

Educational Psychologists' role in promoting children's mental and emotional well-being during the pre-school years: An explorative study in Wales

Student Name: Rhiannon Slade

Doctorate in Educational Psychology (DEdPsy) 2015-2019

Student Number: 0404674

Abstract

Fifteen percent of children and young people in Wales meet the medical criteria for mental health issues (National Assembly for Wales, 2018). Seventy percent of children who experience such difficulties in the UK have inadequate intervention at a sufficiently early age (Children's Society, 2008). Consequently, increased legislative, practical and theoretical emphasis is placed upon promoting good mental health and emotional well-being (Health Committee, 2014, Welsh Government 2010). Particular emphasis is placed on promotion during the early years, as the most effective interventions are those that the target pre-school years (Weare & Gray, 2011). Despite the fact that Educational Psychologists (EPs) have the appropriate skills and knowledge to work in this area (Greig, 2007) and despite a number of professional reviews (e.g., Farrell et al., 2006), a paucity of information focuses on exploring EP's role in promoting emotional well-being during the pre-school years.

The current research explored the role that EPs in Wales have in promoting emotional well-being during the pre-school years by adopting a mixed-methods two part study. EPs were recruited to obtain information regarding the work they complete in this area, the facilitators and barriers to this work, and ways forward for future practice. Strand one collected data from EPs who work for Local Authorities in Wales whereas strand two collected data from EPs employed by Flying Start; a national initiative designed to work with families and children during the formative years. An online questionnaire was distributed and findings were presented using descriptive statistics and thematic maps. The research findings are discussed in relation to existing theoretical and research literature and the implications for Educational Psychologists' professional practice are discussed. The study provides original and valid insight into the role that EPs have in promoting mental and emotional well-being in Wales.

Declaration

This work has not been submitted in substance for any other degree or award at this or any

other university or place of learning, nor is being submitted concurrently in candidature for

any degree or other award.

Signed:

R. Slade

(candidate) Date: 20th May 2019

STATEMENT 1

This thesis is being submitted in partial fulfilment of the requirements for the degree of

DEdPsy.

Signed:

R. Slade

(candidate) Date: 20th May 2019

STATEMENT 2

This thesis is the result of my own independent work/investigation, except where otherwise

stated, and the thesis has not been edited by a third party beyond what is permitted by Cardiff

University's Policy on the Use of Third Party Editors by Research Degree Students. Other

sources are acknowledged by explicit references. The views expressed are my own.

Signed:

R. Slade

(candidate) Date: 20th May 2019

STATEMENT 3

I hereby give consent for my thesis, if accepted, to be available online in the University's

Open Access repository and for inter-library loan, and for the title and summary to be made

available to outside organisations.

Signed:

R. Slade

(candidate) Date: 20th May 2019

iii

STATEMENT 4: PREVIOUSLY APPROVED BAR ON ACCESS

I hereby give consent for my thesis, if accepted, to be available online in the University's Open Access repository and for inter-library loans after expiry of a bar on access previously approved by the Academic Standards & Quality Committee.

Signed: R. Slade (candidate) Date: 20th May 2019

Acknowledgements

First and foremost, I would like to extend my deepest gratitude to my supervisor, Dr Ian Smillie, for your unfailing support throughout the duration of this research. Thank you also for your constant words of encouragement, your patience, your kindness, for helping to organise my thoughts, for teaching me how to become a reflective research practitioner and for inspiring intellectual curiosity. Our supervision sessions have had a huge impact. Thank you to Andrea and Dale for your support over the last four years.

I would also like to express my heart felt gratitude to my family whose inspiration and support has encouraged me through, once again. Thank you to my parents and mother-in-law for looking after Alys during those crucial months of writing up!

To two extremely special people, my husband Alex and our daughter Alys. Alex, once again, you have treated my ambition as if it were your own. During my absence and stress you have loved and supported me unconditionally – again! There is simply nothing I can say to thank you enough. Alys, my wonderfully happy daughter, you have brought new inspiration and new light into my life, you have provided me with courage to push through and you have shown me the true purpose of being present in each and every moment. I love you both very much.

Ultimately, gratitude is due to the Educational Psychologists who gave so generously of their time. Without them this thesis would not have been possible – thank you.

Summary

The thesis is divided into three main parts: 1. A literature review, 2. An empirical study, and 3. A critical appraisal. Part 1 is further divided into two parts; 1A and 1B. Part 1A provides a contextual background of the phenomenon under study. It begins by providing an amplification of the title and describing the theoretical underpinning of the thesis. The social constructions relating to Mental and Emotional Well-Being (MEWB) are reviewed and different perspectives on promoting MEWB are considered. The importance of the pre-school period is discussed to illustrate different reasons why promoting MEWB is important within this age range. Part 1A concludes by describing the national context for the thesis. Part 1B aims to provide a more detailed exploration of the Educational Psychologists' role in promoting MEWB. A systematic literature review is conducted which poses the question "What is the Educational Psychologists role in promoting MEWB?" A critical discussion of the literature search is provided. Part 1B highlights a gap in studies relating to the pre-school years and concludes by introducing the current research, the aims and research questions.

Part 2 is an account of the empirical study, which aimed to explore the Educational Psychologist's (EP) role in promoting pre-school aged children's MEWB; considering the views of EPs across Wales. Two strands of the study is included; Strand 1 addressed Local Authority EP's views whereas Strand 2 explored the views of EPs from one specialised Welsh organisation, Flying Start. The current practice of EPs; facilitators and barriers to EPs engagement in this work; and ways forward for improved MEWB practice during the preschool years is considered. This section considers aspects such as methodology, results, and implications for EP practice.

Part 3 is a critical appraisal of the research process and the researcher's own professional development. The critical appraisal is presented in two sections. The first section provides an overview of the research process, which contributed to the body of knowledge. The second section is a critical account of the development of the research and of the research practitioner.

Contents

Abstract ii	
Declarationiii	
Acknowledgementsv	
Summaryvi	
Index of Figuresxiii	
Index of Tablesxv	
Abbreviationsxvi	
PART 1: Major Literature Review	1
Overview of the Literature Review	2
Part 1A: The Issue and Importance of the Topic Area	3
1.1 Amplification of the Thesis Title	3
1.2 Theoretical Underpinning of the Research	4
1.3 Mental and Emotional Well-Being (MEWB)	4
1.3.1 Social constructs of MEWB and Mental Health	4
1.3.2 Promoting MEWB	9
1.3.3 Implementing Theory to Programmes to Promote MEWB	16
1.4. The Pre-School Years	17
1.4.1 The Importance of the Pre-School Years	18
1.4.2 The Impact of Pre-School Provisions	22

1.5 The National Context; Wales	24
1.5.1 Government Guidance to Promoting MEWB	24
1.5.2. A Welsh National Initiative: Flying Start	27
1.6 Summary of Part 1A	29
Part 1B; Systematic Literature Review	31
1.7 Overview	31
1.7.1 Formulate Review Question	31
1.7.2 Defining, Searching for and Screening the Studies for Review	32
1.8. Critical Review of Existing Research and Empirical Findings	36
1.8.1 EP Use of Direct Therapeutic Interventions in Relation to MEWB	37
1.8.2 EP Use of Consultative Approach in Relation to MEWB	40
1.8.3 EP Use of Training and Supervision in Relation to MEWB	43
1.8.4 Whole School Approaches to Improve MEWB	45
1.8.5 EPs engagement in Multi-Agency Work in Relation to MEWB	46
1.8.6 Perception of the EP role in promoting MEWB	48
1.8.7 Summary of the Research Reviewed	48
1.9 What Role do EPs have in the pre-school years?	51
1.10 Current Research	52
References	55
PART 2: Major Empirical Paper	69

Abstract	70
2.1 Introduction	71
2.1.1 Background and Context to the Topic of Study	71
2.1.2 MEWB	71
2.1.3 The Pre-School Years	77
2.1.4 Summary and Current Research	79
2.2 Method	81
2.2.1 Methodology	81
2.3 Strand 1	83
2.3.1 Measure	83
2.3.2 Participants	83
2.3.3 Procedure	84
2.4 Strand 2	84
2.4.1 Measure	84
2.4.2 Participants	85
2.5 Ethical considerations for Strand 1 and 2	87
2.6 Data Analysis for Strand 1 and 2	88
2.7 Results	90
2.7.1 Overview of the analysis	90
2.7.2 Principal Research Question 1: What are the Local Authority Educational	
Psychologists' constructions of their role in promoting mental and emotional well-bein	ng in
the pre-school years?	90

2.7.3 Principal Research Question 2: What are the Flying Start Educational Psychologists'	
constructions of their role in promoting mental and emotional well-being in the pre-school	
years?	107
2.8 Discussion	117
2.8.1 Summary of Findings	118
2.8.2 Relevance to Education and Educational Psychology	122
2.8.3 Strengths, Limitations and Future Studies	126
References	131
PART 3: Major reflective Account	130
3.1 Introduction	140
3.2 Contribution to Knowledge	141
3.2.1 Inception of the Research Topic	141
3.2.2 Identifying and Exploring Gaps in the Research Literature	143
3.2.3 Development of the Research Questions	145
3.2.4 Contribution of Research Findings to Existing Knowledge	145
3.2.5 Contribution to Future Research	147
3.2.6 Relevance to EP practice	147
3.2.7 Dissemination of Research Findings	149
3.3. Critical Account of the Development of the Research and Research Practitioner	150
3.3.1 Multiple roles	151
3.3.2 The Choice to Adopt an Exploratory Approach	151

3.3.3 The Researcher's Philosophical Positioning	152
3.3.4 Methodological decisions	155
3.3.5 Reflections on the Research Process and Conclusions	166
References	168
Appendix I: Table of database search terms and returns	175
Appendix II: Details of the 13 studies discussed in the literature review	178
Appendix III: Gatekeeper letter to Principal Educational Psychologists (Strand 1 and 2))205
Appendix IV: Information Sheet (Strand 1 and 2)	208
Appendix V: Consent form (Strand 1 and 2)	210
Appendix VI: Debrief (Strand 1 and 2)	211
Appendix VII: Questionnaire (Strand 1	212
Appendix VIII: Questionnaire (Strand 2	216
Appendix IX: Illustration of the questionnaire questions and their association with pr	rincipal
and secondary research questions	219
Appendix X: Thematic analysis to explore the barriers to EP engagement in work to p	romote
MEWB in the pre-school years (RQ1b)	221
Appendix XI: Thematic analysis to explore the facilitators to EP engagement in v	
promote MEWB in the pre-school years (RQ1b)	239

Index of Figures

1	The Mental Health Continuum (Santelices, Page, Drummond, date unknown)	p.6
2	Features of good MEWB (WG, 2010; 2015)	p.7
3	Beattie's (1991) model of health promotion applies to promoting well-being	p.11
4	Model of influences on health (Tilford, 2006)	p.12
5	Model of ACE impact across the lifespan (Public Health Wales, 2015)	p.14
6	Macdonald & O'Hara (1998) ten elements of promoting MEWB	p.15
7	Systemic map of research activity (Gough, 2007)	p.31
8	Diagrammatic map of literature review	p.35
9	Systemic synthesis of research evidence (Gough, 2007)	p.36
10	The Mental Health Continuum (Santelices, Page, Drummond, date unknown)	p.72
11	Features of good MEWB (WG, 2010; 2015)	p.73
12	Macdonald & O'Hara (1998) ten elements of promoting MEWB	p.74
13	Research questions	p.80
14	Research procedure for Strand 1 of the study	p.84
15	Research procedure for Strand 2 of the study	p.86
16	The percentage of time EPs reported that they spent engaged in work aimed to promote	p.91
	MEWB in school aged children. N=41.	
17	Nature of work EPs reported to have engaged in to facilitate MEWB in school aged	p.92
	children, Number of participants=41	
18	Percent of time EPs reported to have spent working with pre-school aged children,	p.93
	Number of participants=41	
19	Percent of time EPs reported to have spent promoting MEWB in pre-school aged	p.93
	children, Number of participants=41	

20	The number of EP participants who reported to deliver brief, short, mid, long term	p.94
	interventions (N= 24).	
21	Nature of work EPs engage in to promote MEWB in pre-school aged children.	p.95
22	Thematic analyses to explore the barriers and facilitators to EP's working to promote	p.96
	MEWB in the pre-school years.	
23	Main themes that arose from research question 1c; Ideas for change and improvement	p.102
24	Raw data. Participant responses to Q17 (How important is promoting MEWB in the pre-	p.108
	school years?)	
25	The percentage of time EPs reported to have spent engaged in work aimed to promote	p.109
	MEWB in pre-school aged children (Flying Start workers). N = 8	
26	Nature of work EPs reported to have engaged in to promote MEWB in pre-school aged	p.110
	children, Flying Start EPs. N=8	
27	The number of participants who reported that they deliver brief, short, mid, long term	p.111
	interventions, Flying Start EPs (N=8).	
28	Themes for RQ 2b; facilitators and barriers	p.112
29	Main themes from research question 1c: Ideas for change and improvement	p.115
30	Fee (2010) model for EPs to engage in MH and psychological well-being work with	p.121
	children and young people	

Index of Tables

1	Risk and resilience factors for CYP (Young Minds, 2016)	p.10
2	WG initiatives to support MEWB	p.25
3	Criteria for judging weight of evidence (Gough, 2007)	p.37
4	SWOT analysis exploring the EP's role using therapeutic interventions (Atkinson et	p.39
	al., 2011)	
5	SWOT analysis exploring the EP's role using therapeutic interventions (Atkinson et	p.76
	al., 2011)	
6	Ethical considerations for Strand 1 and Strand 2 of the study	p.87
7	Account of thematic analysis conducted (Braun & Clark, 2006)	p.89
8	Illustrative quotations of themes and sub-themes for research question 1b; facilitators	p.97
9	Illustrative quotations of themes and sub-themes for research questions 1b; barriers	p.99
10	Illustrative quotations of themes and sub-themes for research question 1c; change	p.103
11	Illustrative quotations for the themes of research question 2b; Facilitators	p.113
12	Illustrative quotation for the themes of research question 2b; Barriers	p.114
13	Illustrative quotation for themes of research question 2c; Change	p.116
14	Implications for EP practice based upon the results of this research	p.123
15	Strengths and limitation of the study	p. 126
16	Assessing the trustworthiness of the study (Guba & Lincoln, 1986)	p.162

Abbreviations

CAMHS Child and Adolescent Mental Health Services

CBII Child Behaviour Intervention Initiative

CBT Cognitive Behaviour Therapy

CP Clinical Psychologist

CYP Children and Young People

DfES Department for Education and Skills (Welsh Government)

DfHSS Department for Health and Social Services (Welsh Government)

EP(s) Educational Psychologist(s)

EPPE Effective Provision of Preschool Education

IWM Internal Working Model

LA Local Authority

OCD Obsessive Compulsive Disorder

MEWB Mental and Emotional Well-Being

MH Mental Health

NG Nurture Group

NICE National Institute for Clinical Excellence

PCP Person Construct Psychology

PTSD Post-Traumatic Stress Disorder

SDQ Strengths and Difficulties Questionnaire

TaMHS Targeting Mental Health in Schools

UK United Kingdom

WG Welsh Government



Educational Psychologists' role in promoting children's mental and emotional well-being during the pre-school years: An explorative study in Wales

PART 1: Major Literature Review

Word count: 9,971

Overview of the Literature Review

The major literature review is composed of two major parts:

Part 1A: Provides a contextual and theoretical background to the phenomenon of study. Mental and emotional well-being (MEWB) (the social constructions of MEWB and approaches to promoting MEWB) is first discussed before introducing the pre-school years and the importance of promoting MEWB at this age. As the study is conducted in Wales and informed by Welsh government publications (e.g., Welsh Government, 2010b), Section 1A concludes by describing the Welsh national context for the thesis.

Part 1B: Contains a systematic review of the literature pertaining to the role of Educational Psychologists in promoting MEWB. The systematic literature review poses the question "What is the Educational Psychologists role in promoting MEWB?" A critical discussion of the literature is provided. Part 1B highlights a gap in the literature and concludes by introducing the current research, and research questions.

Part 1A: The Issue and Importance of the Topic Area

1.1 Amplification of the Thesis Title

Mental health issues are highly prevalent; 15% of children and young people (CYP) residing in Wales have a medical diagnosis of anxiety or depression (National Assembly for Wales, 2018) and 70% of CYP who experience mental health problems have not had appropriate interventions at a sufficiently early age (Children's Society, 2008; World Health Organisation, 2003). Despite increasing interest in children's mental health (MH), growing pressures in such services as Child and Adolescent Mental Health Services (CAMHS) has shifted attention towards promoting MEWB (Health Committee, 2014; Welsh Government, 2010). MEWB can provide individuals with personal competencies (National Institute for Clinical Excellence [NICE], 2008), and is related to better academic achievement, higher school engagement and better MH in the longer term (Gutman & Vorhaus, 2012). Consequently, the early promotion of MEWB is an important long-term investment (Allen, 2011). In this context, the pre-school years can offer unique opportunities; the most effective interventions for mental and emotional difficulties are those targeted at the pre-school and early primary years (Weare & Gray, 2011; Tickell, 2011).

Educational Psychologists (EPs) are defined as practitioner psychologists and possess a range of skills to work in a diverse manner; including assessment, working therapeutically, consultation, training and working at an organisational level (Farrell, Woods, Lewis, Rooney, Squires & O'Connor, 2006). The ability to work as such provides EPs with a unique and useful skillset to promote MEWB at this age (Greig, 2007; MacKay, 2007). However, despite a number of professional reviews (e.g., Farrell *et al.*, 2006), a paucity of information focuses on establishing a clear role for EPs in relation to promoting MEWB during the pre-school years.

It is imperative to develop our understanding of the role that EPs can and do have, consequently the current research aims to explore this.

1.2 Theoretical Underpinning of the Research

The thesis adopts a social constructionist perspective (Burr, 2015); truth is perceived to be created, as opposed to discovered, by the mind (Schwandt, 2003). Individuals hold social constructs and beliefs about the world and whilst these appear to be objective and valid to the individual that holds it, in reality it is an artefact of a particular culture or society (Kelly, 2008). In line with this view, it is likely that constructs of the key concepts being explored in this research will differ. MEWB is complex and individuals are likely to construct their own understandings based on their social, political and cultural values, and their interactions with society and culture (Mertens, 2010). This is also true of the EP role, with different social constructs likely to influence and affect EP practice.

1.3 Mental and Emotional Well-Being (MEWB)

1.3.1 Social constructs of MEWB and Mental Health

Terminology such as emotional well-being, mental well-being, mental health and mental illness are used interchangeably. The terms mental health or illness are associated with a medical context based on a deficit model, in which MH assumes the absence of mental illness (Macdonald, 2006). The definition of CYP's MH provided by The Mental Health Foundation (2005), for example, is:

Children who are mentally healthy have the ability to develop psychologically, emotionally, creatively, intellectually, and spiritually (The Mental Health Foundation, 2005, p.6).

The focus is on the individual and there is no recognition of the social conditions or processes that contribute to MH. To ignore this places a focus on individual pathology or psychology.

However, in line with the social constructionist perspective adopted within the current thesis, emotional well-being or mental well-being can be seen as an important dimension of our capacity to interact with the world. Emotions influence our mental and emotional well-being (Kitayama, Hazel, & Kurokawa, 2000) and emotions are characterised by attitudes, beliefs and judgements which are determined by the systems, cultural beliefs and moral values of particular communities (Armon-Jones, 1986). Consequently, emotional well-being is specific to a cultural context (Armon-Jones, 1986). In line with this perspective well-being is a dynamic and multifaceted process that gives people a sense of how their lives are going through the interaction between their circumstances and culture (Forgeard et al., 2011; McGillivray, 2007). Importantly, emotions can change with time and are affected by different aspects of social life (Vilches, 2012).

It is beyond the scope of the current narrative to explore the distinction between a social constructionist perspective and medical perspective further. Rather than making clear distinctions between well-being and MH issues, both can exist on opposite ends of a continuum whereby the promotion of MEWB can include the prevention of mental health issues (Ekornes, 2015; Keyes, Dhingra and Simoes 2010; Murphey, Barry & Vaughn, 2013) (see Figure 1). Some researchers emphasise the complexities of this and argue that many individuals without

mental health issues appear to lack MEWB and those with mental health issues can also have a number of features associated with good MEWB (Murphey, Barry & Vaughn, 2013).

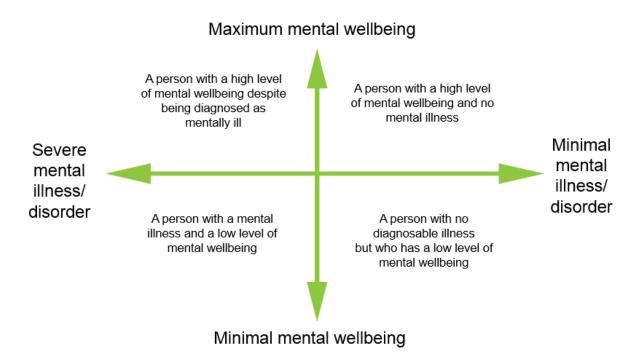


Figure 1. The Mental Health Continuum (Adapted from Santelices, Page and Drummond, date unknown)

From a national perspective, the Welsh Government (WG) described the following as features of good MEWB:

Features of good MEWB

- 1. develop psychologically, emotionally, intellectually, creatively and spiritually
- 2. understand and value the differences between people and respecting the right of others to have beliefs and values different to others
- 3. recognise and manage strong feelings
- 4. initiate, develop and sustain mutually satisfying personal relationships
- 5. become aware of others and empathise with them
- 6. play and learn effectively and co-operatively, solve problems with others and alone and deal with and resolve conflict effectively and fairly
- 7. face and recover from problems and setbacks and use any psychological distress that results as a developmental process and learn from them in ways that do not impair or hinder further development.

(WG, 2010; WG, 2015)

Figure 2. Features of good MEWB (WG, 2010; 2015)

Currently, in the context of education, there has been a tendency towards using the term well-being (rather than MH) to create a more positive concept (Weare, 2015). For the purpose of this thesis, two descriptions of mental health and well-being are relevant.

- Keyes (2002) proposed that MH and MEWB exist along a continuum, with good emotional well-being at one end and mental illness at the other (as illustrated in Figure 1). Promoting MEWB and preventing mental health issues describe movements along this continuum (Ekornes, 2015).
- 2. Santelices, Page and Drummond (date unknown) highlight that Action for Children described a mentally and emotionally well person as someone who demonstrates "empathy, self-awareness, an ability to manage feelings, motivation and good social skills". (pg.2)

In line with the social constructionist perspective adopted in this thesis, the author adopts these views of MEWB.

In addition, the author acknowledges that other terminology may be used by different authors, For example, social and emotional wellbeing is reported to provide a basis for future health (NICE, 2008). Poor social and emotional capacities increase the likelihood of antisocial behaviour and mental health problems during the adult years (NICE, 2008). Furthermore, the term emotional literacy describes one's ability to understand and express feelings (Faupel, 2003). This involves having self-awareness and recognition of one's own feelings and knowing how to manage them, such as the ability to stay calm when angered or to reassure oneself when worries. (Faupel, 2003). It is beyond the scope of the current review to describe all related terminology.

The term mental and emotional well-being will be used as it encapsulates the belief outlined above, that well-being is a product of the person's interactions with their culture at any one time, as well as including children's social development, their self-identity and their ability to relate to others and express themselves. Consequently, in the context of the current thesis the term MEWB will be adopted. Within the term, the notion of mental well-being is accepted as conveying two perspectives; the subjective experience and expression of emotion and the psychological functioning of an individual within their society (autonomy, self-acceptance, personal growth, self-esteem and purpose, good relationships with others and the ability to develop and maintain functioning relationships) (Ryan & Deci, 2001). The term emotional well-being is a hedonic term that relates to the self and individuals' ability to be resilient and generate positive emotions (Ryan & Deci, 2001). As the current discussion is ground in social constructionism perspective, the author believes it important to incorporate both the hedonic self but also the self in relation to others in society. Consequently, the term

MEWB is applied; both to encapsulate other terms described above and also to describe a state of well-being that exists in relation to others.

The author considers that MEWB can change and be fluid as a consequence of promotion, intervention and input. All professionals can play a role in offering appropriate support to the CYP they work with, no matter where they exist on the continuum in Figure 1.

The terms emotional well-being and mental health are understood as having similar meanings. The term MEWB will be used, however, when specific authors have chosen to use the term mental health, this is used in the description and analysis of appropriate studies.

1.3.2 Promoting MEWB

There is significant evidence to suggest that CYP's MEWB affects their capacity to learn (e.g. Durlack, Weissberg, Dymnicki, Taylor & Schellinger, 2014; Rothia, Leavey, Chamba & Best, 2005). There are indications of longer term impact, whereby childhood MH issues have been associated with ill health and the ability to work in adulthood (Goodman, Joyce & Smith, 2011). Jané-Llopis, Barry, Hosman & Patel (2005) suggested that promoting good MEWB is imperative, it ought to be evidence based and have clear goals. As a multidisciplinary area of practice, promoting MEWB builds on the theoretical base of areas such as lifespan developmental theory, community and health psychology, social and organisational theory and the overarching socio-ecological perspective of health promotion (Jané-Llopis, Barry, Hosman & Patel, 2005). A selection of the approaches is considered.¹

1.3.2.1 Risk and resiliency factors approach. From a theoretical perspective, MEWB can be promoted by minimising the impact of risk factors and maximising the development of protective factors, also known as resiliency (Rutter, 1985). Risk factors are events, experiences

¹ The author acknowledges that this is not exhaustive discussion of the means to approach promoting MEWB. The author reviewed those approaches most prevalent in the literature reviewed.

9

or features of a person's constitution that increase the probability of developing mental ill-health (DfES, 2001). A range of factors that can have an impact on children and young people's MEWB are listed in Table 1.

Table 1

Risk and Resilience Factors for CYP (Young Minds, 2016)

Risk Factors	Resilience Factors
Within	
 Genetic influences Learning difficulties Communication difficulties Difficult temperament Physical illness Academic failure Low self-esteem 	 Secure attachment experience and Internal Working Model Outgoing temperament as infant Good communication skills Being a planner and having belief in control Humour Problem solving skills and positive attitude Experiences of success and achievement Faith or spirituality Capacity to reflect
Family	
 Parental conflict including domestic violence Family breakdown Inconsistent or unclear discipline Hostile relationships Failure to adapt to child's need Physical, sexual or emotional abuse Parental mental health illness Parental criminality or substance abuse Death and loss Financial deprivation 	 At least one good parent child relationship (or one supportive adult) Affection Clear consistent discipline Support for education Absence of relationship conflict
Sch	iool
 Bullying Discrimination Breakdown or lack of positive friendships Negative peer influences Peer pressure Poor pupil/teacher relationships 	 Clear policies on behaviour and bullying Open-door policies for children to raise problems A whole-school approach to promoting good mental health and emotional wellbeing Positive relationships

Professionals' roles in promoting resilience is an essential aspect of promoting the MEWB of CYP (WG, 2010) within Wales. Good understanding of risk and resilience factors can help staff to identify pupils who are vulnerable to MH problems and develop practical strategies for supporting them (WG, 2010). Schools are expected to implement a risk and resilience framework as part of their universal approaches, with staff developing specific activities to promote greater resilience in all their pupils (WG, 2010).

Expressions such as 'resilience' and 'capacity to cope' emphasise an individualistic approach to promoting MEWB (Macdonald, 2006). However, promoting MEWB can also be concerned with how individuals, families, organisations and communities operate and influence one another too (Mentality, 2005) and consequently an ecological approach to promoting MEWB may be more beneficial.

1.3.2.2 Beattie's model (1991). This complex analytical model acknowledges that health promotion is embedded in wider social and cultural practices (Naidoo & Wills, 2000).

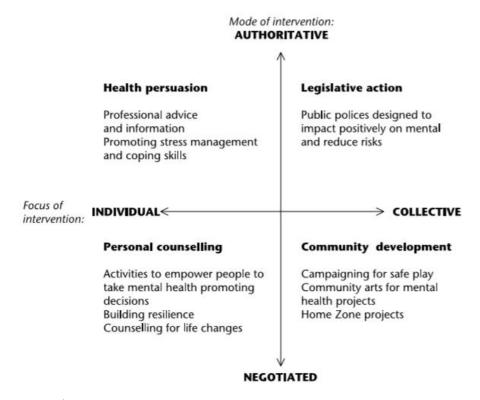


Figure 3. Beattie's (1991) model of health promotion applied to promoting well-being.

This model not only allows professionals to analyse current strategies to promote MEWB, but also provides the opportunity to generate new strategies for successful promotion (Naidoo & Wills, 2000). It consists of 4 quadrants which represent the different ways in which MEWB can be promoted by professionals, governments and individuals through health persuasion techniques, legislative action, and personal counselling and community development (Naidoo & Wills, 2000). Beattie's model is underpinned by empowerment: the ultimate goal is to empower individuals and communities to take health related decisions by developing self-efficacy, self-esteem and building activities on the basis of participatory needs (Tilford, 2006).

1.3.2.3 A lifespan approach. This approach considers specific issues arising from socio-economic factors, gender, and educational and ethnicity differences between individuals and communities (Barry & Jenkins, 2007). Such attention to inequalities is necessary throughout the lifespan but in particular during childhood because of the significance of early life experience (see also section 1.4) (Tilford, 2006). MEWB can be categorised in various ways and the ecological model can be used to frame the discussion of the lifespan approach to MEWB.

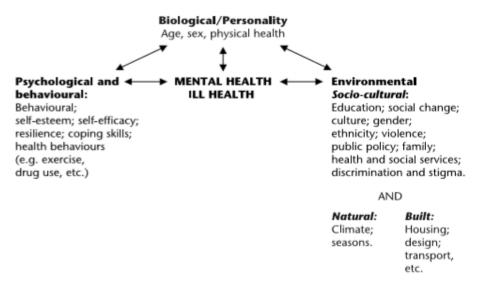


Figure 4. Model of influences on health (Tilford, 2006)

Such influences or determinants of health and well-being can operate at different levels (individual, family, community and societal) and can interact in such a way as to enhance or to reduce MH (Tilford, 2006). The relative impact of individual determinants differ. CYP who experience poverty, for example, are more likely to have risk factors for mental ill health or to experience ill health outcomes (Patel, 2001). In the UK, there is a strong link between poverty and MEWB. Meltzer et al., (2000) reported that 16% of children (between 5 and 15 years of age) who fall into the lowest income groups had mental health problems compared with 6% of those in the highest income groups. The prevalence of poor MH increased with a decrease in education qualification of parents and was closely associated with family employment and household income (Meltzer *et al.*, 2000).

An increased body of research identifies the long-term harm that can result from chronic stress on individuals during childhood (Bellis et al., 2014). Such stress arises from abuse and neglect, but also from growing up in households where children are routinely exposed to adverse experiences. Children who experience several Adverse Childhood Experiences (ACEs) are at increased risk of self-harm during adolescence and poor physical and mental health in their adult years (Bellis et al., 2014). ACEs are described as variations around three direct (verbal, physical, sexual abuse) and six indirect experiences (parental separation, domestic violence, mental illness, alcohol abuse, drug use, and incarceration) that research suggests have an impact on childhood development. The more adversity a child experiences the more likely it is to impact upon their mental and physical health. Four (or more) adverse experiences are more likely to participate in risk taking behaviours and find it difficult to make changes and consequently have poorer health outcomes (Bellis et al., 2014), the mechanisms of which is illustrated in Figure 5.



Figure 5. Model of ACE impact across the lifespan (Public Health Wales, 2015)

The Adverse Childhood Experiences study shows that traumatic or abusive events in childhood are associated with depression, cardiovascular disease, cancer, alcoholism and drug abuse in adult life, as well as encounters with the justice/legal system, and risk-taking behaviours later in adolescence and adulthood (Public Health Wales, 2015).

A lifespan approach takes a holistic perspective to promoting MEWB for all and provides a foundation for interventions or approaches to promotion. This approach helps to identify where and when intervention and support is required to help those who are at risk of developing poor emotional well-being later in life. This approach also emphasises the importance of delivering a key message that the first years of children's life are essential (Public Health Wales, 2015).

1.3.2.4 A Sociological Analysis. This approach focuses on the relationships between childhood and society and this notion draws heavily on social constructionism (Burr, 2006). Through this lens children are seen as active in the construction and determination of their own

social lives, of the lives of those around them, and of the societies in which they live. Children have a voice of their own and should be listened to, and involved in democratic dialogue and decision-making. MacDonald and O'Hara (1998) identify ten elements of MH, its promotion and its demotion. According to the map, MH can be promoted by increasing or enhancing the elements above the dotted line, and by decreasing or diminishing the elements below it.

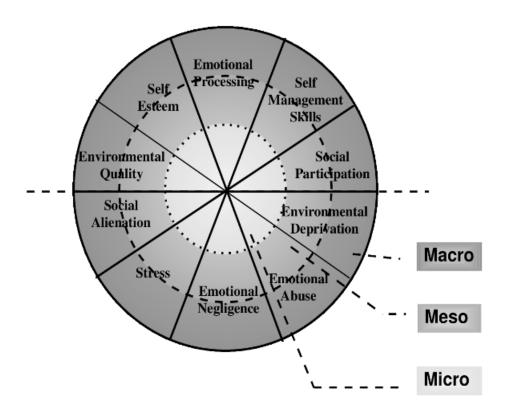


Figure 6. Macdonald & O'Hara (1998) ten elements of promoting MEWB.

MacDonald and O'Hara (1998) identify three ways in which the elements should be looked at.

1. The first of these comes from an overlap between all of the elements. For example, good self-esteem makes emotional processing much easier to develop, and in turn, better emotional processing will lead to more effective self-management skills and more socially participative and supportive behaviour. This means that mental health promotion needs to act on all interactions.

- 2. The second interaction is that experiences in one element can have an effect on mental health much later on in life and because of mental health promotion needs to aim for cumulative interaction of factors over time.
- 3. The third aspect of interdependence claim that all of the ten elements can relate to three levels: the micro-, meso-, and macro-level. At the macro level, government policies and reviews may help promote MEWB. The meso level can involve local interpretation and delivery of polices published at the macro level and the micro level refers to specific work completed by particular services who collaborate with families, individuals or groups of people (e.g., Educational Psychologists, Durbin, 2009). Promoting MEWB needs to work at all these levels, building on the interaction between the levels (MacDonald and O'Hara, 1998).

1.3.3 Implementing Theory to Programmes to Promote MEWB

The key to promoting MEWB is translating the knowledge and theory which has been explored above, so that the research can be used to inform effective practice (Barry, 2007).

Beattie's (1991) and MacDonald & O'Hara (1998) models can be used to underpin a social-ecological approach to programme implementation, for example. An ecological perspective highlights the interdependencies among social systems operating at different levels (for example, parent-child dyad, the family system as a whole, the inter-relations among these systems and larger socio-economic influences operating at the level of the community and wider society) (Barry, 2007; Bronfenbrenner, 1979). Several promotion programmes for children and families illustrate how adopting this perspective enables interventions to address factors that can influence child MEWB. Competence-enhancing interventions carried out in collaboration with individuals, families, schools and wider communities have the potential to bring about multiple positive outcomes in a number of health domains (Jané-Llopis, Barry,

Hosman & Patel, 2005). These initiatives include early years and home visiting programmes for families at risk, parenting programmes, pre-school and school-based programmes (e.g., Flying Start in Wales, see section 1.5.2) (Barry, 2007).

The risk and resiliency factors approach can underpin family support and parenting programmes (Barry, 2007). The High/Scope Perry Preschool Project (Schweinhart *et al.*, 2005), for example, is a pre-school educational programme which addresses a range of protective factors that improve the MEWB of low-income children and assist parents in providing the necessary support. The programme is underpinned by risk and resiliency factors approach and has been monitored for over 30 years and has produced impressive long term outcomes relating to MEWB, social functioning, academic and work performance and general health behaviour (Schweinhart *et al.*, 2005).

1.4. The Pre-School Years

In Wales, children are able to access school education once they have turned 3 years old (children can start nursery education the term after their third birthday). Furthermore, Flying Start (the Welsh Government targeted Early Years programme) provides support for children from birth to age 3 (Deave et al., 2011). As the thesis focusses on children's emotional and mental development prior to entering school education, focus is on those children aged 0-3 years. Importantly however, focus is also placed upon the pre-natal period as development inutero also has significant impact on mental health and well-being (Dean et al., 2018).

1.4.1 The Importance of the Pre-School Years

Children's early experiences are important for their later social and emotional development (Marmot, 2010). Early intervention designed to promote MEWB during the pre-school period can work to reduce the risk for developing poor MEWB in the future, increase readiness for school, improve educational attainment and, in the long term, better future employment prospects (Baker-Henningham, 2014; Kieling *et al.*, 2011; Marmot, 2010; NHS Wales, 2015). The Allen Report, "Early Intervention: The Next Steps" (2011) recommended that identification and intervention should occur as early as possible in order to reduce any potential difficulties that a child may encounter before starting primary school. The report emphasised the role of the early prevention and identification of MH issues to limit the detrimental effects of life outcomes such as post education attainment, reduced employment opportunities and ill physical health. This report states:

"Early intervention... (refers to) ...general approaches, and the specific policies and programmes, which help to give children aged 0-3 the social and emotional bedrock they need to reach their full potential, and to those which help older children become the good parents of tomorrow." (The Allen Report, 2011, p.xi)

The pre-school period can offer unique opportunities for the early intervention to promote MEWB (Tickell, 2011). This involves implementing preventative strategies to enhance strengths (Webster-Stratton & Reid, 2004) and mitigating the impact of risk factors (Evans, 2004). Concepts and theories from the various schools in psychology and sociology

are proving to be a continuous influence on thinking and practice in the early years. Some approaches are considered below.

