



**Pupil perceptions of wellbeing: A positive psychology perspective during a pandemic**

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## Summary

**Context:** Positive Psychology has gained interest amongst applied psychologists, including Educational, Psychologists (EPs), as a means of promoting wellbeing in young people. Seligman's (2011) PERMA Model has become central to the application of Positive Psychology in practice. However, research to date has identified variations in the 'fit' of the PERMA Model (Seligman, 2011) between different populations, including young people (Kern et al., 2015)

**Aims:** This study aimed to elicit young people's constructions of what is important to their wellbeing and to explore, through utilising Q methodology, how their constructions relate to those presented within the PERMA Model (Seligman, 2011). Further, this study aimed to contextualise findings within the current Coronavirus (Covid-19) pandemic.

**Methodology:** In the first phase of this study 30 young people (aged 11-19) completed an online questionnaire asking them what they believe is important to their wellbeing. In the second phase, responses were combined with items from the PERMA Profiler (Butler & Kern, 2016) and presented to 14 young people who prioritised the statements in order of importance to them. In addition, during the first phase the 30 participants were asked whether they felt that the pandemic had impacted their views of what they consider important to their wellbeing and responses were analysed using Thematic Analysis (Braun & Clarke, 2006).

**Results:** Whilst participants identified elements within the PERMA Model (Seligman, 2011) as important to their wellbeing they also identified additional elements (e.g. autonomy, safety, health). Further, Principle Component Analysis indicated that the structure of the PERMA Model (Seligman, 2011) may not best reflect how wellbeing is conceptualised by young people. Thematic Analysis (Braun & Clarke, 2006) offered insight into how the findings may be understood in the context of the Covid-19 pandemic.

**Conclusions:** Reflections are made in relation to the application of the PERMA Model (Seligman, 2011) to understanding and promoting the wellbeing of young people in practice as well as the value of Q methodology in both research and practice.

*Keywords:* positive psychology; PERMA Model; wellbeing; Q methodology; young people, adolescents; pupil voice; coronavirus; pandemic.

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**Part One: Major Literature Review**

**Word Count: 12995**

## 1. Introduction

Across the United Kingdom (UK), the mental health and wellbeing of children and young people (CYP) is recognised as a national priority (Department for Education [DfE], 2018; National Assembly for Wales [NAW], 2018, Welsh Assembly Government [WAG] 2001; The Scottish Government, 2013; Northern Ireland Executive, 2021), with the statistics in this area exemplifying the importance of this prioritisation. It is estimated that one in four school aged children experience emotional distress, with approximately three children in an average size classroom having a diagnosable mental health problem (Young Minds, 2017; World Health Organisation [WHO], 2019).

According to the WHO (2019) adolescence (10-19 years; WHO 2019) is a time where the risks of developing poor mental health increases, with half of all mental health problems believed to begin by 14 years of age, and suicide being the third leading cause of death in 15-19 year olds. In addition, current trends in diagnosis and referrals to specialist services further identify adolescence as a risk factor for developing mental health problems, illustrating the need to understand wellbeing in this age group as a means of providing preventative support (National Health Service [NHS], 2020; National Assembly for Wales, 2018; DfE, 2018).

However, it could be argued that the prevalence of mental health problems (Young Minds, 2017; World WHO, 2019) and increase in referrals may be attributed to several factors that have potentially influenced as well as inflated statistics. These factors may include increased awareness of mental disorders and reduced stigmatisation, changes in diagnostic procedures and thresholds, as well as varied adherence to diagnostic criteria by diagnosticians and the influence of heuristics and bias' (Merten et al., 2017). Despite this, the WHO (2019) emphasise the need to consider the wellbeing of young people, particularly in adolescence when "*multiple physical, emotional and social changes, including exposure to poverty, abuse, or violence, can make adolescents vulnerable to mental health problems*" (WHO, 2019, p. 1).

In Wales, the new curriculum is specifically designed to promote positive health and wellbeing (Donaldson, 2015) identifying schools and Local Educational Authorities (LEAs) as well placed to provide this support. Within the UK Educational Psychologists (EPs) are often positioned within LEAs and are considered to possess the skills and expertise to support the wellbeing (DfE, 2011) of children and young people (CYP). As well as providing support at an individual level, it is recognised that EPs are particularly well placed to support the wellbeing of CYP at an organisational level within the LEA and through systemic approaches to support schools to build capacity (National Institute of Clinical Excellence [NICE], 2009; Greig et al., 2016).

In recent years, the Positive Psychology movement has gained interest amongst practitioners of applied psychology as a means of promoting wellbeing and preventing mental ill health. In 2011, Seligman proposed Wellbeing Theory, that posits that there are five elements of wellbeing, each contributing to the extent to which one 'flourishes', including positive emotions, engagement, relationships, meaning and accomplishment (as summarised by the acronym PERMA).

The PERMA Model (Seligman, 2011) has become influential for those seeking to use Positive Psychology in practice, providing a reference for application at all levels at which EPs can work (i.e. systemic, group and individual). In contrast to approaches that focus on alleviating mental illness, Positive Psychology is concerned with cultivating positive aspects of people's lives (Gable & Haidt, 2005).

This model has formed the foundations for the application of Positive Psychology within education in the form of Positive Education and Positive Psychological Interventions (PPIS) (Shoshani & Slone, 2017). Whilst impact evidence offers initial justifications for the inclusion of PERMA elements within a model of wellbeing (e.g. Bolier et al., 2013; Wright, 2020), some evidence indicates potential variation in its 'fit' between different populations, namely CYP (Kern et al., 2015). These variations highlight the value in exploring the perspectives of CYP in understanding the extent that the PERMA Model (Seligman, 2011) accurately reflects their views.

Research appears to utilise different methodologies to explore wellbeing, varying in the extent that CYP voices are facilitated and/or restricted. Critiques of purely qualitative and quantitative designs identify potential advantages of approaches that apply qualities of both, such as Q methodology.

As scientist-practitioners, EPs must critically appraise the application of psychological theory to practice (Health and Care Professions Council [HCPC], 2016; The British Psychological Society [BPS], 2009). Therefore, it is argued that there is value in exploring how young people construct wellbeing, through means that allow their views to be centralised, to inform the application of models in practice, such as the PERMA Model (Seligman, 2011).

### **1.1 Overview of Literature Review**

A narrative style was adopted for this literature review to enable the exploration of a broad range of subjects (Demiris et al., 2019) alongside the large volume of research within the field of wellbeing.

Narrative reviews are thought to allow for the consideration of literature "*at different levels of completeness and comprehensiveness*" (Grant & Booth, 2009. P. 94) and offer an opportunity to review a broad range of subjects.

The review will begin with an overview of the theoretical development of Positive Psychology, Wellbeing Theory and the PERMA Model (Seligman, 2011). Evidence will be reviewed in relation to the PERMA Model (Seligman, 2011) as a measure of wellbeing.

The review will then draw on research relating to the implementation of the PERMA Model (Seligman, 2011) within education, ascertaining the efficacy of Positive Psychology Interventions as a whole, considering the presence of pupil voice in understanding research findings.

Following this, literature will be presented to examine the voice of the young people in understanding their wellbeing. Research will explore the extent that methods used have promoted and/or restricted the voice of young people in ascertaining their views on wellbeing, considering implications for use of the PERMA Model (Seligman, 2011) by applied psychologists and for future research. Having reviewed methodological approaches identified within the literature, this review will explore Q methodology as a means of addressing alternative methodological shortcomings in the exploration of young people's views.

The review will conclude with an examination of literature that considers the relationship between wellbeing and environmental context. This aims to understand the extent that views about wellbeing need to be interpreted in light of the ongoing Coronavirus (Covid-19) pandemic.

## **1.2 Search Terms and Sources**

Five databases were selected to conduct this search, including, American Psychological Association (APA) PsychInfo; Scopus; Applied Social Science Index and Abstracts (ASSIA); Google Scholar and ORCA. The following search terms were identified and entered into each database between July and August 2020 and again in January 2021:

- Wellbeing;
- Positive Psychology;
- PERMA;
- Education;
- Intervention;
- Adolescents;
- Children;
- Young people;
- Voice;
- Views;
- Q Methodology; and

- Coronavirus.

Alternative terms were identified through subject heading searching where possible. Terms were modified to incorporate similar phrases and to identify a wide range of relevant literature (i.e. child\* or young pe\*). This aimed to increase the search to include similar phrases and to identify a wide range of relevant literature. Additionally, terms were combined to narrow the number of results, increasing specificity in the search (i.e. wellbeing AND views). Further to database searching, backwards and forwards snowballing were used to identifying additional research. This involved sifting through the reference lists of papers considered relevant to the present study, as well as considering citing papers.

This review also drew on published books on Wellbeing Theory and Positive Psychology.

### **1.3 Inclusion/Exclusion Criteria**

Although papers relevant to young people were primarily considered, papers exploring the use of Positive Psychology and the PERMA Model (Seligman, 2011) across all ages were included when considered relevant to the history of theory development and application.

Articles were excluded based on reference to specific clinical population groups, including those diagnosed with specific psychiatric disorders (i.e. schizophrenia), with the exception of papers considered relevant to theory development, or where included in analytic reviews of the research.

Wellbeing literature is often cited across many fields; therefore, papers were excluded based on reference to economic factors, (i.e. cost effectiveness of interventions), and occupational psychology (i.e. sport or workplace).

Research undertaken within an educational context were the primary focus of the review, however, articles that explored the topics under consideration in other contexts were included where it was felt to contribute to the understanding of models or theory.

Positive Psychology is a relatively new field in psychology, as such no exclusion criteria based on publication date was deemed necessary. Similarly, worldwide publications were included in an attempt to gain a broad enough coverage of a developing field.

### **1.4 Definitions**

The terms 'young people' and 'youth' will be used interchangeably throughout this review to refer to all those under the age of 19 (as specified by the WHO [2019] definition).

## 2. Wellbeing in Context

The statistics surrounding the mental health and wellbeing of young people (e.g. Young Minds, 2017; WHO, 2019; NHS, 2020; National Assembly for Wales, 2018; DfE, 2018) has prompted a growing interest in ways to support this population within the United Kingdom (UK).

At a national level, policy documents have been developed outlining the government's agenda for supporting social, emotional, and psychological development in young people (Department for Education [DfE], 2018; National Assembly for Wales [NAW], 2018, Welsh Assembly Government [WAG] 2001; The Scottish Government, 2013; Northern Ireland Executive, 2021), identifying schools as well placed to provide a context in which this can be addressed (DfE, 2015; Department for Education and Skills [DfES], 2003).

Within Wales, the current curriculum changes exemplify how schools can be utilised as a resource for supporting local government agendas (i.e. Wellbeing of Future Generations Act; Welsh Government, 2015), with wellbeing integrated into the new six core Areas of Learning and Experience (Donaldson, 2015).

Educational Psychologists (EPs) have been identified as key professionals within the UK who possess the expertise to support schools to establish systems and strategies to promote wellbeing (DfE, 2011; National Institute of Clinical Excellence [NICE], 2009; Greig et al., 2016; Welsh Government, 2001). As applied psychologists, EPs are a resource for integrating theory and research into schools, and have a duty to be evidence informed in their practice (Health and Care Professions Council [HCPC], 2016; The British Psychological Society [BPS], 2009).

When considering how EPs can support young people in schools the variety of approaches currently adopted exemplifies the range of theoretical discourses about young people's social, emotional and psychological development present in the literature. For example, EPs may employ ideas about Attachment Theory (Ainsworth, 1970), Adverse Childhood Experiences (Felitti et al., 1998; Chapman et al., 2004), motivational theories (i.e. Maslow, 1943), and emotional intelligence (Goleman, 1996) to name a few. These approaches can be seen to inform strategies and interventions implemented to support wellbeing at a systemic level (e.g. Trauma Informed Schools [Trauma Informed Schools, 2021], Attachment Aware Schools [Parker & Levinson, 2018] and the Social and Emotional Aspects of Learning Programme [Department for Education, 2007]) group level (e.g. Thrive approach [Banks et al., 2001] and Nurture groups [Cheney et al., 2014]) and individual level (e.g. the Emotional Literacy Support Assistant [ELSA; Osborne & Burton, 2014] programme).

Whilst this is far from an exhaustive list, these examples serve to demonstrate how the approach taken by applied psychologists to supporting young people will depend on ideas and theories about wellbeing. The following section aims to explore the historical development of Positive Psychology as an approach to supporting young people and will be the central focus of this review.

### 3. The Development of Positive Psychology

#### 3.1 Moving Away from Tradition

Within psychology, pathology traditionally dominated the field of mental health and wellbeing, with a view that adaptive functioning is characterised by the absence of negative affective states (Seligman & Csikszentmihalyi, 2000). Subsequently, decades of research centred on a 'disease and deficit' model and the ways in which these states can be alleviated (Seligman et al., 2006). Whilst this contributed greatly to the understanding and treatment of mental illness, Seligman (1994) argued that historically there had been a general preoccupation with psychological disorders and the impact of adversity (e.g. bereavement, abuse and family conflict).

Seligman and Csikszentmihalyi (2014) contend that the traditional 'disease and deficit' perspective led to a reductionist view of wellbeing, overlooking one of the fundamental discourses of psychology, that is, not only to 'cure' mental illness, but to make "*the lives of all people more productive and fulfilling*" (p. 6). Contrary to this model, Seligman & Csikszentmihalyi (2000) argued that wellbeing cannot be fully understood by focusing on adversity and suffering or simply defined by the absence of negative psychological states. Rather, the goal of psychology should explore the contexts in which people flourish, building on the positive qualities and conditions that make life worth living.

Within the field of Educational Psychology the 'deficit' model was also evident in early applications of the role, however, this has changed over time along with the ever evolving nature of psychological disciplines and educational legislation. For example, according to Holliman (2013) early functions of the EP role were based on a "*deficit medical model*" (p.22) primarily using psychometric testing to determine school placement. Whilst psychometric testing remains an aspect of the EP role today, developments within psychology and education have begun to appreciate 'external' factors that can affect children, contributing to more holistic, preventative, and person centred approaches to supporting young people (Holliman, 2013). This is exemplified by the Additional Educational Needs Tribunal Act (2018) in Wales and the Children and Families Act (2014) in England that specify the inclusion of young people in the development of support plans, encouraging a collaborative and holistic process to assessment, intervention and prevention.

Whilst not an entirely new concept, Positive Psychology has gained increasing interest in relatively recent years (Kim et al., 2018) as one approach to supporting young people. Positive Psychology is the umbrella term used to refer to the study of "*conditions and processes that contribute to the flourishing or optimal functioning of people, groups and institutions*" (Gable & Haidt, 2005, p. 103). Therefore, Positive Psychology aims to direct attention to aspects of human functioning that are less

understood, contributing to a more preventative approach (Linley et al., 2006, as cited in Norrish & Vella-Brodrick, 2009).

This section will firstly introduce key ideas and models in the field of psychology in conceptualising wellbeing. Specific attention will then be given to Authentic Happiness Theory (Seligman 2002) and Wellbeing Theory (Seligman 2011) as models of Positive Psychology. The PERMA Model (Seligman, 2011) will be examined as a model of wellbeing and consideration given to the inclusion of elements within.

### **3.2 Conceptualising Wellbeing**

The World Health Organisation's (WHO; 2005) definition attempts to offer a universal understanding of mental health, stating that it can be understood as "*a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community*" (p.1). In this sense, mental health and wellbeing are considered to be intertwined and characterised by effective functioning at both the individual and community level.

However, definitions of wellbeing vary widely, often influenced by different disciplines (i.e. sociological versus psychological) as well as by contrasting values across countries, cultures, classes, and genders (McLellan & Steward, 2013; WHO, 2005).

Within the literature, two traditions of wellbeing research have emerged, distinguishing between hedonic and eudaimonic wellbeing (Westerhof & Keyes, 2010). Hedonic wellbeing refers to feelings of happiness, and pleasure, and involves evaluations of overall life satisfaction as well as the experience of positive and negative affective states (Kahneman, et al., 1999). In comparison, eudaimonia is defined as "*the realisation of one's own potentials*" (Westerhof & Keyes, 2010, p.111) and refers to the functioning of individuals at their fullest capacity rather than to their subjective emotional experiences.

The concepts of hedonism and eudaimonia can be seen to have influenced theories about wellbeing over time. Central ideas in the field of psychology are subjective wellbeing (SWB), psychological wellbeing, self-determination theory (Ryan & Deci, 2000), and flourishing (Norrish & Vella-Brodrick, 2009). Whilst it is beyond the scope of this review to examine these in detail, it is considered helpful to acknowledge their contribution to theory and in contextualising this review.

Subjective wellbeing (SWB) can be considered a hedonic conceptualisation of wellbeing (Westerhof & Keyes, 2010) and combines ideas about cognition and affect. This posits that happiness is defined by how satisfied one is with life (life satisfaction) as well as the presence of positive emotions and

absence of negative emotions (Diener & Emmons, 1984). However, this hedonic construction of wellbeing has been criticised by researchers who have found that hedonic pleasures do not reliably predict happiness (Kasser et al., 2014).

In contrast, Ryff (1989) proposed the idea of psychological wellbeing, a eudaimonic conceptualisation of wellbeing that proposes that happiness is about positive psychological functioning. Ryff (1989) argued that happiness, measured by affect and satisfaction in life overlooks valuable theory that contributes to understanding of positive psychological functioning (i.e. Maslow, 1968; Rogers, 1961; Jun, 1933, Allport, 1961, as cited in Ryff, 1989). Ryff (1989) examined ideas around optimal lifespan development, optimal functioning and self-actualisation and proposed that psychological wellbeing can be understood as a six factor construct including autonomy, personal growth, self-acceptance, purpose in life, environmental mastery, and positive relations (Ryff, 1989; Ryff & Keyes, 1995). Whilst these ideas consider optimal individual functioning, Keyes (1998) examined theories as presented by sociologists and social psychologists and proposed a model for considering social functioning that includes ideas about social coherence, social acceptance, social actualisation, social contribution and social integration. Further, self-determination theory (Ryan & Deci, 2000; Ryan et al., 2008) has also been presented as a means of understanding wellbeing from a eudaimonic perspective, namely through the satisfaction of three needs; competence, autonomy and relatedness.

However, more recent conceptualisations of wellbeing have sought to combine hedonistic and eudaimonic perspectives to provide a more holistic view of wellbeing (Westerhof & Keyes, 2010).

This is demonstrated by Keyes (2002) who considered wellbeing to be a combination of emotional, psychological and social wellbeing, a concept defined as 'flourishing'. Flourishing is considered by Keyes (2005) to refer to how well one is functioning, a continuum that depends on the presence of mental health (measured by positive affect, psychological and social wellbeing) and absence of mental illness (measured by depressive symptoms, alcohol dependence, panic or anxiety disorders).

The ideas of both hedonism and eudaimonism can also be seen within Seligman's (2002; 2011) models, namely Authentic Happiness Theory (Seligman, 2002) and Wellbeing Theory (Seligman, 2011). Whilst it is recognised that SWB, psychological wellbeing, self-determination theory, and flourishing are existent models in their own right, this review intends to primarily focus on ideas proposed by Seligman (2002; 2011) to investigate the application of a specific model utilised by applied psychologists.

## **3.2 Constructing a Positive Psychological Model of Wellbeing: From Happiness to Wellbeing**

### **3.2.1 Authentic Happiness Theory**

Authentic Happiness Theory was developed by Seligman (2002) who initially proposed that Positive Psychology was primarily about happiness, a state composed of three elements; positive emotion (a hedonistic conception), engagement and meaning (both eudaimonic conceptions). This theory posits that happiness is about choice, with each of these three elements sought for their own sake and more measurable than happiness alone (Seligman, 2011). This initial model proposed that happiness could be understood through measures of life satisfaction and that the goal of Positive Psychology was to increase this (Seligman, 2011).

However, Authentic Happiness Theory (Seligman, 2002) has since been re-evaluated after Seligman (2011) acknowledged three inadequacies. The first of these acknowledged that happiness is bound to the affective state of being in a happy mood and that this is wholly captured by the positive emotion element within the theory. Therefore, in defining happiness, the engagement and meaning elements were recognised as additional constructs that appeared unrelated to the concept of happiness as an emotive state (Seligman, 2011).

The second inadequacy of this theory was the use of life satisfaction and self-report as measurements (Seligman, 2011). The primary critique of this recognised that ratings of life satisfaction are often biased (Veenhoven, 1997), linked to the emotive state that one is experiencing in a given moment (Cummins & Nistico, 2001; Seligman, 2011). Therefore, utilising a measure that is known to be influenced by mood and potential biases, may overlook those who experience more engagement and meaning in their lives in favour of those who are generally more cheerful or optimistic.

And thirdly, Seligman (2011) notes that whilst positive emotion, engagement and meaning are believed to be important elements that people choose for their own sake, they do not exhaust the rationales behind people's choices. Subsequently, Seligman (2011) proposed a new theory, moving away from the view that Positive Psychology was about happiness, measured by life satisfaction. Instead, Seligman (2011) proposed Wellbeing Theory, centralising wellbeing at the core and flourishing as a measure.

### **3.2.2 Wellbeing Theory**

In Authentic Happiness Theory (Seligman, 2002), happiness is considered to be a concrete concept that can be measured (i.e. via life satisfaction). However, Wellbeing Theory (Seligman, 2011) proposes that wellbeing is a more abstract construct that cannot be operationalised by one single measure, but rather is constructed of elements, individually measured to understand human

flourishing. According to Butler and Kern (2016), flourishing is best understood as “*optimal psychosocial functioning that arises from functioning well across multiple psychological domains*” (p.2). The psychological domains defined in Wellbeing Theory (Seligman, 2011) are positive emotion, engagement, relationships, meaning and accomplishment (summarised by the acronym PERMA). Similar to Authentic Happiness Theory (Seligman, 2002), Wellbeing Theory (Seligman, 2011) is about the choices people make when free to do so, and elements are required to meet the following criteria for inclusion within the model:

1. It must contribute to wellbeing.
2. It must be pursued for its own sake, and not to seek gratification of any other element; and
3. It must be independent from any other element in its definition and measurement (Seligman, 2011, p. 16).

The following will describe each element proposed by Seligman (2011) in the PERMA Model to meet this criteria, with an overview of the ideas and research that rationalise their inclusion within Wellbeing Theory (Seligman, 2011).

### **3.2.3 The PERMA Model of Wellbeing**

**Positive Emotion.** The positive emotion element within this model is closely linked to hedonism and relates to choices made that are intended to feel good. This concept goes beyond the notion of happiness and encompasses a range of positive emotions, such as gratitude, hope, optimism and compassion (Seligman, 2011).

Fredrickson (1998) recognised that positive emotions did not fit within traditional theories of emotion that suggested that they served to trigger “*specific action tendencies*” (Fredrickson, 1998, p.3). Fredrickson and Brangan (2002) posited that emotions serve to trigger behaviours that are purposeful in specific contexts. Whereas negative emotions may result in behaviours where quick, decisive action is required (i.e. fight, flight, freeze), Fredrickson (1998) proposed that positive emotions have an opposing effect, acting to broaden thoughts and actions and build internal resources (Fredrickson & Brangan, 2002).

Several studies and reviews have considered the impact of positive emotion and identified benefits across health, social and cognitive domains (Diener & Chan, 2011; Mauss, et al., 2011; Wang, et al., 2017; Huppert, 2009). Data from cross-sectional surveys indicate that those who experience more positive emotion or subjective wellbeing show more social engagement, are generally more productive and are financially more stable (Deiner, 2009; Judge, Thoresen, et al., 2001).

Furthermore, Fredrickson & Brangan (2002) illustrate the role positive emotions can have on broadening psychological resources. In their study, 104 participants watched films that elicited amusement, contentment, neutrality, anger or anxiety before asking them to undertake tests of attention (global-local visual processing) and thought-action repertoires (Twenty Statements Test). Results indicated that those subject to an induced positive state demonstrated significantly broader scope of attention as well as an ability to identify a broader range of statements in comparison to those in neutral or negative emotive states.

These positive outcomes form the foundations for Fredrickson's (1998; 2001) Broaden and Build Theory of positive emotions and provide an example of why of positive emotions are included as an element within Wellbeing Theory (Seligman, 2011).

**Engagement.** Within Positive Psychology, research on engagement has generally focused on the concept of flow. Sydener and Lopez (2009) define flow as a subjective state with the following characteristics:

- Intense and focused concentration on the present moment.
- Merging of action and awareness.
- Loss of reflective self-conscious (i.e. loss of awareness of oneself as a social actor).
- A sense that one can control one's actions.
- Distortion of temporal experience (i.e. time passing faster than normal); and
- Experience of the activity as intrinsically rewarding (p. 196).

Nakamura & Csikszentmihalyi (2014) propose that the conditions of flow include "*perceived challenges, or opportunities for action, that stretch (neither overmatching nor underutilizing) existing skills; a sense that one is engaging challenges at a level appropriate to one's capacities*" and where "*clear proximal goals and immediate feedback about the progress that is being made*" (p. 16).

The experience of flow is thought to promote persistence, subsequently contributing to skill development over time (Nakamura & Csikszentmihalyi, 2014). Studies have demonstrated the positive correlates and outcomes of the subjective experience of flow and have been associated with short term and long term impacts on commitment and achievement (Nakamura 1988; Carli et al., 1988, Csikszentmihalyi, et al., 1993), as well as buffering against the impact of adversity (Schmidt, 2000, as cited in Nakamura & Csikszentmihalyi, 2014).

This impact of flow is exemplified by O'Neill (1999) where participants (n=60) aged 12-16 were classified as either high achievers, moderate achievers (from a specialist music school) or young musicians (from a non-specialist music school). Participants were asked to record their experiences

when prompted via an electronic device, as well as provide a flow rating. Flow experiences were measured via a 10-point scale, rating challenge and skill. Results indicated that high achievers experienced more flow when practising as well as spent significantly more time practising than average achievers from specialist and non-specialist music schools. O'Neill (1999) suggested that fostering motivation should be a priority for educators in enhancing performance, stating that balancing challenge and skill slightly above an individual's average level (flow) would give them the "*best chance of success*" (p. 133).

**Positive Relationships.** Social relationships are fundamental to human survival (Berschied & Reis, 1998, as cited in Gilbert et al., 1998) resulting in decades of research dedicated to this area (Tay et al., 2012). At its core, human connection has an evolutionary basis, with relationships providing the foundations for adaption (Seligman, 2011). Beyond this, health research exemplifies the value of social relationships, with evidence converging to identify higher morbidity and mortality rates as well as depression and psychopathology in those with fewer social connections. This is in contrast to those who are more socially connected, who appear more likely to experience better physical, psychological and social outcomes (Tay et al., 2012; Macrynika, et al., 2018).

This is demonstrated by Macrynika et al. (2018) who investigated social connectedness as a mediator of thoughts and behaviours associated with self-harm in young adults (mean age 22). Participants (n=1712) completed a survey that explored lifetime and recent suicidal ideation and behaviours, stressful life events and social relationships. Despite the finding that social connectedness did not mediate the relationship between stressful life events and suicidal behaviours and thoughts, results indicated that those with fewer relationships were more likely to experience suicidal thoughts and engage in self-harming behaviours.

Whilst these findings are correlational and causation cannot be inferred, findings highlight the role that social relationships might have in supporting the resilience of young adults, contributing to the resources they have available in managing their wellbeing.

**Meaning.** According to Seligman (2011) meaning refers to "*belonging to and serving something that you believe is bigger than yourself*" (p.17) and is characterised not only by its subjectivity but also through retrospective objective measurement. For example, one's actions can be considered meaningful on reflection as they may have resulted in objective changes in one's life or the world around them (Seligman, 2011). There are various sources from which individuals and groups derive meaning including religion, politics, science and social causes. Within the literature the definition of meaning varies widely. However, there appears to be a general consensus that it is a multi-dimensional construct in itself comprising of comprehension (how much life makes sense), purpose

(how much it is perceived to feel directed and motivated by valued goals) and mattering (how much it is seen as significant) (George and Park, 2016).

The experience of meaning in life has long been a focus within the disciplines of psychology and philosophy, yet understanding from an empirical perspective has been a relatively recent pursuit (Martela & Steger, 2016). However, evidence is converging to identify the role that meaning in life may have in predicting not only psychological outcomes, such as self-esteem, self-acceptance, and self-image (Steger, 2017) but also physical health (Roepke et al., 2014). This is demonstrated by Roepke et al. (2014) who conducted a systemic review of 70 studies examining the relationship between meaning and health outcomes. Studies were included based on meaning-related constructs, including, sense of coherence, global meaning, purpose, search for meaning and post-traumatic growth (see Roepke et al., 2014).

The researchers found that meaning not only related to better physical health outcomes (i.e. severe illness, life expectancy and immune functioning) but promoted healthier behaviours, such as decreased alcohol and drug consumption and increased engagement in exercise and nutritious eating. However, whilst several empirical designs offer an insight into causality, Roepke et al. (2014) acknowledged that there *“is not enough evidence to draw a firm conclusion”* (p. 1073). Furthermore, due to the variations in measurement between studies (subjective and objective) and in their definitions of meaning, it is difficult to ascertain what aspects of this construct are most beneficial and/or whether results may be biased (i.e. through retrospective reporting).

**Accomplishment (or Achievement).** According to Bradford (2016), achievements are structured, in that they are *“a process that culminates in a product, that is, an outcome or a goal”* (p. 796). Within the field of Positive Psychology the literature has focused on the concept of grit in goal achievement. This goes beyond the notion that one solely requires intellect and skill to achieve, and considers effort and perseverance as a key contributor to overall achievement (Arya & Lal, 2018; Seligman, 2011). Grit has been defined as *“trait level perseverance and passion for long term goals”* (Robertson-Kraft & Duckworth, 2014, p. 2), with accumulating evidence identifying grit, not only as a predictor of objective success (Barrick & Mount, 1991; Seligman & Schulman, 1986) but overall subjective wellbeing (Arya & Lal, 2018; Oriol, Miranda, Oyanedel & Torres, 2017). This is exemplified by Arya and Lal. (2018) who utilised measured grit using The Short Grit Scale (Duckworth & Quinn, 2009) and Ryff’s Scales of Psychological Wellbeing (Ryff, 1989) to observe the relationship between these two constructs. 250 young people and adults (aged 17-25 years) completed the questionnaires, finding a positive correlation between these two constructs. Whilst causation cannot

be inferred due to the correlational approach to analysis, these results demonstrate the way in which grit may contribute to overall wellbeing.

The notion of grit provides an insight into why and how achievement can be cultivated, rationalising its inclusion within a Positive Psychology model of wellbeing.

### 3.3 Critique of Positive Psychology

The use of and reference to Positive Psychology has increased rapidly over recent years (Kim et al., 2018), with Seligman’s (2011) PERMA Model used as a seminal reference within applied psychology. However, several criticisms of this approach have been raised that offer reflections for its application in practice. Whilst it is beyond the scope of this review to provide an in-depth discussion of these critiques, they are considered helpful to acknowledge in contextualising Positive Psychology and the PERMA Model (Seligman, 2011) within applied psychology and research (see Yahushko & Blodgett, 2021, for a review). Table 1 provides an overview of some recent critiques of Positive Psychology.

**Table 1**

*Critiques of Positive Psychology as an Approach to Wellbeing*

<b>Critique</b>	<b>Overview</b>
Representativeness	The extent to which Positive Psychology and the PERMA Model are representative of non-western ideals (Yahushko & Blodgett, 2021).
Individualism	Limited focus on the external context within which aspects of wellbeing are constructed. Positive Psychology assumes that individuals have full responsibility for their wellbeing rather than appreciating the institutions or cultures that may act to oppress this (Christopher & Howe, 2014).
Research Inconsistencies	Varied research findings on the efficacy of interventions involving Positive Psychology principles, particularly where negative emotions are suppressed or disregarded (Garside & Klimes-Dougan, 2002).

These critiques will be acknowledged throughout this review as a means of reflecting on research and practice.

### **3.3 Summary**

This section has sought to introduce Positive Psychology as an approach to promoting wellbeing, specifically the development of Wellbeing Theory (Seligman, 2011). As a model of Positive Psychology, the PERMA Model (Seligman, 2011) can be used by educational professions and applied psychologists, such as EPs, encouraging users to consider elements that are evidenced to promote physical and psychological health. Whilst methodological shortcomings (e.g. correlational) and theoretical critiques are acknowledged, the PERMA Model (Seligman, 2011) has been influential in bringing ideas together to offer an understanding of wellbeing and of individual flourishing from a Positive Psychology perspective. The following section will review how the PERMA Model (Seligman, 2011) has been developed into a measurement resource and what insights this can provide for those utilising this model in practice, such as applied psychologists.

