

The impact of Special Educational Needs and Disabilities (SEND) and mental health in children and young people and their parent/carers



Legislation
and Guidance
related to
SEND and
Mental Health

Norfolk SENDIASS

In 2022, 18.0% (1 in 6) of children aged 7 to 16 years and 25.7% (1 in 4) of young people aged 17 to 19 years had a mental health need.

[Mental Health of Children and Young People in England 2022 - wave 3 follow up to the 2017 survey - NDRS \(digital.nhs.uk\)](#)





To mark Mental Health Awareness Week 2023, BBC Children in Need have launched a new campaign – Behind the Bandana – which sees the charity temporarily remove Pudsey’s iconic bandana to show that not all of the challenges that children and young people may be facing are visible and to encourage the right conversations between children and parents, carers and other trusted adults to ensure no child faces their emotional and mental health challenges alone.

- In the last three years, the likelihood of young people having a mental health issue has increased by 50% (2021), and 75% of children and young people who experience a mental health issue aren’t getting the help they need.
- A third of young people surveyed regularly feel anxious (33%) or worried about their future (29%)
- A third of young people surveyed do not feel comfortable asking for help with their feelings and emotions (32%)
- 1 in 6 parents surveyed (17%) are not confident in recognising signs of poor mental health in their child.
- Almost half of parents surveyed (49%) do not feel there is sufficient support available for children who are struggling with their mental health
- Almost a third of parents surveyed (32%) are not confident they could secure additional support for their child’s mental health
- Over half of parents surveyed (58%) would like access to additional support and resources to help conversation with their children about their feelings and emotions.

From 1 September 2014 a new legal framework for SEN Law was introduced with the implementation of the **Children and Families Act 2014**.

The framework contains the legal rights to ensure children and young people with SEN or a disability receive the educational provision required as a result of their needs.

It also has regard to the need to help those children and young people achieve the “**best possible educational and other outcomes**”

What are Special Educational Needs?

The definition is contained in
section 20 CAFA 2014:

Section 20(1):

A child or young person has special educational needs if he or she has a learning difficulty or a disability which calls for special educational provision to be made for him or her.

This definition has two elements.

1. The child or young person must have either a learning difficulty or a disability;
AND
2. That learning difficulty or disability must require special educational provision (SEP) to be made for him or her.

Element one - A learning difficulty or disability

This is defined in the following three sub-sections of section 20 CAFA 2014.

Section 20(2) is about children and young people who are of compulsory school age and over:

Section 20(2):

A child of compulsory school age or a young person has a learning difficulty or disability if he or she—

- (a) has a significantly greater difficulty in learning than the majority of others of the same age, or**
- (b) has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.**

Element one – A learning disability or difficulty cont.

Section 20(3) is about children under compulsory school age:

Section 20(3):

A child under compulsory school age has a learning difficulty or disability if he or she is likely to be within subsection (2) when of compulsory school age

Section 20(4) contains a negative - it sets out specifically a situation which does not constitute a learning difficulty:

Section 20(4):

A child or young person does not have a learning difficulty or disability solely because the language (or form of language) in which he or she is or will be taught is different from a language (or form of language) which is or has been spoken at home.

Element two - Special Educational Provision

This is defined in section 21(1) of CAFA 2014:

Section 21(1):

(1) “Special educational provision”, for a child aged two or more or a young person, means educational or training provision that is additional to, or different from, that made generally for others of the same age in

- (a) mainstream schools in England,**
- (b) maintained nursery schools in England,**
- (c) mainstream post-16 institutions in England, or**
- (d) places in England at which relevant early years education is provided.**

(2) “Special educational provision”, for a child aged under two, means educational provision of any kind

What is a disability?

A child or a young person has a disability for the purpose of Part 3 CAFA 2014 if he or she has a disability as defined in the Equality Act 2010.

Section 6(1) EqA 2010:

A person (P) has a disability if—

- (a) P has a physical or mental impairment, and
- (b) the impairment has a substantial and long-term adverse effect on P's ability to carry out normal day-to-day activities.

What is a disability continued?

Schedule 1(2) contains a provision familiar from the DDA on the interpretation of 'long term adverse effect': "The effect of impairment is long-term if:

(a) it has lasted for at least 12 months, months,

(b) it is likely to last for at least 12 months, or

(c) it is likely to last for the rest of the life of the person affected."