1.4.1.1 Early brain development. Brain growth makes the first years of life qualitatively and quantitatively different from any other time of life (Clinton, Feller & Williams, 2016; Dean et al., 2018; Tierney & Nelson, 2009). During the first three years, the brain connections form at a rate much faster than they are being lost (Tierney & Nelson, 2009). Whilst humans' genetic composition provides the basis for brain development, experiences influence how or whether genes are expressed. Experiences during the prenatal period affects infant brain development (e.g., Dean et al., 2018 noted that maternal mental health difficulties affects white matter development in the brain). After birth, children's early experiences continue to affect the architecture of the maturing brain (Walter, 2012) and they shape the quality of brain architecture, establish either a sturdy or a fragile foundation for all of the learning, health, and behaviour that follow (Centre on the Developing Child, 2019). Therefore, the individual experiences from the pre-natal period through the first three years are important determinates for the rest of a person's life. While later interventions are also effective and essential, the return on investment is greatest in the earliest years (Clinton, Feller & Williams, 2016).

Children who have difficult or adverse early experiences can develop 'miswiring' of brain circuits and thus experience delayed cognitive, emotional or psychological development (Tierney and Nelson, 2009). Young children, whose brains are still extremely malleable to environmental stress, respond differently to external stress than older children. A toxic stress response can occur when a child experiences strong, frequent, and/or prolonged adversity; including physical or emotional abuse, chronic neglect, mental illness of their caregiver, exposure to violence, and/or chronic family economic hardship (when without adequate adult support). The prolonged activation of this stress response system can then lead to disrupting

the development of brain architecture thus increasing the risk for stress-related issues into adulthood (Walter, 2013).

There is a clear role for services in reducing the exposure that children may have to these types of environment by acting as a "buffer" through supporting relationships and developing services. The literature not only highlights the importance of intervention but the role professionals have in reducing some adverse experiences some children may experience in the early stages of life.

1.4.2.2 Attachment theory. Attachment theory, which focused on the development of emotional attachments through the process of bonding, has had a strong influence on thinking about early MEWB (Winnicott 1964; Bowlby 1975). The process was seen as important, not only for mental health in childhood, but also as a foundation for relationships throughout life. A central premise of attachment theory is that infants learn about ways of relating to others from the early relationships with their attachment figures. Its principles contribute to a greater understanding of the influences of early relationships which are directly linked to social, emotional and behavioural development. The attachment relationship between infant and caregiver(s) is crucial to healthy development (Clinton *et al.*, 2016).

The term attachment refers to the bond that develops between the infant and its primary caregiver, and which evolves over time as the infant and caregiver interact with each other. According to attachment theory the primary aim of the infant is to seek the presence of an attachment figure at times of distress and infants can approach new situations based on how they experienced particular relationships with their caregivers. Infants' expectations about themselves and others are carried onwards to subsequent interactions with other people, providing a template to make sense of new encounters. On the basis of those experiences infants built an Internal Working Model (IWM) (Bowlby, 1975).

Findings from research studies and observations from clinical work have identified direct links between different attachment styles and children's behaviour (Barret & Trevitt, 1991; Geddes, 2006). When attachment figures can be consistent and provide love and care for their infants, children learn to rely on these interactions. A secure, warm, responsive and predictable relationship with at least one caregiver influences the formation of neural structures in the brain (Moutsiana et al., 2015). Consequently, from an attachment perspective, good MEWB is achieved through a 'good enough' early attachment experience that helps the developing child experience relationships in a positive manor (Geddes, 2006). attachments have been found to be an important protective factor for mental health in later childhood (DfE, 2016). Insecurely attached children tend to seek attention from their teachers more frequently than their securely attached peers (Geddes, 2006), whereas securely attached children are generally less dependent on teacher's attention (Geddes, 2006) and are socially more competent. Geddes (2006) maintains that there are several outcomes of positive attachment experiences on children's MEWB. These are: a capacity to tolerate frustration and uncertainty, a sense of self-worth, a capacity to relate to others and a sense of individual agency. In situations of stress, secure attachment relationships can help buffer the developing brain from significant harm (Clinton et al., 2016). A sound social and emotional base is thus the launching pad for all other development – the physical, motor and cognitive development that prepares children for school and for eventual success in life (Geddes, 2006).

In some cases, children subject to ACEs or Developmental Trauma are generally associated with poorer outcomes as the experiences can impact widely upon their ability to establish and maintain relationships (Moullin, Walddogel & Washbrook, 2014). Children who are described as disorganised or insecurely attached are more likely to develop lower resilience, immature emotional and social functioning and difficulty regulating their responses to stress (Bowlby, 1979).

Attachment theory provides a useful framework for understanding how children relate and has had a dramatic influence in the way early years education in the UK is structured. By attending to their infant's needs, parents and early years staff can provide children with a secure attachment which will enable them to develop fruitful long term relationships and thus promote good MEWB.

1.4.2 The Impact of Pre-School Provisions

Findings from the Effective Provision of Preschool Education (EPPE) project (Sammons, Sylva, Mehuish, Siraj-Blatchford, Taggart, Grabbe & Barreau, 2007; Siraj & Taggart, 2013; Sylva, Melhuish, Sammons, Siraj-Blatchford & Taggart, 2004; Taggart, Sylva, Melhuish, Sammons, Siraj, 2015) indicated that good quality early education has long-term benefits, in particular for disadvantaged children. The EPPE project is a longitudinal study of a sample of 3,000 young children's development and one of the main purposes of the research was to assess the quality of practices in pre-school educational provision. Information was collected from the children, their families, their home environment and the pre-school settings attended. The sample included 141 pre-school settings randomly selected from all types of provision (e.g., nurseries, integrated children's centres, private nurseries and playgroups). Cognitive assessments and social development assessments were conducted at regular intervals. The quality of pre-school centres was assessed with observation-based rating scales such as the Early Childhood Rating-Scales- Revised (ECRS-R) (Conners, 1998). Case studies took place in 12 different pre-school centres (Sylva, Melhuish, Sammons, Siraj-Blatchford & Taggart., 2004). A sample of children who had no pre-school experience was also recruited for comparison with the pre-school group. The pre-school education enhanced all-round development in children in the short term (Key Stage 1), medium term (Key Stage 2) and long term (Key Stage 3) by focussing on developing quality adult-child relationships, by providing children with more curriculum-related activities (especially language and mathematics) and encouraging children to engage in challenging play (Taggart, Sylva, Melhuish, Sammons & Siraj, 2015).

Disadvantaged children benefitted significantly from good quality pre-schooling, in particular in integrated settings (Children's Centres) and nursery schools (Bonetti & Brown, 2018). High quality pre-school provision is necessary to improve children's outcomes, particularly for disadvantaged children (Bonetti & Brown, 2018). Bonetti & Brown (2018) reviewed the evidence to explore the factors that contribute to good pre-school provisions. Their key results are summarised:

- Staff who have a formal degree with some specialised training in early childhood education or child development. This is reported to be useful in delivering the skills and knowledge that support optimal teacher behaviour. However, a clear strategy to deliver systematic, sustainable and transformative continuing professional development to staff is also necessary to make a difference for quality and children's outcomes.
- It is unclear what ratio of child to staff is most effective. Having fewer children per staff member leads to better children's outcomes as it provides opportunity for more individualised attention and leads to better teacher and child behaviour. However, the authors state that there is no rule to determine exact ratios. While early years settings in England are required to adhere to ratios that are in line with these guidelines, ratios in Reception Year classes are generally much higher than what is usually recommended to maximise the impact on children's outcomes.
- International evidence strongly indicates that smaller class sizes for the entire school day are associated with improved children's outcomes, greater educational effectiveness and other benefits at classroom level. Classroom size for children aged from birth to four is not regulated in England but practice seems to be in line with what

the international evidence establishes as best practice. What stands in starker contrast is that for children in Reception Year, 30 pupils per class is the norm despite international evidence that clearly points to a maximum average size of 20 children per class for this age group.

Bonetti & Brown, 2018.

Crucially, whilst the authors attempt to summarise factors that constitute a good preschool provision by reviewing and synthesising the published information available, the authors noted that findings must be interpreted with caution as most the studies were published internationally and those may represent a context that differs from that seen in England and Wales (Bonetti & Brown, 2018).

Specific benefits to MEWB have been shown from early childhood interventions: Walker et al., (2006) provided intensive intervention involving increased stimulation (in the form of weekly play sessions to promote positive emotions, with the parent and child) for 129 children aged 9-24 month. A follow up at age 17-18 years suggested that those children who had received stimulation were less likely to report anxiety or depression and were more likely to report higher self-esteem. Other interventions that have looked to improve carer sensitivity and responsiveness towards infants and toddlers suggested that early intervention in this age range can have beneficial outcomes for children's MEWB (Klein & Rye, 2004; Lozoff et al., 2010).

1.5 The National Context; Wales

1.5.1 Government Guidance to Promoting MEWB

Welsh Government policy reflects a longstanding commitment to promoting good mental health and well-being for all (WG, 2015). The WG has based its policy and consequent

planning and delivery of services for CYP on the core aims of the United Nations Convention of Rights of the Child (UNCRC) (United Nations, 1989) and believes that following a rights-based policy approach will support all CYP across the nation to achieve improved emotional health and well-being. Promoting the MEWB of CYP is an essential consideration in many current Welsh Government policies impacting on pre-school and school aged children (see WG, 2010a for a full review). In 2004 the Welsh Assembly Government published the Children and Young People: Rights to Action Agenda in Wales (WAG, 2004). This set out the need for a collaborative, multi-agency, holistic approach to promoting MEWB. Within this agenda, children and young people's (CYP) mental health is the business of all people and services in contact with them (WAG, 2004).

A wealth of government publications have indicated a continued commitment to supporting emotional well-being through a multi-agency approach (e.g., WG, 2010). Within these, a particular emphasis has been placed upon promotion, early intervention, preventative strategies and developing resilience to be able to deal with adverse events and circumstances. As such, a number of initiatives to target and improve MEWB has been implemented by the government in the last decades. These are summarised in the Table 2.

Table 2

WG Initiatives to Support MEWB

Name and date of	Detail	
initiative		
"Thinking	This is a good practice document aimed to support all schools and	
positively:	early years' settings in promoting MEWB. Within this document, the	
Emotional health	WG states that MEWB is at the heart of the School Effectiveness	
and well-being in	Framework (SEF) and is a crucial core element of the work of	
schools and early	education settings. The document offers a summary overview of the	
	key information and issues for schools and education settings in	

years settings" (WG,	relation to promoting the MEWB of children, proposals to support		
2010a)	schools and local authorities in taking forward their work in		
	promoting MEWB and for early identification and intervention for		
	CYP who are experiencing mental health issues.		
"Well-being of	This is pioneering legislation which requires public bodies in Wales		
Future Generations	to consider the future in all of the decisions, work better with people		
(Wales) Act" (WG,	and communities, and look to prevent problems by taking a more		
2010b)	joined-up approach. In reference to MEWB the Act notes that Wales		
	must become a society in which people's mental well-being is		
	maximised (WG, 2015).		
"Together for	This draws a relationship between elements of the Well-being of		
Mental Health	Future Generations (Wales) Act" and the "Together for Mental		
Delivery Plan" (WG,	Health" (the Welsh Government 10 year strategy to improve mental		
2018a; in	health and well-being, which encompasses a range of actions for		
consultation)	those designed to improve the MEWB of all residents in Wales)		
	(WG, 2012). The delivery plan outlines 10 priority areas, the first		
	three of which are directly relevant to this thesis:		
	1. All children have the best possible start in life, enabled		
	by giving parents/ caregivers the support they need.		
	2. All children and young people are more resilient and		
	better able to tackle poor mental well-being when it		
	occurs.		
	3. Children and young people experiencing mental health		
	problems get better sooner.		
	The delivery plan then provides details on how each priority area will		
	be executed and by when. Some ways in which the WG aims to		
	execute the priority areas are: ²		
	To develop a new curriculum which includes the Health and		
	Wellbeing Area of Learning and Experience.		

² It is beyond the scope of the review to discuss each action in detail, however the consultation document is available here

 $\underline{https://gov.wales/topics/health/nhswales/plans/mental-health/?lang = en}$

 Public Health Wales to implement a mental wellbeing framework to ensure CYP are supported to develop resilience and MEWB.

Critically, during the review, the author noted that very few key actions related to Local Authority staff, despite Educational Psychologist's ability to work in this area.

1.5.2. A Welsh National Initiative: Flying Start

The Flying Start programme was launched in 2004 and provides targeted support to children aged 0-3 years, and their families, in some of the most disadvantaged areas in Wales to make a decisive difference to their lives (Deave et al., 2011). It focuses on the identification of need and on early interventions to improve children's language, cognitive, social and emotional development and their physical health. The primary aim of the Flying Start programme is to improve educational and social outcomes for children in the most deprived communities across Wales. Targeted investment is dedicated to offering free part-time, quality childcare for two to three year olds, enhanced Health Visitor support, parenting programmes, and basic skills including the Language and Play programme (WG, 2018b). These interventions are underpinned by a range of research studies that have established that there are income related gaps in terms of child development generally and school readiness in particular with respect to this age group (e.g., Deave et al., 2011). The national evaluation of Flying Start found that the programme had been operationally effective (Deave et al., 2011). It was said to have:

- significantly increased the accessibility of services which in turn has led to increased and higher levels of take up as well as increased engagement in wider services
- effectively built relationships and engaged with those families that are traditionally harder to or whose engagement with mainstream services is minimal
- engaged parents in the lives of their children

- worked with those families with the highest level of need
- identified needs earlier as well as wider issues or problems
- created effective referral routes either to other Flying Start entitlements or to wider generic services
- developed effective working relationships with local schools which greatly aided the transition from Flying Start, to nursery, to school
- established an effective multi-agency approach to delivery
- recruited a wider group of professional staff to better meet local needs
- invested in staff development and training
- achieved generally high levels of satisfaction and a strong demand for the services.

(Deave et al., 2011).

Flying Start is of direct relevance to this thesis. The initiative employs EPs and works across Wales to support families with pre-school aged children and Flying Start nursery settings. The role varies from one area in Wales to another. In some areas Flying Start EPs work in collaboration with Local Authority EPs to devise the parenting interventions and provide support to parents and their families. In one particular area on Wales, Flying Start's parenting programme intervention aims to promote positive parent-child interactions. The service is individually tailored following in-depth assessments of families and usually consists of 10 to 15 weekly home visits by experienced play workers. The programme is designed by an Educational Psychologist employed by Flying Start. In a review of the efficacy of this programme parents were provided with a set of practical tips in order to manage behaviour, provide emotional support and encouragement and re-constructed positive maternal identities (WG, 2013). In other areas, Flying Start EPs visit Flying Start nursery settings (attended by children from the age of two). In this context, EPs may complete individual assessment and

consultations with staff and families to agree positive steps forward to support the children's development (Deave *et al.*, 2011). Flying Start EPs will work in consultation with a range of early years' professionals and others to develop intervention strategies that will enhance the quality of children's lives, learning and well-being. They will also deliver interventions, including training and support to carers and other professionals who work with families. Flying Start EPs will also contribute to multi-agency planning and review meetings to deliver joint interventions.

1.6 Summary of Part 1A

Part 1A has provided the reader with the context to the topic of the study. The author has emphasised that promoting good MEWB is imperative for academic achievement and mental health in the long term (Durlack, Weissberg, Dymnicki, Taylor & Schellinger, 2014; Goodman, Joyce & Smith, 2011; Rothia, Leavey, Chamba & Best, 2005). Different theoretical perspectives can inform means of promoting MEWB however a multi-disciplinary, holistic applied approach, encompassing appropriate elements of several theoretical perspectives can help translate the promotion of MEWB from a theoretical discussion to the practical application (Barry, 2007).

The section has also highlighted that the pre-school years provide a key period to promote the MEWB of young children. Early brain development, the Internal Working Model and attachment styles, and children's lives in relation to their society and culture provides an important foundation from which good enough MEWB is realised. It appears that the most successful interventions in the context of pre-school are those based on systemic approaches, targeting children and families and focusing on children's primary relationships (Hamre & Pianta, 2001). Consequently, the most effective interventions are those targeted at pre-school

years (Weare & Gray, 2011); starting interventions early, during the pre-school period and taking a developmental approach in order to secure children's mental wellbeing as they become older is critical (Weare & Gray, 2011). In this section, the author has thus demonstrated that promoting MEWB in the pre-school years is not only key to reduce risk factors for the future but also to ensure that future generations experience good MEWB and positive mental health.

Next, the author will consider the role that EPs have in promoting MEWB. It is essential to consider this role specifically as EPs, as professional practitioners, have specific psychological knowledge and skills that make them suitable to work in this area.

Part 1B; Systematic Literature Review

1.7 Overview

There is a need to clarify the role that EPs have in promoting MEWB during the pre-school years. Part 1B provides a systematic review of literature and followed a systematic process, as outlined in Figure 7:

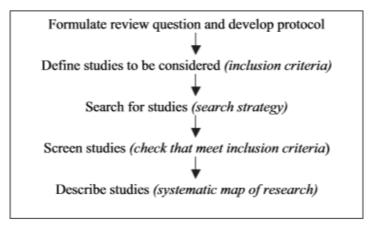


Figure 7. Systematic map of research activity (Gough, 2007)

1.7.1 Formulate Review Question

The author aimed to answer the question "What role do Educational Psychologists' have in promoting MEWB?" The author employed the Campbell Collaboration SAMPLE framework to formulate the question to ensure that the problem formed was Specific, Answerable, Measurable, Practical, Logical and Empirical³ (Cronin, Ryan & Coughlan, 2008; Ryan, 2010).

31

³ The author had originally posed the question "What role do Educational Psychologists' have in promoting MEWB in the pre-school years". When the search terms "pre-school" "preschool" "early years" "nursery" were combined with the search terms in the initial literature search, there were no search hits. Consequently, the author had to broaden the search criteria (see Appendix I)

1.7.2 Defining, Searching for and Screening the Studies for Review

As there was a wealth of information and a growing evidence base around MEWB generally, the author decided to limit the literature search to publications with particular relevance to the <u>role</u> of the EP in supporting this agenda. A systematic literature review was conducted in December 2018. The following databases were searched:

- PsychINFO (1806-2016)
- PsychArticles
- ERIC
- Google Scholar

A combination of key search terms including "educational psychologist", "educational psychology", "mental health", "emotional well-being", "emotional wellbeing", "mental wellbeing", "mental wellbeing", "psychological well-being" and "psychological wellbeing" was used to yield 494 hits (details regarding search in Appendix I). To create an inclusive search criteria and to ensure that maximum number of research reports were captured at this initial stage the related subsidiary terms suggested by each of the databases were included (e.g., the term educational psychologist also incorporated child psychologist and school psychologist as related subsidiary terms). The subsidiary terms suggested by the databases is listed within Appendix I. Due to the large quantity of search hits, two specific exclusion criteria were initially established to ensure that the literature to be reviewed related to the context in which the research was conducted:

1. The search dates were adjusted to exclude articles published before September 1999. This date was chosen because it marks the year that the Welsh Government acquired devolved powers and the Department for Education and Skills (DfES) and the Department for Health

and Social Services (DfHSS) were created in order to govern Education and Health in

Wales⁴. Three hundred and seven hits were excluded and 187 search hits remained.

2. Research conducted out of the UK were excluded as they may reflect systems and

procedures that are substantially different to the UK. Consequently 36 search hits were

excluded and 151 hits remained.

The 151 search hits returned during the journal search were then screened at 3 different

stages (Jones, 2004):

Stage 1: title alone;

Stage 2: reviewing the abstract; and

Stage 3: reading the journal article in its entirety.

This helped to avoid hidden bias, by having clear consistent rules about which studies were

being used to answer the question posed. By appraising each study against the same criteria

and recording the results, the bias for the reviewer's conclusion was made transparent. Studies

were excluded at each of the three stages of the process if they met the following exclusion

criteria:

Book reviews and editorials were excluded

Research completed by other professionals (e.g., nurses and engineers) were removed

Excluded if the main premise of a study focused on another issue (not relating to

promoting MEWB or not related to the role of EPs in this area) or if it was a theoretical

paper.

⁴ Information gained from the Welsh Government internet pages on 29.11.2018:

https://www.assembly.wales/en/abthome/role-of-assembly-how-it-works/Pages/history-welsh-devolution.aspx

33

After reviewing the search hits using the three step process, 13 research studies remained and are reviewed. Figure 8 demonstrates a diagrammatic map of the literature review. A table summarising the most relevant articles, an outline of each study and a summary of the findings can be found in Appendix II.

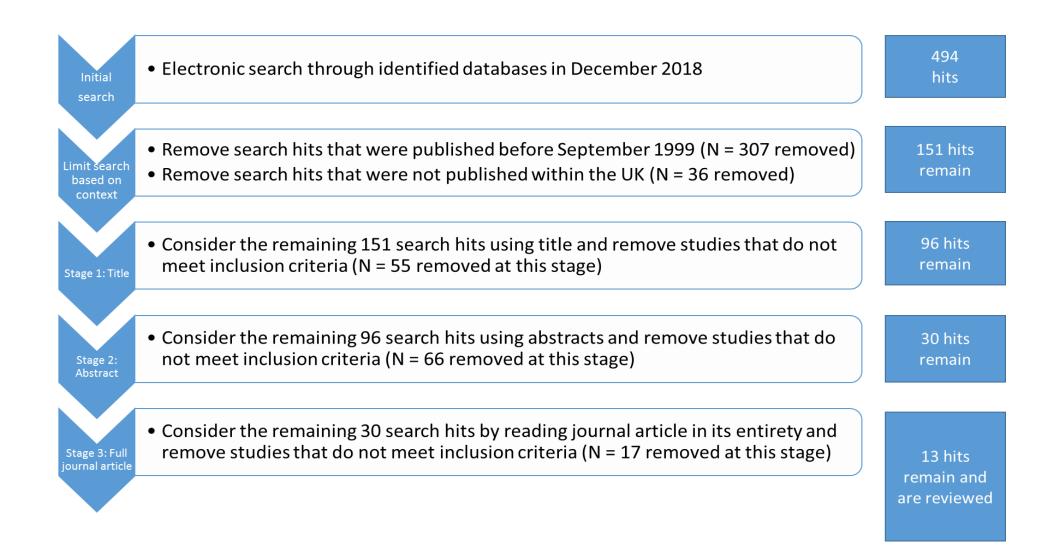


Figure 8. Diagrammatic map of literature review

1.8. Critical Review of Existing Research and Empirical Findings

The 13 articles were examined for the in-depth literature review. The author followed the stages in Figure 9 to ensure that research was relevant and appropriate.



Figure 9. Systematic synthesis of research evidence (Gough, 2007).

The methodology and findings from each included study, including the study design and key characteristics relating to the research question as outlined in Appendix II. A quality and relevance appraisal was evaluated in terms of the following (Gough, 2007):

- The trustworthiness of the results judged by the quality of the study within the accepted norms for undertaking the particular type of research design used in the study (methodological quality)
- The appropriateness of the use of that study design for addressing their particular research question (methodological relevance)
- The appropriateness of focus of the research for answering the review questions (topic relevance)
- Judgement of overall weight of evidence (WoE) based on the assessment made for each of the above criteria

The criteria for judging weight of evidence in Table 3 below.

Table 3

Criteria for judging weight of evidence (Gough, 2007)

Level/criterion	Methodological quality	Methodological relevance	Topic relevance
1: Excellent	Excellent research design justifying all decisions taken: e.g. sample, instruments, analysis. Clear evidence of measures taken to maximise validity and reliability.	Research questions clearly stated. Methodology is highly relevant to RQs and answers them in detail.	Study is very closely aligned to one of the key review questions and provides very strong evidence upon which to base future policy/action.
2: Good	Research design clearly stated with evidence of sensible decisions taken to provide valid and reliable findings.	Research questions are explicit or can be deduced from text. Findings address RQs.	Study is broadly in line with one of the key review questions and provides useful evidence.
3: Satisfactory	Research design may be implicit but appears sensible and likely to yield useful data.	RQs implicit but appear to be broadly matched by research design and findings.	At least part of the study findings is relevant to one of the key review questions.
4: Inadequate	Research design not stated and contains flaws.	RQs not stated or not matched by design.	Study does not address key questions.

The information within the studies were synthesised to being together the results of the exercise. This involved bringing the summaries of research methodology, findings and weight of evidence together under five distinct headings. Each of the headings relate to roles that EPs have when promoting MEWB. Finally, conclusions are drawn within the Summary of Literature reviewed section.

1.8.1 EP Use of Direct Therapeutic Interventions in Relation to MEWB

EPs, as applied psychologists, have a key opportunity to make significant contribution to applied therapies to help establish good MEWB (MacKay, 2007). Atkinson, Squires, Bragg, Muscutt and Wasilewski (2014) distributed a survey to EPs in the UK in order to examine EPs' role in providing therapeutic support. Ninety two percent of the 455 respondents reported that they used therapeutic interventions as part of their practice. Solution Focused Brief Therapy (SFBT; De Shazer et al., 2007), Cognitive Behaviour Therapy (CBT; Beck, 1967) and Personal Construct Psychology (PCP; Kelly, 1955) were the more reportedly used therapeutic interventions. The authors thus concluded that delivering therapeutic services is part of the EP role in helping to improve children's emotional well-being.

Atkinson, Corban and Templeton (2011) explored which therapeutic interventions EPs use and how they use them, the barriers and enablers to EPs engaging in therapeutic practice and the features that enable effective provision of therapeutic intervention. Atkinson et al., (2011) reported two small scale qualitative studies. The first study consisted of an hour-long focus group and semi-structured interviews with 12 EPs, Trainee EPs (TEPs) and Clinical Psychologists (CP) to discuss the use of therapeutic interventions with CYP. The focus groups and interviews were transcribed and the data organised into themes. The second study used a questionnaire prompting qualitative responses through open-ended questions, followed by semi-structured interviews with EPs only. Thematic analysis (Braun & Clarke 2006) was used with transcribed data taken from digital audios of the interviews and written responses from the questionnaires. Themes in relation to the research questions were drawn together into superordinate themes encompassing the findings of both studies. Atkinson et al., (2011) used a Strengths, Weaknesses, Opportunities and Threat (SWOT) analysis to explore the themes. Findings are illustrated in Table 4.

Table 4

SWOT Analysis Exploring the EP's Role Using Therapeutic Interventions (Atkinson et al., 2011)

Strengths	Weaknesses	
• EPs use a wide range of therapeutic	• Lack of time for therapeutic interventions	
interventions in a flexible way and at	with young children;	
different levels;	• Schools not always aware that EPs offer	
• EPs have access to CPD and supervision	therapeutic interventions	
• There is a wide definition of 'therapeutic	• Limited opportunities to use.	
intervention' in EP practice		
Opportunities	Threats	
• A possible great future significance of	• Anxiety over role definitions	
therapeutic work, a new direction for EPs	• Work related to SEN procedures taking	
and multi-agency working	precedence	
	• Time limitations.	

The composition and size of the focus group are possible limitations of this study. It could be argued that it would have been difficult for all participants to have been able to express their views. There would also have been several possible power imbalances in the focus group. The researcher was a TEP and arguably less experienced than the majority of participants. Experienced EPs may have expressed their views and opinions more than assistant EPs. Another power imbalance could have arisen as a consequence of the higher number of EPs than CPs in the focus group. Despite such limitations, importantly, it is possible to see that EPs do have a role administering individual therapy to CYP in the context of schools.

EPs can also help to improve MEWB when using narrative therapy with parents. McQueen and Hobbs (2014). The research considered ways in which EPs could work with parents in a more collaborative way; moving away from the idea of the EP being an expert giving advice towards genuine and respectful collaboration. Parents were invited to work with

the researchers, who were EPs, to talk about a concern they had relating to their child/children. Following a preparatory session at the school to introduce narrative therapy, the volunteer parents had six one-hour sessions with the EPs. This was not conducted within the main school building. Film clips and audio selected from the sessions were used with TEPs, with the consent of the parents to develop the stories and the parents fed back that this practice was positive for their self-esteem. This qualitative study was firmly set in the social constructionist paradigm and used activity theory to illustrate the process of using narrative therapy with parents. Three parents volunteered to participate, two parents were a couple from the same family. Unfortunately, the third parent withdrew from the research. Consequently, the research consisted of a single case study. Nonetheless, it provided a powerful, personal and positive narrative about a couples' perceptions of parenthood. It also provided an example of how EPs may be able to achieve genuine partnerships with parents through the use of therapeutic tools and demonstrated a role which EPs can have to improve the MEWB of CYP, by working collaboratively with parents using narrative therapy.

1.8.2 EP Use of Consultative Approach in Relation to MEWB

A consultative approach allows EPs to work with a larger number of people and make changes that can impact many by developing the skills of those who work with or know the CYP well (Wagner, 2008). When working in this way EPs can, for example, facilitate interventions by consulting with teachers, develop teachers' understanding of CYP MEWB and can provide training to teachers regarding different issues. Research articles which explore such skills are discussed in this section in order to explore the role that EPs have in improving MEWB during consultation.

EPs can support good MEWB through consultation by supporting the set-up and evaluation of Nurture Groups (NG), for example. NGs are teacher led interventions which seek

to address the difficulties of children exhibiting a range of emotional of behavioural problems by establishing more adaptive relationships with adults and peers (Seth-Smith, Levi, Pratt, Fonagy & Jaffey, 2010). NGs are usually a class in a primary school whereby the teacher works with 10 or 12 children who find it difficult to learn in a mainstream class. CYP are typically perceived as disruptive or withdrawn and are at risk of exclusion. EPs can facilitate develop and monitor NG interventions to create positive outcomes for CYP (Seth-Smith, Levi, Pratt, Fonagy & Jaffey, 2010).

Sanders (2007) reports on the effectiveness of the Hampshire Nurture Group Pilot Project to determine the effectiveness of the NG in three schools within the Local Authority (LA). A pre and post experimental design was completed with 26 children in reception and Key Stage 1. Seventeen of the children attended a NG, the remaining 9 acted as a control group. The impact of the NG was measured by collecting quantitative data (participants' academic gains and scores on the Boxall Questionnaire) and qualitative data (interview with 7 children, 29 teachers and an unstated number of parents). Observations of the children were conducted in the NG to support the interview data. This rigorous data collection process allowed the authors to explore the effect of NG intervention thoroughly. Significant gains in emotional behaviour was reported amongst those children who had attended the NG (significantly better improvement than those who did not attend the NG). Greater academic progress was seen amongst those who had attended the NG. The school culture appeared calmed with fewer behavioural incidents after the NG intervention had been established and parents reported that children appeared more confident and now enjoyed attending school (Sanders, 2007). This comprehensive study collected data from many sources which thus allowed for triangulation. However, the small sample size limits the generalisability of the results.

Similarly, Seth-Smith et al., (2010) completed a quantitative investigation into the changes in social, emotional and behavioural functioning of children who had received NG

intervention for five months. The authors adopted a positivist approach to the study by controlling a large number of variables that could impact any differences in those who attended NG, to ascertain the unique contribution of the NG intervention to CYP social, emotional and behavioural functioning. A non-randomised pre- post-test design was used to compare 10 school that ran full-time NG interventions. Five schools represented a control group. Teaching staff completed the Strength and Difficulties Questionnaire (SDQ) (Goodman, 1994), the Boxall Profile Questionnaire (Boxall, 1969), and reported academic achievement scores at preand post-stages to measure outcome variables. Participants were, on average, 5 years and 9 months old (range 4 to 8 years). Statistically significant differences were found between the two groups; those who had attended the NG demonstrated more pro social behaviour and fewer peer difficulties and hyperactivity (in comparison to the group who had not received input from a NG). Teachers' rating of general academic progress indicate that children who had attended the NG had progressed more than the comparison group. Consequently, NGs are good teacherled interventions to improve the MEWB of young children by specifically targeting difficulties experienced in social and emotional difficulties. Notably, the nature of the study (using a positivist and reductionist stance) could potentially simplify the complex social and emotional processes that are occurring in NGs. The results of this study do not allow the reader to determine what exactly had contributed to these changes; whether it be the activities that took place in the NG, the fact that the children were educated in a smaller group, whether they received more adult attention or a combination of these (or other) factors. Further exploration is thus required to answer such questions.

Both Sanders (2007) and Seth-Smith (2010) make interesting and valuable contribution to the exploration of the role that EPs can have in working to establish good MEWB. This highlights the opportunity for EPs to engage in creative work to facilitate the NG, consult with teachers regarding strategies used and specific interventions applied within the groups. The

studies suggest that EPs possess skills to contribute to develop, facilitate and evaluate the quality of NG interventions. In these articles the EPs provided regular support and consultation with school staff.

Consultation can be useful for reviewing how systems can change to meet the needs of children and Hart (2009) focuses on the MEWB of refugee children who have experienced a wide range of traumas. Hart (2009) adopted a case study design to explore the individual experience of the effects of trauma on the education of a child refugee. There was a need to adopt an interactionist ecosystemic stance when working with children who have experienced such trauma as the difficulties associated with the experiences can impact many different areas of a child's life. The impact of the trauma was mapped out to consider environmental, biological, physical, cognitive, affective and behavioural aspects that affected the child refugee and further noted that the trauma does not stop once the child had been relocated to country of safety. Hart (2009) noted that whilst the EP involvement was brief, EPs have a role to improve the MEWB of child refugees by working holistically at different levels of the child's system to impact change.

1.8.3 EP Use of Training and Supervision in Relation to MEWB

EPs can provide supervision to school staff with the view of facilitating good MEWB for CYP by increasing staff awareness and skillset (Sharrocks, 2014). Sharrocks (2014) explored school staff perceptions of well-being and their experiences of taking part in a well-being group intervention. The well-being intervention 'Chill and Chat', facilitated by an EP, was attended by staff members of one primary school. Three focus groups were held to obtain staff perceptions (before starting the project, during week three and one week after the conclusion of the project). Staff reported perceived improvements in relationships and staff cohesiveness after the intervention had been completed. Perceptions of increased happiness and well-being

were also identified and links were made between well-being and positive outcomes in job perception. School staff felt they were better able to deal with incidents relating to CYP's emotions in the classroom. Notably the project was only conducted in one school and findings could thus represent the ethos and culture of the one school, only. However, staff were eager to access the project and Sharrocks (2014) noted that, in respect of EP's role in promoting MEWB, consistent and ongoing work in schools, supported by wider policy, practice and ethos was imperative.

Burton (2008) also explored EPs role in promoting MEWB by empowering Learning Support Assistants (LSAs) to enhance the MEWB of children in schools. Burton (2008) writes about a small pilot study which prompted the introduction of Emotional Literacy Support Assistants (ELSA) in many schools. The ELSA role is to support CYP to develop their understanding of emotions and recognise and respect the feelings of others. ELSAs receive training from EPs in order to run programmes in schools to help pupils learn new coping skills and improve their MEWB. Osborne & Burton (2014) evaluated group supervision sessions provided for ELSAs by EPs. Questionnaires were completed by 270 ELSAs to gain their views and both quantitative and qualitative data were collated. Supervision sessions were perceived as being helpful and the majority of ELSAs (95%) felt that the group size, length and frequency of supervision was appropriate. Some ELSAs required individual support, some wanted more group discussion time and some wanted more experienced ELSAs in their supervision groups. Critically, the questionnaire yielded a 43% response rate, one needs to question whether the remaining participants would have provided a different perspective and thus decided not to complete the questionnaire. Burton (2008) and Osborne and Burton (2014) highlight that the supervision of ELSA staff, to help improve the MEWB of their pupils, is an important part of the EP's role.

1.8.4 Whole School Approaches to Improve MEWB

Working at the universal or whole school level is in keeping with the eco-systemic stance towards promoting MEWB (MacDonald & O'Hara, 1998). These interventions provide an ethos which supports all school and staff within the school. Boorn et al., (2010) document an awareness training programme, 'Growing a Nurturing Classroom', presented by EPs, to improve MEWB and positive learning environment to 73 schools in England. The programme was underpinned by attachment theory and considered the psychosocial development of CYP. The training, provided by EPs was aimed to help primary school staff to take a holistic approach to learning and children's happiness, consider the impact of promoting secure relationships within a positive learning environment and reflect on the value of an emotionally supportive school for children and adults. The EPs promoted positive relationships and attachment, resilience and provided information on the effect of positive learning environments on enhancing MEWB (Boorn et al., 2010). The training programme was based on the concept of applying the principles of nurture groups within a mainstream class and everyday classroom practice. The staff from 73 primary schools who attended the training were asked to complete an evaluation questionnaire. On a scale of 0 to 5 (0 being 'not at all' and 5 being 'completely'), delegates, on average, scored the course as 4.5, indicating that the delegates found the course useful and valued the practical resources. A three month follow up questionnaire was then distributed to a sample of schools and the authors received a 33% return rate. The delegates had found that the course had improved interactions between staff and the children at their schools. Whilst some delegates only attended one of the two days of training and whilst rating scales can be perceived as subjective, this study does demonstrate the overarching positive effect that EPs can have when working at a whole school level to promote MEWB.

Hall (2010) reported on a commissioned research project aimed at listening to and acting upon pupils' views about the social and emotional aspects of learning. The research is

based upon the premise that developing an environment that is informed by children's views will create a school that values an individual's work and thus allows them to grow personally (Hall, 2010). This environment is necessary for the development of good positive MH. Hall (2010) adopted an explorative framework to investigate the views of 18 children in one primary school aged 5 to 11 years. EPs conducted focus groups with the children to gain their views. The focus groups explored features of their school that promoted and demoted MEWB using the Ten Element Map (MacDonald & O'Hara, 1998). The themes that emerged from the focus groups were around the quality of the environment and use of outside area and suitable equipment, adaptation of the reward system, introduction of an adult led friends group to talk about feelings and manage difficult incidences, keeping the dinner hall clean, self-esteem, emotional well-being, self-managements skills and social participation. The information gained during the focus groups was used to guide an action plan for organisational change at the school. Hall (2010) concluded that the intervention had been successful and resulted in organisational change based on the views of the children involved in the focus groups. This was a useful intervention for EPs to complete and they are experienced in ensuring that the views of children are collected and acted upon. Despite the small number of participants, and the lack of clarity regarding the representativeness of the sample, Hall (2010) demonstrates another way in which EPs can work to improve MEWB of young children.

