Supporting children’s mental well-being in primary schools: problem-solving through communication and action

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Supporting Children’s Mental Well-being in Primary Schools: Problem-Solving Through Communication and Action

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I, Shelley Ruth Thornton, declare that the work presented in this thesis is, to the best of my knowledge and belief, original, except as acknowledged in the text, and that the material has not been submitted, either in whole or in part, for a degree at this or any other university.

Signed ..........................  Date ..........................
Abstract

Children’s mental well-being has emerged as a significant priority for education, with increasing numbers of children experiencing family breakdown, anxiety, depression, oppositional disorders and attention difficulties. Australian governments have responded, identifying schools as key sites for intervention. Deficit discourses have gradually been displaced by strengths-based understandings and an emphasis on health promotion. Educational policy has focused on the importance of evidence-based prevention and early intervention in schools, leading to a plethora of programs aimed at preparing children socially and emotionally for the 21st century. Increasingly teachers have been viewed as having an integral role to play in supporting children’s mental well-being.

This study sought a deeper understanding of teachers’ attitudes, values and beliefs about children’s mental well-being and the impact these have on classroom practice. The study also investigated the change processes experienced by teachers as they seek to improve their practice in relation to children’s social and emotional learning. Participatory action research was undertaken in collaboration with 24 teachers from three primary schools in New South Wales, Australia. Each of the three participating schools implemented a different approach with varying degrees of engagement by teachers. Questionnaires, focus group discussions and interviews were conducted over a 12-month period as teachers implemented initiatives in their classrooms aimed at improving support for children’s mental well-being. Teachers set their own goals as a way of tracking their professional growth throughout the research process.

The study found that teachers’ attitudes, values, beliefs and practices concerning children’s mental well-being were inextricably linked with their constructions of childhood. As a result, teachers generally expressed concern regarding their role and capacity to effectively support children’s mental well-being. Communication and dialogue emerged as pivotal for teachers as they applied problem solving strategies to bring about change in their capacity to engage with children’s mental well-being, improve their relationships with children and negotiate the cultural dimensions of their school community. Sustaining teachers’ professional learning with regard to children’s mental well-being required effective leadership that supports ongoing professional dialogue and fosters an environment where teachers can reflect critically on their understandings and practice. Hence, Communicative Action Theory, together with the key tenets of Ecological Theory, were found to be useful in explaining the quite complex personal, social and cultural dynamics at work in understanding, critiquing and developing support for student mental well-being.
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Table of Contents

Chapter 1: Setting the scene for research on children’s mental well-being .................. 9
  1.1 Introduction: The context of children’s mental well-being ...................................... 9
  1.1.1 Defining mental well-being .................................................................................... 9
  1.1.2 Mental well-being as a ‘problem’ ........................................................................ 11
  1.1.3 Mental well-being and schools ........................................................................... 13
  1.1.4 Emotional intelligence and social and emotional learning ................................. 15
  1.2 The educational context for this study ..................................................................... 17
  1.3 Focus of the study .................................................................................................... 20
  1.4 Positioning the researcher ....................................................................................... 20
     1.4.1 Personal and professional influences on the research ....................................... 21
     1.4.2 Theoretical influences on my approach to the research ................................... 23
  1.5 Theatre of research .................................................................................................. 25
  1.6 Structure of the thesis .............................................................................................. 26

Chapter 2: Teachers take centre stage ................................................................. 29
  2.1 Multi-disciplinary influences on children’s mental well-being ............................... 29
     2.1.1 From deficit to strengths-based perspectives ...................................................... 29
     2.1.2 Sociological influences on children’s mental well-being ..................................... 36
  2.2 The international context of children’s mental well-being ....................................... 42
     2.2.1 Emerging emphasis on international comparison .............................................. 42
     2.2.2 Policy directions from the United States and United Kingdom ....................... 44
     2.2.3 Policy and research in the Australian context ................................................... 46
  2.3 Schools as a focal point for mental well-being ........................................................ 48
     2.3.1 The foundation of a ‘health promotion’ discourse in schools ............................. 49
     2.3.2 Australia’s response .......................................................................................... 51
     2.3.3 School-based programs and approaches ............................................................ 56
  2.4 Spotlight on teachers ............................................................................................... 61
     2.4.1 The importance of teacher attitudes, values and beliefs .................................... 63
  2.5 Chapter Summary .................................................................................................... 64

Chapter 3: Developing the methodological script .............................................. 66
  3.1 Ontological, epistemological and methodological basis for the research ............ 66
  3.2 Selection of schools ............................................................................................... 70
  3.3 Introducing the characters ..................................................................................... 74
  3.4 Cycle 1: Exploring attitudes, values and beliefs .................................................... 81
     3.4.1 The questionnaire ............................................................................................... 81
     3.4.2 Meeting One: Introducing the research concepts .............................................. 82
     3.4.3 Meeting Two: deepening participant involvement and establishing a focus area . 83
     3.4.4 Ongoing communications and informal visits .................................................. 84
## Chapter 4: Exploring the characters' attitudes, values and beliefs

### 4.1 Teacher perceptions of children’s mental well-being

- A social conscience based on empathy ........................................... 93
- A balanced approach to life and a stable lifestyle ........................ 95
- A capacity for independence .......................................................... 97
- Knowing and accepting who they are ............................................ 98
- Emotional stability and rational behaviour .................................... 100
- Resilience ......................................................................................... 102
- A safe environment .......................................................................... 103
- Positive relationships at home and at school ................................. 105

### 4.2 Teachers’ attitudes, values and beliefs about their role as teacher

- Teachers’ mental well-being is paramount .................................... 106
- Teachers’ capacity to support children’s mental well-being .......... 108
- Teachers’ pedagogical approaches to individualising children’s needs 112
- Teachers’ communicative skills in developing relationships ........ 114

### 4.3 Research expectations, emerging goals and school priorities ...

### 4.4 Chapter summary ........................................................................ 119

## Chapter 5: Plot and character development

### 5.1 Identifying teacher initiatives...................................................... 121

### 5.2 Professional growth for teachers ................................................ 127

### 5.3 Outcomes for teachers and students .......................................... 132

- Raising awareness of children’s mental well-being ....................... 132
- Overcoming concerns about the teacher’s role in well-being ......... 134
- Enhancing teacher knowledge of particular mental well-being issues 137
- Involving parents ............................................................................ 139
- Developing classroom practice and programs .............................. 140

### 5.4 Elements that supported teacher change

- Problematising classroom practice ................................................. 145
- Integrating theory (the SEL Framework) ....................................... 146
- Harnessing individual capacity ..................................................... 148
- Acknowledging teacher/child relationships .................................. 150
- Responding to societal and cultural challenges ......................... 151

### 5.5 In the absence of change .............................................................. 152
Chapter 6: The Stage Director reflects ................................................................. 156

6.1 Strengths and limitations of varying group participation models ....................... 156
   6.1.1 Priority/motivation ................................................................................. 157
   6.1.2 Facilitation ......................................................................................... 158
   6.1.3 Depth of reflection ............................................................................. 161
   6.1.4 Leadership ......................................................................................... 162
6.2 Dissonance in stakeholder expectations and conceptions of roles .......................... 163
6.3 Varying stages of teacher motivation and readiness ............................................ 166
6.4 Time to be co-researchers .............................................................................. 168
6.5 The issue of sustainability ............................................................................... 169
   6.5.1 Leadership in working with staff .......................................................... 169
   6.5.2 Integrating pedagogical approaches with a focus on teacher behaviour .......... 170
   6.5.3 Changes to conceptions of childhood and children’s mental well-being ........ 170
   6.5.4 Patterns of communication .................................................................. 171
6.6 Chapter summary .......................................................................................... 172

Chapter 7: Denouement: Re-examining the performance through the lens of communicative action .............................................................................................................. 173

7.1 Applying a communicative action framework ..................................................... 173
   7.1.1 Personal communicative action strategies .............................................. 176
   7.1.2 Social and interpersonal communicative action strategies ....................... 178
   7.1.3 Cultural communicative action strategies ............................................. 180
7.2 Communicative action in relation to ecological social models ............................ 182
7.3 Chapter summary .......................................................................................... 184

Chapter 8: Drawing back the curtain: One performance ends and another begins .... 186

8.1 Revisiting the research ‘headlines’ .................................................................. 186
8.2 Implications for policy, professional practice and research ................................. 188
   8.2.1 The importance of teacher voice .......................................................... 188
   8.2.2 The potential of interdisciplinary knowledge ........................................ 188
   8.2.3 Strategies for professional learning ....................................................... 189
8.3 Implications for further research .................................................................... 190
8.4 Limitations of the study .................................................................................. 190
8.5 Theatre metaphor: Understanding the research process ................................... 191
8.6 Epilogue ....................................................................................................... 192

References 193

Appendices 203
List of Figures

Figure 1. Comprehensive Mental Well-Being Promotion in Schools Model .................................................. 14
Figure 2. The interrelatedness of Vygotsky’s Socio-cultural Theory, social constructivism and Social and Emotional Learning Competencies ................................................................. 40
Figure 3. Seven Pathways to Student Well-being model ........................................................................ 54
Figure 4. Conceptual Model of Support for Children’s Mental Well-being ................................................ 183

List of Tables

Table 1 Characteristics of participating schools ....................................................................................... 74
Table 2 Teacher expectations for the research ......................................................................................... 117
Table 3 Summary of participants’ focus areas and reported changes in their values, attitudes, beliefs and practices .................................................................................................................. 128
Table 4 The four quadrants of knowledge ................................................................................................. 165
Table 5 Examples from the study illustrating the potential of Communicative Action Theory for conceptualising support for student mental well-being ......................................................... 175
Chapter 1: Setting the scene for research on children’s mental well-being

1.1 Introduction: The context of children’s mental well-being

An individual’s mental well-being, whether they are an infant, child, adolescent or adult, significantly influences their ability to function in and with society. Mental well-being is a positive concept which embraces both inner individual experience and interpersonal group experience. It represents the capacity of the individual and the group to interact effectively with their environment (Bernard, 2001; Chilcott, 2008) and it plays an important role in the development of happiness, competence, self-determination, positive self-esteem and capacities to love, work and play (Fuller, 2006). As individuals grow into adulthood their mental well-being becomes a critical element supporting them to reach their full potential. Whilst many children and young people enjoy positive psychosocial development, effective learning and good social and family relationships (Raphael, 2000) there are a significant number of children who experience mental well-being problems. Such problems may be relatively short-lived and children’s mental health may improve with or without intervention. However, there are other children who experience more complex and severe difficulties which affect their ability to enjoy life and to meet age appropriate developmental milestones.

1.1.1 Defining mental well-being

The concept of ‘mental well-being’ is often used interchangeably with ‘mental health’, or the terms are combined as ‘mental health and well-being’ (Raphael, 2000). Since its inception in 1947, the World Health Organisation (WHO) has included mental well-being in its definition of health, which is expressed as ‘…a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity’ (Herrman, Saxena, & Moodie, 2004, p. 12). The WHO stresses that mental, physical and social functioning is interdependent and that mental health is a state of balance, including the self, others and the environment. In its most recent definition, the WHO contextualises mental well-being as ‘a state in which the individual realises his or her own abilities, can cope with the normal stressors of life, can work productively or fruitfully and is able to make a contribution to his or her community’ (2004, p. 12). In this sense, mental well-being is the foundation for effective functioning of an individual and for communities. It is more than the absence of mental illness, since the state of well-being has value in itself. Hill (2004) suggests that well-being relates to a present state – a sustainable homeostasis – not a visionary future condition. This distinction emphasises that well-being needs to be stable and experienced over time.

Medical and psychological models sometimes offer competing explanations for symptoms, leading to difference in treatment, as is the case in relation to depression (Hill, 2004). If viewed as a mental health ‘problem’ depression may be treated with medication only; however if viewed as a mental well-being ‘issue’ a broader intervention plan may be used, encompassing perspectives drawn from
multiple health-related disciplines. Describing depression in terms of well-being, in contrast, gives rise to an understanding of depression as amenable to positive intervention in ensuring an individual can realise their full potential. The term ‘well-being’ can take on a biological objectivity since well-being has at its core the biological operations of the brain and nervous system, giving rise to the belief that well-being is deeply cognitive, emotional and thus psychodynamic (Akin-Little, Little, & Delligatti, 2004; Marshall, 2004). This approach is akin to the WHO’s emphasis on methods of promoting mental health (WHO, 1997). From this perspective, well-being comes from within and is nurtured through social settings (Denham, 2006).

School personnel often link mental health with ‘disability’ and difference. For example, many Australian schools tend to adopt the categories which are outlined in the Disability Standards for Education Australia (2005) which include intellectual, sensory, physical, social and emotional and multiple impairments. Disability in relation to social and emotional impairment means a disorder, illness or disease that affects a person’s thought processes, perception of reality, emotions or judgment or that results in disturbed behaviour. Hence, by locating mental health within a disability framework schools are significantly shaping what can and can’t be said and acted upon in relation to the ‘problem’.

The Australian Government mandates a process by which schools apply for funding for students with a disability through Individual Education Planning (IEP). The IEP process attempts to provide the best intervention and support for each individual student, based on detailed and specific knowledge regarding a child’s progress and participation. Problems related to children’s mental well-being such as lack of resilience, bullying, depression, anxiety and aggression are often identified and discussed through IEP meetings which aim to establish a common understanding between a parent’s view of a ‘disorder’, how it should be supported and what the school is able to offer in working together with parents and health professionals (Shucksmith, Philip, Spratt, & Watson, 2005; Zins, Bloodworth, Weissberg, & Walberg, 2004). The IEP process provides an example of how well-being is socially constructed, illustrating how different stakeholders may draw different meanings from the same observed behaviour.

While the IEP process does link mental well-being issues with disability funding there has been a gradual shift in language, both within research and school practice, away from concepts of student welfare and disability toward notions of student well-being. This trend is consistent with a positive psychology approach which illuminates what’s ‘right’ not what’s ‘wrong’ (Clonan, Chafouleas, McDougal, & Riley-Tillman, 2004; Seligman, Steen, Park, & Peterson, 2005) and has been the impetus for an increasingly popular ‘positive education’ approach (Baker, Dilly, Aupperlee, & Patil, 2003; Gable & Haidt, 2005; Patty, 2008).

The term ‘mental well-being’ can thus be understood from various perspectives. It can be viewed as a positive rather than negative attribute of human functioning and it can be approached with an emphasis on intervention rather than treatment, despite debate about the normalisation of human behaviour. Such varying constructions of mental well-being and associated concepts will be explored further in Chapter 2.
1.1.2 Mental well-being as a ‘problem’

The mental well-being of children and young people has emerged as a significant social, political and educational issue internationally with problems such as suicide, conduct disorders, alcohol and drug abuse, depression and attention deficit disorder all becoming more common (Zubrick, 1997). Furthermore, mental ‘disorders’ (clinically diagnosed) are appearing at a younger age and they also seem to be increasing in severity (Raphael, 2000). Depression, for instance, which has been identified as an important determinant of well-being in children (Rowling & Gehrig, 1998) is predicted to move from being the fourth most common cause of disability and premature death of children and young people internationally (as documented in 1990) to become the second such cause by 2020 (Herrman, et al., 2004).

Reports documenting high occurrences of mental health issues began to gain significant prominence from the late 1990s onwards. For instance, US epidemiological research by Kashini and Orvaschel (1999 cited by Farrell & Barrett, 2007) found that 25.7% of 8 year olds and 15.7% of 12 year olds met diagnostic criteria for an anxiety disorder, which was associated with other impairments including immaturity, inattention and concentration, academic difficulties, poor peer relations, low self-esteem and low social competence. Similarly, in the US Surgeon General’s Report on Children’s Mental Health 2000 (Whelley, Cash, & Bryson, 2002) 20% of children were identified as having experienced a significant mental health problem during their school years. Of this group, 13% were identified with anxiety disorders; 10% were identified with disruptive behaviour disorders; and 6% were identified with mood disorders, with some children diagnosed with all of these (Power, 2003).

Elksnin & Elksnin (2003) have identified that a large percentage of students (75%) with learning disabilities exhibit social skill deficits and 29% of adolescents with disabilities require specific social skill instruction beyond high school. Similarly, Elias (2004) found comorbidity between emotional disturbance and language development in 45% of students with learning disabilities, indicating that expressive and pragmatic language development impacted on well-being. These children tend not to be accepted by peers, they display shortcomings in the way they interact with peers and adults, along with difficulties in reading nonverbal and other subtle social cues.

Media interest, community concern and public opinion have exposed children’s mental well-being as a problem. What might be termed the ‘medicalisation of human behaviour’ is on the increase (Shields, 2007). Where once signs of stress, withdrawal or disengagement were simply interpreted as that, now distressed children are increasingly being diagnosed and labelled as having a disorder (Horin, 2005, p. 33). Children who were once called ‘troublemakers’ and ‘slow learners’ are being given behavioural, psychological and mental health labels (Patty, 2008).

One of the largest national surveys to be undertaken in Australia into the prevalence of mental health problems and service provision (Sawyer, et al., 2000) revealed that 14% of Australian children and adolescents experienced some mental health needs. This study focused on the incidence of three particular disorders among 4500 children: Depressive Disorder; Attention Deficit/Hyperactivity Disorder; and Conduct Disorder. These figures might be compared with the health and well-being
statistics of young people which revealed students who had not completed secondary education had a higher prevalence of mental disorders (35%) than those who had post-school qualifications or who had completed secondary school (under 25%) (Australian Institute of Health and Welfare (AIHW), 2007). More recently, mental disorders were identified as the leading contributor to the burden of disease and injury (accounting for 49%) among young Australians aged 15-24 yrs, with anxiety and depression being the leading specific cause for both males and females (AIHW, 2007).

In New South Wales (the Australian state in which the current study takes place) the former Department of Community Services (DOCS), now known as Community Services (CS), reported that between 2004 and 2007 issues such as alcohol abuse, domestic violence and gambling led to an increase in the numbers of reported cases of psychological harm, physical harm and neglect of children (Hopkins & Smoothy, 2007). More than 11,600 children were reported for neglect to DOCS in the three months to December 2007, an 11 percent increase over the 2006 December quarter (Horin, 2008). In the 2007 December quarter, there was a dramatic increase of about 20 percent in parents being reported to the Department for drug and alcohol abuse and for mental health issues - contexts often associated with a typical neglecting family as defined by DOCS (Hopkins and Smoothy, 2007) and with consequential mental health problems for children.

Such data sends a clear message to governments about the importance of mental health related issues for children and the costs of not addressing the problem:

> These emotional disturbances, such as anxiety and depression, occurring at alarmingly high rates in children and youth, are associated with a number of negative life consequences, and come at a tremendous cost to society. Treatment costs for child anxiety can cost as much as $2181 US per client (Farrell & Barrett, 2007, p. 58).

Prevention approaches have thus emerged as a priority for governments, offering a cost effective and efficient means of providing services to children and youth prior to the onset of psychopathology (Greenberg, Domitrovich, & Bumbarger, 2001). Professor Fiona Stanley, an eminent Australian authority on children’s health and a strong advocate of early intervention and prevention, argues that the most important issue facing Australian society is preventing children reaching adulthood with poor health, feelings of anger and frustration, alienation, limited social and work skills, poor self-control, a propensity to violence and a bleak sense of future (Prior, Stanley, & Richardson, 2005; Stanley, 2007).

The health and well-being of children and young people is now arguably at the centre of social policy making in Australia today (AIHW, 2008) with a growing emphasis across various state and federal government departments on enhancing children’s mental well-being. Consequently, there is now a strong imperative to identify relevant and reliable measures of well-being, with the Australian Government monitoring and reporting on a range of key indicators of child and youth health, development and well-being (AIHW, 2008), including substance abuse, hospitalisation, mortality, educational achievement, homelessness and family economic situation. Whilst the most effective approach to measuring and monitoring well-being remains a vexed issue (Ben-Arieh, 2005), some argue the importance of ensuring social concerns about childhood aren’t inadvertently fuelled through deficit approaches to studying children’s lives (Morrow & Mayall, 2009).
1.1.3 Mental well-being and schools

For most children schooling is a significant element in their lives and therefore the response by schools and educational authorities to children who experience mental well-being problems is critical. While family doctors, school based counsellors and paediatricians provide important services, only one in four young people with mental health problems receive professional help (Sawyer, et al., 2000). Many experts in the field have thus argued that school is the main setting for health promotion among children and adolescents (Konu & Lintonen, 2006; Raphael, 2000; Rowling, 2003). As schools grapple with their role in addressing mental well-being they have appropriated a number of psychosocial interests such as ‘resilience’, ‘emotional intelligence’ and ‘social and emotional learning’ and these are discussed in the following sections.

Most schools recognise that the children in their classrooms face a range of issues (Farrell & Barrett, 2007). Teachers are confronted by diverse challenges, both personally and professionally, when a child who doesn’t follow or engage with the existing patterns of behaviour comes into the classroom. Increases in the prevalence of children with mental well-being difficulties have led to changes in the dynamics of many classrooms (Greene & Lee, 2001; Shucksmith, et al., 2005). For instance, in a US survey of 119 teachers (Walter, Gouze, & Lim, 2006), more than half identified disruptive behaviour, symptomatic of a problematic state of mental health or well-being, as the largest problem facing their schools, and lack of information/training was identified as the greatest barrier in addressing mental health problems. Various studies have also shown that schools themselves identify limitations with the way they are attending to mental well-being difficulties (Chilcott, 2008; Lewis, Powers, Kelk, & Newcomer, 2002; Romaz, Kantor, & Elias, 2004).

The concept of ‘resilience’ has received considerable attention in schools (Chessor, 2007; Fuller, 2006; Johnson & Howard, 2006; Russo & Boman, 2007). Resilience is the ability to rebound after adversity (Fuller, 2006). The phrase ‘lacks resilience’ is a common descriptor used in schools to describe children ‘at risk’ (Allen, Murray, & Simmons, 2005). However, resilience is often misunderstood by educators and its presence is often seen as an antidote to poor well-being (Johnson & Howard, 2006). Russo and Boman (2007) found that although teachers’ knowledge of resilience was apparently strong, and they reported a reasonable level of confidence in their ability to assist children in building resilience, their capacity to identify levels of resilience in their students was lacking. As reported in Johnson and Howard (2006), a significant number of children from high risk situations may demonstrate a remarkable capacity for resilience in the face of overwhelming odds.

Resilience research has provided the stimulus for discussion about protective factors that support children’s mental well-being and the methods used to enhance competency in this area. Some would say these protective factors are part of an individual's general makeup (Edward & Warelow, 2005) and others would say resilience is not an innate attribute but rather an adaptive process involving interactions between risk and protective factors within an individual's lived experience (Oliver, Collin, Burns, & Nicholas, 2006). Some of these factors are considered genetic, such as a personality that is outgoing and social; however, many protective behaviours can be learned (Edward & Warelow, 2005). Schools have therefore become the conduit for resilience training and coaching.
A Comprehensive Mental Well-being Promotion in Schools Model (presented in Figure 1), first developed by the World Health Organisation (WHO), has been influential in assisting schools to conceptualise their role in health promotion. This framework illustrates the various levels of engagement and potential intervention within schools around children's psycho-social and mental well-being.

Figure 1. Comprehensive Mental Well-Being Promotion in Schools Model

Underpinning this model is an assumption that teachers can, and do, play a critically important role in supporting the social and emotional well-being of their students and in building their psycho-social competence. Some argue this is not an unreasonable expectation, since schools are the primary environment in which all students must negotiate and function (Aviles, Anderson, & Davila, 2006). Yet the extent to which teachers understand the concept of mental well-being, together with their role in addressing it in classrooms and schools, remains under-researched. What does seem to be clear is that schools that are poorly embedded in their communities, and in which individual teachers have little understanding of the kinds of daily problems being experienced by pupils and their families, create a poor basis for establishing a health promoting school (Shucksmith, et al., 2005).

Graham et al. (2011) reported that teachers' attitudes, values and beliefs impact on their approach to dealing with depression, anger, withdrawal, and relationship problems. Teachers' concerns for whether they are under-reacting, over-reacting or not supporting the issues reflects a need for professional development to improve skills. Such professional development is expensive and nearly nonexistent (Graham, et al., 2011). Yet the importance of teachers improving their understanding and skills, particularly reflecting on and confronting their attitudes to children's mental health, is paramount.
This is not only because of the increased pervasiveness of mental well-being issues amongst young people but because different disciplinary and professional interests (for example in health and education) result in different perceptions and understandings about mental well-being amongst professionals (Parham, 2007).

Denham and Weissberg (2004) argue that adults and teachers have an important role in managing children’s emotional development:

Because of the increasing complexity of young children’s emotionality and the demands of their social world - with ‘so much going on’ emotionally - some organised emotional gatekeeper must be cultivated (2004, p. 4).

There is a perception that a teacher’s role as a ‘gatekeeper’ of emotional development has become more prevalent in recent years, as evidenced by several studies concerning teachers’ knowledge and ability to develop and enhance various aspects of children’s mental well-being (Aviles, et al., 2006; Russo & Boman, 2007). This in turn, has brought about increased demands on teacher self-efficacy (Deaver, 2005; Walter, et al., 2006). Their expected role in children’s mental well-being has expanded significantly, which has raised concerns for teachers in terms of confidence, skills and knowledge (Graham, et al., 2011).

1.1.4 Emotional intelligence and social and emotional learning

The shift in focus of mental well-being support into schools has been driven by a recognition that the affective domain is a critical component of educational practice (Bernard, 2001; Burke, 2002; Elias & Weissberg, 2000; Qualter, Gardner, & Whiteley, 2007). Based on Gardner’s work on multiple intelligences, together with brain research and reviews of successful programs promoting emotional health, Goleman's publication, *Emotional Intelligence* (Goleman, 1996), has been highly influential in educational practice and has been described as triggering a revolution in mental health promotion (Elias & Weissberg, 2000). The concept of emotional intelligence is valorised through the following narrative:

Gavin Miller (alias) has always been a rough-and-tumble kind of kid, reared in a boisterous household with brothers five and seven years his senior. He’s an impulsive child with a passion for sports -- he was the big kid on the T-ball team leading the scuffle to snag infield hits. Trouble is, when Gavin started kindergarten, his aggressive behaviour did not translate well onto the playground. He’d knock kids over in his zealous game-playing and retaliate with shoves, fists and not-so-nice language when another child brushed against him. By grade two, Gavin’s mother was getting calls from the school almost daily. Today, Gavin is in sixth grade, and calls from the school are few and far between. When a playground clash with a classmate threatened to erupt last September, Gavin’s mum helped him devise a strategy to defuse the situation: Invite his competitor to join his team. The solution worked and the problem disappeared. What Gavin learned between grade two and grade six -- with the help of a supportive principal, teachers, counsellors and, most importantly, his parents -- was to reflect on the effect his impulsive behaviour had on others, take responsibility for his actions, and seek out socially acceptable solutions. Simply put, Gavin has grown in emotional intelligence (Partridge, 1997, p. 58).
Emotional intelligence has its origins in the related concept and language of ‘emotional literacy’. Claude Steiner first coined the term ‘emotional literacy’ during the 1980’s to define an area of skill which has three main domains: the ability to understand your emotions; the ability to listen to others and empathise with their emotions; and the ability to express emotions productively (Steiner & Perry, 1999). Steiner explains that emotional literacy is a tool to improve emotional intelligence. An emotionally literate person is one who can recognise one’s own emotions and the emotions of others; understand one’s own and other’s emotions; handle one’s emotions to develop and maintain wholesome relationships; and appropriately express one’s emotions (James, 2004; Matthews, 2004). Emotional intelligence focuses on self-awareness and awareness of others, positive attitudes and values, responsible decision making and social interaction skills (Kress, Norris, Schoenholz, Elias, & Seigle, 2004; Payton, et al., 2000). Given the increasing role schools are expected to play in developing psychosocial competence and life skills, it is not difficult to discern why the emotional intelligence movement has developed considerable traction in education circles.

Social and emotional learning (SEL) is another concept that has gained considerable momentum as schools have sought to locate notions of mental well-being within their cultures, curricula and pedagogies. SEL is defined as the process through which children enhance their interpersonal and small group skills (for example, recognising, managing and appropriately expressing one’s emotions) and the internalisation of prosocial attitudes and values needed to achieve goals, solve problems, become emotionally involved in learning and work and succeed in school and throughout life (Zins, et al., 2004). There is a considerable body of evidence that SEL skills are integral prerequisites to life success (Denham & Weissberg, 2004; Elias & Weissberg, 2000; Lopes & Salovey, 2004; Romaz, et al., 2004).

SEL can also be understood in terms of set of competencies, learning skills and human qualities which are, in turn, underpinned by a set of ethical and moral values (Faupel, 2003). Goleman has identified five competencies which are key components of SEL:

- self-awareness and knowing one’s emotions;
- social awareness and recognising emotions in others;
- responsible decision making and motivating oneself;
- self-management and managing emotions; and
- relationship management and social and relationship skills.

In this sense, including SEL in classrooms means valuing and prioritising activities which build the above SEL competencies. Its inclusion also recognises the crucial importance of the affective aspect of our being, and how it integrates with cognitive and behavioural development (Denham & Weissberg, 2004). There is currently little research as to how teachers engage with SEL as a means to understanding more about children’s cognitive and behaviour development associated with children’s mental well-being.

Research to date has mainly focused on the efficacy of SEL programs (Durlak, Dymnicki, Taylor, Weissberg, & Schellinger, 2011; Zins, et al., 2004) and their relationship to the principles of preventive
psychology (Greenberg, et al., 2001; Romaz, et al., 2004). However, as James (2004) astutely comments:

Educational opportunities to promote social and emotional learning are not reliant on practical resources. It is successful when staff are committed and knowledgeable, when (the) school community values its inclusion and concepts permeate all aspects of the school culture (James, 2004, p. 6).

This comment suggests that SEL is more than a series of lessons but rather a pervasive influence on the attitudes, values and beliefs of school personnel, as well as their practices.

In summary, the field of children’s mental well-being is characterised by a degree of uncertainty and confusion not only in terms of how it is defined but also how it is measured, monitored and addressed. The recognition of mental well-being as a political as well as social imperative has resulted in an increasing focus on the role teachers and schools play in understanding and intervening effectively in this sphere of children’s lives. Hence, this research is significant in terms of identifying the attitudes, values and beliefs that shape teacher practices in promoting mental well-being in their classrooms.

1.2 The educational context for this study

This research arose in response to identified needs and priorities in one non-government (Catholic) school system located in regional NSW, Australia. The school region comprises 34 primary and 12 secondary schools, with 16,286 students in total (9,067 of these in primary schools).

Within this school region there had been a steady increase in the number of children identified with a disability, from 2.63% in 1998 to 5.17% in 2009 (Hore, 2010). Approximately 50% of the disability total in the region for 2010 related to mental well-being issues. Of the children identified with a disability an increasing number were being funded by the Australian Government to support their needs. The number of children identified in this particular regional school system with autism, for example, increased from 175 in 2007 to 304 in 2010, whilst total numbers of primary school enrolments decreased in this period. Diagnoses such as Oppositional Defiant Disorder, Anxiety and Depression, Autism and Autism Spectrum Disorders such as Aspergers must meet the Diagnostic Systems Manual (DSMIV) criteria for Commonwealth disability funding and must be diagnosed by paediatricians and psychologists.

Since 2002, this school system has had a concerted focus on mental well-being, as evidenced by the wide range of mental well-being curriculum innovations and special programs in place, including:

- **VAM** (Value Added Meaning) - a leadership program developed by Val Gray (a psychologist within the local education region) which incorporates a series of 12 workshops supported by activities and materials to facilitate the program;
- **You Can Do It** (Bernard, 2001) - a whole-of-school personal development program which aims to develop skills in confidence, organisation, time management and belonging;
- **Seasons for Growth** (Graham, 2002) - a program specifically targeting children and young people experiencing change, grief and loss;
Chapter 1: Setting the scene for research on children’s mental well-being

- **LAP (Learning Assistance Program)** – a program designed to encourage and train adult helpers or mentors to assist children with additional needs in schools;
- **Rock and Water** (Family Action Centre, University of Newcastle) - a psycho-physical program designed in the Netherlands for boys to develop self-awareness and self-control, using the physicality of martial arts to teach the skills of mind control;
- **Bounce Back** (McGrath & Noble, 2003) - a program developed to improve resilience in children; and
- **MindMatters** (Wyn et al, 2000) - a whole-of-school well-being program designed to improve mental health understandings of adolescents and young people by staff members and students.

Burdett (2004) described these programs as ‘a means to an end – not the end itself’ (p.14) suggesting that while the programs offer good teaching practices and schools should decide which programs best support the needs of their children, the implementation of a program alone does not in itself represent a sufficient response to mental well-being. Implied in Burdett’s report recommendations was an inquiry that probes into other processes teachers use in their classrooms to promote mental well-being.

In attempting to cohere the increasing range of initiatives under way within the school region, a number of reports and papers were developed to inform future directions. In 2003, for example, a discussion paper was presented to the governing body of the school system, titled *School Counselling in Parish schools – Preliminary Matters* (2003). This report presented an overview of existing structures that provided mental health support to students, benchmarking these with school counsellor models being used in other school systems. The discussion paper advocated for increased resources to schools within the region and recommended a further study into principals’ views on this matter. A study was subsequently conducted surveying 30 principals on topics such as the nature of student social and emotional well-being, the impact of mental health issues on schools and their views on counselling services. This resultant, influential report titled *Primary Principals’ Views of Mental Health Issues in the Diocese* (2003), identified a significant number of mental health initiatives being implemented across the region such as a parish employed counsellors, school based behaviour management plans, parent programs, professional development and research related to well-being programs, pastoral care committees and liaison with community health services. This report also found that there was divided opinion on the usefulness of education programs addressing children’s mental well-being (such as those described above), with half of the respondents believing that the programs were only a little to moderately helpful and half believing they were very to extremely helpful. Other findings from the study included:

- 100% of respondents indicated that there was inadequate professional development support for mental well-being;
- 87% of principals indicated that they were only a little or moderately confident in dealing with potential mental health issues;
- 60% of principals expressed low levels of confidence in dealing with issues such as physical, sexual and emotional abuse of students and family violence, with these viewed as having the highest impact on academic performance and student behaviour;


- 62% of respondents identified bullying, peer rejection, deviant peer groups and inadequate behaviour management as having a greater impact on social and emotional well-being than parenting skills and family support; and

- 70% of principals believed school counsellors were essential in relation to professional assistance with students' mental health issues, and that the current level of counselling services was not sufficient.

This 2003 Principal survey was a key impetus for the current study since it pointed to the importance of factors such as teacher confidence and efficacy in the area of mental well-being and the need to place a new focus on supporting teachers through professional development.

As a result of the 2003 discussion paper and subsequent principal survey a further document was produced by the school system titled *A Model to Support Emotional and Social Well-being of Students, Staff and Families of Catholic School Learning Communities within the Diocese* (Burdett, 2004). This important paper proposed a holistic approach to social and emotional well-being that was described in terms of seven outcomes: curriculum and special programs; timely and proper intervention; family support; policy implementation and communication; professional development; sense of community; and school organisational structures. For each outcome area, recommendations were made regarding implementation strategies and the resourcing of these strategies. The paper also presented 20 understandings that should guide principals and other school executive members in making decisions about mental well-being approaches in their schools. Two key understandings relating to the role of teachers were influential in deciding the research focus for this study, namely that:

- any approach to social and emotional well-being interventions must have whole school support. Staff must identify the issue and seek an approach to how they can address this.

- the best way to support social and emotional well-being of students and staff is to have consistency. This demonstrated through the consistent use of language and in the way we react to situations. Hence there may be a need to resource a few rather than many programs as a way to seek consistency across schools/regions.

Other statements proffered ideas about sustainability; practice of faith as a source of resilience; schools and families being interdependent; building positive relationships; one single approach will not fit all; and that the counsellor/psychologist needs to be outside the discipline loop.

In response to these reports, the governing board of the school system introduced a strategic plan to promote mental well-being across the region. The *Mental Well-being Project*, established in 2006, aimed to help school communities respond to the needs of students and their families and to maintain and support their emotional and social well-being. Each school principal was invited to participate by applying for funding for their own project to promote mental well-being. Schools were encouraged to review the needs and strengths of their own students, families and staff to decide the best way to invest their *Mental Well-being Project* funding. Principals who wished to apply were asked to justify their application for funding with clearly thought out criteria linked to a whole-of-school approach.
As will become evident in Chapter 2, the developments within this school system mirrored (to a large extent) debates and developments taking place in relation to children’s mental well-being nationally and internationally. One of the key issues perceived to be instrumental in progressing further change concerned teachers’ attitudes, values and beliefs in relation to their expanding role in promoting and supporting children’s mental well-being. It was within this context that the opportunity for this study arose.

1.3 Focus of the study

This research aimed to identify and explore teachers’ attitudes, values, beliefs and assumptions concerning children’s mental well-being in primary schools. It critically examines the way these beliefs about children’s mental well-being influence classroom practice and explores the change processes that occurred within pedagogy when teachers attempted to improve social and emotional aspects of learning. As such, the study sought to answer the following research questions:

- What are teachers’ attitudes, values and beliefs about children’s mental well-being?
- How do teachers’ attitudes, values and beliefs about children’s mental well-being influence their classroom practice?
- What change processes occur when teachers seek improvement in their practice in relation to children's mental well-being?

The research involved engaging with 24 primary school teachers in an action research process which supported them to become cognisant of their attitudes, values and beliefs towards children’s mental well-being. As the study progressed, the action research itself became a focus as I reflected on the efficacy and benefit of the approach as a change process model.

As emphasised earlier, defining mental well-being is problematic, an issue taken up again in Chapter 2. However, in presenting the focus of this study it is important that I acknowledge the particular conceptualisation that I adopt as a researcher. For the purpose of this study, mental well-being is understood as an overall concept describing a person’s mental state and is inclusive of the term ‘social and emotional well-being’ (Hendren, et al., 1993). It is exemplified by the model developed by Masters (2004), which represents well-being as comprising five closely related components - social, physical, emotional, spiritual and cognitive. Masters (2004) intends that these five components work together as a balanced whole and that positive well-being is the result of growth and development in each area. Whilst mental well-being is most often directly associated with social and emotional well-being, for my purposes Masters’ definition is important because it signals the five dimensions are inextricably linked. Therefore, in this study, when mental well-being is discussed it is assumed to be inclusive of these five aspects.

1.4 Positioning the researcher

In this section I explore what brought me to this research and the philosophical and epistemological beliefs underpinning my choice of methodology. It is difficult to separate personal and professional
influences as these are interwoven in my approach to, and purpose behind, my daily work supporting children with additional needs. My personal and professional practice also embodies and reflects particular theoretical influences which I explore in this section.

1.4.1 Personal and professional influences on the research

I was stimulated in my inquiry by my recognition of the national and international attention that was growing in education around mental well-being issues and how this was closely associated with my personal interest in emotional intelligence and emotional literacy. I have always believed that the development of emotional literacy is equally as important as academic and physical development when teaching children. As outlined in Section 1.1.5, emotional intelligence focuses on self-awareness and awareness of others; positive attitudes and values; responsible decision making and social interaction skills (Kress, et al., 2004; Payton, et al., 2000) and these are all qualities which I believe teachers can foster in order to support children’s mental well-being. I approached this research assuming that methods used in schools and classrooms to support the mental well-being of our children could be improved but, like Herrman (2004), I felt that to do so we needed to gain a greater understanding of the classroom practices and the teacher beliefs that underpin these.

At the time of the research I was employed in a primary school within the education system described in Section 1.2. My role within the school was Enrichment Teacher, providing classroom assistance and individual learning support programs to students with additional needs. Part of this role was to develop Individual Education Plans for children with additional needs. My daily work primarily involved addressing the needs of children experiencing well-being difficulties. This often meant daily communication with teachers, observation of children and record keeping ensuring support for children was targeted and effective. Inevitably, resolving complex situations and finding solutions was fraught with difficulty, often producing cycles of ongoing need.

Reflecting back further, my assumptions about how children learn have evolved throughout my teaching career. Like many teachers, I once believed children were recipients of knowledge and that choices about what they should learn should be made by the teacher. However, through my experiences and observations my beliefs evolved to align more closely with a social-constructivist view of learning (Lincoln, 2001). I vigorously support the view that children need to actively create their own learning through role play, building models, writing stories, drawing, clay modelling and other means of doing rather than passive participation. I relate closely to the ideas of Vygostsky, who proposes that optimal learning occurs when the child is engaged in collaborative activity and has the caring support of colleagues and mentors, enabling him/her to take risks in initiating new ideas and pursuing new directions (Brown, 1999; Mahn & John-Steiner, 2002; Moll & Whitmore, 1993). These ideas support my beliefs regarding children’s rights to be socially and emotionally competent.

In my role as Enrichment Teacher I was increasingly faced with more challenging issues concerning children with well-being problems and, alongside my colleagues, had been seeking innovative ways of improving practice. I became more cognisant of how Individual Education Plans could explicitly include goals, indicators and strategies that reflected social and emotional skills. I found the concept of
emotional literacy useful when thinking about a child’s needs and corresponding interactions and relationships with peers and adults. I modelled, and invited other staff to use, the Emotional Literacy Questionnaire (Faupel, 2003) to ascertain the social and emotional needs of children in their class, in relation to self-awareness, empathy, self-regulation, motivation and relationships. I was also involved in a project where children with emotional literacy issues (as identified by the Emotional Literacy Questionnaire) were invited to work cooperatively and problem solve with other children in creating a mural, providing fertile grounds for social skill development.

All these activities contributed to my growing belief in the important role that classroom teachers have in supporting children’s mental well-being and the need for them to be involved in decision making regarding support. I became aware that teachers needed time to communicate about these issues and there was a need for a common understanding of children’s mental well-being, and a whole-of-school sense of responsibility.

As with other schools in the region that were applying for funding through the Mental Well-being Project (see Section 1.2) my school had decided to engage a staff member to implement a psycho-physical program (Elias & Weissberg, 2000) for one semester. This approach differed to others previously implemented in that it was facilitated by a staff member (not a ‘specialist’ teacher) who was released to conduct the program. In other schools, funds were generally being used to employ a ‘specialist’ counsellor. Our school’s psycho-physical intervention encouraged children who were identified as needing social and emotional development to focus on their ‘personal best’ effort and to recognise a best effort in others.

In reflecting on the above intervention, I observed that simply creating a new position to facilitate a program meant it was not necessarily influencing the broader school context. In order to grow and sustain a program which would reach a greater number of children, ongoing teacher training or professional development was required so that more teachers could include social skills in their daily practice. Ultimately, the program was not sustainable due to staffing priorities and the following year funds were directed to employing a ‘specialist’ counsellor, even though for the children involved in the program there had been improved engagement with, and confidence in, school activities.

Through my contact with this program I reflected that communication between the program coordinator and teachers with respect to both individual student progress and more general and consistent practice across the school was an important part of developing whole-of-school thinking. Without this communication teacher attitudes and beliefs about children’s mental well-being were not challenged, and teachers were not encouraged to identify what they could do themselves to support children. My school’s response to improving social and emotional skills provided a stimulus to reflect upon the importance of teacher commitment to changes that evolve from new projects. I believed that teachers needed to be more involved in decision making and program design and, importantly, develop a common understanding of what was understood and valued in terms of children’s mental well-being.
1.4.2 **Theoretical influences on my approach to the research**

As an educator I value social justice, equity and compassion and hold a strong respect for pluralistic forms of existence; values which are often prized in principle but denied in practice. In choosing to study children’s mental well-being and then wanting to influence the way it is viewed and supported in schools, I came to recognise that my ideas aligned with feminist scholarship, and its concern regarding social inequalities (Maguire, 2001). Feminist theory implies a critical perspective on attitudes and beliefs towards marginalised groups and hence potentially opens up a way for exploring how teachers might become more self-reflective regarding the way they support children’s mental well-being. This concern implies more than interpretation of discourse and interaction; it aims to disrupt my own and others taken-for granted assumptions and practices.

Feminist thinking would suggest that more empathetic work is needed in educational research to change the way we view children and their social and emotional development:

> In the feminist literature, voice and power are often linked by a conceptualisation that either explicitly states, or implicitly implies that claiming, experiencing and honouring one’s voice empowers the individual by putting her in contact with her own intelligence... teachers who know in this way and act with intent are empowered to draw from the centre of their own knowing and act as critics and creators of their world... agency as it is described in this model casts voice as the connection between reflection and action (Fendler, 2003, p. 20).

A feminist approach implies a subjective (rather than objective) interaction, collaboration and empathetic engagement with the people involved in the study (Neuman, 2006).

My purpose, then, in approaching this research was to identify and effect change in the attitude and practice of teachers and the most effective way I felt this could be achieved was to work directly with the teachers who were the target of proposed change. This personal desire to work collaboratively with teachers and to facilitate and share the path of changing practice drew me to action research.

In the previous section I identified myself as social-constructivist in my views about teaching and learning. My constructivist standpoint has been influential in this study as I believe it is important, in supporting teachers’ learning, to establish environments in which they can co-construct meaning as they shape children’s mental well-being and their own development. This constructivist approach not only influenced my research focus but also underpinned my choice of methods. I have attempted to let the object of my knowledge, which is understanding and conceptualising support for children’s mental well-being to determine how it should be known. This called for methods that would allow opportunities for the participants (including myself) to create our own context for learning. Action research is consistent with constructivist views in that it emphasises reflexivity, dialogic inquiry, cultural practices and voice (Lincoln, 2001), all of which tend to reflect an emphasis on social interaction and relationships. In valuing conversation with children and adults as a means to achieving understanding, my methods of support for children, and my methods applied in research, have similar actions.
Participatory action research and constructivism share basic epistemological assumptions, especially with respect to the relationship of the researcher and researched (Lincoln, 2001). Both methodologies depend heavily on the human as instrument and both rely on subjectivity as a force in understanding human systems. The final result of the inquiry is a co-created product, a collection of knowledge and understanding arrived at jointly between researched and researcher. Action research, as my choice of methodology, is further discussed in Chapter 3.

In my approach to the research I became conversant with the literature relating to critical inquiry (Carspecken, 1996; Kemmis, 2001; Kincheloe & McLaren, 2005; Lincoln & Guba, 2000; Reason, 1998), embracing its ability to disrupt and challenge the status quo and critique not only issues of power but the nature of individual personalities in social interaction and cultural reproduction and the importance of values in shaping research outcomes. Carspecken (1996, p. 3) explains that ‘those of us who openly call ourselves “criticalist” definitely share a value orientation’. Smyth (1991) recognises the difficulties in locating and reconstructing beliefs, referring to the fundamental rethinking of reflection and self-understanding as more than just reflection but a means of altering social practices. In citing the work of Freire (1972, cited in Smyth, 1991) who developed the thinking around problematising teaching based on reflective practices, what becomes apparent is the essence of why teacher attitudes and beliefs are so important. Freire believed all teachers are essentially concerned about social inequalities, and generally direct their work toward positive social change. Action research that applies a critical lens aims to improve outcomes and improve self-understanding and may also assist practitioners to arrive at a critique of their social or educational work and work settings (Kemmis, 2001). Such critique could include the contributions and values of students (particularly those labelled as having a ‘mental health problem’) and their parents/caregivers, in conjunction with those of teachers. As such, action research is an approach to learning that is empowering and aims to move the learner from the unconscious to consciousness. Critical inquiry thus influenced my choice of action research and my focus on exploring teacher values, attitudes and beliefs, social interaction and cultural change.

As I read more and more about research I came to understand at a deeper level the theoretical emphases of theorist Stephen Kemmis. His work in exploring the relevance of critical theory for action research and, in particular, his interpretation and inclusion of Habermas’ (1984) Theory of Communicative Action (Kemmis, 2001), resonated with me as I conducted the research. Kemmis recognised that many of the action research projects familiar to him focused on problems which had arisen for participants in a setting when the personal, social and cultural processes that sustain the setting (which he called the ‘lifeworld’) collide with processes which characterise the setting as a system. Kemmis proposes that communicative action is a decisive contribution to substantive social theory and focuses on the kind of reflection and discussion we engage in when we interrupt what we are doing to explore the nature, dynamics and worth of a social problem. Kemmis claims that the overall task of a critical social science view is to explore and address the interconnections and tensions between the system and lifeworld aspects of a setting as they are lived out in practice (2001). He further proposes that communicative action can be both a means of interpreting the actions of
teachers confronted by educational change and/or a means of creating situations for learning and development.

Applied to this study, Communicative Action Theory became an interpretative tool in understanding the beliefs and attitudes held by participants. As will be demonstrated in Chapter 7, it provided a framework for conceptualising support for children’s mental well-being.

1.5 Theatre of research

Adopting the metaphor of research as ‘theatre’ in this thesis provides a valuable lens through which to observe and better understand the actions of participants (the actors in the research). The value of metaphor lies not only in language alone, but in the way we conceptualise one mental domain in terms of another (Lakoff, 1992). Metaphors are central to natural language semantics and, in the process of the everyday, abstract concepts like time, states, change, causation, and purpose also turn out to be metaphorical (Lakoff, 1992, p. 2).

Turner and Stets (2005) remind us of the dramaturgical metaphor of William Shakespeare who proclaimed, “All the world is a stage, and all men and women merely players”. The metaphor of ‘theatre’ represents a place of action as in a ‘theatre of war’ or ‘theatre of operations’ (Buber, 1970 cited in Schlosser, 1976, p. 97). We might, then, consider an equally valuable metaphor – that of ‘theatre of research’.

In this thesis, the use of the metaphorical imagery of theatre can assist in describing the technical and pragmatic aspects of research, but also helps to convey the nuances of the interactions and outcomes. In viewing social interaction as theatre, attention is drawn to the dialogue (relationships and communication), stage (environment), audience (social culture), staging props (interventions), and actors (children and teachers) who play dramatic roles. Constructing new learning in the action research process depends heavily on the individuals involved, their relationships and interactions. Just as a scene from a play enacts plot, setting, characters, relationships and conflicts, so too does participatory action research represent an unfolding story; an interaction between context (setting), the researcher and research participants (the characters) through dialogue which reveals tensions and resolutions as the various ‘scenes’ play out over time.

The theatre metaphor might be seen to diverge from a conceptual connection to research since it is understood that whilst theatre might encourage the audience to suspend their disbelief, research processes encourage the opposite in seeking comprehensible, legitimate and factual assertions. Where an actor’s theatrical performance may be artificial, it is my role as ‘director’ of the research, to be conscious of false claims and mindful of authenticity. In presenting the ‘play’, which is this research, I have an opportunity to both analyse the whole performance and also to focus on individual actors and their role in the drama. I am also able to focus on the ‘sets’ and ‘scenes’ (the broader school contexts). The play will be shown to comprise both scripted (planned) and spontaneous dialogue and performance where the actors ad lib through individual and group processes, sometimes facilitated by the producer and other times remaining improvised.
In making one final point about the value of the metaphor of theatre, many dramaturgical theorists say that actors need to be aware of the norms, values, beliefs and other symbolic elements that direct how they talk, act and otherwise play their roles. Important also in translating the metaphor to classrooms is the recognition of tacit beliefs and values that impact on performance. Again, these ideas become more significant as the drama unfolds.

1.6 Structure of the thesis

This thesis is presented in eight chapters. Chapter One (the current chapter) has described the background and context for the research. It has drawn attention to the notion of ‘mental well-being’ as a problematic construct that has led to significant debate and confusion not only in relation to how it is defined but also how it is best measured, monitored and addressed. Discussion has pointed to the ways in which schools and teachers have increasingly been implicated in the project of supporting children’s mental well-being, including an increasing array of policies, programs and interventions. The chapter outlined the particular educational context in which the research took place and provided an insight into historical developments around children’s mental well-being within the regional school system that formed the backdrop for the study. The chapter also positioned the study within a personal narrative and explored the assumptions, values and beliefs held by the researcher, and how these shaped the research, including the influence of social constructivist critical inquiry and feminist scholarship. The chapter concluded with a rationale for the use of metaphor – theatre of research - as it is applied to the thesis.

Chapter Two provides the background to the emergence of multidisciplinary influences on children’s mental well-being. Child development theories are explored from both a psychological and sociological perspective. The chapter then outlines significant international influences and developments that have shaped how mental well-being is understood and approached. Details of these global developments illustrate how other countries have responded to, for example, the problem of an increased prevalence of depression and anxiety in children and adolescents. This also contextualises Australia’s social change and the increased interest in the well-being of children, including the conceptual shifts which have occurred in the way mental well-being is supported in schools. The health and education interface has produced a number of frameworks for delivery in schools. Research in relation to school-based programs and approaches is discussed in terms of explicit teaching and universal approaches that promote a supportive school environment. The chapter then explores research relating to the capacity of teachers to respond to children’s mental well-being issues, focusing particularly on their attitudes, values and beliefs.

Chapter Three presents the methodology of the research. It begins by describing the ontological, epistemological and methodological beliefs that underpin the use of action research in this context. It details the initial stages of the research, including the recruitment of participating schools and teachers and describes the methods that were then used to facilitate the research cycles. A brief summary of participants’ backgrounds and a description of their roles in the schools provide a reference for understanding the ‘characters’ whose story unfolds throughout the thesis. Chapter three also details
the methods which were applied to analysis of data, including the reflexive processes involved while working collaboratively with the research participants.

**Chapter Four** addresses the first research question related to the nature of teachers’ attitudes, values and beliefs with respect to children’s mental well-being. This chapter primarily represents learning from the first cycle of the research. It begins by presenting the teachers’ perceptions of children’s mental well-being indicating a number of internalised and externalised concepts. The chapter also presents findings related to teachers’ perspectives of their role in children’s mental well-being highlighting a number of issues such as teacher mental well-being and communication skills in developing relationships. This, combined with data collected on participants’ expectations of the study, resulted in goals emerging for the research which provided a foundation for tracking participants’ initiatives.

**Chapter Five** explores the second research question, which relates to the influence of teachers’ values, attitudes and beliefs on their classroom practice. This chapter constitutes findings from Cycle 2 which explored the way in which teachers and schools engaged in the process of identifying issues and implementing initiatives. The initiatives undertaken by teachers and schools are described and professional growth is reported as changes in attitudes, values, beliefs and practices. The chapter synthesises the five common research goals (discussed in Chapter 4) addressed by schools in this study. A grounded approach to the analysis of these data is used to identify elements that supported teacher change. Each element becomes a theme that elaborates on participants’ individual actions, highlighting important pedagogical concepts and strategies that assisted teachers in differentiating the needs of children and altering environments for learning. The relationship between these actions and teachers’ attitudes, values and beliefs remains central in the analysis. The chapter also explores instances of the absence of change for some participants, exploring the barriers to full engagement with the process of engaging with children’s mental well-being.

**Chapter Six** explores the pragmatic issues which arose in implementing the action research process, and the impact of these issues on the effectiveness of teacher learning and whole school change. Discussion relates to the strengths and weaknesses of different group participation models and explores the dissonance in roles of various stakeholders by reflecting on researcher and participant perceptions of collaborative research. This is further explored through varying stages of teacher motivation and readiness to participate, along with the significant issue of having sufficient time to be co-researchers. The sustainability of support for children’s mental well-being is discussed in terms of the commitment of teachers to maintain innovations. Strategies that promote sustainability are embedded within four themes: leadership; integrating pedagogy; understanding the relationship between perceptions of childhood and children’s mental well-being; and patterns of communication.

**Chapter Seven** attempts to address the third research question by synthesising the findings of Chapter 4, 5 and 6. These findings are examined through communicative action to reveal ways in which children’s mental well-being requires an ongoing critique of existing practice and systems that produce communicative action. Strategies relating to personal, social and cultural communicative action point to the importance of sustaining an in-depth relationship with the topic. Combined with an
ecological perspective, Communicative Action Theory is used to construct a model for action in responding to children’s social and emotional needs. It is argued that communicative action promotes renewal when mutual understanding is pursued in relation to children’s mental well-being.

Chapter Eight returns to the research questions, identifying key points to inform a renewed understanding of children’s mental well-being. Implications for policy, professional practice and research are tentatively headlined notwithstanding the small number of schools and participants involved. A number of recommendations are put forward for further consideration when planning support for children’s mental well-being. Limitations of the study are explained and, from this, suggestions are made for further research, particularly involving children themselves. I also re-examine my own identity as teacher-researcher through the dramaturgical lens, highlighting the valuable role teachers play in children’s mental well-being, regardless of varying contexts (stages) and practices (changing dynamics between children and adults) in bringing about critical action. The chapter ends with a brief personal reflection.
Chapter 2: Teachers take centre stage

This chapter engages critically with key literature sources concerning children's mental well-being, its relationship to learning and its impact on schools. It examines some of the different disciplinary interests that have shaped approaches to understanding children's mental well-being and identifies how these are reflected in international, national and local (institutional) policy responses. Australian trends are specifically discussed to highlight the efforts of the state and federal governments in navigating the ‘problem’ of children’s mental well-being. Attention then turns to the ways in which education and schools have emerged as prominent sites for intervention, resulting in a plethora of programs that target children’s mental well-being. In light of these developments and tensions in defining and addressing children’s mental well-being, the chapter concludes with a rationale for why this study has focused on the perspectives of teachers and their attitudes, values, beliefs and practice.

2.1 Multi-disciplinary influences on children’s mental well-being

The discussion in this section draws on different disciplinary perspectives to explain the changing constructions of mental well-being, as well as of children and childhood (Mayall, 2003). In particular, I examine key understandings drawn predominantly from the disciplines of psychology and sociology to highlight how different philosophical and ontological perspectives shape conceptualisations of mental well-being.

2.1.1 From deficit to strengths-based perspectives

Given its preeminent role in the scientific study of behaviour and mental processes, psychology has had a major role to play in shaping how the mental well-being of children is understood and addressed. The discipline is broad and covers a plethora of theories and approaches. In reviewing a wide range of literature, it was very evident that it was beyond the scope of this study to capture the entire field that has shaped notions of mental well-being. Instead, in the following sections I analyse some of the key literature associated with the emergence of psychologically grounded developments within education - labelling and deficit discourses, positive psychology, psycho-social theorising associated with the affective domain and notions of psychological competence exemplified by emotional intelligence.

Labelling and deficit discourses

In the second half of the 20th century, psychology contributed much to understandings about depression, racism, violence, self-esteem management, irrationality and growing up under adversity but had much less to say about character strength, virtues and the conditions that lead to high levels of happiness and engagement (Seligman & Csikszentmihalyi, 2000). This has been attributed to post war efforts in identifying and treating mental illness. Rowling (2003) asserts that the label ‘mental health’ is constructed in psychology and psychiatry in terms of ‘illness’ and that this focus on illness arises, in part, from epidemiological risk factor research. Rowling describes how ‘risk factors’ can emphasise the deficits of an individual who may be experiencing alienation from school or peers and
how the consequent intervention targets an individual’s weakness by making adjustments to the environment. An alternative to this, as proposed by Rowling, is an emphasis on well-being, which shifts the focus to ‘protective factors’ and identifies the strengths in the individual or the school organisation, resulting in a focus on what can be proactively and constructively responded to rather than becoming preoccupied with the deficits of a situation.

The focus on pathology that has dominated so much of educational psychology can result in a model of the human being lacking the positive features that make life worth living. Deficit approaches are most noticeable when there is a problem focus as highlighted by Alexander (2002 cited in Shucksmith, et al., 2005) who group mental well-being ‘problems’ under the following headings together with recognisable risk factors that might manifest in educational settings:

- Emotional (withdrawal, phobias, anxiety, depression, self-harm);
- Conduct (stealing, aggression, defiance etc);
- Hyper-kinetic (attention problems);
- Developmental (language disorder, autism);
- Eating (obesity, anorexia, bulimia);
- Self-care (soiling, wetting);
- Post-traumatic stress (following trauma such as rape, violent attack);
- Psychotic difficulty (hearing voices, extreme withdrawal); and
- Somatic difficulty (develop tick due to psychological problem).

