

**Supporting pupils in school with social, emotional and mental health needs:
a scoping review of the literature**

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This article reports on a scoping review of the academic and related literature published between 2000 and 2015 that addressed the education provision for secondary aged pupils with social, emotional and/or mental health difficulties (SEMH) conducted over a six week period in 2015. A total of 168 documents met the inclusion criteria for the review, including 110 peer reviewed journal articles. The authors found an emerging evidence base to support more effective provision for pupils with SEMH, but there remains, particularly at the group and individual level a dearth of literature. Underpinning all the successful programmes in this review was a positive approach adopted by teachers and school leaders to pupils with SEMH. There was an overlap in practice between approaches used at universal, group and individual level but the majority of effective approaches were common to mainstream and specialist settings.

Keywords: social, emotional, mental health, adolescent, provision, review

1. Introduction

In 2016, seventeen percent of pupils with special educational needs (SEN) in England were identified with some form of social, emotional and/or mental health (SEMH) difficulty (DfE 2016). Pupils with SEMH difficulties experience disproportionate rates of exclusion from school compared to other pupils with and without SEN (Bowman-Perrott et al. 2013). One exclusion from school places a pupil at risk for further and multiple exclusions during their school life. The subsequent negative effects on academic attainment often mean that this group of young people find themselves struggling in an ever competitive global employment market for young people aged 16 to 24 years. Therefore, it imperative that practitioners and researchers advance their understanding of practice in schools to help reduce exclusion rates and ensure that this potentially vulnerable group of young people experience an enriched and rewarding education. Moreover, schools report that this is a difficult area professionally and that they want to be informed of the evidence (DfE 2016). This article reports on a scoping review of the academic and related literature that addressed the education provision for secondary aged pupils with SEMH conducted over a six week period in 2015.

1.1 SEMH: theoretical perspectives

The review was conducted within the bio-psycho-social theoretical approach to SEMH which is currently the theoretical model that is most supported by the literature (Whitcomb and Merrell 2013, Cooper and Jacobs 2011). The model proposes that our behaviour and emotional wellbeing through childhood and adult life is a consequence of continual reciprocity of interactions between our natural abilities and physical make-up and the contexts in which we live our lives. On the biological side, evidence suggests that Attention Deficit Hyperactivity Disorder (ADHD) has a heritability of between 60% and 90%, whilst Conduct Disorders (CD) are more strongly environmentally influenced (Moffitt and Scott 2008). Social contexts include, for example, family, school, work, local communities, cultures and geographical regions. A bio-psycho-social perspective therefore recognises that positive influences in these contexts such as social and educational accommodations at school can be a force for meaningful change in the life of a troubled adolescent, whilst acknowledging individual differences. Moreover, it facilitates a transdisciplinary approach to working with the individualised needs of the young person at the centre. Poulou (2014) provides a recent and coherent account of the contributions of this approach to our knowledge and understanding of SEMH (Poulou 2014).

The terminology used to describe pupils who experience SEMH difficulties has been widely debated in the literature and includes, for example, Social Emotional and Behavioural Difficulties (SEBD), Emotional and Behavioural Difficulties (EBD) and Behaviour, Emotional and Social Difficulties (SEBD). Tensions concerned with ambiguity, lack of clarity around thresholds and the interpretation of the word behaviour in educational contexts continue to exist (Norwich and Eaton 2014). This review adopted SEMH as described in the revised 2015 SEND Code of Practice 2015 (DfE 2015). It remains an umbrella term 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 ... [or]

disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.’

(Section 6.32).

As part of this umbrella term, pupils can be identified with a range of difficulties with more precise definitions and clearer thresholds for identification such as ADHD, Opposition Defiant Disorder (ODD), CD, depression and anxiety which were addressed in this review.

1.2 Prevalence of SEMH

Determining robust data for the prevalence for SEMH difficulties remains elusive. Large scale peer reviewed studies undertaken internationally from 2002-2014 reported prevalence for SEBD from 8% to 23% (Abdel-Fattah et al. 2004, Liu et al. 2001). The most recent meta-analysis of studies published between 1985 and 2012 reported a worldwide pooled prevalence of mental health disorders of 13.5% (Polanczyk et al. 2015) but individual studies ranged from 8% to 20%. Methodological issues such as the use of different measures, varied reporting participants and sampling issues specifically related to the different age range of the pupils and gender factors all contributed to differences between study findings. According to the recent World Health Organisation (WHO) report titled ‘Health for the World’s Adolescents’¹, depression is the top cause of illness and disability and suicide is the third most common cause of death for this age group (World Health Organisation 2014). The most recent meta-analysis of 41 studies from 1985-2012 for children and adolescents reported worldwide pooled prevalence of 6.5% for anxiety and 2.6% for any depressive disorder (Polanczyk et al. 2015).

