NICE
National Institute for Health and Care Excellence

Social and emotional wellbeing for children and young people

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Introduction

This briefing summarises NICE's recommendations for local authorities and partner organisations on social and emotional wellbeing for children and young people, specifically, vulnerable children aged under 5 years and all children in primary and secondary education. It is particularly relevant to health and wellbeing boards.

Social and emotional wellbeing creates the foundations for healthy behaviours and educational attainment. It also helps prevent behavioural problems (including substance misuse) and mental health problems. That's why it is important to focus on the social and emotional wellbeing of children and young people.

This is in line with the overarching goal of children's services, that is, to ensure all children have the best start in life (Fair society healthy lives).

Promoting social and emotional wellbeing of children and young people will help local authorities and their local partners meet objectives outlined in the public health outcomes framework for England, 2013–2016.

The targeted and universal activities described in this briefing can only form one element of a broader, multi-agency strategy to promote and support social and emotional wellbeing in children and young people. See for example, activities covered in NICE pathways on antisocial behaviour and conduct disorders in children and young people, antenatal and postnatal mental health,

autism, depression in children and young people, looked-after babies, children and young people, pregnancy and complex social factors and when to suspect child maltreatment.

For the purposes of this briefing, the following definitions are used:

- emotional wellbeing – this includes being happy and confident and not anxious or depressed

- psychological wellbeing – this includes the ability to be autonomous, problem-solve, manage emotions, experience empathy, be resilient and attentive

- social wellbeing – has good relationships with others and does not have behavioural problems, that is, they are not disruptive, violent or a bully.

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>
> For further information on how to use this briefing and how it was developed, see About this briefing.

What can local authorities achieve by promoting the social and emotional wellbeing of children and young people?

Improve the population's health and wellbeing

Social and emotional wellbeing is influenced by a range of factors, from individual make-up and family background to the community within which people live and society at large.

Social and emotional wellbeing provides personal competencies (such as emotional resilience, self-esteem and interpersonal skills) that help to protect against risks relating to social disadvantage, family disruption and other adversity in life. Such competencies provide building blocks for personal development which will enable children and young people to take advantage of life chances.

Reduce mental health problems in children and young people

Evidence shows that poor social and emotional wellbeing predicts a range of negative outcomes in adolescence and adulthood. For example, negative parenting and poor quality family or school

relationships place children at risk of poor mental health. Early intervention in childhood can help reduce physical and mental health problems and prevent social dysfunction being passed from one generation to the next (Early intervention: the next steps).

The most recent official survey of mental health (2004) identified that 10% of children and young people aged 5–16 had a clinically diagnosed mental disorder. Older children (aged 11–16 years) were more likely than younger children (aged 5–10) to be diagnosed as such (12% compared with 8%) (Mental health of children and young people in Great Britain).

Improve social and economic outcomes

For children and young people with poor social, emotional and psychological health there is an increased likelihood of poor social and economic outcomes, in both the short- and long-term.

For example, children with behavioural problems are more likely to leave school with no qualifications, become teenage parents, experience relationship or marital problems and experience unemployment in adulthood (Outcomes of conduct problems in adolescence).

Reduce demand on services

For children and young people with poor social, emotional and psychological health there is an increased likelihood of criminal behaviour and higher risk behaviours such as substance misuse, lower levels of social interaction and poor mental health, outcomes which may continue into adulthood (Childhood mental health and life chances in post-war Britain and Criminal careers and life success).

Promote educational attainment and reduce bullying and risk-taking behaviour among pupils

The emotional wellbeing of children and young people is enhanced through building self-esteem and self-efficacy, reducing bullying behaviour, reducing risk-taking behaviours and supporting the development of social and emotional skills (Systematic review of the effectiveness of interventions to promote mental wellbeing in children in primary education). This may also improve all pupils' interest in their learning, lead to better school attendance and improve attainment.

Support national strategy

Government policy puts a significant emphasis on early intervention services to ensure all children have the best possible start in life. The aim is to address the inequalities in health and life chances that exist between children living in disadvantaged circumstances and those in better-off families. The government's mental health strategy (The mental health strategy for England) supports prioritising mental wellbeing and early intervention across all ages.

The schools white paper (The importance of teaching), expects schools and their local partners to play a vital role in promoting health and wellbeing. In addition, the Statutory framework for the early years foundation stage makes personal, social and emotional development a cornerstone of early years learning and education.

