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Learning from HeadStart: the relationship between mental health and school attainment, attendance and exclusions in young people aged 11 to 14

The latest findings from the HeadStart Learning Team



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What is HeadStart?

HeadStart is a five-year, £58.7m National Lottery funded programme set up by The National Lottery Community Fund, the largest funder of community activity in the UK. It aims to explore and test new ways to improve the mental health and wellbeing of young people aged 10 to 16 and prevent serious mental health issues from developing.

Six local authority led HeadStart partnerships in Blackpool, Cornwall, Hull, Kent, Newham and Wolverhampton are working with local young people, schools, families, charities, community and public services to make young people's mental health and wellbeing everybody's business.

The HeadStart Learning Team

The Evidence Based Practice Unit at the Anna Freud National Centre for Children and Families and UCL is working with The National Lottery Community Fund and the HeadStart partnerships to collect and evaluate evidence about what does and doesn't work locally to benefit young people now and in the future.

Partners working with the Evidence Based Practice Unit on this evaluation include the Child Outcomes Research Consortium (CORC), Common Room, London School of Economics and the University of Manchester.

Glossary of terms frequently used in this briefing

Attention difficulties/hyperactivity: includes finding it hard to concentrate or stay still, being easily distracted

Behavioural difficulties: includes frequently getting angry, acting out and getting into fights often

Child in Need (CiN) status: according to the 1989 Children Act, a Child in Need either a) is unlikely to achieve/maintain a reasonable standard of health and development without local authority provision; or b) is likely to be impaired without local authority provision; or c) is disabled

Difficulties with peers: includes struggling to make friends and being picked on by others

Emotional difficulties: includes frequently feeling unhappy, downhearted or tearful

Free School Meals (FSM) eligibility: in England, a Free School Meal (FSM) is a statutory benefit available to school-aged children from families who receive other qualifying benefits and who have been through the relevant registration process

National Pupil Database (NPD): a collection of data relating to pupils and education in England compiled by the Department for Education

Special Educational Needs and Disabilities (SEND): a child or young person has special educational needs and disabilities if they have a learning difficulty and/or a disability that means they need special health and education support



Evidence Briefing #3

Executive summary

Introduction

- This Evidence briefing builds on [Evidence Briefing #1ⁱ](#), which analysed survey responses from children and young people taking part in HeadStart's annual [Wellbeing Measurement Framework \(WMF\)](#).
- In Evidence Briefing #1ⁱ, we reported on baseline survey responses from over 30,000 children and young people to explore prevalence of mental health problems in 11 to 14 year olds. Findings indicated that just under one in five children and young people completing the survey were experiencing emotional difficulties and just under one in five were experiencing behavioural difficulties.
- In this Evidence Briefing, we use the same data to report on:

1. The relationships between mental health, academic attainment and being persistently absent from school looking at 15,301 Year 7 pupils during HeadStart 2017.

2. The relationship between mental health issues and school exclusions looking at 30,569 Year 7 and Year 9 pupils during HeadStart 2017.

Findings

- The schools involved in HeadStart are located in less socially and economically advantaged areas than typical schools nationally. They also differ from national averages in terms of proportions with special educational needs and proportions of white pupils, both of which are higher in the HeadStart sample, so all results must be understood in this context.

Mental health, academic attainment and being persistently absent from school

- As the level of mental health difficulties increased, attainment results decreased.
- As mental health difficulties increased, being absent from school increased.

Mental health and being excluded from school

- Those more likely to be excluded were:
 - boys
 - those from mixed or black ethnic groups
 - those in the older age group
 - those who had Special Educational Needs and Disability (SEND), eligibility for Free School Meals (FSM) and those who have Child in Need (CiN) status.
- Those who were excluded from school had higher scores for behavioural difficulties, difficulties with peers and attention difficulties.
- Those who were excluded also had lower scores for positive wellbeing, emotional strengths and skills and support networks.

Implications and recommendations

- The interplay between mental health difficulties and difficulties in other domains of life is highlighted in this briefing.
- Findings emphasise the importance of joined-up approaches to supporting children and young people such as those being implemented as part of the HeadStart programme. This is not just in terms of the range of areas in which a child may be experiencing

difficulties but also in terms of ensuring support is provided from multiple sources: families, schools and communities.