## 4. The PERMA Model as a Measure of Flourishing

Despite the utility of the PERMA Model (Seligman, 2011) as a theoretical conceptualisation of flourishing, it has been argued that for those who are interested in promoting wellbeing, such as EPs, that adequate measures are needed (Butler & Kern, 2016). Stiglitz et al. (2009) argue that measurement plays a key role in applied psychology and research as “*what we measure affects what we do*” (p. 7). Similarly, Butler & Kern (2016) posit that the development of such resources can enable theoretical and practical change, subsequently supporting psychologists in their application of psychological models.

Therefore, this section aims to review the PERMA Model (Seligman, 2011) as a measure of wellbeing to understand its utility in practice. Research will be considered where the PERMA Model (Seligman, 2011) has informed the development of measurement, with consideration given to findings between different population groups, particularly young people.

### 4.1 Development and Validation of the PERMA Profiler

Researchers Butler and Kern (2016) sought to develop a validated tool for measuring elements associated with the PERMA Model (Seligman, 2011). In their study, questions believed to be theoretically relevant to elements of the PERMA Model (Seligman, 2011) were generated from existing measures. The researchers used factor analysis (a statistical method that analyses responses based on the relationships they have with underlying factors) to refine the initial 700 questions (n=7, 188), with a further 8 additional validation studies (n=31, 966). Using this method the researchers refined the measure to 23-questions that they called the ‘PERMA Profiler’. This consisted of 15 PERMA-related (Seligman, 2011) questions and 8 additional items including; negative emotion, loneliness, physical health and overall happiness. Table 2 provides an overview of the PERMA Profiler questions (Butler & Kern, 2016) pertaining to each element within the PERMA Model (Seligman, 2011).

Butler and Kern’s (2016) rationale for including additional items was to provide information that might be otherwise helpful to some users interested in these constructs, such as applied psychologists. Whilst overall wellbeing is taken from the average of PERMA-related (Seligman, 2011) items and overall happiness, Butler and Kern (2016) felt it was important to recognise other contributors to mental health, such as loneliness and physical health, which are also strong predictors of life outcomes (e.g. Caccioppo et al., 2003; McCloughen et al., 2012).

**Table 2***PERMA Profiler Domains and Related Questions (Butler & Kern, 2016)*

<b>PERMA Domain</b>	<b>Domain Related Questions</b>
Positive Emotion	<ul style="list-style-type: none"> <li>• How often do you feel joyful?</li> <li>• How often do you feel positive?</li> <li>• To what extent do you feel contented?</li> </ul>
Engagement	<ul style="list-style-type: none"> <li>• How often do you become absorbed in what you are doing?</li> <li>• To what extent do you feel excited and interested in things?</li> <li>• How often do you lose track of time while doing something you enjoy?</li> </ul>
Relationship	<ul style="list-style-type: none"> <li>• To what extent do you receive help and support from others when you need it?</li> <li>• To what extent have you been feeling loved?</li> <li>• How satisfied are you with your personal relationships?</li> </ul>
Meaning	<ul style="list-style-type: none"> <li>• To what extent do you lead a purposeful and meaningful life?</li> <li>• To what extent do you feel that what you are doing is valuable and worthwhile?</li> <li>• To what extent do you generally feel you have a sense of direction in your life?</li> </ul>
Accomplishment	<ul style="list-style-type: none"> <li>• How much of the time do you feel you are making progress towards accomplishing your goals?</li> <li>• How often do you achieve the important goals you have set for yourself?</li> </ul>

However, despite the development of the PERMA Profiler (Butler & Kern, 2016) including a large, diverse, international sample, when considering the inclusion of young people, the numbers are comparatively low. It could be argued that this questions the generalisability of the PERMA Profiler (Butler & Kern, 2016) as a measure of wellbeing and emphasises the importance of acknowledging investigations that have explored the validity of the PERMA Model (Seligman, 2011) within specific populations. The following aims to review what research has revealed about using the PERMA Model (Seligman, 2011) as a measure (i.e. the PERMA Profiler; Butler & Kern, 2016) between different populations, namely cultures and age.

## **4.2. Application of PERMA Profiler within Different Populations: Culture and Age**

### **4.2.1 Culture**

The study of cross-cultural differences is extensive, with the terms collectivist and individualist often referred to differences between those who centralise individual characteristics and those who value traits that benefit the collective (Suh & Oishi, 2002). This is exemplified by Suh et al. (1998) who found that whilst judgements of life satisfaction were dependent on affect within individualist cultures, cultural norms were prominent influencers for collectivist cultures.

Khaw and Kern (2014) recognised that these differences need to be acknowledged when exploring the PERMA Profiler (Butler & Kern, 2016) as a measure of wellbeing and sought to compare its fit between a Western culture (United States) and an Asian culture (Malaysia).

In their study, 322 Malay participants completed the PERMA Profiler (Butler & Kern, 2016) as well as two qualitative questions. The qualitative questions aimed to gain additional information about participant's views on wellbeing and subsequently the fit of the PERMA domains (Seligman, 2011) to this population. Comparisons between Western participants were drawn from Butler and Kern's (2016) data (unpublished at the time of this research).

When comparing results, Malaysian participants not only reported experiencing lower wellbeing (as measured by the PERMA Profiler [Butler & Kern, 2016]) compared to Western participants (Butler & Kern, 2016), but also less negative emotion. Further, using Principle Component Analysis (PCA) to explore the factor structure of the PERMA-domains, the researchers found that a three-factor structure best fit participant's responses. Rather than the expected five-factors structure (i.e. representing the PERMA-structure), participants responses were better defined by a three- factor model, with meaning and achievement loading on one factor, positive emotions and relationships on another and engagement loading on the third.

This finding questions the extent to which the PERMA Model (Seligman, 2011) elements are considered separate entities within a Malaysian population and whether the structure of this model best represents the way they conceptualise wellbeing.

This may offer an explanation as to why Malay participants not only had lower wellbeing scores (as defined by the PERMA Profiler [Butler & Kern, 2016]) but also lower negative emotion scores. Combined with the findings that wellbeing may be conceptualised differently within this population, may suggest that rather than suffering from poorer wellbeing, there may be differences in how it is experienced.

This is supported by participant's responses to qualitative questions (i.e. 'what is wellbeing or happiness to you?' And 'what makes life meaningful to you?'). This allowed researchers to identify what participants thought was important to wellbeing, whether elements within the PERMA Model (Seligman, 2011) were self-identified, and whether additional constructs would be suggested. Responses highlighted that participant's perceptions of wellbeing extended beyond elements within the PERMA Model (Seligman, 2011), with additional constructs such as health, spirituality and security being identified.

Health was the fifth most frequently mentioned construct. Health has been used to extend the PERMA Model (Seligman, 2011) in some areas of practice, along with additional constructs such as optimism, physical activity, nutrition and sleep (see PERMA Plus; The Wellbeing and Resilience Centre, n.d). However, health does not feature within the PERMA Model (Seligman, 2011) or contribute to the PERMA Profiler's (Butler & Kern, 2016) overall measure of flourishing.

The researchers recognised that further research is needed to consider whether the identification of health is unique to this population, or whether it should be included as an additional construct to the original five elements within the PERMA Model (Seligman, 2011).

Khaw and Kern's (2014) findings indicate that there are differences in what is perceived as important between cultures and exemplifies the need to consider to the validity of the PERMA Model (Seligman, 2011) within specific populations, ensuring that it is relevant to the groups in which it is being applied. The next section will consider research exploring the PERMA Model (Seligman, 2011) within a youth population to examine its relevance between ages.

#### **4.2.2 Age: PERMA within a Youth Population**

One example of research that has explored the PERMA Model with young people was conducted by Kern et al. (2015) who recognised that there was limited research available explicitly considering the PERMA Model (Seligman, 2011) within a youth population. In their study, Kern et al. (2015) investigated the structure of the PERMA Model (Seligman, 2011) with a sample of 516 male students (aged 13-18) from an Australian college. Similar to Butler and Kern (2016) in their development of the PERMA Profiler, the researchers selected several wellbeing assessments considered relevant to the PERMA Model (Seligman, 2011) elements, including:

- The Positive and Negative Affect Schedule (PANAS-C; Laurent et al., 1999), a 30-item scale measuring positive and negative emotions; and
- The EPOCH Measure of Adolescent Wellbeing, a 20-item multidimensional measure of flourishing (Kern et al., 2016) that was in development at the time of the study and assesses engagement, perseverance, optimism, connection and happiness.

Additionally, researchers were interested in associations between other scales that assess overall wellbeing (see Kern et al., 2015 for an overview of each of these), including the Life Scale (Diener et al., 1985), the Children's Hope Scale (Synder et al., 1997), the Gratitude Questionnaire (McCullough, Emmons & Tsang, 2002), the Growth Mindset scale (Dweck, 2006), and the Healthy Pathways Child Report Scales (Bevans, Riler, & Forrest, 2010).

To examine the structure of the PERMA Model (Seligman, 2011), similar to Khaw and Kern (2015) in their investigation of cultural differences, the researchers used PCA to investigate whether each element of the PERMA Model (Seligman, 2011) would be identified based on responses to questions related to each element.

Through analysis, a four-factor model was considered to best fit the data, with positive emotions, engagement, relationships and accomplishment loading on separate factors but meaning loading onto relationships. The researchers proposed that this may be explained by the differences in what adolescents derive meaning from, suggesting it might be gained from their associations with others, more so than for those in adult populations (Kern et al., 2015; Khaw & Kern, 2015). This contrasts with findings from the primarily adult sample in Butler and Kern's (2016) research, where each domain within the PERMA Model (Seligman, 2011) were identified as separate measurable constructs.

Kern et al., (2015) also examined the correlations between each question associated with the PERMA Model (Seligman, 2011) elements and measures of overall wellbeing. The researchers found that correlations between each question related to the PERMA Model (Seligman, 2011) and each wellbeing measure varied. For example, measures of hope and gratitude were significantly correlated with positive emotion whereas growth mind-set was related to accomplishment. Whilst it is unclear how unique these connections may be to a youth population, these findings provide an insight into what may be important to consider when promoting the wellbeing of young people. It is possible that promoting young people's sense of hope and gratitude can increase the experience of positive emotions, whereas supporting growth mind-set can enable a sense of achievement.

Despite the sample in this study (i.e. all males in one school) prompting consideration of the generalisability of findings, the results offer important reflections for those supporting the wellbeing of young people, such as EPs, and in the specific application of the PERMA Model (Seligman, 2011) in practice. For example, the findings indicate that a multidimensional approach may be an advantageous way of exploring wellbeing, as opposed to global measures (e.g. life satisfaction) that may overlook many important aspects of wellbeing. Kern et al.'s (2015) results suggest that the PERMA Model (Seligman, 2011) offers a more thorough way of conceptualising and promoting wellbeing whilst utilising a Positive Psychology approach.

Another reflection for application in practice comes from the differential factor loadings identified in Kern et al.'s (2015) sample. When comparing the five-factor structure of the PERMA Model (Seligman, 2011) and findings from primarily adult populations (Butler & Kern, 2016), Kern et al.'s (2015) results demonstrate that the structure of the PERMA Model (Seligman, 2011) may not fully

represent wellbeing within a youth population. Further, the overlap between constructs (i.e. relationships and meaning) identified in this sample may offer insights into how certain elements of wellbeing may be understood (i.e. gaining meaning from developing relationships and vice versa) for young people.

However, limitations of Kern et al.'s (2015) study are presented by the deductive approach taken to exploring wellbeing. According to Creswell and Plano Clark (2007) deductive research "*works from the 'top down', from theory to hypothesis to data, to add to or contradict theory*" (p.23). Whilst Kern et al.'s (2015) findings offer reflections about how wellbeing is constructed by young people (i.e. four-factor structure), their use of the PERMA Model (Seligman, 2011) assumed that this was best fit for exploring wellbeing in young people, leading researchers to collect data and produce findings confined to elements associated with the PERMA Model (Seligman, 2011).

It could be argued that more inductive approaches to research may offer important reflections for how wellbeing can be understood by young people. Inductive research is considered to work from the "*bottom-up, using the participant's views to build broader themes and generate a theory, interconnecting the themes*" (Creswell & Plano Clark, 2007, p. 23). As exemplified by Khaw and Kern (2014) when investigating cultural differences, if an inductive approach is taken it is possible that young people themselves may identify other ideas when given the opportunity to express themselves. These ideas may go beyond the measures of wellbeing used by Kern et al. (2015), subsequently better informing a model of wellbeing for use within this population.

Overall, Kern et al.'s (2015) findings question the representativeness of the PERMA Model's (Seligman, 2011) structure to the wellbeing of young people and highlights the need for research that acknowledges the uniqueness of this population.

#### **4.2.3 Age: Positive Youth Development Perspective and the EPOCH Measure**

The Positive Youth Development (PYD) perspective is defined by Lerner et al. (2005) as a "*strengths-based conception of adolescence*" (p.10). PYD was developed out of the perspective that adolescence is a time when many assets that promote a flourishing life are developed (Kern et al., 2016), recognising that contributors to wellbeing are likely to be unique for a youth population. Arising from applied work with youth and youth workers, the PYD perspective conceptualises these as the Five Cs; competence, confidence, connection, character and caring (Lerner et al., 2005), and as assets that promote outcomes in achievement, involvement and adjustment (Kern et al., 2016; Lerner et al., 2005; Taylor et al., 2005; King et al., 2005).

Kern et al. (2016) recognised the potential differences between adult and youth populations in what is likely to be considered important for wellbeing, referencing the PYD perspective (Lerner et al., 2009) in their rationale for the development of a Positive Psychological model of wellbeing for young people. Kern et al.'s (2016) model is comprised of five factors: engagement, perseverance, optimism, connectedness and happiness (summarised by the acronym, EPOCH). This model aimed to recognise factors within PYD, however, rather than aiming to promote outcomes (i.e. achievement, involvement and adjustment), as is the objective within PYD, the EPOCH Model (Kern et al., 2016) intends to promote elements defined by the PERMA Model (Seligman, 2011).

Kern et al. (2015) suggested that the EPOCH elements foster PERMA elements (Seligman, 2011), physical health and general positive outcomes in adulthood (Kern et al., 2016). They proposed that whilst research examining direct associations between EPOCH elements within young people and adult outcomes is limited, their inclusion was based on studies that indicate positive associations (see Kern et al., 2015 for a review).

Similar to the development of the PERMA Profiler (Butler & Kern, 2016), items considered relevant to the EPOCH domains were compiled from existing measures with a subsequent total of 575 items included. Over the course of 10 studies (4,480 participants aged 10-18) and analysis of the factor structure, researchers refined the measure to a 20-item questionnaire, known as the EPOCH measure of adolescent wellbeing (Kern et al., 2015).

Whilst this measure has theoretical benefits in its specificity within a youth population, and addresses the limited inclusion of young people in previous investigations of the PERMA Model (Seligman, 2011; Butler & Kern, 2016) there remains an assumption about wellbeing from a 'top down' perspective. The EPOCH elements were devised in the assumption that they not only support positive lifelong outcomes for adolescents but that they are predisposing factors to flourishing as defined by the PERMA Model (Seligman, 2011). However, as is the case with previous research (Khaw & Kern, 2015; Khaw & Kern, 2014; Butler & Kern, 2016), there is limited consideration as to whether these are representative of young people's own views about their wellbeing

By imposing models in this 'top down' fashion, research may be biasing the exploration of youth wellbeing, assuming that existent models (i.e. PERMA/EPOCH) are most representative of their views. This highlights the value of exploring the views of young people in how they understand their wellbeing, which may not only provide an evidence base for the PERMA Model (Seligman, 2011) from the voice of young people, but may identify additional or alternative ways in which wellbeing is represented within this population.

### **4.3 Summary**

The PERMA Profiler (Butler & Kern, 2016) offers a valuable measure of the PERMA Model (Seligman, 2011), providing a means for supporting and adapting intervention to promote wellbeing from a Positive Psychological perspective. However, methodological issues such as the representation of young people in the sample (Butler & Kern, 2016) and explorations of the application to specific populations such as culture (Khaw & Kern, 2014) and age (Kern et al., 2015) highlight potential shortcomings in the fit of the PERMA Model (Seligman, 2011).

Despite some investigations acknowledging differences in wellbeing between age groups (Kern et al., 2015; Kern et al., 2016; Lerner et al., 2005) there remains an overarching theme within research where elements considered important for young people's wellbeing are being assumed, applying a 'top down' approach to explorations. Therefore, it is possible that there are aspects of wellbeing that are being missed or misinterpreted, as demonstrated cross culturally by Khaw and Kern (2016) when given an opportunity to contribute.

The importance of this is exemplified by the use of Positive Psychology within the education context as an approach to promoting wellbeing. Given the observed variations in the fit of the PERMA Model (Seligman, 2011) to a youth population, and methodological limitations of deductive explorations, it is possible that Positive Psychology interventions based on the PERMA Model (Seligman, 2011) are not fully representative of the wellbeing of young people.

The next section will explore the application of Positive Psychology within education before considering how the voices of young people themselves may inform understanding of wellbeing from a Positive Psychology perspective.

## 5. Positive Psychology in Practice

Within the UK a variety of approaches are adopted by schools and applied practitioners, such as EPs, as a means of supporting wellbeing in schools, with the term Positive Education used to refer to practices utilising a Positive Psychology approach (Roberts, 2020). This section aims to explore the use of Positive Psychology in the education context, reviewing the evidence of Positive Psychological interventions to understand the applicability and efficacy of the PERMA Model (Seligman, 2011) in supporting the wellbeing of young people.

### 5.1 Positive Education

Wellbeing has become a key element of education and now forms a part of school inspection frameworks within the UK (e.g. Ofsted, 2021; Estyn, 2019). Positive Education is defined by the prioritisation of wellbeing alongside academic and learning outcomes (Roberts, 2020). According to Shoshani and Slone (2017) Positive Education “*seeks to integrate Positive Psychology elements within educational practices*” (p. 2) to promote wellbeing (Seligman, et al., 2009), often achieved through Positive Psychological Interventions (PPIs). The following will explore the use of PPIs within schools as a means of supporting wellbeing from a Positive Psychological perspective.

#### 5.1.1 Positive Psychology within Education: Positive Psychological Interventions

PPIs are tools or strategies that integrate elements of Positive Psychology, aiming to cultivate wellbeing rather than minimise the presence of negative affect or behaviour (White & Murray, 2015). Development and implementation of interventions are often informed by the PERMA Model (Seligman, 2011) and associated characteristics, targeting areas such as gratitude, positive emotion and engagement (Shoshani & Slone, 2017).

Increasingly, PPIs are being drawn upon to promote wellbeing (Shoshani & Slone, 2017; Seligman et al., 2009), with growing interest within the literature as to their implementation and effectiveness (Bolier, 2013; Wright, 2020). Approaches assessing the robustness of interventions often utilise systematic reviews of the literature as well as meta-analysis, where-by overall outcomes can be synthesised and used to inform and/or validate implementation (Uman, 2011).

Bolier et al. (2013) conducted a review, aiming to explore the effectiveness of PPIs. The researchers carried out a meta-analysis of randomised control trial studies undertaken between 2009 and 2012, looking at changes in outcome measures (e.g. subjective wellbeing, psychological wellbeing and depressive symptoms) as well as mediating factors (e.g. intervention type, duration and design quality) (Bolier et al., 2013). Overall, results demonstrated a small but significant positive impact of PPIs on subjective wellbeing ( $d=0.26$ ), psychological wellbeing ( $d=0.17$ ), and depression ( $d=0.18$ ) for both short and long-term measures, with several moderating variables identified including

intervention duration and intervention delivery (i.e. individual or group basis). Whilst the researchers concluded that the results contribute to the evidence base for the use of PPIs in improving wellbeing and reducing depressive symptoms, it is difficult to generalise these findings to the application of Positive Psychology within education (Positive Education) due to the lack of specificity in the inclusion criteria. Further, as interventions included within the analysis primarily considered a single component, such as addressing gratitude or cultivating positive thinking, direct inferences to the PERMA Model (Seligman, 2011) as a whole cannot be made.

These limitations were recognised by Wright (2020), who identified that research to date has lacked consideration of multi-component PPIs within educational settings and sought to contribute to the understanding of their application within this context. Wright (2020) used a systematic review and meta-analysis, to investigate the impact of 22 studies that has explored multi-component PPIs within schools. Results indicated that whilst a positive effect was observed, this was relatively small ( $r=0.22$ ) (Wright, 2020). Additionally, Wright (2020) identified a number of mediator variables influencing intervention effectiveness (e.g. psychologist delivery versus teacher delivery). However, Wright (2020) acknowledged that a large amount of variance was unaccounted for, suggesting that there are likely to be other unknown variables influencing the effectiveness of multi-component PPIs. Wright (2020) concluded that the small effect size may partially be explained by factors such as sample bias, however, further speculated that *“Positive Psychology may not be a thoroughly robust framework for understanding and promoting wellbeing”* (p. 68).

Wright’s (2020) conclusions indicate that there may be a need to consider components other than those outlined within the PERMA Model (Seligman, 2011) when seeking to understand and promote wellbeing, particularly within the context of Positive Education. Acknowledging the experience of young people in relation to their wellbeing may ensure that practitioners remain flexible to the values and behaviours of particular populations (Ciarrochi et al., 2016) when applying the PERMA Model (Seligman, 2011) within the school context.

## **5.2 Summary**

The literature reviewed thus far has demonstrated the importance of supporting wellbeing in young people, with Positive Psychology providing an approach that can be adopted by schools and applied psychologists. Whilst the PERMA Model (Seligman, 2011) offers a way of conceptualising wellbeing, its generalisability to a youth population is questionable due to methodological limitations (i.e. sample specificity and deductive approaches). Despite this, aspects of Seligman’s (2011) PERMA Model are integrated into schools through Positive Education and PPIs. The efficacy of PPIs further

questions the fit of the PERMA Model (Seligman, 2011) to young people and the extent that it is fully representative of their views about wellbeing.

Whilst the deductive orientation of designs reviewed so far have offered valuable reflections for the use of the PERMA Model (Seligman, 2011) with young people, there remains limited exploration of wellbeing beyond the elements in this model that may help practitioners be more informed in their application of the PERMA Model (Seligman, 2011). Therefore, the following section aims to review research that have utilised methodologies to facilitate pupil voice, and what this means when applying the PERMA Model (Seligman, 2011) in practice.

## **6. Pupil Participation**

The voice of young people has become increasingly acknowledged as important, with growing reference within research literature (Clark et al., 2003, Kirby et al., 2003; Ruddock & Flutter, 2004), as well as becoming integral to policy and legislation in the UK (e.g. United Nations, 1989; DfES, 2003; DFE 2014; UNICEF; 1989). However, despite a wide range of literature advocating the importance of pupil voice, the extent to which the voice of young people are sought or acted upon with regards to decisions affecting them is relatively small (Mortimer, 2004).

The benefits of pupil participation have long been documented (WHO, 1986), with positive impacts observed in participation, motivation, self-esteem and skill development (Warwick, 2007; Kellett, et al., 2004), all of which are considered to be linked to positive mental health and wellbeing (Hall, 2010).

This section aims to review approaches taken when exploring the voices of young people in relation to their wellbeing. Particular consideration will be given to the inductive and deductive orientation of research methodologies (Creswell & Plano Clarke, 2007). This will be discussed in reference to the PERMA Model (Seligman, 2011) and how the wellbeing of young people is explored.

### **6.1. Approaches to Pupil Participation**

When considering what participation of young people looks like, a number of frameworks have been developed that specify different cultures (Kirby et al., 2003) and levels (Fielding, 2001) at which their views may be sought.

Fielding (2001) proposed four levels of participation: students as 'data sources', students as 'active respondents', students as 'co-researchers', and students as 'researchers' (see Fielding, 2001, for a review). Whilst initially developed for understanding pupil involvement within school self-review and improvement planning, these levels provide a useful means for defining approaches used within the research literature. Fielding's (2001) levels depict how the young person can move from being a recipient of how their views contribute towards change (data sources), to initiating and leading the process (researchers).

Subsequently, the approach to pupil participation (Fielding, 2001) taken by researchers is likely to influence the type of methodology chosen to explore wellbeing in young people. Therefore, the following will outline how Fielding's (2001) levels can be observed in research that has sought pupil perceptions of wellbeing. This aims to explore what different methodologies used to facilitate pupil voice have revealed about the wellbeing of young people and the use of the PERMA Model (Seligman, 2011) in practice.

### **6.1.1 Pupil Participation: Data Sources**

Fielding's (2001) 'data source' level, is evident in research that has sought the voice of young people to establish a baseline for informing change.

Within Wales, the Student Health and Research Network (SHRN) was established in 2013, producing a Student Health and Wellbeing Survey that takes place every two years (SHRN, 2021). The survey seeks the voice of secondary school pupils aged 11-16 in relation to their health and wellbeing, utilising the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS; Haver, et al., 2015) as a means of exploring their mental wellbeing. The SWEMWBS requires participants to consider statements related to happiness and daily functioning, and to rate the frequency of which aspects relating to these are experienced (SHRN, 2019). The most recent report from the SHRN (2019) presented results from 2017/18, with responses indicating general positive adolescent life satisfaction that appears to decline throughout school progression. Additionally, marked differences were observed between groups, with females reporting lower wellbeing than males and differences based on household affluence.

This report offers an insight into the perceptions and experiences of young people about their wellbeing and provides an example of how their voices can produce data that can be used in identifying areas for change. However, a number limitations need to be recognised in relation to this method when exploring the views of young people. For example, as recognised by Seligman (2011), the exploration of wellbeing through happiness and life satisfaction may bias conclusions (e.g. basing ones ratings on that moment in time and/or individual differences in the experience of happiness). Furthermore, as noted by Seligman (2011) the application of happiness and life satisfaction measure is reductionist and lacks appreciation of other factors that may be contribute to the wellbeing of young people (i.e. PERMA elements; Seligman., 2011).

Further, whilst the SHRN (2019) may be considered 'inductive' in its exploration of pupil voice to inform change, the underlying approach that students are data sources raises similar limitations to previous deductive research (i.e. Kern et al., 2015; Kern et al., 2016). The position that pupils are data sources can be seen to influence the method chosen (i.e. quantitative questionnaire) to explore the views of young people, reflecting an assumption that what is being explored is sufficient in understanding their wellbeing.

Therefore, the next section will review research that has utilised methodologies that allow young people to be active respondents (Fletcher, 2001) in the exploration of wellbeing, and what insights this can provide for researchers and practitioners in knowing how best to support them.

### **6.1.2 Pupil Participation: Active Respondents**

Hall (2010) provides an example of how young people's views can be sought in relation to their wellbeing through their active inclusion within the process. Within this study the Ten Elements Map (MacDonald & O'Hara, 1998) was used to structure focus groups with those aged between 3-11 years old, in a UK based primary school.

The Ten Element Map (MacDonald & O'Hara, 1998) sets out several factors considered important to wellbeing, including environmental quality, self-esteem, emotional processing, self-management and social participation (Hall, 2010). Using this approach, the researcher identified themes relating to the Ten Element Map (MacDonald & O'Hara, 1998), including environmental quality, self-esteem, emotional processing, self-management, social participation. These were then reflected back to school staff to inform planning.

In contrast to a students as data sources (Fielding, 2001) approach that produce fixed outcomes about wellbeing (SHRN, 2019), this study demonstrates that when young people are viewed as active respondents (Fielding, 2001) their views can be used to develop a more in-depth understanding about their wellbeing. This exemplifies the value of a more inductive or 'bottom-up' explorations, allowing young people to be active participants in matters relevant to their wellbeing.

However, whilst Hall's (2010) choice of design utilised an active participation approach to pupil participation, findings cannot entirely be considered pupil voice due to the structure imposed on discussions by the Ten Elements Maps (MacDonald & O'Hara, 1998) during focus groups. Therefore, it is possible that explorations of wellbeing were restricted and conclusions may have been biased.

Gillet-Swan (2014) recognised that young people's voices were underrepresented within the literature, particularly when seeking to conceptualise wellbeing. In addressing this underrepresentation, Gillet-Swan (2014) sought the active participation of young people, using a range of activities (verbal, written and illustrative), to qualitatively explore their views of wellbeing. A total of 54 young people (aged 8-12) participated in three group sessions, where they described, analysed, and finally defined wellbeing, with data from each stage subject to thematic coding by researchers to explore the relationships between responses using hermeneutics (Patterson & Williams, 2002).

During the first two sessions, where aspects considered important for wellbeing were discussed, three common themes were identified in young people's responses including social (relationships), psychological (self) and physical (health). However, in the final session a different picture emerged,

where relationships were not identified within their general definitions of wellbeing (Gillet-Swan, 2014).

Comparisons can be drawn between the themes identified in this study and those included within the PERMA Model (Seligman, 2011). The results provide support, from young people themselves, for the inclusion of some elements of the PERMA Model (Seligman, 2011), such as relationships.

However, this study also demonstrates that by utilising qualitative methodologies that offer young people the opportunity to actively participate in conceptualising wellbeing, additional elements (i.e. health) that are not acknowledged within the PERMA Model (Seligman, 2011) may be identified. This exemplifies the advantage of inductive approaches to exploring wellbeing within this population.

Further, considerations for research are demonstrated by the discrepancies observed by Gillet-Swan (2014) between the first two sessions (exploring what was important to their wellbeing) and the final session (exploring definitions of wellbeing). For example, whereas relationships were identified as important to their wellbeing, this was not represented in how they defined it. This illustrates that how young people define wellbeing may not accurately reflect what is important to them. This is important when considering how models of wellbeing (i.e. the PERMA Model; Seligman, 2011) can be explored, demonstrating value in research that considers what young people consider important to their wellbeing rather than how it is defined.

Gillet-Swan (2014) exemplifies the value in research that includes young people as active respondents (Fielding, 2001), illustrating how qualitative methodologies can offer more meaningful reflections about wellbeing than when seen as data sources (SHRN, 2019). This approach can be seen to provide the bottom-up support for elements (i.e. relationships) within the PERMA Model (Seligman, 2011) as well as extending understanding (i.e. health).

However, it could be argued that the analytic method chosen by Gillet-Swan (2014), such as thematic coding and hermeneutics (Patterson & Williams, 2002), still imposes a top down approach (i.e. through the analysis of adult researchers) and may subsequently bias how and what findings are identified. Whilst several steps can be adopted by researchers in an attempt to mediate bias and increase the trustworthiness of qualitative analysis (Mackieson et al 2018; Roberts et al, 2019), according to Garldas (2017) *“those carrying out qualitative research are an integral part of the process and final product, and separation from this is neither possible nor desirable”* (p. 2).

Therefore, the next section will consider the use of mixed methodologies in the exploration of wellbeing to review what insights that this can provide in the development of future research.

## **6.2 Mixed Methods and Q Methodology**

The literature reviewed thus far has demonstrated the value in methodologies that have sought the voice of young people in understanding what is important to them. This has contributed to the understanding of how wellbeing is perceived by young people, as well as providing reflections for the application of the PERMA Model (Seligman, 2011). However, the potential for bias within purely qualitative methodologies exemplify the need to consider alternative methods that increase researcher distance and centralise the views of young people. Therefore, this section will consider the use of mixed method research designs in exploring wellbeing as a way of combating some of these shortcomings.

Further, Fielding's (2001) students as 'co-researchers' level of pupil participation will be acknowledged, exploring Q methodology as a means for addressing research limitations and aiding reflections for understanding the PERMA Model (Seligman, 2011) in practice.

### ***6.2.1 Mixed Methods in the Exploration of Wellbeing***

Anderson and Graham (2016) demonstrate the utility of mixed method designs in their exploration of youth wellbeing. In this study, researchers initially used qualitative methods to elicit the views of pupils in 18 schools across 3 Australian school districts. This consisted of focus groups with primary and secondary school aged young people (aged 6-18 years), which were informed by Recognition Theory (Honneth, 2007).

