Doctorate in Educational Psychology (Professional Educational, Child and Adolescent Psychology)  
DEdPsy (PECAP)  

How can EPs best support secondary school staff to work effectively with children and young people who experience social, emotional and mental health difficulties?  

Hannah Harvest  

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Student Declaration

I, Hannah Harvest confirm that the work presented in this thesis is my own. Where information has been derived from other sources, I confirm that this has been indicated in the thesis.
Acknowledgements

I would like to thank those people without whose time and expertise this research would not have been possible. Thank you to my wonderful supervisors Amelia Roberts and Frances Lee, whose guidance, encouragement and patience have been invaluable throughout this often relentless process. Thank you to my participants who entrusted me with their honest opinions, and to Tom and Grant for showing such an interest in this research.

Thank you to David. You have been an invaluable cheerleader through the best of thesis times and the worst of thesis times. Life can now move on!

Thank you to my 15 fellow trainee EPs. The last 3 years have been transformative and I’m so grateful to have shared the journey with the most supportive and inspirational psychologists. I can’t wait to see what you all do out there!

Lastly, this work is dedicated to my dad who saw me become a teacher but not realise this dream. Your calm presence is always with me.
Abstract

Schools are increasingly being positioned as providers and coordinators of social, emotional and mental health (SEMH) support for children and young people, yet the voice of school staff and Educational Psychologists (EPs) is underrepresented. This research utilised focus groups with 14 school staff across two mainstream secondary schools in a south London borough to understand what is supportive in their role helping children and young people (CYP) who experience SEMH difficulties. Five EPs constituted a focus group in the same borough to understand their view on how they can be bolder in stepping into their role supporting schools and staff with SEMH. Bronfenbrenner’s ecological theory was used as a lens through which to explore the complex factors which impact on schools and EPs. Attunement in the school community, staff knowledge and skills and role conflicts emerged as themes through a thematic analysis of focus group transcripts. Conclusions focus on the importance of an inclusive ethos within the school which supports both staff and students, and discussion of whether schools are culturally and systemically adapting to meet children and young people’s SEMH needs. EPs are positioned at the intersection of psychology and education, and so are well placed to support schools across the ecological system. Implications for further research and policy are suggested.
Impact Statement

This thesis uses Bronfenbrenner’s ecological theory to explore the views of mainstream secondary school staff and of EPs on how they experience their role towards SEMH issues. Bronfenbrenner’s theory has not been applied in this context before – it allows a unique perspective. Through investigating interactions between different staff groups, systems, processes and structures within two school contexts the importance of a whole school ethos emerged, alongside more knowledge and skills. Staff’s ability to support the SEMH of others is dependent upon consideration of staff’s own SEMH by the school.

This thesis forms a major part of the qualification process to become an EP. As such, this thesis is designed to provide a contribution not only to academia but to professional practice. The findings inform how EPs can work more effectively with secondary schools to promote and respond to SEMH needs. Through the use of Bronfenbrenner’s ecological theory, implications for EP practice have been considered at many levels – from the individual, school, local and national context and in addition how these levels interact with one another to affect SEMH.

EPs have an important role to play in supporting school staff directly through consultation, training and facilitating supervision groups to enhance wellbeing and professional and personal reflection. Indirectly, EPs can encourage change within the school system through the adoption of interactionist psychological models of understanding, such as Bronfenbrenner’s ecological theory. A framework for EP practice at different levels is provided to support EPs when SEMH difficulties arise, but also to proactively promote the SEMH of all children and young people.
APPENDIX 10 THEMES AND SUB THEMES ...................................................................... 215

TABLES

TABLE 1 ADDRESSING FOCUS GROUP ISSUES ................................................................. 69
TABLE 2 EP PARTICIPANT INFORMATION ........................................................................ 71
TABLE 3 SCHOOL 1 PARTICIPANT INFORMATION ............................................................. 75
TABLE 4 SCHOOL 2 PARTICIPANT INFORMATION ............................................................. 77
TABLE 5 INCREASING RIGOUR ....................................................................................... 84
TABLE 6 BRONFENBRENNER’S ECOLOGICAL THEORY MODEL IN ANALYSIS ............... 91

FIGURES

FIGURE 1 THE APPLICATION OF BRONFENBRENNER’S ECOLOGICAL THEORY .................. 20
FIGURE 2 OVERARCHING THEMES ................................................................................. 92
FIGURE 3 ATTUNED VS UNATTUNED COMMUNITIES .................................................... 93
FIGURE 4 KNOWLEDGE AND SKILLS ........................................................................... 101
FIGURE 5 PSYCHOLOGICAL VS SOCIOLOGICAL ROLE ............................................... 108
FIGURE 6 IMPLICATIONS FOR EP PRACTICE .................................................................. 141
### List of Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>AEP</td>
<td>Association of Educational Psychologists</td>
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<tr>
<td>BPS</td>
<td>British Psychological Society</td>
</tr>
<tr>
<td>CAMHS</td>
<td>Child and Adolescent Mental Health Services</td>
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<tr>
<td>CBT</td>
<td>Cognitive Behavioural Therapy</td>
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<tr>
<td>CYP</td>
<td>Children and Young People/Child or Young Person</td>
</tr>
<tr>
<td>DfE</td>
<td>Department for Education</td>
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<tr>
<td>DoH</td>
<td>Department of Health</td>
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<tr>
<td>EAL</td>
<td>English as an Additional Language</td>
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<tr>
<td>EP</td>
<td>Educational Psychologist</td>
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<tr>
<td>EPS</td>
<td>Educational Psychology Service</td>
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<tr>
<td>GRN</td>
<td>Graduated Response to Need</td>
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<tr>
<td>HCPC</td>
<td>Health Care Professions Council</td>
</tr>
<tr>
<td>LA</td>
<td>Local Authority</td>
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<tr>
<td>LSA</td>
<td>Learning Support Assistant</td>
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<tr>
<td>NASEN</td>
<td>National Association of Special Educational Needs</td>
</tr>
<tr>
<td>Ofsted</td>
<td>Office for Standards in Education, Children’s Services and Skills</td>
</tr>
<tr>
<td>PPCT</td>
<td>Person-Process-Context-Time</td>
</tr>
<tr>
<td>SEBD</td>
<td>Social, Emotional and Behavioural Difficulty</td>
</tr>
<tr>
<td>SEMH</td>
<td>Social, Emotional and Mental Health</td>
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<td>SEMHD</td>
<td>Social, Emotional and Mental Health Difficulty</td>
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<tr>
<td>SEN</td>
<td>Special Educational Needs</td>
</tr>
<tr>
<td>SENCo</td>
<td>Special Educational Needs Co-ordinator</td>
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<tr>
<td>TaMHS</td>
<td>Targetted Mental Health in Schools</td>
</tr>
<tr>
<td>TA</td>
<td>Teaching Assistant</td>
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<tr>
<td>TEP</td>
<td>Trainee Educational Psychologist</td>
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Introduction

1.1 Background to the Research

The aspiration for inclusive schooling

The Special Educational Needs Code of Practice (DfE, 2015, p. 27) clearly expects schools to have high aspirations for those with SEN and improve their attainment. The quality of teaching for those with SEN, and their progress, is an area schools should address in their performance management measures (DfE, 2015, p. 93). To provide an inclusive environment in which all can achieve is a challenge in a diverse area such as London where within a single classroom the consequences of English as an additional language (EAL), SEN, mental health difficulties, and the effects of poverty may all be evident (Department for Communities and Local Government, 2015).

Importance of children’s mental health

In the UK today, child and adolescent mental health is given increasing attention. UK children’s own reports of their wellbeing tell us they are more dissatisfied with their lives, and have weaker feelings of happiness and less positive ideas for the future than those in almost all the 15 world-wide nations surveyed (The Children’s Society, 2015). In 2016, 90% of secondary school head teachers reported more mental health problems, such as anxiety and depression, in their students over the previous five years (Association of School and College Leaders, 2016). The Children and Families Act (2014) emphasises mental health by creating a joint commissioning role between health, care and education for children and young people (CYP). Subsequent government guidance such as the Green Paper: Transforming Children and Young People’s Mental Health Provision (DfE & DoH,
2017) reflects this joint working especially the role of schools in supporting mental health. This publication will henceforth be referred to as the ‘Green Paper’.

Prevalence of mental health difficulties

The numbers of CYP experiencing mental health difficulties are strikingly high: 1 in 10 are thought to have a diagnosable mental health condition; a further 1 in 7 experience less severe issues, but sufficient to interfere with their development and learning (Green, McGinnity, Meltzer, Ford & Goodman, 2004). Within these figures, 7.7% of 5–10 year olds are thought to experience a diagnosable mental health condition; this rises to 11.5% for 11–16 year olds. A more recent piece of ONS research using data from the Strengths and Difficulties Questionnaire measure, collected between 2009 and 2012, showed that 12% of 10-15-year olds scored within the ‘high’ or ‘very high’ categories, indicative of mental health symptoms (ONS, 2015). There is recognition that the situation and the risk factors for CYP have changed especially in light of social media (Collishaw, 2015).

Research by the Education Policy Institute (2017) says over one third of 15 year olds are ‘extreme internet users’, and this is correlated with negative effects on wellbeing – although more research is needed into a causal link between internet usage and mental ill health. In London, where this research is carried out, a significant number of 15 year olds report lower levels of life satisfaction compared to the English average – 15.5% in London and 13.7% in England (Public Health England, 2016).

As mental health difficulties become more common (or more commonly diagnosed) at secondary school age, this is the phase this study focuses on. Secondary schools, often larger and more complex organisations, also face
unique challenges beyond those of primary schools. One of these is the increased number of adults CYP encounter, and so achieving a consistent response is more difficult.

The role of school

CYP spend around 15,000 hours at school (Oberle & Schonert-Reichl, 2016), and so it is not surprising school has an impact on their development. School involvement in emotional and mental health is not a new idea: initiatives such as Targeted Mental Health in School (TaMHS), which ended in 2010, went as far as integrating schools into the model of service delivery for those with more severe mental health difficulties yet currently school’s responsibility is widening. The budget for Child, Adolescent Mental Health Services (CAMHS) is being continually cut (Thorley, 2016), and schools are increasingly being positioned as commissioners, providers and hubs of mental health provision. Despite this the pressure on schools to produce academic results can be at odds with their efforts to engage with social, emotional and mental health difficulties (SEMHD). A survey of teachers found that 84% agreed ‘the focus on academic targets means that social and emotional aspects of education tend to be neglected’ and 93% felt ‘my stress levels sometimes impact on the way I interact with pupils’ (Hutchings, 2015). These survey results suggest that schools and their staff are finding their widened responsibility tough. Shockingly, 25% of teachers have considered leaving the profession due to ‘difficult student behaviour’ (Association of Teachers and Lecturers, 2015). Theresa May has promised, as Prime Minister, funding for ‘mental health first aid training’ for schools (Prime Minister’s Office 2017) yet this seems inadequate and does not address the pressure schools are under.
Schools have a clear role supporting SEN. Not all CYP with SEN have an SEMH need, and not all CYP with SEMH issues have an SEN however schools have a responsibility to address all barriers to learning. The Graduated Response to Need (GRN) is a framework whereby all CYP are offered universal resources such as quality first teaching, followed targeted provision for some, followed by individual, intensive provision for the few (NASEN, 2014). This approach can be applied to SEMH issues. Creating an inclusive ethos, where relationships between staff and CYP are respectful will benefit all CYP. Some CYP may require targeted intervention that is additional or different to other CYP such as seeing a counsellor, while few CYP will require individualised more intensive support. School staff are mostly implicated at the universal level, but where targeted or intensive support for CYP is needed the role of school and its staff becomes less clear.

**The EP role**

This study incorporates the views of EPs on how they can support school staff in providing effective education and support to those with SEMH. It also explores how school staff themselves see how EPs could be involved within their setting. Currently, the EP role is under-represented by government publications, showing a lack of knowledge of the full EP role – though EPs themselves see a clear position in relation to SEMH in schools. A special journal by the British Psychological Society Division for Educational and Child Psychologists in 2016 addressed the EP role for mental health in schools, suggesting EPs are key as professionals who can bridge health and education. Changing perceptions of how EPs can be effective with SEMHD needs to come from the profession itself, and professional bodies such as the British Psychological Society have been involved in the national
conversation about CYP’s mental health and have written responses to government publications such as the Green Paper (2017). It is therefore important that the EP voice is heard and this research seeks to incorporate their view. Where EPs are mentioned by government publications, it is as specialists working with only the most complex cases (Green Paper, 2017) at the highest level of the graduated response to need (GRN). Thorley (2016, p. 48) – in research conducted by the Institute of Public Policy and Research – says EPs can “explore issues relating to emotion and behaviour, with a specific focus on how they might interfere with learning”: that view furthers the misconception that EPs only work with CYP who already have a difficulty, rather than providing wider, preventative services to staff and school systems, such as supervision, training, or supporting school leaders to create a school policy. Dunsmuir and Hardy (2016) convened a working group within the Division of Educational and Child Psychology to address how EPs can deliver therapeutic interventions such as cognitive behavioural therapy and family therapy. They concluded that if EPs practice within their competence and abide by professional guidelines, therapy can be delivered in schools by EPs – but Dunsmuir and Hardy (2016) stress systemic and individual factors must be taken into account when doing so.

1.2 Rationale for Current Research

Unclear positioning of schools around SEMHD leads to unclear roles for school staff, yet legislation and guidance demands a great amount: “teachers and other people who work in schools, should understand emotional and mental health in children and young people and know what to do and where to go if they are worried about you” (DoH, 2015, p.11). School staff need to feel empowered by knowledge and skills that some researchers and EPs argue are too specialist to
expect (Hill, 2017). School culture, processes and structures need to help teachers and pastoral staff to feel supported in promoting and responding to the SEMH of their students, yet little current research studies what those supportive structures and processes might be. Without strong staff wellbeing and mental health, a school cannot hope to achieve this outcome for their CYP (Weare, 2015), yet staff wellbeing is seldom mentioned in government guidance and legislation and is not inspected adequately by Ofsted (Thorley, 2016). It seems timely to investigate what different school staff see as supportive to their developing role in SEMH. Giving school staff a voice and better understanding of what supports them can give insight into how EPs can step effectively into their own role in this area. In particular, a better understanding of the specific needs of school leaders, teachers and pastoral staff will enable a tailored response from EPs. As a trainee EP (TEP) about to enter the profession it is important to understand how psychology can be applied across different layers of a system to support SEMH.

1.3 Theoretical Underpinning

Supporting SEMH in schools is complex as stakeholders exist which incorporate many structures within society such as the government, local authorities, schools, school staff, CYP and families. This study adopts an ecological approach which recognizes the complex nature of inter-relationships located within the multiple levels of society which impact on how SEMHD are managed in mainstream UK secondary schools. This reflects the complex influences on the lives of CYP in today's society.

This study is underpinned by Bronfenbrenner’s ecological theory. Bronfenbrenner’s ecological theory is aligned with a social constructionism
paradigm of research. Social constructionism can be defined as “a perspective which believes that a great deal of human life exists as it does due to social and interpersonal influences” (Gergen, 1985 p.265). Social constructionism understands reality as subjective, historically and culturally specific and created through social interaction (Burr, 1995). The similarities can be seen when Bronfenbrenner says: “what matters for behaviour and development is the environment as it is perceived rather than as it may exist in ‘objective’ reality” (Bronfenbrenner 1979, p.3).

Bronfenbrenner was self-reflective in his theory development, revising and amending the theory over three decades. Initially there was emphasis on the context of the individual affecting their development, but he later engaged in self-criticism about discounting the individual’s impact on their own development (Bronfenbrenner, 1989). According to Tudge, Gray and Hogan (1997) the theory has constantly remained ecological in nature, stressing the interrelations of the person and their context. It is important to provide clarity about which version of the theory the current research is based on and how it will be applied. Tudge, Mokrova, Hatfield and Karnik (2009) performed a systematic review of twenty-five papers published between 2001 and 2009 claiming to be based upon Bronfenbrenner’s theory and found only four correctly use the most recent version. The exercise was repeated in 2016 by Tudge, Payir, Mercon-Vargas, Cao, Liang and Li et al. (2016) who found out of eighteen studies from 2009 to 2016 just two correctly applied Bronfenbrenner’s most recent model.

The current research is based on what Tudge et al. (2009) call the ‘mature’ version of the theory which emerged from the 1990s onwards and incorporates process-person-context-time (PPCT) elements. Each of these will now be described
alongside ways the current study will address each aspect to avoid the ‘misuses’ spoken of by Tudge et al. (2009) and Tudge et al. (2016) such as too much focus on one aspect of the PPCT model.

**Process**

Tudge et al. (2009) note that a key difference between Bronfenbrenner’s earlier model and the mature version is the emphasis on ‘proximal processes’ as a key ‘primary mechanism’ for development. Bronfenbrenner and Morris (1998 p. 996) said ‘human development takes place through processes of progressively more complex reciprocal interaction between an active, evolving biopsychological human organism and the persons, objects, and symbols in its immediate external environment’. Proximal processes occur frequently over long periods of time (Bronfenbrenner & Morris, 1998). Examples of proximal processes relevant to the current study could include CYP-staff interactions, staff training, or teaching. By incorporating the views of different staff members within and across schools, proximal processes around person-context interaction can be highlighted, thus aligning more with the mature version of the theory than earlier versions.

**Person**

Acknowledging the importance of the characteristics an individual brings into social situations, Bronfenbrenner (1979) described three elements of Person-demand, force and resource. Tudge et al. (2009) defines demand characteristics as referring to a person’s age, gender, ethnicity or other immediate feature which may affect how others view and respond to them. Resource may be less immediately obvious but refers to emotional, psychological, skill or experience that the person possesses. Force refers to individual motivations, persistence or
temperament which may affect how they respond in different contexts. Bronfenbrenner (1979) describes how two people with the same demand and resource characteristics may have different developmental trajectories based upon their force characteristics. The current study does not explicitly collect demand characteristics, but does explore resource and force characteristics.

**Context**

Bronfenbrenner described four inter-related systems. Bronfenbrenner (1979) conceived of these environments as ‘a set of nested structures, each inside the next, like a set of Russian dolls,’ (p. 3). The microsystem involves an environment in which a person spends a great deal of time, such as school. The way different microsystems interact is called the mesosystem. Exosystems are those which affect the individual, but which they are not directly a part of. Macrosystem encompasses all the other systems influencing and being influenced by them. It describes a context whereby groups share belief systems, or “resources, hazards, lifestyles, opportunity structures, life course options and patterns of social interchange” (1993, p. 25). Context is important in the current study for providing an additional lens through which to analyse the findings, allowing proximal processes at different levels to be explored. Since Bronfenbrenner’s theory has always focussed on the CYP as being at the centre, yet this research focusses on school staff and EPs, clarity on how the model has been adapted is provided in figure 1 showing what and who is within each level.

**Time**

Bronfenbrenner’s theory is one of development over time however there are different aspects of this. Tudge et al. (2009) defines micro-time as what happens
during particular interactions. Mesotime refers to how frequently certain interactions happen. Macro-time (or Chronosystem) refers to historical or cultural events that may affect development. The current study is cross-sectional, therefore macro-time will not be addressed however micro- and meso-time will be explored.

This study will seek to address aspects of PPCT, recognising the inter-related and nested quality of individual school staff members working with CYP who experience SEMHD. Exploring different systems and relationships which impact on CYP is also an important way of working for EPs (Beaver, 2011) as it allows EPs to target specific systems or relationships which will directly or indirectly affect those working with CYP, and so the CYP themselves. Applying Bronfenbrenner’s ecological theory to understanding what supports school staff to manage SEMHD allows for interactions between interconnected systems to be interrogated and examined such that EPs may further understand how they can leverage their impact in schools to support SEMHD. Within each layer of PPCT psychological theories can be applied which further illuminate findings and lead to greater understanding of how change may come about.
Local context

This research was conducted in a South London Borough. It is home to a large population of young people under 15 (Davies 2014). It scores worse than other London boroughs in many measures of poverty (Trust for London, 2014); there are also pockets of wealth. It is an ethnically diverse area with a fast-changing face. In the 2011 census, just 47% of residents identified as White British (ONS, 2011).

The educational psychology service (EPS) in the Borough is no longer within the local authority (LA) but operates as a mutual company part owned by members, the LA and head teachers within the Borough. The LA commissions the EPS to provide psychological advice for education, health and care plans (EHCP). These are legal documents setting out a child’s educational need and the provision they must receive. This is called ‘statutory’ work. Through this statutory function, the EPS has links with most educational settings in the Borough. The main source of

Figure 1 The application of Bronfenbrenner’s Ecological Theory
revenue for the EPS is offering services to schools in the Borough which they must pay for – often called traded work. EPs are likely to complete both statutory and traded work within each of their schools. The EPS is successful at trading with Borough schools – most traded work is focussed on working with individual children and families.

1.4 Definitions

Social, emotional and mental health as a special educational need

BESD was described in 2001 as “withdrawn or isolated, disruptive and disturbing, hyperactive and lack concentration; those with immature social skills; and those presenting challenging behaviours arising from other complex special needs”, (DfE, 2001, p. 87).

In 2015, ‘BESD’ was replaced by social, emotional and mental health (SEMH) as a category and it was defined as:

Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder (DfE, 2015, p. 98).

As well as SEMH giving more specific examples than BESD did, including some
diagnosable mental health conditions, notice that behavioural difficulties have been directly subsumed by the new term SEMH. There is a recognition that behaviour is usually a reaction to some underlying need for which the CYP needs support. Norwich and Eaton (2015) argue that the difficulties that existed with the term BESD still exist with SEMH: (i) there is not a threshold for identifying what constitutes an SEN and what is normal adolescent strife; and (ii) its diverse and ambiguous use as a term.

Despite these difficulties, SEMH is used as a category of special need by all involved in education. In this study, therefore, SEMH difficulties (SEMHD) refer to CYP who experience any difficulty as defined above, whether or not they are supported at school via SEN support or by an EHC plan. As well specific aspects, this study alludes to SEMHD whether it is ‘externalising’ – challenging, disruptive, or aggressive behaviours – or ‘internalising’ – becoming withdrawn or isolated due to self-harm, anxiety, depression, and eating disorders. While this can be a false dichotomy, as both internalising and externalising behaviours may elicit concern and be disruptive or challenging to the adults around a CYP, research explored later suggests that externalising presentations of SEMHD are viewed differently by school staff so the terminology will be kept.

**Mental Health**

Mental health should not be thought of merely as the absence of psychopathology, as this is a minimum requirement from a psychological point of view: that is, a lack of evident illness. Mental health has been defined as “a state of emotional and social wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively or
fruitfully, and is able to make a contribution to his or her community” (World Health Organisation, 2014). Whilst ‘mental health’ may become a euphemism for ‘mental ill-health’ and bring in medical connotations (Weare, 2010), the World Health Organisation (2014) stresses the positive aspect of mental health by stating “health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity”.

Not all CYP who experience a mental health problem have a special educational need, and not all CYP identified with the broad category of SEMH have a mental health problem. The definitions of an SEN is defined as “a pupil has SEN where their learning difficulty or disability calls for special educational provision, that is provision different from or additional to that normally available to pupils of the same age” (DfE, 2015, p. 12).

Diagnosis of a mental health condition in a CYP follows the criteria outlined in the Diagnostic and Statistical Manual (version 5) as assessed by a psychiatrist or paediatrician. If a CYP has no such diagnosable mental health condition, this does not mean they fit the WHO’s optimistic definition of rounded mental health. Westerhof and Keyes (2010) propose a two-continuum model which places mental ill-health and mental health as separate phenomena related by their existing at opposite ends of a spectrum. For school staff, a spectrum model of mental health, such as this, creates a level of complexity as it is a dynamic concept which changes over time (The Mental Health Foundation, 2017). Since adolescence is a time of adjustment, when parameters of what is ‘normal’ change for each CYP, identifying potential mental health issues beyond normal adolescent shifts is hard for CYP themselves and for the adults who support them. The terms ‘mental
health issue’ or ‘difficulty’ are used rather than ‘problem’ as they stress the impact on daily functioning of CYP. Adolescence in particular is a time of adjustment with changing parameters of what is ‘normal’ for each CYP. In addition to diagnosable mental health conditions, schools may be seeing low level depression, anxiety, low mood and other non-diagnosable issues which still affect learning.

Wellbeing
Morrow & Mayall (2009) see that defining wellbeing has been ‘conceptually muddy’. Since the word ‘wellbeing’ is used broadly and across many contexts within health and education, as an all-encompassing and generic term, school staff need to be clear what it means. The ‘well’ in wellbeing avoids the negative connotations of the word ‘mental’, instead hinting at a positive (Weare, 2010). ‘Mental’ can be a slang and everyday term of abuse. Different aspects of wellbeing were identified by the National Institute of Clinical Excellence (NICE) in 2013 which are also similar to Westerhof and Keyes’ (2010) distinctions:

- Emotional wellbeing – this includes being happy and confident rather than anxious or depressed.
- Psychological wellbeing – this includes the ability to be autonomous, problem solve, manage emotions, experience empathy, be resilient and attentive. This aspect has been linked to self-actualisation and optimal functioning, as described by Maslow’s Hierarchy of Need (1943).
- Social wellbeing – has good relationships with others, absence of behavioural problems, including not violent or a bully.

All three aspects of wellbeing are relevant to this study, as SEMHD addresses issues that can impair functioning across these areas. When an individual is
subjectively ‘high’ on all three areas of wellness, Keyes (2002) argues, they can be described as ‘flourishing’ with positive mental health, rather than ‘languishing’, ‘low’ and in poor mental health. In this way, wellbeing is linked to mental health: a person can have both mental ill-health and good subjective wellbeing in at least one area, or can have positive mental health and poor subjective wellbeing. This creates more complexity for school staff who must support CYP within multiple and overlapping definitions of mental health, wellness and SEMH as a category of SEN.
Literature Review

By Bronfenbrenner’s ecological theory, individual staff members do not operate in isolation, but rather in a complex web of inter-relating systems. As such, when considering what to include in the literature review, factors that affect the individual, the microsystem, mesosystem and exosystem need to be considered. The macrosystemic context regarding legislation and the current context for the research has been described in the introduction. The purpose of this literature review is to capture what the literature says about staff’s views of SEMH and factors which previous research have found to help school staff in supporting SEMHD.

2.1 Approach

The search was performed via library, online and database searches at various intervals to find up-to-date literature. Since SEMHD, mental health and wellbeing are defined in varying ways a wide range of search terms were used. As literature was discovered, a snowballing technique was used (Wohlin, 2014). Government legislation, guidance, and reports were also drawn upon. A fuller account of the search strategy is in Appendix 1.

This chapter firstly discusses ideas around inclusion and SEMH. The views of school staff in relation to SEMH are then explored, followed by research on how school staff can best be supported themselves to support CYP with SEMHD. Each section will end with a comment upon the implications for EPs.
2.2 Inclusion and SEMH

Inclusion differs from ‘integration’, although these terms have been used interchangeably (Polat, 2011). Integration is the notion that CYP with SEN or disabilities can be educated alongside others without. It seems to place responsibility on the CYP to fit into the system, rather than the system adjusting to suit the CYP. Inclusion is different, in that it focusses on the system, identifying how it may discriminate against some while privileging others. Booth and Ainscow (2002, p.13) state, “inclusion is seen to involve the identification and minimising of barriers to learning and participation, and maximising of resources to support learning participation”. They also see inclusion as an ongoing process rather than a goal to be fully realised. Inclusion means the adjustment of culture, processes and structures within the school which may block participation. Inclusion is reflected in the principles of Bronfenbrenner as he believes systems can adjust and every process must be examined. How CYP with SEMHD are included will now be considered.

CYP with SEMHD are permanently excluded from schools, and given fixed-term exclusions, more frequently than those with any other SEN (ONS, 2017): 43% of fixed-term exclusions were for CYP with SEMHD in 2016–17, with the next highest SEN prompting fixed-term exclusions being ‘other difficulty/disability’ at just 11% (ONS, 2017). Although these figures do not say exactly what aspect of SEMHD the exclusions were based on, it is probably externalising behaviour as this aspect is most likely bring a CYP in conflict with school behaviour management procedures. Where CYP with SEMHD are not officially excluded, their experience of inclusion in the school varies. Burton, Bartlett and Anderson De Cuevas’s (2009) case study of one UK local authority’s secondary schools found CYP with SEMHD, mainly those
displaying externalising behaviour, were experiencing variable inclusion practices. The use of pupil referral units, engagement of teaching assistants to work with these CYP outside the classroom, different curricula and different amounts of time spent within mainstream lessons could all vary by school and even by year-group. The principle of inclusion is supposed to encapsulate the adjustment of the system in response to individual needs, yet this study highlights that CYP who require a flexible, individualised approach may pose a challenge to schools who want to do more but who are underfunded (Burton, Bartlett & Anderson De Cuevas, 2009). In response, some schools may be removing the CYP from the system.

**The voice of CYP with SEMHD**

While CYP’s voices are not directly heard in this study, it is helpful to report their experiences of inclusion and support in relation to SEMHD. Schools seem especially important to CYP as a place of support given the level of under-resourcing found in many CAMHS services; it can take up to 140 days for a young person to be assessed by CAMHS, and 87% of CYP do not meet the threshold for support (Children’s Society, 2015). Over a three-year period, over 40% of CYP with a diagnosable condition received no specialist support (Snell, Knapp, Healey, Guglani, Evans-Lacko, Fernandez et al. 2013). A project run by young people who had accessed CAMHS found that three-quarters of CAMHS service users had not had a positive experience; many would have preferred help from counselling services in school, or their teachers (Elliot and Roberts, 2016).

