

CYP wellbeing in schools

Comparative review across 12 jurisdictions

Synthesis and insight for #BeeWell and the English context



N.B. This report is a prototype for CES synthesis of academic studies

Background and key conclusions

This synthesis is based on the Banwell and Humphrey CYP review (UoM - November 2023)* - commissioned by edpol/CES, to examine how wellbeing is measured and managed in twelve jurisdictions (see appendix list).

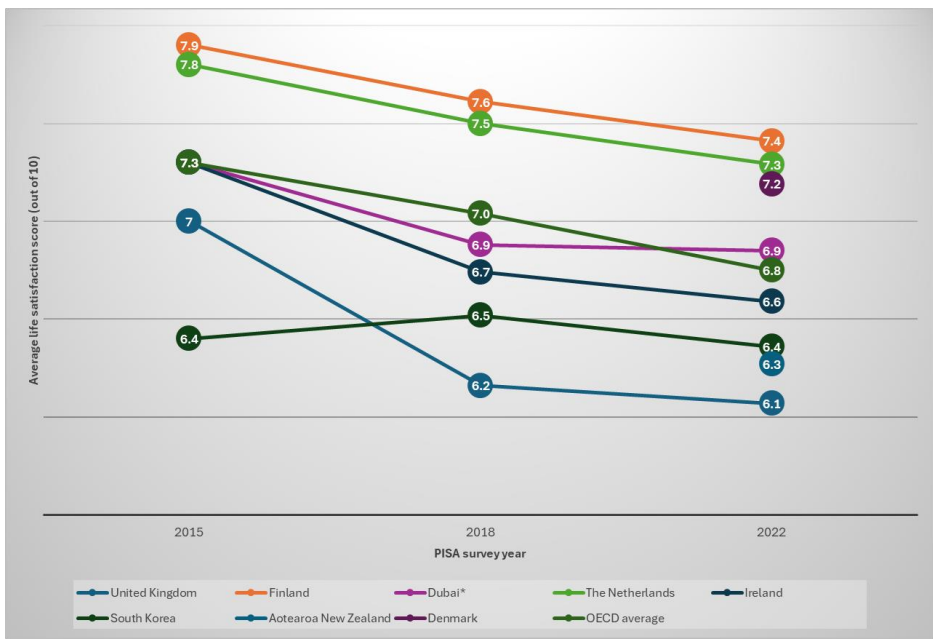
Key conclusions:

1. **Over the last decade, wellbeing has declined across all jurisdictions.** *This could be due to multiple factors or possibly a singular cause. In any event, a thorough investigation into CYP life satisfaction should include the effects of smart phones and social media*.* (Chart 1 and section 1)
2. **Tackling poor CYP wellbeing must extend beyond the school setting.** Highlighted drivers of poor wellbeing differ by jurisdiction and most arise outside of the educational setting. These include structural inequality, regional and class differences and the marginalisation of certain groups. (Chart 2 and section 2)
3. **England compares poorly to other jurisdictions, to the extent it has no authoritative measure of CYP wellbeing and because remedial policies have not been mandated.** All other jurisdictions invest and enforce in these areas. (Chart 3 and section 3)
4. **England is also an outlier in the critical areas of teacher preparedness and clarity of responsibility,** with other jurisdictions being far ahead in their policies and practice. (Chart 4 and section 4)
5. **England's partly implemented 2017 Green Paper and cross departmental initiatives should be revisited.** The prior legislation, initiatives and consultation may well have been on the right track and there is still a need to prepare teachers properly, including training and specialist support - coupled with national measurement, clear accountability and defined responsibility. (Sect 3 and Appendix)

* With an extended data analysis

Chart 1: Insight from comparable data

Over the last decade, wellbeing has declined across all jurisdictions. This could be due to multiple factors, such as climate change concerns, the cost of living challenges, or possibly a singular cause. In any event, a thorough investigation into CYP life satisfaction should include the effects of smart phones and social media*.

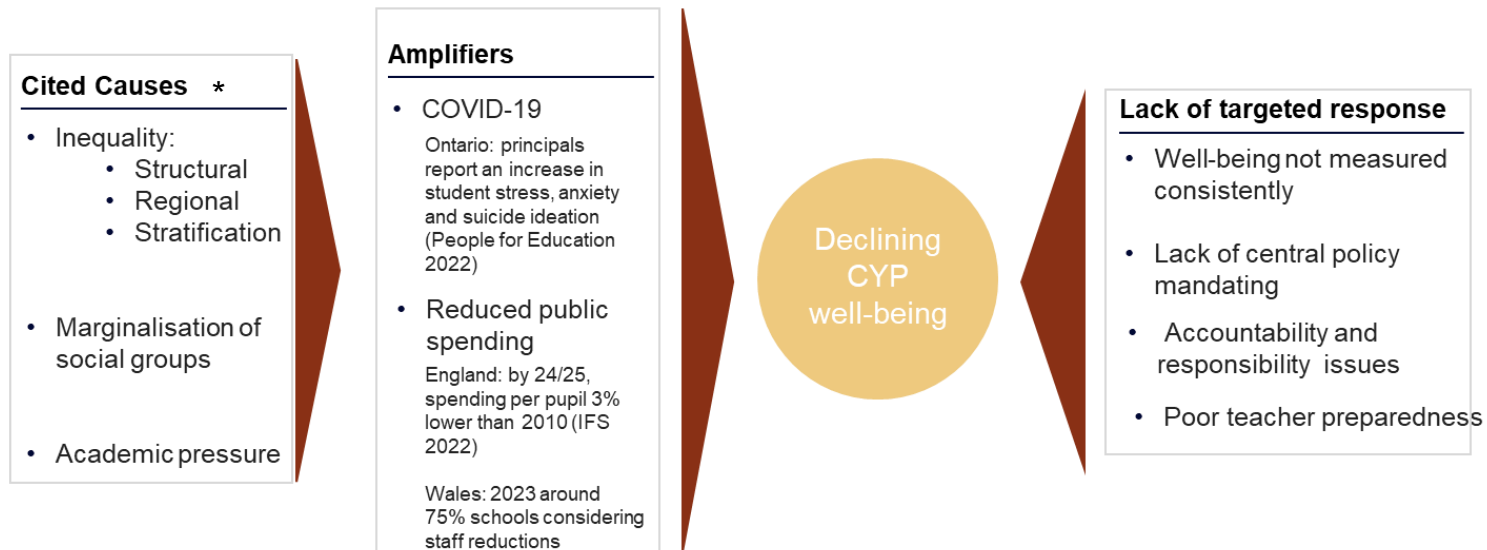


- The PISA/OECD CYP life satisfaction data (left) can also be extended from 2015 to 2022 for 70 jurisdictions and nearly every country shows consistent falls in CYP life satisfaction
- The low score for the UK in 2015 became the average for all 70 countries in 2022. In this sense the UK is 7 years ahead on a declining trajectory.
- The HSBC Health Behaviour survey also shows a universal decline in CYP satisfaction as young people progress in age from 11 to 18, plus a noticeable decline for all CYP between 2018 and 2022

* See More in Common USA and Europe comparative report May 2024

Chart 2: Wellbeing complexity and the role of schools

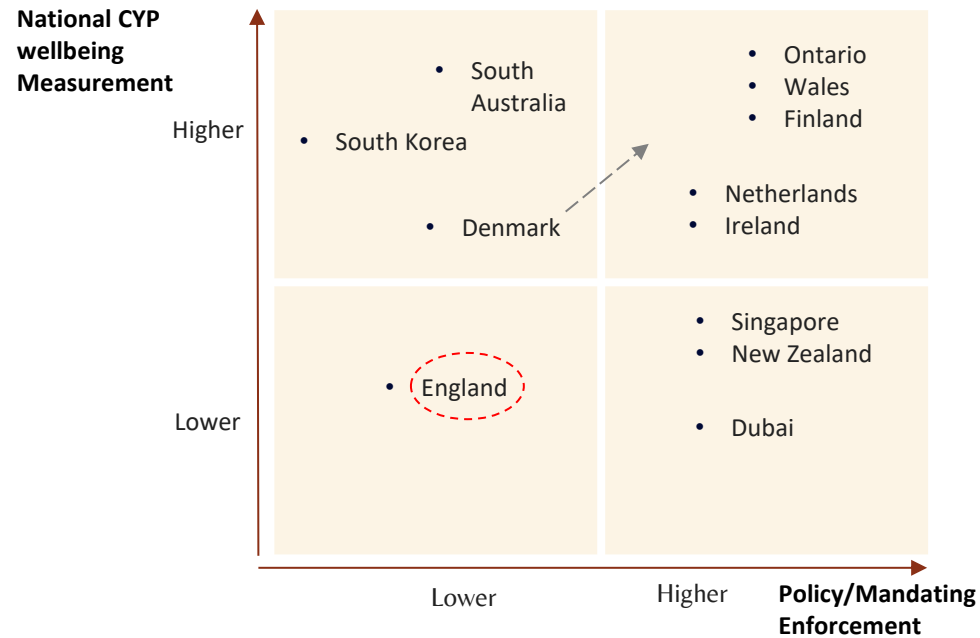
Tackling poor CYP wellbeing must extend beyond the school setting. Highlighted drivers of poor wellbeing differ by jurisdiction and most arise outside of the educational setting. These include structural inequality, regional and class differences and the marginalisation of certain groups*.



* Other commonly quoted causes include employment prospects, housing, community and social interaction, family structures, climate change, bullying, smart phones and social media

Chart 3: England as an outlier (1): Measurement and policy mandating

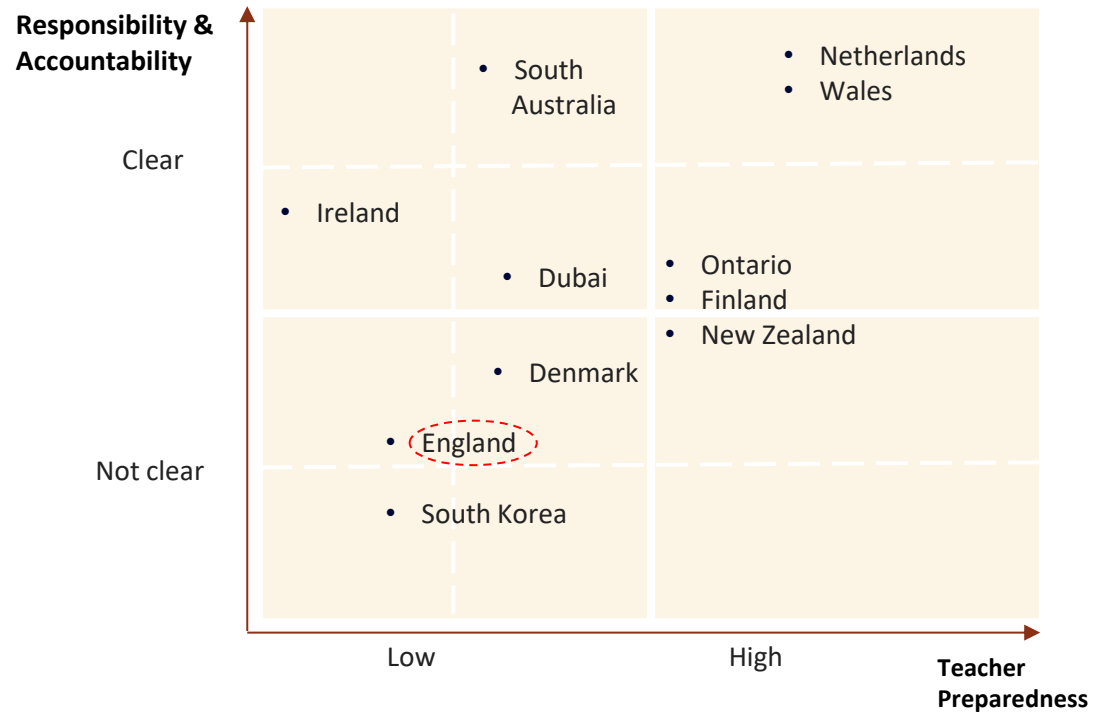
England compares poorly to other jurisdictions, because it has no authoritative measure of CYP wellbeing and because remedial action has not been mandated. All other jurisdictions invest in these areas.



