



The evolution of mental health in schools: where from, where next?

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ABSTRACT

The current agenda for mental health in schools is considered in relation to the concept of mental health and how it has been iterated in schools in the UK. Key contributions from education pioneers are outlined, providing a time line for the first half of the twentieth century particularly informed by psychoanalysis. Mid twentieth century the term mental health begins to be used explicitly and we see the emergence of mental health counselling in schools. Developments culminate in Wall's (1955) landmark book *Education and Mental Health*, which set out a whole school approach. In the latter part of the twentieth century we see a move towards a targeted approach, and the curriculum development for Social and Emotional Aspects of Learning (SEAL) and the consolidation of current policy drivers for mental health are set out. It is argued that in the future, in light of COVID-19, we will see new bridges between home and school, with schools acting more as community hubs supporting the mental health of children and their families.

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The increase in concern about mental health (MH) in children and young people has been spurred by the raft of policy initiatives of recent years which have laid emphasis on how schools should engage with the challenge of supporting children's mental health. The Department for Education published *Mental Health and Behaviour in Schools* (DfE, 2014), which made a case for re-thinking how we might review what we think of as children behaving badly, arguing that bad behaviour might be an indicator that the child is experiencing mental health distress. In January 2017, the Prime Minister announced comprehensive measures to strengthen links between schools and local NHS mental health staff, with every secondary school offered mental health first aid training. The publication of the government's Green Paper on Child and Adolescent Mental Health (4 December 2017) was noteworthy insofar as it was departmentally co-authored by the secretaries of state for Health and Education.

The Education Select Committee (14 November 2017) was convened to gather stakeholder evidence about children's mental health, and notably all 12 expert witnesses drew attention to the central role that schools play in addressing the challenge of mental

health. It is however of note that none of the experts giving evidence were teachers. We might wonder if there is an inherent disconnect between schools themselves and the matter of mental health. Arguably, the strategic approach to mental health interventions in schools has been delivered in an ad-hoc manner, with confusion about evidence of efficacy and quality (Ecclestone & Rawdin, 2016). Only 30% of OFSTED reports mention mental health. Moreover, a review of CAMHS (child and adolescent mental health services), highlighted the fragmented nature of those services, as well as the on-going difficulties young people experience in accessing appropriate support (CQC, 2017). Nevertheless, the UK government has pressed ahead with its policy, *Transforming Children and Adolescent Mental Health Provision* (DoH & DfE, 2017), which extended mental health provision in schools and stated that all schools will have a mental health lead by 2025. This focus on mental health in schools has been contested by some who have argued that an agenda that focuses on ‘therapeutic education’ places too much emphasis on mental health (Aldenmyr & Olson, 2016; Ecclestone & Brunila, 2015). It is fair to say that there is confusion about terminology, and that the concept of mental health has been poorly defined, perhaps with a focus on deficits rather than potential (Gordon & O’Toole, 2015).

This paper sets out a timely, critical review of the concept of mental health in schools, as well as how the concept of children’s psychological well-being and mental health has evolved over the last century or so. The approach here is akin to an archaeology of knowledge, looking at the contribution of key educationalists and their contributions to our understanding of mental health to see if we can discern patterns, continuities and discontinuities (Foucault, 1969). In doing so we might see where we have inadvertently repeated history, made the same mistakes, or indeed where we might have forgotten a history that once yielded progress. Attention is drawn to the fact that mental health is not a new challenge, but rather something that schools and pioneering educators have been concerned about for more than a century. It is apparent that psychoanalysis has been a key foundational epistemology, and this paper examines the way in which psychoanalytic thinking has come in and out of focus. What we see is that the concept of mental health has not been fixed and in considering the precedents, it is noteworthy that the term ‘mental health’ in relation to schools was first coined by an educator, W.D. Wall, in the 1950s. In looking to what we might learn from history, we examine the implications for current policy and practice, as well as consider the implications of COVID-19.

Approaching history

Historical reflection has an important function, as Zufiaurre has argued, from the development of schooling from the Renaissance to the Reformation and the modern massification of schooling; it is ‘useful to return to past circumstances and, in the process, clarify perceptions of the future’ (2007, p. 139). Brass likewise points to the necessity of historicising ‘largely taken-for-granted representations of English teaching to get a different sense of what might be at stake ... pedagogical practices with “larger” goals, such as the cultural, economic, and civic health of individuals and the population’ (2011, p. 154). According to McCulloch (2011), researching the history of education is a story of many struggles – the struggle for equality, social progress, reform and ideology – and so in the same vein, the study of the history of education itself becomes a struggle too: ‘The history of education is

neither itself a “ghost” nor a “shadow”, nor something in between, and yet it is struggling to survive and prosper in a changing world’ (McCulloch, 2011, p. 111).