**Psychology to promote inclusion**

Psychological concepts could add to how schools view inclusion and how they
can best support it. Booth and Ainscow’s (2002) definition of inclusion speaks of values such as acceptance, respect, and celebrating difference. Psychological approaches which reflect such values could be useful to support schools’ understanding of inclusion. The humanistic approach to psychology is optimistic, assumes humans are basically good and have worth independent of any role or identity they might hold (Maslow, 1943). Ideas of humanism and from ‘person-centred’ therapy (developed by Carl Rogers) have been applied to education by Rogers and others and could support schools to bring an understanding about why inclusion is important for CYP’s psychological wellbeing and SEMH more widely. Some researchers argue the language of SEN has evolved into a discourse of individual deficit and exclusionary practices (Runswick-Cole & Hodge (2009) yet person-centred approaches offer a model through which schools can consider the value of human worth – and so get closer to inclusive practice.

Within the humanist approach, Maslow (1943) proposed a holistic approach to education whereby the needs of the whole CYP could be thought of as a hierarchy, with motivation to achieve the next goal appearing as the previous need reduced. A picture of Maslow’s hierarchy of needs can be found in Appendix 2. Schools need to provide basic physiological resources, then safety. The next level – belongingness and love – could be considered similar to inclusive values as described by Booth and Ainscow (2002). Without the preceding levels, Maslow (1943) argued, a CYP cannot ‘self-actualise’ or achieve their potential – a potential which includes achieving learning goals. This model has some criticisms such as its hierarchy stages not being linear – a CYP can be hungry and tired, at the same time feeling they belong – yet it provides a useful guide for schools about what CYP need in order to learn.
From the humanistic approach to psychology, person-centred therapy was developed by Carl Rogers (1946). Some ideas from person-centred therapy have been applied to schools and classroom management to create more inclusive environments. Gatongi (2007) argues that person-centred classroom management addresses relationship issues, emotional development and ethical behaviour which he argues are at the heart of problems in school and wider society. Being person-centred has three core conditions for success, traditionally seen as between ‘helper’ and ‘client’; yet in a school context that can be between a staff member and CYP: empathy, genuineness or congruence, and unconditional positive regard (UPR). Each is pertinent to increasing inclusion in schools.

*Empathy* was defined by Rogers (1957) as “to sense the client’s private world as if were your own, but without losing the ‘as if’ quality” (p. 99). Some believe empathy is a learned skill that enhances the quality of relationships (Clarke, 1994). In secondary schools, staff may not always be able to empathise. Empathy requires force characteristics such as the motivation to respond with empathy in a busy classroom environment, and resource characteristics such as emotional capacity. Staff may not have the mental space to consider the CYP’s ‘private world’ to the extent possible within a therapeutic relationship, however some level of empathy can be expected from school staff.

*Congruence* or *genuineness* is the need to be authentic, honest and transparent within relationships (Rogers, 1957). Gatongi (2007) describes how ‘helpers’ should not ‘play the professional’ to hide genuine feelings towards the client. Honest expression of emotion can be threatening especially to people who have well-rehearsed techniques to conceal emotion. While congruence may be an appropriate goal for ‘helpers’ or therapists, school staff are expected by their
school, parents and wider society to maintain professional boundaries such as not expressing negative emotions towards vulnerable CYP. The expression of emotion in schools is discussed later as an aspect to staff wellbeing.

*Unconditional positive regard* (UPR) has been called the 'curative' aspect of therapy, yet is the least studied (Wilkins, 2000). Rogers (1957) said “it involves as much feeling of acceptance for the client’s expression of negative, bad, painful, fearful, defensive, abnormal feelings as for his expression of a good, positive, mature, confident, social feelings” (p. 225): it is the genuine valuing of the person as a human divorced from any judgment about their behaviours. Schools may find this difficult as most have a clear policy of what behaviour is acceptable and unacceptable, and staff have a role implementing this policy. It could be argued that schools operate on ‘conditional regard’ – they value CYP who conform to the behaviour policy and who achieve academically. The benefits of UPR are that a CYP can express their thoughts and feelings, accept themselves as they are and begin to see they have inner resources for change. Gatongi (2007) argues UPR can form the basis of respectful fruitful relationships in school which themselves form the basis of a positive school community.

The mechanism by which UPR is said to work is through a client having an empathetic relationship with a significant other who provides UPR (Wilkins, 2000). With this, the client can begin to have UPR for themselves which is psychologically healthy and allows change (Rogers, 1951). In a school, this means at least one adult needs to have the time and space to empathise with the CYP and the ability to downplay conditions of worth endorsed by the school (such as ‘good’ behaviour) in favour of valuing and accepting the whole CYP. In light of increasing pressure to produce academic results in secondary schools, staff may find this
difficult (Hutchings, 2015). Teachers are likely to find developing and conveying UPR to a disruptive, rude CYP very challenging in light of their responsibility to apply behavioural sanctions and teach the rest of the students. UPR demands acceptance of the person regardless of their behaviours, yet reconciling this with what is arguably a school’s role – to teach CYP about the consequences of harmful behaviours – is difficult.

While UPR may be an unattainable goal for school staff, person-centred approaches within the classroom have been proposed which can be effective in increasing inclusion through CYP and school staff seeing one another as people. Freiburg and Lamb (2009) propose person-centred ways of managing classrooms which have four key features which stem from Roger’s work Freedom to Learn (1969). A social-emotional emphasis ensures high relational quality between all members of the class. There is school connectedness: CYP feel personally connected to school and know they are valued there. A positive classroom and school climate prompts trust stemming from shared norms, a sense of safety, and shared responsibility for learning and behaviour. Finally, self-discipline amongst CYP is created where they are not punished but rather given time to reflect on mistakes. Where these person-centred approaches are valued by a school, Gatongi (2007) believes that better relationships between people in the school leads to more inclusive practices.

National policy insists that schools must produce academic results, and it is this which is valued by governments and therefore schools (Norwich and Eaton, 2015). This structure does not allow for different learning, psychological or social developmental trajectories to be recognised despite schools being a large contributor to CYP’s development. It is estimated that CYP spend up to 15,000
hours at school (Oberle and Schonert-Reichl 2016). The rigidity and narrowness in how schools’ success is measured by exam results leaves little scope for a psychological understanding of SEMHD. Policies around behaviour that deviates from the norm is currently treated through discipline policies based on behaviourist paradigm of reward and punishment, rather than a psychological understanding. Where attempts have been made to implement positive, psychological strategies such as functional behaviour analysis, results have been positive (Bradshaw, Mitchell, & Leaf, 2010). However, these formal system-wide psychological approaches are not routine within UK schools, possibly because they are too labour-intensive in the classroom. Alongside academic achievement schools can use humanist and other psychological approaches to improve how they manage SEMHD, particularly externalising behaviour.

**EP implications – supporting inclusion and SEMH**

Although some recent government documents under-represent the contribution of EPs (DfE, 2016; DoH, 2015), older ones have given a wide-ranging remit to the role. For example, “EPs have important roles in improving the opportunities of all children and young people, both in terms of local authority statutory responsibilities and more universal early intervention and preventative support” (DfE, 2011, p. 3). The EP role in statutory work, such as providing psychological advice for education, health and care plans (EHCPs), arguably takes EPs away from the universal prevention work described by the DfE (2011), and furthers the misconception that EPs’ main role is with individuals with SEN. This creates a tension as the EP’s statutory function (through a commissioned contract with the LA) is the reason for the EPS’ continued survival in the South London Borough, yet EPs want to improve inclusion for all. EPs must persuade head teachers, as
commissioners of the EPS, to buy in services which promote inclusion such as strengthening school policies aimed at inclusive practice. At the same time, EPs are bound by the Health Care Professions Council (HCPC) guidelines to identify and challenge oppressive or discriminatory practice (such as excluding CYP who have an unmet SEMHD), so they are in a good position to be a critical friend to schools in this regard. EPs must be creative in how they promote inclusion in a traded environment.

Social workers, CAMHS workers, school staff and EPs may all have trained using different theoretical perspectives, terminology and concepts (CAMHS, 2008), yet they are required to work as multi-agency teams (DfE, 2015). EPs can act as multi-lingual professionals who understand the terminology and concepts used at CAMHS in the medical tradition, as well as the other language and concepts used by education and social care. EPs, at the intersection between mental health and education, can support schools to translate national policy and guidance about SEMH for their context. They can guide schools to use evidence-based interventions, and can support the staff who deliver them. EPs are a valuable asset to schools in supporting SEMH (Rothi, Leavey and Best, 2008).

2.3 Conceptualisation of SEMH

The way school staff perceive SEMHD is very important in how they respond: they are the agents of change in any intervention designed to improve outcomes for CYP with SEMHD (Armstrong, 2018). As the way school staff perceive externalising and internalising aspects of SEMHD can differ, this section is divided.
Externalising Behaviour

The definition of SEMH says behaviour is communication of unmet need, and a symptom of underlying mental health difficulties (DfE, 2015), yet as previously discussed (in section 2.1) those whose behaviour does not fit a certain norm find their experiences of inclusion differ (Burton, Bartlett & Anderson De Cuevas, 2009). Teachers who need to manage externalising SEMHD are can feel frustration; this could act as a barrier to inclusion (Vermeulen, Denessen, and Knoors, 2012). The pressure teachers experience to produce academic results could be at odds with an individualised and thoughtful response to those who may disrupt the learning of others. In a study by Monsen, Ewing and Kwoka (2014), primary-school teachers expressed least willingness to include those with ‘behavioural difficulties’ and those with multiple SENs. The teacher may not conceptualise externalising behaviour as communication of an unmet need; this may be why teachers are more likely to punish than take a psychological, holistic view that could enable nurturing and understanding (Nash, Schlosser & Scarr, 2016).

If teachers perceive a CYP’s externalising behaviour to be deliberate and within the CYP’s control, they are less likely to consider alternative or additional courses of action to punishment. Nash, Schlosser and Scarr (2016), analysing postal questionnaire responses from a range of primary and secondary teachers in the UK, found almost 90% of teachers believed a student’s disruptive behaviour is ‘mostly’ or ‘completely’ within the student’s own control. That controllability suggests a within-child origin of the behaviour, with punishment as a within child response being the logical course of action. Surprisingly, the majority of teachers were also aware of possible ecological causes to CYP’s externalising behaviour: it seems there is a barrier between understanding the context of a CYP and responding in a way that recognises and is compassionate to that. While some
CYP may value strong boundaries to enable them to conform, this will not suit all. An approach requiring the teacher to consider the best course of action in response to a CYP’s behaviour and also their unique context requires energy, space to think and the will to do so. Nash et al. (2016) also highlight a need for teachers to have better skills so they see externalising behaviour in psychological terms rather than as a within-child problem.

**Internalising behaviour**

Internalising behaviours such as anxiety, depression and self-harm may be hard to understand. While initial teacher-training involves learning about ‘behaviour management’, there is much less emphasis on equipping teachers to understand specific diagnosable mental health difficulties (Margolis, Hodge & Alexandrou, 2014). Binary conceptualisations of mental health, whereby a clear line exists between health and ill-health, speak to the medical model of disability whereby mental health is a problem owned by the CYP and treated by a medical professional. Secondary teachers in particular have been found to hold a more medical model of disability than a social model, which recognises the need for systems and individuals to adapt to remove barriers. Holding the medical model of disability could limit the responsibility a teacher feels for the outcomes of particular students with SEN (De Vroey, Struyf & Petry, 2016). A medical model of disability suggests a dichotomous view of mental ill health and educational success, whereby the two are mutually exclusive, with a teacher being responsible for educational outcomes only. This view is rare in its most extreme form; in Graham, Phelps, Maddison and Fitzgerald’s (2011) study of over 2000 Australian secondary-school teachers only a small percentage of teachers reported feeling
internalising mental health was not at all their responsibility; the vast majority wanted to join an integrated referral pathway that includes external support complementing the in-school component.

**EP implications – supporting conceptualisation of SEMH**

Part of the EP role is to involve the family and CYP in any process that includes the CYP and family (HCPC, 2016). In doing so EPs can identify contextual factors which may give schools a broader perspective of the CYP’s behaviour. Applying psychological theories such as person-centred ideas, and proposing a hypothesis about underlying causes, can help staff further understand a CYP’s circumstances, potentially resulting in more flexible, person-centred responses. Introducing schools to an interactionist framework such as Bronfenbrenner’s ecological model could support this.

EPs are well placed to support schools in their understanding of SEMH, wellbeing, mental health, and the different ways these manifest through key functions such as “consultation, assessment, intervention, research and training, at organisational, group or individual level” (Fallon, Woods & Rooney, 2010 p. 14). However, EPs must be mindful of setting realistic expectations of their impact. Music (2007) describes how school staff may have great hopes when an external professional arrives, yet if the situation does not immediately improve, the staff may project their own feelings of failure and hopelessness onto the professional.

**2.4 The Views of School Staff on SEMH**

The previous section highlights how school staff’s understanding of the concept of SEMHD can affect their response and consequent inclusion of a CYP. The next
section explores what previous research has told us about how school staff perceive and respond to their responsibilities towards SEMHD. Arguably it is not policy-makers who influence the degree to which SEMH issues are supported in school but rather school staff, as their attitudes, openness and commitment will be the key to success (Hosford & O'Sullivan, 2016).

**Methodologies of staff view research**

The area of research investigating school staff’s perspectives on CYP with SEMH is in its infancy. A small-scale literature review by Armstrong (2014) using search terms ‘SEBD’ and ‘teacher perceptions’ found that 15 papers between 2000 and 2014 discussed teacher perspectives on ‘SEBD’; of these seven were from the UK. Methodologies utilised quantitative, qualitative and mixed methods however the majority were small scale exploratory qualitative studies. Semi-structured interviews and focus groups were favoured. Armstrong (2014) argues that the complexity encompassed within the term ‘SEBD’, makes a case-study qualitative approach appropriate.

An extension of Armstrong’s (2014) review to find relevant literature to inform the current research suggests that school staff’s views on SEMH is still an area for further investigation. Where Armstrong (2014) used the older term ‘SEBD’ and focussed on ‘teachers’, a systematic search seeking perceptions of those in different roles within schools and ‘SEMH’ yielded few peer-reviewed articles. Just four UK-based studies reported the experiences working with SEMH of a range of staff within UK secondary schools, one of which spanned different educational phases. Other research focussed on one staff group – such as teachers – or was conducted internationally where the policy and educational landscape is different.
Even fewer studies linked the voice of the EP to school staff views. This gap in research is key because EPs work across whole school systems, so understanding one staff group in isolation makes their work with SEMH less effective.

Research looking into the experiences of different staff groups with managing SEMHD is now be explored, and implications for EPs considered.

**Pastoral staff views on SEMH**

Pastoral staff views on SEMH are under-represented in research (Goodman and Burton, 2010). In the few studies which exist, support staff report feeling under-valued and under-appreciated within a school community (Higgins and Gulliford, 2014) yet pastoral staff play an important role in the inclusion and engagement of those with a range of SEN (Blatchford, Bassett, Brown, Martin, Russell, & Webster, 2011). Teaching assistants (TAs), sometimes known as learning support assistants (LSAs), account for 12% of the secondary-school workforce (DfE, 2010), and the majority of their interactions in secondary school are one-to-one (Blatchford et al., 2011). A positive relationship appears between the severity of the CYP’s SEN and the amount of time they spend interacting with a TA, whilst spending less time interacting with the class teacher (Blatchford et al., 2011). In light of the challenge of including those with SEMH, and externalising behaviour in particular, it is important to understand what pastoral staff find supportive to their inclusive practice especially as their deployment, practice and preparedness impact their effectiveness (Blatchford, Webster & Russell, 2012).

Goodman and Burton (2011) conducted semi-structured interviews with 14 non-
managerial pastoral staff including Special Educational Needs Coordinators (SENCos) in UK mainstream secondary schools. ‘Support staff’, as they were termed, found their role was highly geared towards supporting those with SEMHD, especially externalising behaviour, as flexible timetabling and a full focus on pastoral care allowed them to be emotionally and physically available. Goodman and Burton (2011) concluded that these highly skilled yet largely formally untrained staff members held a great responsibility for many aspects of support for SEMHD such as communicating with parents. While this is positive, how that good practice was disseminated to other staff was not mentioned as only support staff were included in the research. Communication between staff is especially important in a secondary school, where CYP may be taught by many staff, because noticing concerning patterns of behaviour is a part of school’s responsibility towards SEMH (DfE, 2016). This separate approach to pastoral care seemed less effective than a coherent whole-school response.

Establishing the views of more than one role within the same school can illuminate how different roles and systems promote the inclusion of CYP with SEMHD, and what is most supportive to different staff. Goodman and Burton’s (2011) participants knew their role was formally pastorally focussed, yet many variations exist across seniority levels that incorporate both academic and pastoral responsibility. Since SEMH should be ‘everyone’s business’ (Weare, 2015), the contribution of all staff regardless of role and timetabling should be understood and appreciated. Currently there is very little research on SEMH which spans the school community yet inter-role cooperation is the only meaningful way to take a whole school approach, as advocated by a range of government guidance over the decades, most recently the Green Paper (2017).
Teacher views on SEMH

The tensions schools face around achieving inclusion and raising academic standards are played out through teachers. Ellins and Porter (2005) found that teachers of core subjects in a secondary school were more content-focused, tending to concentrate on high academic standards, under pressure to achieve high grades for maths, English and science, for public report. This pressure acts as a barrier to teachers’ attitudes to inclusion. Despite inclusion being enshrined in law (Children and Families Act, 2014) teachers need a strong personal commitment to inclusive practice to ensure they not only make minimum necessary adjustments but support CYP with SEN to thrive (Ross-Hill, 2009).

Role boundary.

Why some teachers are more comfortable managing SEMHD than others could be due to how they see their role. Reed and Bazalgette (2006) propose that a ‘sociological’ role denotes a static job description, bestowed upon an individual. A person-in-role, or a psychological role, is, in contrast, dynamic as it addresses how an individual chooses to enact their sociological role – what they think are the aims of the role and how best to carry it out. This could be linked to Bronfenbrenner’s (1979) ideas of person characteristics. The persistence, motivations and temperament – force – and skills, past experience and access to resource – all interact with the sociological role to affect how an individual takes up their role in relation to SEMH – psychological role. When the person-in-role interact with the school context, there could be conflict if the organisation’s ethos, structure or culture restricts and conflicts with the psychological role. Literature overwhelmingly finds that the majority of teachers understand that supporting SEMHD in some capacity is part of their role,
’inexorably linked’ to academic success (Kidger et. al., 2009); most teachers are moving beyond the expectation to teach and their basic duty of care into a wider psychological role. The force and resource characteristics – which comprise the psychological role – can be restricted by the ethos, structure or culture within their actual institution.

Corcoran and Finney (2015), interviewing a range of school staff within primary, secondary and specialist provisions in the UK, found that staff largely thought they were doing ‘what came naturally’ regarding SEMH in the absence of a clear school or national policy for doing so. This brought a sense of personal and professional authenticity – force, resource and psychological role were aligned. When formalised initiatives arose which expand the sociological role, it created anxiety around being held accountable for roles and responsibilities not fully understood. Where teachers have been identified as “tier one mental health professionals” (DoH, 2015) and as possessing the “knowledge and confidence to help” (Green Paper, p. 27), some felt they did not know how to operationalise this imposed formal role. This suggests it is the ambiguity around the formalised role, rather than the expectation to support SEMH, which is a barrier for some teachers.

Many teachers feel they have a sharp boundary: when concerns become extreme such as diagnosable mental ill health which pushes them beyond their limit of experience and skills. Mazzer and Rickwood (2015), interviewing 21 secondary-school teachers in Australia, found all had inherent personal expectations to support mental health in some capacity, yet being responsible for all or part of ‘treatment’ was beyond their actual will and skill. As long as 30 years ago, schools as sites of mental health treatment have been proposed; Hamblin said “counselling is a necessity, but counsellors are not” (Hamblin, 1974, cited by
McLaughlin et al., 1996, p. 2), implicating school staff. The Green Paper (2017) cites evidence that appropriately trained school staff can deliver mental health interventions for mild–moderate difficulties, with similar success as specially trained therapists. This seems an imposed responsibility staff are wary of.

Seeking an ‘expert’.
Teachers do not always need specialist skills and knowledge to make a difference to SEMH. Mazzer and Rickwood (2015) found only half of their teacher participants felt their role supporting mental health was as a positive role model, creating a safe learning environment and identifying specific concerns in CYP. Graham, Phelps, Maddison and Fitzgerald’s (2011) study of Australian teachers finds while teachers recognised the need for ‘caring individuals’ able to respond with compassion to CYP, less than 20 out of 2000 recognised their own importance in the daily lives of CYP, while the rest cited the school counsellor or another ‘expert’ as playing this role. When only half of teachers recognise they make a contribution through daily action, the positive effects of empathetic relationships which provide some level of UPR are limited. The restrictions on time within a secondary school day also restrict opportunities.

Having the personal and professional will to support SEMH interacts with the realities of teaching in a secondary-school context. Seeking expertise beyond the teacher role could be due to teachers’ expanding sociological role, and with it expectations and workload. Broomhead (2013) finds teachers in mainstream and specialist schools believe they are being asked to take on a larger responsibility of the parenting of CYP with SEMHD, compensating for perceived parenting inadequacies that caused or exacerbated CYP’s difficulties. This was not only uncomfortable to teachers in this study, but prompted them to seek external
support as they felt meaningful engagement with parents was difficult. Seeking external support in response to a perceived increase in workload could be linked to teachers simply feeling too overwhelmed.

**Knowledge and skills.**
Knowledge and skill gaps were identified as a barrier to supporting SEMHD. Graham et al. (2011) finds teachers are able to identify a broad range of factors that might affect learning, behaviour and mental health from the familial, peer and school context. However, causal understanding and willingness did not always translate into teachers having skills or knowledge to address SEMHD. Lacking skill and knowledge could lead to low confidence and fear of saying the ‘wrong’ thing to CYP yet teachers often engage in situations outside their comfort zone, such as safeguarding disclosures, where teachers cannot predict or prevent CYP from disclosing (Mazzer & Rickwood, 2015). Kidger et al.’s (2009) UK study of 14 staff in varying roles in secondary schools found their perception was that teachers do not always want to engage in SEMHD because they do not feel comfortable discussing emotional or mental wellbeing; training could be a way to challenge that attitude. All research read in this literature review found staff wanted more training around SEMH, so this is not specific to one role.

Specifically, knowledge and skills gaps have been found in identification and signposting to appropriate support. This is worrying as that is a clear expectation of all staff within secondary schools (DfE, 2016). In the UK, Harland, Dawson and Rabiasz (2015) surveyed primary and secondary school teachers, and senior leaders; over one-third (38%) of teachers and senior leaders in schools do not feel equipped to identify student behaviour that may be linked to a mental health issue, and just over half said that they do not know how to help students with mental health problems.
health issues to access appropriate support. Generic training on mental health may cause role confusion as it does not help individuals identify exactly what their role and responsibility is. Instead, training needs to be targeted to the school context and the specific training needs of the staff (Rothi, Leavey & Best, 2008).

Most participants in studies on staff views of SEMH had volunteered to take part, and so could be seen as representing a particularly engaged, motivated group. The fact that even they experience large barriers to further supporting SEMH is worrying and points to the need for a whole school approach which addresses the barriers identified. The participants in Kidger et al.’s (2009) study named the perceived difference between themselves – as staff with a formal pastoral role - and teachers with no pastoral responsibility in terms of willingness to engage in SEMH. Teachers were seen as not understanding how fundamental SEMH is to academic achievement, though Kidger et al.’s (2009) participants conceded that in the short term and without an easing of pressure to produce results, SEMH support could be perceived by teachers as an ‘add on’. Cooperation between staff groups rests on the assumption that they all share the same goals, yet where staff have clearly defined roles that are either pastoral or teaching, this does not seem to be the case due to pastoral and teaching roles having different pressures and structural barriers (Lindqvist, Nilhoml, Almqvist & Wetso, 2011). Teachers without formal pastoral responsibility are a group whose views on SEMH are of particular importance.

**EP Implications – Supporting school staff**

The value of EPs in supporting staff to carry out their roles towards SEMH in school seems to be an area of research that has been given little attention as only
one UK study considered this. Rothi, Leavey and Best (2008) asked one member of staff in thirty-two primary, secondary and specialist schools how they thought their EP supported them to manage mental health concerns. Staff valued direct EP work with CYP and with themselves such as observing in the classroom, assessment and consultation however systemic barriers such as substantial under funding prevented EPs extending the scope of their work. This research was conducted almost a decade ago when EP services were not operating a traded model. More current research is needed which investigates how school staff view the EP within a mixed traded and statutory environment in the South London Borough. More recently, Taggart, Lee and McDonald (2014) surveyed over four thousand head teachers across the UK about their provision for SEMH and found that while 86% of schools have a ‘qualified psychologist’ (they did not specify what kind) linked to their school, they are thought of as less useful than other external professionals (such as counsellors) as they are not on site often enough. 69% of schools have their psychologist on site once or twice a month but schools want more regular support.

In a traded environment, schools have the freedom (as long as budgets allow) to commission EP services and this could allow greater scope for EPs to fulfil roles towards SEMH. Lee and Woods (2017) asked two UK EPSs and five of their commissioners (schools) about how trading had impacted the EP role. EPSs thought trading allowed an evolution of their role such that a fuller range of skill and expertise can be used, and that as other frontline services had become less available through funding cuts, traded EPSs had the skillset to fill gaps. Commissioners did not mention EPs in relation to SEMH specifically but valued cognitive assessment, a fresh pair of eyes and collaborative working. With waiting lists for CAMHS possibly exceeding 140 days (Children’s Society, 2015), EPs
could be well placed to support schools identify and support lower levels of SEMH, therefore providing early intervention.

Rothi, Leavey and Best (2008) found their participants valued direct ‘hands on’ work with CYP and staff, but EPs could also have a role supporting schools to consider how national policies can be translated in a meaningful way within their context. Training for staff which specifically addresses the schools’ identified gaps in skill and knowledge is a way EPs can creatively use what might be a limited time in school due to budget or other system constraints.

2.5 Staff Wellbeing

The previous section considered school staff’s views on their role towards SEMH. Every study included in the previous section highlighted the need for staff’s own wellbeing to be considered in order for them to support SEMH in their students. Now, staff wellbeing is explored.

The importance of staff wellbeing

The National Union of Teachers (NUT) has found that over 80% of teachers report stress, anxiety and depression at work, with over 50% feeling ‘severely’ stressed. The stress teachers feel may be contributing to the attrition rate of teachers: the School Teachers' Review Body states there is a ‘real risk’ that schools will not be able to recruit and retain a workforce of high quality teachers to support pupil achievement’ (National Education Union, 2017). The Children and Young People’s Mental Health Coalition (2015) recommends that school staff’s own wellbeing is essential in their capability to improve that of their students. An important factor in staff wellbeing is the relational quality present throughout the school, particularly
the effects of student–teacher relationships. The importance of student–teacher relationships has been well documented (Hattie, 2009) and compromising these seems disastrous to effective working with those with SEMHD. In a UK study of teachers, 93% said “my stress levels sometimes impact the way I interact with students” and this was thought to be a direct consequence of increased school accountability measures (Hutchins, 2015). Staff–CYP relationships are not only important for SEMH but also for safeguarding- Hutchins (2015) also found teacher stress led to less capacity to notice safeguarding concerns.

Schools do not seem incentivised to support staff wellbeing. The Ofsted framework (2015) has no explicit mention of staff mental health or wellbeing, though Ofsted sees whether schools have a “motivated, respected and effective teaching staff’ (p.67) and whether there is “quality of continuing professional development for teachers” (p.67).

The next section describes the importance of relationships within school communities on staff’s capacity to support others.

**Relationships and emotional work**

The emotional work to build the student–teacher relationships so key to supporting SEMH requires helping others, regulating others' behaviour and encouraging positive emotions in others. A huge investment of emotional energy is required, yet is often invisible and undervalued (Sutton & Wheatley, 2003). Emotional work is not mentioned by recent government guidance around schools and mental health (DfE, 2016; DoH, 2015). Many researchers argue that this emotional work can affect school staff’s wellbeing and intention to stay in the
profession so it is important to understand emotional work.

According to Tuxford and Bradley (2015) ‘emotional work’ in teaching is conceptualised as: exposure to emotionally demanding situations (such as aggressive behaviour), requirements to engage in emotional labour to regulate one’s own emotions (defined as the regulation of emotional feelings and expressions to comply with implicit and/or explicit organisational rules regarding the display of emotions (Brotheridge & Lee, 2003)) and expectations to nurture and maintain positive interpersonal relationships with others. Tuxford and Bradley (2015) surveyed 644 Australian primary school teachers and found that emotional work, and non-emotional work, such as time constraints and workload, are both related to emotional exhaustion; that in turn can lead to teachers wishing to leave the profession. The reasons given by UK teachers for leaving the profession reflect this – 76% cite workload, and 25% cite challenging student behaviour (Association of Teachers and Lecturers, 2017).

Interestingly, an aspect of emotional labour called ‘surface acting’ as defined by Brotheridge and Lee (2003) as the modification of observable expression such as feigning enthusiasm or putting on a happy face to greet a difficult student, was particularly related to emotional exhaustion (Tuxford and Bradley, 2015). Frequent displays of inauthentic emotion are thought to be detrimental to teachers’ wellbeing. Teachers’ workplaces demand that in the frequency, intensity and range of emotional responses necessary (Hargreaves 2000).

