

The case for investing in therapeutic interventions in Northern Ireland's schools

“It was good because it helped get things off my mind”¹



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Section 1: Introduction and context

About our coalition and this report

This coalition was initially established in the aftermath of the ending of the Healthy Happy Minds primary school pilot and the reduction in counselling and therapy provision through the Extended Schools Programme, following budget cuts in April 2023. It includes private practice representatives from the professional bodies for counselling, art therapy, play therapy, music therapy and dramatherapy, as well as leading providers of the full range of therapeutic interventions in schools across Northern Ireland, plus mental health charity and campaign group, Pure Mental.

Our joint report brings together a range of independent evidence to reinforce the vital need to re-establish therapeutic services in Northern Ireland's primary schools together with a firm commitment to the continuation of post-primary counselling and therapy services. Critically, it features the **voices of children, parents, teachers and school leaders** who further reinforce the data on need, take up and benefits of counselling and other evidence-based therapeutic interventions.

The report also outlines a level of political unity, rarely seen during such challenging times, and a real testament to the strength of support for accessible counselling and therapeutic interventions be embedded across Northern Ireland's schools.

Ahead of the restoration of the political institutions, the organisations below call on all party leaders to champion a new programme of Government commitment to secure funding for primary school counselling and therapy together with a commitment to the long-term commissioning of therapeutic interventions in post-primary schools, including special schools, as currently delivered through the ICSS Programme.



A longstanding investment in our children's mental health

Northern Ireland has been a pioneer and a real exemplar in the provision of evidence-based school counselling and therapeutic interventions across both post-primary and primary school settings.

We were the first nation in the British Isles to implement a programme of publicly funded post-primary counselling back in 2007, which included art, drama, music and play therapy, and the first to introduce a funded pilot programme which provided a range of evidence-based therapeutic interventions in primary schools, from 2021.

Primary school counselling itself can be traced back to the early 2000s when community-led services were providing counselling support to primary school children, as well as some qualified staff employed in Education and Library Boards in a small number of schools.

In 2000, NSPCC piloted school counselling across NI in all sectors, including special schools.

NSPCC research and scoping studies carried out by the NI Education and Training Inspectorate during the pilot identified and recommended there should be a common approach in respect of such things as qualifications, BACP/ IACP (Irish Association for Counselling and Psychotherapy) membership, accreditation, accountability and clinical oversight. This made a substantial input in what has become known as The ICSS (Independent Counselling Service for Schools) Handbook/Operational Guidance. Barnardo's NI delivered 'tendered contracts for primary school counselling from 2007 in over 20 schools most affected by the Northern Ireland conflict.

This pioneering work has informed the development of secondary school counselling in Wales and Scotland, and more recently, a new pilot programme of primary school counselling currently being established in the Republic of Ireland.

What is primary school counselling and therapy?

Primary school counselling is an early action mental health intervention aimed at reducing children's distress and improving their emotional wellbeing. It uses a 'toolkit' approach, providing a range of verbal and non-verbal communication methods – for example art, music, sand tray, story, symbolic play, psychoeducation and talking – which are combined in a personalised way for each child.

A child utilises their preferred methods to engage with a qualified, professionally registered, and suitably experienced counsellor to identify and address their support needs. Drawing on research evidence, primary school counselling emphasises the therapeutic alliance between child and counsellor as a key agent for change. It also highlights the importance of working with parents/ carers, school staff and other key adults in a child's system to maximise intervention outcomes.

A strengths-based approach is central to primary school counselling interventions, which support a child to identify their coping resources and resilience to better manage the challenges they face. Best practice involves the use of routine outcome measures, as a way of tracking intervention progress and benefit. Finally, it works best when embedded in a whole-school approach to children's emotional health and wellbeing.

Primary school counsellors work to a Children and Young People's Competence Framework², as outlined by BACP, taking into account the specialist skills, knowledge and experience needed to work with children from age four and up.

In addition to primary school counselling, other creative therapeutic approaches are also delivered by trained art, music, drama and play therapists who work within their own set of evidence-based competencies, providing a richness of different interventions available.



School counselling and therapy programmes in Northern Ireland

The Independent Counselling Service for Schools

The Department of Education has funded an independent counselling and therapeutic service for post-primary aged pupils in grant-aided schools since 2007. The Independent Counselling Service for Schools (ICSS) is there to provide a 'listening ear' and works as an integral part of a school's pastoral care system in the provision of additional therapeutic services to pupils. The interventions adhere to high professional standards and current best practice for school-based counselling and therapy. All providers are members of professional bodies regulated by healthcare standards outlined by the Professional Standards Authority or the Health and Care Professions Council.

The roots of the ICSS were set out in the *Bamford Review of Mental Health and Learning Disability*³, which was established in 2002 and implemented through the 2012-2015 Action Plan⁴.

The report advocated that mental health promotion and prevention should be developed across all schools, including the establishment of a new independent school counselling service. This has subsequently been established in all post-primary schools, as well as special schools, since 2011. The current contract for ICSS ends in 2024, and it is critical that this vital service is extended, against the backdrop of severe cuts to the education budget in Northern Ireland.