What NICE says

This section highlights and summarises some of NICE's recommendations on social and emotional wellbeing. Those with responsibility for directly commissioning, managing or providing services are advised to read the recommendations in full by following the hyperlinks.

NICE recommendations

NICE guidance offers:

- recommendations based on the best available evidence to help you plan, deliver and evaluate successful programmes

- an objective and authoritative summary of the research and evidence, reviewed by independent experts from a range of backgrounds and disciplines

- an assessment of the effectiveness and cost effectiveness of public health interventions.

Following all of NICE's recommendations on promoting social and emotional wellbeing for children and young people will help you make the best and most efficient use of resources to improve the health of people in your area. Details of new guidance that NICE is developing are on our website.

Note: Since the publication of the NICE guidance on promoting social and emotional wellbeing, local authorities' responsibilities have changed to a strategic commissioning and oversight role, with no direct intervention role in academies and free schools. They will continue to have a part in promoting high standards in education and act as champions of excellence. For further information see: The importance of teaching.

Strategy, policy and commissioning

Vulnerable children under 5

- Health and wellbeing boards should take the following actions:

  - Ensure the social and emotional wellbeing of vulnerable children (as defined in NICE's 'Social and emotional wellbeing for children and young people' pathway) features in the 'Health and wellbeing strategy' as one of the most effective ways of addressing health inequalities.

  - Ensure arrangements are in place for integrated commissioning of universal and targeted services for under-5s. This includes services offered by general practice, maternity, health visiting, school nursing and all early years providers.

  - Ensure children and families with multiple needs have access to specialist services, including child safeguarding and mental health services.

- Directors of public health and directors of children's services should ensure the social and emotional wellbeing of under-5s is assessed as part of the joint strategic needs assessment. This includes vulnerable children and their families.

- Local authority scrutiny committees for health and wellbeing should review delivery of plans and programmes designed to improve the social and emotional wellbeing of vulnerable children aged under 5.

Children in primary education

- Commissioners and providers of services to children in primary education should develop and agree arrangements to ensure all primary schools adopt a comprehensive whole school approach to children's social and emotional wellbeing. They should provide specific help for those children most at risk (or already showing signs) of social, emotional and behavioural problems.

- Commissioners and providers of services to children in primary education should include social and emotional wellbeing in all relevant local and school policies for attaining improved outcomes for children and young people.

Children in secondary education

- Commissioners and providers of services for young people in secondary education should enable all secondary education establishments to adopt a comprehensive organisation-wide approach to promote the social and emotional wellbeing of young people. This should encompass organisation and management issues as well as the curriculum and extra-curricular activities.

- Commissioners and providers of services for young people in secondary education should ensure secondary education establishments have access to the specialist skills, advice and support they need. This may be provided by public, private, voluntary and community organisations.

- Local authority scrutiny committees for health and wellbeing should assess the progress made by secondary education establishments in adopting an organisation-wide approach to social and emotional wellbeing.

For details see strategy, policy and commissioning in NICE's 'Social and emotional wellbeing for children and young people' pathway.

Home visiting, early education and childcare

All health and early years professionals should identify factors that may pose a risk to a child's social and emotional wellbeing. This includes factors that could affect the parents' capacity to provide a loving and nurturing environment (for example, poor housing conditions; problems they may have in relation to the father or mother's mental health; substance or alcohol misuse; family relationships, circumstances and networks of support). They should develop procedures to support identifying and assessing need for vulnerable children.

Health and early years professionals

- Develop trusting relationships with vulnerable families and adopt a non-judgmental approach, while focusing on the child's needs.

- Ensure procedures are in place to make referrals to specialist services, based on an assessment of need.

Antenatal and postnatal home visiting for vulnerable children and their families

- Health visitors or midwives should offer a series of intensive home visits by an appropriately trained nurse to parents assessed to be in need of additional support[1]. Activities should be based on a set curriculum which aims to achieve specific goals in relation to maternal sensitivity, the mother-child relationship, home learning and parenting skills and practice.

- Managers of intensive home-visiting programmes should conduct regular audits to ensure consistency and quality of delivery.

Early education and childcare

- Children's services should ensure all vulnerable children can benefit from high quality childcare outside the home on a part- or full-time basis and can take up their entitlement to early childhood education, where appropriate.

- All early years services should focus on social and emotional development, as well as education.

