RESILIENCE AND RESULTS
How to improve the emotional and mental wellbeing of children and young people in your school
Emotional wellbeing lays the foundation for adulthood, and ensures young people are able to participate fully as adults. It is vital that schools feel confident to play their part in both pastoral support and early intervention activities.

Sarah Teather
Minister of State for Children and Families 2010-2012
Executive Summary

1. Why is it important to support children and young people with behavioural and emotional difficulties in your school?

2. How does having behavioural and emotional difficulties impact on academic attainment?

3. What is the economic argument for supporting the emotional and mental wellbeing of young people

4. What can you do to support pupils with emotional and mental wellbeing?
   – What you can do within the school
   – Commissioning school-based mental health support

5. What funding is available?

6. Concluding statement

7. References

8. Useful organisations and resources
Executive Summary

This document was developed by the Children and Young People’s Mental Health Coalition to help schools understand the importance of supporting their pupil’s emotional and mental wellbeing, and what they can do within the school. It also looks at how they can work in partnership with other local agencies and commission additional support for young people with behavioural and emotional difficulties.

Supporting everyone’s emotional and mental wellbeing and giving additional support to pupils with behavioural and emotional problems is important because:

- 1 in 10 or at least 3 young people in every class has a behavioural or emotional difficulty (Green, et al., 2005).
- Almost half of young people with fewer than five GCSEs graded A* to C said they ‘always’ or ‘often’ feel down or depressed compared with 30% of young people who are more qualified (Prince’s Trust, 2012).
- In an average classroom: 10 young people will have witnessed their parents separate; 1 will have experienced the death of a parent, and 7 will have been bullied (Faulkner, 2011).
- 1 in 4 young people of secondary school age will have been severely neglected, physically attacked or even sexually abused at some point in their lives (NSPCC, 2011).
Executive Summary (continued)

Having a behavioural or emotional difficulty can have a significant impact on young people's academic achievement, and other outcomes. Research has found that:

- **Children with persistent conduct or emotional disorders**¹ are:
  - more likely to be excluded from school,
  - less likely to engage with out-of-school programmes to help them manage their behaviour and improve literacy,
  - more likely to be assessed with special educational needs, and
  - more likely to leave school without educational qualifications (Parry-Langdon, 2008).

- **Children with conduct disorders and severe Attention Deficit Hyperactivity Disorder (ADHD)** may be **four to five times more likely to struggle to attain literacy and numeracy skills** (Green, et al., 2005).

¹These disorders are severe enough to be considered a mental disorder. A conduct disorder is a repetitive and persistent behaviour problem, where major-age-appropriate societal norms or the basic rights of others are violated. Emotional disorders refer to conditions such as depression and anxiety.
Executive Summary (continued)

Promoting the emotional and mental wellbeing of all young people, and providing effective support for those with behaviour and emotional difficulties will:

- Help give your pupils the skills to cope with the ups and downs of life, help them develop good relationships, and reach their full potential. It will also help make the school a healthier and safe environment.
- Help improve the academic attainment of all of your pupils.
- Help you reach Ofsted’s targets to improve the behaviour and safety of pupils, which will enhance the results of your Ofsted inspection.

There are four key things that you should do which this document can support you with » MORE
Executive Summary (continued)

The Children and Young People’s Mental Health Coalition brings together over 70 third sector organisations to campaign on behalf of and with children and young people to effect change in policy and practice that will improve their mental health and wellbeing. One of our current areas of work is on schools. We believe that promoting the emotional and mental wellbeing of all young people, and intervening early to prevent behavioural and emotional difficulties developing is fundamental to improving educational attainment, achievement and behaviour.

This document briefly: sets out the terminology used; outlines why it is important for schools to tackle behavioural and emotional difficulties; explains how these difficulties impact on academic attainment; and discusses what schools can do to help children and young people with these problems. There are case studies included throughout the document which illustrate how schools can promote the emotional and mental wellbeing of all children and young people.
Terminology

There is a lot of confusion around the terminology connected with mental health and wellbeing. We know that some people are not comfortable with the term mental because they associate it with mental illness. However, mental health is an essential component of health and is as important as physical health. Subjective wellbeing refers to how we feel or how happy we are about our lives as a whole, or specific bits of it (The Children’s Society, 2012).

There appear to be core attributes seen in mentally healthy children and young people:

- The capacity to enter into and sustain mutually satisfying personal relationships.
- A continuing progression of psychological development.
- An ability to play and to learn appropriately for their age and intellectual level.
- A developing moral sense of right and wrong.
- The capacity to cope with a degree of psychological distress.
- A clear sense of identity and self worth (YoungMinds, 2010).

Mental health problems refer to a wide range of difficulties, which vary in their persistence and severity. Mild problems are at one end of the spectrum and severe mental illness is at the other.

We know that schools generally do not use the term mental health and tend to use words such as behaviour and emotions. So in this document we will use the term behavioural and emotional difficulties when we are referring to mental health problems, and use the term emotional and mental wellbeing when we are referring to mental health.
1. Why is it important to support children and young people with behavioural and emotional difficulties in your school?

“We strongly believe that our pupils’ wellbeing and mental health matters, and that by intervening early and providing accessible support for our pupils we are giving them the best chance to overcome problems and issues which are currently affecting their young lives.”

Head teacher Cardiff
School working with Place2Be
Young people’s behavioural and emotional difficulties is something that schools should be concerned about because national statistics show it affects 1 in 10 young people (Green, et al., 2005). Using this statistic, it means that at least 3 young people in every class have a behavioural or emotional difficulty. The actual figure may be higher as it doesn’t include children and young people with milder problems.

The following statistics illustrate how some groups of young people are at greater risk of developing behavioural and emotional problems than their peers. These young people may need targeted support as well as any generic emotional and mental health support. » MORE

CASE STUDY: HOW TO SUPPORT YOUNG PEOPLE FROM HIGH RISK GROUPS » MORE

When we use the words young people in the document we are referring to children and young people.
Promoting the emotional and mental wellbeing of all young people, and providing effective support for those with behaviour and emotional difficulties will help give them the skills to cope with the ups and downs of life, help develop good relationships, and help them reach their full potential. It will also help make the school a healthier and safe environment.

Current policy documents, such as the Ofsted Schools Inspection Framework (Ofsted, 2012) and the Teachers’ Standards (Department for Education, 2012c), both refer to teachers’ ability to manage behaviour in the classroom. Behaviour and safety of pupils in the school is one of the key judgement areas for Ofsted inspections.