Habermas argues that the role of historical re-construction potentiates consciousness-raising: ‘Historicism marks the dissolution of the unity of history (*Geschichte*) and narrative (*Historie*) and the abolition of historical processes that we experience as living traditions’ (1988, p. 17). In other words, organised compulsions can be subverted by the study of history where there is a sphere of subjective freedom to be found away from the weight of instantiated practices, that is, historical reconstruction can weaken the blindness of traditional adherence. However, Habermas also points to the way in which historicism is not always necessarily advanced in the service of change. Rather, new light can be thrown on the value of convention and tradition:

Historicism contributes to a situation in which behaviour steering traditions determine, or could determine, the self-understanding of modern societies, and could do so not naively but with the clarity of historically enlightened consciousness. (Habermas, 1988, p. 19)

Anchored in the works of those historians of education who have closely examined the work of such pioneers (cf. Barrow, 1978; Bridgeland, 1971; Rusk & Scotland, 1979), this paper sets out to examine a history of an idea, rather than the biography of any pioneer; that is to say, a collective biography privileges ideas ahead of leaders, blending epistemological and interpretative methods in a way that helpfully cuts across disciplinary fields (Roberts, 2002), in this case the disciplines of teaching, psychology and psychoanalysis.

Schooling and mental health in the first half of the twentieth century (Montessori, Aichorn, Neill, Isaacs, A. Freud)

To an extent, education has been concerned with pastoral, welfare matters and curing souls across the nineteenth and twentieth centuries, and into the twenty-first (Brass, 2011). Zufiaurre talks about a period from the Renaissance where the tradition of didactic teaching of religious dogma was superseded by a modern curriculum concerned with fostering self-learning: ‘the German idea of *Bildung* (personal self-realisation)’ (2007, p. 145). Bridgeland’s (1971) review of the nineteenth-century precursors to schooling troubled children begins with Francis Galton’s influence in establishing the first child guidance clinic at University College, London in the 1880s. Bain’s 1895 book, *Studies in Childhood*, shaped a new field of educational psychology; Cyril Burt tackled the question of delinquency and schooling. Progressive schools began to take shape in Britain, for example, in the late nineteenth century; schools for secondary age children, such as Bedales (1893) and King Alfred School (1897), were founded as alternatives to the harsh disciplinary traditions of public schools (Skidelsky, 1969). Along a similar trajectory in Italy, influenced by the theories of Friedrich Froebel, Maria Montessori (1909) developed an alternative approach to learning and discipline, and here the idea of mental health in schools in the twentieth century is arguably rooted.

Maria Montessori

Montessori (1909) was interested in the ‘psychological moment’ when a child’s development (age 3–6 years) yielded an appetite for learning. The first woman to graduate in medicine from the University of Rome, Montessori joined the staff of the psychiatric

clinic working with children with disabilities, and then later with children living in the poorest quarters of Rome, who lacked education. She was influenced by the work of Johann Heinrich Pestalozzi, a Swiss educational reformer often considered the founder of the modern school (Trohler, 2013). Like Pestalozzi, Montessori sought reform and to equip teachers with new knowledge: 'To sum up the situation briefly, anthropology and psychology have never devoted themselves to the question of educating children in schools' (Montessori, 1909, p. 4). Guido Baccelli, the Minister of Education, asked Montessori to develop a course of lectures for teachers and this soon developed into the State Orthophrenic School, which Montessori directed for more than two years.

As critical of the traditional methods of disciplining behaviour by physical punishment as she was of the use of mechanical braces to straighten out curvature of the spine, Montessori developed a holistic overview of physical and mental deficiency, arguing that the challenge was chiefly an educational one, rather than a medical one. She explicitly identified her method with psychoanalysis, pointed to the limitation of trying to cure symptoms without understanding cause, and argued that psychoanalysis offered an avenue for modern pedagogy (Montessori, 1967). Mario Montessori Junior (1976) later pointed to the parallel lines of Montessori's thinking and psychoanalysis:

I consider it significant that Montessori's model of development corresponds in the main with that arrived at by psychoanalysts. In my experience, psychoanalysis is the only branch of empirical science that has accepted the challenge of studying man with this type of composite frame of reference. Neither Montessori or psychoanalysis tries to simplify or reduce the complexity of the picture of man to fit a special theory. Instead, both acknowledge the diversity of factors determining human development and behaviour. (1976, p. 7)

Montessori considered autonomy and self-direction as necessary factors in the development of the child through to adulthood, and she argued that in many ways the child was therefore our teacher. Her work quickly became influential and well known as the 'Montessori Method'. She travelled to Paris and London to talk about her ideas, and gathered enthusiastic followers. However, by 1920 her luminosity was overshadowed by depth-psychology and psychoanalysis, which was set to shape education for the next 30 years (Rusk & Scotland, 1979). But her writings over the following decades continued to provide an essential basis for the development of her method (Montessori, 1967, 1970, 1972) and the sustained global reach of schools that followed her teachings.

