STEER EDUCATION

November 2025

After the Storm

Young People's Mental Health in the UK 2016 - 2025

How a pandemic crashed young people's mental health and how UK schools responded

- **11-18 year olds**
- **275 schools**
- **270,000 students**
- **Pre-pandemic to post-pandemic data between 2016 - 2025**

A Decade of Data

A report published in recognition of the 10 year anniversary of STEER Tracking, a national programme of proactive student mental health safeguarding.

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About STEER Education

STEER Education provides an award-winning mental health platform used by schools across the world. Founded a decade ago, STEER empowers schools to strengthen student and staff protective factors using our market-leading social-emotional tracking technology, personalised action plans and proven training programme. Developed in the UK with the evidence of peer review and independent research, STEER puts data-backed guidance at the heart of a school, enabling teachers to find and act on wellbeing risks earlier, faster and more effectively without adding to teacher workload.

Since 2016, STEER has tracked and supported over 350,000 students in primary and secondary schools across state, specialist and independent sectors.

Data privacy

In accordance with the UK GDPR, STEER uses aggregated and anonymised data for ongoing research with findings published on the STEER website. Participating schools are acknowledged at the end of this report. STEER receives fees from participant schools for its associated services.

A word from the authors

2016 was a tumultuous year for the UK. Leicester City won the Premier League title with odds of 5000-1; Queen Elizabeth celebrated her 90th birthday. Most significantly, the British people voted to leave the European Union on June 23rd. In education, under Michael Gove's reforms, GCSEs changed from an A-E to a 1-9 grading system. Beyond the academic, challenges facing young people's mental health were growing; the CAMHS system was starting to creak.

However, looking back, 2016 now seems a distant memory and a different world. The intervening years have thrust unparalleled events upon us; a global pandemic, European wars, economic crises.
These in turn have resulted in unforeseen social-emotional challenges for young people: school closures, lockdowns, the surge in social media, the intrusion of smart phones into every corner of life, a rise in gaming, explosion of AI, climate crisis and political destabilisation.

A world that looked relatively benign and optimistic in 2016 now looks battered and ominous in 2025. This report attempts to capture some of the effects of these vast societal upheavals on young people's social-emotional wellbeing. It also tries to evaluate some of the ways schools have responded to these mental health challenges; which responses have been effective, which less so.
As well as looking backwards, we also try to look forwards. Where are we heading? What challenges lie ahead? In drawing lessons from the past, we try to equip ourselves, our students and our schools for the future.

We have structured the report into insight sections that unpack the major student mental health findings from our 10 years of data. Embedded in the report are also shorter, applied recommendation sections from which teachers can get the main takeaways for their practice.

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REPORT HIGHLIGHTS

- **The pandemic super-charged existing mental health concerns and catalysed new types**
- **Adolescent girls were particularly affected, exhibiting a pattern of self-regulation termed internalised control, with linked mental health disorders.**
- **Schools provide weaker protective factors for good mental health today than before the pandemic, indicating weaker school belonging**
- **Transitions are a point of acute vulnerability, in particular the 11+ transition for girls**
- **A surge in boys' over-regulation, exceeding girls' after puberty, points to uncertain and even hostile societal factors toward which boys become vigilant**
- **Neurodiversity may have become over-diagnosed, pulling strain on services**
- **There is now clear evidence that universal and reactive wellbeing provisions are ineffective and may even be damaging**
- **By contrast, proactive targeted wellbeing provisions are effective and scalable**

REPORT CONTENTS

GLOSSARY

Dysregulation	The event, context, incident or sustained strain which triggers an adverse fluctuation in self-regulation to a polar bias
Internalised control	A pattern of low Self-Disclosure, high Trust of Self and low Seeking Change which has a particular set of negative psychological risks
Over-regulation	Conscious, effortful and constant self and social monitoring which if sustained, can lead to sudden dysregulation
Polar bias	A steering bias which is fixed as either high or low in every situation One of the four factors students self-regulate.
Seeking Change	The degree to which a student seeks or limits change
Self-Disclosure	One of the four factors students self-regulate. The degree to which a student shares thoughts, ideas, questions, and feelings with others, or keeps them private
Self-regulation	The healthy ability to purposefully adjust how we respond in different social-emotional situations and interactions.
Steering bias	An unconscious pattern of response that shapes a student's actions, reactions, and interactions
Trust of Others	One of the four factors students self-regulate. The degree to which a student is socially-trusting or socially-questioning
Trust of Self	One of the four factors students self-regulate. The degree to which a student is self-trusting or self-questioning

INTRODUCTION AND METHODS

Introduction to the STEER Tracking Programme

The STEER Tracking programme was launched in the UK in 2016. From its inception, the programme had the ambitious aim of helping schools to track and support students' social-emotional development. To achieve this, STEER built a pioneering assessment method, based upon our well founded research into how the brain navigates social-emotional situations. The science, peer reviewed subsequently in 2024, led to the construction of a technology enabling schools to assess their whole student population quickly, reliably and regularly. Most schools adopted a regime of whole school assessments termly, or biannually, using the data, STEER reports, and guidance to support students identified as vulnerable.

As an outcome of this, STEER built up a large body of chronological data. When the pandemic struck in 2020 and schools were locked down, many schools continued to run their STEER assessments virtually. This has allowed us to gather a relatively unbroken record of the social-emotional journey of students aged 11-18 since 2016 to the present day.

Data sample

Data included in this report was gathered from 278 schools for year 7-13 students. The sample included 51% girls, 49% boys. Schools self-selected to participate as part of a commercial programme o ered by STEER Education to track and improve student self-regulation. In-school student cohorts were selected to be tracked by schools according to time and financial resources. STEER did not specify specific groups to track over others to any school. State academies reflected a wide diversity of affuence if measured against FSM data. No particular design in cohort selection was used.

Data collection method

Data for this report was collected in termly assessment rounds. Participating schools either assessed twice or three times/ year. Students completed the STEER Tracking assessment at each assessment round. The STEER Tracking assessment was developed over a 15 year period to overcome the problems associated with student welfare self-reports. The principle advance within STEER Tracking is the measurement not of a student's direct perception of their own wellbeing via direct item questions, but by measuring the student's pattern of self-regulated a ective-social biases. STEER developed a novel assessment process to achieve this, which students find both accessible and often enjoyable, and has been shown to provide accurate insight into data otherwise not available from students. STEER's development research programme from 2012-15 showed that pa erns of self-regulation correlate 82% with specific wellbeing and welfare risks.

STEER's Data Model of Socio-Emotional Self Regulation

STEER Tracking uses a four factor model of socio-emotional self-regulation: Self-disclosure, Trust of Self, Trust of Others, and Seeking Change. These are measured through a 32 item instrument. 16 items assess a student's generalised or out-of-school self-regulation. 16 further items assess a student's in-school self-regulation (whether virtual or on site depending on the provision at the time). See Fig 1.

By comparing the two sets of data, the effect of school as a context which impacts student self-regulation can be quantified. The significance of these factors for healthy adolescent social-emotional development has been articulated by the assessment authors.