- Managers and providers of early education and childcare services should provide early education and childcare in-line with the Statutory framework for the early years foundation stage.

For details see home visiting, early education and childcare in NICE's 'Social and emotional wellbeing for children and young people' pathway.

Social and emotional wellbeing in primary education

Universal approaches

- Schools should offer support to help parents or carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by community nurses (such as school nurses and health visitors) or other appropriately trained health or education practitioners.

- Schools and local authority children's services should work closely with child and adolescent mental health and other services to develop and agree local protocols. These should support a stepped care approach to preventing and managing mental health problems – as defined in care for children and young people with depression in the NICE 'Depression' pathway.

Targeted approaches for children showing signs of anxiety or emotional distress or who are developing behavioural problems

- Schools should ensure teachers and practitioners are trained to identify and assess the early signs of anxiety, emotional distress and behavioural problems among primary school children. They should also be able to assess whether a specialist should be involved and make an appropriate request.

- Schools and their local partners should provide a range of interventions that have been proven to be effective, according to the child's needs such as problem-focused group sessions with children and group parenting sessions. These should be part of a multi-agency approach to support the child and their family and may be offered in schools and other settings.

For details see primary education in NICE's 'Social and emotional wellbeing for children and young people' pathway.

Social and emotional wellbeing in secondary education

- Schools should systematically measure and assess young people's social and emotional wellbeing. They should use the outcomes to plan activities and evaluate their impact.

- Secondary education establishments should have access to the specialist skills, advice and support they need. This may involve working with local authority advisory services, providers of personal, social, health and economic (PSHE) education services, educational psychology and child and adolescent mental health services.

- Schools should reinforce young people's learning from the curriculum, by helping parents and carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by appropriately trained health or education practitioners.

For details see secondary education in NICE's 'Social and emotional wellbeing for children and young people' pathway.

In addition to the settings outlined in the NICE pathway, local authorities can promote social and emotional wellbeing in other community settings and through other activities where children and young people, including those who are looked after, interact with local authority services. The range of these settings is very broad and is likely to vary across different authority areas, but could include early years centres, local leisure and sports clubs, children's homes and pre- or after-school clubs.

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[1] It is not clear from current evidence how many home visits are needed. The Family Nurse Partnership, an evidence-based, intensive home-visiting programme, provides weekly or fortnightly home visits for 60–90 minutes throughout most stages of the programme (with more visits in the early stages and fewer later).

Developing an action plan

The table below poses a range of questions which could be asked when developing a comprehensive plan to help improve or ensure the social and emotional wellbeing of children and young people.

Assessing opportunities to promote the social and emotional wellbeing of children and young people, 0–19 years	Links to NICE recommendations
Strategy, policy and commissioning	
• Is the social and emotional wellbeing of children and young people assessed as part of the joint strategic needs assessment? How are needs assessed; is a population-based model used, for example PREview?	Assessing social and emotional wellbeing
• Are there agreed local protocols for assessment and referral of children with mental health problems that include a role for primary schools and other agencies?	Supporting a stepped care approach
Home visiting, early education and childcare	

• Do health and early years professionals have procedures in place to refer to specialist services, based on an assessment of need?	Identifying vulnerable children and assessing their needs
• Are intensive home visiting programmes for vulnerable children and their families regularly audited to ensure consistency and quality of delivery? Is the level of parents' involvement checked?	Specific programmes
• Are early years and childcare services run by well-trained qualified staff, including graduates and teachers?	Local authority children's services

Social and emotional wellbeing in primary and secondary education

• What steps are taken to help schools integrate social and emotional skills development into all aspects of school life?	Integrating activities into all areas of school life to prevent bullying and violence Integrating social and emotional skills into all aspects of secondary education Training for those working in secondary education
• Do local services provide group parenting sessions for the parents or carers of primary and secondary school children who are showing signs of emotional and social difficulties?	Providing targeted interventions (in primary schools) Working with parents and carers of young people (in secondary schools)

• What steps are being taken to ensure that primary and secondary schools are involved in the assessment of pupils' social and emotional wellbeing and identification of risk-taking behaviour? Are the outcomes of the assessment being used as a basis for planning activities and evaluating their impact?	Planning and evaluating assessment activities (in primary schools)
	Identifying, assessing and supporting children (in secondary schools)
	Training for those working in primary education
	Training for those working in secondary education

Costs and savings

Improving children and young people's social and emotional wellbeing can lead to the following savings.