August Aichorn

Although Montessori drew on psychoanalysis, she never formally trained. Encouraged by Anna Freud, August Aichorn was the first elementary school teacher to train as a psychoanalyst. In 1918, he was given responsibility for setting developing educational centres for juvenile delinquents in Lower Austria. The evolution of this work was described in his landmark book, *Wayward Youth* (Aichorn, 1925). In his foreword to the book, Sigmund Freud commented on the challenge of 'influencing the dissocial adolescent by means of education' (1925, p. vi). Freud did not underestimate the scale of this educational challenge and quipped:

In my youth, I accepted it as a byword that the three impossible professions are teaching, healing and governing, and I appreciate the great social value of the work which attracts my co-workers in the pedagogical field. (Freud, 1925, p. v)

From the outset Aichorn (1925) considered his focus to be that of the remedial education that might arise in circumstances, often in emergency situations, where orthodox educational methods had not succeeded in helping the child or youth attain a level of social capabilities commensurate with their age. Aichorn's assertion was that even if the presentation of the child was such that one might ordinarily turn to a physician or therapist, he stressed the importance of the role of the educator. *Wayward Youth* offered a narrative log of the philosophy of the new school, and the children there who were often angry, occasionally violent and consistently bringing with them life stories of prior trauma.

Aichorn's core principle was that of reparation:

From the very beginning we felt intuitively that above all we must see that the boys and girls from fourteen to eighteen had a good time. We did not treat them as dissocial or criminal individuals from whom society needed protection, they were human beings who had found life too hard, whose antagonism to society was justified, and for whom an environment must be created in which they could feel comfortable . . . Without really knowing what we were doing we worked out what might be called a practical psychology of reconciliation. (1925, pp. 149–150)

This new approach Aichorn posited as a contrast to the conventional approach of other schools of the day which, instead of friendliness and kindness, were borne from 'an attitude of stern moralism and revenge' (1925, p. 150). Aichorn mapped out the very basic practicalities of providing children with a drawer or a box, a place that for the first time they could consider their own. For some of these children, the experience of simply having food on the table was unfamiliar. These elements of providing homeliness led to the staff being perceived as *in loco parentis*, so it was with a psychoanalytic eye on transference phenomena that Aichorn approached the emotional task of re-parenting.

Aichorn noted that these boys had been brought up without affection, with many having been beaten. But he also saw how these boys would speak affectionately about their pets: 'In some cases love for a human being had been entirely transferred to an animal. They would speak with great tenderness of their pets only in the next moment to threaten their comrades with violence' (1925, p. 172). The approach of the staff was a combination of flexibility and kindness, and one might have expected that in such circumstances the children would respond well. However, to the contrary, Aichorn recounted that early on in the life of the school, the opposite happened, in fact. The aggressive acts became more frequent and more violent until

practically all the furniture in the building was destroyed, the window panes broken, the doors nearly kicked to pieces. It happened once that a boy sprang through a double window, ignoring his injuries from the broken glass. The dinner table was deserted because each one sought a corner in the play room where he crouched to devour his food. (1925, p. 173)

What appears to have sustained Aichorn and his colleagues through this challenging phase was the understanding that the behaviour might be meaningful, that it was to be taken as communication. In this case Aichorn and colleagues surmised that the violent behaviour might be motivated by guilt, that the boys somehow felt that they were not entitled to kindness, that it was more familiar for the children to recreate the violence of

their previous experience of home. This knowledge seems to have paid dividends insofar as the staff stood firm by their principles and the yield was apparent three months into the experiment, when the violence began to abate and was replaced by tears: ‘Our ignoring the aggression brought forth in each case violent emotion which spent itself weeping in rage’ (Aichorn, 1925, p. 175).

A.S. Neill

In his 1927 book *Die Befreiung des Kindes* (translated as *Set the Children Free*), the Austrian born psychoanalyst Wittels had provocatively demanded:

Leave your children alone. Do not educate them, because you cannot educate them. It might be better if the teachers were to write a thousand times into their copy book: I should leave the children alone instead of having the children write: ‘During school sessions one is forbidden to speak’. One speaks of the century of the child. But this will begin only when the adults will understand that the children have less to learn from them than they have to learn from the children. (1927, p. 14)

This radical milieu, created by Freudians like Wittels and Aichorn, was the fulcrum that A.S. Neill, a young teacher from Scotland, entered when he began two years of training, working in progressive schools in Germany and Austria from 1922–1924. During this time Neill also underwent an analysis with Wilhelm Stekel in Vienna during ‘the days of symbolism and dreams and unconscious slips of the tongue’ (Neill, 1983, p. 105).

The influence of psychoanalysis was central to Summerhill School, which Neill founded in 1921 in Suffolk, England. With the explicit proviso that whilst psychoanalytic ideas might form a theoretical basis to the work, it was never actually to be applied in practice (Neill, 1962). Neill was later drawn to the work of Wilhelm Reich, meeting Reich for the first time in 1936. Although they met only on a few occasions face to face, they maintained a fulsome correspondence for 20 years (Reich & Neill, 1982). Neill noted that Reich seemed to grasp the psychobiological alleviation of anxiety arising from a sense of freedom: ‘The sign of a well-reared child is his free, uninhibited breathing. It shows that he is not afraid of life’ (1962, p. 126). There was an overlap between Neill’s idea of imaginative free-play and Rudolf Steiner’s interest in free-thinking. Although Neill does not mention Steiner in his book on Summerhill, we know Neill was aware of Steiner. In a letter to David Wills in 1964, Neill wrote, ‘Steiner was very bright laddie’ (Neill, 1983). Neill was familiar with Steiner’s work from Neill’s time studying in Germany, where Steiner’s first school opened in 1919. Neill would also have been aware of the subsequent widening of Steiner’s influence across Europe, including the UK, and the United States, an abiding influence that continues today in terms of a creative contribution to mental health in schools.