Recognition Theory is grounded in the notion that identity is dependent on the feedback we get from others, with researchers choosing to focus on the work of Honneth (2007). Honneth (2007) primarily considered the role of social relationships in the development and maintenance of an individual's identity. The researchers represented Honneth's (2007, as cited in Anderson & Graham, 2016) three patterns of intersubjective recognition (love, rights and solidarity) as 'cared for', 'respected' and 'valued' in order to aid the young people's discussion. Through focus groups, the researchers encouraged discussions around these aspects, as well as definitions of wellbeing. Themes were developed and used to inform questions presented in a quantitative phase. Table 3 outlines the themes identified.

**Table 3**

*Concepts of Wellbeing Identified by Primary and Secondary Aged Pupils (Anderson & Graham, 2016)*

<b>Primary</b>	<b>Secondary</b>
<ul style="list-style-type: none"><li>• Being happy</li><li>• Being safe</li><li>• Being loved</li><li>• Being trusted</li><li>• Being respected</li><li>• Being listened to</li><li>• Being healthy</li><li>• Looking after myself</li><li>• Helping others</li><li>• Having a great environment</li></ul>	<ul style="list-style-type: none"><li>• Being happy</li><li>• Being safe</li><li>• Being loved</li><li>• Being trusted</li><li>• Being respected</li><li>• Being listened to</li><li>• Being healthy</li><li>• Looking after myself</li><li>• Helping others</li><li>• Having a great environment</li><li>• Having privacy</li><li>• Having a say</li></ul>

The quantitative phase included an online survey that sought to develop an understanding of how participants prioritise elements considered important to wellbeing. This phase involved students (n=5362) ranking their top two wellbeing concepts from those identified by the participants in the focus groups.

The qualitative findings (see Table 3) in this study demonstrate that when given the opportunity to contribute, young people may identify a multitude of elements considered important to them.

When considering these findings alongside the PERMA Model (Seligman, 2011), there appear to be some commonalities, such as positive emotions and relationships. These commonalities provide support for the inclusion of these elements within the PERMA Model (Seligman, 2011). However, Anderson and Graham's (2016) results also indicate that when asked, young people may identify additional constructs that are not represented by the PERMA Model (Seligman, 2011) such as safety, respect, health, and positive environments. Additionally, particular elements, such as engagement, meaning and achievement did not appear in pupil's views. Based on these findings it is possible that aspects of wellbeing considered important to young people are not fully represented by the PERMA Model (Seligman, 2011). However, it could be argued that Anderson and Graham's (2016) use of Recognition Theory (Honneth, 2007) in their qualitative phase may have biased explorations of wellbeing, identifying the need for research that does not impose preconceived ideas when initially seeking the voice of young people.

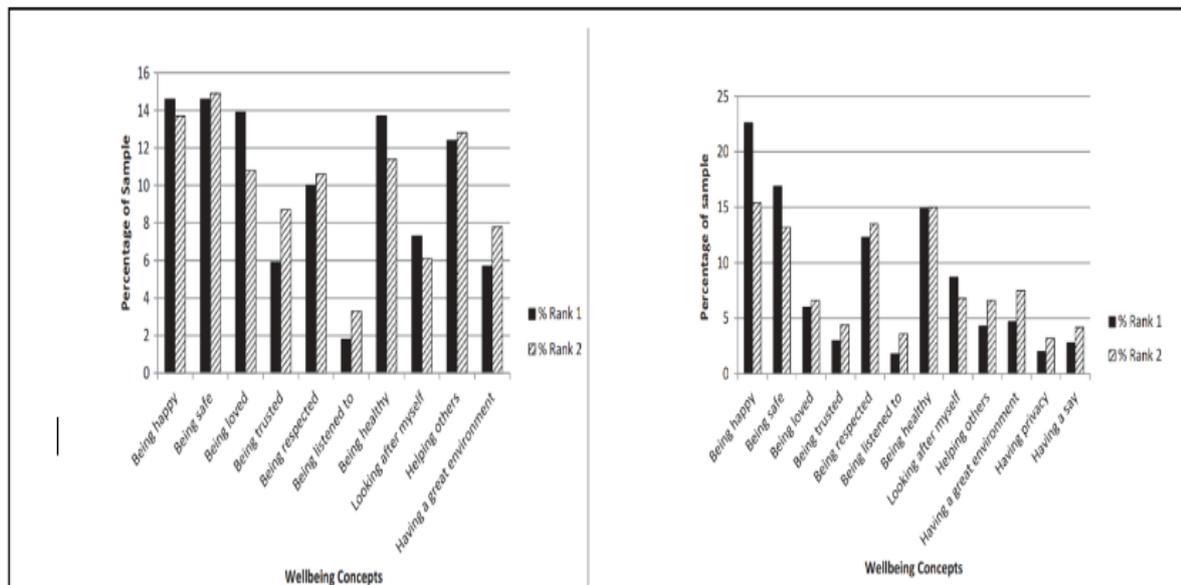
Further, Anderson and Graham's (2016) quantitative findings indicate that elements of wellbeing may carry varied amounts of importance for young people. Figure 2 presents Anderson and

Graham's (2016) findings from primary and secondary pupil's rankings of the top two elements considered most to their wellbeing. As a whole, young people seemed to place greater emphasis on certain elements of wellbeing (as specified by qualitative phase themes), such as being happy and feeling safe and less emphasis on others such as being listened to and trusted. Anderson and Graham's (2016) results also illustrate the differences between what primary and secondary pupils consider important to wellbeing (see Figure 1), exemplifying that young people themselves are not a homogenous group. Therefore, it is important that future research acknowledges these differences when exploring wellbeing, ensuring that findings are most applicable to the population being explored (i.e. primary age or secondary age).

However, whilst the quantitative element in Anderson and Graham's (2016) design provides a means for understanding how wellbeing is prioritised, as participants were only instructed to rank their top two choices it is difficult to draw inferences about the organisation of *all* elements considered important to participant's wellbeing. Such inferences may provide constructive reflections for understanding wellbeing within this population and the PERMA Model (Seligman, 2011). For example, using a technique that allows young people to prioritise all elements considered important to wellbeing, may offer an insight into whether elements within the PERMA Model (Seligman, 2011) are not only perceived as important, but how these are organised alongside pupil's own ideas about wellbeing.

**Figure 1**

*Primary and Secondary School Pupil's Conceptualisations and Ranking of Wellbeing (Anderson & Graham, 2014)*



*Note:* This figure was published by Anderson and Graham (2016) summarising what primary school (left) and secondary pupils (right) identified as the two most important aspects of wellbeing. From “Improving Student Wellbeing: Having a Say at School”, by Anderson and Graham, 2016, *School Effectiveness and School Improvement*, 27, p. 357. Copyright 2016 by School Effectiveness and School Improvement.

Anderson and Graham (2016) demonstrate how mixed methodological designs can offer valuable reflections for the generalisability of the PERMA Model (Seligman, 2011) to young people. However, restrictions are posed by their design, such as the use of theory to guide the initial generation of ideas and limited exploration of all elements considered important to wellbeing.

The following section aims to review the use of Q methodology as an approach to pupil participation to explore its utility in addressing some of the methodological shortcomings reviewed so far when exploring the wellbeing of young people.

### **6.2.2 Q Methodology: Young People as Co-Researchers**

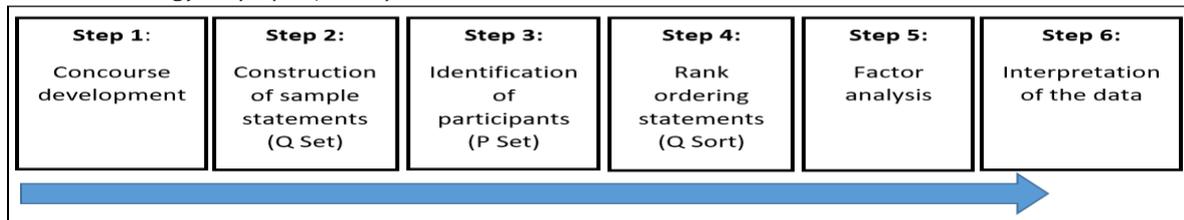
Q methodology is one approach used to reducing researcher subjectivity in data collection, providing an opportunity to consider how a multitude of perspectives are organised (Shinebourne, 2009).

Hughes (2016) considers Q methodology to be an ethical, respectful and person-centred approach, which immerses participants in the research and can be regarded as “*the best-developed paradigm for the investigation of human subjectivity*” (Dryzek & Holmes, 2002, p. 20). Whilst several publications have been developed to support researcher use (e.g. Brown, 1993; Van Exel & Gijait de

Graaf, 2005; McKeown & Thomas, 2013), Q methodology can be summarised by the following six steps (Lee, 2017) as displayed in Figure 2:

**Figure 2**

*Q Methodology Steps as Defined by Lee (2017)*



Ellingsen, et al. (2014) sought to explore the value of Q methodology in eliciting the views of young people, advocating for child-friendly approaches to involving them in research. In two studies the researchers utilised Q methodology to explore young people’s experiences of parental separation (in those aged 5) and perceptions of foster care (in those aged 13-17; see Storksen, et al., 2012; Ellingsen, et al., 2011, for full study details). Whilst the specific findings of these studies are not of relevance to the direction of this review, Ellingsen et al. (2014) offer important reflections on the advantages of Q methodology in revealing young people’s constructions.

The researchers proposed that Q methodology allows for non-threatening explorations, allowing young people to communicate their own perceptions, experiences and understanding of their world (Sommer, et al., 2010; Ellinsen et al., 2014). Furthermore, in contrast to purely qualitative methodologies, Ellinsen et al. (2014) argued that participant subjectivity is preserved within Q methodology as factor analysis considers whole Q-Sorts from each participant, reducing the likelihood of the researcher reconstructing meaning through an adult lens. Therefore, Q methodology can be seen to align with Fielding’s (2001) level of pupils as co-researchers, immersing them in the process and preserving their views as much as possible.

Despite growing acknowledgment of the value of Q methodology in eliciting the views of young people (Lundberg et al., 2020), to date there appears to be minimal research that has utilised this approach with young people. A recent systematic review (Lundberg, et al., 2020) examined the extent of the literature utilising Q methodology with young people in compulsory education. This identified 74 studies across 20 different countries, with only a subset (n=21) explicitly seeking the views of young people. Of these, only 2 studies were found to be relevant to social and emotional development, reporting differences in how resilience is understood by young women (Heffernan,

2017), and how person-centred views can support reintegration into mainstream provisions (Atkinson & Rowley, 2019).

### **6.3 Summary**

Research reviewed thus far has identified variations in the 'fit' of the PERMA Model (Seligman, 2011) to young people. This section aimed to explore how the involvement of young people in research can promote understanding of wellbeing within this population, aiding reflections for the PERMA Model (Seligman, 2011) in practice.

The different levels (Fielding, 2011) at which pupil voice is sought is evident in research methods adopted and provide a means for observing and evaluating approaches taken. When considering the literature on pupil voice it becomes evident that there is a need for research to go beyond purely quantitative means that see young people as passive receptors of change, and qualitative approaches that potentially restrict and/or bias inferences. The literature reviewed has identified potential benefit of combining methodologies when exploring wellbeing. One such approach is Q methodology, where participants can be immersed in the research process, potentially producing more valid interpretations for models used in practise (i.e. the PERMA Model; Seligman, 2011). However, research utilising Q methodology with young people is currently in its infancy, particularly in relation to wellbeing, exemplifying value in research that explores its utility within this population.

## 7. Contextual Factors and Perceptions of Wellbeing

Wellbeing does not exist in isolation, with the environment contributing to physical and psychological changes within an individual (Chapman et al., 2004; Bronfenbrenner, 1979), contributing to lifelong outcomes (Felitti et al., 1998; Merrick et al., 2017; Anda et al., 2002; Chapman et al., 2004; Shonkoff et al., 2012; Xie et al., 2012). This is emphasised by The New Economics Foundation (NEF; 2009), an independent ‘think-and-do’ tank who published a guide to measuring children’s wellbeing, suggesting that wellbeing should be seen as a *“dynamic process, in which a child’s external circumstances (e.g. their socioeconomic background, family circumstances, physical surroundings) are constantly interacting with their individual characteristics (e.g. their personality, cognitive ability and so on”* (p.2).

In March 2020, a global pandemic was declared by the World Health Organisation (WHO) in response to the Coronavirus (Covid-19) outbreak (WHO, 2020). Subsequently, measures were introduced to reduce transmission, including the passing of legislation (Coronavirus Act, 2020) that saw school closures and a national lockdown across all four UK nations. Despite external circumstances continuously occurring to interact with wellbeing (Dodge et al, 2012), the occurrence of the pandemic and associated global changes, are considered helpful to acknowledge in contextualising this review.

This section aims to review theory and research that can be used to understand the importance of acknowledging context when considering wellbeing. Particular attention will be given to wellbeing as a fluctuating construct, the influence of systemic change and specific Covid-19 related findings.

### 7.1 Contextualising Perceptions of Wellbeing

Dodge et al. (2012) argued that wellbeing is a fluctuating construct that is in part mediated by environmental challenges. In seeking to define wellbeing, Dodge et al. (2012) reviewed aspects of Equilibrium Theory (Headey & Wearing, 1989, as cited in Dodge et al., 2012), the Lifespan Model of Development (Hendry & Kloep, 2002, as cited in Dodge et al., 2012) and ideas proposed by Cummins (2012, as cited in Dodge et al., 2012) relating to the effect of life challenges on homeostasis.

The researchers proposed that wellbeing is dependent on the balance between one’s individual resources (i.e. psychological, social and physical) and challenges faced (i.e. psychological, social and physical). Further, Dodge et al. (2012) contended that *“each time an individual meets a challenge, the system of challenges and resources comes into a state of imbalance, and the individual is forced to adapt his or her resources to meet this particular challenge”* (p.230). Therefore, in a time where a global pandemic has presented significant challenges for many (psychologically, socially and physically), it is possible that what may be considered important to wellbeing at this time might seek

to offset the imbalance caused by current environmental challenges. For example, where a social challenge has been faced, individuals may seek social resources to restore a balance in their state of wellbeing.

Dodge et al. (2012) offer a contextualised perspective of wellbeing that is important to acknowledge when exploring this construct, demonstrating how wider systems can contribute to wellbeing.

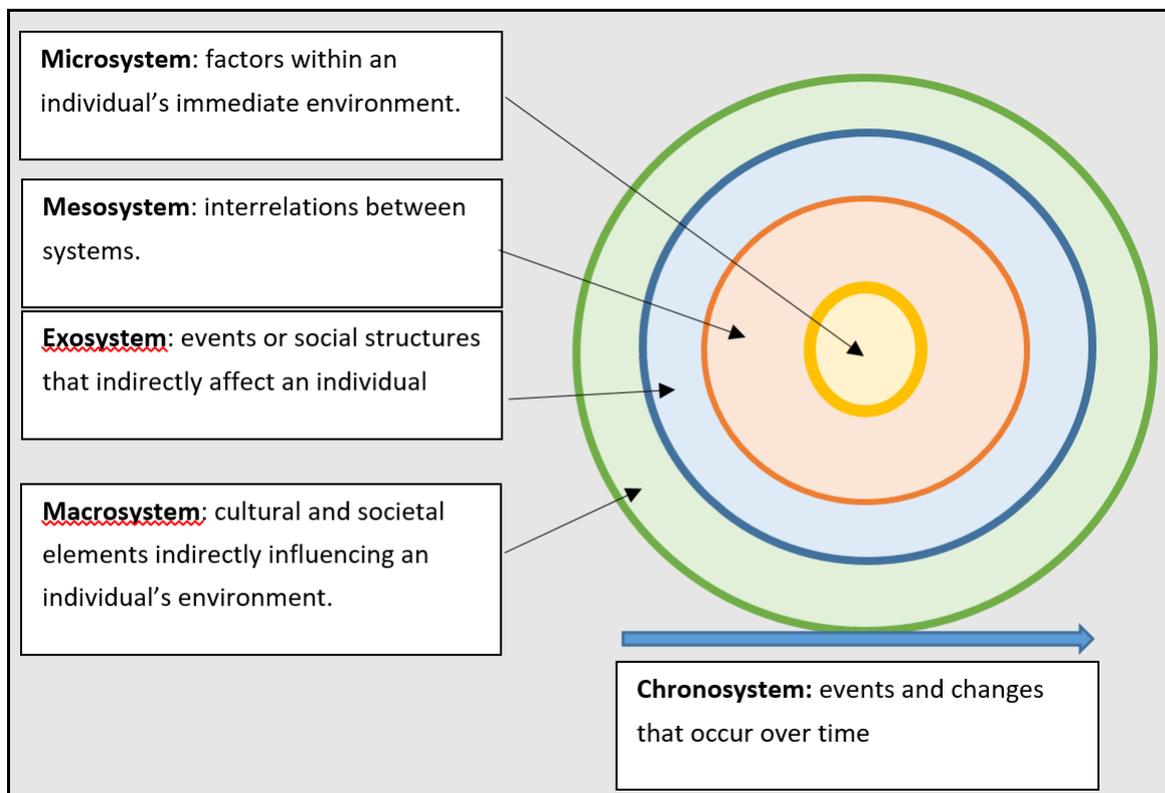
Two seminal frameworks for understanding the impact of context on wellbeing within research and applied psychology are Bronfenbrenner's Bioecological Systems Framework (1979) and Maslow's Hierarchy of Need (1943). The following will briefly review these two models in understanding how context may further influence perceptions of wellbeing.

### 7.1.1 Systemic Interplay

**Ecological Systems Theory.** Bronfenbrenner (1979) provides a framework for understanding human development as a function of interrelated systems, namely, the microsystem, mesosystem, exosystem, macrosystem and chronosystem (see Figure 3). This has become known as Bronfenbrenner's 'Bioecological Systems Theory' and encourages consideration of the following four components: process, person, context and time.

**Figure 3**

*Bronfenbrenner's Ecological Systems Framework*



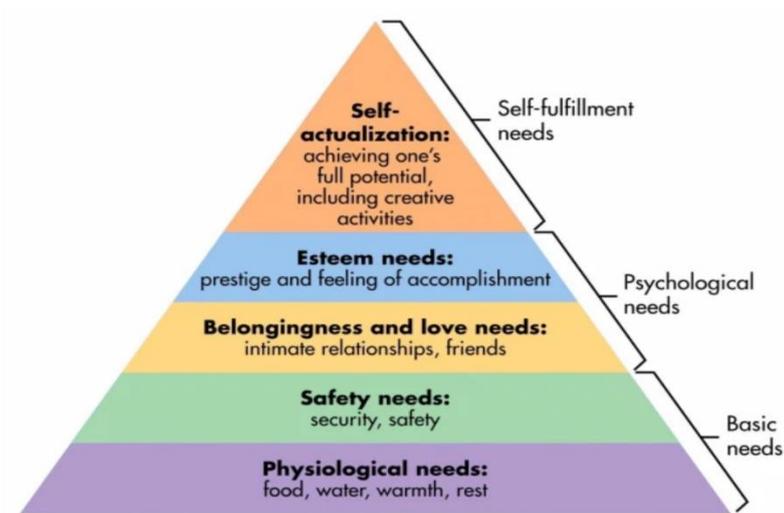
Bronfenbrenner (1979) is widely cited within the research literature, and is of particular relevance to applied psychologists, such as EPs, who are able to utilise this framework for appreciating systemic influences on an individual.

Whilst it is beyond the scope of this review to provide an in-depth consideration of this model and its processes, it serves to exemplify the importance of acknowledging the complexities that a global pandemic is likely to bring, not only to young people as individuals but the societal and familial systems they are a part of (Branco & Linhares, 2018). Bronfenbrenner's model (1979) posits that the views of young people are likely to be influenced by the interplay between wider systems. Subsequently, it is argued that systemic changes need to be acknowledged when exploring what is considered important to wellbeing at any one time, particularly during such significant global change.

**Maslow's Hierarchy of Need.** Another theoretical model that can be used in understanding the impact of this systemic change (Bronfenbrenner, 1979; 2011) on perceptions of wellbeing is Maslow's Hierarchy of Need (1943). This model posits that there are five levels of human need that need to be met in order to 'thrive'. Figure 4 outlines each level of Maslow's (1943) theory.

**Figure 4**

*Maslow's (1943) Hierarchy of Need*



*Note.* Figure retrieved from *MarshallMorrisMcsorley (n.d)*

Whilst these levels provide a helpful reference to understanding what may underpin wellbeing in general, they appear to have particular significance in a time where societal level (e.g. Bronfenbrenner, 1979) changes are likely to have impacted satisfaction of even basic level needs for many to variable degrees (Office for National Statistics [ONS], 2020). Such changes may include

access to resources, parental job security and perceived threat to safety. It could be argued that ideas about wellbeing may be impacted by these external pressures compared to a time when these were not at the forefront of life.

Therefore, in a time where a global pandemic has resulted in marked changes in daily functioning, acknowledgement of this environmental factor is of particular relevance when considering the wellbeing of young people.

## **7.2 Changes in Wellbeing as a Result of Covid-19**

Whilst a growing body of research about the impact of Covid-19 is accumulating, to date there are few explorations available relating to the subjective experiences of young people.

However, Rogers et al. (2020) recently contributed to the understanding of young people's (average age 15.24) experiences of wellbeing during this time. In this study, the researchers utilised a mixed-method survey design to explore perceptions of social-emotional changes and their impact on mental health (n=407) over the course of the pandemic. The survey was completed at two time points; once before the pandemic (October 2019) and once during (April 2020). Results indicated that young people (average age=15.24) experienced changes in their relationships, such as decreased time with friends and increased time with family. When considering quantitative links, changes in these relationships were associated with significant implications for mental ill health (i.e. increased loneliness, depression and anxiety). In addition, Rogers et al.'s (2020) use of Thematic Analysis (Braun & Clark, 2006) identified several themes in young people's qualitative experiences of Covid-19, including increased anxieties about safety (i.e. contracting/spreading the virus), reduction in autonomy (i.e. less privacy and personal space), less interaction with peers, reduced ability to engage in school work (Rogers et al., 2020) and time outside.

However, despite young people experiencing challenges as a result of the pandemic, positive experiences were also reported, including more quality time with family, more time to themselves, and improved friendships. These findings mirror other investigations conducted during Covid-19 and previous pandemics, finding that negative experiences often co-exist with positive experiences (Lau et al., 2006; Westerhof & Keyes, 2010; Li et al., 2020). From a Positive Psychology perspective, the term post traumatic growth has been coined as a counter term to the better known post-traumatic stress, and serves to acknowledge that traumatic events can be a catalyst for positive change (Linley & Joseph, 2005). According to Waters et al. (2021) these changes can include "*self-perception, interpersonal relationships, knowledge of one's strengths, life philosophy, appreciation of life and spirituality*" (p.4). This is exemplified by Lau et al. (2006) who found that during the Severe Acute Respiratory Syndrome (SARS) pandemic, participants reported social growth (i.e. taking care and

being aware of the needs of friends and family) as well as spiritual growth (i.e. greater appreciation for life).

Therefore, Roger et al.'s (2020) study exemplifies the influence that the current context can have on what young people consider important to their wellbeing. These findings highlight the value in acknowledging the Covid-19 pandemic whilst investigating wellbeing, as what is considered important to young people may be a function of the challenges and opportunities experienced and/or perceived during this time.

However, as qualitative responses in Rogers et al.'s (2020) study were not subject to analysis between each time point, it is difficult to make inferences about what aspects of wellbeing (e.g. safety) would have been novel or changed as a result of this experience. Further, similarities can be drawn between these findings and previous work by Anderson and Graham (2016), who also identified safety as important to wellbeing outside of a context of a pandemic. Therefore, it could be argued that whilst the subject of safety concerns may vary, it may form a part of young people's wellbeing more generally. However, when considering these findings alongside Dodge et al.'s (2012) ideas about one's need to balance resources with environmental challenges, it is possible that aspects relating to wellbeing (e.g. safety) identified by Rogers et al. (2020) may be considered more of a priority during this time as a means of offsetting the challenges faced by the pandemic (Dodge et al., 2012).

The benefits of prioritising elements considered important to wellbeing were discussed earlier in reference to Anderson and Graham's (2016) study as a means of reflecting on the PERMA Model (Seligman, 2011) structure. This potential benefit is further extended when considering the impact of context on wellbeing and how some elements may be considered more important during this time (Dodge et al., 2016; Rogers et al., 2020). Therefore, by allowing young people to not only identify, but prioritise elements considered important to their wellbeing, whilst providing an opportunity to reflect on the direct implications of the pandemic, research can offer reflections for how wellbeing can be understood as well as make inferences about context.

### **7.3 Summary**

The literature reviewed thus far has highlighted value in exploring what young people perceive as important to their wellbeing to understand how the PERMA Model (Seligman, 2011) can best be used in practice, particularly by applied psychologists, such as EPs. Q methodology offers a potential means for addressing some of the methodological shortcomings posed by previous research, facilitating pupil voice and increasing researcher distance.

This section aimed to introduce key ideas about environmental influences on wellbeing to contextualise this review within the current global pandemic. The literature reviewed indicates that whilst the exploration of young people's wellbeing is valuable in informing models of Positive Psychology utilised in practice (the PERMA mode; Seligman, 2011) environmental challenges (Dodge et al., 2012) and opportunities (Lau et al., 2006; Linley & Joseph, 2005) are likely to influence what is perceived and/or prioritised as important at any one time (Dodge et al., 2012; Bronfenbrenner, 1979; Maslow, 1943).

This identifies the need for research that facilitates the views of young people about their wellbeing, allowing for reflections about environmental influences to contextualise findings and make inferences beyond the current context.

## **8. Summary and the Current Study**

This narrative review has highlighted the importance of including young people in explorations regarding their wellbeing. The inclusion of young people's views can offer insights into how models of Positive Psychology, namely the PERMA Model (Seligman, 2011), can be used by applied psychologists.

The literature reviewed has examined the PERMA Model (Seligman, 2011), identifying that whilst offering a useful way for supporting the wellbeing of young people from a Positive Psychology perspective, variations in the 'fit' of the model have been identified (Khaw & Kern, 2014; Kern et al., 2015; Kern et al., 2016). The efficacy of Positive Psychology Interventions (i.e. Bolier et al., 2013; Wright, 2020) that utilise elements of the PERMA Model (Seligman, 2011) further question the relevance of this model to young people and encourage consideration of pupil voice in understanding how best to support them.

Research varies in its approach to pupil participation, influencing the deductive and inductive methods of data collection and/or interpretation. Qualitative studies have exemplified value in methods that allow for inductive explorations of wellbeing, and the extent to which this can provide reflections for the PERMA Model (Seligman, 2001) in practice. However, methodological limitations may still restrict explorations and/or bias interpretations.

Q methodology is one approach that allows for an exploration for viewpoints and may offer a means for addressing methodological shortcomings, by reducing researcher bias and centralising the views of young people. Q methodology may also allow direct inferences to be made about young people's perceptions of wellbeing and the PERMA Model (Seligman, 2011), by allowing for the prioritisation of importance alongside these elements.

However, context has been recognised as important to consider when exploring wellbeing, particularly in a time of significant change, such as a global pandemic.

### **8.1 Research Aims**

Firstly, the present study aimed to explore what young people consider to be important to their wellbeing through an open-ended/inductive approach, unconstrained by any theory or conceptualised framework of wellbeing.

Secondly, the study aimed to incorporate these considerations with the PERMA Profiler (Butler & Kern, 2016) items, utilising Q methodology to explore whether and/or how the factors young people identified would be consistent with how the PERMA Model (Seligman, 2011) conceptualises wellbeing.

In addition, to acknowledge the context within which this research was being undertaken, the impact of the Covid-19 pandemic on young people's perceptions of wellbeing will be explored.

Given the multi-faceted nature of this investigation, the following study aimed to address the following three research questions:

- *Research Question 1:* What do young people consider important to their wellbeing?
- *Research Question 2:* How do young people prioritise elements considered important to their wellbeing in comparison to the PERMA Model?
- *Research Question 3:* How do young people perceive the Covid-19 pandemic has influenced their views about wellbeing?

## 9. References

- Additional Learning Needs and Education Tribunal (Wales) Act. (2018). Retrieved from <https://gov.wales/additional-learning-needs-aln-factsheet-local-authorities>
- Ahmad, S., & Wasim, S., Irfan, S., & Gogoi, S. (2019). Qualitative versus quantitative research. *Journal of Evidence Based Medicine and Healthcare*, 6(43), 2828-2832.
- Ainsworth, M. D. S., & Bell, S. M. (1970). Attachment, exploration, and separation: Illustrated by the behaviour of one-year-olds in a strange situation. *Child Development*, 41, 49-67.
- Anda, R. F., Fleisher, V. I., Felitti, V. J., Edwards, V. J., Whitfield, C. L., Dube, S. R., & Williamson, D. F. (2004). Childhood abuse, household dysfunction, and indicators of impaired adult worker performance. *The Permanent Journal*, 8(1), 30.
- Anderson, D. L., & Graham, A. P. (2016). Improving student wellbeing: Having a say at school. *School Effectiveness and School Improvement*, 27(3), 348-366.
- Arya, B., & Lal, D. S. (2018). Grit and sense of coherence as predictors of well-being. *Indian Journal of Positive Psychology*, 9(1), 169-172.
- Atkinson, G., & Rowley, J. (2019). Pupils' views on mainstream reintegration from alternative provision: a Q methodological study. *Emotional and Behavioural Difficulties*, 24(4), 339-356.
- Banks, T., Bird, J., Gerlach, L., Henderson, M., & Lovelock, R. (2001). *ENABLE: Emotional Needs, Achieving, Behaving and Learning in Education*. Devon, UK: The Modbury Group.
- Bazelais, P., Lemay, D. J., & Doleck, T. (2016). How Does Grit Impact College Students' Academic Achievement in Science?. *European Journal of Science and Mathematics Education*, 4(1), 33-43.
- Berk, M., Otmar, R., Dean, O., Berk, L., & Michalak, E. (2015). The use of mixed methods in drug discovery: Integrating qualitative methods into clinical trials. In M. Tohen, C. Bowden, A. Nierenberg, J. & Geddes (Ed.), *Clinical Trial Design Challenges in Mood Disorders* (pp. 59-74).

- Gilbert, D. T., Fiske, S.T., & Lindzey, G. (1998), *The Handbook of Social Psychology*. New York: Oxford University Press.
- Bolier, L., Haverman, M., Westerhof, G.J., Riper, H., Smit, F., & Bohlmeijer, E. (2013). Positive psychology interventions: A meta-analysis of randomized controlled studies. *BMC Public Health*, *13*, 119.
- Bradford, G. (2016). Achievement, wellbeing, and value. *Philosophy Compass*, *11*(12), 795-803.
- British Psychological Society (BPS). (2009). *Code of Ethics and Conduct*. Leicester: BPS.
- Bronfenbrenner, U. (1979). *Ecology of human development: Experiments by nature and design*. Cambridge: Harvard University Press.
- Brunstein, J. C. (1993). Personal goals and subjective well-being: A longitudinal study. *Journal of Personality and Social Psychology*, *65*(5), 1061–1070.
- Butler, J., & Kern, M. L. (2016). The PERMA-Profilers: A brief multidimensional measure of flourishing. *International Journal of Wellbeing*, *6*(3), 1-48.
- Carver, C.S., Scheier, M.F., & Segerstrom, S.C. (201) Optimism. *Clinical Psychology Review*, *30*, 879-889.
- Chan, W. Y., Ou, S.-R., & Reynolds, A. J. (2014). Adolescent civic engagement and adult outcomes: An examination among urban racial minorities. *Journal of Youth and Adolescence*, *43*, 1829–1843.
- Chapman, D. P., Whitfield, C. L., Felitti, V. J., Dube, S. R., Edwards, V. J., & Anda, R. F. (2004). Adverse childhood experiences and the risk of depressive disorders in adulthood. *Journal of Affective Disorders*, *82*(2), 217-225.
- Cheney, G., Schlösser, A., Nash, P., & Glover, L. (2014). Targeted group-based interventions in schools to promote emotional well-being: A systematic review. *Clinical Child Psychology and Psychiatry*, *19*(3), 412-438.

