families and school communities.

We have used this anecdotal information, in combination with local evaluations and learning reviews, to share five takeaways about the success of the programme so far.

- Thousands of young people have received support to become more confident and resilient
- Changing the way we see and respond to mental health
- Delivering on the promise: developed for and by young people
- Creating a movement
- Looking ahead: a legacy beyond the HeadStart programme
Thousands of young people have received support to become more confident and resilient

By summer 2019, over 131,000 young people (aged 10–16) had access to HeadStart’s universal support in schools and community-based organisations. This includes access to safe spaces in schools and the community, where young people can take time out and find trusted adults to talk to, and opportunities to participate in campaigns and whole school resilience-building activities.

Over 18,630 young people have attended at least one session of additional (targeted) support. This ranges from professional guidance and counselling, peer mentoring and drop-in sessions with youth workers, to positive and supportive activities both in and out of school. These include social action, sports, creative activities (from arts and crafts, to dance and music) and producing content for radio, websites and other media.

Making a difference

“This programme really helped pick up a student during some dark experiences and provided them with a positive focus in life.”

Teacher, Blackpool

“My child’s a different child, it’s like she’s been lifted – she is back to her happy self I cannot thank you enough.”

Parent, HeadStart Hull
Those who have been involved are optimistic about the potential of HeadStart to make a difference. Young people tell us that they like taking part and believe that their involvement has led, or will lead, to positive changes in their lives. They say that HeadStart gives them someone to talk to (like a peer mentor, or HeadStart practitioner), as well as knowledge and strategies to cope better with their emotions and other difficulties, such as schoolwork and conflict with friends. A pupil from Wolverhampton talked about gaining confidence, “at school now I feel like I can actually like say things, like ask questions and ask for help.” Another from Hull described how HeadStart had helped him to control his anger, “I didn’t think this would help but it has helped me see things differently. I don’t have to get so wound up.”

School leaders observe that HeadStart interventions seem to have a positive effect on young people’s resilience. They learn essential life skills and gain self-esteem. They have more confidence and participate more in class. School leaders also believe the whole-school focus has a positive impact on children who aren’t directly involved, through, “the development of greater empathy and a shared language.”

HeadStart is about providing a holistic response to a young person’s situation, with support from schools, the community and in the home. Changes in mental health can also result from a range of other factors. So it will take more time to evaluate the services in detail to understand which are effective and efficient, and should be sustained in the long-term.

Changing the way we see and respond to mental health

HeadStart’s focus on a whole school approach to wellbeing is starting to shift mindsets and practices in participating schools. We hear that staff and pupils are more conscious of the way they talk and behave around one another, and how this can affect others. “I am more conscious of language used and understanding the bigger picture of each child,” explained one teacher.
There’s a greater understanding and awareness of what resilience is and why it’s important. One Hull practitioner explained how her thinking had changed: “I used to think, ‘why is that child so challenging?’ Now I think, ‘what’s happening in that child’s life to make them act that way and how can I help?’”

Staff from HeadStart Kent schools explained that the programme had, “focussed their minds on the mental health agenda,” raised the profile of mental health and helped them to build a consistent approach to emotional wellbeing support.

“We spend so much time talking about subjects, grades and data, it’s rare to spend a day looking at wellbeing. Those days are invaluable.”

Newham secondary school

More people see mental health and wellbeing as a shared responsibility, going beyond the school pastoral team to include the whole community. In Blackpool, 18 school resilience committees bring over 100 pupils and staff together to decide priorities for improving resilience. Schools are now beginning to sustain these committees without HeadStart support.

We’ve heard how school staff feel more confident to identify and support young people who are struggling. HeadStart training and techniques have given them the knowledge, understanding and structures to do this. One teacher explained, “Before the training I wouldn’t have had the confidence to approach a young person who was clearly distressed, but, because I’d had the training, I felt confident and the conversation flowed very naturally. The training made the difference.”

Two partnerships have already noticed the positive impact of these changes. The number of inappropriate and unnecessary referrals for additional support has fallen in Hull schools, and, in Blackpool, helping young people to stay in mainstream education has helped to save money.