Neill had the idea that education should be concerned with creating freedom and liberation, and for Neill, it was to be achieved through self-regulation and democratic process. But Neill was not uncritical of the Montessori method. In a 1926 letter to Bertrand Russell, he wrote:

I do not share your enthusiasm for Montessori. I cannot agree with a system set up by a churchwoman with a strict moral aim. Her orderliness is a counterblast to original sin My pupils have no interest in orderliness until they come to puberty or thereabouts. You

may find that at the age of five your children will have no use for the Montessori apparatus. (1983, p. 30)

Later, Neill reflected on what he perceived to be a restriction of imagination in the Montessori approach. In a 1968 letter Neill wrote:

I visited one of Leicester's show primaries [Ravenhurst Primary School]. Kids busy and happy, chattering away, all doing something that had a pedagogical aim . . . to learn something. I had a kindergarten woman who classroom was filled with kids painting, constructing, clay modelling. She left and I got a Montessori man from the USA. Apparatus everywhere but half the attendance. Monstessori, her son told me, thought that a child should not phantasy. (1983, p. 37)

Neill also drew from Reich's ideas about social reformation through sexual revolution (Reich, 1951). Reich's thesis foreshadowed the cultural revolution of the 1960s, and this became based in Neill's attitude to permissiveness, as evident in the emerging philosophy of Summerhill. Following his own experience of analysis with Reich, Neill felt convinced enough to argue that it was really necessary that all teachers should be analysed. He said:

Analysis is no panacea for all ills, it has a limited scope, but it clears the ground. I think the chief merit of analysis is that it makes one understand others more easily, makes one more charitable. For these reasons alone, I strongly recommend it for teachers, for after all, their work is to understand others. The analysed teacher will cheerfully face his own attitude to children, and by facing it, improve it (1962, p. 287).

Neill remained fundamentally interested in unconscious process and saw the search for the meaning behind the children's behaviour as an *a priori* of the organisation. Neill was, however, more concerned with the sturdier task of prevention:

Some middle-class parents seek a solution in psycho-analysis . . . but even if analysis were more successful than it usually is, we cannot analyse the world. Curative work with individuals is a piddling business which cannot sufficiently affect the masses. The solution for humanity lies in proper rearing of the young, not curing the neurotic. (1962, p. 301)

Susan Isaacs

Contemporaneous to the establishment of Summerhill, Susan Isaacs led the development of Malting House School in Cambridge, from 1924–1927. Isaacs had trained as a teacher at the University of Manchester and subsequently as a psychoanalyst, becoming a full member of the British Psychoanalytic Society in 1921. Malting House School offered Isaacs the opportunity to blend her psychoanalytic training and experience of being a teacher. The school initially received boys aged from two to eight years old, and in subsequent years also girls. The children came mainly from professional and academic families, so in contrast to Montessori, Aichorn and Neill, Isaac worked with children from a different social strata. Isaacs (1930) described the ample spaces at Malting House for play both inside and outside, and a richness of resources to facilitate play, from sandpits to climbing frames, paints and musical instruments. From her observations she began to theorise the pre-social play of the children as they enacted parental roles, noting the development of sexual curiosity, as well as the emergence of creative and destructive tendencies manifest in emotions such as love and compassion, hate and violence (Isaacs, 1933).

Her approach was also concerned to remove punishment and invoke little by way of admonishment, though one of the consequences of this seemed to be an increase in aggression towards teachers, according to Graham (2008). Isaac arranged for the psychoanalyst Melanie Klein to visit the school in order to review the practice of the teachers, and Klein subsequently recommended re-enforcing an element of 'guiding firmness' in pupil-teacher transactions (1933, p. 420). For Isaacs, the child was a unique individual with a capacity for social inter-relations who should be treated 'respectfully' (1933, p. 455).

During the First World War (1914–1918), there was a pressing need for increased provision of child care because many more women were working to support the war effort. However, even though more places were made available, there was very little increase in the actual number of nurseries in the UK. Following the war, many women began to consider the possibility of working and following careers. Post-war emancipation began to challenge the traditional domesticity of women significantly. On this wave of social re-definition, the 1918 Education Act empowered local authorities to provide more nurseries. However, the legislation did little to increase the numbers of nurseries. Indeed, by 1928, there were still fewer than 30 nursery schools across England (Browne, 1986). The failure of local authorities to provide nursery schools appears to have been the result of a combination of economic factors, along with some social ambivalence about the empowerment of women.

