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A mental health trial of the 'Learning Together for Mental Health' intervention in English secondary schools, nested within a trial exploring its impact on education

Submission date
02/09/2026

Recruitment status
No longer recruiting

Registration date
21/09/2026

Overall study status
Ongoing

Last Edited
14/10/2026

Condition category
Mental and Behavioural Disorders

[ ] Prospectively registered
[ ] Protocol
[ ] Statistical analysis plan
[ ] Results
[ ] Individual participant data
[X] Record updated in last year

Plain English summary of protocol

Background and study aims

Adolescence is an important period when many mental health problems emerge. These problems tend to worsen during secondary school. Poor mental health in adolescence can lead to problems such as self-harm, suicide, drug and alcohol dependence, poor school attendance and lower educational achievement. Mental health problems in adolescence can also have lasting effects for physical, social and mental wellbeing in adulthood.

Programs in schools that target the context and culture, rather than individual students, are a promising way to improve student mental health. Some years ago, we tested such a program (called Learning Together) to reduce bullying in English secondary schools. We found that this program not only reduced bullying but also improved student mental health and GCSE results. We worked with the latest research, teachers and students, to adapt this program so it directly focused on mental health. We called it 'Learning Together for Mental Health' (LTMH). We also tested this new LTMH program in four secondary schools. We found it was well-liked and considered useful by teachers and students.

An educational charity, the Education Endowment Foundation (EEF), is running large study with 140 schools to see if LTMH can improve educational achievement. We want to embed a mental health study, looking at effect of LTMH on mental health, in all these schools. EEF will not measure the mental health effect of LTMH as that is out-of-scope for them. It would represent very good value to also learn mental health effects within the same study.

As a part of the mental health study, we aim to examine whether the LTMH program can improve student mental health, whether it works better for certain types of schools or students, and whether is offers a good value for money. We also aim to understand how it works, for whom and under what circumstances and how best it can be used in other settings, if needed.

This study is nested within another study registered at https://www.isrctn.com/ISRCTN34801628

Who can participate?
All state-funded, mainstream secondary schools in England can take part in the study so long as the senior leadership team is able to commit to participation for the whole duration of the program and pay the participation costs.

What does the study involve?
LTMH is a whole school program and involves training teachers to use a method call restorative practice. This differs from punishment-based methods by focusing instead on building relationships. It helps teachers model empathic conversation and manage conflict. The persons in a conflict can explain how they feel and take responsibility to find a way ahead. This helps heal relationships and prevents future problems. LTMH also involves setting-up of an 'action group' in each school, made up of teachers and students. Teacher and students work together to look at information collected from the students about their mental health alongside a manual with effective things to do for mental health. The action group then plan and make changes so the school feels more supportive.
To study the impact of the program on student mental health, students in year-7 or year-8 in all 140 schools will fill-out a questionnaire about their mental health (this will be collected as a part of the EEF study). Through random choice, 70 schools will then get the LTMH program, while 70 will carry on with their normal approach. Schools that get the LTMH program will get staff training for restorative practice, support to deliver action groups and a manual. We will make sure LTMH is inclusive and accessible to all students. Three years later, students in all 140 schools (now in year-10) will fill-out a questionnaire again. We will compare results to see if students in the schools that got the LTMH program report better mental health. We will also look at how much the program costs, and talk to teachers and students about their thoughts on LTMH. This will help us know whether LTMH works, whether it's good value for money and whether it could be used in secondary schools across the country.

What are the possible benefits and risks of participating?
If LTMH works, it could be used in schools across England to help improve mental health for thousands of young people. We will share our findings widely with schools, teachers, parents, students, charities, policymakers and the government to make sure they lead to real change. Participating schools will also get some financial compensation for taking part.
Risks of participation are minimal but may include individuals feeling upset about something while completing the questionnaires or interviews. We have protocols in place to provide support to participants if this should happen.

Where is the study run from?
The mental health study is being led by a team of research from the London School of Hygiene & Tropical Medicine and University College London. The study of educational impacts of the LTMH programme is being done by a team of researchers from Anna Freud and Ipsos.