The ICSS handbook stipulates that counsellors must hold or be working towards accreditation with the British Association for Counselling and Psychotherapy (BACP) or the Irish Association for Counselling and Psychotherapy (IACP) or hold registration with the Health and Care Professions Council (HCPC). HCPC registration relates to art therapists/art psychotherapists, music therapists and dramatherapists and the relevant professional bodies are BAAT (British Association of Art Therapists), BAMT (British Association for Music Therapy) and BADTh (British Association of Dramatherapists).

The ICSS Programme is due to be renewed in 2024, it is now more crucial than ever that longstanding provision of post-primary counselling and therapeutic support is secured.



Healthy Happy Minds

Whilst primary school counselling and therapy have been undertaken since 2007 on a smaller scale, the Healthy Happy Minds therapeutic and counselling services pilot provided a procurement framework and investment to extend the benefits of school counselling and therapy services across Northern Ireland.

This pilot was one of a range of early-help measures developed to support the implementation of the Children and Young People's Emotional Health and Wellbeing in Education Framework (2021). It provided a commissioning route for counselling, art therapy, music therapy, dramatherapy, play therapy and equine-assisted therapy to primary school pupils with the aim of preventing mental health issues and reducing the risk of children and young people developing mental health issues further down the line⁵.

The Department of Education had long signalled its wish to pilot funding for counselling services in primary schools, but this was previously constrained due to a lack of budgetary provision⁶. An early Ministerial commitment followed the publication of the Children's Law Centre's Youth Panel report in 2013, which set out young people's views on accessing counselling in schools. This called for the establishment of primary school counselling across Northern Ireland, building on good practice in schools already providing access to this intervention⁷.

This pilot programme originally funded through Covid support budgets was initially due to finish in March 2022. The pilot was subject to two extensions via Ministerial Direction but was finally ended in March 2023. There followed a Discontinuation Report from the Department of Education, which highlighted that evaluation of the programme was ongoing, but continuation was unaffordable within the future budget arrangements.

The Department of Education's *Equality and Human Rights Policy Screening* for discontinuation of the Healthy Happy Minds programme confirmed that this could have a detrimental impact in terms of limiting the long-term adverse impact of Covid-19 and the associated period of school closures on pupils, as well as early identification of emotional health and wellbeing issues⁸. It also noted a negative impact on the learning of those children identified by schools as in need of additional support. The *Policy Screening* further suggested that the impact on these groups may be mitigated by the future development of a single counselling service across all school sectors.

The more recent EQIA on the Resource Budget additionally confirmed that the introduction of any new provision in primary schools:

'will be subject to a positive evaluation of Healthy Happy Minds and the availability of funding'⁹.

We share the concerns, so well-articulated in the 2023 academic report on the consequences of cuts to education for children and young people in Northern Ireland:

"Cancellation of the 'Healthy Happy Minds' primary schools counselling programme is a palpable example of cuts to mental health support"¹⁰.



Investment in these critical counselling and therapeutic services has been a lifeline for so many vulnerable children and young people. But this proud legacy is now under threat.

Reflecting widespread support from children and young people, parents, teachers, school leaders and politicians from all parties in Northern Ireland, we would like to see a new programme of Government commitment to restore funding for primary school therapeutic and counselling services, together with a commitment to the long-term commissioning of therapeutic interventions in secondary schools, as currently delivered through the ICSS Programme.

Section 2: The case for ongoing investment

The case for investment in therapeutic interventions for our children and young people has always been strong due to the long-standing and multi-generational impact of the Troubles. However, the impact of the pandemic and the cost-of-living crisis on our more vulnerable children and young people in Northern Ireland makes this case stronger than ever.

A recent survey of the mental health of children and parents (Bunting et al., 2020¹¹) highlighted that children and young people in Northern Ireland are 25% more likely to experience common mental health problems compared to those in England, Scotland or Wales. Northern Ireland (NI) has disproportionately higher rates of death by suicide of young people. The same survey found that one in 10, 11 to 19-year-olds in NI reported self-harming and close to one in eight reported thinking about or attempting suicide. The legacy of the NI conflict, and the resulting high levels of economic deprivation, are thought to be contributory factors to the high levels of mental ill health in Northern Ireland (O'Neill et al., 2015¹²).

The Northern Ireland Commissioner for Children and Young People's (NICCY) *Still Waiting* review of mental health support for children and young people (NICCY, 2018¹³), found that the investment in emotional and mental health services

for children and young people at the time 'was inadequate' and called for 'substantial additional and sustainable funding' to ensure their needs were being met at the earliest opportunity, and in the most effective way. Since then, the case for additional support has increased as outlined in *We are Still Waiting* (NICCY, 2022¹⁴).