In the years after Malting House Isaacs (1929, 1932, 1933) advanced her research, outlining a framework for schools wherein children could be helped to grow out of their difficulties, and this yielded an increase in the impetus for nursery schools. In her book, *The Children We Teach* (1932a), she outlined the way in which psychological theory could be of use in understanding children's educational attainment and social development in the context of the primary school. In 1933 she was appointed Head of the Department of Child Development at the University of London. This put Isaacs in a position to effect policy at a strategic and governmental level through her contact with figures such as Lord Eustace Percy and Sir Cyril Burt.

A mark of her influence over the next 10 years was a significant increase in the number of nurseries. By 1944, there were almost 10 times more children in nursery care than there had been in the previous decade. Her subsequent work focused on children who had lost their fathers (Isaacs, 1945) during the war, and the development of her thinking about institutions (Isaacs, 1948). Many of these ideas continue to offer a valuable steer for many of the contemporary challenges. Isaacs blended teaching with research into child development, through the lens of psychoanalysis. Her contribution is significant in reminding us of the psychosocial context of education, with the necessity of a feminist understanding, and especially the understanding of emotional depth in order to counterpoise the overemphasis on tests and tables (Burman, 2011).

Anna Freud

Among the beneficiaries of a will towards nursery school education were Anna Freud and Dorothy Burlingham. They established London Nurseries between 1939–1945, as reported in *Infants Without Families and Reports on the Hampstead Nurseries* ('Freud, 1973). From 1941 the Hampstead Nurseries also provided the basis for a theoretical training course for nursery staff, which became the foundation of the Hampstead Child

Therapy Clinic. The clinic flourished under the guidance of Anna Freud and was the focus of her prodigious output over the next 40 years. Anna Freud's interest in the application of psychoanalysis to the task of education dated back to 1927, when she established the Hietzing School in Vienna with the help of Dorothy Burlingham. That experience was the grounding for her *Introduction to Psychoanalysis for Teachers* (Freud, 1931), in which she set out theories of child development, arguing that schools were ideally situated to recalibrate the effects of repressive parenting, which led to neurosis and inhibition in children. Her thesis, presented initially in a series of lectures delivered to Viennese teachers, was similarly concerned to find a way of developing a system that avoided perpetuating repressive parenting, outlining a pendulum of balance between a *laissez-faire* approach and the role of discipline. Among the teaching school staff in Hietzing was Erik Erikson, who made the bold claim:

If education earnestly seeks to rebuild on a new conscious basis of knowledge and intelligence, then it must demand radical progress to the point where clear vision results in human adjustment. Modern enlightenment can best achieve this through psychoanalysis. (Erikson, 1935, p. 68)

Out of this wave of interest in child development and education, a new field known as *Heilpädagogik* (translated as curative pedagogy) was born. The concept emanated from the work of the Education Department of the Vienna University Hospital in the 1930s, but was subject to contestation from the start. As Hoffer observed: 'What we call today curative education is the precipitation of an intensive interaction between education and medicine, no wonder that the scientific character is controversial' (1934, p. 350). Originally curative education was seen as a biologically based science pertaining to abnormal childhood personality development, but the scope of influence of psychoanalysis meant that the task of education was de-medicalised, with a closer consideration of education pathways for the child (Tornow, 1957). The bridge between psychoanalysis and schooling education in Europe in the 1930s was complete, as an increasing number of teachers were drawn to the emerging field of child psychoanalysis (Ekstein & Motto, 1964), including Neill and Isaacs, as discussed earlier.

After fleeing from Vienna to England in 1937, Anna Freud continued in her work with children. One of her best known projects was carried out in 1945 with German Jewish children (*aet.* 2.5–4 years), orphaned survivors of the Holocaust who arrived in London after they had been granted entry permits by the Home Office. These children became known as the 'Transporter Children'. Freud noted that a child would move through phases of play, becoming increasingly co-operative, at first isolated, though self-reliant in play, before becoming more accommodating to others. Based on her observations Anna Freud began to formulate developmental stages in patterns of inter-relation as 'egocentricity to objectivity like a long stretch on the road from play to work' (1979, p. 320), setting out an agenda which would shape her research for the next 30 years (Freud, 1960).

Mental health and schools in the second half of the twentieth century

If the century of the child were to be realised, as Wittels (1927) had heralded, then arguably the focus for the battle was in the margins for inclusion with those children that presented the greatest challenge, as Montessori and others had established. In Europe and

the UK, Montessori schools grew in reputation with an international presence. The type of democratic therapeutic community school developed by Neill yielded a network of other democratic initiatives, such as the Hawkspur experiments (Wills, 1941). The idea that education should be holistically concerned as much with feelings as facts was embedded in the writings of these education pioneers. Herein a psychoanalytic theorisation of emotion appeared to be a core pedagogical underpinning, not only with emotion as a response to learning material, but also as driver for self-knowledge (Tarc, 2013). We see psychoanalytic theories informing teaching practices and contributing to the advancing of a wider cross-cultural education system (Erikson, 1950).