1.8.5 EPs engagement in Multi-Agency Work in Relation to MEWB

Durbin (2010) examined a multidisciplinary child behaviour team which consisted of EPs, family support workers and primary MH workers operating within a culturally diverse urban community. Durbin (2010) used activity theory as a theoretical framework and methodology to examine the processes involved in multidisciplinary work. Durbin (2010) conducted interviews, focus group discussions and developmental work research to identify and compare

activity systems. EPs' knowledge and skills around group working and their application of theoretical knowledge were seen as strengths in a multi-agency context. EPs were seen to facilitate good MEWB in CYP by building their skills and confidence through individual and group work and offering consultation and training on issues relating to MH and MEWB to significant adults with the aim of improving their awareness, skills and confidence in meeting the needs of the CYP (Durbin 2010). However, the multidisciplinary team were constrained by different understandings and expectations of the EP role. Another tension recognised by Durbin (2010) in multidisciplinary teams was the issues about different professionals' beliefs about working directly with CYP or working primarily in a consultation capacity.

Dawson and Singh-Dhesi (2010) conducted an evaluation of 10 years of the Child Behaviour Intervention Initiative (CBII) in Leicester City. The CBII consisted of three teams of family support workers, CAMHS specialists and EPs. Families could self-refer to the CBII and various interventions were used with CYP and families as well as training and support given. This initiative was also linked to the Targeted Mental Health in Schools Project (TaMHS) in Leicester City. Each of the interventions used as part of the CBII were evaluated using the Strengths and Difficulties Questionnaire (SDQ). Pre and post testing scores completed by professionals about CYP were not statistically significant. However, parental reports indicated statistically significant effects post intervention. 60% of parents saw a positive improvement in their child and over 60% saw an improvement in family relations. The authors note that the main purpose of the paper is to use the example to demonstrate how EPs can practically support children's mental health and psychological well-being outside the classroom; by working alongside other agencies to deliver interventions.

1.8.6 Perception of the EP role in promoting MEWB

Rothìa, Leavey and Best (2008) examined teachers' views about the involvement of EPs with pupils with possible MH difficulties. The authors conducted interviews with 30 teachers with a range of experiences used Interpretative Phenomenological Analysis (IPA) to identify four themes related to the teachers' views: EP service-related issues; relationships with EPs; issues related to the impact on pupils of the involvement of EPs; the role and function of EPs as perceived by teacher. EPs were perceived by teachers to be an essential part of the support system for pupils with MH needs. There were frustrations, however, around EP shortages and lack of time allocated to each school; interviewees indicated that observation and assessment took up most of their allocated EP time. The study also revealed that some teachers felt overburdened by the responsibility of implementing the EPs' recommendations. Rothìa et al (2008) reported that when it came to possible MH difficulties teachers believed that EPs were no substitute for contact with a MH professional. Whilst it is recognised and acknowledged that there are other professionals who may be more experienced in supporting CYP with persistent, severe and complex MH problems, EPs are well placed to influence universal programmes of MEWB in schools, build capacity through training and consultation and implement and measure effectiveness of appropriate interventions for groups or individuals. Rothìa et al (2008) concluded with a call for a bridging of the service boundaries to ensure effective joint working.

1.8.7 Summary of the Research Reviewed

Literature relating to the role that EPs have in reacting to emotional difficulties in primary and secondary schools was discussed. Within the research there was a tendency to adopt a mixed methods framework for evaluating interventions, which included collecting qualitative and

quantitative data. This provided a more holistic approach when exploring an area of interest, as it reviews the effectiveness of interventions but also explored 'why' (Johnson & Onwuegbuzie, 2004). The articles reviewed demonstrated that EPs are involved in interventions located at different levels of a child's system to support good MEWB.

Atkinson et al., (2011, and 2014) and McQueen and Hobbs (2014) noted that EPs can have a role delivering therapeutic interventions. Atkinson et al., (2014) reported that EPs across the UK used SFBT, CBT and PCP techniques in their work at schools however Atkinson et al., (2011) reported that EPs often experience barriers to delivering such interventions; a lack of time and schools not always aware that EPs offer such interventions. McQueen and Hobbs (2014) reported that EPs can use narrative therapy to work collaboratively with parents.

A different role EPs can have in promoting MEWB in children is through consultation; Sanders (2007) and Seth-Smith et al., (2010) reported that EPs can support the setting up, delivery, implementation of strategies and interventions and evaluation of nurture groups in primary schools via consultation with school staff. EPs can also support good MEWB by delivering training and supervision to school staff (Sharrocks, 2014). Osborne & Burton (2014) noted that EPs facilitated training and group supervision for ELSA staff to help support good MEWB in their classes.

EPs can also promote good MEWB by working at the whole school level; Boorn et al., (2010) introduced a training programme 'Growing a Nurturing Classroom' to 73 schools in England with the aim of helping school staff take a holistic approach to children's well-being. Hall (2010) conducted a research project which demonstrated that, when listening to and acting upon children's views regarding school life, children were allowed to grow personally and develop good sense of MEWB. Durbin (2010) and Dawson & Singh-Dhesi (2010) demonstrated that EPs can contribute to MA work when promoting MEWB by applying

theoretical knowledge and skills (Durbin, 2010) and by collaborating with clinical psychologists (Dawson & Singh-Dhesi, 2010).

In the literature reviewed, EPs provided training, consultation and therapies in response to a pre-identified concern. Arguably, this work represents EPs reacting to a need. Furthermore, EPs work in schools is determined by schools following the graduated response outlined within the Special Educational Needs Code for Practice (Welsh Government, 2004). Consequently, problems must have been identified prior to drawing upon EPs for support. In consequent to this, EPs work in relating to facilitating good MEWB can be reactive, rather than preventative, and thus the literature reviewed doesn't truly 'promote' MEWB. The distinction between promotion/ preventative work and reactive work may not be as clear-cut in practice as they might be in theory (Mrazek & Haggerty, 1994) and consequently the meaning of concepts in prevention, promoting and reactive intervention must be noted (Mi Cho & Mi Shin, 2013). Improving MEWB and reducing MH difficulties are complementary strategies (see Figure 1). Along with treating those already diagnosed with MH illnesses, these significantly improve population health and well-being (World Health Organisation, 2003). The aim of work to promote MEWB however is to increase psychological or emotional well-being, competence, resilience by creating supporting living environments (Mi Cho & Mi Shin, 2013). It can be seen as a process aimed at changing environments (social, physical, economic, educational and cultural) and enhancing coping capacity of communities, families and individuals by conveying knowledge, skills and resources (Wood & Wise, 1997). Crucially, promotion of good MEWB includes work that occurs before the onset of a disorder (Mrazek & Haggerty, 1994). Consequently, despite the fact that research has identified a role for EPs with older children and young people in 'reacting' to issues relating to MEWB or MH, there is a paucity of information available regarding the way that EPs help to work with others to truly promote MEWB during the pre-school period. This review highlighted a gap in the literature; EPs role

in promoting MEWB in the pre-school setting has not been investigated. It would be useful to have more in-depth information about the actual work that EPs complete in relation to different levels of intervention in relation to promoting emotional wellbeing during the pre-school years.

1.9 What Role do EPs have in the pre-school years?

EPs have a distinctive role in the early years' education field (Munn, van der Aalsvoort & Lauchlan, 2010). The special contribution of psychologists comes from their understanding of children's development, their understanding of play and its role in mental life, and their orientation to developmental theory rather than to curricular theory. In one special edition of the Education & Child Psychology publication in 2010, nine research articles outline different roles that EPs can have in relation to contributing to the early years' education of young children (e.g., Robinson & Dunsmuir). The articles which specifically discuss the EPs role are described below.

EPs contribute to multi-professional assessment and intervention of children with special educational needs, for example, Robinson & Dunsmuir, 2010. The authors reported a distinct lack of clarity about the role of the EPs and the actual and potential contribution to work with children in the pre-school age group. This is despite the fact that psychological theory and research has made significant contribution to our understanding of how difficulties relating to the pre-school years can be best understood and managed (e.g., sleeping, eating, toileting) (Robinson & Dunsmuir, 2010). Further clarification of professional roles and boundaries may facilitate this and EPs need to ensure that knowledge and evidence based on psychological theory and research is employed in planning and reviewing interventions to achieve the best outcomes (Janè-Lopis et al., 2005).

Cunningham & Lauchlan (2010) explored social workers', kinship carers' and EPs' views regarding the EP role in supporting pre-school children in kinship care. The authors concluded that there is potential for EPs increase their role in this area to support children who present with emotional or attachment difficulties. The EPs noted that this could be achieved through training and interventions to address some of the emotional issues experienced by some children in kinship care and the kinship carers suggested that EPs could help to alleviate the situation by offering emotional support to the children and their families. Interventions aimed at increasing the children's emotional literacy may be helpful. Extending their emotional vocabulary may help the children to find better ways of coping with their complex feelings which may, in turn, help to address any challenging behavioural expressions experienced by children in kinship care. However, EPs caution that poor levels of staffing and pressures of time make this difficult (Cunningham & Lauchlan, 2010).

Douglas-Osborn (2015) aimed to explore the EP's role in supporting the early years' settings in one LA in England. Questionnaires, interviews and focus groups with 33 participants (11 early years' staff, eight EPs, 13 parents and carers and one health visitor) and found that whilst EPs engaged in a wider range of work than expected (casework, support staff and parents), there was still a need for more time for more in-depth and longer term work.

1.10 Current Research

Previous research has examined the role of EPs in promoting good MEWB (e.g., Atkinson et al., 2011; 2014; Boorn et al., 2010), however, at the time of writing, no information was available regarding the EPs role in promoting MEWB during the pre-school years. Evidence suggests that EPs do have a role working with children during their pre-school years (e.g., Cunningham & Lauchlan 2010; Douglas-Osborne, 2015), however, such studies have not

focused upon MEWB specifically. This is despite theoretical evidence (reviewed in section 1.4) that has demonstrated the importance of promoting MEWB in the context of pre-school years. Furthermore, the research reviewed within the literature detailed EP's role in responding to concerns about MEWB. Arguably, there is a role for EPs to work less reactively; the EP role in the early years could relate more directly to promotion of good MEWB and prevention of difficulties, rather than reactive work. Consequently, it is essential to examine the role that EPs can and do have in the pre-school years in reference to promoting MEWB.

This research will seek to explore the role that EPs have in promoting the MEWB of young children during the pre-school years. A two part study is conducted: part one obtained the perspective of EPs who work with pre-school children across Wales in order to explore their constructions regarding their role in pre-school years and in relation to promoting emotional wellbeing. Part two will focus on a specific government initiative, Flying Start, where the role of the Flying Start EP in relation to promoting emotional wellbeing will be explored. The study proposed thus aims to make an original contribution to knowledge of EP role in early years' education that could potentially support early intervention and prevention. Two principal research questions (RQ) and 6 secondary research questions are proposed:

Principal Research Question 1

What are the Local Authority Educational Psychologists' constructions of their role in promoting mental and emotional well-being in the pre-school years?

- RQ 1a: What is the current role of Local Authority EPs in relation to promoting MEWB in pre-school years?
- RQ 1b: What are the facilitators and barriers to Local Authority EPs engagement in work related to promoting MEWB in pre-school years?

 RQ 1c. How might LA EPs improve their work in relation to promoting MEWB in preschool years?

Principal Research Question 2

What are the Flying Start Educational Psychologists' constructions of their role in promoting mental and emotional well-being in the pre-school years?

- RQ 2a What is the current role of Flying Start EPs in relation to promoting MEWB in the pre-school years?
- RQ 2b What are the facilitators and barriers to Flying Start EPs engagement in work related to promoting MEWB in the pre-school years?
- RQ 2c How might EPs improve their work in relation to promoting MEWB in preschool years?

References

- Allen, G. (2011). Early Intervention: The Next Steps. London: Department for Work and Pensions (DWP). Retrieved on March 1st 2018 from: https://www.gov.uk/government/publications/early-intervention-the-next-steps--2
- Atkinson, C., Corban, I., & Templeton, J. (2011). Educational psychologists' use of therapeutic interventions: Issues arising from two exploratory case studies. *Support for Learning*, 26(4), 160–167
- Atkinson, C., Squires, G., Bragg, J., Muscutt, J., & Wasilewski, D. (2014). Facilitators and barriers to the provision of therapeutic interventions by school psychologists. *School Psychology International*, *35*(4), 384-397
- Armon-Jones, C. (1986). The thesis of constructionism. In R. Harre (Ed). *The Social Construction of Emotions (pp. 32-56)*. Oxford: Basil Blackwell.
- Baker-Henningham, H. (2014). The role of early childhood education programmes in the promotion of child and adolescent mental health in low- and middle-income countries. *International journal of Epidemiology*, 43(2), 407-33
- Barret, M., & Trevitt, J. (1991). *Attachment behaviour and the school child*. London: Routledge.
- Barry, M. M. (2007). Generic principles of effective mental health promotion. *International Journal of Mental Health Promotion*, 9(2), 4-16
- Barry, M., & Jenkins, R. (2007). Implementing mental health promotion. Oxford, Elsevier
- Beattie, A. (1991) Knowledge and social control in health promotion: A test case for social theory and social policy. In J. Gabe, M. Calnan, and M. Bury (Eds.), *Sociology of the Health Service*. London: Routledge

- Bellis, M. A., Hughes, K., Leckenby, N., Perkins, C., & Lowey, H. (2014). National household survey of adverse childhood experiences and their relationship with resilience to health-harming behaviours in England. *BMC Medicine*, 12, 72.
- Beck, A. T. (1967). *Depression: Causes and treatment*. Philadelphia: University of Pennsylvania Press.
- Bonetti, S., & Brown, K. (2018). *Structural elements of quality early year's provision: A review of the evidence*. London: Education Policy Insight
- Boorn, C., Hopkins-Dunn, P., & Page, C. (2010). Growing a nurturing classroom. *Emotional & Behavioural Difficulties*, 15(4), 311–321
- Bowlby, J. (1975). *Attachment and loss (Volume I :Attachment) (2nd Edition)*. New York: Basic Books.
- Bowlby, J. (1979). The making and breaking of affectional bonds. London: Tavistock.
- Bowlby, J. (1998). A secure base: Clinical applications of attachment theory. London: Routledge.
- Boxall, M. (2002). Nurture groups in schools: Principles and practice. London: Sage
- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research* in *Psychology*, 3(2), 77-101
- Bronfenbenner, U. (1979). *The ecology of human development*. Cambridge, Mass: Harvard University Press
- Burton, S. (2008). Empowering learning support assistants to enhance the emotional wellbeing of children in school. *Educational and Child Psychology*, 25(2), 40-56
- Burr, V. (2015). An introduction to social constructionism (3rd Edition). London: Routledge

- Centre on the Developing Child (2019).

 https://www.1001criticaldays.co.uk/sites/default/files/1001%20days_oct16_1st.pdf
 Harvard University Press. Accessed on 28.04.2019.
- Children's Society. (2008). *The good childhood inquiry: Health research evidence*. London: Children's Society.
- Clinton, J., Feller, A. F., & Williams, R. C. (2016). The importance of infant mental health. *Paediatric Child Health*, 21(5), 239-241
- Conners, K. (1998). Revision and standardization of the Conners' Rating scales-Revised; Factor structure, reliability, and criterion validity. *Journal of Abnormal Child Psychology*, 26(4), 279-91
- Cronin, P., Ryan, F., & Coughlan, M. (2008). Undertaking a literature review: A step-by-step approach. *British Journal of Nursing (BJN), 17*(1), 38-43.
- Cunningham, L., & Lauchlan, F. (2010). Are we doing enough as EPs? *Educational & Child Psychology*, 27(4), 73-90
- Dawson, J., & Singh-Dhesi, D. (2010). Educational psychology working to improve psychological well-being: An example. *Emotional and Behavioural Difficulties*, 15(4), 295-310.
- Dean, D. C., Planalp, E. M., Wooten, W., Kecskemeti, S. R., Adluru, N., Schmidt, C. K., Frye, C., Birn, R. M., Burght, C. A., Schmidt, N. L., Styner, M. A., Short, S. J., Kalin, N. H., Goldsmith, H. H., Alexander, A. L., & Davidson, R. J. (2018). Association of prenatal maternal depression and anxiety symptoms with infant white matter microstructure. *JAMA Pediatrics*, 172(10), 973-981
- De Shazer, S., Dolan, Y., Korman, H., Trepper, T. S., McCollom, E., & Berg, I. K. (2007).

 More than miracles: The state of the art of Solution-Focused Brief Therapy.

 Binghamtom, N.Y: Haworth Press.

- Deave, T., Davies, J. D., Ahmad, Y., & Ryan, J. (2011). Flying Start programme in Neath Port Talbot. Project Report. University of the West of England, Bristol. Available from: http://eprints.uwe.ac.uk/21722
- Department for Education (DfE) (2016): *Mental Health and Behaviour in Schools:*Departmental Advice for School Staff. Retrieved on 12th March 2018 from:

 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/

 Mental_Health_and_Behaviour_-_advice_for_Schools_160316.pdf
- Department for Education and Skills. (DfES) (2001). *Special educational needs code of practice*. Nottingham, UK: DfES Publications.
- Douglas-Osborn, E. F. (2015). Early investment: The role of Educational Psychologist in supporting an early years setting. Unpublished Thesis: Manchester Institute of Education.
- Durbin, N.J. (2010). Promoting mental health and psychological wellbeing in children: A sociocultural activity theory analysis of professional contributions and learning in a multidisciplinary team. (Unpublished doctoral thesis). Birmingham University
- Durlack, J. A., Weissberg, R., Dymnicki, A., Taylor, R., & Schellinger, K. (2014). The impact of enhancing students' social and emotional learning: A meta -analysis of school-based universal interventions. *Child Development*, 82(1), 405-432
- Ekornes, S. (2015). Teacher perspectives on their role and the challenges of interprofessional collaboration in mental health promotion. *School Mental Health*, 7(3), 193 211.
- Evans, G. (2004). The environment of childhood poverty. *The American Psychologist International*, 59(2), 77-92
- Farrell, P., Woods, K., Lewis, S., Rooney, S., Squires, G. and O'Connor, M. (2006). A review of the functions and contribution of Educational Psychologists in England and Wales the light of the Every Child Matters: Change for Children. DfES Research Report, 792. London: HMSO

- Faupel, A. (2003). *Emotional literacy: Assessment and intervention Primary*. London: GL Assessment Limited
- Forgeard, M., Jayawick, E., Kern, M., Matrin, M., & Matrin, S. (2011). Doing the right thing: Measuring wellbeing for public policy. *International Journal of Wellbeing*, 1, 79-106
- Geddes, H. (2006). Attachment in the classroom. The links between children's early experiences, emotional well-being and performance in school. London: Worth Publishing.
- Goodman, R. (1994). A modified version of the Rutter parent questionnaire including items on children's strengths: A research note. *Journal of Child Psychology and Psychiatry*, 35, 1483–1494.
- Goodman, A., Joyce, R.., & Smith, J. P. (2011): The long shadow cast by childhood physical and mental health problems in adult life. *Proceedings from the National Academy of Sciences of the United States of America*, 108(15), 6032-6037
- Gough, D. (2007). Weight of evidence: A framework for the appraisal of the quality and relevance of evidence. *Research Papers in Education*, 22(2), 213-228 DOI: 10.1080/02671520701296189
- Greig, A. (2007) A framework for the delivery of cognitive behaviour therapy in the educational psychology context. *Educational and Child Psychology*, 24(1), 19-35
- Gutman, L. M., & Vorhaus, J. (2012). *The impact of pupil behaviour and wellbeing on educational outcomes*. London: Department of Education
- Hall, S. (2010). Supporting mental health and wellbeing at a whole-school level: Listening to and acting upon children's view. *Emotional and Behavioural Difficulties*, 15(4), 232-339

- Hamre, B. K., & Pisnta, R. C. (2001). Early teacher-childr relationships and the trajectory of children's school outcomes through eighth grade. *Child Development*, 72(2), 625-638
- Hart, R. (2009). Child refugees, trauma and education: Interactionist considerations on social and emotional needs and development. *Educational Psychology in Practice*, 25(4), 351-368, DOI: 10.1080/02667360903315172
- Jané-Llopis, E., Barry M. M., Hosman, C. & Patel, V. (2005) Mental health promotion works: A review. *Promotion and Education Supplement*, 2, 9-25
- Johnson, B., & Onwuegbuzie, A. (2004). Mixed methods research: A research paradigm whose time has come. *Educational researcher*, *33*(7), 14-26
- Jones, R. (2003). The construction of emotional and behavioural difficulties. *Educational Psychology in Practice*, 19(2), 147-157
- Kelly, G. (1955). The psychology of personal constructs. New York, USA: Norton
- Kelly, B., Woolfson, L., & Boyle, J. (2008). Frameworks for practice in educational psychology: A textbook for trainees and practitioners. London: Jessica Kingley
- Keyes, C.L. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Behavior Research*, 43, 207-222.
- Keyes, C. L., Dhingra, S. S., & Simoes, E. J. (2010). Change in level of positive mental health as a predictor of future risk of mental illness. *American Journal of Public health*, 100(12), 2366-2371
- Kieling, C., Baker-Henningham, H., Belfer, M., Conti, G., Ertem, I., Omigbodun, O., Rohde,L. A., Srinath, S., Ulkuer, N, & Rahman, A. (2011). Child and adolescent mental healthworldwide: Evidence for action. *The Lancet* 378(9801), 515-1525.
- Kitayama, S., Hazel, M., & Kurokawa, M. (2000). Culture, emotion and well-being: Good feelings in Japan and the United States. *Cognition and Emotion*, *14*, 93-124

- Klein, P. S., & Rye, H. (2004). Interaction-oriented early intervention in Ethiopia: The MISC Approach. *Infants & Young Children*, *17*(4), 340-354.
- Lozoff, B., Smith, J. B., Clark, K. M., Perales, C. G., Rivera, F., & Castillo, M. (2010). Home intervention improves cognitive and social-emotional scores in iron-deficient anaemic infants. *Pediatrics*, 126, 884-894
- MacDonald, G. (2006). What is mental health? In M. Cattan & S. Tilford (Eds.), *Mental health promotion*. *A lifespan approach* (p 8-32). McGraw Hill: Open University Press.
- MacDonald, G., & O'Hara, K. (1998). Ten elements of mental health, its promotion and demotion: Implications for practice. Birmingham: SHEPS.
- MacKay, T. (2007). Educational psychology: The fall and rise of therapy. *Educational and Child Psychology*, 24(1), 7-18.
- Marmot, M. (2010): Fair society, healthy lives: the Marmot Review: Strategic review of health inequalities in England post-2010. Retrieved February 13th 2018 from: https://www.local.gov.uk/marmot-review-report-fair-society-healthy-lives
- McGillivray, M. (2007). *Human well-being: Concept and measurement*. New York: Palgrave Macmillan
- McQueen, C., & Hobbs, C. (2014). Working with parents: Using narrative therapy to work towards genuine partnership. *Educational & Child psychology*, 31(4), 9-17
- Meltzer, H., Gartward, R., Goodman, R., & Ford, T. (2000). *The mental health of children and adolescents in Great Britain*. London: Office for National statistics.
- Mertens, D.M. (2005) Research and evaluation in education and psychology: *Integrating diversity with quantitative, qualitative, and mixed methods (2nd Edition)*. London: Sage

- Mentality (2005). *How does mental health promotion work?* Accessed on 01.10.2018 fromt: www.mentality.org.uk
- Mi Cho, S, Mi Shin, Y. (2013). The promotion of mental health and the prevention of mental health problems in child and adolescent. *Korean Journal of Pediatrics*, *56*(11), 459-464
- Moullin, S. Waldfogel, J., & Washbrook, E. (2014). *Baby bonds: Parenting, attachment and a secure base for children.* London: The Sutton trust.
- Moutsiana, C., Johnstone, T., Murray, L., Fearon, P., Cooper, P. J., Pliatsikas, C, Goodyer, I., & Halligan, S. L. (2015). Insecure attachment during infancy predicts greater amygdala volumes in early adulthood. *Journal of Child Psychology & Psychiatry*, 56(5), 540-548
- Mrazek, P. B., & Haggerty, R. J., (1994). *Reducing risks for mental disorders: Frontiers for preventative intervention research.* Washington: National Academies Press
- Munn, P., van der Aalsvoort, D., & Lauchlan, F. (2010). Guest Editorial. *Educational & Child Psychology*, 27(4), 6-9
- Murphey, D., Barry, M., & Vaughn, B. (2013). Mental health disorder. Child trends.

 Retrieved on 23 October 2018 from: http://www.childtrends.org/
 wpcontent/uploads/2013/03/Child_Trends-2013_01_01_AHH_MentalDisorders.pdf
- Naidoo, J., & Wills, J. (2000). *Health promotion: Foundations for practice* (2nd Edition). Edinburgh: Bailliere Tindall.
- National Assembly for Wales. (2018). Mind over matter. A report on the step change needed in emotional and mental health support for children and young people in Wales.

 National Assembly for Wales Commission Copyright 2018.
- National Institute for Health and Clinical Excellence (NICE). (2008). *Promoting children's social and emotional wellbeing in primary education*. London: NICE

- Public Health Wales. (2015). Welsh adverse childhood experiences (ACE) study. Adverse childhood experiences and their impact on health-harming behaviours in the Welsh adult population. Public Health Wales NHS Trust.
- Osborne, C., & Burton, S. (2014). Emotional literacy support assistants' views on supervision provided by educational psychologists: What EPs can learn from group supervision. *Educational Psychology in Practice*, 30(2), 139-155
- Patel, V. (2001). Poverty, inequality and mental health in developing countries. In D. Leon and G. Walt (Eds.), *Poverty, Inequality and Health*. Oxford: Oxford University Press
- Robinson, M., Dunsmuir, S., (2010) Multi-professional assessment and intervention of children with Special Educational Needs in their early years: The contribution of educational psychology. *Educational & Child Psychology*, 27(4), 10-21
- Rothia, D., Leavey, G., Chamba, R., & Best, R. (2005). *Identification and management of pupils with mental health difficulties: A study of UK teachers' experiences and views*. Birmingham NASUWT
- Rothìa, D., Leavey, G., & Best, R. (2008). Recognising and managing pupils with mental health difficulties: teachers' views and experiences on working with educational psychologists in schools. *Pastoral Care in Education*, 26(3), 127-142
- Rutter, M. (1985). Resilience in the face of adversity. Protective factors and resistance to psychiatric disorder. *The British Journal of Psychiatry*, *147*(6), 598-611
- Ryan, G. (2010). Guidance notes on planning a systematic review. NUI Galway: James Hardiman Library. Accessed on 18.11.2018 from: https://www.google.com/url?sa=t&source=web&rct=j&url=https://www.tcd.ie/library/support/subjects/psychology/Guidance%2520on%2520planning%2520a%2520systematic%2520review%2520(2).pdf&ved=2ahUKEwjs05LOxvDfAhWkwOYKHZaaCNwQFjADegQIAhAB&usg=AOvVaw2kzc0e5oLsn_Cyi3-1Cy7U

- Ryan, R. M., & Deci, E. L. (2001). To be happy or to be self-fulfilled: A review of research on hedonic and eudaimonic well-being. In S. Fiske (Ed.), *Annual Review of Psychology* (52nd Edition) (p. 141-166), Palo Alto, CA: Annual Reviews/ Inc
- Sammons, P., Sylva, K., Melhuish, E., Siraj-Blatchford, I., Taggart, B., Grabbe, Y., & Barreau, S. (2007). Summary report. Influences on children's attainment and progress in Key Stage 2: Cognitive outcomes in Year 5. Research Report RR828. London: Department for Education and Skills.
- Sanders, T. (2007). Helping children thrive at school: The effectiveness of nurture groups. *Educational Psychology in Practice*, 33(1), 45-61
- Santelices, P., Page, M., & Drummond, J. (date unknown). Supporting children: A guide for all staff. Promoting Mental & Emotional Wellbeing. Edinburgh: The City of Edinburgh Council.
- Schwandt, T. A. (2003). Three epistemological stances for qualitative inquiry:

 Interpretativism, hermeneutics and social constructionism. In N. Denzin and Y. Lincoln (Eds.), *The landscape of qualitative research: Theories and issues* (p. 292 331).

 Thousand Oaks, CA: Sage
- Schweinhart, L. J., Montie, J., Xiang, Z., Brnett, W. S., Belfield, C. R., & Nores, M. (2005). The high/scope Perry Preschool study through age 40. Summary, conclusions, and frequently asked questions. Ypsilanti, MI: High/Scope Press
- Seth-Smith, F., Levi, N., Pratt, R., fonagy, P., & Jaffey, D. (2010). Do nurture groups improve the social, emotional and behavioural functioning of at risk children? *Educational and Child Psychology*, 27(1), 21-34
- Sharrocks, L. (2014). School staff perceptions of well-being and experience of an intervention to promote well-being. *Educational Psychology in Practice*, *30*(1), 19-36.

- Siraj, I., & Taggart, B. (2013). *EPPE project: Findings from pre-school to age 7.Research briefing*. London: Institute of Education
- Squires, G. (2010). Countering the argument that educational psychologists need specific training to use cognitive behavioural therapy. *Emotional and Behavioural Difficulties*, 4, 279–94
- Sylva, K., Meluish, E., Sammons, P., Siraj-Blatchford, I., & Taggart, B. (2004). *The effective provision of pre-school education (EPPE) project: Findings from pre-school to end of Key Stage 1*. London: Department for Education and Skills
- Taggart, B., Sylva, K., Melhuish, E., Sammons, P., & Siraj, I. (2015). *Effective pre-school, primary and secondary education project (EPPSE 3-16+). How pre-school influences children and young people's attainment and developmental outcomes over time.*Research Brief. London: Department for Education
- The Health Committee (2014). *Children's and adolescents' mental health and CAMHS. Third report of session 2014-15.* Nottingham: The Stationary Office.
- The Mental Health Foundation. (2005). *Lifetime impacts. Childhood and adolescents mental health: Understanding the lifetime impacts*. Retrieved on 11.10.2017 from: http://www.mentalhealth.org.uk/content/assets/PDF/.../lifetime_impacts
- Tickell, C. (2011): The early years: Foundations for life, health and learning. Retrieved on 07.09.2017 from:

 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/180919/DFE-00177-2011.pdf
- Tierney, A. L., & Nelson, C. A. (2009). Brain Development and the role of experience in the early years. *Zero Three*, 30(2), 9-13
- Tilford, S. (2006). Infancy and childhood (0-5 years and 6-12 years). In M. Cattan, and S. Tilford (Eds.), *Mental health promotion: A lifespan approach*. Maidenhead: Open University Press

- United Nations. (1989). United Nations convention of the rights of the child. UNICEF
- Vilches, S. P. (2012). *Social Construction of Well-Being in Young People. Humak University:*Unpublished Masters' Thesis
- Wagner, P. (2008). Consultation as a framework for practice. In B. Kelly, L. Woolfson, & J. Boyle (Eds.), *Frameworks for practice in educational psychology: A textbook for trainees and practitioners* (p. 139-161). London: Jessica Kingsley
- Walker, M. T. (2006). The social construction of mental illness and its implications for the recovery model. *International Journal of Psychosocial Rehabilitation*, 10(1), 71-87
- Walker, S. P., Chang, S. M., Powell, C. A., Simonoff, E., & Grantham-McGregor, S. M. (2006). Effects of psychosocial stimulation and dietary supplementation in early childhood on psychosocial functioning in late adolescence: Follow-up of randomised controlled trial. *British Medical Journal*, *333*(7566), 472.
- Walter, W. (2013). Building better brains: New frontiers in early childhood development. UNICEF
- Weare, K. (2015). What works in promoting social and emotional well-being and responding to mental health problems in schools? Advice for Schools and Framework Document.

 National Children's Bureau (NBC)
- Weare, K. & Gray, G. (2003). What works in developing children's emotional and social Competence and wellbeing? Retrieved on 12.10.18 from: http://webarchive.nationalarchives.gov.uk/20130401151715/https://www.education.gov.uk/publications/eOrderingDownload/RR456.pdf
- Webster-Stratton, C., & Reid, J. (2004). Strengthening social and emotional competence in young children The foundation for early school readiness and success. *Infants and Young Children* 17(2), 96–113

- Welsh Assembly Government (WAG). (2004). *Children and young people: Rights to action*. Cardiff: WAG.
- Welsh Government. (WG) (2010a). Thinking positively: Emotional Health and well-being in Schools and early years settings. Cardiff: WG
- Welsh Government. (WG). (2010b). Well-being of Future Generations (Wales) Act. Cardiff: Wales
- Welsh Government (WG). (2013). *National Evaluation of Flying Start: Area case study synthesis report*. Cardiff: Wales
- Welsh Government (WG). (2015). Children and young people's wellbeing monitor for Wales.

 Cardiff: WG
- Welsh Government. (WG). (2018a). *Together for Mental Health Delivery Plan*. Cardiff: WG. Retrieved on 18.11.2018 from https://gov.wales/topics/health/nhswales/plans/mental-health/?lang=en
- Welsh Government (WG) ((2018b). Retrieved on 01.10.2018, from: WG 2018: https://gov.wales/topics/people-and-communities/people/children-and-young-people/parenting-support-guidance/help/flyingstart/?lang=en. Cardiff: WG
- Winnicott, D. W. (1965). *The maturational processes and the facilitating environment*. London: Hogarth Press and The Institute of Psycho-Analysis
- Wood, C., & Wise, M. (1997). Building Australia's capacity to promote mental health:

 Review of infrastructure for promoting health in Australia. Canberra: National Mental Health Strategy
- World Health Organisation (WHO) (2003). *Caring for children and adolescents with mental disorders: Setting WHO directions*. Geneva: World Health Organization. Accessed on 17.01.2018 at: http://www.who.int/mental_health/media/en/785.pdf

Young Minds Website (2016). Mental Health Statistics. Retrieved from:

http://www.youngminds.org.uk/training_services/policy/mental_health_statistics



Educational Psychologists' role in promoting children's mental and emotional well-being during the pre-school years: An explorative study in Wales

PART 2: Major Empirical Paper

Word count: 5,926

Excluding figures, tables and quotations

Abstract

Fifteen percent of children and young people in Wales meet the medical criteria for mental health issues (National Assembly for Wales, 2018). Seventy percent of children who experience such difficulties in the UK have inadequate intervention at a sufficiently early age (Children's Society, 2008). Consequently, increased legislative, practical and theoretical emphasis is placed upon promoting good mental health and emotional well-being (Health Committee, 2014, Welsh Government 2010). Particular emphasis is placed on promotion during the early years, as the most effective interventions are those that the target pre-school years (Weare & Gray, 2011). Despite the fact that Educational Psychologists (EPs) have the appropriate skills and knowledge to work in this area (Greig, 2007) and despite a number of professional reviews (e.g., Farrell et al., 2006), a paucity of information focuses on exploring EP's role in promoting emotional well-being during the pre-school years.

The current research explored the role that EPs in Wales have in promoting emotional well-being during the pre-school years by adopting a mixed-methods two part study. EPs were recruited to obtain information regarding the work they complete in this area, the facilitators and barriers to this work, and ways forward for future practice. Strand one collected data from EPs who work for Local Authorities in Wales whereas strand two collected data from EPs employed by Flying Start; a national initiative designed to work with families and children during the formative years. An online questionnaire was distributed and findings were presented using descriptive statistics and thematic maps. The research findings are discussed in relation to existing theoretical and research literature and the implications for Educational Psychologists' professional practice are discussed. The study provides original and valid insight into the role that EPs have in promoting mental and emotional well-being in Wales.

This research was conducted in Wales and consequently any government legislation or guidance is that of the Welsh Government (WG)

2.1 Introduction

2.1.1 Background and Context to the Topic of Study

The prevalence rates of mental health (MH) difficulties amongst children and young people (up to the age of 18) (CYP) have increased considerably in the UK (Frith, 2016). 15% have a medical diagnosis (National Assembly for Wales, 2018) and 70% of CYP who experience MH difficulties had inadequate interventions at a sufficiently early age in the UK (Children's Society, 2008; Frith, 2016; Welsh Government, 2018). Consequently, there is increased pressure on specialist services such as Child and Adolescent Mental Health Service (CAMHS) resulting in a lack of support available across the UK (Care Quality Commission (2018); Young Minds, 2016) and shifted attention to promoting mental/emotional well-being (MEWB) across the UK (The Health Committee, 2014).

In Wales, promoting MEWB is an essential consideration in WG policies with emphasis placed on early intervention, and developing resilience to deal with adverse events (e.g., WG, 2010; WG, 2018). The Children and Young People: Rights to Action Agenda in Wales, for example, set out the need for a collaborative, multi-agency, holistic approach to facilitating good MEWB (WAG, 2004). One way the WG has committed to promoting young children's MEWB is through the Flying Start programme (Morris & Willis, 2013). Flying Start provides targeted support to children and families in some of the most disadvantaged areas in Wales by focusing on identification of need and early interventions to improve language, cognitive, social and emotional development (Morris & Willis, 2013).

2.1.2 MEWB

2.1.2.1 Defining and Promoting. The definition of MEWB is complex and evolves over time. Well-being is a multifaceted process where different dimensions of our life are in

combination (Forgeard, Jayawick, Kern, Matrin, Matrin, 2011). In line with a social constructionist perspective, emotional states are a sociocultural phenomenon, characterised by attitudes and beliefs which are determined by the systems, cultural beliefs and moral values of particular communities (Armon-Jones, 1986). As emotions influence our well-being, MEWB can be described as culturally specific (i.e., a state that interacts with and created by norms and expectations within a culture) (Armon-Jones, 1986). Good MEWB and mental health difficulties can exist on opposite ends of a continuum (Keyes, 2002) with good emotional well-being at one end and mental illness at the other. Promoting MEWB and preventing mental health issues describe movements along this continuum (Ekornes, 2015). Consequently, the promotion of MEWB ought to include the prevention of MH issues (Ekornes, 2015). However, some researchers emphasise the complexities of this and argue that many individuals without mental health issues appear to lack MEWB and those with mental health issues can also have a number of features associated with good MEWB (Murphey, Barry & Vaughn, 2013). This is illustrated in Figure 10.