The language most conspicuous in research emerging from the psychology of mental health uses externalising and internalising descriptors to differentiate prevention and intervention strategies (Greenberg, et al., 2001; O’Kearney & Dadds, 2005). The above list represents the kind of externalising behaviours that often become the focus for biological and neurological problem finding, rather than an ecological perspective that takes into account environmental and social components. Whilst more research has been devoted to externalising patterns such as ADHD, conduct disorder and oppositional defiant disorder (Sawyer, 2004) there is a shifting interest internationally to attend more to internalising patterns such as anxiety, depression and mood disorders. Of particular interest, in recent times, is the relationship between anxiety and depression and anxiety and externalising patterns such as conduct disorder (Farrell & Barrett, 2007). The psychological research into the prevalence and pathology of these problems is extensive and reflective of a medical model of what constitutes mental well-being. The risk is that such labelling focuses the problem on the child and ignores the context in which the behaviour is occurring.

Hill (2004) considers what is valued in terms of intervention and questions the normative assumptions about the nature of well-being, what rights others have to intervene in the ‘life streams’ of human beings, what counts as normal mental health, and what visions of viable community and human flourishing validate our interventions. Conceptualising mental well-being as having a normative state implies the possibilities of deficit. Herman et al.(2004) rationalises the importance of intervention when she describes positive mental health as social and human capital. Without the ‘dynamic of human capital’, as Marshall (2004) describes, human beings are unable to build emotional resilience.
or learn social skills. Whereas Hill cautions those who work with children and their well-being to consider ethical and moral issues before making judgments or attempting to measure or understand a person’s well-being, Marshall claims mental well-being is dynamic and that when we think of the future for human beings we should include intervention as a necessity for sustaining future social capital.

The parallel histories of discontent with deficit-oriented practice in the fields of mental health and school psychology are catalysts for change (Clonan, et al., 2004), and are the precursors to building and maintaining positive institutions that focus on working within the existing system to promote lasting change. Implicit in this trend is the assumption that environments can be promoted to foster individual strengths such as resilience, competence and optimism (Terjesen, Jacofsky, Froh, & DiGiuseppe, 2004). Whilst somewhat oversimplified, Gable and Haidt (2005) describe the new direction as a metaphor, where the psychology of the past has brought people up from negative eight to zero but now is attempting to understand more about how people rise from zero to positive eight. Such a direction changes the starting point for psychologists where they build from the first point of contact (zero) rather than revisiting negative experiences (negative eight). This is likened to the Broaden-and-Build Theory (Fredrickson, 2001) which posits that experiences of positive emotions broaden people’s momentary thought-action repertoires, which in turn serve to build enduring personal resources, ranging from physical and intellectual resources to social and psychological resources.

Psychological influences have constructed mental well-being around externalising and internalising behaviours from a pathology perspective. In educational contexts, however, there is a shift away from medical models to those that focus on strengths-based notions of human behaviour. This has seen the emergence of the positive psychology movement, which has evolved to promote and engage with optimal notions of well-being.

**Positive psychology**

The emergence of positive psychology (Seligman, et al., 2005) brings together solution-focused and strengths-based notions of care and support rather than a deficit focus. A positive psychology construct focuses on conditions and processes that contribute to the flourishing or optimal functioning of people, groups and institutions (Clonan, et al., 2004; Gable & Haidt, 2005; Seligman & Csikszentmihalyi, 2000). Positive psychology research, as applied to well-being, explores issues such as attachment, optimism, love, emotional intelligence, intrinsic motivation and (in more recent times) topics such as ‘laughter, gratitude, forgiveness, awe, inspiration, hope, curiosity, mindfulness, meditation, journal writing, well-being therapy and exposure to green places’ (Gable & Haidt, 2005, p. 104). Seligman and Csikszentmihalyi (2000, p. 5) describe positive psychology as:

> ... a science of positive subjective experience, positive individual traits, and positive institutions promising to improve quality of life and prevent the pathologies that arise when life is barren and meaningless.

Positive psychologists have developed ‘interventions’ or practices designed to maximise positive emotions (Clonan, et al., 2004; Terjesen, et al., 2004) such as raising consciousness of daily events by affirming the good things that happen and recognising what positive psychologists call our
'signature strengths' to create a sense of well-being. Positive psychologists assert that identifying strengths plays a special role in building confidence, and thus bringing happiness.

Contemporary models of positive psychology (Fredrickson, 2001; Kelley, 2004; Seligman, et al., 2005) encompass, for example, Csikszentmihalyi's flow theory, Seligman's learned optimism and Goleman's emotional intelligence. These contributions to the field contend that well-being is a composite of positive attributes based on the recognition of emotion in daily interaction and learning. In many respects, the contributions of positive psychology have been critically important in offsetting the pervasive 'deficit' understanding outlined earlier, whereby what was 'wrong' with the child dominated diagnostic and intervention efforts to 'fix' the problem.

**Development of psycho-social resources**

The emergence of an emphasis on the psycho-social characteristics of the individual, including self-efficacy, self-regulation, motivation, self-concept, self-esteem and resilience, highlights the importance of the affective domain for mental well-being. Hobfoll (2002) describes the associated skills as psycho-social resources that can be applied in the preservation and deconstruction of mental well-being. Social cognitive theory (Bandura, 1977) provides a means of understanding the role of self-efficacy, self-regulation, motivation, self-concept, self-esteem, and resilience in children’s development, including their social and emotional learning. It is often applied in educational contexts and has been linked to perseverance and self-monitoring (Collins, 1982 cited in Bandura, 1997).

Self-regulation, as distinguished from self-control, has become a significant factor in the development of pro-social behaviour and learning (Diaz, Neal, & Amaya-Williams, 1990). The relationship of self-regulation to other learning processes is believed to be bound in origins of social language (Denham & Weissberg, 2004). Self-regulation is closely associated with motivation, where human beings can be proactive and engaged or, alternatively, passive and alienated, largely as a result of the social conditions in which they develop and function (Jenson, Olympia, Farley, & Clark, 2004). Motivation directly affects observational learning, operating largely through such mechanisms as goal setting, self-efficacy and outcome expectations (Bandura, 1977). Accordingly, research guided by Self Determination Theory (Ryan & Deci, 2000) has focused on the social-contextual conditions that facilitate rather than forestall the natural processes of self-motivation and healthy psychological development. Specifically, factors have been examined that enhance rather than undermine intrinsic motivation, self-regulation and well-being. The findings claim that when three innate psychological needs are satisfied - competence, autonomy and relatedness - self-motivation and mental health will be enhanced and when thwarted they will lead to diminished motivation and well-being.

Positive self-concept (Craven & Marsh, 2007) is another psycho-social resource that is prized as desirable for psychological well-being in and of itself, as well as being a mediator of an array of other valued outcomes such as educational and career aspirations, increased adaptive striving behaviours and improved achievement/performance. Self-concept is known to be shaped by attachment patterns and maternal or adult forms of communication and relationships (Mikulincer and Pereg, 2004 cited in Monfries & McAlpine, 2005). Studies concerning attachment theory (Monfries & McAlpine, 2005)
predict that insecurely attached children and adolescents are more likely to move from stress into mental well-being difficulties, precisely because of the increased vulnerability associated with reduced psychosocial resources. Kusché and Greenberg (2006) believe the quality of the emotional attachment of a child to his or her teacher is of crucial importance with regard to the quality of attention, learning and brain development. The executive functions of the left and right frontal lobes (such as frustration tolerance, social problem-solving, self control and managing feelings) are not automatically developed and therefore benefit from adult intervention. Research by Omara et al. (2006 cited in Craven & Marsh, 2007), directed at improving self-concept, found that the more effective interventions incorporated appropriate praise and/or feedback strategies into the program, especially strategies that were contingent upon performance, attributive in nature and goal relevant.

Temperament as a psycho-social resource has been explored through The Australian Temperament Project (Smart, 2008), an ongoing longitudinal study conducted by the Australian Institute of Family Studies (AIFS). The influence of temperament style on a child’s development, together with family and peer relationships and broader environmental influences were repeatedly assessed over 25 years. This study investigated the outcomes for individuals and whether temperament, relationships and environmental issues could be identified as a risk factor. The cohort of 2443 Victorian children were recruited through mothers attending welfare centres and a subset of this group were followed from the age of 10 until they reached age 15-16 yrs. Smart (2008) found that the most important predictors for anti-social behaviour were previous oppositional behaviour, poor school adjustment and association with antisocial peers at age 13-14yrs. While it was previously presumed genetics had a great deal of influence on the child's development, this study was significant in that it found that parenting and relationships between parent and child are critical for development, particularly the parents’ ability to set boundaries for their children. Risk factors such as a difficult temperament and harsh parenting caused later difficulties (Shields, 2007).

Socio-cognitive theories provide understandings of how children learn social skills and explain the interconnectedness of parts of the affective domain. As will be discussed in the following section, the resulting psycho-social resources have become known as ‘competencies’ of the affective domain.

**Mental well-being as a set of competencies**

One understanding of mental well-being which has emerged out of the area of developmental psychology is that of mental well-being as a set of competencies. Evidence discussed in the previous section suggests that psycho-social resources are skills that are learned. Child development theories surfacing in psychological studies promote the idea that competencies are hierarchical and developed over time (Denham & Weissberg, 2004). The language of competency is associated with descriptors such as being properly qualified, capable, adequate or suitable (as defined by the Macquarie Dictionary, 1982). When the word ‘competency’ is used in relation to social and emotional learning it suggests these competencies are assessable and worthy of judgment. Hence a ‘competency based approach’ raises the level of interest and importance of SEL as a policy imperative in education (Fraillon, 2004; Raphael, 2000). Linked with academic success, social and emotional learning requires competencies to be embedded in educational practice. *Measuring Student Well-being* (Fraillon, 2004)
has been put forward as a measurement model for the Australian schooling context. Rather than ‘competencies’, this model adopted the language of ‘dimensions’ in describing intrapersonal and interpersonal aspects of SEL. In Fraillon’s model, these dimensions are reported on by teachers, rather than students’ self-reporting. The model requires teachers to select from a set of pre-defined behaviours as they describe the responses of their students to everyday school situations or hypothetical situations. This approach relies on a core set of positive indicators of children’s mental well-being that are measurable, developmentally appropriate and consistent across education sectors and schools (Denham & Weissberg, 2004).

Competency, as applied within a ‘strengths-based’ approach to prevention and intervention (such as a readiness for school inventory), has been argued to have merit in early identification of developmental issues:

Teachers view children’s “readiness to learn” and “teach-ability” as marked by positive emotional expressiveness, enthusiasm, and ability to regulate emotions and behaviours. Based on these assertions, I suggest a battery of preschool social-emotional outcome measures, tapping several constructs central to emotional and social competence theory, specifically emotional expression, emotion regulation, emotion knowledge, social problem solving, and positive and negative social behaviour (Denham, 2006).

The competencies detailed above have been taken up as part of the emotional intelligence movement. The emergence of the construct of ‘emotional intelligence’ (EI) has added to the debate about how mental well-being can be approached and how it might be facilitated in educational practice. Mayer and Cobb (2000) propose that EI is made up of four branches, encompassing the following psychological abilities and processes: (a) an ability to be aware of, and monitor, emotions and express them appropriately; (b) an ability to use emotions to facilitate thought and to guide selective attention; (c) an ability to understand emotions as they may relate to one another; and (d) the ability to regulate emotions such as calming oneself. This ability EI model (Mayer & Cobb, 2000) represents one of two dominant perspectives on EI. The other is trait EI (Qualter, et al., 2007), which is distinguished as a non-cognitive capability more closely related to personality. Many of the attributes associated with EI are linked to programs teaching SEL.

In attempting to analyse emotional intelligence, researchers have debated whether and how it is distinct from general intelligence, what processes are involved in EI and what impact it has on predicting success in life (Qualter, et al., 2007; Zeidner, Matthews, Roberts, & MacCann, 2003). Others argue its validity in terms of ‘intelligence’ and its originality (Landy, 2005; Locke, 2005). Qualter et al. (2007) propose that EI should be conceptualised as an umbrella term surrounding many previously investigated and empirically supported psychological constructs such as social cognition (Bandura, 1977), empathy (Schlosser, 1976) and emotion regulation (Ryan & Deci, 2000). Mayer and Cobb (2000) believe the concept of emotional intelligence legitimatises the discussion of emotions in school.

An alternative and more complex view of EI argues that it is important to differentiate competencies that are associated with qualitatively different types of processing of emotional events (Zeidner, et al.,
The study of individual differences entails investigating multiple abilities or competencies that are supported by neural, cognitive and social processes at very different levels of sophistication and abstraction from specific behaviours. The challenge for a developmental theory of EI is to show that there is a common core to these multiple processes (2003, p. 71).

Rather than a sequence of developmental stages, each level of emotion function describes part of an integrated approach to such influences on children’s mental well-being. Children, regardless of age, will have qualitatively different experiences as they engage with these three levels of emotion function. The first level (neural) represents innate biological attributes such as temperament, emotional intensity, emotionality or inhibition which impact on ability EI. The second level (social) represents effective learning of rule-based adaptive behaviours for emotion regulation evolving from ecological variables such as a ‘goodness of fit’ between the child and environment. For example, preschool children and toddlers may differ in how easily they learn relatively simple regulative strategies during socialisation, (for example, suppressing emotion when conflict occurs in play and/or when it is time to seek help from a carer). The third level (cognitive) represents the development of self-reflective insight indicated by mindful, metacognitive self-regulation, ranging from understanding and regulating the stream of consciousness (ages 6-8) to awareness of specific cognitive processes supporting future planning (ages 14-16). The usefulness of the three tiered model described here provides an explanation for differences in children’s emotion regulation (Arsenio, 2003) although Van Rooy et al. (2005) have shown that mixed model attributes are more strongly linked to personality rather than cognitive ability and therefore more difficult to change.

Differences in children’s social and emotional understanding can also be related to children with learning difficulties. Researchers have tried to identify the most important social and emotional competencies for these children in social relationships (Elias, 2004; Elksnin & Elksnin, 2003). Skill areas include emotional awareness in self and others, regulating and managing strong emotions, social skills, and interpersonal problem solving skills, each with recommended specific classroom strategies and activities that can be adapted to an individual’s needs (Elksnin & Elksnin, 2003).

Whilst the notion of achieving a set of skills or competencies aligns with a strengths-based understanding of mental well-being it should be emphasised that these competencies can be qualitatively different, and that difference does not imply a deficit (Kelley, 2004). Psychological or cognitive approaches to mental well-being, therefore, point to the significance of a number of psycho-social resources within children that influence academic achievement. Sociological perspectives can explain the qualitative differences in children’s psycho-social resources by drawing on the social context of the child and the ways in which mental well-being is shaped by relationships, language and ecologies.
2.1.2 **Sociological influences on children's mental well-being**

The psychological influences discussed above have focused on individual cognitive processes that bring about mental well-being. Sociological influences, in contrast, place the child in a context and examine how social structures and culture influence the arousal and flow of emotions and the social interactions of children and other individuals around them (Turner & Stets, 2005). The realisation that human beings come into existence, attain consciousness and develop throughout their lives in relationship to others suggests mental well-being is also located within a social process. One of the most influential contributions in progressing understandings of the ways in which social contexts interact with, and influence, children's development is ecological theory.

**Human Ecology**

The work of Bronfenbrenner (1979, 1986) has been seminal in attempting to understand and describe the social ecology of children's lives. Bronfenbrenner's work (1979) posits that the developing organism (child) is strongly influenced by their context, and hence it is important to understand the significance of social influences on a child's experience. Bronfenbrenner's Ecological Theory is represented by a model consisting of four spheres for classifying context, beginning with those ecologies in which the child directly interacts and proceeding to increasingly distant levels of the social world. The first sphere, the microsystem, is composed of ecologies in which the child directly interacts, such as the family, school, peers and neighbourhood. The second sphere, mesosystem, encompasses the relationship between family and school, parents and the child's peer group. An absence in this sphere of relationship or attachment creates a risk factor in children's development. The exosystem or third sphere incorporates contexts and actions that indirectly impact on the child's development, such as social support, the legal system, social welfare system and mass media, all of which generate policies and practices altering the interactions between microsystem and mesosystem. The fourth sphere, the macrosystem, relates to the culture/s or subculture/s within which the three aforementioned systems are located. More recently a temporal dimension to the ecological model, the chronosystem was added to acknowledge the developmental interplay between the child and their environment over time (Bronfenbrenner, 1986; Peters, et al., 2010).

The ecological model has provided important insights which can inform intervention. From this perspective, human developmental domains such as mental well-being; socio-emotional functioning and academic performance are driven by proximal processes (Dalton, Elias, & Wandersman, 2007). Proximal processes are the increasingly complex interactions between the individual and the environment that occur throughout the numerous ecological systems in which individuals are embedded (Benner, Graham, & Mistry, 2008). For example, within the family microsystem, parental monitoring of children's activities would be a proximal process while in the school microsystem, one proximal process could be the extent to which teachers and other school personnel treat children fairly. Structural characteristics of families (e.g. parental education and living arrangements) and of schools (e.g. academic tracking such as national testing) have been found to influence these proximal processes. Of greater influence, however, are school processes and interventions that foster better student involvement through extracurricular activities and processes that increase parental
involvement (Benner, et al., 2008). Given this understanding, a narrow intervention that focuses primarily on the child’s skill development or quality of classroom environment (microsystem) may not necessarily sustain change.

An ecological model provides not only a tool for understanding the developing child but also for understanding the core values of community psychology such as social justice, respect for human diversity, citizen participation and family wellness (Dalton, et al., 2007). It can guide the decision making about where intervention is most appropriate through understanding the layers of influence on a child’s behaviour and cognitive development (Greenberg, et al., 2001). Decisions about whether changing the behaviour and attitudes of individuals (person centred) or changing the nature of the system’s operation (environment focused) are encouraged within the model (Weissberg, Kumpfer, & Seligman, 2003). The significant issue for mental well-being in schools is the way in which state and regional educational policy constructs and makes decisions about an exosystem (third level) of protection and support (Peters, et al., 2010). An ecological model not only defines the interrelatedness of each level within a supportive environment but it also functions as a comprehensive school-based social framework (Cappella, Frazier, Atkins, Schoenwald, & Glisson, 2008).

**Changing constructions of childhood**

What is changing, and for many has changed, is the view that children are passive recipients of the culture into which they were born (Christiansen & James, 2001; Matthews, 2007; Mayall, 2003). Scholars of the sociology of childhood focus on how particular representations of children affect their relationships, rights and responsibilities. A growing body of literature explores the sense that children make of their own worlds and provides evidence that children actively construct these (Corsaro, 2005; Denham & Weissberg, 2004; Graham, 2011; James & Prout, 1997). Mayall (2002) advocates for the ‘looking up’ of childhood, where children provide their own path to learning and socialisation rather than the traditional ‘looking down’ perspective whereby adults position children, restricting them to subordinate and protected social roles. This shift is significant in that it acknowledges children as ‘agents in social relations, and views childhood as a social category worthy of study and fundamentally implicated in social relational processes’ (Mayall, 2002, p. 3). Matthews (2007) supports the ‘new’ sociology of childhood which sees children as capable of making sense of, and affecting, their societies. From such a perspective, children and young people are not acculturated by adults alone, but also by peers. Children produce and participate in their own unique cultures by creatively appropriating information from the adult world to address their own concerns (Corsaro, 2005). These new understandings of childhood are reflected in some contemporary intervention models such as the use of explanatory styles in response to bullying, restorative practices, circle time and role play activities, which all invite the children to solve the problem.

Also new to the sociology of childhood are perspectives that suggest children are born with social understanding rather than it being developed at a particular age. The idea of ‘the child’ as a moral agent from a very young age (babies) is one that adults can find difficult and somewhat contradictory (Mayall, 2002). The notion of ‘developmental psychology’ (i.e. Piagetian and Kohlberg approaches to moral development over time), according to Matthews (1984 cited in Mayall, 2002), has had a greater
influence than any specific findings of developmental psychologists or any particular theories as to how children develop, on the way adults think about children. Adults, he argues, accept the idea that children go through various stages and that these stages move children from relative inadequacy to relative adequacy. Yet in daily interactions and relationships with other children and with adults, children confront issues of justice and fairness when responding to others. They respond to others’ actions and feelings and meet approval or disapproval of their own actions. Morality is a fundamental, natural and important part of children's lives, from the time of their first relationships. Kagan (1986 cited in Mayall, 2002) says that children are programmed and prepared to make moral judgments in the same sense children are prepared or programmed to speak, suggesting that children start to make moral judgments at the age of two.

A relevant study in Scotland (Ostberg, 2003) which focused on social relations in classrooms demonstrates how sociological researchers have become increasingly focused on children's constructions of their social worlds. The study found that peer status and status distribution across a classroom is a highly important life situation for the individual child, impacting on their mental well-being. Based on 13, 932 children in 542 classrooms, the results show a clear link between a student's status and position and their level of malaise or well-being, irrespective of gender, or the number of friends. This study demonstrated that peer hierarchies can have a significant influence on the well-being of children, regardless of their circle of friends or adult interventions.

The so called ‘new’ sociology of childhood, now often referred to as ‘childhood studies’, emphasises the importance of taking into account relationships between adults and children (Matthews, 2007). This means encouraging teachers to listen to and actively reflect on the social lives of children, and in doing so, address rather than ignore children’s peer relationships. This has significant implications for how relations of power are conceptualised and managed. Typically, children are perceived as lacking the power afforded to adults because the perception is that children are not adults; and as individuals and as a social group, they lack the power of adulthood (Corsaro, 2005). This lack can be constructed variously as deficiency, disadvantage and/ or oppression - constructs that are questioned and challenged by the sociology of childhood. From such a perspective, childhood cannot be generalised or universalised, and childhood studies stress the plurality of childhoods (James & Prout, 1997; Matthews, 2007). Such understandings of childhood are reflected in mental well-being policies such as national policy directions and initiatives discussed in section 2.3.2 which recognises the importance of heterogeneous groupings across diverse populations, where children in different social locations live and experience childhood differently.

**Socio-cultural Theory and mental well-being**

A key influential theorist who has radically transformed sociological understandings of children and childhood is Vygotsky. Vygotsky’s Socio-cultural Theory (Moll & Whitmore, 1993) and social constructivism (Crotty, 1998; Schunk, 1996) are intertwined through common beliefs, based on the value of the social environment in human learning. Underpinning Vygotsky's Socio-cultural Theory is the view that socially meaningful activity is an important influence on human consciousness. Vygotsky considered the social environment as critical for learning and argued that the integration of social and
personal factors produces learning. Social activity is a phenomenon that helps explain changes in consciousness that unifies behaviour and mind. Vygotsky's most notable work around the 'zone of proximal development' draws on an understanding of the relationship between affect and thought (Mahn & John-Steiner, 2002). This theory suggests that it is incorrect to think of the 'zone' as solely a characteristic of the child or of the teaching, but of the child engaged in collaborative activity within specific social discourse or environments. Using this analysis, the socio-cultural system within which children learn is mutually and actively created by teachers and students. A major premise of Vygotsky's theory is that transformation of basic processes into higher psychological functions occurs within the child's social interactions and through the use of culturally determined tools and symbols (Diaz, et al., 1990). Transformation of basic processes occur through everyday social interaction in the classroom, where teachers mediate the learning environment through verbal cues and positive statements (Glaze, McLean, & Hogarth, 2003).

Vygotsky (cited in Diaz, et al., 1990) suggests that children's basic processes such as perception, attention and memory capacity are transformed in the context of socialisation and education, particularly through the use of language. Corsaro (2005) advocates replacing the concept of socialisation with 'interpretative reproduction'. The term 'interpretative' captures the innovative and creative aspects of children's participation in society. The term 'reproduction' captures the idea that children do not simply internalise the workings of society and culture, but actively contribute to cultural production and change. The phrase also implies that children are, by their very participation in society, constrained by the existing social structures and by social reproduction. Self-formulated plans and goals, therefore, are reliant on the degree and quality of interpretative reproduction. Vygotsky proposes that, before children learn to talk, they are sensitive to right and wrong and can infer possible mental states in others and also anticipate adults' reactions to their actions. With parental or adult guidance, children engage naturally with moral issues and by four years old are able to develop a firm sense of obligation to share with others (Mayall, 2002). Again, from such a perspective, moral agency is possible at a young age.

Socio-cultural perspectives attempt to construct social learning by 'shaping the mind', connecting participation with emotional investment (Miller & Goodnow, 1995). This means children can build on prior learning if adults or teachers construct the social activity to include ways of drawing on their consciousness (Wells, 1999). Goodnow et al. (1995) believe teachers have the capacity to construct environments where children create knowledge using cultural objects and language. Through practices which recur in everyday life, children are provided with repeated opportunities to invest in values, with ways of interpreting experience, and with the practice itself (Goodnow, et al., 1995). Here, too, participation leaves its mark on the person through the production of an affective stance often noted in behavioural responses such as enthusiastic involvement, indifference, resistance or playfulness. Like ability and identity, an affective stance is likely to be created and re-created in practice (Miller & Goodnow, 1995). Hence socio-cultural perspectives suggest active involvement in daily classroom practices scaffold experiences for the development of children's mental well-being.
The underlying tenets of Socio-cultural Theory can contribute to understandings of mental well-being. The premise of Socio-cultural Theory is that the social environment is critical for learning, suggesting that mental well-being can be enhanced through social and emotional skills. Social and emotional learning (SEL), as described in Section 1.1.4, has its genesis in Socio-cultural Theory and is now accepted as a legitimate response in promoting mental well-being. Socio-cultural Theory provides a framework for understanding how each of the important SEL competencies are processed and enacted by the individual. Figure 2 below attempts to capture the interrelatedness of socio-cultural theory and social constructivism with social and emotional learning and children's mental well-being, as is relevant in this study.

Figure 2. The interrelatedness of Vygotsky’s Socio-cultural Theory, social constructivism and Social and Emotional Learning Competencies

Vygotsky’s Socio-cultural Theory and Social constructivism

Language Development  
Private Speech Self Talk  
Resilience  
Metacognitive Awareness  
Social Skills  
Empathy

Raising Consciousness  
Positive Statements  
Gift of Confidence  
Self-worth  
Self-esteem  
Self-efficacy  
Self-concept  
Self Awareness

Regulating Thoughts and Actions  
Zone of Proximal Development  
Competence  
Autonomy  
Relatedness  
Self-determination Theory  
Self-evaluation  
Self Regulation  
Motivation

Social and Emotional Learning Aspects

Each SEL component is shown to be mapped onto a component of the socio-cultural framework, representing constructions that lead to socially meaningful activity and understanding. The diagram suggests that SEL is part of a much larger view of the child’s world, where development of competencies such as self-regulation and motivation are interrelated and interdependent within the classroom context (Ryan & Deci, 2000). SEL does not represent one single cognitive analysis of how mental versions of the child’s world should be, but rather is a means of understanding the child’s world as the child sees it (Scwandt, 2000). For example, from a social constructivist perspective there is no single way of understanding empathy, since empathy is dependent on the individual’s use of metacognitive skills, private speech, self talk and how the individual positions themselves in relation to others (Brown, 1999; Schunk, 1996). Empathy in one social interaction may be constructed differently.
in the next for the same individual, therefore empathy is more easily understood and teachable in context (Zins, et al., 2004).

Further explanations of social and emotional development can be located in conceptualisations of emotions. As an adjunct to socio-cultural perspectives the sociology of emotion positions emotion studies in relation to sociological outcomes, offering a theoretical perspective on the origin of emotions and their impact on mental well-being and social interaction (Manstead, Frijda, & Fischer, 2004; Turner & Stets, 2005). Emotion studies provide a crucial link between micro- and macro-levels of social reality. In children, emotions may be differentially developed, whereby some emotions are elaborated and others underdeveloped. For example, anger may be elaborated in boys (but not girls), whereas empathy may be elaborated for girls but not boys. Variations in the sequence, constraint and diversity of exposure to an emotion influence children's cognitive construction of an emotion. Performance can relate to physiological differences in reflexivity, which is the ability of individuals to see themselves as objects by reading the responses of others to their behaviours (Turner & Stets, 2005). The reflexive process can transform emotions into something different. According to Turner and Stets (2005), children can work reflexively to do one or all of the following: (a) emotional identification - thinking about their feelings; (b) emotional displays - verbal devices or behavioural devices such as facial expressions; and/or (c) emotional adjustment - cognitive work which is about thinking differently to feel differently and bodily work such as exercise or breathing to produce a certain feeling. Teachers, in becoming more cognisant of the nature of reflexivity in controlling emotion in relationships, recognise the importance of their interpersonal effectiveness in the classroom (Zins, et al., 2004). If children, through the lens of the ‘new’ sociology of childhood, are less reliant on adults (Matthews, 2007), capable of interpretative reproduction (Corsaro, 2005) and have moral agency (Mayall, 2002) then the value of the sociology of emotion lies in its capacity to explain the flow and arousal of children's emotions underpinning these claims.

Rosenberg (1991, cited in Turner & Stets, 2005) would add that facilitating interpersonal effectiveness requires reflexivity in social constructions of knowledge and interaction. He describes ‘cognitive’ reflexivity as a process observed when children’s empathetic knowledge operates to understand the consequences of another child's behaviour and the match of that behaviour to what was intended by the child. A further intrapersonal process linked to regulating thoughts and actions is labelled ‘agentive’ reflexivity, where children actualise potential and take joy and a sense of fulfilment from being aware of their abilities and talents. The same might be said for teachers who deliver interpersonal effectiveness through ‘cognitive’ reflexivity in interactions with children and activate ‘agentive’ reflexivity in terms of self-efficacy.

In this section, sociological influences on children's mental well-being have been located as a way of understanding the social ecologies in which children live and interact, as well as the changing constructions of childhood that are now a central feature in any analysis of children's lives. Socio-cultural theory has contributed substantially to understanding the influence of social interaction in the development of social and emotional competencies. Such developments have significant implications for the way in which we understand adult-child relations, as well as for how we approach a ‘problem’
such as children’s mental well-being. If we take seriously the notion that children are social agents who are active in the construction of their own lives, and that relationships are central in the development of psycho-social competence, there are significant implications in terms of the attitudes, values and practices for the adults who engage with children. The analogy here is that emotions can be felt and created, just as emotions are created and acted out in dramatic performances.

In summary, mental well-being is a vexed construct, informed by different disciplines producing different strategies for the intervention and prevention of problems. Contrasting approaches distinguish whether mental well-being should be characterised by either positive or deficit individual traits or by interrelational development within a social context. In an attempt to explicate how these different elements have been applied, the following section canvasses some key international developments and explores the issues that have been foregrounded.

2.2 The international context of children’s mental well-being

In this section I explore the literature related to the international context of children’s mental well-being. Discussion begins with international initiatives, which provide a means of measuring and comparing countries in relation to the well-being of their children, and what such initiatives say about the imperative of mental well-being. A number of significant international policy directions, emerging particularly from the United States and the United Kingdom, provide background to the Australian context, where research has mainly focused on prevention and risk factors.

2.2.1 Emerging emphasis on international comparison

The true measure of a nation's standing is how well it attends to its children - their health and safety, their material security, their education and socialisation, and their sense of being loved, valued and included in the families and societies into which they are born (UNICEF, 2007, p. 1).

In recent times there have been several significant studies internationally highlighting the importance of developing a set of factors that can be used to measure children’s well-being (Fraillon, 2004; Konu & Lintonen, 2006; Pieris-Caldwell & Bryant, 2009). Such studies indicate a widespread concern for the problem of children’s well-being. Documents such as the Innocenti Report Card 7 (UNICEF, 2007) provide international direction, including a series of indicators, intended to assess and compare the performance of a country in relation to children’s mental well-being.

UNICEF’s latest report on children’s well-being provided comparative statistics on the performances of OECD countries (those western countries considered to be economically advanced, for example Australia, United States, England, Germany, Russia) in securing the rights of their children. This Innocenti Report Card 7 (UNICEF, 2007) identifies six dimensions for measuring children’s well-being, including material well-being, health and safety, education standards, peer and family relationships, behaviour and risks and young people’s own subjective sense of well-being. The latter four (education, relationships, behaviour and subjective sense of well-being) are specifically related to mental well-being.
As an organisation that promotes the rights of the child, UNICEF considers the development of these six dimensions of child well-being to represent a significant step forward in measuring and comparing the well-being of children across countries of the OECD. One finding of (and assumption underpinning) the report is that economic poverty, while having strong causal links to children’s health, cognitive development, self perception, relationships and risk behaviours, does not alone indicate impoverished well-being. The report states ‘there is no obvious relationship between levels of child well-being and GDP per capita’ (UNICEF, 2007, p. 38).

Despite our economic prosperity, Australian children do not perform as well on indicators of health and well-being as children from other countries. Australia ranked 13 out of 23 OECD countries in mental health (ARACY, 2008). In particular, Indigenous Australian children and young people are significantly disadvantaged and reports of Australian young people’s sense of ‘feeling like an outsider’, ‘feeling out of place’ (6.7%) and ‘finding social engagement a difficulty’ (7.7%) were above the OECD mean. While Australian subjective well-being (i.e. health, school life and personal well-being) ratings were below many other OECD countries, Australian educational well-being overall ranked seventh in the world.

The *Innocenti Report Card 7* claims to be the most comprehensive assessment of children’s mental well-being to date and seeks to understand what is happening for children in OECD countries:

> When we attempt to measure children’s well-being what we really seek to know is whether children are adequately clothed and housed and fed and protected, whether their circumstances are such that they are likely to become all that they are capable of becoming, or whether they are disadvantaged in ways that make it difficult or impossible for them to participate fully in life... we seek to know whether children feel loved, cherished, special and supported, within the family and community and whether the family and community are supported in this task with public policy and resources (UNICEF, 2007, p. 5).

With its emphasis on international measurement and comparison, this report has proved to be a significant influence on countries’ willingness to respond to the well-being of their children and a powerful stimulant for change, particularly in cases where one nation’s performance is compared less favourably to another’s. Such political pressure for accountability has precipitated support for children’s mental well-being, with the intention of promoting better futures for them. However the UNICEF and similar national report cards have also been critiqued as fuelling social concern about research on children because they exemplify a deficit model approach to studying children’s lives (Morrow & Mayall, 2009).

While this process of international comparison ‘can never be freed from questions of translation, culture and custom’ (UNICEF, 2007, p. 39) it is possible to examine the strengths in one country as a means for improving our own environment for supporting children’s well-being and identifying areas of concern. Ben-Arieh (2005) cautions researchers to include international indicators that move beyond the quantitative measures focused on aspects of survival (such as economic well-being) to an acknowledgement of qualitative aspects of well-being, such as recognition of children’s rights,
childhood as a phase in itself and the need for children to report on their own experience. Nordic communities fared extremely well in the Innocenti Report Card 7 and it is their approach to well-being that is seen to be inclusive of these more qualitative methods. The Netherlands, Sweden and Denmark ranked in the top three overall with Sweden and the Netherlands rating first for behaviour and risks and first for subjective well-being, respectively.

Finland, which rated fourth overall, was shown to highly value the presence and measurement of well-being in their schools (Konu & Lintonen, 2006). To exemplify the approaches to well-being being taken in Nordic countries such as Finland, the School Well-being Profile, based on Allardt’s sociological theory of welfare (Konu & Rimpela, 2002), assesses well-being as an integrated component of the school setting and deeply connected with teaching, learning and achievement. In this model, well-being is divided into four categories: school conditions (having); social relationships (loving); means for self fulfilment (being); and health status (living). In the self-fulfilment category of the Finnish study, pupils’ participation in school development was a key area for reform. Studies in the UK (Shucksmith, et al., 2005) and Australia (Wyn, Cahill, Holdsworth, Rowling, & Carson, 2000) have similarly concluded that improvement in social relationships, such as teachers’ interest in how pupils are doing and teachers’ fair treatment of children, required attention. Community participation, social connectedness, safety and the physical status and children’s sub-cultures are the non-traditional domains of children’s mental well-being which have been recognised in these above examples but are difficult to measure, largely because of their qualitative dimensions (Camfield, Streuli, & Woodhead, 2009).

2.2.2 Policy directions from the United States and United Kingdom

Australian developments in relation to children’s mental well-being have been heavily influenced by policy and practice internationally, but particularly in the United States and United Kingdom. It is interesting to reflect, then, that according to the Innocenti Report Card 7, both the United States and United Kingdom average comparative position for all six dimensions was at the lower end, ranking 18 and 18.2 respectively (from 21 OECD countries) in relation to their children’s well-being.

Legislative reform in both the United Kingdom and the United States was described by UNICEF as having led to the improved provision of services for children. In the United Kingdom, the Every Child Matters framework sets out a national structure that aims to build services around the needs of children and young people. Every Child Matters has been described (Qualter, et al., 2007) as an approach to the well-being of children which sends a clear message to UK schools that children and young people should: be mentally and emotionally healthy; be safe from bullying and discrimination; be safe from crime and anti-social behaviour; achieve personal and social development; develop self confidence; and successfully deal with significant life changes and challenges. England and Scotland have focused strongly on what they term the Social and Emotional Aspects of Learning (SEAL), although there has been some criticism of the SEAL program, with claims that it needs to be less prescriptive and include a wider range of skills (Craig, 2007; Patty, 2008).
In the United States, one of only two countries (the other being Somalia) not to ratify the United Nations Convention on the Rights of the Child, there has been a different emphasis placed on children’s well-being. The No Child Left Behind (NCLB) policies of 2002 have focused more on children’s competences and peer relationships and less on children’s lack of power in relationships with adults (Farrell & Barrett, 2007).

The Innocenti Report Card 7 highlighted that poverty has a far greater impact on children’s well-being in the US than in countries such as Australia. US census data from 2005 indicated that 18% of children (13 million) lived in poverty with more than 7% (6 million) living in extreme poverty compared to Australia which had 14.9% of children living in poverty (ABS, 2001). Dearing (2008) describes the impact of this poverty as a far reaching and long term problem, contributing to developmental dysfunction, and delay in cognitive, language and social-emotional growth. Children growing up poor are more likely than middle-class children to display social and emotional problems in two broad areas: externalising interpersonal problems, such as aggression, destructive behaviour and hyperactivity and internalising intrapersonal problems such as anxiety, depression and fearfulness (Dearing, 2008). Children living in poverty display less positive social behaviour and have lower levels of competence in their relationships with peers and adults. The economic cost to the US in terms of additional family income from the government and mental well-being support and intervention amounted to 4% of GDP or $500 billion per year (Montgomery, 2009). Costs include welfare payments and early interventions, which are directly targeted toward educational strategies including high quality early education and parent training, aimed at improving family relationships.

In the United States, the Collaborative for Academic, Social, and Emotional Learning (CASEL) evaluates and supports research and teacher professional development in relation to social and emotional learning (Durlak, et al., 2011; Payton, et al., 2008). CASEL represents a significant strategy developed in the US to support the NCLB policy. It is a consortium of researchers and educators based at the University of Illinois, Chicago, whose major goal is to improve children’s health and well-being through educational avenues. They have specifically grown to support US state and national policymakers and mental health professionals in their goal to bring about change in the delivery of services and thinking regarding children who need mental well-being support (Koller & Svoboda, 2002; Power, 2003). CASEL describe a ‘paradigm shift’ from a focus on mental illness and pathology to mental well-being, with its emphasis on a strengths-based approach related to developmental psychopathology and resilience. As previously signalled, this approach reflects the need to construct a positive environment where mental well-being flourishes with a particular emphasis on the importance of schools where children and adolescents spend a majority of their time:

Increasingly, school personnel, including general education teachers, are being recognised as people who can help bring preventive mental health services to children in need (Koller & Svoboda, 2002, p. 291).

CASEL’s work has thus focused on preventive, proactive methods in supporting children’s mental well-being through research and education. They advocate a shift in emphasis from medical management, psychotherapy and institutionalisation to advancing positive mental well-being practices.
Similar initiatives have also been evident in the United Kingdom. The Southampton Education Region of the Inner London Precinct, for example, has made ground-breaking systemic changes, prioritising emotional literacy as one of their main strategic goals. Faupel (2006, p. 167-168) says:

Cutting through the floss to get to the candy, the significance of emotional literacy is that it reflects a concern that schooling has fundamentally lost its way. Traditionally, we have distinguished between the head (thinking), the heart (feelings) and behaviour (action). It seems we have lost sight of that essential human wholeness in embracing a narrow view of what education (schooling) is all about, focusing exclusively on academic and behavioural aspects of human development.

In a similar move, the Board of Education in Plainfield, New Jersey, also introduced a district-wide SEL policy, identifying SEL as part of the core mission of academic education (Romaz, et al., 2004).

The US and UK have both also demonstrated increased levels of research and development in their tertiary education sectors related to enhancing children’s well-being. For example, Koller and Svoboda (2002) were involved in establishing the Centre for the Advancement of Mental Health Practices in Schools, as part of the University of Missouri-Columbia’s Department of Educational and Counselling Psychology. This model of tertiary level involvement directly with schools is also evidenced in the UK through Bristol University’s School of Emotional Literacy which offers a postgraduate certificate in emotional literacy development for educators. The Scottish Executive Education Department (SEED) and the University of Aberdeen have also collaborated on research which investigated the link between mental health and behaviour in schools (Shucksmith, et al., 2005). This study suggested that, in the most part, curriculum had been approached as ‘product’ rather than ‘process’ and the report described a number of interesting process-based initiatives which provided measurable success in improving children’s social and emotional competence. Another important finding related to the importance of professional partnerships and of viewing the school as central in facilitating networking with outside agencies to support children’s mental well-being and service improvement.

 Whilst not claiming to be a fully comprehensive account, this section has explored relevant international research and practices and discussed how various nations compare in terms of children’s well-being. In the following section I will explore how Australian policies and practices regarding the promotion of mental well-being have evolved in comparison to overseas developments.

### 2.2.3 Policy and research in the Australian context

Australia’s policy and research over the past decade has been heavily influenced by the *Mental Health of Young People in Australia* report (Sawyer, et al., 2000) which highlighted the significance of the issue, and has become a benchmark for Australian service providers, establishing valuable baseline data on the extent of children’s mental health problems (Raphael, 2000). The survey drew attention to important issues in relation to children and adolescents, including emotional and behavioural problems, low self esteem and limitations in school and peer activities. While the study and subsequent report has been very beneficial it is acknowledged that the survey had limitations, particularly in relation to diversity, including its lack of representation of Aboriginal and Torres Strait Islander communities, homeless youth and those in hospitals and in detention centres. It also failed,
for example, to include a focus on anxiety disorders and post traumatic stress conditions. Despite these limitations the report has led researchers to recommend an increased emphasis on prevention rather than merely treatment.

In education there have been several national initiatives, for example MindMatters and beyondblue Schools Research, particularly in secondary schools, which have aimed to address well-being issues (Noble, McGrath, Wyatt, Carbines, & Robb, 2008; Wyn, et al., 2000). Australian trends in research and services related to children's mental health and well-being have been reported on at some length (for example ARACY, 2008; Australian Institute of Health and Welfare (AIHW), 2008; Fraillon, 2004; Michail, 2011; Wyn, et al., 2000) highlighting the plethora of initiatives which have occurred or are occurring throughout Australian states. Universities, in conjunction with sectors such as education, health and family services, have been involved in research projects targeting sustainable improvement of children's well-being.

Different government sectors have responded to the mental well-being imperative with a range of approaches. As an example of the type of prevention research which has emanated from the health field, a longitudinal investigation of women's and children's health (Bor, McGee, & Fagan, 2004), involving over 8000 participants, analysed five types of risk factors (child characteristics, prenatal factors, maternal/familial characteristics, maternal pre- and post-natal substance use and parenting practices), based on maternal reports, child assessments and medical records. Adolescent antisocial behaviour was measured when children were 14 years old, taking into account children's prior problem behaviour (e.g. aggression and attention/restlessness problems at age 5 yrs) and marital instability in the child's home, which was demonstrated to double or triple the likelihood of antisocial behaviour. This study has been used to inform prevention programs that target risk factors likely to lead to problem outcomes for Australian youth, emphasising that if aggressive behaviours can be identified early (between age 5 and 14) targeted intervention can reduce antisocial behaviour. Formulating intervention approaches such as these have also been associated with studies in psychology which offer more strengths-based notions of prevention.

Within health services the National Action Plan for Promotion and Early Intervention for Mental Health (Mental Health and Special Programs Branch, 2000), has focused on providing a comprehensive service delivery model based on a population mental health approach (Raphael, 2000; Sawyer, 2004). The subsection Children 5-11years claims that the start of formal schooling marks a major transition point and significant opportunity for promotion of mental health. It advocates a mental health promotion, prevention and early intervention focus in schools, based on evidence-based approaches to family support, child behaviour and disability. The evidence base has been built around risk and protective factors that will either show the early signs of mental health problems or medical options for intervention and therapy. These prevention strategies target 15 priority groups: seven lifespan age groups (e.g. 5-11yr olds); five marginalised and disadvantaged population groups (e.g. Indigenous) and three specific strategic groups such as the media and health professionals. In terms of the interconnectedness between groups the action plan details the way in which various government and private organisations are linked.
The more recent National Action Plan on Mental Health 2006-2011 (COAG, 2006) has superseded the 2000 National Action Plan, adding to it The National Suicide Prevention Strategy and thus enhancing promotion, prevention and intervention strategies. This updated plan also included a funded mental health care plan for children who need psychological support, recommended through their general practitioner. This step creates opportunities for all young Australians to reduce risk whilst accessing mental health intervention and support. Government departments such as family services (including welfare and social workers), police and juvenile justice are still attempting to work closely with education and health departments through an interagency approach (Lee, Dillon, Dorries, Beech, & McDermott, 2004; Nisbet, Graham, & Newell, 2011). Independently run organisations such as the national depression initiative beyondblue (Sawyer, 2004) have funded research aimed at reducing depression in adolescents.

Other population mental health approaches developed by the Commonwealth Mental Health Service include the Principles and Actions for Services and People Working with Children of Parents with a Mental Illness (2004). This document advocates strongly for the rights, care and protection of the child, emphasising dignity and respect for families. There is support in this document for the prevention of further well-being issues in children by engaging all stakeholders such as education, child protection and child and family health workers in identifying psychosocial problems and risk factors and supporting parent and child relationships. A similar approach was taken earlier by the Child and Adolescent Mental Health Service (CAMHS) model (Raphael, 2000) which has influenced more recent cross-sectoral actions and processes. A collaborative multidisciplinary approach informed by, and inclusive of, psychology, social work, nursing, occupational therapy, speech pathology and special education has been a product of these developments. CAMHS continues today to advocate for this multidisciplinary approach identifying the role of schools at all levels through its components of care (eg. mental health promotion in schools, prevention and identification) and its differentiation of levels of care (primary, secondary and tertiary). The CAMHS model advocates that primary health care provides the first point of contact for people in the community seeking help and includes school counsellors along with general practitioners, paediatricians and community health centres. There is however, an assumption in this model that all schools are aware of their collaborative role with other mental health agencies and have access to counsellors or trained personnel to facilitate the kind of mental health promotion, prevention and intervention necessary for a CAMHS approach to a comprehensive system of care.

From these policy and research developments over the past decade or more, we can see that schools have become a major focus for promoting mental well-being. In the following section a range of school-focused initiatives which have arisen in this context are described.

### 2.3 Schools as a focal point for mental well-being

With western democracies experiencing significant social and health issues, including rising rates of mental illness and high levels of social exclusion, many overseas governments have looked to
education services to support prevention and early intervention initiatives. The development of whole-of-school approaches which bridge between health and education, always promised to be confusing and complex (Rowling & Gehrig, 1998). Yet today the role of schools and preschools in supporting a learner’s emotional and social development and competence is seen as being just as important as their role in supporting academic development and competence (Holden, 2005). In this section I examine the responses of schools and of the Australian education departments to the health promotion discourse and their responses in relation to prevention and intervention.

2.3.1 The foundation of a ‘health promotion’ discourse in schools

Much of our current understanding of schools as important contexts for mental health development owe its origins to the work of the World Health Organisation (WHO) (Hendren, et al., 1993). WHO’s monograph, Mental Health Programs in Schools, served as a model framework for comprehensive approaches to promoting mental well-being. This document emphasises the unprecedented opportunity schools have to improve the lives of young people, providing examples of some of the strategies employed by countries such as Norway (in relation to bullying) and the United States (in relation to ‘at-risk’ children). The WHO emphasises that, with or without the full support of families and the community, schools are the best places to develop mental well-being programs for children because:

- almost all children attend school at some time during their lives;
- schools are often the strongest social and educational institution available for intervention;
- schools have a profound influence on children, their families and the community; and
- young peoples’ ability and motivation to stay in school, to learn, and to utilise what they learn is affected by their mental well-being.

The WHO’s work, whilst nearly two decades old, proved to be an important catalyst for change in how mental well-being is conceptualised and provides clear direction for a common understanding and consistency across national and international approaches. This framework also positions schools as having the capacity to link the contributions and values of students and their parents/caregivers in conjunction with those of teachers.

The now globally implemented ‘health promoting schools’ model (cited in Chapter 1 as the Comprehensive Mental Well-being Promotion in Schools Model) was developed from the original WHO intervention framework (Hendren, et al., 1993, p. 6) and was first promoted by the European Network of Health Promoting Schools (ENHPS) (Burgher, Rasmussen, & Rivett, 1999), a network now known as Schools for Health in Europe. Hendren and his co-authors claim that the characteristics of effective school mental health programs should reflect: (a) intervention at multiple levels by focusing on teacher training and parent training; (b) positive relationships between the school and the community environments; and (c) unique cultural values and identities exemplified in whole-of-school practices. In a comprehensive review of evidence regarding contributors to effectiveness of in-school health promotion and well-being (Burgher, et al., 1999) a range of factors were identified including: a focus on cognitive and social and emotional outcomes as a joint priority in behavioural change; holistic programs that link the school with agencies and other sectors dealing with health; intervention that is relevant to changes in young peoples’ lives and implemented over several years; and teacher training
and the provision of resources required to conduct training of teachers. School mental well-being promotion in a whole-of-school framework exemplifies the prevention paradox – the benefits to individuals may be small but there is a large effect for populations (Rowling, 2003).

Problems arise when analysing the interaction between risk and protective factors within a ‘universal’ strategy of health promotion in schools. Whereas the health sector centres their planning, research and interventions around a disease perspective focused on risk (Greenberg, et al., 2001), the education sector has focused their research on links between mental well-being and low academic achievement (Zubrick, 1997) including studies into protective factors such as resilience, coping mechanisms and connectedness (Raphael, 2000). Proponents of whole-of-school approaches (Elias & Weissberg, 2000; Wyn, et al., 2000) would see the interaction between risk factors (such as skill development delays or family circumstances) and protective factors (such as the characteristics of the individual, quality of child’s interaction with the environment or school regulatory activities) as a preventive focus.

Rowling (2003) suggests that the concept of school mental well-being promotion goes beyond a focus on enhancing protective factors in individuals or identifying ‘at risk’ behaviours, and implies a critical emphasis on a supportive school environment in the whole-of-school context. In preventive programs, schools often target behaviour changes for the individual or identify a need to make changes to the structure of the school environment. Strategies used to achieve this often necessitate teacher education and planning and providing individual support programs that include mentoring assistance (Allen, et al., 2005). These measures are dependent on a supportive environment where students feel their teachers treat them fairly, they are close to at least one adult and they are part of the school (Hamre & Pianta, 2005; Herrman, et al., 2004). The need for schools to recognise their role and impact in relation to mental well-being has been supported by studies which have associated symptoms of childhood depression with school experiences (Chilcott, 2008). Shochet (cited by Chilcott, 2008, p. 4) speaks of the:

... vital protective role that schools play in the mental health of children. If they encounter warm and inclusive and validating teachers and if the whole school system, not just individual teachers, is able to create that kind of environment it makes a huge impact on the well-being of students and their future trajectory.

There are two issues for educational leaders to address in promoting whole-of-school social and emotional well-being: firstly, the extent to which their students (especially those with behavioural challenges) experience school and teachers as positive; and secondly, how teachers, administrators and ancillary staff are prepared to create the climate and interactions that students perceive as positive and pro-social (Bernard, 2006). This highlights the importance of congruence between the practices that schools engage in and the values they espouse.

Marshall (2004) insightfully referred to well-being as the ‘dynamic of human capital’, without which children are unable to build emotional resilience, learn social skills, calculate, or use computers. Supporting children’s mental well-being is not an ‘add on’, Marshall claimed, but rather is fundamentally interconnected with learning. Promoting mental well-being thus means understanding
individual differences in children’s social and emotional development (Elias & Weissberg, 2000; Zins, et al., 2004). Therefore to promote the discourse associated with SEL consisting of a set of interpersonal and intrapersonal human qualities, however broad these may be (Kress, et al., 2004; Payton, et al., 2000), promotes not only mental well-being but academic learning (Elias & Arnold, 2006).

In this section the health promotion discourse has been discussed as informing an emphasis on whole-of-school approaches to mental well-being. The following section considers how Australian educational providers have interpreted and applied the health promotion discourse.

### 2.3.2 Australia’s response

Australian governments have responded to this call for schools to be a major site for the development of mental well-being through the promotion of social and emotional learning. Their priorities in relation to the promotion of children’s well-being in schools have been conveyed in a number of key policy initiatives over the past decade and have included: the National Safe Schools Framework (NSSF) (MCEECDYA, 2011); and the Values Education Good Practice Schools Project (Mackay & Schoo, 2006). These priorities were subsequently adopted by the Department of Education, Employment and Workplace Relations (DEEWR).

NSSF consists of a set of nationally agreed principles for a safe and supportive school environment which addresses issues of bullying, violence, harassment and child abuse. The NSSF framework recognises the need for sustained positive approaches that include an appreciation of the ways in which social attitudes and values impact on the behaviour of students. Such approaches encourage all members of the school community to value diversity; contribute positively to the safety and well-being of themselves and others; act independently, justly, cooperatively and responsibly in school, work, civic and family relationships. The framework is underpinned by a set of guiding principles and related key elements or approaches that schools can put in place to effectively provide a safe and supportive learning environment to promote student well-being.

The Values Education Good Practice Schools Project, which was implemented in 2004 by the then Liberal government, encouraged schools to put values at the centre of teaching and learning within a ‘positive school’ environment. The Values Education Framework supports the values of integrity, excellence, respect, cooperation, responsibility, participation, care, fairness, and democracy, reflecting the need for specific moral education principles for schools. The NSW Department of Education and Training (DET) responded to the implementation of the Values Education Framework (Refshauge, 2004) by presenting to all schools an A1 size chart graphically highlighting the common core values belonging to the Australian community as a whole, and therefore belonging to schools. Such a seemingly superficial response might be contrasted with the insightful comments of Neil Hawkes at the 2006 national Values Education Forum who stated that:

> If you want a really good school, you will base it on relationships, relationships and relationships. It is important to maintain equality in relationships. A good school will have
a hierarchy of roles, but not a hierarchy of relationships. Everyone is equal in a values-based school (Hawkes cited in Mackay & Schoo, 2006, p. 14).

This statement highlights the importance of teachers’ attitudes, beliefs and classroom practices, and provides a perspective on the way mental well-being could be addressed in classrooms as well as exemplifying the language used to describe a school’s mission in promoting well-being. Both the NSSF and the Values Education initiatives provide the background and incentive to further research into how teachers can employ classroom practices that apply values education to children’s mental well-being. Such a relationship can be found in the daily application of social and emotional skills in the classroom, where belief systems about what is important are applied through, and related to, specific values education principles (Hill, 2004; Zins, et al., 2004).

These two policy initiatives, the NSSF and Values Education, directed the well-being agenda in Australia toward a focus on whole-of-school approaches, focusing particularly on the social environment of the school. Further policy direction was, however, needed in targeting specific issues that were symptomatic of a lack of mental well-being.

The National Schools Drug Education Strategy (NSDES), introduced in 1999, was the forerunner to strengthening the provision of educational programs and supportive environments, which contribute to the goal of ‘no illicit drugs in schools’. NSDES identified a series of objectives, outcomes and performance indicators that focused on outcomes considered achievable and measurable within the ambit, resources and timeframe of the strategy. Following an evaluation of the NSDES in 2004 findings indicated a number of objectives which informed Australia’s National Drug Strategy (NDS) (2004-2009). The NDS has influenced drug education policy in all states and focused on improving health, social and economic outcomes by establishing steps for preventing and reducing the uptake and harmful effects of licit and illicit drugs in Australian society. The policy highlighted the importance of explicitly teaching students especially those in the middle years, about drugs. The revised Principles in School Drug Education (2004) provide a framework of core principles that are recommended as underpinning concepts that collectively describe an ideal practice. These principles not only focus on drug knowledge but also highlight the shift in thinking required in order to understand curriculum and classroom learning about resilience and communication as part of a broader and comprehensive approach to drug prevention for students and school communities.

More recently, Dr Toni Noble, with other members of the Well-being Australia network, led the Australian Government’s scoping study on student well-being (DEEWR, 2008). The purpose of the scoping study was to explore the value of developing an overarching national framework or policy statement that encompasses a more holistic and comprehensive approach to student well-being as a first step towards embedding outcomes for student well-being in a school’s curriculum. The following excerpt summarises the background to the Australian Government’s position on promoting children’s mental well-being, creating an explicit link between such initiatives and drug and alcohol abuse prevention:

(The Government is)... committed to reducing disadvantage in Australia and to improving students’ educational outcomes and school retention rates. Identifying and reducing the
barriers to learning, including those linked to student well-being, can help to maximise the educational and social outcomes for all students. The Ministerial Council on Education, Employment, Training and Youth Affairs (MCEETYA) has identified ‘the active participation of young people in economic and social life’ as a strategy for reducing depression, drug and alcohol abuse, crime, vandalism and other problems faced by young people (Noble, et al., 2008, p. 5).

Investigation of the current national and international research and State/Territory government and non-government approaches to student well-being, have identified common threads that are factors in relation to the effective implementation and sustainability of whole school well-being initiatives (Noble, et al., 2008, p. 81). These include:

- Presence of a coordinator or team to oversee the implementation of the initiative and resolution of day-to-day problems;
- Involvement of teachers with a high shared morale, good communication and a sense of ownership in the new initiative;
- Ongoing processes that foster teachers’ formal and informal professional development including the involvement of acknowledged experts;
- High visibility of student well-being as a priority in the school and community;
- Components that explicitly teach values such as respect, cooperation support and social-emotional learning skills that encourage classroom participation, positive interactions with teachers/peers and good study habits;
- Consistent support from the school principal;
- Varied and engaging teaching methods;
- Links made to the stated goals of the school and jurisdiction; and
- High participation of all students in the school in the initiative.

These factors highlight an emphasis on creating conditions for success in ‘normal school circumstances’ rather than promoting the short term effectiveness of innovations. The scoping study produced the Seven Pathways to Student Well-being model (Noble, et al., 2008, p. 11), as presented in Figure 3, which defines what students need, and what specific practices schools can put in place to enhance children’s mental well-being. This model was endorsed by the National State and Territories stakeholders in 2008.
The Seven Pathways to Student Well-being model claims to provide a clear strategy for action by teachers, to raise awareness of the focus of student well-being within the broader educational community and to introduce a common language for teachers to employ, thus clarifying both the nature of student well-being and its implementation in classrooms.

**State education trends**

Within the national context explored above, the various state and territory governments have implemented a range of curriculum and policy initiatives which have prioritised student well-being and mental health signalling the ways in which the concept, itself, is understood and applied. This section provides a brief overview of the diversity of such approaches, highlighting how some states are choosing to focus on the implementation of programs and others are focused on whole-of-school cultural change.