The second aspect of emotional labour is called ‘deep acting’ – where teachers use visualisations or knowledge to ‘psych themselves up’ when unmotivated to muster genuinely felt emotions that match what is required of their job role.
Cognitively reappraising challenging behaviour in light of what is known about a CYP’s background was also related independently to emotional exhaustion in Tuxford and Bradley’s (2015) research. Whilst deep acting produces authentic emotions and requires effort, the inauthenticity of surface acting may come at a greater personal cost to teachers.

Other research has found that teachers use faking, hiding, regulating and genuinely expressing emotions deliberately as tools in the classroom. Taxer and Frenzel (2015) found that the genuine expression of negative emotions was rarely reported by secondary-school teachers. Instead, negative emotions were hidden while simultaneously positive emotions were faked. Teachers may also hide or regulate the intensity of positive emotions, suggesting implicit norms exist about how emotions are expressed in schools, with whom, and how strongly. Although faking and hiding of emotions was associated with emotional exhaustion, teachers may be using these strategies regularly when building relationships and co-regulating CYP’s emotions.

Within a client–‘helper’ relationship, person-centred approaches would stress the importance of the ‘helper’ displaying genuinely felt emotion rather than putting up professional boundaries through surface or deep acting. However, in a school, teachers are discouraged from displaying all their genuine emotions (Taxer and Frenzel, 2015). It is possible, then, that school staff are less able to give emotional support to CYP – especially in the fast-paced school environment where responses to CYP are likely to be reactive. The constant focus on the other person, and their emotional needs, while one’s own go unnoticed and unsupported seems to be at the root of why building relationships can be so detrimental to wellbeing. To enable some degree of congruent, genuine, authentic
emotion to be expressed in school, staff need a reflective space where they can listen to their own emotional reactions. There is currently no formal requirement for schools to provide this.

Other professions such as counselling or psychology have a focus on professional distance, on emotional boundaries, and on recognising and managing one’s own emotional reactions. The Carter Review of Initial Teacher Training (2015) makes no recommendation pertaining to new teachers managing their own emotions, though it does recommend training teachers be given a grounding in child and adolescent development. Both teacher training and later in-service training may insufficiently equip teachers with the skills to manage their own emotions. Giving regard for teacher’s undervalued and invisible emotional work to build relationships could enhance their wellbeing and intention to stay in the profession.

The studies by Tuxford and Bradley (2015) and by Taxer and Frenzel (2015) were both completed via quantitative questionnaires yet building relationships is nuanced and complex and so this methodology seems reductionist. Applying Bronfenbrenner’s (1979) ecological theory that the person interacts with their environment, the force and resource characteristics inherent in building relationships cannot be looked at by asking the person alone, and so seeking to understand emotions and relationships within the school context allows a deeper understanding.

While relationships between colleagues may also require emotional regulation at times, workplace social support has been found valuable, both directly in enhancing work experiences of all, and as a mediator buffering against the potential negative effects of emotion work for the most stressed. Kinman, Wray
and Strange (2011) propose workplace social support plays a role in three ways: firstly, good interpersonal relationships at work may make the emotional work less onerous; secondly, less emotional labour may be needed as more ‘appropriate’ emotions arise naturally; and thirdly the ability to disclose emotions in a supportive environment could improve coping mechanisms. Being able to display authentic emotions and have a respite from surface acting could help staff’s wellbeing. When school staff themselves perceive a supportive staff community where they can seek advice and support, so they are more resilient when supporting CYP. Pastoral staff may spend a great proportion of their time in interactions with CYP, so their emotional wellbeing can even less be forgotten.

2.6 Supporting Mechanisms for School Staff

The previous section has explored the emotional work teachers perform in their relationships with CYP, and its impact on their own wellbeing. The next section will seek to understand how teachers can buffer negative effects of the emotional work, and what teachers say does support them. The discussion then moves to the contribution a whole school ethos can make to improving teacher’s capacity to engage with SEMHD. Liu, Song and Miao (2018) describe how teacher wellbeing can be both an individual and an institutional construct. Individual wellbeing is proposed as introspection and interpersonal relationships, while institutional wellbeing could be positive collegial relations with colleagues, institutional support and professional development (Kinman, Wray & Strange, 2011). Bronfenbrenner’s ecological theory suggests individual staff members interact with their institution, so the wellbeing of both are interconnected.
Providing a reflective space

Providing school staff with a space to explore and address their emotional reactions to their work has been mentioned by research seeking the views of teachers on their role in SEMH; it evidently relates to their assertion that their own wellbeing needs support if they are to support others well (Kidger, 2009; Andrews et al. 2014). Some research suggests staff supervision or consultancy groups can be beneficial when aimed at creating a safe environment in which to explore vulnerabilities and express genuine emotions. Rifkind (1995) suggests that care for carers is an unfashionable idea, so little is in place for workers who confront difficult and distressing circumstances in their daily work. This surely applies to school staff, as there is no formal requirement for schools or local authorities to provide emotional support for school staff, even as their responsibilities increase towards CYP experiencing SEMHD. Orbach (1994) believes staff do not want to appear needy or demanding, and so present themselves as coping well, yet behind that façade there may be a person feeling incompetent and afraid to take risks, a person needing help in a reflective space to explore their own emotional reactions.

The need for emotional connectedness with others can be realised through staff coming together in a reflective group. Jackson (2002) described a work discussion group in a mainstream UK secondary school; rather than feel overwhelmed by hearing others’ difficulties individuals strengthened in a work discussion group. More able to reflect on the emotional underpinning of SEMH issues especially externalising behaviour, staff given the time and space find greater understanding and capacity to continue a positive relationship with CYP with SEMHD.
The contribution of self-efficacy

Teacher self-efficacy is a motivational construct defined as “a judgment of his or her capabilities to bring about desired outcomes of student engagement and learning, even among those students who may be difficult or unmotivated” (Bandura, 1977 p. 783). Bandura (1997) contends that individuals with robust beliefs of personal efficacy are more motivated, tend to engage tasks in novel ways, take more risks, and persist when they encounter challenges. All of these could be supportive when working with those with SEMHD, especially as self-efficacy is linked to positive outcomes for both staff and students (Klassen and Tze, 2014). When self-efficacy is low, people instead can choose to avoid a task or disengage when it becomes difficult, responding with less sensitivity and commitment.

Research has found self-efficacy important in reducing negative emotional effects of building relationships with CYP staff find difficult. It has been postulated as being directly and indirectly related to emotional exhaustion. Brown’s (2012) systematic literature review found in 10 out of 11 studies, teacher self-efficacy was negatively linked to emotional exhaustion. Other studies have found self-efficacy can mediate the relationship between the strain of managing difficult relationships with CYP and emotional exhaustion. Tsouloupas’s (2010) survey of 610 elementary and high-school teachers in the USA found teacher self-efficacy for handling ‘misbehaviour’ – operationalised as negative interactions, intense interactions and misbehaviour problems – mediated the relationship between perceptions of student ‘misbehaviour’ and emotional exhaustion. This suggests that improved teacher self-efficacy can lead to lower levels of emotional exhaustion when considering externalising SEMHD. If teachers have more confidence in their own capability they are more likely to engage without a negative impact on their own
Increasing efficacy in relation to classroom management and student engagement, but not to instructional skills was effective in buffering against emotional exhaustion (Tuxford and Bradley, 2015). While this finding may help develop targeted support for teachers in the area they need it, failing to recognise the interlinked nature of the quality of instructional skills and CYP’s engagement could lead to too narrow a view.

**Sources of self-efficacy**

Self-efficacy is thought to be domain-specific and situational; it can change over time (Bandura, 1977) – a positive aspect. Bandura (1977) found four sources of self-efficacy: mastery experiences – experiencing success yourself; verbal persuasion – being told by significant others you are capable; vicarious learning – observing relatable others being successful; and physiological response – levels of arousal can help or hinder performance. These ideas are worth applying to supporting SEMH in schools.

Bandura (1997) thinks mastery experiences are most influential in the development of self-efficacy for a particular domain, as they give individuals proof of their capabilities. Nearly every teacher has come into contact with a CYP with SEMHD (Andrews et al., 2014), yet that research tells us that experience alone does not lead to feelings of competence (Andrews et al., 2014).

While teachers want training, training alone – which could be said to be verbal persuasion – also does not seem to be effective. Staff need to move on from being passive recipients to being actors – which can be uncomfortable and problematic.
A further step following training may be needed. Goodman and Burton (2010) found secondary school teachers learn effectively from peers through peer observation – vicarious learning – if they are given the time. This answers teacher’s wish to outsource responsibility for some aspects of SEMHD as the skills and capability to learn may already exist within staff. Improving self-efficacy through passive received training and actively collaboration and reflection with colleagues requires space within an already packed curriculum and INSET schedule; a senior leader needs to see the value.

**Whole-school factors and SEMH**

In line with Bronfenbrenner’s ecological theory, schools as organisations interact with individuals and microsystems within schools. It is therefore important to consider whole-school factors. Liu, Song and Miao (2018) describe how a balance needs to be found between individuals supporting their institution’s wellbeing, and their institution supporting individual wellbeing. Whole-school factors affecting SEMH of both staff and CYP are now be discussed.

**Ethos and climate.**

The ethos and climate of a school – its values, beliefs and attitudes – should encourage a sense of ‘connectedness’ – feeling belonging, respected and accepted (Greenberg and Jennings, 2009). School connectedness is a person-centred principle described by Freiburg and Lamb (2009) whereby CYP are invested in the school community as they perceive they are valued by it. Where this inclusive ethos and climate exists, it can benefit CYP and staff alike, reducing externalising behaviour, allowing appropriate expression of emotion and responsiveness to individual need, all of which benefits SEMH (Greenberg &
Individual self-efficacy has been linked to school climate. Hosford and O’Sullivan’s (2015) survey of UK primary-school teachers found a supportive climate with enough resources and collegial relationships is more likely to have high self-efficacy for managing difficult behaviour and engaging in more inclusive, collaborative practices. Where challenges to competence exist, this study found teachers look within their school to the head teacher and other staff to boost their confidence. Good relationships and networks across the school are vital.

Higgins and Gulliford (2014) investigate impacts upon the self-efficacy of 14 teaching assistants in UK secondary schools. They find organisational factors are essential, such as whether the school is a developing and learning organisation within which the TAs play a part. This fits with Booth and Ainscow’s (2002) idea of inclusion as an evolving process whereby the organisation continually strives to meet the needs of its learners. Effective sources of self-efficacy are vicarious learning with and through others, and the gaining of mastery experience through greater confidence to engage. As in Goodman and Burton’s (2011) study, these TAs perceive they are not as valued within the school community – which damages self-efficacy. Self-efficacy is not only a characteristic within the individual; it interacts with the wider community.

Perceived support in the wider school environment can affect teacher’s willingness to include. A study by Monsen, Ewing and Kwoka (2014) of 95 UK primary teachers via closed-question questionnaires find that teachers’ attitudes to inclusion correlated positively with perceived adequacy of both internal and external support; a collaborative approach is needed across school systems and
the local authority. Although ‘adequate’ support was not elaborated on, it
highlights how staff perceive the school’s willingness and effort towards CYP with
a range of SEN affects how teachers themselves can respond.

**Social capital.**
Social capital is defined by the Organisation of Economic Cooperation and
Development as “networks together with shared norms, values and
understandings that facilitate co-operation within or among groups” (OECD, 2001,
p. 41). Building social capital in a school relies on high-quality relationships
throughout it. There are different components to social capital: bonds between
people who share some common identifying feature (such as teachers); bridges,
links that stretch beyond a shared identifying feature (such as the relationship
between parents and teachers); and linkages that create bridges with those of a
different social status to oneself. Improving bonds could be through good peer
learning and reflection. Good relational quality across the community through key
interpersonal relationships mean the school community can be more resilient and
can enhance the wellbeing of all individuals within it (Roffey, 2012).

Increasing social capital through bridging with parents may be more difficult at
secondary schools than at primary schools, yet involving parents in supporting
SEMHD is important. Gibbs and Powell (2011) study teachers’ individual and
collective efficacy beliefs – beliefs about a group’s ability to achieve a certain goal
– in UK primary schools. They find teachers had the strongest individual self-
efficacy beliefs for classroom management, yet collectively as a staff they had the
least efficacy for ‘addressing external influences’. Addressing external influences
included considerations such as impacting home-life. Schools are required to
bring parents in to the school community and to support them in participating in
decision making and provisions for their child (DfE, 2015). Since CAMHS and other external agencies rely heavily on schools to identify and refer CYP, bridging with external agencies is also important.

**Tasks and role conflict.**
A primary task is the conscious and rational reasons people have come together in an organisation – the work they must do to remain as an organisation. There are different views on the primary task of schools. Furedi (2009, p. 6) argues education is about knowledge transfer and must be 'saved from those who want to turn it onto an all-purpose institution for solving the problems of society'. Others value educational outcomes, but also see supporting SEMH needs within school as 'part and parcel' of their work (Kidger et al., 2009). Underpinning beliefs about the purpose of the school are likely to shape how resources are deployed, what structures and processes are in place, and how the school approaches CYP who do not ‘fit’ with the school’s primary task.

Hutton, Reed and Bazalgette (1995) see inter-relations between the system, the individual and the role. The possibilities for role conflict are numerous, especially as school staff negotiate their role in promoting and supporting SEMH in schools which face budget cuts (Institute of Fiscal Studies, 2017), increasing pressure to achieve academic results (Armstrong, 2014) and unacceptable teacher workload (NUT, 2013). Cultural and systemic barriers seem to make it hard for teachers to enact formalised expected responsibilities towards SEMH.

**School holding and containing.**
The school ethos is a better resource for staff and CYP alike if it provides some level of ‘holding’. A holding environment, first discussed by Winnicott (1965), is
one that fosters the natural maturation and development of the full potential of each child, where security is bolstered, and learning optimised. This early research concerned parent–child relationships; various authors have since considered the school as a holding environment. Hyman (2013) proposes a school environment empathetically attuned to its members and flexible enough to contain its own pre-occupations in order to support others. It will allow its members to feel secure, emotionally connected and validated. A school’s ‘preoccupation’ could be with externally imposed accountability measures such as exam results and success in Ofsted evaluations. Teachers can become preoccupied about their personal performance evaluation. In an un-held, inflexible environment, the school may respond to a CYP whose behaviour is challenging in a punitive, exclusionary way. In a holding environment it may respond more flexibly, attempting to understand the CYP’s situation and making more deliberate, informed decisions. A holding environment promotes universal SEMH because being ‘held in mind’ – the idea that knowing you are being considered and cared for even when not in direct contact with those caring for you – can be supportive.

**Attunement.**
Linked to the idea of holding and containing is attunement, a principle stemming from research on the interactions between infant and caregiver. ‘Intersubjectivity’ refers to when infant and caregiver share an understanding; it is the basis of attachment relationships, essential for social and cognitive development (Bowlby, 1997). Attunement is a development of intersubjectivity, which refers to cycles of initiation and response. Biemans (1990) suggests six principles: being attentive, encouraging initiatives, receiving initiatives, developing attuned interaction, guiding, and deepening discussion. These principles have been used to improve attachment relationships between parents and children in Video Interactive
Guidance, an intervention where interactions are filmed and compared to the attunement principles.

Nurture groups were designed by Marjorie Boxall (1970) to put the attunement principles into place for CYP not coping in mainstream education, often with SEMHD. They provide a dedicated, small-group space and specialist teacher to support social and emotional development alongside learning. The effectiveness of nurture groups can be through teacher–child interaction using the attuned principles. Cubeddu and MacKay (2017) compare teachers’ use of the attunement principles in CYP–teacher interaction within mainstream and nurture classes in Scotland. While this study is small scale, it suggests nurture-group teachers use the attunement principles more often than mainstream teachers, possibly due to their training, the small class size and reduction of academic expectations. They suggest that while nurture groups are not appropriate for all schools, the principles of nurture (and therefore attunement) could be used to create whole school environments that nurture both staff and CYP. Lucas (1999) asserts that to be effective, the value in all people in the school community – staff as much as CYP – must be recognised. In an emotionally literate school, managing, containing and recognising emotion becomes part of the way the school functions.

**EP implications**

EPs can have a role enhancing staff’s self-efficacy. Consultation with school staff is a mechanism through which EPs can enhance efficacy through providing a different perspective on staff experience, using re-framing and solution-focussed approaches. Gibbs and Miller (2014) suggest consultation with an EP, drawing on positive psychology, could be enough to help a teacher “re-experience herself as
effective” (Gibbs & Miller, 2014, p.616). This relates to mastery experience – one of the four sources of self-efficacy posited by Bandura (1977) – meaning when people have a successful experience they are more confident to repeat it. Gibbs and Miller (2014) also believe consultation with a teacher is a place for the acknowledgement and validation of emotion, where vulnerability can be shown and the teacher can begin to build their own resilience.

EPs may also advocate the importance of activating within-school resource by setting up peer-to-peer learning episodes which enhance the vicarious learning through others. EPs may also offer verbal persuasion, reducing anxiety through professional reassurance, and again this could be provided through consultation. EPs could also lead reflective spaces for staff such as Solution Circles, Circles of Adults or work discussion groups.

EPs can raise the profile of staff wellbeing by helping senior staff to emotionally support those staff they manage. Prins (2007) found the greatest predictor of emotional burnout in medical students is a perceived lack of emotional support from supervisors. Asking questions about how and from whom school staff receive support could highlight to school leaders the importance of staff wellbeing.

A barrier might be how the EP role is perceived. Ashton and Roberts (2006) asked 28 SENCos their views about the EP’s unique contribution. Most SENCos saw ‘advice-giving’, ‘statutory assessment work’ and ‘individual assessment’ as the unique contributions that EPs make to their schools. EPs want to apply psychology to benefit all aspects of CYP’s lives, in school and out. Beltman, Mansfield and Harris (2016) describe how school staff feel the school ecology is more influential in their feelings of resilience when working with challenging
students than the EP. This study was conducted in Australian schools where an EP is on site every week. In UK schools, where the EP is on site just once or twice a month in 68% of schools (Taggart et al., 2014), staff may equate lack of direct contact with less effectiveness. If EPs are to work with staff as well as directly with young people, greater appreciation of the range of ways EPs can support staff as well as CYP is important.

Funding cuts have pushed EPs in the South London Borough to be creative in supporting whole school systems to respond better to SEMH. EPs within the Borough engage in a range of activities wider than individual casework. Emotional Literacy Support Assistants, trained and supervised by EPs, can enhance the provision for CYP experiencing low level or temporary issues. The EPS also provides centrally organised training for interested schools in nurture group provision, viewing behaviour psychologically, autistic spectrum disorder provision and others. No activity within the Borough currently supports cultural change within particular schools. Funding has been cut for Borough-wide projects such as a multiagency team supporting particular schools with identifying at risk CYP and providing mental health support. Work within a school involving targeted culture change would need to be negotiated with the commissioner – often the head teacher or SENCo – within that school. If commissioned, culture change work is possible through techniques such as appreciative enquiry or school policy evaluation.

Gibbs and Powell (2011) find school staff are less efficacious about effecting change in CYP’s lives outside school – such as through parents. That could provide a role for EPs, encouraging collaborative partnership working between all elements within a child’s ecological system. EPs are well placed to facilitate the
building of social capital through linking parents, school, the CYP and other external agencies.

Summary of literature review

The literature review has explored the difficulties faced by schools in understanding roles and responsibilities, sometimes conflicting, towards complex concepts within SEMH. School staff are on the front line supporting CYP and enacting government policy and guidance. Despite barriers many want to do more. Their views of what will help them to take a wider psychological role with SEMHD is needed in UK mainstream secondary schools. Little research studies school staff’s view on how they can be best supported, or compares it to EP views within the same borough.

2.7 Research Questions

1. What structures, processes and characteristics did staff and EPs think best supported school staff in meeting CYPs' SEMH needs?

2. How does a member of school staff's particular role affect how they can best support CYP with SEMHD?

3. Where can EPs be most effective when supporting school staff to feel empowered to effectively fulfil their role towards CYP with SEMH difficulties?
Methodology

This research aims to understand how EPs can take a more active and confident role in supporting mainstream secondary schools to manage SEMH difficulties. Phase 1 was an EP focus group within a South London Borough that explored the EP perspective of good practice in schools and their role supporting schools with SEMH difficulties. Information from this focus group was used to inform and triangulate with phase 2. Phase 2 aimed to explore the experiences of different groups of school staff across two mainstream secondary schools (in the same South London Borough) of supporting CYP who have SEMH difficulties.

3.1 Approach to Research

Research design

This research is a two-phase sequential exploratory case study design. Yin (2002) defines a case study as “a contemporary phenomenon within its real life context, especially when the boundaries between phenomenon and context are not clear, and the researcher has little control over the phenomenon and context” (p. 13). This research is a multiple embedded case study — each school is a case, and within each case are multiple units of analysis (staff roles). The EPS constitutes another case. Yin (2009) suggests there are five types of case-study. This research is a ‘representative’ case-study, seeking to look at cases which have potential to be generalised as they are likely to represent other secondary schools within the South London Borough but also further afield. This research used qualitative methodology at each phase to enable a rich picture of experiences to be gathered, at a single point in time. It is cross sectional, seeking to understand natural, unchanged, existing conditions with no intervention by the researcher.
Epistemological perspective

A research paradigm is “the set of common beliefs and agreements shared between scientists about how problems should be understood and addressed” (Kuhn, 1962). This research has been conducted from a social constructionist paradigm, which acknowledges that data collection is an interpersonal and co-constructed activity, where multiple constructs of reality can exist in the same space. It describes the assumption that all knowledge is contextual and dependent upon the standpoint of the individual (Burr, 1995). Different individuals can therefore give different insights into the same phenomenon.

Gathering participants together in a focus group, rather than individual interviews, allows the beliefs, cultural norms and school ethos to be explored and challenged by individuals who may hold a different viewpoint. Conducting a focus group of EPs adds another dimension of viewpoint in two ways: they work with school systems applying evidence-based and practice based-approaches to inform, strengthen and evaluate school’s SEMH policies and practices; EPs in a group can discuss their potentially variant views and practice.

Staff’s views are embedded within the context of the school and surrounding community, so information widely known about each school is presented to support the reader in placing staff comments in context (Appendix 3). Information gained informally about the school context, participants, their relationship to one another and the context of each focus group is also presented for the same reason in the text below.

This research used solely qualitative methods. Using qualitative methods allows for data to be rich and not to be reduced at the point of data collection (such as
asking participants to ascribe a number to their experience on a scale). The definition chosen of qualitative research is the idea that it “is to understand or explore meaning and the ways people make meaning rather than prove a theory or determine relationships between factors” (Braun & Clarke, 2013, p. 35). Through gathering data from school staff holding a range of different roles within two schools, recurring patterns of experience can be sought and compared against what EPs in the same borough think. It is important to realise that each participant’s contributions will be subjective and individual to their own experience and organisational context, consequently an effort was made to understand individuals’ prior experience and current role.

**Focus groups**

To address all aspects of the research questions, focus groups were employed. Focus groups are relatively new to psychological research, and are gaining popularity particularly in health psychology. Powell and Single (1996, p. 499) defined focus groups as a “group of individuals selected and assembled by researchers to discuss and comment on, from personal experience, the topic that is the subject of the research”. Focus groups are different to group interviews (in which participant and researcher speak to one another, but group members do not interact as they use the rich intercommunication between group members. Focus groups were chosen due to several benefits they can offer, as suggested by Willig (2008):

- Focus groups allow participants to extend, challenge, and develop comments made by each other, thereby allowing a rich discussion to take place and the construction of a shared understanding. This will be especially important in understanding school ethos and culture, and also
different individuals’ understanding of SEMH difficulties.

- Focus groups may feel less artificial than a one-to-one interview experience, thereby are likely to have higher ecological validity.
- A multiplicity of views can be seen, including how those might adapt through challenge or hearing other’s views.
- A large amount of rich data can be collected in a relatively short amount of time which supports the short time-frame of a professional doctorate.

Focus groups can also present some challenges. The table below presents the anticipated issues and how they were addressed prior to data collection.
Table 1 Addressing focus group issues

<table>
<thead>
<tr>
<th>Identified issue with focus group</th>
<th>How it was addressed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dynamics between group members may mean some members self-censor or are unwilling to participate fully. This may be especially the case if authority figures are present.</td>
<td>Focus groups were homogenous (similar roles present in each group), minimising power differences between members, meaning staff may encounter similar issues and/or work closely together. Group rules co-constructed and agreed at start of group – e.g. within group confidentiality. Consent forms included the right to request their data be deleted at any stage of the research process if they felt uncomfortable with their contributions being shared or known. Participants were reminded of this at the beginning and end of the focus group session</td>
</tr>
<tr>
<td>Focus groups may limit the opportunity for gaining in depth individual views</td>
<td>Individuals may feel stimulated by hearing others speak, therefore making higher quality contributions themselves. Enough time was given to allow for a full discussion to take place. Participants were invited to add anything they wanted to say at the end. Participants were reminded they could email the researcher if they thought of any other points they wished to make but had not said.</td>
</tr>
<tr>
<td>The researcher needs to have good group facilitation and interpersonal skills to enable a productive discussion to take place.</td>
<td>Participants fully informed of the purposes of the research prior to volunteering to take part. Participants are reminded of the purpose at the time of the focus group. Group rules co-constructed at the start, including allowing others to speak. The expectation that the researcher may guide the discussion or follow up a contribution is explicitly stated at the start of the focus group. Focus groups recorded so the researcher could dedicate all attention to facilitation.</td>
</tr>
</tbody>
</table>
Researcher applies competent consultation skills as part of TEP role.

The research question may incorporate some elements of personal experience which some may feel uncomfortable about sharing in a group situation.

Group agreement about within-group confidentiality gained at the start of the focus group.

Facilitation to enable participants to feel safe to share, including not allowing individuals to dominate discussion, was prioritised.

Participants reminded that their contributions to the focus group will remain anonymous.
3.2 Research Procedure

Phase 1 – EPs.

Consent to approach the EP team was verbally gained from the Principal Educational Psychologist (PEP). All 16 qualified EPs within the Borough’s educational psychology service (EPS) who have been linked to a mainstream secondary school in the last academic year were invited to take part in the research via an email containing information about the study. The sample was a volunteer sample based on availability and interest. All EPs were emailed a short description of the study and asked to respond if they were interested and met the criteria.

Table 2 EP participant information

<table>
<thead>
<tr>
<th>EP participant</th>
<th>Years’ experience as an EP</th>
<th>Years worked at the South London Borough EPS</th>
<th>Relationship to School 1 and School 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>20</td>
<td>20</td>
<td>Is currently link EP for School 1 school alongside researcher and is researcher’s fieldwork supervisor</td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td>3</td>
<td>Has not been link EP for either school</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td>1</td>
<td>Has not been link EP for either school</td>
</tr>
<tr>
<td>4</td>
<td>20</td>
<td>17</td>
<td>Has not been link EP for either school</td>
</tr>
<tr>
<td>5</td>
<td>25</td>
<td>14</td>
<td>Has not been link EP for either school.</td>
</tr>
</tbody>
</table>
Phase 2 – School staff.

Selecting schools.
Mainstream secondary schools within the South London Borough who have a link with the EPS were considered. A purposive sample of two schools was selected, which contrast in level of student need (SEN, EAL, FSM), diversity of intake and affluence of surrounding catchment area. Neither school was in ‘special measures’ or ‘requiring improvements’ as judged by Ofsted. The PEP in the South London Borough informed the selection of two suitable schools. Contact was established through the school’s link EP making an introduction to the person they deemed most appropriate. In both schools, the SENCo became the key contact for the researcher.

Contextual information.
Contextual information is intended to illuminate the official data about these schools (see Appendix 3). This information was gained from EPs within the South London Borough who are familiar with the schools, from participants within school who provided school information, and in the case of School 1 from the researcher’s own deeper knowledge through being the link trainee EP.

School 1 is an 11-16 mixed Catholic secondary school in the centre of the South London Borough, serving an inner-city urban population. Although Catholic, with a large contingent of Northern Irish Catholic staff (including the head teacher) only about 40% of the CYP identify as Catholic. There are over 50 languages spoken and there is a transient population of unaccompanied minors and those new to English and to the UK.

SEMH issues experienced by CYP at School 1 can stem from traumatic
experiences leaving a native country and travelling to the UK, with CYP arriving at
the school throughout the school year. CYP’s difficulties are often exacerbated by
stressors such as poor housing, unstable immigration status or experiencing
language or cultural boundaries to accessing services. The school role is only half
full and the school continues to face challenges with staff retention. The school
faces competition from a highly regarded Catholic school within the South London
Borough which is deemed ‘Outstanding’, and so is not the destination for Catholic
parents.

School 2 is highly oversubscribed. There is a collegiate system, with four distinct
colleges on the same large site, each with its own head teacher to facilitate a small
school experience. One of these colleges specialises in CYP with physical or
medical needs. Two further colleges exist – 6th form and the college for learners
with additional needs (who spend some time here and some in their ‘home’
college). The school is secular.

**Selecting school staff within chosen schools.**
SENCos within each participating school were instrumental in organising the
research on-site. They recruited staff members for focus groups through emailing
a short description of the research to the following staff groups as specified by the
researcher (Appendix 4).

- Classroom teachers (qualified members of staff without management or
  additional ‘teaching and learning responsibilities’ which have a
  management element. Teachers could be form tutors or hold non-
  leadership pastoral responsibilities).

- Teaching assistants/other staff with a large non-leadership, non-teaching
  pastoral responsibility (dependent upon the pastoral structure within the
• School leaders (could include any member of the leadership team).