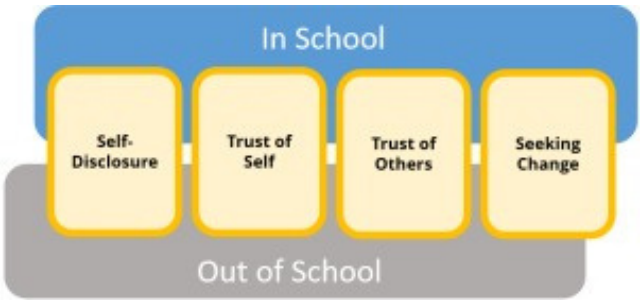

Figure 1.

The ability to socio-emotionally self-regulate is the *healthy ability to purposefully adjust how we respond in different social-emotional situations and interactions.* It can be thought of as a kind of social-emotional steering, allowing a person to navigate varied contexts, interactions and situations. It is a wider concept than the narrow model of *emotional regulation*, which describes how a person specifically manages feelings of high valence and heightened emotional mood.

The ability to socially-emotionally self-regulate a critical skill underpinning mental health, social competencies and the ability to access learning. Self-regulation is expected to improve over maturation but can be adversely affected by events in a child's life. The STEER assessment measures fixed patterns in the four factors which, if they become entrenched and iterated, reduce the ability of a child to respond appropriately to the situation around them. The ability to self-regulate is also contingent upon the 'effect of the road'. School is a road; home is another road. Contexts such as home and school have a quantifiable impact on the biases a child develops. Tracking the changes in a student's self-regulation, therefore, exhibited both in school and outside, can give an indication of adverse but hidden changes in those environments, often highlighting hidden safeguarding concerns.

This report is based on STEER's data, and therefore, a specific data model of social-emotional development. There are many other measures and surveys of wellbeing which may inform and fill out this story more widely which we do not report on.

RESULTS AND COMMENTARY

2016-2020 Rising Concerns

Although the pandemic accelerated today's adolescent mental health challenges, historically, concerns were growing already prior to 2020.

For example, according to the Children's Commissioner, waiting times for a young person to access the Child and Adolescent Mental Health Service had risen from 33 days in 2015 to nearly two months by 2018.

This rise prompted the government to commission a Green Paper on improving early identification and intervention of mental health concerns in schools in 2017. Interestingly, concern was focused towards economically disadvantaged populations and those with gender identity concerns. Looking back, the sense that mental health was a generalised population concern was limited.

STEER's own data from 2016 to 2020 indicated a modest increase in poor adolescent self-regulation. However, what is notable is that any rise in these years is dwarfed in scale and speed by what happened in 2020 and the Covid lockdown era.

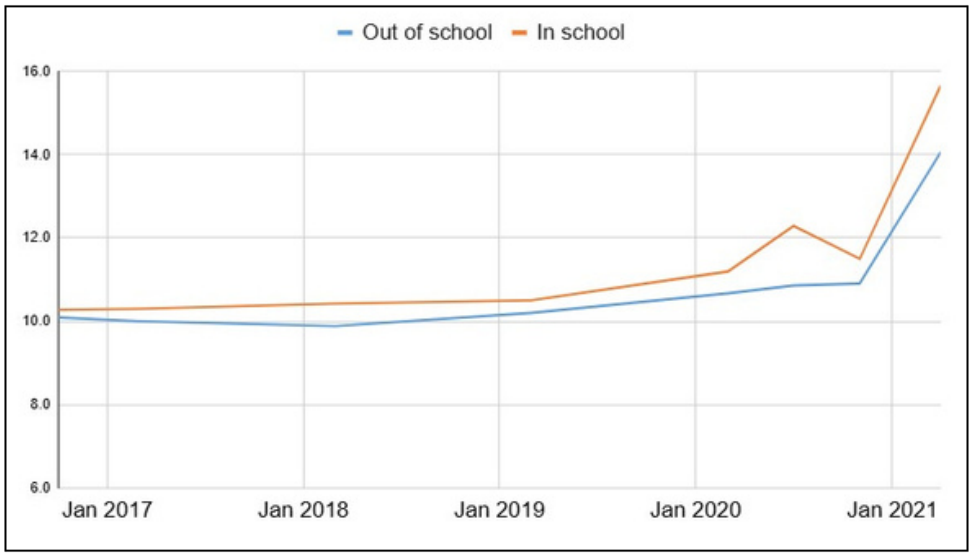

Figure 2. Percentage of student self-regulation which falls into the STEER category of polar or high risk

Figure 2 shows how the percentage of vulnerable students dramatically and rapidly surged during the pandemic years compared to the previous pre-pandemic years. Both state and independent sectors saw increases in vulnerable students (by 21% and 15% respectively) between 2020 and 2021. STEER's data showed that this increase was not just situational but persisted to a large extent through 2022 and 2023. The experiences of the pandemic changed the ability of a cohort of young people to socially and emotionally self-regulate in a more entrenched way. .

2020: The Pandemic Storm

A surge in vulnerable adolescent girls

Girls and boys were not affected by lockdown equally. Girls, and specifically those aged 11-18, were particularly affected socially and emotionally by lockdown restrictions (Figure 3).

A number of factors have been proposed focusing on how aspects of lockdown may have be er supported boys than girls.

- Restriction of social meetings to 1:1s may have had a positive effect on male social interaction, for example, in increased openness. By contrast, wider studies have shown that girls can co-ruminate in 1:1 relationships, which increases anxiety and unhealthy thinking.
- Boys may socialise online through gaming, and use social media actively to message or set up tasks and activities; they could continue to do so during lockdown. Girls by contrast are more likely to engage in passive social media, scrolling and viewing material in quantity which is known to increase anxiety.
- In addition, non-task social interactions in groups were prevented, affecting girls more.
- Finally, there is some evidence that adult males were less concerned in general about Covid than women; adolescent girls may similarly have been more anxious about Covid than boys.

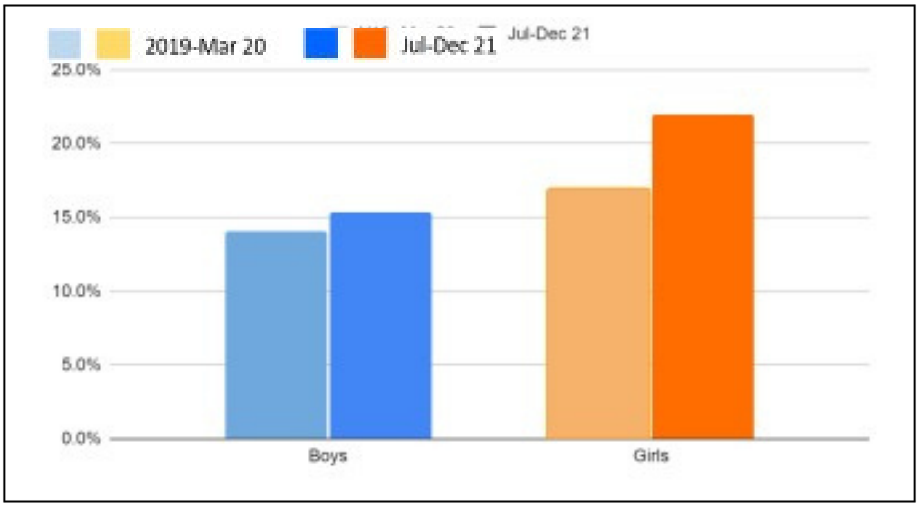

Figure 3. Percentage of boys v girls with poor self-regulation in the context of school before the pandemic (2019) and at the end of the pandemic (July-Dec 2021)

This gender divide in relative vulnerability has persisted since the pandemic. It suggests that girls have entrenched patterns of behaviour which expose them to increased mental health risk factors.