There was evidence of a detrimental impact of the COVID-19 pandemic and associated restrictions on children and young people's mental health in the UK (Creswell et al., 2021¹⁵). Lockdown exacerbated pre-existing mental ill health among individuals, families and communities, and also greatly challenged the systems in place to care for them. Children and young people from lower income households, those with a parent/carer experiencing psychological distress, and those with special educational needs (SEN), showed elevated symptoms (Raw et al., 2023¹⁶).

The Co-SPACE study tracked children, young people and parent mental health during the pandemic, with follow-up data published in 2022-23. One of their core recommendations was to accelerate the provision of evidence-based support and accessible interventions to those who required these, to help young people to bounce back from the impact of the pandemic and protect them from future adversities (Pearcey et al., 2023¹⁷).



We believe that this challenging picture, together with the impact evidence and compelling testimonies elsewhere in this report, provide a powerful case for longstanding investment in counselling and therapeutic support for children and young people of all ages across Northern Ireland.

Section 3: Learning lessons from Healthy Happy Minds



In April 2023, campaign group Pure Mental undertook a survey of 130 school leaders to better understand their experiences of primary school therapeutic and counselling services¹⁸.

This analysis provided an incredibly positive story on take-up and most critically in terms of the impact on pupils, as a vital component to support vulnerable pupils. It also provided valuable insight from school leaders to help inform and shape the creation of any future primary school counselling programme.

What went well?

- > Of the 131 schools which responded, 95 per cent said that they made use of the primary school therapeutic and counselling services.
- > 92% noted they saw a positive impact on the children using these services.
- > 100% said there should be funding provided to primary schools to facilitate in-school counselling and therapy services.
- > Schools estimated that over 4,000 pupils received individual or group support that they otherwise may not have had access to in school. This represents a potential average of 32 pupils – or roughly one classroom – supported per school.
- > An overwhelming majority of the 125 valid respondents were at least somewhat satisfied with their experience, with the large bulk of those being very satisfied (69.1%). Only 1.6 per cent of respondents were not satisfied.
- > 80 per cent believed that they paid a fair price for services procured.
- > Schools welcomed the range of support and indicated how the investment was used – 34.7% on talking therapies, 29.4% on play therapy, 22.4% on art therapy, 9% on music therapy and other therapeutic approaches, and 4.5% on animal therapy services.

Issues to consider

Whilst the overall experience of schools utilising school counselling is hugely positive, Pure Mental's engagement with teachers and school leaders identified some specific concerns with the Healthy Happy Minds procurement programme

- > Although most schools did not have difficulty accessing provision due to geographical location, nearly one in three (31%) of schools did. Those located west of the Bann and in rural settings found particular difficulty, owing to a lack of local providers and distance from major urban hubs.
- > Procurement through the Provider Framework was 'not regularly updating therapists', which added to the problems in rural areas.
- > The first tender also went out with short notice. As a result, some potential providers missed the opportunity to apply.

Additional learning

Counselling and therapy providers additionally recognised several significant challenges with the governance, and management of the Healthy Happy Minds procurement model, which will need to be addressed when considering future commissioning of primary school counselling and therapy.

Several providers noted real implications for the safety of this contract due to school leaders not having the level of awareness or understanding to quality assure the counselling or therapeutic service they needed to procure for their schools. This starts with knowing what sort of therapist they want/need, how to recruit the right person and extends to all aspects of day-to-day delivery.

This resulted in a huge variance in practice and little consensus of what a good service looks like. Individual schools also have no knowledge of national standards for delivery of counselling and therapy, or of existing ethical frameworks which underpin safe provision.

However, to counter-balance these concerns, a number of highly experienced private practitioners who were approved as part of the tendering process did feel that schools had more choice to commission individual therapists they'd worked with in the past who were now part of an approved list of providers.

Schools had the freedom to review an individual therapist's qualifications, specialities, experience and professional body registrations for themselves to ensure that the therapist they chose from the approved tender list would be the right fit for their school, rather than being allocated a therapist at random without having had any prior access to any of this information.

However, a number of key concerns were highlighted from providers and listed below:

- > **Lack of training on safeguarding**
 - A key missing requirement of the contract was a need for providers to attend safeguarding training. Tightening up this requirement would further reinforce safe provision and align it with the requirements for all ICSS providers.
- > **Lack of a complaints procedure**
 - There was no requirement for providers to have a complaints policy for service users. Plus, no mechanism for schools should they have concerns about their provider’s practice.
- > **Confusion around parental consent** – The guidance document for schools for HHM suggested that not all children require parental consent to undertake an intervention, which is incorrect in relation to the primary school age group (4-11 years).
- > **Lack of transparent evaluation process** – As no terms of reference were published for the evaluation, it is unclear whether evaluators of Healthy Happy Minds have spoken to anyone other than individual providers. We are asking for schools, parents and pupils to be taken into account in any future evaluation of school counselling and therapy programmes. Routine systematic evaluation of practice should be built into any future service, using recognised valid and reliable measures, including CORS/CSRS, YP-CORE and relevant versions of SDQ. Measures that seek the voice of the child should also be included.
- > **Lack of sustainable long-term funding** – Whilst we understand the time limitations of a pilot programme, for this programme to have a sustained impact it requires sustainable longer-term funding. This would provide long-term support for children and schools, and more assurance for providers.