2. Review methodology

There is no universal definition of a scoping review but the authors, guided by the needs of the stakeholders, used that described by Davis et al. (2009:1386) which states that a scoping review involves the synthesis and analysis of a wide range of research and non-research material to allow for conceptual precision about a specific subject or field of evidence (Davis, Drey, and Gould 2009). This review adopted the six stage methodological framework (identifying the research question, searching for relevant studies, selecting studies, charting the data, collating,

¹ World Health Organisation. 2014. "Health for the World's Adolescents." <http://apps.who.int/adolescent/second-decade/>.

summarising reporting the results and consulting with stakeholders) proposed by Arksey and O'Malley in 2005 and some of the recommendations subsequently published to develop the model by Levac et al. in 2010 (Arksey and O'Malley 2005, Levac, Colquhoun, and O'Brien 2010).

Stage 1: Identify the research question

The review was guided by a broad research question, with inclusion and exclusion criteria agreed to set the parameters of the study. The research question, inclusion and exclusion criteria, key search terms and sources of evidence were agreed by the research team and the wider stakeholder group. The research question was:

What does current evidence say about common and effective practice models in the education of children with social, emotional and mental health difficulties?

The inclusion criteria agreed were: peer reviewed papers (international); literature that included empirical data which could contribute to evidence practice; 11-18 years (literature that included primary and secondary age in the sample) and literature published between 2000 and 2015 including research summaries from the What Works Clearing House and Education Endowment Foundation House where studies outside of these dates will have been included in overall findings. The exclusion criteria agreed were: literature which focused only on primary school age up to 10 years; literature not assessing the effectiveness of practice; literature not having a direct relationship to education; use of medication for management of attention and activity problems (such as ADHD) and mood disorders; the importance of nutrition in SEMH; the use of restraint procedures with pupils; exclusion from school as a disciplinary sanction and empirical studies that did not specify the methodology adopted.

Stage 2: Identifying relevant studies

The second stage was concerned with managing the feasibility aspects of the whole project (resources in terms of time and people) with ensuring that the scoping process achieved breadth and comprehensiveness in terms of the evidence identified. A search strategy was agreed within the wider team which included sources of information and 27 key search terms (Table 1). The main search terms included a breakdown of the different types of SEMH and different behaviours that reflect international usage. All terms were combined with variations of the terms, education, intervention and school. This combination of search terms helped to ensure

a focus on education provision as outlined in the inclusion criteria. The main database chosen for the review was Scopus as it includes an extensive range of data in the social sciences, as well as in other areas such as medicine which could have had some relevance in relation to the main research question. The Scopus database, initially yielded just over 15,000 studies from the research terms. The titles, and if relevant, abstracts were read, and once duplicates had been removed the final number of relevant studies was 1210. The breadth and number of search terms ensured comprehensiveness in the number of studies and the wide ranging subjects covered.

Table 1 here

Stages 3 and 4: Study selection and charting the data and consultation

The abstracts of the 1210 studies were read and once again a balance between feasibility and comprehensiveness needed to be achieved for the final selection of studies for in-depth reading. The final selection of 110 studies from Scopus was initially based on whether or not the inclusion criteria were met, with specific reference to the need for studies that reported practice in education and across the primary and secondary age range. After this, where available for a subject, there was an emphasis on the inclusion of the most recent meta-analyses and reviews, in order to provide the widest ranging findings. Single studies were included if particularly relevant to the context and research question of the review and/or if no reviews were currently available. Additional searches were carried out on relevant websites including the What Works Clearing House, Google Scholar, Google and the EPPI (Evidence for Policy and Practice Information) centre at University College London, Institute of Education. A ‘narrative review’ process was then used to extract relevant data from each study in respect to the wider research question.

Stages 5 and 6: Collecting, summarising and reporting results

Table 2 presents a summary of the type of documents included in the review and Table 3 the websites searched.