Post-pandemic, schools are a weaker protective factor for mental health

School wellbeing leaders are focused on the strength of protective factors that their school provides to each of its young people. These include pastoral care, culture, tutoring, tracking, and activities which positively nurture the emotional wellbeing of a child. These are both a matter of safeguarding (at one extreme) and healthy personal development (at the other).

One way of framing this question is: *what percentage of vulnerable students does a school have a positive social-emotional impact on?*

STEER Tracking has an ability to measure this relative effect. The STEER assessment measures the social-emotional risk factors for a student both within school, and outside school. Comparing the two allows STEER to produce a metric of the *relative positive impact* a school is having, regardless of the baseline vulnerability of their cohort.

Figure 4 shows that in both independent and state sectors the positive protective impact of school has fallen since 2018. The steepest fall took place over the pandemic period and recovery is, as yet, tentative.

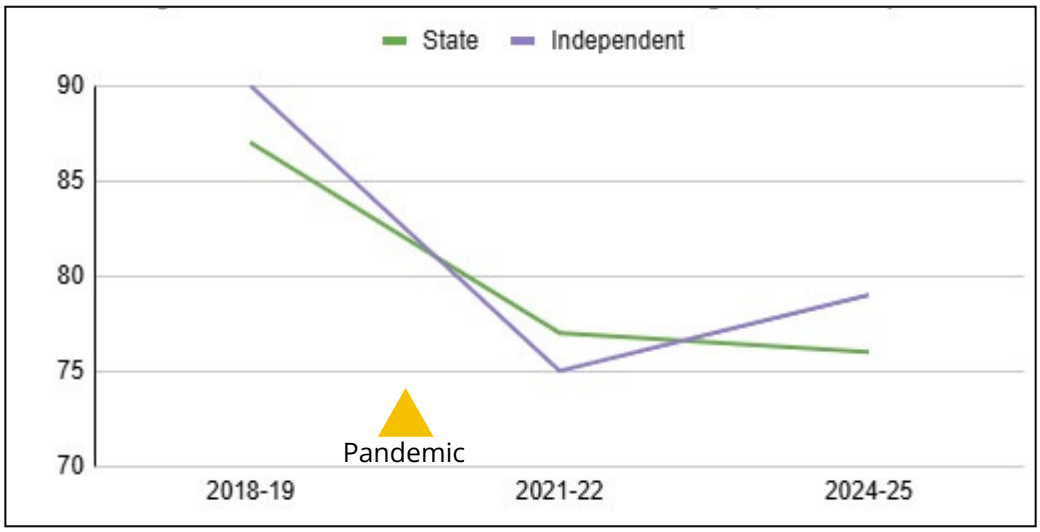

Figure 4. Percentage of already vulnerable students for whom school provides an additional protective factor

Independent schools had a positive protective impact on 90% of their vulnerable students back in 2018. This has fallen to 79% by 2025 and dropped as low as 75% during the pandemic. In the state sector schools the drop is from 87% (2018) to 76% (2025).

In summary, between 20-25% of students are not experiencing school as a protective factor in 2025 compared to 10-13% in 2018. This is not to say that these students have inevitable or immediate safeguarding risks in school. Nor is it to say that the schools are failing in their duties of care. Nor is it a reflection on the provisions that schools have in place. Rather it is a *reflection of the embedded nature of those student vulnerabilities* and how much harder it is for institutions such as schools to make a positive impact on them today.

A related piece of this puzzle is that STEER's data shows that young people have become generally more suspicious, skeptical and isolated over the past five years. This is a trend from the STEER data, which measures the extent to which students '*trust others*' (Figure 5.) as well as the trend to '*hide their thoughts and feelings*' (Figure 7), has consistently shown. It suggests students are more closed to the support that schools traditionally provide today than ten years ago.

Schools can therefore no longer rely on simply traditional provisions of tutor relationships and small classes. More targeted, sophisticated and effective methods are needed to identify and then support this cohort of young people. In the later report section *'What works and what doesn't: the evidence*' we consider the tools developed to meet this need.

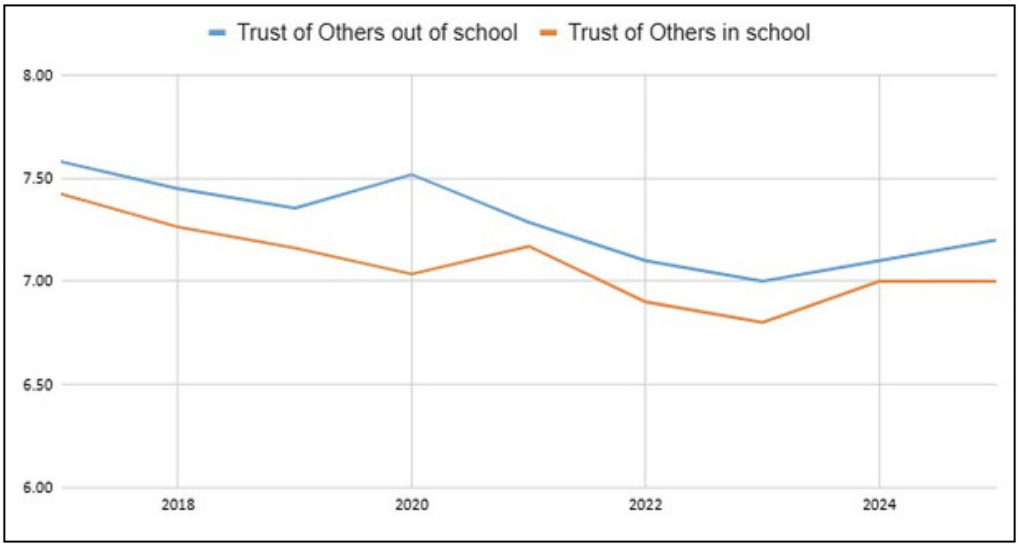

Figure 5. Mean scores for Trust of Others, one of the four STEER factors, 2017-2025 showing a trending decline both outside and inside school.

The rise of specific types of mental health risks since 2016

Mental health risks have increased as social-emotional self-regulation has declined. However, drilling into the data behind this headline, we are able to be more precise in the location and type of risk that has increased.

Increasing internalisation over externalisation

Before the pandemic 6/10 girls and 5/10 boys were what STEER terms *low disclosing* in school. To be low disclosing means that you are, in general terms, unwilling to share your thoughts, ideas, feelings and concerns. Adolescent girls, whilst talking more than boys, reveal less when they do so.