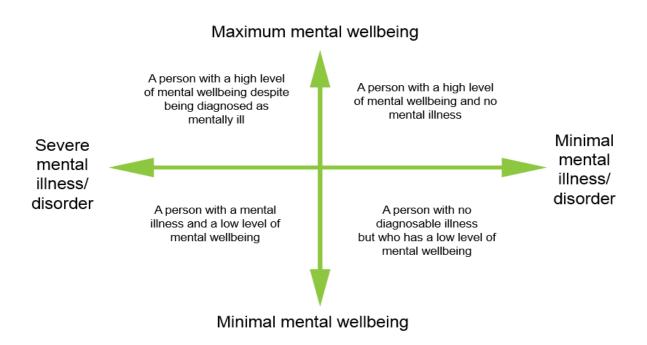


Figure 10. The Mental Health Continuum (Adapted from Santelices, Page, Drummond, date unknown)

Whilst some researchers emphasise the complexities of this as MEWB and MH are not mutually exclusive (Murphey, Barry & Vaughn, 2013), the author believes that such a continuum is helpful as is suggests that MEWB can change is response to intervention and promotion.

Features of good MEWB are:

- develop psychologically, emotionally, intellectually, creatively and spiritually
- understand and value the differences between people and respecting the right of others to have beliefs and values different to others
- recognise and manage strong feelings
- initiate, develop and sustain mutually satisfying personal relationships
- become aware of others and empathise with them
- play and learn effectively and co-operatively, solve problems with others and alone and deal with and resolve conflict effectively and fairly
- face and recover from problems and setbacks and use any psychological distress that results as a developmental process and learn from them in ways that do not impair or hinder further development.

Figure 11. Features of good MEWB (WG, 2010)

MEWB can provide individuals with personal competencies (e.g., emotional resilience and interpersonal skills) (National Institute for Clinical Excellence [NICE], 2008), is related to better academic achievement, higher school engagement and better mental health in the longer term (Gutman & Vorhaus, 2012). Promoting good MEWB is an important investment (Allen, 2011) and promotion ought to be evidence based, have clear goals and build on several theoretical perspectives (Jané-Llopis, Barry, Hosman & Patel, 2005).

A lifespan or a sociological approach to promoting MEWB considers issues arising from socio-economic, gender, educational and ethnicity differences between individuals and communities (Barry & Jenkins, 2007) and the relationship between these and CYP. Macdonald

and O'Hara's (1998) ten elements of mental health map demonstrates how MEWB can be promoted by increasing or enhancing the elements above the dotted horizontal line and by decreasing or diminishing the elements below (Figure 12).

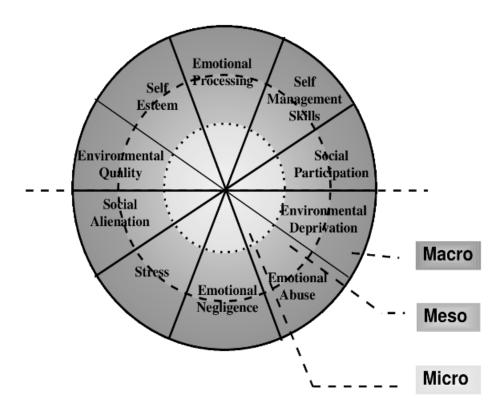


Figure 12. Macdonald & O'Hara (1998) ten elements of promoting MEWB

MacDonald and O'Hara (1998) identify three ways in which the elements should be looked at.

1. The first of these comes from an overlap between all of the elements. For example, good self-esteem makes emotional processing much easier to develop, and in turn, better emotional processing will lead to more effective self-management skills and more socially participative and supportive behaviour. This means that mental health promotion needs to act on all interactions.

- 2. The second interaction is that experiences in one element can have an effect on mental health much later on in life and because of mental health promotion needs to aim for cumulative interaction of factors over time.
- 3. The third aspect of interdependence claim that all of the ten elements can relate to three levels: the micro-, meso-, and macro-level. At the macro level, government policies and reviews may help promote MEWB. The meso level can involve local interpretation and delivery of polices published at the macro level and the micro level refers to specific work completed by particular services who collaborate with families, individuals or groups of people (e.g., educational Psychologists) (Durbin, 2009). Promoting MEWB needs to work at all these levels, building on the interaction between the levels (MacDonald and O'Hara, 1998).

Promotion programmes adopting an ecological perspective (e.g., Flying Start in Wales; see section 2.1.1) enables interventions to address factors that influence child development and family functioning. Competence-enhancing interventions carried out in collaboration with individuals, families, schools and wider communities have the potential to bring about multiple positive outcomes (Jané-Llopis, Barry, Hosman & Patel, 2005). These initiatives include early years and home visiting programmes for families at risk, parenting programmes and pre-school programmes (Barry, 2007).

2.1.2.2 What Role do Educational Psychologists (EPs) have in promoting MEWB? EPs have worked to improve MEWB through delivering therapies in schools (McQueen & Hobbs, 2014), supporting those who work with CYP in consultation (Hart, 2009; Sanders, 2007; Seth-Smith, 2010), delivering training and supervision to school staff and parents (Sharrocks, 2014), working on whole school initiatives and collaborating with others in multiagency teams. Atkinson et al., (2011) explored EPs use of therapeutic interventions and found:

Table 5

SWOT Analysis Exploring the EP's Role Using Therapeutic Interventions (Atkinson et al., 2011)

Strengths	Weaknesses
EPs use a wide range of therapeutic	Lack of time for therapeutic interventions
interventions (such as Solution focused	with young children;
brief therapy, Cognitive Behaviour	
Therapy and Personal Construct	Schools not always aware that EPs offer
Psychology) in a flexible way and at	therapeutic interventions
different levels;	_
	Limited opportunities to use.
EPs have access to CPD and supervision	
_	
There is a wide definition of 'therapeutic	
intervention' in EP practice	
Opportunities	Threats
A possible great future significance of	Anxiety over role definitions
therapeutic work, a new directions for EPs	
and multi-agency working	Work related to SEN procedures taking
	precedence
	Time limitations.

EPs can take an eco-systemic stance towards promoting MEWB when working with whole schools. Boorn, Hopkins-Dunn and Page (2010) document an awareness training programme presented by EPs; "Growing a Nurturing Classroom". The programme, underpinned by attachment theory, aimed to help primary school staff take a holistic approach to learning and children's happiness, consider the impact of promoting secure relationships within a positive learning environment and reflect on the value of an emotionally supporting school for children and adults. Boorn et al (2010) thus outline preventative work rather than reactive work seen in other published studies. Through multi-agency working EPs have a unique contribution as they working in schools and with families in their homes (Durbin, 2010). Multi-agency work can maximise the effects of the EP role and strengthen the community dimension of this role (Dawson & Singh-Dhesi, 2010).

Importantly, much of the work that EPs conduct in relation to facilitating good MEWB is reactive (i.e., work in response to a pre-identified concern or issue). Improving MEWB and reducing MH difficulties are complementary strategies (see Figure 10). Along with treating those already diagnosed with MH illnesses, these significantly improve population health and well-being (World Health Organisation, 2003). The aim of work to promote MEWB however is to increase psychological or emotional well-being, competence, resilience by creating supporting living environments (Mi Cho & Mi Shin, 2013). Crucially, promotion of good MEWB includes work that occurs before the onset of a disorder of difficulty (Mrazek & Haggerty, 1994). Consequently, as highlighted by the literature reviewed, there is a paucity of information available regarding the way that EPs help to work with others to truly promote MEWB (i.e. prior to onset of difficulties) (Mrazek & Haggerty, 1994).

2.1.3 The Pre-School Years

2.1.3.1 Theoretical significance. Children's early experiences are important for their later emotional development (Marmot, 2010), consequently the pre-school years can offer unique opportunities to promote MEWB (Tickell, 2011). The most effective interventions for MEWB target pre-school and early primary years (Weare & Gray, 2011); positive effects of early year's intervention include improved readiness for school, better educational attainment and better future employment prospects (Marmot, 2010)

Early experiences affect the architecture of the maturing brain (Walters, 2013). A negative impact on brain development can shape the foundation of a child's development. From the perspective of attachment theory, the development of emotional relationships between infant and caregiver(s) has had a strong influence on thinking about early MEWB (Winnicott 1964; Bowlby 1975). A secure, warm, responsive and predictable relationship with at least one caregiver influences the formation of neural structures that lead to positive infant MEWB.

Secure attachments provide an important protective factor for mental health in later childhood (Geddes, 2006).

The Adverse Childhood Experiences study shows that traumatic events in early childhood are associated with physical and mental health difficulties in adult life (Bellis, 2014). The potential of each child is realised through the interaction of genes, the environment and the interaction between the two. Consequently, when infants are in poor-quality child care or parental care is compromised, this can affect brain development and subsequent MEWB (Bellis, 2014). While later interventions are also effective and essential, the return on investment is greatest in early years (Walters, 2013).

Specific benefits to MEWB have been shown from pre-school interventions: Walker et al., (2006) provided intensive intervention involving increased stimulation (in the form of weekly play sessions to promote positive emotions, with the parent and child) for 129 children aged 9-24 months old. A follow up at age 17-18 years suggested that those children who had received stimulation were less likely to report anxiety or depression and were more likely to report higher self-esteem. In Wales, the Flying Start programme support families with preschool aged children and Flying Start nursery settings (Morris & Willis, 2013). The role varies from one area in Wales to another. In some areas Flying Start EPs work in collaboration with Local Authority EPs to devise the parenting interventions and provide support to parents and their families. Flying Start's Parenting Programme aims to promote positive parent-child interactions. The service is individually tailored following in-depth assessments of families and usually consists of 10 to 15 weekly home visit by experienced play workers. In a review of the efficacy of this programme it was found to provide parents with a set of practical tips to; manage children's behaviour, provide emotional support and encouragement, and re-construct positive maternal identities (WG, 2013). In other areas, Flying Start EPs visit Flying Start nursery settings (attended by children from the age of two). In this context, EPs may complete

individual assessment and consultations with staff and families to agree positive steps forward to support the children's development (Deave, Davies, Ahmad, & Ryan, 2011). Flying Start EPs work in consultation with a range of early years' professionals and others to develop intervention strategies that enhance the quality of children's lives, learning and well-being. They also deliver interventions, including training and support to carers. Flying Start EPs also contribute to multi-agency planning and review meetings to deliver joint interventions

2.1.3.1 What role do EPs have in the preschool years? EPs have a distinctive role in the early years' education field, whether this is at the level of theory or practical service delivery (Munn, van der Aalsvoort & Lauchlan, 2010). The contribution comes from EPs understanding of children's development, understanding of play and its role, and their orientation to developmental theory rather than to curricular theory.

EPs can contribute to multi-professional assessment and intervention of children with special educational needs (Robinson & Dunsmuir, 2010) and can contribute to supporting the emotional development of pre-school children in kinship care (Cunningham & Lauchlan, 2010), for example. However, there can be a lack of clarity about the role and the actual contribution to work with children in the pre-school age group (Robinson & Dunsmuir, 2010). Douglas-Osborn (2015) explored EPs role in supporting one early years' setting and found that whilst EPs engaged in a wider range of work than expected (casework, support staff and parents), there was still a need for more time for more in-depth and longer term work. The exact role that EPs have remains unclear.

2.1.4 Summary and Current Research

Previous research has examined EPs role in promoting MEWB but research has focussed on school aged CYP (e.g., Atkinson et al., 2011; 2014). A paucity of information is available regarding the role in promoting MEWB during the pre-school years, despite well-established

knowledge that ascertained the importance of intervening at this age. This research will seek to explore the role that EPs have in promoting the MEWB during the pre-school years. A two part study is proposed: part one aims to obtain the perspective of EPs who work for LAs across Wales, part two will focus on Flying Start EPs. The study proposed aims to make an original contribution to knowledge of early years' education. Two principal research questions (RQ) and 6 secondary research questions are proposed:

Principal Research Question 1

What are the Local Authority Educational Psychologists' constructions of their role in promoting mental and emotional well-being in the pre-school years?

RQ 1a: What is the current role of Local Authority EPs in relation to promoting MEWB in preschool years?

RQ 1b: What are the facilitators and barriers to Local Authority EPs engagement in work related to promoting MEWB in pre-school years?

RQ 1c. How might LA EPs improve their work in relation to promoting MEWB in pre-school years?

Principal Research Question 2

What are the Flying Start Educational Psychologists' constructions of their role in promoting mental and emotional well-being in the pre-school years?

RQ 2a What is the current role of Flying Start EPs in relation to promoting MEWB in the preschool years?

RQ 2b What are the facilitators and barriers to Flying Start EPs engagement in work related to promoting MEWB in the pre-school years?

RQ 2c How might EPs improve their work in relation to promoting MEWB in pre-school years?

Figure 13. Research questions

2.2 Method

2.2.1 Methodology

2.2.1.1 Paradigm. The overarching aim of the research was to explore EPs construction of their role in promoting MEWB in the pre-school years. Individuals each construct their own understanding and knowledge of their role through personal experiences and the meanings attributed to these experiences (Burr, 2015). The multiple constructions reflect multiple truths, based on individuals' realities, and each of these ought to be explored. The research design was consequently underpinned by a constructivist research paradigm. In line with this viewpoint, the research is underpinned by the belief that knowledge is co-created through social process (Burr, 2015). Furthermore, the present research embraced an exploratory approach, which allowed for an in-depth examination of EPs perspective of their role.

The epistemological approach of the researcher was subjectivist. The ontological approach of the researcher was relativist. This position emphasises the relative, subjective value of the data, rather than an absolute truth or validity. Relativism suggests that truth is related to an individual's social, cultural and moral context and his or her previous experiences (McEvoy & Richards, 2006). As is characteristic of this approach, the researcher's perspective may be influenced by their own experiences, biases and interests (Denzin & Lincoln, 2003; McEvoy & Richards, 2006). Whilst it is not possible to prevent this, it is helpful for the researcher to be aware of it (Willig, 2013).

2.2.1.2 Research Design. A mixed method design was selected to answer the six research questions posed. This is an effective way to understand real-life contextual situations (Creswell, 2013). Quantitative and qualitative data were collected from one single questionnaire. The questionnaire was distributed twice, in two separate strands of the study; strand 1 and strand 2 (Plano Clark & Creswell, 2008). A bespoke questionnaire was written to address the research questions and collect quantitative and qualitative data relating to EPs'

constructions and functions of their role in the early years in relation to promoting MEWB. It is acknowledged that a social constructivist paradigm and quantitative data collection seem in contention with one another (Romm & Phil, 2013), however the author believed that all answers provided to close ended and open ended questions were the participant's interpretation of their real life lived experience and consequently the author does not believe the answers provided to belong to one truth.⁵ Furthermore, questionnaires can obtain participant perspectives effectively and are effective when used in a study which has employed a mixed method design (Boynton, 2004). A questionnaire method allowed the researcher to distribute the research broadly to obtain many perspectives within this explorative study (Creswell, 2013). The reliability and validity of the measure is addressed in the discussion. The questionnaire was initially administered to a general population of Educational Psychologists employed by Local Authorities in Wales (strand 1). The data from strand 1 was analysed and the results of which informed the changes to be made to the questionnaire before being administered a second time to a different sample of Education Psychologists, who were employed by Flying Start (strand 2). Consequently, the research design was administered sequentially (Plano Clark & Creswell., 2008). Both Local Authority and Flying Start Educational Psychologists were included in the study to gain the views of EPs across Wales who may work with pre-school aged children. Flying Start EP's were included as they are employed specifically to work with this age group and consequently their constructions would supplement those provided by LA EPs.

To capture the views of a large number of participants, the questionnaire was based on an online platform (Qualtrics, 2018). The questionnaire took approximately 20 minutes to complete. At the end participants clicked 'submit', and all answers were sent anonymously and electronically, via a secure server to the researcher.

_

⁵ This notion is discussed further in Part 3; section 3.3.4.1

The research was thus divided into two key sections; strand 1 with a focus on Local Authority EPS and strand 2 focused on Flying Start EPs. In the following section, the material, participants and procedure for strand one is described first and the material, participants and procedure for strand two of the study is be described second. Finally, the ethical consideration for strands 1 and 2 are considered together.

2.3 Strand 1

2.3.1 Measure

The bespoke questionnaire, designed to address the research questions and aims of the study combined closed and open answer responses to collect quantitative and qualitative data (Appendix VII).

2.3.2 Participants

2.3.2.1 Recruitment. A purposeful convenience sampling method was used. Permission to recruit participants was sought from Principal Educational Psychologists (PEPs) of all Local Authorities (LA) in Wales. The PEPs each received a gatekeeper letter (Appendix III) and information sheet (Appendix IV) and were asked to forward the information sheet to the Educational Psychologists. The information sheet asked the participants to complete the online questionnaire and included a URL to the questionnaire.

Inclusion criteria. All participants had to be EPs (qualified and training). It was a requirement that all EPs recruited from LAs must work for a Local Authority and must work with the pre-school age to some degree in the course of their work.

Number. Forty one participants responded to the online questionnaire. Participants had been qualified for an average of 9 years (range 1-27 years).

2.3.3 Procedure

4

6

Figure 14 demonstrates the research procedure.

- Principal Educational Psychologist (PEP) of all Welsh LAs were emailed a Gatekeeper letter (Appendix III) and Information Sheet (Appendix IV).
- The gatekeeper letter asks the PEP to pass the information to all Educational Psychologists in their service. The information sheet outlined the rationale of the project, described what is expected from participation and included the URL to the online questionnaire).
- Participating EPs followed the link to the online questionnaire (Appendix VI). The first page of the questionnaire was the consent form.
- Éach questionnaire took approximately 20 minutes to complete and once completed, participant clicked 'submit'. Anonymous responses were sent to the researcher via a password protected secure server. The debrief was attached as the last page of the questionnaire.
 - Data from the questionnaire were exported to Excel after 14 days of receiving the questionnaire response in order to begin analysis.
 - Descriptive statistics were used to examine the responses provided to the closed-ended questions. Thematic analysis was used to analyse the answers given to the open-ended questions (Braun & Clarke, 2006).
 - This was selected as the most appropriate method of analysis as it can be used to explore similarities as well as differences in participants' responses, it is good for generating new findings and is highlighted as being valuable for producing findings which can be used when developing a new approach (Braun & Clarke, 2006)
 - The results informed 2 main changes to the questionnaire which allowed collection of additional data when administered in Strand 2.

Figure 14. Research procedure for Strand 1 of the study.

2.4 Strand 2

2.4.1 Measure

The questionnaire administered in Strand 2 was the same as the questionnaire administered in Strand 1 with the exception of the changes made, as listed below:

- Questions 4, 5 and 8 were removed as they were collected data regarding work in schools.
- Two new questions were added which collected data regarding EPs' constructions of mental and emotional wellbeing.

The full and complete questionnaire that was distributed in Strand 2 of the research as in Appendix VIII.

2.4.2 Participants

Recruitment. A purposeful convenience sampling method was used to recruit Flying Start Educational Psychologists. Request to recruit participants was sought from the Flying Start managers of each of the Flying Start areas in Wales. A gatekeeper letter and appropriate information sheet was emailed to each of the Flying Start managers (Appendix III and IV, respectively [this is the same as the gatekeeper and information sheet distributed in strand 1]). Managers were asked to return a signed copy of the gatekeeper letter to the researcher and then forward the consent form and information sheet to the appropriate staff.

Inclusion criteria. All participants must work for Flying Start. All participants must be employed an Educational Psychologist.

Number. Eight Flying Start EPs were recruited. Participants had qualified as Educational Psychologists for an average of nine years (range 1 to 27 years).

2.4.3 Procedure

Figure 15 demonstrates the research procedure.

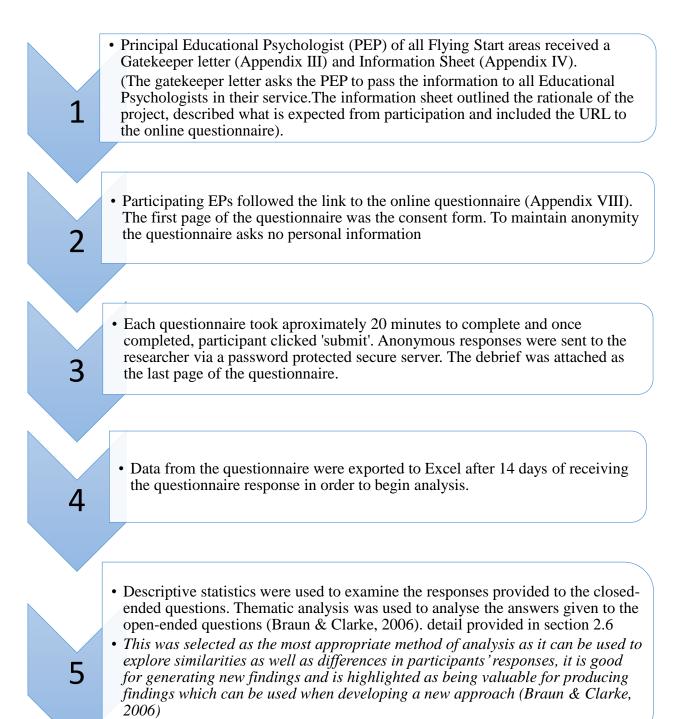


Figure 15. Research procedure for Strand 2 of the study.

2.5 Ethical considerations for Strand 1 and 2

The proposed research adhered to the ethical guidelines as outlined the British Psychological Society (BPS) (2018) and the Health Care Professionals Council (HCPC) (2016). Ethical approval from the University's Ethics Committee was obtained prior to any data being collected. A number of ethical issues were posed by this study, a summary of the pertinent issues are presented in Table 6.

Table 6

Ethical Considerations for Strand 1 and Strand 2 of the Study

Ethical	Method of addressing
Consideration	
Informed Consent	•Ensured by forwarding gatekeeper letters to the PEP of each of the LAs and
	Flying Start managers in Wales in order to request permission for recruitment.
	•PEPs and Flying Start managers were asked to forward the appropriate
	information sheet and consent form to the staff. Prospective participants were
	not contacted directly to ensure that potential participants did not feel coerced
	into participating.
	• No contact was made with any participants unless initiated by the participant
	(in instances whereby the participant had a question or sought clarification).
Participants'	• Participants were provided with an appropriately worded information sheet
limited or no	which provided information regarding the study (Appendix IV)
experience of	• Participants were provided with multiple means of asking questions (in person,
psychological	over the phone, or via email or letter).
research	• Participants were provided with the contact details of the researcher's
	supervisor and ethics committee (as well as her own contact details) to ensure
	several avenues of communication were always available.
	• The researcher ensured that participants are aware of, and understood, their
	research rights (noted overleaf) by providing detail within the consent form.

Confidentiality	 Questionnaires contained no identifying information and collected no personal data (no name, address, location of work, age, telephone number, email address) Questionnaires were completed on a secure online server and once completed the participants clicked 'submit'. Anonymous responses were emailed to the researcher via a secure server. The URL data from each respondent was not available.
Anonymity	 The consent form was included within the questionnaire and consequently the researcher did not have access to any personal or identifying information. Participants did not return the questionnaires to the researcher: the secure server was used to send anonymous questionnaires through. Questionnaires had no personal or identifiable information and consequently it was not possible to make a link between the participants and the answers provided.
Right to withdraw	 All participants were reminded that they could withdraw from the process at any time, without having to give a reason. Participants were notified that, once questionnaires were anonymously submitted they will not be able to withdraw as there was no identifying information on the questionnaire.
Debrief	 All participants were provided with an appropriate debrief form at the end of the study. For further information or if concerning issues arose whilst participating, participants will be given the researcher's contact details, and the contact details of the supervisor and ethics committee.

2.6 Data Analysis for Strand 1 and 2

Quantitative data provided for the closed-response questions were transferred to numerical data and were analysed using appropriate descriptive statistics (Field, 2012).

Thematic Analysis (TA) was selected to analyse all quantitative data as this was in line with the epistemology of the research, and allowed for themes within the data to be reported to create a rich picture of participants' views (Braun & Clarke, 2006). Semantic thematic analyses were chosen to analyse the transcripts to provide a detailed account of the explicit and surface meaning of the data (Braun & Clarke, 2006). The theoretical/ deductive approach was used in order to provide a more detailed analysis of the data which directly related to the research questions, rather than provide a description of the data overall (Braun & Clark, 2006). This means that the entire data set was coded with the research questions in mind (Braun & Clark, 2006). This was selected as the most appropriate method as it can be used to explore similarities as well as differences in participants' responses, is good for generating new findings and is highlighted as being valuable for producing findings which can be used when developing a new approach (Braun & Clarke, 2006). Despite the fact that the advantage of thematic analysis is its ability to recognise and record patterns within qualitative data, this can also be seen as a disadvantage as it can be subject to researcher's constructions (Braun & Clarke, 2006).

An account of the analysis conducted is presented in Table 7 below. The step-by-step process of the EP analysis is also included in the Appendices for further information about how final themes were established (Appendix X and Appendix XI)

Table 7

Account of Thematic Analyses Conducted (Braun & Clark, 2006)

Phase	Process
1: Familiarisation with the	This phase involved the researcher familiarising themselves with
data	the data. This was achieved by typing out the qualitative data from
	the questionnaires and reading the information repeatedly (Strand
	1) and was achieved by transcribing each interview, re-reading each
	transcript a number of times (over a period of a month), and begin
	to highlight areas of interest (Strand 2).
2: Generating initial codes	This phase involved the production of initial codes from the data.
	Data that were relevant to each code was collated in a table. A
	theoretical/ deductive thematic analysis was used, therefore the
	entire dataset was coded with specific research questions in mind.
3: Searching for Themes	This phase re-focused the analysis at the broader level of themes,
	rather than codes, by sorting different codes into potential themes.

	A deductive thematic analysis was used, therefore codes were
	grouped and themes were searched for and identified in relation to
	each of the research questions.
4: Refining themes	This phase involved the refining of the initial themes produced
	during phase 3. Codes/ themes were reviewed and refined, with
	similar codes/ themes merged, and other codes disregarded due to
	lack of relevance or supporting information.
5: Defining and naming	During this phase, main themes and subordinate themes were
themes	finalised within tables and thematic maps for each research
	questions were developed with some final refinement of themes and
	subthemes

2.7 Results

2.7.1 Overview of the analysis

Each of the six research questions are discussed separately below. Data derived from strand 1 were used to answer RQ's 1a, 1b and 1c and address Principal Research Question 1. Data from strand 2 were used to answer RQs 2a, 2b, and 2c and address Principal Research Question 2. Participants who contributed to strand 1 worked for Local Authorities; their role would be divided between pre-school work, school based work and other roles. Participants who contributed to strand 2 worked for a government initiative specifically designed to work with pre-school settings and families with children in the pre-school years. Consequently, answers provided for the same questions is expected to differ between strand 1 and 2. Appendix IX illustrates the research aims, research questions and the specific questions drawn upon to answer each question.

2.7.2 Principal Research Question 1: What are the Local Authority Educational Psychologists' constructions of their role in promoting mental and emotional well-being in the pre-school years?

Data from strand 1 are used to address this.

2.7.1. Research question 1a: What is the current role of Local Authority EPs in relation to promoting MEWB in pre-school years? Questionnaire responses to questions 3

- 15 were used address RQ 1a; this represents both qualitative and quantitative information.
All 41 participants had a brief for promoting MEWB in school aged children and young
people (CYP) as part of their generic role. EPs spent, on average, 32.5% of their time
engaged in promoting the MEWB of school aged CYP (distribution presented in Figure 16).

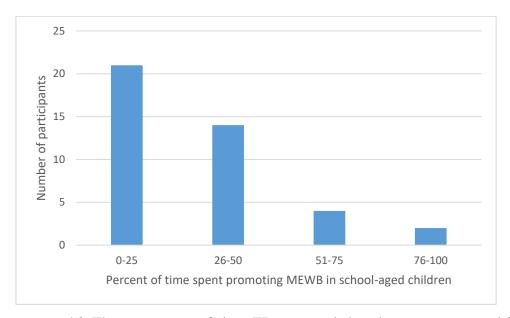


Figure 16. The percentage of time EPs reported that they spent engaged in work aimed to promote MEWB in school aged children. N=41.

EPs improved the MEWB of school aged CYP by engaging in several types of work. Statutory work was reported as the most common type of work relate to facilitating good MEWB (37 participants believed that they promoted MEWB in their statutory work). The nature of work engaged in to facilitate MEWB in school aged children is illustrated in Figure 17.

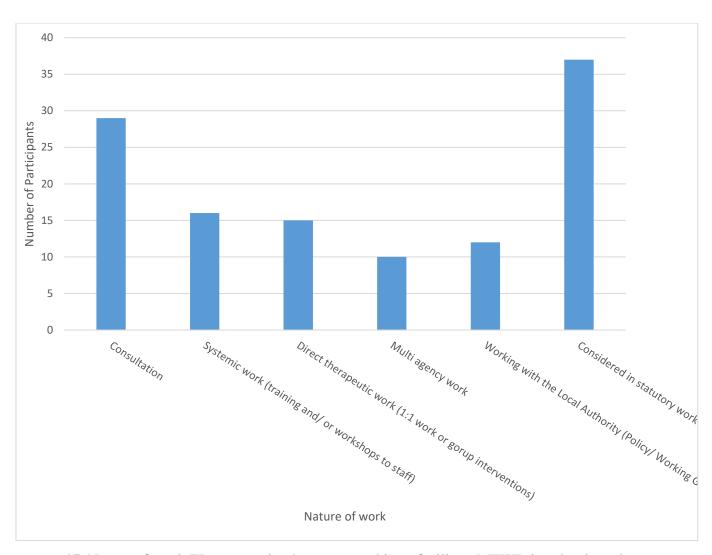


Figure 17. Nature of work EPs reported to have engaged in to facilitate MEWB in school aged children, Number of participants=41

In reference to the pre-school age group, all participants believed that promoting MEWB in the pre-school years is part of the EP role. All 41 participants had a brief for working with children of this age. This related to a speciality within the role for 12% of participants and was part of a generic role for the remaining 88% of participants. The percentage of their total time spent working with preschool children is illustrated in Figure 18 whereas the percentage of time spent promoting the MEWB of pre-school aged children is illustrated in Figure 19.

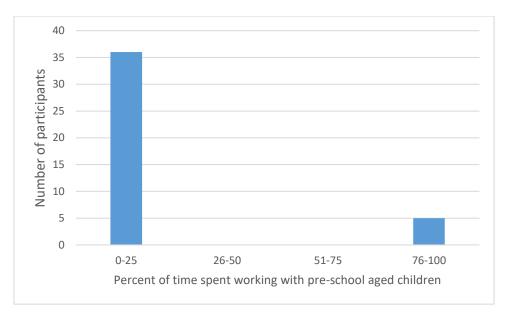


Figure 18. Percent of time EPs reported to have spent working with pre-school aged children, Number of participants=41

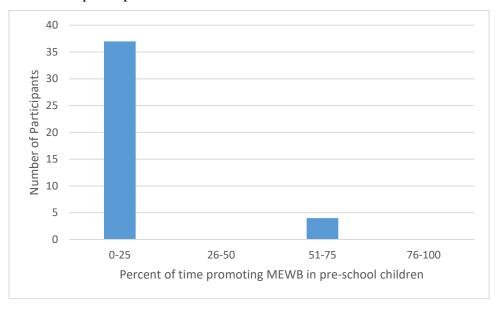


Figure 19. Percent of time EPs reported to have spent promoting MEWB in pre-school aged children, Number of participants=41

Fourteen of the 41 participants work alongside other organisations to promote MEWB in the pre-school years. EPs worked alongside Flying Start employees (e.g., Health Visitors, EPs, Key Workers at nurseries and Speech and Language Therapists employed by Flying Start), Health Visitors, Child Development experts, medical staff (e.g., Paediatricians) and other Local Authority teams aimed to support families (e.g., social services).

The majority of EPs reported to work at the individual level when promoting MEWB in the pre-school years (63% of those who answered the question), however some EPs work at

the systemic level too (33% of those who answered the question). Importantly, only 21 of the 41 participants completed this question, possibly suggesting that EP's work is difficult to classify into discrete types of work as often work may take place at individual and systemic level.

The majority of the interventions provided were described as brief (one to two sessions), with no EP providing long term interventions at the pre-school age (i.e. longer than 12 sessions). The distribution of the duration of interventions are illustrated in Figure 20.

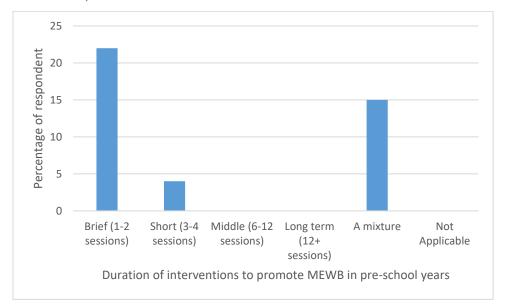


Figure 20. The number of EP participants who reported to deliver brief, short, mid, long term interventions (N=24).

EPs reported to address the MEWB of pre-school aged CYP by engaging in several types of work, 36 participants considered MEWB in their statutory work thus suggesting that this is the most common type of work relating to promoting MEWB. The nature of work engaged in to promote MEWB in pre-school aged children is illustrated in Figure 21. This figure can be compared and contrasted to Figure 17 which looks at the nature of work EPs engage in with school aged children.

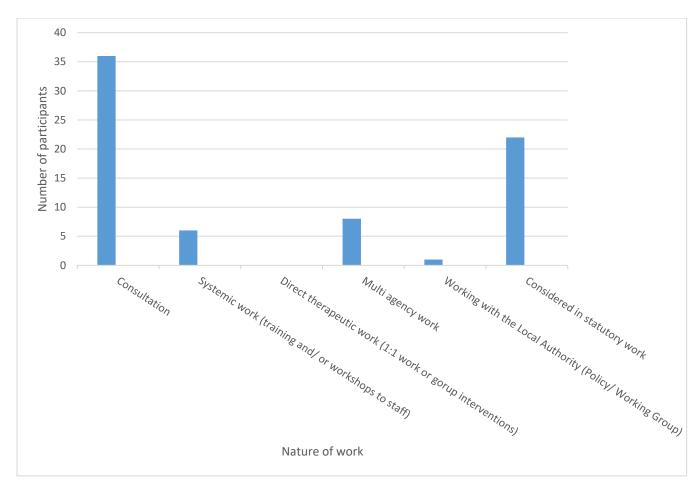


Figure 21. Nature of work EPs engage in to promote MEWB in pre-school aged children.

(NOTE: Participants could select multiple options from a selection of 'types' of work and add additional information).

2.7.2 Research question 1b: What are the facilitators and barriers to Local Authority EPs engagement in work related to promoting MEWB in pre-school years? Data derived from questions 17 and 18 of the questionnaire were used to answer this research question. The data were qualitative in nature. Two thematic analyses were conducted; one to explore the nature of the barriers, and the second explored facilitators. The themes and subthemes are presented in Figure 22.

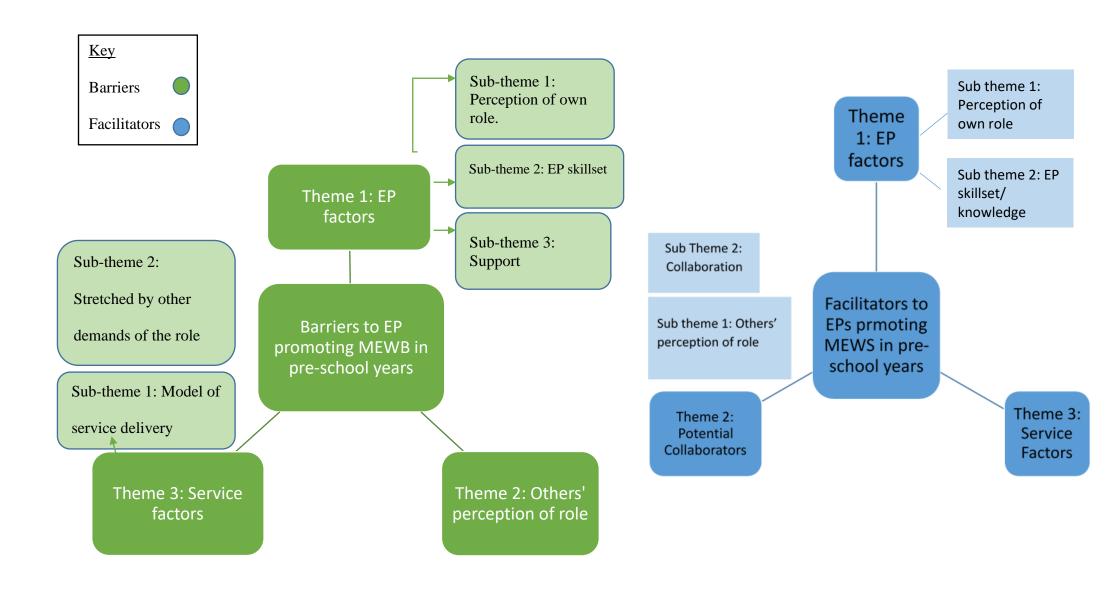


Figure 22. Thematic analyses to explore the barriers and facilitators to EP's working to promote MEWB in the pre-school years.

In terms of facilitators, three main themes emerged: 'EP factors', 'Potential collaborators' and 'Service Factors'. Theme 1, 'EP factors' was further categorised by two sub-themes; 'Perception of Own Role' and 'EP Skillset'. Theme 2, 'Potential Collaborators' was further categorised by two sub-themes; 'Others' perception of role' and 'Collaborators'.

Eight EPs discussed ideas relating to their own feelings of competence that enabled them to carry out work to promote MEWB effectively in this age-group. A selection of quotes that illustrate the themes are presented in the table below:

Table 8

Illustrative Quotations for Themes/ Sub-Themes of Research Question 1b; Facilitators

Theme	Illustrative Quotations
Theme 1: EP factors	
Sub-theme 1: Perception of	EP1 "This is an important developing area for EP work.
own role	Prevention is key to helping others and I feel that there is
	scope to develop our work in this area"
	EP12 "I enjoy working with this age-group and feel empowered to make a difference. I see this as an important part of my role"
Sub-theme 2: EP skillset/	EP5 "I work hard to promote and prevent and consequently
knowledge	have sought training and experience to develop my
	knowledge. I feel happy and confident when working with children of this age"
	EP22 "We must be confident in our knowledge of
	psychological theory so that we can contribute to this field"
Theme 2: Potential	
collaborators	

Sub theme 1: Others'	EP29 "Some of the early years' practitioners with whom I
perception of role	work see us as collaborators. This helps me to work
	effectively to promote well-being. We work together to
	promote mental well-being for the children in their setting.
	Our greatest focus is on developing security in those early
	years in childcare"
	EP30 "I have worked hard to ensure that parents see me as
	a person who can help promote good mental health from
	the beginning. Having others' see me in this way instead of
	a 'problem solver' has helped me work preventatively'
Sub theme 2: Collaborators	EP1 "Parents who want to work with us"
	EP3 "I would like to see more staff in the EY settings in
	which I have contact.
	EP20 "Collaborating with other professionals and parents
	always help, especially in this age group"
Theme 3: Service factors	EP17 "Allocation to include time to promote well-being"
	EP14 "Fewer statutory duties at this age and more
	preventative work"
	EP8 "My service has allowed me to develop a speciality in
	the early-years and consequently I have been able to carve
	a role for myself, working with others in a holistic way to

promote children's overall well-being before they start
nursery."

