What works in promoting social and emotional well-being and responding to mental health problems in schools?

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Advice for schools and framework document

My ‘evidence base’

• Teacher
• Academic
• Wellbeing, mental health, social and emotional learning
• Programme development, research and evidence reviews
• Mindfulness
• Parent
Promoting emotional and social wellbeing

Targeting problems
Why might schools be interested in all this? Or maybe not interested?
Some common objections

• “What has this got to do with education?”
• “Too many other initiatives”
• What’s the point? Our results are good - why do we need it?
• “Job of someone else - not us”
• Too stressed
• Lack of skills
• Threatened
Possible positive outcomes

Train attention, focus, calm
Improve performance
Reduce mental health problems
Inclusion, early intervention
SEL – skills for success in life
Kindness, compassion
Values, ethics, happiness
Interconnectedness
Summary of results of 207 SEL programmes in US:

- 11% improvement in achievement tests
- 25% improvement in social and emotional skills
- 10% decrease in classroom misbehaviour, anxiety and depression (10% in each)

**Social and emotional learning (SEL) and student benefits**

The link between health and wellbeing and attainment
A briefing for head teachers, school governors and teachers
Higher SEL skills correlate with
• Academic achievement
• Health, wellbeing
• “Success” in life – greater impact than IQ scores

• 50+ reviews
• Control trials, meta-analyses
• Evaluations of programmes
• Good practice and experience
• Neuroscience
Many balances
Use whatever language works

Resilience/ grit

emotional intelligence

Character

mental health

PSHE

wellbeing

social and emotional learning

emotional literacy

Non cognitive
Address risk and build resilience
Negative emotions block learning

• Chronic emotional problems make learning difficult

• Stress and trauma makes it impossible

• Attachment – foundation of motivation and brain development
Positive emotions enable learning

- Ready to learn when we feel safe, valued
- We think about/process what matters to us emotionally e.g. we feel good about.
- Learn better when alert but relaxed, focused, sense of ‘flow’
Use a whole school approach
But well implemented

Getting from here…

…to here
What kind of school environments promote mental wellbeing?
Focus on ethos
connectedness and clarity
http://www.ncb.org.uk/media/1213164/the_connected_school_final_for_web.pdf
* don't be rude
  * happy
  * kindness

* don't laugh at other people.

* LISTEN!! TALK

* RESPECT
  * people
  * space

* one person at the time

* encourage and include everybody

* PEACE
Look behind the behaviour
What undermines your mental health and wellbeing at work?

What helps?
Promote staff wellbeing and tackle staff stress
Identify and explicitly teach and model core skills (and attitudes and values)
Teach it well!
Staff Leadership Modelling

Everyday opportunities

Wellbeing
SEL/PSHE CPD

Across mainstream curriculum

Special needs/targeted
What works in involving parents

- Beware stigma
- Curiosity and empathy
- Shared goals
- Authentic involvement
- Emphasise the positive
- Normalise
- Parenting programmes – offered to all
- Intensive but sensitive outreach for problem families
Raise awareness and address mental health problems
Balance universal and targeted
Because...

- Avoids stigma
- Problems on continuum, connected
- ‘More’ not ‘different’
- ‘Critical mass’
- But universal alone not enough
STAND UP TO STIGMA

Let's talk about MENTAL HEALTH
Start early and keep going
Clear pathways for help
Joined up working
Schools and specific mental health issues

- **Behaviour** – can respond to short term interventions
- **Anxiety, stress** - medium term interventions – e.g. mindfulness, relaxation, CBT, body work
- **Depression** – tough and complicated, some interventions can make it worse, long term best. Mindfulness, CBT/Social Skills
- **Self esteem** – tough to influence. Focused on it directly
- **Suicide, self harm** – one to one only
- One offs - no
- Short term - prevents mild problems and improves behaviour
- Difficult and complex problems - longer and carefully targeted interventions
Some effective targeted approaches
Right method for intervention and aims
Clear and limited aims
Simple – less is more
Involve people – informants, funders, research experts, young people, parents
Allow time
Range of qualitative and quantitative methods
Beware the premature RCT!
Implementation – bottom up v top down

• US – top down, manualized ‘programmes’ (easy to evaluate but don’t stick)

• European – educated teachers, bottom up, principles, whole school (attractive and empowering but can be vague, no change, don’t pass RCT)

• UK in the middle - need a balance
Promoting emotional and social wellbeing

Targeting mental health problems
What are your ‘take home’ messages from all this?
Thank you!