In South Australia (SA), the Learner Well-being Framework, developed by the South Australian Department of Education and Children’s Services (DECS) in collaboration with the SA Catholic Education Office and the SA Association of Independent Schools, has been identified as an example of good practice (Noble, et al., 2008). This framework is founded on an understanding that well-being is central to learning, engagement and achievement and it commits to a culture of inquiry for improving and maintaining learner well-being.
In 2009-10 the Victorian Department of Education and Early Childhood Development (DEECD) budgeted $116.3 million for student well-being in response to the State of Victoria's Children report (Victorian Auditor-General, 2010) which included data from an audit of schools, intended to inform planning of programs and services. The audit assessed three major programs (Student Support Services Program, the Primary Welfare Officer Initiative and the School Nursing Program) and identified gaps in provision such as the lack of a comprehensive and current overarching policy framework for student well-being and inadequate measurement of the effectiveness of student well-being programs and services.

The Melbourne Catholic Education Office have taken a proactive approach, shifting the emphasis in individual schools away from program implementation to whole-of-school approaches, including a focus on school culture, environment and ethos, curriculum teaching, school community partnerships and organisational structures and processes (Australian Catholic University, 2008). The Melbourne Diocese has established a Student Well-being Unit which promotes the Student Well-being Action Plan (SWAP). Every primary school in the Melbourne Diocese has appointed a school well-being coordinator who has the responsibility for the design, implementation and evaluation of the school’s well-being policy, program and practices. The Diocese has also funded 800 staff to complete a Postgraduate Diploma in Educational Studies (Student Welfare) or Master of Education (Student Well-being), demonstrating that sector's commitment to strategic development.

In Western Australia the Department of Education and Training’s (DET) Behaviour Standards and Well-being Directorate places an emphasis on student welfare and implements a range of programs related to behaviour management, student engagement and social and emotional well-being. WA DET work closely with the Catholic education sector to produce policies on anti-bullying and harassment, social justice and child abuse (Noble, et al., 2008). The NSDES in its review of state and territories policies has recommended the approach of the WA School Community Grant Scheme. This scheme provides funding for schools to continue to develop their drug education strategies and to build on activities that support parent and community involvement.

All the above policies emphasise initiatives located within schools. However there has also been a trend in service provision in some Australian states toward interagency collaboration (Lee, et al., 2004). In Queensland, in 2004, the Mater Child and Youth Mental Health Service (CYMHS) garnered initial interest in an interagency forum (influenced by the 1992 South Australian model for Interagency Collaboration forum processes). As a result of the 2004 forum (Lee, et al., 2004) an interagency group of senior professionals was convened, with representatives from CYMHS, Education Queensland (EQ) and the Department of Family Services (DOFS). It also included representatives from juvenile justice, disabilities and child protection services in Queensland. The function of this group was to discuss referred cases, typified by complexity and severity, and to advance practical outcomes for these young people while making the most of available resources. This interagency collaboration model provided benefits in terms of increased service collaboration and integration with schools and reduced therapy replication and cost inefficiencies (Lee et al. 2004).
In New South Wales, the emphasis has related more to pedagogy with the implementation of the Quality Teaching Framework (Ladwig & Gore, 2003). School educational regions, at a local level, focused on a variety of well-being initiatives (e.g. Kidsmatter and MindMatters) however there was a lack of state-wide cohesiveness in these approaches. The Project for Enhancing Effective Learning (PEEL) (Mitchell & Lumb, 2010) gained momentum in many schools and became part of a professional development emphasis for the education region where this study took place. PEEL focuses on classroom procedures that aim to enhance relationships and improve learning, based on 12 PEEL principles (www.peelweb.org). The PEEL pedagogy enabled a focus on children’s participation and well-being through such themes as ‘the emotional environment’ and ‘remembering versus reflecting’.

In summary, the literature provides substantial evidence of a significant national interest in Australia in affirming children’s mental well-being through policy, research and multi-sectoral endeavours. Differences were noted between collaborative and interagency approaches as in South Australia and Queensland compared with other states such as Victoria and Western Australia which have focused on individual programs and services. Discussion here has emphasised the role of schools in the health and education interface of mental health promotion, yet it is unclear as to the best approach in terms of whole-of-school cultural change or program implementation.

### 2.3.3 School-based programs and approaches

As we have seen in the previous section, schools have increasingly become the focus for strategies and interventions designed to improve young people's mental health. Prevention and intervention approaches are analysed in this section in terms of: (a) explicit teaching approaches that are intended to improve externalising behaviours (lack of empathy and aggressiveness) and internalising behaviours (worrying and ‘catastrophising’); (b) universal school and classroom practices that promote relationships; and (c) approaches towards supportive school environments.

#### Explicit teaching approaches

In recent years there has been an abundance of intervention programs introduced into Australian schools including You Can Do It (Bernard, 2004), Bounce Back (McGrath & Noble, 2003), Friends (Farrell & Barrett, 2007) and Emotional Literacy (Faupel, 2003). Also available are activities and programs discussed in Elias and Arnold’s text (2006) such as: I Can Problem Solve (Shure 1992); the Pre-School Stress Relief Project (Anderson 1991); the Social Decision Making/Social Problem Solving model (Elias and Butler 2005) and The Second Step Program (Committee for Children 1988). Such empirically supported, curriculum-based approaches to SEL include structured opportunities for skill instruction and practice (Elias & Weissberg, 2000). Generally these approaches emphasise: identifying a skill and creating a rationale for its use in children's lives; modelling/teaching components of the skills and their integration; providing students with activities for practice and the opportunity for feedback; and establishing prompts and cues that can help students use the skills outside the instructional setting. The Talking with TJ program from New Jersey in the United States is believed to exemplify these teaching steps (Romaz, et al., 2004), integrating SEL through video-based curriculum
delivery. Talking with TJ also provides strong links to literacy, fosters a positive greeting process each school day, and encourages daily teamwork.

There have been several group approaches developed targeting emotionally disturbed children and children experiencing school difficulties. The Student Assistance Program (SAP) offers primary prevention and early intervention to pupils who exhibit high risk behaviours and supports those whose circumstances affect their ability to engage with others at home and school (Carnell & Baker, 2007). The program involves the use of support groups (no more than eight participants) which are facilitated by a teacher, and has been used with both children and young people (adolescents). A qualitative study (Carnell & Baker, 2007), conducted to evaluate the effectiveness of SAP, identified benefits of ‘group’ process (respectful relationships between student and teacher and student and student; reciprocity in communication between group members, learning to trust others), challenges (sharing information with others in the group less known to them, choice of subject for discussion) and issues of sustainability (facilitators need special qualities; ongoing support once student has been through a group process).

Similar strategies, with larger groups of children, are advocated through the curriculum concept called Open Circle Curriculum. Open Circle Curriculum focuses on three content areas - communication, self-control, and social problem solving (Kress, et al., 2004). It requires 2x 30min lessons per week where the class is arranged so as all children can see the face of other class members. Open Circle Curriculum provides opportunities for social and emotional learning, overlapping with academic curriculum such as: talking and listening (English); democracy, rights and responsibilities (Social Studies); and knowledge of emotions, physical health, character development and self acceptance (personal development and health education) (Kress, et al., 2004). The open circle process incorporating strategies such as: a structured morning meeting; a CARES (co-operation, assertion, respect, empathy and self control) approach; active listening practices; and role play games was applied in an action research study (Doveston, 2007) that attempted to solve classroom difficulties in relation to children from low socio-economic backgrounds and children with SEL difficulties. The process was focused on finding solutions and embracing positive changes, rather than dwelling on the difficulties. Both qualitative (transcripts from open circle) and quantitative data (listening skills levels) demonstrated improved empathetic listening and self regulatory skills.

Other writers recommend specific adjustments and accommodations that are strongly associated with literacy learning (Elias, 2004; Elksnin & Elksnin, 2003). For example, Elias promotes vocabulary exercises which recognise emotion in literature and pragmatic language development which takes the child beyond concepts such as ‘glad’, ‘sad’, and ‘mad’. Also recommended by Elias are journal writing practices and the use of visual aids such as ‘feelings thermometers’, mixed with teacher conversations that set out to remove the guilt and stigma from confusion and anger so as to normalise it. Elksnin and Elksnin (2003) add to this repertoire of methods with emotion coaching, non verbal communication and social skill autopsies.
Others identify approaches where SEL can be integrated into physical development lessons such as sport programs which become real life laboratories for teaching SEL since athletic competition engenders emotional highs and lows (Burke, 2002; Weissberg, et al., 2003). While such curriculum integration approaches have been shown to have success in supporting students mental well-being (Lopes & Salovey, 2004) there are limitations in such approaches. For example, some skills will be difficult to address in classroom instruction; some skills are interdependent (e.g. managing feelings); some skills may be context specific and fail to transfer across situations (social skills); and emphasising one set of skills over another serves a purpose but is not intended to limit its application.

**Universal approaches**

Zins et al. (2004) indicate that, whilst schools agree that fostering children's social and emotional development is important, it is often considered in a fragmented manner, either as an important end in itself or as a contributor to enhancing children's health (for example, drug prevention), safety, or citizenship. With the implementation of the Comprehensive Health Promoting Model (WHO) it is recommended that prevention and intervention approaches have universal qualities meaning they are applicable to all children and are cross curricula. They target multiple risk factors (for example, depressive symptoms, anti-social behaviour) across both individual and whole-of-school environments. Examples of such programs include Promoting Alternative Thinking Strategies (PATHS) (Greenberg, et al., 2001), Bullying Prevention Program (Olweus, 1997), and Social Problem Solving Program (Elias & Weissberg, 2000).

In programs which are cross-curricula, classroom interaction becomes the catalyst for improved student development. In a study which examined the ways in which children's risk of school failure may be moderated by support from teachers (Hamre & Pianta, 2005) the importance of interpersonal skills between teacher and students and the social environment were highlighted. Participants included more than 900 children, aged 5-6, who were identified as at risk on the basis of demographic characteristics and the display of multiple functional (behavioural, attention, academic, social) problems, as reported by their kindergarten teachers. The children were offered strong instructional and emotional support. By the end of first grade, these ‘at risk’ students had achievement scores and student teacher relationships commensurate with low risk peers while at risk students who had been placed in less supportive classrooms had lower achievement and more conflict with teachers. The factors which were identified as leading to the success of this strategy included: (a) the provision of emotional support including classroom warmth, reduced negativity, child centredness and teacher sensitivity and responsiveness through intensive scaffolding and feedback; and (b) quality of instruction. The teacher’s emotional support was identified as ‘directly providing student experiences that fostered motivation and enhanced academic functioning’ (Hamre & Pianta, 2005, p. 950).

Jennings and Greenberg (2009) have developed a model for the pro-social classroom. This model claims to incorporate teacher social and emotional competence and well-being in the development and maintenance of supportive teacher-student relationships, effective classroom management and successful social and emotional learning program implementation. Whilst the model has been put forward further research is needed to evaluate the relationship between teacher social and emotional
competence and teacher functioning in the classroom. Research linking emotional intelligence and leadership functioning (Curry, 2005) and emotional intelligence and counselling self efficacy (Easton, 2005) indicates that a teacher’s social and emotional competence is a likely factor in children’s SEL and academic outcomes. The following teacher behaviours have been associated with optimal social and emotional classroom climate. They are:

…developing supportive and encouraging relationships with their students, designing lessons that build on student strengths and abilities, establishing and implementing behavioural guidelines in ways that promote intrinsic motivation, coaching students through conflict situations, encouraging cooperation among students, and acting as a role model for respectful and appropriate communication and exhibitions of prosocial behaviour (Jennings & Greenberg, 2009, p. 492).

Building an emotion centred classroom shifts the balance from the intellect that guides the social and emotional conduct of adults or teachers to the emotion driven guide directing the social and emotional conduct of children (Joseph, 2006; Kress, et al., 2004). Such guidance is found in the way teachers create a positive approach to classroom management by deepening children's bonds with peers and teachers, helping children to understand the effects of behaviours on others, by assuming the best plausible motives (moral status of childhood) and by encouraging children's own search for solutions and restitution (Schaps, Battistich, & Solomon, 2004).

**Approaches promoting supportive school environments**

A number of initiatives in Australia have placed an emphasis on fostering student well-being by building supportive school environments. The Australian government’s collaborative initiative, *Kidsmatter* (Australian Government Department of Health and Ageing, 2006) and *MindMatters* (Wyn, et al., 2000), clearly places the promotion of student mental health and well-being as a ‘core business’ of schools:

*MindMatters* is aimed at achieving more than just the insertion of curriculum materials into schools but at promoting systemic and systematic change in schools in order to develop practices which foster inclusion. It is explicitly based on the model of the health promoting school as an interaction of organisation, ethos and environment, curriculum, teaching and learning and partnership and services (Wyn, et al., 2000, p. 594).

*MindMatters* promotes teacher professional development as fundamental to the success of any innovation. A school’s commitment to the welfare and learning of their students means addressing the following issues in all areas of the school’s performance: provision of a safe and supportive or protective environment in which all students can maximise learning; remaining accessible and responsive to children’s needs; and assisting students to develop their ability to cope with challenge and stress (Fraillon, 2004).

Another approach which has become popular in Australia is *Positive Behaviour Support* (PBS). This strategy also focuses on creating supportive school environments (Cappella, et al., 2008) and refers to the application of positive behavioural interventions and systems to achieve socially important behaviour change in a variety of contexts (Sugai, Horner, Dunlap, & Hieneman, 2000). The approach is typically characterised by strategies to both teach defined expected behaviours and to encourage
and practice these behaviours across the school system. PBS also provides targeted support for individuals and small groups of students who have been identified as 'at risk', through individual student-focused functional behaviour assessments. Lewis et al. (2002) studied the efficacy of the positive behaviour support strategies through observations of playground interactions in schools over twenty school days. The research measured occurrences of specific behaviours following two positive behavioural interventions, namely: (1) teaching rules, routines and desired behaviour; and (2) a group contingency plan that responded to compliance of targeted social skills. The research suggests that, even though problem behaviours were reduced, some children who display chronic patterns of behaviour need to be supported differently. Further research was recommended to look at the context in which social skills training occurs and what variables and or practices are functionally related to successful outcomes.

The ‘success’ of introducing, implementing, and sustaining positive psychology within schools may be dependent on its integration across multiple contexts such as family, school, church, community and work (Chafouleas & Bray, 2004; Clonan, et al., 2004; Kelley, 2004). Promoting the development of personal competencies and the enhancement of protective behaviours across multiple environments is necessary in order to foster resiliency in whole populations of children (Fuller, 2006). A positive psychology approach within a school would require attention to the contributions and values of its students and parents; and the convergence of multiple and diverse educational approaches such as cognitive training, valuing peer relationships, developing effective teacher praise and explicit teaching of emotional development. Akin-Little, Little & Delligatti (2004, p. 155) believe that:

- teachers who are taught to develop their own personal positive psychology and practice positive psychology in the classroom will (a) provide a more reinforcing classroom environment which may prevent behaviour problems from developing; (b) be more accepting of the use of the behavioural principles in the classroom; and (c) implement interventions with greater integrity.

Clonan et al. (2004) suggest that it is possible to build positive institutions through systematic educational reform processes which: (1) clarify key components of positive psychology, such as what positive traits and individual experiences are desirable, so that the system can develop a clearer idea of what works and doesn’t work; (2) operationalise the key components through goal setting and promotion of positive behaviour; (3) use the natural environment so that school culture is perceived and appreciated as a contributing factor in building a positive institution; and (4) plan systems for sustained change. Such reform processes emanate from positive psychology perspectives and promote strengths-based beginnings.

Reforms are also occurring within Australia in the function of school psychologists and counsellors, many of whom have been advocating for an expansion of their role within schools (Clonan, et al., 2004). While traditionally they have played a primary role as the psychometrician and gatekeeper to special education based on deficit understandings, many have become dissatisfied with this traditional ‘refer-test-place model’, preferring a more preventative, consultative approach, similar to that advocated by Ross et al., (2002) who reconstructed the school counsellor role to include facilitation of social and emotional learning. Initiatives which either embed positive psychology within school
counselling and psychology or embed school counselling and psychology within positive psychology are already having an impact on the way schools implement mental well-being programs and how they utilise school counsellors and psychologists (Clonan et al., 2004; Kelley, 2004).

There is a presumption in the above discussion that teachers and schools are able to engage with issues and programs related to children’s mental well-being. In the following section, however, focus is directed to the approaches adopted by teachers in response to the extensive availability of such programs.

2.4 Spotlight on teachers

Burke (2002) challenges us to consider the question: What is the proper role of a teacher in promoting the social and emotional development of students? He indicates that teachers can make a difference by creatively implementing materials and methods for meeting the social and emotional health and development of their students, despite the seemingly exclusive focus on standards-driven instruction and high stakes testing. If schools are a focal point in improving children’s mental well-being (as discussed in Section 2.3) then teachers’ relationships with children become critical as a preventative measure. As Elias and Weissberg (2000) emphasise, there is a need for teachers to actively take part in the mental health promotion ‘revolution’.

Research which identifies teacher perspectives and beliefs on the provision of mental health education in schools (for example, Graham, et al., 2011; Walter, et al., 2006) can help inform our understandings of the ‘proper’ role of teachers in promoting the social and emotional development of students. These two studies found that while teachers believed that mental health education and a supportive school culture was extremely important, and that it should be a part of classroom learning, many felt they did not have the confidence and self-efficacy, the time, adequate training or adequate teaching materials in their school to provide mental health education. Graham et al’s (2011) research found that many teachers responded to mental health issues which arose within the everyday context of teaching primarily by looking to outside ‘experts’ to assist. It seems that many teachers construct ‘mental health’ as an issue linked to those students who need professional treatment or intervention. This highlights the inherent difficulty teachers have in dealing with mental well-being issues in children. As previously discussed, historically and culturally the medical model overrides preventative thinking (Rowling & Gehrig, 1998) and the health sector has reinforced the attitude that teachers are most likely ill-equipped to respond.

Collaborative models (Deaver, 2005) have been promoted as a means to increase teacher self-efficacy. Within such an approach, teachers work in conjunction with mental health professionals who then give equal attention to developing good relationships with the teachers and supporting their own learning in relation to mental well-being. Akin-Little et al. (2004) developed a preventative model of school consultation which sought to assist teachers to develop their own personal positive psychology and positive psychology practices in the classroom. This model has two steps: (1) the school psychologist aids the teacher in the development and use of his/her personal positive psychology (e.g., optimism, objective happiness, etc.); and (2) the teacher is then encouraged to utilise positive
psychology in the classroom (Akin-Little, et al., 2004). Comparisons can be drawn between a teacher’s personal positive psychology and their social and emotional competence (Jennings and Greenberg, 2009) as both perspectives ultimately direct attention to teacher skills. If teachers are able to collaborate with students in creating environments conducive to transformative teaching/learning they will move closer to understanding children’s lived experiences, knowledge and feelings (Mahn & John-Steiner, 2002). A teacher’s awareness of students’ ways of perceiving, processing and reacting to classroom interactions contributes significantly to the teacher’s ability to engage the students meaningfully in learning (Moll & Whitmore, 1993). Moll and Whitmore (1993, p. 21) add that ‘building on the fount of knowledge and the culturally shaped ways of knowing that children bring to the classroom creates opportunities for confidence development in teachers’.

Durka (2005) provides a spiritual dimension and a philosophical perspective on building teacher capacity. She writes about the ‘passion for the possible’ and believes that if we are to serve our students in their quest for a meaningful life, then teachers should reflect on their own attitude towards taking risks. The idea of primitive knowledge, based on feeling, intuition and faith, is promoted as preferable to an objective knowledge, where nature and human beings are turned into objective things:

> When we regard teaching as a ‘dance’ between the knower and the material, it is easier to rethink our own roles. It becomes clearer that we are to create a space in which truth is neither suppressed nor merely accepted. The focus is not on constant answers but rather an adventure, wrestling with untruth, silence and listening (Durka, 2005, p. 6).

Asking teachers to be more sensitive to subjective issues invites attention to socio-cultural aspects of the classroom. Dettore (2002) suggests, in a similar fashion, that teachers become ‘emotion archaeologists’, collecting information about children. Like an archaeologist, the adults in children's lives gather data, the adults ‘meet’ children at their developmental levels, joining them in creating meaning from this information. Adults need to dig for clues, dust off implications observed in children's dramatic play, scrutinise evidence in child-to-child interactions, interpret information shared by parents and children and collect samples of child created products. For schools, working in partnership with minoritised students and their parents is critical (Bishop, Berrymen, Cavanagh, & Teddy, 2007). Strategies which accept children's emotional responses as legitimate, model the appropriate expression of emotions, demonstrate empathy, afford children the necessary time, space and materials to use spontaneous play as a way to handle emotional challenge, help children develop verbal skills to manage crisis situations and assist children as they make connections with their past experiences to cope with new challenges, reflect an emphasis on relationships and scaffold a learning partnership with children and with parents (Sleeter, 2011). Teachers, Durka (2005) suggests, may be required to solve classroom problems themselves - not through finding answers but rather by finding an emotional connection to children’s explanation of the world around them.

The spotlight for addressing mental well-being has thus increasingly shifted to teachers; to their collaboration and consultation with psychologists, counsellors and health professionals; to their identification of children with mental well-being difficulties; to the adjustments they make within their classrooms; and to their efforts to be inclusive and conciliatory in dealing with student conflict. Whilst
many of these developments in teachers’ competencies and roles have segued without ‘bumps, crashes or loud noises’; dealing with some of the changes to classroom dynamics has taken much more than a new program or new strategy (Jennings & Greenberg, 2009).

### 2.4.1 The importance of teacher attitudes, values and beliefs

An attitude is a position, disposition or manner with regard to a person or thing... A value is a property considered with respect to worth, excellence, usefulness or importance... A belief is an accepted opinion based upon grounds insufficient to afford positive knowledge (Macquarie Dictionary 1981).

Teacher attitudes, values and beliefs are prized when they are embedded in a context of teacher development and teacher reflection (Friedman & Rogers, 2009). Recent educational literature portrays reflection as a wholly beneficial practice for teachers (Bolton, 2006; Fendler, 2003; Whitehead & McNiff, 2006). An example of this is the TRIO Project (Teacher Training & Research for Individuals & Organisations) which began with the notion that cross-cultural reflection could be an effective tool by which teachers could examine their personal belief systems about learning, teaching and pupil guidance (Wahlstrom & Ponte, 2005). Across four countries and three years, teachers systematically examined their own teaching practices at the local level, using action research strategies that brought them together in an annual international workshop. Teachers from all four countries were able to reflect upon their work and their pedagogical belief systems using a cross-cultural lens. Attitudes, values and beliefs were elicited through a direct questioning approach which centred around three key questions: (1) What are my tasks and activities in the field of pupil counselling and guidance?; (2) What problems of pupils and fellow teachers am I faced with?; and (3) What strategies am I using to cope with these problems? This type of questioning allowed the interrelationship and efficacy of teacher tasks, teacher problems and teacher strategies to surface.

A critique of reflective practices by Zeichner (1996, cited in Fendler, 2003) suggests four themes that have not helped to advance teachers’ roles in schools but have tended to undermine reflective practices as a genuine teacher development process. These include: the privilege of university research over teacher research; an emphasis on teaching techniques and classroom management; a disregard for the social and institutional context of teaching and individual reflection rather than collaborative sharing. Criticism also suggests ‘some reflective practices are simply exercises in reconfirming, justifying or rationalising preconceived ideas without moving towards innovation’ (Fendler, 2003, p. 17). In this study there will be a focus on collaborative sharing not just individual reflection.

Hynds (2010) refers to the necessity of friction and conflict between different ideas in order to bring about organisational improvements within a school reform process. This, she believes, leads to a deeper understanding and collective commitment from teachers. Another reason why teachers’ attitudes, values and beliefs are so important is that resistance to educational change is typically connected to an individual’s values, beliefs and professional identities, social position and responses to change (McKenzie and Scheurich, 2008 cited in Hynds, 2010). Hynds utilised a process of critical collaborative inquiry and dialogue to examine the contradictions between beliefs and teachers’
practice. In doing so, she highlights the importance of leadership in committing to inclusive protocols that facilitate dialogue amongst groups.

Gathering attitudes, values and beliefs through action research becomes a strategy for monitoring others’ learning (Whitehead & McNiff, 2006) in group processes creating a subjective platform for ongoing collaborative debate. Both dialectical and living theory experiences can be applied to a written (journal writing) and oral (focus group discussion) declaration of beliefs and attitudes (Whitehead & McNiff, 2006) creating opportunities for teachers to engage with reflection of self and self with others. Critical action research expresses a commitment to bring together the broad social analysis of self reflective self-study of practice and the way in which language is used (Kemmis & McTaggart, 2005b). Such is the interpretative importance of reflective practices and their usefulness in deepening and broadening particular beliefs.

This study has chosen to begin with attitudes, values and beliefs because such reflective practices represent constructivist approaches to knowledge and growth (Wells, 1999). For development to occur, deep reflection and reflexivity require authority and responsibility for personal and professional identity, values, action, feelings and a willingness to stay with uncertainty, unpredictability, questioning and even disagreement (Bolton, 2006). In the feminist literature, voice and power are often linked by a conceptualisation that either explicitly states, or implies that claiming, experiencing and honouring one’s voice empowers the individual by putting her in contact with her own intelligence (Fendler, 2003; Maguire, 2001). In Dewey’s terms, teachers who know in this way, and act with intent, are empowered to draw from the centre of their own knowing and act as critics and creators of their world. Agency, as it is described by Dewey (1933), casts voice as the connection between reflection and action.

There are very few studies that have explored the attitudes, values and beliefs of teachers in their role of providing support for children’s mental well-being. The presence of children with considerable mental well-being difficulties in schools and classrooms today is an evident reminder of the call on schools and teachers to support them. Therefore the views of teachers in this process are of critical importance in sustaining these educational reforms.

2.5 Chapter Summary

The multidisciplinary influences that shape notions of children’s mental well-being have been considered in this chapter. Child development theories from within and across psychology and sociology suggest that there are both competing and complementary theoretical underpinnings for the policies, services and practices that have grown up in response to childhood difficulties. Regardless of any inherent disciplinary tensions there appears to be some compatibility between approaches used in health and education, particularly in terms of prevention and psycho-social development in children. It is unclear as to which processes are more desirable in schools and which influences on children’s mental well-being are more useful in constructing support.
Notwithstanding some degree of debate about the limitations of measures used to assess well-being, nations that are signatories to the UN Convention on the Rights of the Child are ranked in a ‘league table’ of sorts, resulting in a relatively mediocre report card for an advanced nation such as Australia. Progress in the field of mental health for countries such as the UK and US have produced in depth research in educational policy with respect to social and emotional learning and program development. Over the last decade in Australia several national initiatives both in health and education have produced frameworks that serve to make changes to state, regional and school policy. An overview of state education policy indicates differences in emphasis and collaborative outcomes with other sectors. Australian universities and other agencies have also played a role in longitudinal studies that have investigated risk factors in adolescent antisocial behaviour. The National Survey of Mental Health of Young People in Australia provided a benchmark as to the extent of children’s mental well-being problems and future research. Out of the mix of international developments and national education and health initiatives, schools have emerged as a focal point for intervening to solve the ‘problem’. The emphasis has been on prevention and intervention, with attention to identifying and acknowledging ‘at risk’ behaviours and investing in protective strategies.

Teachers have become the focal point for addressing mental well-being and in translating and implementing a social and emotional education curriculum. Yet there have been very few studies which explore the attitudes, values and beliefs of teachers in relation to such developments. How teachers understand and respond to children’s mental well-being is the central interest of this study. Collaborative reflective practices provide a substantive means for further exploring how these attitudes, values and beliefs have, and will, impact on teacher learning and development, hence the study is equally concerned with the processes that support teacher involvement in this important sphere of children’s lives.
Chapter 3: Developing the methodological script

This chapter begins by outlining and justifying the ontological, epistemological and methodological approach to the research. I then explain the process of recruiting schools to participate in the study, including the initial consultation phase where I gauged their views in relation to the project, its relevance to their school and their interest in participating. The three selected schools and the characters involved are introduced. The chapter then describes the research methods employed in each cycle of the research, elaborating on how these embodied the processes of planning, acting, observing and reflecting on children's mental well-being. Cycle 1 will be shown to have focused on the first two research questions: What are the teachers' attitudes, values and beliefs about children's mental well-being? and How do teachers' attitudes, values and beliefs about children's mental well-being influence classroom practice? Cycle 2 focused on the third research question, what change processes occur when teachers seek improvement in their practice in relation to children's mental well-being? Approaches to data analysis are explained and issues of validity and reliability addressed. Discussion then turns to theoretical interests that emerged as the study progresses, particularly Communicative Action Theory. Throughout this chapter the dramaturgical metaphor (Turner & Stets, 2005) as defined in Chapter 1 will be incorporated to highlight the importance and impact of roles played by teachers and other stakeholders.

3.1 Ontological, epistemological and methodological basis for the research

Establishing an ontological and epistemological stance before beginning research in the social sciences is important (McNiff & Whitehead, 2007). This section will provide a conceptual basis for the study, linking ontological values, epistemological theories and methodological concerns to justify the approach taken to the research. Building on the ideas introduced in Chapter 1, I explain the influence of critical inquiry, feminist scholarship and a qualitative constructionist approach, on my methodological decisions.

Ontologically, my choice of research focus and methods has been influenced by a commitment to humanistic approaches. Evident in my process are strategies that foster a deeper understanding of self through reflection, the social construction of knowledge through dialogue, kinaesthetic ways of knowing and the intrinsic and often tacit knowledge held within individuals and how this knowledge influences human action. These humanistic approaches to research are grounded in Maslow's theory on how best to study humans and their behaviour, as described in Rowan (2001). Maslow's work forms part of an approach to human inquiry which constitutes a world view emerging through systems thinking, ecological concerns and awareness, feminism, education and the philosophy of human inquiry (Reason, 1998).
Maslow (cited in Rowan, 2001) proposes several ontological tenets when working with human beings. The first tenet emphasises a *rehumanising* rather than a *dehumanising* approach to qualitative research. Empowering participants in the process of participatory action research espouses the ideologies of ‘research with’ rather than ‘research on’ the subjects. Secondly, there is value in *holistic perspectives* where participants are viewed in their natural environment without being reduced to a *single ‘point-in-time’ performance* in relation to a research question. Rather than manipulating situations and observing participants’ reactions, Maslow advocates that the researcher not impose preconceived notions but rather maintain an open mind, to look and listen with full attention so as to be receptive, passive, patient and waiting. Whitehead and McNiff (2006, p. 26) relate this kind of philosophy to the way in which action researchers should consider knowledge:

> We have faith in our own and in other people’s intellectual capacities, so we avoid telling them what to do, confident in the grounding in our faith in the philosophies of Polanyi (1958), who says that all people possess a vast store of tacit knowledge already within themselves… and Chomsky (1986) who values the innate capacity of individuals to create language, or an idea which we extend to the creation of their own knowledge in an infinitude of new forms.

The third of Maslow’s tenets advocates the importance of an ‘*I and you*’ approach to research, thus emphasising the individual within the research and placing more value on the role of co-researchers; their spirituality, emotions and mystery, rather than on the content of the research. The fourth tenet embraces the notion that *research should take its own course* within various contexts rather than be concerned about *generalisations and outcomes*. Maslow’s fifth tenet is central to action research where ‘*first person*’ (experimental) *knowledge* rather than ‘*third person*’ (spectator) knowledge is essential. Maslow says:

> To be able to listen – really wholly, passively, self-effacingly listen – without presupposing, classifying, improving, controverting, evaluating, approving or disapproving without duelling with what is being said, without rehearsing the rebuttal in advance, without free-associating to portions of what is being said so that succeeding portions are not heard at all – such listening is rare (Maslow 1969 cited in Rowan, 2001, p. 120).

Listening becomes not only about the researcher, but also about the quality of listening by participants, as facilitated by the researcher. The final of Maslow’s tenets (as included here) relates to *being trustful of complexity and comprehensiveness* rather than *simplicity*. Maslow describes science as having two poles, one direction is towards simplicity and the other is to comprehensiveness and inclusiveness. His advice is to be distrustful of simplicity and to seek richness. Rowan (2001) argues that, without consideration of the above tenets, a humanistic model for action research is impossible and lacks a level of consciousness that addresses the relationship between participant and research. Such consciousness seeks a deeper level of understanding of the person within their environment (Rowan, 2001). In undertaking a study that involves accessing teacher attitudes, values, beliefs and assumptions Maslow’s principles allow for a person centred philosophy to inform my actions when working with participants.

These approaches are also consistent with the constructivist epistemology which underpins the research. From a constructivist perspective, knowledge is perceived as a living process and not
something that only resides in books and databases, divorced from the people who create it (McNiff & Whitehead, 2007). In constructing new ideas, prior knowledge may be proven false or be restructured differently in the process of discussion and debate. Constructivist thinking also emphasises that multiple realities exist, and there is no single reality, only a plurality of realities constructed by individuals and or cultures (Carspecken, 1996; Whitehead & McNiff, 2006).

Carspecken (1996) emphasises the importance of individual values and beliefs and the particular cultural circumstances that shape understanding. Carspecken believes that construction and soundness of argument can be achieved through utilising interpretive visual perception or value windows as a basis for ‘truth’ to unravel multiple realities. Value windows relate to the attitudes, values and beliefs of the researcher and the participants and are validated by interconnected and substantiated claims. The validity of any claim to knowledge depends on the evidence supporting the claim and not so much whether the claim is true. The notion of value windows informed this study’s focus on documenting teacher beliefs and assumptions about children’s mental well-being. Underpinning this study is the intention to empower participants with strategies to change any illusions or false beliefs (Reason, 1998) by raising consciousness of how beliefs influence practice.

This project is founded on a theoretical perspective which reflects critical social science and orientates knowledge in a reflexive and dialectical sense (Neuman, 2006). A reflexive approach underpinned the flow of interactions between participants and researcher as we constructed theories about children’s mental well-being and assessed the value of teaching social and emotional competencies. As Neuman (2003) describes it, reflexivity is observed when the researcher:

- interacts with participants, viewing any disruptions or disturbances that developed out of their mutual interaction as a means to expose and better illuminate understandings and practices concerning children’s mental health;
- adopts the participant’s view of the world in specific situations or, added together, many views from individual subjects and specific situations, aggregating them into a broader social process;
- sees the social world simultaneously from both inside/outward (a subjective viewpoint) and from the outside/inward (external forces that act on people); and
- constantly builds and rebuilds theory through dialogue with participants and other researchers (Neuman, 2006).

These practices guided action in this research and assisted in interpreting a range of reportable moments and interactions that are described throughout the research.

Action research is viewed as a meta-methodology, enabling the researcher to encompass diverse methodologies within one process of inquiry. Sagor (2005) emphasises three key elements that justify an action research methodology:

- there is a focus on your (theirs and mine) professional action;
- the researcher is empowered to adjust future action based on the results; and
- improvement is possible.

Kemmis and McTaggart (2005a) describe action research as one strand of a larger group of participatory methodologies, incorporating critical action research, classroom action research, action
learning, action science, and industrial action research. Whilst all qualitative research may be considered participatory in practice, McTaggart (cited in Reason & Bradbury, 2001) defines the specific nature of participatory action research (PAR) as a systematic, critical inquiry (made public) which goes about changing practices, social structures and social media that maintain irrationality, injustice and unsatisfying forms of existence. McTaggart highlights some of the intense applications of PAR which require a constructivist paradigm for action, where co-researchers are engaged in changing practices that may be unsatisfying and possibly unworkable (Stringer, 2004).

The wider purpose of action research is reflective of Maslow’s humanistic approach, which is to contribute, through practical knowledge, to the increased psychological, social and spiritual well-being of persons and communities. It is, in effect, about change for the individual and the community (Reason & Bradbury, 2001). The implication from such a perspective is that the methodology must:

- be effective in accessing teachers’ ideas;
- be able to adequately access the nature of teachers’ practice;
- have the ability to highlight potentially significant links between teachers’ apparent understanding of the nature of children’s mental well-being and their practice; and
- be able to accommodate a range of possible epistemological positions with regard to the nature of children’s mental well-being and aspects of social and emotional learning.

Action research values inquiry learning and encourages all to engage with questions of the kind, ‘How do I improve what I am doing?’, as a powerful means in gaining access to important tacit and dialectical aspects of teacher practice (Waters-Adams & Nias, 2003). The primary reason for engaging in action research is to assist the actor in improving or refining his or her actions (Sagor, 2005), such as improvement in practices, improvement in the situation in which practice is occurring and improvement in understanding both the practice and the situation (Grundy, 1995).

Within this methodological context a range of data collection methods were utilised including focus group discussions, reflective scaffolds, and formal and informal interviews and conversations. Employing participatory research means prioritising and auditioning voice and hence much of the data in this study derives from interactive opportunities where participants shared opinions and concerns. Communicating concerns scaffold the identification of areas for change and supported the negotiation between researcher and participants of how to go about their desire for new knowledge. Teachers through their own choice of inquiry either included or not included parents and children in knowing more about their focus area. Children and parents are indirect stakeholders but it was outside the scope of this study to include them directly. Consultation and recruitment processes were used to arrive at a starting point for this research that provided background data about children’s mental well-being and strategies already being utilised. The role of the various methods is explained in the following sections as I describe selection processes and each of the research cycles.
3.2 Selection of schools

This study took place within one educational region of New South Wales, Australia. The region covers an area of approximately 30,000 km², including both coastal and hinterland townships and incorporating 46 schools - 12 secondary and 34 primary. As I needed to work closely with the schools on a fairly regular basis it was necessary to focus recruitment efforts on those schools within 1 hour driving time from my place of residence. Other important criteria were that participating schools were likely to have continuity within the administration team into the following year and were not overburdened with other competing projects and priorities. These broad selection criteria were discussed with key staff in the head office of the educational region.

Reconnaissance and consultation

In the early reconnaissance phase I consulted with principals and/or assistant principals (APs) in seven selected schools (A,B,C,D,X,Y,Z) through a face-to-face meeting of approximately 30 minutes. Consultation provided a key opportunity to explain the nature of the proposed project to the principals, in addition to providing a written letter (see Appendix A) which explained the background and purpose of the study. These initial school visits also provided an opportunity to articulate the theoretical basis underpinning the research and become acquainted with executive staff and locality of schools. Conversations enabled me to gauge the principals’ views on mental well-being, whether they viewed it as a priority for their schools, whether they perceived their school would benefit from involvement in the research, and what questions teachers might have about the research. Principals were eager to know what was expected of teachers, including the time commitment, reporting and journaling requirements and whether the study could be incorporated into normal term planning.

In the process of discussing the project with principals and assistant principals I gained valuable feedback on the issues that influence schools to be involved in action research and what they sought to gain from participation. The principals who were approached expressed clear views that an inquiry into children's mental well-being was a priority. As described by the Principal at School X, spiritual, social and emotional learning are viewed by both teachers and parents as an ‘integral part of the child’s holistic learning’. School D’s Principal indicated that teachers were ‘overwhelmed by teaching and meeting the needs of children in their class and that there was a ‘huge cost to the education system in dealing with the increase of students with disability and mental well-being issues’. The Principal (School A) felt that teachers needed to know more about how to deal with children experiencing family break-ups, or with dysfunctional parents or families.

The classes are often atypical in terms of children's backgrounds and home life. The challenges the children bring with them are a frustration for teachers as the children's experiences are beyond the norm and often bring safety issues. The impact of home life and changes in family structure are making it difficult to improve capacity to learn. There is need for strategies to deal with relationships in class whilst parents are taking it upon themselves to be involved in playground issues (Principal School A).
Chapter 3: Developing the methodological script

The Principal from School D, felt that ‘mental health projects’ needed to be closely integrated into the day-to-day activities of the classroom and the culture of the school if the benefits were to be recognised.

Principals highlighted the wide range of staff across their schools who were working with children with mental well-being issues and they perceived value in a project which could bring staff together to develop a consistent approach. Where schools had a relatively high percentage (8-12%) of children with special needs (3 out of the 7 schools initially approached), the Learning Support Teacher played a key role in supporting social and emotional well-being. Several principals expressed the view that having children display aggressive behaviour and demonstrate serious emotional needs through inappropriate behaviour, went against the ethos of the school. In School B, for example, a small group of boys were using behaviours that were complex to modify and were ‘disrupting the cheerful flow of the school’. Methods being used to respond to these children’s actions, including behaviour modification, withdrawal and correction, were proving unsatisfactory and therefore this principal was eager to trial alternative approaches. A number of principals voiced that collective involvement of teachers and executive in working through these issues was necessary.

Many of the seven schools which were initially approached had a number of programs currently running which directly or indirectly related to students’ social and emotional well-being. Examples of such programs and practices include a peer support program, a social skills program run by the student welfare officer, lunch time activities based on social scenarios (Games Factory), You Can Do It (YCDI), Bounce Back, bullying awareness programs and, in one school, brain injury support from the local hospital. Despite these many existing programs in School X, such as Bounce Back, bullying awareness and brain injury support, the Principal (School X) still emphasised that ‘this school is at a stage of readiness for further work in children’s mental health’. Other principals emphasised that a project such as this would be best linked to existing school priorities or focus areas such as Inquiry Learning (School D) or the PEEL Project (School B).

During these initial discussions it became clear that some schools already had a focus for their professional development for the year and were thus less interested in taking on another project. For example, Schools C and Y were already implementing workshops on bullying and resilience and were focused on improving behaviour management through changes to pedagogy. School B had been looking at the NSW DET Quality Teaching framework and teachers were focused on improving a particular aspect of their teaching through a focus on elements such as student self regulation, learning environment, engagement or explicit quality criteria. The Principal (School D) had used the school system’s ‘well-being funding’ (discussed in Chapter One) to employ a counsellor in the school. This principal was of the view that their future funding application would be hindered if they were to be involved in the project, and therefore declined participation in the research.

Generally, however, principals and assistant principals were very positive about the potential benefits of involvement in the research; particularly where involvement was closely linked to school priorities, ensuring teachers would be given time to focus on the project. For example, improving children’s
social and emotional well-being was already a goal in School B where professional development time for teachers was planned and incorporated into the yearly calendar.

Principals also provided suggestions on strategies which were likely to maximise the engagement of teachers in the research. It was recommended that the project would be more positively received if the word ‘improve’ was used in preference to ‘change’ (Principal, School D), since the latter implied that teachers were currently doing things incorrectly. Principals challenged me to consider the issue of a teacher’s willingness to participate in a project where time and effort were extras, emphasising that teachers would view any research in their school as time away from daily routines and therefore necessitating a consideration of benefits and incentives.

An important focus of my initial discussion with principals was whether they felt the project could be sustained at their school over a 12 month period. Issues relating to the role of the researcher were brought to light such as the need to ‘continually highlight successes which show progress is being made’, the need to possibly ‘shout ‘em lunch’ and to remain focused on enhancing their ‘enjoyment of teaching’ (School X). This emphasis on a positive relationship with teachers was further supported by executives from School A and D who said, respectively, that ‘the researcher should have a personal relationship that is non-judgmental, non-threatening, accepting and supportive’ and ‘close monitoring is the way to maintain interest and through email, built in reminders and affirmation’.

The consultative phase confirmed systemic support for a research project around mental well-being conducted within schools in the region. It provided me with a greater understanding of the well-being initiatives occurring in schools across the region and deepened my understanding of how this project might be relevant for, and received by, schools and teachers. In particular, these consultations indicated that:

- mental well-being initiatives have been strongly linked to ‘well-being’ funding and the employment of a counsellor in most schools;
- mental well-being projects needed to be closely relevant to the classroom and everyday pedagogy;
- mental well-being support for children comes in many forms yet consistency is needed across the school; and
- mental well-being issues are an inevitable feature of contemporary childhood and hence teachers have to find ways to deal with these.

**Recruiting and briefing the schools**

Following the above consultations, five of the seven schools were invited to participate in the study. Four of these schools agreed to progress to the next step, which involved an introductory meeting with staff. I met with the whole staff in each of these four schools as part of a regular staff meeting. At this meeting I outlined the background and purpose of the project, the nature of action research, and facilitated discussion around the topic of children’s mental well-being. Teachers were also provided with a letter (see Appendix B) which outlined matters related to the research, inviting them to complete the consent form (see Appendix C) to indicate if they were interested to participate.
In these discussions we canvassed a wide range of issues, including the mental well-being related challenges being faced by children, and the role of teachers in building resilience; solving relationship problems and differentiating classroom expectations. Reference was made to practices that promote protective factors, overcome bullying, and teach social and emotional learning.

Discussion emphasised the opportunity for collaborative professional development for staff which acknowledged teacher beliefs and affirmed classroom practices while simultaneously striving for new learning and improved practice. I stressed that this research would focus on their topics of concern in relation to, for example, anxiety in children and relationships in the classroom and would be driven by their own particular contexts. I emphasised that time away from daily routines would likely provide space to reflect on and solve school and classroom problems and identify strategies for improving children’s mental well-being. I framed the discussion around ‘What’s in it for teachers?’ and emphasised the possible professional gains in terms of classroom practice.

Throughout the briefing I encouraged questions and attempted to build discussion around the purpose for the study. Teachers at School A wondered ‘if there was anything in the research regarding parents and their involvement in children’s mental well-being – is it left to the teachers again?’ Some teachers questioned their involvement in the research as they were already teaching social emotional skills through programs such as Bounce Back. Teachers also had concerns about whether participation would provide help for students who needed support (School B). These questions had the potential to be addressed through the research process as the principals had indicated during the reconnaissance phase. Principals reflected that the research would offer teachers an opportunity to reduce their workload through problem solving around children with additional needs and any issue or concern such as the need to involve parents would benefit from critical reflection and an opportunity to plan changes in practice. Relative to this discussion are the first and second research questions which ask about teacher’s attitudes, values and beliefs regarding children’s mental well-being and how do these attitudes, values and beliefs influence classroom practice?

In facilitating these meetings I endeavoured to use open ended questions and paraphrase comments and questions from participants using a 2nd person reply such as ‘your school may want to explore that further through the research’; ‘your question raises similar issues such as...’, and ‘Is that something we could investigate together?’ This provided participants with opportunities to identify how their concerns could be embraced within the research. When discussion shifted to a particular child and their problems, reflective listening skills were used to guide teachers’ attention back to their involvement in the research and how their concerns might translate to a topic related to children’s mental well-being.

Reflecting on this phase of the project I recognised that I was probably trying too hard to please and thus may have come across as somewhat zealous in my approach. I struggled to balance my role as both an ‘insider’ and ‘outsider’. As an employee of the same education system (but not employed in the participating schools) where participants were employed I faced the challenge of not only gaining
their trust in this different (researcher) role but also safeguarding participant views and opinions. Whilst confidentiality was paramount there was the potential problem of perception in relation to role boundaries. I gained insights as to why teachers are reluctant to become involved in research and the difficulties associated with being both an ‘outsider researching with insiders’ and an ‘insider researching with insiders’. These issues are explored again in Section 6.2 and 6.3.

3.3 Introducing the characters

Following this meeting with school staff, principals provided teachers with one week to decide whether they wished to participate. Three primary schools A, B and C chose to participate but with varying group participation models. School A put forward a small group of five participants to be involved; School B chose to involve the whole staff (15 teachers); and in School C there were five active participants and five passive participants (i.e. the passive participants joined focus group discussions but did not commit to implementing change in their teaching practice). Table 1 summarises each school’s demographic context and numbers of participating teachers.

Table 1 Characteristics of participating schools

<table>
<thead>
<tr>
<th>School and Enrolment</th>
<th>Geographical location</th>
<th>% of children with disability</th>
<th>% indigenous</th>
<th>No. of teaching staff</th>
<th>Varying group participation models</th>
<th>No. of participating teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>School A 407</td>
<td>Coastal</td>
<td>2.7%</td>
<td>0.2%</td>
<td>20</td>
<td>Small group</td>
<td>4 incl. AP</td>
</tr>
<tr>
<td>School B 292</td>
<td>Coastal</td>
<td>5.5%</td>
<td>4.8%</td>
<td>15</td>
<td>Whole staff</td>
<td>15 incl. Principal</td>
</tr>
<tr>
<td>School C 130</td>
<td>Hinterland</td>
<td>12.3%</td>
<td>6.9%</td>
<td>11</td>
<td>Mix of active and passive</td>
<td>5 incl. Principal</td>
</tr>
</tbody>
</table>

The ‘characters’ who chose to participate in the theatre of the research are introduced in the following section. The participant group are a relatively homogeneous group where issues of ethnicity and social position are not of central importance beyond the profile of participants. Participant profiles are based on my conversations and observations during Meeting One and Two, together with information provided via the initial questionnaire. Pseudonyms are used throughout this thesis.

School A is located in an affluent urban community within walking distance to the beach and with a new, large housing development growing around the school. Of the 407 children enrolled, most are from white, middle class families with a small minority living in temporary accommodation. The school grounds are landscaped with low set classrooms built around a central quadrangle. As it is a relatively large school there is a full time principal with one assistant principal and various subject coordinators. The school was built a decade ago and has relatively modern classrooms, colourful moveable walls and a range of computer technology in every learning space. Classes are in year levels (Kindergarten,
Year 1, Year 2 etc.) rather than in stages (Stage 1, Stage 2 etc.) which has been the educational trend of recent times in states such as NSW.

Five staff members agreed to participate in the study with one of these withdrawing early in Cycle 1 (due to teacher resignation). The remaining four were teaching Year 5, Year 3, Year 1 and Kindergarten. This small group of teachers usually met in the library or in the staff room. Seated around one table the researcher could position herself close to all participants, drawing on physicality as a tool for communicating effectively with each individual. The small group context enabled the establishment of closer relationships amongst the participants and more open and reflective discussion.

- **Candy** was in the role of both executive member and classroom teacher at School A. She taught part time (in the morning) in a Year 1 classroom, sharing this class with the Reading Recovery teacher. As Assistant Principal her duties included managing teacher release and student welfare. In early meetings I observed Candy to be very supportive and encouraging towards other staff in the group. She demonstrated well developed organisational and communication skills and a willingness to be a learner. It seemed as though she was modelling for her associates the importance of this type of professional development. Her presence in the group provided lively discussion and she did not shy away from debate or alternative points of view. Her interest in the research stemmed originally from wanting to improve school policy around children’s mental well-being (at one level) and at another level to know how to support or understand a child in her class who experienced a mental well-being issue (autism). This child (who will be referred to as ‘David’ during discussion of the teacher’s actions and thoughts) exhibited behaviours that disrupted the flow of class routines and impacted on Candy’s ability to teach effectively to all children in the class.

- **Sophie’s** participation in the project stemmed from the conflict she recognised between meeting the individual needs of all students in her Year 3 class and managing their behaviour. In Sophie’s class there was one child whose sometimes unpredictable, aggressive and violent outbursts impacted on Sophie’s ability to work with other children. She wanted to give equal and fair attention to all the children in her class and felt that other children’s well-being was being affected. Sophie valued very strongly the use of manners and the treatment of fellow human beings with respect and dignity, consistently raising this point in conversation. She believed that teachers must value students’ feelings and opinions and give them the opportunity to express their feelings whilst insisting that children reciprocate her expectations. Later in the study Sophie’s focus turned to reducing her own anxiety.

- **Sean** was a respected teacher with 30 years experience in the classroom, including in various roles such as Reading Recovery teacher and Sport Coordinator. He was a founding teacher of this school and therefore had journeyed through its development, growth and change. Sean was questioning his Year 5 classroom experiences and reflected consistently on the way children perceived him, offering many personal insights throughout meeting times. His disposition appeared typical of someone who had been teaching for an extended period, but whose enthusiasm and passion for teaching had waned. During discussion, Sean’s sense of
humour and love of children was evident. He appeared to be seeking renewed motivation, which triggered his interest in the research. His participation may also have been triggered by a desire to reflect on and understand his own mental well-being in the teaching role.

- **Shelby** came to the research having just taken on a new role in the school as coordinator of a community and peer support program. She wanted to combine her classroom role in Kindergarten with her facilitation of the support program. Shelby envisaged that the peer support program could play a role in supporting children’s mental well-being but was unsure about what that role might be. Her actions and ideas were characterised by innovative thinking and risk taking behaviour, along with tenacity in solving unusual problems.

- **Ron** was a mature aged first year teacher of a Year 6 class. His life experiences brought immense insight to discussion about mental well-being. Previous roles in disability services and his work in the field of agriculture contributed to his depth of experience. He openly shared personal difficulties regarding students in his class and responded at length to questions during focus group discussion. Ron was a compassionate man when it came to understanding young people. He also had a quirky sense of humour. It was a considerable loss to the group when he decided to reconsider his teaching career and discontinued involvement in the project.

**School B** is a long established site which has seen significant changes in the surrounding environment over the past 50 years. It is located in a busy coastal shopping precinct with an interstate highway only one block away. This location in a built up traffic zone meant that there were problems associated with constant noise and safety. On one of the boundaries to the school there was a three story apartment block where once existed housing and parkland. The windows of the apartment block are only metres away from classroom windows and walls. There is limited playground space and a shortage of suitable bitumen or handball courts. A nearby park serves as the lunch time playground where children have much greater space to run and spread out. The school’s composite set of facilities includes some brick buildings; some demountables or temporary buildings and some wooden two-story buildings. Assemblies and other gatherings take place in the church and church hall across the street. All classrooms have electronic interactive whiteboards as a result of the school’s disadvantaged category for funding. Teachers were often seen utilising technology in their lessons.

The school population has a substantial number of children who regularly transfer from school to school due to parent employment, and has a minority of students from non-English speaking backgrounds. The whole staff (15) agreed to participate in the study, which at least in part reflected the school’s priorities and the principal’s emphasis on meeting the school’s mission and goals. ‘Improving social and emotional well-being’ was listed on the Principal’s pin board as one of their goals for the following year. The fifteen staff members included executive members as well as classroom and specialist teachers such as Learning Support, Music, PE and Language. Most classes were structured in year levels, except where a composite class was needed. Two classes had a shared teaching arrangement to cater for part time work options.
This school was characterised by a relatively large number of families who lived in rented accommodation, families with only one parent in the home and those experiencing unemployment, all of which were noted by the principal as having a considerable effect on children’s well-being. The school also had a high proportion of children with disabilities (5.5%), which impacted not only on staff well-being but also on the way staff were allocated to classrooms (e.g. a fulltime learning support teacher has been appointed which is unusual for a school this size). The research discussions became part of School B’s staff meeting structure and the school protocol involved moving staff meetings from one classroom to another. Arranging sixteen people, including the researcher, around several joined tables became the pattern for bringing staff together.

- **Helga** was an experienced teacher wanting to manage her Year 6 class differently. Her motivation for participating in the research was to explore how her approach to teaching was changing and what impact this had on the children in her class. As she described, she wanted to ‘back off’ from her ‘usual dictatorial role’, handing over decision making and more responsibility (within reason) to the children. I found Helga to be extremely forthright in her contributions to group discussion, always having something to say and (I sensed) potentially she could be very critical in dealing with children. Helga already held a desire to make changes to her present practice and she was already focused on her patterns of communication and her role as a teacher. These behaviours may have been influenced by her ministry role within the school, leading her to see children from a different perspective. She was interested in methods that might improve her engagement with children and their learning viewing these aspects as important factors shaping children’s mental well-being.

- **Kelly** had been a leader and teacher in the school community for many years and was considered by other staff members as having knowledge of school development and change. Her enthusiasm for the research appeared to motivate others on staff to become involved. Participation in this study was taken very seriously by Kelly and she put significant effort into written contributions. During focus group discussion her voice was prominent, providing detailed elaboration about student interactions and her role in the classroom. Initially, her opinion was heavily critical of the parent body, and she described how the lack of parent involvement in children’s school life frustrated the executive. She displayed a passion for teaching and helping children reach their potential. Her love of the school and her positive role in curriculum was consistently evident.

- **Trent** was in his fifth year as Principal at School B, having previously been a deputy in a nearby school. His eagerness for his staff to participate related to the school’s strategic goals, which included a focus on improving children’s social and emotional well-being and implementing the ‘Values Education’ principles. There was a strong sense of leadership in his actions and I observed his relationship with staff and children was very warm, positive and open with an energetic and lively nature and a sharp sense of humour. Trent passionately responded to focus group discussions with his ‘principal’ perspective on school issues. By encouraging the whole staff to participate he was attempting to lead by example, as was typical of his leadership style. By encouraging the whole school to work together on the project Trent sought to promote opportunities for collegiality, consensus and consistency.
Charmaine was a practised Year 5 teacher who was relatively new to School B. In 2007 Charmaine observed that there were distinctive and unique characteristics of her current class which distinguished it from previous years teaching. Her class reflected the school’s low socio-economic characteristics, with several children presently in transition from one school to another and children whose parents were separating or in conflict. She also rated student depression and anxiety as a significant concern, along with bullying and students who were unmotivated to learn, all of which affected her teaching in this particular class. Charmaine considered herself to be reasonably competent in dealing with ‘difficult’ children, however her comment ‘I’ve never had to deal with this level of bullying’ summed up the exceptional well-being difficulties children were experiencing in this class. This, I believe, was the motivation for Charmaine’s participation in the research.

Jane worked in the lower primary section of the school in one of the kindergarten classes. She expressed a concern regarding the youthfulness of parents, something she felt contributed to the well-being issues experienced by children in her class (she later was to introduce a communication book between home and school to address some of the children’s organisational difficulties). Jane believed home life for some children was chaotic. Her even temperament brought calmness to the teacher group whenever discussion became intense. Jane’s impetus for involvement in the project came from four young children in her class who she said were struggling with social and emotional development.

Maureen had been a member of staff for many years. She had a Year 4 class that, she felt, were lacking in ‘initiative’ and had developed bad habits such as waiting to be told what to do. Her primary motivation for involvement thus focused on improving motivation, independence, decision making and responsiveness in her students and to raise student expectations of their learning. Maureen was an energetic and lively personality with a zest for new ideas and openness to discuss difficulties.

Jessica wore several ‘hats’ in the school - one as Year 3 teacher, one as PDHPE coordinator and one as Japanese teacher. Due to her commitment across several areas, ongoing follow-up with Jessica was at times difficult. Her contributions to discussion were carefully thought out but infrequent. She had a keen interest in support for children, working closely with Maureen who had a class in the same stage. Her warmth and love of children was clearly evident.

Nadine was the Learning Support Teacher and was thus involved directly and indirectly in supporting all children who had been identified with additional learning, social or emotional needs. Nadine saw the research as an opportunity to bring about a common and positive understanding of integration and inclusion, making her work with teachers less arduous. She regularly provided a positive stance on inclusion during group discussions. Nadine’s prior knowledge and experience helped her develop a sympathetic approach to children with emotional needs, particularly in the way she extended differentiated provision.

Phillip’s roles in the school included religious education coordinator as well as Stage 2 teacher. There were children in his class who presented unique challenges, as well as some who were exhibiting bullying type behaviours. Phillip was facing some personal and professional decisions
that resulted in some negativity regarding his participation in the research. Initially he wanted to focus on his own mental well-being, which was a priority for him at the time. Phillip gave the impression of being somewhat coerced in his involvement, as he felt this project was another thing and was too burdensome.

- **Alisha** was a Year 1 teacher who wanted to focus on understanding anxiety. She had several children in her class who she believed had social and emotional difficulties. Her experience in teaching and her in-depth professional reading gave her valuable insights into how teachers often judge children without examining the context of the child’s behaviour, such as their familiarity with school routines or practices. Alisha was keen to learn about protective behaviours and to identify some of the risk factors, having done some independent reading on the topic.