We recommend that future iterations of both primary and post-primary school counselling and wider therapy provision address these numerous concerns by being delivered under one commissioning framework with the principles aligned within an updated version of the ICSS handbook.

Section 4: The positive impact of therapeutic support



There is a compelling body of evidence on the positive impact of therapeutic support in Northern Ireland's schools.

In the absence of a publicly available evaluation, we have drawn together official data from the Department of Education on recent take up and use of these services, alongside analysis of impact data¹ from several organisations who have delivered counselling interventions. These data offer additional evidence of the positive impact of investment in therapeutic services, alongside the testimonies from children and young people, parents, school leaders, teachers and political supporters provided within the report.

Official data from the Education Authority show that 671 primary schools made use of the Healthy Happy Minds funding from the inception of the programme until March 2023. Only 13 out of 796 primary schools indicated that they did not want to draw down the Healthy Happy Minds funding. From a sample of 133 of the schools that did, 92% noted they saw a positive impact on the children using these services¹⁹.

Figure 1: Utilisation of Healthy Happy Minds (April 22-Mar 23)

Schools that have used the Healthy Happy Minds funding	671	83%
Schools who did not use the funding	13	1.5%

Data obtained from Education Authority²⁰

Demand for counselling and therapy services in secondary schools from the ICSS Programme has additionally increased since before the pandemic, highlighting increased and growing need amongst children and young people.

Figure 2: Utilisation of Independent Counselling Service for Schools (2019-2022)

	Sept 19 – Aug 20		Sept 20 – Aug 21		Sept 21 – Aug 22	
	Mainstream Contract	Special Schools	Mainstream Contract	Special Schools	Mainstream Contract	Special Schools
Number of young people who received counselling and/or therapy	4,987	295	5,807	318	6,153	291

Data obtained from Education Authority²¹

Additional data from FamilyWorks for the ICSS programme show that complexity of cases has increased since the pandemic, resulting in a 13% increase in pupils requiring more than six sessions of counselling. This is further evidenced by patterns in the issues that pupils are presenting, for example:

- > **Self-harm safeguarding concerns have risen by 22%**
- > **Suicidal ideation safeguarding concerns have risen by 19%**
- > **Anxiety as the presenting issue has increased by 18%**
- > **Family as the presenting issue has increased by 21%**

¹ Our analysis is drawn from anonymised routine outcome measure data covering all the interventions offered through Healthy Happy Minds and ICSS.

Outcomes

Below we have provided examples of the positive outcomes that counselling, art, music and play therapy are having on children across Northern Ireland using official outcomes data and evaluation analysis from several leading providers:

Barnardo's Northern Ireland

Barnardo's NI worked with nearly 450 children in its primary school counselling and therapy service in 2022-23. Using the child-completed Child Outcome Rating Scale (CORS), administered to all children over the age of six in each session, the overall 'clinical improvement' rate was 81% this year, i.e., 81% of those children who entered the service with a score in the range for 'clinical distress' on CORS ended their intervention with a score in the 'normal' range.

Relate Northern Ireland

A total of 74 young people were seen in Relate NI's primary school counselling and therapy service, ranging in age from five to 12 years (average age = 8.8 years). On average, children and young people attended 7.9 sessions (range one to 24). At intake, the average score on CORS was 31.9 (out of a maximum score of 40) and by the end of therapy this had increased to 35.1, which represents an average improvement of 3.2 points. This is a statistically significant improvement ($p < .01$). CORS is a positively scored measure whereby higher scores are indicative of greater life functioning.

Thirty-two of the 74 young people (43.2%) were in the clinical range at baseline and of these, 21 (61.8%) had moved into the non-clinical range by the end of therapy (i.e., they showed clinical improvement).

[Continued >](#)

Resilient Rhythms

Resilient Rhythms provided music therapy services in 25 schools. Their service evaluation indicated that:

- 100% of staff felt the children were more regulated after sessions
- 100% of staff felt the sessions provided children with self-regulation strategies
- 100% of staff felt that the workshops were paced at the correct level.

Links Counselling

Paired data from 30 teacher completed strengths and difficulties questionnaire (SDQ) demonstrated an average score of 13.6 (out of a maximum score of 40) at the beginning of therapy, which reduced to 10.1 by the end of the therapeutic intervention. This represents an average improvement of 3.5 points, which is a significant improvement.

SDQ is a negatively scored measure whereby higher scores are indicative of higher levels of psychological difficulties.

Play Therapy

Play Therapy was funded for eight children over the academic year in a small rural area, ranging from one to four sessions per week per child, delivered by a play therapist who was also a registered BACP counsellor. Issues covered included:

- > Anger
- > Anxiety
- > Attachment issues
- > Bereavement
- > Behavioural difficulties
- > Emotional regulation difficulties
- > Low self-confidence
- > Parental separation
- > Physical issues
- > Post-primary transition
- > Problems with peer relationships/social interaction
- > Trauma.