However, Figure 6. shows that this proportion rose steeply in the pandemic from 6/10 to 8/10 for girls and from 5/10 to 6/10 for boys.

Figure 6. The percentage of students hiding their ideas, feelings and concerns in school has grew during the pandemic, and has remained high for girls.

Low Self-Disclosure is associated with internalised mental health risks. Today, in 2025, only 7% of student mental health risks which STEER measures are externalised. This compares to 81% which are internalised (Figure 7). Internalised risks are less likely to be visible to teachers or professional observation and are likely to go undetected. This challenges the assumption that children who are not misbehaving, acting out or externalising concerns, are thriving.

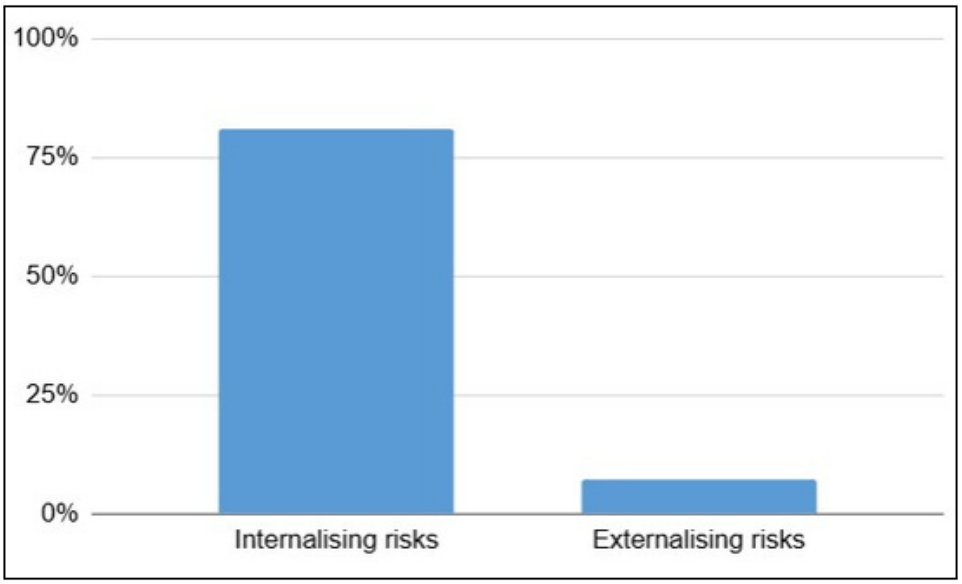

Figure 7. Percentage of all risks measured by STEER which qualify as internalised v externalised

The School Challenge: Supporting the hidden student

*Around 40% of students who are low disclosing are what STEER terms **polar low disclosing**. Being polar or extremely low disclosing significantly increases risks in the other three STEER factors- Trust of Self, Trust of Others and Seeking Change. As these four factors become entangled, a student's risks become more entrenched and run the risk of developing into a more significant pathology.*

The high incidence of students hiding their concerns means that new approaches are needed to detect early indicators of an epidemic of hidden risks. It challenges mental health approaches, such as traditional surveys, which are easily faked. Similarly, chat hubs may facilitate a kind of front stage self-presentation, which is a deflection rather than a disclosure. AI chatbots will further take a student into a privatised world.

Even excellent tutors cannot help a student committed to concealing their real concerns and needs.

In response to this, STEER recently launched a new feature designed to effectively scaffold conversation between hidden students and their tutors. The feature gives students direct personalised feedback to understand, frame and work on a mental health, learning or relationship challenge, with the support of their tutor.

The Age and Gender Groups of Most Concern

The pandemic exposed a particular period of vulnerability in the development of girls between the ages of 11 and 15.

Figure 8. shows the mean scores by age for boys and girls on a factor STEER measures called Self-Disclosure. This is the degree to which a person makes visible their thoughts, ideas and feelings. The chart is 2023-24 data and shows that, for boys, mean Self-Disclosure is largely stable from age 7-15 and then rises from 16-18. By contrast, girls' Self-Disclosure plummets from age 11 and only starts to recover at age 14.

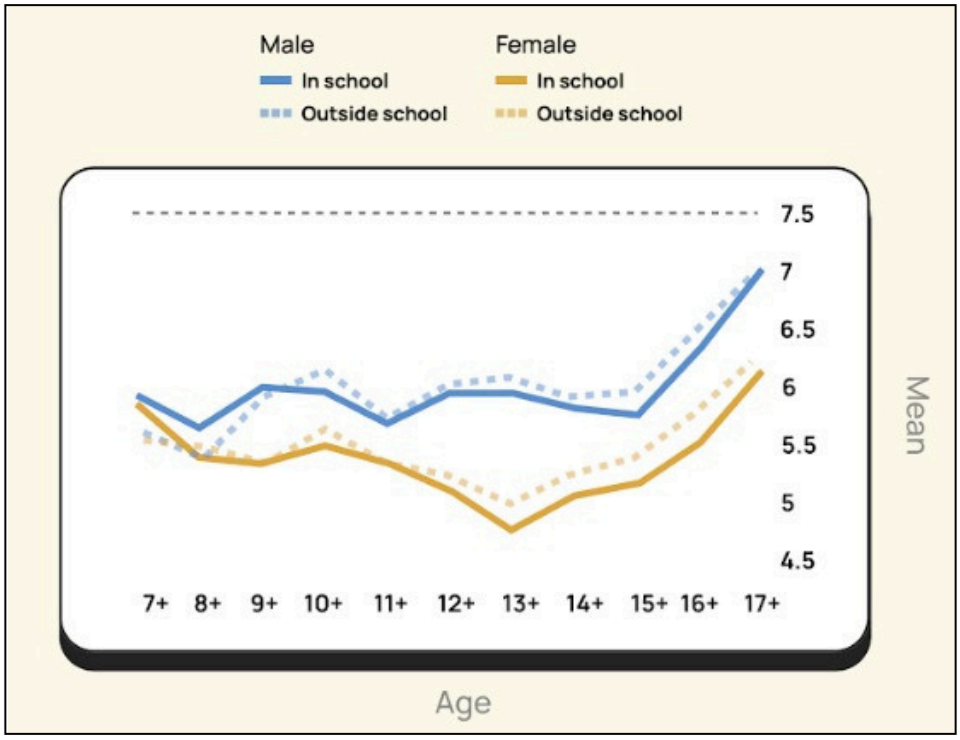

Figure 8. Mean scores for Self-Disclosure, which drop in girls during early-mid adolescent years

What is it that goes on at the age of 11 for girls? Puberty, a biological change bringing with it hormonal upheaval and social uncertainty. Transition from primary to secondary school also happens, reconfiguring stable social groups and thrusting girls out of small primary classrooms into large, anonymous secondary settings. In addition, with the access to smart phones and thus social media comes comparison with the impossible profiles of other girls, the exhausting task of managing one's Instagram presence and avoiding being excluded from your group by making an inadvertent online error.