- An evaluation of the US-based Nurse-Family Partnership (an intervention that targets young, first time mothers from disadvantaged backgrounds) estimated that the programme made savings by the time the children of high-risk families had reached the age of 15. These savings, which were over 5 times the cost of the programme itself, resulted from reduced expenditure in the welfare and criminal justice systems, higher tax revenues and improved physical and mental health (Early childhood interventions). The cost effectiveness of the UK Family Nurse Partnership model is currently being investigated as part of a trial.

- School-based social and emotional learning to help reduce behavioural problems and improve education performance can provide a good return on investment, through reducing conduct problems and crime-related impacts. Conduct problems are very common in childhood, with 9% and 29% of adolescents having mild- or severe-conduct problems respectively. Potential long-term savings from each case prevented are estimated to be

£75,000 for mild- and £150,000 for severe-conduct problems (Mental health promotion and mental illness prevention: the economic case).

- Generally, the upfront costs of most preventive interventions will not be repaid for a number of years. However, these costs will usually be small in comparison with the future health benefits and the long-term cost savings for child and adult social care, criminal justice system and NHS.

Facts and figures

Below are other facts and figures on social and emotional wellbeing for children and young people:

- In 2012, 1.3 million children accessed their free entitlement to 15 hours of early years education a week. A recent survey indicated that children from better-off families are more likely than those living in disadvantaged circumstances to attend early years provision (97% compared to 87%) (Towards universal early years provision).

- Around half of people with a long term mental health problems experience symptoms by the age of 14 years (Prior juvenile diagnoses in adults with mental disorder).

- Conduct disorder is the most common childhood mental health problem, affecting a reported 5% of those aged 5 to 16 years. A third of children (33%) with a conduct disorder have been excluded from school at some point and nearly a quarter (22%) have been excluded more than once (Mental health of children and young people in Great Britain). Conduct disorders are the most common reason for referral to CAMHS (Child and Adolescent Mental Health Services).

- Aggressive behaviour at the age of 8 years is a predictor of criminal behaviour, arrests, convictions, traffic offences, spouse abuse and punitive treatment of their own children (Criminal careers and life success).

- Nearly half (47%) of young people report being bullied at age 14, decreasing to 41% at 15 and 29% at 16 years. Common types of bullying included name calling and cyberbullying. Across age groups, risk factors for being bullied were having a special educational need, a disability, being a carer or experience of being looked after. Young people bullied at age 14–15 years had lower educational attainment, equivalent of 2 GCSE grades (The characteristics of bullying victims in schools).

Support for planning, review and scrutiny

Council scrutiny activities can add value to strategies and actions to improve the public's health. Effective scrutiny can help identify local health needs and check whether local authorities are working in partnership with other organisations to tackle the wider determinants of health. NICE guidance and briefings provide a useful starting point, by suggesting useful 'questions to ask' during the scrutiny process.

A range of other support tools are available on the Centre for Public Scrutiny website and via Into practice on our website.

Other useful resources and advice

The following resources produced by other organisations may also be useful:

- Public Health England's Child and Maternal Health Intelligence Network provides a range of resources including:

    - local child health profiles

    - evidence based planning tools (PREview)

    - interactive data atlases of child and maternal health.

- The social research unit at Dartington is a charity that provides data and research on services for children and their families.

- The Early Intervention Foundation provides advice and evidence on early intervention programmes.

- The Healthy schools tool kit helps schools improve the health and wellbeing of children and young people.

- Information and resources for people delivering services in the early years is provided by the Foundation years website.

- The health and social care information centre provides data on the mental health of children and young people.

About this briefing

This briefing is based on NICE guidance published up to April 2013 about social and emotional wellbeing for children and young people (see the NICE website for details of published briefings and briefings in development). It was written with advice from NICE's Local Government Reference Group and using feedback from council officers, councillors and directors of public health.

It is for local authorities and their partner organisations in the health and voluntary sectors, in particular, those involved with health and wellbeing boards. This includes local authority officers and councillors, directors of public health and commissioners and directors of children's services. It will also be relevant to members of local authority scrutiny committees.

This briefing may be used alongside the local joint strategic needs assessment to support the development of the joint health and wellbeing strategy.

This briefing is intended to be used online and it includes hyperlinks to sources of data and further information.

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