Table 2 here

Table 3 here

One purpose of the scoping review was to provide school practitioners with findings that had immediacy for the education of pupils with SEMH. Hence the emphasis in the review research question on common and effective practice models in education. This led to inclusion criteria of, for example, studies that took place in schools and exclusion criteria of, for example nutrition and medication studies that are not within the immediate remit of school practitioners. At the start of the review, a possible thematic construction of the data was also discussed based on the categories (academic literacy and learning, behaviour for learning, social and emotional literacy and wellbeing) used by The National Behaviour Support Service in Ireland (NBSS)² and the concepts of universal and tiered provision. These themes were viewed as accessible and had immediate purchase for practitioners and remained relevant once the thematic analysis was conducted and were used to present the findings of the review.

3. Findings

Although the findings are presented at universal and Tiers 2 and 3 there was overlap in practice between approaches and specific interventions found within a tier. However, this section ends with a summary of provision that was deemed typical for each specific tier. Studies and commentary from the literature review also pointed out that the majority of effective approaches were common to mainstream and specialist settings (Maggin et al. 2011).

3.1 Universal provision for pupils with SEMH (Tier 1)

Cooper and Jacobs (2011) in their international review drew on four studies that emphasised the importance of professionals adopting a non-coercive and humanistic approach to their teaching. Later research continued to support such an approach with particular benefits for pupils with SEBD (Hughes 2012, Burton and Goodman 2011). In a study of 414 children with EBD in special education, findings showed that at the pupil level, better social and emotional adjustment of children was predicted by higher levels of teacher-child closeness and better behavioural adjustment was predicted by both positive teacher-child and peer interactions (Breeman et al. 2015). Similarly, the findings from a qualitative case study of 69 children who had participated in a Support Group intervention emphasised the importance of high quality

² The National Behaviour Support Service <http://www.nbss.ie/model-of-support>.

trusting and respectful relationships between staff and pupils as fundamental to the success of the group. The stronger the relationship between staff and pupils, the more statistically significant was the decline in school sanctions (Mowat 2010).

3.1.1: Academic literacy and learning

Universal Design for Learning (UDL)³ is a set of principles for teaching and learning that give all pupils in a class an equal opportunity to learn and provides a comprehensive framework within which to address such issues as differentiated instruction for pupils with SEMH (Borders, Bock, and Michalak 2012). A 2011 meta-analysis of research on instructional interventions for primary and secondary pupils with EBD categorised 16 ‘types’ of academic approaches based on 34 papers (Vannest et al. 2011). Most approaches had some impact on improving outcomes from baseline but at secondary school, three of the most effective were corrective feedback, previewing and prompting. However, a more recent systematic review of educational accommodations reported more mixed findings (Harrison, Bunford et al. 2013). Eighteen articles met robust inclusion criteria that evaluated 12 types of accommodations such as choice making, fast paced instruction and shortened task length (Harrison et al. 2013). Due to methodological issues such as small sample size and few studies it was not possible to conclude with any certainty that the various accommodations could mediate the impact of a behaviour difficulty or that the accommodations might be judged as evidence based approaches. The authors of the review noted that many of the approaches evaluated were ones that might help all pupils as part of UDL and that it was not possible to say with confidence that they specifically helped this group.

Achievement for All (AfA)⁴ in England, is an evidence based, two-year whole school improvement programme that supports schools to improve outcomes for vulnerable and disadvantaged pupils, including those from low income families, those identified with SEN and looked-after children. It began in 2010 and is currently used in over 2000 schools. The programme is built around the four elements of leadership, teaching and learning, wider outcomes and opportunities and parent/carer engagement. An independent evaluation of the pilot programme carried out on behalf of the Department for Education (DfE) reported that it

³ National Center on the Universal Design for Learning: <http://www.udlcenter.org/aboutudl/whatisudl>

⁴ Achievement for All: <http://www.afa3as.org.uk/achievement-for-all/achievement-for-all-3as>

had significant impact upon progress in English and maths among pupils with SEN, with pupils in the study making significantly greater progress during the course of the pilot compared to pupils with SEN nationally over an equivalent period of time (Humphreys and Squires 2011). The effect sizes associated with these differences ranged from small to very large.