- England does not have a national measurement of CYP wellbeing.
- England has failed to mandate recent corrective policy.
- Ontario, Denmark and Finland offer helpful measurement and policy mandating.
- Singapore, Netherlands and New Zealand do not have disciplined measurement programmes.
- Wales, Finland, Singapore, Netherlands mandate programmes involving curriculum, counselling, training and whole-school activity
- Ireland, Ontario, New Zealand and most recently Denmark's initiatives variously include: school self-evaluation; protected characteristics focus; district/regional plans; early identification and intervention and ten-year planning.

Chart 4: England as an outlier(2): Teacher preparedness, responsibility, accountability

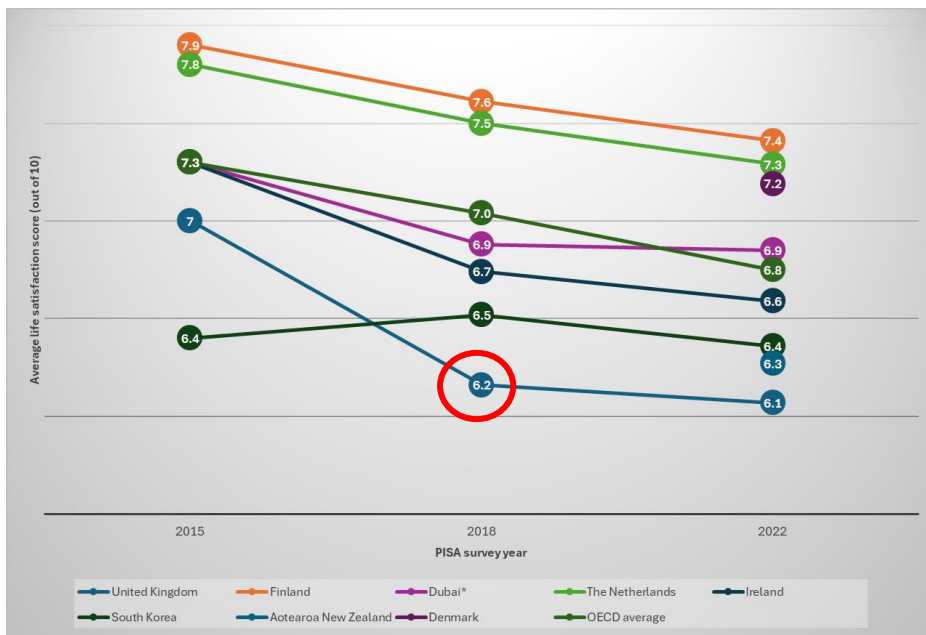
England is also an outlier in the critical areas of teacher preparedness and clarity of responsibility, with other jurisdictions being far ahead in their policies and practice.



- *England sits with South Korea having inadequate teacher training and preparation, with less clear accountability or responsibility.*
- *In some jurisdictions, there are important specialist resources (e.g. Netherlands, Ontario, Wales, Finland)*
- *There is often clear responsibilities (for teachers), but sometimes accountability issues e.g. where there is strong teacher autonomy and poorer measurement (Ontario and Finland)*
- *Several jurisdictions have mandated specialist support for CYP wellbeing, in some cases by designating and training staff with a specific role to play, in others introducing specialist, professional support (Wales, Netherlands and Finland).*

1.1 OECD CYP life satisfaction trends amongst studies jurisdictions

While life satisfaction data shows the UK to be at the bottom of the OECD group, it is not an outlier and England may well fair better than the UK average**. Most notable is the downward trend across all jurisdictions, as other countries worryingly move towards similarly low ratings.



With the exception of S Korea, the rankings reflect relative county rankings of general happiness amongst the population e.g. Finland, Netherlands and Denmark at the top, pointing to much wider societal drivers of satisfaction. This doesn't mean to say there are no other causal factors e.g. child poverty

	OECD lifesat* ranking on this graph (2018)	World Happiness Index (2022)
Finland	1	1
Netherlands	2	5
Denmark	3	2
Ireland	4	13
S Korea	5	59
New Zealand	6	10
UK	7	17

*Note Dubai is not considered a reliable comparison, measuring only private schools.

** Other indicators suggest that life satisfaction in England will be higher than other home nations in the UK

* OECD life satisfaction index for CYP aged 15.

1.2 OECD CYP data across all jurisdictions

Between 2015 and 2022, CYP life satisfaction, as measured by OECD, has decreased across all 70 jurisdictions, (other than Chinese Taipei, S. Korea and Georgia).

The downwards trend in CYP life satisfaction is a constant decline through the three years of 2015, 2018, and 2022.

As a consequence, the poor score for UK life satisfaction in 2015 (6.98) is similar to the current 70 country average of 6.99. In this sense the UK is 7 years ahead of the rest of the OECD countries.

Scores	Life satisfaction (2022)	Life satisfaction (2018)	Life satisfaction (2015)	
Finland	7.41		7.61	7.89
Denmark	7.19	N/A	N/A	
Iceland	6.90		7.34	7.80
Switzerland	7.06		7.38	7.72
Netherlands	7.29		7.50	7.83
Sweden	6.91		7.01	N/A
New Zealand	6.27	N/A	N/A	
Austria	6.69		7.14	7.52
Ireland	6.59		6.74	7.30
Germany	6.51		7.02	7.35
United Kingdom	6.07		6.16	6.98
Czech Republic	6.56		6.91	7.05
France	6.77		7.19	7.63
Slovenia	6.61		6.86	7.17
Costa Rica	7.32		7.96	8.21
United Arab Emirates	6.85		6.88	7.30
Saudi Arabia	7.36		7.95	N/A
Chinese Taipei	6.85		6.52	6.59
Romania	7.53		7.87	N/A
Spain	6.88		7.35	7.42
Uruguay	7.03		7.54	7.70
Italy	6.53		6.91	6.89
Kosovo	7.87		8.30	N/A
Malta	6.24		6.56	N/A
Lithuania	7.14		7.61	7.86
Slovak Republic	7.02		7.22	7.47
Estonia	6.91		7.19	7.50
Panama	7.04		7.92	N/A
Brazil	6.85		7.05	7.59
Guatemala	7.72	N/A	N/A	
Kazakhstan	8.41		8.76	N/A
Cyprus	6.68	N/A	N/A	
Latvia	6.76		7.16	7.37
Serbia	7.48		7.61	N/A
Chile	6.41		7.03	7.37

Scores	Life satisfaction (2022)	Life satisfaction (2018)	Life satisfaction (2015)	
Mexico	7.26		8.11	8.27
Croatia	7.37		7.69	7.90
Poland	6.26		6.74	7.18
El Salvador	7.40	N/A	N/A	
Hungary	7.21		7.12	7.17
Uzbekistan	8.20	N/A	N/A	
Japan	6.76		6.18	6.80
Portugal	7.06		7.13	7.36
Argentina	6.69		7.26	N/A
Greece	6.62		6.99	6.91
Korea	6.36		6.52	6.36
Philippines	6.97		7.21	N/A
Thailand	7.12		7.64	7.71
Moldova	7.01		7.68	N/A
Jamaica	5.83	N/A	N/A	
Colombia	6.96		7.62	7.88
Mongolia	7.20	N/A	N/A	
Dominican Republic	7.44		8.09	8.50
Malaysia	6.63		7.04	N/A
Paraguay	7.32	N/A	N/A	
Peru	6.37		7.31	7.50
Montenegro	7.52		7.69	7.75
Viet Nam	7.35		7.47	N/A
Hong Kong (China)	6.49		6.27	6.48
Bulgaria	7.04		7.15	7.42
Indonesia	7.22		7.47	N/A
Albania	8.01		8.61	N/A
North Macedonia	7.65		8.16	N/A
Baku (Azerbaijan)	6.80		7.24	N/A
Ukrainian region	7.35		8.03	N/A
Morocco	6.76		6.95	N/A
Georgia	7.62		7.60	N/A
Türkiye	4.90		5.62	N/A
Cambodia	7.65	N/A	N/A	
Palestine	7.08	N/A	N/A	
Jordan	6.77		6.88	N/A

1.3 Alternative data sources

The HSBC Health Behaviour survey also show Canada, England and Wales at the lower end of CYP satisfaction range, increasingly joined by Ireland. Notwithstanding this, jurisdictions are statistically closely grouped.

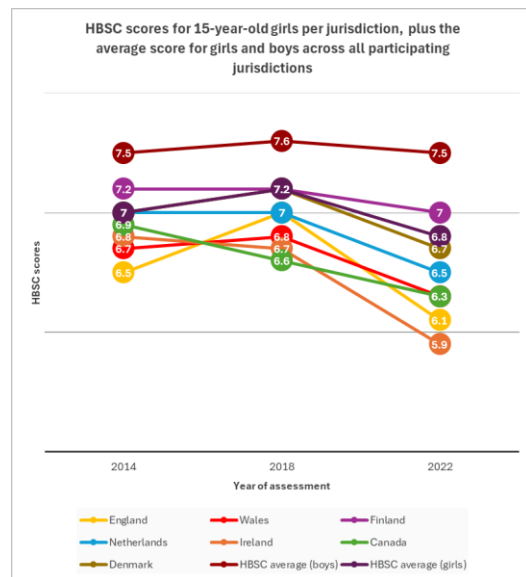
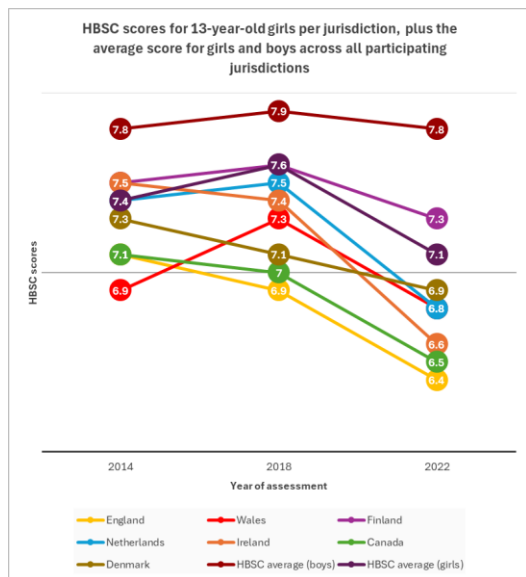
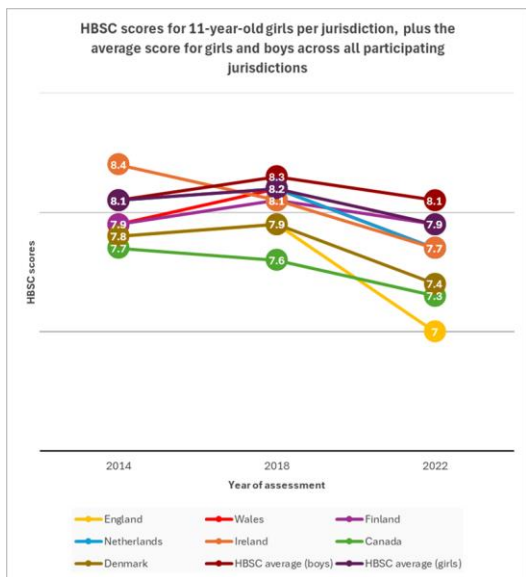
Health Behaviour in School-aged Children (HBSC)

	11 years old						13 years old						15 years old					
	2014		2018		2022		2014		2018		2022		2014		2018		2022	
	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys
England	7.8	7.9	7.9	7.8	7.0	7.7	7.1	7.6	6.9	7.5	6.4	7.4	6.5	7.1	7.0	7.3	6.1	6.9
Wales	7.9	7.8	8.2	8.1	7.7	7.9	6.9	7.5	7.3	7.7	6.8	7.5	6.7	7.2	6.8	7.4	6.3	7
Finland	7.9	8.0	8.1	8.2	7.9	8.4	7.5	7.7	7.6	8.0	7.3	8.1	7.2	7.7	7.2	7.9	7.0	8.0
Netherlands	8.1	8.3	8.2	8.4	7.7	8.2	7.4	7.9	7.5	7.9	6.8	7.6	7.0	7.7	7.0	7.7	6.5	7.3
Ireland	8.4	8.3	8.1	8.2	7.7	7.8	7.5	7.8	7.4	7.6	6.6	7.3	6.8	7.3	6.7	7.1	5.9	6.7
Canada	7.7	7.7	7.6	7.9	7.3	7.8	7.1	7.7	7	7.6	6.5	7.5	6.9	7.5	6.6	7.4	6.3	7.0
Denmark	7.8	8.1	7.9	8.1	7.4	8.1	7.3	7.9	7.1	7.8	6.9	7.8	7.0	7.7	7.2	7.7	6.7	7.5
HBSC average	8.1	8.1	8.2	8.3	7.9	8.1	7.4	7.8	7.6	7.9	7.1	7.8	7.0	7.5	7.2	7.6	6.8	7.5

The table shows mean life satisfaction recorded in 7 jurisdictions, by the HBSC survey – a widespread survey investigating many facets of wellbeing across Europe and North America that was initiated in 1982. Data are collected through schools, to ensure methodological and age-group consistency. (Please note that the whole of Canada is represented here rather than solely Ontario).