When is the study starting and how long is it expected to run for?
School recruitment for EEF's large study on educational impacts began in March 2026 and is currently ongoing. The mental health study that we are embedding in this large study will use information collected from EEF's study and will begin in September 2026.

Who is funding the study?
The embedded mental health study is funded by the National Institute of Health and Care Research, UK. The LTMH program is being funded by EEF as a part of their large study.

Who is the main contact?
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National Institute for Health and Care Research (NIHR)
506643

Study information

Scientific Title
Examining the effectiveness, cost-effectiveness and mechanisms of 'Learning Together for Mental Health' on mental health outcomes: a nested, cluster randomised controlled trial in English secondary schools

Study objectives
The study aim is to examine the effectiveness, cost-effectiveness and mechanisms of the 'Learning Together for Mental Health' (LTMH) whole-school intervention in terms of its mental health outcomes in a cluster randomised controlled trial and answer the following research questions:
1. What are the effects of LTMH in intention-to-treat (ITT) analyses on student-reported psychological difficulties (primary outcome), and various pre-hypothesised secondary mental health outcomes?
2. Are effects moderated by student baseline mental health, sex, gender, ethnicity, deprivation or sexual orientation, or school characteristics?
3. Are effects greater in analyses accounting for intervention fidelity?
4. What are the effects for pre-specified subgroups (students eligible for free school meals, students with higher reported psychological difficulties at baseline, student with non-white ethnicity, sexual minorities, girls and boys)?
5. Is the intervention cost-effective?
6. What do qualitative and quantitative data suggest about mechanisms by which the intervention generates mental health impacts?
7. What do the trial findings suggest about the intervention theory of change and transferability?

Ethics approval required
Ethics approval required

Ethics approval(s)
Not yet submitted

Primary study design
Interventional

Allocation
Randomized controlled trial

Masking
Open (masking not used)

Control
Active

Assignment
Cluster

Purpose
Prevention

Study type(s)

Health condition(s) or problem(s) studied
Preventing mental health problems and improving wellbeing among secondary school students

Interventions
This study involves a cluster randomised controlled trial (RCT) to examine the effectiveness, cost-effectiveness and mechanisms of the 'Learning Together for Mental Health' (LTMH) program in

terms of its mental health outcomes for students, nested within the Education Endowment Foundation (EEF)'s trial assessing the impact of LTMH on educational outcomes.

As part of the EEF trial, all pupils in Year 7 (Spring/Summer 2026) or Year 8 (Autumn 2026) in 140 schools will be invited to take part in an online survey completed in school. Schools are the unit of randomisation and are allocated on a 1:1 basis to the intervention and control arms, stratified by school-level factors: school-level deprivation (% students eligible for FSM below or above the median in England for the year); special education needs (SEN) status (proportion of students with SEN and disabilities); and attainment (Progress 8 score school average above and below median of 0 for England), by a researcher not involved in the statistical analysis from the Education Trial evaluation team. A first set of schools that completed ≥ 80% of responses on the baseline survey by the end of the summer term 2026 were randomised simultaneously in a block in late July 2026. Schools that complete their baseline surveys after this are being randomised on a weekly rolling (sequential) basis.