Providing support for young people with behavioural and emotional difficulties, and supporting their emotional and mental wellbeing will help demonstrate that your school is actively working to improve this element of the Ofsted inspection. The case studies included in this guidance give some examples of what your school can do.

As outlined by the Department of Education (DfE) (2010) ‘good schools play a vital role as promoters of health and wellbeing in the local community and have always had good pastoral systems’. The Positive for Youth strategy refers to schools as health promoting environments, and that the school and college workforce have a role in improving young people’s health and wellbeing (Department for Education, 2011c). Providing support for young people with behavioural and emotional difficulties and promoting emotional and mental wellbeing will also demonstrate how your school is meeting other government policies, such as the Mental Health Strategy (Department of Health, 2011).
2. How does having behavioural and emotional difficulties impact on academic attainment?

“There were numerous drives to reduce unhealthy eating, but nothing to support emotional wellbeing beyond an anti-bullying strategy, or to talk about coping with exam stress, which only scratch the surface of wellbeing.”

Young Person
Right Here Project
There is a lot of evidence which demonstrates that behavioural and emotional difficulties have a profound effect on the educational attainment of some young people. » MORE

CASE STUDY: HOW TACKLING CYBERBULLYING IMPROVES OUTCOMES » MORE

“ I don’t like it in the playground as I’m scared I’m going to be picked on. ”

Young Person
What About Us Project
3. What is the economic argument for supporting the emotional and mental wellbeing of young people?

“"My daughter has definitely changed... In the way she feels about her school life, her home life, and just the way she is in herself - she is a lot happier, calmer than what she was before she came here."

Parent talking about Place2Be service provided within the school.
The previous section illustrated how young people with behavioural and emotional difficulties are likely to experience poorer outcomes than their peers. Childhood behavioural and emotional difficulties often continue into adulthood and can become more severe and enduring. Investing in support for young people with behavioural and emotional difficulties can help them achieve academically and improve longer-term outcomes such as employment and health.

School-based interventions can be very cost-effective. Economists have found that school-based violence prevention programmes become cost-effective and cost saving within three years. Net savings are £829 per child at year 6, increasing to £1,721 per child at year 7, £6,446 at year 10 and £8,223 at year 15. In the first six years, most savings accrue to the public sector, particularly the NHS and Education (Knapp, et al., 2011).

The national charity Place2Be, aims is to enhance the wellbeing and the prospects of children and their families by providing counselling services in school. It has been found that for every £1.00 spent on their services, a saving of £6.00 will be made over a lifetime including reduced health and social services cost, welfare benefits and the emotional and economic impact on families. Moreover, economic analysis showed that this service was over 40% cheaper than traditional CAMHS.
4. What can you do to support pupils’ emotional and mental wellbeing?

“I think it (exams) certainly aided my already apparent depression, I couldn’t cope with the work load and with little support I broke down at the time I should have been studying the hardest. The expectations that are placed on students to reach national success are in some places obscene.

Young Person
Very Important Kids (VIK) Project.
What you can do within the school

There needs to be a whole school approach to emotional and mental wellbeing. This should include supporting the emotional and mental wellbeing of all pupils, and providing targeted support for those with behavioural and emotional difficulties. To implement this approach, heads and senior staff need to be effective leaders and champion emotional and mental wellbeing within the school (Durlak and DuPre, 2008).

Schools should be healthy places that support the emotional and mental wellbeing of both young people and staff. For this to happen the school needs to have an open and honest culture, which promotes and is respectful of both young people’s and staff’s emotional and mental wellbeing. Shared decision making has been shown to be a key aspect of implementing a whole school approach. An effective school council is a good way to involve young people in the running of the school and implementing a whole school approach to supporting emotional and mental wellbeing.

CASE STUDIES: WHOLE SCHOOL APPROACH TO BUILDING EMOTIONAL RESILIENCE
- YOUNGMINDS IN SCHOOLS PROJECT » MORE
- BUILDING EMOTIONAL RESILIENCE IN DENNY SCHOOLS » MORE
- BE YOUR BEST PROJECT – LOVEURSOUL » MORE

CASE STUDY: CHILDLINE HELPLINE SERVICE » MORE
CASE STUDY: CHILDLINE SCHOOLS SERVICE » MORE
CASE STUDIES: SUPPORTING YOUNG PEOPLE WITH COMLEX SEN
- Making Sense of Mental Health » MORE

There are opportunities to integrate emotional and mental wellbeing into the curriculum, assemblies and other systems that already exist within the school. A good pastoral system and staff such as learning mentors, teaching assistants, higher level teaching assistants, and school nurses are all important resources to draw on to help children and young people who are experiencing difficulties.
PSHE and the Wider Curriculum
Emotional and mental wellbeing can be promoted via relevant PSHE lessons and the curriculum more generally. We know from the young people we work with that PSHE lessons are often boring, and they often feel ‘talked at’, or just given a factsheet to read. To be effective, the lessons need to be regular, relevant, up-to-date, interactive and interesting. Lessons that focus on emotional and mental wellbeing can help young people learn how to look after their own wellbeing. It can be a good way to help young people who already have behavioural or emotional difficulties to learn more about their condition and how to access help.

There are a wide variety of PSHE resources from voluntary sector services and other organisations on building emotional and mental wellbeing, as well as on how to manage behavioural and emotional difficulties. Please see our Useful Resources Section for more information.

Anti-Bullying Policy
An anti-bullying policy that is effectively implemented across the whole school will help to promote emotional and mental wellbeing, and help reduce behavioural and emotional problems. This policy need to cover cyberbullying, racial bullying, sexually orientated bullying and the bullying of particular groups such and young people with disabilities.

Healthy Schools Programme
This Department for Education initiative helps schools to plan, deliver and review health and wellbeing improvements for young people (Department for Education, 2011b). Emotional and mental wellbeing can be promoted as part of this initiative as it is an essential element of health.

The Healthy Schools toolkit can be found at the following link: www.education.gov.uk/schools/pupilsupport/pastoralcare/health/a0075278/healthy-schools
Statutory Exclusions guidance
Tackling challenging behaviour is important, but our concern is that young people with behavioural and emotional difficulties such as ADHD or conduct disorders, are often seen as being naughty or badly behaved. Guidance on exclusions from the Department for Education (2012a), states that disruptive behaviour can be an indicator of unmet needs, and that schools should try and identify the cause at an early stage and consider a multi-agency assessment that looks beyond a young person’s educational needs. Therefore, schools should work with other local services to ensure that the single assessment process and an Education, Health and Care Plan, as proposed in the Special Educational Needs Green paper, is carried out (Department for Education, 2012b).