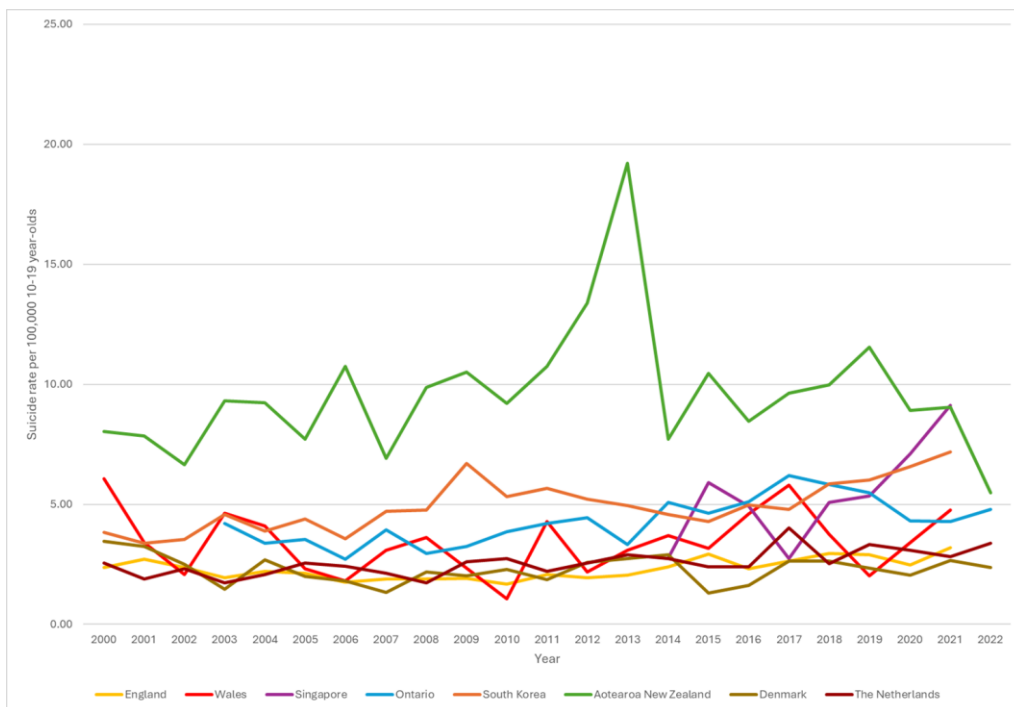
1.4 HSBC data trends

There is a universal decline in CYP satisfaction as young people progress in age from 11 to 18, plus a noticeable decline for all CYP between 2018 and 2022. As elsewhere, the relative position of “Girls” versus “Boys” is materially worse. These trends do not provide direct evidence but again beg the question as to whether there is a singular cause.



1.5 Suicide rates

Suicide rates amongst CYP are more widely comparable. They show that England sits in the more favourable group with the Netherlands and Denmark. Welsh rates are materially higher than England.



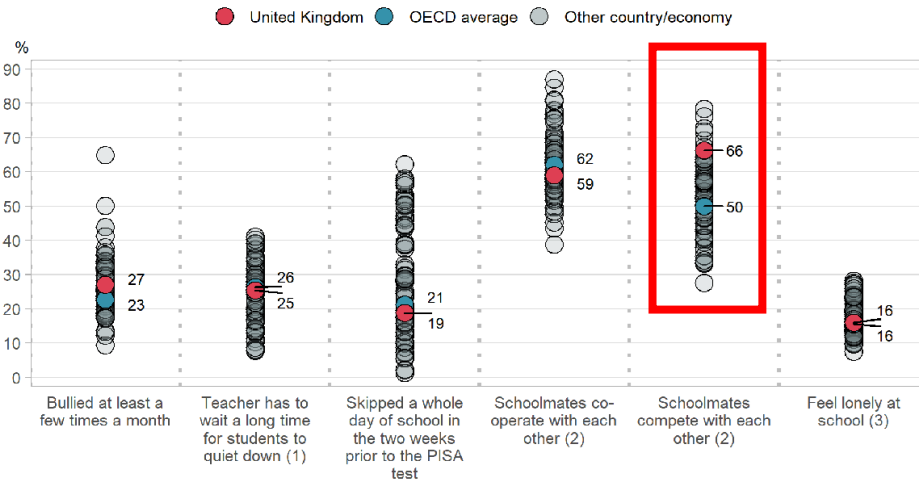
Again, the data highlights that there is a downward trend across all jurisdictions, with the last decade seeing around 25% more suicides per capita than the previous period.

Age 10 to 19, suicides per 100,000: increase in last decade				
	Average suicide rate 2000-22	Average suicide rate 2000-10	Average suicide rate 2011-22	% increase
England	2.3	2.1	2.5	↑ 22%
Wales	3.4	3.1	3.7	↑ 18%
Singapore	5.4	Data not available	5.4	
Ontario	4.3	3.5	4.8	↑ 38%
South Korea	4.9	4.4	5.5	↑ 23%
New Zealand	9.6	8.7	10.4	↑ 19%
Denmark	2.3	2.3	2.3	↑ 2%
Netherlands	2.6	2.2	2.9	↑ 27%

1.6 UK country note PISA 2018

The UK's relatively low position for CYP life satisfaction will be driven by many factors. For school climate, the greatest variant with OECD norms is the extent to which children feel they are competing or being compared with each other. However, the impact of this competition is not clear.

Figure 5. School climate



A closer look at the 2018 PISA data shows that while the UK overall life satisfaction is relatively low, the 93% of (15 year old) students reporting “sometimes or always feeling happy” is relatively high. The greatest disparity between the UK and OECD is the extent to which students feel they are competing with each other (red box below).

Layard (2003), Ejrnaes and Greve (2016) conclude that individual's relative ranking has a significant effect on overall happiness so this might be in issue particular to the UK/England.

In the United Kingdom, 59% of students reported that their schoolmates co-operate with each other (OECD average: 62%) and 66% reported that they compete with each other (OECD average: 50%).

In the United Kingdom, 53% of students (OECD average: 67%) reported that they are satisfied with their lives (students who reported between 7 and 10 on the 10-point life-satisfaction scale).

Some 93% of students in the United Kingdom reported sometimes or always feeling happy and about 9% of students reported always feeling sad.

Source: OECD, PISA 2018 UK country report

Note: Only countries and economies with available data are shown. (1) In every or most language-of-instruction lessons; (2) Very or extremely true; (3) Agreed or strongly agreed.

Source: OECD, PISA 2018 Database, Tables III.B1.2.1, III.B1.3.1, III.B1.4.1, III.B1.8.1, III.B1.8.2 and III.B1.9.1

1.7 Data: questions for England and #BeeWell

1. What accounts for the declining rates of CYP wellbeing across all jurisdictions, particularly in the last decade and pre-covid?
2. Is it right to exclude the consideration of smart phones and social media. Are increases in anxiety, notable concerns about appearance and the relatively worse measures for female CYP all related to the use of mobile phones?
3. Should an estimate be made for England CYP life satisfaction given potential distortion from other home nations?
4. Do suicide rates provide a more consistent comparison between jurisdictions and do these suggest that UK CYP is relatively “better” than we believe from OECD data?
5. How is the OECD’s UK data reconciled, i.e. between high happiness (93%) and low overall life satisfaction (53%)? Could it be due to the amount of competition between students in the UK?*

* Note, 2019 legislation in Singapore requires that parents and CYP are no longer aware of their ranking within class. This is still provided in some English schools, along with setting, streaming and an awareness of normative assessment.

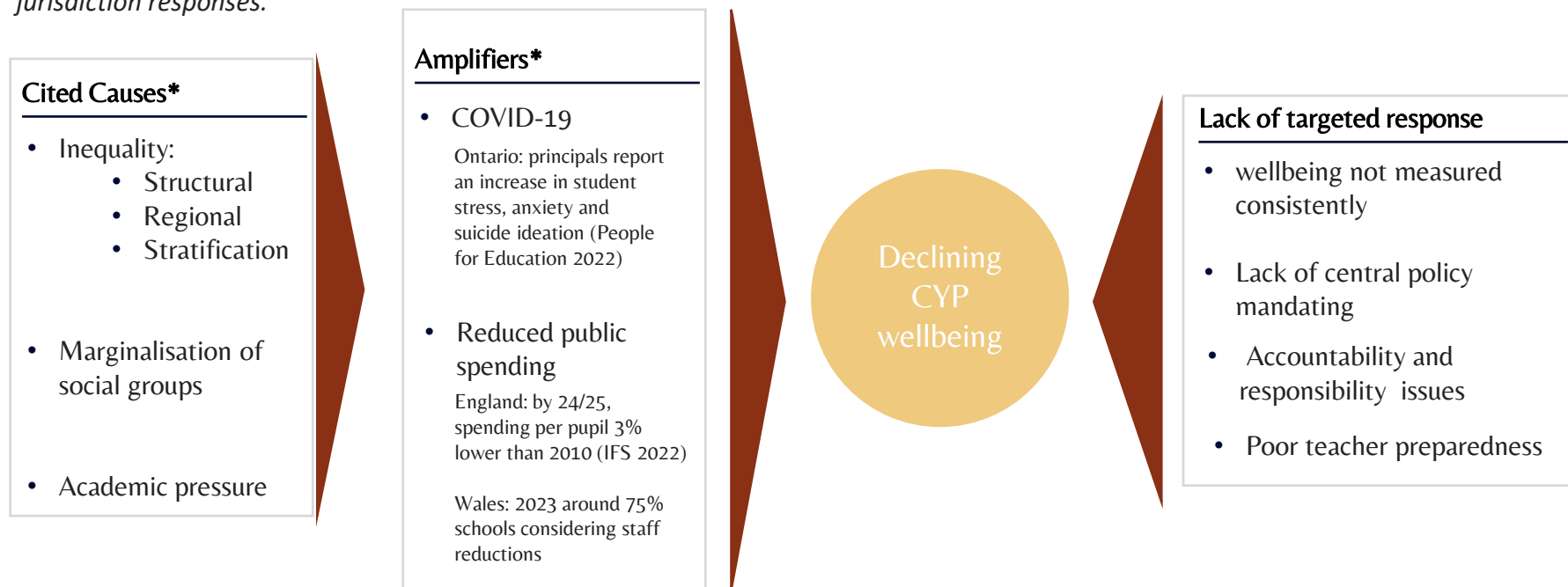
2.1 CYP wellbeing – Cited Causes

The array of factors contributing to poor wellbeing differ by jurisdiction. They include academic pressure, but also structural inequality, regional and class differences and the marginalisation of certain groups. Only one of these is determined by the educational setting.