3.1.2: Behaviour for learning

Three programmes to improve behaviour that had sufficient supporting evidence to be included in the What Works Clearing House (WWCH) were Connect with Kids, (percentile increase of 16), Facing History and Ourselves (percentile increase of 8) and Lions Quest: Skills for Adolescence (percentile increase of 2). They all aim to address ‘core character values’ using interactive rather than didactic pedagogies. Although not in the WWCH, there was a substantial body of evidence internationally demonstrating the effectiveness of School Wide Positive Behaviour Support (SWPBS) programmes (Cooper 2011). It is a comprehensive universal behaviour programme and two recent reviews reported promising results across a range of variables (Lewis et al. 2010, Soloman et al. 2012). It starts from the position that behaviours are ‘functional’, they serve a purpose for the child involved. It provides a framework that helps schools to identify the behaviours, plan and implement practices across the whole school and aims to improve educational and behaviour outcomes for all students, with targeted approaches for students with higher levels of need. Individual studies have reported favourable outcomes on bullying, social-emotional functioning, concentration and teacher self-efficacy (Waasdorp, Bradshaw, and Leaf 2012, Bradshaw, Waasdorp, and Leaf 2012, Kelm, McIntosh, and Cooley 2014). One study also examined how SWPBS can be adapted to meet the needs of culturally diverse school populations (Fallon, O’Keeffe, and Sugai 2012). Emerging research is also beginning to report the efficacy of SWPBS in alternative settings (Farkas et al. 2012). Finally, a recent Special Issue of the Journal Remedial and Special Education on seminal achievements in the field of SEBD from senior scholars considered SWPBS, along with universal screening for behaviours disorders in schools and the recognition of the contribution of teacher judgement in assessing pupil behaviour as one of the top three achievements in the field (Walker 2015).

Similarly, to SWPBS, restorative practices (RP), including such programmes in the United Kingdom (UK) as Restorative Justice for Schools ⁵ advocates the importance of creating a whole school ethos of a community of shared values. Restorative justice is a process that seeks to resolve conflicts that may arise and aims to reduce behaviours such as aggression and bullying. Cooper and Jacob in their 2011 review reported a lack of randomised or clinical trials using this approach but that evaluations undertaken in Scotland and the UK had demonstrated clear benefits for staff and pupils. A recent United States (US) study that used hierarchical linear modelling and regression analyses of 412 pupils in 29 high school classrooms showed that teachers who used greater RP had more positive relationships with their diverse students. Students perceived teachers as more respectful and these staff issued fewer exclusionary discipline referrals compared to teachers who did not use RP (Gregory et al. 2015).

The Good Behavior Game ⁶ was first introduced to schools in 1969 and one of the first reviews of the strategy, published between 1960 and 2002 reported of its considerable success in classrooms and other settings (Tingstrom, Sterling-Turner, and Wilczynski 2006). The most recent meta-analyses of 22 studies found moderate to large effect sizes on challenging behaviours and that it was predominantly used for disruptive behaviour, off-task behaviour, aggression, shouting out and out-of-seat behaviours (Flower et al. 2014). An important consideration for this review is that the majority of studies have taken place in a primary setting but that research is emerging to demonstrate efficacy in high schools settings and in different regions and cultural contexts (Kleinman and Saigh 2011, Nolan et al. 2014).

Finally, the AFA pilot was also successful in improving wider outcomes such as behaviour, attendance and positive relationships (Humphreys and Squires 2011). The findings from the teacher survey data revealed that AFA led to significant improvements in positive relationships, and reductions in bullying and behaviour problems among pupils when compared to those in non-AfA schools. There was also an average increase of 10% in attendance rates for pupils classified as persistent absentees (e.g. those with less than 80% attendance in the prior year).

⁵ Restorative Justice 4 Schools: http://www.restorativejustice4schools.co.uk/wp/?page_id=45

⁶ Good Behavior Game: <http://www.interventioncentral.org/behavioral-interventions/schoolwide-classroommgmt/good-behavior-game>

3.1.3: Social and emotional literacy

WWCH contained no programmes at secondary level for SEL and this was a feature across the literature that was reviewed. According to the Education Endowment Foundation (EEF) on average, SEL interventions can lead to around four months additional progress, have particular benefits for disadvantaged and low attaining pupils and if implemented with fidelity, have been found to be effective at secondary level. SEL interventions almost always improve emotional or attitudinal outcomes, but not all were found to be equally effective at raising attainment. Programmes were more likely to be successful if improvements were more embedded into routine educational practices and supported by professional development and training for staff.