What Schools Can Do: Supporting Girls' 11+ Transition

A recent UK study showed that 1 in 4 students transitioning to secondary school at 11+ disengages, leading to a risk of long term absence. Girls in particular at 11+ transition appear to be looking for stability and control, and are reluctant to trust the institution and peer group they are joining. This in turn, increases a sense of isolation and reduces their sense of support. The attachment to school is too weak to keep some.

Understanding this can potentially offer a signpost as to how schools can mitigate against these risk factors. Providing stronger ways to enable girls to form trusted bonds and navigate change at these key stages would seem to be central to improving school engagement.

For instance, STEER enables schools to support incoming transition cohorts at 11+ and 16+ by providing carefully personalised action plans for students who are struggling with transition. A positive impact on 8/10 students supported by STEER action plans demonstrates the value of this proactive approach.

Focus: Understanding Internalised Control

These factors of puberty, transition, and social media combine to create an environment of threat and social anxiety. STEER's data also shows it drives a sharp increase at this age in girls using strategies to be in control: control of one's feelings and one's inner state. They are exhibiting patterns of what psychologists call ***internalised control.***

Internalised control is a psychological response to an anxious, uncertain environment. When a person says "I can't control what's out there", one response is to decide, "but I can control what's in here (my thoughts, pain, food, relationships)…".

Why do we see this rise in girls' internalised control but not the same rise in boys'? Possibly boys experience these three factors differently: puberty is later, after normal 11+ secondary school transition. For boys going through puberty aged 13, 14 or 15, they are already established in their secondary schools. In addition, evidence suggests that boys use the internet and social media differently, to message and game more than to scroll and compare.

Internalised control has specific psychological risks for a young person, in particular when established over time. These include stress-related difficulties, including: anxiety because of pressure on self; hidden perfectionism; unhealthy personal control; fixed patterns of thinking; being drawn to fundamentalist versions of truth; and self-soothing, such as controlled behaviours such as controlled eating.

An Increasing Concern: Over-regulation in Both Boys and Girls

Another increase seen in STEER's data since 2017 is the incidence of a pattern termed 'over-regulation'.

If self-regulation is the healthy management of one's social-emotional interactions, ***over-regulation*** is the fixation or hyper-vigilance upon maintaining and managing them. One can think of a young person caught in a state of perpetual backwards rumination and future rumination; reviewing what they have just done, and planning what they should do next. A cognitive state of never being fully present now.

Since 2017, independent schools have seen a 26% increase in the incidence of over-regulating students. Nearly 1 in 6 students aged 11-18 now exhibit this pattern; a figure interestingly 20% higher than in the state sector, suggesting that there is a sociogenic component to it.

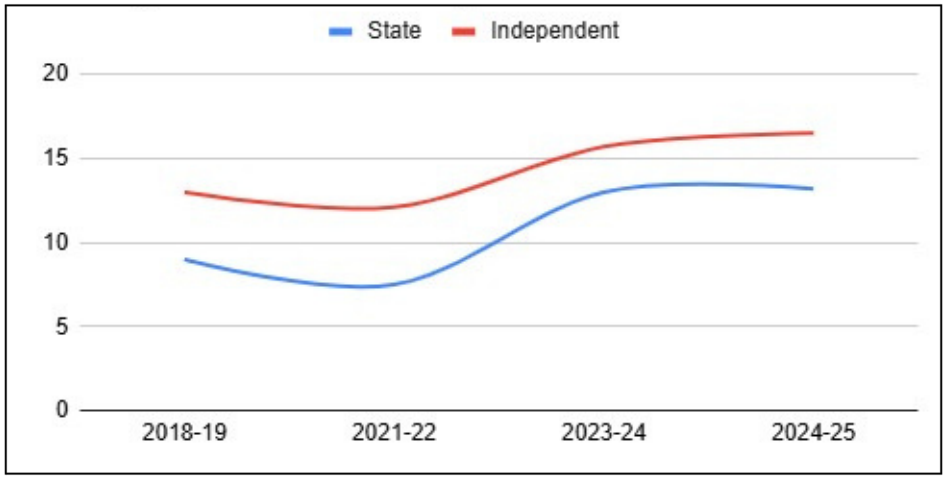

Figure 9. Percentage of students who over-regulate in state vs independent sector UK schools

The chart indicates that the surge in over-regulation was associated with the pandemic and has maintained that level since. Moreover, data indicates that over-regulation climbs after the age of 11 and peaks at age 16. There is some evidence it increases in public examination terms.

Importantly, over-regulation is higher in boys than girls during adolescence (Figure 10). This means there will be gender-specific drivers. Jonathan Haidt has written extensively about the decline of physical activity, sport and healthy risk taking amongst adolescent boys. He cites the safetyism culture in which boys cannot learn from the same risks in the real world and instead substitute them with risks in the online world, anonymously.

In his book The Coddling of the American Mind, Haidt suggests that 'cancel culture', especially around traditional male stereotypes, makes boys uncertain how they can legitimately explore and express their masculinity. Trying to avoid being cancelled on social media, but without permission to talk about their own mental health concerns openly, may be behind the rise in teenage male over-regulation.

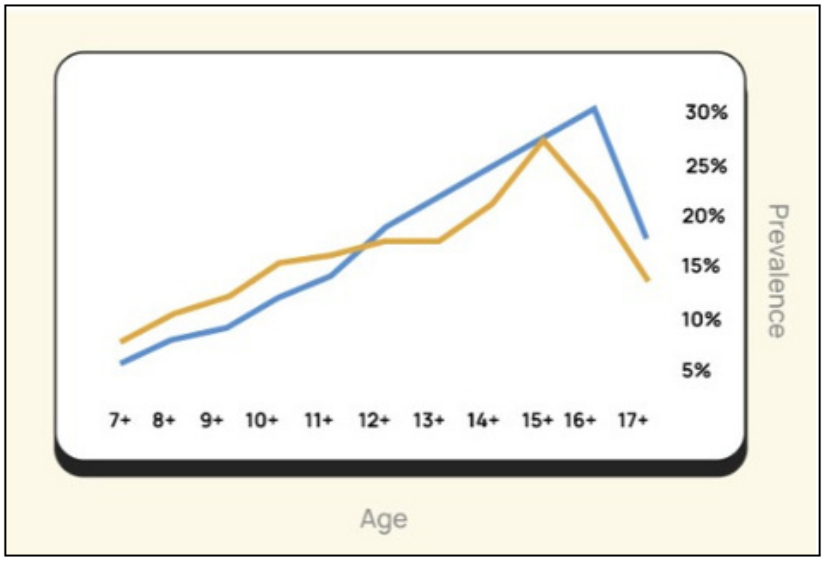

Figure 10. Over-regulation trends upwards in both boys and girls from the age of 7 to 16 before falling after GCSEs. Importantly, around boys' puberty (ages 12-14) over-regulation surges above girls'.