Cited Causes	Jurisdiction	Detail
<ul style="list-style-type: none"> Structural inequality 	<ul style="list-style-type: none"> Dubai South Australia Netherlands 	<ul style="list-style-type: none"> Attainment gap between disadvantaged and advantaged high (ASA) SA residents second lowest incomes in Australia (ABS 2022) Lower paid jobs requiring long working hours (Vaessen 2021)
<ul style="list-style-type: none"> Regional and class stratification 	<ul style="list-style-type: none"> Singapore South Korea Wales 	<ul style="list-style-type: none"> Opportunities not allocated between elite and neighbourhood schools (Zhanng 2021) Less hope of social mobility because of class stratification (Kim 2021) 1 in 3 people live in rural areas with poor access to support (Mentally Healthy Schools, A.D)
<ul style="list-style-type: none"> Marginalisation of social groups 	<ul style="list-style-type: none"> Finland Ireland South Australia Denmark 	<ul style="list-style-type: none"> Sámi poorly represented (Keskitaco 2012) 76% of LBGTQIA+ feel unsafe (Belong To 2022) Catering for the needs of Ukrainian refugees (Eurydice 2023) Low life satisfaction amongst aboriginal groups (UNESCO 2022) Increased immigration challenges equal provision (Frones 2020)
<ul style="list-style-type: none"> Academic pressure 	<ul style="list-style-type: none"> Singapore South Korea 	<ul style="list-style-type: none"> 70% of children in additional tuition (Dape 2015) 50% of 13-18 year olds say school is largest source of stress (Social Survey 2022)

2.2 CYP wellbeing – causes and amplifiers

Many jurisdictions cite the effects of Covid and the continued pressure that this places on schools as a cause of CYP life satisfaction decline. Reductions in public spending appear to further contribute to the CYP wellbeing issues. Weaknesses can be identified in jurisdiction responses.



* Other commonly quoted causes include employment prospects, housing, community and social interaction, family structures, climate change, bullying, smart phones and social media

* Note, mobile phones and social media not included in this study

2.3 CYP wellbeing – Inadequate Policy Responses

The common elements to a policy response, to a greater and lesser extent are 1. Measurement 2. Central policy mandating 3. Clear accountability and responsibility 4. Good teacher preparedness and assistance. The review suggests that establishing accountability, responsibility and preparing teachers provide the greatest challenges.

Poor Policy Response	Jurisdiction	Detail
<ul style="list-style-type: none"> Wellbeing not measured consistently 	<ul style="list-style-type: none"> England Other 	<ul style="list-style-type: none"> BeeWell and OxWell but no universal school based measure Also, some measurement issues in New Zealand, Ireland, Singapore and Dubai
<ul style="list-style-type: none"> Lack of central policy mandating 	<ul style="list-style-type: none"> England South Korea 	<ul style="list-style-type: none"> 2015 whole school mental health and wellbeing but not mandated (DofH) 2017 Green Paper and follow up – not mandated 2018, however Personal Development was made a Key OFSTED judgement in 2019 (see appendix) No true evidence of mental health policy
<ul style="list-style-type: none"> Accountability and responsibility 	<ul style="list-style-type: none"> Finland New Zealand 	<ul style="list-style-type: none"> Flexibility and autonomy important but lacking monitoring and outcome measurement (Vainikainen 2017) High volume of guidance but concerns about implementation
<ul style="list-style-type: none"> Poor teacher preparedness 	<ul style="list-style-type: none"> South Australia Denmark Ontario 	<ul style="list-style-type: none"> Strategies set as “visions” with unclear steps for staff to follow School staff in Denmark felt that they lacked the resources, training, and formal procedures to deal with the migration-related wellbeing issues of their students (Mock-Muñoz De Luna et al., 2020). Insufficient mental health and wellbeing support for staff and students (People for Education 2022)

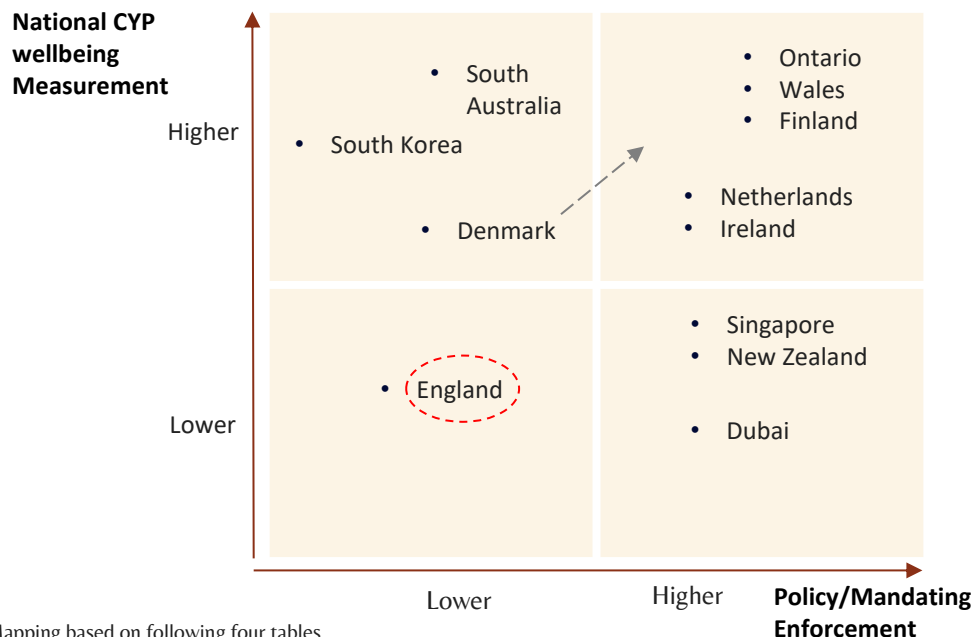
2.4 Complexity: questions for England and #BeeWell

1. Is it possible to understand how much of CYP life satisfaction is determined by a) school factors (e.g. bullying, environment, student competition) versus b) structural factors (e.g. inequality, job prospects, regional disparities, group marginalisation) and versus c) cultural factors (e.g. attitude to equity, welfare, community and society etc)?*
2. How far might the factors determining life satisfaction in the general population determine CYP wellbeing and satisfaction?
3. How far does absolute and relative disadvantage correlate to low wellbeing scores?
4. What are the demographic groups over-represented amongst those with lower wellbeing?
5. Do regional disparities in income, environment, employment (etc) relate to wellbeing scores?
6. How do CYP feel about life opportunities? Is this an important variable?
7. What are students' attitude to exam pressure?
8. Note: The Banwell and Humphrey report also looked at activity sometimes associated with wellbeing such as sport and extra-curricula activity but no reliable conclusions could be drawn.

Note: there are reputable studies showing what proportion of variation in life satisfaction / MH is accounted for by school factors:
-A study of over 23,000 primary school aged children in England found that school only explains between 3 and 4.5 per cent of the variation in mental health outcomes (Patalay et al 2020).
-A study of over 26,000 11- to 14-year-olds found that school effects only accounted for 2.4 per cent of the variation in psychopathology, 1.6 per cent of depression, and 1.4 per cent of wellbeing (Ford et al 2021).

3.1 Measurement and policy mandating: jurisdiction mapping*

England is an outlier with respect to CYP wellbeing measurement and mandated policy. The majority of jurisdictions provide for regular, national measurement and policy is mandated or “enforced”. For a small number of countries, measure of CYP wellbeing is adequate but legislation appears imprecise.



- *England does not have a national measurement of CYP wellbeing.*
- *England has failed to mandate recent policy but has included Personal Development in OFSTED Key Judgements*
- *Relatively, Ontario, Denmark, Wales and Finland offer best measurement and policy mandating.*
- *Singapore and New Zealand do not have national, large scale measurement programmes.*
- *Most jurisdictions have strong legislative programmes, but South Australia does not have dedicated wellbeing policies and South Korea appears to lack relevant remedial policy.*

* Mapping based on following four tables

3.2 Examples and relative extent of CYP wellbeing measurement

The vast majority of jurisdictions have large-scale, universal measurement programmes. England's are local, regional and largely unrelated

Jurisdiction	Extent	wellbeing measurement
England	Lower	Many exist, but none universal or compulsory. This makes comparison challenging.
Wales	Higher	Student Health and wellbeing Survey provided to all secondary schools in Wales from 2017.
Finland	Higher	School Health Promotion Study - not compulsory, but a high percentage of students complete it.
Singapore	Medium	Many exist, but none universal or compulsory. This makes comparison challenging.
South Australia	Higher	All primary and secondary schools in SA are invited to complete the wellbeing and engagement collection (WEC), which claims to be the world's largest population monitoring system of CYP wellbeing, but engagement is not compulsory.
Dubai	Lower	No long-term measure. The most specific measure was part of a five-year project which ended in 2021.
The Netherlands	Medium	Unclear whether measures are provided to every school. Information on completion rates is not readily available.
Ireland	Medium	Large-scale surveys do exist, including LGBTQI+ surveys. However, these are not mandated.
Ontario	Higher	Large-scale surveys exist within Ontario
South Korea	Medium	Large-scale surveys exist, most notably the The Korea Youth Risk Behaviour Web-based Survey (KYRBS).
Aotearoa New Zealand	Medium	Surveys exist, but these do not appear to be large-scale.
Denmark	Higher	Large-scale surveys exist within Denmark.

- *Relatively, Ontario, Denmark and Finland offer the most comprehensive measurements of CYP wellbeing.*
- *Netherlands and New Zealand do not have disciplined measurement programmes.*
- *Dubai discontinued its survey in 2021 and Singapore's is not universal.*

3.3 Examples of strong national measurement and surveys

There are a wide range of national measurement systems in existence which could be used to inform a national survey in England

Example	Juris'	Detail
Long-term national survey	Finland	<i>School Health Promotion Study</i> : Carried out every two years, between March and April, since 1996, to track the health and wellbeing of CYP age up to 21 within the educational system. Questions relating to loneliness, life satisfaction, school, family, bullying, anxiety, and physical health are included.
Insight for proactive response	South Australia	<i>wellbeing and engagement collection by South Australia's Department for Education</i> : Started surveying school students aged 8-18 in SA on their health and wellbeing in 2014. Claims to be the world's largest and is conducted in SA as an annual census (Gregory et al., 2022). It monitors four wellbeing domains, and "gives schools, the community and government an insight into what needs to occur to ensure students experience success and are provided with resources and opportunities to reach their full potential".
School and regional comparison	Netherlands	<i>The Annual Youth Monitor</i> : Introduced in 2007, this measure collects data from 0-25-year-olds on factors such as health, alcohol use, crime involvement, and wellbeing. It allows for comparison by school or region and is used to highlight relevant issues for certain age groups.
Random selection for survey	Ireland	<i>"My World" and "My World 2" Surveys</i> : This survey, for 12-25-year-olds, is Ireland's largest and most comprehensive young people's mental health and wellbeing survey. Participants are randomly selected from schools and universities, and all school years are represented.
Every two years	Ontario	<i>The Ontario Student Drug Use and Health Survey</i> : This Ontario-wide survey, provided to students from grades 7 to 12 (age 12-18 years old), includes questions on mental health and a range of other wellbeing indicators. It has been conducted every two years since 1977.
Representative	South Korea	<i>The Korea Youth Risk Behaviour Web-based Survey</i> : This nationally representative study, established in 2005, looks at health risk behaviours of middle and high school students (12-18 years old) in South Korea.
"wellbeing" survey	Denmark	<i>The Danish Student wellbeing Survey by the Ministry of Education</i> : Initiated by the Danish Ministry of Education in 2014, with the purpose of annually monitoring the wellbeing of Danish school students, amend practices as necessary, and to inform wider educational policy from grades 4 to 9 (ages 10-16).