Three main themes emerged in relation to barriers to EP promoting MEWB in the pre-school years; 'EP factors', 'Other's Perception of Role' and 'Service Delivery Factors'. Notably, there is some crossover between facilitators and barriers. For example, whilst some EPs discussed their competence facilitated work in this area (e.g., when training had been sought), more EPs perceived competence as a barrier to working in this specific area. Additionally, whilst some EPs highlighted that colleagues perception of their role could facilitate work in this area, most noted that this could be a barrier to promoting MEWB in pre-school years. A selection of responses that illustrates the themes and sub-themes are highlighted in the tables below.

Table 9

Illustrative Quotations for Themes/Sub-Themes of Research Question 1b; Barriers

Theme	Illustrative Quotations
Theme 1: EP factors	
Sub-theme 1: Perception of	EP39 "Do other people want us to do this?"
own role	
	EP35 "We have very little time to work preventatively in
	the service, often our role with pre-school involves
	assessment for additional funds"
Sub-theme 2: EP skillset	EP24 "I have had very limited training in this area. I think
	that increased supervision (peer or from senior staff) could
	allow me to feel more able to work in this way"
	EP36 "I don't feel confident working with this age group. I
	would like more supervision"

	EP33 "Whilst I have had some training in early years and
	attachment, I don't feel confident enough to work in this
	way."
Sub-theme 3: Support	EP12 "A huge barrier for me is supervision. Whilst I am
	supported in my role, this is informal. A formal
	supervision model might increase my confidence to work
	in pre-school years"
	EP22 "I would like to ensure that I had support from my
	seniors or more experienced colleagues as this is new to
	me"
Theme 2: Potential	EP36 "Many parents I work with think that I am there to
collaborators/ Others'	assess their child for 'extra money' ready for when they
perception of role	start school"
	EP22 "Pre-school practitioners often see me at a
	gatekeeper to extra funds. This definitely limits the scope
	of my work"
	EP20 "Others often perceive the EP role as one which
	assesses and 'fixes' problems. Working preventatively
	with this age group would definitely involve reframing
	others' constructs of us as holistic practitioners"
	EP3 "I think that there can be a lack of clarity regarding
	our role in mental well-being. Different professionals will
	construct our role differently and there is such a space to
	better define what we can do as EPs"
Theme 3: Service Factors	
Sub-theme 1: Model of service	EP6 "We work using consultation model. I have offered
delivery	consultation around specific cases which I have enjoyed,
denvery	consultation around specific cases which I have enjoyed,

but I haven't been able to offer ongoing work owing to time restraints. I hope that consultation model empowers the other professionals to work preventatively"

EP10 "We operate with a consultation model of service delivery. This helps us empower our service users but I am not sure how much psychology is then used when it comes to putting the theories into practice. It would be nice to have the opportunity for more ongoing work"

EP24 "We work systemically within the service, providing workshops and training, however we offer very little in terms of promoting well-being in the pre-school age group"

Sub-theme 2: Competing demands

EP21 "We need more EPs in the service so that we can manage the other demands within our role. Working preventatively is ideal, but currently our staffing limits do not allow for that"

EP31 "We have a statutory role and this duty is one that will always take president over any other sort of work"

EP31 "We have a heavy school caseload in the service, as I am sure is the case nationwide. We are stretched and statutory work dominates"

EP36 "We have very little time to work preventatively in the service, often our role with pre-school involves assessment for additional funds"

EP9 "Whilst we do work with this age group, the majority of time will always be taken up by school visits and consultation, I've simply no time to engage in this work as often as I would like"

2.7.3 Research question 1c. How might LA EPs improve their work in relation to promoting MEWB in pre-school years? Data derived from question 16 were used to answer research question 1c and a TA was conducted on all answers provided. Five main themes emerged in relation to research question 1c. The themes relate to a patterned response from the data set. Themes one to four were found to be prevalent across the data set. Although theme five was not prevalent in the data set it captured something important in relation to the research question and was thus considered a theme. In general, EPs highlighted that to improve and increase the work that they do in relation to promoting MEWB in pre-school age group there would need to be a number of changes. The main themes are illustrated in Figure 23 and a selection of responses for the themes are highlighted in Table 9

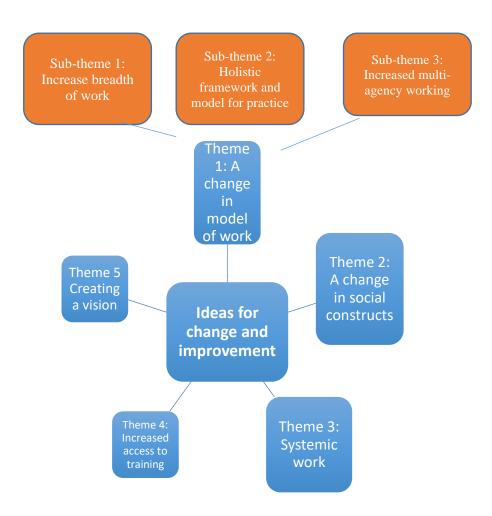


Figure 23. Main themes that arose from research question 1c; Ideas for change and improvement

Table 10

Illustrative Quotations for Themes of Research Question 1c; Change

Theme	Illustrative Quote
Theme 1: A change in model of work	
Sub-theme 1: Increase breadth of work	EP13 "I would like the opportunity to work
	more therapeutically"
	EP33 "In addition to the statutory
	assessments we ought to deliver training to
	staff and families or children to equip them
	with the knowledge and skills to promote
	positive well-being in the pre-schoolers"
	positive went being in the pre sensorers
Sub-theme 2: Holistic framework and model	EP28 "We need to work more holistically.
	·
for practice	Look at the whole picture, the child, the
	setting, the family etc. I often ask myself
	what difference will make a difference and I
	think that we need to overhaul our model of
	work instead of trying to shoehorn
	preventative pre-school work into a model
	which doesn't always work"
	EP3 "To work preventatively with this age
	group we would need to consider a different

model of work. Perhaps we would need to move away from a time allocation model and use a referral model. This might relieve some time pressure to work alongside others in the pre-school years" EP4 "There is scope for increasing our joint Sub-theme Increased multi-agency and collaboration with other 3: working working agencies. A multi-agency and multidisciplinary perspective would surely allow us to promote positive well-being" EP25 "Cross agency group incorporating training and development joint work e.g., Webster Stratton School Readiness programme. Further training of preschool staff in attachment and emotional literacy work (ELSA) and Person Centred Planning training." Theme 2: A change in social constructs EP27 "The problem within our service is that we are perceived as gatekeepers to additional fund. We need to work hard as a profession to change this construction to allow others' to see other areas in which we can make a

contribution to the positive development of children and families"

EP16 "I think others see us as having assessment and evidence gathering roles. We are seen as the 'go to' if something 'goes wrong'. However we ought to reconstruct this to increase the level of preventative work that we can engage in"

Theme 3: Systemic work

EP1 "I would like to work more with families"

EP12 "It would be good to be able to work pre-natal, to develop awareness and knowledge in families before the child is born"

EP41 "viewing mental health along a continuum is an important shift. As we change to look at mental well-being and mental health at ends of the same continuum we are more able to come up with better plans for the right stakeholders at the right level. We need to ensure that we work with

	collaborators, families and other
	professionals to develop holistic plans for the
	young children. In short, we need to work
	systemically to ensure that intervention and
	preventative work reaches ever family and
	young child."
Theme 4: Increased access to training	EP14 "Training needs to be addressed from
	the beginning. We would require more
	training as part of the doctoral course.
	Training to work in this age group and
	training on promoting well-being from this
	early age."
	E20 "Ongoing training in required to ensure
	that all EPs feel competent and confident in
	their ability to promote well-being at this
	age"
	EP26 "training is required to know to ensure
	that knowledge regarding the specific
	evidence base is accessed by all"
Theme 5: Creating a vision	EP12 "As a population we need to work
	together to be more intuitive and inventive.
	We are scientists yes, but we can also be

artists, creators, visionaries. Together we need to keep Education Psychology young and alive by developing exciting ways forward that show that we can think outside the box to collaborate with others and promote well-being."

2.7.3 Principal Research Question 2: What are the Flying Start Educational Psychologists' constructions of their role in promoting mental and emotional well-being in the pre-school years?

Data from strand 2 are used to address this.

2.7.3.1 RQ 2a What is the current role of Flying start EPs in relation to promoting MEWB in the pre-school years? Questionnaire responses to questions 3-12 and question 17 were used to address research questions 2a; this represents both qualitative and quantitative information. All eight participants worked for Flying Start. All participants had a brief for working with pre-school children and promoting their MEWB. All participants believed that it is part of the EP role to promote young children's MEWB and when prompted for additional information the following responses were provided (Figure 24)

The first 1000 days sees the most rapid period of an infant's brain development. What happens during this time is crucial to how the brain is 'wired up'. Prolonged excess stress can have a significant detrimental and lasting effect on children's developmental (and health) outcomes.

"Extremely. It should be a precursor to all other areas of development."

"These years are undeniably important for the developing brain, formation of attachments and mitigating risk factors. We have a duty to work with families to provide the best possible start to others." It is essential to promote emotional and mental wellbeing in the early years. It starts pre-birth where mother (and father) develop bonds with the unborn child. This is where antenatal groups help allowing the parents to realise the importance of attachment and giving them skills or validating the skills they already have that promote attachment. After birth we run a baby massage group which promotes attachment. Our parents gain much from this six week course which encourages them to 'read' their child and respect their child. All this feed into pre-school emotional wellbeing."

Figure 24. Raw data. Participant responses to Q17 (How important is promoting MEWB in the pre-school years?)

Three participants considered promoting MEWB of pre-school children to be a part of a specialist role and five participants noted that their role is a part of their generic and specialist role. EPs spent, on average, 84% of their time working with pre-school children and, on average, 74% of their time engaged in promoting the MEWB of pre-school children (Figure 25).

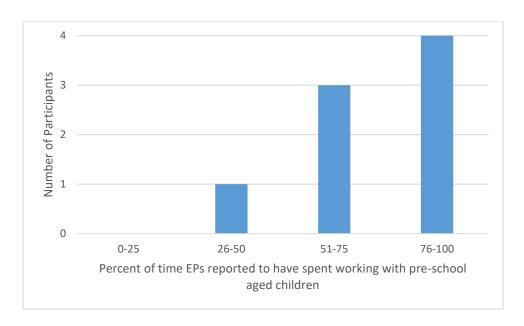


Figure 25. The percentage of time EPs reported to have spent engaged in work aimed to promote MEWB in pre-school aged children (Flying Start workers). N = 8.

EPs promoted MEWB by engaging in several types of work (Figure 26), e.g., "setting up and chairing an attachment and relational trauma informed forum to promote the MEWB of infants" (Flying Start EP3) and "Work includes planning parenting interventions with practitioners, providing supervision and training for these colleagues and supporting the development of the service" (Flying Start EP6)

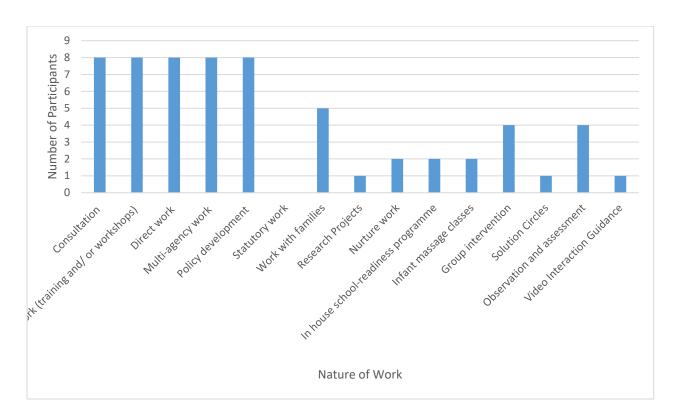


Figure 26. Nature of work EPs reported to have engaged in to promote MEWB in pre-school aged children, Flying Start EPs. N=8

(NOTE: Participants could select multiple options from a selection of 'types' of work and add additional information).

All of the participants worked alongside other professionals to promote MEWB. The Flying Start EPs worked alongside health visitors, pre-school staff, nurses, speech therapists, health and medical professionals, Local Authority EPs, teams within Flying Start who disseminate third party psychology following training, and pre-school setting key workers.

The duration of interventions is illustrated in Figure 27.

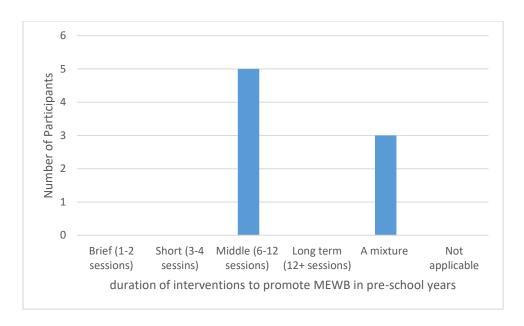


Figure 27. The number of participants who reported that they deliver brief, short, mid, long term interventions, Flying Start EPs (N=8).

2.7.3.2 RQ 2b What are the facilitators and barriers to Flying Start EPs engagement in work related to MEWB in the pre-school years? Data derived from questions 14 and 15 were used to answer this research question. The data were qualitative in nature. Two thematic analyses were conducted; one to explore the nature of the barriers, and the second to explore the nature of the facilitators to Flying Start EPs promoting MEWB in the pre-school age range. The themes are presented in Figure 28.

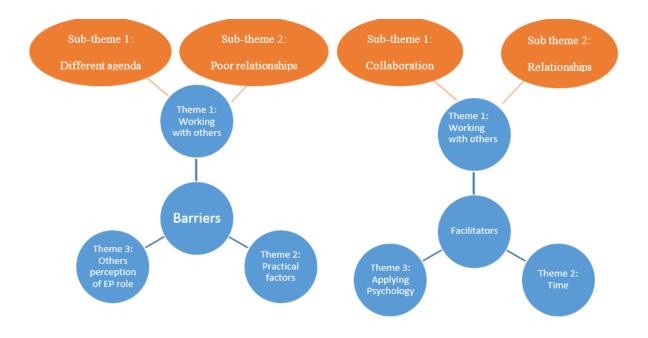


Figure 28. Themes for RQ 2b; facilitators and barriers

In terms of facilitators to promoting MEWB in the pre-school aged children, three main themes emerged, themes one and two (working with others and time) were prevalent across the data set. Theme three refers to applying psychology and although it was not prevalent across the data set, it captures something important in relation to the research question and was thus considered a theme. Several participants noted that working with others; either professionals in a multi-agency context, colleagues who share the same ethos and goals, or families are important facilitators to their work. Illustrative quotations highlighting examples of facilitators to practice are highlighted in Table 10.

Three main themes emerged in relation to barriers to promoting MEWB in the preschool years. Whilst EPs noted that working with others can facilitate effective practice to promote MEWB, working with others (theme 1) was also perceived as a barrier to effective work and two sub-themes were also created (different agenda and poor relationships). Different agenda refers to participant's belief that other professionals may be driven by different goals or follow different models to of mental health and well-being. Some believe that this resulted

in 'different agendas' acting as a barrier to working to promote MEWB in pre-school aged children (see Table 11, quotation for Theme 1, Subtheme 1, EP1 and EP2). Poor relationships represents the belief held by some EPs that an under-developed relationship or poor relationships with colleagues of families may result as a barrier (see Table 10, quotation for Theme 2, Subtheme 2, EP6 and EP5). Theme two refers to practical factors that can hinder work and theme three refers to other's perception of EP role as a barrier. Illustrative quotations highlighting examples of facilitators to practice are highlighted in Table 11 and 12

Table 11

Illustrative Quotations for the Themes of Research Question 2b: Facilitators

Theme	Illustrative Quotation
Theme 1: Working with others	
Sub-theme 1: Collaboration	EP1 "Multi agency work."
	EP2 "Ability to work alongside others"
	EP4 "Working with colleagues and
	promoting the same ethos and strategies"
Sub-theme 2: Relationships	EP2 "Develop good relationships with
	professionals and families"
	EP5 "Good relationships with pre-schools
	and MD teams"
	EP6 "Families who engage with us"
Theme 2: Time	EP8 "Time to invest"

	EP7 "Time to engage with others"
	EP2 "Time to engage with others and get
	involved"
Theme 3: Applying Psychology	EP1 "The team applying psychology to their
(Non-convergent theme)	work"

Table 12

Illustrative Quotation for the Themes of Research Question 2b: Barriers

Theme	Illustrative Quotation
Theme 1: Working with others	
Sub-theme 1: Different agenda	EP1 "Different agencies with different
	agendas/ priorities"
	EP2 "Different agendas"
	EP6 "Professionals with different aims in the
	same situation"
Sub-theme 2: Poor relationships	EP6 "Stronger voices overshadowing EP
	voice, relationships not strong enough"
	EP5 "under developed relationships"
Theme 2: Practical Factors	EP1 "Time. Funding"
	EP8 "Funding"

Theme 3: Others' perception of role	EP8 "limited understanding of my job and
	what I can contribute"
	EP2 "limited understanding of my role"

2.7.3.3. RQ 2c How might EPs improve their work in relation to MEWB in pre-

school years? Data derived from question 13 of the questionnaire were used to answer research question 2c and a TA was conducted on all answers provided. Four main themes emerged; themes 1-3 were prevalent across the dataset and thus represent the views of all EPs (strong theoretical base, communicate role clearly, and multi-agency work). Theme four refers to working preventatively and although it was not prevalent across the data set, it captures something important in relation to the research question and was thus considered a theme. These are illustrated in Figure 29 and illustrative quotations are highlighted in Table 13

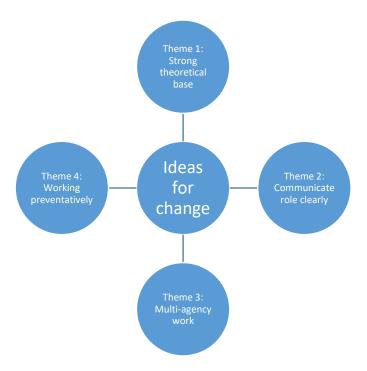


Figure 29. Main themes from research question 1c: Ideas for change and improvement

Table 13

Illustrative Quotation for Themes of Research Question 2c: Change

Illustrative Quote
EP1 "A sound knowledge and
understanding of early brain development,
attachment and ACEs"
EP1 "being trained in attachment and
relational interventions"
EP3 "make sure that we are clear regarding
the theoretical underpinnings of the work"
EP7 "communicate out role clearly to
others"
EP2 "make sure that we are clear regarding
aims and role"
EP3 " work with others in a multi-agency
capacity"
"increased MD working"
EP4 "The biggest improvement is getting
involved with the child from the very
beginning. First 1000Days project is
running in [name of establishment removed]
which says from conception to 2 years is

key to the child's development. In general, as Educational Psychologists, we wait for something to go wrong before we intervene. We need to get involved from the beginning so things don't go wrong for the child. Parent education is a key factor. The parents are with the child 24/7. They are the most important people to build the child's selfconfidence, feelings of autonomy, emotional stability and setting the scene for the child to learn. Our Preschool settings need to be experiences and efficient at giving children the appropriate learning opportunities and these can be educational, social and emotional. We need to be advising at the start not just for statutory work."

2.8 Discussion

The research set out to explore the role that EPs can have, and do have in promoting the MEWB of young children during the pre-school years in Wales. To explore this topic two strands of research were conducted: Strand 1 explored the views of EPs who work for LAs and thus work with children of all ages; Strand 2 explored the views of EP who work for Flying Start, an initiative designed to work with families of pre-school aged children only. The discussion will

begin by providing a summary of the results, drawing parallels between the findings and previous literature. The strengths and limitations are explored and implications for future research and EP practice is considered. Finally the conclusion draws the thesis to a close.

2.8.1 Summary of Findings

Patterns of findings from strand 1 and strand 2 are discussed separately, in relation to the two principal research questions.

2.8.1.1 Principal Research Question 1: What are the Local Authority Educational Psychologists' constructions of their role in promoting mental and emotional well-being in the pre-school years? All Local Authority (LA) EPs communicated that they do have a brief for working with pre-school aged children and this brief includes work to promote MEWB. EPs reported that they believe that they spend, on average, 32.5% of their time facilitating good MEWB for school aged children. LA EPs reported that they engage in a range of work to do this, including systemic work, therapeutic interventions, multi-agency work, and policy work for the LA and most predominantly in consultation and as a part of statutory work. Importantly however, this information is based on EPs interpretation and understanding of their work falling into the domain of 'promoting MEWB'. This is in line with previous literature that indicated that EPs can facilitate the MEWB of school aged children using a variety of techniques and skills and different levels of work (e.g., Atkinson, Squires, Bragg, Muscutt, Wasilewski, 2014; Sanders, 2007; Seth-Smith, Pratt, Fonagy & Jaffey, 2010). Owing to the nature and structure of their work, LA EPs believed that they spend less time engaging in promoting MEWB of pre-school children and consequently appear most likely to promote good MEWB in consultation with families or nursery staff or by considering MEWB as a factor when writing psychological advice in the context of statutory work.

LA EPs noted that collaborating with colleagues and service factors such as sufficient time and fewer statutory duties can facilitate their ability to promote MEWB and work with pre-school years. Perception of the EP role can both facilitate and hinder the EPs ability to work in this area; Durbin (2010) previously highlighted that, whilst EPs hold the appropriate skillset to contribute to work with pre-school children, often, a restricted understanding of the role will inhibit their contribution. Evidently, there is a need for clearer communication to other professionals. When the EP role is communicated clearly and others have a good understanding of the possible contribution, EPs are perceived to have a significant role in supporting the promotion of MEWB (Rothia, 2008). EPs feelings of confidence and their competence in relation to working with pre-school age can both facilitate and hinder work in this area which suggests that training courses and opportunities for CPD is imperative. Furthermore, this may suggest that some EPs perceive work with pre-school children to involve drawing upon different skillset, whereas others may consider their skills transferable to this age group.

In terms of development of the role, LA EPs noted that an increased ability to engage in systemic work, increased access to training and a change in the approach to work whereby EPs will have more opportunity to engage in preventative work will be imperative in order to work to promote MEWB at the pre-school age group. In line with the literature reviewed, if child development is accepted as relational (i.e., linked to attachment patterns, internal working model [Geddes, 2006], influence of environmental factors such as ACEs [Tierney & Nelson, 2009]), preventative interventions become logically focused upon adults and systems around the child. Consequently, increased amount of systemic work appears a logical step. Furthermore, EPs noted a need to create a vision to increase work with others in a creative way, incorporating families and longer term intervention in order to have real impact on the development of good MEWB.

2.8.1.2 Principal Research Question 2: What are the Flying Start Educational Psychologists' (FS EP) constructions of their role in promoting mental and emotional well-being in the pre-school years? By the nature of their job, all FS EPs work with preschool aged children and incorporate promoting MEWB into their day-to-day work. EPs noted that theories reporting the importance of early brain development, attachment with caregivers and the effect of prolonged stress on development as key reasons as to why they believe this age is vital for promoting good MEWB (e.g., Geddes, 2006; Tierney & Nelson, 2009). FS EPs reported that they spend a lot of time considering the MEWB of pre-school children (75%). FS EPs reported that they promote good MEWB by engaging in consultation, systemic work, direct intervention, multi-agency work, policy development, working with families, research projects, nurture work, solution circles, and assessment and through use of Video Interactive Guidance (VIG) (i.e. interventions at the systems level). FS EPs engage in a wide variety of work, incorporating families as well as the children themselves (e.g., baby massage groups, family play sessions and home based interventions for parents of infants).

Similarly to LA EPs, FS EPs noted that collaboration and sufficient time can facilitate work in this area. Good relationships with colleagues was also imperative to develop good working practice. Similarly, others perceptions of the EP role appears to hinder work as this impedes good relationships and results in different agendas overpowering the EP role. In terms of improving practice in the future, FS EPs note that a strong theoretical base and working preventatively is imperative. Furthermore, there is a need to communicate the EP role clearly to others.

2.8.1.3 A Model for EPs to Engage in Work to Promote the MEWB of Pre-School Children. Based on the findings, several areas have been identified to support EPs working to promoting MEWB of pre-school children. Fee (2011) proposed a model for EPs to engage in MH and MEWB work with children and adolescents. It is possible to draw parallels between

the findings of the current study and Fee (2011) and the author thus proposes that the model is also applicable to pre-school age children:

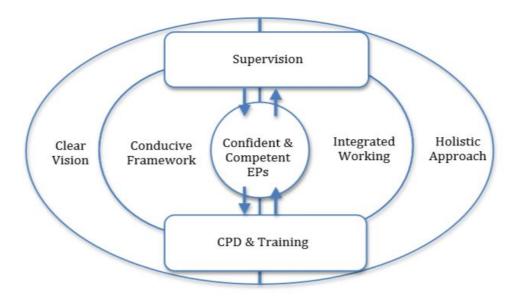


Figure 30. Fee (2010) model for EPs to engage in MH and psychological well-being work with children and young people

It is imperative that a good supervision structure is established with EPs receiving regular and consistent supervision specific to their needs (Dunsmuir & Leadbetter, 2010). This ensures that EPs have opportunity to develop their skills and knowledge but also may help EPs feel supported in their role and development (e.g., Barriers to EP promoting MEWB in pre-school year: Theme 1, Sub-theme 3 "Support"). Furthermore, there is need for services and individual EPs to focus on developing the skills necessary to work in this area, many participants noted that a barrier to their work is lack of training. Continuous Professional Development (CPD) and training appears to be an integral component for ensuring EPs remain knowledgeable, confident and competent to complete work with pre-school children in the domain of promoting MEWB. Such training and supervision could influence the quality of work EPs complete and consequently this type of support is not only imperative but also desired by EPs (as seen in results) (Dishion & Stormshak, 2006).

Increased multi-agency working was seen as a significant area of development that provides EPs with opportunity to engage in more in-depth work. Working with other agencies in an integrative fashion would facilitate the adoption of a holistic framework to meet the needs of young children and facilitate MEWB (Fee, 2011). Increased collaboration could provide EPs with increased opportunity to communicate the function of their role and the skillset held, could reduce boundaries between services and could enable professionals to work with the aspect of a system that has the biggest impact. Importantly, EPs need to feel competent and confident to work in an integrated framework, where they can contribute valuable knowledge and skills using multiple theoretical perspectives to develop psychological perspective of MEWB (Nathan & Webber, 2010).

2.8.2 Relevance to Education and Educational Psychology

Results obtained from the two strands of the current study can be considered together and consequently the results from strand 1 and 2 allowed the researcher to extrapolate several areas of change for EP work, for clarity these are summarised in Table 14. There are influences at work beyond the individual level of EP practice which shape and mould the nature of work EPs complete. For example, geographical factors and demographics, such as family income and post code, play a role in influencing working practice, based on the way in which Flying Start support is distributed. It is the perceived need that is important as this mobilises the direction and vision of a service.

Table 14

Implications for EP Practice Based Upon the Results of this Research

Nature of	Detail	
change		
Location of EPS	The location of the Educational Psychology Service in relation to larger	
in the system	service structures may influence the principles behind a shared vision	
	for the service. LA EPs noted that collaboration with other services can	
	both facilitate and hinder EP work in promoting MEWB in the pre-	
	school years. LA EPs further noted that others' perception of the EP	
	role can hinder work in this area and LA EPs believed that the EP role	
	needs to be communicated more clearly to others teams within and	
	outside the LA. Working in integrated teams may provide opportunities	
	to overcome such barriers to engage in a broader range of work,	
	develop relationships with key stakeholders, help EPs communicate	
	their role and functions and increase the level amount of systemic work	
	conducted. The placement of an EPS needs great consideration,	
	especially if services want to focus more on meeting the needs of young	
	children holistically. Without the agreement and desire at a service level	
	for MEWB work to be part of the day-to-day work completed by EPs,	
	the framework needed, such as training, supervision and opportunity	
	will not be developed to facilitate and support work of this nature;	
	therefore, there is a need for systemic change.	
Developing a	LA and Flying Start EPs both noted that increased multi-agency work	
shared vision	will help drive the profession forward in terms of working to promote	

MEWB in the pre-school years. Consequently, it may be useful to establish a working party in each locality that includes a wide range of relevant professionals to explore the pragmatics of facilitative effective service delivery to promote good MEWB during the pre-school years. Prior to the development of working parties, it will be important for a number of EPs to explore worries and concerns regarding historical issues related to power struggles with dominance of the medical model and the misperception of the EP role (as identified in the results). EPs may benefit from thinking about and communicating the different theoretical perspectives regarding MEWB and how this fits into the EP work. It will be important for EPs to reflect on the role they would like to adopt in relation to working with other professionals and how this would be negotiated and managed.

If there is a strong commitment to develop MEWB practice, services might like to complete organisational change projects that are guided by theories such as appreciative inquiry (Cooperrider, Whitney & Stavros, 2008) or soft systems methodology (Checkland & Scholes, 1990) approaches as this will aid the development of a shared vision that all professionals can contribute towards. By drawing on frameworks such as appreciative inquiry or soft systems methodology, EPs provide a strong theoretical base for changes. It is vital to reflect on the impact of change on individuals and discuss and worries or concerns that may arise. These approaches may help develop a shared vision between all members who are involved, which may result in successful change

Increased joint
working and
multi-agency
work

Joint working between professionals involved pre-school children (such as health visitors, nurses, midwives, and speech and language therapists) would be useful. Services could develop joint training packages that could be delivered in pre-school settings or in the community to families to develop capacity to manage and promote the MEWB of young children. Integration between professionals would facilitate a greater understanding of the EP role and of how services can complement each other (Pettitt, 2003).

Target training and CPD

If EPs are to establish more multi agency and joined up working, thought and consideration will need to be given to the framework of service delivery and the competence of EPs. Several participants highlighted that EPs confidence and perceived competence affect their practice in this area. Consequently, it may be useful to guide CPD to focus on the necessary skills to enable EPs to feel confident to work with MEWB in the pre-school years. Services might need to consider buying in specific training package linked to approaches.

Sharing practice and training

The profession could work towards increasing the amount of work they do in relation to promoting MEWB in the pre-school years. The profession could consider establishing a means for a detailed professional discussion about the future direction of EP in relation to pre-school MWEB. Facilitative discussions might provide greater focus and agreement within the profession and prevent further diversity and faction developing. Discussions might also provide a bridge between LA EPs and Flying Start EPs. EPs might consider joint conferences and

CPD to be organised across the two organisations, training centres to incorporate CAMHS placement as part of the professional training, training centres to incorporate more work with the pre-school age group, MEWB to be addressed more specifically within the initial training of EPs.

2.8.3 Strengths, Limitations and Future Studies

The present research provides a novel, unique and valuable insight into the role that EPs in Wales can and do have in relation to promoting the MEWB of children during the pre-school years. The explorative nature of the study allowed the researcher to ask open ended questions to build a picture of the work that is or could be completed in Wales. Every effort was made to conduct a scientifically valid, theoretically justified study; the study strengths and limitations must be noted.

Table 15
Strengths and Limitations of the Study

Factor	Strength	Limitation and implication for
		future work
Generalisability	The decision to distribute an online	However, as participation was
	survey to all EPs in Wales yielded a 20%	voluntary, thought must be given to
	return rate. This reflects a good return	the representativeness of the sample
	rate in mixed methods research which	(Leung, 2015). It is possible that
	allowed the researcher to gain a	those who participated were more
	comprehensive and valuable insight into	interested in MEWB as a topic area
		and further possible that this placed

the views that participants held regarding the topic of study (Creswell, 2013).

a bias upon the results. Future research may need to consider additional or alternate ways to distribute the survey in order to obtain a higher return rate.

Social constructions of the researcher

the researcher As took social constructivist perspective with a relativist ontology, the complex phenomena of MEWB was not oversimplified. A reductionist approach may have resulted in over-simplification of a sensitive, complex and multi-faceted subject and consequently, this approach to data analysis contributed to the strengths of the study. The researcher's limited involvement with the participants who completed the questionnaire in a notable strength as participant responses were less likely to be influenced by the researcher's own biases and social constructions (Gall, Gall & Borg, 2003).

All results presented were according to the researcher's social constructions, personal biases and beliefs. The epistemology in which the researcher explored the topic is not immune to researcher bias and whilst the researcher was aware of her own biases, the research process would inevitably have been influenced by the researcher's epistemological standpoint (Braun & Clarke, 2006). Future work ought to aim to minimise these effects by considering triangulation approach and use an independent coder to perform a second thematic analysis to verify codes or themes. In this study, time and practical constraints limited the researcher's ability to do this.

Validity The questionnaire designed appeared Additional or alternate questions appropriate as responses provided the could have been asked in order to researcher with sufficient information to improve the validity of this aspect answer the research question. (e.g., 'what factors may influence Silverman (2009) noted five approaches your personal engagement with work to promote MEWB in the preenhance reliability (refuational analysis, constant data comparison, school years' or 'what do you comprehensive data use, inclusive of the believe the role of the EP ought to be in relation to promoting MEWB deviant case and use of tables). Attempts were made to adhere to these five in the pre-school years?'). This principles; tables were used to clearly would have provided the researcher represent the data, information from a with more information that directly participant which different from other relate to the research question participants was incorporated to answer (Leung, 2015). Future work ought the research question (see RQ 2b theme 3 to overcome such issues by using a and RQ 2c theme 4) and attempts were pilot study to examine the validity made to relate data to the findings of and reliability. previous research. **Exploratory** The exploratory nature of this research This research was designed to be work resulted exploratory consequently novel unique and contribution to knowledge regarding EP investigation further will practice by providing a picture of the type required to explore some of the of work EPs in Wales reported they do. possible emerging themes in some

depth, a second wave of study

would facilitate this and follow up interview or a focus group could be held to explore the emerging themes in more detail The study conducted in Wales consequently readers must cautious in only generalising the results to a Welsh context. Future studies may also consider collecting information from those who work with Educational Psychologist in different order obtain to perspective on the role of the EP.

2.8.4 Final Conclusions

Despite the limitations noted, the current study answered all of the research questions posed. The study sought to answer the questions using a sequential mixed-methods approach to provide a rich and detailed analysis of the role that EPs have in promoting MEWB in Wales. The study provides an insight into the EP's role in Wales and thus provides an original contribution by addressing a previously understudied topic by combining two fields of thought (EPs role in promoting well-being and EPs working with pre-school aged children). The findings have practical implications for EP practice, which have been highlighted within the discussion. It is hoped that identification of facilitators, barriers and suggestions for change can allow EPs in Wales to work to increase the promotion of good MEWB in the pre-school years.

The exploratory piece of work can provide a platform from which future work can be conducted.

References

- Allen, G. (2011). Early Intervention: The Next Steps. London: Department for Work and Pensions (DWP). Retrieved on March 1st 2018 from: https://www.gov.uk/government/publications/early-intervention-the-next-steps--2
- Armon-Jones, C. (1986). The thesis of constructionism. In R. Harre (Ed). *The Social Construction of Emotions (pp. 32-56)*. Oxford: Basil Blackwell.
- Atkinson, C., Corban, I., & Templeton, J. (2011). Educational psychologists' use of therapeutic interventions: Issues arising from two exploratory case studies. *Support for Learning*, 26(4), 160–167
- Atkinson, C., Squires, G., Bragg, J., Muscutt, J., & Wasilewski, D. (2014). Facilitators and barriers to the provision of therapeutic interventions by school psychologists. *School Psychology International*, *35*(4), 384-397
- Barry, M. M. (2007). Generic principles of effective mental health promotion. *International Journal of Mental Health Promotion*, 9(2), 4-16
- Barry, M., & Jenkins, R. (2007). Implementing mental health promotion. Elsevier, Oxford
- Bellis, M. A., Hughes, K., Leckenby, N., Perkins, C., & Lowey, H. (2014). National household survey of adverse childhood experiences and their relationship with resilience to health-harming behaviours in England. *BMC Medicine*, *12*, 72.
- Boorn, C., Hopkins-Dunn, P., & Page, C. (2010). Growing a nurturing classroom. *Emotional & Behavioural Difficulties*, 15(4), 311–321
- Bowlby, J. (1975). *Attachment and loss (Volume I :Attachment) (2nd Edition)*. New York: Basic Books.

- Bowlby, J. (1998). *A secure base: Clinical applications of attachment theory.* London: Routledge.
- Boynton, P. M. (2004). Selecting, designing and developing your questionnaire. *British Medical Journal*, 328, 1312
- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research* in *Psychology*, 3(2), 77-101
- British Psychological Society (BPS) (2018). Code of Ethics and Conduct. Leicester: BPS.

 Retrieved on 22.10.18, from

 https://www.bps.org.uk/sites/bps.org.uk/files/Policy%20%20Files/Code%20of%20Ethics%20and%20Conduct%20(2018).pdf
- Burr, V. (2015). An introduction to social constructionism (3rd Edition). London: Routledge
- Care Quality Commission. (2018). *Annual reports and accounts 2017/18*. London: Care Quality Commission
- Checkland, P., & Scholes, J. (1990). Soft systems methodology in action. London: Wiley
- Children's Society. (2008). *The good childhood inquiry: Health research evidence*. London: Children's Society.
- Cooperrider, D., Whitney, D., Stavros, J. M. (2008). *Appreciative inquiry handbook* (2nd *Edition*). San Francisco, CA, US: Berrett-Koehler Publishers
- Creswell, J. W. (2013). Research design: Qualitative, quantitative, and mixed methods approaches. Sage publications
- Cunningham, L., & Lauchlan, F. (2010). Are we doing enough as EPs? *Educational & Child Psychology*, 27(4), 73-90

- Dawson, J., & Singh-Dhesi, D. (2010). Educational psychology working to improve psychological well-being: An example. *Emotional and Behavioural Difficulties*, 15(4), 295-310.
- Deave, T., Davies, J. D., Ahmad, Y., & Ryan, J. (2011). Flying Start programme in Neath Port Talbot. Project Report. University of the West of England, Bristol. Available from: http://eprints.uwe.ac.uk/21722
- Denzin, N., & Lincoln, Y (2003). The landscape of qualitative research: Theories and issues.