In practice, SENCoS in both schools ‘handpicked’ the pastoral staff members. This was due to a range of factors such as the variability of pastoral roles, issues of hourly pay meaning closer organisation was needed, and availability of staff roles which fulfil the criteria specified. Overall, 14 school staff participated.
<table>
<thead>
<tr>
<th>Group</th>
<th>Role title</th>
<th>Participant Identifier</th>
<th>Participant's description of responsibilities</th>
<th>Experience with CYP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pastoral/leadership</td>
<td>Head of year 10</td>
<td>A</td>
<td>Mainly pastoral, keeping CYP on track. Supporting tutor team. Manage reward and sanction processes, liaise with parents</td>
<td>Worked at School 1 for 1.5 years. Prior to this, 2 years working in a PRU. Prior to this 17 years as PE and pastoral in a mainstream secondary</td>
</tr>
<tr>
<td>Chaplain</td>
<td></td>
<td>B</td>
<td>Lead children to heaven and make them aware they have a relationship with God. Work with pastoral staff around assemblies and religious events. Provides informal counselling to CYP and staff</td>
<td>Worked at School 1 for 1.5 years</td>
</tr>
<tr>
<td>Senior Leadership</td>
<td>Team member in charge of Student Services</td>
<td>C</td>
<td>Responsible for the whole pastoral system within school, liaising with parents, external agencies, staff body in school</td>
<td>Worked at School 1 for 2.5 years. Prior to this worked at same mainstream secondary as Head of year 10 running 'The Unit' for behavioural issues for 7 years</td>
</tr>
<tr>
<td>Teaching staff</td>
<td>Head of key stage 3 and teacher of PE and maths (3 teaching periods per week)</td>
<td>D</td>
<td>Behaviour and academic progress of CYP in years 7,8,9. Looking after the tutor teams of these year groups. Working with CYP in Behaviour Support Unit</td>
<td>Worked at School 1 for 2 years. Was previously head of year 9. Worked as a teacher in Northern Ireland previous to working at School 1</td>
</tr>
</tbody>
</table>
Participant and focus group information

School 1’s organisational structure only includes three members of staff who would meet the pastoral staff criteria. Two of these are nuns who work in school supporting religion, and the third was on maternity leave. This group inevitably included people who held a teaching or leadership role in addition to a pastoral role. This group are staff work very closely together on a daily basis and are in constant communication via walkie talkie. This group could be seen also as representing the school’s leadership.

Although four teachers had expressed interest and had planned to attend the teacher group, on the day several incidents had occurred which meant only one teacher was available. This seemed to reflect the nature of the school that staff respond flexibly and immediately to any issue, regardless of role. This member of staff also holds a significant pastoral responsibility. Again, this represents the school as they have experienced high staff turnover and so staff are required to fulfil a range of duties and meet needs where they arise.
<table>
<thead>
<tr>
<th>Group</th>
<th>Role title</th>
<th>Participant Identifier</th>
<th>Participant’s description of responsibilities</th>
<th>Experience with CYP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pastoral</td>
<td>College Inclusion Coordinator</td>
<td>E</td>
<td>Supporting in lessons and supporting a wide range of SEMH needs. College specialises in CYP with physical disabilities so works with this population.</td>
<td>18 months in current role, prior to this was LSA in same college.</td>
</tr>
<tr>
<td></td>
<td>College Inclusion Coordinator</td>
<td>F</td>
<td>Supporting in lessons and supporting a wide range of SEMH needs. Liaise with counsellor and internal staff as well as external agencies.</td>
<td>5 years at School 2 School, 2 as an LSA and 3 as CIC</td>
</tr>
<tr>
<td></td>
<td>College Inclusion Coordinator</td>
<td>G</td>
<td>Supporting in lessons and supporting a wide range of SEMH needs. Liaise with counsellor and internal staff as well as external agencies.</td>
<td>13 years at School 2 School, 10 as an LSA and 3 years as CIC</td>
</tr>
<tr>
<td></td>
<td>Higher level teaching assistant</td>
<td>H</td>
<td>Half role is SEMH focussed, half academic mentoring. Sees CYP who are on the waiting list for the counsellor. Sees bereaved CYP. Works across colleges.</td>
<td>Had HLTA role for 5 months. Prior to this was an LSA. Has been at School 2 school for 4 years. Prior to this, worked with nursery aged children.</td>
</tr>
<tr>
<td></td>
<td>specialising in SEMH</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching staff</td>
<td>Classroom teacher</td>
<td>I</td>
<td>Newly qualified teacher</td>
<td>5 years within education including 2 within SEN support 9 years qualified, 5 years at School 2</td>
</tr>
<tr>
<td></td>
<td>Classroom teacher</td>
<td>J</td>
<td>Classroom teacher of sociology and history. Form tutor</td>
<td>Taught EAL at university, volunteered in some primary schools</td>
</tr>
<tr>
<td></td>
<td>Classroom teacher</td>
<td>K</td>
<td>Newly qualified teacher through Schools Direct. Has a form</td>
<td>23 years teaching, 9 years at School 2 School</td>
</tr>
<tr>
<td></td>
<td>Pastoral lead for 6th form and Head</td>
<td>L</td>
<td>Manages student wellbeing within 6th form, increasingly mental health issues</td>
<td></td>
</tr>
<tr>
<td>Leadership</td>
<td>Role</td>
<td>Gender</td>
<td>Responsibilities</td>
<td>Experiences</td>
</tr>
<tr>
<td>------------</td>
<td>------</td>
<td>--------</td>
<td>------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Joint head of 6th form</td>
<td>M</td>
<td>Student wellbeing, increasingly mental health issues. Liaise with external agencies</td>
<td>1 in current role, 17 teaching including head of department role</td>
<td></td>
</tr>
<tr>
<td>Assistant head teacher</td>
<td>N</td>
<td>Designated teacher for looked after children, responsible for attendance, manages other staff</td>
<td>Did not disclose</td>
<td></td>
</tr>
</tbody>
</table>
The three college inclusion coordinators each perform their role in a different college within School 2, and the result of this is that they had not met up for over a year.

Whilst all staff in the teacher group were classroom teachers, one had many more years’ experience and held a senior pastoral role within the 6th form college in addition to this. His presence at the focus group contravened the criteria set for the teacher role, however this participant taught for a significant amount of the week so his insight as a teacher with additional responsibility was valued.

Four members of senior staff were scheduled to take part in this research, but due to a pre-planned school drama event, only two staff were able to attend. They appeared to know each other well.

3.3 Phase 1 and 2 data collection

Phase 1 was completed before any data was gathered from school staff. The EP focus group lasted 1 hour and 15 minutes and took place in the EPS.

Phase 2 was completed over the time-period of two terms. Within each school, pastoral groups were completed first. Within School 1, this was followed by a teacher interview. Within School 2, pastoral was followed by senior leaders and finally by the teacher focus group.

Devising focus group schedules

EP focus group questions.
Krueger (2000) suggests five or six questions is usual. Initially, questions for the EP focus group were devised from a combination of considering research question
three, relevant literature about EPs working in schools and the researcher’s own experience. Questions were drafted and a rationale for each question given (Appendix 5). Draft questions were piloted with an EP within the South London Borough who would not be taking part in the focus group and were found to be acceptable. Research supervision was also used to seek feedback on the questions.

**School staff focus group questions.**
Key themes emerging in the EP focus group partly informed questions for school staff. Key themes were:

- The importance of senior leadership creating a whole school approach
- What the EP’s unique role is, how EPs are seen.
- Areas of SEMH staff find particularly challenging or not.
- Perceived barriers to supporting SEMH.

Initial focus group questions were also generated from literature reviewed and the research questions. Although focus group schedules for school staff remained broadly the same, at least one question was posed to each group which was role specific. For example, school leaders were asked how they support staff for whom they are responsible. Questions adhered to advice from Krueger (2003) such as avoiding ‘why’ questions and establishing the context of the question.

Vignettes were created as prompts for use in focus groups (Appendix 6) to attempt to gain more in-depth contributions. These were designed to elicit discussion about more challenging CYP. They were based on cases experienced by the researcher in my role as a trainee EP which staff had found particularly challenging. These were used within pastoral staff focus groups only, as other groups were judged to explore issues in adequate depth without the need for
these prompts.

Piloting teacher focus group schedules

Feedback on focus group schedules was sought through pilot interviews with experienced school staff who held the role of LSA (pastoral role), teacher (no leadership responsibility), and head of department (teacher with additional leadership responsibility). Responses from piloting led to improvements in wording and consideration of possible responses. Focus group schedules were adjusted slightly after each focus group to accommodate a theme or topic that seemed important to discuss with other staff groups. For example, a question was added for School 1’s teacher group regarding faith, which had been addressed at length in the pastoral group.

3.4 Phase 1 and 2 Focus Group Procedure

All focus groups were audio recorded using two devices. Data collection took place within each school, in a designated private, quiet room. The EP focus group took place within the EPS. Participants were greeted on arrival and asked to read and fill out consent forms (Appendix 7). The researcher began by reiterating the information contained on the consent form and describing the research and the researcher’s relation to it in more detail. Participants were informed that the researcher would enter the discussion to ask a new question or provide guidance, but otherwise contributions could be freely made.

Focus group schedules were followed, allowing for flexibility. Focus groups used a semi-structured format whereby questions and prompts were available, but fruitful topics of discussion not on the schedule could be pursued. For example, at
School 1 the role of faith was discussed, and at School 2 staff discussed social media in relation to SEMH.

3.5 Data Analysis

Following each focus group, the spoken data was transcribed. Analysis was completed using thematic analysis. The sequence of steps stipulated by Braun and Clark (2006) was used.

Thematic analysis allowed patterns and themes to emerge from the data in a flexible way, whilst creating a rich picture of the experiences of participants within their contexts. While Braun and Clarke (2006) recognise there are some disadvantages to thematic analysis (such as the difficulty filtering out irrelevant information), they suggest that if a rigorous approach is applied disadvantages can be mitigated. The process of data analysis is described in relation to this research in the next chapter.

Peer auditing

A peer review of the coding system used confirmed that the researcher’s codes were similar to those applied by an objective reviewer who is also carrying out doctoral level research. Further peer auditing of the coding and development of subthemes was completed when the transcripts were re-read and coding reviewed to bring the researcher back to the original data. Again, peer auditing revealed similar coding by an objective observer. Peer reviewing was carried out for one focus group in each school.
3.6 Integrity and Rigour of the Research

When research uses quantitative methods for data collection, concepts such as ‘reliability’ and ‘validity’ are used to judge the quality of the research, with the assumption there is one objective truth to be uncovered. When qualitative methods have been used, different concepts come in to play, sometimes summarised as ‘rigour’; dependability, confirmability, transferability and credibility have been suggested by Guba and Lincoln (1989). Yardley (2000) suggests four criteria: sensitivity to context, commitment and rigour, transparency and coherence, impact and importance. These characteristics reflect the different research values associated with a constructionist epistemological view. A number of measures were taken to increase the quality of the research which are described in Table 5.
<table>
<thead>
<tr>
<th>Step taken to increase rigour</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethical process of University and British Psychological Society adhered to.</td>
<td>Confidentiality and participant rights permeate research process, especially around data collection, storage and use.</td>
</tr>
<tr>
<td>All focus groups were carried out by the researcher. Similar focus group question schedules used with each group.</td>
<td>Improve consistency across focus groups.</td>
</tr>
<tr>
<td>Peer review of data analysis took place, including coding processes and scrutiny of themes.</td>
<td>Reduce likelihood of bias and misinterpretation of data compromising a faithful description of the data.</td>
</tr>
<tr>
<td>Frequent collaboration with supervisors around faithfulness of data analyses to original data.</td>
<td>Encourages a critical and reflective element to data analysis.</td>
</tr>
<tr>
<td>Researcher's positioning in relation to the research topic and schools involved fully disclosed, including to participants.</td>
<td>Critically reflect on how researcher's values and experiences may interact with the interpretation of the phenomena studied.</td>
</tr>
<tr>
<td>Audit trail of actions, decisions and research development with supporting documentary evidence and rationale.</td>
<td>Improve research credibility.</td>
</tr>
<tr>
<td>Presentation of key findings to research participants at their schools at the end of the research process.</td>
<td>Gain feedback on the faithfulness of the findings to staff’s own experiences (taking into account that the research focussed on one point in time, and staff views may have changed in the period between data collection and hearing the findings). School may incorporate some findings into their SEMH policy or practice which would improve the impact of the research.</td>
</tr>
</tbody>
</table>
3.7 Ethical Considerations

Clegg and Slife (2009) assert that ethical considerations are not confined to the collection of data, but should permeate all stages of the research. Ethical approval was sought and gained from the University College London Institute of Education ethics board (Appendix 8). This research adhered to the British Psychological Society Code of Human Research Ethics (2014). Participants were made of aware of ethical considerations the researcher had taken to protect them using the consent form (Appendix 7). The issues that arise when considering the promotion of ethics within the study are closely linked to issues around focus groups.

**Informed consent**

Informed consent was gained from the head teacher to conduct research in each school via the SENCo. Information regarding the study was provided initially to encourage school staff to take part (information circulated by SENCo to all eligible staff members). However more detailed information about the study’s purpose and the participants’ role within it was provided when participants arrived for the focus group (Appendix 7). Participants had the opportunity to ask questions about the research both prior to agreeing to take part, before and after the focus group.

**Confidentiality and data protection**

The nature of focus groups means that the security of information given by participants may be reduced when compared to an interview with a researcher bound by strict ethical guidelines linked to their educational and professional institutions. To address this, participants were asked not to share what colleagues said outside of the focus group room. Participants were informed about the nature
of the researcher’s responsibility in relation to confidentiality and reminded that they should treat each other’s views with respect.

Participants’ names and identifying information have been omitted from this research. Each school has been given a nickname and in addition the borough cannot be identified. Recordings of focus groups have been stored electronically in a data encrypted and password protected file. Hard copies of consent forms, which state the full name of each participant, have been stored in a secure environment.

3.8 Researcher’s positioning and reflexivity

The methodology used involves a degree of interpretation of participants’ experiences by the researcher, meaning the researcher is not a passive observer of the process of data gathering or analysis. The researcher has written the questions to ask within the focus groups and will use thematic analysis to better understand experiences. Socially constructed realities and relationships between the researcher and what is being studied are key components in qualitative inquiry (Denzin and Lincoln, 2005). This section will therefore continue in 1st person.

A distinction is drawn by Finlay (1998) between methodological reflexivity (how research decisions affect research) and personal reflexivity (how the researcher’s characteristics may affect research). I address functional reflexivity throughout in terms of reflecting on the impact of various decisions. Personal reflexivity is addressed here. Personal reflexivity is important to understand biases, assumptions, or beliefs that I may have brought into the research process, creating transparency.
I was previously a secondary-school teacher in an inner-city mainstream secondary school, which experienced a high level of challenge in terms of SEMH, and I am now a trainee EP linked to schools facing similar challenges. I am familiar with the experiences school staff might have and therefore may have greater understanding of their experiences. It is important however to recognise that my having similar experiences could lead to my own experiences colouring those described by school staff.

The social relationship between the participants and the researcher is thought to be crucial in qualitative research, with speech an active communication with intended consequences for the listener rather than a passive way to communicate inner thoughts and feelings (Leudar and Antaki, 1996). It is therefore important to comment upon the researcher’s relationship to participants.

I am part of the South London Borough’s EPS, working part time as a trainee EP under supervision and therefore I have a professional working relationship with EP participants. This has the potential to create a power imbalance whereby EP responses would not be followed up due to the assumption that group members are very experienced in the area discussed. This was borne in mind throughout. I am supervised by one member of the EP focus group.

During the EP focus group, I was aware of some opinions and values held by members of the EP focus group which have been shared in the normal course of work within the EPS. This had the potential to lead me to make assumptions about the context of the EP’s responses to certain questions. I had varying levels of familiarity with group members, however EPs who volunteered may have been
those more familiar with me, or in some way more invested in research or my progress.

When conducting focus groups in any school, my position as a qualified teacher, TEP (and Doctoral researcher) may create a power imbalance based on a range of issues such as the qualification/education level of those present, the perceived value of EPs within the school context, and any perceived social and intellectual capital difference. There may also have been an element of the researcher representing ‘the authorities’ which may affect the response of some participants, despite assurance to them that I was visiting as a researcher.
Findings

This chapter presents the results of the thematic analysis. Developing and refining the overarching themes and subthemes was aided by Bronfenbrenner’s framework, in addition to the thematic analysis steps outlined by Braun & Clarke (2013). To give clarity on the development of themes and how analysis was conducted, an illustrative example is now given from the theme ‘Attuned vs Unattuned Communities’.

Example of coding process

NVivo was systematically used to code each transcript in an iterative and evolving process which was inductive. At this stage, complete coding was used, focussing on short sentences or phrases. Each transcript was read and coded several times as new codes emerged which were more specific and a better fit for the data. For example, the early code ‘what-supports-staff-personally’ was reviewed and later split out into more specific codes such as ‘having-a-trusted-colleague’ and ‘letting-off-steam’. An example of coding can be found in Appendix 9.

Example of theme creation

An initial theme of ‘attuned community ethos’ was generated inductively through looking at how groups of codes fit together, and deductively considering broad messages school staff had given during the focus groups. The subthemes (contents and naming) underwent several iterations of change. For example, initially ‘Faith’ had been a subtheme of ‘attuned community ethos’, but as further thought took place, ‘faith’ was instead subsumed across different elements of the theme. This meant that some elements of the original subtheme of ‘faith’ (such as how faith is formally incorporated into the school day) were lost; however it
enabled the salient aspects of faith to be considered in relation to other subthemes.

The use of Bronfenbrenner’s ecological systems as a way to analyse data Bronfenbrenner’s model allowed the complexity of data collected from different staff groups within different schools to be captured and considered more fully. An example of how it was applied is now given.

The subtheme of ‘having good relationships’ – now renamed as ‘Attuned vs unattuned relationships’ to better reflect the meaning of the subtheme – was already split into codes recognising and describing many relationships which exist between individuals and teams within school. The use of Bronfenbrenner’s model allowed a lens and structure through which relationships can be considered at different levels. It also allowed the same staff group across the two schools to be compared at different levels. For example, the pastoral focus groups at School 1 and School 2 were compared using the same Bronfenbrenner map. Considering each theme in this way allowed it to be interrogated from different perspectives and at a deeper level as contradictions, comparisons or omissions become clear. As this process evolved, some themes and subthemes were again renamed to better capture the essence of their meaning. For example, ‘attuned relationships in school’ and ‘school relationship to parent and community’ were collapsed into ‘containing and being contained’.
Table 6 Bronfenbrenner’s ecological theory model in analysis

<table>
<thead>
<tr>
<th>Individual</th>
<th>Microsystem</th>
<th>Mesosystem</th>
<th>Exosystem</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff-CYP</td>
<td>Support systems</td>
<td>Relationships to external</td>
<td></td>
</tr>
<tr>
<td>Staff-staff</td>
<td>working together</td>
<td>professionals/ agencies</td>
<td></td>
</tr>
<tr>
<td>Staff-parent</td>
<td>Information sharing</td>
<td>School-CAMHS</td>
<td></td>
</tr>
<tr>
<td>School-wider</td>
<td>Who is responsible?</td>
<td>School-EP</td>
<td></td>
</tr>
<tr>
<td>community</td>
<td>Who takes action?</td>
<td>School-local authority</td>
<td></td>
</tr>
</tbody>
</table>

Relationships between different elements of the school community were categorised into the relevant Bronfenbrenner levels in Table 6 above. To populate the table, larger chunks of each transcript – such as several turns by participants regarding relationships were considered for their meaning. This allowed broader ideas such as how different teams value one another to emerge which aided development of the final overarching themes and subthemes.

4.1 Themes

Three overarching themes emerged: Attuned vs Unattuned Communities, Skills and Knowledge and Psychological vs Sociological Roles. A complete list of overarching themes, sub-themes and their descriptions is in Appendix 10. This chapter is presented by overarching theme and subthemes. School staff (from both schools) and EP data was analysed together, though school staff and EP findings have been presented separately within each subtheme to enable comparisons and different perspectives to be highlighted. When school staff’s views are presented, it is made clear which school and which role is referred to. Comparisons between schools or staff groups are highlighted where pertinent.
4.2 Attuned vs Un-Attuned Communities

Staff in different roles across both schools highlight the importance of feeling a part of the school (and sometimes wider) community that is attuned to the emotional and psychological needs of all its members. Good relational quality throughout the whole school community was linked to the development of social capital, allowing the activation of resource within a CYP’s system to support SEMH. An attuned community can provide school staff with an emotionally safe space within which their emotions can be contained, such that their capacity to contain the strong emotions of CYP is enhanced.

Three sub-themes were identified: Containing and being contained; Building social capital; and Emotional safety.
School staff view on containing and being contained

Every member of school staff from both schools spoke about the importance of secure, trusting, and mutually beneficial relationships with colleagues in managing SEMH issues. They felt these relationships encompassed the attunement principles and provided emotional containment which enhanced their own resilience and capacity to support them in their pastoral work with CYP with SEMHD. One staff member described the importance of emotionally containing attuned relationships in his own capacity to support others as:

having that positive relationship with them [colleagues] is very strong in the sense that if I had to take on everything that I have to take on and weren’t able to sort of relay that information I’d drive myself mad so it is good to air my my concerns (Participant C).
When a whole school environment was described as having “powerful” and “close” relationships between staff members and between staff and CYP, it seemed to provide a containing environment in different ways. Staff had more capacity to build trusting supportive relationships with CYP that provided containment—“she feels she’s letting go and talking” (Participant A). A containing environment can also be a resource from which staff can draw: “just knowing that, there’s someone that cares about what I’m going through, it’s just good to know that and have that support there” (Participant D). This may also signify that a containing school environment allows staff members and CYP to feel held in mind, and that this in itself can be supportive. School 1 staff seemed to attribute their attuned community to faith, but within the faith Participant A described “it’s the helpfulness and that listening” that he thought benefitted all CYP regardless of faith. Descriptions of what aspects of faith are important are similar to the ‘core conditions’ of person centred therapy, especially UPR.

Where the whole school environment proves less wellbeing opportunities as an institution, staff must seek a containing relationship for themselves, with varying success. At School 2, there were unclear formal mechanisms to nurture attuned relationships. Whilst some staff had informally developed these relationships over time, two new teachers felt they were without an avenue for their emotional responses to SEMHD: “if I’m worrying about what might have happened knowing who to go to speak about that on a personal level…that’s something that hasn’t been made clear to me and I’m not quite sure how I would go about doing that” (Participant I). This highlights that School 2’s community environment is less attuned to the needs of its members, failing to provide an informal containing environment which new teachers can draw on or a formal mechanism for the pastoral care of new staff.
Out of 14 school staff, 7 across both schools mentioned wanting a formal reflective space to explore and reflect on the emotional impact of the work with CYP with SEMHD, drawing parallels to the supervision received by other frontline professions where staff come into contact with CYP in distress (such as psychologists). Staff at School 2 seemed to be creating a containing environment for CYP and holding them in mind, and supervision seemed a way for staff to gain a formal mechanism for their own containment. One teacher said she struggled to contain her emotions when holding CYP in mind outside school hours – “things that you take home with you and you can’t let go of” (Participant K). All staff who spoke of supervision had also spoken of having attuned relationships with colleagues within the school system so the need for emotional containment through externally provided supervision is still great.

**EP view on containing and being contained**

Attuned relationships EPs create with school staff (especially the SENCo), CYP and families were spoken about as being most beneficial when they provided some level of emotional containment. With her SENCo, one EP described “giving her a bit of space to stop and think, which is not really something that, I would recommend as a, as a strategy to use but it’s what was needed at the time” (EP 3). With a family of a CYP refusing school, one EP said she wanted to “do something which people will feel, I don’t know heard, listened to, cared for in some way” (EP 5). When interactions in the microsystem (micro-time) provide a reflective space where anxiety can be held and addressed such that clearer thinking can occur; EPs can provide emotional containment to those with whom they work directly.
School staff view on emotional safety

One way in which emotional safety can be enhanced is a culture where a shared moral code concerning the SEMH of CYP is prioritised over worries staff may have about being ‘wrong’. Where this is the case, outcomes for CYP are enhanced by a culture of more open communication regarding SEMH concerns, and a lower threshold for reporting concerns—“even if they’ve [teachers] just got a feeling that something’s a bit off, they will report it to us” (Participant D). Where there is a fear of being wrong, involving oneself with often senior safeguard leads seemed intimidating to one new staff member at School 2: “it’s quite a big accusation or quite a big sort of thing to maybe suggest of a child” (Participant I). Another way a shared moral code highlighting CYP’s needs over appearing ‘wrong’ may benefit CYP with SEMHD is bidirectional accountability. Staff being willing to admit being in the wrong allowed CYP to feel respected and listened to and for the CYP to see the human side of their teachers. At School 1, during teacher-CYP reconciliation “if the teacher misinterpreted something or caught something wrong. [,they] will apologise” (Participant D). This contrasts with school 2 where one staff member said she was afraid to share “vulnerabilities” (Participant K), suggesting the school is not providing a nurturing environment.

Unconditional positive regard afforded to both staff and CYP promoted feeling emotionally safe in a number of ways. One is freer expression of emotion without judgement. At School 1 CYP were able to see the chaplain if they needed an adult “to download to and shout and scream”. At School 2, having a non-judgemental relationship with another staff member for free emotional expression was important to wellbeing—“be really honest and not to worry about the consequences necessarily” (Participant J). Having a space whereby staff can express authentic emotions without consequence was important for their own
wellbeing as they were able to “let off steam” (Participant J) without fear of 
damaging their professional reputation. Being authentic in one’s emotional 
expression is also similar to the core condition of ‘congruence’ which comes from 
person-centred therapy.

**EP view on emotional safety**

EPs recognised the value of emotional safety for CYP and gave several examples 
of how they work to enhance this. One commented upon the destructive nature of 
school exclusions and how she is sometimes asked to “arrange something else 
that stops them feeling rejected” (EP 5), which is unrealistic yet it does suggest 
that schools wish to address the potential harm caused by rejection, but they are 
not always successful. Another described giving the recommendation there should 
be a “positive learning environment” (EP 2) for CYP such that they can be held in 
unconditional positive regard and have the space to behave differently, rather than 
positive regard being conditional on the teacher’s idea of ‘good’ behaviour. These 
examples suggest schools are somewhat aware of the psychological needs of 
CYP regarding emotional safety and unconditional positive regard, yet their 
practices may not always align with meeting CYP’s emotional needs.

**Staff view of building social capital**

At School 2, unequal knowledge and appreciation of one another’s roles within 
SEMHD was seen between teaching staff and pastoral staff not in leadership 
positions. When asked who the pastoral team at School 2 consisted of, one 
teacher said “I don’t actually really know besides the senior tutors and F and T 
[SENCos]” (Participant J). This contrasted with pastoral members of staff who 
described their reliance upon teachers to implement information shared with them
by the pastoral team: “you hope teachers take it on board understand who they’ve
got in that class understand their needs” (Participant F). This suggests the
professional relationships that constitute the mesosystem are not functioning
optimally at School 2, hindering a combined community effort to support SEMHD.
There may also be an element of pastoral staff not fully valuing their own role in
enhancing the school’s capacity to support SEMH—“I’m not a teacher so I can’t
have any direct influence so I’m literally raising awareness highlighting the SEN
needs (Participant F).

Building strong relationships with CYP which allowed them to be best supported
was not always straightforward, highlighting differences between a therapeutic
relationship and that between a teacher and CYP. Demand characteristics were
spoken about at both schools as having the potential to help or hinder their
development of supportive relationships with CYP. At school 1, one staff member
said CYP of a different faith to Catholicism may be “little bit more reluctant” to
confide. At School 2, pastoral staff recognised their gender (all female) and age as
a potential barrier, especially for male CYP as they need “more male role models”.
This suggests all adults within a school need to be prepared to build attuned
relationships with CYP not just pastorally focussed staff.

Building bridging social capital by extending support from within the school
community to parents enabled CYP to be better supported by a wider network.
Where the school saw involving parents as an investment in the CYP, parents had
more capacity to take responsibility for their CYP’s needs; and then in turn “the
support that they [parents] are receiving. . impacts more positively on the child”
(Participant C). At School 1, all staff displayed strong ‘force’ characteristics of
being motivated, persistent and determined to engage parents and impart
“helpfulness”, “care” and “dedication” as the CYP receive it, and went to great lengths to ensure parents were supported. School 2 was motivated to build social capital through external agencies who they saw as valuable, consistent partners—“working together with CAMHS, working together with the EPs” (Participant M). Parents were viewed more ambivalently, and though staff do contact parents frequently there was a sense of fatigue and hopelessness when the school’s message is not consistently applied to a CYP at home: “a lot of what you’re doing is pointless” (Participant F). Parents were seen by School 2 as often lacking the resources (skills, time, capability) to effectively support their CYP: “we’ve got quite a lot of resources we can signpost them [parents] to but it’s how much they engage” (Participant F) and so School 2 staff sometimes felt burdened by a responsibility to help parent a CYP.

To secure support for CYP across the GRN, professionals from the local authority such as speech and language therapists, occupational therapists and EPs need access to the CYP in the school and the school needs to engage with the local authority. School 1’s level of need is high, yet the school’s motivation to engage with the local authority is low as they see it as unfair—“he’s been to appeal twice now and it’s they’ve still haven’t give him any sort of EHCP” (Participant C). This could reflect a lack of understanding about local authority processes. As School 1’s TEP it has been difficult to gain access to the most vulnerable CYP.

