

**Written Evidence submitted by the National Counselling & Psychotherapy Society (NCPS)
(CWSB202)**

Children's Wellbeing & Schools Bill Committee

1. Introduction

- 1.1. The **National Counselling & Psychotherapy Society (NCPS)**¹ is one of the UK's leading professional bodies for counselling and psychotherapy.
- 1.2. Our mission is to improve access to high-quality, ethical, and effective counselling, advocating for the profession whilst ensuring public safety through our **Accredited Registers**, accredited by the **Professional Standards Authority (PSA)**.
- 1.3. NCPS represents more than 18,000 counsellors & psychotherapists working across the UK in a variety of sectors, including public, private and the third sector.
- 1.4. Research shows that **early, accessible**², **relational**³ **mental health support** is important in preventing escalating issues for children and young people⁴.

2. The Aims of the Bill

- 2.1. The **Children's Wellbeing & Schools Bill** is a welcome step towards prioritising the wellbeing of children and young people.
- 2.2. However, it **fails to address a fundamental pillar of mental health support: access to school-based counselling**.

¹ <https://www.ncps.com>

² <https://pmc.ncbi.nlm.nih.gov/articles/PMC7092613/>

³ <https://pure.roehampton.ac.uk/portal/en/publications/humanistic-counselling-plus-pastoral-care-as-usual-versus-pastora>

⁴ <https://www.magonlinelibrary.com/doi/full/10.12968/bjon.2016.25.10.552>

2.3. Evidence from across the UK and internationally highlights the **transformative, preventative impact of counselling in schools**⁵.

2.4. In England, there is still **no national commitment to ensuring every child can access a trained counsellor when they need one**.

3. The Need for School-Based Counselling

Counselling for children & young people is a **preventative approach** to the increasing mental health levels being presented in schools.

3.1. Growing Mental Health Need:

3.1.1. **1 in 5** young people (aged 8-16) now have a diagnosable mental health condition, a figure that has more than doubled since 2017⁶.

3.1.2. **50%** of all mental health problems develop by age 14⁷.

3.1.3. Mental health issues are a leading cause of **school absenteeism**⁸, with anxiety and depression significantly impacting students' ability to engage in learning.

3.1.4. Suicide remains the **leading cause of death** for young people aged 5-19⁹.

⁵ <https://link.springer.com/article/10.1007/s00787-021-01802-w>

⁶ <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2023-wave-4-follow-up>

⁷ <https://pubmed.ncbi.nlm.nih.gov/15939837/>

⁸ <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2023-wave-4-follow-up/part-3-education-services-and-support>

⁹ <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsregistrationsummarytables/2021#leading-causes-of-death>

3.2. Inconsistent & Inequitable Access to Support:

- 3.2.1. **Scotland, Wales, and Northern Ireland already fund school-based counselling**, ensuring young people have **immediate access** to a qualified professional. England is now the only UK nation without a funded programme.
- 3.2.2. In England, access depends on local funding, creating a postcode lottery where thousands of children receive no early support.
- 3.2.3. Outside of school this postcode lottery is further replicated, where children in affluent areas of England are twice as likely to have access to avenues for support than those in poorer areas¹⁰. It is therefore vital that schools are able to access resources to address that imbalance.
- 3.2.4. Recent reports highlight that **over quarter of a million** children are on waiting lists for mental health support¹¹, with many facing delays of several months before receiving care.
- 3.2.5. School-based counselling offers a crucial **early intervention**.

3.3. Evidence-Based Impact:

- 3.3.1. Research shows **school-based counselling improves mental health, academic outcomes, and attendance**¹².

¹⁰ <https://www.theguardian.com/society/2021/nov/01/twice-as-many-youth-services-in-englands-richest-areas-survey>

¹¹ <https://www.childrenscommissioner.gov.uk/blog/over-a-quarter-of-a-million-children-still-waiting-for-mental-health-support/>

¹² <https://www.place2be.org.uk/about-us/impact-and-evidence/explore-our-key-research-findings/what-impact-are-place2be-services-having-on-education>

3.3.2. **Early intervention reduces long-term costs¹³**: Research suggests that every £1 invested in school-based mental health support can yield **£8 in societal benefits¹⁴**, including reduced NHS costs and improved educational outcomes.

3.3.3. Staff in schools cite **positive short and long-term impacts on students**, including increased openness, improvements in mood, and the role of the personal connection for the child or young person¹⁵.

3.3.4. Parents and carers feel that schools are an **ideal environment for the provision of mental health support¹⁶**.

4. Aligning with the Bill's Objectives

4.1. The Bill emphasises **supporting children with care experience** and ensuring they thrive, yet many of these children struggle with trauma, anxiety, and stress¹⁷. School-based counselling would provide a **low-barrier access point** for mental health support.

4.2. The government has committed to **moving from crisis response to prevention**, and embedding counselling services in schools is **one of the most effective preventative measures available**.

4.3. The Bill also prioritises **reducing health inequalities**, yet access to mental health support varies dramatically by region. School counselling could ensure **equitable access** to early intervention services.