General background

In 2017, the HeadStart Learning Team, in collaboration with the HeadStart partnerships, began building the evidence base for HeadStart through the use of a Wellbeing Measurement Framework (WMF) for children and young people. This framework is an annual self-report survey which asks children and young people in schools participating in HeadStart about their resilience, mental health and wellbeing.

In the first year of the survey (HeadStart 2017), 30,843 children and young people in Years 7 (age 11–12) and 9 (age 13–14) across 114 schools completed the WMF.

Evidence Briefing #1, released in January 2018, drew on these baseline survey responses to consider the prevalence of mental health problems in children and young people. It reported that 18.4% of participating children and young people were experiencing emotional problems and 18.8% were experiencing behavioural problems.

There were gender differences in the proportions experiencing these difficulties, with more girls (24.9%) than boys (10.9%) experiencing emotional difficulties and more boys (23.1%) than girls (15.1%) experiencing behavioural difficulties.

Findings also indicated elevated risk of experiencing mental health difficulties based on a range of characteristics including SEND, deprivation (FSM eligibility) and CiN status.

This briefing explores these baseline data further, firstly by investigating the links between children and young people's emotional and behavioural difficulties, their academic attainment and school attendance, and secondly exploring links with school exclusions.



Mental health, academic attainment and being persistently absent from school

Introduction

A negative association between behavioural problems and academic attainment has been identified in previous research. However, the associations between emotional problems and academic attainment have produced mixed results, suggesting a need for further investigation.ⁱⁱ

Further research in this area is also important because of the association between educational outcomes (such as academic attainment) in childhood and many later-life social and economic outcomes, including occupation, earnings and health.ⁱⁱⁱ

Sample

The findings presented here are based on a subset of pupils who provided baseline responses on the Wellbeing Measurement Framework (WMF) (described above) for whom recent data regarding academic attainment were also available from the National Pupil Database (NPD). Because recent attainment data were only available for the Year 7 group, analysis was carried out only for this year group who make up around half of the full survey sample (15,301).



Measures

One of the scales in the WMF is the self-report version of the Strengths and Difficulties Questionnaire (SDQ), a brief emotional and behavioural screening questionnaire for children and young people. In this study, emotional difficulties, behavioural difficulties, hyperactivity/attention difficulties and difficulties with peers were measured using the SDQ. Example items include:

- "I am often unhappy, down-hearted or tearful" (emotional difficulties);
- "I get very angry and often lose my temper" (behavioural difficulties);
- "I am restless, I cannot stay still for long" (attention/hyperactivity difficulties);
- "I am usually on my own. I generally play alone or keep to myself" (difficulties with peers).

Those whose responses scored above the borderline threshold on the questionnaire were considered as having raised levels of the respective difficulty.

Attainment and persistent non-attendance at school were derived from the NPD. It should be noted that, due to the nature of the routine information captured by the NPD and the time points at which this is collected, collated and shared with third parties, the data derived from this source precedes the WMF survey data on child mental health and wellbeing by one academic year.

Attainment was measured with the Key Stage 2 (KS2) standardised national tests (taken by 11-year-olds in the final year of primary school) for English (reading and writing) and mathematics.

80 is the lowest score that can be awarded and 120 is the highest score. Pupils scoring at least 100 will have met the expected standard. Consistent with the UK government's definition, persistent non-attendance at school was considered present if a pupil missed 10% or more of their possible sessions during the 2015/16 academic year.

Also derived from the NPD were:

- Ethnicity: ethnicity based on the NPD's major ethnic groupings: Asian, Black, Chinese, Mixed, White or any other ethnic group.
- Special Educational Needs (SEND): SEND data are based on school records. Children identified by their school as having SEND, whether with or without statement/Education, Health and Care (EHC) plan, were considered to have SEND for the purpose of this analysis.
- Ever being eligible for Free School Meals (FSM): FSM is frequently used as an indicator of low family income since only families on income support are entitled to claim free school meals.
- Child in Need (CiN) status (see p.3 for definition).