**EP view on building social capital**

While recognising the value of direct work with CYP and families in school, EPs expressed that building social capital through multiagency work with a variety of exosystem and macrosystem agencies is very important. One EP described the
benefit of a multi-agency borough wide team she was involved in: “the nature of the group and the different skill set [meant that] we were able to be more far reaching. . . having the kind of permission to do some different kinds of work” (EP 5). Multiagency and linking parts of a CYP’s ecological system to create a more capable system was also seen by one EP as an important part of their unique contribution to SEMH: “we do can form relationships both with CAMHS and school and family ideally we are able to kind of draw those together” (EP 4). Barriers existed to this kind of work however such as cuts to funding which may mean EPs’ ability to work in multiagency teams is declining.

4.3 Knowledge and Skills

Staff’s self-efficacy was affected by their force and resource characteristics such as motivation, prior experience and training. They spoke of ways they can enhance their self-efficacy through reflection, training and peer learning. Staff’s self-efficacy was linked to the inclusiveness of their school, and this in turn affected staff’s conceptualisation of internalising and externalising SEMH.

Two subthemes were identified: Efficacy and SEMH and Inclusive vs Not Inclusive Ethos.
School staff view on inclusive vs not inclusive ethos

The two school's beliefs about what inclusion is and how it is best achieved differed significantly, suggesting that this concept is not universally understood and can be enacted in different ways according to a school's ethos and culture. School 1's beliefs about inclusion seemed akin to unconditional positive regard and acceptance. This benefitted CYP whose SEMHD were too far outside the norm for other schools to support, yet who School 1 succeeded with: "We can always point to our FAP [Fair Access Panel] successes can’t we . . you get treated exactly the same as anybody else and y’know get looked after exactly the same as everybody else" (Participant B). One staff member believed what sets School 1 apart from other schools, especially non-faith schools, is “dedication and love and support that kids, especially kids of today require” (Participant C). This
conceptualisation of inclusion as acceptance may render those outside the norm less threatening, so enabling the school to include a wider range of needs, but it may not be able to provide for those whose more complex needs require specialist skill.

School 2’s approach to inclusion contrasts sharply to School 1’s. CYP who fall outside the school’s norm as an academically focussed institution challenge the school’s skill and will to accommodate and to accept difference. One member of staff explained the difficulty of having two CYP with moderate learning difficulties in year 7: “we’re in an academic [school]. . we don’t have anything to offer them that is appropriate and so that adds another dimension to the students that are struggling and it causes anxiety” (Participant F). This rational view suggests weighing of risk around external accountability measures such as exam results, rather than immediate acceptance followed by systemic and individual adjustment.

Different beliefs around inclusion feed into staff’s conceptualisations of externalising behaviour, which are complex and differed between schools (and within schools). While all staff across both schools described applying a clear behaviour policy, this was supplemented at School 1 by a coherent compassionate response seeking to understand the community and family context in which the externalising behaviour takes place. One staff member at School 1 said “we do take into account every sort of every means before we judge or label a kid we have to look at the whole picture” (Participant C). Reframing the behaviour as being a response to wider contextual factors allowed the removal of blame and judgement on the individual, and this seemed to motivate staff to continue to support CYP. It may also mean staff do not have a shared shorthand language which enables shared understanding—“I’m not saying put them in an actual
bracket on uh or give them a label but give us something we can work with”
( Participant A).

At School 2, while pastoral staff seemed to take wider contextual factors into account they felt teachers frequently look within-child and “sometimes it can just be seen that the kid is a bit naughty and it’s not reported to be a concern as such the teacher just deals with the behaviour in the lesson” (Participant F). The resulting experience for a CYP was perceived to be inconsistency as pastoral staff saw teachers responding differently to SEMH based on the level of understanding of the needs: “I think it’s mixed messages I mean everyone needs to be on-board and try and understand the student” (Participant H). Teachers themselves recognised there may be difficulties in the CYP’s life, but when a diagnostic label was present this seemed to alter their conceptualisation of SEMH. One teacher said “when you’ve been there for long enough you just learn the skill of how to deal with students that suffer... not suffer with ASD but have ASD they have obviously a lot of emotional needs” (Participant J). The use then self-correction of ‘suffer’ could imply that this teacher believes emotional needs are inevitable within ASD and therefore a search for a broader cause or raising this as a concern will be fruitless.

**EP view on inclusive vs not inclusive ethos**

EPs spoke of their perception that school staff’s conceptualisation of, and response to, externalising behaviour is not always psychological in nature. EPs felt school staff are asked to consider and make judgements about complex ambiguous terms such as ‘normal’ adolescent strife, mental health and ASD without adequate training or experience and when stressed. One EP thought “it’s
just so much to get your head around that thinking stops and things like that happen where permanently you permanently exclude really vulnerable children” (EP 3). Inflexible application of behaviour policies and a lack of cognitive reappraisal was thought to happen within teacher-CYP interactions, but also by whole schools systems under pressure: “I think there’s another pressure that is to say you know this is the line that you can’t cross. . . and then when somebody vulnerable crosses that line they still apply the same criteria” (EP 5). This within-child conceptualisation and child-focussed punitive response to externalising behaviour was believed to be due to a lack of skills to consider the complexity of ambiguous concepts, but also to the emotional capacity to tolerate the ambiguity around challenging situations and empathise with the underlying distress which externalising behaviour may be communicating. They believed this is related to pressures faced by individuals and schools to raise academic standards and to visibly maintain discipline.

EPs thought the way schools conceptualise SEMH affected the type of referrals they may get. One EP described not being referred “aggressive” CYP and she attributed that to “people are more willing to help the children who are anxious or needy in that way than they are with the ones that are aggressive” (EP 3). Staff perceptions can impact which CYP have access to support, yet staff may not see the vulnerability within CYP who externalise.

**School staff view on efficacy and SEMH**

Low self-efficacy for certain SEMH presentations can result in disengagement and avoidance. Participant A said he passes internalising SEMHD concerns to another member of staff he perceives as more confident: "the way I deal with things is I
usually run it to [name] [laughs] and he sort does a bit of digging around"

(Participant A). This suggests Participant A feels a lack of skills to manage this situation, to the extent he is not prepared to engage with it: “the ones who are quiet you sort of forget about them unfortunately which is awful” (Participant A). This participant later said he had received formal training as a counsellor, suggesting training may not always equip people adequately enough and to a point that they feel confident to engage. A personal experience of an issue can motivate staff to seek training and to be aware of signs in CYP. Participant D spoke of his personal experience of suicide, and his resolve to be aware for signs as a result: “if you know the pupil you’ll see a change in behaviour a change in attitude know if they’re being more withdrawn”.

A skill gap highlighted was understanding when a CYP needs more targeted support, possibly from an external professional. Staff at School 2 struggled with the idea of pathologising normal emotions: “you’re entitled to be nervous, you’re entitled to be anxious, you don’t have to be happy all the time, it’s normal” (Participant L) and establishing a balance: “we need to strike that happy medium, we need to be understanding but we also need to build resilience” (Participant K). Without the confidence to make decisions about who needs additional support, School 2 was overwhelmed by demand. At School 1, a staff member had strong moral views about referring CYP to CAMHS:

let’s out the problem to someone else to deal with, that’s I mean that’s my understanding is it’s wrong but morally it’s wrong I mean the kids that are in school they’re the ones that you’re employed to look after and care for and educate. (Participant C)
This member of staff had high self-efficacy for managing all presentations of SEMH, including psychosis; but this is problematic. As a senior leader in charge of inclusion, they are a decision maker likely to influence other staff’s perceptions of CAMHS. Participant C also believes “love”, “care” and “dedication” is needed for CYP today, yet SEMHD is on a spectrum and individualised approach to the particular circumstance is needed. This may include more specialist expertise that should only be provided by a professional trained in the field of mental health needs therefore this member of staff may be unclear on the limits to his own skill managing SEMHD.

The inadequacy of initial teacher training was spoken about by three participants. One was concerned with turning the focus of initial teacher training towards a deeper understanding of CYP’s psychology, backgrounds and the local community such that attrition rates would be reduced through more realistic expectations of the role:

\[
\text{it would be a lot more better for teachers if they were able to develop their role not just through a subject but through the thing that we’re talking about being made aware about the social side of things and the counselling side of things.} \\
\text{(Participant C)}
\]

This teacher suggests a holistic training programme which educates around a wider set of microsystemic and exosystemic factors.

Sources of self-efficacy spoken about by staff were the ability to meet up as a staff in the same role, learning from peers through observation of their practice and personal research. The benefit of these activities seemed to be improved practice for the staff: “steal their ideas and put them in place myself” (Participant D) and a more consistent response for CYP: “it would be nice to have a bit more
consistency you know uniformity” (Participant G).

**EP view on efficacy and SEMH**

Ways of working in schools seemed to hinder EP effectiveness rather than their feelings of efficacy towards supporting schools with SEMH. Underutilisation was one hindrance: “I think there’s a lot we could be doing that we don’t necessarily routinely do but which we have the skills to do” (EP 1) and the complexity of secondary schools meant another EP felt “isolated” (EP 2) as she rarely met with parents or teachers. This resulted in within-child, repetitive work which EPs thought made them less effective in supporting SEMHD.

EP saw school staff as having the lowest efficacy to manage school refusers, who, they said schools took an “out of sight, out of mind” (EP 4) approach to and had little incentive to reintegrate. Instead, EPs thought school staff sought to move responsibility to others: “they see it CAMHS issue, EWO [education welfare officer] issue” (EP 4), although EPs thought they were not involved early enough in these situations resulting in them escalating. Three school staff spoke about school refusal, saying it was “very easy to spot, but very difficult to, to try and rectify” (Participant D) suggesting this is an area where schools feel at a loss.

**4.4 Sociological vs Psychological Role**

There is an interplay between the person as an individual, the role they are given, and how the person chooses to enact their role, an interaction which is linked to Bronfenbrenner’s ‘person’ characteristics of demand, force and resource. Points of tension can appear when the expectations placed upon a certain role (sociological role) seem at odds with the way the person has chosen to take up
their role and with what they believe it should achieve (psychological role). The school as an organisation may have its own primary task that is played out through the structures and processes; all these factors interconnect with individuals fulfilling their roles.

![Diagram](image.png)

**Figure 5 Psychological vs Sociological Role**

**School staff view of role conflicts**

Eight staff across both schools – including teachers with and without pastoral responsibility, and non-teaching pastoral staff – recognised how teachers are now expected to fulfil multiple roles. One teacher described his understanding as “we’ve gotta act as teachers social workers psychologists counsellors because the cuts are just being made” (Participant C). The extent to which fulfilling multiple roles led to role conflict seemed to depend on the school ethos around pastoral
Where there exists a consistent school culture stemming from explicit inclusive values (deepened by a sense of purpose through the faith) of caring for CYP, parents and staff, staff’s efforts to support SEMHD were normalised and expected as part of their roles. At School 1, there was a perception that “it’s coming from the principal too but he’s just trying to look after our [staff’s] mental health” (Participant D). In turn, staff at School 1 harboured attitudes around valuing and supporting the whole CYP: “we’re teachers of young people who need support in all ways because I never come to school just to sit and teach lessons” (Participant D). Where a person’s force characteristics (motivation, persistence) aligned with the perceived expectations within the school microsystem’s culture (communicated through the head teacher) and exo- and macro-systemic expectations from local and national policy, individuals were abler to take the wide psychological view of their role and so to support CYP in more ways.

At School 2, force characteristics of motivation and persistence towards supporting SEMH were thwarted due to an inconsistent microsystem ethos within the school, leading to role conflict and less available resources (such as time, skills and opportunity) to support SEMH. Five staff described that emotional wellbeing of staff was not prioritised by school management: “I don’t think there is anything in school that supports our emotional wellbeing. I think we have to seek it out ourselves” (Participant L) suggesting wellbeing was seen as the responsibility of the individual rather than the institution. In response, staff’s motivation decreased: “you’re getting paid as a teacher not as a counsellor” (Participant J), reducing the opportunities for support afforded to CYP. While all teaching staff at School 2 endorsed the sentiment that “we foster that kind of idea of caring about them as
individuals not just as like kind of exam stats” (Participant J), the primary task of School 2 as gaining academic success had created role conflicts in teachers: “I'm expected to teach, I'm expected to deliver really good lessons, I'm expected to, you know, look after the educational needs of my children. And as much as I'd love to support them pastorally I physically don't have the capacity” (Participant J). The implication is that teachers who operate in a microsystem where a culture of support for their own and other’s wellbeing is not prioritised – while teaching outcomes are – or not clearly articulated, scope is created for individuals to draw their own role boundaries based on their perceived capacity and force characteristics.

A lack of clarity from school policy around the teacher’s role with CYP who experience high level diagnosable mental health needs seemed to be a source of role conflict at School 2. Simply having that CYP in their classroom caused anxiety around balancing the need to educate with the need to support: “at what point do I actually just worry about your education but also about your emotional needs? (Participant J). Beyond 'worry', it was not clear what Participant J perceived as the expectations on her, yet the dichotomy suggests she feels there is some action she should be taking. The implication of this is that Participant J may disengage from her role in SEMHD without the same clear expectations from the school which exist for her teaching role. She did not see the value she could provide through an attuned and nurturing relationship with the CYP.

On entering teaching, the perceived expectations (to mark and assess) and the reality of supporting CYP who have lived through distressing and traumatic events was spoken about by two teachers. The way they managed this affected their own wellbeing. One teacher wanted to be an agent of change yet finite resources and a
school ethos focussed on academic attainment meant she was left with an upsetting feeling of powerlessness and inadequacy: "sometimes things really do upset me.. I think, ‘I wish I could do more to change that" (Participant K). In this new teacher's case, she had previously described not having an attuned nurturing relationship in School 2 suggesting she is unable to use those in the microsystem to share responsibility and therefore reduce her anxiety.

Another teacher recognised the congruence between CYP's emotions and his own and accepted this as an inevitable part of being attuned to the needs of CYP: "we do care about our pupils and we do invest a lot in them and things that affect them will affect us it has to" (Participant D). Knowing the ethos of investing in CYP’s SEMH was embedded within other staff in the school reduced his own distress and allowed acceptance of this part of the role: "knowing that if I pass something on it will be dealt with is a real comfort even though it is maybe going to affect you in certain ways" (Participant D).

**EP view of role conflicts**

No universally agreed upon view of the EP role towards SEMH was found between EPs or school staff. While four EPs agreed their contribution was around being contextually based professionals with skills to work across systems, another acknowledged that there is confusion in schools about the EP role: “I sort of always wonder. . . how a school makes a decision that they’re going to refer that person to the person from CAMHS that they employ and that person to the EP” (EP 5). This suggests a mismatch between schools and EPs on the most effective way EPs can support SEMH; a failing which can hinder an effective role for EPs in certain SEMH related situations. One EP described feeling “a drop in the ocean”
and as “rubberstamping” (EP 5) in some situations where a SENCo may have been unsure of her potential role and involved her too late.

In one point of agreement between EPs and school staff, statutory work was not considered valuable to supporting SEMH. EPs did not mention it at all, and school staff said the school had only bought enough time for EPs to see CYP whose needs warranted statutory assessment. Regarding CYP whose needs would not warrant statutory assessment, a member of staff said “I’m very limited knowledge as to what it is an EP could do” (Participant F), although she recognised if the school bought more time the EP could complete a range of activities.

School staff view of feeling desskilled

Particularly around higher level mental health concerns including self-harm, four teachers at School 2 described feeling desskilled and consequently wanting to remove responsibility from themselves, possibly as an emotional self-protection mechanism: "That’s the job of a professional trained in that field, you know, again if someone is that seriously ill why are schools being expected to deal with it?" (Participant L). This teacher’s perception was of feeling accountable to a strict regime whereby he could ‘fail’ in supporting mental health difficulties. He described day to day time limitations meaning he can’t always give the time he would like to CYP “but you can’t give it [time to talk] and then of course you’re inadequate and you’ve failed”. This suggests an unforgiving system which lacks flexibility to allow him to use motivation, persistence and interpersonal skills (force) and his skill and experience (resource); therefore inciting anxiety around the possibility of failure. His use of the language of Ofsted – ‘inadequate’ – suggests he feels exposed and evaluated around mental health yet he does not see the
system as allowing him to support CYP.

A situation which was spoken about by six teachers as extremely professionally and emotionally challenging, yet which was an accepted part of a teacher role, was when CYP made spontaneous disclosures of a shocking nature such as self-harm or rape. Restrictive exosystemic safeguarding policies and processes demanded the individual hearing of this shut off their natural emotional responses and consider ‘correct’ responses such as “you can’t say, ‘Oh that’s awful’” (Participant I). One staff member described it as: “on a human level you just want to put your arm around them and kind of comfort them . . . But also you’re not really allowed” (Participant K). Managing this role conflict between providing emotional containment and comfort whilst safeguarding their own safety through following expected procedure was a strain for staff, related to their own need for attuned, containing relationships and for a reflective space. This suggests that whole school policies which focus on minimising risk and following protocol do seem to marginalise the individual emotional experience of the staff member chosen for that disclosure.

**EP view on feeling deskilled**

Reflecting school staff’s thoughts around wishing for ‘expert’ support when faced with certain SEMHD deemed too specialist, EPs recognised that schools as organisations can also wish for expert support in the form of securing specialist provision for CYP who they cannot or will not accommodate further. The “enormous pressure” (EP 4) on schools and EP perceptions that it’s “ambiguity and then the fact that the staff are just so full up of everything” (EP 2) were thought by EPs to be influential in the degree to which schools accept and accommodate
SEMHD. The resulting experience for CYP with more extreme SEMHD was thought to be detrimental and included exclusion when schools decide "these are specialist needs we can’t cope with them" (EP 1).
Discussion

The aim of this study is to understand what are the structures, processes and characteristics which school staff think best supports them in their role in school with SEMH, and to identify where EPs can be most effective in SEMH issues. The previous chapter presents the findings gathered from school staff and EPs. This chapter turns back to the research questions by discussing key findings in relation to previous literature. This is followed by researcher reflections on the current study. The chapter concludes by considering the implications for policy, research and EP practice.

5.1 Research Question 1

What structures, processes and characteristics do staff and EPs think best supported school staff in meeting CYPs' SEMH needs?

Of the structures, processes and characteristics that exist within a school, whole school factors were believed by staff and EPs to be most effective – such as an explicit school ethos which values inclusion. Where inclusive values such as respect, belonging and acceptance are espoused (Booth & Ainscow, 2002), the structures and processes in the school are more likely to create an attuned community responsive to individual need. An attuned community brings many benefits; among them are care for staff’s own wellbeing, less role conflict, and greater opportunity for peer support – all of which enhance staff’s own resilience and capacity to support CYP. Also effective is a clear understanding of SEMH and staff’s responsibilities towards it.

These structures, processes and characteristics only work well when certain conditions are in place which facilitate them. To answer research question 1,
Bronfenbrenner's ecological system model is used to illustrate what staff and EPs think is most supportive to staff at different levels. The ecological systems model can support EP practice in understanding the different ways they can work across a whole school system.

Although this chapter is presented in levels, the bi-directionality and interactionism intended by Bronfenbrenner must be taken into account. Bronfenbrenner acknowledged that the systems interact and impact upon one another, with no one system developing in isolation. In this study, schools and EPs were navigating macrosystemic governmental policy and guidance and a specific exosystemic local authority climate, which affected how the school and EPS addressed SEMH. This in turn affected the affordances given to school staff and EPs to formally and informally manage SEMH at the micro- and mesosystem levels. The differences between schools and EP approaches within the same South London Borough highlight the way individuals, microsystems and mesosystems can develop very different responses to imposed macro- and exosystemic forces.

**Individual**

School staff need a clear understanding of the many ways SEMH can present in school. The formal expansion of schools' role in supporting mental health means staff need to know how to identify concerns, to respond to them and to support CYP in school (DoH, 2015). School staff’s knowledge, skills and confidence to fulfil these roles is found to be inconsistent in this study and in others (Graham et al., 2011; Andrews et al., 2014). A tension between pathologising normal behaviour on one hand, and being afraid of not identifying and intervening early enough on the other, is a source of distress for staff; it highlights their difficulty in understanding
concepts such as a spectrum model of mental health (Westerhof and Keyes, 2010) and educational concepts such as the point at which a CYP’s SEMH becomes an SEN (Norwich and Eaton, 2015). The threshold for when a difficulty reaches a level when it does become an SEN, or when more and different support is needed (moving up the GRN), is not clear. Staff need more training to understand these concepts.

**Self-Efficacy and SEMH.**

Low self-efficacy may mean staff are less persistent, so they disengage easily or avoid the situation (Bandura, 1977). Low self-efficacy can therefore be a barrier to engagement with SEMH; staff at both schools (and EPs) described internalising SEMH as an area of low self-efficacy, and for some, disengagement. According to previous research, when self-efficacy is low, staff may assume less responsibility for their own involvement in classroom-based intervention; instead the wish for ‘experts’ who will intervene outside the classroom (Soodak & Podell, 1994). The subtheme ‘feeling de-skilled’ reflects this scenario. Some difficulties are seen as beyond what school staff should be expected to manage – self harm, school refusal due to anxiety, psychosis and complex psychosocial situations. Schools have been cited by the Green Paper (2017) as key in coordinating care between mental health services and CYP, especially as schools are seen as less stigmatising. It seems school staff are likely to have a key role, certainly in identification now and in the future, but also potentially in coordinating mental health service for the CYP. Staff do need training so they actually can engage fully with these roles.

Staff may perceive some mental health difficulties as the domain of a ‘health’ expert, so they do not see what can be done within an educational setting through
a supportive, caring relationship with a key adult. This finding matches the previous research which sees staff both recognising the importance of CYP having a caring relationship yet seeing this as belonging elsewhere, the responsibility of a mental health worker (Finney, 2006). Clarifying staff’s important role in supporting the CYP via building an attuned relationship with them is a way to help staff re-experience their contribution and feel more efficacious. Another need is knowledge of internalising SEMH. A school policy which outlines expectations of response to different presentations of internalising SEMH (beyond safeguarding) may also increase staff’s efficacy, and in that way increase their motivation to engage.

Schools are often the gateway to more specialist mental health services, services which rely on schools to identify and to refer CYP. This study, like others, finds staff are happy to refer to other professionals so the CYP can receive specialist support (Mazzer and Rickwood, 2015; Ekornes, 2015). Where schools do not make necessary referrals, CYP are less likely to receive specialist support. In School 1, staff’s self-efficacy for all internalising SEMHD including psychosis appeared high – surprising since misconceptions clearly existed there. An influential member of staff said the school’s role is to ‘care’ for all the CYP, and immoral to refer a CYP to CAMHS if the school itself can provide for needs within its community. Though the benefit of strong staff-CYP relationships is well documented (Hattie, 2009), and an inclusive supportive ethos is recognised as supportive for all (Roffey, 2012), some CYP do need more specialist support; without staff’s skills in identification and their willingness to reach out, CYP may not be receiving the support they need.
**Conceptualisation of externalising behaviour.**

Previous research reports that almost 90% of secondary school teachers believe disruptive behaviour is ‘mostly’ or ‘totally’ within the control of a CYP; so a within-child response, often punishment follows (Nash, et al. 2016). This idea of controllability sees full responsibility for the behaviour as lying with the CYP; there is little incentive, therefore, for staff to evaluate the behaviour in a relational context, or for the system to reflect on how it has adapted to suit that individual CYP (Armstrong, 2018). Neither school sees behaviour as deliberate – a fact which is both positive and surprising. The most supportive approach is when school staff contextualise the behaviour, try to understand its origin and provided emotional containment to the CYP; that is, seeing behaviour as a *pastoral* rather than *disciplinary* issue. When staff are able to cognitively re-appraise the situation as pastoral, staff are greatly motivated to continue to support the CYP and to maintain a positive relationship with them. EPs think school staff may be less sympathetic to CYP who are rude or aggressive, an attitude which can interfere with how schools refer CYP for additional support. If their behaviour is seen as deliberate and controllable, any unmet learning, language or mental health needs are likely to remain unknown and so continue unmet.

High self-efficacy for managing ‘challenging’ behaviour is known to be a protective factor from the emotional exhaustion of building relationships with CYP (Tsouloupas, 2010). This study finds that high self-efficacy does not fully protect staff from emotional exhaustion, when they so greatly empathise, support and engage with the sources of externalising behaviour. Instead the most supportive mechanism is strong and attuned peer relationships with colleagues; those which allow the staff’s own psychological needs to be met in such ways as having a reflective space in which to express their own emotions about difficult situations.
Regulating, suppressing, and faking emotions is already known to be related to negative wellbeing outcomes in staff (Taxer & Frenzel, 2015), yet these are a necessary part of interacting so frequently with CYP. When staff can be authentic with one another in a supportive collegial atmosphere of reflection, that can be very supportive.

The stress staff feel from being held accountable for CYP’s exam results is reported to change how they respond to CYP (Hutchings, 2015). EPs in this study think teachers in particular are too stressed to reflect on the best response to externalising behaviour; in consequence behaviour policies are applied inflexibly, impersonally, sometimes inappropriately. Government guidance is rapidly evolving from the language of ‘discipline’ (for example Behaviour and Discipline in Schools (2016) to recognising externalising behaviour as an unmet need (Mental Health and Behaviour in Schools, 2016). School staff need more knowledge about SEMH – and seeing ‘challenging’ behaviour as an unmet need in particular – but they also need to have the cognitive capacity to re-appraise the situation and the emotional capacity to engage with the CYP’s distress on a human level. Without these ingredients, a flexible, differentiated response is less likely. This kind of response requires staff to take a curious, psychological view of externalising behaviour; seeing it in a relational context which demands cognitive and emotional resource that may not be achievable (Armstrong, 2018). It is also known that deep acting – mustering up genuinely felt emotions such as sympathy which allow staff to cognitively re-appraise CYP’s behaviour – takes a toll on wellbeing (Tuxford & Bradley, 2015) and this needs to be recognised by schools.

For some staff at School 1, identifying as Christian adds a supportive dimension to their work with CYP – it seems to act as an internal motivator to go above and
beyond supporting SEMH. According to White (2014), teachers’ faiths can change how they enact their professional role. Although a case study of just six teachers so not generalisable, White’s (2014) findings resonated with the staff at School 1. In having a faith, they acknowledged targets, curriculum and other requirements of their role but at the same time value relationships between humans as essential to learning being optimal. White’s (2014) study especially sees faith in response to behavioural transgression: instead of a punitive response, the focus looks toward restitution, reflection and forgiveness. This is similar to School 1’s approach, which uses restorative justice and describes staff as unafraid to acknowledge their own mistakes. By that means, CYP come to see them as more ‘human’ – which can improve relationships. While personal religious identity can be beneficial to their professional role, multicultural environments such as School 1 where only 40% of CYP identify as Christian do require a flexibility of response and an empathetic understanding of other’s religious, cultural or other points of view.

Microsystem.

School 2, as an academically focussed school coping with new levels of demand for SEMH support, has created add on specialisms to LSA roles for targeted SEMH support. Yet the school’s climate and ethos, ‘inclusive but not inclusive’, highlights a system that has fundamentally not adjusted to the universal needs of all its learners – a hallmark of inclusion (Booth and Ainscow, 2002). The subtheme ‘role conflicts’ suggested where an explicit norm and expectation of pastoral care from leadership does not exist, staff apply their own values and interpretation of role. Some staff then opt out under the conflicting pressure to produce academic results. The mismatch between between school primary task and individual psychological role, shows how teachers not only may lack skills as individual staff
members, but may work in schools which are culturally and systemically ill-equipped to meet the demands of supporting SEMHD in a meaningful way (Finney, 2006).

A distinction between mental health and education is the approach adopted to evaluate what success is. Whereas schools can produce objective evidence of learning, evaluating mental health is less scientific – also non-linear progress and relapse is an accepted part of the journey (Finney, 2006). If a predominant culture within a school is being target- and outcome-driven (including regarding individual teacher performance assessment), is not adjusted to account for the differences in evaluating mental health, then teachers may disengage with some SEMH issues for which they do not want to be held accountable. Previous research (Graham et al., 2011) notices this as does the subtheme ‘feeling deskilled’. Finney (2006) argues that the intimacy of individual teacher performance assessment has created a sensitised, wary culture; where teachers can become risk averse, a cultural barrier begins to stop them engaging in mental health support. If teachers are to engage meaningfully in SEMHD freedom, from outcome-driven, evaluative exercises related to mental health are needed.

Pastoral care that adds “fragmented initiatives onto existing systems” (Spratt, Shucksmith, Philips & Watson, 2006 p.16), tends to be ineffective; pastoral care integrated and embedded in the beliefs and attitudes of staff tends to be effective. Across the theme of Attuned vs Unattuned Communities and Psychological vs Sociological Role, faith is a supportive factor often mentioned by all School 1 staff. Specifically, faith is spoken about in terms of ‘love’, ‘care’, ‘dedication’, ‘listening’ and ‘understanding’. These aspects of faith mirror values endorsed by humanist and person-centred thinkers as important to psychological health and self-
actualisation (Maslow, 1943); they are the three ‘core conditions’ of empathy, UPR and genuineness or congruence of Rogers (1959). The beliefs and attitudes espoused by the school through their faith are also similar to Booth and Ainscow’s (2002) definition of inclusion – the values of respect, acceptance, and of having a sense of belonging. Alongside values and beliefs within School 1, formal pastoral structures and processes, consistently endorsed by the head teacher, see SEMH and the pastoral support needed to enhance it as the foundation of any academic achievement; there are minimal institutional barriers. That attunement between the school management’s prioritisation of pastoral care, faith values, (like those of humanism which create psychological wellbeing), and inclusive values reduces role conflict. It allows staff greater permission and makes an expectation they will go above and beyond supporting CYP with SEMH difficulties.