There are four broad areas of need
these are:

Cognition and Learning

Communication and Interaction

Social, Emotional and Mental Health

Physical and Sensory

‘These four broad areas give an overview of the range of needs that should be planned for. The purpose of identification is to work out what action the school needs to take, not to fit a pupil into a category. In practice, individual children or young people often have needs that cut across all these areas and their needs may change over time’ SEND CoP 6.27

Mental Health and Behaviour in Schools

Guidance – 2018

“Schools have an important role to play in supporting the mental health and wellbeing of children by developing whole school approaches tailored to their particular needs, as well as considering the needs of individual pupils.”

“Schools should consider how best to use their SEN and pupil premium resources to provide support for children with mental health difficulties where appropriate.”

“As set out in Chapter 6 of the statutory SEND 0-25 years Code of Practice 2015, schools need to be alert to how mental health problems can underpin behaviour issues in order to support pupils effectively, working with external support where needed. They also need to be aware of their duties under the Equality Act 2010, recognising that some mental health issues will meet the definition of disability. “

“When schools suspect a pupil has a mental health problem, they should use the graduated response process (assess – plan – do – review) to put support in place”

Promoting children and young
people's mental health and
wellbeing.
A whole school or college
approach

Guidance 2021

“It is widely recognised that a child’s emotional health and wellbeing influences their cognitive development and learning as well as their physical and social health and their mental wellbeing in adulthood”

“All schools are under a statutory duty to promote the welfare of their pupils and students, which includes preventing impairment of children’s health or development and taking action to enable all children to have the best outcomes. Full details are set out in Keeping Children Safe in Education (KCSIE) statutory guidance”

“There is good evidence to support the association between good mental health and education engagement and academic achievement. The benefits to preventing mental health problems in children and young people from arising, and intervening early where they do, can be significant for schools. For example, it may result in improved attainment, attendance, reductions in behavioural problems, as well as happier, more confident and resilient children and young people.”

Promoting children and young people's mental health and wellbeing. A whole school or college approach

Guidance 2021

Early intervention to identify issues and provide effective support is crucial. The school's role in supporting and promoting mental health and wellbeing can be summarised as:

1. Prevention: creating a safe and calm environment where mental health problems are less likely, improving the mental health and wellbeing of the whole school population, and equipping pupils and students to be resilient so that they can manage the normal stress of life effectively. This will include teaching pupils and students about mental wellbeing through the curriculum and reinforcing this teaching through school activities and ethos.
2. Identification: recognising emerging issues as early and accurately as possible.
3. Early support: helping pupils and students to access evidence informed early support and interventions.
4. Access to specialist support: working effectively with external agencies to provide swift access or referrals to specialist support and treatment

Impact of
Mental Health
on young
people with
disabilities

The DRAGONS

SEND & Mental Health

Young People's Perspective





What Will Be Covered?

I spoke to a number of young people with Special Educational Needs and/or Disabilities (SEND) about their experience around mental health and how having SEND impacts this.

The following covers the young people views' of how having SEND affects:

- Their mental health.
- Their experience accessing mental health services.
- What they would like to see change.

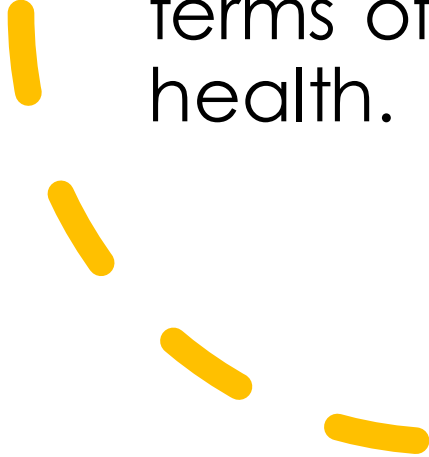
The Effect of SEND on Mental Health

How does the embodiment of
SEND impact disabled young
people's mental health?





Some General Thoughts About Mental Health

- There is a stigma around mental health so people don't want to talk about it.
 - Some young people with SEND struggle to recognise when their own mental health is poor.
 - People forget that disabled young people have needs in terms of their mental health as well as their physical health.
- 



Effect of SEND on Mental Health

- Mental Health and SEND are often linked.
- Some young people said that when their mental health is poor it can lead to their disability getting worse or becoming harder to manage.
- Vice versa, their disability can also negatively impact their mental health.
- One young person said it was a downward spiral – poor mental health meant their physical health would be worse and poor physical health would, in turn, make their mental health even worse.
- Negative stigma around disability, especially in media, can lead to those with SEND having low self-esteem, a lack of confidence or living with a sense of shame.