Findings

We found that across all of the mental health issues we looked at, on the whole:

1. As mental health difficulties increased, being absent from school increased.
2. As the level of mental health difficulties increased, attainment results decreased.

In order to understand if one of the difficulties has a bigger impact than another, all the mental health difficulties were analysed together. The results showed that:

3. As emotional difficulties and hyperactivity/attention difficulties increased, being persistently absent from school also increased. However, no relationship remained between behavioural difficulties or difficulties with peers and persistent absence.
4. As behavioural difficulties, hyperactivity/attention difficulties and difficulties with peers increased, academic attainment decreased. However, no relationship remained between emotional difficulties and attainment.

We also found:

1. Being Asian (compared to being White) and being older in the year group were related to higher attainment.
2. Having SEN, FSM eligibility and CiN status were related to lower attainment.
5. Being older, having SEN, FSM eligibility and having CiN status were associated with being persistently absent from school.
6. Being Asian (compared to being White) and being Black (compared to being White) decreased the likelihood of being persistently absent.

Full paper: Lereya, S.T., Patel, M., dos Santos, J.P.G.A., & Deighton, J. (2019). Mental health difficulties, attainment and attendance: a cross-sectional study. *European Child & Adolescent Psychiatry*, doi.org/10.1007/s00787-018-01273-6

Conclusions and implications

Our findings highlight the links between mental health difficulties, lower academic attainment and being persistently absent from school. The results also seem to replicate findings from earlier research indicating the potentially weaker relationship between emotional difficulties and academic attainment.

However, the findings also highlight the relatively stronger relationship between emotional difficulties (as well as hyperactivity/attention difficulties) and school absence.

On the whole, the findings further highlight the interplay between mental health outcomes and academic outcomes. They also support the importance of policy and practice initiatives to support better links between schools and mental health services, and the focus on wider set of outcomes, such as those considered in HeadStart, when implementing programme to support mental health and wellbeing.

They also suggest the need for school-based professionals to consider whether those experiencing academic difficulties might be experiencing a wider range of difficulties, including mental health problems.



Mental health and school exclusions

Introduction

Exclusion refers to the expulsion or suspension of a student from school. It is a disciplinary sanction that can only be exercised by a headteacher in response to serious breaches of a school's behaviour policy or criminal law.

Fixed-term exclusions account for most of all exclusions. This means a student is excluded from school for a fixed, predetermined time, before resuming their studies at the same school. Fixed-term exclusions cannot amount to more than 15 days in any one term. Alternatively, permanent exclusions mean that a student is permanently removed from a school.

Exclusion is associated with poor mental and physical health, substance abuse, antisocial behaviour, crime, low academic achievement, unemployment and homelessness.^{iv,v} National educational data reveal that exclusion occurs disproportionately in certain groups, including boys, some ethnic minorities, those eligible for Free School Meals (FSM) and children who have Special Educational Need and Disability (SEND).^{vi}

Previous research has also identified certain risk factors such as poor social skills, emotional and behavioural difficulties and single parenthood.^{vii,viii} Here, we further explore this work by looking at the characteristics of children and young people excluded from school and investigate how they vary by mental health as well as wellbeing, emotional strengths and skills and support networks.

Sample

This analysis looked at 30,569 children and young people from Year 7 (15,729) and Year 9 (14,840) who had both completed the Wellbeing Measurement Framework (WMF) and had available data on exclusions from the National Pupil Database (NPD) relating to the previous academic year.

Measures

Several self-report scales form the WMF completed by students. For this research, emotional difficulties, behavioural difficulties, difficulties with peers, attention difficulties and helping others were measured with the Strengths and Difficulties Questionnaire (SDQ).

Positive wellbeing was measured with the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS), managing emotions was measured with the Trait Emotional Intelligence Questionnaire and coping with stress was measured with the Perceived Stress Scale. Lastly, the Student Resilience Survey was used to gather information such as problem solving, goal setting, empathy and support networks.

Each of these scales use slightly different scoring ranges (e.g. 0–10 for emotional difficulties or 7–35 for SWEMWBS).

Ethnicity, SEND, FSM eligibility, Child in Need (CiN) status and exclusions were derived from the NPD.

Findings

Overall, 596 out of 30,569 pupils were excluded during the 2015–16 academic year.