CASE STUDY: HOW TO SUPPORT STAFF » MORE
Supporting Staff
The emotional health and wellbeing of staff and young people within the school are interlinked. As well as supporting the children and young people, it is also important to consider the emotional health and wellbeing of school staff. Supporting staff’s emotional health and wellbeing can lead to reduced sick leave, increased motivation and staff retention. You might want to consider training for staff on: understanding and managing stress; and how to create a reflective space in which to better understand children’s emotional and mental wellbeing and any behavioural and emotional difficulties and how this impacts on staff’s emotions and behaviours. This is also part of a whole school approach to supporting emotional and mental wellbeing.

CASE STUDY: WHAT YOU CAN DO WITHIN YOUR SCHOOL TO BUILD EMOTIONAL RESILIENCE AND IMPROVE EMOTIONAL AND MENTAL WELLBEING

“”
In year 11 they tend to put so much pressure on you as soon as you start the school year so it doesn't help your mental state. Coursework is hard and stressful but my school are good with my issues and will give me support when needed. “”

Young Person
Very Important Kids (VIK) Project.
Commissioning school-based mental health support

Head teachers are in a good position to commission (either independently or working collaboratively with other schools) their own support for young people in their care who have behavioural and emotional difficulties, and to complement other existing services.

The kind of service you commission will be based on your local needs. For instance, you could commission a school-based counselling service, peer mentoring and other types of support such as those listed in our case studies. Following are some important things to think about when commissioning support for your school:

« MORE »

We have a number of children whose emotional needs are beyond the ordinary expertise of teachers and whose behaviour impeded their progress and the progress of others. Helping them helps all the pupils in the school.

Head teacher, Croydon
School working with Place2Be.
What services are already available locally?

• **Local Voluntary and Community Sector Organisations (VCS)**
  You could consider making contact with local VCS services such as your local Youth, Information, Advice and Counselling Service (YIACS). You can find your local YIAC at: [www.youthaccess.org.uk/directory/](http://www.youthaccess.org.uk/directory/)

• **Child and Adolescent Mental Health Services (CAMHS)**
  There will be a statutory CAMHS service in your area. It would be useful to find out what services they already provide. It may be possible to discuss with them the possibility of commissioning a support service in the school or for a network of schools.

This may mean a CAMHS practitioner working with the school, and linking with the CAMHS service. Working in partnership can bring in expertise and potentially clarify the CAMHS referral pathway. This is important when a young person requires specialist mental health support that may have to be provided in the clinic. The evaluation of TAMHS found that schools with good links with CAMHS showed greatest decline in secondary pupil’s behavioural difficulties (CAMHS Evidence Based Practice Unit, et al. 2011).
• The Improving Access to Psychological Therapies (IAPT) programme

IAPT is a new initiative to extend access to psychological therapies to children and young people. This initiative will reach a number of areas in the United Kingdom over the next three years. This initiative will be provided by CAMHS services often in partnership with voluntary sector organisations to provide evidence-based treatments. There has been additional money dedicated to this programme to develop e-learning packages for professionals, and this will include teachers. For more information and updates go to: www.iapt.nhs.uk

CASE STUDIES: EARLY INTERVENTION SERVICES

• BOND – BETTER OUTCOMES, NEW DELIVERY » MORE

• THE STUDIO (ADHD) CENTRE » MORE
Supporting families

It is essential to work with families as well as young people. Some groups of children will have behavioural difficulties in school that cannot be resolved without a family focused approach. This kind of approach can identify difficulties in the home, which are leading to problems at school. Working with families may include developing parenting skills, and encouraging parents to engage with their child’s education. This is important as improving parenting skills can effectively help support a young person with behavioural and emotional difficulties. The Building Emotional Resilience in Denny schools project, which is listed as a case study, worked with parents to raise their awareness of emotional and mental wellbeing in their children.

Supporting families can help with your Ofsted inspection, as they analyse parents’ views; and part of the criteria for assessing the quality of leadership within the school is evidenced by how well schools engage parents in supporting pupils’ achievement, behaviour and safety (Ofsted, 2012).

CASE STUDY: SERVICES SUPPORTING FAMILIES
Employing or commissioning a school-based counselling service

There are many different types of counselling/therapy, so find out which one is most appropriate for your school. The age group of children within your school will influence the type of counselling service that you require. Many counsellors are particularly skilled at working with young children using a range of creative, age-appropriate methods, whilst other counsellors specialise in working with older children using more traditional talking therapies. It is important that the counselling style is carefully matched to the needs of your pupils (McGinnis and Jenkins, 2011). The British Association of Counsellors and Psychotherapists (BACP) website has a useful section on their website called ‘finding the right therapist’ [link].

Schools should employ or work with organisations that employ professionally qualified counsellors who have experience of working with children, who access appropriate clinical supervision with experienced supervisors, and who take part in regular, relevant, continuing, professional development (McGinnis and Jenkins, 2011). For these reasons we advocate that schools commission counsellors through a counselling organisation, or local CAMHS, rather than directly employing their own counsellors.

It is equally important that schools play an active role in the recruitment of counsellors as assessing their personal qualities and ability to ‘fit’ within the school as these will contribute to their success.

CASE STUDIES: COMMISSIONING SCHOOL-BASED SERVICES

- PLACE2BE » MORE
- RESPOND – SCHOOL-BASED THERAPY SERVICE » MORE
- COMMISSIONING SCHOOL-BASED SERVICES 42ND STREET » MORE
Safeguarding & child protection

There are a number of safeguarding issues that need to be considered:

- **Is the counsellor adequately qualified?**
  A counsellor should at a minimum be qualified to diploma level in counselling.

- **Are they a member of a reputable organisation?**
  This is important as being accredited means that they work within a code of ethics and practice. Examples of reputable bodies are the British Association of Counsellors and Psychotherapists (BACP)
  [www.itsgoodtotalk.org.uk/therapists](http://www.itsgoodtotalk.org.uk/therapists),
  the United Kingdom Council for Psychotherapy (UKCP)
  [www.psychotherapy.org.uk/](http://www.psychotherapy.org.uk/)
  and the British Psychological Society
  [www.bps.org.uk](http://www.bps.org.uk)

- **Who supervises their practice?**
  The supervisor needs to be an experienced counsellor, hold a post-graduate qualification in counselling, and be experienced in working with young people. There needs to be regular supervision.

- Make sure that they are trained or experienced in working with children or young people depending on the age group of your pupils/students.
If you commission a counselling organisation, some of the counsellors may be trainees on a clinical placement. Check that the trainee has completed at least the first year of a diploma course and how they will be supervised. Many trainees are likely to be studying for a post-graduate qualification in counselling and already be registered with one of the bodies listed above.

All counsellors must pay due regard to current legislation and guidance, and offer confidentiality within usual ethical and safeguarding limits. Any commissioned service must work within the school’s safeguarding procedures and closely with the Designated Child Protection Officers.

Practical considerations » MORE
5. What funding is available?

Schools are increasingly able to use their devolved budgets to commission additional support services to meet the needs of their pupils. Many of the schools we have worked with have found that funding this additional support from their own budgets makes it more sustainable, as government funding may not be available longer term. Also, it gives them more control over the type of support they are commissioning. However, there are currently two central pots of money that may be used to fund this type of work.
The Pupil Premium is available for schools to support children and young people from the most deprived backgrounds. These funds can be used to commission support for young people with behavioural and emotional difficulties, and promote emotional and mental wellbeing. Young people from low socio economic backgrounds are more likely to have behavioural and emotional difficulties. So there is a good rationale for using these funds to support these pupils’ difficulties and improve their emotional and mental wellbeing. Many providers of mental health services in schools are expressly focussing on how counselling and other interventions can help close the attainment gap. This sort of evidence can justify the use of Pupil Premium to commission support for young people with behavioural and emotional difficulties in schools.

http://www.education.gov.uk/schools/pupilsupport/premium

The Early Intervention Grant can be used to support the promotion of emotional and mental wellbeing in schools. For example, Norfolk County Council used £170,000 of their Early Intervention Grant to fund a programme that is used in schools called PATHS (Promoting Alternative Thinking Strategies) (Norfolk County Council, 2011).

www.education.gov.uk/childrenandyoungpeople/informationforprofessionals/a0070357/early-intervention-grant-frequently-asked-questions/
6. Concluding statement

This document has highlighted the high level of behavioural and emotional difficulties in young people and how it impacts on academic achievement and other outcomes. Supporting young people’s emotional and mental wellbeing, or providing additional support for those with behavioural and emotional difficulties, can help them cope with the ups and downs of life, help them develop good relationships, and help them reach their full potential.

To achieve this there needs to be a whole school approach, and a commitment to actively promoting emotional and mental wellbeing. The culture of the school needs to be open, honest, and respectful of both young people and teachers’ emotional and mental wellbeing. To make this a reality, there needs to be strong and effective leadership from the head and senior staff.

Head teachers and senior staff have more control over their own budgets and can commission, or possibly work in partnership with other local organisations to support emotional and mental wellbeing, or provide additional support for young people with behavioural and emotional difficulties. The case studies in this document illustrate what can be achieved within the school, and there is a range of organisations that can help schools support the emotional and mental wellbeing of their pupils and staff. The Children and Young People’s Mental Health Coalition hope that this will help you take up the challenge of improving mental health and wellbeing in your school.
7. References
Click here for references. » MORE
8. Useful Organisations and Resources

Click here for useful organisations and resources. » MORE
About the Children & Young People’s Mental Health Coalition

A membership group of 14 leading children, young people and mental health charities whose aim is to campaign jointly to achieve policy changes to improve the mental health and wellbeing of children and young people across England.

A partnership between The Mental Health Foundation and Zurich Community Trust set up the Children & Young People’s Mental Health Coalition in 2009.

**Coalition core members:**

- Centre for Mental Health
- Family Action
- Mental Health Foundation
- NSPCC
- Place2Be
- Prince’s Trust
- Rethink Mental Illness
- Right Here
- Royal College of Psychiatrists
- Tavistock Centre
- YoungMinds
- Youth Access
- YouthNet
- Zurich Community Trust

For more information contact the Coalition Coordinator on **020 7803 1175**
There are four key things that you should do which this document can support you with:

1. **Quantify** the level of behavioural and emotional difficulties in your school so you can put in place effective measures to support young people and improve behaviour.

2. Develop a whole school approach to emotional and mental health.

3. Utilise existing structures and staff within the school e.g. lessons that cover emotional and mental health, school nurses etc. to promote the emotional and mental wellbeing of your school, and provide additional support for young people with behaviour and emotional difficulties.

4. Commission additional support services for your school. You could commission counselling or other support for your school; or work with other agencies such as your local child and adolescent mental health service (CAMHS) or voluntary sector organisations, to provide additional support. **All these options are covered in this document.**

“In our society when a child becomes ill we reach out to them, we instinctively keep them close and look after them. This response is sadly not always the case when children become emotionally distressed, especially when this distress is communicated through violence and aggression. Rather than being helped, children in difficulty are often pushed away and ignored.”

*Charlie Taylor*  
(Department for Education, 2012d)
The following statistics highlight the range of problems that children and young people experience:

- In an average classroom: 10 young people will have witnessed their parents separate; 1 will have experienced the death of a parent, and 7 will have been bullied (Faulkner, 2011).
- 1 in 5 young people of secondary school age will have been severely neglected, physically attacked or even sexually abused at some point in their lives (NSPCC, 2001).
- 66% of the young people who were involved in the August 2011 riots and appeared before the courts had special educational needs. 42% were in receipt of free school meals (Department for Education, 2011a).
- Between 1 in every 12 and 1 in every 15 children and young people deliberately self-harm (Mental Health Foundation, 2006).
- There has been a big increase in the number of young people being admitted to hospital because of self harm. Over the last ten years this figure has increased by 68%. It is particularly prevalent in females, but this does not mean that males do not self harm (YoungMinds, 2011).
- Almost half of young people with fewer than five GCSEs graded A* to C said they ‘always’ or ‘often’ feel down or depressed compared with 30% of young people who are more qualified (Prince’s Trust, 2012).
These young people may need targeted support as well as any generic emotional and mental health support:

- More than half of gay young people deliberately harm themselves. Two in five gay young people who experience homophobic bullying deliberately harm themselves as a direct consequence of being bullied (Guasp, 2012).
- Boys and young men are more likely to be diagnosed with mental health conditions such as ADHD and conduct disorder, and are more likely to commit suicide (Green, et al., 2005).
- Girls are more likely to be diagnosed with mental health conditions such as depression and eating disorders and are more likely to self harm (Green, et al., 2005).
- 36% of children and young people with learning disabilities will have a mental health problem, compared with 8% of non-disabled children (Emerson & Hatton, 2007).
- There are up to 30 young carers in a secondary school (The Children's Society, 2007); the UK Census 2001 found that there were 114,000 children providing ‘informal’ care for family members, with 18,000 providing around 20 or more hours of care a week, and 9,000 providing 50 or more hours care a week. Around 30% of young people are caring for parents with a mental health problem (Social Care Institute for Excellence, 2005).
- About 40% of deaf children have a mental health problem (Hindley, 2005).
- 12% of black children have a mental health disorder, whereas the prevalence rates among Asian children were 8% of the Pakistani and Bangladeshi and 4% of the Indian samples (Meltzer, et al., 1999).
- About 60% of looked after children have a mental health disorder (NICE, 2010).
Sometimes bad behaviour is written off as just that and staff attempt to manage behaviour, rather than actually digging down to find out if there are any underlying problems, identifying these and working out a support plan with these in mind.

*Young Person*
Right Here Project

I always felt that how I was feeling was of no interest to my school, unless it was severely affecting my grades... but the message needs to be that support is on offer before things really start deteriorating.

*Young Person*
Right Here Project

My son has become more aware of how his attitude can impact on both himself and others around him. The service has also allowed him to become more tolerant of others and accept that certain behaviours have consequences.

*Parent*
of child using Place2Be's services
How behavioural and emotional difficulties impact on educational attainment

There is a lot of evidence which demonstrates that behavioural and emotional difficulties have a profound effect on the educational attainment of some young people.

- **Children with persistent conduct or emotional disorders**: are:
  - more likely to be excluded from school
  - less likely to engage with out-of-school programmes to help them manage their behaviour and improve literacy
  - more likely to be assessed with special educational needs
  - more likely to leave school without educational qualifications (Parry-Langdon, 2008).

- **Children with emotional problems** are:
  - much more likely to do poorly at school (Green, et al., 2005)
  - twice as likely as other children to have marked difficulties in reading, spelling and mathematics (Green, et al., 2005).

- **Children with conduct disorders and severe Attention Deficit Hyperactivity Disorder (ADHD)** may be **four to five times more likely to struggle to attain literacy and numeracy skills** (Green, et al., 2005).

- **People with severe conduct problems** were **3 to 4 times more likely to have no educational qualifications** than those young people who didn’t have these problems (Richards, et al, 2009).

- The evaluation of the Targeted Mental Health in Schools (TAMHS) programme found that **providing mental health support in schools reduced behavioural problems in primary age pupils** (CAMHS Evidence Based Practice Unit, et al., 2011).

- The UK Resilience Programme (Challen, 2011) worked with three local authorities and delivered workshops to Year 7 pupils. They found that there were **significant short-term improvements in pupils’ depression symptom scores, school attendance rates, and academic attainment in England.**

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3 These disorders are severe enough to be considered a mental disorder. A conduct disorder is a repetitive and persistent behaviour problem, where major-age-appropriate societal norms or the basic rights of others are violated. Emotional disorders refer to conditions such as depression and anxiety.
The CyberMentors programme provides both online and offline mentoring for 11-17 year-olds who are experiencing wellbeing and mental health issues, particularly around bullying. Trained CyberMentors (aged 11-17) in schools are supported by Senior CyberMentors (aged 18-25) and British Association of Counsellors and Psychotherapists (BACP) accredited counsellors online.

CyberMentors has been fully and independently evaluated (Banerjee, et al, 2012). The programme is proven to have:

- improved levels of wellbeing and mental health
- reduced the incidence of bullying and violence in schools by 40%
- enhanced a positive school culture, climate and ethos (reduce Incidents of Concern by 73%)
- improved reporting of bullying by 60%
- reduced the levels of exclusion (including exclusions related to bullying) by 31%
- reduced unauthorised pupil absence (e.g., levels of truancy) by over a quarter (27%)
- improved pupil attainment
- reduced the amount of time teachers spend dealing with cases of bullying and cyberbullying

For more information go to: [www.cybermentors.org.uk](http://www.cybermentors.org.uk)
CASE STUDY: WHOLE SCHOOL APPROACH TO BUILDING EMOTIONAL RESILIENCE

YoungMinds in Schools Project

This project is funded by the Department of Education and aims to improve outcomes for children and young people with behavioural and emotional difficulties by providing a comprehensive suite of online learning resources for educational professionals, along with a range of training courses related to mental health and wellbeing in schools.

The project is piloting a programme of training and consultancy in four clusters of schools in England (Tottenham in north London, Southwark in south London, Burgess Hill in Sussex and Weston-super-Mare in Somerset). Each school cluster consists of one secondary and three primary schools. Each pilot programme consists of consultation, two core knowledge modules, and a choice of Therapeutic Storywriting Interventions.

A number of videos have been produced which demonstrate the work that the pilot schools are carrying out:

www.youngminds.org.uk/training_services/young_minds_in_schools/about_youngminds_in_schools

Go to the project website for more information and to access the online learning resources:

www.youngminds.org.uk/training_services/young_minds_in_schools
CASE STUDY: WHOLE SCHOOL APPROACH TO BUILDING EMOTIONAL RESILIENCE

Building emotional resilience in Denny schools - Falkirk, Scotland

This pilot project developed an integrated, holistic approach to building emotional resilience and wellbeing within the school cluster, with a specific focus on supporting the transition from primary to secondary school.

The evaluation found that:

• pupil self-esteem and resilient attitudes were enhanced over time, and worries were reduced ahead of transition
• staff confidence in their ability to promote and facilitate discussion about resilience and emotional wellbeing increased over time
• parents felt more confident in their ability to support their child, with the learning for some having a significant impact on the parent/child relationship
• awareness of resilience and emotional wellbeing in the cluster was heightened
• schools reported a greater focus on, and prioritisation of, resilience, and emotional wellbeing, including consolidation of current practices.

Contact YoungMinds for more information
www.youngminds.org.uk

or see the evaluation report:
CASE STUDY: WHOLE SCHOOL APPROACH TO BUILDING EMOTIONAL RESILIENCE

Be Your Best Project - LoveurSoul

The project’s goal is to enrol the whole school community into a programme of which the central aim is the interest of children’s self esteem and wellbeing.

They have devised a three phase programme starting with teachers and then extending to pupils and their families.

• **Phase One** – evaluation of the current environment to understand issues relevant to the school. This includes physical and emotional issues.

• **Phase Two** – implementation of the Health and Wellbeing system which includes a health portal for teachers to monitor their own health and stress levels. The system includes monthly newsletters to pupils and their parents covering relevant health and wellbeing topics – the school has input as to what is topical at the time.

• **Phase Three** – an optional extension to implement mentoring and health fair programmes drawing on external expertise to guide and inspire teachers and students alike.

Implementation of Health & Wellbeing system and Teachers Health Portal – £1,750.00 per site, and £15.00 per teacher thereafter. There is an option to have an End of Year Report £300.00.

For more information go to: www.loveursoul.co.uk/
CASE STUDY: SUPPORTING YOUNG PEOPLE WITH COMPLEX SEN

Making Sense of Mental Health

This is an e-learning resource for staff working in schools with children and young people who have complex SEN. It is currently being developed by The National Association of Independent and Non-maintained Special Schools (NASS) in partnership with The University of Northampton, and will be launched in October 2012.

The e-learning training aims to increase staff knowledge about mental health and how this relates to children with disabilities. It also provides a new model of responding to the mental health needs of pupils by addressing issues such as, the identification of mental health concerns, resources for recording this information, and information about sharing and signposting concerns both within the work setting and externally to other professionals, such as CAMHS.

For more information please contact:

Rachel Allan
SEN and Mental Health Resource Developer
Rachel.allan@northampton.ac.uk
Youth MHFA is an internationally recognized programme, developed with the direct involvement of teaching staff and students to provide all adults working with or supporting young people aged 11-18 practical knowledge and tools to assist with emotional and mental health problems.

The 14 hour modular based course has a deliberate fit with national policy and aims to support the delivery of PHSE and Secondary SEAL, Healthy Schools and TaMHS. It has a particular focus on vulnerable groups of young people including looked after children and promotes the better use of the common assessment framework (CAF).

Key learning outcomes include increased confidence in; the management of young people’s emotional and mental health crisis and emergencies, referral to appropriate specialist support agencies and self-help guidance for young people and their families.

Youth MHFA training is delivered by approved and accredited instructors. It can be delivered in a range of settings and formats to suit the needs of each school and youth organisation.

For more information go to: www.mhfaengland.org

CASE STUDY: HOW TO SUPPORT STAFF
Youth Mental Health First Aid (Youth MHFA)
Mindfulness includes paying attention to the present moment by using meditation, yoga and breathing techniques. People who are more mindful also have greater awareness, understanding and acceptance of their emotions (as well as being less reactive to them), and recover from bad moods more quickly.

A study by Huppert and Johnson (2010), found that a short, modified form of Mindfulness-Based Stress Reduction (MBSR) was well accepted by adolescents and there was some improvement in their well-being related to how much they have practiced.

- Sixty-nine percent of the students in the mindfulness group reported that they had enjoyed learning about mindfulness, and
- 74% thought they would continue with the mindfulness practice.

A report from the Mental Health Foundation (2010) found that a growing evidence base indicates that Mindfulness-based approaches are effective in helping people manage stress, anxiety and depression, and other mental health problems.

A video from the YoungMinds in Schools Project illustrates how Mindfulness and other initiatives are being implemented in schools.

http://vimeo.com/40735380

**CASE STUDY:** WHAT YOU CAN DO WITHIN YOUR SCHOOL TO BUILD EMOTIONAL RESILIENCE AND IMPROVE EMOTIONAL AND MENTAL WELLBEING

**Mindfulness in Schools**
Important things to think about when commissioning support for your school:

• **What are the needs of your pupils?**
  It is important to establish the behavioural and emotional needs of the pupils in your school. Your local area should produce a Joint Strategic Needs Assessment (JSNA). You should be able to access this data by contacting the Chair of your Local Health and Wellbeing Board who will be based in your local Council. Or you can utilise freely available data on mental health needs, which could give a ballpark figure for your school [http://atlas.chimat.org.uk/IAS/profiles/profile?profileId=4&geoTypeId=15](http://atlas.chimat.org.uk/IAS/profiles/profile?profileId=4&geoTypeId=15).

• **Accessible services**
  Young people are more likely to use services that are easy to access and are flexible in how and when they can attend (Lavis and Hewson, 2011) (Youth Access, 2010). School-based counselling service can be very helpful for some young people.

• **Stigma**
  It is important to remember that some young people may not want to be seen accessing mental health services in the school because of the stigma associated with mental health and concerns about being bullied. So thought should be given to how to sensitively provide support which is accessible and which they will engage with. Information on notice boards, in newsletters and signposting young people to local community, telephone and/or web services can help those who do not want to seek help through their schools.
Important things to think about when commissioning support for your school:

- **Evidence-based support**
  Investigate whether the service or treatment you are interested in is evidence-based, or has some supporting research, which demonstrates that it has helped other young people. For instance, look at the National Institute for Health and Clinical Excellence (NICE) guidance on promoting wellbeing in schools (NICE, 2008) (NICE, 2009), or other documents that summarise the evidence base (Department for Children, Schools and Families, 2008) (Bywater and Sharples, 2012).

- **Joint commissioning or sharing a service with other schools (e.g. via Cluster or Federation)**
  It is very possible that schools can “jointly commission” or share services. This may well be more cost-effective and give added security regarding quality assurance. Many schools operate within cluster arrangements, which can lend themselves towards this way of commissioning; equally many schools work on a soft or hard federated basis.
CASE STUDY: EARLY INTERVENTION SERVICES

BOND – Better Outcomes, New Delivery

BOND is a consortium of expert agencies led by YoungMinds, who have been funded by the Department of Education to build the capacity of voluntary and community sector organisations (VCSO) to deliver early intervention mental health support to children and young people.

Part of their programme of work will be to test new approaches and provide intensive support for VCSOs, commissioners and schools. They will be working with 5 pilot areas, the first of which has been the Tees Valley area.

The programme has been delivered through a series of five workshops where VCSOs, commissioners and schools have come together to share information and work collaboratively to develop their ability to deliver appropriate and effective mental health support for children and young people. Additionally there have been complementary one-to-one coaching sessions and workshop sessions, at school cluster meetings, aimed at helping to build schools’ confidence in commissioning.

The main aim of the programme in Tees Valley was to increase the choice and quality of early intervention mental health services and support available to the young people, including those services being commissioned and delivered in schools. The 23 organisations plus three school clusters that have taken
part in the programme are already able to demonstrate the changes in their work. An example of the feedback from schools includes “BOND has given schools a chance to consider the mental health needs of their pupils whilst building relationships with commissioners and providers.”

The whole process will inform the delivery of the next 4 pilot programmes, as well shape the content of other areas of BOND’s work. This will include the development of best practice resources for audiences including schools; setting up communities of learning and practice that can focus on specific problems and challenges in depth with support from BOND; and a national programme of work that will look at the issues raised in the pilot with attention to specialist areas including BME young people, looked after children, youth counselling and the school setting.

For more information about BOND go to www.youngminds.org.uk/bond
CASE STUDY: EARLY INTERVENTION SERVICES

The Studio (ADHD) Centre

This organisation promotes vocational education and positive achievement as a way to keep young people with ADHD (Attention Deficit Hyperactivity Disorder) engaged in learning.

The ASP (Alternative Support Programme) is an individually tailored approach for students with ADHD who are at risk of exclusion (either fixed term or permanently) or out of school. We provide an interim support package of mentoring, which has an educational and motivational focus.

Their twelve week Alternative Support Programme focuses on ADHD management including how to manage emotions and relationships. They engage the young people in activities such as GASP (a motor project), climbing at the Xcel Climbing Centre, studying at Walton Library, Angling at West Sussex angling Academy and the chance to participate in the Duke of Edinburgh Award scheme.

The total costs for this programme are £1,337.50.

For further information go to: www.studioadhdcentre.org.uk/index.php
This project works in schools to improve the self-esteem and emotional health and well-being of children so as to reduce their vulnerability to gangs.

The programme targets children in the transition from primary to secondary schools. It includes peer-led group work with children and parents to raise awareness of how children can protect themselves from the pressures of gangs as well as intensive support to children who are emotionally vulnerable and their parents.

M has experienced a number of fixed term exclusions from school for disruptive behaviour. He has a low level of literacy and is a poor communicator. His aggression may be owing to undiagnosed special educational needs. He has witnessed violence in the home and he has produced a knife in a fight with another child.

M’s Family Action worker has helped his mother access a parenting programme and is working to get M tested for learning difficulties. He has helped M recognise that M himself is upset by his own behaviour when he remembers incidents. He is also helping M to explore physical activities like dancing as if he is able to attain skill in these he may be able to compensate for loss of self-esteem in academic activities.

Find out more about Safer Children and Family Action’s other schools-based projects at www.family-action.org.uk or e-mail jayne.stokes@family-action.org.uk
**CASE STUDY: COMMISSIONING SCHOOL-BASED SERVICES**

**Place2Be**

Place2Be is a charity that works inside over 170 schools across the UK, providing counselling support for children, their parents and teachers.

Place2Be’s school-based service comprises:

- one-to-one counselling sessions
- group counselling sessions
- Place2Talk – a lunchtime self-referral service, open to all pupils in a Place2Be school (both individuals and in groups)
- transition work – supporting Year 7, 8 and 9 pupils in Secondary School
- Place2Think – advice and guidance to teachers, SENCO and school-based staff
- A Place for Parents – a counselling service for parents and carers
- Liaison and collaboration with other educational and children’s welfare organisations and agencies training in promoting children’s mental and emotional health for schools and community groups.

In the 10/11 academic year:

- 79% of children who accessed one-to-one interventions and were in the SDQ ‘Abnormal’ clinical category at baseline showed improvement in the extent of their social and emotional difficulties, as rated by their teachers.
- According to teachers, 59% of children, whose difficulties interfered with their classroom learning at baseline, were more able to focus in class following intervention.

Place2Be tailors its menu of services to meet each school’s needs. The typical model is based on a team of five or more Place2Be personnel (both clinical staff and trained volunteers) delivering a range of services. Schools typically pay 70-80% of the total annual cost as the work is also supported through private and statutory funding.

For more information go to:  www.place2be.org.uk/
**CASE STUDY: COMMISSIONING SCHOOL-BASED SERVICES**

**Respond – school-based therapy service**

This service is aimed at helping children who seem very troubled or who display behaviour that is difficult to manage and has a detrimental impact on the classroom and sometimes the whole school. They work with the whole school community, providing therapy, training and support to children with learning disabilities, their families and the professionals working with them.

The Respond school-based therapy service has a number of therapists who work in a total of 7 schools and this work is overseen by a schools co-ordinator. The therapists provide the one-to-one intervention and facilitate groups that deal with issues such as self esteem and safe relationships. We are also currently running a sexually harmful behaviour group and are also delivering Violence against Women and Girls (VAWG) sessions – which are being tailored to meet the needs of children with learning difficulties and are being externally evaluated with a report due in the middle of 2012.

Our school-based intervention is approximately £10,450 per year of which a proportion is funded by charitable support whilst the remaining is paid for by the schools. (The VAWG work and the SHB group work is fully funded)

42nd Street provides a range of community based services for young people. They also work with several schools across Manchester, Salford and Trafford and provide support for pupils in year 9 and upwards.

This work includes:

- Counselling, currently provided at Levenshulme High School and Sale Grammar School
- One-to-one informal support, for example Albion High School in Salford
- Access to our drop-ins/groups
- Students can also access our helpline for additional support/advice whether or not they are receiving a service
- CORE outcome monitoring – students identify goals and review with support of worker, helping to address issues such as anxiety and depression, bullying, exam stress, relationship difficulties, etc

To complement this work we also offer training to teaching staff, learning mentors, etc on areas such as self harm, anxiety & depression, brief solution focussed work and working creatively with young people.

www.42ndstreet.org.uk/index.html
The ChildLine Schools Service was developed for primary school age children who may not have an understanding or awareness of abuse, how to protect themselves, or how to access help. The service will eventually help every primary school aged child in the UK to understand how to recognise and protect themselves from abuse, and where to go for help when they need it. The service is currently targeted at 9 to 11 year olds, and aims to visit every Primary school in the UK once every 2 years and is developing and spreading across the UK.

The ChildLine Schools Service works in schools (and other specialist settings), and children experience the service through two stages:

- The first stage is an assembly for pupils in Key Stage 2, which covers: definitions of abuse; a case Study and role play on abuse, and an introduction to ChildLine.
- The second stage happens approximately 1-2 weeks after the initial assembly, with 50 minute classroom-based workshops to every class in years 5 and 6. These workshops reinforce the messages given at the assembly.
- Teachers and school staff play an important role in helping to deliver safeguarding messages to children. Head teachers and teachers are briefed on the content of the workshops and assemblies, and class teachers are present at all sessions so that they understand the messages we give and can respond to children after the sessions if they ask questions.

CASE STUDY: CHILDLINE SCHOOLS SERVICE
The **Skills4Change project** is a Department of Education funded programme that works with young people aged 11-16 who have been impacted by parental substance misuse. The project will be provided at over 9 sites until March 2013. The accredited programme consists of 5 sessions that develop resilience, raise confidence and self esteem and give the young people the skills to break free from the cycle of intergenerational substance misuse.

The sessions are jointly run with a member of school staff who can chose to continue running the programme in the school with support from the specialist worker. Once the 5 sessions are completed the young person is awarded a certificate from ASDAN, worth 3 credits.

The specialist workers also offer free training for school staff on recognising students that are being affected by parental substance misuse and where to access support for parents.

The **Skills4Change programme** is being evaluated by Warwick University. The young people interviewed described a range of benefits they gained from participating in the project:

- improved peer relationships
- increased self-confidence
- better understanding of the effects of drugs and alcohol abuse
- a willingness to talk about personal and family problems
- improved behaviour in school and home
- reductions in risk-taking behaviour
- new knowledge about First Aid and healthy eating.

For more information go to: [www.addaction.org.uk](http://www.addaction.org.uk)
Practical considerations

• **Room**
  If you wish to set up a counselling service in your school make sure that you have a room that the counsellor can use.

  It is important that the room is suitable for counselling children and young people and that their confidentiality is respected. Issues will need to be considered such as sound-proofing and an agreement with the school which provides the consistency of a safe environment which safeguards against interruption of the sessions with the pupils.

• **Equipment**
  Depending on the age of the pupils, schools may be required to invest in a range of materials to assist with the counselling. These would commonly be art materials, models, puppets, toys and other play therapy materials.

• **Contract/duration**
  Most school-based counselling services will seek a longer term relationship with schools in order to develop effective relationships, referral processes and to ensure that children receive the necessary support.

• **Referral routes (inward & referrals onwards)**
  Generally school-based counselling services will aim to meet the needs of the school as the main referring agency, although referrals will often come from sources outside the school, for instance Social Care, CAMHS and parents.
Practical considerations

- **Parental consent/responsibility**
  For all pupils, parental consent is required before counselling sessions can be offered and parents are encouraged to engage with and support the work. For older pupils in secondary schools, consent can be given directly by the young person, although parental involvement is usually sought.

- **Contact time and impact on class/school life**
  Counselling sessions can vary in length, but frequently last an hour a week. Many services offer a tiered level of support to meet the individual needs of the pupils. Counsellors will usually ensure that counselling sessions have a minimal impact on a pupil's time in class and with their peers.

- **Budget**
  This will vary depending on the size of the school and the demands of the service. In 2011, Place2Be conducted a market research survey with Head teachers which revealed that three-quarters of schools who commission counselling services had allocated up to £30,000 in their 2012-13 budget to fund such services in their schools.
References


Norfolk County Council (2011) Project which helps pupils' manage their emotions to be rolled out across Norfolk. www.norfolk.gov.uk/News/NCC091397


Useful Organisations and Resources

BOND – Better Outcomes, New Delivery
www.youngminds.org.uk/training_services/bond_voluntary_sector

Beat – Beating Eating Disorders – School Packs
www.b-eat.co.uk/about-beat/shop/school-packs/

ChiMat Knowledge Hub – Tackling Stigma

ChiMat Knowledge Hub – Supporting Mental Health in Schools
www.chimat.org.uk/camhs/schools

City Year London (mentoring programme based in schools)
www.cityyear.org.uk/


Foundation for People with Learning Disabilities – Information for Teachers and Education Professionals
www.learningdisabilities.org.uk/help-information/information-for-teachers/?view=standard

Mental Health Foundation
http://www.mhf.org.uk

Mentoring and Befriending Foundation

Mindfulness in Schools Project
http://mindfulnessinschools.org/

Place2Be
www.place2be.org.uk/

Pearson Assessment Tools
These are tools that you might use with a practitioner to assess the mental health of a child.

Reach for the Stars – resource pack for schools from Surrey CAMHS and their Healthy Schools project.

Royal College of Psychiatrists – Mental Health information for young people, parents/carers and people working with young people.
www.rcpsych.ac.uk/mentalhealthinformation/childrenandyoungpeople.aspx
Samaritans Developing Emotional Awareness and Learning (DEAL)  
www.samaritans.org/your-community/samaritans-ireland-scotland-and-wales/supporting-schools/welcome-deal-teaching

Stamp Out Stigma  
www.stampoutstigma.co.uk

Strengths and Difficulties Questionnaire (SDQ)  
This is a screening tool that measures young peoples emotional, behavioural and social problems. They can be downloaded from this website, but it is advisable to use them with the help of a practitioner.  
www.sdqinfo.com/

Time to Change  
www.time-to-change.org.uk/

Uthink resource for schools  
www.rethink.org/track.rm?url=%2Fdocument.rm%3Fid%3D9620&from=8974

Uthink Mental Health Tips  
www.rethink.org/young_people/mental_health_tips/index.html

YoungMinds information for young people  
www.youngminds.org.uk/for_childrenYoung_people

YoungMinds in Schools  
www.youngminds.org.uk/training_services/young_minds_in_schools

Youth Access  
www.youthaccess.org.uk/
CASE STUDY: CHILDLINE HELPLINE SERVICE

ChildLine is a 24/7, 365 day, free, confidential service for all children and young people and we recommend that all schools should actively promote the ChildLine Helpline service to children and young people. Children and young people can access a range of services from ChildLine. Advice, support and counselling is available by phone and online through 121 chats or emails.

The ChildLine website also provides a varied and in depth amount of advice and support and our message board facility enables young people to seek peer support and to offer support to other young people. All of these services are available day or night.

http://www.childline.org.uk

The confidential telephone helpline number is 0800 1111.