Outcomes reported by parents included improved communication skills, better coping strategies, raised awareness of emotions, more resilient and generally more confident at home.

The benefit of a range of evidence-based therapeutic interventions

The Healthy Happy Minds programme provided schools with commissioned access to a broad range of therapeutic interventions for primary school children including counselling, play therapy, art therapy, dramatherapy, music therapy, and equine-assisted therapy and learning. Therapists worked in various capacities with many EA approved organisations providing therapeutic interventions within primary schools across Northern Ireland, including **Barnardo's NI, Action for Mental Health, Relate NI, Familyworks, Links Counselling Service** and also EA approved independent service providers.

It should be noted that these services would have been providing a level of primary school counselling and therapy interventions before Happy Healthy Minds. The pilot provided a short-term commissioned funding stream to help with this. Some of the interventions described below will be continuing in some primary schools but with the added pressure of exceptionally stretched budgets.

Having a range of interventions available ensures that a range of disciplines can be provided to address the diverse needs of different pupils. For example, some children benefit from the specialist creative and symbolic multi-sensory approach of art therapy, which enables processing of pre-verbal, non-verbal, verbal and somatic issues. Other pupils benefit from talking therapy approaches. Together these interventions provided positive outcomes for a range of difficulties, including **self-esteem, social issues, anxiety and emotional difficulties, behavioural difficulties, autistic spectrum disorder, classroom behavioural problems, oppositional defiant disorder, separation anxiety disorder, and trauma-related presentations.**

Public protection and the delivery of safe interventions are additionally paramount to ensuring that children and young people are supported appropriately. It is critical to provide evidence-based and trauma-informed interventions delivered by professionals who are trained in managing risk. Therapists from the range of disciplines delivering these therapeutic programmes adhere to strict regulations from their respective professional bodies, working within ethical and competence frameworks, subject to professional conduct procedures².

The recent EQIA on the Department of Education's 2023-24 Resource Budget highlighted that Healthy Happy Minds played a key role in supporting children and young people whose life experiences can further increase the risk of them experiencing poor emotional and mental wellbeing²². This included those pupils who:

- > experience a range of childhood adversities, including poverty, emotional and physical abuse, and neglect.
- > have poor attachment and chaotic lifestyles due to poor parenting and conflict within the family.
- > experience suicide in the family or close community.
- > have a diagnosis of ASD OR ADHD.
- > identify as being LGBTQ.

We believe that this evidence highlights the positive impact that these vital services have made on the children and young people receiving therapeutic interventions in schools. This provides an exceptionally strong case to inform our call for longstanding investment in counselling and therapeutic support for children and young people of all ages across Northern Ireland.

²² Counsellors must hold or be working towards accreditation with the British Association for Counselling and Psychotherapy (BACP) or the Irish Association for Counselling and Psychotherapy (IACP) or hold registration to the Health and Care professions Council (HCPC). HCPC registration relates to art therapists/art psychotherapists, music therapists and dramatherapists and the relevant professional bodies are BAAT (British Association of Art Therapists); BADTh (British Association of Dramatherapists) and BAMT (British Association for Music Therapy).

Section 5: Return on Investment and cost effectiveness



There is robust research evidence that school-based counselling has a significant positive impact on young people's levels of psychological distress, self-esteem and achievement of personal goals, over and above the positive effects that a school's existing pastoral care provision can provide²³ as well as providing a significant return on investment.

A review of the evidence on art therapy in schools (BAAT 2021)²⁴ has showed similar positive outcomes for a range of difficulties, including: self-esteem, social issues, anxiety and emotional difficulties, behavioural difficulties, autistic spectrum disorder, classroom behavioural problems, oppositional defiant disorder, separation anxiety disorder, and trauma-related

symptoms. Children who engaged with art therapy were perceived as happier, more settled, calmer, more confident, having fewer behavioural outbursts, and engaging better with schoolwork (Deboys et al., 2017²⁵; McDonald et al., 2019²⁶; McDonald & Holttum, 2020²⁷).

The UK Department of Health estimates that targeted therapeutic intervention delivered in school costs approximately **£229 per child but derives an average lifetime benefit of £7,252. This is a cost benefit ratio of 32-1**²⁸.

This is reinforced by analysis undertaken by Probono economics into the one-to-one counselling service typically provided by Place2Be in primary schools across the UK. The findings indicated that counselling generates up to **£36 million in long-term benefits each year**, at an average cost of £4.5m each year²⁹. According to the research, this **generates long-term average benefits of up to £8,700 per child** through higher wages and better employment outcomes for the individual, as well as reduced costs to taxpayers due to lower truancy and crime rates alongside a decreased need for mental health support. This equates to every £1 invested in counselling in primary school resulting in an £8 saving in the future.

Without investment in early intervention therapeutic services, children and young people are left to navigate a system where Child and Adolescent Mental Health Services (CAMHS) are oversubscribed, resulting in many young people in distress not meeting the threshold and thus receiving no step-care support. On 30 June 2023, there were 2,251 total waits for a Child and Adolescent Mental Health Service (CAMHS) assessment in Northern Ireland, of which 1,205 were waiting for more than nine weeks. This continues to rise since a low of 1,107 total waits for a CAMHS assessment during the pandemic (September 2020)³⁰.