As humanistic values are similar to those faith values which help embed inclusion within a faith school, these offer a way for non-faith schools to replicate the environment seen in School 1. Faith and humanism have differences – humanism rejects the notion of a deterministic force in favour of human free will and agency (Maslow (1943) – but they are compatible. A key way School 1 embraced both humanism and faith is the range of ways it sees CYP themselves as being active agents of change, rather than expecting circumstances will change through passive means such as prayer.

UPR seems especially linked to School 1’s approach to the pastoral care of CYP with SEMHD. UPR values and respects the person, in a way separate from their behaviours or achievements: is the catalyst for self-acceptance and change (Wilkins, 2000). Rogers (1967) saw UPR as akin to acceptance; and acceptance characterises School 1’s approach to CYP rejected from other schools.
Acceptance of past transgressions, forgiveness and a fresh start are linked to the Christian idea of forgiveness. In this way faith is part of School 1’s inclusive ethos. In the environment of league tables and pressures on schools, schools could easily **only** provide conditional positive regard based upon external accountability measures, such as exam success. Although pure UPR is thought to be impossible even between a client and a ‘helper’ in a therapeutic relationship (Clarke, 1994), valuing CYP as humans as an expression of Christian faith frees staff to approach pastoral care as a fundamental – not an ‘add on’ to teaching towards exam success. Inclusion is more than simply acceptance, however. Schools must provide targeted support for CYP for whom universal support is not enough (DfE, 2015). School 1’s mistaken belief that love and care is **all** CYP today require may mean staff are less able to effectively support CYP with higher level SEMH needs.

The unabashed declaration by School 1 staff that they provide a loving and caring environment to CYP is surprising. ‘Loving’ CYP in your care cuts across personal and professional boundaries which must be adhered to by professionals working with often vulnerable CYP. That need to protect oneself through clear and rigid professional and personal boundaries is of utmost importance to safeguarding oneself and the CYP. The idea of genuineness or congruence – being authentic in your responses without hiding behind a professional wall – has been thought to be key to the success of client-therapist relationships (Rogers 1946); yet it seems alien in a school environment where not all emotions are valid or accepted. Teachers who ‘surface act’, suppress or fake emotions to match perceived norms may suffer damage to their own wellbeing (Tuxford & Bradley, 2015; Taxer and Frenzel, 2015). The suppression of one’s own emotions is particularly seen in this study during safeguarding disclosures. Asking school staff to invest their emotional energy supporting CYP and to become more responsive to their
emotional needs, yet simultaneously under-recognising staff’s own response to that, does – it was found in this study – affect staff wellbeing and willingness to engage in SEMHD.

Person-centred approaches to education were first explored by Rogers in 1969; more recent research does reflect the approach School 1 takes to creating a supportive whole school community. Freiburg and Lamb (2009) describe person-centred classrooms whereby mistakes are valued, so that CYP feel valued, and personally connected to the school: trust and shared values follow. All these attributes of a person-centred classroom also seem to be supportive to staff so they surely apply to how school leaders create a person-centred ethos – an ethos which supports staff to support CYP. Roffey (2012) sees student and staff wellbeing as ‘two sides of the same coin’: without staff wellbeing, student wellbeing cannot be fully strong. It then follows that a whole school which is person-centred has more impact than the single classroom endorsed by Freiburg and Lamb (2009).

‘Caring for the carers’ has been thought by one researcher to be unfashionable (Rifkind, 1995). Having regard for staff’s own wellbeing, as advocated in whole school approaches (Weare, 2015), is not in government guidance around SEMH (DfE, 2016). The subtheme ‘Attuned vs Un-Attuned Communities’ describes how emotional containment from an informal collegial network of peers can be supportive to staff as it validates and acknowledges the way working with SEMHD can affect them. Formal reflective spaces are also found, in this study and others, to be useful places staff can express authentic emotions and process difficult experiences (Jackson, 2002). EPs in this study recognise the stress school staff are under, and how some SEMHD have no easy answer, such as a CYP who
intimidates staff. Rather than apply inflexible behavioural policies which place the responsibility within-child, surely space for reflection enables a more psychological approach in which staff tolerate the ambiguity and the ‘not knowing’ involved in supporting the most challenging CYP (Armstrong, 2018).

In Western cultures, Lui, Song and Miao (2018) propose individual wellbeing is considered above that of the institution whereas in collectivist cultures staff enhance their wellbeing through institutional activities such as building collegial interpersonal relationships. This study finds the opposite: the school staff derive much wellbeing through interpersonal relationships and through contributing to a supportive ethos and culture in the school – even when they perceived that the school as an institution did not support their individual wellbeing. Bronfenbrenner’s ecological model would see the individual and their institution as interacting with and affecting one another’s development. It must follow therefore that both institutional and individual wellbeing need to be valued.

**Mesosystem.**

Some school staff, both in this study and previous research, see themselves as taking on a wider responsibility around parenting; some are uncomfortable with this (Broomhead, 2013). The SEN Code of Practice (2015) stresses parental input, yet research suggests staff see that collectively schools can have less impact upon factors outside the school, such as parents, than factors within the school, such as teaching (Gibbs & Powell, 2011). This study finds School 1 parents to be exposed to the same community support as CYP, and through feeling supported themselves they are better able to support their child. This seems to reflect success building social capital, especially bridging social capital which enables the
building of resource and opportunity through relationships (Putnam, 2000). EPs in this study recognise how little support is given to parents of adolescents, and the difficulty for schools to meaningfully support them. As there is no support for parenting in the South London Borough for parents of CYP aged over 12, parents must seek their own support, turning to, for example, YoungMinds – a charity promoting CYP’s mental health.

**Exosystem.**

The notion of schools as hubs, where targeted mental health support can take place, is one way schools are positioned in relation to SEMH (Green Paper, 2017). It involves schools building links with local authority agencies such as CAMHS. School staff in this study want more contact time with professionals from local authority agencies and they lament the systemic barriers – the waiting lists, the thresholds and the time needed to coordinate many disparate agencies. EPs also want more direct contact time with school staff. Ekornes (2015) finds teachers want more inter-professional collaboration, thinking this will enhance their skill and engagement with SEMH. Yet the same barriers identified in this study are also reported in Ekorne’s (2015) study. As EPs see the SENCo as the gatekeeper to school staff, a strong relationship between EP and this particular member of staff is important.

**Macrosystem.**

In this study, the differences found between the two participating schools’ approaches to SEMH might be explained by macrosystemic factors. School 1, in a deprived inner city area, has a student and local community population which exceeds national norms in a range of needs. As a result, School 1 may have a
wider perception of ‘normal’ parameters, and a lower threshold of ‘success’; It has had below national average GCSE results for some years. School 2, academically above the national average, is based in an affluent area. When considering how schools can be best supported, consideration of their relative norms is helpful.

5.2 Research Question 2

How does a member of school staff’s particular role affect how they can best support CYP with SEMHD?

This research explores the specific support needs of staff in different roles – pastoral staff, teachers and school leaders. Previous research has found quite different approaches to SEMHD – and therefore support needs – reported by different staff groups whose role priorities and pressures differ significantly (Goodman & Burton, 2011). Teaching assistants have reported feeling undervalued (Higgins and Gulliford, 2014) while teachers experience role conflict (Mazzer & Rickwood, 2015).

This study finds staff’s ideas about what is supportive had more similarities across roles than differences between roles. This is somewhat expected; staff studied here hold more heterogeneous roles along spectrums from ‘pastoral only’ to ‘teaching only’, and low-high seniority than previous research. This study finds that the school in which staff work is more influential in their approach to SEMHD, to motivation to engage and to type of support need than one would deduce from their role title and responsibilities.

School 1 staff perceive a whole school ethos that prioritises pastoral support, allowing staff in different roles to fully engage with SEMHD. Yet all School 1
participants hold highly pastorally focussed roles, and had classroom teachers
without pastoral responsibilities participated (this aspect was planned for but
circumstances on the day of data collection prevented it), the picture may have
been different. That on that research day classroom teachers were not available
illustrates how the school manages SEMH: all staff are expected to respond
immediately and flexibly, regardless of role. In this way, School 1’s roles and
processes are less defined than those at School 2, and the similarities between
support needs are greater than the differences.

School 2 staff hold more homogenous, clearly defined roles with particular
responsibilities; this seems to generate some particular support needs for specific
roles. Where a clear hierarchy exists with boundaried roles, dissatisfaction is often
directed upwards to those more senior. ‘College inclusion coordinators’ lament
having to effect change through variably responsive teaching staff; this perception
of little direct influence reduces self-efficacy in this study and in others (Higgins &
Gulliford, 2014). The college inclusion coordinators are also not recognised by
teachers as sources of support for CYP – though that is the role’s main function.
Teachers perceive a lack of care for their wellbeing and a punitive culture from
senior management, which hinders their efforts and inclination to support SEMH.
In these fragmented conditions where role and culture are not in alignment, the full
activation social capital to support SEMH within School 2 was hampered.
Lindqvist et al. (2011) conclude, having studied multiple staff groups within
mainstream schools in Sweden, that cooperation of staff groups, who may have
different interests, goals and role structures, is powerful in school’s efforts towards
inclusion.

A particular need arose at School 2 within senior staff. At School 2, senior staff
speak of supporting others but do not have access to attuned, non-judgemental relationships within the wider school community which less senior staff describe as supportive. Senior staff may not want to appear vulnerable to less senior colleagues, and so a relationship outside the school community with a professional such as an EP could allow a SENCo similar benefits to the relationship network enjoyed by less senior staff. EPs recognised a role for themselves in providing emotional containment, empathy and a space to show vulnerability and genuine emotions. The characteristics of effective SENCo-EP relationships have the core conditions described by Rogers (1946) in client-‘helper’ relationships: UPR, empathy and congruence.

5.3 Research Question 3
Where can EPs be most effective when supporting school staff to feel empowered to effectively fulfil their role towards CYP with SEMH difficulties?
Reassuringly, school staff describe a wide range of ways EPs could add value to SEMH. These centred on direct, visible work with CYP and families at the micro- and at the mesosystem level. School staff clearly have a need to feel supported by having an EP available to consult and engage with CYP for whom concerns exist, with the EP being on school site as regularly as possible. This finding supports that of Rothi, Leavey and Best (2008), whose study finds staff frustrated by knowing how valuable the EP can be – while system constraints such as limited time in school hinders EP effectiveness. The British Psychological Society’s response to the Green Paper (2017) calls for more applied psychologists in schools to lead or supervise clinical work such as the running of therapeutic groups (how this is to funded is unclear). Dunsmuir and Hardy (2016), who convened a working group exploring the EP role conducting various therapeutic
interventions themselves rather than supervising others doing so, found there is a role for EPs to deliver therapy. In the South London Borough, schools can purchase more EP time for a wide range of work including around SEMH, yet several staff members quoted a lack of funds as a barrier to this. It is clear that more EP time in schools, for any reason, may need central funding, perhaps from the LA, as school budgets continue to be stretched (Institute of Fiscal Studies, 2017). This would need to be separate from EP’s statutory function to address the high numbers of CYP who present with lower levels of SEMH and who need early intervention.

In 2006, Fallon et al. exhorted EPs to engage in evaluating the effectiveness of their work as trading meant the need to provide value for money in the eyes of commissioners – schools. School staff in this study did see value in a range of EP work, but budgets to purchase it were concern. With competition coming from private EPs and CAMHS to complete SEMH work, the need to position EPs as the ‘best fit’, then persuade schools to purchase from the South London Borough is essential. There is, however, a difficulty in evaluating work related to SEMH – it is not a linear or objective concept and so a tension arises whereby EPs need to demonstrate effectiveness while recognising the complicated, non-linear nature of SEMH. Finney (2006) recognises this tension is also faced by teachers, who, already under pressure to teach to high standards, now feel under pressure around a concept they little understand or know how to help.

Reflections on RQ3 as School 1’s trainee EP

School 1 staff wish for an ‘in-house’ EP, available for informal staff consultation. I am School 1’s TEP, and in practice my visits are normally largely unplanned,
within-child and reactionary due to the SENCo’s disorganisation. Contact with other staff is rare. This shows that the wider staff wish for the support I can offer, yet the barrier is the SENCo despite efforts towards a wider strategic plan. As there is an element of not understanding the EP role in both schools, perhaps the EP’s work is similarly hidden from wider staff at School 2 by the SENCo.

While the need to work more broadly at the micro and mesosystem levels (such as consulting with school staff) is recognised by EPs in this study, EPs describe the importance of their relationship to the SENCo as their main contact within school: it is the gateway to CYP and to the freedom to practice as they wish. EPs think they provided some level of empathy, emotional containment and an attuned responsive relationship – elements which reduce anxieties. Yet this professional reassurance is not mentioned by school staff in this study (possibly because they have little direct contact with EPs). Some EPs also describe the need for a relationship with the head teacher, as the head’s attitude to SEMHD is thought key to how the school responds to these needs. When Lee and Woods (2017) ask commissioners of EP services (mainly head teachers) what they find valuable, one named aspect was understanding the psychological approach to SEMH and a fresh pair of eyes. The South London Borough must continue to seek commissioner feedback to enable the EPS to stay ahead of the competition in this evolving traded environment.

Some staff in this study express low self-efficacy around identifying SEMHD. EPs themselves recognise the increased skillset expected of teachers in judging complex concepts. Previous research suggests that teachers don’t view EPs as a source of confidence in relation to SEMH issues (Anderson, Klassen, & Georgiou 2007), yet this study finds a clear role for EPs in providing reassurance and
professional opinion around SEMH. Through training and consultation, EPs are well placed to support staff to negotiate national policy in a way which reaches a clearer idea of their role and responsibility – this aspect of the EP role seems undervalued. When some staff take a ‘medical model’ of mental health, it follows that a mental health professional will be most valuable in SEMHD – rather than an educational professional. For diagnosable SEMH issues, EPs in this study do not consider themselves well placed to deliver therapy to individuals, but EPs think they can provide support by ‘triaging’ CYP, as they are in a position to identify the right professional to meet the needs and suggest interim support.

Barriers to EP effectiveness

Statutory work.
A point of agreement recognised by both EPs and by school staff is the limited value in EPs completing statutory work in relation to supporting schools with SEMHD. School staff in this study view statutory work as a necessary activity, yet one which removes the EP from activities they value. This finding is consistent with Rothi, Leavey & Best (2008) who find that teachers perceive there to be a shortage of EPs, resulting in a ‘hands off’ approach focussed on statutory work only that teachers felt removed EP support from the wider school community. There is still a shortage of EPs nationally: 75% of services report vacancies (NAPEP, 2015), so there is clearly a need for EPs to promote non-statutory capabilities – plus a challenge in balancing their time in understaffed services where traded work is limited. In the South London Borough, where the EPS holds the commissioned contract for completing statutory work, it may be hard for EPs to shift their image as a profession away from the within-child statutory work which is focussed on SEN towards broader universal, and preventative work which benefits all CYP.
Different understandings of the EP role.
No common understanding of the EP role was shared between school staff and EPs, or amongst EPs themselves. While school staff value direct, microsystemic work with CYP and families, some EPs wanted to work systemically, engaging in early intervention at the whole school level or at the mesosystem level, linking agencies. All this points to a need for EPs to have a strong relationship with the SENCo or other commissioner; in that way, shared understanding can grow of the range of work EPs can engage in, and a broad grasp of what are the situations where EPs are the most appropriate professional. Lee and Woods (2017), interviewing commissioners of EP services within two areas of the UK, find a consensus that EPs are valuable for cognitive and psychological assessment – something the schools cannot do. EPs will need to continue to promote their wide skillset – one hopes that earlier initiatives and more meaningful work with SEMH will come to be commissioned beyond assessment.

As EPSs nationally, and within the South London Borough, increase their traded work, the freedom to diversify away from core statutory functions increases. With this comes new opportunity to engage with SEMH, but also the potential for further role overlap between EPs, CAMHS and other services such as behavioural support. There is also a growth of private EP companies who schools, as commissions, have available to them. For EPs to have a clear role in SEMH, the EPS needs to outline the services EPs can offer which CAMHS cannot, and why the EPS is better placed to deliver SEMH services than private companies.

5.4 Reflections on the Current Study

Personal reflections as a TEP

As School 1’s trainee EP throughout the research process, I was conscious that
the design of this research is cross-sectional not longitudinal. A need follows to separate my own knowledge as a researcher of the data collected from my evolving knowledge of the school through visits as a professional practitioner by my role as their TEP. This requires of me a conscious effort not to allow any contextual knowledge gained later to spill across and come to be projected on to the analysis of findings.

As a TEP soon to join the profession, I have found that the ecological framework of this research has enabled me to create a framework for approaching schools as organisations with inter-relating components. Previously, I may have focussed more on the SENCo within more of a ‘surface level’ understanding of the school as an organisation. Thanks to this experience I can now be more of a ‘critical friend’ to schools and to bring into consideration and action a wider range of issues.

Through this research, I have gained a much deeper insight into inclusion and how this is affected by conceptualisations of SEMH. This put me in a stronger position to consider how schools enact inclusion towards those with SEMHD. Now that the nuances of wellbeing mental health, SEN and SEMH are clearer to me, I can support staff’s understanding better.

**Research Reflections**

**SENCos.**

This study has gathered the views of a range of school staff representative of the school community but it does not include the views of SENCos – the colleagues who, as EPs’ key senior leadership contact, are often the persons responsible for commissioning and organising EP time. A paucity of research enquires into SENCos in UK schools (Goodman and Burton, 2011), and so future research
should seek to understand the views of this important group, especially in relation to commissioning external professionals such as EPs.

**Use of Bronfenbrenner’s Ecological Theory.**
This study uses what Tudge et al. (2009) call the ‘mature’ version of Bronfenbrenner’s ecological theory, the one which incorporates *person, process, context* and *time* (PPCT) while avoiding those ‘misuses’ described by Tudge et al. (2009) and Tudge et al. (2016). A key misuse in other papers has been an emphasis on either the *person* or the *context*, rather than the *interrelationships* and *proximal* processes. I have in this study therefore focussed on interrelations between the individual and their context by examining such proximal processes as: pastoral relationships between CYP and staff; staff’s relationship to their role and to their institution; staff relationships to government policy; and EP relationships to schools. I have stated clearly in the introduction that ‘Time’ will be the least-used aspect of the mature version of Bronfenbrenner’s theory: as the study is cross sectional, only micro- and meso-time can be discussed, but not macro-time. Fortunately, Tudge et al. (2009) accept that correct usage of the mature version can include three, rather than all four aspects of PPCT. Applying Bronfenbrenner’s model to how schools support SEMH in this study has allowed it to extended previous research through considering how interacting systems within schools can be supportive. Before, almost all research on SEMH support in secondary schools has studied just one group, such as teachers. Bronfenbrenner’s model can also be a practical tool for EP practice, in that it allows a ‘checklist’ to structure thought at each level of the model.

**Voice of the CYP.**
This research does not seek directly to hear and to include the voice of the CYP.
In that, it is at odds with the spirit of the SEN Code of Practice (2015) which places the CYP centrally to any process that concerns them. At the same time, it is recognised that without healthy, motivated staff CYP are less likely to receive support (Weare, 2015; Roffey, 2012). This study sees CYP at its centre but it does not directly seek their views – as it is the supporting of staff which leads to better support for CYP. This study is interested in improving the educational environment for CYP by another means, the enhancing of the capacity of the adults around them.

Sample.
While this study seeks to incorporate a wide variety of staff views within a school system, its sample is either self-selected through level of interest for teachers and leaders, or handpicked by the SENCo, based on levels of professionalism and relevance of role for pastoral staff. As in other exploratory research seeking the views of school staff (e.g. Goodman and Burton, 2011) those staff involved may represent a particularly passionate group keen to discuss SEMHD: this smaller group may or may not represent the wider staff body’s views. This potential limitation is allayed somewhat by being able to compare the views of different staff groups within the same school. In that way, comparisons of attitude towards SEMH can be made.

5.5 Implications

Implications for further research
From this study, I can conclude that there is a need for further research on:

- Aspects of faith which are particularly supportive to the development of a strong, attuned community ethos.
- The voice of SENCoS need to be heard – their views on SEMH and the
range of professionals who can support schools with it.

- The voices of CYP also need to be heard around what they find supportive to their SEMH in schools, particularly those who have not accessed formal mental health support elsewhere, and so may rely more upon in school support.

- A greater depth of staff views is needed on particular aspects of found to be difficult for school staff, for example, self-harm, school refusal, depression and anxiety.

**Implications for policy**

**Staff wellbeing.**
A strong finding of this study is the importance of staff’s own wellbeing and the acknowledgement of their emotional experience as they work with CYP who have SEMHD. National policy includes no formal expectation that schools will provide emotional support to staff; without explicit policy, some schools will struggle when there are other pressures. A governmental project ‘Working on Workload’ (DfE, 2018) addresses teacher’s administrative burden, but not impact on staff’s wellbeing of their widened role in SEMH. Policy should recognise all aspects of the teacher role, including the invisible ones. This is why charities such as The Education Support Partnership, which do recognise the importance of teacher wellbeing, are campaigning to engage policy makers in the importance of staff mental and physical health. Good policy recognises all aspects of the teacher role, including the invisible.

At the time of this study, responses to the Green Paper (2017) – which puts more pressure on schools to provide for SEMH – are emerging. The Education and Health and Social Care Committees’ response states that “the proposals put more
pressure on the teaching workforce without sufficient resources”. It remains to be seen whether, and how, change will come to national policy.

**Initial teacher training and CPD.** Teachers lack skills and knowledge: new teachers express their sense of not being prepared for the emotional work inherent in the profession. Training just one person as a ‘Mental Health First Aider’ in school as begun by the Department of Health in 2017 is not enough when schools are also being requested to be whole organisations where SEMH is ‘everyone’s business’. The Carter Review of Initial Teacher Training (2015) sees more knowledge of child development as needed, but it can go further, instructing new teachers in the different presentations of SEMH, in what their responsibilities are, and in how they can enhance their own wellbeing.

**Role of schools.** This study identifies and tracks the role of schools in society as their role evolves from knowledge transfer towards therapeutic agents – from the outcome of education to the process of it. This study shows how schools are at varying points in this evolution, responding to and interpreting government policy around SEMHD in the best way they can and doing so with varying success. The largest barrier to progress towards schools evolving further, as I have come to understand it, is the intense and pervasive pressure to raise academic standards. Key messages about school and teacher accountability in government policy have arguably validated the exclusion of CYP who fall outside that preferred behavioural norm which is conducive to good-looking league tables and exam results to be proud of (Armstrong, 2018). For schools to be more effective as places where SEMH is enhanced and supported, government policy should give schools genuine
opportunity to actually do so, through recognising and relieving pressure for and on academic performance.

**Implications for EP Practice**

Implications for EP practice have been given in accordance with Bronfenbrenner's levels to echo the underlying framework utilised throughout this study.

**Individual.**
Consultation with staff members, either individually, with families or in groups can help them build their confidence with SEMHD.

**Microsystem.**
When working in large complex organisations such as secondary schools, EPs need ways of working which expose them to a *wide range* of microsystemic elements – school staff, parents, CYP as well as other external agencies. EPs have a role to provide *training* for school staff in the skills they need to understand
### Figure 6: Implications for EP Practice

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<td>• Engage with teacher training courses</td>
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<td>• Respond to governmental policies which affect profession and CYP</td>
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<td>• Broaden EP role and remit</td>
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<td>• Make strong SEMH offering to commissioners</td>
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<td>• Integrate with LA teams such as virtual school</td>
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<th>Exosystem</th>
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<td>• Create relationship with key decision maker</td>
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<td>• Facilitate multi-agency work</td>
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<td>• Bridge home-school gap</td>
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<td>• Deliver targeted training for staff</td>
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<td>• Ensure exposure to microsystemic elements</td>
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<td>• Lead staff supervision groups</td>
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<td>• Bring psychological understanding to SEMH</td>
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<th>Mesosystem</th>
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<td>• Consultation with staff and families</td>
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<td>• Consultation with staff and families</td>
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<tr>
<td>• Recognise contribution</td>
</tr>
</tbody>
</table>
concepts such as mental health, wellbeing and SEMH. EPs can support schools in judging when CYP need more specialist intervention. Any training needs to be *targeted* to specific needs of the school context rather than generic generalities.

EPs can set up peer-learning systems and peer-support groups such as work discussion groups using a model for group supervision, in addition to passively received training.

*A psychological understanding* can be introduced by EPs through applying psychological models and aspects of theory – including attachment theory, person-centred principles and positive psychology. This will be especially beneficial for understanding externalising behaviour when viewed as relational and within an interactionist framework such as Bronfenbrenner. *Supervision* for school staff, particularly those whose roles bring them into most come with distressed CYP, such as designated safeguarding leads, could be a way EPs support staff wellbeing and professional reflection. The way EP role is understood by SENCOs – many different ways – may affect how able EPs are to step outside the perception that they are solely education focussed. Psychology in schools needs contribute across all areas of CYP’s development. Statutory assessment incorporates input in four areas of need, yet working at a more systemic level across all areas is also vital.

*Mesosystem.*

In a traded working relationship with schools, EPs must promote their wide skill-set to schools through a relationship with a key decision-maker within the school, a relationship based on planning and strategy meetings which identify strengths and needs. This may include the *head teacher, SENCo and other senior leadership*. As professionals working across different levels in the school yet
independent of it, EPs are well placed to notice and give feedback on what works and what does not in relation to SEMHD, and so discuss evidence-based ideas for change. EPs are also well placed to facilitate the relationship between school and parents, an area some school staff find challenging, as EPs are a disinterested party. Using Bronfenbrenner’s ideas as a ‘metatheory’ during practice will allow EPs to better engage with SEMHD in considering factors both in the context and in interactions around the CYP.

**Exosystem.**
EP services need to broaden their role and remit as they function in an increasingly competitive traded context. This shift challenges the EP’s statutory function as SEN and recent government documents place EPs as reactive specialists able to work with individuals. EPS can do much in this way, by creating ‘brochures’ with a centralised list of available services, though regular communications with head teachers/commissioners in the Borough, in feedback procedures around quality of service, and by their ensuring EPs themselves have the skills to work at different levels. EP services can reach wider into LA as they can be commissioned by other teams, such as the virtual school, which could enable targeted work with particularly vulnerable populations. EPs can also be valuable by their sitting on panels such as for CYP facing exclusion.

** Macrosystem**
Given the research finding that new teachers feel unprepared for managing SEMHD, EPs have a role in the training process for new teachers – augmenting their knowledge of theories in cognitive, social and psychological development. In particular, EPs can be influential in supporting teacher’s roles in safeguarding disclosures, in approach to externalising behaviour, and in managing their own
emotional wellbeing. The EP profession must keep engaging in the national conversation about the position of schools in relation to mental health through, organising bodies such as the Association of Educational Psychologists and the British Psychological Society, and through research involving EP practice in this area.

5.6 Conclusion

This research has increased by one more study that small body of existing literature seeking to understand the views of mainstream secondary school staff, and the views of EPs, on what is supportive to staff’s endeavours to promote, to identify and to manage a range of SEMHD. It has furthered previous efforts in using a holistic view of how individuals, teams and processes are nested within a complex whole school and local community system. Where previous research has concentrated on a single staff group, its examining of interactions at all levels of Bronfenbrenner’s ecological systems theory has enabled a richer, more complex picture. The inclusion of the voice of EPs in this study adds a broader perspective, since they are educational professionals – yet outside the school community – and it enables comparison of views between invested stakeholders in CYP’s SEMHD. Systemic and cultural barriers exist for school staff and EPs, but schools and the dedicated staff within them are well placed to support SEMH when staff’s own wellbeing is prioritised, and when they are given those skills and those resources they so desperately need.
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Appendix

Appendix 1 Literature search

In order to identify a wide range of relevant literature, a variety of techniques was employed, based upon those recommended when conducting a systematic literature review. Identification of the research question enabled main areas and sub areas of the research to be identified. These were: Social, emotional and mental health (and historic terms, as well as terms around wellbeing), inclusive education (such as SEN) and teacher wellbeing (which included terms related to role within a school, as well as those pertaining to self efficacy, resilience, and seeking their views). Once these broad and more specific areas had been identified, keywords, synonyms and alternative spellings and terms were written out. They were combined using Boolean logic. When searching within ERIC and EBSCO, results were filtered by secondary school, peer reviewed, 2007-present, English language. It was also important to have full access through the UCL library. Literature has on occasion been included that is prior to 2007, or that was conducted within primary school if it was deemed especially relevant. From the list of results, abstracts were read to decide whether each article was relevant enough to read in full. Those that were were saved and read. If, during the course of reading other important research or relevant literature was discovered, this was found and assessed for including in the review.