Intervention:
Learning Together for Mental Health (LTMH) is a whole-school, multicomponent, facilitated intervention that involves four key elements in each school.
a) Formation of student and staff co-led Action Group (AG). It is empowered to modify school mental health and disciplinary policy. The AG will be facilitated by Place2Be staff. The AG will meet twice per term across each year of implementation, meeting more frequently if needed. The AG can draw on the following: (i) A student needs assessment report (NAR), drawing on the instruments and measures included in the baseline student survey. This provides the AG with data on their school's prevalence of various needs, such as psychological problems, conduct problems, peer relationship problems, self-harm, eating problems, bullying, substance use and anti-social behaviour; (ii) An intervention manual including an evidence-based menu of effective mental health actions and strategies at the school level which have been previously shown to improve aspects of menatal health and wellbeing in young people. The Place2Be facilitator will guide the AG in using the menu and selecting actions from the menu that address the priorities identified for the school. The manual will also provide guidance on setting up and running inclusive AGs.
b) Facilitation: The AGs are facilitated by a trained facilitator with expertise in school mental health, employed, supervised and trained by Place2Be. Place2Be will employ a lead facilitator who will manage and supervise these facilitators. Each school will receive seven half-day sessions of in-person facilitation in the first year of implementation and six sessions in the second year, supported by the same facilitator across the intervention. Online support from facilitators will be available to schools between in-person visits. In the third year of implementation, AG chairs will facilitate the AGs, supported by Place2Be where required.
c) All-staff introductory training in restorative practice (RP) which aims to prevent and address conflict and thereby improve mental health via improving relationships. All staff are trained to implement primary RP through empathic communication and working 'with' students.
d) In-depth training in RP for selected staff to facilitate meetings in which bullying victims are empowered to communicate harms, while perpetrators are encouraged to acknowledge these and take responsibility for their behaviour to repair relationships and prevent future conflict, thus contributing to improved mental health.

The intervention will be a three-year programme, fully facilitated by Place2Be for the first two years and with light-touch support for schools from Place2Be in year 3. Schools will be encouraged to continue implementation independently in a fourth year, after which the educational evaluation will take place.

Control:
Control schools will continue their usual practice regarding existing relationships, sex and health education and mental health provision to maximise trial external validity

A process evaluation (PE) will be conducted to explore mechanisms underlying mental health impacts and implementation. For this, in four case study schools, two staff members will be invited to participate in interviews every year for three years of the intervention. Students will also be invited to participate in two student focus groups per year of the intervention in each of the four case-study intervention schools.

Intervention Type
Behavioural

Primary outcome(s)
1. Psychological difficulties measured using Strengths and Difficulties Questionnaire (SDQ) Total Difficulties score at Year 10 through endline surveys

Key secondary outcome(s)
1. Emotional problems, conduct problems, peer problems and hyperactivity measured using SDQ subscales at Year 10 through endline surveys

2. Mental wellbeing measured using Short Warwick-Edinburgh Mental Well-being Scale at Year 10 through endline surveys

3. Eating problems and weight and shape cognitions measured using Eating problems and weight and shape cognitions (EDE-QS) at Year 10 through endline surveys

4. Bullying victimization measured using Gatehouse Bullying Scale at Year 10 through endline surveys

Completion date
31/12/2029

Eligibility

Key inclusion criteria
1. State-funded, mainstream secondary schools in England
2. Senior leadership team (SLT) is able to commit to intervention, pay participation costs and sign Memorandum of Understanding
(The impact evaluation will include students in year 7 for schools that completed baseline surveys in the summer term of 2026, or students in year 8 for schools that complete baseline surveys in the autumn term of 2026)

Healthy volunteers allowed
Yes

Age group
Mixed

Lower age limit
10 Years

Upper age limit
70 Years

Sex
All

Total final enrolment
0

Key exclusion criteria
1. The school's most recent Ofsted rating is inadequate (based on the previous Ofsted grading). If the school has had an inspection since January 2026 with the new Ofsted grading criteria, schools that do not meet minimum safeguarding expectations and schools that receive an 'urgent improvement' grade in the 'leadership and governance' evaluation area will be excluded. Those schools will not be included, as the research has shown that schools require a minimum level of institutional capacity to implement the intervention.
2. The school is enrolled in another mental health or wellbeing intervention study. Note that schools involved in descriptive surveys or small pilot projects (e.g. with psychology students) will not be excluded
3. The school is enrolled in any other EEF trial currently that is also focused on mental health
4. The schools involved in the LTMH feasibility study

Date of first enrolment
02/03/2026

Date of final enrolment
31/10/2026

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
Schools in England
England
England
England
England

Sponsor information

Organisation

London School of Hygiene & Tropical Medicine

ROR
https://ror.org/00a0jsq62

Funder(s)

Funder type

Funder Name
National Institute for Health and Care Research

Alternative Name(s)
National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

Funding Body Type
Government organisation

Funding Body Subtype
National government

Location
United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not expected to be made available