 Thousand Oaks, CA: Sage
- Department for Education (DfE) (2016): *Mental Health and Behaviour in Schools:*Departmental Advice for School Staff. Retrieved on 12th March 2018 from:

 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/

 Mental_Health_and_Behaviour_-_advice_for_Schools_160316.pdf
- Dishion, T., Stormshak, E. (2006). *Intervening in children's lives: An ecological, family-centred approach to mental health care.* Washington: American Psychological Society.
- Douglas-Osborn, E. F. (2015). Early investment: The role of Educational Psychologist in supporting an early years setting. Unpublished Thesis: Manchester Institute of Education.
- Dunsmuir, S., & Leadbetter, J. (2010). *Professional supervision: guidelines for practice for Educational Psychologists*. British Psychological Society, Division of Educational & Child Psychology. Leicester: British Psychological Society
- Durbin, N.J. (2010). Promoting mental health and psychological wellbeing in children: A sociocultural activity theory analysis of professional contributions and learning in a multidisciplinary team. (Unpublished doctoral thesis). Birmingham University
- Ekornes, S. (2015). Teacher perspectives on their role and the challenges of interprofessional collaboration in mental health promotion. *School Mental Health*, 7(3), 193 211.

- Fee, J. (2011). An exploration of educational psychologists views of their role with child and adolescent mental health and psychological wellbeing. Unpublished thesis: University of East London
- Field, A. (2012). Discovering statistics using SPSS. London: Sage publications.
- Forgeard, M., Jayawick, E., Kern, M., Matrin, M., & Matrin, S. (2011). Doing the right thing: Measuring wellbeing for public policy. *International Journal of Wellbeing*, 1, 79-106
- Frith, E. (2016). Centre Forum Commission on Children and Young People's Mental Health: State of the Nation. Retrieved on 15.7.17 from https://epi.org.uk/wp-content/uploads/2016/05/State-of-the-Nation report-web.pdf.
- Gall, M. D., Gall, J. P., & Borg. W. R. (2003). *Educational research: An introduction* (8th *Edition*). London: Pearson
- Geddes, H. (2006). Attachment in the classroom. The links between children's early experiences, emotional well-being and performance in school. London: Worth Publishing.
- Gutman, L. M., & Vorhaus, J. (2012). *The impact of pupil behaviour and wellbeing on educational outcomes*. London: Department of Education
- Hart, R. (2009). Child refugees, trauma and education: Interactionist considerations on social and emotional needs and development. *Educational Psychology in Practice*, 25(4), 351-368, DOI: 10.1080/02667360903315172
- Health and Care Professions Council (HCPC) (2016). Standards of conduct, performance and ethics. London: HCPC. Retrieved on 12.01.17, from www.hpc-uk.org/publications/standards/index.asp?id=3
- Jané-Llopis, E., Barry M. M., Hosman, C. & Patel, V. (2005) Mental health promotion works: A review. *Promotion and Education Supplement*, 2, 9-25

- Keyes, C.L. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Behavior Research*, 43, 207-222.
- Leung, L. (2015). Validity, reliability, and generalizability in qualitative research. *Journal of Family Medicine and Primary Care*, 4(3), 324-327. Doi: 10.4103/2249-4863.161306
- Mi Cho, S., & Mi Shin, Y. (2013). The promotion of mental health and the prevention of mental health problems in child and adolescent. *Korean Journal of Pediatrics*, 56(11), 459-464
- Marmot, M. (2010): Fair society, healthy lives: the Marmot Review: Strategic review of health inequalities in England post-2010. Retrieved February 13th 2018 from: https://www.local.gov.uk/marmot-review-report-fair-society-healthy-lives
- MacDonald, G., & O'Hara, K. (1998). Ten elements of mental health, its promotion and demotion: Implications for practice. Birmingham: SHEPS.
- McEvoy, P., & Richards, D. (2006). A critical realist rationale for using a combination of quantitative and qualitative methods. *Journal of Research in Nursing*, 11(1), 66-78.
- McQueen, C., & Hobbs, C. (2014). Working with parents: Using narrative therapy to work towards genuine partnership. *Educational & Child psychology*, 31(4), 9-17
- Mrazek, P. B., & Haggerty, R. J., (1994). *Reducing risks for mental disorders: Frontiers for preventative intervention research.* Washington: National Academies Press
- Munn, P., van der Aalsvoort, D., & Lauchlan, F. (2010). Guest Editorial. *Educational & Child Psychology*, 27(4), 6-9
- Murphey, D., Barry, M., & Vaughn, B. (2013). Mental health disorder. Child trends.

 Retrieved on 23 October 2018 from: http://www.childtrends.org/
 wpcontent/uploads/2013/03/Child_Trends-2013_01_01_AHH_MentalDisorders.pdf

- Nathan, J., & Webber, M. (2010). Mental health social work and the bureau-medicalisation of mental health care: Identity in a changing world. *Journal of social work practice*, 24(1), 15-28
- National Assembly for Wales. (2018). Mind over matter. A report on the step change needed in emotional and mental health support for children and young people in Wales.

 National Assembly for Wales Commission Copyright 2018.
- National Institute for Health and Clinical Excellence (NICE). (2008). *Promoting children's social and emotional wellbeing in primary education*. London: NICE
- Pettitt, B. (2003). Effective joint working between Child and Adolescent Mental Health Services and schools. Mental Health Foundation.
- Plano Clark, V. P., & Creswell, J. W. (2008). *The mixed methods reader*. California: Sage Publications, Inc
- Qualtrics. (2018). Accessed on 12.01.2017 at https://www.qualtrics.com/support/survey-platform/my-projects/creating-a-project/
- Robinson, M., & Dunsmuir, S., (2010) Multi-professional assessment and intervention of children with Special Educational Needs in their early years: The contribution of educational psychology. *Educational & Child Psychology*, 27(4), 10-21
- Rothìa, D., Leavey, G., & Best, R. (2008). Recognising and managing pupils with mental health difficulties: teachers' views and experiences on working with educational psychologists in schools. *Pastoral Care in Education*, 26(3), 127-142
- Sanders, T. (2007). Helping children thrive at school: The effectiveness of nurture groups. *Educational Psychology in Practice*, 33(1), 45-61

- Santelices, P., Page, M., & Drummond, J. (date unknown). Supporting children: A guide for all staff. Promoting Mental & Emotional Wellbeing. Edinburgh: The City of Edinburgh Council.
- Seth-Smith, F., Levi, N., Pratt, R., Fonagy, P., & Jaffey, D. (2010). Do nurture groups improve the social, emotional and behavioural functioning of at risk children? Educational and Child Psychology, 27(1), 21-34
- Sharrocks, L. (2014). School staff perceptions of well-being and experience of an intervention to promote well-being. *Educational Psychology in Practice*, 30(1), 19-36.
- Silverman, D. (2009). *Doing qualitative Research* (3rd Edition). London: SAGE Publications Ltd.
- The Health Committee (2014). *Children's and adolescents' mental health and CAMHS. Third report of session 2014-15.* Nottingham: The Stationary Office.
- Tickell, C. (2011): The early years: Foundations for life, health and learning. Retrieved on 07.09.2017 from:

 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/180919/DFE-00177-2011.pdf
- Tierney, A. L., & Nelson, C. A. (2009). Brain Development and the role of experience in the early years. *Zero Three*, 30(2), 9-13
- Walker, S. P., Chang, S. M., Powell, C. A., Simonoff, E., & Grantham-McGregor, S. M. (2006). Effects of psychosocial stimulation and dietary supplementation in early childhood on psychosocial functioning in late adolescence: Follow-up of randomised controlled trial. *British Medical Journal*, *333*(7566), 472.
- Walter, W. (2013). Building better brains: New frontiers in early childhood development. New York: UNICEF

- Weare, K. & Gray, G. (2003). What works in developing children's emotional and social Competence and wellbeing? Retrieved on 12.10.18 from: http://webarchive.nationalarchives.gov.uk/20130401151715/https://www.education.gov.uk/publications/eOrderingDownload/RR456.pdf
- Welsh Assembly Government (WAG). (2004). *Children and young people: Rights to action*. Cardiff: WAG.
- Welsh Government. (WG). (2010). Well-being of Future Generations (Wales) Act. Cardiff: Wales
- Welsh Government (WG). (2013). *National Evaluation of Flying Start: Area case study synthesis report*. Cardiff: Wales
- Welsh Government. (WG). (2018). *Together for Mental Health Delivery Plan*. Cardiff: WG. Retrieved on 18.11.2018 from https://gov.wales/topics/health/nhswales/plans/mental-health/?lang=en
- World Health Organisation (WHO) (2003). *Caring for children and adolescents with mental disorders: Setting WHO directions*. Geneva: World Health Organization. Accessed on 17.01.2018 at: http://www.who.int/mental_health/media/en/785.pdf
- Willig, C. (2013). *Introducing qualitative research in psychology*. McGraw-Hill Education (UK).
- Winnicott, D. W. (1965). *The maturational processes and the facilitating environment*. London: Hogarth Press and The Institute of Psycho-Analysis
- Young Minds Website (2016). *Mental Health Statistics*. Retrieved from: http://www.youngminds.org.uk/training_services/policy/mental_health_statistics



Educational Psychologists' role in promoting children's mental and emotional well-being during the pre-school years: An explorative study in Wales

PART 3: Major reflective Account

Word count: 5, 743

3.1 Introduction

A qualitative and a mixed-methods researcher makes subjective decisions and justifications at each stage of the research process. It is hoped that a reflexive and reflective account of the research process will provide the reader with increased transparency with regard to the decision making process (Brocki & Wearden, 2006). This account will be written in the first person as it aims to provide insight to my thoughts and reflections relating to my research journey and how these ultimately led to what I consider to a unique contribution to knowledge.

The research process, from inception to submission, was guided by the Constructionist Model of Informed Reasoned Action (COMOIRA) framework (Gameson, Rhydderch, Ellis & Carroll, 2003). I believe that parallels can be drawn between working as an applied trainee psychologist and this project; specifically in relation to organisation, using effective communication when recruiting, and developing positive relationships. Consequently, I found the COMOIRA framework to be pertinent to this research process. The reflective questions associated with the core, reviewing the process, and facilitating change, were of particular help. During this research process, COMOIRA helped guide my thinking and frame the next steps effectively. This was useful when balancing the competing demands of placement and academic study and I will use the COMOIRA framework for future research.

This reflective account is presented in two sections. The first section provides an overview of contribution to the body of knowledge and the role of the Educational Psychologist (EP) in promoting mental and emotional well-being (MEWB) in the pre-school years. This section is comprised of a summary of the gaps identified in the literature review, the rationale for the research question, the contribution of findings to knowledge, relevance to EP practice and dissemination of the findings. The second section is a critical account of the development of the research and of the research practitioner. This section includes the inception of the

research, carrying out the research, the researcher's epistemological and ontological position, methodological decisions, data analysis and an analysis of the trustworthiness of the data.

3.2 Contribution to Knowledge

3.2.1 Inception of the Research Topic

My research idea emerged from a longstanding underpinning philosophy that is integral to my thoughts as a Trainee Education Psychologist (TEP); the importance of the pre-school formative years on all aspects of development throughout the lifespan. Prior to starting my training as an EP, I completed a PhD at Cardiff University ("The rise and fall of repetitive behaviours in a community sample of infants and toddlers"; Fyfield, 2015). At the inception of the current research topic I reflected upon roles during my PhD research and subsequent researcher positions. During this time, I was afforded with the opportunity to explore young children's development from birth through to age 7 within the context of a large community sample of first born children in South Wales. It became apparent, from this work, that early pre-cursors to future behaviour and emotions are seen from a very young age (e.g., Hay et al., 2014) and that intervening, preventative work and working with children and their families from birth is imperative (e.g., Allen, 2011). This belief influenced my thinking as a researcher, it is possible that knowledge of early pre-cursors to later behaviours and emotions influenced my thinking, influenced my interests and influenced the way in which the literature was discussed (the impact of this, the potential bias this may cause and the way in which I attempted to control biases is discussed in section 3.2.2, below). Currently, legislation and government documents support the need for early intervention, not only in terms of supporting the child, but also the family as a whole (Tickell, 2011; WG, 2015; WG, 2018). For me, this provided a

foundation for my research knowing that I wished to explore children's development during the pre-school years.

Furthermore, I have always been intrigued by MH and well-being and noticed early in my career that emotional/mental or psychological well-being (MEWB) impacts every aspect of life from relationships to academic achievement (Banyard, Hamby & Grych, 2017). I reflected upon the importance of the early years in the development of good MEWB or MH; the evidence that neuronal growth in the first years of life shapes the brain thus affecting lifelong health (Clinton, Feller & Williams, 2016); the substantial body of research that states that attachment relationship between infant and caregiver(s) is crucial to healthy development (Clinton, Feller & Williams, 2016) whereby a secure attachment positively affects the development of the hypothalamic pituitary axis which regulates stress (National Scientific Council of the Developing Child The Science of Neglect, 2012); and the Adverse Childhood Experience Study (Bellis, Hughes, Leckenby, Perkins & Lowey, 2014) that shows that early events in childhood are associated with later MH issues. Consequently, I identified an opportunity to amalgamate the two areas of interest to explore the mental health and well-being of young children and their families. I wondered what role EPs had in young children's mental health, and further wondered what constructions were held regarding the EP role in the early years.

Finally, as a minority Welsh speaking student on the doctorate of Educational Psychology course at Cardiff University in Wales, it felt important to contribute to the body of knowledge which looks at EP practice in Wales and issues within the Welsh system. Education and Health are areas devolved to Wales and are consequently influenced by the Welsh Government, rather than UK Government. Budgets are determined by the Welsh Government and the Welsh Assembly control decisions made in these areas. Consequently, decisions made regarding children's health and well-being may look different in Wales than they do in England

and thus warranted specific exploration. Consequently, this study focuses upon EP practice in Wales. After conducting the research, I reflected on this decision and was glad that I was able to make a contribution to Welsh EP practice based in a Welsh legislative context. I was also glad that I was afforded with the opportunity to focus upon a Welsh initiative to explore the contribution of this initiative to young children's MEWB.

3.2.2 Identifying and Exploring Gaps in the Research Literature

Given the complexity of defining the general EP role, I wondered whether gaining a true understanding of the role of the EP in young children's MEWB would be possible, as it seemed that different EPs would construct the role in different ways (Boyle & Lauchlan, 2009). As emphasised in section 2.2.1, I adopted a relativist ontological approach to this research. This suggests that truth is related to an individual's social, cultural and moral context and his or her previous experiences. This prompted me to think about how knowledge and understanding of a concept may influence individual's responses to it. For example, I was aware that my personal interest would have contributed to my level of understanding and participants' understanding and experiences may have influenced the responses provided to the questionnaire. Furthermore, I was aware that despite the growing commitment from the Government to address CYP mental health in continuous legislation since the Children and Young People: Rights to Action agenda in Wales (Welsh Assembly Government, 2004), the EP role was predominantly overlooked.

Upon starting the literature review process, I was initially overwhelmed by the vast amount of empirical information that was published in relation to children during the preschool years, MEWB or the role of the EP. I sought supervision regarding this and subsequently decided that in order to synthesise all the available, high quality evidence to provide a robust evidence base for this study I would need to conduct a systematic literature review (Victor,

2008). In order to ensure that my process was transparent and replicable, and in order to control for biases that might result from my own interests and beliefs, I sought guidance on methods to conduct a systematic review and as advised by Gough (2007) the first step was to devise a question which my literature review would seek to answer. Whilst the thesis discussed research articles seeking to answer the question "What role do Educational Psychologists' have in promoting MEWB?" I had originally posed the question "What role do Educational Psychologists' have in promoting MEWB in the pre-school years?" Interestingly, no relevant research was available when I entered key words relating to this research question. It was thus apparent that very limited research exploring the EP role in promoting good MEWB during the pre-school years was available and that this topic remained unexplored and novel. I reflected on this and despite the fact that the lack of research papers resulted in my having to alter my question, I was reassured by the fact that my research idea was novel thus allowing me to make an original contribution to the field.

Despite the lack of empirical evidence exploring EP role in promoting MEWB in the pre-school years, there was a plethora of information available regarding the role of EPs in promoting good MEWB during in school aged children. It is acknowledged that a focus on school aged children is logical as EPs likely spend a larger portion of time working at the school age, however if we are to view the pre-school age as critical for later development, an important and theoretically relevant gap in the literature remains. A review of the literature (section 1.8) allowed me to explore the methods used by researchers who had allied concepts to myself, allowed me to explore the philosophical approaches taken in previous work and the knowledge gained from this research. Reflections upon the information presented within these research articles allowed me to develop and design my study (as discussed below). The review highlighted that no research had previously looked at the role of EPs in promoting mental, emotional or psychological well-being in the pre-school years.

3.2.3 Development of the Research Questions

At the start of my literature review I had attempted to explore what role EPs have in promoting the MEWB of children during the pre-school years. Existing literature had not provided me with an answer to this question and consequently I felt it appropriate to use this as a starting point for my research questions. The gap that I had identified in the literature formed the foundation of my research questions. When I reflected on the increasing prevalence rates of CYP with mental health difficulties (Children's Society, 2008; WG, 2018; World Health Organisation, 2003) the limited emphasis on the EP role and the established critical significance of the early years (as established in Part 1A), it seemed essential to offer clarification.

In order to make further contribution to knowledge and EPs practice I decided to explore which factors might act as to facilitate or impede work in this area. I also decided to ask how EPs believed that they could improve their practice and improve or increase work in this area of study. I felt that asking such open questions allowed the research to make original contribution that added to EP practice in Wales.

3.2.4 Contribution of Research Findings to Existing Knowledge

The study offers a picture of the promotion of MEWB in the context of pre-school years by drawing together many of the findings that were identified by previous research in schools. This research has incorporated elements which are particular to the context of pre-school education, which is an area previously under studied, particularly in Wales (paucity of information available on the topic studied, as highlighted in section 1.9). Predominantly, this

research presents a novel topic in the context of EP's professional practice. The research employed the perspective of true promotion, whereby work that promotes good MEWB must commence prior to the existence of any concerns or issues relating to MH or MEWB (as discussed in section 1.9). Consequently, the research contributes to existing knowledge by looking at EPs working to promote MEWB prior to difficulties, rather than look at reactive or intervention work so commonly reviewed in the literature. The findings add to the understanding of early years' practice and the facilitators and barriers encountered in practice to promote MEWB.

The findings of the current study make an important contribution to our understanding of the role that EPs can and do have in relation to promoting MEWB in the pre-school years. I have learned that whilst LA EPs mainly promote MEWB through consultation or statutory assessment, FS EPs appear to promote MEWB in more ways. Upon reflection, this is likely attributable to the nature of work that Flying Start engages in more generally. When I reflect on the nature of LA EP's role, I wonder what value the profession place upon working to prevent poor emotional well-being by working with pre-school aged children. I wonder whether we work with a school allocation and work reactively when engaging in statutory work but considered whether a greater shift in thinking is needed to use our skillset effectively and preventatively. Readers may thus consider what we could learn from the way in which FS EPs promote MEWB. This research highlighted several areas in which EPs could be involved including training, consultation, therapeutic work and a contribution to systemic change. In terms of the true contribution of this work, it is important to reflect on the reality of EPs professional practice. To put some of the current research findings into practice might involve a radical shift in thoughts – might it be pertinent to consider employing a specialist EP to work in early years or in mental and emotional well-being; to devise training packages, to devise systems level or organisational level support?

3.2.5 Contribution to Future Research

As noted in the empirical paper a reasonable next step would be to triangulate the information by ascertaining the views of other professionals who might work with EPs (both in LAs and Flying Start settings). I had originally considered incorporating this into the current piece of research, but owing to practical constrains, I decided not to compromise the quality of the research by incorporating too many elements. However, I believe that it would be particularly interesting to obtain others' perspectives regarding EP role to establish which services are helpful and what they may want more of. Furthermore, future research might consider what promoting MEWB looks like, what programmes or systemic level work might work. A longer term project might look at efficacy of such programmes and might consider whether early promotion work actually make significant contribution to young people's lives, and if so, how? Future research may consider such topics in order to further develop to early-years' work relating to promoting good MEWB.

3.2.6 Relevance to EP practice

3.2.6.1 Impact of the Research on the EP I aim to be. Whilst at university I have enjoyed learning about and practicing therapeutic approaches such as SFBT and CBT. When attempting to put these skills into practice on my placements I found that there was a dissonance between espoused EP practice and real world EP practice. This is in part due to the scale of the workload meaning that there is little time for delivering ongoing and long term interventions. The pressures on schools also mean that they are often not in a place to openly explore or take up offers of organisational change projects or other large scale systems work. All of these have acted as barriers to EPs offering support for MEWB in schools. This further emphasises the importance of work with a younger age group to promote good MEWB from the start of life.

Conducting this research has firmed my beliefs that there is room and a role for EPs to work to promote good MEWB in the pre-school years and I would like to carve a role for myself which allows this.

3.2.6.2 EP practice in general. As I consider the nature of the responses participants provided to the questionnaire, I consider the importance and implication of the way in which their EPSs functions. I wonder how the location of the EPS within the wider LA has implications for the opportunity's EPs are afforded, the barriers to their work and the ideas they might have for future work in the area of study. The location of the EPS in relation to larger service structures appears to influence the principles behind a shared vision for the service; working in integrated teams may provide opportunities to engage in a broader range of work, for example. The placement of EPSs needs great consideration, especially if services want to focus more on meeting the needs of young children holistically.

The identification of some barriers that may prevent the EPs in this study from engaging with work to promote MEWB with pre-school aged children provides a useful platform from which to explore future ways in which work could be more effective; if services felt it appropriate. Many EPs in the study noted that increased multi-agency work is required in order to improve or increase work in the area studied; I reflected on how this may be possible. It may be useful to establish a working party or relevant professionals to explore the pragmatics of facilitating effective service delivery to meet the MEWB needs of the children and families within their communities. It will be important for EPs within each area to determine what they would like their contribution to look like and what areas of psychology they would like to draw upon when contributing to such collaborative work (e.g., knowledge of systems, working with organisations).

Many EPs also noted that good relationships, joint working and improved accuracy in the perception of the EP role is important to overcome barriers to work in this area. I reflected on what this might mean for EPs in Wales. It is possible that joint training packages might facilitate this, both the doctorate training programmes and CPD training courses could bring different professionals together to share theoretical models. It is hoped that this would allow the professionals to develop understanding of how the others work and how we can work to complement one another (Pettit, 2003). There is a recent move towards trading the services of Educational Psychologists and I further reflected on the implication of this in relation to the findings of the results for this study. EPs need to adapt to their changing environment and provide services that other organisations value and are willing to commission; I wonder where preventative work or work to promote MEWB will fall. Will service users consider this a core service? Overall, I hope that the findings will stimulate further discussions within each locality and encourage the services to review their practices in relation to preventative work generally and promoting good MEWB with pre-school children, specifically.

3.2.7 Dissemination of Research Findings

The author believes that there is a growing need to address the practice of EPs in relation to promoting the MEWB of very young children before any difficulties arise. EPs can contribute to this type of work as the profession hold skills and knowledge that could support practice positively and significantly (as discussed in section 1.8). It is important for research results to be communicated effectively to facilitate the sharing of good practice and to ensure that information is accessible for colleagues to engage in evidence based practice and practice based evidence. Consequently, dissemination of the research findings is imperative. Dissemination may thus include:

1. Presentation of findings in poster or presentation format at conferences to facilitate informed discussions between colleagues at a national level. Facilitative discussions

- might provide a greater focus and agreement within the profession of the exact nature of their contribution
- 2. Publication of empirical paper in peer-reviewed journal to increase accessibility of information contained in Part 2 of the thesis.
- 3. In my professional practice I hope to develop my knowledge in the domain of work with pre-school aged children and promoting MEWB. By communicating the results of the study to the Principal Educational Psychologists, I hope to be able to develop a working group in the local authority to develop ideas on ways to promote MEWB in the pre-school years on the local level.

Note: dissemination will be different in different region of Wales owing to staffing considerations, different services and teams available and also owing to the local interpretation of such national initiatives a the Wellbeing for Future Generations Act (WG, 2010).

- 4. Each Flying Start region to clearly communicate their aims and intentions in terms of promoting mental well-being of very young children.
- 5. Each Local Authority to devise and action plan and share information with early years' providers, health visiting teams and other teams within each LA who work with early-years to ensure that role and EP contribution is communicated clearly.

3.3. Critical Account of the Development of the Research and Research Practitioner

The experience of completing this research project has developed my knowledge and understanding of the complexities of conducting a rigorous piece of research. When I reflect on the process I notice how much detail and time was required at each stage of the work; e.g., understanding the relationship between research questions and methodology in order to ensure

that the analysis met the epistemological position set out in the thesis (Creswell, 2013). I reflect on some key decisions made throughout the research journey below. It is not within the scope of the current discussion to reflect on each decision made, however I have tried to focus my writing on key decisions that had biggest impact on the research.

3.3.1 Multiple roles

During the course of writing the thesis I identified that there was an overlap between my role as a researcher, my role as an applied psychologists and my role as a mother of an infant. The self is described as a dialogue of multiple inner voices (Rober, 2005), each of my roles could be reflected by inner voices, each interacting and competing during different periods. What influence might one of these roles have had on another? As noted, I have always had great interest in the early years of children's development, however, as a parent of an infant (at time of writing) I believe that I have an emotional investment in this particular topic too. During the research process I was intrigued by the impact of my parenting views on my role as a researcher (e.g., formulating questions such as what more can we do?) Did my early parenting experiences influence my ability to hold certain uncertainties as a researcher? Did my emerging researcher skills and knowledge gained from this work influence my parenting role? Such reflective questions are important to note within this section as I believe the process are inextricably interlinked and cannot necessarily be seem as mutually exclusive. I hope that my roles have been complementary and I hope that I have been able to draw key messages from each of these different tasks to help further my ability as an empathic practitioner, a diligent researcher and a caring mother.

3.3.2 The Choice to Adopt an Exploratory Approach

After completing the systematic literature review, I had been unsuccessful in determining a role for EPs in promoting good MEWB during the pre-school years. This suggested to me that this area of research had not been studied (or at least published at the time of writing this thesis). I reflected on what this could mean for the nature of my study and the way that I approached the research I was designing. After reading and reflecting upon different approaches to research (Creswell, 2013) I decided that an exploratory approach would be best suited for this current research. This type of research is usually conducted to study a problem that has not been clearly defined yet (Creswell, 2013). I decided that in order to determine whether there is a need to carve more of a role of EPs in promoting MEWB in the pre-school years, an exploratory approach would be most suitable. Exploratory research proposes merely to explore the research questions and does not intend to offer final and conclusive solutions to existing problems (Creswell, 2013). The research was not intended or designed to provide conclusive evidence but rather help us have a better understanding of the problem. Such work is advantageous as is provides a basis from which future research can be conducted. However, upon reflection, I recognise that the nature of this work provided a lot of qualitative information and the interpretation of such type of information is subject to bias. Exploratory research studies usually have a modest number of participant that may not adequately represent the target population and accordingly the findings might thus be limited. Reassuringly however, strand 1 of my research represented almost 20% of the EP population in Wales, which is a modest sample size for this particular design (Creswell, 2013).

3.3.3 The Researcher's Philosophical Positioning

Mills and Birks (2014) highlight the importance of establishing a secure philosophical paradigm as it acts as the foundation of a research design. Researchers in social science ought

to pay careful consideration to the research paradigm that they subscribe to, and need to share this explicitly with the reader, in order to demonstrate a logical and coherent approach to decision making throughout the research process (Grix, 2010). The importance of exploring my ontological and epistemological position was clear from the beginning of the research project. Consequently, prior to designing and conducting the research, I had to decide what my ontological and epistemological position would be, as this would inform the research methodology. To develop myself as a researcher, I spent time reading. I learned that positivist and interpretivist paradigms can be viewed as opposing schools of thought (McEvoy & Richards, 2006). A positivist approach suggests a rigorous investigative approach through hypothesis testing (McEvoy & Richards, 2006), using quantitative methods. An interpretivist approach posits that knowledge is ground in human experience which is socially produced and reproduced (Leung, 2015).

I reflected on my research experience to date and the previous epistemological and ontological positions that I had taken. I reflected that a positivist approach would seek to measure a single, external reality using objective measures (Robson & McCartan, 2016) which did not fit with my underlying assumptions and would not complement the topic of study. I maintain that a positivist approach would have limited my understanding of the participants' experiences, as their responses would have been limited to structured questionnaires or objective observations. Moreover, while a positivist approach is perceived to be objective and value free, Robson and McCartan (2016) argues that reality is not viewed in the same way by all researchers and therefore it is not possible for the research to be truly objective and value free.

Following reflection, I thought the positivist approach could oversimplify this complex topic, and acknowledged that the interpretivist is criticised for being less reliable for scientific investigation (Leung, 2015). Neither approach would involve methods that answer the

questions posed in isolation, consequently a combination of approaches would be helpful (Creswell, 2013).

Due to the exploratory nature of the research, I believe that it falls within a constructivist paradigm as this aligned with my intention to understand the world of human experience. Whilst reading to learn about the different philosophical positions I reflected that the terms constructionist and constructivist were used interchangeably in some literature when discussing philosophical paradigms, which may be explained by the similarity in their philosophical paradigms (Robson & McCartan, 2016). My understanding was that social constructivism as the meaning of making of a single mind whilst social constructionism focuses upon how meaning is created, negotiated sustained and modified within societal interactions (Burr, 2015). I decided that I would maintain a constructivist position, underpinned by a relativist ontological position and a subjectivist epistemology.

This ontological position emphasises the relative, subjective value of the data, rather than an absolute truth of validity (Willig, 2013). Relativism suggests that truth is related to an individual's social cultural and moral context and his or her previous experiences (Lewis-Beck, Bryman & Liao, 2004). I maintained that there would be multiple realities derived from the participants' view of the EP role, rather than an absolute truth (Creswell, 2013) and that these truths would be reflective of the participants' own experiences. My epistemological approach was subjectivist. I maintained that knowledge would be created by their previous experiences, including aspects such as social, cultural and moral factors (Guba & Lincoln, 1994). This position highlights the subjective nature of the data. Whilst I acknowledge that this position is subject to criticism due to its level of subjectivity (Thomas, 2013), I do believe that this approach is most suitably fitted to the present study.

Furthermore, it is argued that adopting a mixed methods approach to research is not possible, as this creates an incompatible epistemological position (Robson & McCartan, 2016).

By contrast, it is also suggested that mixed-methods approaches can be an effective way to understand real-life contextual situations (Creswell, 2013). It was always important for me to carry out qualitative research, and my constructivist paradigm meant that this was the most appropriate method of exploring participants' views. However, I knew that using a solely qualitative approach would limit my findings, as this would consider the constructions of a very small number of participants. My aim was to gain an overview of the current context of EPs work in CYP mental health through the quantitative phase, and explore the same ideas further through the qualitative phase. I thought that this would achieve greater transferability of my results, particularly as I hoped to achieve a large sample size by approaching EPs in each LA or Flying Start area in Wales with my questionnaire.

3.3.4 Methodological decisions

3.3.4.1 Rationale for mixed methods research. A mixed methods approach, by definition, is a class of research whereby the researcher mixes or combines quantitative and qualitative research techniques, methods, approaches or concepts into a single study (Johnson & Onwuegnuzie, 2016). Mixed methods research is an attempt to legitimate the use of multiple approaches in answering research questions, rather than restricting or constraining researchers' choices. It is an expansive and creative form of research and can be described as inclusive, pluralistic and complementary. It suggests that researchers take an eclectic approach to method selection and the thinking about and conduct of research. The mixed methods researcher can answer a broader and more complete range of research questions and can use the strength of an additional method to overcome the weakness in another method by using both in the research study.

I acknowledged that a mixed-methods design might be interpreted by some as a contradiction to my philosophical positioning (as stated in section 2.2.1.1; a social

constructivist paradigm, a subjectivist epistemological position and a relativist ontological positioning). Indeed closed ended question in questionnaires are often viewed as being underpinned by a positivist or a post-positivist position (Romm & Phil, 2013). This position assumes that scientific studies must be directed towards capturing social reality. However, it can also be argued that closed ended questions attempt to capture a representation of reality. I spent time reading about this contentious issue and noted that researchers (including myself) should not claim to verify statements about reality when only approximations to reality can be sought, even when specific questions (i.e. closed ended questions are sought) (Romm & Phil, 2013). Consequently, I attempted to use language that was consistent with my constructivist research paradigm that suggested that, despite having collected some quantitative data, I believe the data to be a representation of a participant's constructed reality.

Denzin and Lincoln (2000) suggested that quantitative methods are "at home" within the post positivist stance, however, the use of different methods, including questionnaires that are close ended can be underpinned by alternative paradigms other than where they are seen as more "at home" (Denzin & Lincoln, 2000). In a similar vein, Hesse-Biber (2010) stated that the "deployment of qualitative methodology does not rule out the use of quantitative methods" (p.456). This has been termed 'oblique' usage of methodology that may seem to be not mutually exclusive. This discussion represents a broader and greater debate within the philosophical literature relating to research methods. I believe that my stance within this debate is summarised in the following quote by Scott (2010):

"there are very few adherents to epistemologies of objective knowledge. Quantitative researchers are not naïve positivists. They acknowledge the role of social construction in measures and are wary of quantification being seen as the equivalent of scientific reasoning....statistics can lie" (p.233).

Consequently, I posit that, the answers provided for the quantitative questions used within the questionnaire for this study are the participant's interpretation of their work, my analysis of this data is an interpretation of the participant responses and my reporting is one form of the many realities that represent the many truths regarding the nature of work completed by EPs in Wales. Furthermore, in line with Romm & Phil (2013), I acknowledge that quantitative data, used alone, is ill-equipped to make meaning of complex social phenomena. A mixed-methods approach incorporating both quantitative and qualitative data is consistent with a subjective epistemological position, which makes provision for a range of methods, appropriately applied as part of the researcher repertoire that can be drawn upon to produce knowledge (Romm & Phil, 2013).

The mixed methods approach can provide stronger evidence for a conclusion through convergence and corroboration of findings and can increase the generalizability of the results. Consequently, greater focus was placed upon the thematic analysis conducted to explore possible answers to research questions 1b and c as well as research questions 2b and c. This did afford me with the opportunity to engage in qualitative data analysis in the means of thematic analysis, allowing me to interpret the data using a theoretical approach to the thematic analysis (as outlined and discussed in section 2.1). Together, these approaches produce a more complete knowledge necessary to inform theory and practice (Johnson & Onwuegnuzie, 2016). This placed more pressure on me as a researcher with a very limited time frame to conduct a research as part of a broader context on the DEdPsy course. The data analysis was more time consuming however I believe that the benefits of this approach did outweigh the limitations and thus left me with results that made a useful contribution to knowledge regarding EP practice as in Wales.

3.3.4.2 Rationale for a two strand study. When designing this study my aim was to gain an overview of the current context of EP work in promoting the MEWB of pre-school aged children. I thought that I would achieve greater transferability of my results by recruiting two set of participants (i.e., two groups of Educational Psychologists who both work with young children and work in the domain of MEWB). I believed that the nature of the work completed by Local Authority EPs, the facilitators and barriers to this work and the ideas that LA EPs might have in regards to future work might differ from the constructions held by Flying Start EPs. With the view of gaining a more holistic picture of the constructions held by Welsh Educational Psychologists I sought to distribute my questionnaire to the two groups of participants.

I am pleased that I was able to execute this effectively because I feel that I was able to gather multiple realities and truths from many participants, employed by different establishments. However, it is important to note that this approach may affect the representative nature of the participants within the study. Firstly, as no personal data were collected from participants, it is impossible to tell whether all my participants came from one area of Wales or the responses received were representative of a diverse population from across Wales. In future I think that I would ask participants to identify the region of Wales they work. Secondly, some Flying Start EPs in some areas of Wales may also work for a Local Authority. The answers Flying Start participants provided for the questions may represent some of the constructions and beliefs they have created from their LA role. It is impossible, to discern whether the facilitators and barriers noted are truly representative of those identified under the guise of Flying start EP or Local Authority EP. Importantly however, as different consent forms and information sheets were distributed to LA EPs and Flying Start EPs, I hoped that the Flying Start EPs would have read the information which outlined that I was asking questions about their role in Flying Start that this would help ensure that EPs who work both for LA and

Flying Start would be able to think about work, facilitators, barriers and future ideas from the perspective of their Flying Start role (or LA role for LA EPs).

3.3.4.3 Rationale for employing a questionnaire. When deciding upon a method for data collection, one method that I did consider at length was focus groups. Focus groups would have allowed knowledge to be created through social process and social interactions and I was interested in the interaction that would occur in a focus group that could lead to new ideas and shared constructions for change (Kitzinger, 1994). However, I was aware that a limitation of a focus group is group effects which can create social bias, polarised views or social pressure which would cause the participants to provide socially desirable answers (Stewart & Shamdasani, 2014). As I was intending to ask participants about the barriers to their practice relating to a particular topic I considered that EPs may not openly discuss barriers in relation to their work in this context. Consequently, I considered questionnaires as a method of data collection. Questionnaires can be used to describe trends or patterns (Creswell, 2013) and used to determine individual options about issues; they can help to identify important beliefs and attitudes of individuals (Creswell, 2013). When designing the questionnaire, all questions stemmed from gaps identified in the literature and the research questions posed. I attempted to follow guidelines presented by Creswell (2013) regarding constructing questionnaire and sought to ask questions that I believe would help towards answering the six research questions that I had posed. As I sought to explore what work the EPs in Wales conducted to promote MEWB in the pre-school years, I asked several questions regarding this role. This allowed me to identify some of the work that already takes place in the Wales. Dawson (2009) highlighted the need to consider aspects such as: what the questionnaire is hoping to measure; how data will be analysed; types of questions; and how the questionnaire will be administered. As my research was weighted towards the qualitative phase, the purpose of the questionnaire was mainly to consider an overview of the factors that could act as facilitators and barriers to EPs promoting MEWB in the pre-school years and an overview of participant's constructions of the type of work EPs could engage in. I believed that open ended questions would allow the participants opportunity to express their own opinions and constructions, without any biases from me as a researcher. From conducting a literature review I had preconceived ideas of factors that could facilitate or hinder EP's work and consequently thought that, by providing two open ended questions, I would collect data in a fair manner.