Some Examples

- One young person felt that their disability had triggered their anxiety as their autism means they often feel overwhelmed.
- This is made worse by the fact that many people don't understand autism.
- Another said their ability to walk got worse when their mental health was poor because it affected their confidence.
- One struggled with feeling like a burden to friends and family due to their disability.



Experience of Mental Health Services



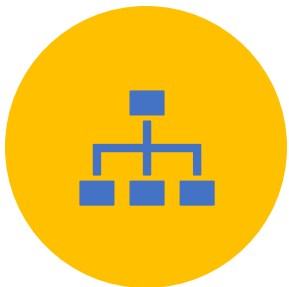
Mental health services have improved in recent years, however there are still some issues:



One young person's social worker took several weeks to contact them after being contacted regarding mental health issues.



Lack of hospital beds available.



Meetings were held in dark, depressing rooms and were often cut short.



Sometimes young people just need someone to call but feel like they are being a nuisance.

Accessibility in Mental Health Services

- Staff encountered when first accessing services, lack disability training.
- Staff with a fuller understanding of disability aren't reached until more senior mental health professionals, such as psychologists, are involved.
- Long waiting lists (Up to 2 years) to see a therapist who is trained to work with SEND patients.
- Accessibility for SEND in mental health services gets better the more support you need. There is little for those who don't need full-time or emergency care.
- Surveys use language that is inaccessible.
- Meetings have been organised without transport being arranged making them inaccessible.





Young People's Thoughts

- While mental health and disability often do go hand in hand they can be separate.
- Mental health issues are blamed on their disability and dismissed or not treated correctly - e.g., after a diagnosis of autism, mental health issues that predated the diagnosis were put down to autism.
- Experiences of trauma might be dismissed, as there is an assumption that those with SEND don't understand what has happen to them and, as a result, cannot be traumatised by it.
- Lack of accessibility and understanding means young people rely on support workers to provide mental health care. This can be dangerous and places the burden on support workers.



The 'Disabled' Label

- Young people with SEND feel they are labelled as 'disabled' and this all that mental health professionals see.
- Professionals focus solely on the '**DISABLED** Label', forgetting that young people with SEND are still fully rounded people with the same relationships, anxieties, and feelings as able-bodied young people.
- Feelings of being treated like small children with basic emotions because of the 'Disabled Label', even though they have adolescent or adult feelings.



‘We may not understand something most adults do, but we are still adults.’

What Needs
to Change?



What Needs to Change? contd

- Staff need to receive disability awareness training.
- More mental health first aid available – helplines, training young people in basic mental health first aid.
- Provision available during evenings and weekends.
- Remembering that you are talking to a person, not a pity case.
- More co-production/participation when creating services.
- Not making assumptions about a how/if a disability affects mental health – every case is different.
- Using accessible language.

Impact of
Mental Health
on children
and young
people with
Special
Educational
Needs

The SEND Youth Forum

I am damaged
I am bruised
like the conveyer belt as I've been used

they say I'm brave
they say I'm strong
but whatever I do
it seems to go wrong

I'm a professional now in medicine
antidepressant drugs and all
but not the professional that gains reward
a professional ill and small

I'm the master of masking
the master of despair
the master of anxiety
Heart broken beyond repair

I want to sleep it all away
I want to disappear
I want so badly to be free
My cries no one can hear

while all my friends were achieving life
I was stuck at home
they were independent
and I relied full time

on doctors and "professionals"
on everyone to keep hold
of the life I was quickly losing
the battle uncontrolled

the pain I've felt has broken me
constantly falling behind
on studies, friends and a normal life
mental illness as I have been defined

I'm looking deep into your eyes
Begging for you to see
Can you hear my silent screams
Can someone please help me?

You can't see my legs are trembling
My brain is in restraint
It's not safe to show the real me
I feel I'm going to faint

My nails are scratching my skin red raw
I need to feel alive
My head is floating into space
I want to live not just survive

But when I try to talk to you
You just up my dose
Stop treating me like your guinea pig

My life is not a joke

Stop telling me it's all in my head
What will it take for you to see?
Stop saying I'm making it up
When will you take me seriously?

I'm running out of strength each day
To fight for you to hear my plea
Why can no one hear me,
see me,
Please, can you advocate for me?