Many of the findings of the EEF toolkit were evident in the evaluation of the national Social Emotional and Literacy (SEAL) programme that was implemented in almost 70% of English secondary schools starting in 2007 (Lendrum, Humphrey, and Wigelsworth 2013, Humphrey, Lendrum, and Wigelsworth 2010). The findings showed very limited impact in terms of pupil outcomes and the evaluation of the implementation of SEAL revealed a very mixed picture, although this made very little difference to outcomes. The report however, does provide pertinent guidance to schools as to how to effectively implement a SEL programme. They made reference, for example, to ensuring that all programmes adhere to SAFE (Sequenced, Active, Focused, Explicit) principles. This was also an important finding in a recent meta-analysis of 213 school-based, universal social and emotional learning programmes involving 270,034 kindergarten through to high school students (Durlak et al. 2011). They found that compared to control groups, SEL participants demonstrated significantly improved social and emotional skills, attitudes, behaviour, and academic performance that reflected an 11-percentile-point gain in achievement. However, it should be noted that just over 10 % of the studies were delivered to high school pupils and 31% to middle school pupils.

One specific programme called ‘Why Try?’⁷ with SEL aspects was found to have an emerging evidence base internationally and in 2011 was implemented in 42 post primary settings in Ireland by the NBSS. It is a strength-based programme aimed at helping young people overcome their challenges and improve outcomes in the areas of truancy, behaviour and academics. It is based

⁷ ‘Why Try?’ programme: <http://www.whytry.org/index.php/component/content/article/79-resource-center/108-research-by-setting>

on Solution Focused Brief Therapy (SFT), social and emotional intelligence and multi-sensory learning principles and in this sense also contributes to health and wellbeing. Finally, the Alert Programme is a structured active learning programme that uses an engine analogy to address self-management of behaviour for pupils who experience such difficulties. MacCobb and colleagues reported positive outcomes particularly for pupils with the most challenging behaviour when used with 85 12-13 old pupils in four schools in a socially deprived area of Ireland (Mac Cobb, Fitzgerald, and Lanigan-O'Keeffe 2014).

3.1.4: Supporting wellbeing in school (including cognitive behavioural approaches)

Randomised Control Trials (RCTs) have been successfully conducted on the Friends for Life Youth ⁸ programme which is endorsed by WHO as an evidenced based approach (Higgins and O'Sullivan 2015). The programme, based on cognitive-behavioural principles was originally developed as a treatment of anxiety and depression for groups and individuals but it has also been used as a whole school programme. Whole school approaches to the prevention of mental health difficulties include mental health teaching programmes. In an experimental study to assess the impact of a six week mental health teaching programme to a group of 14-15 year olds in two English secondary schools, Naylor et al. (2009) reported significant reductions in Strengths and Difficulties Questionnaire (SDQ) scores and significantly more empathy and sensitivity towards people with mental health difficulties amongst pupils in the experimental group (Naylor et al. 2009). The pupils in this group were particularly appreciative of the lessons on suicide and self-harm.

Finally, two relatively new and associated whole school initiatives in the UK called 'Attachment Aware Schools'⁹ and Emotion Coaching are being developed by professionals from Bath Spa University Bath, North East Somerset Council, the National College for Teaching and Leadership, attachment specialists and schools. The approach includes whole school training and a whole school audit and is grounded in the evidence on attachment theory.

⁸ Friends for Life Youth: <http://www.friendsforlife.org.nz/evidence-based/>

⁹ Attachment Aware Schools: <http://attachmentawareschools.com/>

Emotion coaching ¹⁰, originally developed in the US, has a much stronger evidence base with case study materials at secondary level are available to help exemplify the approach ¹¹.

3.2: Provision at tiers 2 and 3 for pupils with SEMH

Interventions and approaches at Tier 2 were typically small group interventions but could also be one-to-one based support either in or outside of the classroom. Tier 3 interventions were often intensive one-to-one approaches and in the case of pupils with SEMH also involved contact with professionals from different agencies. Tier 3 was also characterised by the provision of different types of resource bases in schools.

3.2.1: Academic literacy and learning

None of the programmes under the ‘Student Behaviour’ section of the WWCH included academic programmes for the secondary age group. However, under the section ‘Children and Young People with Disabilities’ the Repeated Reading¹² programme did show positive effects for reading comprehension but no real impact on phonics, reading fluency and reading achievement for pupils with learning disabilities. The EEF toolkit recorded small group tuition¹³ interventions as adding a further four months of progress. It also reported that groups of two can sometimes have slightly higher impact than groups of three, but slightly lower impact compared to one to one tuition. Once group size moves beyond approximately five there was a noticeable reduction in effectiveness.