The consequences of over-regulating in the long-term are significant: anxiety, distraction, poor sleep, headaches and tummy aches, and risk avoidance. One implication for schools is that it is important not to dismiss such symptoms or simply instruct boys to 'man up'. Developing healthy masculinity in boys is not simply a question of demanding it; boys today face unique and unprecedented social pressures, requiring coherent and informed support.

Case Study: How One Boys School Tackled Over-regulation Head On

In 2023, Michaelhouse, a leading South African boys school, identified through their STEER Tracking data, that more than 1 in 3 boys were over-regulating. The pastoral leadership put together a wide-spread long term plan to address this concern. Adapting strategies and guidance from STEER, they designed and implemented a programme involving changes to timetables, assemblies, tutor practice and culture that led to dramatic and sustained results. Over-regulating fell from 36% in 2023 to 29% in 2024 and to 18% in 2025.

Tim Jarvis, Senior Master, explained, "If over-regulating is the social-emotional equivalent of continually driving on dangerous, busy roads without ever getting a chance to park the car, working with STEER helped us identify which stretches of road were most difficult for boys to navigate in our school. This made us more aware and intentional about the language we use with our boys, the expectations we place on them, and the demands of their schedule. We have worked hard to slow the journey down, and create more pit stops at the right time for the students who need it most."

Neurodiversity Over-diagnosis

A final feature of the change in mental health landscape since 2017 has been the dramatic rise in diagnosis of neuro-diverse conditions. According to one Nuffield report, there has been a 1000% increase in patients waiting for an autism diagnosis since 2019. The Children's Commissioner reports that in 2024 more than 400,000 children were waiting for an ADHD or autism diagnosis.

Explanations for the rise are multifactorial, however, the role of social media is implicated. A plethora of websites now offer young people the opportunity to self- identifying with a neurodiversity diagnosis. Having a label may be driven by seeking a sense of belonging and amplifying a sense of self-validation.

Self-diagnosis and unregulated clinical diagnosis have widened the concept of neurodivergence. Concerned parents seeking causes for their child's struggles may seek an explanation in a diagnosis which, 10 years ago, would not have met the criteria.

The associated costs with supporting such a large cohort are unsustainable to the state. STEER would argue this may also undermine the drive for the young person themself to take responsibility for their own self-development**.** Indeed, STEER's data helps schools to understand the underlying social-emotional steering that may be contributing to a neuro-diverse concern. Whilst additional support may be appropriate, more intentional signposting can create opportunities on the everyday chool road for all children to develop healthy social-emotional steering, regardless of their neurodiversity diagnosis. One alternative approach is to invest in young people's social emotional steering, regardless of diagnosis. The tool developed by STEER does this by giving practical, low level signposts that tutors can use to scaffold and strengthen their tutee's healthy steering.

Case study: Supporting SEND students' agency to address their own social-emotional needs

One school in England used STEER data alongside parent and teacher observations to get a deeper understanding of students and their specific needs. This enabled them to be more proactive in flagging students who may have undiagnosed Autism and ADHD. Before accelerating a diagnosis referral, the SEND team used the STEER action planning toolkit to resource and upskill parents and teachers with strategies that can be used at home and school to help a student steer more effectively in their learning, relationship and mental health. When making a neurodiversity referral, the school used STEER data and commentary to inform their supporting evidence.

What Works and What Doesn't: The Evidence

Since 2016 a wide range of wellbeing provisions have emerged on the school wellbeing market. We evaluate the evidence for different provisions and where they contribute to a school's suite of resources.

School mental health and wellbeing provisions can be categorised on a matrix as either reactive / proactive, and either universal / targeted. Reactive tools are designed to help schools respond better to a need that has been identified. Proactive tools are designed to help prevent, or reduce the incidents of, mental health challenges. Similarly, targeted tools deliver tailored approaches to specific cohorts or individuals, whilst universal tools deliver the same messages to all students. Taught PSHE lessons are an example of universal proactive provision, whilst 1:1 counselling is an example of a reactive targeted provision.

Using the matrix we can locate four different types of tool or resource available to schools. We can then consider the evidence and use for each category in turn.

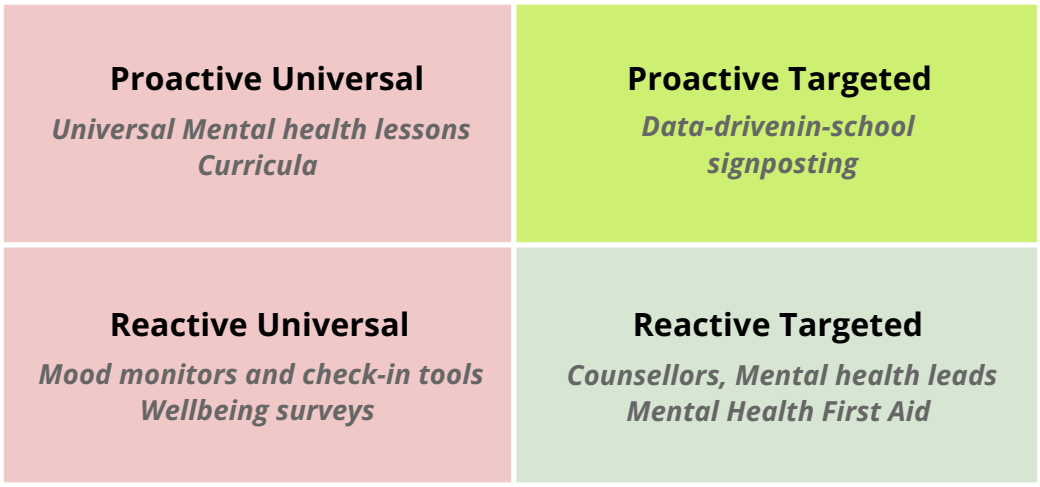

Figure 11. Wellbeing provisions can be plotted on a carroll diagram with dimensions of reactivity-proactivity and universal-targeted.

Reactive universal provisions: *Overall evidence rating* – –

Whole school wellbeing surveys

Digitised school wellbeing surveys such as Beewell, SDQ, Stirling Wellbeing Inventory and The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) offer schools an overview of wellbeing concerns.

However, because the reliability of data falls when students are asked to add their names, they are usually anonymous. This means that, whilst they can highlight cohort trends, they do not help in supporting individual students.

Additionally, recent concerns have been raised in government policy debate about the negative effects of asking children about their wellbeing risks.

Mood monitors

In contrast to longer surveys, brief check-in tools enable students to register how they are feeling on a daily, or very frequent, basis. They may include tapping an emoji face or responding to a small number of mood questions.

The benefit for a school is that these can provide immediate student reaction to specific incidents, or their collective mood in the moment.

The drawbacks are that, anecdotally, student engagement has proved difficult to sustain in the longer term. Repeated, daily tapping leads to fatigue and data quality collapse. Some argue that moods themselves are too fleeting and volatile to be of much use to schools; tracking them leaves teachers chasing ripples of feeling. Constantly prompting the review of one's mental state may in fact simply exacerbate the over-regulating hypervigilance we have noted is on the rise.