3.4 Examples and relative extent of wellbeing policy and mandating (1)

Wales, Finland, Singapore, Netherlands mandate programmes involving curriculum, counselling, training and whole-school activity

Jurisdiction	Extent	Do education-specific mental health/wellbeing policies exist?	Mandated?
England	Lower	Green Paper (DHSC and DfE 2017): school-wide Mental Health approach piloted and not rolled out; implementation of mental health leads still in practice but low budgets (see Appendix). Health (mental and physical) curriculum (DfE, 2019). Introduced but flexibility on content.	No Discretionary
Wales	Higher	Counselling service in schools. 2013 Health (mental and physical) curriculum by 2026 Framework for whole-school MH/wellbeing.	Yes Yes Yes
Finland	Higher	A number of wellbeing and wellbeing-adjacent policies were enacted in 2016, including a Student Success team in every secondary school. Entitled to free wellbeing support in school. There must be a welfare team in school.	Yes Yes
Singapore	Higher	Changes made in 2018 to reduce emphasis on academic outcomes, and towards holistic development. Singapore's Character and Citizenship Education curriculum was updated, to include strengthening of wellbeing and developing of mental health literacy.	Yes Yes
South Australia	Medium	Schools and CYP mental health are mentioned in many policies (e.g. Government of South Australia, 2020), but few dedicated The 2019-2029 Aboriginal Education Strategy (Government of South Australia, 2019) was designed to ensure that Aboriginal CYP in SA have the best possible educational outcomes.	Unclear Yes
Dubai	Medium	In 2017, a curriculum that included wellbeing was rolled out, as part of a wider national agenda for happiness that was adopted by the UAE in 2016 (UAE Government, 2022).	Unclear
The Netherlands	Higher	Teaching and learning methods for enhancing mental health and wellbeing are part of daily life in school. Health literacy and action competence are integral to school policy. Referral systems for mental health concerns are in place.	Yes

3.5 Examples and relative extent of wellbeing policy and mandating (2)

Ireland, Ontario, New Zealand and most recently Denmark's initiatives include, school self-evaluation, protected characteristics focus; district/regional plans, early identification and implementation, ten-year planning

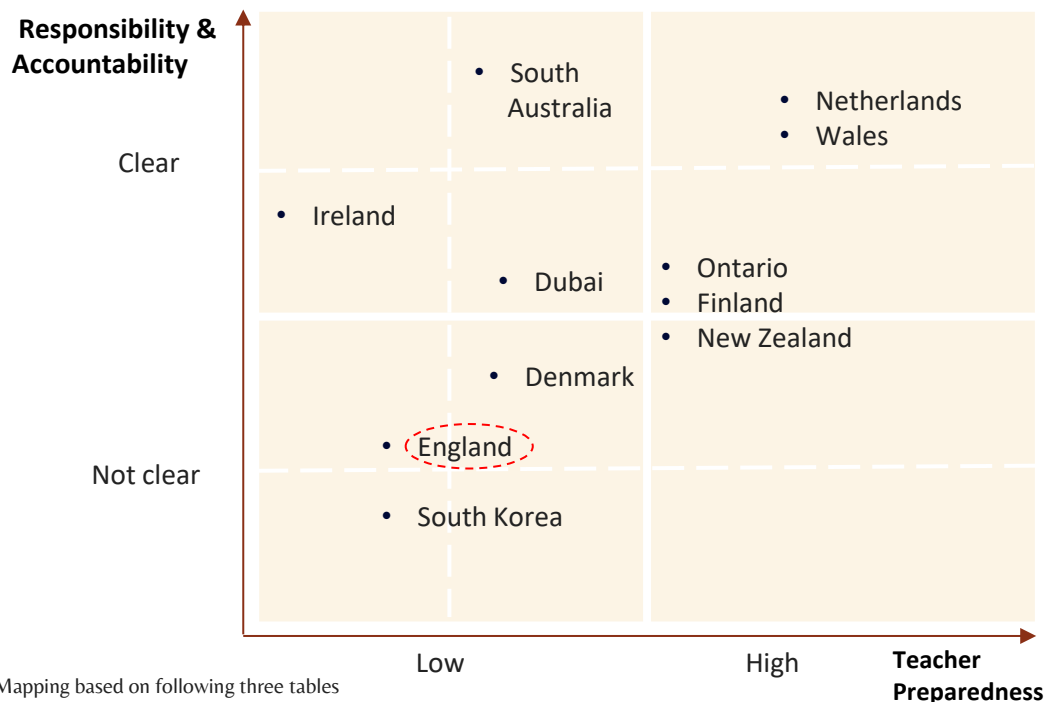
Jurisdiction	Extent	Do education-specific mental health/wellbeing policies exist?	Mandated?
Ireland	High	<p>"LGBTI+ National Youth Strategy" (2018), to ensure unique mental and physical health needs are listened to and met</p> <p>"By 2023, the promotion of wellbeing will be a core ethos of every school, and all schools will be required to implement a self-evaluation to evaluate current practice relating to wellbeing".</p> <p>New curriculum in 2023 - A greater emphasis on wellbeing as a core area of learning.</p>	<p>No</p> <p>Yes</p> <p>Yes</p>
Ontario	High	<p>A number of wellbeing and wellbeing-adjacent policies were enacted in 2016, including a Student Success team in every secondary school.</p> <p>Alongside these requirements, school districts develop their own mental health strategies.</p> <p>A 2022 to 2025 COVID-19 response strategy developed, that includes early identification, mental health literacy and stigma reduction, and intensive supports for those who need it (School Mental Health Ontario, 2022).</p>	<p>Yes</p> <p>Discretionary</p>
South Korea	Low	<p>Neither wellbeing, nor mental health, are explicitly referred to in South Korea's education act. In 2023, mental health literacy was not yet a part of the school curriculum in South Korea.</p>	No
Aotearoa New Zealand	High	<p>A Child and Youth wellbeing Strategy was developed in 2019. Its vision is that "Aotearoa New Zealand is the best place in the world for children and young people" (Child and Youth wellbeing, 2019).</p> <p>Many other mentions of CYP wellbeing made in previous years, however information is disjointed, and progression of policy is difficult to follow.</p>	Yes
Denmark	Mid	<p>A ten-year forward plan for mental health in Denmark was devised in 2022, based on the tenet that mental health promotion in schools is not strong enough, and an action plan for this, in relation to early intervention, will be implemented in the coming decade (Danish Health Authority, 2022).</p>	No

3.5 Measurement and policy: questions for England and #BeeWell

1. The Banwell and Humphrey report provides many examples of long-standing, national, school based, CYP measurements. Could an augmented study of wellbeing measurement approaches provide a template for England?
2. Would it make sense to consider existing long-running national (non-mandated) wellbeing surveys that exist in England, to help with longitudinal benchmarking and to use something that is tried and tested in this context (eg the Children's Society's Good Childhood survey)
3. Could Wales provide some learning opportunities?
4. In England, what has the success been of the 2019 proposals for curriculum, given they were not prescriptive?
5. Could a deeper study of jurisdiction corrective programmes reveal best practice and provide a template for England?

4.1 Teacher preparedness and responsibility: jurisdiction mapping*

To respond to increasing CYP wellbeing needs in the school setting, critical success factors appear to be teacher preparedness together with clear responsibility and accountability. Again, England is an outlier with lack of teacher preparedness and confused accountability.



- England sits closer to South Korea, having less teacher training and preparation and unclear accountability and responsibility.
- In most jurisdictions there appears to be inadequate training, but in some jurisdictions, there is important specialist resources (e.g. Netherlands, Ontario, Finland, Wales)
- There is often clear responsibilities (for teachers), but sometimes accountability issues e.g. where there is strong teacher autonomy and/or poorer measurement (Finland and Ontario).

* Mapping based on following three tables

4.2 Examples poor v good teacher preparedness

Teacher training and clear priorities are unsurprisingly high priorities in most jurisdictions, but more commonly there are complaints of poor support and lack of clarity on expectations etc.

Jurisdiction	Teacher preparedness (relative ranking)		
	Extent	Positive	Negative
England	Lower	Senior Mental Health Team Leads proposed but relatively low funding	Less than 18% of schools agreed that sufficient guidance had been provided for them to deliver health curriculum (Department for Education, 2019).
Wales	Higher	47% of schools reported communication with a dedicated Implementation Coordinator to support the development of their approach. Of these, 75% reported being 'Quite' or 'Very satisfied' with the support quality (Welsh Government, 2023).	Existing pressures, such as time, may impact implementation (Brown, 2023). Expectations should be made clear, in an accessible format, and from a range of experts. This should also be available in the Welsh language (Welsh Government, 2021).
Finland	Mid	Teachers regarded mental health promotion as a key priority, and showed high levels of care and compassion for their pupils' wellbeing,	They felt poorly supported in meeting their worsening needs (Onnela et al., 2021).
Singapore	Mid	A number of government responses suggest that teachers receive mental health training, and that they appreciate this (Ministry of Education Singapore, 2021, 2022).	Corresponding qualitative evidence does not exist.
South Australia	Mid	Most strategies and policies examined refer to either training, or close working with school staff to deliver implementation.	Qualitative Australia-wide research suggests that training on how to improve mental health literacy was lacking (Marinucci et al., 2023). Additionally, in South Australia, teachers reported feeling unprepared to deal with the mental health concerns of their students, especially in the context of the COVID-19 pandemic. They felt that in doing so, they were working in a role that they were not trained in (Windle et al., 2022).
Dubai	Mid	Analysis within a policy paper by Marquez (2022) found that support from teachers was integral to student wellbeing.	To [assist student wellbeing] it acknowledged that teachers must be provided with appropriate resources, such as time, training, and personal wellbeing promotion - Dubai's teachers were 10% more likely to report high stress levels than OECD average (Marquez, 2022).

4.3 Examples poor v good teacher preparedness

More successful approaches appear to include “whole school” initiatives, general training and specifically trained staff, but competing priorities and rising demand for assistance has generally contributed across jurisdictions to a response that disappoints those involved.

Jurisdiction	Teacher preparedness (relative ranking)		
	Extent	Positive	Negative
The Netherlands	Higher	Whilst teachers are not usually involved with, or trained directly for, the identification of mental health concerns, nearly all schools have specifically-trained staff to fulfil this role. Whole-school training, was nevertheless recognised as important. (Jaspers-van der Maten et al., 2023)	
Ireland	Lower	Nohilly & Tynan (2022) noted that guidelines, such as those relating to a whole-school approach to mental health promotion, were provided to all schools.	Despite extensive policy relating to LGBTQI+ youth in schools, in 2022, 58% of these young people reported having heard a homophobic remark from a school staff member (Belong To, 2022). Nohilly and Tynan also noted that, no emphasis of [Mental Health] importance, nor information on how continued professional development can enhance this, were provided.
Ontario	Mid	A number of wellbeing and wellbeing-adjacent policies were enacted in 2016, including a Student Success team in every secondary school.	People for Education (2022, 2023) reported that "schools are not sufficiently supported to help students who are continuing to struggle with the aftereffects of the pandemic". 46% of schools had no access to specialist staff, with both teaching and support staff experiencing burnout (People for Education, 2023). These issues are all said to be a continued effect of the COVID-19 pandemic.
South Korea	Lower	In 2015, it became mandatory for schools to produce a suicide report within one week of a death (Liu, 2020).	Analysis of such reports found that most of the time, teachers had not recognised any warning signs prior to the suicide. This suggests a clear need for identification training in school staff (Lee et al., 2022).
Aotearoa New Zealand	Mid	School staff in a recent study by Thabrew et al. (2023) were enthusiastic about new changes.	They felt under-supported and over-stretched, particularly in terms of time. The authors suggest that there is room for improvement in how changes are implemented, and in how support is given to schools during implementation.
Denmark	Lower		The emphasis given to mental health is often small, and is prioritised differently by each school depending on how prepared staff feel to teach this. In addition, staff felt that they lacked the resources, training, and formal procedures to deal with the migration-related wellbeing issues of their students (Mock-Muñoz De Luna et al., 2020).

4.4. Examples of specific resource and roles

Several jurisdictions have mandated specialist support for CYP wellbeing, in some cases by designating and training staff with a specific role to play, in others introducing specialist, professional support (Wales, Netherlands and Finland). England embarked on this route but has not followed through.