¹³ <https://www.publicfirst.co.uk/wp-content/uploads/2024/06/School-counselling-report-1.pdf>

¹⁴ <https://www.place2be.org.uk/media/esfjzc3f/pro-bono-economics-report-place2be-2022.pdf>

¹⁵ <https://pure.roehampton.ac.uk/portal/en/publications/school-staff-perceptions-of-the-impact-of-school-counselling-on-y>

¹⁶ <https://pure.roehampton.ac.uk/portal/en/publications/they-need-somebody-to-talk-to-parents-and-carers-perceptions-of-s>

¹⁷ <https://www.iriss.org.uk/resources/outlines/care-experienced-children-and-young-peoples-mental-health>

5. How the Bill Can Be Strengthened

5.1. The omission of school-based counselling from the Bill contradicts its ambition to improve children's wellbeing.

5.2. The NCPS recommends the following:

5.2.1. The Bill should include a commitment to fund school-based counselling in every primary, secondary school and college, aligning with provision in the devolved nations.

5.2.2. A requirement for Integrated Care Boards to commission school-based counselling, ensuring it is embedded in local mental health pathways.

5.2.3. A national framework for counselling in schools, updating the current Blueprint for the Future document¹⁸, setting standards and ensuring consistent, high-quality provision.

6. Why This Matters

6.1. Early mental health intervention is **cheaper, more effective, and reduces strain on NHS services**¹⁹.

6.2. School-based counselling:

6.2.1. **Prevents** escalation to crisis services

¹⁸ https://assets.publishing.service.gov.uk/media/5a74ba8640f0b619c8659f41/Counselling_in_schools.pdf

¹⁹ <https://pmc.ncbi.nlm.nih.gov/articles/PMC8148329/>

6.2.2. **Reduces** pressure on NHS Talking Therapies, which currently have waiting lists of **over 1 million people across CYP and adult services**²⁰

6.2.3. **Supports** young people to stay engaged in education, reducing absenteeism and exclusions²¹

6.3. Without national provision for counselling in schools, England risks **falling further behind other UK nations**. The Children's Wellbeing & Schools Bill must address this gap to **give all children access to the support they deserve**.

7. Proposed New Clauses for the Children's Wellbeing and Schools Bill

Clause 1: Duty to Provide Access to School-Based Counselling

- i. Every primary and secondary school in England must provide access to a qualified school-based counsellor for pupils.
- ii. Counsellors must be accredited members of a Professional Standards Authority (PSA) Accredited Register.
- iii. Schools must ensure that counselling services are delivered in a confidential, safe, and developmentally appropriate manner, in line with best practice guidelines for children and young people's mental health.
- iv. The Secretary of State shall provide funding to ensure that schools can meet this requirement without diverting resources from other educational needs.

Clause 2: Expansion of Counselling in Further Education and Alternative Provision

- i. The duty to provide school-based counselling shall extend to:

²⁰ <https://www.bma.org.uk/advice-and-support/nhs-delivery-and-workforce/pressures/mental-health-pressures-data-analysis>

²¹ <https://www.place2be.org.uk/about-us/news-and-blogs/2022/may/in-school-mental-health-support-can-reduce-school-exclusions-finds-place2be-and-university-of-cambridge-study/>

- a. Further education colleges and sixth forms
 - b. Alternative provision settings, including pupil referral units (PRUs)
 - c. Special educational needs (SEN) schools
- ii. Specialist training must be provided for counsellors working with young people with complex needs, including neurodivergent pupils and those with experience of trauma.

Clause 3: Integration of Counselling with Multi-Agency Mental Health Support

- i. School-based counselling services must be fully integrated with local NHS, social care, and third-sector mental health services to ensure continuity of care.
- ii. Counsellors working in schools should have a clear referral pathway into NHS and voluntary sector services for pupils requiring additional support.
- iii. Integrated Care Boards (ICBs) must work with schools to ensure joined-up mental health care.

Clause 4: Establishing a National Framework for Quality and Standards in School-Based Counselling

- i. The Department for Education and Department of Health and Social Care shall develop a national framework to standardise the provision of counselling in schools, ensuring:
 - a. A minimum number of hours of counselling available per week per school, proportionate to student population
 - b. Clear quality assurance mechanisms
 - c. Defined competencies for school-based counsellors
- ii. The framework must be developed in consultation with professional bodies representing counsellors and psychotherapists, as well as young people and school leaders.

- iii. A National Lead for School-Based Counselling shall be appointed within the Department for Education to oversee implementation.

Clause 5: Funding and Workforce Expansion for School-Based Counselling

- i. The Secretary of State must ensure that funding is allocated to recruit and train sufficient school-based counsellors to meet the needs of all pupils requiring support.
- ii. A targeted recruitment strategy should be developed alongside professional bodies for counsellors to address gaps in counselling provision, with incentives for practitioners to work in underserved areas.
- iii. Government must ensure that counselling is recognised as a distinct and valued profession within the school workforce.

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