However, the nomenclature associated with articulating these domains of concern for distressed children was problematic. Terms like cretin and imbecile were often used, pointing towards a medical underpinning, as did the idea of curative education, as if there were some illness that needed to be addressed (Bridgeland, 1971). In 1953 the UK Ministry of Education presented a definition pertaining to children who were in need of special forms of education: 'Pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment in order to effect their personal, social or educational re-adjustment' (1953, p. 269). W.D. Wall's (1955) book *Education and Mental Health* entered the debate about how to approach the questions about emotional well-being in schools. Drawn from the proceedings of a United Nations Educational, Scientific and Cultural Organization (UNESCO) conference, Wall used the term 'Mental Health' as an overarching moniker, and there appeared to be something of hint of zeitgeist for the term itself: see, for example, Morris (1955), who referred to *Mental Health in the Classroom* with the teacher at the helm. The concept of mental illness was used generally in a psychiatric sense to talk about madness or insanity, so the idea of 'mental health' pushed towards an interesting re-framing of the emotional and psychological challenge of working with children in schools. In the preface to Wall's book, Piaget said the book was concerned with a 'detailed study of the basic problem of co-ordination between school and home, and special attention to the general occurrence of overstrain at school' (1955, p. 3).

Wall argued that nearly all European education systems functioned with some level of consultation and co-operation with families, and he outlined the importance of the overlap between home life and school. He argued that the cornerstone of mental health was a tripod of acceptance, understanding and not being rejected. He also said that the teacher needed not only to heed the different academic and intellectual capabilities of the children, but also the variance in the organisation of the emotional drives, the capacity to tolerate frustration and so on. In the primary school Wall attached value to encounters whereby children 'recognise in themselves and in their contemporaries, impulses to lie, to steal, to be aggressive, to be "naughty", to be interested in forbidden things' (1955, p. 99). In these circumstances, Wall drew attention to 'powerful feelings' (1955, p. 99), like guilt, fear and anxiety, and while he said that discipline and adult authority were necessary conditions for moral growth, he argued that understanding was at the healthy heart of the matter.

The second half of Wall's book was focused on secondary education, where he saw there was a new dimension of engagement for pupils beyond the family. New experiences of cultural engagement could be harnessed in the classroom:

[T]he cinema and the rich variety of real social activities which could be made possible, as a means of providing the growing children with a multiplicity of roles which he can play and through them educating the personality and the moral character. Serious and sympathetic discussion of . . . the behaviour patterns and values exhibited by the films he sees, by the books he reads, and by the group with which he meets, [these are] the means by which teachers can constructively contribute to the mental health of a growing generation. (Wall, 1955, p. 141)

Wall summarised his vision as follows:

The school has a great responsibility for the mentally healthy development of adolescents – a responsibility it cannot discharge by concentrating upon a purely intellectual formation. Its syllabus, its methods and its organisation must take account of the striving of its pupils to achieve vocational, social, sexual and philosophic selves, of the stresses and anxieties which growing up in a modern world can impose on young people. (1955, p. 162)

Arguably this was Wall's blueprint for the way in which education could be delivered in the context of the family and wider society, where mental health could be optimised. He argued that traditional lessons such as geography and literature could be rendered in terms of the lived experience of the children, bringing subjects alive with relevance to interrelationships, at home and in the playground. In this way knowledge would become active. He also believed that co-education had much to commend it where there was a social atmosphere where masculine and feminine aspects of life could be balanced. Finally, Wall made a persuasive case for the mental health support of teachers: that a school environment conducive to the mental health of the children needed teachers themselves to be emotionally supported.

In 1958 Wall became the first editor of a new journal, *Educational Research: A Review for Teachers and All Concerned with Progress in Education*. The opening paper of the journal set the tone with a highly critical view of psychologists and their perspective on intelligence:

The need for caution is also indicated by the negative results of so many experiments . . . [T]he 'new look' I am advocating does not justify a return to the old belief in formal discipline and the pre-eminence of classical education. One other pointer that emerges from investigations of pre-school children is the vital part played in intellectual development by emotional factors: there is strong evidence that the young child who is emotionally secure in a democratic family environment is better able to develop his intellectual capacities than the child who is either over-protected or who feels rejected. (Vernon, 1958, pp. 7–8)

It would appear that Vernon's caution about psychological approaches was not entirely heeded. Instead there was an increase in the scope of educational psychology that saw a workforce of specifically qualified practitioners as adjuncts to schooling with boundary lines between education and psychotherapy (Ekstein & Motto, 1964). In the late 1960s, initially in the United States, we see the appearance of school counsellor as a specific profession. In the UK there emerged the idea of pastoral and guidance counselling informed by humanistic theory, delivered by teachers, chaplains, school nurses and child guidance practitioners. The *British Journal of Guidance and Counselling* was first published in 1973 and the first paper was by Daws (1973) entitled, 'Mental Health and Education: Counselling as Prophylaxis'. From this domain of practice, we can trace the roots of a specific iteration of school counselling, which has endured specific to the

consideration of mental health in schools, and which has often been shaped by psychoanalytic theory.