- Children and Families Act. (2014). Retrieved from <https://www.digibete.org/wp-content/uploads/2019/07/Children-and-Families-Act-2014.pdf>
- Christopher, J. C., & Howe, K. L. (2014). Future directions for a more multiculturally competent (and humble) positive psychology. In *Perspectives on the intersection of multiculturalism and positive psychology* (pp. 253-266). Amsterdam: Springer.
- Ciarrochi, J., Atkins, P.W., Hayes, L.L., Sahdra, B.K., & Parker, P. (2016). Contextual positive psychology: Policy recommendations for implementing positive psychology into schools. *Frontiers in Psychology, 7*, 1561.
- Clark, A., McQuail, S., & Moss, P. (2003). *Exploring the field of listening to and consulting with young children*. Nottingham: Department for Education and Skills Publications
- Creswell, J.W., Feters M.D. & Ivankova N.V. (2004). Designing a mixed methods study in primary care. *Annals of Family Medicine, 2*, 7-12
- Creswell, J.W., & Plano Clark, V.L. (2007). *Designing and conducting mixed methods research*. Thousand Oaks, CA: Sage Publications.
- Csikszentmihalyi, M. (1991). *Flow: The Psychology of Optimal Experience*. New York: Harper Perennial.
- Csikszentmihalyi, M. & Csikszentmihalyi, I. (1988). *Optimal experience*. Cambridge University Press.
- Csikszentmihalya, M., Rathunde, K., & Whalen, S. (1993). *Talented teenagers*. Cambridge: Cambridge University Press.
- Cummings, R., & Nistico, H. (2002). Maintaining life satisfaction: The role of positive cognitive bias. *Journal of Happiness Studies, 3*, 37-69.
- Department for Education and Skills. (2003). *Every Child Matters, Green Paper*. London: Her Majesty's Stationary Office.

Department for Education (DfE) (2014) Special Educational Needs and Disability Code of Practice: 0 to 25 Years. In *Statutory Guidance for Organisations Who Work with and Support Children and Young People*, 19–28. London: DfE.

Department for Education (DfE) (2018). *Government response to the consultation on transforming children and young people's mental health provision: A green paper and next steps*. London: Department for Education.

Department for Education and Skills (DfES) (2003). *Every Child Matters*. London: HMSO.

Department for Children, Schools and Families (2007). *Social and emotional aspects of learning for secondary schools*. Nottingham: DCSF Publications.

Department for Education (DfE) (2015). *Counselling in schools: A blueprint for the future*. London: Department for Education.

Demiris, G., Oliver, D.P., & Washington, K.T. (2019) Defining and analysing the problem. In G. Demiris, D. P. Oliver, & K. T. Washington, K.T. *Behavioural intervention in hospice and palliative care*. Elsevier Inc.

Department for Education (DfE) (2011). *Support and aspiration: A new approach to special educational needs and disability. A consultation*. London: The Stationary Office (TSO).

Diener, E., & Emmons, R. A. (1984). The independence of positive and negative affect. *Journal of Personality and Social Psychology*, 47(5), 1105–1117.

Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The satisfaction with life scale. *Journal of Personality Assessment*, 49, 71–75.

Diener, E., & Chan, M. Y. (2011). Happy people live longer: Subjective well-being contributes to health and longevity. *Applied Psychology: Health and Well-Being*, 3(1), 1-43.

- Diener, E., Suh, E.M., Lucas, R.E., & Smith, H.L. (1999). Subjective well-being: Three decades of progress. *Psychological Bulletin*, 125, 276-302.
- Dryzek, J. S., & Holmes, L. (2002). *Post-communist democratization: political discourses across thirteen countries*. Cambridge: University Press.
- Dweck, C. (2006). *Mindset: The new psychology of success*. New York: Random House.
- Ellingsen, I. T., Thorsen, A. A., & Størksen, I. (2014). Revealing children's experiences and emotions through Q methodology. *Child Development Research*, 1-9.
- Eskreis-Winkler, L., Shulman, E. P., Beal, S. A., & Duckworth, A. L. (2014). The grit effect: Predicting retention in the military, the work-place, school and marriage. *Frontiers in Psychology*, 5, 36.
- Estyn. (2019). *Guidance handbook for the inspection of primary schools*. Cardiff: Estyn.
- Estyn. (2019). *Guidance handbook for the inspection of secondary schools*. Cardiff: Estyn.
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14(4), 245-258.
- Fielding, M. (2001). Students as radical agents of change. *Journal of Educational Change*, 2, 123-41.
- Ford, B. Q., & Mauss, I. B. (2014). The paradoxical effects of pursuing positive emotion: When and why wanting to feel happy backfires. In J. Gruber & J. T. Moskowitz (Eds), *Positive emotion: Integrating the light sides and dark sides* (p. 363-381). Oxford University Press.
- Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist*, 56(3), 218-226.
- Fredrickson, B. L. (1998). What good are positive emotions? *Review of General Psychology*, 2(3), 300-319.

- Fredrickson, B. L., & Branigan, C. (2005). Positive emotions broaden the scope of attention and thought-action repertoires. *Cognition & Emotion, 19*(3), 313-332.
- Gable, S., Haidt, J. (2005). What and why is positive psychology. *Review of General Psychology, 9*(2), 103-110.
- Galdas, P. (2017). Revisiting bias in qualitative research: Reflections on its relationship with funding and impact. *International Journal of Qualitative Methods, 16*, 1-2.
- Garside, R. B., & Klimes-Dougan, B. (2002). Socialization of discrete negative emotions: Gender differences and links with psychological distress. *Sex Roles, 47*, 115-128.
- Gelinas, L., Pierce, R., Winkler, S., Cohen, I. G., Lynch, H. F., & Bierer, B. E. (2017). Using social media as a research recruitment tool: ethical issues and recommendations. *The American Journal of Bioethics, 17*(3), 3-14.
- George, L. S., & Park, C. L. (2016). Meaning in life as comprehension, purpose, and mattering: Toward integration and new research questions. *Review of General Psychology, 20*(3), 205-220.
- Gillett-Swan, J. K. (2014). Investigating tween children's capacity to conceptualise the complex issue of wellbeing. *Global Studies of Childhood, 4*(2), 64-76.
- Goddings A. L., Burnett Heyes S., Bird, G., Viner, R. M., & Blakemore, S. J. (2012). The relationship between puberty and social emotion processing. *Developmental Science 15* (6): 801–11.
- Goleman, D. (1996). Emotional intelligence. Why it can matter more than IQ. *Learning, 24*(6), 49-50.
- Greig, A., MacKay, T., Roffey, S., & Williams, A. (2016). Guest editorial: The changing context for mental health and wellbeing in schools. *Educational & Child Psychology, 33*(2), 6-11.
- Hall, S. (2010). Supporting mental health and wellbeing at a whole-school level: Listening to and acting upon children's views. *Emotional and behavioural difficulties, 15*(4), 323-339.

- Haver, A., Akerjordet, K., Caputi, P., Furunes, T., & Magee, C. (2015). Measuring mental well-being: A validation of the short Warwick–Edinburgh mental well-being scale in Norwegian and Swedish. *Scandinavian Journal of Public Health, 43*(7), 721-727.
- Heffernan, F. M. (2017). *'Constructions of resilience' A Q methodological study to explore how young women view resilience.* (Unpublished doctoral dissertation). University of Sheffield, UK.
- Health Care and Professions Council (HCPC) (2016). *Standard of conduct, performance and ethics.* London: HCPC.
- Holliman, A. J. (2013). *Introduction to educational psychology practice.* London; Routledge.
- Hughes, M. 2016. "Critical, respectful, person-centred: Q Methodology for educational psychologists. *Educational and Child Psychology, 33* (3): 63–75.
- Huppert, F. A. (2009). Psychological well-being: Evidence regarding its causes and consequences. *Applied Psychology: Health and Well-Being, 1*(2), 137-164.
- Johnson, B. & Turner, L. A. (2003). Data collection strategies in mixed methods research. In A. Tashakkori & C. Teddie (Eds.). *Handbook of mixed methods in social and behavioral research* (pp. 297-319). Thousand Oaks, CA: Sage
- Judge, T.A., Thoresen, C.J., Bono, J.E., & Patton, G.K. (2001). The job satisfaction–job performance relationship: A qualitative and quantitative review. *Psychological Bulletin, 127*, 376–407.
- Kahneman, D., Diener, E., & Schwarz, N. (1999). *Well-being: Foundations of hedonic psychology.* New York: Russell Sage Foundation.
- Kasser, T., Rosenblum, K. L., Sameroff, A. J., Deci, E. L., Niemiec, C. P., Ryan, R. M., Arnadottir, O., Bond, R., Dittmar, H., Dungan, N., & Hawks, S. (2014). Changes in materialism, changes in psychological well-being: Evidence from three longitudinal studies and an intervention experiment. *Motivation and Emotion, 38*(1), 1-22.

- Kellett, M., Forrest, R., Dent, N., & Ward, S. (2004). Just teach us the skills please, we'll do the rest: empowering ten-year olds as active researchers. *Children and Society, 18*: 329–43.
- Kern, M. L., Benson, L., Steinberg, E. A., & Steinberg, L. (2016). The EPOCH measure of adolescent well-being. *Psychological Assessment, 28*(5), 586.
- Kern, M. L., Waters, L. E., Adler, A., & White, M. A. (2015). A multidimensional approach to measuring well-being in students: Application of the PERMA framework. *The Journal of Positive Psychology, 10*(3), 262-271.
- Keyes, C. L. (2005). Mental illness and/or mental health? Investigating axioms of the complete state model of health. *Journal of Consulting and Clinical Psychology, 73*(3), 539.
- Khaw, D., & Kern, M. (2014). A cross-cultural comparison of the PERMA model of well-being. *Undergraduate Journal of Psychology at Berkeley, 8*(1), 10-23.
- Kim, H., Doiron, K., Warren, M., Donaldson, S. (2018). The international landscape of positive psychology research: A systematic review. *International Journal of Wellbeing, 8*(1), 50-70.
- King, P. E., Dowling, E. M., Mueller, R. A., White, K., Schultz, W. Osborn, P., Dickerson, E. Bobke, D. L., Lerner, R. M., Benson, P. L., & Scales, P. C. (2005). Thriving in adolescence: The voices of youth-serving practitioners, parents, and early and late adolescents. *Journal of Early Adolescence, 25*(1), 94-112.
- Kirby, P., Lanyon, C., Cronin, K., & Sinclair, R. (2003). *Building a culture of participation: Involving children and young people in policy, service planning, delivery and evaluation*: Nottingham: Department for Education and Skills.
- Laurent, J., Catanzaro, S. J., Joiner Jr, T. E., Rudolph, K. D., Potter, K. I., Lambert, S., & Gathright, T. (1999). A measure of positive and negative affect for children: scale development and preliminary validation. *Psychological Assessment, 11*(3), 326.

- Lerner, R.M., Almerigi, J.B., Theokas, C., & Lerner, J.V. (2005). Positive youth development: A view of the issues. *The Journal of Early Adolescence, 25(10)*, 10-16.
- Lerner, R. M., Lerner, J. V., Almerigi, J. Theokas, C., Naudeau, S., Gestsdottir, S., Naudeau, S., Jelacic, H., Alberts, A. Ma, L., Smith, L., Bobek, D., Richman-Raphael, D., Simpson, I. Christiansen, E. D., von Eye, A. (2005). Positive youth development, participation in community youth development programs, and community contributions of fifth grade adolescents: Findings from the first wave of the 4-H study of positive youth development. *Journal of Early Adolescence, 25(1)*, 17-71.
- Lerner, J. V., Phelps, E., Forman, Y., & Bowers, E. P. (2009). Positive youth development. In R. M. Lerner & L. Steinberg (Eds.), *Handbook of adolescent psychology. Individual bases of adolescent development* (pp. 524–585). Hoboken: Wiley.
- Linley, P. A., & Joseph, S. (2005). The human capacity for growth through adversity. *American Psychologist, 60(3)*, 262–263.
- Merten, E. C., Cwik, J. C., Margraf, J., & Schneider, S. (2017). Overdiagnosis of mental disorders in children and adolescents (in developed countries). *Child and adolescent psychiatry and mental health, 11(1)*, 1-11.
- MacDonald, G., & O'Hara, K. (1998). *Ten elements of mental health, its promotion and demotion: implications for practice*. Society of Health Education and Health Promotion Specialists.
- Macrynika, N., Miranda, R., & Soffer, A. (2018). Social connectedness, stressful life events, and self-injurious thoughts and behaviors among young adults. *Comprehensive Psychiatry, 80*, 140-149.
- Mackieson, P., Shlonsky, A., & Connolly, M. (2019). Increasing rigor and reducing bias in qualitative research: A document analysis of parliamentary debates using applied thematic analysis. *Qualitative Social Work, 18(6)*, 965-980.
- MarshallMorrisMcsorley. (n.d.). Including all learners: SEND. Retrieved on January 21, 2020, from <https://marshallmorrismcsorley.wordpress.com/including-all-learners-send/>

- Martela, F., & Steger, M. F. (2016). The three meanings of meaning in life: Distinguishing coherence, purpose, and significance. *The Journal of Positive Psychology, 11*(5), 531-545.
- Maslow, A. (1943), Theory of Human Motivation. *Psychological Review, 50*, 370-396.
- Mauss, I. B., Shallcross, A. J., Troy, A. S., John, O. P., Ferrer, E., Wilhelm, F. H., & Gross, J. J. (2011). Don't hide your happiness! Positive emotion dissociation, social connectedness, and psychological functioning. *Journal of Personality and Social Psychology, 100*(4), 738.
- McCloughen, A., Foster, K., Huws-Thomas, M., & Delgado, C. (2012). Physical health and wellbeing of emerging and young adults with mental illness: An integrative review of international literature. *International journal of Mental Health Nursing, 21*(3), 274-288.
- Mortimer, H. (2004) Hearing Children's Voices in the Early Years. *Support for Learning, 19*(4), 169-174.
- Nakamura, J., & Csikszentmihalyi, M. (2014). The concept of flow. In *Flow and the foundations of positive psychology* (pp. 239-263). Springer, Dordrecht.
- 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*. Cardiff: National Assembly for Wales Commission.
- National Health Service (NHS). (2020) *Mental Health of children and young people in England. 2020: Wave 1 follow up to the 2017 survey*. Surrey: Health and Social Care Information Centre.
- Niemiec, R.M. (2018). *Character strength interventions: A field guide for practitioners*. Abingdon; Hogrefe Publishing.
- Northern Ireland Executive. (2021). Children and young people's strategy. Retrieved January 14, 2021, from <https://www.education-ni.gov.uk/sites/default/files/publications/education/final-executive-children-and-young-people%27s-strategy-2020-2030.pdf>

- Ofsted. (2021) Guidance: School inspection handbook. Retrieved May 15, 2021, from <https://www.gov.uk/government/publications/school-inspection-handbook-eif/school-inspection-handbook#print-or-save-to-pdf>
- Olsson, C. A., McGee, R., Nada-Raja, S., & Williams, S. M. (2013). A 32-year longitudinal study of child and adolescent pathways to well-being in adulthood. *Journal of Happiness Studies, 14*, 1069–1083.
- Osborne, C. & Burton, S. (2014). Emotional literacy support assistant's views on supervision provided by educational psychologists: What EPs can learn from group supervision. *Educational Psychology in Practice, 30*(2), 139-155.
- O'Neill, S. (1999). Flow theory and the development of musical performance skills. *Bulletin of the council for Research in Music Education, 129-134*.
- Parker, R., & Levinson, M.P. (2018). Student behaviour, motivation and the potential of attachment aware schools to redefine the landscape. *British Educational Research Journal, 44*(5), 875-896.
- Peterson, C., & Seligman, M.E.P. (2004). *Character strengths and virtues: A handbook and classification*. New York: Oxford University Press.
- Patterson, M.E. & Williams, D.R. (2002). *Collecting and Analysing Qualitative Data: hermeneutic principles, methods and case examples*. Champaign: Sagamore.
- Roberts, F. (2020). *For flourishing's sake: Using positive education to support character development and well-being*. London: Jessica Kingsley Publishers.
- Roberts, K., Dowell, A., & Nie, J. B. (2019). Attempting rigour and replicability in thematic analysis of qualitative research data; a case study of codebook development. *BMC Medical Research Methodology, 19*(1), 1-8.

- Robertson-Kraft, C., & Duckworth, A. L. (2014). True grit: Trait-level perseverance and passion for long-term goals predicts effectiveness and retention among novice teachers. *Teachers College Record, 116*(3).
- Roepke, A. M., Jayawickreme, E., & Riffle, O. M. (2014). Meaning and health: A systematic review. *Applied Research in Quality of Life, 9*(4), 1055-1079.
- Ruddock, J. and Flutter, J. 2004. *How to improve your school: Giving pupils a voice*. London: Continuum.
- Ryan R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American psychologist, 55*(1), 68.
- Ryff, C.D. (1889) Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology, 57*(6), 1069-1081.
- Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology, 69*(4), 719.
- Seligman, M. E., Ernst, R. M., Gillham, J., Reivich, K., & Linkins, M. (2009). Positive education: Positive psychology and classroom interventions. *Oxford Review of Education, 35*(3), 293-311.
- Seligman, M. (2002). *Authentic happiness: Using the new positive psychology to realize your potential for lasting fulfilment*. New York: Free Press.
- Seligman, M. (1994). *What you can change & what you can't*. New York: Knopf.
- Seligman, M., Rashid, T., & Parks, A. C. (2006). Positive psychotherapy. *American Psychologist, 61*(8), 774.
- Seligman, M., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist, 55*(1), 5-14.

- Sheldon, K. M., Ryan, R. M., Deci, E. L., & Kasser, T. (2004). The independent effects of goal contents and motives on well-being: It's both what you pursue and why you pursue it. *Personality and Social Psychology Bulletin*, 30(4), 475-486.
- Sheldon, K. M., & Houser-Marko, L. (2001). Self-concordance, goal attainment, and the pursuit of happiness: Can there be an upward spiral? *Journal of Personality and Social Psychology*, 80(1), 152.
- Shinebourne, P. (2009). Using Q method in qualitative research. *International Journal of Qualitative Methods*, 8(1), 93-97.
- Shoshani, A., & Slone, M. (2017). Positive education for young children: effects of a positive psychology intervention for preschool children on subjective well-being and learning behaviors. *Frontiers in Psychology*, 8, 1866.
- Shonkoff, J. P., Garner, A. S., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., & Committee on Early Childhood, Adoption, and Dependent Care. (2012). The lifelong effects of early childhood adversity and toxic stress. *Paediatrics*, 129(1), 232-246.
- Snyder, C. R., Hoza, B., Pelham, W. E., Rapoff, M., Ware, L., & Danovsky, M. (1997). The development and validation of the children's hope scale. *Journal of Paediatric Psychology*, 22, 399-421.
- Sommer, D., Samuelsson, I.P., & Hundeide, K. (2010). *Child Perspectives and Children's Perspectives in Theory and Practice*. London; Springer Link.
- Steger, M. F. (2017). Meaning in life and wellbeing. *Wellbeing, Recovery and Mental Health*, 75-85.
- Stephenson, W. (2014). General theory of communication. *Operant Subjectivity: The International Journal of Q Methodology*, 37(3), 38-56
- Student Health and Research Network. (2019) *Student Wellbeing in Wales: Initial findings from the 2017/18 Health Behaviour in School-aged Children Survey and School Health Research Network*

*Student Health and Wellbeing Survey*. [https://shrn.org.uk/wp-content/uploads/2019/05/Wellbeing-Briefing-Paper\\_FINAL\\_070319.pdf](https://shrn.org.uk/wp-content/uploads/2019/05/Wellbeing-Briefing-Paper_FINAL_070319.pdf)

Stiglitz, J. E., Sen, A., & Fitoussi, J. P. (2009). Report by the commission on the measurement of economic performance and social progress. Retrieved on February 24 2021 from <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.215.58&rep=rep1&type=pdf>

Suh, E. M., & Oishi, S. (2002). Subjective well-being across cultures. *Online Readings in Psychology and Culture, 10*(1), 1-11.

Snyder, C.R., & Lopez, S.J. (2009). *Oxford Handbook of Positive Psychology*. New York, Oxford University Press.

Tay, L., Tan, K., Diener, E., & Gonzalez, E. (2013). Social relations, health behaviours, and health outcomes: A survey and synthesis. *Applied Psychology Health and Wellbeing, 5*(1), 28-78.

Taylor, C. S., Smith, P. R., Taylor, V. A., von Eye, A., Lerner, R. M., Balsano, A. B., Anderson, A. M., Banik, R., Almerigi, J. (2005). Individual and ecological assets and thriving among African American adolescent male gang and community-based organization members: A report from Wave 3 of the Overcoming the Odds Study. *Journal of Early Adolescence, 25*(1), 72- 93.

The Scottish Government. (2013). Supporting young people's health and wellbeing: A summary of Scottish government policy. Edinburgh: The Scottish Government.

The Wellbeing and Resilience Centre. (n.d). PERMA+ Positive emotion, engagement, relationships, meaning accomplishment + optimism, physical activity, nutrition and sleep. Retrieved on January 14 2021 from <https://www.wellbeingandresilience.com/sites/swrc5/media/pdf/permaandcentreoverview.pdf>

Uman, L. S. (2011). Systematic reviews and meta-analyses. *Journal of the Canadian Academy of Child and Adolescent Psychiatry, 20*(1), 57.

- UNICEF (1989). The united nations convention on the rights of the child. London: UNICEF.
- United Nations (1989) *United Nations Convention on the Rights of the Child*. Geneva: United Nations.
- Van Exel, J., & De Graaf, G. (2005). *Q methodology: A sneak preview*. Amsterdam: Department of Health Policy & Management.
- Vella-Broderick, D. (2011). Positive education: Creating flourishing students, staff and schools. *In Psych*, 10–13.
- Veenhoven, R. (1997). Advances in understanding happiness. *Revue Québécoise de Psychologie*, 18(2), 29-74.
- Viner, R. M., Allen, N. B., & Patton, G. C. (2017). Puberty, developmental processes, and health interventions. *Child and adolescent health and development*, 8, 1841.
- Waters, L., Algoe, S. B., Dutton, J., Emmons, R., Fredrickson, B. L., Heaphy, E., ... & Steger, M. (2021). Positive psychology in a pandemic: buffering, bolstering, and building mental health. *The Journal of Positive Psychology*, 1-21.
- Wang, Y., Chen, J., & Yue, Z. (2017). Positive emotion facilitates cognitive flexibility: An fMRI study. *Frontiers in Psychology*, 8, 18-32.
- Welsh Assembly Government (WAG) (2001). *Child and adolescent mental health services: Everybody's business*. Cardiff: WAG.
- Westerhof, G. J., & Keyes, C. L. (2010). Mental illness and mental health: The two continua model across the lifespan. *Journal of adult development*, 17(2), 110-119.
- World Health Organisation [WHO]. 1986. *The Ottawa charter on health promotion*. Ottawa: World Health Organisation.
- World Health Organization WHO timeline - Covid-19. Retrieved 01.02.21 from <https://www.who.int/news/item/29-06-2020-covidtimeline>

World Health Organization (2005). *Promoting mental health: Concepts, emerging evidence, practice*.

Geneva: WHO.

Wright, D. (2020). *Implementing Effective Positive Psychology Interventions to Support the Well-Being of Young People in Schools: A Meta-Analysis of Randomised and Non-Randomised Interventions and a Q Study of Educational Psychologists' Perceptions Regarding Effective Implementation* (Unpublished doctoral thesis). Cardiff University, Cardiff, UK.

Xie, P., Kranzler, H. R., Zhang, H., Oslin, D., Anton, R. F., Farrer, L. A., & Gelernter, J. (2012). Childhood Adversity Increases Risk for Nicotine Dependence and Interacts with  $\alpha 5$  Nicotinic Acetylcholine Receptor Genotype Specifically in Males. *Neuropsychopharmacology*, *37*(3), 669-676.

Yakushko, o., & Blodgett, E. (2021). Negative reflections about positive psychology: On constraining the field to a focus on happiness and personal achievement. *Journal of Humanistic Psychology*, *6*(1), 104-131.



**Pupil perceptions of wellbeing: A positive psychology perspective  
during a pandemic**

**Part Two: Major Empirical Study**

**Word Count: 10,073**

## 1. Abstract

Positive Psychology has gained interest amongst applied psychologists, including Educational, Psychologists (EPs), as a means of promoting wellbeing in young people. Seligman's (2011) PERMA Model has become central to the application of Positive Psychology in practice. However, research to date has identified variations in the 'fit' of the PERMA Model (Seligman, 2011) between different populations, including young people (Kern et al., 2015)

This study aimed to elicit young people's constructions of what is important to their wellbeing and further explore, through utilising Q methodology, how their constructions relate to those presented within the PERMA Model (Seligman, 2011). In the first phase of this study 30 young people completed an online questionnaire asking them what they believe is important to their wellbeing. In the second phase responses were combined with PERMA Profiler (Butler & Kern, 2016) items and presented to 14 young people who sorted the statements in order of importance to them. In addition, during the first phase the 30 participants were asked whether they felt that the Coronavirus (Covid-19) pandemic had impacted their views of what they consider important to their wellbeing and responses analysed using Thematic Analysis (Braun & Clarke, 2006).

Whilst participants identified PERMA Model (Seligman, 2011) elements as important to their wellbeing, they also identified additional elements (e.g. autonomy, safety, health). Further, Principle Component Analysis (PCA) indicated that the structure of the PERMA Model (Seligman, 2011) may not best reflect how young people conceptualise wellbeing. Thematic Analysis (Braun & Clarke, 2006) offered insight into how the findings may be understood in the context of the pandemic.

Reflections are made in relation to the application of the PERMA Model (Seligman, 2011) to understanding and promote the wellbeing of young people in practice as well as the value of Q methodology in both research and practice.

*Keywords:* positive psychology; PERMA Model; wellbeing; Q methodology; young people, adolescents; pupil voice; coronavirus; pandemic.

## 2. Introduction

### 2.1 Background

The statistics surrounding the mental health and wellbeing of young people (e.g. Young Minds, 2017; World Health Organisation [WHO], 2020) have prompted a growing interest in ways to support this population within the United Kingdom (UK). At a national level, policy documents have been developed outlining the government's agenda for supporting social, emotional, and psychological development in young people (Department for Education [DfE], 2018; National Assembly for Wales [NAW], 2018, Welsh Assembly Government [WAG] 2001; The Scottish Government, 2013; Northern Ireland Executive, 2021), identifying schools as well placed to provide a context in which this can be addressed (DfE, 2015; Department for Education and Skills [DfES], 2003). As helping professionals within the educational context, Educational Psychologists (EPs) are considered to possess the skills to support schools in their promotion of wellbeing, bringing evidenced-based psychology (DfE, 2011; The National Institute of Clinical Excellence [NICE], 2009; Greig et al., 2016; Welsh Government, 2001) into schools. One such approach utilised in practice is Positive Psychology.

### 2.2 Positive Psychology: The PERMA Model

In recent years, the Positive Psychology movement has gained interest amongst practitioners of applied psychology as a means of promoting wellbeing and preventing mental ill health (Noble & McGrath, 2015). Whilst several models and approaches are evident within the literature and practice, Seligman's (2011) PERMA Model has become a seminal reference for those applying Positive Psychology. Seligman (2011) posited that there are five elements, each contributing to the extent to which one 'flourishes' (see Seligman, 2011, for a full review) including positive emotions, engagement, relationships, meaning and accomplishment (as summarised by the acronym PERMA).

Seligman (2011) proposed that to be eligible for inclusion within this model, elements must meet the following three criteria:

- It must contribute to wellbeing;
- It must be pursued for its own sake, and not to seek gratification of any other element; and
- It must be independent from any other element in its definition and measurement (p. 16).

The PERMA Model (Seligman, 2011) provides practitioners with a means of conceptualising wellbeing, with the inclusion of elements primarily based on research evidencing advantageous outcomes (e.g. Diener & Chan., 2011; Mauss, et al., 2011; Wang, et al., 2017; Huppert, 2009; Nakamura, 1988; Carli, et al., 1988, Csikszentmihalyi, et al., 1993; Macrynika, et al., 2018; Roepke, et al., 2014; Arya & Lal, 2018; Oriol, et al., 2017).

### **2.3 The PERMA Model as Measure of Wellbeing**

The growing popularity of the PERMA Model (Seligman, 2011) has seen a rise in literature devoted to this model, focusing on the ways in which this can be measured, namely through the PERMA Profiler (Butler and Kern, 2016;). Whilst this research has contributed a valuable resource for both researchers and practitioners, variations in the fit of the PERMA Model (Seligman, 2011) between certain populations, namely culture and age, have been identified. Investigations have identified that the five-factor PERMA Model (Seligman, 2011) may not best represent wellbeing in specific populations, such as young people. For example, when considering the fit of this model in specific populations, three-factor (Malaysian participants; Khaw & Kern, 2014) and four-factor (young people; Kern et al., 2015) structures have been considered more appropriate, with variations identified between the way in which PERMA constructs overlap. Further, studies have identified that when given the opportunity to contribute, additional constructs (i.e. health) beyond those specified in the PERMA Model (Seligman, 2011) may be identified (Khaw & Kern, 2014).

Variations in the 'fit' of the PERMA-structure to young people are of particular importance given the prevalence of Positive Psychology within educational settings in the form of Positive Education, with the PERMA Model (Seligman, 2011) often informing the foundations for Positive Psychological Interventions (PPIs) (Shoshani & Slone, 2017). The limited efficacy identified in PPIs further question the generalisability of the PERMA Model (Seligman, 2011) to young people (Bolier et al., 2013; Wright; 2020) and exemplify value in facilitating the voice of pupils in understanding how wellbeing is constructed from their perspective (Ciarrochi et al., 2016).

### **2.4 Pupil Participation in the Exploration of Wellbeing**

Acknowledging the voice of young people has become a priority over recent years (Clark, et al., 2003; Kirby et al., 2003; Ruddock & Flutter, 2004; United Nations, 1989; DfES, 2003; DFE 2014), with increasing reference to the need to include young people in matters important to them.

Fielding (2001) offers a means for observing levels at which young people can be involved, referring to students as 'data sources', 'active respondents', 'co-researchers' and 'researchers'. These levels can be seen to influence methods chosen to explore wellbeing that vary in their deductive and inductive approaches. According to Creswell and Plano Clark (2007) deductive research "*works from the 'top down', from theory to hypothesis to data, to add to or contradict theory*" (p.23) where-as inductive approaches refer to "*bottom-up, using the participant's views to build broader themes and generate a theory, interconnecting the themes*" (Creswell & Plano Clark, 2007, p. 23).

### **2.4.1 Qualitative and Quantitative Designs**

Quantitative methods have illustrated the need to go beyond deductive methods that perceive children as 'data sources' (Fielding, 2001) and passive recipients of change (Student Health and Research Network [SHRN], 2013). Whilst quantitative methods allow for objective reflections and data that can be used to inform intervention, they are limited in their ability to obtain subjective experiences that can be used in understanding wellbeing from the perspective of young people (Ahmad et al., 2019). However, qualitative approaches have facilitated the voice of young people and their active involvement in the research process. Utilising qualitative methodologies, researchers have been able to provide valuable reflections about the way young people perceive wellbeing and how these can be used to adapt practice (e.g. Hall, 2010). These explorations have offered inductive support for the inclusion of some elements within the PERMA Model (Seligman, 2011), such as those associated with social and psychological wellbeing (Hall, 2010; Gillet-Swan, 2014), but also identified elements that are not recognised, such as health (Gillet-Swan, 2014).

Despite the observed advantages of qualitative methodologies, it is argued that their often remains a deductive element in explorations through a theoretical lens and/or potential for researcher bias through interpretations.

### **2.4.2 Mixed Method Designs**

Mixed method approaches can be used to address some of the observed shortcomings of purely qualitative and quantitative designs. Mixed research aims to use aspects of qualitative and quantitative, subsequently offering a means for combining methodological strengths and mediating the weaknesses from both in a way that is complementary (Johnson & Turner, 2003). Combining these two research methods provides different sorts of knowledge that may not be possible when using a single method alone. According to Berk et al. (2015) combining qualitative and quantitative research methods "*may increase the potential to detect meaningful patterns and other phenomena that might otherwise be missed*" (p.65). Subsequently, when used in combination, qualitative and quantitative data are considered to produce a more complete analysis (Creswell et al., 2004).