Schools sharing responsibility for mental health

In Hull, schools and other organisations, such as youth services and social care, wanted a single referral form for additional support (rather than a separate form for each project). The HeadStart team worked with schools and community providers to develop a checklist of risk and protective factors. This formed the basis of the HeadStart Hull Checklist, which is one assessment and referral form to access any of the additional support for young people or parents. The form allows staff to work out if the young person needs to be referred, and to which project, or if they can be supported within the school or community organisation.

All schools and community providers received training on how to use the checklist and how to ensure referrals were appropriate. In the first year, inappropriate referrals to HeadStart Hull were high (approximately 50%) but following the training, inappropriate referrals had reduced by the second year to less than 20%.

This means that more young people get timely support in their own environment rather than sitting on waiting lists. And it means that their difficulties haven’t been unnecessarily escalated or medicalised. For those that are referred on, the schools recognise that they continue to share responsibility for their pupils’ wellbeing, even after the referral.
The practical and emotional value of a trusted, sustained relationship

Children in care are over five times more likely than their peers to have a fixed period exclusion from school. In Blackpool, the Back on Track panel aims to help young people who are looked after to stay in mainstream school, and to level out the playing field by addressing some of the issues and barriers they face.

Young people living in care also face ongoing uncertainty around their future. They regularly move to different foster placements and each time they do it means joining a new family and building a relationship with a new carer.

The Back on Track panel in Blackpool aims to address this uncertainty by making sure support for looked after young people is joined-up. During its first phase, the 14 young people supported by the panel had already lived in 76 different homes.

The panel is made up of representatives from the young person’s school, children’s services and their social worker and the young person is allocated a resilience coach who works with them towards agreed goals by helping them to navigate and link up with different sources of support. Previously this would have been provided in a less joined-up way. Here, the coach remains a constant for the young person when their social worker and foster placements change.

So far, 32 young people have been supported using this model and none have been permanently excluded from mainstream school. Some have had planned, short term placements elsewhere but have returned to mainstream education.

The cost savings made by using this coordinated approach shows that careful use of funding on prevention can generate savings in the medium to long-term, by avoiding the need for more expensive alternative provisions. The first phase of the trial, which supported 14 young people, saved the school up to £8,000 in charges for permanent exclusion, and avoided the council paying £15,000 a year for a place at a PRU.

Delivering on the promise: developed for and by young people

HeadStart was designed to be informed and influenced by young people’s experiences, ideas, needs and aspirations, so co-production has been a golden thread across all aspects of the programme.

“Young people have been at the centre of everything we have done in HeadStart. This doesn’t just mean that we are always thinking of them. It means that we listen to them, consult them, and give them responsibility for decision-making about what we do, and how money is spent. We are accountable to them for our mistakes, and celebrate success alongside them.”

HeadStart Wolverhampton
Young people make decisions about what services should be offered and who should deliver them. When HeadStart Blackpool set out to commission an online counselling service, they asked young people to research the need and potential suppliers. Their feedback was that, “Childline is better and free.” This saved the project money and meant they could promote Childline in Blackpool and invest more in other wellbeing services in the city.110

Young HeadStarters have come up with ideas for new services in their schools and communities, and ways to improve old ones. HeadStart champions in Newham are involved in shaping and designing programmes in schools as well as other activities, including organising annual celebration events. They gain a reciprocal benefit from their involvement, as they develop problem-solving skills and stronger peer relationships.

Young people have interviewed candidates for HeadStart roles in all partnerships. 35 young people have been part of interview panels over the past 12 months in Blackpool alone. They have equality in decision-making and their views have led to roles being awarded to candidates that were different than anticipated.

Young people have awarded HeadStart funding to projects they think are important. Pupils in Kent came up with the Pay It Forward scheme which gives grants of up to £1,000 for local wellbeing projects initiated and designed by young people. A primary school in Maidstone set up a club to train pupils as Wellbeing Ambassadors. Others have set up a support group for parents, built a sensory garden, designed an outdoor classroom and renovated a music studio.111
Young people have their say on how the partnerships should be run and what they should look like. Blackpool’s Young People’s Executive Group said they wanted HeadStart to have its own identity rather than council branding, to make it stand out from statutory provision. As a result of their feedback, a separate identity and logo was introduced.112

Young people deliver services too. They have taken on roles such as peer mentors and wellbeing champions, with positive impacts on many of their peers. “I’m not very confident putting my hand up and everything, and then when I met my mentor she really helped me build up my confidence,” explained one Newham mentee.113

Young people have co-delivered training and events aimed at a range of audiences, from peers and parents to staff and decision-makers. In one school in Kent, young peer mentors from Year 9 have trained pupils at the junior school to become peer mentors so they can help others in their class with the transition.