Example	Jurisdiction	Detail
In school counselling service	Wales	From 2013, local authorities were mandated to provide a counselling service, for Years 6-11, which operates independently to, yet on site of, each secondary school in Wales.
On site social workers and psychologists	Finland	In 2022, a new law was enforced meaning that schools must have one social worker per 670 pupils, and one school psychologist per 780 pupils (Onnela et al., 2021).
“Trusted individuals” required	Netherlands	It is required by national policy (Schools for Health in Europe Network Foundation, 2020) that “Trusted individuals” are available and known in schools, so that students can share their concerns. Support services and accommodations are in place for those with special learning, developmental, and physical needs. If these needs exceed the scope of the school’s expertise, a system for identification and referral is in place.
Student Success team	Ontario	The Student Achievement and School Board Governance Act Bill 177 (2009). There must be a Student Success team in every secondary school, to work closely with “at-risk” students.
In School MH teams	England	2017 Green Paper and consultation provided for Mental Health Support Teams (MHSTs) and Senior Mental Health Team Leads, but either not continued or properly funded (See Appendix)

4.4 Teacher preparedness, responsibility, accountability: questions

1. The 2017 Green paper and consultation (see appendix) provided for cooperation between the DHSC, NHS and DfE. However, proposals were not rolled out seemingly because of budget constraints on the DHSC/NHS side and also because of concerns around more accountability and responsibility on the school side (related to existing responsibilities for Behaviour and Bullying; Equalities Act; Safeguarding; SEND). The international comparative confirms that the original programme echoes what is regarded as good practice elsewhere and suggests that the relevance of the initiative should be re-examined
2. Given MAT secondary school autonomy, could some of the above initiatives be introduced at the MAT level, in cooperation with DHSC and NHS?
3. Should #BeeWell make a case to the Treasury for greater CYP mental health services, using a cost-benefit analysis that costs out the desired teacher training and specialist resource provision and compares this to the benefit of averting future cost of mental health issues, increasing unemployment and financial support?
4. If the varying causes of CYP mental illness are properly understood, could we be more prescriptive about the boundaries of teacher responsibility and thereby create more realistic expectations and training requirements?
5. Alternatively, should the cross-departmental development of mental health support services be joined, in some way, with the current thinking on schools as the “centre of the community” (e.g. Oasis and Reach MATs, Right to Succeed etc)

Appendices

Appendix: List of Jurisdictions

- England
- Wales
- Finland
- Singapore
- South Australia, Australia
- Dubai, United Arab Emirates
- The Netherlands
- Ireland
- Ontario, Canada
- South Korea
- Aotearoa New Zealand
- Denmark

Appendix: Areas of Study

Areas of study

For each jurisdiction, reference information in the last c.10 years

- A. Is there a measure for CYP wellbeing? If so, how is it measured, what are the recorded levels of wellbeing and can a trend be ascertained for the last 10 years of data? (See Gregson Family Trust appendix 12 - August 2019)
 - i. Is there a measure that particularly relates to wellbeing in school?
 - ii. Are there other measures of wellbeing (general or relating to school) e.g. anxiety levels, life satisfaction?
 - iii. Are there measured proxies for wellbeing e.g. number of children dropping out of compulsory education; mental health referrals; suicide rates.
 - iv. To what extent are the most popular measures of wellbeing used for assessment, monitoring and for informing provision?

- B. What approaches are being taken by policy makers (in education) to respond to any CYP wellbeing issues?
 - i. What are the responsibilities of the nursery/school/college re CYP wellbeing?
 - a. Are schools expected to take on a major role in addressing wellbeing (versus other areas such as home life, anti-poverty measures, social services intervention etc)
 - b. Are there explicit programmes to work with parents and carers?
 - c. Has this changed over the last 10 years?
 - ii. Are the nurseries/schools/colleges required to work with local health and social services?

- C. What are the characteristics of the school system that might relate to CYP wellbeing, using the current English system as the benchmark:
 - i. Across key measures such as literacy and numeracy, basic skills, and sport participation create a comparison table using OECD and WHO data (see Gregson Family Trust August 2019 paper appendices)

DHSC, NHS England and DfE mental health related initiatives from 2017 to 2023

The 2017 Green Paper proposed Mental Health Support Teams in education settings and reduced waiting times. By 2022 there were only 14 pilot sites whose output seemed to be defining waiting time measures. Training budgets of £1,250, to establish Senior Mental Health Leads are available to eligible schools. In January 2023, the government's all-age 10-year mental health and wellbeing plan was scrapped and merged with a "Major Conditions Strategy", to combine mental health with other chronic conditions (Banwell).

In 2017, the Government published its [Green Paper for Transforming children and young people's mental health](#), which detailed proposals for expanding access to mental health care for children and young people, building on the national [NHS transformation programme](#) which was already underway.

The proposals were focused on providing additional support through schools and colleges and reducing waiting times for treatment. Following a 13-week public consultation, during which the Government received more than 2,700 responses, the Department of Health and Social Care and the Department for Education published its [Response to the Children and Young People's Mental Health Green Paper Consultation](#).

These core commitments are delivered through a joint and collaborative programme led by the Department of Health and Social Care, Department for Education and NHS England, with support from Health Education England and Public Health England and the Office for Health Improvement and Disparities.

Supported by these partners, NHS England is leading the delivery of two of the programme's main commitments:

- Establishing [Mental Health Support Teams \(MHSTs\)](#) in education settings, jointly delivered with the Department for Education. As part of the MHST workforce structure, new roles called [Educational Mental Health Practitioners](#) have been created and are being trained in evidence-based interventions. The teams will act as a link with local children and young people's mental health (CYPMH) services and be supervised by NHS staff;
- Between 2018- 2022, NHS England funded 14 pilot sites. Pilot sites worked with NHS England to build consensus on the approach to defining and measuring waiting times. The piloting phase concluded in March 2022 and the work of pilots informed the definition of the waiting time metric that was outlined in the [Clinical Review of Standards consultation feedback](#). NHS England will continue to support systems to transform to improve access, outcomes and experience. The programme's other commitments include the training of [Senior Mental Health Leads](#) in schools and colleges, and good progress has been made on the commitment to offer senior mental health lead training to all eligible state-funded schools and colleges in England by 2025.

In March 2021, the government announced [£79 million to boost mental health support](#) for children and young people in England. The new funding was part of the £500 million already announced for mental health support during the 2020 Spending Review. Over the course of 2021/22, it will be used to expand the support available to children and young people, including increasing the number of MHSTs in schools and colleges and improving access and reducing waiting times for community mental health support (Source: NHS England 2024)

2019 OFSTED Key Judgement: Personal Development

In 2019 OFSTED introduced personal development as its third Key Judgement. To encourage schools to build young people's resilience and confidence in later life. Whilst it relates to areas that can positively impact mental health, it does not directly focus on this area.

The areas of personal development that Ofsted are particularly looking for include the following:

- developing responsible, respectful and active citizens
- promoting equality of opportunity
- promoting an inclusive environment
- developing pupils' **character**, giving them qualities they need to flourish in society
- developing pupils' **confidence** and **resilience** so that they can keep themselves mentally healthy
- preparing pupils for the next phase of education

Measurement and policy mandating is widespread but execution variable

	Do education specific wellbeing policies exist?	Are people accountable to policy?	Are Teachers adequately prepared?	Is wellbeing adequately measured?	Is there adequate response?
England	✓ But not mandated	✗ Not mandated	✗ Around 18% approve	✗ Not universal	✗ Not evident
Wales	✓ <ul style="list-style-type: none"> Counselling Curriculum Whole school 	✓ <ul style="list-style-type: none"> Mandated Accountable Influences funds 	✓ 75% satisfied	✓ Student Health and wellbeing Survey (2017/19/21)	✓ Priority activity
Finland	✓ Mandatory school psychologists, social workers, etc.	✓ Enforced leg 2014 & 2022	✗ Feel poorly supported vs increased needs	✓ School healthy promotion study	= Strong policies, but not monitored
Singapore	✓ 2018 > pressure curriculum changes	✓ Mandatory 2019 Mandatory 2021	? Policy suggests yes but not verified	= Many exist but not universal	✗ Societal reluctance to down grade focus on academic
South Australia	✓ Many policies 2019 Aboriginal	? Implementation questions	✗ Teachers feel unprepared	✓ Good WEC survey	= wellbeing focus less clear
Dubai	✓ 2017 Curriculum	? School requirements unclear	✗ High stress amongst teachers	✗ Ended 2021	= Progress but not adequate
The Netherlands	✓ Integral to school policy	✓ Required	✓ Specific staff and whole school	? Unclear	= Worsening mental health and wellbeing outcomes
Ireland	✓ Policy, evaluation, curriculum all strong	✓ / ✗ Mixed, not all policy inclusive	✗ Attitudinal issues and inadequate time	✓ Large scale surveys	= Progress made, but still gaps
Ontario	✓ 2016 + Covid response strategy	? Mandated but high autonomy re implementation	✗ Issues re specialist and general support	✓ Large scale surveys	= Ongoing systematic issues
South Korea	✗ Not explicitly referred to	✗ Not applicable	✗ Poor anticipation of suicides	✓ Large scale surveys	✗ Generally lacking
New Zealand	✓ 2017 CYP Strategy	✓ Mandatory	✗ Under supported and over stretched	✓ Yes, but not large scale	✗ Questioning of policy substance
Denmark	✓ Ten-year plan from 2022	✗ Not enforced or integrated	✗ Small emphasis in current policy mandation	✓ Large scale surveys	= Many issues including immigration response

Learning

Nearly all jurisdictions have policies in place

Accountability is generally but not universally clear

Teachers are not adequately prepared

Measurement generally exists

Policies and measurement exist; unclear accountability and lack of teacher preparedness negates

Comaparison table: jurisdiction relative strength

Jurisdiction	What are this jurisdiction's relative strengths? (Proxy data*)	Supporting info	What are this jurisdiction's relative strengths? (Historic policy/societal attitudes/other research)	Supporting info	Availability of evidence relating to these exemplars
England			A wide range of wellbeing measures.	Geographically broader school wellbeing measures do not exist, which can present challenges for drawing robust national conclusions. However, a wide range of regional measures have been devised.	Good
Wales	Academic resilience	Of the jurisdictions examined in this study, the UK came top for academic resilience in 2018.	Clearly defined school mental health policy (Education Wales, 2021).	Wales has provided a comprehensive, well-funded response to its mental health crisis (Welsh Government, 2019; 2022).	Good
Finland	Adult skills; life satisfaction	Of the jurisdictions examined in this study, Finland scored the highest for both adult skills and life satisfaction.	A child-centric, low pressure approach to education (Finnish National Agency for Education, 2022); a high GDP spend on education (OECD, 2019); rigorous training and high job satisfaction of teachers (OECD, 2015; Finland Toolbox, 2021).	A wellbeing-oriented approach to education, and the concrete legislation that surrounds this, may explain Finland's high life satisfaction score.	Good
Singapore	Reading; mathematics	Of the jurisdictions examined in this study, Singapore scored the highest for both reading and mathematics.	The role of school for wellbeing has gained recent policy attention (Koh & Hung, 2018).	Although Singapore has historically showed excellent academic outcomes, wellbeing has typically taken a backseat. This may be because of the meritocratic ideals of Singaporean culture (Johannis et al., 2022).	Good
South Australia	No exemplars	Australia did not score exceptionally on any of the reported measures.	A wide range of wellbeing measures.	Several wide-reaching wellbeing measures take place in South Australia, allowing a range of insights to be drawn.	Moderate
Dubai	Sport/exercise participation	Of the jurisdictions examined in this study, the UAE scored the highest for exercise participation.	A large proportion of children receive a private, international education (Al Arabiya News, 2022).	Dubai has 216 private schools: the highest proportion in the world. These tend to be of higher quality.	Good
The Netherlands	Life satisfaction	Of the jurisdictions examined in this study, the Netherlands scored the second highest for life satisfaction.	A progressive government; a high GDP spend on education (OECD, 2019); a low pressure approach to education (Borgen Project, 2017).	The Netherlands' low pressure approach to education may explain the jurisdiction's high life satisfaction score.	Good
Ireland	Sport/exercise participation	Of the jurisdictions examined in this study, Ireland scored the second highest for exercise participation.	Ensuring that refugee children are in education (O'Brien, 2023; Unicef, 2023).	92% of Ukrainian refugees in Ireland are enrolled in schools, whereas Unicef reported that the average estimate for displaced Ukrainian children NOT in education across all host countries is 66% (O'Brien, 2023; Unicef, 2023).	Good
Ontario	No exemplars	Canada did not score exceptionally on any of the reported measures.	A liberal and progressive government (Carty, 2015)	Citizens of countries with progressive policies tend to report higher subjective wellbeing (Oishi et al., 2012).	Moderate
South Korea	No exemplars	South Korea did not score exceptionally on any of the reported measures.	A large number of university educated young people (Jones & Beom, 2022)	South Korean youth experience a discrepancy between their high educational outcomes, and wellbeing outcomes. However, alleviating educational inequality may be a broad long term solution to the high levels of poverty in South Korea's elderly population (Han, 2022; Lee, 2022).	Moderate
Aotearoa New Zealand	No exemplars	ANZ did not score exceptionally on any of the reported measures.	Unclear	N/A	Poor
Denmark	No exemplars	Denmark did not score exceptionally on any of the reported measures.	Strong outcomes in the World Happiness Report; a well-funded social welfare system (Denmark.dk, n.d.).	None of Denmark's main political parties express a wish to dismantle the current welfare system (Denmark.dk, n.d.-b). A 2011 study of 130 countries, including Denmark, found that government quality predicted higher and more equal happiness (Ott, 2011).	Moderate

* Within the datasets used in the report, the values presented as exemplars are those that scored more than one standard deviation better than the average of included jurisdictions (see "proxies" sheet).