Analysis has shown that counselling and therapeutic services are less stigmatising, more accessible and a more cost-effective early intervention, which could reduce the demand on more expensive CAMHS services³¹. Analysis by the Children's Commissioner for England in 2017, **showed that the UK Government's estimated cost of delivering six counselling or group CBT sessions in a school at £229 per child³² was far cheaper than the average cost of a referral to a community CAMHS service (£2,338), or to an in-patient CAMHS unit (£61,000).**

32:1 lifetime benefit ratio

£36 million
yearly long-term benefits

for every **£1** invested in primary counselling this results in an **£8 saving**

Section 6: Testimonies from beneficiaries

Including counselling, art therapy, play therapy, music therapy and dramatherapy

Across our coalition we have received many quotes, comments and testimonials from children, families, teachers and school leaders, which exalt the many benefits of counselling and therapeutic interventions provided in primary and secondary schools. A small sample is provided below.

Testimonies from children and young people

Detailed children's evaluation testimonials

'I liked that we did fun activities, and I could express my feelings. I got to say my feelings and express them, and it made me feel better. Before counselling things were a little bit good and a little bit bad, but I think things are pretty good now. I liked when we did art with emojis and it helped me with my expressions and emotions. I show my mum emojis now if I'm feeling sad or angry. I used to be a little bit rough with my friends and we would fall out, but after counselling I feel much better and I'm not that rough and now we're besties again. I would recommend counselling to other kids because it can make them feel better and could make everyone happy and not stressed and they'll have someone to talk to. You're a good listener and I think counselling is a good place to be. You are safe and are very nice to me.' - **Anonymised response from Child A**³³

'I came to counselling because I was crying all the time. It really, really helped me. I loved that I was able to talk to [the Counsellor] and make a really cool friend in her! She was

really fun and funny! I liked that we didn't just talk about worries, we were able to have fun and be free with our personalities. [My Counsellor] also helped me to realise not to take on too much of my friends' worries as well. Before I would get really upset and was always stressing out over silly things. Now I'd say things for me are actually pretty OK. They're not perfect, but things are better than they were because I was able to let everything out.' - **Anonymised response from Child B**³⁴

'I came to counselling because I did not feel happy, I liked talking to you and liked all the fun we had together. It helped when I talked about my feelings, and it helped that you listened to me. Things can still be hard, but I know that's OK. I have learned who I want for my friends. Friends are not just people that you play with, they are people who listen to you and want you to be happier and want you to just be yourself. Before I thought that my colour was dull but now, I know that actually my colour is SHINY!' - **Anonymised response from Child C**³⁵

Further quotes from children and young people



"It was good because it helped get things off my mind".³⁶

"You're like an occupational therapist but for feelings and friendships – you stick hearts back together and make pictures to help me make friends."³⁷

"I have drawn a washing machine spinning – because my head is always spinning but when I go to art therapy the spinning stops."³⁸

"That made me feel peaceful".³⁹

"I liked the breathing and singing I feel better"⁴⁰

"That was fun I feel buzzing now"⁴¹

"I will remember to do my breathing when I feel scared"⁴²


"The colouring to music and the moving was brilliant"⁴³

"Now I can control my temper"

"I was listened to and it made me feel better."

"Calming me down."

"Telling about my feelings. It helped when I got worked up."



Testimonies from parents and families

Detailed parent/carer evaluation testimonials

'My child has a real incentive now as he is enjoying his class. His behaviour has improved a lot and has really settled. I used to get a lot of phone calls from the school informing me of my child's poor behaviour. I spent a lot of time telling my child what he should and shouldn't do and it wore me down. Now I am actually getting feedback praising my child about how well he is doing. His classroom assistant recently approached me to tell me how great he had done that day in class. This is a welcomed change for both of us! It makes such a difference not having to have those conversations anymore. I can appreciate a normal conversation about finding out how his day went'. -

Anonymised response from Parent A⁴⁴

'It has been life changing for my child. It has brought him back to his happy self again. His brightness is shining again and that makes me very happy. It has also been helpful for me because I am able to see the situation differently and this has had a positive impact on our relationship. As a result of counselling, I have adapted a more gentle approach which is working really well.' - **Anonymised response from Parent B**⁴⁵

'[My child] is a different child now. When I think where we were and where we are now, I can hardly believe it! He is more confident and seems so much happier in himself. He is going to after-school activities which has been a no-no before. He has been willing to go to places and to stay without us and honestly, he has been amazing! Before this I was completely overwhelmed and lost. I just didn't know what we were going to do. It affected the whole family because it was always in our heads. We worried constantly about what it was going to be like tomorrow with him.