In contrast, other behavioural facing approaches, carried out by psychologists, set out to identify and measure maladjustment and other psychological impingements to development (Dearden, 1966). Merrett (1981) contextualised the development of behaviour modification research in British school classrooms with teachers as research collaborators and summarised a large number of projects, mostly covering the period of 1975–1980, which generated knowledge about managing disruption in the classroom using reward systems and other Skinnerian behavioural approaches. Merret concluded that there could be confidence that behavioural measures deployed by teachers were helpful in bringing about positive changes in the classroom. If Wall's book on mental health and education had been intended as a design for a whole school approach, then arguably the system did not unfold as Wall might have hoped. The rise of behaviourism offered a trajectory for managing children which moved away from the more holistic agenda of psychoanalysis and the concern with emotions and relations.

The term 'mental health' from the 1980s became submerged, and in relation to research in schools, there appear a handful of mentions presenting passing rather than sustained debate, for example Ballard's (1983) literature review of research into social isolation which mentioned once that the impact of peer rejection on children might be an indicator of poor mental health in adulthood. Cooper and Upton (1990) mentioned 'mental health' once in a paper which applied family therapy to the classroom situation, Braithwaite (1994) briefly referred to mental health in discussing bullying, and, finally, Taylor, Hawkins, and Brady (1991) talked briefly about mental health in terms of stress related crisis, violence and a significant upsurge in childhood suicide.

Mental health in schools into the new millennium

Curriculum iterations and strategy focusing on how pupil well-being might be promoted and delivered were recast from 1998 in a new UK agenda under the rubric of Social and Emotional Aspects of Learning (SEAL) (Humphrey et al., 2010; Wigelsworth, Humphrey, & Lendrum, 2012). The implementation of the SEAL curriculum evolved over the following years, or 'fluctuated' as Ecclestone and Rawdin (2016, p. 381) describe it, developed without co-ordination in a rather piecemeal manner (Banerjee, Weare, & Farr, 2014). Nonetheless, SEAL programmes consistently generated evidence of success in terms of improvements across a range of measures from social engagement to academic performance (Corcoran, Cheung, Kim, & Xie, 2018), and there was particular success where SEAL was delivered with a whole school approach (Banerjee et al., 2014). As Wood (2018) has discussed, SEAL as a core curriculum matter appeared to undergo a change in the UK from 2010 with an increasing focus on the school as a place for improving children's mental health, in an agenda set out by Prime Minister Theresa May. However, instead of SEAL focusing on a general level of emotional well-being, programmes began to target children exhibiting problem behaviours, especially in schools located in areas of socio-economic disadvantage.

Not everyone saw the increase in interest in mental health and emotions as a positive turn:

A therapeutic ethos in education appears benign and empowering. Yet . . . it produces a diminished view of people and low expectations about people's capacity for resilience and autonomy. One effect is to encourage an alignment between the values and activities of education and welfare. This both legitimises and extends institutional and government influence over people's psychological and emotional states. (Ecclestone, 2004, p. 112)

This focus on emotions was perceived, by some, to be generating a dangerous rise in therapeutic education, as Ecclestone and Hayes (2010) called it, arguing that schools had been forced into becoming overly pre-occupied with social and emotional learning, and that this emotional agenda interfered with the primary task of knowledge acquisition. The emotional terrain, they asserted, had become too dense, with '[i]nterchangeable, ill-defined terms . . . emotional literacy, emotional intelligence, emotional well-being, self-esteem and mental ill-health, together with a proliferating list of disorders and syndromes' (2010, p. 8). The profession of psychotherapy was singled out for particular attention, and there were concerns that psychotherapy had created an overly emotional milieu that overlooked the possibility that mental health challenges were in fact symptomatic of social pessimism, perpetuating a 'vulnerability zeitgeist' (Ecclestone & Rawdin, 2016, p. 46).

Nonetheless, there was an increase in targeted mental health interventions in schools apparent through the development of a raft of government policy and guidance, and the call for schools to employ counsellors and psychotherapists. *Mental Health and Behaviour* (DfE, 2014) argued that mental health needed to be taken into consideration when addressing behavioural challenges in some children, that is to say bad behaviour was considered as a possible indicator of a mental health need. Furthermore, mental health was increasingly described in terms of more specific disruptions, for example depression, self-harm, suicide, anxiety and eating disorders, bringing with it an assemblage of care and education and a significant pedagogical challenge that was described in terms of a new cluster of 'Social, Emotional and Behavioural Difficulties' (SEBD) (Severinsson, Nord, & Reimers, 2015).

The UK government published *Transforming Children and Young People's Mental Health Provision* (DoH & DfE, 2017), extending the mental health provision in schools by setting out the terms for appointing a Mental Health Leads in all schools by 2025. In its green paper, *Mental Health: Failing a Generation* (2018), the government argued that there needed to be a more coherent approach to respond to the mental health challenges that face children and young people. In 2019 the Children's Commissioner estimated that a million children needed help for a mental health problem, calculating that this amounted to around four children in every class in schools in the UK (Children's Commissioner, 2019). The report also drew attention to the circumstances of the lives of children and young people, that 120,000 children were homeless or living in temporary accommodation.