- **Sandy** was a relatively new graduate on a full time temporary contract, and was the only teacher under age 30 on staff. She taught a combined Kindergarten and Year 1 class and noted differences in the two year levels when one group was absent from the classroom. She felt that the Year 1 group was impacting on her ability to relax with the class. Sandy played a more passive role in the research, seeming distant from the process. There was a need to actively involve her in group discussion possibly due to her inexperience and uncertainty as to what was expected of her and her future role in the school.

- **Frances** was a part time teacher in Year 2 who had previously taken an active role in social skill development with her children. She expressed her interests in making time for listening to children and indicated she was reflective in her approach to teaching having given a good deal of thought to how she might intervene in children’s well-being. Due to her part time contract Frances was absent from some focus group discussions. Difficulties in gathering data from Frances and tracking her focus area for research were overcome by arranging alternative times to discuss the research.

- **Dianne** taught music in a part-time capacity, providing teachers with release time while she took their classes. Due to her part-time status, Dianne was also absent from some meetings and I was unable to arrange interviews with her during the year. She was in the unique position of teaching all children in the school and therefore spoke about her experiences of teaching music as means to know children in different way. The music classroom for Dianne was a place to connect with children and build relationships between children who might not necessarily perform well in academic work.

- **Jim** taught a Stage 1 class and was also involved in coaching sporting teams. He had a particular interest in teaching resilience to his students. Jim was a conscientious teacher enjoying his early childhood class where he had a lead role in implementing the All Redi program for young children.

- **Max** had taught in the infants for many years and was now teaching a Year 5/6 class. He wanted to develop processes that allowed him greater familiarity with the individual needs of his students. Part of Max’s interest in the project related to his adjustment to upper grades and his
changing understanding of his role and the way he related to children. He recognised that his actions were significant in supporting children’s well-being and that these actions were changeable.

**School C** is located on a small hill overlooking a rural township situated on an expansive river, inland from the coastal strip. In times past this quaint historic town would have docked cargo ships with local produce but today it is known mostly for its fishing, rowing and sailing. The school had recently been refurbished, with new buildings and classroom upgrades. All classrooms and office spaces were under one roof in a long two storey building. There were two separate playground spaces, divided by this building, one used predominantly by younger children and including play and climbing equipment. Of the 130 students at this school, 3.1% were from non-English speaking backgrounds and there were a significant number of children with disabilities (12.3%), one of the higher percentages in the region.

The principal initially wanted all staff to participate in the project, eventually negotiating with teachers to have 5 active participants and 5 passive participants. Those teachers not actively participating would attend meetings to discuss issues, make contributions and have an awareness of the study’s goals and processes. Of the five actively participating one was the principal, two were executive members who were also classroom teachers and two were in classrooms. Focus group discussion occurred in the staff room during scheduled staff meetings, with passive participants encouraged to attend and contribute.

- **Rose** was a relatively new recruit to teaching, having only taught a Kindergarten class in School C for three years. She was not the only young teacher on staff, with two other staff members also quite new to the classroom, thus forming a small supportive group. Rose was eager to learn and responded quickly and enthusiastically to the action research approach, having already contemplated a direction for change. Her open and welcoming approach within the focus group discussion was reflective of her teaching style. In visiting her class I not only gained insights into how this teacher used positive classroom talk but also the issues that prompted Rose to participate in the study.

- **Brianna** was the Principal of School C. She felt that her direct participation in the research would give the school a cohesive focus. In the previous year she had prioritised a need to improve the ‘tone’ of the school and she felt this might happen if there was a focus on relationships between children, teachers and children, and teachers and parents. As principal she was faced with a number of teacher well-being issues, causing an unsettled feel in the staffroom. Brianna had a comfortable and approachable style to the way she related to staff and gave the impression of someone passionate about social justice. She commented that the school experiences social disadvantage and it was important to be empathetic to the plight of some parents who are unemployed. Brianna demonstrated her ability to negotiate and compromise when it came to organising participants for the research.

- **Tania** fulfilled the role of assistant principal as well as creative arts teacher. She had a warmth and compassion for disadvantaged children and spoke at length when asked about events and circumstances she experienced in her dealings with children’s problems. Throughout the
research cycles Tania was plagued with ill health, impacting on her participation. Tania inquired, on two occasions, as to her role in the research, suggesting difficulties in engaging in the action research process.

- **Samantha** was both a classroom teacher and the Learning Support Teacher. She had extensive experience in learning support and had also been a long time Infants teacher. Samantha often found herself positioned between classroom and home when dealing with children’s well-being issues. This became a real concern for her in creating policy around communication and liaising between teachers, parents and children. During Cycle 2 of the research Samantha took leave for an overseas holiday returning after the mid-semester break. Her participation and engagement in the research process was thus interrupted.

- **Alex** also had multiple roles within this small school, being both a Year 1 teacher and Religious Education Coordinator. She joined Tania and Brianna on the executive team. Alex was an experienced classroom teacher who exuded confidence in her abilities and skills. She was seeking answers to classroom issues in relation to one particular child and at first she thought those answers would derive simply from strategies offered by the researcher. It was some time later that we both came to an understanding regarding her role and mine in the study.

- **Collin** was a mature aged Year 6 teacher who was in his second year of teaching. Collin attended the first focus group meeting and contributed a great deal to the quality of dialogue and insight. His choice to remain a passive participant stemmed from the difficulties he was experiencing in his classroom teaching. He believed he did not have the energy to contribute since he had required a significant emotional response to recent events. There were a number of children with mental well-being difficulties in his class that had consistently disrupted and brought havoc to his teaching experience. Collin’s level of well-being was felt by most in the group.

- **Susan** was an experienced year 1 teacher who attended focus group meetings but remained a passive participant. She expressed a passionate love of children and a love of her role within the school. Susan was enthusiastic about children’s mental well-being and valued the research happening within the school. Susan had lived in this rural town with her family for many years and so the school was a long-time place of employment. She had experienced the changes over the years in children’s needs, particularly in relation to young children.

Having introduced the characters and the schools in which they work, discussion now moves to the methods chosen to conduct the research.

### 3.4 Cycle 1: Exploring attitudes, values and beliefs

Cycle 1 of the research process related to Question 1 which explores the teacher’s attitudes, values and beliefs about children’s mental well-being. It includes methods such as the questionnaire and meeting processes which incorporate the planning, acting and reflecting of action research. These methods integrate conversation between researcher and participants and between participants to
establish attitudes, values and beliefs. Attitudes, values and beliefs underpin the change process embedded in participatory action research (Grundy, 1995; Reason & Bradbury, 2001).

This section explains what occurred in Cycle 1 of the research, including the data collection approaches. In particular it provides some detail on the questionnaire and focus group discussions which collected data prior to and during Meeting One and Meeting Two. Methods used during Cycle 1 focused on encouraging participants to articulate their attitudes, values and beliefs and tacit knowledge in either a written or oral (recorded) form.

3.4.1 The questionnaire

Prior to Meeting One, participants were asked to complete a questionnaire. The questionnaire (see Appendix D) was designed to start the action research process by raising teachers’ consciousness of their values, attitudes and beliefs about children’s mental well-being and thus generating discussion at Meeting One and informing teachers’ decisions about the actions they would take through the research. The questionnaire was viewed as a means for learning rather than a means to an end. It was also intended to provide base-line data upon which we could later reflect on what changed as a result of the research. This questionnaire sought data on teachers’ attitudes, values and beliefs around children’s mental well-being and was informed by a number of prior studies including one which surveyed school provision and teacher practice in relation to ‘children’s mental health’ (Graham, et al., 2011); the Kidsmatter project (Parham, 2007) and a study which surveyed teacher beliefs about mental health needs in primary schools (Walter, et al., 2006).

The questionnaire included both structured and open-ended questions. Part A utilised open ended questions to ascertain teachers’ understanding of children’s mental well-being and the ways teachers relate children’s mental well-being to classroom practices. Structured questions required participants to rate mental well-being issues impacting on teaching. Part B of the questionnaire aimed to identify how teachers understood social and emotional learning and the extent to which they reflected SEL in their planning and teaching practice.

3.4.2 Meeting One: Introducing the research concepts

It was important that the research processes and meetings were planned such that they integrated as easily as possible into the regular routines of each school and the school’s calendar of events. The timeframe planned for the project thus varied between each school. A sample outline of the anticipated timeframe is included in Appendix E. The first research meeting was thus timed for the early weeks of Term 2, 2007.

Meeting One provided an opportunity to discuss and negotiate the anticipated timeframe for research activities with staff. The meeting was also an important first step in building relationships with teachers, most of whom were unknown to me (with the exception of some from School A). The meeting was designed to stimulate discussion by identifying broad goals for the research and create a picture of how each school described the mental well-being issues that they faced at that time (data which is discussed in Chapter 4). As such, this first meeting was consistent with the recommendations of
Kemmis and McTaggart (2005a) who claim that, for action research to be participatory, people need to examine their knowledge and values before they can engage in critical and self critical action and reflection.

To summarise, then, the aims of Meeting One were to:
- discuss action research and the role of researcher and participants;
- get to know participants and what they wanted to gain from the research through goal setting;
- generate discussion of attitudes, values and beliefs following teachers’ completion of the questionnaire;
- help teachers better understand social and emotional learning;
- document participant aspirations for their children in terms of mental well-being; and
- negotiate a plan for working with the participants which would integrate with existing school activities.

To help participants better understand social and emotional learning competencies they were provided with a sheet summarising key aspects of the SEL framework (see Appendix F) and we engaged in a brainstorming activity that explored their aspirations for children’s mental well-being and behaviour. These aspirations were then grouped by the participants under the five SEL headings: self awareness, self regulation, motivation, empathy and social skills. This activity provided key insights into the ideas and language that teachers used in relation to mental well-being, and the results of this activity are summarised and discussed in Chapter 4.

While teachers had already begun to reflect on the issues and difficulties they faced in relation to children’s mental well-being during the recruitment phase, Meeting One of Cycle 1 provided the opportunity to prompt them to identify a focus for change that they might take on as part of the study. This was facilitated by presenting teachers with three prompt questions:
- what do I want to change in my teaching practice in order to support children’s mental well-being?;
- what is my first step in making changes to my teaching practice to include social and emotional learning?; and
- what do I need to learn more about to implement changes?

A more detailed scaffold of the discussion is provided as Appendix G.

### 3.4.3 Meeting Two: deepening participant involvement and establishing a focus area

The second meeting was scheduled 2 to 3 weeks after the first meeting. It aimed to:
- gain more data about attitudes, values and beliefs from participants through member checking responses to questions regarding children’s mental well-being from the previous meeting;
- discuss the issues in relation to each participant’s identified focus area and develop a plan with steps needed to carry out plan;
- identify aspects of social and emotional learning within each participant’s focus area; and
- respond to particular issues or concerns raised in the previous meeting by providing background information e.g. empathetic understanding and how it might relate to bullying.
During this second meeting a ‘summary of thoughts so far’ (an example from School B is given in Appendix J) from Meeting One was provided to each school. This document included their broad goals for the research and points relating to teachers’ attitudes, values and beliefs about children’s mental well-being, thus providing an opportunity for member checking.

The initial phase of the research involved teachers, as co-researchers, problematising a classroom issue and identifying a focus for change, or one that is changing (consistent with Kemmis & McTaggart, 2005a; McNiff & Whitehead, 2007). Action research does not rely on inquiry questions but rather an inquiry based on problems and issues as described in Table 3 of Chapter 5. Teachers were involved in thinking about ‘How can I improve practice?’ through their identified focus area. By collaboratively teasing out the possibilities, breaking down the issue into smaller parts or locating the underlying difficulties, each participant was scaffolded to identify some beginning steps to inform their next actions.

Meeting Two proved to be challenging in bringing participants to a decision on their focus area, and this process required a great deal more discussion, exploration and patience than I initially anticipated.

Focus areas varied from individual student concerns to teacher behaviour and practices. Following Meeting Two, the focus areas that had been listed for each school were collated in tabular form to show how the identified and planned activities related to the SEL Framework. This enabled both member-checking as well as monitoring of progress against initial goals. This summary is provided and discussed in Chapter 5.

### 3.4.4 Ongoing communications and informal visits

Following Meeting Two it became apparent that more frequent face-to-face contact with teachers was necessary to ensure they refined their focus area and had clear plans in place. In the first instance, I proposed to use group emails that invited an individual response as a reflective tool and means of communicating. This proved useful in School A, where all participants embraced this approach. However it was ineffectual in School B and C. Teachers also were hesitant to journal or write down notes on their perceptions and actions and there were boundaries and limitations to the time teachers were prepared to give to the project. This created a tension for me as a researcher. I was sympathetic to the busyness of school and classroom life and conscious of the impact research activities might have on teachers’ daily routines. I attempted to balance consideration for their needs with my desire to engage with them in fun and creative ways.

I thus initiated a series of visits to schools to hold informal meetings with participants. In Schools B and C I visited classrooms throughout the day and made the most of opportunities when teachers had a quiet moment to discuss their focus areas and the research. Participants from School A met with me at a local café away from school interruptions, and this proved to be a constructive step in building positive relationships. I continued to stay in touch with participants, regularly making contact to prompt critical reflection on what teachers were doing and what was happening as a result. As such I became a ‘process moderator’, fine tuning strategies and steps taken by participants, as recommended by Kemmis and McTaggart (2005a).
3.4.5 Implementing initiatives

Following the second meeting (in Cycle 1) teachers were expected to begin acting on their identified focus area, working through the steps which were developed as part of the planning process. While they were encouraged to take notes and share reflections via email only a few teachers made this formal commitment. Participants were also encouraged to talk to each other regarding their focus areas. In School C teachers formed a Coffee Group; in School B mental well-being was a constant agenda item during staff meetings and in School A discussion continued in the well-being committee. These processes are discussed in Chapter 5.

3.5 Cycle 2: Following teachers in the implementation of their projects

In this section I describe the activities that took place during Cycle 2, including the methods that were used to collect data. While Cycle 1 was focused on working with teachers to better understand their values, attitudes and beliefs, to identify issues in their current practice and plan an initiative based on a focus area for change, Cycle 2 was focused on working with teachers as they implemented their plans and reflected on their changing practice. Methods used to progress the phases of the action research cycle included a semi-structured interview; an interpretative feedback summary; meetings to share feedback and ascertain sustainability; and reflective processes such as individual responses to open ended questions.

3.5.1 The semi-structured interview

In the middle of Term 3, a semi-structured interview scaffold (see Appendix H) was used to guide a 30 minute discussion with individual participants. The interview provided an opportunity to:

- understand whether and, if so, how teachers were using a social and emotional approach in their classroom;
- learn more about teachers’ attitudes, values and beliefs around children’s mental well-being; and
- understand how change was occurring for individuals and what revisions participants were making to their actions.

A structured approach ensured that I collected consistent data from each participant while also enabling me to customise questions to each individual’s circumstance and to pursue discussion of issues that were relevant but not anticipated. Due to limitations in time, questions were made available to the participants prior to the interviews allowing each interaction to be highly focused and more efficient. These interviews provided an opportunity to capture each individual’s thinking and practice – something that was limited in the previous focus group discussions.

3.5.2 Interpretative feedback meeting

Toward the end of Cycle 2 I synthesised the data collected throughout Cycle 1 and Cycle 2 and forwarded this to schools. These feedback papers provided participants with insight into how I had understood and interpreted what they had told me regarding the implementation of their initiatives, and demonstrated that I had recognised and interpreted participant insights as important learning.
Once teachers had been given an opportunity to read this feedback I organised an ‘interpretative feedback meeting’, which provided an opportunity to collect some summative data from teachers about what they had learnt and what did or didn’t work for them throughout the year. This was also an opportunity to discuss with teachers what, in the research process, had influenced their thinking about children’s mental well-being, and what their role might be in relation to it. The discussion also enabled teachers to reflect and elaborate on what they might now change in their teaching practice, and what had influenced their resolve to change. Participants were invited to set some ongoing goals and personal plans so as to continue the process of engagement with their learning and personal development and to consider how they could apply what they had learnt in the following year.

### 3.5.3 Meeting to ascertain sustainability

At the beginning of 2008, following 12 months of interaction with participants, I returned to each school and facilitated a focus group discussion of approximately 1 hour. This was to become the final meeting. The discussion sought to ascertain what the school community felt had changed as a result of their involvement in the project and what they hoped and thought would continue into the future. Participants were reminded of their personal plans which they had established at the end of the previous year (see above) as a way of prompting them to reflect on their changes in attitudes, values and beliefs. A scaffold for this semi-structured discussion is provided in Appendix I. Data from this final scene of the research is presented in Chapter 6 where issues of sustainability are considered.

### 3.6 Approaches to data analysis: Scrutinising the performance

As is typical in action research, analysis of data occurred iteratively by reflecting in action, on action, through action (Dick & Swepson, 1994; Kemmis & McTaggart, 2005a; Whitehead & McNiff, 2006). Analysis and reflection thus occurred simultaneously and continuously, through ongoing dialogue between the researcher and participants. Questions were continually posed such as: What did you do? What did you notice? What would you change? Another level of analysis also occurred retrospectively at the end of each cycle, where overall data was collected, transcribed and thematically interpreted, with these interpretations ‘fed back’ to participants.

Reflexivity through dialogue played an important part in the reflective process and occurred at several junctures. For example, when I was engaged in conversations with participants, I posed reflective questions which prompted deeper insights into participant learning. Reflexivity also played a role as I critically questioned how I was engaging with participants through my own diary entries. The use of a diary in action research allows the researcher to ‘see’, creating a window on what might have happened or been spoken about, and recreating the scene from that day through the eyes of the researcher.

As part of my own reflexive dialogue I, along with participants, continually challenged the process with questions such as the following: What was being communicated that was of value?; Do my meetings with research participants show that they are making their own decisions about what they want to
learn?; What values can I see embodied in teachers’ practices?; What is influencing my own value judgments about what is ‘good’ practice? How have my own values, attitudes and beliefs been challenged?

The investigation of data through retrospective analysis meant returning to the transcriptions and interpretations of questionnaires, meetings and focus group discussions so as to identify common themes linked to theory or existing evidence (such as that provided in the literature review in Chapter 2). Analysing qualitative data is an intricate process of reducing raw data into conceptual categories. Dey (1993) describes four steps in qualitative analysis which guided the data analysis process in this study. Step 1 was to develop a thorough and comprehensive description of the phenomenon under study so as to have the background information to develop concepts (see Sections 1.1, 1.2 and Chapter 2). Step 2 was to develop concepts as building blocks for analysis such as teacher philosophy, beliefs and assumptions; classroom relationships, psychosocial resources and perception of childhood; classroom structures, daily practices and the degree of emphasis on spirituality (see Chapter 4).

As with a jigsaw, data are pulled apart, then, put back together using classification and categorisation to redefine the pieces according to themes and conceptual ideas. Step 3 was to develop a thematic structure based on theoretical influences through which the actions or events I was researching could be rendered intelligible – in this case, (a) I associated attitudes, values and beliefs about children’s mental well-being with the multi-disciplinary influences of psychology and sociology (discussed in 2.1) and the ‘health promotion’ discourse including the SEL Framework (Zins, et al., 2004) and (b) I associated the initiatives taken by teachers and the subsequent changes to attitudes, values, beliefs and practice with elements of Communicative Action Theory and an ecological model (Greenberg, et al., 2001) (discussed in Chapter 7). In this way, categorising was a method of funnelling data for further use in a later cycle of data analysis. Step 4 considers data analysis as an iterative spiral moving from data to describing to classifying to connecting and then accounting, as found in Chapters 6 and 7.

Issues related to validity and reliability were important considerations during this process. Whitehead and McNiff (2006) emphasise the importance of the action researcher’s process of interpreting data and generating quality evidence in relation to critical standards of judgment. These standards were represented by goals for the research (Table 2) and were used to generate evidence that supported any claims to knowledge as discussed in Chapter 5. Each participant had their own standards of judgment represented by their focus area objectives (Table 3). Subsequent changes to attitudes, values and beliefs were fed back to participants to enhance their understanding of the situation. Such standards of judgment initially came about through meeting and questionnaire data that was collated and categorised then cycled back to participants for critique. Embedded in the attitudes, values, beliefs and assumptions of the participants and myself, are the standards of judgment which is what we claim to value. Throughout the action research process the evidence of change and educational engagement was most noticeable in the way the standards of judgment were or were not met by participants.
Validity in action research is about personal and interpersonal issues (Moghaddam, 2007) where the researcher is the instrument for uncovering theory-in-use (Patton, 1990). Qualitative inquiry offers opportunities not only to learn about experiences of others but also to examine the experiences that the inquirer brings to the inquiry (Lincoln & Guba, 2000; Patton, 2002). Criteria for judging the quality and credibility of data related to trustworthiness, authenticity, acknowledged subjectivity, contributions of dialogue, triangulation and practice as opposed to theory as a means to deconstructing truths (Patton, 2002, p. 544). Therefore issues of validity and reliability were addressed by taking my interpretation of data in the form of tabulated summaries and short reports (for example, Appendix J) back to participants at the beginning of Cycle 1, at the end of Cycle 1 and at the end of Cycle 2 in order to check my analysis/understanding of their attitudes, values and beliefs and practices. This member checking process validates researcher and participant knowledge (Stringer, 2004). It also achieves an audit trail, where all research documents, letters and questionnaires are made available to confirm understanding and interpretation.

The triangulation of data was utilised as a key strategy to enhance validity and reliability of the research findings by having more than one data source to substantiate a theme. Data from the questionnaire, focus group discussions, individual focus area development, interview data and feedback meeting summaries were all synthesised for comparable or contradictory themes (Patton, 2002), as was the data from the three different school contexts. I employed a manual coding method to sift through the information, clustering ideas around categories and themes. These categories of information were influenced by subjective researcher experiences and by the evidence presented in the literature review, as well as more ‘grounded’ themes brought forward by participants. The findings chapters (4, 5, and 6) have privileged the narratives of the teachers and therefore re-engagement with the literature follows in Chapters 7 and 8. To include the literature in earlier chapters would distract from the narratives of the participants.

3.7 Communicative Action Theory: A framework for analysis

Data analysis, through the lens of Communicative Action Theory, was first proposed in 1984 by Jürgen Habermas who wanted to not only understand the world but to also transform it. For Habermas, this meant observing more closely the intersubjective relations of human cognitive interests (e.g. work, interaction and power) based on theories of language and communication (Fernandes, 2003).

In this research, Communicative Action Theory was identified as providing the potential to deepen analysis of the data, since the study had a central interest in the language and communication patterns used by teachers around mental well-being. It was not intended as an analytical tool in interpreting discourse but rather became a theoretical basis for deepening understanding of the action research processes.

Communicative action presupposes the use of language as a medium for reaching understanding, in the course of which participants, through relating to the world, raise attitudes and beliefs that can be
accepted or contested (Habermas, 1991b). To be ‘communicative’ means having language competencies. Language, in this context, is broadly defined as action upon which you can be reflective because language has an important role in reaching a reciprocal understanding (Fernandes, 2003). It can be seen as a process of collective learning. Communicative action makes references to the actors who seek to reach an understanding about the action situation and their plans of action in order to coordinate these by way of agreement through speech acts (Houston, 2003; Moghaddam, 2007). More simply, communicative action means expressing an interest in changing or interrupting an aspect of the participant’s social life (Fernandes, 2003). In the context of this study, communicative action relates to the interactions between teachers; between teachers and children; between teachers and parents; between school personnel and community agencies. As a social theory, communicative action has been identified for its interdisciplinary approach to change.

Studies have applied Habermas’ theory of communicative action to explore socio-cultural dimensions and communicative competencies across a range of domains. Communicative Action Theory has provided a framework for analysing health worker competence, identity formation and intersubjective relations in accessing services which formed a process for future mental health policy making (Hodge, 2005). Studies from other disciplines have shown how the communicative action framework (Manninen, 2000) provides a deeper understanding of the quality and style of interaction occurring inside networked virtual environments, dispelling myths regarding the lack of cognitive interest. In education the problem of research-based teacher professional development (Clark, 2009) was explored through Communicative Action Theory alongside theories of third space learning (Bhabha, 1984) and conscientisation (Friere, 2006). Communicative Action Theory has been more broadly utilised in educational research but as yet has not been applied to how mental well-being in schools is understood or supported.

Kemmis’s (2001) interpretation of Communicative Action Theory and its role in improving educational practice describes a ‘two level’ social theory. At one level, Communicative Action Theory situates the participants in terms of three interacting systems or sets of processes: socialisation acts, social integration acts and cultural reproduction acts, providing a portal through which to observe or critique the actions of participants. Socialisation acts describe actions that relate to harmonising personal identities, evidenced by motivation and internalising values. Social integration acts describe an interconnected social space, evidenced by ordered interpersonal relationships. Cultural reproduction acts provide the semantic schema to interpret cultural knowledge. The second level of Communicative Action Theory delivers three component parts or resources which form the ‘lifeworld’ of teachers – personality (competencies in speech and action), society (belonging to a group as they enter personal relationships) and culture (store of knowledge from which interpretations are drawn), providing a structure for knowledge creation.

Kemmis (2001) believed critical inquiry, through action research, would help to create the circumstances in which communicative action among those involved could be encouraged, enabled, sustained and made generative in and around the school setting. In particular, communicative action may focus on the boundary crises which arise at the intersection of system and of lifeworld aspects of
the setting, as they are realised in the immediacy and demands of daily school practice. Construing the actions that occurred in this research in terms of intersecting (interconnecting) points where systems (e.g. safe schools policy) meet lifeworld (e.g. teacher capacity to manage anxiety in children) made sense of many of the social and educational issues being confronted by participants in the action research project (Kemmis, 2001). This dynamic, where participants involved as co-researchers in this study are making sense of the mental health agenda and the place of mental well-being in schools, can be fruitfully analysed through Communicative Action Theory.

Habermas (1984, cited in Kemmis, 2001) offers a description of communicative actions belonging to three different scenarios. Each scenario refers to either what is happening when mutual understanding is present; when co-researchers are working towards mutual understanding or when there is crisis. In observing how co-researchers manage and exist within their three structural ‘nuclei’ of the lifeworld - personality, society and culture - and then observing how these structures interact with the reproduction processes (cultural reproduction, social integration and socialization), Habermas (1991a) suggests it is possible to ascertain the nature of communication. In the presence of mutual understanding and absence of crisis, when reproduction processes operate as a function of the structural components of the lifeworld perspective, each of the components appears as follows:

- The personality component appears to be represented by socialisation patterns and educational goals; social membership and interactive capabilities by which practitioners own identities and capacities are formed and developed.
- The society component appears to have legitimately-ordered interpersonal relations among people and where actions are motivated by a desire to conform to norms.
- The culture component appears to be represented by consensus, where knowledge is validated through agreed interpretation, where participants feel obligated to conform and tasks are accomplished through existing world conditions or frameworks.

The above lifeworld components reflect characteristics of social order maintained by the presence of mutual understanding, describing goals or outcomes worthy of achievement. But it is when communicative action is working towards mutual understanding that the Habermasian Theory of Communicative Action comes to the fore in research analysis as a tool for considering the process of change.

In the absence of mutual understanding, when symbolic reproduction processes operate as a function of the structural components of the lifeworld, we see a different set of characteristics describing events:

- The personality component concentrates on forming identity, revisiting prior knowledge and building new knowledge based on appropriateness and relevancy to co-researcher situations.
- The society component represents the sharing and validating of renewed knowledge; the coordination of steps taken to share and validate individual knowledge and the internalising of values by co-researchers.
- The culture component includes the distribution, critique and acquisition of cultural knowledge of a school setting, filtering out those value orientations which are not useful for mutual understanding and reviewing those values that effect socialisation.
A third view of Habermas' framework of communicative action allows the researcher to differentiate circumstances when mutual understanding and consensus is not cost free and where various kinds of crises become evident in the domains of culture, society and personality. When reproduction processes are disturbed and systems become a burden on the lifeworld of participants then dysfunctional characteristics become apparent:

- The personality component experiences difficulties finding a point of reference within the culture of education, alienation from social norms and individual psychopathologies.
- The society component is marked by an absence of values and principles and withdrawal of motivation.
- The culture component manifests a loss of meaning and traditions that create and support a collective identity.

In describing each of these scenarios that may occur in schools, particular criteria are formed and developed that position individuals and groups in terms of mutual understanding or crisis. A key interest of this study is how the characteristics of mutual understanding around children's mental well-being emerge and how various kinds of related 'crises' were utilised as stimuli for change.

### 3.8 Chapter summary

This chapter has established the kind of movements the researcher has made to construct the stage for action research to take place. In the telling of 'how' the study evolved during these early stages the reader is able to familiarise themselves with the researcher's beliefs and the strategies employed in Cycle 1 and Cycle 2. The methodology positions the researcher's personal involvement in the knowledge construction process, encapsulating the relationship between researcher and process; researcher and topic; researcher and co-researchers. Whilst events from school to school varied the overall process remained common. Approaches to data analysis are embedded in the research cycles and these exemplify the importance of reflexivity in action research; the iterative nature of data creation and the ongoing deconstruction and use of interpretative frameworks. In describing the methods employed in the research, this chapter also touches on the difficulties encountered in engaging in action research as an outsider, that is, someone facilitating the research from outside the immediate research context.
Chapter 4: Exploring the characters’ attitudes, values and beliefs

This chapter reports on the findings from Cycle 1, with a particular focus on the first research question which asks about participants’ attitudes, values and beliefs regarding children’s mental well-being. It explores key themes that emerged regarding, firstly, teachers’ understandings of children’s mental well-being and, secondly, their attitudes, values and beliefs about the role of the teacher in supporting children’s mental well-being. The chapter concludes by discussing how teachers’ values, attitudes and beliefs influenced their identification of a focus area for their own research, and on the goals that they sought to achieve through the project.

Most of the data presented in this chapter were drawn from the early parts of the research, particularly teachers’ responses to the questionnaire used as a stimulus for subsequent discussion of its content in the first meeting. A qualitative approach to the data from the questionnaire was applied and given as a stimulus for subsequent focus group discussion. These early activities initiated a participatory process for engaging with teachers in exploring their attitudes, values and beliefs, rather than just a one-off collection of data. In presenting the data in this chapter, I sometimes do not distinguish between that derived from the questionnaire and that from the discussion, since the latter flowed directly from teachers’ responses to the former. In places, however, I do make reference to data from other research activities that occurred in Cycle 1 including where teachers were prompted to brainstorm their initial expectations about the project and their aspirations for children’s mental well-being in their school. At this time teachers had also been exposed to the SEL Framework.

This chapter is built around the teacher narratives so as to maintain integrity in reporting their attitudes, values and beliefs in relation to mental well-being. Their voices, rather than other literature, are privileged in presenting the findings. As indicated in Chapter 3, pseudonyms are used throughout the chapter.

4.1 Teacher perceptions of children’s mental well-being

In this section I explore teachers’ attitudes, values and beliefs about children’s mental well-being. Data are drawn from collated questionnaire responses and meeting transcripts (as described in Chapter 3), particularly responses from teachers regarding their aspirations for children’s mental well-being in their schools. Analysis of this data involved identifying themes which were open coded and then axial coded according to context and source of data followed by selective coding which integrated material through a grounded theory approach (Patton, 2002). I also focused my analysis on the way teachers perceive and prioritise attributes of social and emotional development. The resultant themes are reflected in the headings used in this section, namely that teachers believed children’s mental well-being was associated with:

- a social conscience;
- a balanced approach to life;

42
• independent thinking and action;
• a focus on self acceptance versus peer opinion;
• emotional versus rational behaviour;
• resilience;
• a safe environment; and
• positive relationships at home and at school.

The views of the teachers in relation to these issues are detailed in the following discussion.

4.1.1 A social conscience based on empathy

A key theme from the data was that teachers believed children’s mental well-being is associated with children having knowledge of how to help others in the school and in the community. Teachers valued children having a social conscience and showing respect through various empathetic social behaviours. In School A teachers felt children should acknowledge social inequalities by ‘accepting that everyone has strengths and weaknesses’ and to have ‘trust in’ and ‘acceptance of others through friendship’. Teachers in School B described positive empathetic behaviour such as ‘caring’, ‘knowing everyone has a right to be safe and happy’, ‘knowing what’s fair for me and others’, ‘listening’, ‘selflessness’ and ‘knowing when they are hurting others’. Similarly, in School C, teachers emphasised the sharing of positive affirmations such as ‘good job, fantastic, well done’, ‘encouragement’, ‘showing kindness and consideration’, and ‘looking after everyone’. Teachers in School C also wanted children to practice (or embrace the idea of) ‘put ups’ rather than ‘put downs’ as they believed children need to know what impact their actions have on others.

During discussions in School B about which social and emotional skills are important in developing mental well-being, several points were raised about the relationship between empathy and social conscience. Frances felt children should:

...recognise emotional problems in their peers so they don't say the wrong thing to the child who's having a bad day or ignite problems by not recognising that the child is sad today or the child is emotional today.

Phillip agreed with Frances, elaborating that:

I think empathy is a big problem in our whole society. We don't care enough about how other people are feeling... We don't try to walk with other people. We're too busy trying to run our own race.

These views about what influences children’s capacity for empathy triggered further comment from Trent:

As children get older you’d like to think their empathy increases because they’re pretty self centred little beings. It’s all about me, me, me. It'd be great to have teenagers who have empathy but they don't seem to develop it. I don't think we live in a society or a culture that promotes it.

Phillip added, ‘as social beings, if they haven’t got it when they’re young, chances are they’re not going to get it when they’re older’.
Discussion thus led to broader issues in relation to empathy in society. Teachers were indicating their belief that society had changed in terms of social conscience and debate followed regarding how empathy developed. Jane (School B, Meeting One) commented that ‘empathy was really well taught when we were young’ but on further prompting indicated that it wasn’t taught but ‘was expected’, adding ‘today it’s like survival of the fittest’. Trent (School B, Meeting One) similarly suggested that our culture does not promote care for less fortunate individuals and Phillip (School B, Meeting One) concurred, saying, ‘I look back at my parent’s generation, who went out of their way to help others who were in trouble’. Rather than telling children that they should empathise with others, participants believed children should be encouraged to recognise and understand their own moral thinking. This is exemplified in the following story told by Alisha (School B, Meeting One):

There is always a glimmer of hope – like I can still remember this time last year before Easter one little girl went outside and put her Easter egg down on the ground and somebody else smashed it. Without even thinking another little girl from a family who you wouldn’t think would do this, raced inside, came out and said ‘You can have mine’. She did this without prompting or expecting to be noticed. Even so, I later praised her quick thinking and concern for the girl who lost her egg. I’ve got a little boy in my class who everyday praises anybody other than himself – it’s not because anybody comments on it, like it’s a genuine thing. I think if we can foster that - to me these are like the eggs – they’re the things we can build on.

Frances (School B, Questionnaire), on the other hand, felt that ‘empathy comes from home - it’s a family value’. She believed that it was developed not through explicit teaching but on a daily basis through family interaction. Trent concurred with this, again reflecting his views about changing social values and his assumptions about positive family structures:

I agree. You’re not seeing that same sort of family culture. We’re not seeing the standard family. Look at some of the families here. They’re seeing more domestic violence, more alcohol and drug abuse, more road rage... all that sort of stuff. We had a group of girls around for (my daughter’s) birthday party. And one girl said ‘Do you guys always talk like this at dinner time?’ I said ‘yes’, and she said, ‘Oh my sister tells me to shut up when I want to say something about school’. See their parents allow it. They don’t want to know about it. ‘We’re not interested in you’ is the response, so they don’t talk very much.

Trent’s construction of ‘family’ underpinned his belief that empathy is modelled and exemplified in the home. He emphasised that an absence of parental values in connecting the child with practices of social conscience was more and more evident in his school. Alisha provided another indication of how changing social mores and lifestyles influenced children’s development of empathy and social conscience:

With both parents working, the children aren’t seeing mum going to do the volunteer work here or there, or meals on wheels - things they can reach out to the community with. They’re not seeing it happen like that.

Teachers at School A had a contrasting perspective to School B on social conscience, why it was important and how it could be developed. The link between the development of empathy, social
conscience and involvement in volunteer activities, which was raised by Alisha, was also discussed at School A. Here, however, the discussion focused on the role that activities at school (as compared to home) could play. The teachers at School A saw participation in the school’s community peer support program, Mini Vinnies, as a vehicle for learning about compassion and becoming a better person within the community. Shelby described how she had talked to the children about the value of establishing a ‘Mini Vinnies’ group and what they thought they would get out of being involved. Two of the issues the children had identified were happiness and compassion.

Candy (School A, Questionnaire) agreed that children need to learn about social conscience through being actively involved in self-reflection and raising consciousness of morality. Sean (School A) also reinforced the view that school communities are a place for children to learn about social conscience through social interaction:

They feel positive about what happens at school – they see it as a worthwhile place to learn about themselves, other people and the world they are part of – that they can succeed.

Sean added later that ‘the importance of children knowing about social expectations and perceiving right from wrong was linked to self discipline and having some understanding of morality’ (Questionnaire). Sean identified ‘empathy as the hidden curriculum’, valuing its importance in classroom practices and problem solving, ‘If they have empathy towards others this will help prevent bullying’. Sean believed that when teachers shared their feelings with children this created ‘a level playing field’. He explained that by making feelings explicit, both children and teachers learn about the nature of human emotions and develop the capacity to empathise. Similarly, in the following written comment, Candy (School A, Questionnaire) indicated that a child should be ‘socially prepared to be involved with other children and teachers’ and ‘reasonably self disciplined - know some of society’s expectations’. According to Candy, children should have skills that assist in their involvement in the classroom and school community because being socially prepared is a prerequisite for readiness and openness to learn.

From this data we can see that participants believed mental well-being was dependent upon the acquisition of a social conscience, through having self-awareness and knowing what is important in life. They suggest that being conscious of others and acting on moral understanding has been negatively influenced by changing societal expectations. The peer support program (School A) was valued as a way of developing an understanding of self and others, which reflected an approach to teaching children how to self-reflect and become more aware of moral issues. This notion of children’s mental well-being relating to social conscience, based on empathy, also linked to the following theme - a balanced approach to life and a stable lifestyle.

### 4.1.2 A balanced approach to life and a stable lifestyle

Balance was one of the key words frequently used by teachers in this study. Tania (School C, Questionnaire), for example, indicated that children with positive mental well-being are resilient, balanced and have ‘all areas operating effectively within the child’. Being ‘balanced’, Tania explained, referred to a constant mix of attributes, suggesting children should be able to monitor changes in their
physical, emotional and social well-being such as managing anger or knowing what physical tiredness feels like.

Teachers’ also spoke of mental well-being as associated with balance across multiple areas of development. Rose (School C, Questionnaire) raised the importance of balance when she said that ‘emotional development is as important as physical development and intellectual development. Stability is vital in these areas’. Stability was also referred to by Sean (School A, Meeting One) in relation to a well-balanced lifestyle, suggesting that one goes with the other:

I think mental well-being depends on the coping mechanisms that children possess. If children have high self esteem and are well balanced in life then their mental well-being would be consistently stable. Alternatively, children that do not have a well-balanced lifestyle, their mental well-being would not be as stable. Mental well-being in children depends on their resilience, stress levels, personality, confidence and social acceptance.

Implicit in these comments is the belief that instability in the child’s understanding of themselves results in an imbalance, which in turn reduces resilience and confidence and increases stress.

Although not explicitly mentioned, teachers also made many comments that implied a belief that the child’s temperament affected their mental well-being and subsequent balanced approaches to life. In defining mental well-being, Alex (School C), for example, valued ‘habits of calm behaviour and judgment’ (Questionnaire). She considered emotional calmness as a way of coping and being more social:

When emotions are stable, children are either able to handle upsetting situations or able to ask for support or help in these times. Children are also able to interact in groups comfortably.

Sophie (School A, Questionnaire) similarly stated that if children have a balance of the ‘right ingredients’, they will manage difficult situations and perform well in the classroom. Closely linked to notions of temperament, teachers felt that regulating emotions and responding appropriately were important factors contributing to children’s mental well-being. This is reflected in the following story, told by Kelly (School B) in the focus group discussion, about one student who, did not self-regulate and respond appropriately. Kelly believed this child lacked mental well-being and, in her telling of the story, identified what she values in terms of well-being:

He says, ‘I need the computer room’ and you go ‘wow humpty doody doo’ (meaning so what), then he kicks the door down. There are rules that we are working on that state he is not allowed to do that. Like he walked into a meeting yesterday, straight in from the music room, straight through… excuse me, stop and go and knock on my door.

Yesterday was a prime example right, it was in the computer time and he always comes in and tells me he has the computer and I say ‘fine’, but he said to me, ‘but I want to do what you’re doing, can I have extra time to do that’ and I went ‘no, you make your choice now’ and he said, ‘but I want to do the same thing’, because he missed this lesson with me and he likes what I do. But he didn’t want it, he wanted both and he wanted extra time, all he had to do was choose…
Kelly believed the demands of this particular child were reflecting a lack of self-regulation and demonstrated a lack of reasonable and balanced behaviour. Kelly made an assumption that the child’s temperament and impulsivity were an underlying factor, and that these impacted on his balance (and thus subsequently his mental well-being). In this way, Kelly was attributing the mental well-being issue to the child and not the environment.

The data thus indicated that teachers’ understanding of mental well-being in children was associated with notions of balance within children’s lives. These views translated to multiple areas of development, suggesting that children should have an equivalent mix of physical, social and emotional well-being attributes. Valuing balance as an important attribute was also related to psychological aspects such as having an even temperament and the ability to regulate emotions. Further psychological aspects associated with well-being are discussed in the next section in relation to independent thinking and confidence.

4.1.3 A capacity for independence

Children’s mental well-being was also associated with independent thinking and displaying confidence in their independence, as signalled by a number of teachers in this study. Questionnaire data suggested that participants believed self-determination skills, such as goal setting and persistence, supported children’s ability to use metacognitive processes (their ability to learn how to learn). Mental well-being, therefore, was evidenced by ‘children succeeding at their own level, making responsible choices about their own learning, being praised for their efforts and achievements, and learning to accept mistakes and failures’ (Sean, School A). Implicit here is an association with children’s capacity for independence.

Independence also emerged as a theme from the data related to teachers’ aspirations for children. ‘Learning from mistakes’ (Sean, School A) was referred to several times as a type of confidence that incorporates perseverance and risk taking behaviour. Maureen (School B) also valued children being ‘independent workers’ and having an ‘I can do this’ attitude. For Brianna, mental well-being was associated with independence and displaying confidence, and her questionnaire also included ideas about children having a ‘keenness to learn’ and being ‘engaged in all school activity’.

Teachers believed that the capacity of a child to set goals and be motivated to achieve these goals was an indicator of their independence, and subsequently their mental well-being (for instance, Trent School B). Independence thus related to the ability to motivate oneself and make decisions about achievement and intrinsic rewards:

...with motivation, you know, you see it when you’re out. (Parents tell me) ‘you know what, I couldn’t get him to do anything unless I bought him...’ So that’s the struggle now in schools compared to when I first started 25 years ago.

Trent valued intrinsic rewards and delaying rewards so that children are given opportunities to think more independently about the choices they make. Trent’s was critical of the type of extrinsic reward strategies used by parents because he felt these strategies removed children’s capacity for independence. Trent associated changes to the way parents (and society more generally) motivate
children, with problems in children’s mental well-being. Charmaine also associated mental well-being with the capacity to self-motivate and take risks:

A lot of it (well-being) is how can we reward them and motivate them. Some won’t do anything unless they get a star or a tick or something which is fine because it’s safe.

It would seem, from these teachers’ perspectives that mental well-being is reliant on how children are motivated and the support children are given to learn from mistakes and make decisions about how they are going to support themselves.

Teachers in this study acknowledged and valued the role children play in their own learning as an indicator of mental well-being. Maureen (School B) identified a child’s ability to recognise personal competency on any particular task (their self-efficacy) and their capacity for independent, lifelong learning as key to mental well-being. Phillip (School B) agreed that ‘children need to develop those skills if they are to survive in life’. Shelby (School A) also made similar claims, saying ‘I enjoy and think it important to learn for oneself and so, by valuing independent learning, I encourage a child to develop skills for lifelong learning’. Shelby went on to list the following as indicators of well-being: ‘personal power, persistence, curiosity, confidence, openness to ideas and in many cases lateral thinking as a tool for independent learning’.

For these teachers, then, an important facet of children’s mental well-being was the capacity for independent thought. Teachers valued self-determination skills such as goal setting, persistence, making responsible choices, motivation, monitoring their learning and confidence. Societal changes were viewed as having impacted on how independence is valued and supported. This theme of independence ties closely to the third theme arising from the data, namely the notion of knowledge and acceptance of self.

4.1.4 Knowing and accepting who they are

Teachers identified self-knowledge as a key indicator of children’s mental well-being. This was particularly evident from teachers’ responses to the questionnaire. For example, Sophie (School A) mentioned ‘children feeling good about who they are and where they are in the world’, while Shelby (School A) wrote ‘how children think about themselves as a person in relation to other persons, their emotional self talk throughout their day and it is about how the child views herself or himself’. In a similar vein, Brianna (School C) listed ‘knowing everyone has a part to play and knowing your part’ and Charmaine (School B) wrote ‘feeling happy with and in control of self’. Such comments suggest teachers in this study recognise that children need to be able to reflect upon their personal identity. It is implied that having the ability to shift thinking and alter perspective relies on personal confidence and how accurately the child evaluates their behaviour.

Attitudes towards positive mental well-being appeared to align with an acceptance of self rather than protection of self. Sean (School A) responded to the discussion on personal identity and its relationship to mental well-being with a concern for the way in which some children participate in learning tasks:
Kids who think they are clever, sometimes they're high achievers, children like this, when faced with something difficult, won’t try. They seem to protect their self esteem against any challenge by doing nothing - if they haven’t tried they haven’t failed. Perhaps that is the learning from mistakes approach we want. We really don’t want to nurture this kind of behaviour.

This statement exemplifies how children go about protecting their personal identity and self-esteem when faced with challenging tasks; hence Sean saw this type of behaviour in some children as a reflection of their mental well-being. Such beliefs are also reflected in Kelly’s (School B, Questionnaire) comments that a child’s mental well-being relates to ‘an overall acceptance and contentment with themselves and their disposition’ and also ‘their acceptance and reaction to personal success and failings’.

Teacher reflections indicate that children’s mental well-being is observed when children have positive and accurate concepts of self. In telling the story of one particular child who was regularly displaying episodes of anger and sadness, Brianna and Sharon (School C, Meeting One) emphasised the importance of children recognising and accepting their own talents. Sharon expressed her concern for this child’s lack of self acceptance:

He remembers everything that’s ever happened to him, some good and some bad experiences. But the thing is, with that child, and I think sometimes we do it to ourselves too as adults... we are not necessarily as good at celebrating our successes. He’s got a beautiful voice... and even the kids are saying ‘oh you’ve got such a good voice’ and he was beaming. I said to him, ‘you know that you have heard that many times before’ and he said, ‘yes I know’. And I thought, well, what are we missing here because here’s a kid who really has got this talent and for some reason it has been negative for him, and we never, well I don’t think we ever, got to the nitty-gritty of why.

Brianna added more about the social pressures impacting on this child:

I think he loves to sing but it’s not cool to sing in front of the boys because they are the ones that will tease him. He saves face in those classes (younger classes) because those kids look up to him and think, oh wow look at you.

Sharon and Brianna viewed this child’s mental well-being as dependent on acceptance from his peers and they believe that, with more self-acceptance he would experience less stress and improved well-being. Brianna felt that ‘children who are intimidated through peer pressure or bullying will not dare to be who they are and won’t develop new skills’. Brianna thus believed that children with mental well-being have the capacity to draw upon their self-awareness and self-acceptance to moderate such playground difficulties.

Teachers in this study believed that children who ‘know and accept who they are’ possess a raft of qualities which enable them to engage in effective social problem solving. Participants in School B supported the idea that an acceptance of self was connected to children’s competence to ‘develop an awareness of others and modify responses to situations’ and ‘awareness of how their body language sends messages’. The word ‘develop’ was clarified by Nadine and Alisha to mean that children will eventually achieve an understanding of their personal and social being through knowing about
attributes of social interactions such as empathetic responses; listening to friends and eye contact. Therefore, knowledge of self was related to social learning and skills of empathy, as previously discussed in 4.1.1. Aspirations for mental well-being that related to self-awareness included thinking behaviours such as ‘knowing how to have fun and also have fun with different groups of people’; ‘self confidence’, ‘self worth’, ‘respecting yourself’, ‘a belief in your own ability’ and ‘knowing your part to play’. The following scenario described by Joan (School C, Meeting Two) relates how a child’s participation in a year 3 class was hindered by her concept of self:

I had one particular girl in the classroom who is, at the moment, extremely emotional and... it’s almost all that pre-teen moodiness that you see. Today she was sitting there and I asked her for an answer and she shook her head and the boy next to her said, ‘yes you do’, and she said, ‘I just don’t want to answer it’ (like, very dramatic) and then she read her poem out and she was a bit nervous about it and then one of the boys laughed. But he, wasn’t actually laughing at her, he was just being silly. But because he was close to her, she took that on board and she almost cried at the end of it... She says the girls are mean to her at school and that teachers don’t notice her. So... I have given her a whole lot of post-it notes and I have to praise her at least ten times in a day and notice ten good things that she does and she keeps a tally of that for me.

Embedded in this teacher’s comments are a range of assumptions and beliefs about changes to mental well-being that occur for a child entering the teenage years, and the influence of this period of time on their self esteem and self image – their acceptance of who they are. Related to her view of this student is a belief that being ‘emotional’ was associated with a lack of well-being. In this account the teacher employs a praise strategy in modifying the student’s sense of recognition and belonging. In contrast, however, Rose (School C, Meeting One) argued that children’s mental well-being required internal monitoring: ‘you can try everything but you still can’t give it to them’. Rose believed mental well-being is dependent on the individual and how they manage their own thinking, regardless of teacher praise, peer acknowledgment or social skill instruction.

Thus, the theme of children knowing and accepting who they are, offered another perspective on children’s mental well-being, one which was again focused on the internal characteristics of the child. As such, this theme is also related to the following one – that mental well-being requires positive self-talk and rational behaviour.

4.1.5 Emotional stability and rational behaviour

The ability to make sound judgments, utilise positive self talk and exercise reasonable behaviour were concepts linked to children’s mental well-being. These concepts highlighted understandings of what was ‘emotional’ behaviour as opposed to ‘rational’ behaviour. Questionnaire responses indicated that teachers were concerned regarding the consistency and regularity of children’s ability to interact in society in a rational, confident, and happy manner (Trent, School B) implying that there were norms and structures to which children should comply. In this way, we see that these teachers associate mental well-being with their competencies to assimilate into society. Alisha (School B) stated that if children have the ‘ability to cope with everyday things rationally’ then ‘they should have the skills to
reason and problem solve’. Brianna (School C) described this rationality in the context of a discussion around social interactions and the nature of self-talk as a ‘think before you act’ process:

After the fact, like, after it’s happened you can talk about it, but we really want children to be thinking before they act… before they do something… but sometimes they are so caught up in doing this thing, they don’t even think about the other person. They don’t even think. They are just doing it. So how do you get them to be aware before they do something like that?

The issue raised by Brianna relates to developing awareness in children that their actions may have negative effects. Brianna, then, considered that a child’s capacity for self-awareness would influence that child’s capacity for rational thinking, thus suggesting self-awareness is critical for prosocial behaviour.

Another perspective on rational thinking which was raised in teachers’ comments was the way in which they valued children taking responsibility for their actions. Rose (School C) believed that children have the capacity for moral decisions and are capable of rational thought and action. Underpinning her belief was the suggestion that children are accountable for the choices they make. In the following extract, Rose elaborates on how she had been prompted to reflect on the degree to which a child’s behaviour and well-being was emotional versus rational:

When he came to our school, we had a meeting and parents explained that he has meltdowns at times and I thought they were emotionally driven, and they are, but he started having them and every single time he’s had one, it’s been because he hasn’t got his way. So I’m finding that he’s really doing it in times where it’s not because he’s troubled… like there’s something troubling him, it’s when he hasn’t got his way and it’s more of a tantrum.

Rose disregarded the age of the child (5 yr old) as playing a role in the irrational behaviour. In describing this child’s weaknesses in social situations Rose revealed what she valued in terms of emotional stability, including her belief that this stability was at least partially rational in nature. Her concern was to ensure that this child became more compliant and responsive to classroom demands – in her view, capable of responsible actions. Rose further explained that she believed the child’s home environment did not nurture the belief that children are responsible for their actions and are capable of reasonable and rational ways of problem solving. As such, Rose believed that responsible or rational thought could be taught through modelling and consistent approaches to helping children become more self-aware.

From this section we can see that teachers associated mental well-being with rationality, and that rational thinking and behaving responsibly was associated with children’s management of strong negative emotions. Behaving rationally, therefore, involved a complex interplay of many skills – skills which teachers believed should be supported and explicitly taught. One construct that is linked closely to this interplay of skills is resilience.
4.1.6 Resilience

A further theme concerning teachers’ assumptions and beliefs related to resilience. Nadine (School B, Meeting One) talked about children’s mental well-being impacting on their ability to cope with change, social issues and everyday life. Sean (School A, Questionnaire) said mental well-being meant ‘to deal with life situations using coping mechanisms’, inferring that children require a mental toughness and mental elasticity. Sean referred to these ‘coping mechanisms’ as underlying beliefs about self-efficacy, personal agency, self-esteem and future expectations. Sean’s beliefs appeared to reflect his classroom mantra of ‘respect, responsibility and response’, where he promoted positive self-talk and the use of ‘have a go’ risk taking strategies. Sean felt positive self-talk could often be detected in the language of children displaying resilience, particularly when the child may be experiencing stress. Along these same lines, Alisha (School B, Questionnaire) thought ‘depression in children, if not identified early, can have lasting affects in terms of resilience and coping’.

Resilience was associated with an additional theme identified in School C, namely tolerance - being tolerant of others and tolerant of change or environmental issues. Samantha (School C) perceived that, developmentally, the children in her Year 6 class had become sensitised to the behaviour of one particular child:

Because of his lack of social skills in being able to participate in the group... he annoys, and at their level (Year 6) of development it is the worst thing you could possibly do because all they’re doing is lashing out at him.

This scenario highlighted for participants at School C the need to revisit strategies that support resilient thinking and acceptance of difference. Children’s capacity to deal with other children’s unusual ways of interacting with the world was viewed as an indicator of mental well-being:

I think the individual differences... there are some kids who are sort of hugely different in the group. But they have, over the years, had to make allowances for all sorts of things. Like Kevin is quite settled now he’s with Year Six students but when he came to Kindergarten we gave him a cardboard Kevin when he left the school each day with his school clothes on. He had no perception of anything - he was so impulsive. Now that’s calmed down a lot... I think what has calmed down has been his tolerance of others and his security levels.

Samantha suggested that the skills of tolerance needed to be taught to both the child with additional needs and to the whole class.

Teachers at School B expressed the view that parental involvement and practices could be counterproductive in developing resilience. Trent felt that children today were not encouraged to be resilient, as parental practices meant defending the child’s actions over and above the school’s actions. It was his experience that when you ask children to take responsibility for their actions:

...you’ll have mum back on the door step the next day saying he didn’t do it and they’ll fight it in court, and they know they can get away with it because they’ll go home and tell mum and dad a whole lot of things.
In such circumstances, Trent believed the child’s capacity to be responsible and to learn from confrontational social situations was stifled. He felt, as did others in School B, that without support from parents, coaches and other adults who can help to shape children’s underlying beliefs and expectations, finding resilience to cope in the face of adversity becomes an issue for children. Trent described the importance of ‘reframing’ children’s explanations of life events by interrupting their false perception of who is responsible.

For many participants, socially acceptable behaviour related to having interpersonal skills that were closely linked to resilience. Teachers in School C described the concept of resilience as ‘not taking things personally’ and ‘owning one’s behaviour’, whereas in School B it was thought that children should have ‘an acceptance of consequences’, ‘take responsibility for actions’ and know that a ‘good sport knows when to get out’. It was also stated that children should employ positive self-talk and display ‘I can’ behaviour. Further accounts indicated that teachers perceived resilience as an adaptive process. In School C, for example, children were seen as adapting more easily if they ‘interpret social situations correctly’ and ‘value personal space, safety and happiness’, whilst in School B teachers emphasised other interpersonal factors such as being ‘aware of non-verbal actions and the impact this has on other children’. Resilience attributes therefore relate to personal characteristics such as efficacy and positive social skills.

The themes which have been identified thus far describe the internal characteristics that teachers believed are associated with children achieving mental well-being. The following two themes, however, relate to external factors impacting on children’s mental well-being, namely children needing a safe environment and having positive relationships.

### 4.1.7 A safe environment

Safety was identified by teachers as an important aspect of children’s mental well-being. Safety meant children both feeling and being safe (Candy). In School A, safety was described as underpinning our duty of care as teachers (Sean) and it was argued that children and teachers should work together to create a class atmosphere of trust (Shelby). In School B, however, safety was interpreted as children appreciating clear boundaries and expectations (Trent) and children having routine and stability (Sandy). Tania (School C) expressed her view that when stability is absent from children’s lives outside of school and when children attend school ‘battered and bruised’, the teacher’s role is to reinforce to children that the classroom is a safe environment. Sean (School A) felt it was important to talk to children about classroom structures and rules – ‘without trust you don’t have anything’. In being explicit, Sean hoped to promote the confidence in children to speak out. Sean valued children having trust in the teacher as well as trust in peers, to help everyone in the class work cooperatively. For Sean, creating a safe environment meant having an expectation that the child could rely on the teacher and vice versa – entrusting the teacher with an understanding that individual needs will be supported.

Participants in School B believed that when teacher absences occur, or when there are changes in personnel or classroom routines, children without stability and consistency, particularly at home, are
most affected. Alisha (School B) believed that having routine was comparable with a child’s ability to relax, and that routines removed the ‘on edge’ feeling related to not knowing.

Related to the issue of safety was reference to bullying and positive behaviour supports. Brianna (School C) commented that ‘enjoying the “atmosphere” or ethos free from bullying and the physical attractiveness of a space makes anyone feel better’. This remark suggests the physical elements of a classroom or school, as well as the culture of the school, play a part in developing a safe environment. Staff at School C were actively promoting safety and positive playground behaviours, as Tania described:

I actually read something on the weekend that said it doesn’t matter how many times you talk to a child, like teachers talk out in front of the class, it won’t change the child’s attitude towards others. What (is important) is how they see people relating to others… So modelling… it’s not what you say it’s what you’re doing and what others are doing that they are going to copy. Last term we ran our leadership program; our No Go Bullying Program, which the Year Six students led. The children actually went into the rooms and built awareness of what bullying is, role playing situations, talked about what they could do if they were being bullied. And they set up bullying stations… in the playground, so that children had the opportunity to report to them. And that was an interesting exercise because a lot of those children who were manning the stations are what I would call the bullies.

Brianna clarified that these children don’t often see themselves as part of the problem. School B was actively developing a culture such that all members of the school were involved in making their school a safe environment. Safety was associated with fairness and justice, where it was considered the children’s right to ‘be safe from bullying behaviour’, ‘able to comfortably communicate’ and ‘know they are listened to’. Risk taking and relationship building were also believed to be characteristics of a safe environment and inextricably linked to justice and equity at School A.

Teachers suggested that children are more likely to experience mental well-being when they have a sense of belonging in their environment/classroom. According to Rose, this sense of belonging allows children, ‘to have some ownership of their class and a special part of the classroom, affecting their freedom within the class’ (School C, Meeting One). As Maureen expressed it, ‘School for some students is a sanctuary. To put in perspective those things which are not safe in their home environment’ (School B, Meeting One). Similarly, Dianne (School B, Meeting One) stated that ‘school should be a safe haven’, where children feel protected. At School B, teachers expressed their perception that boundaries were juxtaposed with freedoms. It was felt that boys, in particular, wanted boundaries and rules. These boundaries in turn become a ‘regulatory’ tool, helping children develop patterns of behaviour that help them ‘feel good’, freeing them from unnecessary and improper decision making (School B).