They have contributed to HeadStart’s research and evaluation by helping to design the main survey questions and making easy-read versions of the research reports. They’ve also co-designed dissemination materials, including posters.

Enabling young people to use their voice for good is important. Young people in Hull wanted to raise awareness of bullying and told the local HeadStart team they wanted to look at it from both perspectives: that of the young person being bullied, and the bully. They went on to develop an Anti-Bullying Summit, a network of ambassadors in schools and youth settings and a film, all of which emphasised the need for support for the person being bullied and the bully.114 The programme lead told us this emphasis might not have been considered without young people’s involvement.

In Wolverhampton, the student-led B-Safe Team co-created an Anti-Bullying Charter for the city with officials from the council and co-launched a Safer Internet Day campaign.115

We’re particularly proud of the fact that many young people who’ve shaped and co-produced HeadStart with our partnerships might not have had opportunities like these or would have lacked the confidence to participate in the past. As one young man recognised, “people that are like me don’t really get opportunities like that”.116

Creating a movement

“As a part of a HeadStart community group we think we will be able to make a collective difference to the lives of young people.”117

Kent community staff survey respondent

HeadStart is making young people’s resilience a community-wide responsibility. The schools and partners involved in the programme act as a catalyst to spread the message. The programme is also training a critical mass of staff who can take this learning with them to other schools as their career progresses, so the messages from HeadStart become embedded across the local area.
Looking ahead: a legacy beyond the HeadStart Programme

As we’ve seen, HeadStart is acting as a catalyst for change locally. Partners are transforming relationships from strategic collaborations to joint efforts to fund and improve practice. Commissioners in HeadStart areas have come together to jointly procure young people’s wellbeing services, sometimes for the first time, helping to make services more joined-up. HeadStart Kernow and public health joint fund a train the trainer offer for the local healthy schools team on how to use new resources for Personal, Social, Health and Economic (PSHE) education based on cognitive behavioural therapy. This means that the trauma-informed approach promoted by HeadStart will now extend into wider PSHE resources. Cornwall’s Start Now promotional campaign, a call to action led by young people, about how to look after their own wellbeing, is also being joint-funded by HeadStart, public health and education.

In Hull, as a result of co-commissioning, counselling is now delivered as one whole service from the age of 5 to 19, rather than as two separate ones for children and young people. This is expected to result in a better service, not least through improved knowledge and support flow between the services.

Getting the community to sign up to resilience

HeadStart is building a Resilience Revolution to embed resilient practice across Blackpool. The goal is to create, “sustainable, whole-system change to the town of Blackpool, transforming systems to give people the right support at the right time and in the right place.” Resilient Therapy is an approach to supporting young people to cope better with hazards, stress and adversity. It is available to everyone in Blackpool, following regular events where people could find out more about it and how to get involved. This has made people more open to joining in, as they see the Resilience Revolution as something they can be a part of, rather than something they are being given.

Sustaining this aspect of the programme isn’t about finding ongoing funding but instead a greater focus on achieving as much awareness and buy-in from the community as possible, before the partnership ends.

Progress has already been made and elements of the programme are being continued without HeadStart support, including school-based, student-led resilience committees. Elements of resilient therapy have been embedded into the induction training for children’s services; helping to ensure that staff are familiar with the resilience framework and use a consistent language with other professionals in the town.
It’s not easy, or indeed quick, to make such changes, when joint funding means moving, changing and joining budgets, changing internal targets, or transforming operations on the frontline. Such changes can affect budgeting, contracting, jobs, pay and working practices in different services on different levels. That’s why the rationale and benefits need to be articulated and explained to staff at all levels, and why it’s so important to evaluate and collate learning.

Local strategic partners are also beginning to invite young people and their families to help them to shape future mental health provision. In Kent, the Clinical Commissioning Groups (CCGs) have invested in two participation workers to engage parents, carers and young people around their experiences of mental health support in the county.