This is exemplified by Anderson and Graham (2016) who used focus groups to identify aspects relating to wellbeing, and quantitative questionnaires to explore the two most important elements to primary and secondary aged pupils. This study offered reflections on the PERMA Model (Seligman, 2011) identifying similarities between what young people identified and this model (i.e. relationships and positive emotions). However, young people also identified additional constructs (i.e. safety, health, autonomy and respect), with certain elements within the PERMA Model (Seligman, 2011) absent (i.e. achievement, engagement and meaning). Further, Anderson and Graham's (2016)

findings indicated that for many, self-identified constructs (such as safety) were more important than those specified by the PERMA Model (Seligman, 2011).

Quantitative data offered an opportunity to identify how these might be organised in terms of their importance for young people, with results illustrating differences between primary and secondary pupils. For example, elements such as respect and privacy were identified as more important to secondary pupils (Anderson & Graham, 2016).

The changes that occur during adolescence serve as a means for understanding the differences observed between age groups, with rapid development of the brain, body and behaviour occurring over the course of puberty (Viner et al., 2017). Further, adolescence is accompanied by social changes important in the transition between childhood and adulthood including increased independence and new peer groups, with family relationships becoming less of a determinant of wellbeing, and peers, schools, and workplaces becoming stronger influences (Viner et al., 2012). This stage in life often coincides with the transition to secondary school and offers an explanation of the differences between what primary and secondary pupils identify as important. This highlights the need for research to consider these as separate populations when exploring what is important to them.

However, the imposition of a theoretical model during initial discussions during Anderson and Graham's (2016) study (i.e. Recognition Theory; Honneth, 2007, as cited in Anderson & Graham, 2016) exemplifies the need for research that is able to offer an inductive approach that puts young people at the heart of the research process. Further, as not all constructs were prioritised in this study it is difficult to make direct inferences to models utilised in practice, such as the PERMA Model (Seligman, 2011). Therefore, there is value in future research that utilises methodology that not only allows for inductive explorations of wellbeing, but can also offer an opportunity to consider how all elements considered important are organised.

**Q Methodology.** Q methodology is considered a 'quali-quantillogical' approach, where subjective experiences are sought and then ranked by participants to provide qualitative data based on quantitative analysis (Lundberg et al., 2020). This typically involves the researcher collecting ideas about a subject and refining them to represent the viewpoints obtained. In a second stage, participants are presented with the array of statements and are asked to sort them in accordance with particular instructions. The sorts are then subject to analysis that offers a quantitative basis for qualitative interpretation.

Q methodology is considered to minimise researcher subjectivity as participants are centralised in the sorting process, with analysis offering a means for interpretation based on the participant's sorts rather than researcher inferences (Stephenson, 2014). Whilst there remains potential for the researcher's own biases and assumptions to influence decisions made throughout Q methodology, such as the refinement of statements, the process increases researcher 'distance' through the use of objective techniques to analyse participant's subjective data (Grover, 2013). Subsequently, Q methodology may offer a means of exploring the views of young people inductively, prioritising their constructions and minimising researcher influence and adult interpretations.

Q methodology offers advantages in balancing subjectivity and objectivity within research, however, to date is seldom used within a youth population, particularly in relation to their wellbeing (Lundberg et al., 2020; Heffernan, 2017; Atkinson & Rowley, 2019).

### **2.5 Wellbeing in the Context of a Pandemic**

Wellbeing is recognised to be a dynamic and fluctuating construct (The New Economics Foundation (NEF; 2009), dependent on one's external circumstances and internal resources (Dodge et al., 2012). It is argued that what is considered important to wellbeing is likely to be influenced by systemic changes (Bronfenbrenner, 1979), influencing one's needs at any one time (Maslow, 1943).

The ongoing nature of the Coronavirus (Covid-19) pandemic has brought significant changes to the functioning of individuals, families and society as a whole. Emerging research relating to the Covid-19 pandemic has illustrated the changes in young people's wellbeing during this time as well changes in their anxieties about safety, reduction in autonomy, social interaction, and engagement in learning. However, Rogers et al. (2020) also identified positive impact as a result of the pandemic, with young people identifying positive changes such as quality time with family, more time to themselves, and improved friendships. These findings mirror previous explorations of wellbeing following pandemics (Lau et al., 2006; Li et al., 2020) and the potential for post-traumatic growth.

Therefore, whilst it is recognised that environmental factors are likely to influence wellbeing generally, it is possible that this considerable systemic change may influence what is identified and prioritised as important to young people (Rogers et al., 2020; Felitti et al., 1998).

### **2.6 The Present Research**

The current study will utilise Q methodology to explore what young people consider important to their wellbeing. First, the views of young people will be elicited without constraints imposed by a theoretical model. These ideas will then be ordered alongside statements from the PERMA Profiler to understand how young people's views compare to the PERMA Model of wellbeing. Further, young

people's perceptions of about the Covid-19 will be acknowledged in interpreting what they consider important.

Given the multi-faceted nature of this investigation, this study aimed to address the following three research questions:

- *Research Question 1:* What do young people consider important to their wellbeing?
- *Research Question 2:* How do young people prioritise elements considered important to their wellbeing in comparison to the PERMA Model?
- *Research Question 3:* How do young people perceive the Covid-19 pandemic has influenced their views about wellbeing?

### 3. Methodology

#### 3.1 Research Design

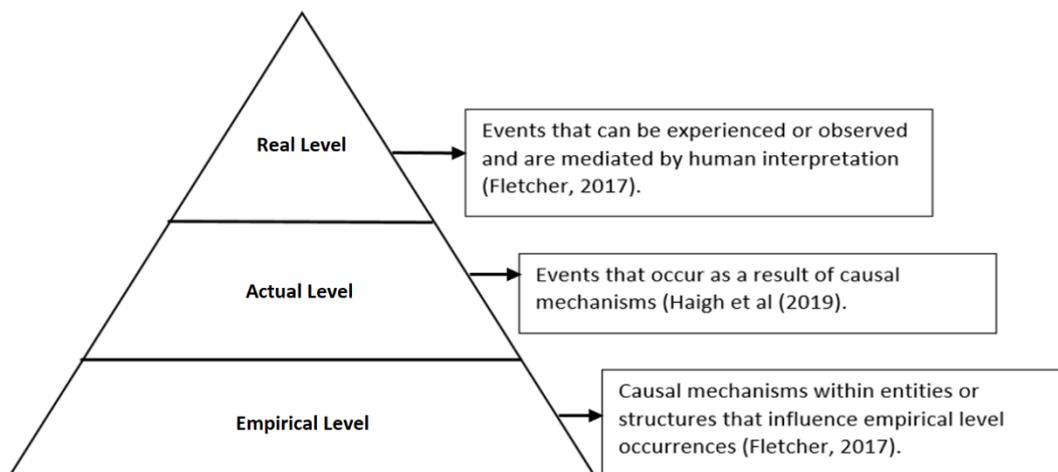
The present study used an online questionnaire to gather young people’s views, utilising Q methodology in answering research questions 1 and 2 and Thematic Analysis (Braun & Clark, 2006) to investigate question 3. The following section begins by addressing the ontological and epistemological stance of the research in relation to the methodology employed. It will elaborate the procedure and conclude with detail of data analysis and interpretation. Finally, the ethical considerations relevant to this study and the means by which these were addressed will be outlined.

#### 3.1.2 Ontology and Epistemology

This research sits within a critical realist research paradigm (Bhaskar, 2008). One of the key assumptions of critical realism is that reality is stratified into three levels; empirical, actual, and real (see Figure 5). It is this layered assumption about reality that leads to the use of multiple methods in understanding social events as they pertain to each layer of reality (Fletcher, 2017). These layers are the grounding rationale behind the use of Q methodology and Thematic Analysis (Braun & Clark, 2006) within the present study.

Figure 5

*The Three Domains of Critical Realism*



### 3.2 Q Methodology

Q methodology has been referred to as a ‘qualiquantological’ method (Stenner & Stainton Rogers, 2004) that bridges the gap between qualitative and quantitative designs, combining the strengths of both (Brown, 1996). This methodology allows for an exploration of viewpoints through a structured framework (Stephenson, 1935) and is concerned with identifying subjectivity and shared perspectives whilst providing a means for making these meanings objective (McKeown & Thomas, 2013). Many guides have been published in supporting researcher’s use of Q methodology (Brown, 1993; Van Exel & de Graaf, 2005; McKeown & Thomas, 2013), however, the process can be summarised by the following six steps (Lee, 2017) as displayed in Table 4:

**Table 4**

*A Summary of Q Methodology Processes by Stage*

Step	Process	Stage
1	Collection of statements relating to a particular topic of interest (also referred to as the ‘concourse’);	Stage One
2	Construction of sample statements (Q Set)	
3	Identification of participants (P Set)	Stage Two
4	Rank ordering statements (Q-Sort)	
5	Factor analysis	
6	Interpretation of the data	

Q methodology can be seen as taking place within two stages. The first stage involves the identification and refinement of perspectives on a given topic into a set of statements. Whilst Q methodology accepts that the concourse on a given topic is infinite, the final Q Set aims to be composed of statements representative of the larger concourse (McKeown & Thomas, 2013). The second stage is where measurement is made according to an instruction (i.e. what is most or least important to your wellbeing) and where meaning can be attributed (McKeown & Thomas, 2013).

The following provides a detailed description of participant selection, materials and the procedures employed throughout each stage of the process.

#### **3.2.1 Stage One: Developing and Refining the Concourse**

The researcher utilised elements from both naturalistic and ready-made sampling to explore the discourse present within the youth population whilst considering existent theoretical constructions (Watts and Stenner, 2012). The naturalistic sampling consisted of collecting self-referent statements

from young people themselves, whereas the ready-made sampling consisted of items within the PERMA Profiler (Butler & Kern, 2016).

### **3.2.2 Stage One: Participants**

Purposeful sampling (Watts and Stenner, 2012; McKeown & Thomas, 1988) was utilised within the present study as young people within secondary school settings were considered to have particular relevance to the research aims (Watts and Stenner, 2012).

Subsequently, 30 young people aged 11-19 participated in the stage 1 of this study, of which 29 provided responses to the Covid-19 related question (question 3). All participants were attendees of secondary schools within South Wales, UK. As the purpose of Q methodology is to explore perspectives within a given population, with no claims made about the generalisability of viewpoints (Lee, 2017), no other demographic information was obtained.

### **3.2.3 Stage One: Materials**

Participants were presented with an online questionnaire via Qualtrics comprising of three questions:

- 1) What is important for your wellbeing or happiness?
- 2) What makes life meaningful to you?
- 3) What (if any) changes do you think Covid-19 has made to what you think is important to wellbeing?

The first two questions were taken from Khaw and Kern (2014) in their cross cultural investigation of the PERMA Profiler (Butler & Kern, 2016) and aimed to elicit young people's perceptions of wellbeing without the imposition of theoretical models. The third question was developed to answer research question 3 and aimed to elicit responses relating to the extent that the Covid-19 pandemic had influenced young people's perceptions of wellbeing. This aimed to be used alongside the interpretation of factors in part two of this study.

### **3.2.4 Stage One: Procedures**

**Questionnaire Distribution.** Once gatekeeper consent had been gained (see Appendix A) schools were contacted and asked to share a link to an online version of the parental/carer information and consent form (via Qualtrics) (see Appendix B). A total of 3 secondary schools sent emails and texts to parents of young people aged between 11 and 19 between June and July 2020. As a result of the ongoing global pandemic, this method of distribution became difficult due to changing priorities within schools, including use of communication between parents/carers. Subsequently, online social

media platforms were utilised as a means of distributing the consent and to raise awareness of the study (i.e. Facebook/ Twitter) between September and December 2020 (see Appendix C).

On completion of the consent form, parents/carers were asked to provide their and their child's email addresses and to indicate their willingness to be contacted about part two of the study. On completion, a copy of the link to the online questionnaire was sent to both the parent's email address (for their information) and to the child's email address (for completion).

Young people accessed the questionnaire via Qualtrics and were provided with information outlining what participation would involve and a consent form (Appendix D) to indicate their willingness to take part. On completion of the questionnaire, participants were presented with an online version of a debrief form (Appendix E) outlining the purpose of this stage of the study.

**Questionnaire Qualitative Analysis.** Participant responses relating to question 3 (the impact of the Covid-19 pandemic on perceptions of wellbeing) were analysed through Braun and Clark's (2006) six stage Thematic Analysis process. An inductive approach was employed to identify themes within responses.

**Refining the Q Set.** In Q methodology the Q Set aims to approximate the range of viewpoints (McKeown & Thomas, 2013) therefore, data collection is recommended to cease at the point of saturation, when no new statements are being generated. This, alongside a guide of 30-50 participants as recommended by McKeown & Thomas (2013), formed the rationale for closing the questionnaire at 30 responses.

Within the present study a structured, inductive approach was taken to generate statements from participant responses to questions 1 and 2. This involved the researcher identifying themes, using the data to generate statements rather than impose any particular theory to guide the process (see Appendix F). At this stage, several themes identified by young people were considered to be consistent with all those represented by the PERMA Model (Seligman, 2011). Therefore, once the 15 PERMA Profiler (Butler and Kern, 2016) questions were converted into statements (see Appendix G) they were interspersed with the statements generated by young people.

Once all responses were converted into statements, duplicates were removed, and reworded where grammatically incorrect or difficult to read (see Appendix H). Where items from the PERMA Profiler (Butler & Kern, 2016) were considered to overlap with the content of statements generated by participants, the wording of participants took precedent as this was felt to best represent the viewpoints of young people (Brown, 1993).

In Q methodology, there are no set criteria for the number of statements that should be included. However, Stainton Rogers (1995) states that a range of between 40-80 statements ensures a broad enough coverage without being impractical. 58 statements were identified at the initial stage of statement conversion and duplication removal, including converted PERMA Profiler (Butler & Kern, 2016) statements (Butler & Kern, 2016). However, due to the age range of participants, this was considered to be excessive and a second stage of filtering was administered where statements were reassessed for duplication and similarities in content (see Appendix I). Additionally, statements were further amended so that they were readable following the sentence starter “*It is important to my wellbeing that I...*”. This aimed to increase the accessibility of the task, by giving an instruction to which participants could refer.

This resulted in a total of 43 statements which were reviewed by a practicing Educational Psychologist and within a pilot with a young person (aged 11). The main purpose of this was to assess the accessibility of the task and to further refine statements. Based on feedback and reflections throughout this stage (see Appendix J), the statements were further refined and adjustments were made to the presentation of the task. This process resulted in 38 statements included within the final Q Set. From the initial 15 PERMA Profiler (Butler & Kern, 2016) statements, a total of 6 remained after the refinement process, with the content of 9 considered to overlap with young people’s responses which took precedent.

The final list of statements were assigned a random number so to ensure statements with the same theme were distributed throughout the activity. Statements that were used in the Q Set are displayed in Table 5.

**Table 5**

*Q Set Statements from Young People’s Responses and PERMA Profiler Items (Butler & Kern, 2016)*

<b>Statement Number (N)</b>	<b>Statement (It is important for my wellbeing that I...)</b>	<b>Theme</b>	<b>Source</b>
1	Am trusted to make my own choices	Autonomy	Young Person
2	Spend time with family	Relationships	Young Person
3	Have time to myself	Autonomy	Young Person
4	Have control over my wellbeing	Autonomy	Young Person
5	Make sure the things I do are meaningful and worth my time	Meaning	PERMA Profiler

6	Spend time with friends	Relationships	Young Person
7	Have my own space	Autonomy	Young Person
8	Know about important world issues (e.g. politics social justice and equality)	Meaning	Young Person
9	Feel like I am doing well	Achievement	Young Person
10	Am listened to	Respect	Young Person
11	Spend time outside	Nature/Travel	Young Person
12	Feel happy and fulfilled	Positive Emotion	Young Person
13	Eat when I want to	Food	Young Person
14	Take part in activities (e.g. sport/ music lessons)	Engagement	Young Person
15	Feel focused on what I'm doing	Engagement	PERMA Profiler
16	Reach my own goals	Achievement	Young Person
17	Am able to spend time on things I enjoy (e.g. playing games, listening to music, watching films)	Engagement	Young Person
18	Am appreciated	Respect	Young Person
19	Feel like I'm doing things right	Achievement	Young Person
20	Have chocolate or sweet foods	Food	Young Person
21	Make new memories	Engagement	Young Person
22	Feel happy with the relationships I have (e.g. friendships/family)	Relationships	PERMA Profiler
23	Am able to cope with what I have to do	Achievement	PERMA Profiler
24	Feel safe	Safety	Young Person
25	Have fun	Positive Emotion	Young Person
26	Feel grateful for what I have	Positive Emotion	PERMA Profiler
27	Make others happy (e.g. Being kind and looking after others)	Relationships	Young Person
28	Others show me respect	Respect	Young Person
29	Make new relationships with people	Relationships	Young Person
30	Feel excited and interested in things	Engagement	PERMA Profiler

31	Learn in school	Engagement	Young Person
32	Try new foods	Food	Young Person
33	Have supportive and caring people around me	Relationships	Young Person
34	Feel loved	Relationships	Young Person
35	Have enough sleep	Health	Young Person
36	Am involved in important world issues (e.g. politics, social justice and equality)	Meaning	Young Person
37	Am able to travel	Nature/Travel	Young Person
38	Take part in exercise and keep fit	Health	Young Person

### 3.3 Stage Two: Q-Sort Activity

#### 3.3.1 Stage Two: Participants

There are no set criteria for the number of participants (P Set) that are required to take part in the Q-Sort activity. However, there appears to be general consensus in the literature a P-Set of 12-40 is acceptable, whilst ensuring that the number of participants does not outweigh the number of statements within the Q Set (Watts & Stenner, 2012).

Subsequently, a total of 14 young people aged 11-19 took part in the Q-Sort.

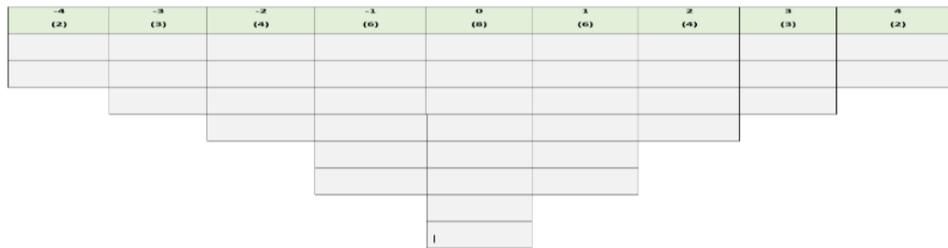
#### 3.3.2 Part Two: Materials

The Q-Sort activity was accessed via the online platform Q-Sortware (available at [www.qsortware.net](http://www.qsortware.net)). In the initial sorting activity, participants were asked to categorise statements based on their perceived importance (*'no, not important to my wellbeing'*, *'kind of important to my wellbeing'* and *'yes, very important to my wellbeing'*). Each statement was presented as *"It is important to my wellbeing that I [STATEMENT]"*.

On completion, participants were then presented with the Q Sort activity. It is recommended by Brown (1980) that a 9-point distribution is used for Q Sets less than 40, therefore, a -4 to +4 grid format (see Figure 7) was considered most appropriate for this activity. During the Q Sort design, each distribution point (e.g. -4, -3, -2) was allocated a set number of responses, representing a quasi-normal distribution (Brown, 1993).

**Figure 6**

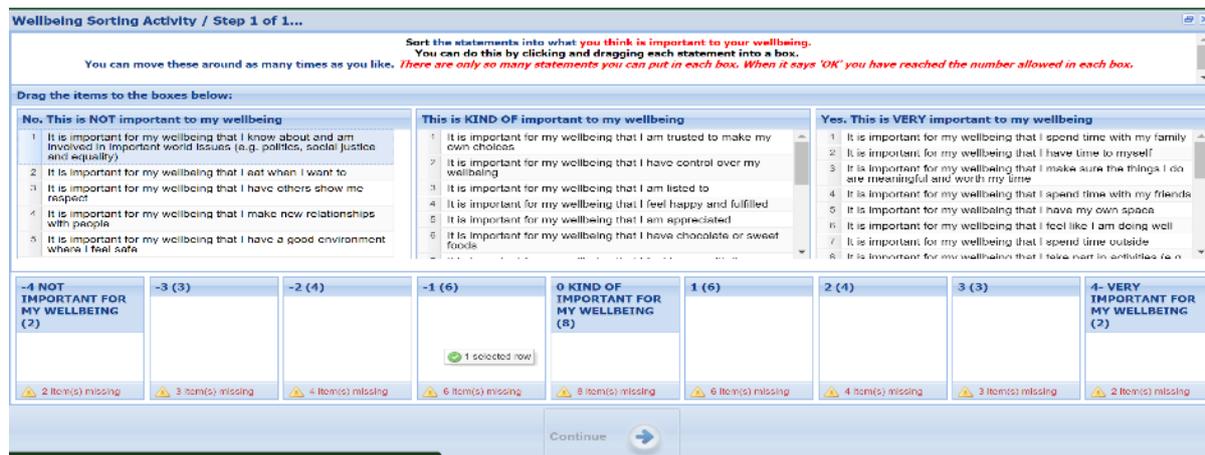
*Quasi-Normal Distribution used within the Present Study*



The number of statements required were displayed to participants during the activity. An example of the Q Sort Interface is displayed in Figure 7.

**Figure 7**

*Q-Sort Online Interface*



**3.3.3 Part Two: Procedure**

Parental/carer consent was obtained prior to completion of the Q Sort (see Appendix K). Initially, this involved contacting those who had consented to be contacted from part one of this study and providing a link to parental and young person consent forms (Appendix L). This hoped to gain the minimum of 12 (Watts & Stenner, 2012) participants without need for further distribution. After two weeks a total of 8 responses were obtained, therefore, online distribution of the Qualtrics link via social media (Facebook/Twitter) was used to gain additional participants.

Following completion of the consent form, both parent/carer and young person were contacted via email with further information, instructions for the task as well as a link to the activity. Based on feedback from the reviewing and pilot phase, it was felt that additional support from the researcher may be required in supporting participants in the completion of the activity. Therefore, a step by step guide (see Appendix M) was produced to aid participants in their completion of the task.

Participants initially sorted the statements into one of three categories: *No, not important to my wellbeing, kind of important to my wellbeing, and yes, very important to my wellbeing*. This was then used to support participants in the sorting of statements into the 9-point distribution framework (see Figure 7), from least to most important, again labelled as: *no, not important to my wellbeing and yes, very important to my wellbeing*.

### **3.4 Ethical Considerations**

This study was approved by Cardiff University School of Psychology Ethics Committee in April 2020. Additionally, the British Psychological Society's Code of Human Ethics (BPS, 2014) and the British Educational Research Association guidelines (BERA, 2011) informed decisions made throughout this study, ensuring that the rights and dignity of participants maintained a priority.

#### **3.4.1 Participant Rights**

Prior to participation in each stage of this study, consent was sought from those with legal responsibility (i.e. parents/carers) as well as from the young people themselves. Potential risks to the wellbeing of participants were identified, particularly in light of the ongoing Covid-19 pandemic. In this sense, the researcher was aware of potential pressures that active recruitment methods may have caused. Therefore, online distribution and passive recruitment was deemed most appropriate (Gelinas et al., 2018).

Subsequently, parents/carers were able to access the study by their own choosing, and was considered a respectful approach given the potential additional pressures already present at this time. Parents/carers were able to consider the appropriateness of sharing the study with their child (via provision of their email), and young people then had the right to choose whether or not to access the consent forms, questionnaire, and Q Sort activity on receipt of the link.

Parents/carers and participants were presented with details of the study, informing them of the rationale, process, use of their data, and their right to withdraw. Participants were required to confirm their acknowledgement of this information by ticking a box to confirm their understanding of statements related to the purpose and processes.

At stage one, participants were provided with a debrief form on completion of the questionnaire. At stage two (and pilot) a copy of the debrief form was provided to participants via email. Participants were directed to this on completion or were able to access at the point of withdrawal.

Researcher details were shared at each stage of the process, ensuring a point of contact for complaints and queries.

### **3.4.2 Confidentiality and Anonymity**

Parents/carers were asked to give their consent for their child to participate at both stages by inputting their name, their child's name and both their own and their child's email addresses. Parents/carers were also required to state their willingness for this information to be stored for the purpose of contact for the second stage. Names and emails were stored securely and only accessible to the researcher.

Data gathered throughout both stages of this study were anonymous. During the second stage, participants were required to enter an email address to save their Q Sort. In order to maintain anonymity a fictional email was provided, ensuring data remained untraceable to individual participants.

## 4. Analysis and Interpretation

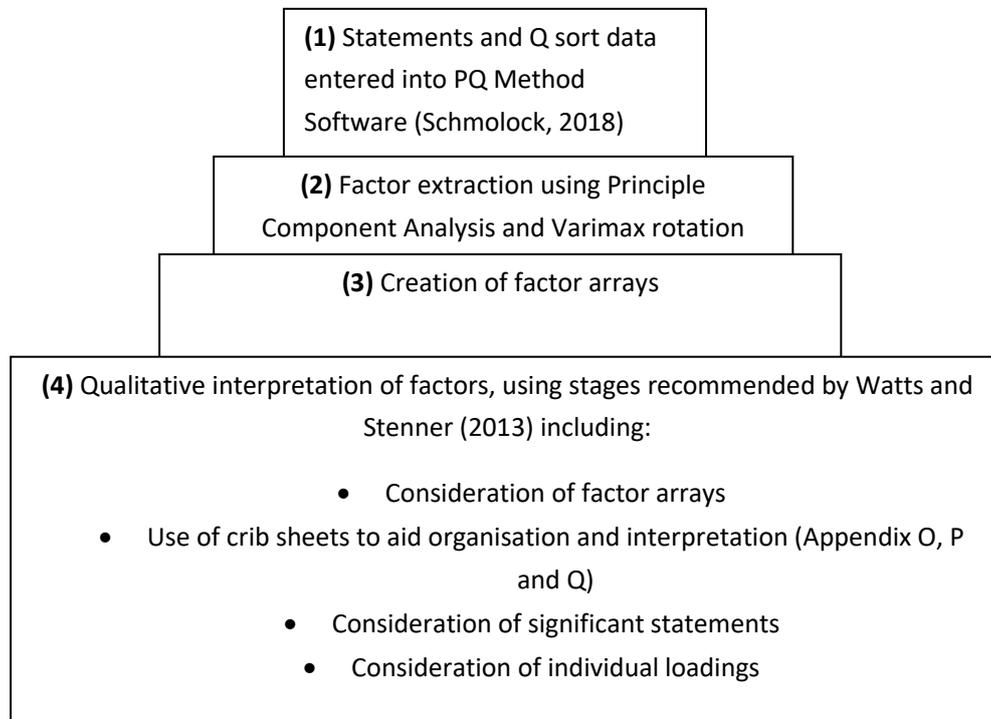
### 4.1 Overview of Q Analysis and Interpretation

Watts and Stenner (2012) outline a three-stage process for the analysis of Q Sorts. The first of these involves the transition of individual Q Sorts into factors. Within this process Q Sorts are inter-correlated to develop an understanding of how individual sorts cluster together forming a 'factor'. This can be used to establish communalities in viewpoints in comparison to others (i.e. how young people prioritise elements considered important to their wellbeing).

The second stage of analysis is the conversion of factors into 'factor arrays' that are developed from the average weighting of Q Sorts, to provide the most representative viewpoints for that factor. The final stage is where researchers use these arrays to facilitate interpretation, reflecting on meaning and highlighting important aspects relating to each factor. Figure 8 presents an overview of the process undertaken during the present study. The following sections provide a summary of these stages and subsequent results.

#### Figure 8

##### *Overview of Factor Development and Interpretation*



## 4.2 Q-Sort Results

### 4.2.1 Factor Extraction

In the present study, Q Sorts were analysed using PQMethod (Schmolck, 2018) and inter-correlated using Principal Component Analysis (PCA). This process provides an insight into the number of factors that may be appropriate to retain. There are a number of criteria that can be utilised in determining this, including:

- Factors with eigenvalues of 1.00 or above (this provides an insight into how much variation is explained by that factor).
- Watts and Stenner (2012) recommend that factors should have a minimum of two significant loadings, as calculated by the equation  $2.58 * (\text{square root of total Q-Sorts})$ . This was calculated as 0.42 for the present study.

Table 6 displays the results from the PCA, which initially identified a 5-factor extraction based on the eigenvalue criterion.

**Table 6***Principle Component Analysis Results*

<b>Participant Number</b>	<b>Factor 1</b>	<b>Factor 2</b>	<b>Factor 3</b>	<b>Factor 4</b>	<b>Factor 5</b>
1	0.7468	0.3493	-0.1180	0.0043	-0.2065
2	0.7274	-0.4258	-0.0705	-0.536	-0.1225
3	0.5498	0.1077	0.6676	0.2085	0.1135
4	0.7475	0.1479	-0.3936	-0.2550	-0.2027
5	0.7484	0.2236	0.2032	-0.2678	-0.0666
6	0.3140	0.4114	-0.0242	0.5209	-0.5242
7	0.5971	0.1265	-0.2477	0.0790	0.6119
8	0.6294	0.0472	0.1499	-0.4261	0.0208
9	0.5538	0.0131	-0.1131	0.5134	0.0449
0	0.5688	0.0839	-0.5782	-0.1421	-0.1065
11	0.7658	0.1140	0.0060	0.3052	0.3007
12	0.8077	0.1479	0.1085	0.0306	0.2025
13	0.6195	0.2096	0.2212	-0.1413	-0.3082
14	0.0117	0.	0.1274	-0.4022	0.1120
<b>Eigenvalue</b>	<b>5.6124</b>	<b>1.3390</b>	<b>1.3205</b>	<b>1.2018</b>	<b>1.0179</b>
<b>% Explained Variance</b>	<b>40</b>	<b>10</b>	<b>9</b>	<b>9</b>	<b>7</b>

**4.2.2 Factor Rotation**

A 5-factor extraction was initially explored for the rotation of factors. This utilised Varimax rotation which provided an opportunity to identify defining sorts for each of the 5-factors. Using this method, alongside Watts and Stenner (2012)'s recommendation of a minimum of two defining sorts for each factor, a 3-factor extraction was considered most appropriate, resulting in more defined factor loadings (explaining a total of 59% of the variance (See Table 7). A 4-factor extraction was also investigated to explore best fit, however, similar loadings were evident within this structure, subsequently reinforcing the retention of a 3 factors. Full details of factor extraction can be found in Appendix S.

**Table 7***Varimax Rotation of a 3 Factor Structure with an X Indicating a Defining Sort*

<b>Q-Sort</b>	<b>Factor 1</b>	<b>Factor 2</b>	<b>Factor 3</b>
1	0.35	0.41	0.63 X
2	0.54	-0.3401	0.56
3	0.82 X	0.29	-0.06
4	0.20	0.17	0.82 X
5	0.70 X	-0.09	0.39
6	0.11	0.44 X	0.26
7	0.20	0.15	0.60 X
8	0.54 X	0.065	0.34
9	0.30	0.0603	0.48 X
10	0.01	-0.11	0.80 X
11	0.55 X	-0.02	0.54
12	0.60 X	0.26	0.51
13	0.78 X	-0.05	0.13
14	-0.06	0.83 X	-0.07
<b>% Explained Variance</b>	<b>24</b>	<b>10</b>	<b>25</b>

**4.2.3 Factor Correlations**

Correlation coefficients between factors were also observed to further explore the 3-factor structure. This identified distinct differences between factors, however, revealed higher correlations between factor 1 and 2 (See Table 8), suggesting moderate levels of shared viewpoints and the need to consider a two-factor extraction. However, on comparison of both a 2 and 3-factor extraction, it was felt that the differences in loadings justified the retention of 3-factors to appreciate the viewpoint that the additional factor gave.

**Table 8***Correlations between Factors*

	<b>Factor 1</b>	<b>Factor 2</b>	<b>Factor 3</b>
<b>Factor 1</b>	1.000	0.066	0.514
<b>Factor 2</b>	0.066	1.000	0.115
<b>Factor 3</b>	0.514	0.115	1.000

#### **4.2.4 Factor Arrays and Interpretation**

The following section provides a narrative of each factor and the arrays of each, and was based on the following steps:

- Observation and consideration of entire factor arrays and defining sorts.
- Creation of crib sheets for each factor in order to observe similarities, differences and defining features (see Appendices O-Q) (Watts & Stenner, 2012).
- Consideration of consensus (Appendix R). and distinguishing statements between factors (see Appendices O-Q)

**Factor 1: Family Relationships and What I Need from Them; Engagement Trumps Achievement and Meaning.** The young people with this view point considered relationships to be most important to their wellbeing. Whilst time with friends (5: +1) was considered somewhat important, time spent with family (2: +4) was prioritised and felt to contribute most to their wellbeing. They considered the positive emotions that others give them as important, such as feeling loved (34: +3), and supported and cared for (33: +3). However, they needed to have a sense of autonomy and respect, considering their need to control their own wellbeing (4: +2) and being listened to (10: +2) as important, prioritising their need to be trusted above all (1: +4).

Whilst not most important, young people holding this view considered their feelings of safety as important (24: +2), as well as needing enough sleep (6: +1). They shared the view that feeling focused (15: +1) was somewhat important, and considered engagement in structured activities, such as sport and music (14: +1), as well as learning in school (3: +2) to contribute to their wellbeing. However, their performance (9: 0; 16: 0; 23: 0; 19:-1) enjoyment (25: 0; 30: -1; 17: -2) and meaning in activities (5: -2) (particularly in relation to wider world issues [26:-4; 8, -3]) were of less significance than having the opportunities themselves.

These young people did not consider diet as important for their wellbeing, specifically in having the opportunity to access food when they want (13:-3) or having sweet foods (20: -4).

Figure 10 presents the factor array for Factor 1. The crib sheet for factor one can be found in Appendix O.

**Factor 2: My Time, My Choice; Meaning is What I Make It.** Within this factor young people shared the view that how time was spent was most important to their wellbeing. They valued opportunities to focus on their fitness (38: +2), as well as engage in a range of enjoyable activities (i.e. playing games, listening to music, watching films [17: +3]), making sure that they had time

outside (11: +3) and with friends (6: +3) (more so than with family, 2; -2). However, their autonomy was of particular importance to their wellbeing, prioritising their need to feel trusted in their choices (1: +4), listened to (10; +2), have time and space to themselves (3: +2) when needed, as well as choosing to eat when they wanted (13:+3).

Whilst it was important for their time to be self-controlled and well spent, their emotional experience was considered to be less important; they did not rank feelings from relationships as particularly important (22: 0;), such as feeling loved (24: -2) and cared for (33: -3). Additionally, they did not feel a need to take responsibility for other people's happiness (27: -3) or involve themselves in wider world issues (36: -4; 8: -3).

Additionally, these young people did not consider feeling excited and interested (30; -2), happy and fulfilled (12; -2) or the experience of fun (9: -1) was important to their wellbeing. Similarly, whilst they felt it was somewhat important that they were able to cope with what they have to do (23; 0), how well they do (9; -1; 19 -1) was considered less important than the way time was spent.

Rather, these young people shared the view that it is somewhat more important to their wellbeing that what they do is meaningful (5; +1), allowing them to focus on what they have to do (15; 0) to achieve their goals (16; +1).

They considered that feeling grateful (26; +1) what was somewhat important to their wellbeing, as well as how much sleep they had (35; +1).

Figure 11 displays the factor array for factor 2. The crib sheet used can be found in Appendix P.

**Factor 3: It's You, What I Do and How I Do It.** Within this factor young people considered who they spend time with as most important, valuing both friends and family equally (2: +4; 6: +4), whilst also appreciating time to themselves (3: +3). They felt that the relationships they currently have are more important (18; +2) to their wellbeing over making new ones (29; -3) or having new experiences (21; -2), ensuring both they themselves (12: +1) and others (27: +1) are happy, and that they feel appreciated and listened to (10: +1).

These young people shared the view that positive experiences were important to their wellbeing (17: +3), prioritising their need to feel safe (24: +2), but also experience fun (25; +1) in what they do. They considered activities that they personally enjoy (i.e. playing games, listening to music, watching films [17: +3]) more important than more organised activities (14; -2).

Achieving their goals was somewhat important (16: +1). However, these young people shared the view that their level of focus (15: 0) was not very important to their wellbeing, considering it somewhat more important to feel like they're doing things right (19; +1).

These young people didn't particularly feel that having autonomy over their choices was particularly important to their wellbeing (1: -1), or that they needed others to show them respect (28: -1). Whilst they felt that some basic needs such as sleep (35: 0) were somewhat important, they did not consider other necessities, such as food (32: -4; 20: -3) and exercise (38: -1), to contribute much to their overall wellbeing.

See Figure 12 for the factor array for factor 3. The crib sheet used can be found in Appendix Q.

#### 4.2.5 Factor Comparison

Comparisons across factors were made to consider the analysis in its entirety. This involved consideration of consensus statements (statements of agreement) across all three factors (Appendix R), allowing for reflections on the similarities across data sets, helping to answer research questions 1 and 2. A number of similarities in how participants prioritised statements were identified. The following outlines how these statements were organised in terms of their importance across all three factors.

**Consensus Statements: Most to Least Important.** Across the three factors, participants shared the view that aspects of autonomy (i.e. have my own space) and respect (i.e. Am listened to) were important to their wellbeing, mostly ranking these in the +2 position. These were considered to be more important than statements relating to positive emotions (i.e. feeling grateful), health (i.e. have enough sleep) and achievement (i.e. reach my own goals). However, these statements were not seen as unimportant to wellbeing, primarily ranked in the +1 position across all factors.

In addition, across factors participants seemed to share a view that elements relating to other positive emotions (i.e. having fun) as well as engagement (i.e. feeling excited and interested, making memories) were not important to their wellbeing, mainly ranking these in -1 and -2 positions across all three factors.

Further, similarities between factors indicated that participants shared the view that certain statements relating to meaning (i.e. knowing about important world issues) were marginally more important than others (i.e. being involved in important world issues). However, both of these 'meaning' related statements were perceived to contribute to wellbeing the least, primarily ranked in the -4 position.

**Figure 9**

*Factor Array for Factor 1: ‘Family Relationships and What I Need From Them; Engagement Trumps Achievement and Meaning’*

-4 (2)	-3 (3)	-2 (4)	-1 (6)	0 (8)	1 (6)	2 (4)	3 (3)	4 (2)
36: Am involved in world issues	13: Eat when I want to	18: Am appreciated	21: Make new memories	9: Feel like I'm doing well	7: Have my own space	24: Feel safe	33: Have supportive/caring people around me	1: I am trusted to make my own choices
20: Have chocolate or sweet foods	32: Try new foods	5: Do things meaningful and worth my time	29: Make new relationships	3: Have time to myself	26: Feel grateful	10: Am listened to	12: Feel happy and fulfilled	2: Spend time with family
	8: Know about world issues	17: Spend time on things I enjoy	38: Take part in exercise	16: Reach my own goals	14: Take part in activities	3: Learn in school	34: Feel loved	
		37: Am able to travel	30: Feel excited and interested	23: Am able to cope with what I have to do	15: Feel focused	4: Have control over my wellbeing		
			19: Feel like I'm doing things right	22: Feel happy with relationships	35: Have enough sleep			
			28: Others show me respect	25: Have fun	6: Spend time with friends			
				11: Spend time outside				
				27: Make others happy				

**Figure 10**

*Factor Array for Factor 2: ‘My Time, My Choice, Meaning is What I Make It’*

-4 (2)	-3 (3)	-2 (4)	-1 (6)	0 (8)	1 (6)	2 (4)	3 (3)	4 (2)
36: Am involved in important world issues	8: Know about important issues	2: Spend time with family	21: Make new memories	14: Take part in activities	5: Do things meaningful and worth my time	7: Have my own space	11: Spend time outside	38: Take part in exercise
24: Feel loved	33: Have supportive/caring people around me	12: Feel happy and fulfilled	31: Learn in school	22: Feel happy with relationships	16: Reach my own goals	3: Have time to myself	6: Spend time with friends	1: I am trusted to make my own choices
	27: Make others happy	4: Have control over my wellbeing	18: Am appreciated	32: Try new foods	28: Others show me respect	13: Eat when I want to	17: Spend time on things I enjoy	
		30: Feel excited and interested	9: Feel like I'm doing well	23: Am able to cope with what I have to do	26: Feel grateful	10: Am listened to		
			9: Have fun	29: Make new relationships	37: am able to travel			
			19: Feel like I'm doing things right	24: Feel safe	35: Have enough sleep			
				15: Feel focused				
				20: Have chocolate or sweet foods				

**Figure 11**

*Factor Array for Factor 3: 'It's You, What I do and How I Do It*

-4 (2)	-3 (3)	-2 (4)	-1 (6)	0 (8)	1 (6)	2 (4)	3 (3)	4 (2)
8: Know about important issues	20: Have chocolate or sweet foods	37: Am able to travel	38: Take part in exercise and keep fit	35: Have enough sleep	27: Make others happy	18: Feel happy with the relationships I have	3: Have time to myself	2: Spend time with family
32: Try new foods	29: Make new relationships with people	15: Feel focused	13: Eat when I want to	33: Have supportive/caring people around me	16: Reach my own goals	24: Feel safe	17: Spend time on things I enjoy	6: Spend time with friends
	36: Am involved in important issues	21: Make memories	31: Learn in school	26: Feel grateful	10: Am listened to	34: Feel loved	18: Am appreciated	
		14: Take part in activities	1: am trusted to make my own choices	4: Have control over my wellbeing	12: Feel happy and fulfilled	7: Have my own space		
			28: Others show me respect	11: Spend time outside	25: Have fun			
			23: Able to cope	5: Do things meaningful and worth my time	19: Feel like I'm doing things right			
				30: Feel excited and interested				
				9: Feel like I'm doing well				

### 4.3 Thematic Analysis and Interpretation

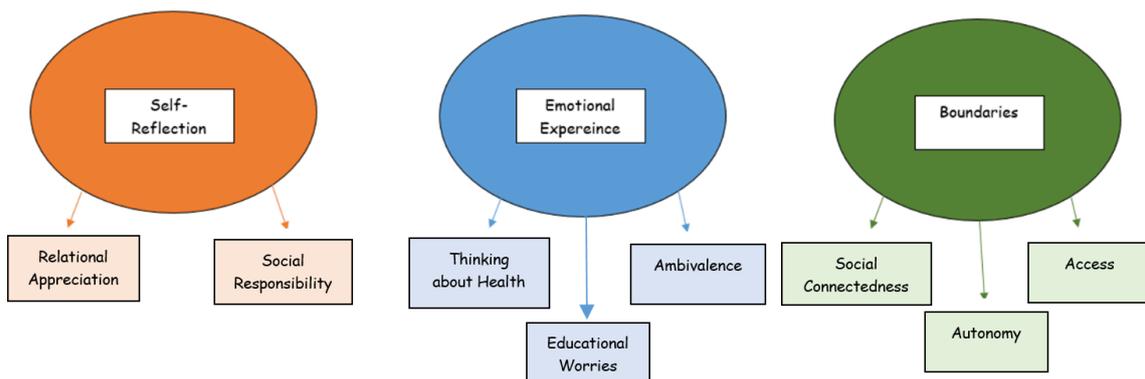
Young people’s responses to question 3 (What [if any] changes do you think Covid-19 has made to what you think is important to wellbeing?) were collected and analysed using Thematic Analysis (Braun & Clarke, 2006). Details of each stage of the analysis process can be found in the Appendices (see Appendices T, U and V). The following summarises the final stage where main themes and subthemes (see Figure 12) are discussed in detail.

#### 4.3.1 Summary and Interpretation of Themes

Using Braun and Clarke’s (2006) six-stage process, three main themes were identified including social self-reflection, emotional experience and boundaries. The following provides a description of each main theme and associated sub-themes.

**Figure 12**

*Participant Perceptions of the Impact of Covid-19 on Their Wellbeing; Main Themes and Subthemes*



**Main Theme 1: Social Self-Reflection.** Young people expressed that the pandemic had provided an opportunity for reflection, giving them insight into themselves and their social connections. The two subthemes identified were ‘relational appreciation’ and ‘social responsibility’.

**Relational Appreciation.** Participants noted that they had reprioritised what they considered important in their life, expressing that the pandemic had brought a newfound appreciation for friends and family as well socialising in general. One young person shared that “*basic human interaction*” had become important to them, and “*it has made me appreciate my family and friends a lot more*” with another stating “*it has made me realise how much not being able to socialise can affect me*”.

It appeared that the additional time with family also offered an opportunity for positive connections for some young people, exemplified by one participant who shared *“it’s been good to spend more time with my family it has made me see how much I like spending time with them”*.

**Social Responsibility.** Responses indicated that the pandemic had increased participant’s social awareness and their need to think about, connect with and check-in on others in order to support them. This is exemplified by one young person, who felt that it was important to have *“an understanding of how difficult things can be for people”* with another expressing a need to *“spend time/checking up on others”*.

**Main Theme 2: Emotional Experience.** Participants shared their variations in emotional experience as a result of the pandemic, identifying certain anxieties about basic needs and missed opportunities. This theme also incorporates those who expressed a level of ambivalence about the changes. Three subthemes were identified including ‘thinking about health’, ‘educational worries’, and ‘ambivalence’.

**Thinking about Health.** Responses identified concerns about the health of both themselves and their family members as a result of the pandemic, with participants noting an increased focus on a need for safety. This is demonstrated by one young person who expressed that they *“sometimes worry about the virus and if my family will be ill”* and *“I am scared my brother who has kidney problems will get coronavirus and have to go to hospital”*, with another sharing that *“staying safe”* had become important. Others expressed an increased focus on health behaviours as a result of the pandemic, sharing it has made them think more about *“being able to keep fit”* and about *“going outside”*.

**Educational Worries.** Young people reflected on their experiences of missed educational opportunities, seeming to experience a level of concern about this as well as a new appreciation for school and learning. For example one young person felt that *“learning online has been harder and I feel bad that I haven’t been in school as much as I should have”*, with another sharing *“I realise school and learning is more important than I realised”*.

**Ambivalence.** Some participants expressed that the pandemic had not brought much change to daily life or their perceptions of their wellbeing. For some this appeared related to limited concern about the virus itself, for example *“it makes you healthy so you will be fine”*, as well as minimal changes to daily activities, as demonstrated by one young person who felt that they had *“still been able to exercise and play my video games regularly”* and another who shared that *“having to stay*

*home just a little more than I did before isn't much of a sacrifice to me. So I don't particularly mind it".*

**Main Theme 3: Boundaries.** Responses indicated that the pandemic had caused constraint and restriction to their lives, particularly relating to how participants socialise, the choices they can make and changes in accessibility. The three sub-themes identified were 'social connectedness', 'autonomy', and 'access'.

**Social Connectedness.** Young people expressed ideas about the restrictive nature of the pandemic on their ability to socialise with friends and family and how this regularity of contact has been restricted. Responses highlighted difficulties experienced in relation to this as exemplified by one young person who felt that *"not being able to see my friends and family has had a huge impact on my health and wellbeing"* with another sharing that they *"had become very isolated and lonely"*.

**Autonomy.** Some participants felt that the pandemic had changed their sense of control, particularly their ability to make independent choices, communicating frustration about regulations. This is demonstrated by one participant who stated that *"I hate that I can't just choose to do something"* and another reiterating this within the educational context, sharing *"I don't like all the new rules in school"*.

**Access.** Some young people also reflected on the restrictions to normally accessible services, with responses highlighting the way in which these barriers have impacted their wellbeing. This is demonstrated by one young person who shared that their ability to access the Child and Adolescent Mental Health Service (CAMHS) had been difficult and that they had *"struggled personally quite a bit more during Covid-19. I found lockdown very difficult, not being able to attend CAMHS"*. Ideas about access also extended to more basic needs such as food and organised sports.

## 5. Discussion

### 5.1 Overview

Whilst the PERMA Model (Seligman, 2011) has become a valuable resource for EPs wanting to support wellbeing from a Positive Psychology perspective, its relevance between populations is varied (e.g. Khaw & Kern, 2016; Kern et al., 2015) and rarely acknowledges the voice of the child as a means of informing practical application, particularly in ways that do not restrict explorations or impose adult constructs (e.g. Hall, 2010; Gillet-Swan, 2014; Anderson & Graham, 2016; SHRN, 2019).

This study aimed firstly to elicit young people's conceptions of what is important to their wellbeing, without the application of theoretical frameworks of wellbeing. Secondly, this study aimed to explore how young people prioritise elements identified as important to their wellbeing when the conceptions of young people themselves are combined with elements from the PERMA Model (Seligman, 2011). This aim was achieved through employing a Q methodology which, in creating the concourse itself, served to consider the relevance of the PERMA Model (Seligman, 2011) whilst immersing the young people in the research process during the sort itself.

Thirdly, as it was deemed necessary to acknowledge the context in which this exploration of wellbeing took place (i.e. during a global pandemic), young people's perceptions of whether what they considered important to their wellbeing had changed due to the Covid-19 pandemic were collected and analysed using Thematic Analysis (Braun & Clark, 2006).

The following considers the findings from this study in relation to the research questions. Questions 1 and 2 have been presented together to offer explicit reflections between findings and their implications. Question 3 will then be discussed to provide contextual understanding.

### **5.2 What do young people consider important to their wellbeing? (RQ1) And how do young people prioritise elements considered important to their wellbeing in comparison to the PERMA model? (RQ2)**

The findings in this study exemplify the multi-faceted nature of wellbeing, with young people themselves identifying a wide range of elements considered to contribute. This offers support for the multi-dimensional perspective adopted by the PERMA Model (Seligman, 2011), and adds to previous research that has exemplified value in understanding wellbeing from this perspective (Butler & Kern, 2016; Kern et al., 2015; Kern et al., 2016).

Through the initial collection of pupil perspectives that were unconstrained by theory, a multitude of constructs were identified, appearing to compliment previous findings that have explored wellbeing more inductively with young people (Hall, 2010; Gillet-Swan, 2014; Anderson & Graham, 2016) as

well as the PERMA Model (Seligman (2011) itself. Whilst, the content of what was considered important to young people differed, each element of the PERMA Model (Seligman, 2011) was evident in the statements self-identified by young people.

However, similar to previous studies (i.e. Hall, 2010; Gillet-Swan, 2014; Anderson & Graham, 2016), the young people in this sample also identified elements relating to more basic psychological and physical needs, such as safety, fitness and sleep. The inclusion of basic needs, whilst varying in importance between young people, were recognised as a contributor to overall wellbeing. This illustrates how Maslow's (1943) Theory of Human Need can complement understandings of wellbeing, providing support for the recognition of this when considering how to support the wellbeing of young people from a Positive Psychology perspective (e.g. the PERMA Model; Seligman, 2011; the PERMA Profiler; Butler & Kern, 2016).

Further to this finding, young people offered other additional constructs similar to those identified by Anderson & Graham (2016) that extended beyond those included in the PERMA Model (Seligman, 2011), identifying the importance of certain rights, such as autonomy and respect, with many prioritising the control they have and the choices they are trusted to make. This study extended those in Anderson & Graham's (2016) study, utilising Q methodology to allow for the sorting of all elements considered important to wellbeing. This found that whilst some statements reflective of elements within the PERMA Model (Seligman, 2011) were also considered important, such as positive emotions (i.e. feeling grateful) and achievement (i.e. reach my own goals), when comparing similarities between sorts, they were superseded by constructs such as autonomy and respect.

This demonstrates that many factors may be considered important to young people's wellbeing (including those within the PERMA Model; Seligman, 2011), however, for some young people their level of autonomy may be an overarching necessity.

Further, the findings in this study demonstrate the complex nature of what is considered important to young people, with apparent overlap between constructs offering insights into how wellbeing may be understood. This is exemplified by the young people's organisation of factors relating to relationships. Whilst for some relationships appeared interconnected with emotive experiences, for others they were perceived to be a valuable use of time. Similarly, despite some young people recognising the importance of opportunities to engage in activities, for some this seemed to serve a purpose of seeking enjoyment, whereas others sought to gain a sense of achievement, or competence.

Overall, these findings compliment previous studies (Kern et al., 2015) that have found similarities between the elements represented within the PERMA Model (Seligman, 2011) and young people's own constructions of wellbeing. Additionally, this study offers additional reflections about the ways in which these may be structured. This contradicts ideas within Wellbeing Theory (Seligman, 2011) that posit that for inclusion within this model, each element needs to be 'pursued for its own sake'. These findings indicate that this may be a reductionist conceptualisation of wellbeing in this population and whilst the PERMA Model (Seligman, 2011) serves as a helpful tool for promoting wellbeing, each of these elements are likely to vary considerably in their importance and meaning to young people.

### ***5.3 How do young people perceive the Covid-19 pandemic has influenced their views about wellbeing?? (RQ3)***

To contextualise these findings within the ongoing coronavirus pandemic, young people's views about the impact of this on their perceptions of wellbeing were elicited.

The themes identified from young people's responses to their experience of the Covid-19 pandemic offer a multitude of reflections regarding the way they may have prioritised statements within the Q Sort. For example, the theme 'social self-reflection' included ideas about increased appreciation for friends and family as well as an awareness of their social responsibilities. The theme of 'boundaries' also highlighted similar notions of 'social connection' and how restrictions had impacted their wellbeing. These ideas are reflected within the way some young people sorted statements (e.g. factor 1 and 3), often prioritising time with others and their emotional connection with them (i.e. feeling loved, happy with relationships, and supported and cared for).

Similarly, the theme 'emotional experience' included concerns about health and missed educational opportunities, both of which were self-identified by some young people as important to their wellbeing. For example, statements relating to 'feeling safe' were often prioritised, along with opportunities for exercise. Additionally, within the Q Sort young people also identified that 'learning in school' was important. Whilst not prioritised by many, this was considered important for some (i.e. factor 1) and prioritised over many other elements.

The 'boundaries' theme also contained ideas related to 'autonomy' and 'access' which also appear to be reflected in young people's Q Sorts and often prioritised as most important to their wellbeing. For example, young people referred to their autonomy over choices, their ability to do things they enjoy, as well as taking part in organised activities.

Reflecting on the themes relating to young people's experience of the Covid-19 pandemic offers an opportunity to understand why some elements may have been identified and prioritised as important within the Q Sort activity. However, whilst thematic themes are reflective of the way statements were prioritised within some factors, they appear less important in others. This may potentially be explained by the range of experiences that young people are likely to have had during this time. For example, whilst some may have experienced difficulties in accessing certain activities or services, this may not have been the case for others. Subsequently, what was considered important for some young people may not have been perceived as important to others as it may not have impacted them in the same way.

This illustrates the need to acknowledge context and experiences when considering the wellbeing of young people.

The themes identified in this study also compliment those from previous research on the impact of the pandemic on young people's wellbeing (Rogers et al., 2020), identifying similar perceptions such as social disconnect, concerns about health and safety, as well as additional aspects relating to their autonomy as a result of ongoing restrictions.

When considering these findings alongside the elements self-identified as important to wellbeing, may indicate that the challenges posed by the pandemic may have influenced what young people identified as important (Dodge et al., 2012). However, similar constructs (i.e. relating to health, safety, respect and autonomy) have been identified in previous explorations (i.e. Anderson & Graham, 2016), suggesting that they are likely to be constructs that contribute to wellbeing outside the context of the pandemic.

It could be argued that young people's responses to this question suggest that whilst these elements may be important to their wellbeing in general, certain elements may be considered more important given the challenges presented by the pandemic. This is illustrated by young people's perceptions of boundaries experienced as a result of on-going restrictions and their impact on social connectedness and autonomy. This may have brought these ideas to the forefront their minds, resulting in some placing greater emphasis on these aspects than may have been the case if the pandemic had not occurred.

Similarly, young people's anxieties about the health and safety of themselves and others may have influenced their perceived importance of these elements, as well as influenced their prioritisation of relationships, their security within these and their sense of emotional connection.

These findings demonstrate the way in which wider systemic changes (Bronfenbrenner, 1979) can influence perceptions of wellbeing (Dodge et al., 2012), and how basic needs (i.e. Maslow, 1943), such as safety, health, belonging, and autonomy may not only be something that are broadly thought of as important to wellbeing (Anderson & Graham, 2016; Gillet-Swan, 2014; Hall, 2010), but something that may have gained focus during times such as these.

Further to these findings and similar to those reported by Rogers et al. (2020), young people's perceptions went beyond the difficulties faced during this time, with some identifying opportunities for personal growth (Waters et al., 2021). This was demonstrated in the young people's reflections about their new found appreciation for others and awareness of their social responsibilities in supporting others. These findings are consistent with the notion in Positive Psychology known as 'post-traumatic growth', and previous findings that have observed positive change (Rogers et al., 2020) and social growth following traumatic events such as pandemics (Lau et al., 2006).

Overall, these findings indicate that it is important to acknowledge that young people's perceptions of wellbeing may have been influenced by their experience of the Covid-19 pandemic and associated changes to daily functioning.

## **5.4 Implications for Educational Psychologists**

### ***5.4.1 What do young people consider important to their wellbeing? (RQ1) And how do young people prioritise elements considered important to their wellbeing in comparison to the PERMA Model? (RQ2)***

This study has illustrated the need for EPs to be conscientious in their application of the PERMA Model (Seligman, 2011) in practice with young people, taking into account their voice when exploring wellbeing.

The need to consider young people's perspectives is exemplified by the value that this offers in acknowledging additional constructs that may not accurately be represented within the PERMA Model (Seligman, 2011). These findings compliment some current extensions of this model already considered in practice (i.e. PERMA plus: WRC, n.d), and offer inductive reflections on what may be considered additional constructs for young people (i.e. autonomy, safety, sleep). Similar constructs are represented in other models of Positive Psychology, such as Ryff's (1989) model of psychological wellbeing, however, do not feature within the PERMA Model (Seligman, 2011) or the PERMA Profiler (Butler & Kern, 2016). Given the application and reference to the PERMA Model (Seligman, 2011) by applied psychologists, it may be important that EPs recognise that it may not fully exhaust what young people consider important.

The finding that elements appear to vary in their importance and meaning to young people questions the use of wellbeing measurements based on the PERMA Model (Seligman, 2011), such as the PERMA Profiler (Butler & Kern., 2016) as an assessment of wellbeing within this population, as it is possible that results may be misleading. For example, where a young person scores low on one construct, such as meaning, may not constitute specific intervention as it may not be perceived as important to them. Likewise, what is thought of as 'meaning', may not accurately reflect the constructions of the young person themselves. Therefore, assessments and intervention based on these constructs, as defined by others (e.g. Seligman, 2011; Butler & Kern, 2016), may fail to recognise what is important to young people as a whole and/or to individuals, potentially impacting the efficacy of any intervention work (e.g. PPIs; Wright, 2020). This exemplifies the need for EPs to consider the perspective of young people when considering their wellbeing, rather than making decisions that are solely informed by quantitative data.

#### ***5.4.2 How do young people perceive the Covid-19 pandemic has influenced their views about wellbeing? (RQ3)***

The findings in this study emphasise the importance of practitioners appreciating the ever fluctuating nature of wellbeing in response to context (Dodge et al., 2012), considering the ongoing pandemic when supporting young people.

Young people's reflections on how the Covid-19 pandemic has influenced their views on wellbeing draw attention to how young people may re-prioritise what is important to them as a means of adapting to environmental demands (Dodge et al., 2012). This encourages professionals who are working to support the wellbeing of young people to acknowledge how and what young people consider important, remaining flexible to their constructions at any one time.

Further, this study has demonstrated the potential for Q methodology for use with young people in exploring perceptions. This may highlight the possibility for use in practice when exploring young people's wellbeing, making outcomes and intervention more person-centred and meaningful.

## 5.5 Strengths and Limitations

Table 9 provides a summary of the strengths and limitations of the present research.

**Table 9**

*Strengths and Limitations of the Research*

<b>Strengths and Limitations</b>	
<b>Immersion of young people within the process</b>	<ul style="list-style-type: none"> <li>• This study drew on Fielding’s (2001) level of pupils as “co-researchers”, utilising a mixed method approach to address methodological shortcomings of qualitative and quantitative designs. The findings in this study demonstrate the utility of Q methodology as an exploratory tool, allowing for both the exploration of wellbeing without the imposition of theory and researcher distance during interpretation.</li> <li>• The current study aimed to immerse young people in the research, using their views to guide explorations of wellbeing. Whilst it is recognised that there remains a certain level of researcher subjectivity and potential for researcher bias at each stage of Q methodology, the approach provides a means for distancing the researcher, subsequently centralising young people, resulting in more person-centred and meaningful conclusions.</li> <li>• Additionally, decisions were made throughout the process with this in mind, utilising analytic (PCA and Varimax rotation) methods that increase objectivity in comparison to those that encourage manual input and potential for research bias.</li> </ul>
<b>Generalisability</b>	<ul style="list-style-type: none"> <li>• Q methodology does not make assumptions of generalisability, therefore, inferences to populations beyond those in this sample should be made with this in mind.</li> <li>• Findings offer an insight into the potential of Q methodology in exploring the views of young people, adding to the research base for the use within this population.</li> <li>• Further, this study has demonstrated the need to recognise context when exploring wellbeing. The context in which this research was conducted (i.e. global pandemic) should be acknowledged when making inferences beyond this study.</li> </ul>
<b>Sample Bias</b>	<ul style="list-style-type: none"> <li>• It is possible that the variation of perspectives that exist within this population may have been underrepresented due to the sampling method adopted as a result of the pandemic. For example, participants and consenting adults required access to the internet via an electronic device in order to know about and take part in the study.</li> <li>• Further, as no demographic information was collected it is difficult to know the age range of participants that took part and whether results are representative of the population intended (11-19).</li> </ul>

## **5.6 Future Research**

Based on this study, future research directions may include:

- the use of Q methodology in exploring the efficacy of positive psychological interventions;
- the exploration of young people's experiences of post traumatic growth as a result of the pandemic; and
- consideration of how young people may become further involved in the interpretation process, further reducing researcher subjectivity.

#### **4.1.5 Summary**

The present study sought to explore young people's views about their wellbeing, offering reflections about the PERMA Model (Seligman, 2011) as a model of Positive Psychology used by EPs.

Utilising Q methodology as a means of reducing researcher subjectivity, it is argued that the initial elicitation of views allowed young people to identify what was important to them without the constraints posed by a theoretical model at this stage. Whilst young people self-identified elements represented by the PERMA Model (Seligman, 2011), this study mirrors findings from previous research, indicating that this model may not exhaust what young people consider important to their wellbeing.

Q methodology allowed for an exploration of what young people consider important alongside those within the PERMA Model (Seligman, 2011), as represented by the PERMA Profiler (Butler & Kern, 2016). This indicated that whilst PERMA-related elements are considered important, their organisation suggest that not only are they likely to overlap in importance and meaning, but they may be superseded by other elements not represented in this model (i.e. autonomy). The results offer an insight into the complex nature of how wellbeing is constructed by young people and way in which Q methodology can offer a means for facilitating and understanding their views.

Further, eliciting views about the Covid-19 pandemic, indicated that context plays an important role when considering what is important to young people's wellbeing. This highlights the need for practitioners to consistently remain flexible to changing contexts, as what is considered important at one time is likely to be a function of how one is experiencing and/or perceiving environmental challenges and opportunities.

## References

- Anderson, D. L., & Graham, A. P. (2016). Improving student wellbeing: Having a say at school. *School Effectiveness and School Improvement, 27*(3), 348-366.
- Arya, B., & Lal, D. S. (2018). Grit and sense of coherence as predictors of well-being. *Indian Journal of Positive Psychology, 9*(1), 169-172.
- Atkinson, G., & Rowley, J. (2019). Pupils' views on mainstream reintegration from alternative provision: a Q methodological study. *Emotional and Behavioural Difficulties, 24*(4), 339-356.
- Berk, M., Otmar, R., Dean, O., Berk, L., & Michalak, E. (2015). The use of mixed methods in drug discovery: Integrating qualitative methods into clinical trials. In M. Tohen, C. Bowden, A. Nierenberg, J. & Geddes (Ed.), *Clinical Trial Design Challenges in Mood Disorders* (pp. 59-74).
- Bolier, L., Haverman, M., Westerhof, G.J., Riper, H., Smit, F., & Bohlmeijer, E. (2013). Positive psychology interventions: A meta-analysis of randomized controlled studies. *BMC Public Health, 13*(119).
- Bronfenbrenner, U. (1979). *Ecology of human development: Experiments by nature and design*. Cambridge: Harvard University Press.
- Butler, J., & Kern, M. L. (2016). The PERMA-Profiler: A brief multidimensional measure of flourishing. *International Journal of Wellbeing, 6*(3), 1-48.
- Ciarrochi, J., Atkins, P.W., Hayes, L.L., Sahdra, B.K., & Parker, P. (2016). Contextual positive psychology: Policy recommendations for implementing positive psychology into schools. *Frontiers in Psychology, 7*, 1561.
- Clark, A., McQuail, S., & Moss, P. (2003). *Exploring the field of listening to and consulting with young children*. Nottingham: Department for Education and Skills Publications.
- Creswell, J.W., & Plano Clark, V.L. (2007). *Designing and conducting mixed methods research*. Thousand Oaks, CA: Sage Publications.