Overall, I believe that the language within the questionnaire was accessible, questions were clear and concise. However, in hindsight, the quantity of questions may have been too much as could have affected the response rate. Furthermore, my own hypotheses, knowledge and construction were likely to have affected the questions asked. Some questions ought to have been worded differently (e.g., when asking how EPs work to promote MEWB I provided a list of possible answers for participants to choose. I believe that an open ended question would have provided more fruitful and informative results).

In addition to distributing questionnaires, I had considered conducting interviews with participants. I had hoped to have done this with the view of obtaining more in depth information in relation to the research questions posed. However, as I had personal interest in the topic studies I was afraid that my own perspective would unintentionally bias the interview. Should I have conducted an interview, I would have created a semi-structured interview so that I collected data in a manner true to the social constructivist perspective set out for the study. However, I was concerned about the degree to which the open ended nature of the interview, coupled with my presence would affect the quality and trustworthiness of the data. I sought supervision on this topic and decided not to conduct interviews. However, as I reflect upon this decision I did wonder whether I could have asked a third party to conduct an interview, a colleague or peer. I wonder whether this might have resulted in less researcher bias whilst providing me with more in-depth information for the study.

3.3.4.4 Analysis of the data. I had some experience creating 'code books' to enter questionnaire data for analysis and a lot of experience performing analyses on various types of datasets. Consequently, I had anticipated enjoying the data analysis stage of the research. At times, I did find the thematic analysis difficult, confusing and time consuming. This was particularly true for strand 1 of the research as 41 participants had responded to the questionnaire. I found myself spending significant time reading to ensure that the analysis was in line with my epistemological stance but also true to the data. Owing to this I was aware of the ways in which my perceptions and values relating to MEWB and pre-school work could affect the information that I regarded as important. The interaction between my perception and the data was recognised as it was part of the dynamic nature of the analysis and to some extent was unavoidable. However, an awareness of my personal beliefs and potential biases allowed me to attempt to remain sensitive to the data.

Braun and Clarke's (2006) stages of thematic analysis were used as an established framework to guide my thinking and provide validity to the analysis (Pietkiewicz & Smith, 2012). I also recorded the detail of a thematic analysis in Appendix X and XI in order to ensure that the process was transparent (Braun & Clarke, 2006). Consequently, I completed the thematic analysis in various stages; generating codes and initial themes for each participant group before the general analysis. Importantly, the analyses for each research question was completed sequentially, therefore, there may have been a relationship between each analysis (Pietkiewicz & Smith, 2012). It is possible that the structure for each thematic analysis could have influenced the following analysis. In an attempt to overcome this I revisited the data as my understanding of themes evolved in order to check that each map reflected the information provided.

3.3.4.5 Assessing the Trustworthiness of the Study. Guba and Lincoln's (1986) criteria were used to evaluate the trustworthiness of my research. This is outlined below

Table 16

Assessing the trustworthiness of the study (Guba & Lincoln, 1986)

Criterion	Specific	How I addressed this
	elements	
Credibility.	Prolonged	I ensured that I met this criterion by spending a
This criterion discusses the	engagement	lot of time engaging with the questionnaire data.
confidence in the truth of		As data were collected in Summer 2017 and
my research findings and		analysis was completed in summer 2018 I was
whether the findings were		afforded many opportunities to engage and re-
plausible and information		engage with the data.
was drawn from original	Persistent	I developed the codes, the concept and core
data.	observation	categories to help examine the characteristics of
		the data. As analysis started in summer 2018 and
		finished in December 2018, on many occasions I
		was able to revisit the data, the initial and final
		codes given during the thematic analysis. This
		resulted in several revisions of the codes and
		final themes but provided me with opportunity to
		develop credibility through persistent
		observation of the data.
	Member	Due to the limited time scales available for the
	check	research this was not possible. In future research
		activities I would seek to do this to further
		enhance the credibility of the work.

	Triangulation	As noted in Part 2, I collected data from
		numerous participants (41) in strand 1 of the
		work. Owing to issues relating to anonymity and
		confidentiality I am unable to explore where in
		Wales the participants work. However, 41
		participants provided me with a range of
		perspectives, experiences and social constructs in
		relation to the EP role in promoting MEWB in
		the pre-school years.
		Furthermore, eight participants partook in strand
		2 and this provided me with eight different
		perspectives.
		Together, the research presents 49 different
		perspectives on an EP's role in promoting
		MEWB in the pre-school years. This provided
		me with opportunity to triangulate within the EP
		profession. However, in future work I may seek
		to triangulate the information further by gaining
		perspectives from other professionals (e.g., Key
		workers in the Early Years settings and/or
		parents, for example)
Transferability	Thick	The context in which this study was conducted
This refers to the degree to	description	was described thoroughly throughout Parts 1 and
which results can be	needs to be	2. I attempted to provide a rich description of the
transferred to other context.	provided by	individual participants and groups whilst still

	the	seeking to uphold ethical principles and
	researcher	guidelines for the research. In Parts 1 and 2, I
		described the national context for the study; both
		in terms of political nature and also national
		initiatives to support children during the pre-
		school years. This was done to develop a thick
		description of the context of study.
Dependability	These	I took care to describe the research steps in detail
Refers to the stability of	criteria can	throughout. I did this in part 1 and 2 and then
findings over time.	be achieved	reflected on the process during part 3. This was
Interpretation and findings	through	done with the aim of increasing transparency.
should all be supported by	transparency	The records of the research are kept throughout
the data.		the study to provide an audit trail.
Confirmability		Furthermore, I tried to support dependability and
The degree that findings		confirmability by providing a detailed outline of
could be confirmed by other		each phase of the research (Part 2 details the
researchers. Interpretation		method of data collection and analysis).
must come from the data.		Finally, I sought to confirm the data by including
		an example of the Thematic Analysis that I
		conducted, as an appendix.
Reflexivity	Diary	I kept a diary of research and supervision logs
Critical self-reflection about		and this helped my reflexivity and development.
oneself as a researcher		Not only did this ensure that I maintained a
(biases and preferences)		critical stance towards knowledge, I became

astutely aware of the need to remain critically
aware of all decision that I made throughout the
research process. It was helpful to share and
reflect upon these with my supervisor and it was
also helpful to keep a diary of thoughts. The
diary helped ensure that I wrote a thorough
Critical Appraisal in Part 3 of the thesis.

It ought to be noted that I was a lone researcher undertaking a time-limited study for the purpose of the Doctorate in Educational Psychology training programme. The study was conducted alongside other duties and consequently some decision made had to be done with time pressure in mind. I acknowledge that, should I have been doing the research in a different context, perhaps I would have had more time to, for example, triangulate the data across different groups of participants, as noted above. Nonetheless, I am pleased that I was able to take the steps outlined above to ensure the credibility and trustworthiness of the research.

3.3.4.6 Ethical considerations. In accordance with guidelines from the British Psychological Society (BPS) (2009; 2018) and the Health Care Professionals Council (HCPC) (2016) there were fundamental ethical considerations that I was mindful to address during my ethical application. Respect for audiences and the use of non-discriminatory language were general ethical issues that I observed (Creswell, 2013). Owing to the tight timescale of the research process, I ensured that considerable attention was given to the ethical implications of working with participant population who were not familiar with psychological research. The respect for participants by protecting their autonomy and ensuring well-informed, voluntary participation was core to my thinking when considering and anticipating ethical issues.

Consequently, a detailed ethics proposal was submitted to the University's Ethics Committee.

This stage of the research process progressed smoothly, and ethical approval was granted.

During the recruitment stage, I was careful to adhere strictly to the approved proposed project and procedures for recruiting participants. Upon reflection, I do believe that this likely limited the number of participants who partook in the research, however this is as decision I am pleased to have taken. As a qualified Educational Psychologist, I will adhere strictly to the BPS (2009; 2018) and HCPC (2016) ethical guidance and consequently, this appeared to be the most logical and appropriate decision to make at the time of recruitment. Whilst this was non-problematic for strand 1 of my research, I found this decision particularly challenging during strand 2 of the research and should I have had a larger time frame to send an amended proposal to the ethics committee I would consider applying for additional methods of recruiting participants in order to increase the number of participants who partook in strand 2. Overall, I am pleased to have followed my proposed procedure and proud of myself as a research practitioner for demonstrating that I am able to and do engage in ethically sound work.

3.3.5 Reflections on the Research Process and Conclusions

During the research process, I had to develop determination and resilience owing to several challenges. Notably, recruitment was most challenging. I had to strike a balance between being persistent, and also mindful of the wider systemic issues.

Burch (1970, cited in Peyton, 1989) suggested that with any new learning, the learner goes through a process of unconscious incompetence, conscious incompetence, conscious competence and unconscious competence. Upon reflection, it is plausible that I went through several of these stages during the process. Despite having a research background as a result of my PhD I felt that the process for this particular thesis drew upon a different skillset. When reflecting on the research journey from inception of the topic to the final document, I have

had to draw upon and develop several skills and abilities to execute the research project. I have summarised these in the following set of bullet points:

- Solving puzzles. A researcher may look at problems as puzzles to solve. The steps in the research process are viewed as a series of puzzle pieces that I had to assemble over a 2 year period. I believe that I can take these skills forward to my practice as a practitioner psychologist as I will be able to approach my work logically.
- Developing my attention span. Whilst I generally enjoy a good attention span, planning, developing, conducting and writing up a thesis demanded that I lengthened my attention span significantly. The process started in summer 2016, when I first started to think about potential topics to summer 2019. This included a 12 month interruption of study. Consequently, I had to learn to focus attention both specifically to read and synthesise information and generally in order to maintain the same level of dedication throughout the project.
- Learning to use library resources. During my systematic review, I met with library staff to ensure that I was searching all of the appropriate databases. Engaging in research requires spending time with library resources appropriately.
- Learning to use the COMOIRA framework to help facilitate my progression through the research project (as discussed in Section 3.1)

Initially I was daunted by the prospect of this research process, especially as I had challenged myself with something that was new to me. I have developed as a researcher in this process and my knowledge, whilst needing further refinement and practice, has expanded during this process. I have begun to acquire a good understanding of strengths and limitations of various aspects or approaches and feel more confident in my ability to critical analyse and select methods.

References

- Allen , G. (2011). Early Intervention: The Next Steps. London: Department for Work and Pensions (DWP). Retrieved on March 1st 2018 from:

 https://www.gov.uk/government/publications/early-intervention-the-next-steps--2
- Banyard, V., Hamby, S., & Grych. J. (2017). Health effects of adverse childhood events:

 Identifying promising protective factors at the intersection of mental and physical wellbeing. *Child Abuse & Neglect*, 65, 88-98
- Bellis, M. A., Hughes, K., Leckenby, N., Perkins, C., & Lowey, H. (2014). National household survey of adverse childhood experiences and their relationship with resilience to health-harming behaviours in England. *BMC Medicine*, *12*, 72.
- Boyle, C., & Lauchlan, F. (2009). Applied psychology and the case for individual casework:

 Some reflections of the role of the educational psychologist. *Educational Psychology in Practice* 25(1), 71-84
- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research* in *Psychology*, 3(2), 77-101
- British Psychological Society (BPS) (2009). Code of Ethics and Conduct: Leicester: BPS.

 Retrieved on 10th October, 2016, from

 www.bps.org.uk/sites/default/files/documents/data_protection_act.pdf.

British Psychological Society (BPS) (2018). Code of Ethics and Conduct. Leicester: BPS.

Retrieved on 22.10.18, from

https://www.bps.org.uk/sites/bps.org.uk/files/Policy%20%20Files/Code%20of%20Ethics%20and%20Conduct%20(2018).pdf

Brocki, J. M., & Wearden, A. J. (2006). A critical evaluation of the use of interpretative phenomenological analysis (IPA) in health psychology. *Psychology and health*, 21(1), 87-108.

Burr, V. (2015). An introduction to social constructionism (3rd Edition). London: Routledge

Children's Society. (2008). The good childhood inquiry: Health research evidence. London: Children's Society

Clinton, J., Feller, A. F., & Williams, R. C. (2016). The importance of infant mental health.

Paediatric Child Health, 21(5), 239-241

Creswell, J. W. (2013). Research design: Qualitative, quantitative, and mixed methods approaches. Sage publications

Dawson, C. (2009). Introduction to research methods: A practical guide for anyone undertaking a research project Fourth Edition. Oxford: How to Books.

- Denzin, N. K., & Lincoln, Y. S. (2000). Introduction: The discipline and practice of qualitative research. In N. K. Denzin, & Y. S. Lincoln (*Eds.*), *Handbook of qualitative research* (2nd ed., pp. 1–29). Newbury Park, CA: Sage.
- Fyfield, R. (2015). *The Rise and Fall of Repetitive Behaviours in a Community Sample of Infants and Toddlers*. Cardiff University: Unpublished Doctoral Thesis
- Gameson, J., Rhydderch, G., Ellis, D., & Carroll, H. C. M. (2003). Constructing a flexible model of integrated professional practice: Part 1, conceptual and theoretical issues. *Educational and Child Psychology*, 20, 96-115.
- Gameson, J. & Rhydderch, G. (2008). The Constructionist Model of Informed and Reasoned Action (COMOIRA). In B. Kelly, L. Woolfson and J. Boyle (Eds.), *Frameworks for Practice in Educational Psychology: A Textbook for Trainees and Practitioners* (pp. 94-120). London: Jessica Kingsley.
- Gough, D. (2007). Weight of evidence: A framework for the appraisal of the quality and relevance of evidence. *Research Papers in Education*, 22(2), 213-228 DOI: 10.1080/02671520701296189
- Grix, J. (2010). The foundations of research. Los Angeles: Palgrave Macmillan.
- Guba, E. G., & Lincoln, Y. S., (1989). Fourth generation evaluation. Newbury Park, CA:

 Sage

- Guba, E. G., & Lincoln, Y. S. (1994). Competing paradigms in qualitative research. In N. K.,

 Denzin & Y. S., Lincoln (Ed). *Handbook of qualitative research*. Thousand Oaks CA:

 Sage.
- Hay, D. F., Waters, C. S., Perra, O., Swift, N., Kairis, V., Phillips, R., Jones, R. M, Goodyer, I., Harold, G T., Thapar, A., & van Goozen, S. H. M. (2014). Precursors to aggression are evident by 6 months of age. *Developmental Science*, *17*(3), 471-480
- Health and Care Professions Council (HCPC) (2016). Standards of conduct, performance and ethics. London: HCPC. Retrieved on 12.01.17, from www.hpc-uk.org/publications/standards/index.asp?id=3
- Hesse-Biber, S. (2010). Qualitative approaches to mixed methods practice. *Qualitative Inquiry*, 16(6), 455–468.
- Johnson, R. B., & Onwuegbuzie, A. J. (2016). Mixed methods research: A research paradigm whose time has come. Retrieven on 24.01.2019 from https://www.slideshare.net/mabubakr1980/mixed-methods-research-newpptx
- Kitzinger, J. (1994). The methodology of focus groups: the importance of interaction between research participants. *Sociology of health & illness*, *16*(1), 103-121.
- Leung, L. (2015). Validity, reliability, and generalizability in qualitative research. *Journal of Family Medicine and Primary Care*, 4(3), 324-327. Doi: 10.4103/2249-4863.161306

- Lewis-Beck, M.S., Bryman, A., & Liao, T. F. (2004). *The SAGE Encyclopaedia of Social Science Research Methods*. London: SAGE
- McEvoy, P., & Richards, D. (2006). A critical realist rationale for using a combination of quantitative and qualitative methods. *Journal of Research in Nursing*, 11(1), 66-78.
- Mills, J., & Birks, M. (2014). Qualitative methodology: A practical guide. London: SAGE
- National Scientific Council of the Developing Child The Science of Neglect (2012). The persistent absence of responsive care disrupts the developing brain. Accessed 14.11.17 on www.developchild.harvard.edu
- Pettitt, B. (2003). *Effective joint working between Child and Adolescent Mental Health Services and schools*. Mental Health Foundation.
- Pietkiewicz, I.,& Smith, J. A. (2012). Praktycny przewodnik interpretacyjnej analizy fenomenologicznej w badaniach jakosciowych w psychologii. Czasopismo Psychologiczne, 18(2), 361–369. Abstract only.
- Plano Clark, V. P., & Creswell, J. W. (2008). *The mixed methods reader*. California: Sage Publications, Inc
- Rober, P. (2005). The therapist-s self in dialogical family therapy: Some ideas about not-knowing and the therapist's inner conversation. *Family Process*, 44(4), 477-95

Romm, N. R. A., & Phil, D. L. (2013). Employing questionnaires in terms of a constructivist epistemological stance: reconsidering researchers' involvement in the unfolding of social life. *International Journal of Qualitative methods*, 12, 652-669

Robson, C., & McCartan, K. (2016). Real World research (2nd Edition). Oxford: Blackwell.

Scott, J. (2010). Quantitative methods and gender inequalities. *International Journal of Social Research Methodology*, 13(3), 223–236.

Smith, J. A., Flowers, P., & Larkin, M. (2009). *Interpretative Phenomenological Analysis:*Theory, Method and Research. London: Sage

Stewart, D. W., & Shamdasani, P. N. (2014). *Focus groups: Theory and practice* (Vol. 20). Sage publications.

Thomas, G. (2013). How to do your research project: A guide for students in education and applied social sciences (2nd Edition). London: Sage Publications.

Tickell, C. (2011): The early years: Foundations for life, health and learning. Retrieved on 07.09.2017 from:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/180919/
DFE-00177-2011.pdf

Victor, L. (2008). Systematic reviewing. Social Research Update, 54, 1-5

- Welsh Assembly Government (WAG). (2004). *Children and young people: Rights to action*. Cardiff: WAG.
- Welsh Government. (WG). (2010). Well-being of Future Generations (Wales) Act. Cardiff: Wales
- Welsh Government (WG). (2015). *Children and young people's wellbeing monitor for Wales*.

 Cardiff: WG
- Welsh Government. (WG). (2018). *Together for Mental Health Delivery Plan*. Cardiff: WG. Retrieved on 18.11.2018 from https://gov.wales/topics/health/nhswales/plans/mental-health/?lang=en
- World Health Organisation (WHO) (2003). *Caring for children and adolescents with mental disorders: Setting WHO directions*. Geneva: World Health Organization. Accessed on 17.01.2018 at: http://www.who.int/mental_health/media/en/785.pdf
- Willig, C. (2013). *Introducing qualitative research in psychology*. McGraw-Hill Education (UK).

Appendix I: Table of database search terms and returns

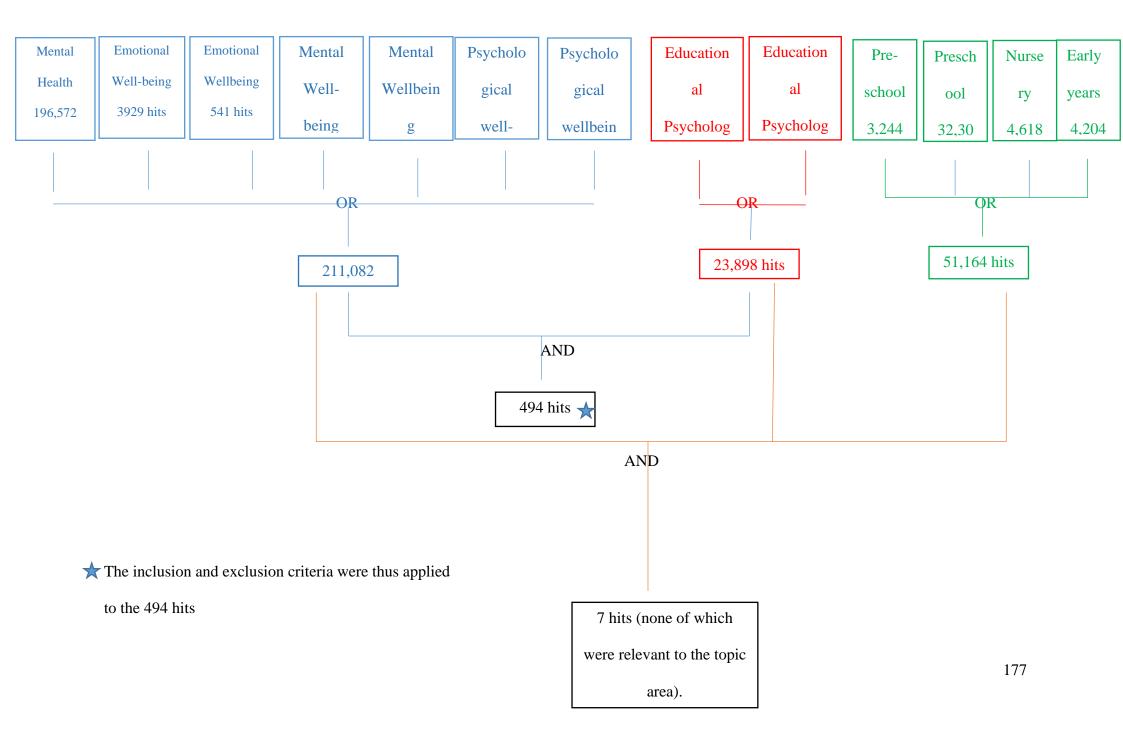
The systematic literature review took place in December 2018. The electronic databases utilised to inform this literature review were PsycINFO (1806-2018), ERIC, Google Scholar and ORCA. Additionally, a number of specific, peer-reviewed journals were searched due to their relevance to Educational Psychology. These were Educational Psychology in Practice, The British Journal of Educational Psychology, Educational Psychology Review and Educational and Child Psychology.

The search terms used were educational psychologist, educational Psychology, mental health, emotional well-being, emotional wellbeing, mental-well-being, mental wellbeing, psychological well-being, pre-school, preschool, nursery, early years. Key search terms were searched both as subject headings and as keywords in the publications. When each search term was entered the databases suggested secondary or subsidiary terms for inclusion into the search. The author incorporated these terms into the search to ensure an inclusive, holistic, thorough and rigorous search of the literature available. The subsidiary terms suggested by the databases are shown in the table below:

Principal search term	Subsidiary/ secondary search term suggested by database and selected by researcher (this is in addition to the principal search term)
Educational Psychologist	Child Psychologist School Psychology
Educational Psychology	Child Psychology School Psychology
Mental health	-
Mental wellbeing and mental well-being	Mental health
	Life satisfaction
	Emotional states
	Emotional development
	Psychological development
	Psychological well-being
	Emotional adjustment

	Emotional capacity			
Psychological wellbeing and psychological	Emotional adjustment			
well-being	Coping mechanism			
	Social and emotional health			
	Mental health			
Emotional wellbeing and emotional well-	Emotional literacy			
being	Emotional literacy support assistants			
	Social and emotional learning			
	Social and emotional development			
	Self-esteem			
Pre-school and preschool	Preschool education			
	Child Development			
	Early Child Development			
	Early learning			
	Cognitive learning			
	Emotional learning			
	Social skills			
Nursery	Nursery Schools			
Early years	Early years education			
	Preschool education			
	Child development			
	Early child development			
	Early learning			
	Cognitive learning			
	Emotional learning			
	Social skills			

In addition to the more traditional databases, general searches were conducted using Google Scholar as well as library searches for books through the Cardiff University library service. General media searches using Google were also completed. Further literature was identified through the reference list of primary sources and general media searches were conducted. The figure overleaf demonstrates how the 494 search hits were retrieved in this literature review. Search returns were recorded in December 2018



Appendix II: Details of the 13 studies discussed in the literature review

Author	Nature of	Target	Nature of	Detail of Study	Weight of Evidence (WoE) assessment(Gough, 2007)			
	work to	age of	work that		(1 = excellent, 4 = inadequate; refer to Table 4)			
	promote	CYP in	the EPs took		Methodological	Methodological	Topic	WoE
	MEWB	the paper	part in		quality	relevance	relevance	
Atkinson	Direct	School	Explored	Two small-scale	1	1	1	1
et al., 2011	therapeutic	aged	what could	qualitative research				
	work		facilitate EPs	studies.				
			implementing	Research questions:				
			therapeutic	How are EPs using				
			interventions	therapeutic				
				interventions? What				
				are the issues for EPs				
				in delivering				
				therapeutic				
				interventions?				
				Study 1: focus groups				
				& interviews with				
				EPs, TEPs and CPs.				

	 1	1	1	
	Study 2: questionnaire			
	(n7) followed by semi-			
	structured interviews			
	(n4) with EPs only.			
	Thematic analysis for			
	both studies.			
	Identified themes and			
	subthemes where			
	organised through the			
	use of a SWOT			
	analysis. Strengths:			
	EPs use a wide range			
	of therapeutic			
	interventions in a			
	flexible way and at			
	different levels; access			
	to CPD and			
	supervision; wide			
	definition of			
	'therapeutic			
	intervention'.			

Weakness: lack of
therapeutic
interventions with
young children;
schools not always
aware that EPs offer
therapeutic
interventions; limited
opportunities to use.
Opportunities: New
direction for EPs;
possible greater future
significance for
therapeutic work;
multiagency working.
Threats: anxiety over
role definitions; work
related to SEN
procedures taking
precedence; time
limitations.

-								
Atkinson	Direct	School	Explore	UK wide survey (both	1	1	1	1
et al., 2014	therapeutic	aged	nature of	online and paper				
	work		therapeutic	copies distributed) to				
			intervention	examine use of				
				therapeutic				
				interventions and the				
				facilitating factors and				
				barriers. 455 EP				
				respondents.				
				92% use therapeutic				
				interventions as part of				
				their current practice.				
				68.7% as part of				
				assessment, 66% as				
				part of consultation,				
				54.5% as part of				
				systemic work. SFBT				
				and CBT, PCP are the				
				most reportedly used				
				therapeutic				

				intervention.				
				Examined facilitating				
				factors (assess to				
				training, service				
				culture, personal				
				interest etc.) and				
				barriers (limitations of				
				time allocation model,				
				capacity, lack of				
				training, lack of				
				practice				
Boorn et	Whole	Primary	Capacity	A training programme	2	1	1	2
al., 2010	school		building for	presented by EPs for				
			teachers; EP	professionals working				
			as trainer	in 73 primary schools				
				with the aim of				
				promoting an optimal				
				environment for				
				learning and emotional				
				well-being. The				

				I .	,
		purpose of the			
		research was to			
		evaluate the training			
		programme.			
		Rating scales used in			
		training evaluation			
		questionnaire (0-5).			
		All of the seven main			
		sections received			
		feedback from 4 to 4.5			
		when averaged from			
		all training courses as			
		shown.			
		Importance of whole-			
		school ethos			
		highlighted.			
		Limitation – some			
		delegates received 1			
		day training while			
		others received 2 days.			

Dawson et	Multi-	Primary	Individual	Evaluation of 10 years		
al., 2010	agency work	and	interventions	of the Child Behaviour		
		secondary	and casework	Intervention Initiative		
			with families	(CBII) in Leicester		
			of school	City. Referrals made		
			aged	by families to 3 teams		
			children,	of Family support		
			work	workers, CAMHs		
			amongst	specialists and EPs.		
			other	Various interventions		
			professionals	used as well as		
				training & support		
				given. Average of 6		
				sessions.		
				Also review of		
				TaMHS project in		
				Leicester City.		
				Evaluated using SDQ.		
				Pre and post testing		
				scores completed by		
				professionals were not		

	statistically		
	significant. Parental		
	reports indicated		
	statistically significant		
	effects post		
	intervention. 60% of		
	parents saw a positive		
	improvement in their		
	child and over 60%		
	see an improvement in		
	family relations.		
	Self-referral system		
	ensures positive		
	engagement in the		
	interventions.		
	No qualitative		
	evaluations or		
	information presented.		
	All pre and post		
	measures were		

				questionnaires and				
				self-scaling.				
Durbin,	Multi-	Primary	Study	Activity Theory used	1	1	1	1
2010	agency work	and	explored the	to explore the				
		secondary	role that EPs	sociocultural processes				
			have in	involved in				
			multi-agency	multidisciplinary work				
			teams	to promote mental				
			addressing	health and				
			MH	psychological				
				wellbeing in children				
				and YP.				
				The objects identified				
				in the EP group: the				
				strategic management				
				of the multiagency				
				team; providing				
				multidisciplinary				
				mental health training;				
				providing group-work				

				to build children's				
				social skills,				
				understanding and				
				confidence; resolving				
				the problems of				
				individual children				
				and their families				
				through casework. As				
				majority of activities				
				for EPs were around				
				'teaching' children				
				social skills, there was				
				less emphasis on				
				changing the context,				
				significant others or				
				school environment.				
Hall	Whole	Primary	Study	Primary School bid for	1	1	1	1
(2010)	school		reported a	project around hearing				
	support		research	pupil voice about				
			project which	emotional aspects of				

collected and	learning –		
acted upon	commissioned EP		
children's	service to run project.		
views on	Focus groups with		
school life	children aged 5-11.		
	Explored features of		
	their school that		
	promoted or demoted		
	mental health and		
	wellbeing. Used Ten		
	Element Map		
	MacDonald and		
	O'Hara (1998) to		
	structure focus groups.		
	Themes emerging		
	from the focus groups:		
	environmental quality;		
	self-esteem; emotional		
	processing; self-		
	management skills and		
	social participation.		

			Future directions -				
			pupils moving from				
			'participating' to				
			becoming 'co-				
			researchers'. Parent				
			voice being sought.				
			Ten Element Map was				
			over 10 years old				
			when research took				
			place, however, this				
			was justified in				
			relation to using a				
			systemic approach to				
			wellbeing in schools				
			referring to current				
			legislation and				
			guidance.				
Hart	Consultation	Secondary	Paper focuses on	2	2	2	2
(2009)		age case	social and emotional				
		study					

-	 	_			
		needs of CYP who are			
		refugees.			
		Owing to withdrawal,			
		participant N=1, 13			
		year old case study.			
		Paper explored sources			
		of trauma experiences			
		by CYP and the			
		psychological			
		functioning and			
		emotional well-being.			
		The paper advocates			
		interactionist and			
		ecosystemic			
		perspectives for			
		understanding the			
		difficulties			
		encountered by			
		refugee children and			
		considers role for EP			
			1		

				using the interactive				
				factors framework.				
				EPs are appropriately				
				equipped with				
				knowledge and skill to				
				take holistic				
				perspective to				
				facilitate change				
McQueen	Direct	Parents of	Using	Practitioner research.	2	2	1	2
& Hobbs	therapeutic	school	narrative	Explores power				
(2014)	support	aged	therapy to	differentials when EPs				
		children	explore	work with parents.				
			issues	6 x 1 hours sessions in				
			identified by	a building separate to				
			parents	the school. Plus				
				preparatory session at				
				the school. Film clips				
				and audio used with				
				TEPs; 'outsider				
				witness practice' to				
				thicken the stories.				

Research only able to
work with one couple
owing to participant
withdrawal.
Personal and positive
narrative about a
couples' perceptions
of parenthood.
Confirmation that
narrative therapy can
be used to promote
respectful and
collaborative
partnerships with
parents.
Authors confirmed
that narrative therapy
can be used to promote
emotional well-being
in children by working

				through issues				
				identified by parents.				
Osborne &	Training/	Primary	Capacity	Questionnaire	2	1	1	1
Burton	supervision		building and	completed by 270				
(2014)			supervision	ELSA's to gain their				
			of ELSA	views about group				
			Paper	supervision provided				
			evaluated	by EPs. Quantitative				
			efficacy of	(rating scales) and				
			supervision	qualitative (answers to				
				open-ended questions)				
				data were collated.				
				Supervision sessions				
				were perceived to be				
				helpful (mean rating of				
				4.38). ELSAs felt that				
				the group size (93%),				
				length (95%) and				
				frequency of				
				supervision (95%) was				

1	T	1	Т	
	appropriate. 7% of			
	ELSAs said that the			
	supervision did not			
	meet their needs;			
	further questions			
	identified that some			
	wanted individual			
	support, some wanted			
	more group discussion			
	time and some wanted			
	more experienced			
	ELSA in their group.			
	ELSA generally in			
	agreement that			
	supervisors fulfilled			
	their roles. 17% felt			
	that the supervisors			
	could have done more.			
	ELSA who knew the			
	EP outside supervision			
	(from other work in			

T	T	T		1
	school) felt that this			
	enhanced their			
	relationship.			
	Although 43%			
	response rate for			
	ELSAs is high for this			
	type of research, it			
	could be argued that			
	those who chose to			
	respond may have			
	done so because			
	supervision was either			
	very good or bad at			
	meeting their needs.			
	The sample may			
	provide a skewed			
	picture of the total			
	ELSA population.			
	It was interesting			
	reflecting on the dual			
	role of the EP,			

				working in schools				
				with staff and children				
				and supervising				
				ELSAs. ELSA				
				appreciated when the				
				EP had worked				
				directly with the				
				children brought to				
				supervision.				
Rothia,	Others'	School	Qualitative	30 teachers	2	2	2	2
Leavey &	perception	aged	study.	interviewed (19				
Best	of EP role	children	Exploring the	women and 11 men,				
(2008)			views and	mix of experience and				
			experiences	additional roles, mix				
			of teachers.	of school types). IPA				
			IPA used to	identified four themes:				
			analyse data.	EP service-related				
				issues; relationships				
				with EPs; issues				
				related to the impact				

		on pupils of the		
		involvement of EPs;		
		the role and function		
		of EPs as perceived by		
		teacher. Teachers		
		perceive that EPs are		
		not specialists in		
		mental health.		
		Clearly shows		
		teachers' frustrations		
		about working with		
		pupils with mental		
		health difficulties and		
		the support (lack of)		
		they receive.		
		Highlights need for a		
		more joined up		
		approach (health,		
		education and social		
		care). Concludes with		
		a call for a bridging of		
	1			,

				the service boundaries				
				to ensure effective				
				joint working.				
Sanders	Consultation	Primary	Nurture	Description of a	1	1	3	3
(2007)		School	group pilot	nurture group pilot				
			project to	project in Hampshire,				
			identify EP	UK.				
			role - EP to	Two schools (29				
			work with	children) participated.				
			teachers in	Children were in KS1.				
			consultation.	Boxall profile, pupil				
				assessments, parent				
				interviews, staff				
				questionnaire,				
				naturalistic				
				observations used at				
				the start and end of the				
				academic year for				
				children in reception				
				and year 1.				

				Children in the nurture				
				group made significant				
				social and emotional				
				gains after attending a				
				group.				
				Gains recognised by				
				children and parents				
				and also generalised				
				into the classroom.				
				Teachers felt more				
				empowered to meet				
				the needs of children				
				presenting with				
				emotional difficulties.				
Seth-Smith	Consultation	Primary	Nurture	Investigated the	1	1	3	3
et al.,			group project	changes in social,				
(2010)			to identify EP	emotional and				
			role - EP to	behavioural				
			work with	functioning in children				
				within a nurture group				

	teachers in	and comparison	
	consultation	condition.	
		Significant changed	
		were found in nurture	
		group children's Total	
		Strength and	
		Difficulties	
		Questionnaire scores,	
		and along with an	
		increase in pro-social	
		behaviour, a decrease	
		in peer difficulties and	
		hyperactivity relative	
		to the comparison	
		group.	
		Changes were found in	
		most aspect of Boxall	
		profile and academic	
		grades also improved	
		significantly more	
I			

				than the comparison				
				group.				
				EP role to support				
				teachers in				
				consultation				
				Limitation – consider				
				limits of the DSQ –				
				short questionnaire,				
				can lack detail.				
Sharrocks,	Training and	Primary	Training and	A group intervention	1	2	2	2
2014	supervision		capacity	run by EPs for school				
			building for	staff called Chill and				
			school staff	Chat to support their				
				wellbeing.				
				Focus groups – great				
				deal of discussion				
				about the acceptance				
				(or not) of talking				
				about well-being at				
				school. 'Staff reported				

		perceived			
		improvements in			
		relationships and staff			
		cohesiveness, however			
		tensions remained			
		around being seen to			
		cope' p.33.			
		Discussed importance			
		of not letting 'good			
		mental health' become			
		another standard for			
		teachers to meet. Poor			
		response rate for			
		questionnaires (29%			
		before intervention			
		and 39% after the			
		Chill & Chat			
		sessions). Found that			
		staff who had attended			
		the well-being			
		intervention felt they			
				1	

	were better able to		
	deal with incidents		
	related to children's		
	emotions in the		
	classroom.		
	Implications for EP		
	role discussed		

Consolidating the research papers into	o different types of work that EPs could engage in fo	or systematic write up of findings.	
THERAPEUTIC	TRAINING AND SUPERVISION	MA WORK	
Atkinson 2014	Sharrocks (2014)	Durbin (2010)	
Atkinson 2011	Osborne & Burton (2014)	Dawson & Singh-Dhesi (2010)	
McQueen & Hobbs (2014)			
CONSULTATION	WHOLE SCHOOL	PERCEPTION OF ROLE	
Sanders (2007)	Boorn et al., (2010)	Rothia, Leavey & Best (2008)	
Seth-Smith et al., (2010)	Hall (2010)		
Hart (2009)			

Appendix III: Gatekeeper letter to Principal Educational Psychologists (Strand 1 and 2)

An investigation into the role of the Educational Psychologist in promoting emotional wellbeing in the early years

School of Psychology

PRIFYSGOL CAERDYD

Dear Principal Educational Psychologist,

I am writing to you to invite you to participate in a doctoral research study designed to explore the perspectives of Educational Psychologists regarding their role in the promotion of emotional wellbeing of children attending pre-school settings. The study is being conducted by myself, Rhiannon Fyfield, a trainee in Educational Psychology at Cardiff University, and it is part of the requirements for my doctoral qualification. The focus of my research is the views and experiences of Educational Psychologists on the promotion of mental and emotional wellbeing of children in pre-school years. I believe that these invaluable views and experiences can contribute to improving early years practice around the promotion of children's mental and emotional wellbeing. I would like to obtain the perspective of Educational Psychologists across Wales and consequently I am writing to enquire whether you would be willing to grant permission to recruit Educational Psychologists from your service. As part of my research I am requesting permission to recruit both Educational Psychologists who work for Local Authorities and Educational Psychologists who work for Flying Start. Importantly, I will not be exploring the practice of individual Educational Psychologists but will instead research the role of the Educational Psychologists.