Garwood et al. (2014) completed a systematic review of intervention studies focusing on reading comprehension or fluency for secondary pupils with EBD in self-contained or resource settings. Nine articles met inclusion criteria and all employed a single subject design with a

¹⁰ Emotion coaching: http://attachmentawareschools.com/emotion_coaching.php

¹¹ Emotion coaching case study:

http://attachmentawareschools.com/resources/documents/EC_in_practice_Secondary_School_case_study.pdf

¹² Repeated Reading: <http://ies.ed.gov/ncee/wwc/interventionreport.aspx?sid=576>

¹³ EEEF Small group tuition: <https://educationendowmentfoundation.org.uk/toolkit/toolkit-a-z/small-group-tuition/>

total of 38 participants (Garwood, Brunsting, and Fox 2014). No specific reading intervention was implemented more than twice and included Repeated Reading, Cognitive Mapping, choice with antecedent instruction and reward, listening-while-reading (LWR), corrective reading, text mapping and peer-assisted learning. All the interventions apart from LWR resulted in moderate to large effect sizes for pupils' literacy skills. Mapping elicited the most significant effects for reading comprehension. In relation to maths teaching, one experimental study of 29 secondary pupils with ADHD who attended a private school for learning difficulties (mean age 13), examined the effectiveness of a cognitive strategy teaching approach based on PASS (Planning, Attention, Simultaneous, Successive) (Goldstein, Naglieri, and DeVries 2011). At one year, follow up the experimental group continued to outperform the comparison group.

3.2.2: Behaviour for learning

Anger management groups in mainstream and specialist settings were a common intervention and the research shows some evidence for their effectiveness in different settings (Burt, Patel, and Lewis 2012, Humphrey and Brooks 2006, Valizadeh, Davaji, and Nikamal 2010, Kellner, Colletti, and Bry 2003). A recent meta-analysis of sixty studies from 1979–2010 indicated an overall effect size of -0.27 , showing a small to moderate intervention effect in reducing children's negative emotional and behavioral outcomes including anger, aggression and loss of self-control (Candelaria, Fedewa, and Ahn 2012).

Some studies were found as part of the review which indicated emerging support for the role of physical exercise as an intervention for pupils with ADHD (Berwid and Halperin 2012, Reeves and Bailey 2014). Reeves and Bailey's (2014) review of ten studies reported some benefits but was unable to identify from the studies what was the 'best' form of physical activity. Results were very tentative at this stage and further research is needed to support exercise as an evidence based strategy. It did suggest that punishing hyperactive children by stopping them taking part in games and other physical activities might be counter-productive.

3.2.3: Social and emotional literacy

Social skills groups, like anger management groups, were found to be a typical small group intervention for pupils with SEMH and individual RCTs and single studies have shown positive effects (Liu et al. 2009, Wilhite and Bullock 2012). A Cochrane review of RCTs of social skills training for pupils with ADHD aged 5-18 reported that based on the evidence at the time it was not possible to recommend or refute social skills training for children with ADHD, although it

did report that parents and pupils satisfaction ratings were high and that most teachers would recommend the approach to others (Storebø et al. 2011). However, researchers, practitioners and parents also reported concerns related to the lack of transfer to ‘real life’ situations and settings (Womack, Marchant, and Borders 2011). This has been observed as a particular concern for pupils with ADHD and more robust practice would see parents and classroom teachers involved in the same social skills training programmes in order to have the knowledge and understanding to provide the necessary support in ‘real life’ contexts and to help a child generalise the new skills they have acquired support (Mikami, Jia, and Na 2014).

3.2.4: Supporting wellbeing in school

A meta-analysis of 25 school-based cognitive behaviour interventions (CBIs) in reducing or preventing aggression in children and youth were examined to explore the effectiveness of these interventions (Barnes, Smith, and Miller 2014). Overall, interventions were found to have a small positive mean effect size of 0.14, (SD = 0.48) and a mean weighted effect size of 0.23. Those that used a universal delivery method were significantly more effective than those delivered in small groups, highlighting the importance again of universal approaches (Barnes, Smith, and Miller 2014). A review of 38 studies of SFT in clinical practice reported tentative support for children exhibiting internalizing and externalizing behaviours. It was seen as an effective early intervention approach and positive results were seen with children with less severe problems, perhaps indicating its use as a Tier 2 approach (Bond et al. 2013).