Those more likely to have exclusions were males, those from mixed or black ethnic groups, those in the older year group, those who had SEND and those who had FSM eligibility.

Mental health, wellbeing, emotional strengths and skills and support networks were investigated for those with and without exclusions as shown in Figure 1.

In terms of mental health, pupils who were excluded from schools had higher scores for behavioural difficulties, difficulties with peers and attention difficulties and had lower scores for positive wellbeing. However, they did not significantly differ from those not excluded in terms of emotional difficulties.

This weaker effect for emotional difficulties is consistent with the findings for the relationship between mental health problems and academic attainment described above.

In relation to emotional strengths and skills, pupils who were excluded reported higher perceived stress, lower levels of empathy and helping others, and poorer problem solving, goal setting and emotion management.

Regarding support networks, pupils who were excluded reported less support from home, school and the community as well as less participation in home, school and the community.

Conclusions and implications

The results suggest that school exclusion is not simply an education issue, but that it is related to child mental health and wellbeing.

The correlational nature of these findings, and the fact that the exclusions data is from the academic year prior to the collection of WMF

data means we cannot tease apart cause and effect. This means we are not able to infer with confidence that mental health problems contribute to conditions making school exclusion more likely. Neither does it allow us to infer whether exclusions might undermine mental health.

However, they do further emphasise the complex interplay between mental health problems and educational issues, suggesting that those most at risk of exclusion are often those who are also vulnerable to other poor outcomes.

Findings suggest that more systemic approaches are needed to tackle the difficulties children and young people face. Possible solutions might include whole-school approaches like those being undertaken by the HeadStart partnerships.



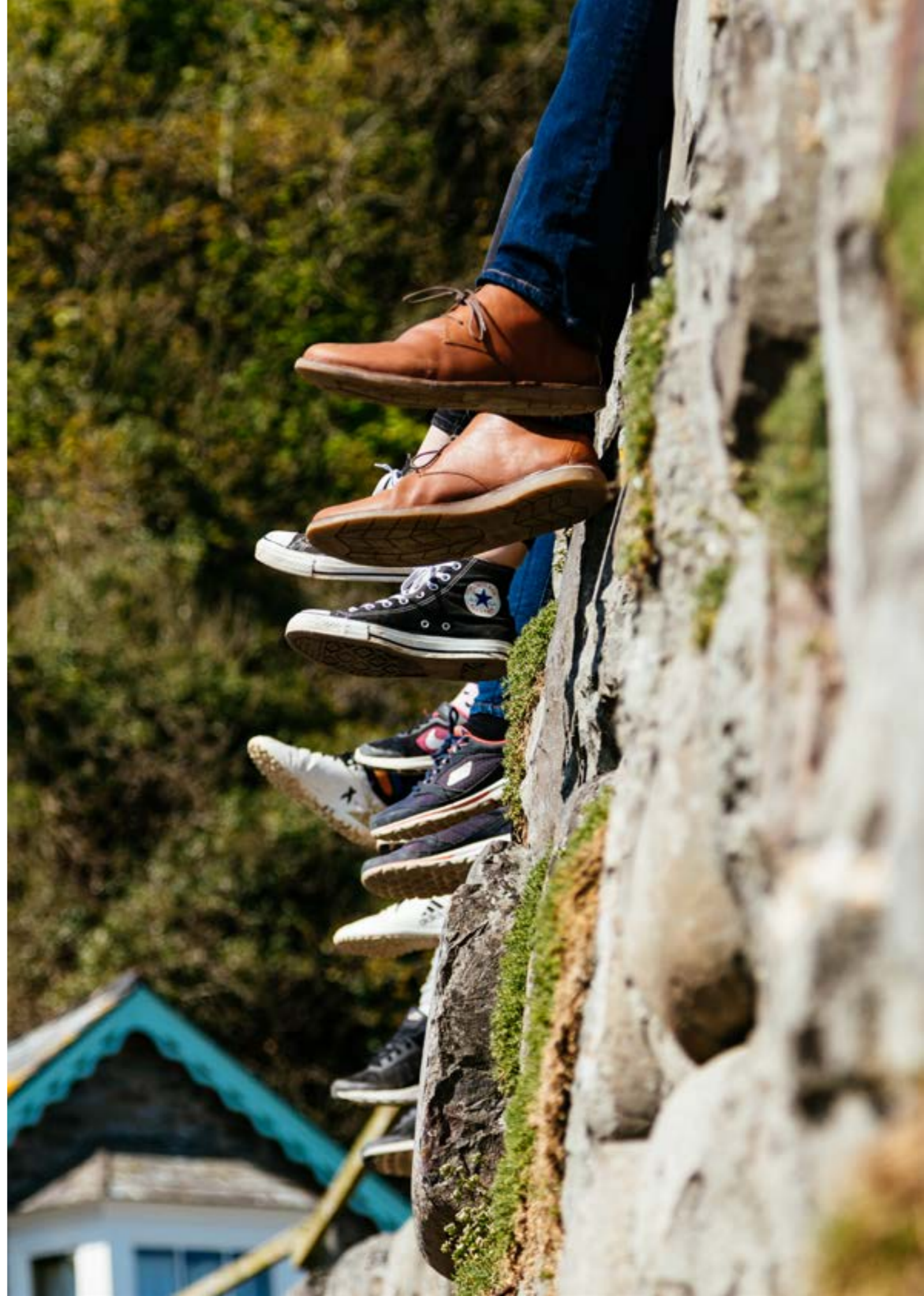
Figure 1. Reported difficulties, strengths and support by excluded and not excluded children. All differences are statistically significant apart from *emotional difficulties*.