Csikszentmihalyi, M. & Csikszentmihalyi, I. (1988). *Optimal experience*. Cambridge University Press.

Csikszentmihalya, M., Rathunde, K., & Whalen, S. (1993). *Talented teenagers*. Cambridge: Cambridge University Press.

Department for Education (DfE) (2011). *Support and aspiration: A new approach to special educational needs and disability. A consultation*. London: The Stationary Office (TSO).

Department for Education (DfE) (2014) Special Educational Needs and Disability Code of Practice: 0 to 25 Years. In *Statutory Guidance for Organisations Who Work with and Support Children and Young People*, 19–28. London: DfE.

Department for Education (DfE) (2018). *Government response to the consultation on transforming children and young people's mental health provision: A green paper and next steps*. London: Department for Education.

Department for Education and Skills. (2003). *Every Child Matters, Green Paper*. London: Her Majesty's Stationary Office.

Diener, E., & Chan, M. Y. (2011). Happy people live longer: Subjective well-being contributes to health and longevity. *Applied Psychology: Health and Well-Being*, 3(1), 1-43.

Dodge, R., Daly, A., Huyton, J., & Sanders, L. (2012). The challenge of defining well-being. *International Journal of Wellbeing*, 2(3), 222-235.

Fielding, M. (2001). Students as radical agents of change. *Journal of Educational Change*, 2, 123–41.

Gillett-Swan, J. K. (2014). Investigating tween children's capacity to conceptualise the complex issue of wellbeing. *Global Studies of Childhood*, 4(2), 64-76.

Greig, A., MacKay, T., Roffey, S., & Williams, A. (2016). Guest editorial: The changing context for mental health and wellbeing in schools. *Educational & Child Psychology*, 33(2), 6-11.

- Grover, V. (2013) Q methodology: An objective technique for handling subjective issues in educational research. *Review of Research, 2*(12), 1-5.
- Hall, S. (2010). Supporting mental health and wellbeing at a whole-school level: Listening to and acting upon children's views. *Emotional and Behavioural Difficulties, 15*(4), 323-339.
- Heffernan, F. M. (2017). 'Constructions of resilience' A Q methodological study to explore how young women view resilience. (Unpublished doctoral dissertation). University of Sheffield, UK.
- Huppert, F. A. (2009). Psychological well-being: Evidence regarding its causes and consequences. *Applied Psychology: Health and Well-Being, 1*(2), 137-164.
- Kern, M. L., Waters, L. E., Adler, A., & White, M. A. (2015). A multidimensional approach to measuring well-being in students: Application of the PERMA framework. *The Journal of Positive Psychology, 10*(3), 262-271.
- Khaw, D., & Kern, M. (2014). A cross-cultural comparison of the PERMA model of well-being. *Undergraduate Journal of Psychology at Berkeley, 8*(1), 10-23.
- Kirby, P., Lanyon, C., Cronin, K., & Sinclair, R. (2003). Building a culture of participation: Involving children and young people in policy, service planning, delivery and evaluation: Nottingham: Department for Education and Skills.
- Lau, J. T., Yang, X., Tsui, H. Y., Pang, E., & Wing, Y. K. (2006). Positive mental health-related impacts of the SARS epidemic on the general public in Hong Kong and their associations with other negative impacts. *Journal of Infection, 53*(2), 114-124.
- Li, L., Mao, M., Wang, S., Yin, R., Yan, H. O., Jin, Y., & Cheng, Y. (2021). Posttraumatic growth in Chinese nurses and general public during the Covid-19 outbreak. *Psychology, Health & Medicine, 1*-11.
- Lundberg, A., de Leeuw, R., & Aliani, R. (2020). Using Q methodology: Sorting out subjectivity in educational research. *Educational Research Review, 100*-361.

- Macrynika, N., Miranda, R., & Soffer, A. (2018). Social connectedness, stressful life events, and self-injurious thoughts and behaviors among young adults. *Comprehensive Psychiatry, 80*, 140-149.
- Maslow, A. (1943), Theory of Human Motivation. *Psychological Review, 50*, 370-396.
- Mauss, I. B., Shallcross, A. J., Troy, A. S., John, O. P., Ferrer, E., Wilhelm, F. H., & Gross, J. J. (2011). Don't hide your happiness! Positive emotion dissociation, social connectedness, and psychological functioning. *Journal of Personality and Social Psychology, 100*(4), 738.
- Nakamura, J. (1988). *Optimal experience and the uses of talent*. In M. Csikszentmihalyi & I. Csikszentmihalyi Optimal experience Cambridge: Cambridge University Press.
- Nakamura, J., & Csikszentmihalyi, M. (2014). *The concept of flow. In flow and the foundations of positive psychology*. Dordrecht: Springer
- 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*. Cardiff: National Assembly for Wales Commission.
- National Institute for Clinical Excellence (NICE) (2009). *Social and emotional well-being in secondary education. Quick reference guide*. London: NICE.
- Noble, T., & McGrath, H. (2015). PROSPER: A new framework for positive education. *Psychology of Well-being, 5*(1), 1-17.
- Oriol, X., Miranda, R., Oyanedel, J. C., & Torres, J. (2017). The role of self-control and grit in domains of school success in students of primary and secondary school. *Frontiers in psychology, 8*, 1716.
- Roepke, A. M., Jayawickreme, E., & Riffle, O. M. (2014). Meaning and health: A systematic review. *Applied Research in Quality of Life, 9*(4), 1055-1079.

- Rogers, A. A., Ha, T., & Ockey, S. (2021). Adolescents' perceived socio-emotional impact of covid-19 and implications for mental health: Results from a US-based mixed-methods study. *Journal of Adolescent Health, 68*(1), 43-52.
- Ruddock, J. and Flutter, J. 2004. *How to improve your school: Giving pupils a voice*. London: Continuum.
- Seligman, M. (2011). *Flourish*. London: Nicholas Brealey Publishing.
- Shoshani, A., & Slone, M. (2017). Positive education for young children: effects of a positive psychology intervention for preschool children on subjective well-being and learning behaviors. *Frontiers in Psychology, 8*, 1866.
- Stephenson, W. (2014). General theory of communication. *Operant Subjectivity: The International Journal of Q Methodology, 37*(3), 38-56
- Student Health and Research Network. (2019) *Student Wellbeing in Wales: Initial findings from the 2017/18 Health Behaviour in School-aged Children Survey and School Health Research Network Student Health and Wellbeing Survey*. Retrieved from [https://shrn.org.uk/wp-content/uploads/2019/05/Wellbeing-Briefing-Paper\\_FINAL\\_070319.pdf](https://shrn.org.uk/wp-content/uploads/2019/05/Wellbeing-Briefing-Paper_FINAL_070319.pdf)
- The New Economics Foundation [NEF]. (2009). *A guide to measuring children's well-being*. London: NEF
- United Nations (1989) *United Nations Convention on the Rights of the Child*. Geneva: United Nations.
- Viner, R. M., Allen, N. B., & Patton, G. C. (2017). Puberty, developmental processes, and health interventions. *Child and adolescent health and development, 8*, 1841.
- Wang, Y., Chen, J., & Yue, Z. (2017). Positive emotion facilitates cognitive flexibility: An fMRI study. *Frontiers in Psychology, 8*, 18-32.
- Watts, S., & Stenner, P. (2012). *Doing Q methodological research: Theory, method & interpretation*. London: Sage.

Welsh Assembly Government (WAG) (2001). *Child and adolescent mental health services: Everybody's business*. Cardiff: WAG.

World Health Organisation [WHO]. (2020). *Adolescent mental health*. Retrieved October, 2020, from <https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health>

World Health Organization [WHO]. (2021) *Listings of WHO's response to covid-19*.. Retrieved January 1, 2021, from <https://www.who.int/news/item/29-06-2020-covidtimeline>

Wright, D. (2020). *Implementing Effective Positive Psychology Interventions to Support the Well-Being of Young People in Schools: A Meta-Analysis of Randomised and Non-Randomised Interventions and a Q Study of Educational Psychologists' Perceptions Regarding Effective Implementation* (Unpublished doctoral thesis). Cardiff University, Cardiff, UK.

Young Minds. (2017). *Wise up to wellbeing in schools*. National Children's Bureau. Retrieved from <https://youngminds.org.uk/media/1428/wise-up-prioritising-wellbeing-in-schools.pdf>



**Pupil perceptions of wellbeing: A positive psychology perspective  
during a pandemic**

**Part Three: Critical Appraisal**

**Word Count: 5820**

## 1. Introduction

This critical appraisal is presented in two parts and aims to address the following two areas:

- The development of the research process and researcher; and
- The contribution to knowledge and dissemination.

Whilst it is acknowledged that there will be overlap between these two areas, a distinction has been made to highlight some explicit reflections pertaining to each.

Firstly, the rationale behind the present study will be considered, from the inception of the topic as an area for research to the development of the research questions. Secondly, consideration will be given to the decisions made in relation to the process, with reference to the literature review and chosen methodology. Additionally, the choices made in relation to participant selection, data collection and analysis will be discussed, along with ethical considerations made throughout the process and on reflection.

The second section will consider how the research contributes to existing knowledge and applied psychology practice, suggesting how the findings may be disseminated as well as developed in further research.

This review will be written in the first person to illustrate personal engagement in the process and the reflective and reflexive purpose of this account (Tang & John, 1999).

## **2. Development of the Research Process and Researcher**

### **2.1 Inception of the Research Question**

#### **2.1.1 Research Focus**

The focus on wellbeing throughout the United Kingdom (UK) has grown over recent years, with schools increasingly referred to as context within which young people can be supported (Department for Education [DfE], 2018; National Assembly for Wales [NAW], 2018, Welsh Assembly Government [WAG] 2001; The Scottish Government, 2013; Northern Ireland Executive, 2021).

Further, Educational Psychologists (EPs) are considered to be key helping professionals who possess the skills to aid schools in their wellbeing support, bringing psychology into the educational context. During my time as a Trainee Educational Psychologist (TEP) I have been interested in the range of psychological approaches used by EPs in supporting the social, emotional and psychological development of young people. This was particularly true for the use of Positive Psychology.

My personal interest and passion for Positive Psychology has evolved over my time working as a Trainee Educational Psychologist (TEP) and in positions prior. Throughout my time in the field, I have been interested in the power that supporting solutions can have over 'fixing' problems, and the observed differences in myself and those around me in terms of empowerment and general positivity within interactions when utilising aspects of this approach. The more time I have spent looking at the ways in which Positive Psychology can be integrated into practice, the more I have felt like it converges with my own values as a practitioner and subsequently what I concluded I would like to contribute to the research base as a practitioner and researcher.

Further to this, the inception of this project unfortunately came at a time of personal difficulty, following a sudden family bereavement. Therefore, my initial motivation for the subject area itself felt like an alignment of both my values and personal circumstances, offering an opportunity to create a meaningful piece of work that I have felt a personal connection to.

Specific acknowledgement of the PERMA Model (Seligman 2011) was driven by my placement experience and how this was being applied in practice. I became interested in the ways in which Positive Psychology was being used in practice and intrigued by the way that research could be applied to assess and intervene. For example, the PERMA Profiler (Butler & Kern, 2015) was being used to measure wellbeing across the Local Authority (LA) with the data likely to influence the focus of interventions rolled out by the LA, and by individual schools.

I initially had reflections about what exactly the elements of the PERMA Model (Seligman, 2011) meant to young people, feeling that this could inform practical application of Wellbeing Theory

(Seligman, 2011) when working with this population. However, a preliminary literature search in this area highlighted the comparatively limited inclusion of young people within the development of the PERMA Profiler (Butler & Kern, 2015), developing a sense that the voices of young people were significantly under represented. Furthermore, working in a profession where I have become accustomed to placing young people at the centre of practice (Kelly, 1955), now more than ever (Department for Education [DfE], 2017), encouraged me to take a step back, shifting the focus from asking 'what is important to achieving 'PERMA' when working with young people?' to considering; 'is 'PERMA' even important to young people?'.

At inception, I was interested in both the views of the young people and of school staff, with the aim of making inferences between adult and young person perspectives. However, due to a number of practical challenges and ethical considerations as a result of the pandemic, I decided to focus efforts on young people themselves. Reflections relating to this will be addressed throughout this review. However, a possible avenue for future research may consider how perceptions differ to understand more about how young people's wellbeing is perceived.

I first became aware of Q methodology during conversations with my university tutors and fellow TEPs. I was interested in how this seemed to align with some of the methodologies used in previous research exploring the PERMA Model (i.e. Butler & Kern, 2016; Khaw & Kern, 2014; Kern, Waters, Adler & White, 2015) such as factor analysis, whilst incorporating methods that appreciate the human experience. This prompted a preliminary scope of the literature, which appeared to indicate limited use within the research context. Subsequently, I felt that Q methodology could not only build on previous research by increasing participant subjectivity, but offer valuable contributions to the understanding of a relatively underrepresented methodology within this population.

### ***2.1.2 Academic Rationale***

The literature surrounding mental health and wellbeing is incredibly vast, encompassing many different professional fields and areas of interest. Additionally, the present research was multi-faceted, incorporating not only wellbeing but Positive Psychology, pupil participation, and Q methodology. As such, it was recognised from the outset that the array of literature to be considered would be vast and a narrative approach to the literature review was adopted. Whilst it is acknowledged that other approaches exist, that may have either provided a wider and/or more structured synthesis (i.e. systematic, scoping, rapid and umbrella reviews; Grant & Booth, 2009), the decision to use a narrative style was made to offer a broad but considered account of the literature, contributing insights into important developments across the subject matters (Green, Johnson & Adams, 2006).

However, it is recognised that narrative reviews are considered to lack the advantage of objectivity that more structured approaches (i.e. systematic) have, with potential for researcher selectivity (Green et al., 2006). Therefore, attempts were made to represent the literature as best as possible, including considered search terms and inclusion/exclusion criteria. Due to the vast amount of literature returned from database searching, search terms were combined to increase specificity. However, it is recognised that despite these efforts a large amount of sifting and subjective decision making regarding relevance to the project was required.

Whilst it was difficult to navigate the extent of the literature across the multiple subject areas, on reflection of the final piece, I feel that I was able to offer a balanced view of theoretical and empirical developments, identifying valuable reflections of some research within these areas, subsequently informing the construction of the research questions.

## **2.2 Methodology and Design**

### ***2.2.1 Ontology and Epistemology***

Throughout my training I have found understanding the concepts of epistemology and ontology fairly difficult, with the philosophical nature of these often leaving me with the feeling that the closer I got to some understanding the more questions I would have. As a result, I spent a lot of time during the initial stages of the research trying to understand the different positions I could take and the impact that this would have on decisions made throughout the process. I considered the idea of pragmatism (Burnham, 2013) that encourages researchers to prioritise the contribution of research over their strict adherence to any one position, considering what methodologies and philosophical stance is best for any one context.

However, from my reading around ontology and epistemology, I began to feel that pragmatism alone felt detached from the process and that whilst I felt a sense of fluidity between my own positioning, I believed that my own beliefs were important to the process, impacting each stage of the research (Marsh & Furlong, 2002).

Subsequently, I concluded that my views about knowledge, as well as the identified gaps in the literature, aligned best with a critical realist stance. Therefore, I felt justified that that this was not only a pragmatic decision but was reflective of my own personal positioning as the researcher.

I was challenged during this process when faced with the reality of the ongoing Coronavirus (Covid-19) pandemic, prompting me to consider this context, concluding that it was essential to acknowledge as part of the research. At this stage the need for pragmatism became more evident, and encouraged me to re-evaluate my philosophical positioning in light of incorporating this new

aspect. I reflected on the domains of critical realism, as defined by Fletcher (2017), and felt that whilst my beliefs about knowledge (ontology) remained within a critical realist position, the level at which I could choose to observe phenomena could influence how I could go about knowing (epistemology). Therefore, I held that whilst I held a belief about the existence of a reality, the level at which this is observed will impact the way in which it is explored. Subsequently, this led me to my belief that seeking to obtain perspectives about the pandemic was in line with the empirical level of critical realism, and so aligned with a constructivist paradigm. Subsequently, I feel that this was in line with my overarching belief that there is an observable reality, however, that it is mediated through human interpretation (Fletcher, 2017).

### **2.2.2 Q Methodology**

**Choice to use Q Methodology.** Initial scopes of the research identified a range of methods that are used to explore the perspectives of young people in relation to their wellbeing, including questionnaires (Student Health Research Network [SHRN], 2019; Anderson & Graham, 2016) and focus groups (Hall, 2010; Gillet-Swan, 2014), ranging in their deductive and inductive approaches to data collection and interpretation. From this, I reflected on the advantages and disadvantages of qualitative and quantitative approaches to research, feeling that what was gained from one was often missing from the other.

Q methodology was brought to my attention as a 'quali-quanillogical' approach (Stenner & Stainton Rogers, 2004; Brown, 1996) and initial readings initiated my awareness of its relatively limited use within the research context.

When reflecting on the possible use of this methodology within my own study, I felt that it provided a systematic approach, offering a sense of alignment with previous research in the PERMA Model (Seligman, 2011), such as factor analysis (Butler & Kern, 2016; Khaw & Kern, 2014), whilst centralising participant's perspectives; the aim of the present study. Furthermore, when considering my ontological positioning and epistemological beliefs, I felt that the layered assumption about reality that encompasses critical realism (Fletcher, 2017) was acknowledged by the district stages within Q methodology, allowing for both an appreciation of human experience while attempting to observe more causal mechanisms.

Despite recognising my inexperience with Q methodology, I was motivated by the opportunity to advance my own skills and knowledge beyond approaches I had adopted in previous research. I felt that this learning process prompted me to be more considered throughout each stage.

Subsequently, I felt that Q methodology not only fit with how best to build on previous research but with my own motivations as a researcher.

**Strengths and Limitations of Q Methodology.** At its core, this research was driven by my interest in person-centred practices (Kelly, 1995), and motivation to facilitate the voice of young people. Within the literature Q methodology is perceived to be a 'person-centred' approach (Hughes, 2016) that offers an opportunity to challenge 'one size fits all' assumptions (as the 'PERMA' structure implies), providing a context where multiple viewpoints can be heard. When considering the literature around wellbeing and young people, I reflected on the roles of researcher and participant in the process, appreciating the advantage that more qualitative methodologies had in offering inductive (bottom-up) explorations, subsequently contributing more child-centred implications for practice.

However, I recognised that whilst qualitative methodologies often had advantages over purely quantitative designs in their participant focus during data collection, there remained potential for researcher bias through the imposition of an 'adult lens' during interpretation.

Alternatively, in contrast to induction and deduction (top-down), as often observed in purely qualitative and quantitative designs, Q methodology is considered to be an 'abductive' approach, where data is used to generate hypothesis that are most plausible (Watts & Stenner, 2012). In this sense, Q methodology is considered to address some of the power imbalance that can be observed within the research, offering a more equally weighted relationship between researcher and participant (Hughes, 2016).

However, whilst I feel that Q methodology better centralised young people within the present research, it is recognised that there is potential for researcher bias at each stage of the process. This led to particular decisions made in relation to methods and analysis that intended to reduce researcher subjectivity. These will now be discussed in relation to each stage of the process.

**Q Considerations: Concourse.** When defining the concourse, multiple approaches can be taken, including the consideration of ready-made (i.e. linguistic and non-linguistic) and/or self-referent (participant) sources (McKeown & Thomas, 1988). The decision was made to primarily focus on the more naturalistic approach of self-referent statements, deriving from the population of interest, as this was considered to align best with the research aims, with only the inclusion of the PERMA Profiler (Butler & Kern, 2016) elements at the second stage to provide a context where by the PERMA Model (Seligman, 2011) could be considered.

However, when exploring how to seek young people's self-referent statements in defining the concourse, I weighed up several methods including interviews, focus groups and questionnaires. At this stage I considered the ideas of pragmatism (Burnham, 2013) alongside my underpinning critical realist positioning, concluding that a constructivist epistemology offered the most relevance for the level at which I was seeking to understand the human experience (i.e. the empirical level; Fletcher, 2017), holding that each individual constructs and interprets their own reality (Fosnot, 2013).

Subsequently, I questioned the extent that interviews and focus groups aligned with my beliefs about how wellbeing is constructed by individuals. I felt that these methods would have been more in line with a social constructionism that posits that realities are co-constructed (Amineh & Asl, 2015). However, I wanted to appreciate the reality of individuals without the biases potentially present within interviews and focus groups. For example, it is possible that within interviews the researcher may unintentionally prompt participants through verbal and/or non-verbal communication (Cooper et al., 2007). Similarly, focus groups may have been influenced by participant dominance, prompting group agreement and construction, rather than appreciating individual realities (Smithson, 2000). In this sense, both interviews and focus groups had the potential for 'conformism', defined by Acoclla (2013) as "*the pressure of social conventions, thus pushing participants to express more socially desirable and stereotypical answers*" (p. 1134), which I felt had potential to deviate away from my aim of facilitating individual voices at this stage.

I recognised that interviews and focus groups could have been advantageous in their ability to provide a level of depth and richness in responses, however, I felt that questionnaires were the best method for mediating my own positioning as a researcher for this stage of the Q methodology, and the limitations presented by more interactive designs.

**Q Considerations: Q Set and Administration.** The process of reducing the concourse into a refined Q Set took place over several steps, aiming to accurately reflect young people's views as closely as possible (Brown, 1993). In order to increase objectivity, several methods were employed, including multiple reflection and reduction stages and a review and pilot study. This allowed for reflections on similarity in content as well as more child friendly phrasing of statements to aid accessibility.

My rationale for utilising online Q methodology software (PQMethod; Schmolck, 2018), in contrast to 'in-person' sorting, was synonymous with my aim to reduce researcher subjectivity, as it was felt to offer a context where young people would be free to independently share their views without peer or researcher pressure. However, on reflection, I feel that this may have created barriers to gaining access to the activity (i.e. digital poverty; see Spencer, 2020) as well as potentially in

understanding the activity itself. In an attempt to mediate challenges posed by the online interface, pilot feedback initiated several alterations to the presentation of the task, including rewording of statements, adjustments to instructions, and the development of a 'step by step' guide.

Despite this, I feel that given the range in ages this study was aimed at (11-19), the interface of the online software may have been difficult to navigate for younger participants, illustrating the need for more child friendly Q-software to support young people's involvement in such methodologies. For example, Q methodology allows for flexibility in statement presentation (Ellingsen et al., 2014), encouraging the use of methods that are considered most helpful for young people. In this sense, it is possible that software that allows for the inclusion of visuals, may increase participant understanding and possibly more reliable interpretations (Ellingsen et al., 2014).

**Q Considerations: Analysis and Interpretation.** The analysis stage of Q methodology posed a challenge, as whilst I had become familiar with the process through my reading, I was aware that I was new to using Q-Software (PQMethod; Schmolck, 2018) and interpreting quantitative data. This point is emphasised by McKeown and Thomas (2013) who state that "*familiarity with the principles of factor analysis and its associated statistical outcomes (factor loadings and factor weights, eigenvalues, and the like) is a prerequisite to conducting a project employing Q method*" (p. 2). I recognised the importance of this and employed several strategies to develop my understanding of the software, analysis, and subsequent outputs.

In addition to reading literature, I sought support from a professional who was familiar with Q methodology in research, as well as taking the time to observe tutorials in utilising and understanding PQMethod (Schmolck, 2018) and the outputs obtained as a result of various analytic methods. During the analysis I also took a significant amount of time inputting and trialling different analytic methods, ensuring I had a grounded understanding of what and why I had made particular decisions. This was subsequently reflected in a number of decisions made at this stage as discussed in detail below.

**Factor Extraction Method.** Within PQmethod there are two ways in which factors can be extracted; using Principle Component Analysis (PCA) and Varimax rotation, or Centroid Factor Analysis (CFA) and hand rotation, both provide indications of variance and reduce the data to a smaller set based on correlations (Tabachnick & Fidell, 2001). Whilst there appears to be little difference between CFA and PCA (McKeown & Thomas, 2013), PCA was chosen as it is considered to preserve "*as much variability as possible*" (Jolliffe & Cadima, 2016 p. 2). This was important to the research aims as I wanted to represent the viewpoints of individuals as much as possible.

PCA was also considered to be more in line with the level of critical realism at which I considered this stage of the process to be (real level), and more positivist epistemological approach, reflecting the existence of causal mechanisms. In this sense, PCA is distinct from CFA in that, rather than advocating that there is “*no mathematically correct solution out of the infinite number possible*” (McKeown & Thomas, 2013, p. 9), PCA along with Varimax rotation offer a more mathematically precise analysis.

The purpose of factor rotation is to maximise the number of variables (Q Sorts) as possible on the number of factors extracted (McKeown & Thomas, 2013). During the process, I trialled both Varimax and hand rotation to develop a sense of the advantages of one over the other. From this experience I appreciated the objectivity that Varimax rotation offered in distancing the researcher (Akhtar-Danesh, 2016), subsequently feeling more congruent with the purpose of the present research and reliable in its reflection of young people’s views.

**Factor Extraction Criteria.** When deciding how many factors to extract, I referred to a set of criteria to support my reasoning (Watts & Stenner, 2012). This included the consideration of eigenvalues (explanations of variance) in the first instance, factor loadings (clusters of Q Sorts) and between factor correlations. Throughout this process, I attempted to understand what different factor extractions meant to the results as a whole, concluding that a 3-factor model provided more distinct loadings that best represented the similarities and differences between Q Sorts.

I recognised that there was a moderate correlation between factor 1 and 3 (Schober et al., 2018), prompting me to consider a 2-factor extraction, however, I was aware of my ability to use researcher discretion at this stage and that reliance on purely statistical methods can potentially miss important nuances in opinion (Watts & Stenner, 2013). I felt that this was important given the fundamental aim of this research, therefore, I was eager to ensure that I did not restrict the voices of young people in favour of statistics.

Therefore, on reflection of the different possible factor extractions, I felt that not only did the 3-factor extraction provide more refined points of view, but also retained important distinctions in the views expressed.

**Interpretations.** My epistemological stance was again brought to the fore when undertaking the next stage of Q methodology (interpretation of factors), prompting my consideration of what layer of reality (as defined by critical realism; Fletcher 2017) I was seeking to observe. As I was interested at this stage in the ways in which opinions about wellbeing converged (as represented by factors), I felt that this was reflective of social constructivism (Amineh & Asl, 2015), appreciating the mediation

of joint human experiences can have on the interpretation of reality (empirical level; Fletcher, 2017). Similarly, this was felt to be representative of how I sought to understand young people's reflections on the Covid-19 pandemic, subsequently influencing my decision to analyse this data using Braun and Clarke's (2006) Thematic Analysis framework. Therefore, I felt that I had recognised my ontological positioning throughout the study, whilst considering how best to facilitate young people's voices in line with the research aims at each stage.

The qualitative nature of interpretations for both the Covid-19 related question and interpretation of factors prompted me to consider 'trustworthiness', defined by Lincoln and Guba (1985) as; credibility, transferability, dependability and confirmability.

I recognised the potential for researcher subjectivity at this stage of Q methodology and Thematic Analysis (Braun & Clark, 2006), however, attempted to mediate potential bias's and increase trustworthiness with the level of transparency relating to the examination and reporting of each factor and thematic theme. This was important given the aims of the present research to reduce the imposition of adult views and facilitate the voice of young people.

Further, during the Q interpretation process I followed recommendations as stated by Watts and Stenner (2012) to examine each factor, ensuring to reflect pupils views as closely as possible, as specified by their own sorting. Factor arrays, specific statements and positioning are displayed throughout the results, offering the reader the opportunity to assess credibility.

## **2.3 Ethical Considerations**

This study was approved by Cardiff University School of Psychology, and upheld the University's ethical guidelines as well as the British Psychological Society's Code of Human Ethics (BPS, 2014) and the British Educational Research Association guidelines (BERA, 2011) throughout. Whilst these were strictly adhered to throughout the design and implementation of this study, the following aims to highlight some ethical considerations made that were perceived influential to the process.

### **2.3.1 Consent**

It is essential that those taking part in research give their consent to do so, and should always be sought no matter their age and competence level (BPS, 2014). According to the BPS (2014), when including of participants under 16 years of age, consent from those with legal responsibility should be obtained. Therefore, this study sought consent from both parent/carer as well as young people prior to both parts of the research process, with careful consideration of wording to aid accessibility of both groups (BPS, 2011).

Furthermore, those providing consent need to be able to make informed judgements about what they are agreeing to (BPS, 2014). It is the researcher's responsibility to ensure that participants are provided with sufficient information relevant to their decision to participate (BERA, 2011). The BPS (2014) sets out several considerations, all of which were acknowledged by the inclusion of the information sheets that were presented prior to consent being sought.

According to the BPS (2014) "*it is crucial that participation in a research study is not coerced in any way*" (p. 20) as this not only compromises an individual's right to autonomy, but also the validity of the research itself. This was felt to be of extreme importance given the context within which this research was being conducted (i.e. Covid-19), needing to consider the priorities and wellbeing of all involved.

This became most influential when decisions were made to alter the initial design and implementation of the study. As previously mentioned, I had initially sought to include the views of school staff, to understand what adults perceived as important to young people and how this compared to young people themselves and the PERMA Model (Seligman, 2011). I had also hoped that this could be implemented within the school setting, therefore, mediating associated limitations related to digital poverty (Spencer, 2020).

I first attempted to distribute information via school's communication methods with parents and staff to raise awareness of the study and gain consent. However, it became evident that schools were under extreme pressure at this time, adapting their learning practices and prioritising communication means for Covid-19 related content. As a result, I felt that the inclusion of school staff needed to be reconsidered, and the means by which I was raising awareness of the study altered. Subsequently, social media platforms were used to increase distribution during the pandemic, attempting to ensure that participant's parents/carers were able to make an active choice about whether to engage or not. The use of social media for distribution was subsequently used for all parts of the study, ensuring that consent was relevant and given within an appropriate time frame for completion of each stage, as recommended by the BPS (2014) guidelines for research completed over time.

It is recognised that some of the methodological limitations may have influenced the accessibility of the study and acknowledge a need for interpretations to be made with this in mind. However, due to the alterations made, I feel that I was able to prioritise participant's rights and upheld ethical standards as a researcher during a time of considerable change and uncertainty.

### **3. Contribution to Knowledge and Dissemination**

#### **3.1 Contributions to Existing Knowledge and Relevance to Practice**

In part one, the literature surrounding young people's contributions to research was summarised, prompting consideration of alternative methodologies that immerse them in the process to facilitate their voices, particularly in reference to wellbeing. The use of Q methodology was identified as one such approach that is relatively limited in its use within this population, however, offered several advantages considered to mediate some of the identified limitations within previous research. Therefore, this study as a whole is considered to contribute to the overall research base for which researchers and practitioners can refer in the application of Q methodology within a youth population. I believe that this has illustrated the potential that Q methodology has in offering young people the opportunity to be 'co-researchers' and a part of the research process, rather than passive recipients of change (Fielding, 2001).

Furthermore, during the process I reflected on the use of Q methodology outside of the research context and the potential for application in practice in promoting more person-centred understanding of wellbeing within groups and/or individuals. I felt that one of the most valuable reflections that came from this study was the significance of acknowledging the variations in what young people perceive to be important, and whilst the PERMA Model (Seligman, 2011) may be a helpful starting point, what this means to young people and the importance they place on these (and additional elements) needs to be acknowledged when used for measurement and/or intervention.

I feel this research has illustrated the potential use of Q methodology within the educational context, where practitioners are able to follow similar administration to understand how wellbeing within the population (or individual[s]) of interest is perceived, subsequently making changes more meaningful and possibly interventions more effective. I will personally carry these reflections forward into my practice and aim to explore the ways in which Q methodology can be used within a more practical context.