Time 4 Me was like a lifeline. There were times at the beginning I thought we were back to square one and I really thought that things would never change, but each time it stalled you just calmed it all down and said what do we need to make it better tomorrow? This has really turned things around not just for [my child], but for all of us.' - **Anonymised response from Parent C**⁴⁶

Further quotes from children and young people



“I went to first school disco since starting counselling, confidence has increased so much, the resource on children and bereavement you sent home was invaluable.... helped us understand things so much better. I can now talk to me and it’s all thanks to you.”⁴⁷

“Great relief that she is doing so well, not in a panic in the mornings going to school so not upsetting her sister.... she can walk into school on her own and she is fine now in the dinner hall. Her fear of other children seems to have gone.”⁴⁸

“It was very helpful in understanding my child; we are making much more effort to spend quality time with him”⁴⁹

“More families will struggle without this”⁵⁰

Testimonies from school leaders and teachers


Detailed teacher evaluation testimonials

'[My pupil] has vastly improved since the beginning of the year. There would have been incidents every day, throughout the day, confrontations in the playground and not doing what is asked of him. However, this has changed a great deal. There are times when he has a wee 'blip' but it is never to the extent that it was before. Although my pupil still needs to be prompted to stay on task, I can see that he enjoys the work and being part of the class environment. I have come to appreciate his sense of humour and wit now, also the fact that he is very knowledgeable and is really keen to learn.' - **Anonymised response from Teacher A**⁵¹

'The strategies and open conversation with [the Counsellor] have strengthened the feeling of support for my pupil who knows that they will be helped and supported in the classroom, plus they have their own strategies to use when they are anxious. This has in turn increased attendance, focus, the ability to learn and most importantly their own confidence and self-worth. This service proves invaluable as an area of expertise that a classroom teacher does not have alone. I myself have learned how to better support my pupils and they feel heard and valued.' - **Anonymised response from Teacher B**⁵²

'Since attending counselling, [the pupil's] communication skills have definitely improved. He will readily ask for help from both adults and peers. He completes his homework every week and without having to be coerced by mum. He is asking for more difficult work and is more willing to try with things he isn't sure of or are new. He has become much more open about discussing how he is feeling and how he can deal with various situations. The pupil has a great sense of humour which I have noticed more. I would use the service again as I think this is such a valuable service which really complements what I already do in my class.' - **Anonymised response from Teacher C**⁵³

Further quotes from school leaders and teachers



“This is something that should be statutory in every primary school and not reliant on extra funding”⁵⁴

“This was one of the best uses of money for primary schools, ever”⁵⁵

“Healthy Happy Minds support has been incredibly beneficial”⁵⁶

“Pupils are struggling to manage big emotions and lives at home are tougher, counselling is very much needed”⁵⁷


“The situation that secondary schools have access to a counselling service but that primary schools don’t is very, very unfair”⁵⁸

“Teachers are not trained to deal with these issues, therapists/counsellors are. We need them in primary schools”⁵⁹


“The need has not gone away because the funding has stopped”⁶⁰

“I just wanted to say thank you this is the first time I have been able to breathe properly in months (teacher who joined a session)”⁶¹

“If we go ahead with these cuts it is my view that there will be a catastrophic impact ... on so many areas of wider society ...”⁶²



Continued >



"Healthy Minds is an integral part of our pastoral care in schools and it is making a HUGE difference"⁶³

"We are very pleased with this partnership; we envisage it being a long-term arrangement"⁶⁴

"It has a knock-on effect in class; feedback helps teachers understand what they are dealing with"⁶⁵

"Good to use for whole class regulation and small groups (I have seen this working very well across our school)"⁶⁶

"Resilient Rhythms was by far the best mental health intervention for our pupils. Our staff loved your visits as much as the children did"⁶⁷

"They loved the singing, the movement, the breathing and basically all of it!"⁶⁸

"I could see some pupils who are usually really worried and tense relax in the session"⁶⁹

"So lovely to see the children moving and getting so much out of this"⁷⁰

"You could have heard a pin drop in the relaxation part – my class are never that quiet"⁷¹

"So good to see such a practical and child-centred way of addressing anxiety and worries – I never thought to share something that worried me would let them see we all experience difficulties then we sang and moved all our worries away!"⁷²

Section 7: Evidence of widespread political support

The British Association for Counselling and Psychotherapy (BACP) and British Association of Art Therapists (BAAT) jointly undertook a rapid campaign in March, in advance of the ending of the Healthy Happy Minds pilot, to help demonstrate wider public support for primary school counselling.

More than 1,000 people supported the campaign, which generated over 5,000 emails to MLAs calling on their support to secure this vital investment in our children and young people. Many supporters shared responses from their MLAs demonstrating universal political support for primary school counselling from members of all the political parties in Northern Ireland.