Initial learning from the programme is starting to shape wider practice in HeadStart areas. In Hull for instance, the CAMHS clinical service has developed a neurodevelopmental checklist for referrals for autism and other conditions, which is modelled on the format of the HeadStart Hull checklist.\textsuperscript{121}

The local authority in Kent has embedded HeadStart learning into its new public health service contract for school nurses, who are expected to use the HeadStart resilience toolkit, as well as the resilience conversations technique described earlier. This approach is being picked up by schools which aren’t part of the HeadStart programme and is being adopted as the standard for delivery of the whole school approach in all schools involved in the government’s Mental Health Support Teams (MHSTs)\textsuperscript{122} programme in Kent. CCGs are now funding the Youth Mental Health First Aid train the trainer course, thus ensuring there are licensed trainers within Kent who can broaden the training further.

On the front-line, joint working has led to new roles and structures, making sure that support for young people is timely and no one falls through the net. Cornwall’s facilitator roles, based in local VCS organisations, help to support cross-sector working. Facilitators hold the relationship with a young person and their family to ensure support is provided when and where it’s needed. They provide links with schools, community groups and professionals. This stops young people from falling through the gaps, either because they don’t meet the threshold for CAMHS or they are on a waiting list to receive specialist help.

**Working together to support young people**

In Wolverhampton, local steering groups bring together VCS organisations, statutory services, volunteers, parent ambassadors and independent providers. They take ownership of support for young people’s emotional wellbeing in their area and work together to share learning, expertise and resources.

There are also four bases where HeadStart multi-disciplinary teams, made up of a schools co-ordinator, a community co-ordinator and a young person’s engagement worker, are based together with a CAMHS link worker. Co-locating staff means they can coordinate opportunities and information across services and sectors so that HeadStart can respond to local needs. Some are now based in strengthening families hubs (which provide support and activities for families with children from birth to 18) to ensure their sustainability.
6. Key challenges and things to consider

Of course it hasn’t all been easy. Partnerships have faced challenges and learned lessons along the way. Demand has exceeded capacity for a number of services, and the young people coming forward have often been dealing with more complex mental health issues than anticipated.

Partnerships have found it difficult to engage parents and are working to understand why this is and what they can do to bring more families on board. They haven’t always managed to maximise the impact of wellbeing interventions either. We’re learning that all interventions, whether they tackle these issues head on or indirectly, need to articulate and make explicit their messages for young people about how the activity links with resilience or wellbeing. We know now that young people get more out of group wellbeing activities when they start with individual goal-setting and finish with an opportunity to reflect on progress and learning. We need to resource this in the future.

While the six partnerships are all working towards a shared goal, it will be interesting to learn how the different contexts in which they work have influenced the way they have approached this goal. How have they supported young people who live in remote locations? How can the learning from the programme be scaled up to cover a larger cohort of schools? What have they learned about working with young people in different settings? How have they addressed diversity and transience within their local populations?

Preventative measures have the potential to stop problems from escalating to the point where more intervention is needed later on. The HeadStart partnerships have told us they think preventative support measures need to start even earlier than HeadStart does (age 10). Going forward, many partnerships will take their learning from the programme and apply it to a broader age range.

While this report has focused on telling the story of HeadStart, we’ll address emerging learning from the programme in our follow-up paper, to be published in 2020.
## Annex 1 – HeadStart Partnerships

<table>
<thead>
<tr>
<th>Partnership</th>
<th>Partners</th>
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<tbody>
<tr>
<td><strong>Blackpool</strong></td>
<td>Led by Blackpool Council with representation from young people, Blackpool teaching hospitals NHS foundation trust, Blackpool Fulfilling Lives &amp; Better Start partnerships, Lancashire Mind, and schools. The Resilience Revolution is led by stakeholders across the town and spanning the community, public and private sector.</td>
</tr>
<tr>
<td><strong>Cornwall</strong></td>
<td>Led by Cornwall Council, with representation from Schools, NHS Kernow, Cornwall Partnership Foundation Trust, Public Health and the Voluntary Community Sector</td>
</tr>
<tr>
<td><strong>Hull</strong></td>
<td>Led by Hull City Council with representation from public health, school (teachers and governors), youth services, voluntary and community sectors and health organisations</td>
</tr>
<tr>
<td><strong>Kent</strong></td>
<td>Led by Kent County Council with representation from public health, education, social care, police, CCGs and local authority commissioners and the Voluntary and Community Sector</td>
</tr>
<tr>
<td><strong>Newham</strong></td>
<td>Led by Newham Borough Council with representation from schools, CCG/LA commissioner, cabinet members, youth service, CAMHS and children’s services</td>
</tr>
<tr>
<td><strong>Wolverhampton</strong></td>
<td>Led by City of Wolverhampton Council with representation from local schools and university, voluntary and community sectors, CCG, public health, and police</td>
</tr>
</tbody>
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Source: National Lottery Community Fund HeadStart team
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Sources