Search terms used

A number of variations for the main searches within ERIC, EBSCO and Taylor and Frances were used which included:

- (teacher* OR educator* OR 'school staff' OR 'pastoral leader' OR 'school manager') AND ('mental health' OR 'mental wellbeing' OR 'social,
emotional, mental health' OR 'emotional wellbeing' OR emotional health' OR 'positive mental health' OR 'SEMH' OR 'EBD' OR 'SEBD' OR 'BESD') AND (experience OR view* OR perception*) When searching for literature pertaining to the views of SENCos, teaching assistants or school managers more specifically (as research on the views of teachers predominated), other search terms were used such as 'learning mentor', ‘teaching assistant’, ‘learning support assistant’, 'special educational needs coordinator', ‘SENCo’, ‘headteacher’, ‘school leader’ and ‘management’ were used. Research around teacher wellbeing is approached from different perspectives, so some specific terms such as ‘burnout’, ‘resilience’, ‘efficacy’ and ‘emotion’, and ‘emotional work’ were used. It also became clear that some research- especially older research- focused specifically on ‘behaviour’ as a part of SEMH. Therefore, searches were conducted around ‘challenging behaviour’, ‘misbehaviour’ and difficult behaviour’ however care was taken to ensure these studies were still relevant to SEMH as a whole. Sources of Information To gain access to key peer reviewed journal articles, electronic databases were used primarily. In addition, library resource searching was used using the same key words as those used in ERIC and EBSCO. Taylor & Francis Online was utilized as it encompasses relevant journals such as ‘Educational Psychology in Practice’ and ‘Emotional and Behavioural Difficulties’. To access government policies, guidance and statistics, the gov.uk website was used. Other online sources of information were used to access non peer reviewed reports such as charity websites.
Appendix 2 Maslow’s Hierarchy of Need

Appendix 3 School Comparison

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>School 1</th>
<th>School 2</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mixed 11-16 voluntary aided Roman Catholic comprehensive</td>
<td>Mixed 11-19 comprehensive academy</td>
<td></td>
</tr>
<tr>
<td>Pupils on roll</td>
<td>556</td>
<td>1935</td>
<td></td>
</tr>
<tr>
<td>% SEN</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% pupils with an EHC or statement</td>
<td>0.5%</td>
<td>1.9%</td>
<td>4.3%</td>
</tr>
<tr>
<td>% FSM</td>
<td>43.3%</td>
<td>19.1%</td>
<td>29.1%</td>
</tr>
<tr>
<td>% EAL</td>
<td>61.7%</td>
<td>0.2%</td>
<td>16.1%</td>
</tr>
<tr>
<td>Ofsted rating</td>
<td>January 2015</td>
<td>May 2016</td>
<td></td>
</tr>
<tr>
<td>------------------</td>
<td>-------------------------------------------</td>
<td>-----------------------------------------</td>
<td></td>
</tr>
<tr>
<td></td>
<td>‘Requires improvement’</td>
<td>‘Outstanding’</td>
<td></td>
</tr>
<tr>
<td></td>
<td>February 2017 ‘Good’</td>
<td>Previous inspection Good</td>
<td></td>
</tr>
<tr>
<td>Attainment 8 score</td>
<td>37.8 points</td>
<td>52.2 points</td>
<td></td>
</tr>
<tr>
<td>Progress 8 score</td>
<td>Average</td>
<td>Above average</td>
<td></td>
</tr>
<tr>
<td>% 5 or above in</td>
<td>31%</td>
<td>57%</td>
<td></td>
</tr>
<tr>
<td>English and Maths</td>
<td></td>
<td>39.6%</td>
<td></td>
</tr>
<tr>
<td>Persistent absence</td>
<td>19.8%</td>
<td>10.5%</td>
<td></td>
</tr>
<tr>
<td>(pupils missing 10% or more of available sessions)</td>
<td></td>
<td>13.5%</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 4 Information letter sent to SENCos and head teachers

Dear HEAD

I am an Educational Psychologist in training through the University College of London (Institute of Education). I am currently on placement in South London Borough working for the Octavo Partnership. Part of my training includes completing a piece of research, which I would like to invite you as a South London Borough school, to be a part of.

The growing agenda around schools’ involvement in adolescent and child social, emotional and mental health and wellbeing is promoted by government guidance such as Mental Health and Behavior in Schools (2016). Whilst there is a great amount of guidance available, it is the school staff who will be carrying out those recommendations on the ground, yet there is little recognition of the impact this might have upon them, or what they say they need to manage this increasing responsibility with confidence.

This research aims to understand what supports different school staff when working with students who present with SEMH difficulties. It also aims to understand how the role of the educational psychologist might be grown in this area.

What would the research involve for your school?

• Three focus groups: One for classroom teachers, one for teaching assistants and nonteaching pastoral staff, and one for school leaders (SENCo, heads of year, deputy head, head, inclusion manager). Each group would have 3-6 members of staff, depending on availability, and last 45 minutes.
• A debrief of the project on completion will be available, either in written form or within a staff meeting at your school.

How will the staff be protected?

This research has been approved by the UCL Institute of Education Ethics Committee, which ensures the rigorous ethical standards of the British Psychological Society are upheld.

How could your school be compensated?

I am offering participating schools a free training session for teaching assistants or teachers on a topic related to social, emotional and mental health difficulties, such as ‘managing challenging behaviour’. The details of this can be discussed.

If you wish to know more or take part, please email

Hannah Harvest
Appendix 5a EP Focus group questions

Focus Group Schedule – EPs

Thank you all for meeting with me today and for your time. The purpose of this focus group is to explore your experience of working with mainstream secondary schools and their staff, in relation to students who present with social, emotional and mental health difficulties. EPs are barely mentioned in guidance to schools in this area, and then usually as an ‘add on’ to directly support students with more extreme difficulties. Recognition of the wider range of skills and services is not mentioned. I want to find out what role educational psychologists are currently playing in this area, and how they might play more of a role in the future. The aim will be that alongside your views and experiences, those of school staff will also be gathered and synthesized to produce a framework EPs can use approaching the issue of supporting school staff to manage students with SEMH difficulties. The definition of SEMH from the SEN Code of Practice will be used. It is as follows:

‘Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.’

As was mentioned in the consent form I will be recording the focus groups to aid me with transcribing. Anything you say will be kept confidential and the transcripts will be kept confidential, also please respect the other group member’s confidentiality here. You are free to withdraw at any time, and do not need to provide any reason for doing so.

It is envisaged that this focus group will last up to 1 hour. My role as the researcher will be to facilitate the discussion. I will be asking open ended questions, guiding and focusing the discussion if necessary and ensuring everyone has the chance to speak.

It is important that this group feels like a safe space to share thoughts and feelings. I suggest some group rules to facilitate this: 1) What is spoken about in this group is not shared beyond the group members. 2) Everyone’s contribution is valid and therefore please give others space and time to express their views. This will also help given I am recording. 3) Has anybody got any other suggestions they would like to add?

Have you got any questions or need anything clarifying before we begin? OK I’m going to turn on the recorder.

<table>
<thead>
<tr>
<th>Question</th>
<th>Prompt</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1. In your experience, what examples of ‘best practice’ have you seen in schools who are doing a good job supporting their staff to manage those students with social, emotional and mental health difficulties?</td>
<td>Think of different aspects of the situation, from the individual staff involved, through to relationships between staff, structures within the school, management EPs.</td>
<td>Understand what schools might currently be doing that is supportive to their staff</td>
</tr>
<tr>
<td>Q2. If you have seen a school that is really struggling to address mental health (emotional and social aspects of students, what have been the barriers to them being more successful?</td>
<td>Think of individual, relational, organisational levels of barriers</td>
<td>Understand EP views of barriers schools may face.</td>
</tr>
<tr>
<td>Q3. Where have you perceived barriers in a school’s or staff member’s ability to support students with SEMH difficulties, what recommendations have you made or actions have you taken?</td>
<td>Who were the recommendations aimed at? To what extent did the school manage to implement them and did they make a difference?</td>
<td>Understand how EPs have attempted to support schools in the past</td>
</tr>
<tr>
<td>Q4. How do and can EPs support individual staff members in different roles (e.g. SENCO, teacher, TA, school leader, to better manage students' SEMH difficulties?</td>
<td>What advice have you given staff in different roles that was aimed at supporting them with a challenging student?</td>
<td>Understand what formal and informal advice EPs are giving to individual staff members.</td>
</tr>
<tr>
<td>Q5. EPs are hardly mentioned in government guidance to schools about their role and responsibilities towards SEMH difficulties. What do you see as the current and future EP role supporting schools in this area?</td>
<td>For example, to what extent do you see EPs delivering therapy, advising on school policy, starting up nurture/behaviour groups...</td>
<td>Understand how EPs see their role evolving in this area and perceive their contribution now</td>
</tr>
<tr>
<td>Q6. What role do you think other external professionals and resources school can buy in might play in supporting schools to better manage students with social, emotional and mental health needs? What is the EP unique contribution?</td>
<td>Have you ever felt like you don’t have a unique contribution in this area? Who was filling the gap?</td>
<td>Understand where the EP role fits in with other resources school are able to draw upon</td>
</tr>
</tbody>
</table>
Appendix 5b pastoral staff focus group questions

Focus Group Schedule – TA/LSA/Pastoral staff

Thank you all for meeting with me today and for your time. The purpose of this focus group is to explore your experience of working with children with social, emotional and mental health needs and difficulties, as part of a wider research project which is looking into what school staff find supportive when working with this group of young people, and what possible role an educational psychologist might play in this area. For the purposes of my research the description of SEMH from the SEN Code of Practice will be used:

‘Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.’

The voice of school staff in government guidance is underrepresented - It is therefore very important for school staff to voice what their experiences are, and what they find supportive working with those students with SEMH difficulties in order for schools to prevent stress, burnout and turnover of staff. Staff who are mentally healthy and feel supported themselves are better able to manage the needs of students with SEMH difficulties.

As was mentioned in the consent form I will be recording the focus groups to aid me with transcribing. Anything you say will be kept confidential and the transcripts
will be kept confidential, also please respect the other group member’s confidentiality here. You are free to withdraw at any time, and do not need to provide any reason for doing so.

It is envisaged that this focus group will last up to 1 hour. My role as the researcher will be to facilitate the discussion. I will be asking open ended questions, guiding and focusing the discussion and ensuring everyone has the chance to speak.

It is important that this group feels like a safe space to share thoughts and feelings. I suggest some group rules to facilitate this: 1) What is spoken about in this group is not shared beyond the group members. 2) Everyone’s contribution is valid and therefore please give others space and time to express their views. 3) has anybody got any other suggestions they would like to add?

Have you got any questions or need anything clarifying before we begin? OK I’m going to turn on the recorder.

<table>
<thead>
<tr>
<th>Question</th>
<th>Prompts</th>
<th>Rationale for question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can you each describe 1. how long you have been in your role, 2. How much experience you have had managing challenging behaviour, 3. Amount of training you feel you’ve had.</td>
<td></td>
<td>Understand who is in the room, and where their perspectives might come from.</td>
</tr>
<tr>
<td>What is the structure of the pastoral system in the school?</td>
<td>Understand how people’s role fit into the organisational structure.</td>
<td></td>
</tr>
<tr>
<td>Who is responsible for the learning, behaviour and support of children with SEMH difficulties?</td>
<td>When a child is showing challenging behaviour, who manages it?</td>
<td>Attempting to establish the culture within the school in terms of taking responsibility, locus of control, why challenging behaviour occurs. Elicit description of structure of pastoral support.</td>
</tr>
<tr>
<td>What are your experiences of working with children with SEMH?</td>
<td>What kinds of difficulties do the students themselves present with?</td>
<td>Get a general impression of the perception of SEMH need within the school.</td>
</tr>
<tr>
<td>To what extent do non teaching staff in</td>
<td>Do staff feel they can make a difference to these children’s</td>
<td>Get a general impression of the</td>
</tr>
<tr>
<td>school X generally feel supported when working with young people with SEMH difficulties?</td>
<td>lives?</td>
<td>collective self efficacy amongst school staff</td>
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</tr>
<tr>
<td>Do staff feel confident to work with students who have a diagnosed or suspected mental health difficulty such as anxiety, depression, or eating disorder? Do staff feel confident in their ability to build relationships with even the most challenging students?</td>
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</table>

| Can you think about a time you have felt out of your depth with a particular young person – what factors made you feel this way? | What was the situation? What was it about the situation that made you feel you couldn’t manage? Who was important in supporting you with this student? What brought about change within this situation? To what extent has this experience given you a sense of competence and confidence working with young people with SEMH? | Understand where staff needs are in relation to working with young people with SEMH. Understanding what factors create change confidence - to help EPs understand this process. |

<p>| Think about a time when you felt really | What made the situation be perceived as challenging? | Attempting to understand the |</p>
<table>
<thead>
<tr>
<th>supported working with a student who was generally thought of as very challenging. What factors helped you feel this way?</th>
<th>Were the factors personal characteristics, something the school did, something colleagues did, or something else?</th>
<th>sources of support, and at what level they are operating.</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you could write a wishlist of factors that would support you to feel capable and competent in your role working with students with SEMH difficulties, what would be on it? It could be personal characteristics, things the school could do, or external professionals such as EPs</td>
<td>How do you think each of these ideas would help?</td>
<td>Understand the range of factors staff feel would support them, with a view to greater EP involvement in this area.</td>
</tr>
<tr>
<td>What more would you like to see your school’s EP doing to support you working with students with SEMH difficulties?</td>
<td>What does your EP do now to support you working with students with SEMH difficulties?</td>
<td>See level of awareness of EP role in this area</td>
</tr>
<tr>
<td>you working with students with SEMH?</td>
<td></td>
<td></td>
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<tr>
<td>--------------------------------------</td>
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<td></td>
</tr>
<tr>
<td>Is there anything else that you feel is relevant but has not been mentioned?</td>
<td></td>
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</tr>
</tbody>
</table>

Thank you for your time. If you have any questions or further comments, please do get in touch. If you would be happy to be interviewed individually at a later date, please write your name and email address on the sheet.

**Appendix 5c teacher focus group questions**

Focus Group Schedule – Teachers

Thank you all for meeting with me today and for your time. The purpose of this focus group is to explore your experience of working with children with social, emotional and mental health needs and difficulties, as part of a wider research project which is looking into what school staff find supportive when working with this group of young people, and what possible role an educational psychologist might play in this area. For the purposes of my research the description of SEMH from the SEN Code of Practice will be used:

‘Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing
behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.’

The voice of school staff in government guidance is underrepresented - It is therefore very important for school staff to voice what their experiences are, and what they find supportive working with those students with SEMH difficulties in order for schools to prevent stress, burnout and turnover of staff. Staff who are mentally healthy and feel supported themselves are better able to manage the needs of students with SEMH difficulties.

As was mentioned in the consent form I will be recording the focus groups to aid me with transcribing. Anything you say will be kept confidential and the transcripts will be kept confidential, also please respect the other group member’s confidentiality here. You are free to withdraw at any time, and do not need to provide any reason for doing so.

It is envisaged that this focus group will last up to 1 hour. My role as the researcher will be to facilitate the discussion. I will be asking open ended questions, guiding and focusing the discussion and ensuring everyone has the chance to speak.

It is important that this group feels like a safe space to share thoughts and feelings. I suggest some group rules to facilitate this: 1) What is spoken about in this group is not shared beyond the group members. 2) Everyone’s contribution is valid and therefore please give others space and time to express their views. 3) has anybody got any other suggestions they would like to add?
Have you got any questions or need anything clarifying before we begin? OK I’m going to turn on the recorder.

<table>
<thead>
<tr>
<th>Question</th>
<th>Prompts</th>
<th>Rationale for question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can you each describe your current role?</td>
<td>How long have you had this role?</td>
<td>Understand who is in the room, and where their perspectives might come from.</td>
</tr>
<tr>
<td></td>
<td>How did this role come about?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do you hold any other responsibilities?</td>
<td></td>
</tr>
<tr>
<td>Who is responsible for the learning, behaviour and support of children with SEMH difficulties?</td>
<td>When a child is showing challenging behaviour, or worrying behaviour, or their behaviour has changed suddenly, how is that managed within the school?</td>
<td>Attempting to establish the culture within the school in terms of taking responsibility, locus of control, why challenging behaviour occurs.</td>
</tr>
<tr>
<td></td>
<td>If you had concerns about a child’s mental health, who would become involved and what would be expected of you?</td>
<td></td>
</tr>
<tr>
<td>What is the pastoral support culture?</td>
<td>How and when would you come into contact with pastoral support? How effective is the school’s pastoral system?</td>
<td>Elicit further information about how teams work together, where responsibility lies and</td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
<td>Additional Information</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>What are your experiences of working with children with SEMH?</td>
<td>What kinds of difficulties do the students themselves present with? How much experience do you have of working with children with SEMH?</td>
<td>Get a general impression of the perception of SEMH need within the school.</td>
</tr>
<tr>
<td></td>
<td>What kind of SEMH issues do you mind most challenging/least challenging</td>
<td></td>
</tr>
<tr>
<td>To what extent do teachers in school X generally feel capable to effectively teach and support young people with SEMH?</td>
<td>Do staff feel they can make a difference to these children’s lives? Do staff feel confident to work with students who have a diagnosed or suspected mental health difficulty such as anxiety, depression, or eating disorder? Do staff feel confident in their ability to build relationships with even the most challenging students?</td>
<td>Get a general impression of the collective self efficacy amongst school staff</td>
</tr>
<tr>
<td></td>
<td>Get a general impression of the collective self efficacy amongst school staff</td>
<td></td>
</tr>
<tr>
<td>Topic</td>
<td>Question</td>
<td>Understanding</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td>Can you think about a time you have felt out of your depth with a particular young person – what factors made you feel this way?</td>
<td>What was the situation? What was it about the situation that made you feel you couldn’t manage? Who was important in supporting you with this student? What brought about change within this situation? To what extent has this experience given you a sense of competence and confidence working with young people with SEMH?</td>
<td>Understand where staff needs are in relation to working with young people with SEMH. Understanding what factors create change – to help EPs understand this process.</td>
</tr>
<tr>
<td>Think about a time when you felt really supported working with a student who was generally thought of as very challenging. What factors helped you feel this way?</td>
<td>What made the situation be perceived as challenging? Were the factors personal characteristics, something the school did, something colleagues did, or something else?</td>
<td>Attempting to understand the sources of support, and at what level they are operating.</td>
</tr>
<tr>
<td>If you could write a wishlist of factors that would support</td>
<td>How do you think each of these ideas would help?</td>
<td>Understand the range of factors staff feel would support them,</td>
</tr>
</tbody>
</table>
you to feel capable and competent you in your role working with students with SEMH difficulties, what would be on it? It could be personal characteristics, things the school could do, or external professionals such as EPs

<table>
<thead>
<tr>
<th>What is your current understanding of the role of an EP?</th>
<th>Have you come into contact with them before?</th>
<th>Gauge level of knowledge and prior contact with EPs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you heard others say about them?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| What more would you like to see your school’s EP doing to support you working with students with SEMH? | What does your EP do now to support you working with students with SEMH difficulties? | See level of awareness of EP role in this area |
|------------------------------------------------------------------------------------------------ambiguous|------------------------------------------------------------------|-----------------------------------------------|
| Is there anything else that you feel is                                                                |                                                                                     |                                                |
Thank you for your time. If you have any questions or further comments, please do get in touch. If you would be happy to be interviewed individually at a later date, please write your name and email address on the sheet.

**Appendix 5d Senior leader focus group questions**

Focus Group Schedule – School Leaders

Thank you all for meeting with me today and for your time. The purpose of this focus group is to explore your experience as a school leader of working with children with social, emotional and mental health needs and difficulties, as part of a wider research project which is looking into what school staff find supportive when working with this group of young people, and what possible role an educational psychologist might play in this area. For the purposes of my research the description of SEMH from the SEN Code of Practice will be used:

‘Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.’
The voice of school staff in government guidance is underrepresented - It is therefore very important for school staff to voice what their experiences are, and what they find supportive working with those students with SEMH difficulties in order for schools to prevent stress, burnout and turnover of staff. Staff who are mentally healthy and feel supported themselves are better able to manage the needs of students with SEMH difficulties.

As was mentioned in the consent form I will be recording the focus groups to aid me with transcribing. Anything you say will be kept confidential and the transcripts will be kept confidential, also please respect the other group member's confidentiality here. You are free to withdraw at any time, and do not need to provide any reason for doing so.

It is envisaged that this focus group will last up to 1 hour. My role as the researcher will be to facilitate the discussion. I will be asking open ended questions, guiding and focusing the discussion and ensuring everyone has the chance to speak. Some questions may be more relevant to certain roles in the room so don’t worry if you can’t contribute to every question.

It is important that this group feels like a safe space to share thoughts and feelings. I suggest some group rules to facilitate this: 1) What is spoken about in this group is not shared beyond the group members. 2) Everyone’s contribution is valid and therefore please give others space and time to express their views. 3) has anybody got any other suggestions they would like to add?

Have you got any questions or need anything clarifying before we begin? OK I’m going to turn on the recorder.
<table>
<thead>
<tr>
<th>Question</th>
<th>Prompts</th>
<th>Rationale for question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1 Can you each describe your current role</td>
<td>How long have you had this role?</td>
<td>Understand who is in the room and where their perspectives might come from.</td>
</tr>
<tr>
<td></td>
<td>How did this role come about?</td>
<td></td>
</tr>
<tr>
<td>Q2 Who is responsible for the learning, behaviour and support of children with SEMH difficulties?</td>
<td>When a child is showing challenging behaviour, who manages it?</td>
<td>Attempting to establish the culture within the school in terms of taking responsibility, locus of control, why challenging behaviour occurs.</td>
</tr>
<tr>
<td>Q3 To what extent is it a school's responsibility to support social, emotional and mental health as well as provide young people with an academic education? What are the barriers and challenges to supporting SEMH difficulties?</td>
<td>What do you perceive as the limits of your responsibility as a school in relation to supporting SEMH?</td>
<td>Get an impression of where this particular school views the end of its responsibility and the challenges it faces.</td>
</tr>
<tr>
<td></td>
<td>What would you feel uncomfortable asking of your staff in relation to SEMH difficulties?</td>
<td></td>
</tr>
<tr>
<td>Q4 In what ways have you endeavoured to support your staff when they work with students who present social, emotional and mental health difficulties? It could be whole school initiative/ethos of school, external agencies, providing your own time and expertise support….</td>
<td>Are there any whole school initiatives?</td>
<td>Understand how school leaders are addressing the needs of their staff</td>
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<td></td>
<td>Does the school buy in any services in this area eg staff wellbeing surveys?</td>
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<td></td>
<td>What role does training play here?</td>
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</tr>
<tr>
<td>Q5 Has there been a time you have noticed staff are struggling to manage the demands of students with SEMH</td>
<td>What factors enabled that member(s) of staff to carry on?</td>
<td>In difficult times, how do school leaders respond to the needs of their staff?</td>
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<tr>
<td>Question</td>
<td>Text</td>
<td>Objective</td>
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<tr>
<td>Q6</td>
<td>If you could write a wishlist of factors that would support your staff in their role working with students with SEMH difficulties, what would be on it? It could be personal characteristics, things the school could do, or external professionals such as EPs.</td>
<td>How do you think each of these ideas would help?</td>
</tr>
<tr>
<td>Q7</td>
<td>I realise some may be more aware of the EP role than others, but if you think of the EP role as an external professional who can work with you and the school and student to facilitate better SEMH, what more would you like to see your school's EP doing to support you working with students with SEMH difficulties? What are the barriers to this?</td>
<td>What does your EP do now to support you working with students with SEMH difficulties?</td>
</tr>
</tbody>
</table>

Is there anything else that you feel is relevant but has not been mentioned?

Thank you for your time. If you have any questions or further comments, please do get in touch. If you would be happy to be interviewed individually at a later date, please write your name and email address on the sheet.
Appendix 6 Vignettes used in pastoral focus group

There is a student in year 7 who you have been told has a very troubled family situation. This student is prone to episodes of intense anger, frustration and violence directed at property, other students and occasionally staff. Staff are wary of the student ‘kicking off’ in their lessons, as the anger can seemingly come out of nowhere and escalate quickly. The student has trouble with peer relationships and has few friends. You suspect that the student finds learning very challenging but does not like to receive support. The amount of time the student spends out of class is also affecting learning.

Q1 What factors could help you feel very supported in working with this student? (Think of personal factors, how other staff could help, systems within the school...)
Q2 What would be your wishlist in terms of feeling capable and confident working with a student like this? (It could be personal factors, other staff, systems in school, external professionals, ...)
Q3 What support would you like to see from your school’s EP in managing this kind of social, emotional and mental health difficulty?

A student you work with in year 10 has a history of self-harm and anxiety. This student’s attendance in school has begun dropping significantly and they say school is just too difficult. As a result, friendships have begun to break down and progress academically has slowed – creating a downward spiral. This student has been known to self-harm on the school premises but they are good at hiding it, creating anxiety in those who work with the student. With more academic pressure approaching, staff are very concerned.

Q1 What factors could help you feel very supported in working with this student? (Think of personal factors, how other staff could help, systems within the school...)
Q2 What would be your wishlist in terms of feeling capable and confident working with a student like this? (It could be personal factors, other staff, systems in school, external professionals, ...)
Q3 What support would you like to see from your school’s EP in managing this kind of social, emotional and mental health difficulty?

Appendix 7 Consent forms (all staff)
Dear staff member,

I am an Educational Psychologist in training through the University College of London (Institute of Education). I am currently on placement in South London Borough working for the Octavo Partnership. Part of my training includes completing a piece of research, which I would like to invite you to take part in.

The growing agenda around schools' involvement in adolescent and child social, emotional and mental health and wellbeing is promoted by government guidance such as Mental Health and Behaviour in Schools (2016). Whilst there is a great amount of guidance available, it is the school staff who will be carrying out those recommendations on the ground, yet there is little recognition of the impact this might have upon them, or what they say they need to manage this increasing responsibility with confidence.

This research aims to understand what supports different school staff when working with students who present with SEMH difficulties. It also aims to understand how the role of the educational psychologist might be grown in this area.

What would the research involve for you?

* Taking part in a focus group with 3-5 other members of school staff in a similar or the same role as you. This should take 45 minutes.
* A debrief of the project on completion will be available, either in written form or within a staff meeting at your school.

How will you be protected?

This research has been approved by the UCL Institute of Education Ethics Committee, which ensures the rigorous ethical standards of the British Psychological Society are upheld.

Why take part?

The voice of school staff does not feature in government guidance for schools
about their responsibilities towards students who experience social, emotional and mental health difficulties, and more understanding is needed about what staff themselves say they need. It is also a chance to discuss your practice with colleagues and share your experiences.

Yours faithfully

Hannah Harvest (Educational Psychologist in training)

Informed Consent

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<tbody>
<tr>
<td>1.</td>
<td>I have read and understood the information about the project, as provided on the reverse of this sheet.</td>
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<tr>
<td>2.</td>
<td>I have been given the opportunity to ask questions about the project and my participation.</td>
</tr>
<tr>
<td>3.</td>
<td>I voluntarily agree to participate in the project.</td>
</tr>
<tr>
<td>4.</td>
<td>I understand I can withdraw at any time without giving reasons and that I will not be penalised for withdrawing nor will I be questioned on why I have withdrawn.</td>
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<td>5.</td>
<td>I understand my name will be changed to provide anonymity.</td>
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<td>6.</td>
<td>I understand the focus group will be recorded using an audio device.</td>
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<td>7.</td>
<td>I understand only the researcher and their supervisors will hear or see my data.</td>
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If you would be happy to be contacted to take part in a one to one interview at a later date, please write your email here:
Appendix 8 Ethics form approved by UCL Ethics Committee

Ethics Application Form: Student Research

Anyone conducting research under the auspices of the Institute (staff, students or visitors) where the research involves human participants or the use of data collected from human participants, is required to gain ethical approval before starting. This includes preliminary and pilot studies. Please answer all relevant questions in terms that can be understood by a lay person and note that your form may be returned if incomplete.

For further support and guidance please see accompanying guidelines and the Ethics Review Procedures for Student Research [http://www.ucl.ac.uk/srs/research-ethics-committee/ioe](http://www.ucl.ac.uk/srs/research-ethics-committee/ioe) or contact your supervisor or [IOE.researchethics@ucl.ac.uk](mailto:IOE.researchethics@ucl.ac.uk).

Before completing this form you will need to discuss your proposal fully with your supervisor(s).

Please attach all supporting documents and letters.

For all Psychology students, this form should be completed with reference to the British Psychological Society (BPS) Code of Human Research Ethics and Code of Ethics and Conduct.

### Section 1  Project details

<table>
<thead>
<tr>
<th>a. Project title</th>
<th>What supports mainstream secondary school staff to effectively work with those who have SEMH difficulties? Developing a framework for EP</th>
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<td>b.</td>
<td>Student name</td>
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<td>c.</td>
<td>Supervisor/Personal Tutor</td>
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<td>d.</td>
<td>Department</td>
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<td>e.</td>
<td>Course category (Tick one)</td>
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<td>PhD/MPhil</td>
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<td>Diploma (state which)</td>
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<td>Other (state which)</td>
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<td>f.</td>
<td>Course/module title</td>
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<td>g.</td>
<td>If applicable, state who the funder is and if funding has been confirmed.</td>
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<td>h.</td>
<td>Intended research start date</td>
</tr>
<tr>
<td>i.</td>
<td>Intended research end date</td>
</tr>
<tr>
<td>j.</td>
<td>Country fieldwork will be conducted in</td>
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<td></td>
<td>If research to be conducted abroad please</td>
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</table>
ensure travel insurance is obtained through UCL

http://www.ucl.ac.uk/finance/insurance/travel

k. Has this project been considered by another (external) Research Ethics Committee?

<table>
<thead>
<tr>
<th>Yes</th>
<th>External Committee Name:</th>
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<tr>
<td>No</td>
<td>go to Section 2</td>
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Date of Approval:

If yes:
- Submit a copy of the approval letter with this application.
- Proceed to Section 10 Attachments.

**Note:** Ensure that you check the guidelines carefully as research with some participants will require ethical approval from a different ethics committee such as the National Research Ethics Service (NRES) or Social Care Research Ethics Committee (SCREC). In addition, if your research is based in another institution then you may be required to apply to their research ethics committee.