Cross-party pledges of political support

"I have no hesitation whatsoever in supporting this campaign and the vital need for funding, as this is undoubtedly an invaluable support which has been proven time and again by those who have benefited from it"

Jonathan Buckley MLA (DUP)

"Cuts to the Happy Healthy Minds school counselling service are hugely disappointing. As a teacher myself I know loss of this important service will have a negative impact on children and remove vital mental health support for young people in our schools"

Clare McConville-Walker Councillor (Sinn Fein)

"I know from engaging with mental health groups that many children benefited from this pilot and I am particularly concerned about what will happen to those who may not have finished their course of counselling. Our young people have been through a difficult few years, with the coronavirus pandemic and other pressures and we know that early intervention can often prevent mental health problems becoming worse in later life. I would urge the department to reconsider. We cannot put a price on supporting our children with their mental health."

Cara Hunter MLA (SDLP)

Continued >

“I assure you of my support for the programme which I and colleagues fully support. The Party will be writing to the Permanent Secretary to reinforce our support for the programme and press for the results of the evaluation to be published” **Mike Nesbitt MLA (Ulster Unionist Party)**

“I also sympathise with the many highly qualified professionals who rely on funding for the Healthy Happy Minds Programme for employment. I fear that the budget and tendering concerns around Healthy Happy Minds will discourage many dedicated and talented professionals from delivering the counselling sessions our children and young people need. It is of the utmost importance that funding for Healthy Happy Minds is secured to create a sustainable programme which delivers for children and counsellors alike” **Kellie Armstrong MLA (Alliance)**

It is safe to say that no contemporary issue has united politicians in Northern Ireland across the political divide more than their universal revulsion over cuts to primary school counselling.

Securing this level of political unity is a real testament to the strength of support for accessible counselling and creative therapeutic interventions embedded across Northern Ireland’s schools.

Ahead of the restoration of the political institutions we call on all party leaders to champion a new programme of Government commitment to restore the primary school therapeutic and counselling service together with a commitment to long-term commissioning of therapeutic interventions in secondary schools, as currently delivered through the ICSS Programme.

Annex A: Partner organisations within the coalition

Representatives from the following organisations attended a meeting chaired by BACP, BAAT and Pure Mental on 19 May 2023 where we agreed to formally work as a coalition on this critical agenda.

Barnardo's NI

British Association for Counselling and Psychotherapy (BACP)

British Association for Music Therapy (BAMT)

British Association of Art Therapists (BAAT)

British Association of Dramatherapists (BADth)

FamilyWorks

Illuminate Counselling

Jigsaw Community Counselling Centre

Let's Talk NI Counselling

Links Counselling

Play Therapy UK

Pure Mental

Rachel Morrison Counselling & Psychotherapy

Relate NI

Shepherding Lambs Counselling and Training Service

Space Counselling

Tully New Bank Stables



Annex B: Sources of Evidence

- ¹ BAAT, Art Therapy in Schools: A guide for professionals'
- ² BACP, [Children and Young People's Competence Framework](#)
- ³ The Bamford Review of Mental Health and Learning Disability (Northern Ireland) [A Vision of a Comprehensive Child and Adolescent Mental Health Service](#) (July 2006).
- ⁴ Northern Ireland Executive, [Delivering the Bamford Vision, The Response of the Northern Ireland Executive to the Bamford Review of Mental Health and Learning Disability, Action Plan 2012-15](#) (November 2012).
- ⁵ Department of Education, [Launch of £5million 'Healthy Happy Minds' pilot for primary schools](#) (November 2021).
- ⁶ Department of Education, Equality and Human Rights Policy Screening for Discontinuation of the Healthy Happy Minds pilot counselling and therapeutic support programme, April 2023
- ⁷ Children's Law Centre (2013) [Young People's Views on Accessing Counselling in Schools - A Children's Rights Campaign 2012-13](#), July 2013.
- ⁸ Department of Education, Equality and Human Rights Policy Screening for Discontinuation of the Healthy Happy Minds pilot counselling and therapeutic support programme, April 2023
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- ¹⁹ Pure Mental (2023), Healthy Happy Minds Survey, Data overview
- ²⁰ Data obtained from EA on 30 June 2023 following an FOI Request by Pure Mental
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- ²² Department of Health. [EQIA Consultation Report on the 2023-24 Resource Budget, 17 June 2023](#)
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- ³⁵ Verbal testimony gathered by Barnardo’s NI from Child receiving primary school counselling in 2022-23
- ³⁶ Art Therapy in Schools: A guide for professionals’, BAAT
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- ⁴⁰ Verbal Evidence received by BAMT Therapist from a child receiving support through the Health Happy Minds programme.
- ⁴¹ Verbal Evidence received by BAMT Therapist from a child receiving support through the Health Happy Minds programme.

- ⁴² Verbal Evidence received by BAMT Therapist from a child receiving support through the Health Happy Minds programme.
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- ⁴⁴ Verbal Testimony gathered by Barnardo's NI from the parent of a child receiving primary school counselling in 2022-23
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- ⁵¹ Verbal Testimony gathered by Barnardo's NI from a Teacher reflecting on the impact of primary school counselling on a pupil in 2022-23
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- ⁶⁴ BAAT 'Art Therapy in Schools: A guide for professionals'
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- ⁷⁰ Verbal Testimony received from BAMT Therapist
- ⁷¹ Verbal Testimony received from BAMT Therapist
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