1 Evidence Based Practice Unit. (Undated). HeadStart Learning Team. [online] Available at: ucl.ac.uk/evidence-based-practice-unit/headstart-learning-team [Accessed 02 Sep 2019]

2 Partners include the Child Outcomes Research Consortium (CORC), Common Room, the London School of Economics (LSE), and the University of Manchester


16 Reports from the evaluation can be found here: ucl.ac.uk/evidence-based-practice-unit/headstart-learning-team/headstart-reports


19 Kessler, R. et al. (2005), in Mental Health Foundation. (2016).


21 Read more about the four different types of disorders on page 7 of Sadler, K. et al. (2018).


24 Menzies, L., Bernardes, E., Huband-Thompson, B.


De Decker, E. National Lottery Community Fund, 7 August 2017 email


Head, R. HeadStart Cornwall, 5 January 2019 email

As part of the longitudinal study, the same young people will be interviewed again once a year over the course of the programme.


Complete data on all study variables was available for 28,160 out of 30,866 adolescents. See the following article for further information: Deighton, J. et al. (2019). Prevalence of mental health problems in schools: poverty and other risk factors amongst 28,000 adolescents in England. British Journal of Psychiatry.

Deighton, J. et al. (2019).


Deighton, J. et al. (2019).
For example, the Child and Adolescent Mental Health Survey collects data on 5- to 15-year-olds (and more recently up to 19-year-olds).


7.7% among Year 7s, compared to 7.4% amongst Year 9s. Deighton, J. (2018).

Young people from a white background are more likely to experience emotional difficulties than young people from an Asian, black, mixed or “any other” ethnic grouping. The odds of experiencing such problems were similar for young people from a Chinese ethnic background to those from a white ethnic grouping.

The odds of young people from a black or mixed background experiencing such problems were similar to the odds of those from a white ethnic background.


Child in Need status: a child who either (a) is unlikely to achieve/maintain a reasonable standard of health and development without local authority provision; (b) is likely to be impaired without local authority provision; or (c) is disabled)  UK Government (1989). Children Act, 1989. [online] Available at: legislation.gov.uk/ukpga/1989/41/contents [Accessed 2 Oct 2019]


Phillips, P. 11 July 2018 e-mail

Phillips, P. 11 July 2018 e-mail


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76 ‘Early help’ refers to services for children and young people showing indicators of emerging difficulties or additional needs. These can include anything that affects their health, development, wellbeing and safety, such as significant housing needs, stress and anxiety, conduct and behaviour disorders, young carers and children or young people with a parent experiencing a mental health difficulty.


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HeadStart Wolverhampton (2016). Big Lottery Bid Success: HeadStart Wolverhampton awarded £8.8 million over five years to develop services and programmes for young people.


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HeadStart Hull. (Undated). A Brief Guide to HeadStart Hull Services

HeadStart Hull programme manager, 10 Oct 2019 email

If you would like a copy of the checklist, please get in touch with the Hull HeadStart team at: headstarthull@hullcc.gov.uk

Case study based on information provided by internal colleagues and HeadStart Blackpool


HeadStart Blackpool, 3 December 2018 face-to-face group interview.

112 HeadStart Blackpool, 3 December 2018 face-to-face group interview.


115 HeadStart Wolverhampton. (Undated). The B-Safe Team: Junior Safeguarding Children Board.

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121 HeadStart Hull programme manager, 10 Oct 2019 email


124 cornwall.gov.uk/headstart; your-way.org.uk

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126 headstartkent.org.uk

127 headstartnewham.co.uk