This section reflects the views of teachers about safety being an integral part of children’s mental well-being. Related to, and embedded in, the provision of a safe environment is stability, a sense of
freedom, absence of bullying, and a sense of belonging. The final theme emerging from the questionnaires and associated discussion with participating teachers is that of positive relationships.

4.1.8 Positive relationships at home and at school

Teachers acknowledged, on several different levels, the importance of positive relationships in supporting children’s mental well-being. Firstly, participants raised the issue of communication between home and school in resolving well-being issues. As might be expected, teachers (particularly those at School C) believed that if communication is affirming and children feel loved by their family and parents then the child is more confident and more open to change and growth. In highlighting the partnership between parents and teachers and identifying this as an area for change and improvement, Brianna highlighted her attitude regarding communication and relationships:

For parents with children who have well-being issues it’s a big drain on them. They are fearful, which in turns creates anxiety in their children. So I know that’s what I deal with a lot; how we deal with their emotions… and you know they feel that every time they get a call from the school it’s a negative one.

The benefits of positive relationships between home and school were also reflected in Kelly’s (School B) comment that ‘parental interest in the child’s education was the most common factor in changing children’s behaviour. If supportive we see positive results’.

Secondly, teachers talked about particular life events that had an impact on the child’s capacity to build positive relationships. The questionnaire asked participants to consider and rate the life events that put children’s mental well-being at risk. Fifteen participants believed divorce, family break up and family violence and conflict at home to be more critical than factors such as physical and sexual abuse; school transition; death of a family member; poverty; physical impairment and lack of parental interest in their education. Three participants, all from School C, added parental neglect as an ‘other’ risk issue. Rose (School C, Meeting One) commented that:

Lately I have noticed children in other years coming from these situations and I feel their behaviour issues seem to escalate as they get older. Maybe if we could work with our children/families from kindergarten they would be better equipped to deal with problems in later years.

Rose went on to discuss building positive parenting relationships through parenting programs in the early years, to prevent the kind of neglect or parental disinterest they were experiencing. She also valued teaching children strategies for developing resilience in the early years, so children utilise protective responses when relationships change or are unsupportive. Another respondent, however, emphasised that life events and family circumstances will affect children differently due to individuality and personality:

The degree to which it impacts on the child depends on the situation and the child – their resilience. I have at least four children who are experiencing life events that would put them at risk and each have an equally profound effect on the children involved but with noticeably different responses (Alex, School C).
Chapter 4: Exploring the characters’ attitudes, values and beliefs

Alex went on to say, ‘situations are constantly changing’ hence family dynamics are impacting on children regularly, both in positive and adverse ways. Similarly, Kelly described how family stability influences children’s mental well-being when she considered that:

…it depends on the situations. It depends if it was a bad break up or whether it was amicable. All the situations are totally different… If you have a stable family member then you don’t see an ounce of trouble.

Thirdly, participants felt that knowing the background of class members, and being aware of the child’s situation at home, assisted in developing an understanding between teacher and child. ‘I spent a lot of time ensuring my class demographic was known so that I could empathise with individuals and form a team’ (Tania, School C). Tania believed the class family often provided the needed nurturance. Max (School B) prioritised ‘really getting to know the class by recognising individual differences through deep knowledge of children’. He valued this personalised knowledge as a link to individualising learning and knowing what motivates the children in his class. Teachers in this study generally believed children would feel valued if teacher actions and behaviour created a climate conducive to respect and positive interactions.

In summary, this section has described the attitudes, values and beliefs of teachers towards children’s mental well-being. Teachers in this study value particular internal characteristics of social development and also believe there are specific external characteristics that represent well-being in children. In the following section I explore participants’ perspectives on the role of teachers in nurturing children’s mental well-being.

4.2 Teachers’ attitudes, values and beliefs about their role as teacher

Teachers’ attitudes, values, beliefs and practices are central to this study and hence their perspectives on their role, including their interactions and the nature of their relationships with children, are of core interest. This section elaborates on a number of issues that emerged in questionnaire responses and subsequent discussion regarding teachers’ roles in relation to students’ mental well-being. Teachers conveyed varying assumptions and beliefs about their capacity to support children and questioned whether providing such support was part of their role and responsibilities. Themes which are discussed include: teacher mental well-being; teacher capacity; the value of a preventative focus; and attitudes to relationship skills.

4.2.1 Teachers’ mental well-being is paramount

A dominant theme to emerge from the participants’ questionnaire responses and subsequent discussions was the critical role of their own mental well-being. The symptoms and causes of instability in their own mental well-being were often described as a manifestation of dealing with children and their mental well-being difficulties. Tania (School C), for example, referred to her ‘own reactions, feelings and responses, which often prevent me from engaging in children’s social and emotional difficulties’. As Tania continued:
I have had to deal with quite a few violent situations and am amazed how calm I am at the time and how I go into a quiet, calm, damage control. However, after the event I’m a shaking mess and this can last a long time, where I don’t engage with that child at all (or very little) in case it happens again.

Similarly, Collin (School C, Meeting One) described his ongoing erosion of self worth when relationship problems with particular students arose throughout the year - ‘I feel I’m losing who I am as I try to remain professional’. Collin went on to reflect:

I question whether I feel loved? (by the children)... it’s really hard to get through to someone if superficially you’re thinking ‘I don’t like this child - their pushing my buttons’ and I’m pushing theirs that much. They would obviously pick up on that. I find that’s a real drama, a real problem.

Samantha acknowledged Collin’s concern by lending support for his feelings. ‘I can see how Collin could feel like that. There are some kids in his class who don’t feel valued’. Collin went on to explain how he was trying to overcome these difficulties but, at the same time, painting a picture of dissatisfaction:

As a management strategy I’m just trying to fall back and trying to be professional in situations and as a result losing some of who I am and some personal qualities that I think I would like to give to the kids. You know, you’re just going through the steps. Quite sad.

This dialogue exemplifies the importance of teacher mental well-being and how it might impact on their role in supporting children’s mental well-being.

Teachers recognised that they benefited from support for their own mental well-being. Phillip (School B) felt that ‘when teachers are supported by their family, their peers and their administration they can survive periods of uncertainty’. Brianna (Principal, School C) commented on the need to support staff, describing what happens at the end of a term when teacher well-being is more fragile:

That’s the thing, all of the well-being issues that have come from students and families eventually impact on teachers and I feel like it can become so negative and draining, which takes away from quality teaching and learning... Our rule breakers are top heavy with multiple well-being issues. So, keeping staff positive is critical. If it was week two I mightn’t have such a long waiting line at my door, but between week 8 and 10 this is the hard time because everyone’s tired. They’ve also got the other children in the class, they have reports and assessments. That’s the hard project for me to keep a positive approach. For the teachers it’s natural. Everyone’s reaction is to get them out of your hair for a while, you know, so you can just have a bit of peace.

Brianna also commented on a significant stressor for teachers:

If an intervention provided by the teacher fails to have an impact on the child, the teacher’s mental well-being can suffer... children’s well-being can often be a trigger for changes in teacher qualities.

After discussion, it was clarified that ‘teacher qualities’ (as used here) referred to their sense of self and their ability to perform, communicate and organise. These statements are significant for several
reasons. They highlight the value teachers placed on effective teaching performance and good communication when supporting children. Nadine (School B, Meeting Two) believed a team approach, where the classroom teacher has a range of strategies and support personnel to share their emotions with, could help prevent difficulties for teachers in relation to their own mental well-being.

Participants were cognisant of the impact of teachers’ mental well-being in terms of responsiveness to student needs. As Sean (School A, Meeting One) expressed, ‘a teacher’s mental well-being would have an impact on the teacher’s capacity to... identify students who may have mental well-being issues’. As a consequence, this can prevent teachers from utilising social and emotional learning practices as a means of supporting children, hence limiting their deeper engagement with them. Another view, expressed at this same school, recognised and acknowledged teacher well-being as a function of how the children perceived teacher behaviour:

The kids tell me I’m frowning, I’m pulling a face; I look angry all the time. I need to remember not to speak to children in front of children; talking to them more informally – deal with children by tapping on shoulder and doing the talking later. I could use non-verbal skills and do more hands on learning – more learning outside the classroom. In the classroom I could be more engaging.

This very personal account of a teacher’s concerns regarding his relationships in the classroom demonstrates dissatisfaction with his performance, ultimately impacting on his own well-being. Sophie, from the same school, also experienced anxiety and recognised that the cause stemmed from classroom practices that needed to change:

That’s why I’ve had a bad week - it (impulsive behaviours exhibited by a child) causes me anxiety - I’m trying to diffuse the situation, get around like Steve Irwin. Anxiety became contagious because I’ve been trying to deal with all the other children.

Sophie thus indicated that her mental well-being in the classroom was linked to resultant behaviour changes experienced by children with anxiety.

The data discussed in this section points to important links between teachers’ own mental well-being and their capacity to respond adequately to children’s needs. The notion of teacher capacity to engage effectively with children’s mental well-being is further elaborated in the following section.

### 4.2.2 Teachers’ capacity to support children’s mental well-being

The issue of teachers’ capacity to support children’s mental well-being generated significant interest from participants. Three subthemes emerged in relation to this data. The first concerned teacher’s apprehension regarding whether supporting children’s mental well-being was, in fact, part of their role and responsibilities. A second subtheme was the tension between teachers wanting (and being in a position) to support children, yet not having the skills or capacity to know where to begin. A third, more positive subtheme, concerned teachers having the opportunity to support children’s well-being due to the very nature of their role.

Teachers articulated differing views about who is responsible for children’s mental well-being with some teachers expressing reservations regarding whether it was their role. Sean (School A) asked ‘Do
we have to get involved?’ and raised issues about his role and level of involvement, saying, ‘Sometimes it is not our place; sometimes you open up a bigger can of worms, sometimes you have to get on with the lesson’. This kind of professional struggle regarding roles and responsibility reflects a polarised view. On the one hand, as Shelby (School A) indicated:

Teachers are the most likely to detect mental well-being issues because they spend a great deal of the day with students. Teachers learn the personalities of each student in their class and often may notice changes in an individual.

Nadine (School B) agreed that teachers ‘are at the coal face’ believing ‘who else is going to do it’. Alisha (School B) cautioned others, during discussion, in relation to the teacher’s role in identifying students (Q.8 on questionnaire), given the possible consequences of getting involved in managing difficult mental well-being issues. Alex (School C) saw there were boundaries to her role, contrasting it with that of health professionals, saying ‘we are not doctors or psychologists’. Candy (School A) focused on the possible legal implications of intervention, meaning that teachers needed to act cautiously and reticently, particularly where child protection concerns are apparent.

Most participants believed that a child’s family plays a major role in developing children’s mental well-being; that parents are the primary educators. Brianna (School C), however, added that for significant numbers of children, home ‘is not happy and supportive and often without one, let alone two, loving parents’ (Meeting One). A number of the teachers made assumptions about the impact of a changing Australian social climate, particularly in relation to family structure, where there is an increasing prevalence of single parent families, grandparents parenting, custodial arrangements and blended families. Tania (School C, Meeting Two) highlighted how children’s experiences contrasted starkly with her own experiences:

Our children are arriving with major ‘baggage’. They cannot seem to leave it or let it lie. It is much worse than in my schooling and other teachers I have talked to. The rage and attention-seeking behaviour often escalates because the child cannot deal with whatever emotional issues are apparent.

Similarly, at School B, teachers’ encountered children from diverse family structures and backgrounds. As Jane remarked, ‘We seem to have a real mix of students at our school. Their home lives are often challenging and they come to school with a variety of needs’. Kelly added that ‘often the major factors that influence a child’s well-being are out of the school’s control. We, as an institution, can’t solely focus on their well-being when we can’t change their home environment’. This comment reflects a sense of frustration, powerlessness and hopelessness in the role of the teacher and school in supporting mental well-being, particularly since children were often enrolled for a short period of time.

Teachers generally recognised that they were not the only ones involved in intervention to support children’s mental well-being. Data from the questionnaire supported the claim that teachers viewed children’s mental well-being as more a family responsibility. Nearly half of the participants were uncertain about whether the school should place a high priority on improving the mental well-being of students. School A differed in that all participants strongly agreed that the school had a responsibility for children’s mental well-being. Most participants acknowledged that there was a case for responsibility belonging to all stakeholders: the school, the family or home, the classroom teacher and
the child. Difficulties arise where there is an absence of consistency between home and school since responsibility shifts back to the school. As Kelly (School B, Meeting Two) outlined:

All situations are different and many factors influence the outcomes. We have had many more successes than failures. I probably find the more troublesome cases and the ones that haven’t been as successful are when the parents don’t come on board with the strategies and allow their children to repeat the behaviours and not support the plans we put in place.

From Kelly’s perspective, teachers have limited influence when home and community are not involved, since there is then no coordinated strategy for consistent support and intervention.

In relation to the second subtheme, several teachers across the three schools expressed concerns regarding teacher capacity to deal with children’s mental well-being. Many teachers wanted to play a role, but questioned their expertise in doing so. Teachers at School A believed that they were limited in their capacity to deal with some mental well-being issues, particularly those that were influenced by factors outside the school (for example natural disasters, family change and health issues). In fact, participants from School A believed that without expertise from counsellors and crisis management personnel, the needs of individual children would not be met. Inherent in this concern were issues of responsibility regarding who acts to support children when the source of the mental well-being issue lies beyond the school. Alisha (School B) cautioned other teachers about making claims about a child, suggesting this may have painful consequences:

Identifying (causes for problems in children) can be fraught with teacher anxiety as there’s always the possibility that you’re wrong and may alienate the family and/or student. Some children/adults will always react differently – that does not mean they’re not coping – teachers must be aware of this.

This comment exemplifies the need for teachers to observe the child and build positive relationships; to understand more about how that child might interact with the world and to recognise individual differences. Helga (School B, Meeting One) felt she was capable of dealing with children's mental well-being issues but thought it depended very much on the individual and the dynamics of the whole group and whether they worked together. She indicated it was like ‘trying to crack the code to find out how you can help the child’.

Teachers believed there was a tension between meeting individual needs and school and classroom management practices. Sophie (School A, Meeting One) commented that there are, at times, constraints put on the teacher’s role in supporting a child with additional needs and acting in a way that is consistent with whole-of-school practices. She recounted that the needs of one child had impinged on her classroom routines and required adjustments that were different to expected outcomes (the student did not have to participate in assessment and the student’s noisy behaviour was tolerated during times of anxiety) for all children:

Having the knowledge and strategies to deal with problems and having to cope with the whole class at one time, where curriculum expectations create pressures, made it difficult for me to monitor individual needs and well-being closely.
Collin (School C) described how difficult it is to achieve and sustain a deep understanding of individual children:

> Having some ability to not just understand, at that point in time, but keep understanding it – to do things like this and come away with a deeper understanding. I resort back to ‘he’s doing that because he’s being a pain’. So to try and understand what’s really happening here. It’s hard to do.

Collin recognised that ‘playing a role’ meant accepting that having an ‘understanding’ was a dynamic and ongoing process which required a constant objective approach, regardless of the level of emotional involvement.

The third subtheme suggests that many of the teachers in this study felt they have the opportunity to ‘notice changes’ and ‘gain valuable insights’ in identifying children with mental well-being issues, since they spend a large amount of the day with children. Maureen (School B) added ‘good teachers do this automatically and always have!’ Candy (School A) explained how dealing with mental well-being issues often meant making adjustments and giving yourself time to understand an individual:

> It took me 12 months to gain a better understanding of (the child). When I had to use that calming talk and he’d swear at me I think ‘how dare you’. Now, I don’t care what he says. I can deal with him better after this amount of time because I understand him better. You know how to handle him in lots of different situations.

Candy’s approach thus showed that she valued persistence and patience in overcoming the difficulties experienced in her classroom.

Charmaine (School B) believed teachers had a role to play in developing self-awareness in children by supporting playground learning and responding flexibly and positively to known difficulties:

> Getting kids to take responsibility for their own actions, and say ‘yeah it was my fault’. I’m working with year 5 at the moment and giving these kids who were being bullied some pointers. We stop and say ‘can you see that’s a bullying issue’ and they are starting to fix it. But if they don’t accept the responsibility that their actions (by remaining passive) are causing the bullying to continue, it’s a problem.

Charmaine went on to reflect that a teacher’s level of confidence, and therefore their capacity to deal with some mental well-being issues, depended on the age of the children and the child concerned. Samantha added that finding the right response became more difficult, as ‘children with mental well-being issues get older, their reactions and responses to new and different conflict situations seems to become more volatile’.

Linked to this third subtheme are notions of what ‘good teachers’ (Brianna, School C) do to enhance their capacity to support children’s mental well-being. Brianna’s reflection below exemplifies her belief that complex emotional situations can be unravelled and children brought back into the classroom:

> He is not responding to the structures we put in place. We have a lot of extra aid time and he’s not feeling comfortable in the classroom at all. It’s not working. He hasn’t got a good relationship with the teacher. He feels he’s not wanted. His mother’s very much on edge as well… we do need to reassess the situation for next term and definitely not go down a
pathway that’s not right for either the teacher or for (the child). So, you know, to find that correct balance and still have (the child) participating in normal school life is quite a challenge.

The implication here is that teachers have a responsibility to recognise and act on a problem when things are not working. Tania (School C) described her concern that ‘teachers are often called upon to be the counsellors; and to have an impartial but consistent approach whilst being true to all children’. Tania was reflecting that, whilst teachers have the opportunity to solve problems for individual children, they should not lose sight of their role in meeting the needs of all children.

Teachers’ beliefs regarding their capacity to support children’s mental well-being reflected three key related subthemes: apprehension regarding whether it is their role; tension between wanting to, but not having the skills; and seizing the opportunity due to the very nature of teaching. The discussion now turns to teachers’ views on the role of their pedagogical approaches in promoting individual children’s needs.

4.2.3 Teachers’ pedagogical approaches to individualising children’s needs

Teachers clearly identified the importance of individualising children’s needs through various pedagogical approaches in supporting and building children’s mental well-being. Two particular subthemes emerged in relation to pedagogy, namely the importance of building a supportive classroom environment and cultivating individual strengths.

Candy (School A, Meeting Two) believed that a supportive classroom meant engaging children in identifying their own individual needs; in other words, building their self-awareness:

“I’ve started using PEEL. I’ve got a chart (and we) think about our learning today. Are you ready for learning? Why are you ready or why you are not ready? It gives children the opportunity to control the learning. Good strategies to help them think about themselves.

Implied in this approach are opportunities and space for children who are experiencing personal difficulties to discuss these with the teacher. In a similar way, Shelby (School A, Meeting Two) considered it important to recognise children’s emotions without judgment or feeling the need to solve the child’s concern:

Let children know that you are approachable. Sometimes children can’t put a word on the feeling. If we can identify a feeling and name the behaviour that is making you feel like that... ‘sometimes I feel yucky’ and then move on.

Shelby believed that helping children to name their emotions was a valuable teaching strategy, since children most often want the adult to notice the feeling without having to offer an explanation. Shelby recounted her experience with one particular child who she described as ‘in your face – he’s a teacher biter’. Her relationship with the child gradually changed when feelings were discussed more often; ‘I’m now seeing him in a different light. I’m seeing his point of view. He can’t control himself’. Shelby believed the focus on the nature of emotions and where they come from had made a difference.
Participants recognised that a supportive classroom environment was preventative rather than reactionary, and involved attending to children through active listening. Charmaine (School B, Meeting Two) believed that ‘children know and respond accordingly when someone is really listening to them – not necessarily solving all their problems’. Charmaine recalled how she had encountered a difficult class during the first part of the year and that her instinctive reaction was to focus on the negative information she had been given. However, by reflecting on her role and relationships Charmaine was able to foster individual strengths through class discussion about peer interactions that were causing problems. Helga (School B, Meeting Two) similarly reflected ‘I need to really engage the children as a positive role model who loves teaching and loves being a part of the child’s learning’. To do this, Helga thought that she needed to change her teaching practices so that she became more open and based decision making and problem solving on negotiation.

Another view concerning supportive classrooms related to social skill development. Sophie’s (School A) pedagogical approach to sustaining positive attitudes was to include regular observation and consistent reminders about manners and social practices. Sophie believed this approach gave her the means to not only prevent but solve problems. In meeting the challenges of a particular child in her class she valued the process of deconstructing and naming social skills as an explicit learning tool:

Empathy - we have worked on that. Getting the children on board. The kids have been helping me. Like a little flow chart. I reiterate our social skills around the room. The things that are important to me come out in the social skills lessons.

Sophie thus believed that teaching social skills was foundational to her classroom ethos and that this supported a preventative approach to children’s mental well-being, providing the language and means to anticipate difficult social situations.

The second subtheme linked to teachers’ pedagogical approaches concerned the importance of cultivating individual strengths. This issue was particularly evident when teachers were asked in the questionnaire to prioritise the value of various classroom practices. Twelve teachers rated most highly a focus on individual needs and appropriately levelled instruction in supporting children’s mental well-being. Comments written beside participants ranking of practices associated competence with an emphasis on difference not deficit. Such a view is evident in Dianne’s (School B, Questionnaire) comment that ‘every child’s needs are different. In learning, in achieving a sense of self worth, each individual must feel they are cared about despite their differences’. Kelly (School B, Meeting One) similarly stated that ‘all children are different and have different needs so to change your teaching style to accommodate all children is a must to get the best out of each child’. The emphasis for Kelly was on changing her approach so her practices and her emotional responses were in harmony with the individuals in each class. Similarly, Rose (School C, Meeting One) believed that ‘every child is an individual and you try to cater as much as possible for each child so they know they are an important member of the classroom’. The way to go about this was, in Helga’s view, ‘to start teaching where a child is at’. Similarly, for Alex (School C, Questionnaire), ‘each child is so different, therefore they will need different things from their teacher; knowing individuals help us provide for each child’. Linked to a preventative approach Alex believed that teachers needed to know the child well before teaching. As Trent (School B) said ‘one size does not fit all’. Jessica (School B, Questionnaire) felt that some
Chapter 4: Exploring the characters' attitudes, values and beliefs

children’s needs weighed more heavily than other children and she stressed ‘all children have varying needs which have to be prioritised by teachers’. Brianna (School C, Meeting One) described her philosophy that ‘the whole class is made up of many individuals – all have special needs’.

A focus on individual needs was valued by teachers in this study and very evident in their views about the importance of supportive classroom environments, including preventative approaches and cultivating individual strengths. These teachers suggested that getting to know the child, listening to children and providing appropriately levelled instruction were significant factors in supporting mental well-being. From a preventative perspective, the findings discussed in this section point to the inextricable ways in which strategies and values are linked. This will be explored further in the next section, illuminating the importance of relationship skills.

4.2.4 Teachers’ communicative skills in developing relationships

Teachers had particular views about how relationships were developed through classroom practice including the importance of good communication in supporting children’s mental well-being. Participants clearly believed that developing quality relationships was a critical part of their role as a teacher. They were able to describe communication skills they valued, such as the use of empathy to elicit a response from a distressed child:

Reassure the student that there is support for them. Gain their trust. Show empathy towards the child and try to reveal that they are in a secure environment and that they are safe. Liaise with home and adjust the expectations for the child in class (Ron, School A).

Similarly Tania (School C) linked growth and positive engagement to conversation:

Talk to them, have a joke, tell them a positive thing about self in passing. I try to listen but find it hard with other interruptions. Provide quiet times and reflection on how well they are doing, how far they have come, how exciting the next steps will be.

Ron (School A) went on to recount his belief that the child will think ‘At last someone understands how it feels and seems to be listening without wanting to analyse me or judge me’. He thus advocated avoiding evaluative or judgmental statements such as ‘I understand what is wrong with you’. Ron focused on the relationship between teacher and child and wanting to delay communication with others until he had made an attempt to connect with the child. Sean (School A) emphasised the value of relationship skills when he said he would support children through understanding, attentive listening and accepting that allowances might have to be made, knowing that things will change and improve. Participants described proactive strategies they used in developing relationships. Nadine (School B) valued formulating and communicating a plan of action that was sensitive to both class work and school life, to help a child get through a difficult period. Participants in School B felt relationships could be enhanced by making adjustments such as modifying tasks, providing lesson breaks, setting up a special activity station or giving special responsibility in class.

A number of questions were raised about the way teachers should communicate with children:

How do we as teachers use empathy to work and relate to children? Can we be too empathetic? Do children learn when teachers are only focusing on ‘being understanding’,...
rather than ‘acting’ to improve child’s social interaction? Are we being intentional with our empathetic actions? Teachers say they are modelling the verbal and non-verbal language used when being empathetic to students within the class (Kelly, School B).

Kelly appears to be not only curious about the meaning and purpose of empathetic responses by teachers but also the nature of what constitutes empathetic discourse. Kelly wanted more from empathy than understanding; she was seeking to embed empathetic interaction as a learning experience. Implied in Kelly’s thinking is that too much empathy means too much tolerance of unwanted social behaviours.

Seeking to be an attentive listener and giving students time were common behaviours named by teachers that enhance relationships and build mental well-being in children. Without reflective listening, some teachers in this study believed children didn’t have the opportunity to refine their understandings of stressful situations. Kelly (School B) described how negotiation skills worked for her classroom:

Listen to all sides of a story; ask at the end of a session – does everyone feel that this is fair? Have you all had your say? Keep explaining that sometimes we all don’t get exactly what we want or the way we want it to go but we need to negotiate and come to some joint reconciliation. Giving children a voice seems to help them all.

Candy (School A) similarly describes a process of support which was non-evaluative. She expressed how the nature of schools has changed; where ‘once upon a time children used to gather around the desk and the teacher would listen to their stories’. Now listening and talking with children, she believed, had been replaced with busyness. Helga (School B) offered a way of overcoming the busyness with prayer and structured time set aside for sharing and connecting with members of the class. She indicated that her everyday practice included:

...circle time, where children listen, hear and critique each other positively. Start the day with prayer of the faithful so that we are aware of what’s happening in the children’s life and we can offer support for them or their family.

Whilst prayer is a routine part of all Catholic school classrooms it is the way in which prayer is applied to building relationships and acknowledging difficulties occurring in children’s lives that was significant for Helga.

Communication with colleagues was considered an important step in preventing conflict and building more supportive relationships. Throughout the focus group discussions there was a strong desire amongst staff in all three schools to want to solve each other’s problems/issues quickly by sharing an insight or solution they believed may be the key to understanding the child. Rose in School C felt by informing other staff members of circumstances or changes in a child’s life this may help teachers refine their social interaction and become part of a network in gathering more information. If there is an explanation for a child’s behaviour then teachers can make adjustments. However, Alisha (School B) cautioned teachers in relation to their communication with colleagues, stressing that ‘a child’s behaviour or ways of managing emotion does not necessarily indicate a mental well-being issue’.
Participants had particular views about children’s socialisation. When teachers indicated their aspirations for children’s mental well-being they said things like ‘knowing everyone has a part to play and knowing your part’; ‘knowing how to have fun with a different group of people’; and ‘valuing each person’s personal space, safety and happiness’. Teachers recognised that these skills could be facilitated by adults and peers in a range of social settings and social locations:

Some students have a home life that does not provide for social and emotional well-being. It is therefore, extremely important that areas of social and emotional learning are dealt with in everyday practice – in the playground and classroom (Dianne, School B).

Thus, in considering their role in improving children’s mental well-being, teachers clearly recognised that their communication skills were critical.

In this section we have explored teachers’ perceptions of their role in supporting children’s mental well-being. We have seen that teachers’ own mental well-being; their capacity to support children’s mental well-being; their pedagogical approaches to individualising needs; and their communicative strategies are bound together in ways that impact considerably on their effectiveness in supporting children. While most participants acknowledged the critically important role they play in supporting children’s mental well-being their responses to the questionnaires, and in subsequent focus group discussions, indicated a number of quite complex and interconnected concerns. On the basis of these, the following research expectations emerged from Cycle 1 and these set the direction for the activities the teachers chose to pursue in the next phase of this research.

4.3 Research expectations, emerging goals and school priorities

During Meeting One teachers were invited to brainstorm their personal expectations for the research. These were recorded and collated for member checking later in Cycle 1 and this summary is provided in Table 2.
Table 2  Teacher expectations for the research

<table>
<thead>
<tr>
<th>School A</th>
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<tbody>
<tr>
<td>1. Better understanding of the management of children with social and</td>
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<td>emotional difficulties.</td>
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<tr>
<td>2. Promoting children’s social and emotional skill development through</td>
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<td>the role of <em>Mini Vinnie</em>’s in the school.</td>
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<tr>
<td>3. To be able to foresee problems and have tools for identification.</td>
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<tr>
<td>4. Affirming and acknowledging classroom practice.</td>
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<td>5. Knowing more about the issues, reasons and causes as to why children</td>
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<td>have mental well-being problems.</td>
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<tr>
<td>6. School Policy that includes an understanding of children’s mental</td>
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<tr>
<td>well-being and the social and emotional skills expected from all</td>
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<td>children.</td>
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<tr>
<th>School B</th>
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<tbody>
<tr>
<td>1. Ideas, strategies and activities to develop children’s mental</td>
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<tr>
<td>well-being and social and emotional skills - a show bag of ‘tricks’.</td>
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<tr>
<td>2. Knowing more about the variety of issues, reasons and causes as to</td>
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<tr>
<td>why children have mental well-being problems.</td>
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<tr>
<td>3. To get parents to identify the issues linked to their children’s</td>
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<td>mental well-being – <em>that relate to parenting, relationships or home</em></td>
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<tr>
<td>routines.</td>
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<td>4. Parents of emotionally disturbed children becoming more accountable.</td>
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<td>5. To understand how much mental well-being, or lack of it, impacts on</td>
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<td>a child’s learning.</td>
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<tr>
<td>6. Enhancing teacher skills to deal with different issues so as to</td>
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<td>help most kids.</td>
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<td>7. Strategies to manage anxiety.</td>
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<tr>
<td>8. Becoming more aware of mental well-being of children – *raising</td>
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<td>consciousness of children’s mental well-being as a classroom issue.</td>
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<th>School C</th>
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<tbody>
<tr>
<td>1. More strategies to help manage students in a positive pro-active way.</td>
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<tr>
<td>2. To improve my understanding of how to deal with students who have a</td>
<td></td>
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<tr>
<td>parent with a mental health problems.</td>
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<tr>
<td>3. For Shelley to share findings and thesis.</td>
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<tr>
<td>4. Strategies to assist me to deal more effectively with certain</td>
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<tr>
<td>students in my class, while maximizing their opportunities to learn.</td>
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<tr>
<td>5. Practical easy strategies to assist children’s well-being.</td>
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<tr>
<td>6. Strategies that direct us on where to go with the ‘bottom of the</td>
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<tr>
<td>triangle’ children.</td>
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These expectations generally express a greater focus on participants being consumers of knowledge rather than producers of knowledge. In other words, a number of the above expectations signal a passive role in the project and an anticipation that the research process would be there to provide solutions, without individuals actively working towards change. In School C there was also an emphasis on teachers seeking ‘strategies’, suggesting that they believed there was a ‘toolbox’ they could access through the project to help them deal with mental well-being issues. Again, such comments reflect teachers’ beliefs about well-being and also a degree of passivity in their approach to the project. It became evident that I would need to carefully guide and nurture the participatory aspect of action research, an issue I discuss in more detail in my reflections in Chapter 6.
Aspects of school culture and demographics clearly had an impact on teachers’ expectations for the study and the priorities they wished to pursue. In School A, for example, there was a strong emphasis on policy development (expectation A6) that was inclusive of pedagogy that related to social and emotional skills. The Principal was new to School A and influential in driving a focus on revisiting policies for supporting teachers’ development in this area. Candy, the assistant principal, shared this priority:

This research may help to reduce the extra work involved in supporting children with additional needs as it would aim to be built into school planning. The school would benefit from professional development. At School A this project could be the “what’s next” when teachers have looked at behaviour profiling of teachers.

Teachers in School B were also involved in the systemic Microskills for classrooms project (discussed in Chapter 1) and perceived a strong connection between the mental well-being of children and the role of the teacher through this program, reflecting a preventative focus. Their view was that research into the way teachers understand and support children’s mental well-being would complement existing strategic professional development. In School B, expectations 2, 3 and 5 were significant as the school executive were dealing with challenging demographics such as a transient population and parental pressures. Members of School B felt that the lack of parental cooperation was the greatest barrier for teachers participating in, and making a difference for, children with mental well-being issues. Raising consciousness of children’s mental well-being as a classroom issue and then how it is interpreted and approached became part of School B’s impetus for change. In School C expectations 2 and 5 were a major part of any improvement for this school, as well as an implicit concern regarding teacher mental well-being. When discussing goals for the research, Tania commented that ‘the other thing I’d like to make sure we have as a goal, is knowing about strategies that must be put in place to prevent teachers burning out’. Brianna concurred there was a need for ‘positive strategies that are proactive for staff’. Teachers in School C wanted greater freedom to tackle some of the mental health issues for children and for teachers.

The attitudes, values and beliefs discussed throughout this chapter were clearly reflected in participants’ expectations for the project. For example, many related to improving their own knowledge regarding children’s mental well-being, reflecting concerns from many teachers about their current capacity, while also embedding recognition of the role of the teacher. Participants’ values in relation to a preventative focus, particularly through classroom practices, were implicitly reflected in these expectations.

In considering teachers’ expectations for the research, five key themes were thus identified, which were then re-articulated as five overall goals for change and improvement through the action research. These are listed below (with the corresponding expectations, from Table 1, shown in brackets). These goals provide a scaffold in later chapters to interpret the outcomes from teachers’ own actions:

- To raise consciousness of children’s mental well-being as a classroom issue across the whole school community (A4, A5, B8).
• To assist teachers overcome concerns about their role in relation to children’s mental well-being by understanding more about the relationship between mental well-being and learning (B6, C4, C6).
• To enhance teachers’ knowledge in relation to particular mental well-being issues, including specific tools and strategies (A1, A3, B1, B2, B7, C1, C2, C5).
• To create opportunities for parents to become more accountable and therefore involved in intervention and support (B3, B4).
• To develop school policy, practice and programs that promotes social and emotional learning and mental well-being (A2, A6).

This section has drawn together the expectations for the research and has summarised five key goals that underpin the overall direction of the study and lead further into the action research process, as reported in the next chapter.

4.4 Chapter summary

This chapter has presented the findings from the initial research cycle. Teachers tended to describe their attitudes, values, beliefs and aspirations regarding children’s mental well-being in a holistic sense, referring not only to the child’s world at school, but also to the child’s development within their home life, their social life and their spiritual life. Discussion of these various contexts is thus embraced within each of the relevant themes.

Values, attitudes and beliefs about children’s mental well-being were attributed to a number of psychosocial qualities, including: social conscience; a balanced approach; capacity for independent thinking; knowing and accepting who they are; positive self talk and rational behaviour; resilience; having a safe environment; and positive relationships at home and at school. Discussion of internal qualities was more prevalent than external ones, suggesting that teachers conceptualise mental well-being more strongly through processes internal to the child. Teacher attitudes towards external elements suggest social inequality is perceived as a key factor impacting on well-being. Whilst teachers recognise the importance of psycho-social qualities they also identified other barriers such as diverse family values and accessibility to services, as significant in developing and maintaining children’s mental well-being.

In exploring their views regarding the role of the teacher in supporting children’s mental well-being, teachers were aware of: their own mental well-being; their capacity and their role in improving inclusivity of individual differences; cultivating positive relationships; making adjustments to school and classroom environments; and practicing alternative communication strategies that promote positive relationships. The underlying tension for teachers in being responsible for children’s mental well-being was particularly evident in relation to children with ongoing and severe problems, although teachers generally recognised their role and responsibility in supporting all children. Overcoming this tension often required changing existing practice or repositioning their thinking.
The process of reflecting on their attitudes, values and beliefs regarding their role in children’s mental well-being raised teachers’ consciousness of priority issues and helped them to decide on their individual focus area. The analysis of this data thus depicts the learning that occurred for teachers in Cycle 1 of the project and establishes the foundations for discussing the next phase of the research, where teachers moved to change their classroom practice through a focus on particular aspects of social and emotional learning. As the curtain falls on Cycle 1, research participants shift attention to a problem or area of improvement in relation to children’s mental well-being and identify elements of change associated with improved approaches and strategies.
Chapter 5: Plot and character development

Chapter 4 presented data from the questionnaire, Meeting One and Meeting Two forming the basis of inquiry into the attitudes, values and beliefs of participants, and their perceptions of the role of the teacher regarding children’s mental well-being (Cycle 1). This chapter responds to the second research question which will explore how these attitudes, values and beliefs influenced teachers’ classroom practice through the second research cycle. Data presented in this chapter is from the semi-structured interviews. Discussion begins with a summary of the initiatives that teachers planned and implemented. A synthesis of the professional growth which occurred for each individual teacher is provided in table form, indicating new learning and resultant changes to their attitudes, values, beliefs and practices. Outcomes from teacher initiatives are then explored in depth and grouped according to the collective goals for the research, which were identified in Chapter 4. I then focus on the elements of the action research process which supported teacher change. This discussion will illustrate how the shifts that occurred for teachers were linked to changes in attitudes, values and beliefs. The chapter concludes with a discussion of some of the issues that arose in this cycle of the research and what contributed to the absence (at times) of explicit evidence of change.

5.1 Identifying teacher initiatives

The individual focus areas which were selected by teachers created an opportunity for them to problematise, and take action on, specific aspects of their classroom or school activity. Each teacher put forward an area of their practice that represented, for them, a mental well-being challenge or issue and then considered the initial steps required to bring about change or innovation in this area. There was a diversity of data collection processes employed by participants (e.g. keeping a diary of conversations with students about social difficulties; recording adjustments to classroom practice and subsequent student responses; journaling; documenting individual meetings with students and parents and collecting student responses to focus group discussion questions). In this section I discuss each participant’s focus area, grouping these by school, such that themes within schools can be identified.

Participants in School A worked closely as a small group, enabling them to identify a range of personal issues in relation to their own mental well-being. This led to greater depth in collective understanding of the problems faced within the classroom and how these related to teachers’ own values, attitudes and beliefs. The participants at this school helped each other unravel their thinking and decide on what would be a worthwhile focus area for study. Below is a brief synopsis of each teacher’s resultant focus area and the strategies they chose to implement:
• **Candy** (the Assistant Principal) wanted to see all children working independently and to reduce the interruptions to learning by one particular child. Candy's first step was to engage in classroom observations, noting what was happening, where and when interruptions were occurring and whether these interruptions were positive or negative. Candy developed an individual self-monitoring strategy that evolved throughout the research cycle and diarised the changes that occurred. Alongside this strategy, Candy focused on increasing her knowledge around the well-being of children with Autism Spectrum Disorder (ASD) and, in particular, how this related to self-management and motivation.

• **Sophie** (a Stage 2 teacher) wanted to give equal and fair attention to all children in the class whilst reducing her own levels of anxiety. Sophie began by documenting her personal feelings when children disrupted the flow of the class, focusing on what triggered her personal anxiety. Sophie applied to the Principal for additional release time from the classroom to develop interventions for a range of students. She also sought professional input from the ASPECT (Autism Spectrum) outreach service regarding her approach for a student with social and emotional difficulties.

• **Sean** (a Stage 3 teacher) wanted to improve his classroom management strategies through empathetic communication and to ‘bring some joy back’ into his teaching and learning. Sean began by considering his classroom’s rules and whether they were consistent with his goals and expectations for children’s behaviour and work. He also sought to enhance his own personal well-being through a focus on teacher-student and student-peer relationships. These ideas were developed by introducing new classroom conduct expectations to the class and focusing on learning activities and experiences that were aimed at meeting the needs of individual children.

• **Shelby** (a Kindergarten teacher) chose two distinct areas of focus. The first was to explore how a peer support group, Mini Vinnies, could help students build relationships and empathy with other children in the school. The peer support group was formed with students from Stages 2 and 3. Shelby guided the children to explore their self-awareness, their relationships and the idea of positive mental well-being through a focus group discussion which questioned them about their motivation for participating in Mini Vinnies. Reflective processes, such as journaling, supported the students’ learning in developing empathy and a social conscience. Shelby’s second focus was to address the consequences of rule breaking in her classroom by acknowledging the social interactions that were causing difficulties. She chose to tackle these classroom management issues through Circle Time, a group strategy that allows each member of the group to speak about their issues and offer opinions to solve a problem.

To summarise, teachers at School A were primarily focused on becoming more aware of mental well-being issues in their classroom and the influence of individual children on
Chapter 5: Plot and character development

classroom dynamics. There was a particular focus on minimising disruptions to learning through a closer examination of individual student behaviours and their interactions with, and impact on, the class. School A teachers had a strong emphasis on developing relationships, both within classes and across the school, via the peer support program.

**School B participants** required further clarification and direction from the Principal before eventually identifying a focus area. Many teachers at School B perceived that they were already involved in a number of activities to support children's mental well-being, and so their focus areas became inclusive of projects which had already begun at the school.

- **Trent** (the Principal) wanted to change his approach to this role by giving children a ‘clean slate’ (when they were sent to him from the classroom) through an emphasis on fairness and support. Instead of thinking punitively he decided to engage in conversation about what had happened, prioritising the child’s understanding of events. He wanted to practice the application of ‘you’ statements e.g. ‘what were you thinking?’; ‘what do you want to see happen?’ and ‘what do you think should happen?’ Trent’s second step aimed at ‘restoring’ the child back with the teacher or peers through positive behaviour support. Trent wanted to relate to the teacher events discussed with the child as soon as possible so that shared perspectives were established and preventative strategies were acted upon. Notes of meetings with children and teachers were kept in his personal diary. Through his actions Trent wanted to promote the concept of children knowing about themselves and their role in accepting responsibility.

- **Dianne** (the part time Music teacher) wanted to improve the ways she made contact and connected with children during specialist Music lessons, focusing particularly on greetings. Dianne expressed a concern about her ability, as a teacher of a specific content area, to get to know the children and their individual differences. Her initial step was to review strategies to enhance the beginning of her lessons. These were recorded and reflected upon in her curriculum planning documents and daily planner.

- **Frances** (a Year 2 teacher) wanted to develop a climate of acceptance for all in her class. Her first step was to timetable a regular meeting time, following lunch break, that would provide an opportunity for her to facilitate discussion with her students about playground issues. She was thus able to integrate the *Program Achieve You Can Do It* (Bernard, 2001) into her focus on playground issues, rather than presenting these lessons in an isolated and less authentic way. Results of her discussions were sometimes recorded on poster paper so as they could be referred to on future occasions.

- **Sandy** (a Kinder/Year 1 teacher) wanted to improve the ways she was responding to children through emphasising choices. This meant explaining to children options when problems arose, rather than giving children a solution. This, in turn, closely related to
her second focus area which was to develop children’s understanding and awareness of how they were acting and performing both in and out of class. Sandy thought that identifying developmental differences in children would assist her to adjust her approach to those children who needed greater direction. In addition she considered what strategies might support these children, such as ‘school buddies’ or ‘structured play’, both in and out of class.

- **Jessica and Maureen** (Stage 2 teachers) had a similar aim to develop students’ independent learning capacity. They focused on enhancing children’s decision making skills so as to change the culture and dynamics of the classroom, such that children required less verbal instruction and would know spontaneously what was expected of them. Both teachers, whilst working with different classes, began by introducing strategies from PEEL (discussed in Chapter 2) such as ‘wait time’, and curriculum adjustments such as a self-monitoring. Jessica targetted particular children and monitored their growth through student folio’s whilst Maureen developed individualised programs and recorded observations of children and their growth on these documents.

- **Helga** (a Year 6 teacher) wanted to provide more open ended tasks and observe how these changed both relationships in the classroom and children’s motivation and self-worth. She began her project by talking with the children about her goals and the planned change in her teaching approach. Helga also focused on changes in language used in the classroom and whether her questioning techniques enhanced student relationships and attitudes towards each others’ learning.

- **Jane** (a Kindergarten teacher) wanted to improve support for children who were ‘at risk’, particularly those with ADHD and with home or family stress. Jane’s initial step was to identify the risks factors for these children and then introduce specifically targeted protective behaviours, which she taught to all children (including those she was most closely focusing on).

- **Nadine** (the Additional Needs teacher) wanted to understand more about the circumstances of a small number of children who were refusing to come to school and to recognise the behaviours associated with anxiety in children. Her first step was to build a student attendance record and an observation chart regarding their social and emotional skills. She also developed a summary sheet of the risk factors that may cause anxiety for children, using this to better understand the situation for these individual students.

- **Max** (a Stage 3 teacher) wanted to recognise individual differences through a deeper knowledge of the children in his class. Max began by documenting personal and academic information about children, with a particular focus on what motivated each of them.
Phillip (a Stage 2 teacher) wanted to address bullying incidents through targeted strategies, and talk about the issues with his class. Initially, Phillip acknowledged his own personal well-being as a factor which made it difficult to participate in the research project. It was only after extended discussion with peers and colleagues that he decided on this focus for his action.

Alisha (a Year 1 teacher) wanted to know how anxiety manifests in children and how to support children with anxiety. Alisha began by focusing on risk factors that related to the way in which children were coping with anxiety. The next step was to select a protective strategy that provided individual children with support. Alisha also wanted to explore, through the social and emotional framework, the skills that could be taught to the whole class while, at the same time, intervening to support individual children with anxiety.

Jim (a Stage 1 teacher) wanted to know more about how to develop resilience in children. He began by focusing on positive behaviour strategies and building positive relationships through knowing the children’s strengths and weaknesses.

Charmaine (a Year 5 teacher) identified two areas of focus. She firstly wanted to reflect on changes that had already occurred in her classroom practice, since she had already been employing targeted strategies to overcome bullying and poor social skills. One particular change related to the ‘Big Blue Book’ which was a 2007 hard cover diary where Charmaine had begun to journal incidents and concerns raised by the children. Charmaine reflected on what had changed for these children through this process and what skills they had developed throughout the year so far. Her second step was to then investigate whether she needed to let go of some structure in her teaching practice and implement strategies for encouraging independent learning.

Kelly (the Assistant Principal who provides teacher release) wanted to explore her role in the classroom and what was happening for her when she was working with particular children who challenged her. Kelly began by being more conscious of her verbal and non-verbal communication and the impact this had on children. A further step was to address the different needs of those children who challenged her by considering the strengths each child contributed to learning situations, and actively promoting these. She also wanted to have less structure to her lessons, with more open ended approaches, and to include consistent strategies to support student relationships.

To summarise, teachers at School B were particularly focused on understanding individual students better, improving communication and building stronger relationships. There was also a strong theme of building students’ self-awareness and self-regulation, particularly in contexts where there was less teacher-driven structure. Teachers were interested in helping children reduce anxiety and stress through being explicit about protective behaviours.
Notably, although teachers at School B had identified (in Cycle 1) parents’ accountability as a priority, this theme was not initially taken up in any individual teacher’s focus project. Gradually teachers in School B returned to their concern that there should be consistency between home and school regarding the way children’s social and emotional skills were being supported and some aspects of their projects began to encompass this element, as outlined in Section 5.3.4.

The focus areas for School C were quite varied and in each case reflected the activities that were associated with the role or position of the teacher within this school. For example, the Principal’s involvement reflected a focus aligned with her role in overseeing staff.

- **Brianna** (the Principal) chose to explore the use of ‘positive strokes’ to support teachers’ mental well-being. The first step for Brianna was to explore opportunities for teachers to express their successes and achievements and to celebrate these through staff meetings, where triumphs were shared and appropriate strategies documented. Brianna also undertook to diarise teachers’ successes so that these could be reviewed at the end of the term or year. ‘Successes’ were interpreted as perceived positive changes in children’s performance or well-being due to teacher intervention or practice.

- **Tania** (the Assistant Principal and teacher release) wanted to explore the impact of situation-specific playground rules which could be displayed visually, along with positive behaviour support strategies (i.e. monitoring behaviour), to enhance playground communication and safety. Tania began by creating posters that would depict behaviour. She then reviewed the positive behaviour support strategy called the ‘Green Card’ that reinforced school values of respect, affirmative communication and safety. Within her classroom, Tania wanted to be consistent with this theme of positive behaviour by exploring the use of non-verbal redirection and encouraging positive affirmations amongst children.

- **Samantha** (the Learning Support teacher) chose to explore the collaborative parent-school processes used in dealing with conflict or bullying. She began by developing and documenting a process for responding to such issues that encouraged students, parents and teachers to work together to understand the problem and repair the harm caused. This process was based on a restorative practices model.

- **Rose** (a Kindergarten teacher) chose to investigate the nature of children’s mental well-being by way of systematic interventions related to ‘melt downs’. Rose began by introducing self-monitoring strategies e.g. ‘thumbs up and thumbs down’, which was used by children to indicate whether they had or hadn’t done their best work. She also focused on modelling positive self-talk (such as ‘I have only one more word to write then I can have reading time’), as well as directing praise to individual children (with
specific comments such as, ‘Well done. I saw you using your words when things got a bit hard’).

- **Alex** (a Year 1 teacher) chose to focus on the lack of empathy by one particular child toward other students in the class. Alex began by exploring what the legitimate needs of this child might be (for example, to be noticed, have a conversation with a teacher or feel self worth). She was also searching for strategies that would change or modify the child’s behaviour.

To summarise, teachers at School C were less cohesive in the areas they chose to focus on, but one strong theme was a focus on communication that would enhance school values, create a network of support for children with mental well-being problems, and acknowledge and celebrate success with changes to classroom practice.

The focus areas which have been summarised in this section provided the impetus for teachers’ actions in Cycle 2 of the research. In the following section I report on the professional growth that occurred for teachers as they pursued their mental well-being initiatives.

### 5.2 Professional growth for teachers

Table 1 (below) provides a succinct summary of the area that each teacher chose to focus on in Cycle 2, and the professional growth that teachers reported on as a result of their involvement in the research. The third column makes explicit the links between each teacher’s focus area and the Social and Emotional Learning (SEL) Framework which was introduced to teachers in Cycle 1. These connections had been explicitly discussed with teachers during Meeting Two and again, informally, during school visits. Participants’ capacity to identify how their planned initiatives related to the SEL framework is important as it relates back to the intention of this research which was to observe the change in classroom practice when teachers focus on social and emotional learning as a framework for improving children’s mental well-being. Each of the statements in the fourth column is recorded directly from participants’ comments. They either express new learning or, in some cases, new ideas or realisations which teachers identified to inform future practice.

In the sections following the table I will describe in more detail the reported outcomes for both students and teachers as a result of their activities.
Table 3  Summary of participants’ focus areas and reported changes in their values, attitudes, beliefs and practices

<table>
<thead>
<tr>
<th>Participant</th>
<th>Focus area</th>
<th>Link to SEL framework</th>
<th>Reported changes in teachers’ values, attitudes, beliefs and practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Candy</td>
<td>Managing children who have disruptive social behaviours</td>
<td>Motivation by considering levels of task competence, task autonomy and task relatedness.</td>
<td>Ongoing professional facilitation is necessary for change to take place in terms of new ideas and practices.</td>
</tr>
<tr>
<td>AP/Year 1</td>
<td>Reducing the interruptions to learning</td>
<td>Self-management – creating opportunities for children to monitor their own learning.</td>
<td>Children are best supported when teachers understand the child’s needs and make modifications to classroom practices, especially when I let go of unnecessary expectations.</td>
</tr>
<tr>
<td>(School A)</td>
<td></td>
<td></td>
<td>The Well-being Committee has the potential to develop a common understanding about the way teachers approach children’s difficulties with a social and emotional well-being focus rather than just a place for children to be referred.</td>
</tr>
<tr>
<td>Sophie</td>
<td>Giving equal and fair attention to all children in the class</td>
<td>Self-management – developing resilience and protective behaviours. Learning from mistakes and learning from others about what works in the classroom for learning to occur.</td>
<td>When I acknowledged my personal anxiety I was able to be more conscious of what anxiety might feel like for children and therefore know what might trigger anxiety in children.</td>
</tr>
<tr>
<td>Year 3</td>
<td></td>
<td></td>
<td>An emphasis on values of respect and dignity has become a significant link between how I have come to understand children’s mental well-being and the social skills training (Focus 40 Social Skill Development Program).</td>
</tr>
<tr>
<td>(School A)</td>
<td>Reducing my own anxiety</td>
<td>Empathy, with a special focus on relationships</td>
<td>I believe if children know about protective behaviours then this provides a stimulus for change in their social and emotional well-being.</td>
</tr>
<tr>
<td>Sean</td>
<td>Improving classroom management strategies through empathetic communication.</td>
<td>Self-awareness – accepting responsibility for own actions.</td>
<td>I now understand the importance of explicitly teaching empathy as it is not an innate social and emotional skill.</td>
</tr>
<tr>
<td>Year 5</td>
<td></td>
<td></td>
<td>I now operate with more flexibility in developing rules and focus more on values by adjusting praise for various children.</td>
</tr>
<tr>
<td>(School A)</td>
<td>Bringing joy back into teaching and learning.</td>
<td>Self-management – monitoring own learning.</td>
<td>My increased awareness of an empathetic approach has assisted in meeting the needs of children in my class and led to a greater self awareness.</td>
</tr>
<tr>
<td>Shelby</td>
<td>How can Mini Vinnies reach out to other children in the school?</td>
<td>Empathy - developing an understanding of empathy though peer support.</td>
<td>I have discovered Mini Vinnies is more than helping others – it is about helping ourselves and receiving from ourselves through our work together. It is possible for Mini Vinnies to have a social and emotional well-being focus.</td>
</tr>
<tr>
<td>Kinder</td>
<td></td>
<td></td>
<td>My role in teaching empathy has become one of fostering the child’s own perspective through active listening.</td>
</tr>
<tr>
<td>(School A)</td>
<td>Addressing the consequences of rule breaking in my classroom – why do we have these rules?</td>
<td></td>
<td>I am more conscious of the huge impact language and phrasing has on the way I encourage children to do their best.</td>
</tr>
<tr>
<td>Trent</td>
<td>Giving children a clean slate when they are directed to the Principal</td>
<td>Self-regulation – accepting responsibility for own actions</td>
<td>My new strategy of including more talk or ‘a fair hearing’ during incident follow-up time has become more solution focused.</td>
</tr>
<tr>
<td>Principal</td>
<td>To carry out restorative practices of support and fairness.</td>
<td>Empathy – Being aware you are hurting others and everyone has a right to be safe and happy.</td>
<td>When I reflect more deeply on the child’s experience my contribution to supporting the teacher and the child back in class is more meaningful.</td>
</tr>
<tr>
<td>(School B)</td>
<td></td>
<td></td>
<td>My actions demonstrate strong intentional practices both teachers and children feel supported.</td>
</tr>
<tr>
<td>Kelly</td>
<td>My role and perception of what is happening when working with particular children who challenge me.</td>
<td>Self-management – developing resilience and protective behaviours. Being aware of verbal and non-verbal actions and the impact this has on teachers and children.</td>
<td>Rather than waiting for family involvement I now work impartially with children’s mental well-being regardless of parental support.</td>
</tr>
<tr>
<td>AP /Release</td>
<td></td>
<td></td>
<td>Mental well-being of all children has become just as important as the mental well-being of those with special needs.</td>
</tr>
<tr>
<td>(School B)</td>
<td></td>
<td></td>
<td>I have learned that children can be encouraged to make a commitment to change if there is regular monitoring of children’s intrinsic thinking and behaviour in relation to a change in their well-being.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Less judgmental thinking has become a stimulus for greater empathy towards others’ mental well-being.</td>
</tr>
</tbody>
</table>
### Chapter 5: Plot and character development

<table>
<thead>
<tr>
<th>Name</th>
<th>Year/School</th>
<th>Description</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jane</td>
<td>Year 4</td>
<td>Supporting children who are at risk e.g. children with ADHD; unsettled at home</td>
<td>- Self-awareness – enhancing self worth and self esteem; accepting responsibility for own actions.</td>
</tr>
<tr>
<td></td>
<td>(School B)</td>
<td>- My experience in employing a diary with parents was empowering, self regulatory and motivational for children.</td>
<td>- Programs such as 123 Magic supported self-regulation and self-awareness skills but I found the children needed supplementary strategies that were more positive so as to enhance self confidence.</td>
</tr>
<tr>
<td>Maureen</td>
<td>Year 3</td>
<td>Developing independent learning skills – enhancing children’s decision making skills.</td>
<td>- Self-management and self-regulation skills in developing ‘I can...’ behaviour.</td>
</tr>
<tr>
<td></td>
<td>(School B)</td>
<td>- Empathy in developing a greater awareness of others.</td>
<td>- I discovered the cyclic nature of independent learning requiring individualised programming which in turn brought about self confidence and in turn promoted further quality learning.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- I found that in teaching and modelling empathetic approaches children experienced the language and purpose of what empathy looks like and feels like.</td>
<td></td>
</tr>
<tr>
<td>Jessica</td>
<td>Year 4</td>
<td>Developing independent learning skills – enhancing children’s decision making skills.</td>
<td>- Self-management and self-regulation - developing ‘I can...’ behaviour.</td>
</tr>
<tr>
<td></td>
<td>(School B)</td>
<td>- Empathy in developing a greater awareness of others</td>
<td>- Children’s mental well-being has been promoted through the implementation of PEEL strategies such as attending to prior learning and a focus on effective learning habits enhancing their engagement with independent learning.</td>
</tr>
<tr>
<td>Nadine</td>
<td>LST</td>
<td>To understand more about children who refuse to come to school.</td>
<td>- Empathy - developing an understanding of empathy though peer and teacher support.</td>
</tr>
<tr>
<td></td>
<td>(School B)</td>
<td>- To recognise the behaviours associated with anxiety and how this may manifest in children.</td>
<td>- I have found the positive psychology approach beneficial in having a conversation with teachers that focused on the child’s strengths so as teachers relate to these strengths in terms of well-being rather than deficits.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- I have become more conscious of my language so as to acknowledge the child’s experience.</td>
<td>- Choosing to act on risk factors has become a constructive first step in supporting children’s mental well-being as I have been able to draw a clearer picture (for teachers) of the child’s experience.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- In becoming more conscious of observing children’s social and emotional aspects of learning I have developed SEL indicators that assist teachers in understanding a student’s performance and ability to create positive relationships.</td>
<td></td>
</tr>
<tr>
<td>Max</td>
<td>Year 6</td>
<td>Recognising individual differences through deep knowledge of children.</td>
<td>- Motivation and decision making in promoting intrinsic rewards</td>
</tr>
<tr>
<td></td>
<td>(School B)</td>
<td>- Creating a safe environment where children are able to take risks and are unafraid to make mistakes requires me to know each child’s level of comfort within the group.</td>
<td>- Changing my teaching style to one of facilitator meant more time to engage with children and deepen my understanding about how they want to work within the class.</td>
</tr>
<tr>
<td>Sandy</td>
<td>K/1</td>
<td>Building choices into the way you respond to children.</td>
<td>- Self-management and self-regulation in taking and accepting responsibility for own actions.</td>
</tr>
<tr>
<td></td>
<td>(School B)</td>
<td>- Empathy - everyone has a right to be safe and happy</td>
<td>- The time given to self-reflection was valuable because it gave me an opportunity to think about what was impacting on my own well-being, which ultimately related to my style of interaction with the children.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- I continue to appreciate my role in nurturing social skills and positive attitudes and how that is similar or different to a parent’s role.</td>
<td>- Changing classroom activities to include explicit teaching of group skills gave children opportunities to learn how to get along and accept responsibility for their actions.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- I have become more conscious of my language so as to acknowledge the child’s experience when children engage in inappropriate behaviour.</td>
<td></td>
</tr>
<tr>
<td>Phillip</td>
<td>Yr 3/4</td>
<td>Acknowledging and describing personal well-being as it relates to teaching.</td>
<td>- Empathy - everyone has a right to be safe and happy.</td>
</tr>
<tr>
<td></td>
<td>(School B)</td>
<td>- To address bullying incidents within the classroom.</td>
<td>- Self-awareness - identifying strengths within individuals and positive ways of communicating.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Seeking peer (staff colleagues) support for a teacher’s mental well-being demonstrated the significance of the principles of team work in overcoming difficulties.</td>
<td>- I have experienced some of the consequences (such as reduced bullying and negativity) when teachers focus on building relationships with children and when teachers take time to evaluate this relationship.</td>
</tr>
<tr>
<td>Student</td>
<td>Year 1/2</td>
<td>School</td>
<td>Comments</td>
</tr>
<tr>
<td>---------</td>
<td>---------</td>
<td>--------</td>
<td>----------</td>
</tr>
<tr>
<td>Alisha</td>
<td>Year 1</td>
<td>(School B)</td>
<td>To recognise the behaviours associated with anxiety and how this may manifest in children. How to support children experiencing anxiety.</td>
</tr>
<tr>
<td></td>
<td>Year 2</td>
<td>(School B)</td>
<td>Developing a climate of acceptance for all. Empathy through group listening and turn taking. Relationship building through better communication.</td>
</tr>
<tr>
<td></td>
<td>Year 5</td>
<td>(School B)</td>
<td>Reflection on changes to classroom practice and children’s performance throughout semester one. Maintaining the positive progress.</td>
</tr>
<tr>
<td></td>
<td>Year 6</td>
<td>(School B)</td>
<td>To provide more open ended tasks that require independent learning. To observe how this changes relationships in the classroom along with children’s motivation and self worth.</td>
</tr>
<tr>
<td></td>
<td>Music</td>
<td>(School B)</td>
<td>Greeting each class with a fresh start. Relationships – positive comments; knowing what is positive and looking for good in others.</td>
</tr>
<tr>
<td></td>
<td>Principal</td>
<td>(School C)</td>
<td>Using ‘positive strokes’ to support teachers mental well-being</td>
</tr>
</tbody>
</table>

Chapter 5: Plot and character development

- To recognise the behaviours associated with anxiety and how this may manifest in children.
- How to support children experiencing anxiety.
- Empathy through listening to others and learning to modify response to new situations.
- I continue to appreciate the differences in what motivates children to do the things they do.
- Implementing strategies that reduce anxiety such as scaffolding questions and explicit directions with the use of the child’s name at the beginning has been a simple and easy method to improve communication.
- I have found that slowing down, with a gentler and sensitive approach to children’s behaviour, is working but simultaneously recognise consistent and immediate responses to children’s needs have a significant impact on their well-being.
- Developing a climate of acceptance for all. Empathy through group listening and turn taking. Relationship building through better communication.
- When there was timetabled group discussion for social learning and problem solving interruptions in the class were reduced. This strategy supplemented the explicit teaching of social and emotional skills.
- I discovered the group discussion time provided another purpose - to observe and reflect on each child’s individual’s participation in the group and the level of social and emotional learning being used.
- Reflection on changes to classroom practice and children’s performance throughout semester one. Maintaining the positive progress.
- Motivation to set a challenge or goal and enhance proactive decision making skills
- By putting the children’s mental well-being first and stepping back from curriculum I gave myself an opportunity to unravel the ‘keg of anger’ in the room.
- I discovered that the Big Blue Book was proof that someone was listening, that each entry reinforced implicit trust and facilitated a process for children to listen to each other and help them help themselves.
- Listening for me has become so much more – listening encapsulates all the senses.
- To provide more open ended tasks that require independent learning. To observe how this changes relationships in the classroom along with children’s motivation and self worth.
- Motivation - by considering levels of task competence, task autonomy and task relatedness.
- When I refocused on the use of positive language and reduced judgmental comment I experienced a dramatic shift in my teaching style and interactions with children.
- Goal setting and self assessment was a significant part of raising children’s awareness of social and emotional learning skills.
- I had challenged myself to consider the concept of equal citizenship in the class and in doing so found more honesty, compassion, appreciation of each other’s efforts, opportunities to thank children, patience to seek evidence in resolving conflict and proof of social conscience.
- Greeting each class with a fresh start. Relationships – positive comments; knowing what is positive and looking for good in others. Unavailable to continue in project.
- Resilience
- Empathy - everyone has a right to be safe and happy. Relationships – positive comments; knowing what is positive and looking for good in others.
- Family involvement has become a priority in resolving relationship difficulties as I have learned that membership in my class means a partnership with parents.
- I discovered that developing resilience in children required intervention strategies that helped children make choices and supported children’s conversations about emotions associated with change or hurt.
- A refocus on establishing (or scaffolding) a calm and safe environment at the beginning of every day supported children’s mental well-being, particularly anxious children, as it predicts what will help them during the day to succeed.
- Using ‘positive strokes’ to support teachers mental well-being
- I have become very intent on equity and tolerance in understanding different issues that relate to children and therefore have encouraged other staff to apply thinking behaviour (active listening) when responding to children.
- I have learned to be consistent in the way I approach relationships with staff and encourage teachers to find the positive experiences in their work with children.
- By observing children rather than judging children I have become more solution focused and understand that children have the competency to interpret the social world and act on it in a way they feel is best.