Where next?

The concept of mental health in schools has evolved across time, from the work of pioneering educationalists who took a whole school approach to meeting the challenge of distressed children and young people, through to a rise in targeted psychological interventions, and then to the more recent developments whereby mental health has come to occupy a central concern for UK schools today. The developments in the early part of the twentieth century, strongly influenced by psychoanalysis, sought to develop an approach

to schooling which was based on a premise that children's distress was rooted in family, social and environmental lived experience, often in circumstances of adversity and deprivation, with the teacher *in loco parentis*. The latter part of the twentieth century saw a mental health agenda in the UK move away from Wall's vision of a whole school approach, towards a partitioned needs based approach, with a rise in behavioural management and an increase in medical diagnosis accompanied by a sharp rise in pharmacological intervention (Wijlaars, Nazareth, & Petersen, 2012). In the case of schooling, there was shift away from an understanding that mental ill health was something which has its roots in family and in environmental lived experience, and an emphasis on behavioural correction. The philosophy of joined-up systems was helpfully re-established in the *Every Child Matter* initiative and the 2004 National Service Framework for Children (DoH, 2004), following the inquiry into the death of Victoria Climbié. And in 2004, the revised *Children Act* established a Children's Commissioner, which prioritised a focus on mental health and emotional well-being as a public health concern with an aim to cohere approaches across disciplines and government departments, as well as a remit to protect the rights of children as set out in the United Nations Conventions on the Rights of the Child.

It is timely to develop a body of research that examines in more depth the place of MH (mental health) in schools, especially in light of COVID-19, where we will need to take stock of the impact of the pandemic on schools, children, families and teachers. The challenge points to a much stronger knit between school and home, and the possibility that there will be future occasions where mass home schooling will be called for. The challenge of MH arguably needs to be a unifying expression rather than specialist types of education (e.g. therapeutic education), where MH might be integrated into the everyday life of a school, for instance, in the work of specialist counselling and psychotherapy practitioners who can work within the whole school staff team Winship & Macdonald, 2018). Weare and Nind (2010) have argued persuasively that a multi-modal, whole-school approach is most likely to yield positive outcomes in the promotion of social and emotional skills among pupils. We know that attachment and connectedness to school has been correlated with pro-social behaviour among children and adolescents, and that there is also evidence that patterns of poor peer attachment at school leads to mental health difficulties (Oldfield, Humphrey, & Hebron, 2016).

The MH mission of schools arguably needs to be re-framed in terms of restorative practices, nurturing well-rounded empathic citizens who are capable of managing emotions, and who are equipped with the capabilities for conflict resolution (McCluskey et al., 2008). Conflict in this sense is not the source of adversarial engagement, but rather seen as an everyday facet of creative human interaction. Elements of punitive and adversarial encounter are supplanted with a focus that builds on a core agenda of curiosity and compassion, and looks to seek out opportunities for children learning how to be in the world through their civic action, and their enactments of social responsibility. The focus shifts away from looking at those who are vulnerable, and instead pays heed to those who are at risk of hurting others. Moreover, there is evidence that restorative practices can improve the school environment and enhance learning (McCluskey et al., 2008). What needs to be held in mind is that children who are at the margins, who have been subject to poverty and inequality, who have experienced domestic violence, neglect and abuse, will present with greater challenges.

The foregoing history draws attention to the way in which schools and practices have developed across time, pointing to the precedents where there has been an inclusive whole school approach which builds a bridge between home and school. We might think of this in terms of the school as a therapeutic community. The Children's Commissioner (2019) envisages an extended remit for schools, whereby they become neighbourhood hubs, staying open in the evening, weekends and throughout school holidays providing a range of activities, from sports to arts, and especially utilising eco-spaces, which will potentially be beneficial to many children and their families. Hamilton (2009) has talked about extended hours schooling provision in Sweden, where teachers retain responsibility for some children from 6am to 6pm. He also points to more recent efforts in the UK in regard to social inclusion for pupils on the margins and the work of the school support staff who encourage inclusion:

They may, for instance, use mobile phones to encourage disaffected pupils to get up and go to school, they visit pupils at home and they may work with pupils outside school. In this sense they are closer to the classical Greek sense of pedagogue – someone who supports a child's educational journey and who, in the process, retains a guiding role in their upbringing. (Hamilton, 2009, p. 14)

During COVID-19 the idea of extended schooling, as Hamilton imagines it, has been operationalised in the UK and elsewhere, re-shaping the practice of all those who work in schools who are concerned with pupil mental health and well-being. Albeit anecdotal, we have seen teachers and counsellors mobilising new skills of remote engagement, via telephone, video calling (skype or Zoom), texting and so forth. In this case there has been a greater sense of fluidity between home and school, and for those children who may sometimes fall under the radar out of school hours, this has brought a greater degree of connectedness between home and school. Vulnerable pupils do not necessarily need to be out of the school mind's eye when at home. Perhaps some of these resourceful practices can be mobilised in the future, post-COVID-19, scaled up to greater levels of community and school engagement in the service of pupil mental health.

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