Key ■ Average (mean) score of **excluded** children out of around 500 pupils ■ Average (mean) score of **not excluded** children out of around 28,000 pupils



Overall implications and recommendations

- The interplay between mental health difficulties and difficulties in other domains of life is highlighted in this briefing.
- Findings emphasise the importance of joined-up approaches to supporting children and young people such as those being implemented as part of the HeadStart programme. These should not just address the range of areas in which a child may be experiencing difficulties, but also they should ensure that support is provided from multiple sources, including families, schools and communities.



References

- i. Deighton, J., Lereya, T., Patalay, P., Casey, P., Humphrey, N., & Wolpert, M. (2018). Mental health problems in young people, aged 11 to 14: Results from the first HeadStart annual survey of 30,000 children. London: CAMHS Press.
- ii. Veldman, K., Bültmann, U., Stewart, R.E., Ormel, J., Verhulst, F.C., & Reijneveld, S.A. (2014) Mental health problems and educational attainment in adolescence: 9-year follow-up of the TRAILS study. *PLoS ONE* 9(7), e101751.
- iii. Crystal, S., Shea, D., & Krishnaswami, S. (1992). Educational attainment, occupational history, and stratification: determinants of later-life economic outcomes. *J Gerontology*, 47, 213–221.
- iv. Pirrie, A., Macleod, G., Cullen, M. A., & Mccluskey, G. (2011). What happens to pupils permanently excluded from pupil referral units and special schools in England? *British Educational Research Journal*, 37, 20.
- v. Daniels, H., & Cole, T. (2010). Exclusion from school: Short-term setback or a long term of difficulties? *European Journal of Special Needs Education*, 25, 16.
- vi. Department for Education. (2018) Permanent and fixed period exclusions in England: 2016 to 2017. Department for Education.
- vii. Hemphill, S. A., Plenty, S. M., Herrenkohl, T. I., Toumbourou, J. W., & Catalano, R. F. (2014). Student and school factors associated with school suspension: A multilevel analysis of students in Victoria, Australia and Washington State, United States. *Children and Youth Services Review*, 36, 87–194.
- viii. Paget, A., Parker, C., Heron, J., Logan, S., Henley, W., Emond, A., & Ford, T. (2018). Which children and young people are excluded from school? Findings from a large British birth cohort study, the Avon Longitudinal Study of Parents and Children (ALSPAC). *Child: Care Health and Development*, 44, 285–296.



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About the HeadStart Learning Team

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Partners working with the Evidence Based Practice Unit on this evaluation include the **Child Outcomes Research Consortium (CORC)**, **Common Room**, **London School of Economics** and the **University of Manchester**.

For more information visit: www.ucl.ac.uk/ebpu

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