Proactive universal provisions: *Overall evidence rating* –

Wellbeing, mindfulness and healthy psychology programmes

Curricula have been developed to educate and inform students about mental health, risks, and healthy practice. These include lessons and training in mindfulness, good sleep, risks of gaming, understandings of anxiety, depression, and disorders. As places of teaching, bringing in universal mental health programmes appears a natural and suitable contribution to a school's offering. This confidence led the Welcome Trust and EEF to jointly invest £6 million in a 6 year research programme to study the effects.

The study outcomes, published in February 2025, however resulted in surprising conclusions: such programmes have little or no sustained positive effect and, for a number of cohorts, can be negative.

Other studies have similarly recently reported little or no positive impact from a range of programmes. The current status is that such universal programmes are recommended to be stopped to prevent adverse effects until further data is available.

Reactive targeted provisions: *Overall evidence rating* +

In school specialists: Mental Health Leads and counsellors

Many schools now employ in-school professionals with specialist skills and training to support students 1:1 or in small groups through interventions. Government funding has been available since 2021 to train a Mental Health lead in each state school.

The challenge is one of scale and capacity. Data suggests that 20% of young people identify with a mental health risk. Even if this is an exaggerated figure, 10% or even 5% would mean 75-150 needing support in a typical state school. Independent schools have greater resources; counsellor to student ratios are lower.

However, the chief limitation is not only expense but reactivity. By design, only students in acute need seek out such support, by which time the problem may be quite entrenched. Earlier identification could allow lower level support, which is both more time and cost effective.

Mental health first aid

Many schools now train staff to respond to acute mental health concerns amongst students e.g. anxiety, self-harm, suicidal signs. This increases the 'eyes' upon acute wellbeing incidents and can dramatically speed up response times. Inevitably, mental health first aid is reactive, responding to the 'crash scene'.

Mental health first aid can serve as a vital provision, even as common sense suggests it is better to prevent the crash than respond to it.

Proactive targeted provisions: *Overall evidence rating* ++

Proactive targeted signposting

Targeted proactive signposting relies on tracking the thinking patterns which precede and lead to explicit mental health risks rather than the behaviours themselves. By detecting earlier thinking patterns, teachers can be guided to give specific opportunities and activities to particular children through the ordinary course of the school day. These can act as 'signposts', enabling a student to learn how to steer themselves back onto the road, to reinforce healthier social-emotional interactions, and to reduce the risk of a future mental health crash occurring.

Case study: Evaluating the efficacy of STEER

A 2024 control study of 19 schools found that those using STEER's proactive targeted signposting reduced their student mental health incidents more than those who did not. STEER schools also improved student engagement three times as much as in control schools. Tutors who used STEER's targeted student action plans also reported twice the confidence in responding to student mental health concerns than those relying on existing training.

The independent unpublished study was conducted by ImpactEd and funded by a UK MAT.

Where is mental health heading in the next 5 years?

In this final section, we provide a brief consideration of how mental health challenges in schools are likely, in our view, to evolve in the coming five years.

Over-regulation: A Growing Concern

We anticipate that over-regulation will continue to grow due, primarily, to the continued pressures of social media. Independent schools may find addressing over-regulation both a challenge and an opportunity.

The challenge comes from sector-specific sociogenic factors which contribute to increased over-regulation: parental and exam pressure; busy timetables; extended school days. At the same time, through greater unstructured time, especially in boarding schools, independent schools have a greater opportunity to reduce over-regulation.

STEER has endorsed approaches using unstructured time, to provide an effective context for developing healthy adolescent self-regulation.

SEND: A Need Requiring a Different Approach

A continued low bar to neurodivergent diagnosis will remain both a challenge and opportunity for schools.

Demand for specialist schools to meet this need is likely to grow. At the same time, a tension will exist between seeing neurodiversity as a ‘superpower to welcome’ vs a ’limitation to overcome’. We anticipate a divergence between schools which frame the discussion as the former and those that frame it as the latter.

STEER encourages a constructive debate about the SEND framing, based on an approach where all children build agency and resourcefulness rather than dependency on additional support.

AI: An Alluring Solution Fraught with Concerns

As AI-based technology rapidly grows, we foresee two main routes by which investors seek to insert AI into adolescent mental health. First, the industry of AI therapeutic companions, which offer young people a non-human interaction mimicking human:human interaction, will grow.

STEER has developed a three A lens through which to understand the impact of AI. This can be accessed here. At its broadest, the choice society has is to either protect and strengthen the value of human:human relationships, or to cede them increasingly to human : machine relations.

Second, AI surveillance tools which provide sophisticated safeguarding / mental health monitoring are also likely to increase.

STEER's position is that broadly, increased student mental health surveillance will lead to increased psychological internalisation which in turn will likely amplify the surge in internalised mental health risks the sector is already struggling with. AI companions pose a risk to human:human relationship as well as harming young people through in-built sycophancy, hallucination and encouragement.

Soft Skill Development: An Urgent Need Requiring Investment

As AI renders further white collar skills redundant, we anticipate an increasingly urgent need to define, defend, and develop skills which can be said to be uniquely human. Uniquely human skills are those which emerge from the human mind and body through fundamentally different cognitive and embodied processes to machine thinking. They can be said to be unique to the human species even if machines evoke, echo and mimic them through illusory means.

Schools provide the formational context for future citizens to acquire the skills that society needs. We anticipate an increasingly deep review of the school curriculum and learning outcomes to meet these needs. Developing a skillset to use AI-based tools is relatively trivial. Much more demanding will be maintaining skills which otherwise will be eroded by reliance on machines.

STEER's position is that human : human social-emotional skills are critical to preserve. They form the bedrock of healthy human relationships, families, communities, businesses and societies. Such skills which previous generations took for granted, learned through everyday familiar interactions, may need to be explicitly trained in a school context in the near future.

Seeds of hope?

In 2023 the average wait times in England for a CAMHS appointment stood at 392 days in 2023. There are reasons to be gloomy about our response to the mental health storm from 2016-2025. However, there are also several reasons to be hopeful.

> ***"Now is the moment for our schools to nurture that beautiful but most fragile fabric of life; the life of a child."***

We now know more clearly which cohorts have been most affected by the events of the past decade, and in what ways. As such, we are in a much stronger position to target effective support where it is needed proactively rather than reactively.

We now know some of the main causal factors behind increased mental health concerns. Steps such as reducing smartphone use, reinstituting unstructured time, and increasing real-time human : human interaction are fully achievable.

We now know which provisions make a positive impact and which are less effective. Rather than throwing mud against the wall and hoping that some sticks, we can be more forensic in our approach. We need to review things which may be well-intentioned, but inadvertently create harm, such as universal wellbeing lessons, mood monitors, and wellbeing surveys. We need to scale and implement approaches that build resilience and protective factors such as proactive targeted signposting. Best practice can be shared and lessons passed forward.

We can see the future that lies ahead. The pressures to reduce teacher : tutee time, to outsource care to AI bots and to rely on digital wellbeing and safeguarding surveillance can be resisted through clear-sighted leadership. In short, now is the moment to stand up for what makes humans human and education education. We need schools more than ever to lead the way as they nurture that beautiful but most fragile fabric of life; the life of a child.