130
<table>
<thead>
<tr>
<th>Tania</th>
<th>Impact of situation specific playground rules using children’s photographs and positive actions</th>
<th>Self-management – working towards cooperative team work and playing safely. Valuing each person’s personal space, safety and happiness.</th>
<th>A common understanding and consistent language became critical for positive behaviour supports ('Green Card’) to be successful across the school. For children to be responsive the strategy must have consistent meaning within a whole-of-school approach.</th>
</tr>
</thead>
<tbody>
<tr>
<td>AP/release</td>
<td>(School C)</td>
<td>Empathy – looking after everyone at school and showing a caring attitude and kindness.</td>
<td>I found that exploring children’s mental well-being through pedagogy (e.g. the consequences of using targetted praise) the PEEL research group changed the perception of how teachers could influence children’s mental well-being</td>
</tr>
<tr>
<td>Rose</td>
<td>To have a systematic approach to preventing and dealing with children who have ‘meltdowns’</td>
<td>Self-awareness – accepting responsibility for own actions and knowing what’s fair for me and for others.</td>
<td>Supporting children’s mental well-being became effortless when I modified expectations of children with social and emotional needs as well as made personal adjustments to communicating more flexibly with the child.</td>
</tr>
<tr>
<td>Kinder</td>
<td>(School C)</td>
<td>Self-management – monitoring own learning and owning ones behaviour.</td>
<td>By focusing on children’s giving and receiving compliments, personal strengths and special interests I’ve experienced the significance of self-awareness as a key area in developing children’s mental well-being.</td>
</tr>
<tr>
<td>Samantha</td>
<td>Parent process where expectations are shared in a collaborative way</td>
<td>Empathy - developing an understanding of empathy through being held accountable for their actions in a supportive way.</td>
<td>I have come to appreciate the value of role play in explicitly teaching feelings and relationships through modelling language and behaviour.</td>
</tr>
<tr>
<td>LST/Yr 1</td>
<td>(School C)</td>
<td></td>
<td>For trust to grow between teacher, child and parent I have discovered there has to be a balanced approach to communication where all parties are equally involved in understanding mental well-being issues.</td>
</tr>
<tr>
<td>Alex</td>
<td>Develop empathy in a particular child who is experiencing difficulty socialising</td>
<td>Self-awareness – accepting responsibility for own actions and learning about own feelings.</td>
<td>I have realised the Individual Education Plan (IEP’s) process was a useful tool in collaborating with parents about the child’s difficulties in social and emotional aspects of learning and their participation at school.</td>
</tr>
<tr>
<td>Yr 1</td>
<td>(School C)</td>
<td></td>
<td>My approach to children’s development and teaching behaviour gradually overcame expectations that there was a whole new set of strategies belonging to children’s mental well-being waiting to be learned.</td>
</tr>
<tr>
<td>Alex</td>
<td></td>
<td></td>
<td>I discovered the value in fine tuning my teaching through micro-skills was in the improved relationship between teacher and students.</td>
</tr>
<tr>
<td>Yr 1</td>
<td></td>
<td></td>
<td>By shifting my perspective on children who have social and emotional needs I realised that for some children their experiences of childhood are unique and may not be changeable, therefore different temperamental factors and expression of basic emotions may cause children to perceive a situation differently.</td>
</tr>
</tbody>
</table>
5.3 Outcomes for teachers and students

In Chapter 4 I outlined the expectations for the project that teachers initially set and I grouped these expectations into five collective goals. In this section I discuss examples of the initiatives which were implemented by teachers and how these initiatives progress the collective goals.

5.3.1 Raising awareness of children's mental well-being

Teachers chose to pursue a number of areas of action that sought to promote awareness of children’s mental well-being in their own classrooms and also as a whole-of-school issue, requiring all teachers’ involvement.

Brianna, for example, recognised that the executive (all of whom were involved in the study) had an important role to play in modelling a positive attitude to other staff and the broader community. Her activities focused on building capacity through a whole-of-school approach:

As an executive team we have worked together supporting children, not crucifying children. It’s been the little things that have made the difference. Sometimes it’s the side issues like overturning a kafulle about casual teachers in the classroom. Recognising and expecting that children have a responsibility. We’re trying to devise a ‘kids speak’ that describes behaviour worth an A. If there is a poster at the bubblers displaying the right behaviour, that kind of organisation can make a difference to staff.

Communicating a consistent understanding of school expectations clarified for teachers the language employed to manage children’s social interaction. ‘Visual metaphors’ were also employed at School C as a strategy, during staff reflection or prayer. Teachers were invited to engage with their feelings about difficult encounters with children and allow them to recognise each other’s stressors. This initiative sought to change school culture by promoting equity, tolerance and understanding of different issues that relate to children. Brianna and her fellow executive members demonstrated to other staff how they were moderating their own self perceptions and hoped to raise consciousness of the impact teachers have on children’s mental well-being through sharing their success stories. Similarly, Trent (School B) chose to position himself as a leader in developing quality relationships and modelling teacher behaviour. His vision for the school was to have all staff incorporate mental well-being into their thinking and planning so as to produce consistency in approaches across the school.

Tania (School C) also focused on raising awareness of well-being issues through whole-of-school practices that promoted positive behaviour supports. She had an opportunity, in the three classes where she released teachers, to experiment with and practice teacher behaviours with different age groups. Tania created visual images that demonstrated appropriate social skills and fashioned a reward system that complemented this innovation. She reported that, during Cycle 2, staff responded to this emphasis by forming an ‘effective learning coffee group' which met fortnightly. Teachers, she felt, were being proactive in developing positive relationships with children, trying to overturn the level of unhappiness that prevailed in the school during the previous term. She believed the ‘effective
learning coffee group’ was successful in influencing teachers’ perceptions and developing links between pedagogy and children’s mental well-being.

Children’s mental well-being gained attention in School C when Brianna revealed inconsistencies in relationships between teachers and teacher aides across the school. Teacher aides are often the ones who work with children with mental well-being issues and therefore their practices are just as important as teachers:

There appears to be a culture of decision making and power which has evolved. The relationship between teacher and teacher aides is not positive. The communication reflects unproductive relationships (Brianna C).

Samantha (School C) assisted in addressing issues of power and improving communication by setting up regular meetings to negotiate support and clearly define teacher aide roles. Brianna later commented that, by the following year, a more collaborative approach between teachers and teacher aides was evident and had resulted in positive behaviour supports that were consistent with the interpersonal skills participants had valued in promoting SEL.

Shelby, with the support of others in School A, persevered with her idea of bringing children’s mental well-being to the school’s peer support program (Mini Vinnies). She developed her own data gathering methods in group discussion with the children and used this data to develop goals for the Mini Vinnies project. The development of the Well-being Committee in School A also sought to embed mental well-being in classrooms:

We recognise some staff have an authoritarian approach. We came to the understanding that teachers owned the social and emotional issue in their class... The Well-being Committee has had success as we are talking to staff about a different approach to solving behaviour. Social and emotional well-being issues come up and now we are recognising these things. What we initially targeted has changed... The Well-being Committee has had success in building a common understanding (Candy, School A).

The Well-being Committee subsequently became part of the governance of School A.

Nadine (a support teacher) focused on developing a shared understanding across the school about risk factors related to anxiety. Assuming an advocacy role, she consistently used the statement ‘What’s happening for this child?’ when talking with teachers, thus prompting them to really analyse deeply what the mental well-being issues might be. She developed ‘The Social Support Group’ which consisted of the school counsellor, support teacher, the child ‘at risk’ and that child’s peers, providing a structure to facilitate changes, particularly in relation to issues of bullying within the school.

Throughout the period of the research there were several systemic program imperatives which were associated with raising awareness of children’s mental well-being. The process of action research allowed for these other programs to be considered more deeply and understood in a somewhat different way. Several teachers engaged with these imperatives by adjusting interaction styles and classroom organisation, attributing these adjustments to their increased awareness of children’s mental well-being. These systemic imperatives were PEEL (Project for Enhancing Effective Learning),
Micro-skills (a classroom observation project initiative within the school district), and Values Education (NSW DET). Of interest to this project was the overlap between the curriculum and pedagogical innovations embedded in these programs and aspects of the SEL Framework used as a stimulus for the research. For example, self-regulation was evident in the learning behaviours of PEEL and in the approaches recommended in Micro-skills for giving praise.

These activities at each of the schools were all focused on raising awareness of mental well-being issues across the school community. While most were initiated by members of the executive, these examples highlight how instigating whole-of-school strategies (such as visual metaphors, peer support programs) and collegial practices (such as modelling, teacher support and collegial discussion) could build teachers’ awareness of children’s mental well-being as a classroom issue.

5.3.2 Overcoming concerns about the teacher’s role in well-being

The second of the collective goals for the project was to overcome teachers’ concerns about their role and capacity to support children’s mental well-being. Teachers recognised they also needed to better understand the relationship between mental well-being and learning.

For some participants, dealing with their own well-being was an explicit focus of their activity. Phillip (School B), for example, was initially concerned about his own well-being to the extent that he felt unable and ill equipped to participate in the research. He spoke at length to colleagues about personal difficulties that discouraged him to engage with the issues occurring in his classroom. Phillip chose to focus his attention on the ongoing bullying episodes among children in his class:

I've tried talking to children by providing a space to vent problems and listening to their stories. This model of talking to them within class hasn’t been successful.

He referred the problem on to the school counsellor who engaged the children in the Friends program and Phillip also shared his concerns in relation to children’s relationships with the Principal. Yet in doing so he noted that there was no change in the children involved following interventions but he had noted that:

I found talking to the children one-to-one rather than the whole group develops relationships. I learned about my ability to touch children through sharing and being open. Consistency and ability to laugh at yourself is important. I have had an insight into my mistakes through observing good modelling where this person (i.e. a colleague) demonstrated a loving model. She had a gift and kids liked her.

He stated that, in the main, his views had stayed the same, although he remarked on the importance of being open with children and staff peers. His view was that ‘we need to work with peers in letting them know what you value and acknowledging values. Peer support and valuing your peers is needed’. Phillip’s comments suggest that as long as he was provided with collegial support his ability to deal with difficult situations would also improve.

Sandy (School B) was hesitant about her participation in the project as she was concerned about the expectations of her role in terms of the well-being of her Year 1 children. The most tangible issue
which Sandy identified to support children’s mental well-being was to focus on her teaching approach. She decided to introduce more cooperative learning which meant explicitly teaching group strategies. She viewed social skills as critically important for children who were mistreating others and felt these could be best developed through teaching group processes. In making these changes to pedagogy, Sandy was less apprehensive about her role and more willing to think about other aspects of her teaching that relate to children’s mental well-being, such as her methods of communicating with and responding to children.

Charmaine’s focus on reflecting on the strategies she had already put in place in her class signalled a shift in how she viewed her role, from that of ‘controller’ to facilitator, providing children with more opportunity for independence and also improving the quality of communication between herself and her students:

I think talking is so important - having time to chat and have a laugh; have a joke. I think they know we have time to listen to each other... We have gone about changing beliefs about each other. They think that having time to talk is actually giving them more time to be heard. Time is important.

Charmaine described how her perception changed when she realised what was happening in the classroom and then later recognising how significant her role was in making a difference for students in her class:

...there was a keg of anger in the room. The girls were sitting there seething – boys talked over them and wouldn’t share. I use a lot of humour and affirmations around the room. The girls are more self-aware and boys have learned to listen and feel valued and value others in the room. I think that they have learnt that there are consequences... There is more productive discussion now since we have changed the way we work together. There was this whole climate of intimidation.

Charmaine’s new, resultant communication strategies emphasised the importance of being responsive to children’s needs and valuing children’s mental well-being.

Alisha had concerns about the teacher’s role in relation to that of a counsellor, raising several questions about perceptions. These questions signalled an inquiry for Alisha into the way in which children’s responses are perceived and interpreted:

I am aware of the manipulative traits of children who might choose to externalise rather than children encouraged to internalise. There are pros and cons of having a counsellor – two sides within the community. Are we spoon feeding parents? Is there a special ed (education) versus social ed (education)? Sometimes we are putting things on children in the younger years that don’t apply. Immediacy of response in the younger years is important yet there is an expectation to explain too much.

Alisha voiced her concern regarding an over-emphasis by teachers who want to normalise children’s reactions and responses through counsellor intervention whenever behaviour was not understood by the school or teacher. Introducing counsellor intervention to the child too quickly, according to Alisha, removed parental responsibility and teacher responsibility and had a possible detrimental impact for
the child in overcoming difficulties. In bringing these elements of children’s mental well-being to her attention and to others, Alisha had learned that ‘I’m more aware of where I’m coming from – in the staff room we have good discussion – I’m more determined to know that my point of view is valid. I’m always on a pendulum’. Comments regarding the relationship between special education and social education were part of this ongoing dialogue with other staff members. Alisha implied that children with additional needs should not be excluded from social education which should be relevant to their developmental age. Alisha had gained insight into the kind of social education young children needed, particularly strategies that assisted children in knowing more about their responses in problem situations.

Kelly attempted to moderate strategies that came ‘naturally’ to her so as to become more open to children’s views of the world. Kelly also acknowledged that, in her experience, ‘overuse (of empathy) is detrimental to the child because the child is not challenged to change behaviour’. Kelly’s new found strategies were to give:

…greater tolerance, think time and removing the emotion. I have put a process in place; when I’m frustrated and emotional I walk away. I worked on taking out the judgmental statements… I’ve stopped doing the judgment thing and am trying to be more patient.

Kelly felt her use of sarcasm and her authoritarian, spontaneous, content-driven style had evolved. So too, had her intolerance for children whose parents didn’t make an effort to support the school. Kelly began utilising more conversational techniques when solving problems with children and recognised her influence could engage children in collaboratively solving social difficulties over time. She was more in tune with children needing time to develop self-understanding.

Sophie (School A) began Cycle 2 with a strong focus on her own personal well-being, and she used this to plan changes to the way she was interacting with children. Through this focus on herself, Sophie realised she had the capacity to be more flexible with children and differentiate particular types of praise that targeted how some children preferred to be acknowledged. Sophie also moderated her perception of her role in relation to children’s mental well-being as more than teaching social skills. She felt participation in the project had:

…heightened my views as I have focused on the area concerned. I’m more in tune with social and emotional aspects, more explicit and nurturing. Rather than dealing with them as they happen I do more than scrape the surface.

Her renewed understanding of the teacher’s role encompassed values and beliefs shared by other teachers in School A:

The teacher needs to facilitate consistency and insist that students use manners and treat fellow humans with the respect and dignity that they deserve. The teacher must model this always of course. The teacher must value students’ feelings and opinions and give them the opportunity to express their feelings while teaching their students to do likewise.

There was a sense Sophie was re-thinking her role in relation to children’s mental well-being with more attention on explicitly teaching values and consistent approaches to protective behaviours, such
as role playing social scenarios in the playground so as to demonstrate consequences of positive actions. Sophie had identified a personal issue in reducing her own anxiety in this classroom:

That's why I've had a bad week ... It causes me anxiety. Anxiety became contagious because I've been trying to deal with all the other children... Term 2 has been very difficult. I am fortunate that I didn't end up ill or needed to go to the counsellor as I tried to juggle everything in a realistic way.

To be able to document personal feelings when children disrupt the class and consider what made her anxious seemed to be a liberating experience and a new beginning in Sophie's action learning. This led to a request for teacher release time for Sophie to develop intervention programs for a range of students, hence not only meeting her need to reduce personal anxiety but also meeting her original need to give fair and equal attention to all in the class:

It was significant to note that there was one student taking all my time and energy – I was taking on board what all the professionals were telling me and things were in place but I had no control over internal triggers for the child. This was making me very anxious. By shifting the focus on to me initially I was acknowledging the triggers for my own anxiety... I had a concern for support for all students – my shift in focus received a good response from students. Knowing what was triggering anxiety in me helped know what might trigger anxiety in other students?

Sophie's desire to bring about pedagogical change included support from expert professionals and an opportunity to rethink her approach to a student with high needs.

In all these activities, teachers were strengthening their understanding of their role, as a teacher, in supporting children’s mental well-being. They recognised the need to focus on their own well-being first, and to tune in more closely to how this influenced their responses to children.

5.3.3 Enhancing teacher knowledge of particular mental well-being issues

Teachers in this study perceived there had been an increase in the prevalence of particular mental well-being issues in children such as anxiety, autism spectrum disorder and attachment difficulties. A number of teachers felt they needed to enhance their knowledge of these specific issues and to learn more about tools and strategies that might be of assistance in such contexts. In each case, the teacher recognised there was a relationship between meeting the needs of individual children and changing their teaching style to more generally accommodate all children’s mental well-being.

Sophie engaged in a personal quest to understand the needs of one child but at the same time enhance the learning environment for all children. She incorporated changes to her communication within the classroom, including introducing a social stories diary to follow up playground learning. She trialled strategies to reduce anxiety and anger, which included explicitly teaching behaviours that diffused the situation such as moving to a quiet space or engaging in something physical to release energy (e.g. turning phone books into confetti). In her diary, Sophie reflected:

I have tried a lot of strategies and they are going well. I know in the past some strategies have worked for a while then not anymore and that was frustrating – constantly finding new strategies. Instead we now focus on preventing him from becoming anxious by
knowing his triggers from an Aspergers point of view. We now have in place social stories and this will be ongoing – so that he learns what is expected instead of just expecting him to know.

Sophie also began to diarise when altercations or conflict occurred with particular children, enabling her to view the child’s needs through a different lens. By taking an autism spectrum lens, Sophie’s understanding of the child developed. She was able to appreciate that the child may, at times, have difficulty expressing a feeling or want, or may have misunderstood verbal or nonverbal cues from peers or teachers.

Similarly, Alex’s participation was motivated originally by the mental well-being of one child but, over time, her frustration with not finding the right strategy to support that child’s needs led her to realising the need for other innovations that were directed at changing her own teacher behaviour. This came about through Alex’s engagement with the Micro-skills project (as discussed in 5.3.1) which addressed a range of teacher-student interactions in the classroom. Her realisation came when these adjustments to classroom practices impacted positively on the child with additional needs.

Alisha’s initial focus related to understanding more about extreme levels of anxiety. As she described:

There was a sudden change in behaviour and then (this child) refusing to come to school. This impacted on all involved and changed the level of support (the child) needed. We think he couldn’t cope with Year 1, having had repeated Kinder. A teacher aide was needed to get him out of the car and physically lift him into the room.

However, Alisha soon recognised that she should pursue a more holistic response to dealing with anxiety and she subsequently changed in the way she interacted with children in class. She made a number of adjustments to the way she involved children in classroom discussion, introducing speech scaffolds and timetabled relaxation sessions into her program. She shared her strategies with parents and included them in making the changes at home and at school.

Candy experienced a cognitive shift in her expectations of children’s participation and began reprioritising outcomes for one child. She adjusted her program to include more important mental well-being elements. It appeared that Candy recognised something in herself that was contributing to a downturn in well-being for this child, creating tension within the class:

Understanding how he learnt – letting go of expectations – the child was demanding my attention – they were not behaviours that could be overlooked. He would quickly go into a negative cycle if you spoke to him about his behaviour. There was unequal attention with other children. My teaching partner and I needed to know how he learnt because putting his hat in the right place, from his IEP was not important. David’s only goal is to finish his work. We started to change his goals – told the class his goals – the class knew that – no one has said how come David is able to do ‘this’ and ‘that’. It’s not David’s difficulty. It’s our understanding of how we can change to include him. How we can manage the classroom differently.

Candy came to the conclusion that it was reasonable for David to wander around the room playing with math’s equipment, reading on the beanbag, drawing, or writing messages to the teacher, so long
as he completed tasks and did not disturb other children. She described many of the classroom practices and innovations used to support David’s learning, including strategies such as ‘thumbs up/thumbs down’ in recording positive and negative behaviour – something which Candy said had worked well:

All teachers who worked with David recorded the ticks giving a consistent message on positive behaviour. David would still become upset when he did something which meant a thumb down tick was recorded. His behaviour would then often deteriorate for the rest of the day after that. However, David came to realise what had led to the thumbs down. On occasion, he could change his behaviour from negative to positive if he realised in time to avoid the thumbs down.

For Candy, these supports evolved and changed, where one strategy became obsolete then another would be implemented to adapt to the changes within the child:

After a few weeks this became a time consuming task. I spoke with David about the need for him to record his own behaviour. We started doing that last week. David likes to note his positive behaviour. So far he hasn’t recorded any negative marks. Admittedly his behaviour has been quite positive.

Hence, there was substantial evidence of incremental steps being made to support this child’s participation in class.

Participants who were motivated to know more about a particular child and their mental well-being appeared more open to changing perspectives in relation to children with additional needs. The process of examining the nature of mental well-being issues seemed to intensify the focus on general classroom methods of interacting and communicating with children, and subsequently prompt further adjustments to the learning environment.

5.3.4 Involving parents

In Cycle 1, a number of teachers identified that they wanted to create opportunities for parents to become more involved, and therefore more accountable, in intervention and support. Including parents in the social and emotional development of children in classrooms was an important focus for many participants.

School B had downplayed parent involvement when deciding on their initial focus, yet it surfaced time and again throughout the research. Jim and Jane (School B) incorporated strategies that required a two way communication with parents regarding student progress; an approach which prioritised a shared responsibility. The emphasis in Jane’s approach was to educate parents regarding strategies that brought out the best in their children and which empowered both child and adult. Her regular parent interviews included a diary between parents and teacher that communicated growth and development in terms of social behaviours and self-awareness. Jim invited parents in to discuss issues that arose in the classroom related to children’s social and emotional learning, emphasising notions of partnership in trying to solve difficulties. Weekly contact with parents resulted in a change in behaviour in Jim’s classroom, which he largely attributed to the importance of support from home in giving the children an added understanding of the thinking and behaviour related to developing
resilience. Alisha also alluded to this (see Section 5.3.2) when she proposed that parents should be involved in supporting the child first, before students are referred to counsellors. She also decided to engage in regular communication with parents of her students so that there was consistency of language between home and school used to solve problems.

School C surveyed the parent body to formulate and visualise a new culture for the school. Brianna went about developing a consistent whole-of-school approach by seeking the opinion of all school community members:

I put it out to the parents to discuss the vision for the school. I wanted their views on the plan for next year. I asked questions about the parent partnership and the ‘no go bully’ program which I believe was a success.

She was also endeavouring to shift beliefs and attitudes in parents who may not have realised the importance of their role in influencing school culture and practices. Samantha (School C) also focused on building partnerships with parents to resolve well-being issues. She promoted a sense that there should be an equal share of involvement where children, teachers and parents all have a say in developing positive relationships and creating support for children’s mental well-being.

Rose (School C) explored the differences between expectations at home and at school. There was a tension in Rose regarding communication with parents about parenting style, as she herself was not a parent and therefore she felt unqualified to make suggestions. This difficulty was expressed by Rose as follows:

I have parent issues in trying to make changes at school. I need to have a flow-on effect at home but at the moment what I’m doing is in conflict. I feel we need to approach the child’s needs consistently with the best (optimal) way of doing things.

When Rose met with parents she implicitly discussed strategies. In sharing what was working at school she hoped that her ideas may transfer to home. This remained a difficulty for Rose as she felt a mutual understanding had not been achieved. Factors such as working parents, large families, differing values and medication issues seemed to work against progress. In an attempt to improve intrinsic motivation for one particular child it became evident these strategies were in conflict with the extrinsic rewards being used by the family. There were mixed messages being given to the child and, for the teacher, it became increasingly difficult to achieve on-task behaviour without extrinsic rewards. Rose eventually decided to focus on school practices and put continuity with home in the ‘too hard basket’.

Whenever parents were discussed in relation to children’s well-being it was in terms of establishing a common understanding and consistency between home and school. Yet there were many instances of a gap between the rhetoric of partnership and what could be realistically achieved in practice.

5.3.5 Developing classroom practice and programs

A number of participants focused on developing school policy, practices and programs that would promote social and emotional learning and mental well-being. Candy, for example, gained a number of
insights from the project which she recognised should influence the school's well-being policy. For instance, she identified the importance of ‘keeping the dignity for children when they come to the office’, taking this further by suggesting that dignity should be part of the school's vision in providing support for children with mental well-being issues, as it prevents ‘a black and white judgment’. As a result, Candy developed the Well-being Committee which was made up of executive members, the learning support teacher and the school counsellor. Candy recognised the evolving nature of the Well-being Committee as having a dual role:

There is our work with identifying children who have mental well-being or psychological disorders (3% at the pointy end), where behaviours are difficult to change. There are going to be some we cannot change. We need to marry up the children already identified and children who have been sent to the office on a daily basis. But I also want to change behaviour for the middle chunk of children that can go either way. I want something that will change the behaviour of the bulk of the kids.

Candy was resourceful in locating information to assist her endeavours for the school. She explicitly embraced the Comprehensive Mental Well-being Promotion in School Model (discussed in Chapter 2) to inform the activities of the Well-being Committee.

Teachers engaged directly with the SEL Framework in their targeting of particular skills. Helga, for example, focused intentionally on decision making skills to improve motivation within the classroom. She developed a generic self evaluation tool which rated (on an A to E scale) quantity of work, quality of work and effort. This promoted the idea of children becoming more self-aware, describing the criteria expected for their work behaviours and the degree of their attention to task. Language initially used in this tool reflected the children’s honest and direct phrasing such as ‘poor editing’, ‘not good enough’. Changing this language to more positive comments such as ‘still trying’ and ‘need assistance’ mirrored Helga’s own reflection and learning. The self-evaluation tool was intended to provide questions and statements that invited children to own their work and their output, attend to how they listen, and have good learning behaviours.

Some teachers acknowledged changes to their teaching style from authoritarian to facilitator. This was significant for Max as he believed it created space and opportunity for informal conversation. Max reported that a less structured approach meant ‘I understood more about how I could talk to children about individual issues’ and how ‘self-paced learning freed my time to explore more positive relationships in the classroom’. He became focused on differentiating curriculum and ‘not putting pressure on them – to be what they can be - although I know who I can put pressure on and who I can’t as I know the children better’. He continued to reflect on the needs of individual children and to adapt his responses accordingly.

Influenced by the PEEL professional development program, Helga (School B) underwent a significant shift in the way she spoke with, reacted to and commented on children. Helga openly discussed these changes with the children and began a metacognitive process of observing innovations around her classroom language. When asked what she had noticed her reply was:
Some have taken to the responsibility and decision making very well. There are a few who are resisting but are coming on board because most others are doing it. A good few keep asking me what do I want and how do I want it? I throw it back to them ‘make a decision’ or ‘take a risk’. I’ve been really amazed at how honest their reflections have been and seen a growth in what they have taken on board.

In an attempt to enhance positive communication and motivational attitudes, Helga trialled partner activities with her children. There were some difficulties experienced by Helga in effectively implementing this strategy, yet she saw it as an opportunity to further problem solve why partnering was not working. She introduced prayer partners to assist in overcoming these difficulties in working together and also to aid in developing the children’s social conscience. By offering ‘Prayers of the Faithful’ every day, she felt greater empathy and compassion had grown amongst the children. She observed how compassionate children could be when others in the class were experiencing adversity. Pedagogical adjustments influenced her students’ sense of positive relationships and ability to self-regulate in independent learning activities.

Rose (School C) made changes to her classroom practice by introducing a focus on compliments, directed praise and ‘self-talk’ with an emphasis on strengths and talents. This was viewed as linking to the PDHPE curriculum. Rose incorporated explicit teaching, such as role play, to teach playground behaviour and, during one lesson, videotaped the children performing particular scenarios. Each child had a personal photograph taped to one corner of their desk with a typed list of strengths attached, which had been developed by the student during the ‘Star of the Week’ discussion. This became a scaffold for practising their compliment scripts:

I asked the children, using a ‘Y’ chart, to tell me how compliment giving and receiving felt, looked and sounded like. Practice of the compliment social skill was perhaps done in a contrived way although it made way for self-talk practice. It gave confidence and helped children thinking about the good things in others.

Rose also described another strategy used to support the child experiencing ‘melt downs’:

I have little informal meetings after school which help to link the child to the next day. I often say ‘Do you want to know how I feel?’ – which leads to conversation about events in the day. It has a flow-on effect by using a cyclic way of revisiting events.

In these meetings, Rose relayed stories to the student that told of her own difficulties in social situations as a child. Each conversation with the child intended to model an empathetic response and utilise reflection as a learning tool.

Teachers critically examined existing practices. Frances (School B), for example, had been implementing the You Can Do It program with her class, but she felt that it did not relate to real problems faced by children on a daily basis. Believing that learning needed to be situated within immediate personal experience she timetabled group discussion three times per week (after lunch), creating spontaneous opportunities for learning social and emotional skills. During these set periods of social learning, Frances integrated curriculum learning experiences from the Friendships unit found in the PDHPE syllabus and a religion unit that emphasised how we should show love for each other.
Chapter 5 – Plot and character development

It helped me realise the importance of children’s issues and dealing with them, not leaving them. The use of the group discussion time cut down on interruptions. I was able to say ‘we’ll save it for discussion time’.

Frances believed she would continue the class discussion strategy in the following year as it strengthened relationships, allowed children to help fix others’ problems and brought about fair participation for all class members.

Charmaine (School B) also became critical of existing approaches to playground support when she introduced a method that would allow children to share their concerns through the ‘Big Blue Book’. She believed that giving children such opportunities, and having concerns validated through recording them in the ‘Big Blue Book’, conveyed to the children that someone was listening to their worries. In the process of understanding relationships and problems between students it became evident to Charmaine that interaction in the playground between staff and children was also a problem. Overcoming the negative interaction and enhancing social and emotional learning meant engaging more closely with students:

I had to let them know I was listening. I began with tell me, talk to me about what is happening. There was a situation happening that was upsetting everyone. I said to them ‘Why has it taken this long?’ They said, ‘Because no one was listening to us and now you listen’...There was a fair amount of bullying going on. When they came to me I said do you want me to write this down and they agreed so I began with the ‘Big Blue Book’. I began writing down what’s happening in the playground whenever there was a problem... They would say, ‘Other people tell us to go away and sort it out, work it out yourself and we can’t’.

Stories were shared in front of all the students in the class and read back to them to check accuracy of details. Charmaine ensured that her response to this process was non-threatening and impartial and she allowed for spontaneity as to when the ‘Big Blue Book’ might be needed (either in the playground or classroom). In exploring the nature of her understanding of the strategy, Charmaine responded by saying:

This was the huge turning point in our whole class relationship.... I brought it back to the staff that we needed to do more than say ‘go and sort it out’. The intimidation by one particular child and outside gangs was worsening - something had to be done. We did a bit of work with the counsellor who came in and helped with empowering the girls – how they were feeling. It’s noticeably different, with a much nicer feeling in the classroom.

Awareness grew of how valuable the story telling in the ‘Big Blue Book’ became, not only to the children but to the teacher’s understanding of what worries children. The emphasis was on communicating with children without having to solve the problem. Charmaine noted that the listening, recording and filing away of the narrative meant she was valuing children’s concerns and that this style of communication, with its emphasis on confidentiality, was very powerful. Throughout the year reference to the book diminished. This was particularly evident amongst the boys who Charmaine felt were able to resolve issues more readily or, for some, their comfort within the group had improved to such an extent they no longer felt a need to go through the journaling process. Charmaine commented that the children would decide the fate of the ‘Big Blue Book’ at the end of the year.
Both Maureen and Jessica (School B) each made similar changes to the classroom, from whole-class teaching of content to individualised programming, with the intent of improving self-regulation and motivation to learn. Maureen explained as follows:

There was a need for more individual challenges at an appropriate level. Children were underachieving and complacent with this role. Children were not taking initiatives to start a project. There are some very capable children... There was a need to get them motivated as they were very 'lay back' kids – happy to sit and wait. I decided to implement a different sort of program – the individualised computer maths program ‘smartkiddies.com.au’. It’s motivational and competitive. I've done the same for spelling so as they self-monitor and self-manage... I make a point of directing praise, 'If you get through the Year 4 level I'll move you on to Year 5'. I make it known when children are showing their initiative by using really positive language.

In these two classrooms children’s mental well-being was being enhanced by the teachers acknowledging growth and communicating positive attitudes to learning. Jessica added an additional focus by targeting bullying in her class, explicitly teaching the ‘name the game’ strategy:

What we do for children should match what we do for adults. I realised that children should be given strategies and be encouraged to talk back to a bully as adults are.

When children were encouraged to communicate the bully's action directly to the bully, Jessica noticed that their confidence in speaking about bullying lessened the bullying behaviour by some children.

Quite a number of the participating teachers found they had an opportunity to identify how existing programs could be used to enhance children’s mental well-being. Sean developed a link between his involvement in the systemic classroom observation project (that monitored teacher behaviours and Micro-skills) and developing a deeper understanding of his own empathetic style:

The inclusion of Micro-skills, as a focus, has helped me revisit things like a focus on praise, non-verbal body language; tone; and one-to-one confrontation (which is not helpful). The wording you use is important to highlight the positive – don’t single out the children who have not done work. There was a focus on myself in this project in the way I worked with children.

Sean also found that the Making Jesus Real (MJR) program offered strategies that support social and emotional development. Whilst Sean felt he had developed at a personal level there were limitations to what he believed was within his capability:

I learnt to pick my battles as some things are too difficult to address. There has been positive feedback from children because they liked the opportunities to evaluate and provide constructive criticism even though some feedback required further negotiation.

In summary, changes to classroom practices and programs came about when teachers engaged critically with the additional needs and social events occurring in their classroom. Outcomes included the development of a Well-being Committee, changes in teaching style and improvements in methods used to motivate children and deal with intimidation and bullying.
Overall, this section has reported the outcomes of teacher initiatives and has highlighted the diverse and creative potential for change that results when teachers reflect in depth on children’s mental well-being. The findings reported in this section suggest such change, while quite nuanced, is very significant in that it has resulted in substantial shifts in understandings and practice. The following section attempts to identify the elements of the action research process that helped facilitate these shifts.

5.4 Elements that supported teacher change

In this section I explore the elements of the action research process which were identified by teachers as influencing or supporting the changes they made to their practice. The five elements discussed were drawn directly from structured interviews and feedback sessions during Cycle 2. These themes are as follows:

- Problematising classroom practice;
- Integrating theory (the SEL framework);
- Harnessing individual capacity;
- Acknowledging teacher/child relationships; and
- Responding to societal and cultural challenges.

5.4.1 Problematising classroom practice

Throughout the action research process, specific strategies were used to encourage teachers to reflect on pedagogy and engage in metacognitive processes. In doing so, they problematised their classroom practice so as to provide a stimulus for change. In setting goals for themselves, and considering initial steps to achieve change, teachers progressed their understandings of the ‘problem’. For some participants, this personal analysis was difficult and they were reluctant to articulate a mental well-being issue. Asking participants to locate a problem in their classroom was assuming there was something that teachers recognised as needing improvement, and hence were willing to change.

In Section 5.3.3 I discussed Candy’s difficulties and subsequent activities in supporting an individual child, David (a pseudonym). In observing behaviour, negotiating rewards, shifting expectations and setting goals with David, Candy demonstrated how her perception of the ‘problem’ of David’s mental well-being was changing and evolving. Candy was also tracking her own reflexive thoughts and actions in understanding how she could prioritise one child’s learning goals, and also notice the consequences when expectations regarding classroom interactions changed. She commented that this strategy meant less stress for everyone, especially David. Candy built in to her own learning a diarised account of the changes in strategies that supported David’s participation in class and his well-being. Consciously noticing and reflecting on the changes being made to her pedagogy was important in supporting Candy’s change process.
5.4.2 Integrating theory (the SEL Framework)

Exposing teachers to the SEL Framework, as part of the action research process, proved to be beneficial in supporting teachers’ change. In Cycle 2 teachers were invited to discuss whether the SEL Framework (see Appendix F) had influenced the way they approached children’s mental well-being.

Brianna (School C) described social and emotional learning and a focus on the individual as an essential part of the mission of Catholic schools. Charmaine (School B), however, viewed SEL as representing a change to traditional practices. Where schools once went about ‘fixing different problems with the same solution, such as therapy, punishment or exclusion’ Charmaine identified that the SEL Framework assists in differentiating individual needs and interventions.

The SEL Framework assisted in raising awareness of children’s mental well-being – both overall awareness and an awareness of particular issues teachers were not attending to such as motivation. Charmaine stated that the SEL Framework had helped her recognise the individual needs of children:

I’m more aware of children’s mental well-being; I stop and think ‘hey we need to really address this’... I now think about the right way for certain children. Am I getting the best results from each child? Being responsible and then taking and accepting responsibility for their learning was significant.

Candy (School A) had not previously thought about mental well-being as related to anything beyond trauma or major life changing experience:

I haven’t thought about them (SEL aspects) individually before; except empathy – we think about the whole area a lot more now. We’ve just had a meeting and discussed children who come to see us (the Well-being Committee). I don’t think I’d thought about the behaviour as having a social and emotional source...

Engaging with the SEL Framework made Candy more conscious of how questions which invite children to engage in self-reflection help all children learn social and emotional skills (for example, What do you want to learn? Is where you are sitting going to help you? What’s new about our classroom today? What behaviour will help you learn?). When asked whether the newly established Well-being Committee referred to the SEL Framework, Candy said:

It’s all about social and emotional learning – it’s not academic but always a social or emotional need in the child that needs exploring.

So while the SEL Framework was not explicitly adopted in the activities of the Committee, Candy’s understanding of what they did as a Committee was influenced by her reflection on this Framework.

SEL was considered by a number of teachers to have changed the way they connected with children. For instance, SEL helped Helga (School B) to notice children in a different way:

(It) made you think about its everyday implications, particularly for individuals who are emotionally at risk. Knowing that there is a need in children. Finding what it is that motivates the child. I catch myself being negative and these things impact on me...
sometimes more than *them*. It’s all about turning around the child’s behaviour. I’m noticing children more.

Similarly Max (School B) thought the Framework was a way of:

...getting to know the kids and develop(ing) them more fully. We are developing individuals who have control over their learning within a safe environment where we want children to be able to learn freely. There is a focus on self-management and taking responsibility in my classroom where children are not afraid to make mistakes.

The SEL Framework provided Rose (School C) with the language to view children’s needs more effectively and to implement appropriate intervention:

The social and emotional aspects have helped name the well-being behaviours – it defined them and when I saw them in the classroom I knew in a flash what was happening. It has impacted on knowing that you need to start really young in Kinder – you have to be really explicit. Language is more effective when used in a way that explains the skills of social and emotional behaviour.

Rose suggested that, when children are not happy, it is possible to use the SEL Framework to identify an aspect or need that explains why the child may be unable to participate in classroom learning or playground interactions. In Rose’s case, the SEL Framework assisted her in communicating and constructing language appropriate for describing children’s strengths and talents.

The SEL Framework was considered a useful tool in developing behaviour management plans and individual education programs. Nadine (School B), who was an advocate for full inclusion of children with disabilities, described how SEL ‘encourages you to think about a more comprehensive view’ of the child and that it provides a tool for ‘analysing what aspect might be absent in their development’. Nadine’s view suggests SEL gives teachers a tool to think more holistically about the child and whether particular SEL skills need more development through targeted behaviour and education plans.

Participants described the SEL Framework as embodying knowledge they already had (i.e. tacit knowledge) but that it provided a beneficial language to enable them to more consciously and explicitly reflect upon and discuss social and emotional learning. Maureen (School B), for instance, commented:

(It) didn’t tell me anything I didn’t already know. It kind of made me think about things that had been forgotten… for example empathy was lost to a degree due to busy lives – there is a need to bring it in to the classroom and take on board by sharing with the children. Everybody learns that everybody else is important in making the day run well. I need to be more explicit about teaching group skills. I need to focus on building self-confidence rather than self-esteem, with a goal for children to become independent learners.

The SEL Framework had supported Maureen to make connections between social and emotional learning and optimising participation in routine classroom learning.
The SEL Framework heightened Sophie’s (School A) awareness of important connections between different interventions she’d been involved with that build children’s mental well-being. In particular, Sophie recognised a recurring focus on empathy in the classroom and the ways in which social skills lessons ‘get the children on board’. Shelby (School A) also indicated how important the SEL Framework was in implementing a new program in School A:

(It) raised my awareness... SEL helped me provide a focus for children in *Mini Vinnies*. SEL provided the language to use when talking to children... The emphasis has shifted more to their personal development. Including a mental well-being focus in *Mini Vinnies* has enhanced the project – adding layers into the process and deepening the role of *Mini Vinnies* in the school.

Shelby, in experimenting with the language of SEL as part of her work with the children, began engaging differently with children.

Integrating theoretical interests, such as those embedded in the SEL Framework, thus scaffolded an approach to individualising student’s needs for teachers such as developing behaviour plans, noticing children and integrating social and emotional learning with other programs. Importantly, however, the Framework provided a ‘language’ with which teachers could individually reflect but also better communicate with their peers and with students about mental well-being issues.

### 5.4.3 Harnessing individual capacity

Leadership was an important influence on the possibilities for change. Trent, as Principal (School B), recognised he was in a position to model change. He altered his behaviour management strategies by viewing his work as a means to an end rather than an end in itself. He utilised the student management part of his leadership role to initiate an ongoing relationship with the students so as to gradually work through their problems rather than employing punitive measures or temporary solutions. His efforts with children who were repeatedly sent to him became more focused on ‘counselling’ the child so that he could ascertain information about what was happening for that child at home and at school. It was his intention that this process be adopted by all staff.

Intrinsic to Brianna’s (School C) leadership was a desire to change prevailing cultural mindsets that the ‘problem belongs with the child’. Looking back on the process of change, Brianna observed her evolving awareness of the need to move individual staff concerns into staff meeting and executive forums. Underpinning her actions was a greater consciousness of leadership strategies that could support the change. Brianna felt:

The personal diary was about writing down the success stories so as at staff meetings teachers could hear the good news story from the diary… There have been three focuses for this year – ICT, PEEL/Micro-skills and children’s mental well-being… Having these focuses has been a tool for discussion and change. Education is such a fluid profession. I wanted teachers to shift from nailing children (less authoritarian) to solution focused.

Brianna put in place strategies to respond positively every time a staff member came to her with their concerns. The *success* diary repositioned her questioning, enabling her to relate differently and seek out the small steps gained by staff. She was fully aware of her role in reinforcing and building
resilience but at the same time was conscious that teachers needed to express their anxiety. She considered that it wasn’t the Principal’s job to take on teacher issues personally but to listen and be a confidante. Hence a process began of acculturating the staff towards problem solving rather than simply ‘off-loading’. Her view was to promote:

...equity and tolerance through understanding different issues that relate to children. I recognise a significant change in children when they respond to greater tolerance…Everyone has the right to be treated well. Children need to feel that they are very much liked and if they are liked they become much more receptive.

This was a significant belief that underpinned Brianna’s actions in recommending to teachers that they be more reflective when responding to children.

Teachers harnessed individual capacity in their classroom when they accepted there was something erroneous in their teaching. Rose (School C) was, in fact, an agent for her own learning as self-questioning guided her impetus for change: ‘What am I doing wrong?’; and ‘What can I give him?’ Rose was very open about her need for personal growth and the importance of her role in building positive teacher-child relationships:

I was expecting too much and needed to break things right down. What do I want to achieve? I couldn’t understand and needed to break it down…The focus has been really positive, although perhaps I’m overdoing the positive talk because the praise has to be genuine in my approach. I had to learn to let go of the feeling of failure (and recognise) that the child’s needs were different and I needed to adjust. I have to prepare for when there is a casual teacher in the room. I need to re-address the situation in the classroom and look at what motivates the child to begin and complete his work.

Rose focused on her efficacy in relation to improving her pedagogy and the methods used to attend to children’s mental well-being. Her determination to reach her goals meant monitoring her emotional states and understanding that teacher adjustments were required to support children’s different needs. Her most consistent avenue for improving interaction in the classroom was to develop teacher communication through role play and modelling social behaviour and talk. Rose remained focused on the ‘child as a person’ with ‘emotional needs’ rather than a behaviour problem. Rose demonstrates how efficacy is achieved through perseverance and a self-belief in her ability to influence thinking in children.

The important element of change for some participants, then, was their self-efficacy in reflecting on and making adjustments to their teaching approaches. Sean (School A), for example, focused on empathy and noticed significant shifts in his thinking from understanding empathy as innate to something that could be explicitly taught and purposefully modelled. He reported that this impacted on his teaching through tone of voice and use of words along with the inclusion of a class mantra titled ‘respond, responsibility and respect’. Helga (School B) had also made a deliberate and planned change to the way she interacted with children. She recognised her own negativity towards children and became conscious of how this impacted on her personal well-being. She appreciated how important it was to gather information about children when there was a problem, and not make a quick judgment. Interestingly, Helga noticed how she needed to improve the ways she acknowledged
children, including through specific praise and conveying her appreciation of their efforts in different contexts.

The above discussion exemplifies how participants gained a range of insights through their pursuit of self-knowledge and that this was integral to the action research process. This self-knowledge impacted on their approach to pedagogy and perception of classroom dynamics. A key feature of the change process was an emerging realisation, for many of the teachers, of the critically important role of communication and relationships.

5.4.4 Acknowledging teacher/child relationships

An important element which supported teachers’ change was a renewed focus on the potential of teacher-child relationships. Many teachers had a strong desire to improve relationships and recognised that their own assumptions, values and attitudes regarding children were integral to this. In some cases, this meant examining taken-for-granted understandings about power and authority in order to more fully recognise children’s capabilities (to goal set, problem solve etc) as well as their needs. This also included capitalising on peer relationships and the ways these could be supported to assist children’s social and emotional learning.

One of the ways in which this shift around relationships was most evident was in approaches to difficulties with class dynamics and bullying. The catalyst for Charmaine (School B) related to peer difficulties amongst the boys. In group work, the girls felt inferior and boys dominated. The ‘football group’ used their peer strength to overcome the others in the class. Charmaine described taking control of this by, firstly, letting them know who was in charge and, secondly, communicating differently. Charmaine had to put her broader teaching plans on hold for a period until she facilitated the children working more effectively together:

I needed to change my style from a strong ‘big boss’ figure who was very controlling, which in fact was in conflict with my own personality. Take charge or I’ll lose them. I felt with this group it was sink and swim. I felt I was running the show and there wasn’t any teaching and learning. I’ve never had to deal with this level of bullying - worst case. I was just the disciplinarian and needed to change. The kids were at that stage where it was all they were responding to.

Repositioning power in teacher/child relationships in this classroom became pivotal in bringing about a positive learning environment. ‘Taking charge’, in this example, was initially interpreted as having a ‘top down’ approach but gradually ‘taking charge’ meant something completely different; namely, to acknowledge and engage with the relationship problems.

Teachers noticed that when social skills were contextualised through spontaneous discussion or problem solving, relationships were being acknowledged. Participation in the study had motivated Frances (School B) to take some direction in how social skills (previously discussed in 5.3.5) were being taught:

I needed to create time so I could focus on their problems… By making it a discussion group teachers don’t have to have all the answers. We talk about what happened and
how we as a class could help – children can help fix each other. I felt this strategy helped to develop the bonding as a class and to feel safe in the group. There are rules such as not telling names, no judgment, no laughing, no right or wrong answers.

Frances wanted children to think about accepting others and had noticed a peer group change in the way they listened to each other. Central to her classroom change was an emphasis on belonging and strengthening the children’s ability to solve problems and address their needs as part of the group. This, in turn, has implications for developing resilience and having ownership of these classroom issues.

The teachers’ perceptions about the importance of relationships in effecting change reveal something of a humanistic stance. Quality opportunities were unleashed for improved communication between teachers and children, as teachers observed more closely the nature of their interactions when disharmony prevailed. Teachers became much more conscious about how their teaching styles impacted on relationships and many were able to observe and report how improvements in the way they related to the children in their class resulted in positive outcomes, both for them and for their students. Whilst relationships were something that many teachers in the research felt they could influence, this was not the case in terms of some of the broader social and cultural issues impacting on their teaching.

5.4.5 Responding to societal and cultural challenges

A number of the teachers pointed to the ways in which broader social change impacted on the culture of the school and, in turn, on the change required of them. Changes in society, such as ‘working families’, understandings of empathy and morality and greater freedoms given to children (such as freedom in the use of technology), were seen by the teachers as posing challenges for schools. The teachers in this study discussed and reflected upon how social issues beyond the school impacted on the kind of leadership required of teachers and principals, school policy and priorities, organisational structures, family involvement and the use of external agencies.

Increasing community expectations about what schools can realistically do to address the ‘ills’ of society, and the impact of these on children, were paramount for a number of participants. Trent (School B) reflected on the continuing flow of children presenting with well-being issues. He recognised that whilst there were so many programs being put in place in his school, yet staff continued to be confronted with new and challenging situations:

…we’ve got a You Can Do It program, a Games Factory, all those IEP’s, all the stuff (therapies) that is done with other people and there’s still more. But every time you turn around, you know, kids being kids, they are all different. And you think you’ve got one cleared up and another one starts because mum and dad had a marriage split.

The changing landscape of family life was confronting for Trent as he considered the best way for his School B to approach the resulting challenges. Trent came to recognise that the answers may not rest in curriculum or programming, and that the school’s capacity to ‘fix’ what are essentially broader social problems, may be quite limited.
Adapting to changing enrolments meant adopting modified whole-of-school practices. Trent saw one of the most important shifts was to differentiate expectations in terms of uniform, choices and response to individual needs. He wanted teachers to notice children doing the right thing and acknowledge the difference between kids making mistakes and kids deliberately doing the wrong thing. In this way, Trent was pointing to the potential of tacit as well as explicit messages that can be conveyed to children by way of recognition and acknowledgement. In addition, he wanted teachers to remove the question of ‘who is responsible?’, and replace it with ‘what can they and the school do to help?’

I just think school is taking on a lot of parental things that we have to do it. There is no doubt about that because it’s not being done anywhere else and you know, its thirty-five, forty percent of kids in this school who come from dysfunctional family backgrounds… probably more. I know where there is domestic violence, I know where there are apprehended violence orders, and they (children) are not getting your average stable family background.

Many teachers felt their role had changed because some of the ‘problems’ find their way to school. Maureen (School B), for example, felt she had to respond because ‘there are the families, the ones we can’t do anything about’, that were repeatedly experiencing issues. Maureen considered that this is where her role had changed because she has to deal with issues children were bringing to school rather than ignoring these in the hope outside agencies might help in the future. Differentiating between what was achievable at school and what wasn’t became a way of solving the problem and supporting teacher understanding. Maureen’s message to parents was:

You solve your problems, don’t worry about your child, I’ll solve that at school… but so often they’ve got so many issues that they can’t work out, so you need to deal with, so you say well, we’ll sort out this side.

Alisha (School B) also added that the growing number of referrals to school counsellors required educational policies that distinguish actions that are helpful within the school and actions best suited to outside the school.

Broader social issues beyond the school were thus acknowledged by participants as having an ongoing impact on the direction taken to support children’s mental well-being within schools. These issues, in turn, made it difficult to develop or mandate a ‘one size fits all’ policy or program response. Such complexities become part of the challenge in bringing about professional growth for participants in this study.

5.5 In the absence of change

The objective of this action research was to understand teachers’ attitudes, values and beliefs regarding children’s mental well-being, to support teachers in both identifying areas for improvement and change within classrooms and school, and to take action to improve their practice. Whilst this chapter has, thus far, provided examples of the many ways in which change did occur, and what
facilitated this change, in this section I examine cases where change was *not* evident and the reasons why this may have been the case.

In School C, Brianna had wanted all staff to be involved in the research and, as such, she was emphasising and reinforcing the importance of the teacher’s role. She had taken on the responsibility to provide positive feedback to teachers so as to encourage them to see how their actions were supporting children’s well-being. Brianna found that her capacity to work effectively with her staff changed when she viewed her interactions with them differently. Instead of Brianna interpreting a teacher’s description of events as a personal criticism of her leadership and an inadequacy within the school, Brianna began to direct her leadership towards utilising each conversation as a constructive feedback opportunity. In doing so, Brianna refocused on the teachers’ well-being. Here Brianna describes how the study impacted on self knowledge of her leadership role:

> The focus for me was teacher mental well-being and through discussion I felt their (teachers) hearts were in the right place. It must impact positively – to think of classroom practice with emotional well-being being the focus... Well-being is a major issue when kids are acting out. If staff mental well-being isn’t great they need to vent their anxiety. It’s taught me not to take a personal approach. As a leader in a school you do have to have that – you are confronted by things. It enhanced my own resilience... I’ve worked hard to build and change difficult relationships by dealing with the blockers who don’t have empathy for children. When dealing with difficult situations I’ve been trying to think beyond what’s happening now. I’ve met with the staff about a future vision. You know sometimes you don’t want to talk to the difficult ones (teachers).

This process of building on adversity, as experienced by Brianna, was a common approach by the participants in this study.

An absence of change was particularly evident in the stories of two participants, both from School B, who evidenced limited change in their attitudes, values and beliefs and remained on the fringe of the research. Sandy could be described as a participant who was very focused on being a ‘good teacher’; something which she perceived manifested itself by placing all her energy into teaching strategies. Her perception of success in teaching equated to how well she had prepared learning activities and how well she spoke to the children. Sandy indicated that she had a limited desire to focus on children’s mental well-being because she believed that parents had the main responsibility in developing social skills. Her indecisive thinking expressed below reflects an absence of change, indicating that she remained close to her original belief that it was a teacher’s role to teach:

> I questioned my role in becoming more like the parents’ role, but I wasn’t necessarily resistant to that I was just saying that the parents’ role is different. I know that at home it doesn’t happen some times, and you have to take that on, but as far as taking on the role of being a parent… It’s just that our role is to teach (Sandy, School B).

During the individual interview Sandy acknowledged how difficult it was to implement a focus area that related to children’s mental well-being.
The following dialogue between Phillip and Nadine (School B) represents the absence of change in Phillip’s ideas about who should be instilling social values and working directly with children who have mental well-being difficulties:

Phillip: You know I tend to agree but I think that’s abdicating the role of the parents. I think the parents are the primary educators. We get them when they are five, you know we get them for five hours a day… Um, so kids who come from parents who instil fairness in their children - don’t have a problem. So I think as long as we have a part in it and I find we have a bigger part now in the dysfunctional families because we have to...

Phillip: I just have a real issue with me being responsible, they are not my children…

Nadine: …But they are, they are with you for six hours a day

Phillip: But they are not my biological children, I think, I really strongly believe that it’s a parents role…

Nadine: Don’t you think though, the child in your room that you perceive that’s not in a good way….