Comparison table: data for proxies

Academic outcomes (OECD/PISA) (2018)											Wellbeing					
Jurisdiction	OECD Survey of Adult Skills (PIAAC) Adults scoring low in both literacy and numeracy (%)		Reading		Mathematics		Percentage of "academically resilient" [†] students		Difference in reading performance (points) between students in the top quarter and students in the bottom quarter of the economic, social, and cultural status index		OECD/PISA (2018) Life satisfaction measure		Youth suicide			
	Score	Rank (out of 38)	Score	Rank (out of 78)	Score	Rank (out of 78)	Percentage	Rank (out of 78)	Points difference	Rank (out of 78)	Score	Rank (out of 70)	In the last decade, has this jurisdiction reported an increase in youth suicides? ²	Data example	Av EB confirm	Data source
England*	14	21	504	14	502	18	14	10	80	32	6.12	69	Yes (10-24-year-olds)	There were 6.2 and 10.9 suicide deaths per 100,000 15-19 and 20-24-year-olds respectively in 2021.	8.5	Office for National Statistics. (2022). <i>Suicides in England and Wales—Office for National Statistics</i> . https://www.ons.gov.uk/peoplepopulationandcommunity/birthdeathsandmarriages/deaths/datasets/suicidesintheunitedkingdomfrenetcables
Wales*	N/A	N/A									6.45		Yes (10-24-year-olds)	There were 9.8 and 11 suicide deaths per 100,000 15-19 and 20-24-year olds respectively, in 2021.	10.4	Office for National Statistics. (2022). <i>Suicides in England and Wales—Office for National Statistics</i> . https://www.ons.gov.uk/peoplepopulationandcommunity/birthdeathsandmarriages/deaths/datasets/suicidesintheunitedkingdomfrenetcables
Finland	8.1	3	520	7	507	16	12.6	23	79	31	7.61	19	An increase for 0-17-year-olds, but a decrease for 18-24-year-olds	There were 18.5 and 10.1 suicide deaths per 100,000 male and female 18-24-year olds respectively in 2020.	14.3	Sotkanet.fi, a health statistics database by the Finnish Institute for Health and Welfare.
Singapore	22.9	33	549	2	569	2	9.7	56	104	65	N/A	N/A	Yes (10-19-year-olds)	There were 27 deaths by "intentional self-harm" in 20-19-year-olds in 2021.	10??	Immigration and Checkpoints Authority. (n.d.). <i>Statistics</i> . ICA. Retrieved 19 January 2023, from https://www.ica.gov.sg/news-and-publications/statistics
South Australia*	11.1	15	503	16	491	29	13.1	17	89	46	N/A	N/A	Yes (5-24-year-olds)	There were 7 deaths per 100,000 5-25-year-olds between 2017 and 2021.	7	Australian Institute of Health and Welfare's
Dubai*	N/A	N/A	432	46	435	50	7.2	76	105	67	6.88	53	No data	16 10-19-year olds passed away from all causes in 2021. Suicide statistics were not available.	3	UAeStat (https://uaeat.fsc.gov.ae/en).
The Netherlands	9.3	8	485	26	519	9	12.6	24	88	43	7.5	24	Yes (age 20 and under)	There were 1.5 suicides per 100,000 under 20s in 2021.	1.5	Statistics Netherlands (http://www.cbs.nl)
Ireland	14.9	24	518	8	500	21	13.1	19	75	26	6.74	59	Stable with yearly fluctuations (15-24-year-olds)	13 15-17-year-olds, and 52 18-24-year olds died by suicide in 2020.	5	Ireland's Central Statistics Office (https://data.cso.ie/)
Ontario*	13.6	19	520	6	512	12	13.9	11	68	17	N/A	N/A	Yes (10-19-year-olds)	There were 4 and 4.8 suicides per 100,000 female and male 10-19-year-olds respectively in 2020.	4.4	Centre for Suicide Prevention. (2022). <i>Suicide stats for Canada and provinces</i> . https://www.suicideinfo.ca/local_resource/suicide-stats-canada-provinces/
South Korea	11.2	16	514	9	526	7	13.5	13	75	28	6.52	64	Yes (10-19-year-olds)	There were 3.2 and 11 suicides per 100,000 10-14, and 15-19-year olds respectively in 2021.	7.1	South Korea's main statistical hub Kosis (Kosis.kr).
Aotearoa New Zealand	10.1	11	506	12	494	27	11.7	40	96	56	N/A	N/A	No (stable)	There were 14.8 and 15.1 suicides per 100,000 10-14, and 15-19-year olds respectively in 2021.	15	Health New Zealand - Te Whatu Ora (https://www.tewhātuora.govt.nz/)
Denmark	10.8	14	501	18	509	13	12.2	33	78	30	N/A	N/A	No (stable)	3 10-14-year-olds, and 14 15-19-year olds died by suicide in 2021.	8.5	Statistics Denmark (https://statbank.dk)
OECD average	16		487		489		11.3		89		7.94					
Sample mean	12.60		504.73		505.82		12.15		85.18		6.83					
Sample standard deviation	4.21		38.46		31.69		2.03		12.27		0.55			2 Trends ascertained from publicly available data held by each jurisdiction (see column Q).		
One SD higher	16.81		533.69		537.51		14.18		97.45		7.38					
One SD lower	8.39		475.77		474.12		10.12		72.91		6.28					

* Please note that for OECD/PISA findings, England and Wales are included under United Kingdom, South Australia is included under Australia, Dubai is included under United Arab Emirates, and Ontario is included under Canada.

[†] Students in the bottom quarter of the PISA index of economic, social and cultural status who perform in the top quarter of students internationally in reading.

Comparison table: Key challenges

Jurisdiction	Key wellbeing challenge for education* (Historic policy/societal attitudes/other research)	Secondary wellbeing challenges (Historic policy/societal attitudes/other research)	Source(s)	Availability of evidence relating to this challenge	Example finding	Key wellbeing challenge for education (proxy data*)
England	Government austerity		Academic research; government policy documentation	Good	By 2024-25, it is predicted that spending per pupil will be 3% lower than it was in 2010 (Institute for Fiscal Studies, 2022).	Life satisfaction
		A lack of mandated mental health-specific policies	Government policy documentation	Good	In 2015, schools were encouraged to develop whole-school mental health and wellbeing approaches. But, this was not mandated (Department of Health, 2015).	
		Pupil wellbeing measures are not consistently used across the	Survey data	Good	#BeeWell and OxWell are two examples of regional school wellbeing measures. A geographically broader one does not exist, which can present challenges for drawing robust national conclusions.	
Wales	Government austerity		Government policy documentation	Good	Around 75% of schools in Wales are considering staff redundancies, with 95% of schools foreseeing financial deficit in 2023 (Survey data, reported by Nation.Cymru, 2022).	N/A
		Rural mental health support	Government policy documentation	Moderate	1 in 3 people in Wales live in a rural area. Those in rural Wales face notable difficulties with accessing mental health support (Mentally Healthy Schools, n.d.).	
Finland	The low accountability of schools and teachers		Academic research	Moderate	Flexibility and a lack of external control is a cornerstone of Finnish education, and this system has been criticised for its lack of monitoring and outcome measurement (Vainikainen et al., 2017).	N/A
		Poor cultural representation of minority indigenous populations.	Academic research; reports	Good	Keskitalo et al. (2012) argue that the Western structure of schooling aligns with the assimilation and colonialisation processes that the Sami have historically faced. Funding for projects to increase cultural awareness in schools has been inconsistent (Heinola, 2022).	
Singapore	Academic pressure and competition, and the impact		Academic research; surveys	Good	Around 70% of families have their children enrolled in private additional tuition, in order to help them keep up in this ultra-competitive system (Davie, 2015). Some tuition centres can cost up to £2,000 a month (Wong, 2021).	Adult skills; academic performance equality
		Educational outcomes can predict lifelong social stratification.	Academic research	Good	Opportunities are not allocated fairly between elite and neighbourhood schools. Because of this, disparity in educational outcomes exacerbates societal stratification through the career options available once a young person leaves school (Zhang, 2021).	
South Australia	Racial inequality/inequity		Surveys; statistical	Good	Aboriginal students are less likely to report being satisfied with their lives (Child Development Council, 2020).	N/A
		General outcome inequality A lack of mandated mental health-specific policies	Statistical data Government policy documentation	Good Moderate	SA residents, on average, have the second lowest (after Tasmania) incomes in Australia (Australian Bureau of Statistics, 2022). Strategies are presented as "visions", with seemingly unclear action steps for staff to follow, and it is unclear whether or how these will be enforced.	
Dubai	Multifaceted inequality/inequity		Surveys; assessment; reports	Good	The UAE has one of the largest educational gender attainment gaps in the world, with girls vastly outperforming boys (UNESCO, 2022). The attainment gap between advantaged and disadvantaged students is also high, as indicated by PISA results.	Reading; mathematics; science; academic
The Netherlands	Potential complacency in wellbeing policy		Reports	Poor	The amount of educational policy that relates directly to wellbeing appears relatively sparse, with several features, such as a health curriculum, remaining optional (Banwell & Humphrey, 2023).	N/A
		Out-of-date poverty metrics	Academic research	Moderate	Whilst most residents of the Netherlands can afford to meet their basic needs, those in lower paid jobs need to work longer hours to get by than they did historically (Vaessen, 2021).	
Ireland	LGBTQ+ wellbeing		Surveys; reports	Good	76% of LGBTQIA+ pupils felt unsafe at school, and 58% reported hearing a homophobic remark from a school staff member (Belong To, 2022).	N/A
		A sharp influx of refugee children	Reports	Good	Catering for such a rapid growth in school enrolment, as a result of Russia's invasion of Ukraine, has been listed by the European Commission as one of the key challenges for Ireland's education system (Eurydice, 2023).	
Ontario	Response to COVID-19		Reports; government policy documentation	Good	"There is insufficient mental health and wellbeing support for staff and students. Principals report an increase in student stress, anxiety, and suicide ideation" (People for Education, 2022).	N/A
		A lack of coordinated approach between school districts within the	Reports	Good	Beyond a handful of legislative requirements, school districts are responsible for implementing their own mental health strategies (Hickox, 2022; Robson, 2012).	
South Korea	Academic pressure and		Surveys; reports	Moderate	Around 50% of 13-18-year-olds state that school is the largest source of stress in their life (Korean Social Survey, 2022).	Sport/exercise participation
		Parental professional background is a strong indicator of opportunity	Academic research	Good	Given that parental professional background is an indicator of opportunity (Han, 2022), it is unsurprising that many South Koreans are pessimistic about social mobility possibilities for their children (Kim, 2021).	
Aotearoa New Zealand	High youth suicide rates		Reports; surveys	Good	ANZ has one of the highest youth suicide rates of all OECD countries (Gromada et al., 2020; OECD, 2017).	N/A
		Disjointed and unclear policy	Government policy documentation	Good	Although wellbeing has featured heavily in recent policy priorities, we found that this appears disjointed. A high volume of guidance is available, however there appears to be little clear direction to follow, especially for schools, and information is confusing and jargon-heavy. It is also unclear if, or how, frameworks are mandated.	
Denmark	Inequality/inequity for refugee and immigrant CYP		Academic research; surveys	Good	Increasing diversity of need, resulting from immigration, has presented challenges to the Nordic model of education in which, historically, the equal provision of resources has been sufficient (Frones et al., 2020).	N/A
		A direct focus on wellbeing is missing from policy	Government policy documentation	Good	Compulsory health education in Denmark is generally taught as a broad concept, and the emphasis given to mental health is often small (Schools for Health, 2021).	