I'm sick of being painfully ignored
I'm done with all the lies
being treated like an inconvenience
Until my hope of support dies

Invisible from society
Because I can't go out
But I'm still here and still need help
Stop leaving my heart in doubt

No school no life since I was fourteen
But what did I receive?
No help, support just silence
My lost life I will forever grieve

If only you knew what I've had to endure
Battles, scars, mind in overdrive
You would see my trauma and my strength
How lucky I am to be alive

I've been made to feel like I should just be
quiet
But I'm no longer going to be silent
We need our voices to be heard
To stop this mental violence

I beg you to please listen to me
Don't let my story go unheard
I want to change the world for us
The system is absurd

Our brains are beautiful, unique and
complex
We just need to be understood
We deserve to be here as much as you
So please, do something good

Impact of
Mental Health
on
parent/carers
of children
and young
people with
SEND

Family Voice Norfolk

The loss of a career.

Loss of a 'life plan'.

The loss of simply being able to 'enjoy'- the struggles and fight of a SEND parent for all that their child needs.

The 'white noise' of worry that never stops.

Lifelong fear, particularly for the future as your young person becomes older, as do we.

The inability to relax – living on a knife edge and the control of certain conditions on a parent carer's life.

Loneliness – isolation, the loss of 'pre-child' friendships as lives take very different pathways. Clubs and groups that our children are deemed not to 'fit'. Family and friends that just don't 'get it'.

The 'Big Act' – the brave face, the inability to be yourself in your own home and the perceived pressures of having to get it right.

Guilt and jealousy.

The perceived feeling of being judged – by family, friends, 'professionals', strangers...

The worry of the effect of SEND on the child or young person themselves – trying to maintain a positive stance, minimise disappointment, offering alternatives, planning to the nth degree to avoid disruptions.

Exhaustion – lack of sleep, the health implications of this, the lack of drive and time to look after oneself properly.

The worry of the effect on siblings – the inequalities, the difficult choices, the unintended need to grow up faster, to assume a young carer role, to help out with their brother or sister. The impact of having a sibling with SEND in school, amongst friends.

Welcome to Holland

by Emily Perl Kingsley

When you're going to have a baby, it's like planning a fabulous vacation trip - to Italy. You buy a bunch of guide books and make your wonderful plans. The Coliseum. The Michelangelo David. The gondolas in Venice. You may learn some handy phrases in Italian. It's all very exciting.

After months of eager anticipation, the day finally arrives. You pack your bags and off you go. Several hours later, the plane lands. The stewardess comes in and says, "Welcome to Holland."

"Holland?!" you say. "What do you mean Holland?? I signed up for Italy! I'm supposed to be in Italy. All my life I've dreamed of going to Italy."

But there's been a change in the flight plan. They've landed in Holland and there you must stay.

The important thing is that they haven't taken you to a horrible, disgusting, filthy place, full of pestilence, famine and disease. It's just a different place.


So you must go out and buy new guide books. And you must learn a whole new language. And you will meet a whole new group of people you would never have met.

It's just a different place. It's slower-paced than Italy, less flashy than Italy. But after you've been there for a while and you catch your breath, you look around.... and you begin to notice that Holland has windmills.... and Holland has tulips. Holland even has Rembrandts.

But everyone you know is busy coming and going from Italy... And for the rest of your life, you will say "Yes, that's where I was supposed to go. That's what I had planned."

But... if you spend your life mourning the fact that you didn't get to Italy, you may never be free to enjoy the very special, the very lovely things... about Holland.

Where to go
for further
support



[Health Advice & Support for Children - Just One Norfolk](#)

[Mental health and wellbeing - Ormiston Families](#)

[Home - Kooth](#)

[Home - Qwell](#)

[Home – Mind](#)

[The Benjamin Foundation](#)

[Verbatim Therapy – Healing in the Heart of Nature](#)

[YoungMinds | Mental Health Charity For Children And Young People |](#)

[YoungMinds](#)

[About Samaritans | Samaritans](#)

[Shout - UK's 24/7 Crisis Text Service for Mental Health Support | Shout](#)

[85258 \(giveusashout.org\)](#)

[We are Rethink Mental Illness](#)

[Papyrus UK Suicide Prevention | Prevention of Young Suicide \(papyrus-](#)

[uk.org\)](#)

[Mental Health – Map](#)