Phillip: …Oh definitely…

Nadine: …That you are not responsible for them…

Phillip: …Definitely, if they are not in a good way, but you know as I said, schools would be a great place if all children came with a sense of justice and a sense of forgiveness but they don’t, because they haven’t had that innate you know, that five years of development.

Both Sandy and Phillip spoke of barriers to their involvement in children’s mental well-being (as foreshadowed in Section 5.3.2) reflecting that parents are the ones responsible for improving well-being and therefore teachers should only get involved as a last resort. These examples imitate attitudes, values and beliefs about teachers having the capacity but not the desire, as discussed in Section 4.4. As such, this lack of desire creates a void between teachers’ and children’s mental well-being where getting involved would mean taking over the parental responsibility. Another interpretation of their resistance to embrace well-being in children relates to dismissing the social and emotional learning aspects as irrelevant to their teaching role. For this small number of teachers, their persistent attitudes resulted in mental well-being remaining in the ‘too hard basket’, and they generally avoided embracing opportunities for professional growth through the project.

5.6 Chapter summary

This chapter has reported on how involvement in the action research project influenced participants’ classroom practice in relation to children’s mental well-being. It has described a range of personal initiatives which were implemented, and the perceived impact of these on teachers and children. From supporting children to self-manage and understand emotional responses, to teacher’s consciousness of their own mental well-being, participants considered children’s mental well-being from various positions and roles within a school setting.
This chapter has also identified some key processes which supported teachers to make changes to their practices, primarily as a result of the ways in which their values, attitudes and beliefs about children’s mental well-being had been influenced and re-examined. These processes included problematising their experiences, thus providing many participants with an opportunity to clarify what needed to change and to act as a catalyst for action. Integrating the SEL framework as part of this learning process was important, since it provided a tool for identifying the issues related to children’s mental well-being and raising awareness of the skills that might be required to address it. Other processes included harnessing their individual motivation and capacity as a facilitator of well-being and/or reflecting on pedagogy as new programs and systemic teaching/learning imperatives simultaneously occurred throughout the research period.

Many participants were critically reflecting on teacher/child relationships and the nature of child/peer relationships as a means to improving communication and harmony within the classroom. Unique to each school were challenges brought about by broader societal changes that, in turn, had a direct impact on the mental well-being emphasis adopted by the school. Whilst most participants experienced change and growth, a small number was impeded by persistent attitudes, values and beliefs that limited their ability or capacity to act.

The following chapter departs from the activities and outcomes of individual teachers to focus more holistically on the action learning process itself, including the value of the process and the role of the researcher in facilitating change. The researcher is repositioned as a theatre director, critiquing the method and exploring qualities of participation, dissonance, motivation, timing and enduring reactions to actors and performances.
Chapter 6: The Stage Director reflects

This chapter explores the third research question which investigates the change processes that occur when teachers seek improvement in their practice in relation to children’s mental well-being. Underpinning this inquiry are the practical issues that arose in implementing the action research and the resulting impact on the effectiveness of teacher learning and whole school change. These practical issues, which at times became obstacles, represent important considerations for others who may seek to facilitate teacher professional learning in the field of children’s mental well-being, particularly through a whole school participatory approach.

Discussion begins with the strengths and limitations of the three approaches to action research in facilitating teacher participation in Schools A, B, and C. This varied experience of the action research process is important in analysing and understanding change at the organisational level. I then reflect critically on my own actions and role within the study, as well as the changing roles of stakeholders. Teachers’ motivation and readiness to participate in the research is closely examined, identifying the importance of relevant process and stimulus activities when introducing the issue of children’s well-being to teachers. Other pragmatic issues impacting on the potential of the research process to generate change include the importance of time available in schools to engage in dialogue and the sustainability of the research methods and actions in supporting continual educational change.

Overall, this chapter highlights the nuanced experience of action research and provides a further response to the third research question, which relates to the outcomes of change processes in primary school settings.

6.1 Strengths and limitations of varying group participation models

Each of the schools varied in its approach to the action research (as previously discussed in 3.5), providing useful process data and enabling a comparison of the strengths and limitations of the three group participation models. The uniqueness of each school context - their diverse backgrounds, the personalities and leadership styles at play - influenced decisions as to which model they implemented and also, inevitably, influenced the outcomes for each school resulting from the research, particularly in relation to changes in whole-of-school assumptions and beliefs. To reiterate, School A had four participants from a staff of approximately 20, School B included all 15 staff and School C’s Principal wanted all staff to be involved but half (5) remained passive, participating in whole-school discussions but choosing not to be involved in implementing an individual focus area study. These three different approaches to implementation highlighted the complexity of change observed within and between different schools and provided an opportunity to develop a better understanding of the nuanced change processes at the organisational level. In this section, I examine how each school engaged in the process of professional learning and development through the action research. The relationships developed and communication styles employed by myself and the participants will be a particular focus.
6.1.1 Priority/motivation

At one level, whole staff involvement indicated that mental well-being was perceived as a priority for the school. For example, in School B the whole-school approach enabled all staff to convene around some ‘big issues’ which were perceived to be impacting on the entire school and hence there were priorities for all staff to address. Similarly, in School C the Principal had prioritised children’s mental well-being and involved all staff in initial meetings and completion and discussion of the questionnaire, even though not everyone followed through to direct action as part of the project. The Principal perceived the research process as a means of encouraging conversation among all staff regarding children’s mental well-being in classrooms and raising the confidence of teachers to deal more effectively with violent students. The research process was associated with an opportunity to develop whole-school acknowledgement and empathetic understanding of mental well-being issues:

We’d like to feel extremely confident about it but when the situation arises that’s not always the way. I see managing violent students is probably a really hard one because they are all confronting. Managing all of those things is very confronting, I think, for all of us. And there is no such thing as an expert because every child is different. And every situation is different. So you really have to think quickly and be on your feet and try to do the best you can I guess, but it’s certainly not easy and I see that. You know, it’s quite a challenge for teachers these days, and also to keep it in perspective in your own life. So it’s a debriefing process as well (Brianna, School C).

In both School B and School C the Principal recognised that whole school participation would increase the possibilities and opportunities for alignment between children’s mental well-being, discipline and management of children with behaviour difficulties. This was revealed during the consultative phase (as discussed in Chapter 3), when executive members pointed out that their strategic goals for the school included both a focus on behaviour policy and improvement in mental well-being.

It was not, however, always the case that whole staff involvement represented a unified commitment across the school. As explained in Chapter 4, some teachers in School B differed in their beliefs and attitudes about their role, claiming that children’s mental well-being was not their responsibility. While they had agreed to participate in the study, they initially evidenced resistance to deeper engagement and focused personal change. Similarly, in School C, while the Principal had driven the whole-of-school priority, the decision of some teachers not to be directly involved in implementing action, signals this priority was not necessarily shared. The two different approaches to engaging whole school staff thus provided an opportunity to better understand the motivations and actions of teachers who were fully committed and considered mental well-being as a priority, alongside those who may have been implicated in a whole-of-school approach, without necessarily viewing this as a priority at a personal level.

The ‘big issues’ that were the focus at School B included the impact on the school of socio-cultural issues within the local community. Having the whole staff involved meant that this concern could be understood and worked on collectively. It appeared to be motivating for staff to be able to reflect on these issues with their colleagues and to talk openly about the social and familial issues they faced. Problems such as a transient population and the perceived lack of parental support for school-based
Chapter 6 – The Stage Director reflects

initiatives to help children’s well-being seemed at first to be insurmountable for teachers in School B (as discussed in 5.4.5). Having whole staff involvement reinforced the potential of team approaches and collegial support for problem solving around the changing socio-cultural dynamics of their school. This informed the development of individual focus areas across the whole school and provided momentum for teachers’ thinking that related to children’s mental well-being. It also exposed staff to the views of other teachers and enabled sharing of methods and practices.

Compared to School B, School A’s participation in the research was far more ad hoc, with greater emphasis on individual concerns that were initially unrelated to whole school developments. The fact that only four teachers in School A volunteered, from a staff of twenty, indicated that not all staff viewed children’s mental well-being as a priority. While Candy (the Assistant Principal), along with the new Principal, wanted whole-of-school engagement, the resulting small number of teachers involved signalled considerable unevenness in the priority given to children’s mental well-being. However, the small group approach provided an opportunity for Candy to consult with a number of colleagues in relation to various strategies, before taking action that would ultimately have an impact on whole-school classroom practice.

Thus, while the whole-of-school approaches had benefits in terms of both signifying and building motivation and a sense of priority around the issue of children’s mental well-being, small group approaches denoted a deeper commitment and motivation (indicated through the School A participants’ willingness to meet outside of school hours). The small group approach also did not exclude the possibility of influencing practices in relation to mental well-being across the broader school community.

6.1.2 Facilitation

It was much more difficult, as an external facilitator, to monitor and manage the action research across a whole-of-school context. The difficulty in working with a larger group related to communicating effectively with participants and ensuring opportunities to hear the voice of all teachers when some strong personalities were more dominant during discussion. Individual personalities had a particularly significant impact on the group dynamic at School B, where relationships within the large group hindered the reflexive process. This was exemplified by the discomfort of some in exposing their personal concerns and dissatisfaction (particularly evident during later focus group discussions). Facilitating the continuity of individual teacher voice from one meeting to the next was a complex undertaking given the dynamics of the large group and the opportunities available within this. Combining opportunities to facilitate whole staff discussions with individual teacher conversations proved to be an important part of the action research process.

The larger group size did not, however, appear to prevent teachers from challenging each others’ values, attitudes and beliefs. In the following example, the banter between two teachers in School B reflects different perspectives on childhood and on relationships:

Kelly: I have a really good relationship with him

Nadine: Bull…
Kelly: No, I do, I only...

Nadine: Listen to you...

Kelly: No I actually have a really good relationship with him, but I hold it in because I know I’m not really accepting… I do because I’m fussy.

Nadine: But Kelly I think it’s this attitude of us and them, like with him in particular it baffles me because he doesn’t appear negative.

Kelly: Of course he is negative.

Nadine: He knows how to push your buttons.

Kelly: That’s the thing, that’s the difference isn’t it.

As a facilitator, such discussion provided me with an opportunity to prompt teachers to explore differences in their perspectives and, through shared negotiation, to assist them to refine their focus for further research.

Having a small group focusing so intently on children’s mental-well-being, as was the case at School A, led to a growing recognition and amplification of the differences in values, attitudes and beliefs between those involved in the group, and those other staff in the school who were not involved. The small group members increasingly became critical of broader school practices and viewed them as being at odds with their refined perspectives on mental well-being. When these concerns were discussed, participants in School A initially didn’t perceive there was a role for them in influencing or taking their learning back to the whole staff. They felt they could influence the people they worked most closely with, but didn’t feel they could have an impact on the whole school. This became evident when I invited participants in School A to consider sharing their learning:

Is your choice of focus area consistent or relevant with the rest of the school? Has there been any opportunity for you to discuss what you are doing with the rest of the staff at staff meeting perhaps?

To which Candy replied:

At stage meetings we discuss children and I have many conversations with my teaching partner. The school psychologist will talk to the staff about particular children and try to help staff understand where children are in terms of behaviour and progress made.

This sensed tension in practices and perspectives, and our subsequent discussion of the issue, was (in part) what prompted Candy to make changes to the approach taken by the Well-being Committee (as discussed in Chapter 5). In this way, the small group process did eventually provide ideas and practice for the whole school to consider. A successful strategy in my facilitation of the small group was to demonstrate how the learning of each participant related to the Comprehensive Mental Well-being Promotion in Schools Model. This was advantageous in identifying a common understanding of where their approaches were positioned and gave strength to the future approaches taken by the modified Well-being Committee.
As a facilitator, I struggled to find ways to continue to encourage all teachers at School C to be more active, although I recognised the value of different forms of participation in the project, even where these were passive. In accepting this model of participation, I was acknowledging choice in the research process as a significant factor in understanding change in relation to support for children’s mental well-being. I became conscious of ensuring that passive participants had opportunities to share their concerns and was explicit in encouraging teachers to become more actively involved. When some teachers spoke openly of displacement between their self-worth and their teaching role, I explicitly addressed these feelings, hoping to trigger a deeper immersion in action learning. It is conceivable they did not see themselves as capable of contributing to improvement, or unilaterally saw responsibility for change belonging to the school’s executive. Regardless of their reasoning, I recognised the Principal’s role in ‘leading by example’, where she was inspiring participation but simultaneously empathising with staff to encourage gradual change.

The limited time available within workshops was a significant factor impacting on the capacity of participants to reach a deeper level of engagement as co-researchers. Recognising this as a very real issue in School B, attempts were made (in Meeting Two) to create more time for listening and reflection by providing a succinct PowerPoint summary of feedback from Meeting One. However, this was not without implications. By using the PowerPoint summary, I inadvertently gave participants the impression that this was ‘research on’ rather than ‘research with’, leading some teachers to become passive and to view the feedback data as belonging to me and my research rather than as a stimulus for further collaborative dialogue. I wanted the whole staff to break into two groups to facilitate more opportunity to share individual concerns and discuss focus areas, but they rejected this indicating they felt comfortable sharing their experiences in the larger group. As another strategy, I decided to draw out individual participants by explicitly engaging each teacher in talking about their focus area. This strategy attempted to make the best use of available time and elicited more direct information about each individual’s approach.

In contrast, the small group context enabled me to be more aware of the impact of the process on individuals as there was a closer level of interpersonal interaction. I was able to observe more closely the capacity for change in each participant and the impact of their attitudes, values and beliefs towards children’s mental well-being. This is not to imply that significant individual change was not occurring in the larger group; it was simply that I was less aware of it.

As an external facilitator, I was unable to be in schools on a regular basis. The formation of small group professional learning teams provided a means of maintaining ongoing discussion and reflection when I was not present. This occurred not only in School A but also in School B, where small groups formed to collegially explore particular aspects of children’s mental well-being. Jane, Alisha and Jim, for instance, eventually focused on reviewing practices in relation to parents, as they saw a need to collaboratively make changes to communication and content of reporting. As teachers working in the infants program, they took advantage of the high levels of involvement by parents of young children. Max, Charmaine, Kelly and Helga stimulated each other’s learning when they reviewed their style of communication and implemented changes to the way they engaged with upper primary children. All
had similar years of experience in teaching and together had reached comparable positions of understanding about their role as facilitators in supporting children’s well-being. Maureen, Jessica, Sandy, and Frances made discoveries when they focused on developing self awareness in children in order to improve relationships within the classroom. The learning support teacher, Nadine, was also able to work across the school to promote a tolerance and understanding of how to work co-operatively with children’s strengths rather than deficits.

6.1.3 Depth of reflection

Continual in-depth reflection was more evident in School A and School C. The processes in these schools were characterised by a more informal atmosphere and smaller numbers aided in deepening familiarity among the participants in relation to each other’s classroom issues. Teachers were more willing to open up in the small group context and expose their reflections on strengths and weaknesses in their professional practice. This was evidenced in School A where some participants kept a journal and engaged in email exchanges. The small group context also allowed more opportunities for teachers to support and encourage each other, and I observed more reflexive comments were offered by teachers to other participants in the group about intervention strategies or prior knowledge of children.

Framing and clarifying each teacher’s individual focus area for improvement, within the context of a small group, was a relatively easy task. Teachers in the small group engaged more analytically, having more time to reflect at a deeper level on their personal goals and aspirations. They did this by detailing their capacity to observe changes to personal behaviour and responses to children’s mental well-being. Candy, for instance believed she would continue to:

…reflect on how I have changed myself and how I need time to reflect and think out of the square. Look at individual students who don’t ‘fit the mould’ and think about how I can come to understand how they learn in my classroom. I have been led to this understanding through my experiences with David this year.

Shelby reflected that her goal was to, ‘Know what was not working and change it!!!’ and Sophie, who said she would become more fluid in her teaching, thought she “could be more aware of which particular children respond to different types of praise and include these in my delivery”. Sean recognised his changing perspective on the work he does with children and emphasised the need for the following personal changes:

Thinking outside the square (looking at problems, concerns etc from a different point of view); use time better – don’t be so curriculum driven and pass info to the next teacher on what works for individual children.

These examples demonstrate how the small group context enabled participants to engage at a deeper level and identify goals linked to more significant personal change.

Where there were other relevant or related programs occurring in the school, a whole-of-school approach enabled connections to be drawn between these programs and the agenda of children’s mental well-being. Schools B and C were able to identify that there were a number of pedagogical
innovations being implemented which enabled teachers to relate and apply their increasing understandings of children’s mental well-being to the content of particular programs and activities. Both schools had developed a common pedagogical language through PEEL (as described in Section 2.3.2) and through this they were better able to discuss opportunities for changing teacher pedagogy to support social and emotional skill acquisition. Strategies learned in one context (e.g. PEEL) were translated to the context of children learning social skills through group activities and self monitoring tasks.

6.1.4 Leadership

In a whole-of-school approach, leadership is critical. For example, in School B, Trent’s strong leadership and his own eagerness to challenge organisational norms and practices had undoubtedly influenced teachers’ involvement. However, it became evident that this principal may have overestimated the commitment and motivation of some staff and, whilst all had agreed to participate in the project without coercion, there were some who struggled to engage in the project at a more personal level. Again, leadership was critical since, when some teachers were hesitant in committing to a focus for personal action, the Principal reinforced the importance of the whole staff working together. By Cycle 2, most participants were more committed to their role as active co-researchers rather than passive learners.

Direct participation of the school principal was a significant advantage, as evidenced in Schools B and C. Their involvement encouraged all staff to continue to discuss the issue of children’s mental well-being across multiple school forums. In contrast, staff in School C may have perceived involvement in the research as being associated with leadership, since five of the active participants were on the school executive (as discussed in 5.3.1). Having only the executive team fully engaged in the process may appear divisive, but in fact enabled the participants to develop a cohesive vision for the school in terms of well-being. Persistence by the Principal at School C led to the development of a ‘PEEL coffee group’, which included a focus on teacher behaviours in the classroom (Micro-skills) bringing on board passive participants to reflect on their involvement in better understanding student-teacher relationships.

In School A, by way of contrast, having a member of the school executive involved in the project enabled them to drive change at a school-wide level and also provide emotional support and encouragement to teachers who were experiencing challenges or who were implementing change in their practice. Initiatives such as providing release time for teachers experiencing anxiety about children with mental well-being problems, and changing acceptable classroom practices based on the view that individual students who ‘don’t fit the mould’ need to be understood, were examples of Candy’s leadership in emphasising new approaches. For both Sophie and Sean their beginnings were quite ‘fuzzy’, each benefiting greatly from Candy’s leadership in talking them through the issues at hand and complimenting them on their successes with children as they progressed.

In summary, my experience with the three different participatory models implemented across the three unique contexts provided insights into the strengths and weaknesses of these participatory models for
Chapter 6 – The Stage Director reflects

professional learning in schools. While each model provided challenges for me in facilitating the research, none emerged as a preferred model for professional learning and change. Analysing the research process within each school underlined the importance of understanding the values, attitudes and beliefs of participants, together with their roles and the interpersonal dynamics among staff, all of which could influence change processes. I gained insights into the value of ad hoc approaches (as in School A) but also recognised the importance of having the Principal involved in the research as an onsite director of events and actions.

As an external facilitator, previously unknown to most participants, developing a working relationship required considerable effort in order to gain a fuller and deeper understanding of how best to facilitate participation through the learning process. I recognised how tension in relation to involvement could be viewed as a positive element and it was important for me to maintain a critical perspective of the evolving process. Communicating effectively was a significant aspect of my role in the research and this necessitated more rehearsal and attention to discussion strategies. These issues will be discussed further in the following section, which analyses the role of stakeholder expectations and their conceptions of participatory research.

6.2 Dissonance in stakeholder expectations and conceptions of roles

A significant issue that emerged in the research process was a dissonance between the facilitator’s and participants’ expectations and concepts of practitioner and researcher roles. I now focus on these tensions and what was undertaken to alleviate them.

Difficulties were encountered along the way in engaging participants on an equal and collaborative footing. As a facilitator, I anticipated participants would see their roles as co-researchers and be willing and open to learn alongside me through active experimentation within their teaching practice. However, many of the participants expected that I, as facilitator, would deliver strategies and solutions to ‘solve’ their problems, or to deliver training or provide them with new knowledge. This was exemplified in the following response made during the goal setting activity, where Alex (School C) wanted:

...simple, practical, easy strategies to assist children’s well-being. Try some strategies that could help one or two children in particular. I want strategies to keep them learning with everybody else.

In actively engaging in critical self-reflection about my own predispositions and views, my journal revealed an internal tension about how my role, and that of the participants, was perceived within the research. In Cycle 1 I reflected:

Teachers have a concern for the topic of children’s mental well-being but many are focusing on the child and their problems. I’m not sure whether they see themselves as being the focus in terms of their own classroom practices and how they might support the well-being issue.

I questioned whether teachers were becoming co-researchers and were willing to focus on changes in their own practices. I was expecting teachers to engage in personal action and was focusing
discussion on what they believed they could change and what they could identify about what they were feeling.

My anxiety about my role in facilitating the research, particularly in the early stages, led me to feel I needed to convey my knowledge of the topic which inadvertently increased my control over the research process, as my journal reflections from the time reveal:

My learning from both of these meetings (in School A and School B) has shown that I need to be confident with facts around mental well-being issues. My knowledge needs enhancing and I need more efficient organisation for recall.

However, I increasingly became aware that this stance was clouding and confusing participants’ understanding of what was expected of them. The tensions in perceived roles were particularly pronounced at School B in Meeting Two where, as previously discussed, my attempt to form teachers into small groups to discuss their focus areas led to resistance, and teachers voiced that they preferred to remain as one group with me facilitating, rather than breaking into small, more self-directed groups. My growing sense of this tension is evident in my journal entry a week later:

I am still trying too hard to please and am perhaps too zealous in my approach. Greater confidence in the knowledge I have in this area is directly proportional to my fluency and readiness to respond to questions.

Further diary accounts show how I increasingly became more interested in opening up dialogue rather than responding directly to questions and concerned myself more with the process than the content:

In responding to teachers responses or comments try to use a second person type response such as: ‘Your school may want to explore that further’ or ‘Is that something your school might like to investigate?’

A major learning for me as facilitator of the action research was that my actions and communications with participants needed to reflect greater confidence in the process. Previous professional roles in schools had given me more consultative experience rather than research or inquiry-oriented experience and, whilst I was familiar with adult learning approaches, I recognised I needed to focus on facilitating more open ended imaginative dialogue so as to elicit greater personal insight and experience. I needed to recognise that, whilst answers were being sought from me, I did not need to feel I had to have the answers but that I could and should redirect the question back to the group or individual. While I had been predominantly focused on content in relation to children’s mental well-being, I recognised that my focus needed to turn instead to more effective facilitation of the process. This new stance was more consistent with collaborative processes and a renewed focus on participant knowledge.

In one respect, I viewed my position as an insider – as a fellow teacher who was working alongside her colleagues, doing what the other participants were doing – learning about mental well-being. I had to come to terms with another reality, however, namely that I was an outsider coming from a university setting and wanting and expecting something from the research participants. In reflecting later on such conflict in role expectations, I found it valuable to refer to the concept of ‘positionality’ (Herr & Anderson, 2005) which places the researcher and the participants into four different quadrants,
depending on how their actions are perceived by themselves and by others. First proposed by Luft (1963, cited in Herr & Anderson, 2005), this model acknowledges that the four quadrants are not always discrete (for example, actions and perception can overlap).

Table 4 The four quadrants of knowledge

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<td>III</td>
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This model helped to explain some of the tensions that arose in role expectations during the action research process. I was perceived as a facilitator entering a collaborative action research study with expectations predominantly centred in the third quadrant. Participants had positioned me as an outside expert rather than collaborative researcher and they believed I already had the desired knowledge and intended to prove my theories. Such a view reinforces a tendency by insiders to place themselves in quadrant II, undervaluing their own professional knowledge.

The goal of collaborative research is to reduce the tendencies toward quadrant II and III and to expand quadrant I from a quadrant IV position. I was approaching the study with the mindset of the fourth quadrant, yet participants (particularly in School B and C) had framed themselves as belonging in the second quadrant. Positionality was addressed by principals in Schools B and C in redirecting staff to clarify focus areas, although such actions did not necessarily alleviate the position of participants stuck in quadrant two. Many teachers positioned me as an outside expert rather than collaborative researcher. As the research process went on, participants began to move from their initial quadrant II perspectives to quadrant III offering knowledge and insight to colleagues. The banter between Nadine and Kelly, as described in Section 6.1, for example, illustrates this position well.

While I did need to recognise the limitations of an emphasis on content and on presenting my own knowledge, it is important to also recognise that in some instances this was valuable and important in informing teachers’ choice of focus area. For example, after discussing aspects of anxiety at School B, Alisha engaged with professional reading on anxiety and then initiated informal discussion with other staff members.

In facilitating a project such as this, it is critically important to recognise the potential for dissonance in role expectations between researcher/facilitator and participants. Such awareness can help ensure adjustments to process are made more expediently, and that early communication takes place to help circumvent frustrations or misunderstandings in relation to role expectations. While the concept of ‘positionality’ and Herr and Anderson’s (2005) model was not discussed with participants in this study, I believe it would be a useful inclusion when introducing teachers to any similar research process or
Chapter 6 – The Stage Director reflects

participatory model of professional learning. To do so would assist teachers in understanding the role they play in the development of knowledge.

Recognising dissonance can also be understood through the Habermas framework of communicative action (Habermas, 1991b) which has the potential to help researcher and teachers move expeditiously towards partnership and collaborative processes (Deaver, 2005). Communicative Action Theory recognises the importance of reaching mutual understanding through:

- The personality component which concentrates on forming identity, revisiting prior knowledge and building new knowledge based on appropriateness and relevancy to co-researcher situations.
- The society component which represents the sharing and validating of renewed knowledge; the coordination of steps taken to share and validate individual knowledge and the internalising of values by co-researchers.
- The culture component which includes the distribution, critique and acquisition of cultural knowledge of a school setting, filtering out those value orientations which are not useful for mutual understanding and reviewing those values that effect socialisation.

In eventually reaching a collaborative outcome within the study these component parts are reflected in overcoming the researcher’s difficulties in engaging participants and role expectations and therefore positions the researchers and co-researchers personality, society and culture as important factors in becoming a professional partnership.

The dissonance which has been discussed in this section also signals the need to reflect more critically on the personality issue of teacher readiness to participate in a study of this kind. This issue is addressed in the following section.

6.3 Varying stages of teacher motivation and readiness

Participatory action research methods are ideally characterised by a sense of ownership by the participants, leading to motivation and a readiness to be involved. Intrinsic patterns of behaviour are more likely to be associated with deeper levels of learning and, particularly, with changes in participants’ values, attitudes and beliefs. In this section, I consider the importance of recognising how and where teachers might be on a continuum of willingness and motivation for change and how this impacts on the professional learning process.

My reflections on participants’ varying degrees of readiness drew me to see the relevance of the Integrative Framework of Intentional Behavioural Change (Cole, Harris, & Field, 2004). This Framework, developed by Prochaska (1979, cited in Cole, et al., 2004), describes five stages of behaviour change: precontemplation, contemplation, preparation, action and maintenance. Each of these is characterised by different motivations, which indicate a process of readiness for change. Being sensitive to where participants are at in terms of readiness is important, such that the facilitator of action research can identify and address their issues, concerns and motivations. Having participants
Chapter 6 – The Stage Director reflects

acknowledge and identify with their levels of motivation assisted me in facilitating individual progress throughout the stages of the research.

Agreeing to participate in the study exemplified most participants’ motivation and readiness, although this was initially dependent on the Principal or the executive’s level of willingness for their school to be involved. In each school, principals were aware of a need to change (as outlined in Section 3.2) and were actively deciding if they were able, or motivated, to participate in a process of continual development and improvement in practice.

The process of providing teachers with a questionnaire in the early stages of the research proved valuable, in most instances, in building motivation and readiness. The questionnaire enabled the introduction of some of the ideas and theories, prompting teachers to begin to relate these to their practice. For many teachers this moved them fairly efficiently from precontemplation to contemplation. As Alisha (School B) commented, the process allowed teachers to ‘ease into’ the project. Similarly, the questions that were posed to prompt teachers to explore their beliefs about children’s well-being were very useful in engaging teachers, but perhaps were phrased too narrowly. For example, ‘What do I want to change in my teaching practice in order to better support children’s mental well-being and include social and emotional learning?’, implied that something needed to change, which did not give scope for teachers who had already instigated change.

In some cases, individual projects had begun positioning participants such as Rose, Charmaine and Candy, in a different stage of motivation. Charmaine provides an example of a teacher who was ‘ready’ for change as she was beyond contemplation and had moved to making preparations. At the planning point of Cycle 1, I responded to Charmaine with the following:

So you have already begun to make changes. You have already given a lot of thought to problem solving the dynamics in this class. From what you have said the relationships in this class have not worked and you have been forced to change your style of teaching… making you feel very uncomfortable. Your actions in overcoming the negative relationships have put you well and truly into the action and observing phase. Perhaps your starting point is to reflect on those changes and consider the next step so as the teaching style you are looking for matches your beliefs about learning in classrooms.

Charmaine’s motivation for change was thus embedded in a previously established critical perspective on her teaching and hence Charmaine was motivated further by her actions so far, to create more opportunities to develop her teaching style to ensure it remained sensitive to children’s mental well-being.

In contrast, Phillip and Sandy (School B) remained in the precontemplation stage for much of Cycle 1. Phillip was honest in his opinion that ‘he was not ready to jump’ and there was ‘too much on his plate’, and was explicit about not taking on anything extra. Phillip had placed barriers to becoming involved, choosing instead to remain on the fringe of the project. His attitude towards who is responsible for children’s mental well-being (as discussed in Section 5.5) reinforced the difficulty he had in becoming motivated to join the whole-of-school change. In general, teachers who struggled with conceiving of
the role of the teacher in supporting children’s mental well-being also struggled in reaching a point of ‘readiness’ to embrace personal action and change.

At a school level, School B’s readiness was indicated by school planning processes which had already made children’s mental well-being a strategic goal for that year and therefore participation in the research was part of the executive’s preparation stage. In contrast, motivation and readiness to become co-researchers required facilitation of a further cycle of action in the research. After a phone call to the school following Meeting Two, I discovered that the Principal was also concerned and ‘disappointed in some staff’ regarding involvement. Teachers were motivated to join the other staff members in delivery of training or information, but were not as motivated to become co-researchers. Clarity around expectations helped enhance readiness when the Principal reinforced the strategic goal for that year would be achieved through this research. I reinforced the professional learning process via email, clarifying the process of identifying a focus using a ‘lens’ metaphor to direct thinking around aspects of social and emotional learning. I wrote:

Imagine you have been given a new pair of glasses and you need to wear these whenever you’re in your classroom or working with children. Through these glasses you become more aware of children’s self-awareness, how they are motivated, their understanding of empathy and their social skills in relating to other children and adults. These glasses have a special lens which allows you to view your classroom practices and environment with an emphasis on social and emotional learning.

This metaphor aided in clarifying perceptions of their role in the research and intended to support the planning phase of the research where participants were contemplating change. This was a gentle approach to visualising and stimulating their actions as a researcher. In hindsight, some further introductory processes to increase motivation and promote readiness may have been valuable.

The fifth and final stage, maintenance, is taken up in Section 6.5 in relation to sustainability of the process. Before considering this, however, we will address another issue related to motivation which is the amount of time given to reflect personally on classroom practice and embark on making changes.

6.4 Time to be co-researchers

The busy and demanding nature of primary schools presents limited time for teachers to engage in additional professional development activities. Conducting action research, however, requires time for reflective practice, sharing of focus areas and experiences, and for meeting and talking with the facilitator. Teacher availability was a significant difficulty in conducting the research.

Meetings in this study occurred after school when teachers were free from classroom duties. My anticipated timeframe (see, for example, Appendix E) included meeting with teachers five times during the twelve month period. However, busy school calendars and teacher absence prevented some meetings from occurring. Without quality, interruption-free time in meetings, and full attendance by participants, my engagement with schools was somewhat compromised, particularly at School C. Contact time was recouped through school visits where meeting times were arranged to discuss
progress with individual participants. Several attempts were made to arrange after school informal
discussion over coffee, however this only occurred in School A. At the end of Cycle 1, I negotiated
funding to assist in the release of teachers for interview. Without this release time the feasibility of
interviews would have been severely impacted. As it was, the available time did limit the nature and
length of the interview with each teacher.

Participants were reluctant to journal and keep diaries of their experiences. Phillip, Sean and Alisha
explicitly indicated that they were too busy to journal and that there were few windows for extra activity
in their day. Journaling was also raised as a concern by each principal of School B and School C, who
I sensed were responding to teacher concerns. The questions that I posed for teachers to reflect on
between meetings were perceived as requiring journaling, even though the scaffold was described as
a way of prompting them to reflect on their ideas and processes of change. That said, a small number
of participants, for example, Candy and Rose did actively record challenges, successes and personal
insight in their journals.

Engaging in the process of reflection communicates a strong self-efficacy for making the internal and
external changes to practices that better support children’s mental well-being. To encourage
participant reflections and promote self-efficacy within participants, I realised that the most effective
way was to discuss the project face-to-face with individual participants.

In this section I have described a number of themes and issues related to the process of conducting
this action research. These findings may prove useful in supporting other schools wishing to
implement a similar project. Varying group participation, dissonance in roles of stakeholders,
positionality of knowledge, varying stages of motivation and readiness and time constraints are all key
elements that should be considered when embarking on action research and, in particular, action
research in the field of children’s mental well-being.

6.5 The issue of sustainability

At this point, it is valuable to consider the issue of sustainability of the process developed and
implemented through this action research in order to support children’s mental well-being. Sustainability is discussed here in terms of commitment of teachers to maintain innovations, together
with their willingness to continue to reflect on, and improve, over time their practice in relation to
children’s mental well-being over time. It also refers to the viability of maintaining and sustaining an
action learning process in a school. The data in this section is drawn predominantly from the later
stages of Cycle 2. Four themes emerged, namely: leadership, integrating pedagogy, changes to
conceptions of children’s mental well-being and patterns of communication. Each will be discussed in
the following sections.

6.5.1 Leadership in working with staff

A significant factor in supporting improvement was the actions of the school leaders and teachers in
extending leadership to other staff. Any sustainable approach to improving children’s mental well-
being needs to be supported with resources and commitment. For example, accessing teacher support systems, such as advice from educational consultants, advisers or mental health professionals, relies on the support of school executive to take initiative and, where necessary, resource teacher learning, including the provision of adequate release time. Brianna (School C), I believe, demonstrated the type of leadership which was necessary to sustain teacher learning when she articulated her desire to build a culture of tolerance then went about creating opportunities for ongoing professional discussion. Where principals are committed to initiatives they are more likely to continue to identify matters related to well-being (of teachers and children) and prompt teachers to reflect on their practice. Teachers (for example Nadine, School B and Sophie, School A) also had leadership roles in working with other teachers to develop strategies and promote consistent strength–based approaches to social and emotional learning. Such whole-of-school understanding in relation to promoting leadership in all staff members is more likely to lead to sustainability, since it recognises the possibility for teachers in working with other teachers within difficult aspects of children’s mental well-being.

### 6.5.2 Integrating pedagogical approaches with a focus on teacher behaviour

If teachers adopt pedagogical practices that are focused on mental well-being, then these are likely to be sustainable beyond the context of the project. I believe sustainability involves recognising that pedagogy is inextricably linked with promoting mental well-being, and that this recognition can help ensure teachers embody a well-being perspective in their day-to-day teaching practice. When teachers in School B recognised that both teaching practices and programs used to teach social and emotional skills could be adjusted and integrated to support children’s problem solving on a daily basis their actions reflected a more sustainable and lasting approach.

There were elements of sustainability in Helga’s (School B) response to children’s social and emotional needs when she conveyed how she believed that moving away from her authoritarian style of teaching would allow her time to listen, share and act upon SEL issues. For ongoing change to occur teachers need to be persistent with strategies that focus on children’s needs. Nadine’s (School B) acceptance of difference in children’s emotional well-being and less rigidity in approaches to children with additional needs signalled the possibility of a more sustained and inclusive understanding in the way schools support well-being. Similarly, Rose (School C) came to recognise that sustaining positive relationships meant changing the tone of the classroom through more talk about feelings and how these affect others. Once teachers experience the success of such approaches with students, they are more likely to embrace them as a regular and ongoing part of their teaching practice.

The research thus provides evidence that when teachers listen deeply to what children say and also reflect deeply on their own responses to children’s words and action, they are able to enact and sustain change in their classroom relationships.

### 6.5.3 Changes to conceptions of childhood and children’s mental well-being

The impact on teachers’ attitudes and beliefs about contemporary childhood, will likely lead to sustained changes in teaching practice beyond the scope of this initial project. As teachers in this
study recognised, notions of childhood have changed and teachers can benefit from reflecting on how their attitudes, beliefs and values regarding children and childhood can influence their interactions with students. Sustainability was foreshadowed for some teachers who evidenced personal change through their capacity and willingness to challenge their own assumptions about the needs of the child, particularly where assumptions had previously positioned the child within a deficit view rather than a strengths-based perspective. This was strongly conveyed in Alex’s (School C) acceptance of children’s differences and her recognition that she could change her own perceptions of a child’s capacity to participate. Sustainable solutions were more evident when the focus shifted to changes within the teacher rather than the child.

When teachers recognise and acknowledge that their school can utilise a range of methods to cater for children’s social and emotional needs through differentiation, they are also likely meeting the needs of children at risk of poor emotional well-being. This is exemplified in Charmaine’s (School B) recognition that some of the problems and difficulties occurring in her class arose because children simply wanted to be acknowledged.

### 6.5.4 Patterns of communication

Embedding regular communication with parents in school practice systems (such as in School B) would also represent a more sustainable approach to children’s mental well-being. A multi-levelled system of communication through meetings, newsletters and parent-teacher interviews and identifying parents who need specific support and consultation, would help sustain the change process to benefit children’s mental well-being. This communication would need to be cyclic so as to address the changing needs of children. For example, teachers could be regularly checking children’s backgrounds, communicating with counsellors and parents, and planning skill development processes (such as workshops for parents related to resilience or relationships), such that the changing needs of children are understood by both teachers and parents.

From this research, it is clear that all stakeholders are part of the process of supporting a focus on children’s mental well-being. Parents, counsellors and teachers, but most importantly children, should be involved in communication around the issue of well-being. Including children in decision making about their development and their understanding of social and emotional situations (as in Shelby’s ‘peer support group’, Charmaine’s ‘Big Blue Book’ and Frances’ ‘discussion time’) is critically important for sustainability around well-being. Talking to children and encouraging them to be active in supporting their own and their peers’ well-being will help sustain the process into the future.

In summary, sustainability of support for children’s mental well-being is dependent on the vision, capacity and skills of teachers and leaders within schools. Schools need to be able to continue to provide teachers with time and opportunity (for example, in the context of staff meetings) to reflect upon and discuss their values, attitudes and beliefs about well-being and how these impact on their professional practice. Teachers need to make tangible connections between children’s mental well-being and pedagogy, developing teaching strategies that tacitly as well as explicitly support children’s mental well-being in their day-to-day classroom practice. Sustainability of change and improvement is
most likely where teachers’ values, attitudes and beliefs about themselves and about children, childhood and well-being itself are challenged and reshaped as part of the learning process. Furthermore, building in processes that enhance communication between parents, teachers and children are also likely to sustain change beyond the project. Such insights may provide valuable learning for others wishing to not only facilitate change but sustain change in their own school context.

6.6 Chapter summary

This chapter has outlined how differentiated approaches to professional learning within schools embodied various strengths and limitations. The three contexts for this research highlighted the diverse ways that action research can be played out in relation to the same ‘problem’. My constructions and interpretations from the experience are useful for other researchers embarking on action research in children’s mental well-being. Facilitation of the process has provided insights into various participant models, the value of acknowledging dissonance in the roles of different stakeholders, teacher’s readiness in terms of intentional behavioural change, the importance of time in teachers becoming co-researchers, and issues of sustainability.

In this research context, sustainability related specifically to the commitment of teachers to maintain innovations implemented throughout the action research, together with their willingness to continue to reflect on, and improve, their practice in relation to children’s mental well-being over time. Four themes emerged, namely leadership, integrating pedagogy, changes to conceptions of children’s mental well-being and patterns of communication, each of which had implications for the viability of maintaining and sustaining an action learning process in a school.

The discussion will now move from reporting process findings to re-examining the performance by theorising outcomes and implications of these change processes for improvements in practice in terms of children’s mental well-being.
Chapter 7: Denouement: Re-examining the performance through the lens of communicative action

This chapter synthesises the key findings of the study in relation to teachers’ attitudes, values and beliefs (Chapter 4); outcomes from teacher initiatives (Chapter 5) and reflections on the process of change (Chapter 6) as teachers sought to identify and improve approaches to supporting mental well-being in schools. Central to these findings is a nuanced but evident tension within and among teachers in their quest for a deeper understanding of children’s mental well-being and/or their preferred course of action for addressing this. Hence, the discussion in this chapter turns to Communicative Action Theory and the possibilities this offers, together with the key tenets of Ecological Theory, for explaining the quite complex personal, social and cultural dynamics at work in understanding, critiquing and developing support for students in relation to their mental well-being.

7.1 Applying a communicative action framework

As previously explained in Chapter 3, communicative action is useful and relevant in contexts where there is an interest in changing or interrupting a particular aspect of social life (Fernandes, 2003). Communicative Action Theory presupposes the use of language and dialogue as a medium for reaching understanding (Habermas, 1991b). Hence, communicative action is interested in human interaction and how this is sustained and coordinated through speech acts (Houston, 2003; Moghaddam, 2007). It provides a conceptual lens that helps explain the tensions and difficulties experienced by actors (in this case, teachers) as they seek to reach an understanding of their actions, and to negotiate agreement around these with others. Applied more closely, communicative action can support teachers to understand their current and planned actions, and engage with their colleagues in negotiating what else could be put in place to improve the ways student mental well-being is supported in their respective schools. In this study, Communicative Action Theory has been identified as a valuable conceptual framework for explaining how individuals (teachers) work with other individuals (children, parents or other teachers) to improve approaches to mental well-being in schools.

Throughout both cycles of action research, the spotlight has been on teachers, their voice and the consciousness raising process that has revealed a diversity of opinion, perspective and practice. Communicative action, within this context, locates teachers as agents of change. More broadly, it provides a means for interpreting the actions of teachers when confronted by change and hence holds potential for understanding and supporting ongoing teacher learning and development.

In earlier descriptions of communicative action (see Chapter 3) it was noted that Kemmis (2001) conceived it as a ‘two level’ social theory. At one level Communicative Action Theory situates the participants in terms of three interacting ‘systems’ or sets of processes: socialisation acts, social integration acts and cultural reproduction acts. To some extent, these three interacting systems are
evidenced in the actions of the participants in this study. Specifically, socialisation acts describe those actions that relate to harmonising personal identities, evidenced by motivation and internalising values. Social integration acts describe the quite complex interconnected social space that holds teacher/student relationships. Cultural reproduction acts provide the semantic schema to interpret cultural knowledge in schools, particularly as this relates to student mental well-being.

The second level of Communicative Action Theory is connected to the first, and points to three dimensions as described by Habermas (1991b) that shape the ‘lifeworld’ of teachers – personality (personal competencies in speech and action), society (belonging to a group as they enter personal relationships) and culture (collections of knowledge from which interpretations are drawn). These three dimensions influence how teacher knowledge around student mental well-being is created and sustained. Communicative action occurs when these dimensions (personality, society and culture) are activated in response to crisis/problem situations that bring teacher ‘lifeworlds’ into contact with ‘systems’; in this case the school community.

For this study, this means that supporting children’s mental well-being in schools cannot be fully understood outside of the kind of communicative action that recognises personal identity, regulates interpersonal relationships and transmits culture through dialogue, hence acknowledging the interrelated ways individuals, society and culture shape teacher assumptions, beliefs and practices. As the lifeworld of teachers interacts with the expectations of systems, teacher practices are challenged, sustained or renewed. Critical to this process, however, is the pursuit of ‘mutual understanding’. Indeed, Habermas (1984, cited in Kemmis, 2001) posits that communicative action can only occur when mutual understanding is present, when individuals are working towards mutual understanding, or when there is a crisis in understanding (see Chapter 3).

In this study, there was a considerable number of individual crisis points, some more obvious than others (such as Sophie’s time out from the class to review strategies and understanding). However, generally, the action research process seemed to help facilitate movement towards mutual understanding in response to the problems and situations identified by teachers. Whilst mutuality in understanding and action may have been difficult and slow to achieve in some instances (as in the case of School B’s initial response to the research) or may not have been entirely possible due to diverse attitudes, values and beliefs (as in the case of Schools B and C when it came to identifying practices that support children experiencing anxiety), there was nevertheless evidence of capacity for the clarification of knowledge (re-planning) and the reviewing of situations (reflection). However, teacher responses (and the concomitant movement towards mutual understanding) reflected a cyclical and organic process rather than one that was linear and hierarchical.

In essence, Communicative Action Theory, with its emphasis on the intersection between the lifeworld of the individual and the social systems they inhabit (Kemmis, 2001), offers a way of explaining the nuanced understandings and diverse attitudes, beliefs and practices of teachers as they pursued ways to support the mental well-being of their students.
Whilst not intended to be all encompassing, Table 5 provides examples of communicative action at work in this study, illustrating the inherent tensions when the lifeworld of teachers intersected with the systems they inhabit.

Table 5 Examples from the study illustrating the potential of Communicative Action Theory for conceptualising support for student mental well-being

<table>
<thead>
<tr>
<th>Elements of the ‘Lifeworld’</th>
<th>Culture</th>
<th>Society</th>
<th>Personality</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cultural Production Systems</strong> (Shared cultures and discourses are formed and developed)</td>
<td>School community’s critique of government policies (such as Values Education and National Safe Schools) enabled staff to discuss what elements were and were not compatible with individual beliefs and broader school culture (School B).</td>
<td>A renewal of pedagogical knowledge through professional development gave teachers alternative ways of interacting with children and differentiated communication strategies (School B and C). Support for mental well-being became, for some teachers, more orientated towards changing teacher behaviour rather than focused on changing children (School A, B and C).</td>
<td>Individual actions contributed to alternative discourses when they came in contact with children’s mental well-being. Greater consciousness of children’s mental well-being came about through discussion of teachers’ beliefs about social and emotional well-being, which established expectations of behaviour and tolerance of difference. Teachers shared how these expectations were reflected in their language and pedagogy (School A, B and C).</td>
</tr>
<tr>
<td><strong>Social Integration Systems</strong> (Social relations among people as co-participants in a setting are formed and developed)</td>
<td>Teacher’s attitudes, values and beliefs, when shared, help to reform practice (School A, B and C). Dialogue between participants identified the relevancy of their concerns and the differences or similarities in approach (School B).</td>
<td>School communities that prioritised interpersonal relationships accessed practices that related to social and emotional learning. Aspects of social and emotional learning were linked to teacher initiatives (School A, B and C).</td>
<td>Individual teacher attitudes, values and beliefs modelled patterns of social membership in their classroom and school (School A, B and C). Teachers acknowledged successful and unsuccessful relationships as part of their problem solving process (School A, B and C).</td>
</tr>
<tr>
<td><strong>Socialisation Systems</strong> (Practitioners own identities and capacities are formed and developed)</td>
<td>Acknowledging the success of past and present interventions and programs enhanced the schools’ culture and efficacy to support children’s well-being (School A, B and C).</td>
<td>Teacher aspirations for children’s participation in school and their well-being may or may not conform to parental and societal expectations (School B and C).</td>
<td>A teacher’s capacities to problem solve and take a personal role in children’s mental well-being was evident when individuals actively sought changes to their style and methods of interacting with children (School A, B and C).</td>
</tr>
</tbody>
</table>

In the following sections I elaborate on how particular dimensions of Communicative Action Theory help explain the kind of complex and nuanced responses of teachers signalled in Table 5, as they pursued improved understanding and practices concerning student mental well-being. Specifically, I focus on the confluence of personal, social (and interpersonal) and cultural communicative strategies that sought to bring about change in this study. The terms personal, social (and interpersonal) and cultural have been extrapolated from the theoretical work of Kemmis (2001) and best explain the
following strategies. I then consider the significance of these in light of the broader interest in Ecological Theory that has underpinned this research.

7.1.1 Personal communicative action strategies

At an individual level, teacher attitudes, values and beliefs about the role of the teacher in supporting children’s mental well-being (as explored in Chapter 4) point to a number of personal communicative strategies that potentially shaped their thinking and practice. These included:

- critically evaluating their own capacity to become involved in children’s mental well-being;
- being more conscious of their use of language and its impact on relationships;
- being generally engaged with reflective practice;
- being thoughtful about experiences that form their personal identity in classrooms; and
- being mindful of attitudes, values and beliefs about children and childhood that impact on their practice.

Each of these processes, discussed in more detail below, appear to reflect the personal dimension of communicative action which contributes significantly to teacher renewal.

When considering the kinds of initiatives teachers were prepared to implement (as described in Chapter 5) it is clear that a significant number of the teachers were capable of critically evaluating newly arising situations. For example, teachers reflected on their own capacity (personal resources) to interact with children experiencing mental well-being difficulties (socialisation acts) and how other school members perceived this. Another way of viewing this dynamic is as a set of obstacles to overcome through communicative relationships that cultivate non-coercive learning (Habermas, 1991a).

Communicative action principles require adult learners to enter into a communicative relationship that provides opportunities for ‘good grounded assertions’ and ‘values justified in a sincere way’ (Welton, 1993). In different instances in this study, teacher values and assertions acted as both a barrier and an enabler of mutual understanding between teacher and child; between teacher and family; between teacher and school community; and between children and their peers. As an example, for Rose (School C) and the student who experienced regular emotional disturbances or ‘meltdowns’, these barriers to mutual understanding occurred between teacher and child and teacher and family. Rose’s actions employed personal resources such as recognising her capacity to problem solve and influence socialisation, so that the child engaged more positively with others. Often the pursuit of mutual understanding was about reducing the stress for both teacher and child. For Sophie (School A) and the student with extreme anxiety behaviours, barriers to mutual understanding occurred between teacher and child and teacher and school community. Their challenge was to establish and maintain cohesiveness within everyday practice. Both Rose’s and Sophie’s intuition led them to recognise that classroom strategies employed for one individual were not only impacting on each member of the class but were also impacting on the school culture with respect to tolerance and the unique practices in relation to managing well-being issues.
Teachers in this study also reported that when they were more conscious of their language, changes occurred in relation to their dialogue and styles of interaction. They were exercising the kind of personal communicative action that might improve relationships and support children with mental well-being problems. For example, Helga (School B) explored the subtleties in her previous teacher language and behaviour, challenging herself to relate differently to children. Helga drew on a person-centred approach (Houston, 2003) by reaching mutual understanding through non-judgmental patterns of communication such as listening and supporting students to solve problems independently. As previously indicated (in Chapter 5), the data would suggest that harnessing individual capacity by building self-efficacy, and acknowledging each other’s personal capacity, are socialisation acts motivated by a desire for change. Socialisation, therefore, benefits from a personal positive psychology (Akin-Little, et al., 2004), where teachers develop ‘interventions’ or practices to maximise positive emotions such as laughter, gratitude, forgiveness, awe, inspiration, hope, curiosity, mindfulness, meditation, journal writing, attachment, optimism, love, emotional intelligence and intrinsic motivation to affirm strengths in others. This was well illustrated in Brianna’s approach to supporting teacher’s mental well-being.

Significant changes were evident in terms of both relationships and pedagogy as a result of the reflective practice engaged in by teachers as they made adjustments to classroom processes (described in Chapter 4). Reflective practices by some participants brought about a self-awareness which deepened their knowledge and understanding about teaching. Teacher self-awareness came about from the simultaneous interactions of both the ‘subject-who-reflects’ and ‘object-who-is-reflected-upon’. For example Sean (School A), concerned for his own mental well-being, reflexively listened to his students when they critiqued his performance. He reflected on the relationship between his own mental well-being and the well-being of students. Reflection was desirable because it indicated a consciousness of self and was effective in the sense that Sean’s reflections led him to challenge his assumptions rather than reinforce his existing beliefs. One existing belief that was challenged related to Sean’s understanding of empathy. Realising empathy was not innate he became involved in explicitly engaging his students in empathetic thinking and behaviour, utilising the ‘teachable moment’ (Schlosser, 1976) rather than pre-planned and inauthentic lessons.

As the teachers reflected on their practices they became more attuned to how their personal identity played a role in supporting children’s mental well-being. The interplay between their adjustments to classroom systems and their capacity to solve problems highlighted the potential for making a difference to relationships. Underpinning their actions was a quite evident motivation and readiness to bring about change. Their identities, personally and professionally, were being influenced by their actions, such as being open to collaboratively working with children to form classroom guidelines where teachers became facilitators or where they provided support plans for children who had a stronger emotional reaction to change. In essence, teachers reported feeling empowered by such positive action and its results. Teachers who had identified their tendency to be judgmental became more concerned with empathetic listening and non-judgmental talk. Kelly (School B), for example, in moderating her perception of self as someone who could be more of an empathetic teacher, raised her awareness of being more impartial when working with children. Her attempts to clarify what was
'empathetic' about listening and what was 'non-judgmental' about talk, repositioned her to consider the implications of using sarcasm and her authoritarian style of communication. Amidst such adjustments, various forms of communication and dialogue were evident in shaping personal identity.

As a result of the various group processes within each school, teachers became more mindful of how their attitudes, values and beliefs about children and childhood impacted on their practice (see Chapter 4). Through the questionnaire and focus group discussion these attitudes, values and beliefs became more evident, providing opportunities for teachers to critique their personal perspectives, as did Sandy (School B) in questioning her role in nurturing children's social skills. Hence, an important strategy was to check and cross check their opinion in relation to the prevailing school culture, including other teachers' perspectives. Sandy, through whole staff discussion, became more aware of the possibilities of making adjustments to classroom practice to ensure more alignment with school expectations. Experience in the classroom was nuanced and diverse; therefore it was not always easy to identify individual teacher beliefs about children and childhood and how these shaped their interactions and relationships with students, nor the initiatives they employed to support mental well-being. However, being more mindful of their values and aspirations for children, including issues such as resilience (Jim, School B), acceptance of themselves (Frances, School B and Alex, School C), independence (Maureen, School B), rational thinking (Trent and Helga, School B) and having a social conscience (Shelby, School A), assisted many of the teachers to connect their own lifeworld assumptions with the socialisation acts that occurred within their teaching. The pedagogical processes described in Chapter 5 consequently provided examples of teacher capacity to model and change communication approaches, such that their aspirations around student mental well-being and social and emotional learning could be achieved.

7.1.2 Social and interpersonal communicative action strategies

The nature of change, as conceived within communicative action, is also linked to the way participants identify with groups and how they understand, value and practice interpersonal relationships. Clearly, given the interests and context of this study, relationships were perceived by teachers to be central. Social and interpersonal communicative action was most clearly evidenced when teachers:

- were more aware of the communication culture and discourses within the school and classroom;
- acknowledged dissonance as a means to understanding;
- engaged with theoretical frameworks that supported their teaching of social and emotional learning; and
- reviewed communication strategies with parents and community.

Such actions, discussed in more detail below, appear to reflect the social and interpersonal dimension of communicative action (described by Welton, 1993) which, in turn, contributed to building and sustaining the kind of mutual understanding necessary for change to occur.

As teachers critically identified problematic communication cultures and discourses within their school they revealed a lack of mutual understanding. Charmaine (School B), for example, recognised her classroom had reached a crisis point where the culture of communication between children (characterised by bullying and poor social skills), and between teacher and children, had deteriorated.
In critically analysing the unproductive culture of the classroom and the threatening nature of (external) gangs affecting the children, she discovered that her role was to raise awareness by engaging with each member of the class and other staff to collaboratively name and address the social problem rather than suppress her knowledge in the hope that the problem would go away. Charmaine perceived that, within her role, she could facilitate children and other teachers towards a simultaneous and mutual understanding of the situation. Her communicative action is reflective of the ‘new’ sociology view of childhood (Corsaro, 2005; Mayall, 2002) which promotes the notion that children actively contribute to cultural production and change. At a personal, social and cultural level Charmaine addressed the tension between children, and between herself and her students, by inviting the students into the project of change.

When participants acknowledged dissonance in processes of support for children’s mental well-being, social communicative action was evident. Conflict of opinion and attitude precipitated deeper discussion of teacher responsibilities and the kinds of relationship skills which were most valued. Even though there were diverse opinions in School B, a mutual understanding emerged in relation to changing approaches to problem solving and communication between children and between teacher and child. In School C, the Principal explicitly named the dissonance and utilised difference as a stimulus for promoting tolerance in relationships and its effect on children. This was evident in Brianna’s desire to challenge the collective belief that ‘the problem belongs with the child’. Hence, her journey focused on working collegially with individual teachers in her quest to build self-understanding and capacity. The ultimate goal was to change school culture by, firstly, strengthening relationships amongst executive and then generating change across the school through feedback to staff on a regular basis. This was not a simple panacea for everyone, as evidenced by Collin whose crisis in managing children’s mental well-being remained unresolved (see Chapter 4). Yet this did not impact on the Principal’s resolve to lead a whole-of-school cultural shift that would result in improvements to the way student mental well-being was understood and approached.

Introducing the SEL Framework to teachers represented a social integration act, giving clues and criteria to teachers regarding areas of need in terms of children’s mental well-being and therefore identifying opportunities for improved relationships. In the action of interpreting the needs of the child, the SEL Framework represents the intersection between the lifeworld of the child and the systems that surround the child. Challenges in social skills can become a risk factor in normal socialisation and, therefore, children benefit from targeted and explicit communication skills training (such as in the classrooms of Candy, Frances, Rose, Maureen and Charmaine). In Candy’s case, she had to modify her understanding of what was acceptable social behaviour, letting go of unnecessary expectations in some children’s social and emotional learning, in order to come to mutual understanding. Social communicative strategies were evident when teachers utilised preventative approaches (including risk factor identification) such as positive behaviour supports in School C’s ‘Green Card’ and Bullying Program and when teachers employed understandings of various child development aspects such as resilience (Fuller, 2006), motivation (Ryan & Deci, 2000) and self-concept (Burnett, 2003).
Communicating about existing societal influences on families and parents brought about a shift in the understanding and practice of communicating with parents and building relationships with families. For example, teachers and school leaders responded critically to raise awareness and levels of parent knowledge about values education and mental well-being in children. As discussed in Chapter 4, many participants believed schools were regularly challenged by changes in broader social systems, with some issues faced by children remaining beyond the influence of the school. Some of these broader social and family issues were identified as having a significant impact on the kind of relationship teachers (for example Rose, Kelly, Alex) could have with particular children. Action oriented towards a mutual understanding of expectations of student mental well-being was evidenced in School B when staff critiqued the provision of parenting courses offered to educate about, and support, children’s mental well-being. Where parents were not involved, teachers positioned themselves to improvise with ‘in school’ support (as in School B) and arrange referrals to professionals. A similar problem in School C resulted in teachers implementing a strategy of mediation between school and home, where a skilled teacher would coordinate meetings and agendas when dealing with children’s mental well-being difficulties. The school, as part of society, is seen here to be playing an important role in how it harmonises understanding within and between the school, families and communities when new and/or challenging situations arise.

7.1.3 Cultural communicative action strategies

Cultural communicative action refers to acts of cultural reproduction that connect existing events, images and lifestyles of the present day to new and different ways of conducting our day-to-day practices (Fernandes, 2003; Kemmis, 2001). These acts of cultural reproduction were evident in this study primarily through:

- leadership that is alert to recognising when there is a misalignment between the school and broader social system;
- consensus forming amongst participants when national and state policy require a school response;
- socio-cultural practices that connected members to a whole-of-school approach; and
- reviewing or evaluating previous interventions and programs so as to reflect on successes or failures.