3.2.5: Nurture groups and resource base provision

Nurture groups (NGs) were developed in the 1960s by the educational psychologist Majorie Boxall and their aim is to improve the emotional well-being of children through restorative attachment experiences. Despite the growing popularity of the approach there was a paucity of rigorous, longitudinal research and the majority of studies were in primary settings. A recent systematic review of 13 studies (only two at secondary level) reported that NGs were an effective intervention for improving the emotional wellbeing of pupils with SEMH (Hughes and Schlösser 2014). The authors noted the different models of NGs used in the studies and that the heterogeneity of methodologies adopted prevented a statistical meta-analysis of findings. A qualitative study of two secondary NGs in Scotland based on interviews with current and former NG members, parents, NG staff and other school staff found benefits of the groups in supporting transition from primary, preparing pupils physically and emotionally for

learning, encouraging friendships and developing social skills. However, they also noted that weaknesses in structural issues such as communication, returning to mainstream and a lack of support helping the pupils to transfer and generalise their learning into everyday contexts, meant that pupil achievement in the widest sense was not maximised (Kourmoulaki 2013).

Behaviour support classrooms (BSC) in mainstream settings were another approach found in the literature adopted by some schools, although specific studies evaluating the intervention were hard to find. One mixed methods evaluation of 36 BSC in post-primary schools in Ireland by the NBSS was able to identify stronger elements of practice, including the importance of robust communication channels, modelling positive support methodologies, actively teaching academic literacy skills and explicitly teaching social and emotional skills (Henefer 2010). It was observed that BSC had experienced varying degrees of success in being able to provide effective provision.

3.3: Overview of evidence

Whilst the studies presented above are of varying quality, Table 4 provides a summary of the provision described across the three tiers where statistically significant impact has been demonstrated, and includes information on study design and samples. .

Table 4 here

4. Discussion

Underpinning all the successful programmes in this review was a positive approach adopted by teachers and school leaders to pupils with SEMH. Approaches that are careful to avoid a deficit model perspective and that embrace techniques which encourage pupils to feel secure and that foster good relations with teachers, result in pupils who were more motivated to learn and are therefore at less risk of exclusion. The programmes found in this review that typified such approaches included strategies adopting functional behaviour analysis, positive behavioural support and nurture group frameworks. The essential features of effective SEMH provision identified in this review match well with the summary provided by Simpson et al. (2011), which included; (a) qualified and committed professionals, (b) practical and functional environmental supports, (c) effective behaviour management plans, (d) relevant and effective social skills programmes, (e) robust academic support systems and ongoing evaluation of interventions against pupil outcomes and progress (Simpson, Peterson, and Smith 2011).

One of the limitations of this review is the challenge of trying to ensure that a scoping review, as opposed to a systematic review, will present reliable and valid findings. The authors have been transparent in their methodology so the reader can assess the quality of findings but a review of this nature will not have the depth and breadth of a systematic review or meta-analysis. A further limitation, is that SEMH is a very broad category and thematic constructs to communicate findings to support practice coherently are somewhat arbitrary and can mask the complexity of what happens in the classroom both for the pupil and the teacher. The constructs used in this study such as behaviour for learning and social and emotional competences are not separate constructs in the classroom or indeed experienced separately by pupils and the authors acknowledge the very great overlap for practice.

Finally, three over-riding issues became apparent during the course of this review. The first relates to the importance of having a theoretical underpinning to the education of pupils with SEMH. The second was how under researched provision is at all levels but particularly Tiers 2 and 3 and finally the similarities in practice found across mainstream and specialist settings. Teaching pupils with SEMH can be challenging. However, an understanding and the adoption of a bio-psycho-social framework is the starting point within which to root practice. Otherwise, there is a risk of professionals ‘cherry picking’ from a range of approaches. This has been described as the ‘eclectic’ approach to choice of teaching strategies and although there are strengths in this approach, there are also inherent problems of selecting strategies without fully understanding why and if they might be the better choice. The authors found an emerging evidence base to support more effective provision for pupils with SEMH, but there remains, particularly at Tiers 2 and 3 a dearth of literature. In this context the importance of having a strong theoretical foundation becomes more of an imperative as professionals will need to rely on their own knowledge and understanding to make choices about approaches. Nevertheless, a call for studies that included an increase in RCT research designs was a common call from many of the authors of the meta-analysis studies included in this review. The authors of this paper would concur that such research would help to provide focus in an area for school

practitioners that is both challenging and witnessing an increase in ‘interventions’ for pupils with SEMH. Finally, the similarities found in stronger practice across settings were marked and in many respects highlighted that for the majority of pupils with SEMH much can be achieved through high quality teaching at the universal level.