The Educational Psychologists will be asked to complete on online questionnaire that will take approximately 20 minutes to complete. The purpose of the questionnaire is to explore the role that Educational Psychologists currently have and could have in promoting the mental and emotional wellbeing of young children in the preschool years. The outcomes

of this research intend to: inform Educational Psychologists' practice to support early years' practitioners and pre-school settings to understand and prevent emotional difficulties through consultation and training, help develop effective practice by focusing on what works well while addressing potential barriers to the effective promotion of emotional wellbeing.

Should you consent for recruitment to take place within your Local Authority, please complete the form (attached) and return it to me. Please could you forward the information sheet to the Educational Psychologists within your service (this is attached to the email). A link to the questionnaire is included in the information sheet.

Please refer to the attached Information Sheet, which aims to answer any questions that you may have. I will be closely supervised throughout this process by Dr Ian Smillie, a professional tutor on the Cardiff DEdPsy programme. His contact details can be found below. The School Research Ethics Committee (SREC) at the School of Psychology, Cardiff University have granted ethical approval for the research and the SREC contact details are also below. Please let me know if you have any questions or if you require further information.

Thank you for reading this and I look forward to hearing from you,

Regards,

Rhiannon Fyfield

Dr Rhiannon Fyfield Dr Ian Smillie Post Graduate Student Professional Tutor

Doctorate in Educational Psychology
70 Park Place, Cardiff, CF10 3AT

Doctorate in Educational Psychology
70 Park Place, Cardiff, CF10 3AT

Fyfieldr1@cardiff.ac.uk Smillie@cardiff.ac.uk

School research Ethics committee at the School of Psychology, Cardiff University:

Secretary of the Ethics Committee School of Psychology Cardiff University Tower Building Park Place Cardiff

CF10 3AT

Tel: 029 2087 0360

Email: psychethics@cardiff.ac.uk

Principal Educational Psychologist consent to recruit

Pease read the following and inset initials into the brackets:	
• I confirm that I have read the attached information sheet and have be the opportunity to ask questions []	een provided with
I confirm that I consent to recruitment taking place within my service.	ee []
I will forward the information sheet and consent form to the appropriate Psychologists within the service	riate Educational
Name:	
Signed:	
Date: Please return a copy of this to Rhiannon Fyfield at fyfieldr1@ca	rdiff.ac.uk

Appendix IV: Information Sheet (Strand 1 and 2)

An investigation into the role of the Educational Psychologist in promoting emotional wellbeing in the early years Information Sheet



Who is carrying out the study?

My name is Rhiannon Fyfield and I am the researcher for this project. I am a student at Cardiff University. This research will form part of my thesis for my Doctorate in Educational Psychology. Dr Ian Smillie, a Professional Tutor at Cardiff University is my research supervisor and the research has been approved by the School of Psychology ethics committee at Cardiff University.

What are the aims of the study?

This research will seek to explore the role that Educational Psychologists could have in promoting the mental and emotional wellbeing of young children in the preschool setting. The research aims to understand the context and mechanisms which facilitate or hinder the effective promotion of children's emotional wellbeing in preschool setting, according to the views of Educational Psychologists.

Why is this research important?

Early identification is increasingly recognised as an effective approach to facilitate change and support children (Allen, 2011). Is it therefore important to understand how Educational Psychologists could work in the pre-school setting. The outcomes of this research intend to: inform Educational Psychologists practice to support early years' practitioners and early years setting to understand and prevent emotional difficulties through consultation and training, help develop effective practice by focusing on what works well while addressing potential barriers to the effective promotion of emotional well-being.

What will taking part involve?

You have been invited to take part in this research because your views and experience can contribute to improve early years practice around the promotion of children's emotional and mental wellbeing. The participation in this research is completely voluntary. It is your choice whether to participate or not. If you decide to participate, you have the option of withdrawing before the study commences and the option to skip questions that you do not want to answer. Participation in the study will involve completing an online questionnaire. The questionnaire is aimed to obtain your views regarding Educational Psychologists role in he early years in relation to promoting mental and emotional wellbeing. The questionnaire will take roughly 20 minutes to complete and the link to reach the questionnaire is at the end of this information sheet. A consent form that formally asks your permission to take part in the study and a debrief form is included as the first and last pages of the questionnaire.

What will happen to the information that I give?

You can choose to give as much or as little information as you like in answer to the questions posed in the questionnaire. You don't have to answer all questions. Once you press submit on the questionnaire, the information will be send to me immediately and anonymously (i.e. I will not be able to make a link between your personal details and the answers that you give). All of the anonymous questionnaires will be stored on my password protected computer. Your name and the name of the authority that you work at will not be associated with the information provided. Once the questionnaire data have been collated I will look for patterns in the answers provided. I will not look at individual responses. The anonymised information will be included in my research report, written as part of my study on the programme and will be shared with the university.

How can I find out more information?

If you would like more details or if you have any questions, here are the appropriate contact details:

Dr Rhiannon Fyfield Dr Ian Smillie
Post Graduate Student Professional Tutor

Doctorate in Educational Psychology
70 Park Place, Cardiff, CF10 3AT
70 Park Place, Cardiff, CF10 3AT

<u>Fyfieldr1@cardiff.ac.uk</u> <u>Smillie@cardiff.ac.uk</u>

<u>School research Ethics committee at the School of Psychology, Cardiff University:</u>
Secretary of the Ethics Committee, School of Psychology, Cardiff University, Tower Building, Park Place, Cardiff, CF10 3AT

Tel: 029 2087 0360.

Email: psychethics@cardiff.ac.uk

What do I do next?

Once you have read this information sheet and had the opportunity to ask any questions, should you decide to take part please copy and paste the link below into your web browser. Alternatively, you can press the 'ctrl' button and simultaneously click the link. This will take you to the online questionnaire. The first page of the questionnaire if a consent form which asks for your permission to take part. It is important that you read this, it is only after reading this page that you can proceed to the questionnaire. The questionnaire will take approximately 20 minutes for you to complete and the last page of the questionnaire includes a debrief which thanks for you participation and provides you with appropriate contact detail should you have any questions. If you have any trouble accessing the survey, please email me on type-accessions-read the last page of the questionnaire includes a debrief which thanks for you participation and provides you with appropriate contact detail should you have any questions. If you have any trouble accessing the survey, please email me on type-accessions-read the survey, please email me on type-accessions-read the survey, please email me on

https://cardiffunipsych.eu.qualtrics.com/jfe/form/SV 85IaFiWmvaOfHUN

Appendix V: Consent form (Strand 1 and 2)

This research will seek to explore the role that Educational Psychologists do and could have in promoting the mental and emotional wellbeing of young children in the preschool years. The research aims to understand the context and mechanisms which facilitate or hinder the effective promotion of children's emotional wellbeing in preschool years, according to the views of Educational Psychologists. The outcomes of this research intend to: inform Educational Psychologists practice to support early years' practitioners and early years setting to understand and prevent emotional difficulties through consultation and training, help develop effective practice by focusing on what works well while addressing potential barriers to the effective promotion of emotional well-being. Please read the following statements carefully.

I understand that participation in this project is entirely voluntary and that I have the right not to participate, to decline to answer any questions or withdraw from the study without giving a reason. I understand that I am free to ask any questions at any time and discuss my concerns with Rhiannon Fyfield (researcher) or Ian Smillie (research supervisor).

I understand that providing consent to the study involves completing a short questionnaire only. I understand that the questionnaire has no personal information on it and this is to ensure that questionnaire responses are kept confidential. I understand that once I have clicked submit on the online questionnaire I will be unable to withdraw form that part of the research as it will be impossible to trace the information back to me individually. I understand that the information provided by me via the questionnaire will be collected and combined with other Educational Psychologist's data and presented using descriptive statistics.

I confirm that I have read the information sheet for the above to proceed. I had the opportunity to consider the information and ask questions and I have had these answered satisfactorily. I understand that the research will be submitted as a short report as part of the Educational Psychology Programme and a summary report (that is anonymous) can be shared with my school.

Please tick which (if either) part of the study you wish to participate in:

Consent to participate in the research	
I do not want to participate in the research	

Appendix VI: Debrief (Strand 1 and 2)

Promoting emotional wellbeing in the pre-school setting: the role of the Educational Psychologist

Debrief Sheet





Thank you for taking part in the study.

Previous research has examined the role of EPs in mental and emotional wellbeing but not in the context of early years. This research sought to explore the role that Educational Psychologists could have in promoting the mental and emotional wellbeing of young children in the preschool years. The research aimed to understand the context and mechanisms which facilitate or hinder the effective promotion of children's mental and emotional wellbeing in preschool years, according to the views of Educational Psychologists. The outcomes of this research intend to: inform Educational Psychologists practice to support early years' practitioners and early years setting to understand and prevent emotional difficulties through consultation and training, help develop effective practice by focusing on what works well while addressing potential barriers to the effective promotion of emotional well-being.

Please note that the answers you have provided will not be traced back to you. Once you have clicked submit on the questionnaire, it will be impossible to trace your answers back to you.

It is important to note that I am not looking at individual responses to questions posed in the questionnaire; I will look at the general patterns that emerge when all data is put together. I will identify themes that emerge rather than the individual viewpoints.

If any issues of concern have arisen please do not hesitate to contact your line manager. If you would like to discuss any issues immediately, I am working under the supervision of Dr Ian Smillie and any complaints or issues could also be raised with him. Should you have any concerns over the study please contact the School Research Ethics Committee (SREC).

Please contact us for further information, if needed:

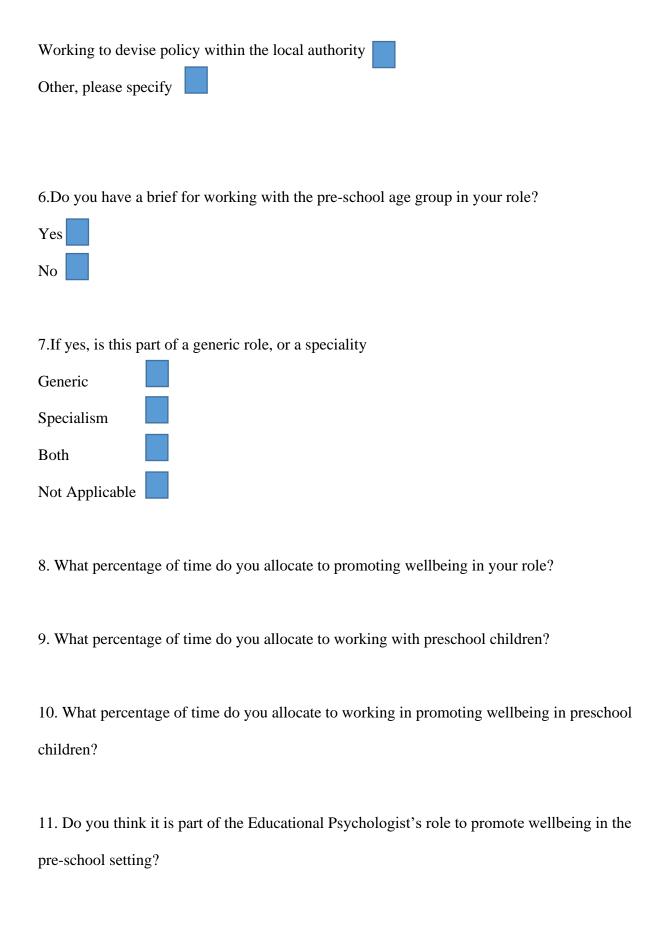
Rhiannon Fyfield: fyfieldr1@cardiff.ac.uk

Ian Smillie: Smillie@cardiff.ac.uk
Ethics: psychethics@cardiff.ac.uk

Appendix VII: Questionnaire (Strand 1)⁶

1. Do you work for
Local Education Authority
Flying Start
2.For how long have you practiced as an Educational Psychologist?
3.Do you have a brief for promoting wellbeing or working in mental health within your role Yes No
4. If yes, is this part of a generic role, or a speciality
Generic
Specialism
Both
Not Applicable
5 Harry da arrow was a dair hair film arrow and 19
5. How do you meet this brief in your work? Through systemic works
Through systemic work In statutory demands/ work
In statutory demands/ work Individual work including the report in intervention
Individual work including therapeutic intervention
Co-construct strategies in consultation Multi-accept work
Multi agency work

⁶ Note. Questionnaire was published on the online server, frequently used by Cardiff University, Qualtrics. The presentation of questionnaire was therefore different, however all text remains the same.



12. How do you work to promote mental and emotional well-being in preschool aged
children?
Through systemic work
In statutory demands/ work
Individual work including therapeutic intervention
Co-construct strategies in consultation
Multi agency work
Working to devise policy within the local authority
Other, please specify
13. If you work in the pre-school setting to promote wellbeing, is this alongside other
organisations?
Yes Please specify
Yes Please specify No
No The state of th
No The state of th
No Not applicable
Not applicable 14. What is the nature of the work you do in regards to promoting wellbeing in pre-school
Not applicable 14. What is the nature of the work you do in regards to promoting wellbeing in pre-school setting?
Not applicable 14. What is the nature of the work you do in regards to promoting wellbeing in pre-school setting? Systemic
No Not applicable 14. What is the nature of the work you do in regards to promoting wellbeing in pre-school setting? Systemic Group
No Not applicable 14. What is the nature of the work you do in regards to promoting wellbeing in pre-school setting? Systemic Group Individual

wellbeing in pre-schools?
Brief, 1-2 sessions
Short, 3-4 sessions
Middle, 6-12 sessions
Long term, 12+ session
A mix
Not applicable
16. How could EPs improve their work in relation to promoting mental and emotional
wellbeing the pre-school years?
17. What can facilitate your role in promoting emotional wellbeing in the pre-school years?

18. What could hinder your work promoting wellbeing in the pre-school years?

15. What is the length of the average intervention or involvement in promoting emotional

Appendix VIII: Questionnaire (Strand 2)'
1. Do you work for
Local Education Authority
Flying Start
2.For how long have you practiced as an Educational Psychologist?
3.Do you have a brief for promoting wellbeing or working in mental health within your role
Yes
No
4.Do you have a brief for working with the pre-school age group in your role?
Yes
No
5.If yes, is this part of a generic role, or a speciality
Generic
Specialism
Both
Not Applicable

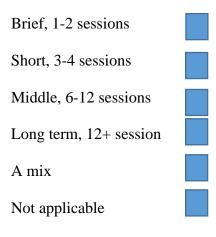
6. What percentage of time do you allocate to working with preschool children?

 $^{^{7}}$ Note. Questionnaire was published on the online server, frequently used by Cardiff University, Qualtrics. The presentation of questionnaire was therefore different, however all text remains the same.

7. What percentage of time do you allocate to working in promoting wellbeing in preschool
children?
8. Do you think it is part of the Educational Psychologist's role to promote wellbeing in the
pre-school years?
9. How do you work to promote mental and emotional well-being in preschool aged children?
Through systemic work
In statutory demands/ work
Individual work including therapeutic intervention
Co-construct strategies in consultation
Multi agency work
Working to devise policy within the local authority
Other, please specify
10. If you work in the pre-school setting to promote wellbeing, is this alongside other
organisations?
Yes Please specify
No
Not applicable
11. What is the nature of the work you do in regards to promoting wellbeing in pre-school
setting?
Systemic
Group



12. What is the length of the average intervention or involvement in promoting emotional wellbeing in pre-schools?



13. How could EPs improve their work in relation to promoting mental and emotional wellbeing during the pre-school years?

14. What can facilitate your role in promoting emotional wellbeing in the pre-school years?

15. What could hinder your work promoting wellbeing in the pre-school years?

16. What does the term emotional and mental wellbeing mean to you?

17. How important is promoting wellbeing in the preschool years?

Appendix IX: Illustration of the questionnaire questions and their association with principal and secondary research questions

Principal	Secondary Research question (RQ)	Questionnaire
Research		questions used to
Questions		address the RQ
1.What are Local	1a What is the current role of LA EPs in	3
Authority	relation to MEWB in pre-school years?	4
Educational		5
Psychologists		6
(EPs) construction		7
of their role in		8
promoting mental		9
and emotional		10
wellbeing		11
(MEWB) in the		12
pre-school years?		13
		14
		15
	1b What are the facilitators and barriers to LA	17
	EPs engagement in work related to MEWB in	18
	the pre-school years?	
	1c How might LA EPs improve their work in	16
	relation to MEWB in pre-school years?	

2How do Flying	2a What is the current role of Flying start EPs	3
Start Educational	in relation to promoting MEWB in the pre-	4
Psychologists	school years?	5
(EPs) perceive the		6
EPs role in		7
promoting mental		8
and emotional		9
wellbeing		10
(MEWB) in the		11
preschool years?		12
	2b What are the facilitators and barriers to	14
	Flying Start EPs engagement in work related to	15
	MEWB in the pre-school years?	
	2c How might EPs improve their work in	13
	relation to MEWB in pre-school years?	

Appendix X: Thematic analysis to explore the barriers to EP engagement in work to promote MEWB in the pre-school years (RQ1b)

Phase 1: Familiarisation.

As noted in section 2.6, familiarisation with the data was obtained by typing out each participants' response to the questionnaire (Question 18) and reading the information repeatedly.

Phase 2: Generating initial codes

This phase involved the production of initial codes from the data. Codes are identified as "a feature of the data that appears interesting to the analyst" (Braun & Clarke, 2006). Codes were established manually, by using the highlighter function of Microsoft excel to indicate areas of interest and potential patterns.

A theoretical/deductive thematic analysis was selected to analyse the data, in order to provide a more detailed analysis of the data which directly related to the research questions, rather than provide a description of the data overall. This means that the entire data set was coded with the following specific research question in mind:

Research question 1b: What are the facilitators and barriers to EPs engagement in work related to MEWB in pre-school years?

Once the entire data set had been read and highlighted for codes, codes were labelled in the table below, and extracts of data were copied and pasted into the relevant codes, based on what had been highlighted. Coded extracts were included with relevant surrounding data so as not to lose the context of the extract, and different extracts were often coded into a number of different, relevant codes.

Code	Data extract

1. Confidence

We don't perceive ourselves as experts. I wonder whether we limit ourselves in the confidence we have in our ability to work in this area, competently

I am newly qualified and find that I am still learning to work with pre-school age group.

I think I have a lot to learn before I will be able to contribute to this area

I don't feel confident working with this age group. I would like more supervision

Whilst I have had some training in early years and attachment, I don't feel confident enough to work in this way.

We have a great deal of training on identifying emotional well-being needs in older children but I would like to learn more about how to work with this age group preventatively

I wish that, as part of our training, I had received more input for pre-school age

group. I don't feel as though I know enough beyond the usual Piaget and Vygotsky theories I have had no training and my work would not be good enough 2. Competence We don't perceive ourselves as experts. I wonder whether we limit ourselves in the confidence we have in our ability to work in this area, competently I am newly qualified and find that I am still learning to work with pre-school age group. I think I have a lot to learn before I will be able to contribute to this area I don't feel confident working with this age group. I would like more supervision I would like to ensure that I had support from my seniors or more experiences colleagues as this is new to me

We have a great deal of training on
identifying emotional well-being needs in
older children but I would like to learn more
about how to work with this age group
preventatively
We work systemically within the service,
providing workshops and training, however
we offer very little in terms of promoting
well-being in the pre-school age group, I
would like more training
I have had no training and my work would
not be good enough
A huge barrier for me is lack of guidance.
A huge barrier for me is lack of guidance.
Whilst I am supported in my role, this is
informal. A formal supervision model
might increase my confidence to work in
pre-school years
I have had very limited training in this area.
I think that increased supervision (peer or

from senior staff) could allow me to feel more able to work in this way I don't feel confident working with this age group. I would like more supervision I would like to ensure that I had support from my seniors or more experiences colleagues as this is new to me 5. Own perception of role My pre-school role largely involves statutory duties or assessment for additional funds Do other people want us to do this? I never get asked to work in this area. We have very little time to work preventatively in the service, often our role with pre-school involves assessment for additional funds Whilst I agree that there is scope for EPs to work in this area. I wonder exactly what our role would entail. I would want to clarify

	my role so not to overlap with health
	visitors, social services, family liaison
	experts
6. Statutory duties	My pre-school role largely involves
	statutory duties or assessment for additional
	funds
	We have a statutory role and this duty is an
	We have a statutory role and this duty is one
	that will always take president over any
	other sort of work
	We have a heavy school caseload in the
	service, as I am sure is the case nationwide.
	We are stretched and statutory work
	dominates
	We have very little time to work
	preventatively in the service, often our role
	with pre-school involves assessment for
	additional funds
	additional funds
	I have received insufficient training to work
	in this age group. My work is limited to
	statutory demands.

	<u> </u>
	My focus is on the statutory demands as I have no other time to do any other types of work
	I think that our senior staff members are stretched by statutory requests and perhaps this is how our role is defined in the LA
7. Assessment for additional funds	My pre-school role largely involves statutory duties or assessment for additional funds
	Some of the parents I work with think that I am there to assess their child for 'extra money' ready for when they start school
	Pre-school practitioners often see me at a gatekeeper to extra funds. This definitely limits the scope of my work
8. Others' perception of role	Some of the parents I work with think that I am there to assess their child for 'extra money' ready for when they start school

Pre-school practitioners often see me at a gatekeeper to extra funds. This definitely limits the scope of my work

I don't think others' see this as our role

Others' often perceive the EP role as one which assessed and 'fixes' problems.

Working preventatively with this age group would definitely involve reframing others' constructs of us as holistic practitioners

Do other people want us to do this? I never get asked to work in this area.

I think that there can be a lack of clarity regarding our role in mental well-being.

Different professionals will construct our role differently and there is such a space to better define what we can do as EPs

I think that we do work in this way on many levels but not explicitly as we are uncertain of our role

I think others have a limited view of our role. I guess our titles could be restrictive.

Education psychologists implies trouble with education attainment whereas a reconstruction of our role might be helpful.

I get asked to work a lot with children who have social and communication difficulties.

I don't think that others see well-being as part of our role, particularly at this age

I think that our senior staff members are stretched by statutory requests and perhaps this is how our role is defined in the LA

I feel pressure from others to only engage in work that directly relates to learning right now. I find it hard to communicate that whilst wellbeing may not be impacting a child's ability to learn in the here and now, it might do in a years' time and so promotion and preventative work is required.

9. Desire for more experience

I am newly qualified and find that I am still learning to work with pre-school age group.

	I think I have a lot to learn before I will be
	able to contribute to this area
10. Lack of collaboration	To work competently in this area, I would
	like to ensure that collaboration takes place.
	At the moment, we don't collaborate
	enough across services and I think this
	could affect the degree to which I work to
	promote well-being in pre-school
11. Lack of clarity regarding role	I think that there can be a lack of clarity
	regarding our role in mental well-being.
	Different professionals will construct our
	role differently and there is such a space to
	better define what we can do as EPs
	I think that we do work in this way on many
	levels but not explicitly as we are uncertain
	of our role
12. Lack training	I have had no training and my work would
	not be good enough

I have received insufficient training to work in this age group. My work is limited to statutory demands.

We have a great deal of training on identifying emotional well-being needs in older children but I would like to learn more about how to work with this age group preventatively

I wish that, as part of our training, I had received more input for pre-school age group. I don't feel as though I know enough beyond the usual Piaget and Vygotsky theories

We work systemically within the service, providing workshops and training, however we offer very little in terms of promoting well-being in the pre-school age group, I would like more training

13. Method of service delivery

We have a heavy school caseload in the service, as I am sure is the case nationwide.

We work on a time allocation model. In an ideal world, this would be different as I don't think that this will be sustainable under the new legislation. Especially if we are to work more preventatively

Whilst we work with this age group, the majority of time will always be taken up by school visits and consultation, I've simply no time to engage in this work as often as I would like

Despite a desire to work in this area, I just don't have the time in my allocation

14. Time constraints

We have very little time to work

preventatively in the service, often our role
with pre-school involves assessment for
additional funds

The difficulties really do relate to the time commitment, especially for ongoing pieces of work

	We work using consultation model. I have offered consultation around specific cases
	which I have enjoyed, but I haven't been
	able to offer ongoing work owing to time
	restraints. I hope that consultation model
	empowers the other professionals to work
	preventatively
15. Competing demands	We need more EPs in the service so that we
	can manage the other demands within our
	role. Working preventatively is ideal, but
	currently our staffing limits do not allow for
	that
	The difficulties really do relate to the time
	commitment, especially for ongoing pieces
	of work
16. Insufficient EPs	We need more EPs in the service so that we
	can manage the other demands within our
	role. Working preventatively is ideal, but
	currently our staffing limits do not allow for
	that

17. Lack of resources	I don't think my LA has sufficient resources
	to work with this age group

Phase 3: Searching for themes

Braun and Clarke (2006) describe that this phase re-focuses the analysis at the broader level of themes, rather than codes, by sorting different codes into potential themes.

As a deductive thematic analysis was used, the research question was used as a template, and codes were grouped together in accordance to how they related to the research question. At this point, no further refinement of the codes was completed, and all had the potential to be themes. This stage was carried out by writing each code on a piece of paper, and sorting codes so that similar ones were grouped under the specific research question. The following codes were grouped together under research question 1b (*What are the facilitators and barriers to EPs engagement in work related to MEWB in pre-school years?*):

Each row of the table includes all codes which could be grouped together into one theme. At this time, all 17 codes are included at this stage of the analysis as all had potential to be themes.

Theme	Code
Potential theme 1	1.Confidence
	2.Competence
Potential theme 2	3.Require more guidance
	4.Supervision
	9.Desire for more experience
	12.Lack training

Potential theme 3	8.Others' perception of role
	5. Own perception of role
	11.Lack of clarity regarding role
Potential theme 4	13.Method of service delivery
	6.Statutory duties
	10.Lack of collaboration
Potential theme 5	7.Assessment for additional funds
Potential theme 6	14.Time constraints
	15.Competing demands
	16.Insufficient EPs
	17.Lack of resources

Phase 4: Braun and Clarke (2006) describe that this phase begins when the researcher has devised a set of candidate themes, which then need to be refined. Codes/themes were reviewed and refined, with similar codes/themes merged*, and other codes disregarded due to lack of relevance or supporting information within the code, as shown below.

Code
1.Confidence
2.Competence
3.Require more guidance
4.Supervision
5. Own perception of role
11.Lack of clarity regarding role
9.Desire for more experience
12.Lack training

Potential theme 2 (Others)	8.Others' perception of role
(refined theme)	
Potential theme 3 (Service	13.Method of service delivery
factors)	10.Lack of collaboration
	6.Statutory duties
	7.Assessment for additional funds
	14.Time constraints

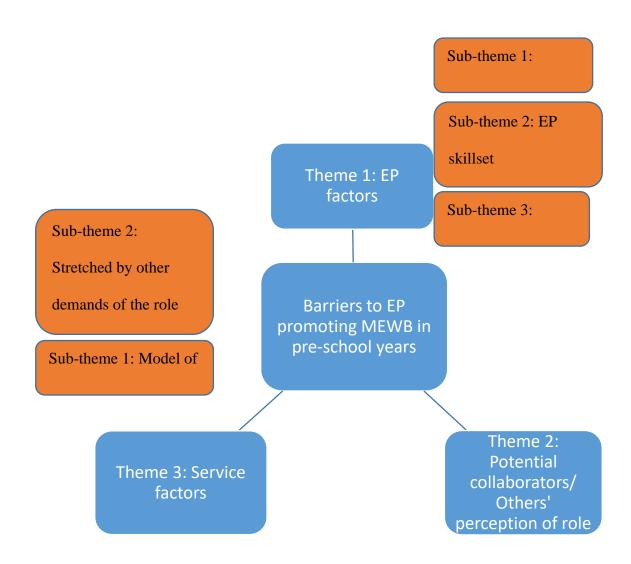
Phase 5: Defining and naming themes

During this phase, main themes and subordinate themes were finalised within tables, and thematic maps for each research question developed with some further refinement of themes and subthemes.

Theme	Subtheme	Code
EP factors (refined	EP skillset	1.Confidence
theme)		2.Competence
		12.Lack training
		9.Desire for more experience
	Support	3.Require more guidance
		4.Supervision
	Perception of own role	5. Own perception of role
		11.Lack of clarity regarding role

Others' perceptions		8.Others' perception of role
of role/ potential		
collaborators		
Service factors	Model of service delivery	13.Method of service delivery
		10.Lack of collaboration
	Competing demands	6.Statutory duties
		7.Assessment for additional funds
		14.Time constraints

Thematic map:



Appendix XI: Thematic analysis to explore the facilitators to EP engagement in work to promote MEWB in the pre-school years (RQ1b)

Phase 1: Familiarisation.

As noted in section 2.6, familiarisation with the data was obtained by typing out each participants' response to the questionnaire (Question 17) and reading the information repeatedly.

Phase 2: Generating initial codes

This phase involved the production of initial codes from the data. Codes are identified as "a feature of the data that appears interesting to the analyst" (Braun & Clarke, 2006). Codes were established manually, by using the highlighter function of Microsoft excel to indicate areas of interest and potential patterns.

A theoretical/deductive thematic analysis was selected to analyse the data, in order to provide a more detailed analysis of the data which directly related to the research questions, rather than provide a description of the data overall. This means that the entire data set was coded with the following specific research question in mind:

Research question 1b: What are the facilitators and barriers to EPs engagement in work related to MEWB in pre-school years?

Once the entire data set had been read and highlighted for codes, codes were labelled in the table below, and extracts of data were copied and pasted into the relevant codes, based on what had been highlighted. Coded extracts were included with relevant surrounding data so as not to lose the context of the extract, and different extracts were often coded into a number of different, relevant codes.

Code	Data extract
1. Own perception of role	This is an important developing area for EP
	work. Prevention is key to helping others
	and I feel that there is scope to develop our
	work in this area
	I enjoy working with this age-group and feel
	empowered to make a difference. I see this
	as an important part of my role
	It would be nice to partner with a colleague
	who has knowledge in this area to develop
	my own competence
	There is scope to develop our knowledge
	base and our input in this area
	Instead of working reactively it would be
	beneficial to have a proactive approach.
	This would however result from the way we
	and others see our role
	T 1117
	I would like to work to become more
	accessible to settings and individuals that
	are not just schools. However this would

	mean that I needed to spend less time at
	schools
2. Training	I have a specific interest in this age group. I
2. Huming	
	work hard to promote and prevent and
	consequently have sought training and
	experience to develop my knowledge. I feel
	happy and confident when working with
	children of this age
	To facilitate working with pre-school
	children we need knowledge; knowledge
	from ourselves and others.
	I would like some more specific training
	More training
	,
	Specific training courses
3. Confidence	I have a specific interest in this age group. I
	work hard to promote and prevent and
	consequently have sought training and
	experience to develop my knowledge. I feel

happy and confident when working with children of this age

There is a great sense of responsibility working with families and practitioners with children of this age. We must be confident in our knowledge of psychological theory so that we can contribute to this field

4. Others' perception of role

Some of the early years' practitioners with whom I work see us as collaborators. This helps me to work effectively to promote well-being. We work together to promote mental well-being for the children in their setting. Our greatest focus is on developing security in those early years in childcare

My service has allowed me to develop a speciality in the early-years and consequently I have been able to carve a role for myself, working with others in a holistic way to promote children's overall well-being before they start nursery.

Others would need to see us as able to work preventatively, this means we need to better communicate our role to others

Instead of working reactively it would be beneficial to have a proactive approach.

This would however result from the way we and others see our role

I would like more time to deliver education psychology in family settings, I don't think that families perceive us in that way and there is a job for us to provide this information to others

I would like more time to deliver education psychology in family settings, I don't think that families perceive us in that way and there is a job for us to provide this information to others

If others' stopped seeing us as gatekeepers to extra funding we might be able to work less in assessment for additional needs and

more in preventative interventions at systemic level

I am afforded the opportunity to work with parents. I have worked hard to ensure that parents see me as a person who can help promote good mental health from the begging. Having others' see me in this way instead of a 'problem solver' has helped me work preventatively

5. Collaboration

Some of the early years' practitioners with whom I work see us as collaborators. This helps me to work effectively to promote well-being. We work together to promote mental well-being for the children in their setting. Our greatest focus is on developing security in those early years in childcare

Collaborating with other professionals and parents always help, especially in this age group

Parents who want to work with us

I work with pre-school settings and the staff there are skilled and eager to collaborate. This allows me to introduce new initiatives knowing that the staff are executing effectively. I would like more time to develop relationships with setting staff, families and children I would like more time to deliver education psychology in family settings, I don't think that families perceive us in that way and there is a job for us to provide this information to others 6. Competence It would be nice to partner with a colleague who has knowledge in this area to develop my own competence There is scope to develop our knowledge base and our input in this area

To facilitate working with pre-school children we need knowledge; knowledge from ourselves and others. I would like some more specific training I am newly qualified and did not receive any training that is specific to this age group. I find it intimidating and so I think the training could be improved from the start from the course at the beginning. More training Specific training courses 7. Knowledge There is a great sense of responsibility working with families and practitioners with children of this age. We must be confident in our knowledge of psychological theory so that we can contribute to this field To facilitate working with pre-school children we need knowledge; knowledge from ourselves and others.

People taking responsibility: whilst I agree that this is an area for EPs to work, all practitioners and families need to take responsibility as promoting mental wellbeing ought to be everyone's responsibility. For me to work more in this area I would like for others' to have shown some initiative and taken responsibility to gain knowledge too.

Prior to becoming an EP I worked as an early Years practitioner. This allowed me to become knowledgeable and confident.

Should it not have been for this I wouldn't be so confident. My knowledge comes from my past experience.

8. Method of service delivery

Allocation to include time to promote well-being

My service has allowed me to develop a speciality in the early-years and consequently I have been able to carve a role for myself, working with others in a

	holistic way to promote children's overall
	well-being before they start nursery."
9. Less statutory work	If I had fewer statutory demands at this age
7. Less statutory work	
	then I could work more preventatively
	Fewer statutory duties at this age and more
	preventative work
10. Time available	I would enjoy having more time to deliver
	training regarding promoting well-being
	from the outset for children
	I would like to have more time to think
	about this area
	I would like more time to develop
	relationships with setting staff, families and
	children
	If I was to have more time available I would
	enjoy introducing longer term initiatives

	If I was to have more time available I would
	enjoy introducing longer term initiatives
	Increased time to work preventatively
11. Training course	I am newly qualified and did not receive any
	training that is specific to this age group. I
	find it intimidating and so I think the
	training could be improved from the start -
	from the course at the beginning.
	I think that more exposure when training
	would have put me on a more confident
	path
12. More staff	I would like to see more staff in the EY
	settings in which I have contact. This would
	allow for more effective work and the
	research indicates that higher staffing levels
	can reduce risk factors to mental health
	problems
	I work with pre-school settings and the staff
	there are skilled and eager to collaborate.

	This allows me to introduce new initiatives
	knowing that the staff are executing
	effectively.
	I work with pre-school settings and the staff
	there are skilled and eager to collaborate.
	This allows me to introduce new initiatives
	knowing that the staff are executing
	effectively.
13. Families	Parents who want to work with us
14. Enthusiastic staff in settings	I work with pre-school settings and the staff
	there are skilled and eager to collaborate.
	This allows me to introduce new initiatives
	knowing that the staff are executing
	effectively.
15. Experience	Prior to becoming an EP I worked as an
	early Years practitioner. This allowed me to
	become knowledgeable and confident.
	Should it not have been for this I wouldn't
	be so confident. My knowledge comes from
	my past experience.

More experience

Phase 3: Searching for themes

Braun and Clarke (2006) describe that this phase re-focuses the analysis at the broader level of themes, rather than codes, by sorting different codes into potential themes.

As a deductive thematic analysis was used, the research question was used as a template, and codes were grouped together in accordance to how they related to the research question. At this point, no further refinement of the codes was completed, and all had the potential to be themes. This stage was carried out by writing each code on a piece of paper, and sorting codes so that similar ones were grouped under the specific research question. The following codes were grouped together under research question 1b (*What are the facilitators and barriers to EPs engagement in work related to MEWB in pre-school years?*):

Each row of the table includes all codes which could be grouped together into one theme. At this time, all 15 codes are included at this stage of the analysis as all had potential to be themes.

Theme	Code	
Potential theme 1	3. Confidence	
	6. Competence	
	7. Knowledge	
	15.Experience	
Potential theme 2	1.Own perception of role	
	4.Others' perception of role	
Potential theme 3	8.Method of service delivery	

	9.Less statutory work
	10.Time available
Potential theme 4	2.Training
	11.Training course
Potential theme 5	5.Collaboration
	12.More staff
	13. Families
	14.Enthusastic staff

Phase 4: Braun and Clarke (2006) describe that this phase begins when the researcher has devised a set of candidate themes, which then need to be refined. Codes/themes were reviewed and refined, with similar codes/themes merged, and other codes disregarded due to lack of relevance or supporting information within the code, as shown below.

Theme	Code
Potential theme 1 (EP factors)	3.Confidence
(refined theme)	15.Experience
	6.Competence
	7.Knowledge
	2.Training
	11.Training course
	1.Own perception of role
Potential theme 2 (Potential	4.Others' perception of role
collaborators) (refined theme)	
	5.Collaboration

	12.More staff
	13.Families
Potential theme 3 (Service	8.Method of service delivery
factors) (refined theme)	8.Less statutory work
	10.Time available

Phase 5: Defining and naming themes

During this phase, main themes and subordinate themes were finalised within tables, and thematic maps for each research question developed with some further refinement of themes and subthemes.

Theme	Subtheme	Code
EP factors (refined	EP skillset	3.Confidence
theme)		15.Experience
		6.Competence
		7.Knowledge
		2.Training
		11.Training course
	Perception of own role	1.Own perception of role
	Others' perception of role	8.Others' perception of role

Potential	Collaborators	5. Collaboration.
collaborators		12.Staff
(refined theme)		13.Families
Service factors		8.Method of service delivery
		9.Less statutory work
		10.Time available

Thematic map:

