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SMSC, wellbeing and school improvement – the links and opportunities

This article makes the case for the contribution of wellbeing to learning and attainment; argues for curriculum change; laments some of the wasted opportunities in England and describes some hope for the future for children and young people, schools and their staff.

For the purposes of this article, SMSC is the umbrella term that involves every curriculum area and every aspect of the school experience and ethos. Personal, Social, Health and Economic (PSHE) education is “… a planned programme of learning through which children and young people acquire the knowledge, understanding and skills they need to manage their lives, now and in the future.” (PSHE Association, 2017) – a definition which includes teaching based on values clarification, skill development and knowledge about risk and resilience through topics which include substance use, healthy eating, emotional wellbeing and mental health and sex and relationships education (SRE).

Curriculum change? SMSC and soft but vital outcomes

It’s a sad indictment of education in the UK, especially England, that we have narrowed the success indicators for organisations and individuals to a few things that we (think we) can measure.

Of course, English and Maths are important. Basic numeracy is essential to manage daily life and forms the basis of so many careers in technology and engineering. Illiterate children cannot access the curriculum and are denied the pleasures of reading (although many will take issue with Mr Gove’s assertion that the joys of reading Dryden will avert teenage pregnancies) but if we teach only those things that we can measure, are we in danger of valuing only that which we can assess?

Skills such as problem-solving skills, an ability to work with others, and empathy to manage the needs of others, are all things that many schools do not find easy to teach, and fewer still find easy to measure. Such attributes are deemed essential by organisations such as the Confederation of British Industry, but when employers lament that young people are not ‘work ready’, it should come as no surprise, especially when employability and enterprise education are no longer part of an increasingly narrow national curriculum. We know from medicine that the clinician’s ‘bedside manner’, that is their inter-personal skills, can make a significant impact on prognosis for the patient, but there is seldom time to teach these so-called ‘soft skills’, which many people seem to find so hard. This may be partly because of external pressures from Government, the expectations of a knowledge-based, academic curriculum and Ofsted inspections, all of which have produced an obsession with quantifying learning and simplistic judgement, so that there is little or no time for young people to learn, develop and embed the skills, that will help them in the customer-facing roles with which they will almost all have to engage throughout their lives and careers.

Many children, currently in primary schools, are likely to live into the 22nd century. What we know of their future is … that we know very little. It seems likely that they will have to manage climate change, migration and increasing automation, but they will probably also have to manage challenges that we have not yet imagined.

Given the exponential changes in the ease of personal and global communication, and the associated increases in knowledge, there is a strong argument that a knowledge based
curriculum is unlikely to meet the future (or perhaps even current) needs of our school-age children. If I forget the capital of Alaska or a specific method of calculus, I can check it out on a personal communication device in a matter of moments. This should challenge schools who seek to ban the use of mobile phones. The vast majority of children, over the age of ten, will have immediate access to a communication device that can put them in touch with almost any knowledge that ever been … and they are not allowed to use it for learning? Misuse of mobile technology is surely a matter of behaviour management, not a reason to ban?

In a world where Google satisfies any need for knowledge, it is surely values and a moral compass based on Spiritual, Moral, Social and Cultural (SMSC) development, addressed throughout the school, supported by specific health teaching in Personal, Social Health and Economic (PSHE) education, that will help to guide pupils through turbulent times.

The contribution of SMSC to learning and attainment

It has long been recognized that the SMSC development underpins learning. There is strong evidence that demonstrates the link between pupils’ health and wellbeing and attainment (NAHT / PHE, 2014).

The 1944 Education Act gave local education authorities the duty to contribute towards ‘the spiritual, moral, mental, and physical development of the community’ and schools in England have a statutory obligation to promote pupils’ wellbeing (Children Act 2004), and to prepare children and young people for the challenges, opportunities and responsibilities of adult life (Education Act 1996).

All state-funded schools must meet the expectations of the National Curriculum (DfE, 2013) to:
‘… make provision for personal, social, health and economic education (PSHE), drawing on good practice’ and that: ‘Every state-funded school must offer a curriculum which is balanced and broadly based and which:

• promotes the spiritual, moral, cultural, mental and physical development of pupils at the school and of society
• prepares pupils at the school for the opportunities, responsibilities and experiences of later life.’

Schools also have a clear duty under the Equality Act 2010 to ensure that teaching is accessible to all, including those who are lesbian, gay, bisexual and transgender (LGBT+). High quality SMSC, through PSHE, can help to foster good relations between pupils, tackle prejudice – including trans and homophobia – and promote understanding and respect, to enable all members of the school community to flourish.

SMSC across the curriculum plays an important part in fulfilling these statutory duties. Although schools do not have to teach specific lessons on SMSC development, good practice and high-quality teaching, within a broad and balanced curriculum, should ensure that pupils’ SMSC development is included across the curriculum; in extra-curricular provision and life throughout and beyond the school. Clearly such awareness needs to be supported by Continued Professional Development (CPD) for all staff.

Successive Ofsted frameworks have noted the importance of pupils’ SMSC development, and Ofsted currently expects inspectors to evaluate pupils’ SMSC development before making a final judgement on the school’s overall effectiveness. Indeed, a school may be judged to have serious weaknesses if the provision for pupils’ SMSC development is not at least good.

High quality PSHE can help schools fulfil their duties to protect, safeguard and promote wellbeing and it is difficult to see how safeguarding can be ‘good’ if PSHE is poor; and the judgements about the schools’ overall effectiveness are bound to affected if pupils are unaware of how to protect themselves.

It’s not a question of either academic or SMSC development; a purposeful curriculum should enable each to reinforce the other. Development in both areas is essential to raising standards of attainment for all pupils. Schools seeking support to improve their SMSC provision can contact the Citizenship Foundation for further guidance.

There is strong evidence that promoting SMSC development can contribute to raising academic standards and improving pupils’ life chances (Banerjee, 2013; Gutman and Vorhaus, 2012) and the relationships developed between pupils and with their teachers, fostered through SMSC, are an essential component to enhance learning. Schools should focus on relationships to ensure that all students have a sense of belonging. “If you want to increase student academic achievement, give each
student a friend.” (Hattie, 2011) – and it wouldn’t be too great a leap of faith to assume this also to be true for staff.

Research currently being conducted by the Relational Schools Project is making some fascinating contributions to improve our understanding of this relationship.

**Government and PSHE: wasted opportunities**

Not so very long ago, the outcomes of ‘Every Child Matters’ were being promoted across the country, supported by Public Health teams, and scrutinised by Ofsted; the National Healthy Schools programme, provided a network of local expertise and was producing increasingly strong evidence of the links between pupils’ wellbeing and their academic attainment. The national PSHE CPD programme, was training teachers, health professionals, police officers and Youth workers to successfully support each to improve both health and education.

In 2008, the then Labour government announced that PSHE was to become statutory, but a general election was called and statutory PSHE was lost in the ‘wash up’; Government funding for the National Healthy Schools and national PSHE CPD programmes was cut.

Five years later, ‘Not yet good enough’ (Ofsted, 2013), reported that even in ‘good’ and ‘outstanding’ schools, the quality of PSHE education ‘required improvement’ or was inadequate in 40% of schools in England. Where PSHE was weaker, homophobic and disablist language was commonplace; pupils’ personal and social skills, were poorer and pupils had gaps in their knowledge and skills, in aspects of safeguarding, especially is issues of personal safety, mental health and alcohol misuse. The same report lamented that failing to provide high quality, age-appropriate SRE could leave young people vulnerable to exploitation and lacking the skills to be able to make safe, healthy decisions.

Research suggests that as much as 8% of the variation in pupils’ attainment could be attributed to teacher wellbeing (Briner and Dewberry, 2007) However, the Department for Education (DfE) (DfE, 2016) suggest that record numbers of teachers are leaving the profession and clearly staff wellbeing is an important contribution to the health, learning and achievement of children and young people.

By the end of 2016, five different cross-party Commons select committees, PSHE experts, teachers and their Unions and parents’ groups, had all separately recommended that PSHE, including SRE, should be statutory.

The wellbeing of children and young people is influenced by a range of factors, including the social, physical and psychological aspects of their lives (Bowling, 2011). Schools are therefore an essential setting for promoting health, especially as their emotional wellbeing contributes to pupils’ ability to achieve their academic potential (Gutman and Vorhaus, 2012).

The Chief Medical Officer's annual report 2012 noted that: “…promoting physical and mental health in schools creates a virtuous circle reinforcing children’s attainment and achievement that in turn improves their wellbeing, enabling children to thrive and achieve their full potential.” (Brooks, 2013)

The reciprocal benefits of improving leaning and wellbeing are clear as academic achievement has a strong positive impact on the subjective sense of life satisfaction that children perceive and is linked to improved wellbeing in adulthood (Chanfreau et al., 2013). The corollary is this is that pupils’ overall wellbeing impacts on their behaviour and engagement in school and their academic achievement (Buck et al., 2008, Murray et al., 2007).

Despite this strong evidence, PSHE is not statutory in maintained schools or academies, and children in primary schools are at the whim of governors as to whether they even have a policy on teaching any aspects around puberty, menstruation or relationships education.

It is unforgivable that children who might be subjected to sexual exploitation are not taught the vocabulary to condemn their abusers, or that young women start their periods without an adequate understanding of what is happening to them.

**The future: some hope**

On 1st March 2017, The Secretary of State for Education announced plans for two new statutory subjects for all state-funded schools in England: ‘relationships education’ for primary schools and ‘relationships and sex education’ in secondary schools. The ‘statutory guidance’ for schools about teaching ‘Relationship (just the one?) and sex education’ (DfEE, 2000) was written in the last century, which is clearly outdated, not least because online pornography, sexting and on-line...
safety were not even thought of. Just as there is little point in having a trigonometry syllabus without a mathematics curriculum, amendments to the Children & Social Work Bill will also allow the government to make PSHE education statutory in all state-funded schools in England – primary and secondary, maintained and academy – as from September 2019.

Detailed prescription of content is unlikely, but evidence-based, theory driven programmes must be encouraged to meet the current and future needs of children and young people. Educators, parents and pupils must engage with other stakeholders, including Public Health, academics and politicians to ensure that the interests, wellbeing and attainment of children and young people are at the fore, to ensure that they can keep themselves safe, promote wellbeing and enable them to flourish in every aspect of their lives.

Whole-school, developmental curricula are needed to help children and young people learn essential building blocks for physical health and emotional wellbeing. For example, it would be wholly inappropriate to talk to young children about sexually transmitted infections, but understanding why we wash our hands after going to the toilet helps even the youngest children to learn that infection can be passed between people that we each have responsibility for own health, and that of others.

As they mature, we must also teach young people how to deal with pornography, consent and contraception, in ways that promote diversity and inclusion and create more emotionally literate, resilient communities and society.

Effective ‘relationships education’ is not confined to intimate relationships. A significant majority of young people will go to into ‘customer-facing’ employment and relationships education must teach them how to collaborate and work successfully in groups; to develop positive long-lasting relationships with people who look, love or worship in ways that are different to them.

Increasingly, relationships will happen on-line and we must ensure that enabling children and young people to stay safe on-line, is not a deficit model, but promotes digital citizenship, based on values and skills that promote safe but effective communication.

Hard-pressed schools must be supported to fund adequate staff training and enabled to find time in an already busy curriculum to recognise the importance of PSHE, within wider reform of the curriculum and assessment.

Children and young people deserve, and have a right to values-based education that promotes their SMSC development and their emotional wellbeing and helps them to stay safe and use digital communication effectively. Children and young people need all adults concerned with their health, wellbeing and achievements to actively contribute to the forthcoming consultations and curriculum opportunities. They deserve nothing less.

References


The journal, published by SHEU since 1983, is aimed at those involved with education and health who are concerned with the health and wellbeing of young people. Readership is worldwide and in the UK include: primary; secondary and further education teachers; university staff and health-care professionals working in education and health settings. The journal is online and open access, continues the proud tradition of independent publishing and offers an eclectic mix of articles.

Contributors (see a recent list) - Do you have up to 3000 words about a relevant issue that you would like to see published? Please contact the Editor.

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NAHT / PHE. (2014). The link between pupil health and wellbeing and attainment A briefing for head teachers, governors and staff in education settings. PHE publications gateway number: 2014491