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Table 1: Search terms

Emotional social and behavio*ral +education	Social difficulties + school intervention
Emotional social and behavio*ral difficulties +education	Emotional well-being + schools
ADHD +education intervention	Psychosocial interventions + schools + children
EBD + education intervention	Motivation interventions + school interventions
Conduct disorder + education + intervention	Mentoring peer support + school intervention
Opposition Defiant Disorder + education	Alternative Provision + education
Anxiety disorders + school intervention	Pupil Referral Units
Depressive disorders + education + school intervention	
Emotional intelligence + education + school intervention	Hyperactivity + education
Social emotional competence + school intervention	Assertive discipline
Aggression + education + school intervention	Behaviour management + classroom
Self-harm + school intervention	Emotional social and behavio*ral +gifted and talented
Social skills training + school intervention	Positive behavio*r for learning and school + intervention
Cognitive-behavio*ral + school intervention	Bullying + school intervention
Disruptive behavio*rs school modification	

Table 2: Type of document included in review

	Type of document	Number
1	Empirical studies in peer reviewed journals	107
2	Web pages (including case studies)	43
3	Reports (empirically based)	11
4	Theoretical/commentary articles in peer reviewed journals	4
5	Book chapters	3
6	Policy/legislation	1
	Total	168

Table 3: Websites of organisations searched for the review

Achievement For All	National Behaviour Support Service
American School Counselor Association	National Center for the Universal Design for Learning
Attachment Aware Schools	Ofsted
Career Academies UK	Place2Be
Cuckmere House School	Restorative Justice 4 Schools
Department of Education	sebda
Education Endowment Foundation	Studio Schools Trust
EPPI Centre	Triple P Parenting program
Friends for Life	What Works Clearing House
Global Youth Wellbeing Index ¹⁴	Why Try?
Good Behavior Game	World Health Organisation
Incredible Years Program	
Mentoring and Befriending Foundation	

¹⁴ The Global Youth Wellbeing Index (2014). <http://www.youthindex.org/full-report/>.

Table 4: Overview of evidence for common and promising practices (Tiers 1 and 2) in schools for pupils with SEMH

Tier	Focus	Programme	Source/Authors	Research Design	Sample	Impact
Universal (8Tier 1)	Academic learning and literacy	Formative assessment	Education Endowment Foundation Toolkit	Evidence summary	7 meta-analyses	Weighted ES .63
		Metacognition	Education Endowment Foundation Toolkit	Evidence summary	7 meta-analyses	Pooled ES .62 to .71
		Achievement for All	Humphrey & Squires (2011)	Quasi-experimental	454 schools Pupils from two age groups from primary and secondary (10,996 in English and 11,096 in maths)	Secondary small ES* Primary very large ES*
	Behaviour for learning	Achievement for All	Humphrey & Squires (2013)	Quasi-experimental	4758 pupils 308 schools	Positive relationships: 0.17 ES Bullying: 0.28 ES Behaviour: 0.26 ES
		Connect with Kids	What Works Clearing House	Evidence Summary	1 study	16 percentile increase
		Lions Quest Skills for Adolescence	What Works Clearing House	Evidence Summary	1 study	+2 percentile points, with a

						range of -1 to +11 percentile points
		SWPBS	Soloman et al. (2012)	Meta-analysis	20 studies	.ES 27 to .60 **
		The Good Behaviour Game	Flower et al. (2014)	Meta-analysis	22 studies	.50 ES
	Well being	Cognitive Behavioural Strategies	Barnes et al. (2014)	Meta-analysis	25 studies	Weighted ES.23 (Groups) Weighted ES .32 (universal school level)
		Friends for Life	Higgins & O'Sullivan (2015)	Meta-analysis	5 studies	ES small to moderate*
Tier 2	Academic learning and literacy	Reading strategies	Garwood et al. (2014)	Research Synthesis	9 studies (38 pupils)	Omnibus Improvement Rate Difference ES .84 (large) (reading fluency) Omnibus Improvement Rate Difference ES .57 (medium) (reading comprehension)
	Behaviour for learning	Anger Management	Candelaria, et al. (2012)	Meta-analysis	60 studies	ES -.27

		Coping Power	What Works Clearing House	Evidence Summary	3 studies	+8 percentile points, with a range of -6 to +24 percentile points (behaviour)
	Social and emotional learning	Coping Power	What Works Clearing House	Evidence Summary	3 studies	+6 percentile points (social)
	Wellbeing	Cognitive Behavioural Strategies	Barnes et al. (2014)	Meta-analysis	25 studies	Mean .14 ES Weighted .23 ES
		Friends for Life	Higgins & O'Sullivan (2015)	Meta-analysis	5 studies	ES small to moderate*

* Number not reported

** Mean values across categories of studies