

AUDIT OF COUNSELLING AND OTHER THERAPEUTIC INTERVENTIONS IN PRIMARY AND SPECIAL SCHOOLS IN THE NORTH OF IRELAND: RESEARCH BRIEF

Key findings

- The majority of primary and special schools participating in this research reported that there was a need for counselling or other therapeutic intervention in their establishment (85% of primary schools and 95% of special schools). There is also some evidence from the literature that there are higher levels of need for intervention for children and young people in the North of Ireland than elsewhere in the UK.
- However, our research found that only a third of participating primary respondents had implemented some form of intervention in their school. Emotional well-being needs identified by respondents included: anger management; friendship/peer issues; bereavement; and bullying.
- Primary schools in urban areas and larger schools are more likely to offer interventions. Those schools in our survey that had implemented interventions offer counselling, behaviour management, emotional education, anger management, social skills support and art and play therapy amongst other services. Counselling is the most commonly provided intervention.
- Survey responses from primary schools suggest that interventions are primarily prompted by demand, but there is a greater awareness on the part

of schools of the need for a holistic approach to all aspects of a child's well-being and a desire to introduce good practice.

- Almost a third (29%) of schools stated that they had been contacted in the first instance by a provider, which underlines our finding that a lack of awareness of services available acts as a barrier to schools requiring support. A lack of awareness was second only to the financial costs associated with providing emotional well-being support as a barrier to implementing interventions.
- Our brief review of the literature has presented a number of different models of intervention in schools, including single practitioner models; teaching staff, peer support; school-based healthcare staff and centralised 'peripatetic' provision. Despite this variety in provision, several principles have emerged from the literature which underpin effective interventions, including:
 - Flexibility in relation to the needs of the pupil and of the school is essential;
 - Early intervention is important and may help prevent problems from exacerbating in later life;
 - School ethos and culture is vital, particularly in terms of staff commitment and support;
 - Children and young people should be able to access the services quickly and discreetly;
 - Independence and confidentiality, particularly in terms of sharing information within the school, are key concerns; and
 - The preparatory stage in advance of the implementation of any intervention should not be neglected.
- Similarly, participating primary schools identified the top five characteristics of an effective intervention as:
 - Confidentiality;
 - Quality;
 - Professionalism of counsellors;
 - The relationship between the counsellor and the pupil; and
 - Opportunities for the child to express themselves.

- In general, schools were very positive in relation to the effectiveness of interventions on their site, with 84% stating that these were very or quite successful. Many schools also suggested that the interventions had had a positive impact on a number of dimensions, including the emotional well-being of pupils (84%), pupil behaviour (84%), and pupil participation in school life (81%). Approximately two thirds of respondents also thought that the interventions have had a positive impact on pupil performance.

Aims and objectives of the research

1. PricewaterhouseCoopers LLP (PwC) was commissioned in November 2008 by the Department of Education to carry out an audit of counselling services and other therapeutic interventions in primary and special schools in the North of Ireland.
2. The main purpose of the study is to inform policy direction by determining the nature and level of need in relation to the emotional health and well-being of pupils in primary and special schools and to identify any related services or initiatives currently being implemented in these settings. The terms of reference for this review are presented in Table 1.

Table 1: Terms of reference

Terms of Reference
<ul style="list-style-type: none"> • To identify the range of problems which can be addressed by counselling services and therapeutic interventions in primary and special schools in the North of Ireland.
<ul style="list-style-type: none"> • To identify the level of need in terms of emotional health and well-being initiatives in NI primary and special schools.
<ul style="list-style-type: none"> • To identify and describe any models of counselling, wider therapeutic interventions or discrete activities which are additional to the standard curriculum and aim to improve the emotional health and well-being of primary and special school children, currently operating in the North of Ireland.
<ul style="list-style-type: none"> • To determine reasons for the implementation of such interventions and conversely to ascertain barriers to or reasons for not providing these services.
<ul style="list-style-type: none"> • To briefly outline the key advantages and disadvantages of any initiatives in operation in audited schools.

MAIN FINDINGS

The level of need in primary and special schools

3. It appears, from the stakeholder consultation and from the findings from our survey, that there is a high level of need for counselling and wider therapeutic interventions in primary and special schools in the North of Ireland. The majority of schools reported a need for interventions (85% of primary and 95% of special schools) yet, in the case of primary, only a third of participants in this research stated that such interventions are in place in their school. Emotional well-being issues requiring intervention are listed in Table 2 below.
4. Schools also suggested that they had pupils with additional SEN or EAL needs who require further help in regard to emotional well-being. It also appears that the perceived level of need may be greater in special schools. Larger primary schools and those in urban areas were more likely to state that there was a need for intervention in their school.

Table 2: Issues that need to be addressed by counselling services and other therapeutic interventions

Issue	Primary schools (%)
Anger management	71
Friendship/peer issues	62
Bereavement	59
Bullying	44
Violence in the home	34
Transition issues (between schools)	30
Parental substance misuse	25
Anxiety over academic performance	24
Transition issues (between countries/cultures)	14
Sexual abuse	13
Community tensions	12
Eating disorders	12
Parental separation/divorce	9
Other	9
Other family issues	4
There are no issues	8
Not answered	5

**Source: PwC survey of primary schools, 2009, n=260*

5. There is also some evidence in the literature that there may be a higher level of need for emotional health and well-being initiatives for children in the North of Ireland than elsewhere in the UK. In addition, given the link in the literature between child poverty and emotional well-being, it may be that the current economic downturn will increase the level of need for interventions amongst children and young people in the North of Ireland

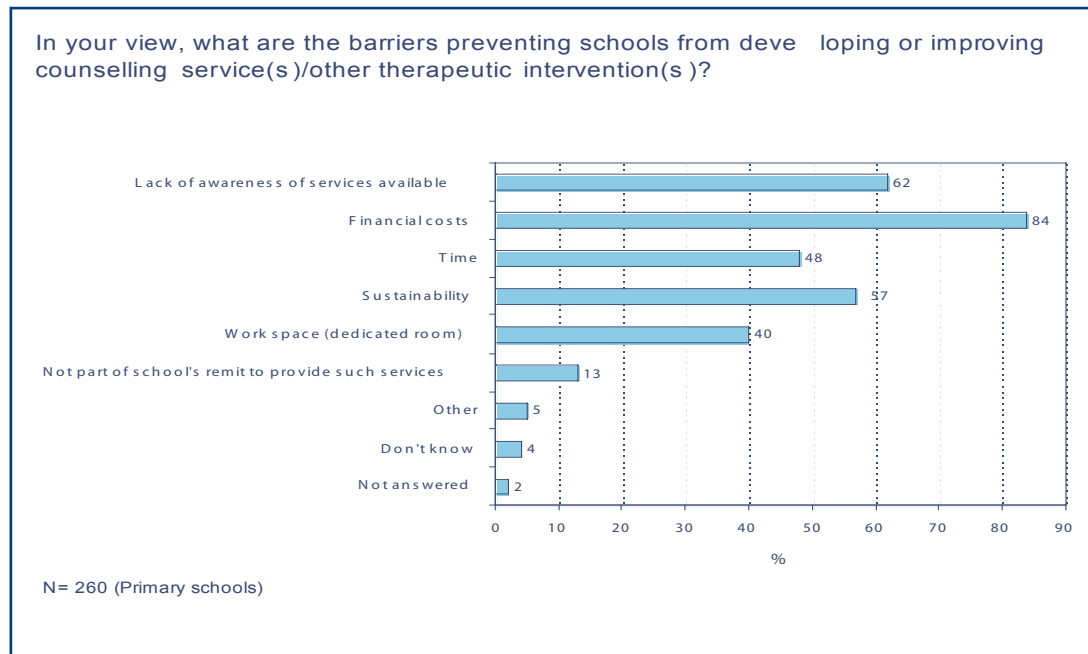
Counselling and wider therapeutic interventions in schools

6. The counselling providers and other relevant organisations that participated in this research, including provide a range of counselling and other therapeutic interventions as well as additional family and community support measures. It appears that many of the interventions that are required by primary schools are already available in the North of Ireland. However, there is some concern as to whether there is sufficient capacity with the current provision to meet the needs of primary and special schools.
7. Overall, approximately a third of respondents to our survey reported that some form of intervention had been implemented in their school. Primary schools in urban areas and larger schools are more likely to offer such services. Those schools in our survey that had implemented interventions offer counselling, behaviour management, emotional education, anger management, social skills support and art and play therapy amongst other services.
8. The main form of intervention in the primary schools participating in this research was counselling, with three quarters of schools that had introduced some form of intervention stating that this was a service offered. Behaviour modification or management services have been introduced in two thirds of schools with interventions.
9. Information about the intervention is through disseminated mainly personal contact, such as staff training days or, for pupils, through assemblies, lessons and one-to-one sessions. Letters and leaflets are often sent home to parents and individual needs are discussed with families on a case-by-case basis. In the main, staff were responsible for referrals, however, a third of participating primaries suggested that they facilitated self-referral by pupils.
10. The main sources of funding for interventions were the relevant Education and Library Boards and schools' budgets, often drawing on additional monies made available through the Extended Schools programme.

