

# **A Place to Be**

## **Place2Be at Claremont Primary School, Manchester**

### **Introduction**

Over half of long-term mental health problems develop during school age. Early intervention and treatment not only has a vast impact on a person's lifelong wellbeing, but it can also have significant economic healthcare savings in the long term.

Schools make attempts to address issues like trauma or mental distress, but teachers are ill-equipped to diagnose or cope with such challenges. Meanwhile the quality of statutory services for children's mental health is at best variable, leaving a significant gap in care.

What can be done within schools to effect illness prevention and build trust with young people? How can children's mental and emotional resilience be fostered to support them in being happy, confident and settled?

### **Origins of the project**

Place2Be was launched in 1993 to develop mental wellbeing among children and support parents and school staff. The initiative is based on the premise that early support is crucial to building youngsters' resilience.

It has been estimated that around three children in every classroom have a mental health problem – this covers a wide spectrum ranging from anxiety and depression to PTSD and schizophrenia. Mental and emotional distress can have extremely damaging effects on children's confidence, relationships, learning and physical health.

Place2Be's services are available to around 90,000 children in 230 UK primary and secondary schools. The organisation's current annual turnover is £11.7M. This is funded by schools (just over 50%), national government grants (15%) and the balance from trusts and foundations as well as continuous fundraising efforts (this year's goal is £3.5M). This is equivalent to £130 per pupil or £26,000 for a school of 200 pupils.

Place2Be has been working with Claremont Primary School since 2008. The school, based in Manchester's Moss Side, has a highly diverse and transient population. Many children have experienced the emotional upheaval of being uprooted, some from war zones, and several of the young people are coping with severe emotional trauma.

### **Partnership working**

Place2Be works within the school, collaborating with teachers to support the curriculum and devising sessions such as successful transitioning to secondary school. The project also has strategic links with Action on Addition and Achievement for All.

### **Approach and delivery**

Place2Be offers counselling and therapy for children, helping them establish and develop their sense of wellbeing. These take place three days a week in the school, and are delivered by trained and volunteer counsellors. Lunchtime 'Place2Talk' drop-in sessions allow pupils to discuss surfacing problems.

“Place2Be brings me reassurance that trained professionals are here working with an evidence-based approach, giving ongoing support to the children and the school community,” says headteacher Pauline Dempsey. “They are dedicated solely to this work rather than teachers trying to do both.”

Being within the school allows Place2Be to form trusting relationships with children, reinforcing key notions of a safe space. The project normalises mental health and removes stigma, with parents, teachers and children all encouraged to openly discuss problems.

Within therapy, children are not ‘treated’ with a prescribed approach for specific difficulties. Rather the sessions focus on stepping-stones to wellbeing – building confidence, resilience, concentration and communication. Sessions take an integrative, child-centred approach enabling freedom of expression without undue interference or demands from the counsellor. Play and creative activities underpin sessions. Children communicate using symbols or metaphors to address issues that may be overwhelming or difficult to understand.

The core issues facing pupils have remained largely consistent over time; these include relationships and emotional problems. The project is also aware of the need to respond to newer emerging issues such as self-harming and cyber bullying.

Developing open relationships with parents is also fundamental to how Place2Be works. The project occasionally encounters resistance from parents, sometimes based on differing cultural attitudes towards mental health, and tackles this by frequent, consistent contact and information. Parent counsellors are also employed specifically to offer additional support for fellow parents.

### **Success and outcomes**

Nearly one-third of the school population (24,757 children) accessed Place2Talk drop-in sessions. Approximately 3% requested one-to-one counselling. More than half of those children, who were deemed high-risk on the SDQ scale, were re-classified as low-risk at the end of the sessions – which is considered ‘clinical recovery’.

Over eight in 10 children upset by their difficulties said things had improved as a result of counselling. 79% of parents reported the same changes. Teachers said that 65% of children whose difficulties had disturbed classroom learning, and 70% whose behaviour had been significantly challenging to teachers and their classmates, had improved.

Place2Be’s work is overseen by the Research Advisory Group and the Child Outcomes Research Consortium (CORC), which have found their results to be ‘significantly better’ than other groups working with young people.

### **Future plans and obstacles**

The increased government focus on providing for school pupils’ emotional wellbeing ensures Place2Be projects are in demand.

Place2Be has begun research into the mental health outcomes for children whose parents are receiving parent counselling and are exploring possibilities for tracking long-term adulthood outcomes for those who have engaged with Place2Be as children.

### **Conclusion**

Acting early and normalising the conversation about mental and emotional wellbeing creates a supportive environment that is crucial to developing children's resilience and confidence, as well as tackling existing mental health problems. Place2Be offers a familiar and localised service where high-quality meaningful relationships are fostered. Lifelong mental wellbeing can be promoted, and the financial burden of long-term mental healthcare prevented.

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