---

**Section 2  Project summary**

**Research methods** (tick all that apply)

Please attach questionnaires, visual methods and schedules for interviews (even in draft form).

- Interviews
- Focus groups
- Questionnaires
- Action research
- Observation
- Literature review
- Controlled trial/other intervention study
- Use of personal records
- Systematic review ⇒ if only method used go to Section 5.
- Secondary data analysis ⇒ if secondary analysis used go to Section 6.
- Advisory/consultation/collaborative groups
- Other, give details:

**Please provide an overview of your research.** This should include some or all of the following: purpose of the research, aims, main research questions, research design, participants, sampling, your method of data collection (e.g.,
observations, interviews, questionnaires, etc.) and kind of questions that will be asked, reporting and dissemination (typically 300-500 words).

Legislation highlights the responsibility of schools to provide an inclusive environment that provides high expectations to all students regardless of SEN (SEN Code of Practice, 2015). This is made challenging due to increasing numbers of children with EAL, mental health difficulties and a range of SEN. The numbers of children and young people experiencing mental health difficulties are striking, with 1 in 10 thought to have a diagnosable mental health condition and/or emotional and behavioural problem and a further 1 in 7 experiencing less severe issues that interfere with their development and learning (Green et al, 2004). Schools now have a clear responsibility to play a key role in supporting students to be ‘resilient and mentally healthy’ (Mental Health and Behaviour in Schools, 2016). Teachers in particular are responsible and accountable for the outcomes of students in their class, yet some argue that they are already overburdened, and targeted professionals such as educational psychologists can bring specialist knowledge it would be unfair to expect of teachers (Hill, 2017). Key legislation, though placing a burden of responsibility upon schools regarding their students who experience social, emotional and mental health difficulties, does not greatly acknowledge the need to support school staff to do this, or stipulate what school staff would find supportive in fulfilling their widening responsibility.

The important role educational psychologists could play as part of the wider system of support for students experiencing SEMH difficulties has also not been emphasised by recent government guidance (Future in Mind (2015); Mental
Health and Behaviour in Schools (2016) yet as professionals with a wide skill set EPs are well placed to better support schools with their responsibilities towards students who have SEMH difficulties. 25% of teachers have considered leaving the profession due to ‘difficult student behaviour’ (Association of teacher and Lecturers, 2015), so understanding what supports teachers at different levels could enable EPs to be more effective in their roles regarding SEMH difficulties.

Aims
This research aims to provide a contribution to the discussion around the role schools might play in child and adolescent social, emotional and mental health and wellbeing by attempting to better understand what school staff themselves feel supports them at different levels from individual to whole school elements, given that this is a neglected in government guidance and legislation. It also aims to seek the experiences of EPs, and to compare what school staff say supports them with what EPs say, in a bid to create a framework for EP practice which will allow EPs to have greater effectiveness in taking up their role in relation to SEMH and wellbeing.

Research Questions
What are mainstream secondary school staff’s, and EP’s, views on the structures, processes and characteristics that support them in the effective promotion of, and response to, social, emotional and mental health issues in students?

What enables staff in different roles within mainstream secondary schools to feel supported in their role working with young people whose SEMH difficulties are
Where can EPs be most effective when supporting school staff to feel empowered to effectively fulfil their role towards students with SEMH difficulties?

Proposed Methodology

Design
This research will use qualitative methodology to enable a rich picture of experiences to be gathered. It is cross sectional and descriptive in nature, seeking to understand natural, unchanged, existing conditions with no intervention.

Participants and Sampling
Mainstream secondary schools within the outer London borough in question who have a link with the borough’s educational psychology service will be considered as potential participants for the research. A purposive sample of two schools will be selected, which contrast in level of student need, diversity of intake and affluence of surrounding area. The principal educational psychologist will inform the selection of suitable schools.

All qualified EPs within the borough’s educational psychology service (EPS) will be invited to take part in the research. The sample will be a volunteer sample.
Data gathering and analysis

Data from EPs and school staff will be gathered via focus groups. The data will be transcribed then analysed using thematic analysis. Each focus group will consist of 3-6 participants and last 45 minutes.

School staff

To enable the views of a range of school staff to be gathered, the following groups of school staff will participate in a 45 minute homogenous focus group:

- Classroom teachers (qualified or NQT)
- Teaching assistants/other pastoral staff (such as learning mentors)
- School leaders (SENCo, heads of year, inclusion manager, deputy head, head)

EPs

One group of qualified EPs will take part in a focus group for 45 minutes.

Section 3 Participants

Please answer the following questions giving full details where necessary. Text boxes will expand for your responses.

a. Will your research involve human participants? Yes ☒  No ☐  go to Section 4
b. Who are the participants (i.e. what sorts of people will be involved)? Tick all that apply.

☐ Early years/pre-school
☐ Ages 5-11
☐ Unknown – specify below
☒ Adults please specify below
NB: Ensure that you check the **guidelines** (Section 1) carefully as research with some participants will require ethical approval from a different ethics committee such as the National Research Ethics Service (NRES). Educational psychologists will also be involved.

c. If participants are under the responsibility of others (such as parents, teachers or medical staff) how do you intend to obtain permission to approach the participants to take part in the study?

(Please attach approach letters or details of permission procedures – see Section 9 Attachments.)

The school staff needed are under the responsibility of the head teacher of each school.

Consideration of how to approach head teachers to obtain permission, and to enthuse them to take part (as staff may need release to take part) will need consideration, and I have consulted the principle educational psychologist on this. I am a student researcher at UCL, however I will approach schools in partnership with the educational psychology service within which I work, and use the EPS headed paper. This will maximise the legitimacy of my request and hopefully encourage participation.

To incentivise head teachers, I will offer two hours of trainee EP time to each school. This will be heavily caveated to avoid a large scale request. I will offer two hours of trainee EP time to complete training on ‘managing difficult behaviour’ to a small group of teachers or teaching assistants and pastoral staff. This will be a discrete piece of work, which will not interfere with the work of the link educational psychologist for the school. Dependent on advice from the principle educational psychologist, I may need to declare my research and the ‘free EP time’ participating schools will receive, in the
interests of being transparent and this could be done through the borough wide SEN newsletter or EPS mail outs.

The schools which will be approached all have strong links with the borough educational psychology service, and a good relationship with their link EP and the principle educational psychologist.

Seeking permission from the head of each school will be different, due to the school’s circumstances and the relationship I have with the school.

In school 1, St M’s, I have an existing relationship with the school as their trainee EP and so the SENCo will be approached initially. If the SENCo expresses interest, the Head teacher will be approached by telephone.

SENCo and head teacher will be emailed the information letter on EPS headed paper.

In school 2, RDC, the link EP has a strong relationship with the SENCo and so the SENCo will be approached initially by the link EP. If he is interested, I will contact him, and then the head teacher, by telephone and also email them the information letters on EPS headed paper.

In both cases, the head teacher will be essential in sanctioning the release of TAs (though it is likely the SENCo will coordinate this), teachers and leadership staff. This is why an incentive will be offered.

d. How will participants be recruited (identified and approached)?

EP participants

The whole EP team will be invited to participate by email, sent by myself, specifying a date and time and giving information about the study. Those who want to take part will be provided with a consent form.

School staff participants
Within each school, I will be reliant upon the head teacher and SENCo to support in recruiting willing staff members. Participation will also be affected by availability. Within each school, heads and SENCos will be asked the best way to invite teachers and other staff to take part, and the best time a focus group could take place (taking into account considerations such as teaching assistants are likely to leave at the end of the school day whereas teachers usually stay later). I will be guided by the head teacher in this respect.

e. Describe the process you will use to inform participants about what you are doing.

EP participants

When contacting potential participants, information about the study will be provided. When an EP agrees to take part, the consent form will reiterate the aims of the study, and give information.

School staff

How participants are informed of the study depends on how each Head says it is best to recruit school staff. It may be that they offer to send round the information letter to staff via their internal email system, it may be that I am invited to a staff meeting to give information to staff and invite participation. I will be guided by the Head.

School staff who want to participate will be given the information about the study in conjunction to a consent form at the focus group meeting.
f. How will you obtain the consent of participants? Will this be written? How will it be made clear to participants that they may withdraw consent to participate at any time?

See the guidelines for information on opt-in and opt-out procedures.

Please note that the method of consent should be appropriate to the research and fully explained.

EP participants
Written consent forms will be given to EP participants at the focus group, and time allowed for them to read it. The consent form will make clear that agreeing to take part means they understand they may withdraw themselves and their data at any time, and that they will remain anonymous within the research. Consent will be opt–in.

School Staff participants
Written consent forms will be given to school staff participants at the focus group, and time allowed for them to read it. The consent form will make clear that agreeing to take part means they understand they may withdraw themselves and their data at any time, and that they will remain anonymous within the research. Consent will be opt–in.

g. Studies involving questionnaires: Will participants be given the option of omitting questions they do not wish to answer?

Yes ☐ No ☐

If NO please explain why below and ensure that you cover any ethical issues arising from this in section 8.

h. Studies involving observation: Confirm whether participants will be asked for their informed consent to be observed.
If **NO** read the guidelines (Ethical Issues section) and explain why below and ensure that you cover any ethical issues arising from this in section 8.

i. Might participants experience anxiety, discomfort or embarrassment as a result of your study?

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If **yes** what steps will you take to explain and minimise this?

**School staff participants**

Asking school staff about managing certain students might exacerbate feelings of being de-skilled, powerless or incompetent. Thinking about students with SEMH difficulties might evoke feelings of sadness or worry due to some difficult backgrounds children can come from.

Steps to minimise this: At the end of the focus group, the contact details of the Education Support Partnership, a charity which can provide free confidential emotional support, coaching and signposting especially for teachers, will be provided.

**EP participants**

I don’t anticipate anxiety, discomfort or embarrassment from EP participants, as I am seeking their professional views, and not seeking experiences from their personal lives. It is recognised however that EPs deal with very emotional situations, and EPs will be reminded that if they need, their supervision sessions are a place to discuss difficult situations.

If **not**, explain how you can be sure that no discomfort or embarrassment will arise?
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<td><strong>j.</strong></td>
<td>Will your project involve deliberately misleading participants (deception) in any way?</td>
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<td>Yes ☐ No ☒</td>
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If **YES** please provide further details below and ensure that you cover any ethical issues arising from this in section 8.

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<td><strong>k.</strong></td>
<td>Will you debrief participants at the end of their participation (i.e. give them a brief explanation of the study)?</td>
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<td>Yes ☒ No ☐</td>
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If **NO** please explain why below and ensure that you cover any ethical issues arising from this in section 8.

Participants will be fully aware of the aims of the study before they give consent to take part.

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<td><strong>l.</strong></td>
<td>Will participants be given information about the findings of your study? (This could be a brief summary of your findings in general; it is not the same as an individual debriefing.)</td>
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<td>Yes ☒ No ☐</td>
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</tbody>
</table>

Schools will have the option of hearing the results of the study either through a letter or in person in a staff/team meeting setting. They may also read the finished written up research, or a written research briefing.

The EP team will have the option of including a session within a team meeting on the findings of this study. Participants will also be given the option of receiving a research briefing.

If **no**, why not?
Section 4  Security-sensitive material

Only complete if applicable

Security sensitive research includes: commissioned by the military; commissioned under an EU security call; involves the acquisition of security clearances; concerns terrorist or extreme groups.

a. Will your project consider or encounter security-sensitive material? Yes ☐ No ☒

b. Will you be visiting websites associated with extreme or terrorist organisations? Yes ☐ No ☒

c. Will you be storing or transmitting any materials that could be interpreted as promoting or endorsing terrorist acts? Yes ☐ No ☒

* Give further details in Section 8 Ethical Issues

Section 5  Systematic review of research

Only complete if applicable

Will you be collecting any new data from participants? Yes ☒ No ☐

Will you be analysing any secondary data? Yes ☐ No ☒

* Give further details in Section 8 Ethical Issues

If your methods do not involve engagement with participants (e.g. systematic review, literature review) and if you have answered No to both questions, please go to Section 10 Attachments.

Section 6  Secondary data analysis  Complete for all secondary analysis

a. Name of dataset/s

b. Owner of dataset/s

Are the data in the public domain? Yes ☐ No ☒
Section 7 Data Storage and Security

Please ensure that you include all hard and electronic data when completing this section.

a. Confirm that all personal data will be stored and processed in compliance with the Data Protection Act 1998 (DPA 1998). (See the Guidelines and the Institute’s Data Protection & Records Management Policy for more detail.) Yes ☒ No □

b. Will personal data be processed or be sent outside the European Economic Area? Yes ☐ * No ☒

* If yes, please confirm that there are adequate levels of protections in compliance with the DPA 1998 and state what these arrangements are below.

Who will have access to the data and personal information, including advisory/consultation groups a during transcription? Hannah Harvest, Amelia Roberts, Frances Lee.

During the research

d. Where will the data be stored? Encrypted folder on personal laptop. Yes ☒ * No □

Will mobile devices such as USB storage and laptops be used? Yes ☒ * No □

* If yes, state what mobile devices: Personal laptop for storing and analysing data. Mobile phone/Dictaphone for recording focus groups.

e. * If yes, will they be encrypted?: Yes
After the research

f. Where will the data be stored?  Encrypted folder on personal laptop

g. How long will the data and records be kept for and in what format?

Data will be kept until August 2019, to allow for the end of the doctorate course, any amendments possible uses of the data. Numerical data will be stored within SPSS. Data from focus groups will be stored as audio files. Transcripts of focus groups will be kept as Word files. Qualitative analysis will be kept within the programme used to analyse it such as NVivo.

h. Will data be archived for use by other researchers? *Yes *No

*If yes, please provide details.

Section 8 Ethical issues

Are there particular features of the proposed work which may raise ethical concerns or add to the complexity of ethical decision making? If so, please outline how you will deal with these.

It is important that you demonstrate your awareness of potential risks or harm that may arise as a result of your research. You should then demonstrate that you have considered ways to minimise the likelihood and impact of each potential harm that you have identified. Please be as specific as possible in describing the ethical issues you will have to address. Please consider / address ALL issues that may apply.

Ethical concerns may include, but not be limited to, the following areas:

- Methods
- Sampling
- Recruitment
- Gatekeepers
- Informed consent
- Potentially vulnerable participants
- Safeguarding/child protection
- Sensitive topics
- International research
- Risks to participants and/or researchers
- Confidentiality/Anonymity
- Disclosures/limits to confidentiality
- Data storage and security both during and after the research (including transfer, sharing, encryption, protection)
- Reporting
- Dissemination and use of findings
Sensitive topic – During a focus group, participants may feel reticent about discussing difficult situations. They may not wish to reveal weakness in front of their colleagues. As the facilitator of the group I will seek to invite all participants to speak and to create an atmosphere of safety. Groups are homogenous to avoid significant power imbalances.

Confidentiality – School staff will know who else took part in the focus group, but will be encouraged not to share what has been discussed in the group with other staff members as part of the focus group schedule. Staff identities will remain anonymous in the research. EPs will know who else took part in the focus group. Their identities will be anonymised within the research.

Potentially vulnerable participants – Some school staff may be experiencing high levels of stress due to their work, or there may be issues in their personal life which may affect them emotionally when discussing challenges within their role. This may also be the case for EP participants. School staff will be reminded that they can contact the Education Support Partnership who offer confidential free counselling to education professionals.

Data storage – Data from the study will be kept on a personal laptop in an encrypted password protected file.

Gatekeepers – there may be a situation whereby head teachers enforce participation upon some staff. If this were to happen, I may need to approach a
different school.

**Section 9  Further information**

Outline any other information you feel relevant to this submission, using a separate sheet or attachments if necessary.

Focus group schedules for 3 groups of staff.

Information letter to heads/SENCos.

**Section 10  Attachments** Please attach the following items to this form, or explain if not attached

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information sheets and other materials to be used to inform potential participants about the research, including approach letters</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Consent form</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>If applicable:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The proposal for the project</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Approval letter from external Research Ethics Committee</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
• Full risk assessment

Section 11 Declaration

Yes    No

I have read, understood and will abide by the following set of guidelines.

☑    ☐

BPS ☑    BERA ☐    BSA ☐    Other (please state) ☐

I have discussed the ethical issues relating to my research with my supervisor.

☑    ☐

I have attended the appropriate ethics training provided by my course.

☑    ☐

I confirm that to the best of my knowledge:

The above information is correct and that this is a full description of the ethics issues that may arise in the course of this project.

Name    Hannah Harvest
Date    10/3/2017

Please submit your completed ethics forms to your supervisor.
Professional code of ethics

You should read and understand relevant ethics guidelines, for example:


or

British Educational Research Association (2011) *Ethical Guidelines*

or

British Sociological Association (2002) *Statement of Ethical Practice*

Disclosure and Barring Service checks

If you are planning to carry out research in regulated Education environments such as Schools, or if your research will bring you into contact with children and young people (under the age of 18), you will need to have a Disclosure and Barring Service (DBS) CHECK, before you start. The DBS was previously known as the Criminal Records Bureau (CRB). If you do not already hold a current DBS check, and have not registered with the DBS update service, you will need to obtain one through UCL.

Ensure that you apply for the DBS check in plenty of time as will take around 4 weeks, though can take longer depending on the circumstances.

Further references

The [www.ethicsguidebook.ac.uk](http://www.ethicsguidebook.ac.uk) website is very useful for assisting you to think through the ethical issues arising from your project.

Robson, Colin (2011). *Real world research: a resource for social scientists and*

This text has a helpful section on ethical considerations.


This text has useful suggestions if you are conducting research with children and young people.


A useful and short text covering areas including informed consent, approaches to research ethics including examples of ethical dilemmas.
If a project raises particularly challenging ethics issues, or a more detailed review would be appropriate, you may refer the application to the Research Ethics and Governance Administrator (via IOE.researchethics@ucl.ac.uk) so that it can be submitted to the Research Ethics Committee for consideration. A Research Ethics Committee Chair, ethics representatives in your department and the research ethics coordinator can advise you, either to support your review process, or help decide whether an application should be referred to the Research Ethics Committee.

### Reviewer 1

**Supervisor name**

**Supervisor comments**

**Supervisor signature**

### Reviewer 2

**Advisory committee/course team member name**

Frances Lee

**Advisory committee/course team member comments**

**Advisory committee/course team member signature**

### Decision

**Date decision was made**

23/05/17
<table>
<thead>
<tr>
<th>Decision</th>
<th>Approved</th>
<th>Referred back to applicant and supervisor</th>
<th>Referred to REC for review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recording</td>
<td>Recorded in the student information system</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Once completed and approved, please send this form and associated documents to the relevant programme administrator to record on the student information system and to securely store.

Further guidance on ethical issues can be found on the IOE website at [http://www.ucl.ac.uk/srs/research-ethics-committee/ioe](http://www.ucl.ac.uk/srs/research-ethics-committee/ioe) and [www.ethicsguidebook.ac.uk](http://www.ethicsguidebook.ac.uk)
## Appendix 9 Example of coding

<table>
<thead>
<tr>
<th>Dr.</th>
<th>&quot;We personally I think the biggest strength we've got is that we're close and that's...&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearth, Heath</td>
<td>Having a good network</td>
</tr>
<tr>
<td>Hearth, Heath</td>
<td>Having good relationships</td>
</tr>
<tr>
<td>Hearth, Joseph</td>
<td>Personal connection</td>
</tr>
<tr>
<td>Hearth, Joseph</td>
<td>Setting off steam</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Sharing the burden</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Mental health (EMH support)</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Sharing the burden</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Everyone's responsibility</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Having a good network</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Having good relationships</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Getting off my own backroom</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Sharing the burden</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Having a good team</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Open-door policy</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Colleagues as professional resources</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Valued by others</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Mental support</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Clear community</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Resilience</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>School is extraordinary?</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Faith is important</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Faith is important</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Debrief return to faith school</td>
</tr>
<tr>
<td>Heath, Joseph</td>
<td>Faith is important</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LC.</th>
<th>&quot;I must say... my first coming as a teacher was in a Catholic school, I'm Catholic...&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Myself</td>
<td>In Catholic and I remember leaving... Catholic school going to a normal mainstream free school and the actual emotional and spiritual guidance was not there and I think it's something really missing coming back into that Catholic school...&quot;</td>
</tr>
</tbody>
</table>
### Appendix 10 Themes and sub themes

#### Theme 1 Attuned vs Unattuned Communities

<table>
<thead>
<tr>
<th>Overarching theme</th>
<th>Theme</th>
<th>Description and quotations illustrative of theme</th>
<th>Subtheme</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attuned vs Unattuned communities</td>
<td>Building social capital</td>
<td>To activate the maximum amount of resource, individuals, teams, parents and agencies must know and value one another’s contributions to SEMH, act as partner collaborators and have shared goals. “there seems to be less of an emphasis put on parents who deal with certain things and a lot is put on teachers to deal with it. I’ve often spoken to parents who are like, ‘Oh, can you please deal with this situation?’” “a lot of the difficulties are working tying up the agencies so it’s trying to get appointments through CAMHS, um she is at serious risk of sexual exploitation so it’s also linking into the NSPCC...trying to get social workers on board”</td>
<td>SEMH as a community responsibility</td>
<td>A feeling that all staff need to share the responsibility of SEMH needs in terms of identification, prevention and management. Inter-reliance reduced impact of SEMH on staff wellbeing</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Complexities of working with external agencies</td>
<td>The extent to which schools and staff are open to outside influences including local authority systems, external professionals and external agencies. Who is outside the school community and why?</td>
</tr>
<tr>
<td>Attuned vs Untuned communities</td>
<td>Containing and being contained</td>
<td>Activating parental and community resource</td>
<td>Parents, school and local community are recognised as interconnected and as such each plays a key role in SEMH issues of CYP</td>
<td></td>
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<tr>
<td>&quot;being here where the caring takes place in this environment and stuff like that and can feel that everyone shares, a burden of and thinking not only just through just asking how you are but also through a spiritual perspective&quot;</td>
<td>Having a good network</td>
<td>Relationships between individuals and teams which are based on sharing information and ideas, mutual support and shared goals were considered very important in increasing one’s capacity to support those with SEMH issues as well as building system capacity</td>
<td></td>
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<tr>
<td>&quot;sometimes in our role we don’t meet enough and I think that’s, has quite an impact because we work quite differently within our colleges&quot;</td>
<td>Informal counselling</td>
<td>Some staff provided a space for CYP to offload which seemed similar to counselling. Some staff in senior roles also provided this to less senior staff members.</td>
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</tr>
</tbody>
</table>

School staff contain the heightened emotions of those with SEMH, and they therefore act as emotional containers. In turn, the staff find emotionally supportive, attuned relationships with other staff.
supportive to their own capacity to contain others. It is about validation and recognition of the emotional aspects of work, but it can’t happen without supportive attuned relationships between individuals.

"I think we have to seek it out ourselves like you were saying, that you might have a family member, you might have a really good line manager”

"I’ve found myself that at times especially those that have a faith it’s, they find it really comforting just knowing that someone will say they’ll pray for them or they’ll be thinking about them”

“once you show that level of support and care sort of dedication to wanting to help support them they [parents] fill you with everything they can”

"we got a lot of people around us that are prepared to support us, professionally and and sort of like uh morally as well so so yes it’s um it’s quite powerful really”

Staff-staff personal relationships

<table>
<thead>
<tr>
<th>Staff-staff personal relationships</th>
<th>Having relationships with colleagues which went beyond sharing the same role or being in the same school enabled staff to better manage their own responses to SEMH</th>
</tr>
</thead>
</table>

SEMH of staff

<table>
<thead>
<tr>
<th>SEMH of staff</th>
<th>Staff want their own wellbeing supported by school management, as well as using their own informal networks such as family and friends to build resilience. Without their own wellbeing, staff are less able to support others</th>
</tr>
</thead>
</table>

Trust in relationships

<table>
<thead>
<tr>
<th>Trust in relationships</th>
<th>Having relationships in school which are based on trust enable freer emotional expression, the de-escalation of anxiety and more opportunities for authenticity within relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attuned vs Untatuned communities</td>
<td>Emotional safety</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------------</td>
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<tr>
<td></td>
<td>School staff and CYP find that being kept in mind, being given unconditional positive regard and being accepted enable staff to be less risk averse in their support of SEMH. “that’s really important that no matter no matter what you do or what way you get on that people are gonna care about you regardless, and that in itself is really good for our kids”. “I think it just allows people to open up more and feel more at ease with you because they know that you’ve got their back” “staff will let us know even if they’ve just got a feeling that something’s a bit off, they will report it to us cause we’re</td>
</tr>
<tr>
<td></td>
<td>Staff-staff professional relationships Accountability</td>
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</tbody>
</table>
very very open that way, and the likes of myself as a middle leader and even Mr. M as a safeguard lead in school, we’re more than happy to get a hundred emails a day about small things that are nothing”

<table>
<thead>
<tr>
<th>Overarching theme</th>
<th>Theme</th>
<th>Description and quotations illustrative of theme</th>
<th>Subtheme</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge and Skills</td>
<td>Efficacy and SEMHI</td>
<td>Staff’s self-efficacy was affected by their force and resource characteristics such as motivation, prior experience and training. They spoke of ways they can enhance their self-</td>
<td>Learning from others</td>
<td>Staff wanted to learn from colleagues informally and formally, not ‘reinvent the wheel. They needed the right amount of time to reflect together</td>
</tr>
</tbody>
</table>
efficacy through reflection, training and peer learning. Staff’s self-efficacy was linked to the inclusiveness of their school, and this in turn affected staff’s conceptualisation of internalising and externalising SEMH.

“some of the things she disclosed to me was… was awful and, I didn’t really have that much training in how to deal with something like that”

“They [school management] don’t prioritise it [equipping teachers to manage SEMH] which I think’s a shame because it’s such a vital component of school because we’re not just teachers of the subject we’re teachers of, of young people who need support in all ways”

“We’ve got students with um you know combinations of a ASD ADHD that have all these difficulties they flag up all the time as naughty they got really challenging”

<table>
<thead>
<tr>
<th>Role of experience</th>
<th>Role of training</th>
</tr>
</thead>
<tbody>
<tr>
<td>For some internalising issues such as suicide attempts, experience in a staff member’s personal life was often a great motivator – otherwise some staff disengaged through lack of knowledge and skill from this kind of issue.</td>
<td></td>
</tr>
<tr>
<td>All staff wanted more training on aspects of mental health such as self harm, depression, anxiety and making judgements about severity and onward referral</td>
<td></td>
</tr>
<tr>
<td>Knowledge and Skills</td>
<td>Inclusive vs Not Inclusive Ethos</td>
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</tr>
<tr>
<td></td>
<td>Knowledge causes of SEMH</td>
</tr>
<tr>
<td></td>
<td>Cultural awareness</td>
</tr>
<tr>
<td></td>
<td>Raising awareness in others</td>
</tr>
</tbody>
</table>
Some parts of being a teenager today are not understood by those responsible for supporting CYP and this can pose difficulties when staff try to understand CYP’s problems.

<table>
<thead>
<tr>
<th>Overarching theme</th>
<th>Theme</th>
<th>Description and quotations illustrative of theme</th>
<th>Subtheme</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological vs Sociological Role</td>
<td>Role Conflicts</td>
<td>When a whole school's primary task, processes and systems align with individual staff members' psychological view of role,</td>
<td>Perception of psychological role</td>
<td>People dynamically 'take up' a role based on what they think it should achieve and how best to get there</td>
</tr>
</tbody>
</table>
minimal role conflict is seen. Staff are more able to support SEMH in a range of ways, uninhibited by structures, processes and systems.

“they [society] have all these high expectations of you and sort of preconceptions of you being sort of perfect and knowing how to deal with everything but we’re [teachers] people as well.

“there was no time for structuring and planning [SEMH intervention] because it it just kind of encroached onto our actual main role [LSA in lesson] and there’s always a deadline it it’s are so reactionary in your role”

“Because at this moment I was like, okay, I have to be a teacher, I have to be professional and in your mind you’re thinking about all the processes you have to know, all the documents and forms you have to fill in”

“I know that sounds really horrible but it’s not in my job description”

<table>
<thead>
<tr>
<th>Perception of sociological role</th>
<th>The static job title and formal responsibilities given to a person in an organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resource and force characteristics</td>
<td>Aspects of Bronfenbrenner’s ‘person’ characteristics. Force = motivation, perseverance, temperament. Resource = emotional, experiential, social resources</td>
</tr>
<tr>
<td>Primary task of school</td>
<td>What staff believe the goal of the school as an institution is</td>
</tr>
<tr>
<td>Psychological vs Sociological Role</td>
<td>Feeling Deskilled</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Internalising mental health conditions, beyond a sharp boundary, challenge staff’s willingness, as educational professionals, to engage. They report feeling powerless and at a loss, wishing for an expert to intervene</td>
</tr>
<tr>
<td></td>
<td>“I think that some of the more kind of day to day running and logistics stop all the good work that could be happening”</td>
</tr>
<tr>
<td></td>
<td>“...but you can’t give it [CYP with an SEMH issue] more than 5 minutes and then of course you’re inadequate and you’ve failed”.</td>
</tr>
<tr>
<td></td>
<td>“And actually also I’m a human, I know it sounds awful and I don’t mean it in the awful way, but why should I have to deal with that? That’s the job of a professional trained in that field”</td>
</tr>
<tr>
<td></td>
<td>“I think that gap between knowing what... how to support</td>
</tr>
</tbody>
</table>
them really thoroughly and (hesitation) before they sort of get to see their CAMHS counsellor and really start their support outside with the counsellor as well”