Reasons for introducing interventions and barriers to implementation

11. According to the stakeholder organisations that participated in this research, many of whom are providers, service implementation is often demand-led, with most often schools, but on occasion, parents, pupils, GPs and other agencies, requesting counselling and therapeutic interventions. In other instances, the Department of Education or the relevant Education and Library Boards instigated the offer of services. In some cases, this need for additional assistance was attributed to a lack of capacity within the school, given the other demands on teachers' time. This raises the issue of whether there is a need for clearer pathways and protocols to help respond to the needs of individual pupils.
12. Responses to our survey of primary schools suggest that interventions are, indeed, primarily prompted by demand, but also, in response to a greater awareness on the part of schools of need for a holistic approach to all aspects of a child's well-being and a desire to introduce good practice in this regard within the school setting. Almost a third (29%) of schools stated that they had been contacted in the first instance by a provider, which underlines our finding that a lack of awareness of services available acts as a barrier to schools requiring support (see Figure 1).
13. Overall, funding was identified as the main barrier to implementing interventions across both primary and special schools and for schools that had implemented interventions and those that had not. A majority of respondents stated that "financial costs" as an obstacle to developing or improving interventions (85% of primary and 90% of special schools).

Figure 1: Barriers to developing or improving counselling services and other therapeutic interventions



14. There was also a rather substantial minority (14%) of respondents who suggested that it was not within the school's remit to provide such interventions, raising issues about responsibility and accountability for interventions, given other pressures on schools.

Characteristics of effective interventions

15. While it is beyond the scope of this research to evaluate the effectiveness of individual types of intervention (our focus has been, rather, on describing the landscape of counselling and therapeutic interventions), the research has identified some characteristics of effective interventions and the critical success factors in their implementation.
16. Our brief review of the literature has presented a number of different models of intervention in schools, including single practitioner models; teaching staff, peer support; school-based healthcare staff and centralised 'peripatetic' provision. Despite this variety in provision, several principles have emerged from the literature which underpin effective interventions. These include:
- Flexibility in relation to the needs of the pupil and of the school;

- Early intervention is important and may help prevent problems from exacerbating in later life;
 - School ethos and culture is vital, particularly in terms of staff commitment and support;
 - Children and young people should be able to access the services quickly and discreetly;
 - Independence and confidentiality, particularly in terms of sharing information within the school, are key concerns; and
 - The preparatory stage in advance of the implementation of any intervention should not be neglected.
17. Overall, the top five characteristics of an effective intervention, as identified by primary schools are:
- Confidentiality;
 - Quality;
 - Professionalism of counsellors;
 - The relationship between the counsellor and the pupil; and
 - Opportunities for the child to express themselves.
18. In general, schools were very positive in relation to the effectiveness of interventions on their site, with 84% stating that these were very or quite successful. Many schools also suggested that the interventions had had a positive impact on a number of dimensions, including the emotional well-being of pupils (84%), pupil behaviour (84%), and pupil participation in school life (81%). Approximately two thirds of respondents also thought that the interventions have had a positive impact on pupil performance.

The future development of counselling and other therapeutic interventions

19. One of the key concerns of those that participated in this research is the level of demand for interventions. There was a clear view that counselling and therapeutic interventions should be a priority in primary schools as

early intervention is likely prove more cost-effective in the long-term and that special schools are in particular need of additional interventions.

20. The ways in which the existence of, and access to, interventions are communicated were also viewed as particularly important, to overcome perceptions, particularly on the part of parents, that pupils may become labelled or stigmatised if they receive such help. Our case studies, based on visits to five schools, demonstrate the importance of the school ethos and that buy-in from all school staff can assist in counteracting these fears.
21. The relationship between providers and other external agencies and the school is also an important consideration for the development of future intervention models. This is not only due to the difficulties that some schools experience in sourcing appropriate provision, but also to the practicalities of collaborating 'on the ground'. There was also a view, however, that schools are already overburdened and that care should be taken to ensure that the responsibility of managing these services does not fall wholly to the school. Despite this, other participants noted the need for flexibility in the provision of such assistance, rejecting the 'imposition of some national solution'.
22. Stakeholders and schools alike were concerned about the supply of sufficient and suitably qualified professionals, with several schools revealing issues with the identification of appropriate practitioners for their setting. Sustainable funding was also important to respondents, with many schools emphasising the need to provide continuity of service in order to meet children's needs in the long-term and to develop appropriate working relationships with external agencies. Schools participating in this research also wanted: additional time for teachers; access to centrally managed interventions; more information and advice; and ring-fenced funding.
23. Funding was identified as one of the main obstacles encountered when schools attempted to introduce counselling and other services, both in terms of meeting demand and of the sustainability of provision. Indeed, it was suggested by some stakeholders that short-term initiatives (restricted by a lack of funding) may do more harm than good by raising expectations while only providing a short burst of support. Other potential issues included:
 - The relationship between school staff and counsellors;
 - The ethos of the school;

- Establishing confidentiality and building trust between staff, pupils and parents; and
- Ensuring a dedicated space for the interventions to take place.

Next steps

24. The findings from this research suggest a number of areas which will require further consideration by the Department and other stakeholders in the future development of counselling and other therapeutic interventions in primary and special schools.
25. Providers and school staff expressed concerns regarding the capacity of the counselling sector to respond to an expansion of services to all primary and special schools, particularly in regard to the supply of suitably qualified counsellors following the roll out of such interventions to post-primary schools. Potential next steps could therefore include:
 - An analysis of the current numbers of suitably trained counsellors and other therapists operating in the North of Ireland: including an audit of their qualifications for working with young children. This analysis should inform an assessment of whether the supply of counsellors is sufficient to meet future demand and, if not, the measures which need to be introduced to ensure the sustainability of provision;
 - Appropriate linkages to be developed with training providers, professional bodies and other Government departments and agencies to facilitate a 'joined up' approach to counselling and other therapeutic interventions; and
 - Consideration to be given to the extent to which the current training of counsellors and other therapists equips them to address the specific needs of children with special educational needs, disabilities and English as an Additional Language.
26. It is clear from our research that, while schools are becoming increasingly aware of the emotional needs of their pupils, many are unaware of sources of advice and provision. Furthermore, many respondents suggested that researching the advantages and disadvantages of each intervention is relatively time-consuming. Potential next steps could therefore include:

- Consideration to be given to raising the awareness of both the benefits of intervention and of the availability of provision amongst school leaders. Brief information on the benefits of provision should be provided to all primary and special schools;
 - Principals and heads of pastoral care to be provided with guidance in relation to the selection of providers, types and models of provision of intervention and the relevant, accredited qualifications required for counselling and other interventions;
 - Promoting the importance of creating a supportive and inclusive school ethos and culture to improve pupils' emotional well-being in general and to support the introduction of new initiatives;
 - Schools could be signposted towards examples of good practice in terms of the actual intervention and of models of provision, through, for example, a dedicated on-line resource. Consideration should be given to collating and documenting additional good practice in the provision of counselling and other interventions in primary and special schools in the form of case studies; and
 - While all policies and procedures should seek to minimise the burden on teaching staff, guidance and training should be made available to teachers and other adults in the school on the optimum ways of referring a child to provision whilst maintaining confidentiality and the trust of the child.
27. Schools and providers expressed concerns about the sustainability and availability of funding, suggesting that short-term funding creates difficulties in raising expectations of assistance whilst constraining effective interventions over time. Further consideration could therefore be given to:
- Ensuring that new initiatives are underpinned by medium- to long-term funding; and
 - Providing ring-fenced funding for the provision of interventions.
28. Many participants in this research raised issues around the challenges of multi-agency working and of balancing flexibility with minimising the burden on schools. In order to facilitate the implementation of new initiatives, consideration should be given to:

- Allowing sufficient lead-in time so that providers and schools can plan the implementation process together and develop appropriate working relationships and protocols between counsellors and school staff;
- Optimum ways of providing interventions whilst minimising the burden on teachers;
- Enabling schools to access centrally managed and provided interventions, while at the same time, allowing them to tailor the 'menu' of interventions to their school circumstances;
- Encouraging schools to provide a dedicated and discreet space for interventions. The need for such a space should be reflected in the Schools Building Handbook for the establishment of new schools;
- Communicating the benefits of the intervention to staff, parents and pupils in a sensitive manner to avoid concerns regarding the potential labelling of the child;
- Ensuring sessions of counselling or other interventions should be, where possible, of sufficient duration to meet the needs of the school and could be reinforced through additional support, i.e. via telephone, as required; and
- Further consideration should be given to the most effective models of intervention, including, for example, the clustering of schools to share counsellors to maximise continuity both within schools and between phases.

29. The quality of interventions is also key to improving the emotional well-being of children and young people and, indeed, there is some evidence to suggest that lower quality interventions may create more problems for pupils than they solve. It will therefore be important to ensure that consistent quality standards are applied across all interventions and that the quality of interventions is regularly monitored.

- Interventions should be monitored and evaluated regularly at both the school and regional level to provide an indication of the effectiveness of specific interventions and to monitor any implementation issues that may arise;
- Consideration should be given to involving pupils in the evaluation of the interventions; and

- A mechanism could be created to enable schools and the Department to inform the initial training and the continuous professional development of counsellors to help meet the changing needs of pupils.

Methodology

30. This study comprised of two main phases: a scoping exercise which included a brief overview of the existing literature on counselling and other interventions and in-depth interviews with counselling providers and other relevant organisations; and fieldwork, consisting of a survey of all primary and special schools in the North of Ireland and site visits to five schools identified as having innovative approaches to counselling and other interventions.
31. The aim of the quantitative fieldwork phase was to collect data from all the primary and special schools to ascertain the level of need for counselling services and other therapeutic interventions in schools and to identify models of good practice currently being implemented within schools. The questionnaires were sent to all primary and special school principals with a request that these should be completed by the person with pastoral care responsibilities within the school. The response rates for each of the school types are highlighted in Table 3.

Table 3: Primary and special school sample

School type	Sample size	Number received	Response rate
Primary	873	260	30%
Special	42	19	45%

32. Table 4 compares the profile of our achieved sample to that of the population of primary schools in the North of Ireland. As can be seen, the primary schools that participated in this research are representative of the wider population of primary schools on the selected characteristics.

Table 4: Representativeness of our sample

Primary schools	Population (N)	Sample (n)	Population (%)	Sample (%)
Board Area				
Belfast	94	28	11	11
North Eastern	211	54	24	21
South Eastern	157	52	18	20
Southern	225	62	26	24
Western	185	50	21	19
Not known	1	14	0	5
Total	873	260	100	100
Location				
Urban	378	123	43	47
Rural	491	122	56	47
Not known	4	15	0	6
Total	873	260	100	100
Enrolment				
1 to 75	206	44	24	17
76 to 150	244	59	28	23
151 to 225	170	55	19	21
226 to 300	82	26	9	10
301 plus	170	61	19	23
Not known	1	15	0	6
Total	873	260	100	100
FSM entitlement				
0	0	34	0	13
0.1 to 10.0	212	66	24	25
10.1 to 20.0	249	61	29	23
20.1 to 30.0	119	39	14	15
30.1 to 40.0	62	17	7	7
40.1 to 50.0	37	14	4	5
50.1 to 60.0	22	9	3	3
60.1 to 100.0	15	5	2	2
Not known	157	15	18	6
Total	873	260	100	100

33. Responses were received from 19 of the 42 special schools in the North of Ireland. While this represents a response rate of over 40%, care should be taken in considering the findings from this sector given the low number of actual responses (and, indeed, schools in the total population). For this reason, all charts and tables included in this research brief and the main report relate to the primary sector unless otherwise stated.

THE PROJECT

34. The project was undertaken for the Department of Education by PricewaterhouseCoopers. The cost of the project was £30,855.

FULL REPORT

35. The full report entitled “Audit of counselling and other therapeutic interventions in primary and special schools in the North of Ireland” by PricewaterhouseCoopers is available on the Department of Education website at: http://www.deni.gov.uk/index/32-statisticsandresearch_pg/32_statistics_and_research-research_pg/32_stats_and_research_researchreports_pg.htm

This paper is a summary of the research report and as such any views expressed are those of the authors and not necessarily those of the Department of Education.

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