* Although other challenges may have been reported in Parts A and B, these were identified as the most significant wellbeing issue of each jurisdiction.

** Within the datasets used in the report, the values presented as challenges are those that scored more than one standard deviation poorer than the average of included jurisdictions (see "proxies" sheet).

Comparison table: responses

Country	Do education-specific mental health/wellbeing policies exist?		Policy accessibility		Teacher preparedness		Wellbeing assessment		Progression from challenge to response	
	Does the available information indicate this?	Remarks	Does the available information indicate this?	Remarks	Does the available information indicate this?	Remarks	Does the available information indicate this?	Remarks	Does the available information indicate this?	Remarks
England	Yes	Review of 2007 green paper (Department of Health and Social Care & Department for Education 2017); school-wide MH approach; Implementation of mental health leads. Health (mental and physical) curriculum (Department for Education, 2010).	Yes	Compulsory since 2008, however flexibility of content is allowed.	No	Less than 10% of schools agreed that identified guidance had been provided for them by advisor health curriculum (Department for Education, 2010).	Yes	Many exist, but some universal or compulsory. This makes comparison challenging.	Yes	A direct response to the key drivers of poor wellbeing is not evident.
Wales	Yes	Consulting services in schools. Health (mental and physical) curriculum. Framework for whole-school MH/wellbeing.	Yes	Mandated in 2012 (Welsh Government, 2012). Undergoing mandatory implementation. Complete by 2026 (Mental Health Schools, 2022).	Yes	47% of schools reported communication with a dedicated implementation coordinator to support the development of that approach. Of those, 72% reported being 'quite' or 'very satisfied' with the support quality (Welsh Government, 2022). However, existing processes, such as time, may impact implementation (Howe, 2022). Expectations should be made clear, in an accessible format, and from a range of reports. This should also be available in the Welsh language (Welsh Government, 2022).	Yes	Student Health and Wellbeing Survey provided to all secondary schools in Wales from 2017.	Yes	MH and wellbeing evidenced as priority, with current context considered.
Finland	Yes	Schools must have one social worker per 670 pupils, and one school psychologist per 750 pupils. Identified to have wellbeing support in school. There must be a wellness team in school.	Yes	Enforced in 2012 (Eurydice, 2022). Enforced in 2014 (European Agency for Special Needs and Inclusive Education, 2020).	No	Whilst teachers regarded mental health promotion as a key priority, and showed high levels of care and compassion for their pupils' wellbeing, they felt poorly supported in meeting their wellbeing needs (Oksa et al., 2021).	Yes	School Health Promotion Study – not compulsory but a high percentage of students complete it.	Moderate	Whilst strong policies exist, teachers and schools are not monitored or inspected. However, the extent to which this, in itself, supports wellbeing, is not evidenced. Universal provision of training measures is likely key, given the reported lack of this in Finnish qualitative research with school staff (Oksa et al., 2021; Pulkkinen et al., 2021).
Singapore	Yes	Changes made in 2018 to reduce emphasis on academic outcomes, and move towards holistic development. Singapore's Character and Citizenship Education Curriculum was updated, to include responsiveness to wellbeing and development of mental health. Schools and CYP mental health are mentioned in primary policies (e.g. Government of South Australia, 2020), however for use are dedicated to this.	Yes	Changes mandated since 2019 (Ministry of Education Singapore, 2018). Changes made in 2021 (Ministry of Education Singapore, 2022).	Unclear	A number of government responses suggest that teachers receive mental health training, and that they appreciate this (Ministry of Education Singapore, 2021, 2022). However, corresponding qualitative evidence does not exist.	Yes	Many exist, but some universal or compulsory. This makes comparison challenging.	Moderate	Changes are positive, and may go some way towards improving wellbeing. However, they may not be enough (Yeo, 2020), as there remains a reluctance to focus directly on wellbeing, and to deprioritise academic quality, within the new guidance (Ng, 2020).
South Australia	Yes	Schools and CYP mental health are mentioned in primary policies (e.g. Government of South Australia, 2020), however for use are dedicated to this. The 2019-2029 Aboriginal Education Strategy (Government of South Australia, 2019) was designed to ensure that Aboriginal CYP in SA have the best possible educational outcomes for their future. In 2020, a commitment that included wellbeing was rolled out, as part of a wider national agenda for happiness that was adopted by the UAE in 2018 (UAE Government, 2021).	Unclear	Most strategies are presented as 'visionary', with few clear action steps for staff to follow, and it is unclear whether or how these will be enforced. According to the strategy, there will be transparency and accountability with how these outcomes are met. Progress will be monitored against the strategy at a systemic, partnership, and school level.	No	Most strategies and policies examined refer to either training, or close working with school staff to deliver implementation. However, qualitative Australian-wide research suggested that training on how to improve mental health issues was lacking (Marquet et al., 2022). Additionally, in South Australia, teachers reported feeling unsupported to deal with the mental health concerns of their students, especially in the context of the COVID-19 pandemic. They felt that in doing so, they were working in a role that they were not trained in (White et al., 2022).	Yes	All primary and secondary schools in SA are invited to complete the wellbeing and engagement collection (WEG), which claims to be the world's largest population monitoring system of CYP wellbeing in the world, but engagement is not compulsory.	Moderate	Whilst the Aboriginal Education Strategy detailed new legislation or procedures, and how each of the planned changes were to be made and monitored, policies that focus solely on mental health and wellbeing are not clear.
The Netherlands	Yes	Teaching and learning materials for enhancing mental health and wellbeing are part of fully fit for school. Health literacy and action competences are integral to school policy. Reference systems for mental health concerns are in place. A whole-school approach, and written policy on wellbeing. Health promotion part of school goals.	Yes	Required by national policy (Schools for Health in Europe Network Foundation, 2010).	No	Not much information was available. However, one qualitative study (Gaspouder de Alencar et al., 2022) found that mental health issues are rarely discussed in training, but trained directly for the identification of mental health concerns, nearly all schools have specifically-trained staff to fulfil this role. Whole-school training, was nevertheless recognised as important.	Unclear	Unclear whether measures are provided to every school.	Moderate	Whilst the Netherlands enjoys comparatively high levels of wellbeing, targeted policy must still target and be prepared for the slowly worsening outcomes that are evidenced by wellbeing measures.
Ireland	Yes	'LGBTI+ National Youth Strategy' was devised in 2018, to meet the needs of their unique mental and physical health needs as identified in need (Department of Children and Youth Affairs, 2018). By 2023, the promotion of wellbeing will be a core ethos of every school, and all schools will be required to implement a self-evaluation to evaluate current practice relating to wellbeing. New curriculum in 2023: A greater emphasis on wellbeing was made. It featured as one of the seven key competencies that CYP should foster within school, and also alongside STEM, languages, the arts, and social education as a core area of learning.	Yes	Educational policy does not yet refer to LGBTIQ+ issues, and enforcement of policies designed to support LGBTIQ+ pupils, unfortunately, remains optional. Official policy (Government of Ireland, 2018).	No	Despite extensive policy relating to LGBTIQ+ youth in schools, in 2022, 28% of those interviewed reported having heard a homophobic remark from a school staff member (Behring, 10, 2022).	Yes	Large-scale surveys do exist, including LGBTIQ+ surveys. However, these are not mandated.	Moderate	Whilst Ireland is clearly raising the profile of wellbeing within schools, new action needs to be taken to help young people who are concerned to ensure that they receive an inclusive and safe educational experience when the wellbeing of all groups is considered. This is especially true for LGBTIQ+ young people. Despite the existence of extensive strategy, the positive changes have been mandated, and as recently as 2022, 76% of LGBTIQ+ young people reported still unsafe at school (Behring, 10, 2022).
Ontario	Yes	A number of wellbeing/wellbeing-alignment policies were enacted in 2018, including a Student Success team in every secondary school, to work closely with "at-risk" students. Alongside these requirements, school districts develop their own mental health strategies. A 2022 to 2023 COVID-19 response strategy has been developed, that includes early identification, mental health literacy and stigma reduction, and intensive supports for those who need it (School Mental Health Ontario, 2022).	Yes	Compulsory curriculum since 2012 (National Council for Curriculum and Assessment, 2023).	No	People for Education (2022, 2022) reported that "schools are not sufficiently supported to help their students who are concerned to struggle with the aftermath of the pandemic." 26% of schools had no access to specialist staff, with both teaching and support staff experiencing burnout (People for Education, 2022). These issues are all said to be a continued effect of the COVID-19 pandemic.	Yes	Large-scale surveys exist within Ontario.	Moderate	Support with ensuring current governance appears to be lacking. This is evidenced in the ongoing system issues with post-pandemic recovery in schools.
Korea	No	Neither wellbeing, nor mental health, are explicitly referred to in South Korea's education act. In 2012, mental health literacy was not part of the school curriculum in South Korea.	No	Little evidence of directed policy was found.	No	In 2022, it became mandatory for schools to produce a suicide report within one week of a death (Kim, 2020). However, analysis of such reports found that most of the time, teachers had not recognised any warning signs prior to the suicide. This suggests a clear need for identification training in school staff (Lee et al., 2022).	Yes	Large-scale surveys exist, most notably the The Korea Youth Risk Behavior Web-based Survey (KYRBS).	No	No clear mental health policy exists, nor strategies aimed at changing the level of academic pressure placed on CYP.
Antarctic New Zealand	Yes	A Child and Youth Wellbeing Strategy was also developed in 2019. It's vision is that "Antarctic New Zealand is the best place in the world for children and young people" (Child and Youth Wellbeing, 2020). Many other models of CYP wellbeing made in previous years, however information is fragmented, and progression of practice is difficult to follow.	Yes	Mandatory, but implementation is difficult to follow, and jeopardous.	Mixed	School staff is a recent study by Thibault et al. (2022) were enthusiastic about new changes, however felt under-supported and over-stretched, particularly in terms of time. The authors suggest that there is room for improvement in how change are implemented, and in how support is given to schools during implementation.	Yes	Surveys exist, but these do not appear to be large-scale.	No	Little mention of suicide made in policies. As of yet, no real changes in wellbeing, or the social issues such as poverty that are closely underpin these, have been made. The policies' lack of substance have undergone harsh criticism to many.
DK	Challenging	A five-year forward plan for mental health in Denmark was devised in 2022, based on the view that mental health is not being taken as seriously enough, and an action plan for this, in relation to early intervention, will be implemented in the coming decade (Danish Health Authority, 2022).	No	Current health policies within school, despite being technically mandated, are neither enforced nor properly integrated.	Yes	The emphasis given to mental health in school, and is prioritised differently by each school (depending on how prepared staff feel) to be. In addition, and first, that they lacked the resources, training, and formal procedures to deal with the religion-related wellbeing issues of their students (Stok-Madsen & Lars et al., 2020).	Yes	Large-scale surveys exist within Denmark.	Moderate	Despite the identification of inequality in outcomes, no mention of the wellbeing issues that are specific to immigrant or refugee CYP is made.