We are grateful to all of the following partner schools through whom we have built this research.

Abbots Hill
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Ashford School
Ashingdon Primary Academy
Australian Intl School (AIS)
Avonbourne Boys' Academy
Avonbourne Girls' Academy
Avonwood Primary School
Aylward Academy
Aysgarth School
Bancrofts School
Barnard Castle School
Barnsley Academy
Barton Hill Academy
Beacon Academy
Bede's Prep School
Bede's Senior School
Beit Yaacov
Benenden School
Berkhamsted School
Bexleyheath Academy
Bishop Justus CofE School
Bishop's Stortford College
Edgeborough School
Ellesmere College
Embley
Esland Grantham School
Estuary Academy North
Farleigh School
Farringtons School
Felsted School
Feltonfleet
Fettes College
Fettes College Guangzhou
Feversham Primary Academy
Firth Park Academy
Fishponds Church of England
Forest School
Four Dwellings Academy
Four Dwellings Primary Academy
Fulham School
Furlong House School
Garstang Community Academy
George Watson's College
Giggleswick School
Glenalmond College
Glenmoor Academy
Godolphin
Grange Primary Academy
Greensward Academy
Lift St James the Great
Lift Unity City
Lift Utterby
Lincoln Minster School
Llandovery College
Long Close School
Longacre School
Maltings Academy
Malvern College
Malvern College HK
Marlborough House School
Marsden Heights Community College
Mayfield School
Meadstead Primary Academy
Melbourne Grammar
Meoncross School
Me'or High School
Michaelhouse
Millfield School
Minds Ahead
Mirasur Intl School Madrid
Monkton School
Montgomery Academy
Montgomery Primary Academy
Moulsford Preparatory School
Mount Kelly
New Rickstones Academy
St Margaret's Preparatory School
St Mary Redcliffe C of E Primary
St Mary's School Ascot
St Mary's School Calne
St Paul's Girls' School
St Paul's Sao Paulo
St Paul's School
St Peter's School
St Ronan's School
St Stithian's Boys School
St Teresa's School
Stamford American Hong Kong
Stamford American Singapore
Stoke City Academy
Stowe School
Streatham & Clapham High Schoo
Summer Fields School
Sunderland AFC Academy
Surbiton High School
Tamworth Enterprise College
TEMS Madrid
Tendring Technology College
The Abbey School
The Albion Academy
The Aldenham Foundation
The Banda School
The British School of Paris

Bloxham School

Blundells

Bradfield College

Breaside Preparatory School

British School of Barcelona

British School of Valencia

Broadlands Academy

Brockworth Primary Academy

Bromham CofE Primary School

Bryanston School

Caldicotes Primary Academy

Campion School

Canford

Castle View Academy

Castle View School

Chafyn Grove School

Channing School

Charles Warren Academy

Charterhouse

Cheam School

Chelsea FC Academy

Cheltenham College

Christ College

Churcher's College

City of London Freemen's School

Claremont School

Cleethorpes Academy

Colchester High School

Colegio Europeo de Madrid (CEM)

Greenwood Academy

Guildford High School

Haberdashers' Aske's School

Haileybury

Hamford Primary Academy

Hampton Gardens Secondary

Hardenhuish School

Harrow

Hastings School Madrid

Hatherop Castle Prep

Hazelwood Academy

Hazlegrove Preparatory School

Headington Rye

Oxford

Hendon Preparatory School

Highgate School

Hill View Primary School

Hilton College

Hockley Primary School

Hoe Bridge School

Holme Grange School

Holy Rosary School

Howard of E ingham School

Huddersfield Grammar School

Hurstpierpoint College

Hydesville Tower School

Immanuel College

International School Saigon Pearl

Ipswich Town FC Academy

ISHCMC

Newington Academy

Newlands Academy

Newstead Wood School

Noel Park Primary School

North Bridge House Senior School

North London Collegiate School

Norwich City FC Academy

Notre Dame Senior School

Notting Hill & Ealing High School

Nottingham Forest FC Academy

Oakham School

Offa's Mead Academy

Oundle School

Pangbourne

Pangbourne College

Papplewick School

Parkside School

Pembridge Hall School

Pembroke House School

Play Pen Brazil

Plumberow Primary School

Port Regis Preparatory School

Portsmouth Grammar School

Prince Alfred College

QEH Bristol Junior

Quinton House School

Redlands

Redmaids High School

Reeds School

The Brooksbank School

The Cathedral School

The Cherwell School

The Cornerstone Academy

The Downs Prep

The Elms Academy

The Elms School

The Grange

The Green Way Academy

The Heights Burnley

The Hurlingham Academy

The Hyndburn Academy

The James Hornsby School

The King Edmund School

The King John School

The New Forest Academy

The Oratory Preparatory School

The Pilgrims School

The Rawle School

The Royal Ballet School

The Royal School

The School of Research Science

Toowoomba Grammar

Trinity Primary Academy

Trumpington Community College

Unity Academy Blackpool

University College School

Wakefield

Walthamstow Academy

Coleridge Community College
Colne Valley High School
Corngreaves Academy
Cottingley Primary Academy
Cranleigh
Cravenwood Primary Academy
Cumnor House School Boys
Cumnor House School Girls
Cumnor House Sussex
Dean Close Preparatory School
Dean Close School
Dean Close St John's
Denla British School
DLD College London
Doha College
Dollar Academy
Downe House
Downsend School
Dulwich College Shanghai Puxi
Dulwich Prep & Senior (DPS)
Dulwich Preparatory School
Duncombe School
Dunottar School
Eaton Square
ISHCMC - American Academy
ISZN Switzerland
James Allen's Girls' School
King Edward's School Witley
Kingham Hill School
King's Bruton
King's College Bangkok
Kingscourt School
Kingsley Academy
Kingston Grammar School
Kingswood Academy
Kingswood School Bath
Kinross Wolaroi
Laindon Park Primary School
Lambrook School
Lea Forest Primary Academy
Leicester Grammar School Trust
Leighton Park School
Lift Clacton
Lift Hall Road
Lift North Ormesby
Lift North Thoresby
Lift Richmond Park
Lift Ryde
Reigate Grammar School
Repton School
Richard Rose Central Academy
Robert Blake
Roedean, South Africa
Rougemont School
Royal Grammar School
Royal High School GDST
Salcombe School
Salford City Academy
Sandroyd School
Sir John Cass's Primary School
Southbank International School
St Albans
St Andrews International School Dusit
St Andrew's Turi
St Anthony's Preparatory School
St Bees
St Christopher School
St Clare's
St Helen's Primary Academy
St John's Beaumont School
St Lawrence College
St Lawrence College Junior School
Warminster School
Watford FC Academy
Wellington College
Wellington College Prep
Wells Cathedral School
Westerings Primary Academy
Wetherby Preparatory School
Whitgift School
Windlesham House
Winton Community Academy
Wolverhampton Grammar School
Wolverhampton Wanderers FC
Woodbridge School
Worksop College
Wychall Primary School
Wycombe Abbey School