In each of these examples the process of reproduction requires that the participants have a common semantic schema that enables them to share opinion and bring about change.

A significant factor in producing quality cultural connections relates to leadership within the school. In all three schools in this study, strong and entrepreneurial leaders were well positioned to recognise misalignment between their school and the social changes occurring in families and community expectations. The leaders, through their participation, made deliberate and strategic attempts to reorient their schools to new ideas and norms. Principals addressed resistance and adverse opinion from teachers by offering inclusive and solution-focused engagement, characterised through persistent dialogue around notions of ‘How can we help?’ (Trent, School B) and ‘equity and tolerance’ (Brianna, School C). Without the impetus provided by keen executive members, innovations (and the evaluation of those innovations) would be left to solo efforts that do not necessarily get taken up as part of whole
school practice. At the time the data was being collected for this study, Federal and State policy in Australia prompted a number of professional development initiatives that directed schools and teachers towards communicating a shared vision for the physical and emotional safety and well-being of all students (as discussed in Chapter 2). In implementing a professional and productive response to this, school leaders welcomed a critique of their existing processes, with this research being part of a process of reflection on any misalignment between teacher practices, school values and system imperatives.

As discussed in Chapter 1, student mental well-being is widely recognised as an educational priority, including within the system where this study took place. The participating schools responded to such ‘systems knowledge’ through a whole-of-school mental well-being policy. Indeed, schools in this study were also connecting culturally and pedagogically with system imperatives such as the PEEL Project, The National Framework in Values Education and Micro-skills for Classrooms. In doing so, these schools were positioning professional development as a social communicative strategy in elevating the role of the teacher in developing and nurturing interpersonal relationships that build positive connections with children. For some participants (such as Maureen, Alex and Helga), targeting their teaching skills (see 5.5.3) provided another perspective on the connection between pedagogy and how teacher behaviour can improve relationships. As a result, a renewed understanding was evident through, for example, the ways in which differentiating classroom learning was recognised as impacting on children’s mental well-being. Children’s needs were made more visible as several teachers focused on independent learning approaches. Therefore, social integration acts were observed in this study when teachers and schools responded to professional development that prioritised interpersonal relationships.

A school’s emphasis on socio-cultural practices can scaffold the route by which children come to participate in a culture, allowing the culture to be reproduced or transformed (Goodnow, et al., 1995). This is illustrated through School A’s introduction of a Well-being Committee. A measure of the Well-being Committee’s influence on cultural change was its impact on classroom practice, as over time fewer students were referred to the Well-being Committee. Participants from School A believed teachers were attempting to problem solve through positive and supportive methods before referring them to the committee. The committee, through its processes of referral of students and collaboration amongst committee members, provided a consistent message to other staff members. The committee system offered a scaffold for mutual understanding such that teachers approached children’s social and emotional needs from a similar mindset.

An important cultural strategy in creating dialogue between individuals related to the review and evaluation of previous interventions and programs so as to reflect on successes and failures. Central to any review and development process is the opportunity to identify strengths and weaknesses, and therefore engage in dialogue about existing practice. When Principals (in School B and C) were reviewing the process of ‘children being sent to the office’ they recognised a need to communicate with all staff about the nature of children’s social and emotional well-being. Dialogue, inevitably, turned to the aspirations for the school and the difficulties the school had in supporting children’s mental well-
being. The research provided a professional learning opportunity for participants to not only evaluate and problematise existing practices, but to voice concern and debate alternatives.

In summary, Schools A, B and C made decisions and conveyed imperatives to teachers that triggered a process akin to communicative action in that these prompted a struggle for mutual understanding (Kemmis, 2001). Communicative action provided a means to describe the push and pull or ebb and flow movement of discussion, conversation, written memos and reflection that further shaped participant attitudes, values and beliefs. Motivation to participate in this process of developing whole-of-school mental well-being policy indicated that teachers may have wanted to also improve their self-understanding. As their self-understandings may be shaped by collective misunderstandings about the nature and consequences of what they do (Kemmis, 2001) communicative action describes the process of pursuing and sustaining mutual understanding.

The communicative action framework including personal, social (and interpersonal) and cultural dimensions discussed in this chapter provides a useful way of conceptualising the process of renewal that took place when existing attitudes, beliefs and practices concerning student mental well-being were examined within an action research process. In the following section, I extend this analysis to children’s social ecologies by examining how these intersect with the interests of Communicative Action Theory, in revealing how support for children’s mental well-being is understood and practiced.

### 7.2 Communicative action in relation to ecological social models

As a critical social theory, communicative action has been identified as providing an interdisciplinary understanding of adult learning and change (Welton, 1993). Communicative Action Theory provides a valuable means to understand the dynamic change process necessary for a school to better recognise and embrace children’s mental well-being. Communicative action, through its emphasis on human interactive capabilities, suggests that there is an ecological perspective underpinning the whole-of-school approach. The ecological model featured in previous discussion (see Section 2.1.2) when considering prevention and early intervention through parenting programs. In essence, in the context of this research, ecological theories are focused on the ways in which different social environments influence outcomes for children (Bronfenbrenner, 1979; Greenberg, et al., 2001). When communicative action is linked to Ecological Theory, change processes are potentially understood in more depth.

To date, ecological models have been very influential in informing the development and implementation of early prevention and intervention programs, as well as program evaluation and analysis of long-term program effects (Cappella, et al., 2008; Greenberg, et al., 2001; Peters, et al., 2010). Previous studies in prevention research (Bor, et al., 2004; Elias, 2010; Greenberg, et al., 2003) have been shown to rely on an ecological perspective to identify risk factors (Payton, et al., 2000). Raphael (2000) claimed further research was needed following the National Survey (in 2000) to generate more understanding of the ecological influences on children’s mental health and associated interventions. Such evidence has been consistently emerging since this time.
For the purposes of this research, the complexity involved in connecting two theoretical interests (communicative action and an ecological approach) is represented in Figure 1 below.

Figure 4. Conceptual Model of Support for Children’s Mental Well-being

In this representation, communicative action involves a range of experiences and events which occur at various levels or systems within the lifeworld of the teacher and child. The child is positioned at the centre of four wider circles representing contexts of influence, as in the ecological perspective.

The communicative action interests (personal, social and cultural acts) are layered onto the circles of social influence and acknowledge the child in dialogue and in action. The two-way spiralling arrows demonstrate the ebb and flow of dialogue or communication occurring between teachers and other interdependent parts of the child’s environment or ecology (including peers, family, and health services). The spiralling arrows highlight the importance of communication regarding children’s social and emotional needs to be met within and across each sphere, taking into account systems of socialisation, social integration and cultural connectedness.

More specifically, the flow of dialogue and action regarding personal strategies represents children’s and teachers’ patterns of communication, self-efficacy and self-awareness in making change, such as Helga’s approach in overcoming negative language with non-judgmental honesty and compassion. The flow of dialogue and action regarding interpersonal relationships represents actions such as collaborative teams in School B, understanding and managing conflict in School C, addressing SEL.
needs and identifying risk factors. The flow of dialogue and action regarding cultural connections represents actions such as socio-cultural innovations (the Well-being Committee in School A), effective leadership teams (converting beliefs into student expectations as in School C) and critically engaging with relevant education policy (as in School B).

The findings from this study add to the understandings inherent in an ecological model with a much more nuanced view of the kind of interactions that occur within and between different levels of the social systems that encompass children’s lives. Communicative Action Theory contributes related dimensions (personal, social and cultural) for analysis, a structure for knowledge creation and a language that describes how the status quo may have been interrupted at different levels. Projecting personal, social and cultural strategies onto the child’s microsystem creates opportunities for action such as intervention or prevention, exploring self-awareness (personal identity), explicit practice of differentiated communication strategies (interpersonal relationships) and engaging in alternative social and emotional well-being discourses (cultural connectedness). Therefore, these psycho-social resources belonging to the lifeworld of children become a means for identifying exactly, where interruptions to the status quo or problems occur and then turning to communicative action as a way of renewing and revitalising practice through the emergence of mutual understanding.

In summary, Communicative Action Theory opens up the potential for mutual understanding in overcoming crisis points experienced in the day-to-day pursuits of teachers attempting to support children’s mental well-being, whilst Ecological Theory provides a firm foundation for understanding related social and relational dimensions of childhood and child development. Based on the kind of dialogical and relational interests evident in the findings from this study, these theories offer the potential for improved understandings and practice regarding the very important but vexed and complex domain of improving children’s mental health in the context of schools.

7.3 Chapter summary

In this chapter I have applied Communicative Action Theory in developing the analysis of key findings from this study. This discussion highlights a multifaceted approach to understanding teacher attitudes, values, beliefs and practices concerning children’s mental well-being and how this is best supported in schools. Such an approach involves recognising the personal, social and cultural dimensions inherent in communicative action. I have sought to highlight how these dimensions are experienced and negotiated by teachers as they solve problems, negotiate tensions and pursue mutual understanding.

I have then proposed how the key tenets of Communicative Action Theory, and the ways these are played out in schools in relation to supporting children’s mental well-being, can coexist (or be layered within) important foundational understandings inherent in Ecological Theory. The importance of dialogue emerges as central for change, consistent with the views expressed by many teachers in this study. Importantly, such a conceptualisation reflects more closely the complexities and nuances of teachers’ experience, both personally and relationally, as they engage, interact and implement initiatives to support and improve the mental well-being of children.
In the following chapter I will conclude the thesis with a personal perspective on what I have learned about supporting children’s mental well-being in schools, recommendations for future research and the limitations of this study.
Chapter 8: Drawing back the curtain: One performance ends and another begins

This chapter returns to the study’s purpose and research questions and considers the potential implications of the findings for policy and practice. The research set out to uncover teacher attitudes, values and beliefs about children’s mental well-being at a time when schools were increasingly being identified as appropriate sites for social and emotional learning and the promotion of mental health. Whilst teachers (and their pedagogical practices) were deeply implicated in such a shift, much of the research at the time (Elias, Zins, Graczyk, & Weissberg, 2003; Greenberg, et al., 2001; Hunter, Elias, & Norris, 2001; Shucksmith, et al., 2005) was focused on the efficacy of programs, measurement of well-being, prevention and risk factors. This study was considered to be important and timely since little was known about how teacher attitudes, values and beliefs about children’s mental well-being influence classroom practice. The theatre metaphor emerged as a useful tool since it gestures to the idea that, like actors, the teachers in this study were aware of the norms, values, beliefs and other symbolic elements that direct how they are to talk, act and otherwise play their roles, in this case, specifically in relation to children’s mental well-being.

Given this research story has a number of parts it is important to now draw together the key insights from previous chapters and to reflect critically on the overall production, including whether and how the findings might influence further work focusing on this important area of children’s lives and teachers’ work. Implications for school policy and teacher professional development are proposed, notwithstanding several limitations of the study which are highlighted. Whilst the findings are heuristic, formative and interesting they should not exceed the boundaries of inference from the data for reasons related to sampling, converging confounding influences and a thematic data analysis. I also re-examine my own position in the study and critically reflect on the ways in which this project has indelibly shaped my identity as teacher-researcher.

8.1 Revisiting the research ‘headlines’

In considering the critically important role teachers’ attitudes, values and beliefs play in relation to children’s mental well-being, the findings in Chapter 4 revealed an important link between having a positive school environment and the kind of skills and competencies (for example, social conscience, resilience or acceptance of self) teachers perceived that children required for their mental well-being. These perceptions were, in many cases, influenced by the teachers’ own constructions of their childhood. The challenge for teachers was to evaluate the relevance of their assumptions and beliefs in light of the issues, circumstances and potential of children they now teach.

Another important issue to emerge in Chapter 4 concerned the mental well-being of teachers and their capacity to individualise pedagogy, communicate effectively and develop positive, affirming relationships with the children. Such a finding signals the importance of recognising the complexity of the work of teachers, supporting and strengthening teacher identity and addressing the affective
dimensions of human learning when approaching the development of staff. Education systems need to monitor closely the stressful nature of teachers’ work and the impact this has on their own (and consequently their students’) well-being.

Given attitudes, values and beliefs were shown to be influential in shaping practice in relation to children’s mental well-being (as identified through the teachers’ initiatives in Chapter 5), professional development that requires teachers to reflect on these is critically important. Teachers do not have access to many opportunities whereby they can consciously delineate how their assumptions might adversely influence interactions with the children. Teachers’ views, biases and prejudices about particular children hindered, to some extent, the perceptions they had about their ability to make a difference in their lives. This was particularly evident in relation to issues of challenging behaviour, school refusal, underachievement and alienation which were all quite routinely considered to be indicators of children’s mental well-being whilst being addressed as a ‘normal’ part of classroom discourse. Outcomes from their classroom initiatives were often complex in that a number of the teachers realised their focus on changing children was inextricably linked with changes they were gradually perceiving in themselves.

The research goals identified by the teachers (as outlined in Chapter 4) suggest greater interest in understanding the meaning of mental well-being and its implications for teachers, parents and children’s lives rather than in learning about particular programs that support children’s social and emotional learning. This suggests that professional development for teachers may be better directed, in the first instance, at improving their understandings of mental well-being before engaging with the interventions aimed at ‘fixing’ it.

Having identified teacher attitudes, values, beliefs and assumptions about children’s mental well-being and exploring implications for classroom practice, attention turned to the change processes that occur when teachers seek improvement in their practice in relation to children’s mental well-being. Grounding the classroom initiatives in SEL theory emerged as important since it appeared to extend teachers’ knowledge and gave them a language to communicate perceptions of children’s mental well-being. For these teachers, SEL seemed to open up opportunities to acknowledge the intersection of personal, social and environmental issues that impact on children. In this way, SEL was not perceived as curriculum but as an underlying approach to ‘doing’ classroom interactions and relationships.

The conceptual model based on communicative action (as proposed in Chapter 7) opens up possibilities for an inquiry based alternative to externally facilitated action research. While the value of Communicative Action Theory for explaining change processes emerged from this study, and thus remains untried and un-tested, I propose that schools aiming at improving approaches to children’s mental well-being would benefit from further engagement around its potential. As this study has demonstrated, participants were able to problematise their concerns regarding students’ social and emotional well-being through dialogue, sharing knowledge and attempts to articulate the source of the ‘problems’ they face in their day-to-day practice. However, not all schools have the time, resources or support to participate in formal, critical action research.
Communicative Action Theory, whilst not a change approach per se, also offers an explanation for the dialogic dynamic evident in this study as teachers navigated ways to understand and resolve crisis situations in relation to children’s mental well-being while becoming more cognisant of their own role in this. Indeed, notions of communicative action better account for an emphasis on dialogue and the important role this plays in creating meaning and directing action. In this study, the change process was most evident when teachers identified how changes in communication and relationship patterns resulted in improvements to pedagogy – and vice versa.

As the research drew to a close it became very evident that there needs to be a better understanding of how systems and children interact. As such this study recommends that future work on children’s mental well-being take into account a more ecological approach whereby the kind of multi-system elements identified in the communication spiral in Chapter 7 (Figure 4 p.181) are taken into account.

8.2 Implications for policy, professional practice and research

Whilst the scope of this study is limited in terms of the number of schools and teachers involved, the findings point to some important potential implications worthy of further consideration. Drawing on the issues outlined above, including insights offered through Communicative Action Theory, the following discussion reflects further on what might be considered in future work focused on progressing understandings and practice concerning children’s mental well-being in schools.

8.2.1 The importance of teacher voice

The findings of the study, particularly in relation to the first research question which states, What are teacher’s attitudes, values and beliefs about children’s mental well-being?, infer that supporting children’s mental well-being in schools requires a qualitative dimension. We cannot know or understand teachers’ practices without attending to the assumptions and values that underpin these. It is difficult to access assumptions, beliefs, attitudes and values without engaging in dialogue with teachers and providing a reflective scaffold on which to build the conversation. The teacher’s voice is integral in identifying, communicating and re-presenting how they make, and act upon, meaning in relation to children’s mental well-being. Indeed, it was through this dialogic process that shifts in understanding were most clearly identified.

Closer consideration could be given, then, to approaches used in teacher professional development around children’s mental well-being. Whilst some other aspects of teacher learning may lend themselves to more directed approaches, the findings of this study point to the value of fostering deeper conversations with teachers about how/why they have come to know mental well-being in the ways they have and to reflect critically on whether their current approaches to supporting this might be reviewed.

8.2.2 The potential of interdisciplinary knowledge

This study engaged with a range of different disciplinary knowledge/s as it surveyed current evidence
and attempted to locate useful frameworks for explaining how teachers interact with notions of children’s mental well-being. Whilst child development theory has contributed significantly to understanding the ‘problem’ of children’s mental well-being, this research has opened up further potential for considering how different disciplinary knowledge/s about children and childhood might be useful for teacher learning. Professional development in relation to children’s mental health could take into account, for example, the kind of interdisciplinary knowledge provided by the broad field of Childhood Studies with its emphasis on children’s agency (as well as vulnerability) and the constraints in generalising or universalising children’s experience, as appropriated for this study. Likewise, the social ecologies of children’s lives were paramount for the teachers in this study as they navigated these in pursuit of improved understandings about children’s mental well-being. For many of the teachers, the acknowledgement of the myriad ways in which deficit-driven understandings shaped their interactions with children was, in itself, an empowering outcome. Providing different disciplinary frameworks that open up alternative ways of viewing ‘the problem’ may be helpful for teachers as they navigate the complex terrain of mental well-being.

### Strategies for professional learning

The action research processes used for this study point to the different ways in which it is possible to facilitate teacher learning and change. Facilitating three different research groups and structures within three different schools highlighted that change can occur at several levels. Whole staff participation opened up opportunities for change in cultural norms and practices, with subsequent adjustments made to policy. A mix of active and passive participants in a whole school context highlighted how adjustments to policy can be achieved, even if not all participants in the school are ready to align with change. Individual teachers’ approaches also have their place in support of children with particular well-being needs. Some of these teachers become change agents over time as their colleagues observe new initiatives or strategies being implemented.

What was common across the different action research approaches adopted in the participating schools was that change is intimately connected with opportunities for reflection and dialogue. Any learning process that implies the need for reflection will therefore require time. Whether it is action research or inquiry-based professional development, teachers require opportunities and space to think critically about their practice. Identifying creative, cost effective means of providing this remains a challenge for most teachers and school systems. Building the level of trust required to support the kind of reflection and dialogue necessary to support change can be an arduous process requiring strong and sustained leadership, as well as regular opportunities to acknowledge the commitment and achievements of staff.

Appropriately oriented and well supported personal, social and cultural systems are necessary, for ongoing change in supporting children’s mental well-being. Systems need to be in place that attend to the personal needs of individuals: systems that can articulate the social values and practices expected of their participants; and systems that identify and recognise the cultural influences that impact on what can be achieved or experienced in any school community. The findings from this study point to the critical importance of fostering relationships and dialogue concerning the ‘problems’ that matter.
within schools, as well fostering leadership capable of sustaining the diverse responses required for these.

### 8.3 Implications for further research

A number of possibilities for further research have emerged from this study. Whilst the focus of the current study centred on the work of teachers and the importance of teacher voice in supporting children’s mental well-being, further research needs to be undertaken that involves the views and perspectives of children and young people regarding how they understand their mental well-being and what schools could do to better support this. Whilst there are now several survey based and ‘report card’ type studies that provide sound descriptive data about children’s mental health and well-being, few large-scale studies have involved children in generating rich, qualitative information about their experiences. The mental health and SEL agendas would benefit immensely from the insights of children and young people around what they perceive as the most relevant, responsive and/or effective program interventions and support in schools.

More research is also needed to ‘test’ the kind of conceptual model for supporting children’s mental well-being as proposed in this study in Chapter 7. How could such a model guide and inform a school based inquiry process aimed at understanding and improving approaches to children’s mental well-being? Schools may benefit from a more organic model in helping to explain how teachers’ personal, social and cultural beliefs and practices interact with a child’s ecological systems. Whilst Communicative Action Theory emerged as a useful framework for further interpreting the findings of this study, further exploration is necessary to identify the full potential of this theoretical contribution in understanding teachers’ attitudes, values, beliefs and practices regarding children’s mental well-being.

Further research is also needed to explore the impact of different participatory approaches to professional learning. As indicated in this study three different models of participation were in use but more evidence needs to be generated in relation to how these impacts on whole-of-school and individual change.

### 8.4 Limitations of the study

The process of undertaking this research has revealed a number of limitations that warrant mention as the production draws to a close. These include methodological issues that impacted on the research processes such as the availability of teachers, the unique organisational nature of schools and the transferability of findings to other contexts.

As outlined in Chapter 3, more schools (seven) were approached than agreed to participate and therefore the research sample was smaller than anticipated. The ‘busy-ness’ of schools created barriers to engaging them, as each school was juggling competing priorities. Competing demands and priorities are not unusual in trying to undertake educational research but the kind of participatory processes required for action research require time and commitment that many schools are reluctant
to make. Whilst the number of schools involved in this study is highlighted as a limitation it is also important to emphasise the importance of working productively with the barriers and resistances in schools given the potential of collaborative research for instigating change and developing longer term professional learning outcomes.

There were aspects of the study that were constrained by the unique nature of schools and their organisation. In particular, an opportunity to engage teachers in focus group discussions and interviews was limited due to the fact their release time from class responsibilities could not be funded as part of this project. Therefore meetings and interviews mostly occurred after school which was not optimal. Absences by teachers incurred extra ‘catch-up’ time which involved support from principals. Therefore, the process of negotiating access to teachers for data collection purposes was somewhat uneven depending on individual circumstances and principal support.

Notwithstanding the constraints with sample size and access to teachers, the research has generated rich case study data which has resulted in a depth of insight into teachers’ attitudes, values, beliefs and practices concerning children’s mental well-being. Whilst the events and issues raised were located within one educational region and school system, the findings will likely resonate with the experience of teachers and the practices of schools well beyond the context in which this research took place.

8.5 Theatre metaphor: Understanding the research process

In Chapter 1 I explained how my early exposure to feminist theory developed a critical perspective that disrupted my ‘status quo’ assumptions and transformed my thinking. I also highlighted how my constructivist standpoint called for research processes that are reflective and emphasise social interaction and relationship. I now reflect briefly on what I have learned and become through this particular research process. I do this by engaging once again with the dramaturgical lens which provided a means by which I could move creatively and productively between being a teacher-practitioner and teacher-researcher. My role as the producer or facilitator of this research, positioning and repositioning ideas, contexts, language, people and props, has generated insights and learning that has challenged and transformed my professional identity. Just as a play or drama unfolds, the research process required me to attend to, and sensitively manage, the complex interactions between time, space, dialogue and characters. I therefore came to recognise the implicit value in viewing classrooms and schools as unique stages or theatres for action based on the people involved.

As a researcher, I have been challenged by the organic nature of action research which required a significant commitment on my part to reflexivity and openness to the learning that emerged from this. I realised the importance of suspending some of my own preconceived ideas about ‘the problem’ for teachers in supporting children’s mental well-being when adopting a more participatory and collaborative approach. Recognising that so many of the decisions about the research – from the identification of ‘the problem’ to the framing of the questions and the choice of methodology – were imbued with my own assumptions, beliefs and practice, ‘wisdom’ required me to be vigilant about the
knowledge possibilities I might be excluding. For example, unknown to me at the beginning was the significance of how difficult it is for teachers to position themselves as researchers. The concept of positionality (Herr & Anderson, 2005) explained this dissonance and has given me a deeper understanding of the importance of negotiating role expectations and how to introduce future research with teachers.

I have come to know the classroom as a complex ecology, influenced by the players (both teachers and students) and their individual ecologies. Just as the theatre takes on an ecological dynamic building on culture and context, where the actor or actors, through dialogue or action, interact with environment and audience effected by societal norms such as censorship and human values, so too do classrooms become 'theatre' as they recreate the lifeworld of children and work generatively with the complexity of personalities, developmental stages in learning, peer relationships and constructions of childhood. As a teacher-researcher I have come to know the drama that can often be associated with engaging with children’s mental well-being and the role dialogue and action play in responding effectively to this. I also view dissonance differently in that it can be an integral part of the drama and a catalyst for change if taken up as a positive dimension in the pursuit of deeper understandings and a method for responding proactively to children’s mental well-being in schools.

Importantly, this journey has opened up many dimensions of what it means to be a facilitator of educational change. Increasingly I have come to ‘own’ my role as a leader and its significance in motivating teachers to acknowledge the complex but important links between their values, attitudes, beliefs and practices – all of which are critical for influencing change.

8.6 Epilogue

Drawing back the curtain, my experiences as researcher have equipped me with more skills in hearing, feeling and understanding relationships between teachers and children. I move forward with a renewed sense of how important it is for educators to believe in their capacity to positively develop all children’s potential, regardless of any perceived negative influences on the child from their home background and/or peer culture. Without leadership from principals and ‘significant others’ in schools, the facilitation of teacher growth and understanding of children’s mental well-being will be constrained.

My developing identity as researcher has enriched my quest to influence teachers in ways that will help them reflect positively on children’s development and mental well-being. Part of this influence involves understanding the pedagogy of inclusion and normalising differences through social and emotional learning for all children not just those with particular mental well-being issues. Having walked alongside teachers as they navigated quite complex personal, social and cultural systems, I embrace more readily a critical stance in daily events as they occur in schools. These teachers I came to know reminded me of the critical importance of ongoing personal change even when this isn’t easy. Young people like Gavin (in Chapter 1) are in ‘good hands’ if teachers can continue to recognise and claim their capacity for personal and professional growth in understanding and responding effectively to children’s mental well-being.
References


Friedman, V., & Rogers, T. (2009). There is nothing so theoretical as good action research. Action Research, 7(1), 31-47.


References


Appendices

Appendix A: Initial letter to school principals ................................................................. 204
Appendix B: Invitation to teachers to participate ............................................................ 206
Appendix C: Teacher consent form ................................................................................. 208
Appendix D: Understanding children’s mental well-being in classrooms questionnaire ...... 209
Appendix E: Anticipated timeframe for research activities ............................................. 214
Appendix F: Teacher information sheet on SEL .............................................................. 215
Appendix G: Discussion scaffold for Meeting One .......................................................... 216
Appendix H: Semi-structured interview scaffold ............................................................ 218
Appendix I: Scaffold for semi-structured discussion to ascertain sustainability ............... 219
Appendix J: Sample of initial feedback to participants during Meeting 2 (from School B) .... 220
Appendix A: Initial letter to school principals

Regarding the research project titled: Promoting social and emotional learning: Improving the way children’s mental well-being is viewed in classrooms.

Dear [Name of Principal]

My research is part of a PhD project conducted through the Centre for Children and Young People at Southern Cross University and supported by the [district education office]. The aim of this research is to explore and identify teachers’ attitudes, values, beliefs and assumptions surrounding children's mental well-being in primary schools. I intend to use an action research process to examine the change processes that occur in classroom practice when teachers’ focus implicitly and explicitly on social and emotional learning as a tool for improving mental well-being in children. The action research process offers a way of collaborating with teachers and offers teachers an opportunity to challenge their own belief systems and try classroom innovations. Teachers will be invited to become co-researchers in the project.

I would like to invite your school to take part in the study. My aim would be to involve a minimum of 5 teachers.

Why is the study important?

The importance of this study relates to how we, as Catholic School educators, promote mental well-being in children. I hope to use the interest in promoting social and emotional well-being shown by the [school district] as a context for understanding how classrooms influence children’s capacity to develop resilience and protective behaviours. My research has been informed by the work of Gary Burdett who was seconded in 2004 to write a report in response to a Diocesan principal survey. Whilst this report provided descriptive information about what is presently happening in this Diocese there remained a need to develop a deeper understanding of what teachers can do to promote mental well-being in classrooms rather than models that relied only on counselling.

Mental Health is defined as a mental state of social and emotional well-being in which the individual realises his or her own abilities, can cope with the normal stressors of life, can work productively or fruitfully and is able to make a contribution to his or her community (Hendren et al., 1993). It seems that in Australian schools today there are an increasing number of children experiencing family structure changes and more children are having labels assigned to describe their difficulties in realising their potential and inability to work productively. Mental well-being issues in schools include developing resilience; reducing bullying; identifying depression; managing anxiety; understanding aggression; and knowing how learning difficulties can impact on children. These issues are at the forefront of mental well-being education.

This research will consider how a classroom focus on social and emotional learning may improve the capacity for teachers to engage with mental well-being issues. Even though family and whole-of-school culture are important factors in building protective factors in children this project aims to focus particularly on the classroom context.

My study’s relevance relates not only to our local setting but to the broader statewide and national focus on children’s mental well-being. The Australian Principals’ Association’s Professional Development Council is presently launching a primary school mental well-being promotion called KidsMatter. This initiative will undergo extensive evaluation before it reaches all schools in 2008. My research will draw on the mental well-being theory which forms the basis of this program and seek to apply its underlying social and emotional curriculum to my study.
What will the study involve?

In choosing action research as my overall methodological framework, I wish to work closely with teachers to seek improvement in practice. I assume a collaborative position with shared ownership of new learning between myself and participants in the research. It may be that teachers produce materials for use in their school.

The study will progress through two action research cycles during the school year (2007). Cycle one is planned for semester one and cycle two to proceed throughout semester two. It will involve participants in professional development meetings at the beginning of each semester and then approximately three more reflective afternoon meetings throughout each semester. Participants will be invited to complete a reflective journal or diary over three separate weeks at different times of the year and to complete a survey of teacher beliefs about children’s mental well-being. I would also like to interview each teacher individually throughout the year and work closely with teachers on classroom interventions and improvements.

Benefits to participants

Participants will benefit from a supported learning environment where researcher and participants collaboratively make decisions about improvements in the way social and emotional well-being is approached in classrooms. The learning process will be characterised by a personal win-win type relationship which is non-judgmental, non-threatening and accepting of participant’s interests and opinions. By closely monitoring teacher reflections and questions through email, building in reminders and affirming classroom practice teachers will feel supported. They will also have the opportunity to share and reflect with other schools and their situations. The mental well-being of children in the classes where participants teach should benefit from an intensive focus in this area.

An important part of this project is the professional development which will be guided by the participants’ needs and priorities. This project ultimately aims to bring long term improvements to the way mental well-being is promoted in schools and hence impact on whole-of-school approaches and culture. Having this topic as a focus for your school enables opportunity for whole-of-school discussion on the way mental well-being is promoted in classrooms.

How will participants’ privacy be protected?

The researcher will follow strict guidelines for confidentiality. The teachers’ and children’s names will not be recorded at all. The teacher questionnaires are entirely anonymous and all data will be kept in a secure locked location at the Centre for Children and Young People. Material will be archived and destroyed after five years. Material used in written or published articles will never be used in any way that would enable schools or individuals to be identified. Codes rather than names will be used to identify which school the teachers and children come from, but these will only be known to the researcher and will be kept secure and confidential.

Ethical approvals

This research project has been approved by the Ethics Committee of Southern Cross University, approval number ECN-07-01. The research has also been approved by the Lismore Catholic Education Office.

I will shortly telephone you to discuss the project and your school’s possible inclusion in it. Meanwhile, if you would like further information about the research please contact me on [phone number].

With kind regards
Mrs Shelley Thornton
PhD Candidate, Southern Cross University
Appendix B: Invitation to teachers to participate

October 2006
Name of primary school
Address of School

Regarding the research project titled: Promoting social and emotional learning: Improving the way children’s mental well-being is viewed in classrooms.

Dear [Name of Teacher]

My research is part of a PhD project supported by the Centre for Children and Young People at Southern Cross University and the Lismore Catholic Education Office. The aim of this research is to explore and identify teachers’ attitudes, values, beliefs and assumptions surrounding children’s mental well-being in Primary Schools. Through an acknowledgement of these attitudes and beliefs I and the participants will collaboratively identify the nature of present practice in children’s mental well-being. Teachers will be encouraged to implement new ideas and interests that enhance decision making skills and interpersonal relationships in the classroom. I intend to use an action research methodology to examine the change processes that occur in classroom practice when teachers’ focus implicitly and explicitly on social and emotional learning. Both participants and researcher will take a journey of inquiry learning. Together we will discover what it is about teacher thinking and teacher practices that make a difference for children’s mental well-being.

I would like to invite you to join me as co-researchers in this project. This would involve a progressive working relationship with myself, and other teachers in a collaborative learning process. It is an opportunity to participate in ongoing professional development over a 12 month period.

Why is the study important?

The importance of this study relates to how we as catholic school educators promote mental well-being in children. The following definition describing mental health expands the meaning of mental well-being which is about children realising their own abilities and coping with the normal stressors of life.

Mental Health is defined as a mental state of social and emotional well-being in which the individual realizes his or her own abilities, can cope with the normal stressors of life, can work productively or fruitfully and is able to make a contribution to his or her community (Hendren et al., 1993).

To be able to cope children need to develop resilience and ability to recover from negative events. Building resilience in young people is an important goal if we are to strengthen capacity and promote skills that help to reduce an imbalance in mental well-being. Resilience is not an innate attribute; rather it may be best described as an adaptive process involving interactions between risk and protective factors within an individual’s lived experience. Therefore resilience can be taught and practiced in classrooms. Resilient individuals utilise a set of coping skills and resources that allow them to deal effectively with stress and the development of resilience occurs when there is an interaction between an individual and stress. This is where the skills of social and emotional learning: knowing one’s emotions; making responsible decisions; regulating behaviour and emotion; having empathy for others and handling relationships or friendships plays such an important role.

The following mental well-being issues in schools such as developing resilience; reducing bullying; identifying depression; managing anxiety; understanding aggression; and knowing how learning difficulties can impact on children are at the forefront of mental well-being education. This research will consider how a classroom focus on social and emotional learning may improve outcomes for all children even though family and whole-of-school context are also important factors in building protective factors in children.
What will the study involve?

Initially Principals have been consulted and invited to participate in the study. Five primary schools that are willing to support the project will be recruited for the study. All schools will be from the Lismore Catholic Education Diocese. Teachers in these schools will then be invited to participate through an introductory staff meeting and expression of interest. The study will progress through two action research cycles with teachers during the school year 2007. Cycle one is planned for semester one and cycle two to proceed throughout semester two. I will be working closely with the classroom teacher during this time in a collaborative way to improve practice.

Teachers involved in the study will be asked to participate in the following activities:
- Questionnaire about attitudes, beliefs and assumptions around mental well-being education,
- Professional development in social and emotional learning through teacher meetings (6-8 throughout the year),
- Implementation of a focus area that seeks improvement of children's mental well-being
- Journal for one week at three different times in the year,
- Email communication with researcher on a regular basis, and
- An individual interview around the halfway point of project.

How will participants' privacy be protected?

This research will follow strict guidelines for confidentiality. The children's and teacher's names will not be recorded at all. All data collected from children and teachers will be kept in a secure locked location at Southern Cross University. Material will be archived and destroyed after five years. Material used in written or published articles will never be used in any way that would enable schools or individuals to be identified. Codes rather than names will be used to identify which school the children and teachers come from, but these will be known only to me and will be kept secure and confidential.

Ethics Committee Approval

This research project has been approved by the Southern Cross University Ethics Committee, project number ECN-07-01.

Please complete the attached Consent to Participate Form and return to your Principal. Thank you for taking the time to read the information carefully and your interest in this project. I look forward to working with you in the area of children's mental health.

With kind regards

Mrs Shelley Thornton
PhD Candidate
Southern Cross University
Appendix C: Teacher consent form

Regarding the research project titled: Promoting social and emotional learning: Improving the way children’s mental well-being is viewed in classrooms.

I, ______________________ have read and understood the attached information and any questions I have asked have been answered to my satisfaction. I agree to participate in this research and have been given a copy of this form to keep.

I understand that this research will involve the following activities over a 12 month period:

- Completing a questionnaire about attitudes, values, beliefs and assumptions around mental well-being in schools
- Professional development in social and emotional learning strategies through teacher meetings (6-8 throughout the year)
- Journal for one week at three different times of the year
- Email communication with researcher on a regular basis, and
- A 30 minute audio-taped interview.

I am also aware that I do not have to disclose anything I choose not to and that I can withdraw from the study at any time.

I understand that in all written work associated with this research that I will be identified by a pseudonym to ensure confidentiality. I give permission to Shelley Thornton to use written responses from myself in her study and to listen to and transcribe the audio-tapes, on the understanding that I have the right to read the transcripts and to request that details be deleted if I believe that they would identify me, or for any other reasons.

I know that the aim of the research is to identify and explore teacher beliefs about mental well-being in primary schools and that an action research process will be used to examine change processes that occurs in classroom practice when teachers focus on social and emotional learning as framework for improving mental well-being in classrooms. I understand that the project is co-funded by the Southern Cross University and the Lismore Catholic Education Office.

I know that I can contact Shelley Thornton on 0427 713138 during working hours or email to sthornton@lism.catholic.edu.au with any queries about the project.

I have read the information above and the information in the letter of invitation, and agree to participate in this study. I am over 18 years of age.

Name of Participant: ________________________________

Email address: ____________________________________________________________

Signature of Participant: ___________________________ Date: ____________

I certify that the terms of the form have been verbally explained to the subject, that the subject appears to understand the terms prior to signing the form.

Signature of Researcher: ___________________________ Date: ____________
Appendix D: Understanding children’s mental well-being in classrooms questionnaire

This questionnaire is part of an action research study being conducted by Shelley Thornton at Southern Cross University, Lismore. The purpose of this questionnaire is to explore and identify issues and beliefs surrounding social and emotional learning and children’s mental well-being education for the teachers involved in the study. The questionnaire will be a reference point throughout the action research process.

School Code ______

**Background Information**

Present role in school: ______________________________

Executive Position? Yes ☐ No ☐ If yes what role? ______________________________

Specialist Position? Yes ☐ No ☐ If yes what role? ______________________________

General Class Teacher ☐ Year Level 2006 ______ Year level 2007 ______

Previous experience or roles in school(s): ______________________________

Number of years teaching? ______

Intervention programs you may have initiated or worked on in your school:

_______________________________________________________________________________

Specialist position? Yes ☐ No ☐ If yes what role? ______________________________

Other _________________________________________________________________________

Qualifications: __________________________________________________________________

**Section A**

This section asks you to reflect on your beliefs and assumptions about mental well-being

1. How would you define mental well-being in children?

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

2. As someone who works with children what do you see are the most important aspects for children when they come to school?

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

3. These characteristics are commonly found in classrooms where the mental well-being of students is a priority. Select three characteristics from this list that are a priority for you.

☐ a safe, caring and orderly environment.

☐ modelling positive relationships for children.

☐ cooperative learning strategies.

☐ a focus on the emotional development of children.
a focus on the engagement of children.
- including positive behaviour support strategies.
- using problem solving strategies to manage relationships.
- focuses on individual needs of children.
- uses motivational strategies.
- encourages independent learning.
- empathy is practiced in my classroom.
- teacher feelings are shared with children regarding classroom behaviour

Please Comment on why you have chosen each of these three characteristics:

a. __________________________________________________________
   __________________________________________________________

b. __________________________________________________________
   __________________________________________________________

c. __________________________________________________________
   __________________________________________________________

4a. How confident are you in carrying out the following tasks in your classroom? (Please rate yourself from 1 to 5 on each of the questions below).

<table>
<thead>
<tr>
<th>Not at all confident</th>
<th>A little confident</th>
<th>Quite confident</th>
<th>Very Confident</th>
<th>Extremely Confident</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Managing violent students _______
Identifying a student who may be having a stress reaction to a major disaster/trauma _______
Managing students’ reactions to a major disaster/trauma _______
Implementing a behaviour plan for a student who is refusing to attend school _______
Identifying a student who may have an anxiety disorder _______
Identifying a student who may have depression _______
Identifying a student who may have a communication/language disorder _______
Implementing a behaviour plan for a student with poor social skills _______
Making curriculum modifications for a student with attention-deficit/hyperactivity disorder _______

Please Comment:

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
4b. Rank the following mental well-being issues which may be a concern for you as to how important they are to your teaching? Please rank from 1 (least important) to 9 (most important).

_____ Disruptive classroom behaviour
_____ Disruptive playground behaviour
_____ Bullying / Cliques
_____ Students who are not motivated to learn
_____ Depression/Anxiety
_____ Violence
_____ ADHD/Autism/ Obsessive Compulsive Disorder
_____ Social Isolation
_____ Other ________________________________

Please comment:
______________________________________________________________________________
______________________________________________________________________________

5a. Which of the following life events and situations do you think are more likely at your school to put children at risk of developing a mental well-being imbalance? Please rank from 1-8.

- Physical or sexual or emotional abuse
- School transitions
- Divorce and family break-up
- Death of a family member
- Physical illness/impairment
- Poverty
- Family violence/ conflict at home
- Lack of parental interest in their education
- Other ________________________________

5b. To what extent do you think the issues listed above impact on your classroom?

Not at all 1  
To a certain extent 2  
Yes, they do 3  
Quite a lot 4  
Very much 5

Please Comment:
______________________________________________________________________________
______________________________________________________________________________

6. What three (3) things would you do to support a child if one of these life events was affecting a child in your class?

a) __________________________________________________________

b) __________________________________________________________

c) __________________________________________________________
Please rate the following statements from 1 strongly disagree to 5 strongly agree.

7. Schools should place a high priority on improving the mental well-being of students.
   1  2  3  4  5
   Please Comment:________________________________________________________
  _______________________________________________________________________
  _______________________________________________________________________

8. Teachers can play a major role in identifying students who may have mental well-being issues.
   1  2  3  4  5
   Please Comment:________________________________________________________
  _______________________________________________________________________
  _______________________________________________________________________

9. Are there barriers that prevent you from engaging more in the social and emotional well-being of your children? Yes ___ No____
   If so, what are they?
   1  2  3  4  5
   Please Comment:______________________________________________________________________________
   ___________________________________________________________________________________________

Section B
The questions in this section are about the teaching of social and emotional skills.

10. What do you do in your every day practice that develops children’s social and emotional learning?
   1  2  3  4  5
   __________________________________________________________________________________________

11. The inclusion of social and emotional learning into everyday practice is an important intervention for students with mental well-being issues. True or False
   Please Comment:______________________________________________________________________________
   ___________________________________________________________________________________________

Rate the extent to which you disagree or agree with the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Neither Agree nor Disagree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Staff believe it is important to teach social and emotional skills to students</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>13. Students can be taught social and emotional skills</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>14. Students who are socially and emotionally more competent learn more at school</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>15. I know how to help students to develop an awareness of their own feelings</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>16. I know how to help students to develop an awareness of the thoughts and feelings of other people</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>17. I know how to help students to develop skills to manage their own emotional or social or behavioural difficulties</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>18. I know how to help students to develop skills to make responsible decisions</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>19. I know how to help students develop skills to establish healthy relationships with other children</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
20. My teaching programs and resources help students to develop an awareness of their own feelings

<table>
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<tr>
<th></th>
<th>1</th>
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<th>4</th>
<th>5</th>
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</thead>
</table>

21. My teaching programs and resources help students to develop an awareness of the thoughts and feelings of other people

<table>
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<th>3</th>
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<th>5</th>
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</table>

22. My teaching programs and resources help students to develop skills to manage their own emotional or social or behavioural difficulties

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</table>

23. My teaching programs and resources help students to develop skills to make responsible decisions

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<th>5</th>
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</table>

24. My teaching programs and resources help students to develop skills to establish healthy relationships with other children

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25. I can provide effective support for parents/caregivers about students’ emotional or social or behaviour difficulties

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<th>3</th>
<th>4</th>
<th>5</th>
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</table>

26. Which of the following commercial or school based programs have you used that incorporate social and emotional learning skills? Please tick and rate their usefulness.

1 no use at all to 5 very useful (6 never heard of the program)

- You Can Do It
  ![Rating Scale](1 2 3 4 5 6)
- Seasons For Growth
  ![Rating Scale](1 2 3 4 5 6)
- Rock and Water
  ![Rating Scale](1 2 3 4 5 6)
- Bounce Back
  ![Rating Scale](1 2 3 4 5 6)
- VAM (Value added meaning)
  ![Rating Scale](1 2 3 4 5 6)
- Social Skills Program (Noble 2004)
  ![Rating Scale](1 2 3 4 5 6)
- Peer Support Program
  ![Rating Scale](1 2 3 4 5 6)
- LAP (Learning Assistance Program)
  ![Rating Scale](1 2 3 4 5 6)
- Positive Behaviour Supports (Playground)
  ![Rating Scale](1 2 3 4 5 6)
- Yes You Can
  ![Rating Scale](1 2 3 4 5 6)
- Other – Please Name ________________________________

27. Describe how the above programs if any have changed or influenced your thinking around social and emotional learning.

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
## Appendix E: Anticipated timeframe for research activities

<table>
<thead>
<tr>
<th>Term 1, 2007</th>
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</table>
| **Week 6-10** | * Introductory talks in schools  
* Recruiting participants |

<table>
<thead>
<tr>
<th>Term 2, 2007</th>
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</table>
| **Week 4** (Plan) | * Participants complete questionnaire  
* Meeting 1 - Initial planning workshop with teachers. The workshop will build in processes for classroom use and provide a method for gathering data around children’s mental well-being. The following focus questions will be discussed and considered in between meetings.  
  o What do I want to change in my teaching practice in order to better support children’s mental well-being and include social and emotional learning?  
  o What is my first step in making changes to my teaching practice to include social and emotional learning? What’s my first goal?  
  o What do I need to learn more about to implement changes? |

| **Week 5** (Act) | * Teachers begin thinking about innovations to classroom practices.  
* Begin email contact with participants. |

| **Week 7** (Observe) | * Meeting 2 - with participants in schools to review main focus questions and classroom practices around social and emotional learning (1.5hrs)  
* Develop procedure for random selection of children for focused group discussion – gain consent from parents. |

| **Weeks 9** (Reflect) | * Children’s views - School visits to work with children in focused group discussion activity. (1hr session with children during school hours)  
* Diary - Teachers to select one week in this period to document stories or case studies around social and emotional learning. (15mins reflection for 3 days) |

<table>
<thead>
<tr>
<th>Term 3, 2007</th>
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<tbody>
<tr>
<td><strong>Week 3</strong> Plan</td>
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</table>

| **Week 4** | * Individual Interview with teachers in study (30min interview) |

| **Week 7-8** (Act, Observe) | * Meeting 4 - Attempt to meet with all participants as one group on one site. The aim would be to share new learning, strategies and approaches around children’s well-being across schools. Review main focus questions and classroom practices around social and emotional learning. |

| **Week 8-10** (Reflect) | * Diary - Teachers to select one week in this period to document stories or case studies around social and emotional learning. (15mins reflection for 3 days) |

<table>
<thead>
<tr>
<th>Term 4, 2007</th>
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<tbody>
<tr>
<td><strong>Week 1-3</strong> (Plan, Act)</td>
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</tbody>
</table>

| **Week 4-7** (Observe) | * Children’s Views - School visits to work with children in focused group discussion activity. (1hr session with children during school hours) |

| **Week 8-10** (Reflect) | * Review the year and evaluate the processes used in each cycle as a way forward. Decide on the direction for further research in 2008. |
## Appendix F: Teacher information sheet on SEL

<table>
<thead>
<tr>
<th>Defining Social and Emotional Learning</th>
<th>What is it?</th>
<th>We recognise it when children can say….</th>
<th>Why is it important in children?</th>
</tr>
</thead>
</table>
| Self-awareness and knowing one’s emotions | Enables children to know how they learn; how they relate to others; what they are thinking and what they are feeling. | - I know how it feels to be happy, sad, scared or excited.  
- I can predict how I’m going to feel in a new situation or meeting new people. | - Self Awareness helps children raise their consciousness of self so as they are empowered to make choices.  
- It can give inner peace and enhances self esteem and self worth. |
| Motivation and responsible decision making. | Intrinsically motivated learners recognise and derive pleasure from learning. Motivation enables learners to set themselves goals and work towards them, to focus and concentrate on learning, to persist when learning is difficult and to develop independence, resourcefulness and personal organisation. | - I know some ways to encourage other children who use bullying behaviours to make choices.  
- I can set a challenge or goal, thinking ahead and considering the consequences for others and myself. | - Contributes to enhancing children’s health through drug prevention and citizenship or service learning.  
- Assists in developing perseverance and resilience.  
- Enhances planning and organisation skills. |
| Self-management and managing emotions | In managing feelings, children use a range of strategies to recognise and accept their feelings. They can use this to regulate their learning and behaviour eg. Managing anxiety or anger with protective behaviours. | - I know what triggers my anger and how our bodies change when we start to get angry.  
- I understand that the way I express my feelings can change the way other people feel. | - Helps children to develop safe behaviours and practices.  
- Teaches children about delayed gratification. |
| Empathy and Social Awareness | Empathy involves understanding others; anticipating and predicting their likely thoughts, feelings and perceptions. It involves seeing things from another’s point of view and modifying one’s own response, in the light of this understanding. | - I know how it can feel to be excluded or treated badly because of being different in some way.  
- I know how others may be feeling when they are in an unfamiliar situation and can help them to feel valued and welcomed. | - Contributes to enhancing children’s metacognitive processes.  
- Enhances resilience when children understand the behaviours and emotions of others. |
| Relationship management and social skills | Social skills enable children to relate to others, take an active part in a group, communicate with different audiences, negotiate, resolve differences and support the learning of others. | - I can accept and appreciate people’s friendship and try not to demand more than they are able or wish to give.  
- I can take a role in a group and contribute to the overall outcome.  
- I can recognise ‘put downs’ and know how they affect people, so I try not to use them. | - Enhances interpersonal communication for lifelong friendships.  
- Encourages assertive behaviour.  
- Helps children to know how to resolve conflicts and to ensure everyone feel positive about the outcome.  
- Allows children to make positive attachments. |
Appendix G: Discussion scaffold for Meeting One

Collect consent forms and clarify the importance of following ethical boundaries in research, such as codifying all data collected during teacher meetings.

1. Introductory Getting to Know Activity

Hot Potato – on an A4 piece of paper write your name and class or role in school along with the most positive thing to happen to you at school this year; pass on; comment on the persons style of communication; pass on; comment on a possible challenge for that person; pass on; comment on the persons gifts or talents; pass on; comment on the persons favourite teaching style. Repeat process for bigger group.

2. What kind of research are we doing? What is my role and what is your role?

What would you like to have at the end of the research process? Each participant writes on poster chart their desired outcome. Discuss examples:

a) Outsider doing research on insiders (teachers) eg. I give you a questionnaire and you return; I collate and quantify
b) Outsider assigns tasks with incentives where the insiders do the research for the outsiders
c) Outsider and insiders form a reciprocal collaboration team where the knowledge is shared to create new understanding. The research is a co learning relationship with and by both insiders and outsider.

Action Research is a form of collective and self-reflective enquiry undertaken by participants in order to improve their social or educational practices, their understanding of these practices and the situations in which these practices are carried out.

Emphasise today is about gathering your ideas and thoughts and is essentially a planning session with background information used to inform planning decisions.

3. Begin discussion around teacher’s attitudes, values, beliefs and assumptions about children’s mental well-being

I need to generate professional dialogue around some of the questions or issues raised in the questionnaire. Was there a significant issue raised in the questionnaire for you? Did the questionnaire raise sensitive issues – if so what were they? Was there a question not asked?

How would you define children’s mental well-being? (Refer to questionnaire)

As someone who works with children what do you see are the most important aspects for children when they come to school?

What do you think might be the nature of classrooms where the mental well-being of students is a priority?

Tell me about some of your experiences working with children who have had significant mental well-being issues. How confident were you in dealing with these children?

4. Why teach children about the social and emotional aspects of learning and what are the social and emotional skills?

- What social and emotional skills are important? List on chart.
- Ask Participants, working in pairs, to spend a couple of minutes listing, on blue sticky notes (one per note) the classroom issue; children’s mental well-being issue or behaviours that they are concerned about in school – particularly those that are a barrier to learning.
- Refer to teacher information sheet about SEL. Ask individuals to read carefully. Is this familiar to you? Share with participants a resource sheet that summarises social and emotional skills in terms of children’s language and behaviour. Brainstorm on charts other words associated with SEL aspect.
• Ask participants to discuss and agree alternative, opposite behaviours of concern, and to write them on yellow sticky notes (one per note).
• Collect in the blue notes and make a big thing of throwing them away – these are the behaviours you don’t want in school.
• The behaviours on the yellow sticky notes are the behaviours that we do want to nurture. Ask the participants to stick the yellow notes on the flipchart under the appropriate social and emotional aspect of learning. Any that don’t fit should be placed under the other heading. Talk about the importance of any sticky notes that are placed in the other category.

Discuss behaviours as positive ones and note how they fit into five categories. Go back to Questionnaire to discuss part B.

5. Consider the four key focus questions that I would like all of us to consider throughout the research:
   • What do I want to change in my teaching practice in order to support children’s mental well-being in my classroom?
   • What is my first step in making changes to my teaching practice to include social and emotional learning? What’s my first goal?
   • What do I need to learn more about to implement changes?
   • Success of this project will run on what you want to progress in your classroom.

6. What would be the best way to reflect on these questions? Could we design a method for reflection that is most useful for you?

7. We need to plan for the next few weeks and into term 2. Let’s consider this guide for the year ahead.
Appendix H: Semi-structured interview scaffold

Plan

1. Think back to the first meeting where the Aspects of Social and Emotional learning were introduced and where we discussed your aspirations and goals for the children in your school. How did this model or way of approaching children's mental well-being impact upon your actions?

2. What was significant about your choice of focus area that got you started?

Act

3. What have you changed or improved in your classroom practice that enhances social and emotional learning? Are there any specific interventions or activities that you have implemented since the beginning of the study? If so what are they and how did they operate?

Observe

4. List any insights into your own values, attitudes, beliefs and assumptions about children's mental well-being education that affect the way you teach or have influenced the way you manage your classroom? Where did these insights come from?

5. Have your views changed since the project began?

6. How have you overcome any blocks or difficulties in implementing a children's mental well-being focus area?

7. What has been the most significant change for the children or groups of children in your class? Have you noticed relationships changing within the classroom?

Reflect

8. What do you believe is the one most important thing in daily classroom practice that influences the way children learn social and emotional skills? How do you think a focus on social and emotional learning has impacted on the way you think about your classroom and the way you behave?

9. How do you think your classroom practices reflect positive social interaction and a positive school culture?

10. What revision will you take to continue or add to your focus area in children’s mental well-being? What have we learnt in this first phase and what new or revised action is necessary to continue?

11. Do you have any thoughts or feedback on your participation in the project itself thus far?
Appendix I: Scaffold for semi-structured discussion to ascertain sustainability

Previous learning
- Have you been able to keep a focus on children’s mental well-being? If so what has sustained this focus?
- What has sustained your involvement in social and emotional aspects of learning?
- What was significant about our discussions around social and emotional well-being that has remained with you in to 2008?
- Has your capacity to engage in social and emotional learning been enhanced?

Classroom practices
- At the end of 2007, when asked about what you would do tomorrow that would make a tremendous difference to children’s mental well-being (e.g. being positive; taking more time, listening) were you able to achieve that wish and why?
- What kind of planning did you do to be more socially and emotionally focused?
- What kind of actions have you taken or practiced?

Planning - New concerns, new starting points
- What children’s mental well-being concerns have you noted this year?

Acting - Innovations
- Have you included any new or modified classroom practices that would support children’s mental well-being?
- How have you incorporated social and emotional learning into your classroom?

Observing - Changes to perspective
- Has anything changed in the way you approach children with mental well-being concerns?

Reflecting - Professional development
- What kind of professional development or learning experience may assist you with supporting children’s mental well-being?
Appendix J: Sample of initial feedback to participants during Meeting 2 (from School B)

1. **What do we want at the end of the research?**
   - Ideas, strategies and activities to develop children’s mental well-being and social and emotional skills - a show bag of ‘tricks’
   - Knowing more about the issues, reasons, and causes as to why children have mental well-being problems and variety of issues.
   - To get parents to identify the issues linked to their children’s mental well-being – that relate to parenting, relationships or home routines
   - Parents of emotionally disturbed children becoming more accountable
   - To understand how much mental well-being, or lack of it impacts on a child’s learning
   - To be able to foresee problems and have tools for identification
   - Enhancing teacher skills to deal with different issues so as to help most kids
   - Strategies to manage anxiety
   - Becoming more aware of mental well-being of children – raising consciousness of children’s mental well-being as a classroom issue.

2. **What we’re saying at School B**

   **What’s happening already?**
   - Social Skills program
   - Listening to children and dealing with individuals
   - Seasons for Growth
   - You Can Do It
   - Games Factory
   - Sharing a problem - refer to counsellor or seek help from other teachers or administration
   - Focus on positive relationships and conversations about what is safe

   **Attitudes**
   - Mental well-being for children means not having pressures put on them.
   - Curriculum adjustments are easier to manage than behaviour.
   - A safe caring and orderly environment is paramount to a child’s mental well-being at school.
   - School can provide a supportive sanctuary when home life may be unsafe.
   - Parent support is needed to implement strategies at home for successful development and change to occur.

   **Values**
   - A safe caring and orderly classroom leaves room for learning and developing relationships.
   - Modelling positive attitudes and positive relationships in our classrooms is paramount.
   - The role of outside expertise is an important part of problem solving the needs of individual children.
   - Empathy is valued for its importance in classroom practices and problem solving.
   - Independent thinking and action.

   **Beliefs**
   - Children’s mental well-being is dependent on a happy supportive home life and parents.
   - Dynamics or relationships within a group of children, affects children’s mental well-being.
   - As teachers spend a lot of time with children they have an opportunity to improve children’s mental well-being and notice changes.
   - Disruptive classroom behaviour has more impact on teaching than disruptive playground behaviour.
o Bullying or Cliques and children with ADHD/autism are important mental well-being issues that impact on teaching.
o Confidentiality is needed when dealing with children who are experiencing unsafe home environments.
o With more knowledge, skills and time teachers could become more engaged in social and emotional learning.
o Legal implications of intervention and whether to act on a situation cause teachers to act cautiously and reticently.
o Teachers can become anxious about the correct identification of children with particular needs.
o A child’s behaviour or ways of managing emotion does not necessarily indicate a mental well-being issue.
o Classroom routines help children to relax and focus on learning.
o Understanding the culture of the school means understanding the issues that arise within the school.
o When teachers are supported by their family, their peers and their administration they can survive periods of uncertainty.

Assumptions
o Good teachers place a high priority on improving the mental well-being of students.
o Parents have a role to play in supporting a child’s mental well-being as they are the primary educators.

Teacher’s aspirations for children’s mental well-being

<table>
<thead>
<tr>
<th>Self Awareness</th>
<th>Self Management/Regulation</th>
<th>Motivation and decision making</th>
<th>Empathy</th>
<th>Relationships and social skills</th>
</tr>
</thead>
</table>
| • Accepting responsibility for own actions | • taking responsibility for actions  
• "I can behaviour"….  
• Including others  
• Awareness of non-verbal actions and the impact this has on other children  
• Acceptance of consequences  
• I can learn to be a good sport and know when I get out  
• Inclusiveness and openness – awareness of how their body language sends messages  
• Respect at all times  
• Nice talk or no talk | • Delaying Rewards  
• Intrinsic Rewards  
• Independent Workers  
• Staying on Task  
• Independent and ‘on task’ "I can do This"  
• Motivation to set a challenge or goal | • Selflessness  
• Team member  
• Everyone has a right to be safe and happy  
• Being aware that you are hurting others  
• Caring  
• Listen to others  
• Develop awareness of others  
• Develop empathy and modify response to situations | • Positive comments and looking for good in others  
• Know what is positive  
• Inclusiveness |

221