A key finding from the concourse development and Q Sort was the identification and prioritisation of elements that both fit within the structure of the PERMA Model (Seligman, 2011) as well as additional constructs. This exemplifies the value in methodologies that centralise young people in research where their views can contribute to strengthening and furthering existing understanding.

This adds to the research base for the utility of the PERMA Model (Seligman, 2011) within this population, offering a person-centred rationale for the inclusion of elements that go beyond impact

and outcome measures. However, the identification of additional themes in this study, such as autonomy, control, health and respect, extend those considered within the PERMA structure and offer an insight into the value of considering these within a model of wellbeing within a youth population, as some applications of have begun to acknowledge (i.e. PERMA plus; The Wellbeing and Resilience Centre, n.d).

The variations in how young people appear to organise elements considered important to their wellbeing prompted me to reflect on how the PERMA Model (Seligman, 2011) is conceptualised. Seligman (2018) encourages users to consider these domains as ‘building blocks for wellbeing’, conjuring images of constructing your overall wellbeing from equal sized ‘bricks’, each representing the ‘PERMA-domains’ as a fixed, defined construct, that mean and look the same no matter who is using them. Whilst the order in which these are used (or ‘focused on’) can vary, they each have equal importance in the overall structure (‘flourishing’).

However, I feel that the responses in this study conjure a metaphor of wellbeing that is constructed of different elements (i.e. PERMA, alongside additional constructs), that, rather than thinking of as assembled from a static substance (i.e. ‘blocks’), I have come to conceptualise as consisting of a more malleable material (e.g. play dough). In this sense, each element (as represented by different colours) can be shaped to best represent meaning for each individual, and easily combined with others to represent overlap between constructs. I believe that utilising this metaphor gives practitioners a tool to get alongside young people in their constructions of wellbeing, supporting them to unpick what it means to them in order to best support.

### **3.2 Contributions to Future Research**

From this study I feel that there are several potential avenues that could be explored in future research. The first of these is the use of person-centred methodologies, particularly Q methodology, in supporting the efficacy of Positive Psychological Interventions (PPIs). This is based on previous research that has identified relatively small impact of PPIs within the educational context (Wright, 2020). When considered alongside the results in this study it could be argued the limited impact of PPIs may be due to inaccurate or incomplete conceptualisations of wellbeing from a Positive Psychological perspective. It would be interesting for future research to examine the effectiveness of wellbeing interventions that have been designed and implemented based on the views of young people, exploring whether this contributes to overall outcomes.

Further to this, I feel that the findings from this study compliment those from recent investigations into the Covid-19 pandemic (Rogers et al, 2021), where not all of what young people have experienced appears to be negative. For example, in this study some young people appeared to

value time with their family and reflected on personal and social growth. It would be interesting to further explore 'post-traumatic growth' (PTG; Jayawickreme et al., 2020; Waters et al., 2021) in line with an emerging body of literature (Lau et al., 2006; Rogers et al., 2021). PTG is the counter perspective to the more widely recognised 'post-traumatic stress', and is defined by Jayawickreme et al., (2020) as "*positive psychological change experiences as a result of adversity, trauma or highly challenging life circumstances*" (p. 145). I found these reflections uplifting in a time of such uncertainty, where we are so often surrounded by concerns about what young people will have 'missed' or 'lost' during this time.

The primary focus of this research was to explore Positive Psychology in relation to what young people perceive as important to their wellbeing and how they prioritise these elements alongside elements of the PERMA Model (Seligman, 2011). The fact that, by simply asking an open ended question about whether/how young people believe (i.e. 'what impact [if any] do you feel the Covid-19 pandemic has had on what you think it important to your wellbeing?') these positive exceptions to the common narrative arose. It would be interesting to see whether further explorations using a Positive Psychology perspective can be used in understanding ways to support young people 'post Covid-19, asking 'what have young people gained during this time?'

### **3.3 Dissemination**

I will carry my reflections from this process as well as the conclusions made into my practice as an EP, sharing these with colleagues as well as service users when supporting the wellbeing of young people. For example, I aim to utilise contexts such as consultation and discussions with professions to reflect on findings as well as apply to individual casework.

I feel that the findings have relevance in supporting evidence informed practice within educational psychology and are well placed within practice when considering application of Positive Psychology, namely PERMA (Seligman, 2011). As such, I would like to pursue publication of this research to contribute to the evidence base to which practitioners can refer, submitting to academic journals most relevant for EPs.

Furthermore, I feel that there would be value in integrating these findings into trainings for both those within the EP profession, as well as school staff, highlighting the application of the PERMA Model (Seligman, 2011) at different levels and the potential benefits and shortcomings of different approaches at different levels. This would aim to promote considered application of psychology in practice.

### **3.4 Concluding Reflections**

I have enjoyed the learning process that each stage of this project has offered, and whilst incredibly challenging at times, have appreciated the opportunity this has given me to develop skills as both a researcher and practitioner. The process has enhanced my enthusiasm for Positive Psychology and the ways in which this can be applied in practice, and has encouraged me to become more conscientious in my application of psychology, acknowledging the value of person-centred practice alongside this.

Despite the barriers presented by the Covid-19 pandemic in conducting this research, I feel that this promoted my recognition of wider systems and ethical considerations that should not only be acknowledged as we progress through this time, but when working with young people more generally. Subsequently, I feel that this process has influenced my appreciation for systemic models (i.e. Bronfenbrenner, 1979; Dodge, et al., 2021), even more so than before, and I aim to be more conscious of the interconnections between systems and what may be being experienced by individuals at any one time.

I hope to continue to apply research findings and theory within my role as a qualified practitioner, utilising the opportunity to continuously learn, progress and adapt as an individual, as well as offer contributions to the psychological profession as a whole through research.

#### 4. References

- Acocella, I. (2012). The focus groups in social research: advantages and disadvantages. *Quality & Quantity, 46*(4), 1125-1136.
- Akhtar-Danesh, N. (2016). An overview of the statistical techniques in Q-methodology: Is there a better way of doing Q-analysis. *Operant Subjectivity, 38*(3-4), 29-36.
- Amineh, R. J., & Asl, H. D. (2015). Review of constructivism and social constructivism. *Journal of Social Sciences, Literature and Languages, 1*(1), 9-16.
- Berk, M., Otmar, R., Dean, O., Berk, L., & Michalak, E. (2015). The use of mixed methods in drug discovery: Integrating qualitative methods into clinical trials. In M. Tohen, C. Bowden, A. Nierenberg, J. & Geddes (Ed.), *Clinical Trial Design Challenges in Mood Disorders* (pp. 59-74).
- British Educational Research Association (BERA) (2011). *Ethical guidelines for educational research*. Southwell: BERA.
- Bronfenbrenner, U. (1979). *Ecology of human development: Experiments by nature and design*. Cambridge: Harvard University Press.
- Brown, S.R. (1996). Q methodology and qualitative research. *Qualitative Health Research, 6*(4), 561-567.
- Brown, S. R. (1993). A primer of Q methodology. *Operant Subjectivity, 16*(3), 91-138.
- Burnham, S. (2013). Realists or pragmatists? Reliable evidence and the role of the educational psychologist. *Educational Psychology in Practice, 29*(1), 19-35.
- Butler, J., & Kern, M. L. (2016). The PERMA-Profil: A brief multidimensional measure of flourishing. *International Journal of Wellbeing, 6*(3), 1-48.
- Cooper, J.O., Heron, T.E., & Heward, W.L. (2007). *Applied behavior analysis* (2nd Ed.). Upper Saddle River: Pearson.

- Department for Education (DfE) (2017). *Government response to the consultation on transforming children and young people's mental health provision: A green paper*. London: DfE.
- Ellingsen, I. T., Thorsen, A. A., & Størksen, I. (2014). Revealing children's experiences and emotions through Q methodology. *Child Development Research*, 1-9.
- Fielding, M. (2001). Students as radical agents of change. *Journal of Educational Change*, 2, 123–41.
- Fletcher, A.J. (2017). Applying critical realism in qualitative research: methodology meets method. *International Journal of Social Research Methodology*, 20(2), 181-194.
- Fosnot, C. T. (2013). *Constructivism: Theory, perspectives, and practice*. London: Teachers College Press.
- Frederickson, N. (2002). Evidence-based practice and educational psychology. *Educational and Child Psychology*, 19(3), 96-111.
- Gillett-Swan, J. K. (2014). Investigating tween children's capacity to conceptualise the complex issue of wellbeing. *Global Studies of Childhood*, 4(2), 64-76.
- Grant, M.J., & Booth, A. (2009). A typology of reviews: An analysis of 14 review types and associated methodologies. *Health Information and Libraries Journal*, 26(2), 91-108.
- Green, B. N., Johnson, C. D., & Adams, A. (2006). Writing narrative literature reviews for peer-reviewed journals: secrets of the trade. *Journal of Chiropractic Medicine*, 5(3), 101-117.
- Hall, S. (2010). Supporting mental health and wellbeing at a whole-school level: Listening to and acting upon children's views. *Emotional and behavioural difficulties*, 15(4), 323-339.
- Health Care and Professions Council (HCPC) (2016). *Standard of conduct, performance and ethics*. London: HCPC.
- Hughes, M. (2016). Critical, respectful, person-centred: Q methodology for educational psychologists. *Educational and Child Psychology*, 33(3), 63-75.

- Jayawickreme, E., Infurna, F. J., Alajak, K., Blackie, L. E., Chopik, W. J., Chung, J. M., & Zonneveld, R. (2021). Post-traumatic growth as positive personality change: Challenges, opportunities, and recommendations. *Journal of personality, 89*(1), 145-165.
- Johnson, B. & Turner, L. A. (2003). Data collection strategies in mixed methods research. In A. Tashakkori & C. Teddie (Eds.). *Handbook of mixed methods in social and behavioral research* (pp. 297-319). Thousand Oaks, CA: Sage
- Jolliffe, I. T., & Cadima, J. (2016). Principal component analysis: a review and recent developments. *Philosophical Transactions of the Royal Society A: Mathematical, Physical and Engineering Sciences, 374*, 1-16.
- Kelly, G. A. (1955). *The psychology of personal constructs*. New York: Norton.
- Khaw, D., & Kern, M. (2014). A cross-cultural comparison of the PERMA model of well-being. *Undergraduate Journal of Psychology at Berkeley, 8*(1), 10-23.
- Lincoln, Y.S., & Guba, E.G. (1985). *Naturalistic Inquiry*. Newbury Park, CA: Sage.
- Marsh, D., & Furlong, P. (2002). A skin not a sweater: Ontology and epistemology in political science. *Theory and Methods in Political Science, 2*, 17-41.
- McKeown, B., & Thomas, D.B. (2013). *Q methodology*. London: Sage Publications Ltd.
- McKeown, B., & Thomas, D.B (1988). *Q Methodology*. Newbury Park: Sage.
- Rogers, A. A., Ha, T., & Ockey, S. (2021). Adolescents' perceived socio-emotional impact of Covid-19 and implications for mental health: Results from a US-based mixed-methods study. *Journal of Adolescent Health, 68*(1), 43-52.
- Seligman, M. (2018). PERMA and the building blocks of well-being. *The Journal of Positive Psychology, 13*(4), 333-335.
- Seligman, M. (2011). *Flourish*. London: Nicholas Brealey Publishing.

- Schmolck, P. (2018). *PQMethod Software*. Retrieved February 17, 2021, from [www.schmolck.org/qmethod/](http://www.schmolck.org/qmethod/).
- Schober, P., Boer, C., & Schwarte, L. A. (2018). Correlation coefficients: appropriate use and interpretation. *Anesthesia & Analgesia*, *126*(5), 1763-1768.
- Spencer, C. (2020, May 22). *Coronavirus: Digital poverty 'a threat to children in care*. BBC News. Retrieved 15 February, 2021, from <https://www.bbc.co.uk/news/uk-wales-52654426>
- Stenner, P., & Rogers, R. S. (2004). The example of discriminating between emotions: Mixing methods in psychology. *The integration of Qualitative and Quantitative Methods in Theory and Practice*, *101*.
- Student Health and Research Network. (2019) *Student Wellbeing in Wales: Initial findings from the 2017/18 Health Behaviour in School-aged Children Survey and School Health Research Network Student Health and Wellbeing Survey*. Retrieved from [https://shrn.org.uk/wp-content/uploads/2019/05/Wellbeing-Briefing-Paper\\_FINAL\\_070319.pdf](https://shrn.org.uk/wp-content/uploads/2019/05/Wellbeing-Briefing-Paper_FINAL_070319.pdf)
- Smithson, J. (2000). Using and analysing focus groups: Limitations and possibilities. *International Journal of Social Research Methodology*, *3*(2), 103-119.
- Stephenson, W. (2014). General theory of communication. *Operant Subjectivity: The International Journal of Q Methodology*, *37*(3), 38-56
- Tabachnick, B.G., & Fidell, L.S. (2001). Principal components and factor analysis. *Using Multivariate Statistics*, *4*(1), 582-633.
- Tang, R., & John, S. (1999). The 'I' in identity: Exploring writer identity in student academic writing through the first person pronoun. *English for specific purposes*, *18*, S23-S39.
- The British Psychological Society (BPS). (2014). *Code of human research ethics*. Leicester: BPS
- The British Psychological Society (2009). *Code of ethics and conduct*. Leicester: BPS.

Viner, R. M., Allen, N. B., & Patton, G. C. (2017). Puberty, developmental processes, and health interventions. *Child and adolescent health and development, 8*, 1841.

Watts, S., & Stenner, P. (2012). *Doing Q methodological research: Theory, method & interpretation*. London: Sage.

Wright, D. (2020). *Implementing Effective Positive Psychology Interventions to Support the Well-Being of Young People in Schools: A Meta-Analysis of Randomised and Non-Randomised Interventions and a Q Study of Educational Psychologists' Perceptions Regarding Effective Implementation* (Unpublished doctoral thesis). Cardiff University, Cardiff, UK.

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## Appendix A: Gate Keeper Letter

Address\_\_\_\_\_

Date\_\_\_\_\_

Dear\_\_\_\_\_

I am a doctorate student in the School of Psychology, Cardiff University. As part of my degree I am carrying out a study on adolescent wellbeing. I am writing to enquire whether you would be willing for me to contact schools within the Local Authority. This would involve inviting ALNCo's and young people between the ages of 11-19 to take part.

The project will involve two parts; the first will invite participants to take part in an online questionnaire that aims to gather views about adolescent wellbeing. This will take approximately 30 minutes for participants to complete. The second part of the study will involve an activity that requires participants to sort statements about adolescent wellbeing according to a hierarchy of the importance of each statement to them. This will take between 45-60 minutes of the participant's time.

I am seeking permission to approach all secondary schools within the local authority via email and/or telephone, with the aim of informing schools about the study. Due to COVID-19 and social distancing procedures, I aim to ask to schools to contact all parents (via their choice method, i.e. text/email) of children aged 11-19 within their setting, notifying them of the study and seeking their consent online. I will also ask schools to provide a link to parental consent via their virtual learning platforms. The consent form will seek to obtain both parental and child email addresses which will be used to confirm parental consent and to provide a link to the questionnaire. Parents will be provided with an option to indicate their willingness to be contacted in the second part of this study. Parents who consent to their child participating in both parts of the study will be contacted via email to provide consent at the point the second stage begins.

Participation will be voluntary and informed consent will be obtained from all participants before participation in the study.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,  
Lauran Eckloff.  
Trainee Educational Psychologist.

Dr Rosanna Stenner (Research Supervisor)	StennerR@cardiff.ac.uk
Lauran Eckloff (Researcher)	eckloffl@cardiff.ac.uk
Psychology Research Ethics Committee	Psychethics@cardiff.ac.uk
	Cardiff University
	Tower Building

	70 Park Place Cardiff CF10 3AT 02920 870360
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## Appendix B: Parent/Carer Information and Consent Form

### School of Psychology, Cardiff University

Dear Parent/Carer,

My name is Luran Eckloff and I am a doctorate student in the School of Psychology, Cardiff University. As part of my degree I am carrying out a study on adolescent wellbeing.

I am writing to inform you of a research project I am hoping to run in your child's school between June 2020 and September 2020. The study will begin \_\_\_\_\_ in your child's school.

#### What is the aim of this study?

This study aims to develop an understanding of what is felt to be important to young people. This hopes to help understand how those working with young people can best support them.

The findings will be written up and submitted to Cardiff University as part of the researcher's doctoral studies and may be used in presentations and published in a journal. If you would like to find out more, a summary of the findings can be made available to you by contacting the researcher via the email addresses provided below.

#### What will taking part involve?

This study will involve your child completing an online questionnaire about wellbeing. There will be two questions in which they will be able to respond with as much or as little as they feel necessary.

The questionnaire will take approximately 30 minutes to complete.

Information will be gathered anonymously and will only be accessible to the researcher and research supervisor. Participation is voluntary and you and your child will have the right to withdraw participation until the point they have submitted their questionnaire when it will become untraceable. Your/their decision to withdraw will have no negative consequences and there are no known risks/harm associated with taking part in this study.

If you **would** like your child to participate please read the following information and tick the corresponding boxes if you have read, understood and agree to the statements.

---

	Please tick that you have read and agree to the relevant statement
I understand that my child's participation in this project will involve completing a questionnaire about wellbeing which will require approximately 30 minutes of their time.	
I understand that my child's participation in this study is entirely voluntary and that they/I can withdraw from the study at any time without giving a reason.	

I understand that I/my child are free to ask any questions at any time. I am free to withdraw my child or discuss my concerns with the researcher, Lauran Eckloff or the supervisor, Dr Rosanna Stenner.	
I understand that at the end of the study I my child will be provided with additional information and feedback about the purpose of the study.	
I understand that the research information provided by my child will be held anonymously, so that it is impossible to trace this information back to them as an individual. I understand that this information may be retained indefinitely or published.	

I, \_\_\_\_\_ (Parent/Carer Name), parent/carer of \_\_\_\_\_ (child's name) give consent for my child to participate in the study conducted by Lauran Eckloff School of Psychology, Cardiff University with the supervision of Dr Rosanna Stenner.

To confirm that you have consented to your child's participation and to receive a link to access the questionnaire, please provide your and your child's email addresses.

Parental Email Address:

Child/Participant Email Address:

Please tick the box below if you agree to be contacted about the second stage of this study

If you have any questions or concerns, contacts are listed below.

Dr Rosanna Stenner (Research Supervisor)	StennerR@cardiff.ac.uk
Lauran Eckloff (Researcher)	eckloffl@cardiff.ac.uk
Psychology Research Ethics Committee	<a href="mailto:psychethics@cardiff.ac.uk">psychethics@cardiff.ac.uk</a> Cardiff University Tower Building 70 Park Place Cardiff CF10 3AT  02920 870360

**Privacy Notice:**

The information provided on the consent form will be held in compliance with GDPR regulations. Cardiff University is the data controller and Matt Cooper is the data protection officer

(inforequest@cardiff.ac.uk). This information is being collected by Luran Eckloff. This information will be held securely and separately from the research information you provide. Only the researcher will have access to this form and it will be destroyed after 7 years. The lawful basis for processing this information is public interest.

### Appendix C: Notification for all parents/carers of children aged 11-19

As part of a Doctoral Thesis, Trainee Educational Psychologist, Luran Eckloff is carrying out a study on adolescent wellbeing and would like to invite your child to participate in a questionnaire.

For more information and/or to provide consent to your child's participation, please click on the following link.

"Participate in Research"

If you have any questions or queries, please contact the researcher or supervisor on the details below.

Dr Rosanna Stenner (Research Supervisor)	StennerR@cardiff.ac.uk
Luran Eckloff (Researcher)	eckloffl@cardiff.ac.uk
Psychology Research Ethics Committee	<a href="mailto:psychethics@cardiff.ac.uk">psychethics@cardiff.ac.uk</a> Cardiff University Tower Building 70 Park Place Cardiff CF10 3AT  02920 870360

## Appendix D: Young Person Information and Consent

### School of Psychology, Cardiff University

You are invited to take part in a study to understand views of adolescent wellbeing.

#### What is the study about?

This study hopes to develop an understanding of the views of adolescents on wellbeing and what is felt to be important to young people and those working within schools. This will help to understand how those working with young people can best support them.

#### What will I do?

- This study will involve completing an online questionnaire about your wellbeing.
- There will be two questions in which you will be able to write as much or as little as you feel you want to.
- The questionnaire will take around 30 minutes to complete.

#### Some more information

- Information will not be traceable back to you. Information will only be accessible to the researcher and research supervisor.
- Taking part is voluntary and you can stop at any point. Once your responses have been submitted, they will become untraceable and unable to be removed from the study.
- You will not receive any negative consequences for choosing not to take part or to remove yourself from the study. There are no known risks/harm for taking part in this study.
- This study has been reviewed and ethically approved by School of Psychology Research Ethics Committee.

If you have any questions or concerns, contacts are listed below.

Dr Rosanna Stenner (Research Supervisor)	StennerR@cardiff.ac.uk
Lauran Eckloff (Researcher)	eckloffl@cardiff.ac.uk

	Please tick that you have read and agree to the relevant statement
I understand that taking part in this study will involve completing a questionnaire on my views of wellbeing which will take around 30 minutes of my time.	
I understand that I do not have to take part in this study if I do not want to and that I can stop at any time without giving a reason.	
I understand that I am free to ask any questions to the researcher, Lauran Eckloff or the supervisor, Dr Rosanna Stenner.	

I understand that at the end of the study I will be given more information and feedback about the study.	
I understand that my answers will be impossible to trace back to me. I understand that this information may be kept forever or published.	
I consent to participate in the study conducted by Luran Eckloff School of Psychology, Cardiff University with the supervision of Dr Rosanna Stenner.	

If you have any questions or concerns, contacts are listed below.

Dr Rosanna Stenner (Research Supervisor)	StennerR@cardiff.ac.uk
Luran Eckloff (Researcher)	eckloffl@cardiff.ac.uk
Psychology Research Ethics Committee	<a href="mailto:psychethics@cardiff.ac.uk">psychethics@cardiff.ac.uk</a>  Cardiff University Tower Building 70 Park Place Cardiff CF10 3AT  02920 870360

**Privacy Notice:**

The information provided on the consent form will be held in compliance with GDPR regulations. Cardiff University is the data controller and Matt Cooper is the data protection officer (inforequest@cardiff.ac.uk). This information is being collected by Luran Eckloff. This information will be held securely and separately from the research information you provide. Only the researcher will have access to this form and it will be destroyed after 7 years. The lawful basis for processing this information is public interest.

## Appendix E: Questionnaire Debrief Form

Thank you for taking part in this questionnaire.

### What was the study about?

- To understand how young people view adolescent wellbeing.
- This study aims to develop an understanding of how young people view wellbeing and the similarities and differences between how professionals currently support wellbeing. It is hoped that the results will help professionals understand how to best work with young people to prevent mental ill health and support wellbeing.

### What will happen to the information gathered?

- The findings will be written up and submitted to Cardiff University as part of the researcher's doctoral studies and may be used in presentations and published in a journal.
- Data will not be traceable to you from the point of submission.
- If you would like to find out more, a summary of the findings can be made available to you by contacting the researcher via the email addresses provided below.

### Privacy Notice:

The information provided on the consent form will be held in compliance with GDPR regulations. Cardiff University is the data controller and Matt Cooper is the data protection officer ([inforequest@cardiff.ac.uk](mailto:inforequest@cardiff.ac.uk)). This information is being collected by Lauran Eckloff. This information will be held securely and separately from the research information you provide. Only the researcher will have access to this form and it will be destroyed after 7 years. The lawful basis for processing this information is public interest.

If you have any questions or concerns, contacts are listed below.

Dr Rosanna Stenner (Research Supervisor)	<a href="mailto:StennerR@cardiff.ac.uk">StennerR@cardiff.ac.uk</a>
Lauran Eckloff (Researcher)	<a href="mailto:eckloffl@cardiff.ac.uk">eckloffl@cardiff.ac.uk</a>

### Appendix F: Q-Sort: Initial Identification of Themes

Theme	Responses
<b>Meaning</b>	<ul style="list-style-type: none"> <li>• Politics</li> <li>• Social justice,</li> <li>• Equality</li> <li>• Being engaged in what's happening around the world</li> <li>• My passion</li> </ul>
<b>Autonomy</b>	<ul style="list-style-type: none"> <li>• Having control over my well-being</li> <li>• Making choices myself</li> <li>• Being trusted to make my own choices</li> <li>• I need time to myself after school</li> <li>• I like my own space.</li> <li>• Spending my time alone is comforting to me</li> <li>• Having some time to myself</li> </ul>
<b>Respect</b>	<ul style="list-style-type: none"> <li>• Being listened to and appreciated</li> <li>• When I'm not on my own, I appreciate the people around me showing respect.</li> </ul>
<b>Food</b>	<ul style="list-style-type: none"> <li>• Chocolate</li> <li>• Eat anytime in the day</li> <li>• Food makes me happy</li> <li>• Trying new foods</li> </ul>
<b>Engagement</b>	<ul style="list-style-type: none"> <li>• I like my Xbox</li> <li>• Scootering</li> <li>• Being able to play and enjoy my games.</li> <li>• Enjoying myself - playing games and going out on my bike.</li> <li>• Going for walks.</li>   <li>• I also enjoy reading and watching tv.</li> <li>• Sports</li> <li>• Sports</li> <li>• Going to dance</li> <li>• Singing lessons</li> <li>• Listening to music,</li> <li>• Singing,</li> <li>• Listening to music,</li> <li>• Being able to travel</li> <li>• Participation in sport</li> <li>• Listening to music.</li> <li>• Discovering new music</li> <li>• Watching films</li> <li>• Being in school</li> <li>• Video games</li> <li>• Music</li> <li>• Games</li> <li>• Listen to music</li> <li>• Doing activities like rugby, boxing</li> </ul>
<b>Relationships</b>	<ul style="list-style-type: none"> <li>• My family and friends</li> <li>• I have an amazing mum and step dad</li> <li>• Time with my friends and family</li> <li>• Friends</li> <li>• I like talking to my family but not straight after school.</li> <li>• My family and my dog.</li> <li>• Spending time with people I care about</li> <li>• Spending time with family and friends</li> <li>• Friends, Family</li> <li>• And my mates and family</li> </ul>

	<ul style="list-style-type: none"> <li>• Friends family</li> <li>• That I'm with my family</li> <li>• Having friends,</li> <li>• Being with my family.</li> <li>• Spending time with family and friends</li> <li>• My friends and family</li> <li>• Making others happy, and my family happy</li> <li>• My friends</li> <li>• My family and my friends</li> <li>• spend time with my family</li> <li>• I really value whatever time I get to spend with my family.</li> <li>• Having a good support system</li> <li>• Having time to spend with friends and family</li> <li>• Being able to help others.</li> <li>• helping others achieve their potential</li> <li>• having fun enjoying with my family</li> <li>• Being with friends or family</li> <li>• Family</li> <li>• Spending time with friends</li> <li>• The relationships I make with people</li> <li>• Feeling loved at all times.</li> <li>• I believe everyone should treat everyone else how they would want to be treated, which should be nothing but kindness.</li> <li>• having the support of my family and friends</li> <li>• Being as kind as possible</li> <li>• Friends and family</li> <li>• Caring people surrounding you anywhere</li> <li>Having friends</li> <li>• Going out with friends</li> <li>• Being able to look after others</li> <li>• Keeping in contact with loved ones</li> <li>• Maintaining a good social life</li> <li>• Social interaction</li> <li>• People</li> <li>• Seeing my friends</li> </ul>
<b>Achievement</b>	<ul style="list-style-type: none"> <li>• Doing things right</li> <li>• Success</li> <li>• Fulfil goals</li> <li>• Success</li> </ul>
<b>Positive Emotion</b>	<ul style="list-style-type: none"> <li>• Making memories and having enjoyment out of everything I do</li> <li>• having fun</li> <li>• making good memories</li> <li>• and not worrying about preventions</li> <li>• Enjoying school</li> <li>• Helping people having fun</li> <li>• That my others are happy</li> <li>• That my family are happy</li> <li>• Feeling true happiness and enjoying every moment of life.</li> <li>• Having things that I enjoy having</li> <li>• To be happy and feel fulfilled</li> </ul>
<b>Health</b>	<ul style="list-style-type: none"> <li>• Keeping fit</li> <li>• Becoming fit to lose weight</li> <li>• Exercise</li> <li>• Sleep</li> <li>• Exercise</li> <li>• Staying active</li> <li>• Eating healthy</li> </ul>

<b>Safety</b>	<ul style="list-style-type: none"><li>• Importance of happiness and wellbeing, is to feel safe</li><li>• Safe and happy.</li><li>• staying healthy</li><li>• A good environment</li><li>• Staying healthy</li></ul>
<b>Nature</b>	<ul style="list-style-type: none"><li>• outside world</li><li>• Being outside</li></ul>

## Appendix G: PERMA Profiler Statement Conversation

*Note: Coloured items are used for reference in order to identify PERMA items against young person statements*

### PERMA Profiler Statement Conversion

Label	Profiler Question	Statement Conversion
A1	How much of the time do you feel you are making progress towards accomplishing your goals?	Making progress towards my goals
E1	How often do you become absorbed in what you are doing?	Feeling absorbed in what I am doing
P1	In general, how often do you feel joyful?	Feeling happy
N1	In general, how often do you feel anxious?	To not feel anxious
A2	How often do you achieve the important goals you have set for yourself?	Achieving goals you have set for yourself
H1	In general, how would you say your health is?	To be healthy
M1	In general, to what extent do you lead a purposeful and meaningful life?	Making life meaningful and having a purpose
R1	To what extent do you receive help and support from others when you need it?	Having help and support from others when I need it
M2	In general, to what extent do you feel that what you do in your life is valuable and worthwhile?	Making sure the things I do are meaningful and worth my time
E2	In general, to what extent do you feel excited and interested in things?	Feeling excited and interested in things
Lon	How lonely do you feel in your daily life?	To not feel lonely
H2	How satisfied are you with your current physical health?	To feel healthy
P2	In general, how often do you feel positive?	Feeling positive
N2	In general, how often do you feel angry?	To not feel angry
A3	How often are you able to handle your responsibilities?	Being able to cope with what I have to do
N3	In general, how often do you feel sad?	To not feel sad
E3	How often do you lose track of time while doing something you enjoy?	Being able to spend time on things I enjoy
H3	Compared to others of your same age and sex, how is your health?	To be as healthy as I can
R2	To what extent do you feel loved?	To feel loved
M3	To what extent do you generally feel you have a sense of direction in your life?	To feel like what I'm doing is keeping me on track
R3	How satisfied are you with your personal relationships?	To feel happy with the relationships I have
P3	In general, to what extent do you feel contented?	To feel grateful for what I have
Hap	Taking all things together, how happy would you say you are?	To feel happy

PERMA ITEMS INCLUDED IN PROFILER	P	Positive Emotion
	E	Engagement
	R	Relationships
	M	Meaning
	A	Achievement
ADDITIONAL ITEMS INCLUDED IN PROFILER	N	Negative Emotion
	H	Health
	Hap	Happiness

## Appendix H: Q-Sort Initial Statement Conversion

*Note: Coloured items refer to PERMA Profiler statements. See Appendix 4 for details*

Theme	Statement Conversion and PERMA Profiler Items Removal of Duplicates
<b>Meaning</b>	Knowing about and being involved in politics Knowing about and being involved in social justice Knowing and being involved in equality Making life meaningful and having a purpose Making sure the things I do are meaningful and worth my time To feel like what I'm doing is keeping me on track
<b>Autonomy</b>	Making choices myself Having control over my wellbeing Being trusted to make my own choices Having some time to myself Having my own space
<b>Respect</b>	Being listened to Being appreciated Others showing me respect
<b>Food</b>	Eating when I want to Trying new foods Having chocolate or sweet foods
<b>Engagement</b>	Being able to play and enjoy my games Doing activities (e.g. sport, music lessons) Listening to music and watching films Being in school Feeling absorbed in what I am doing Feeling excited and interested in things Being able to spend time on things I enjoy
<b>Relationships</b>	Spending time with friends and family Being kind to others Being able to help and look after others Making new friendships Having supportive and caring people around me Feeling loved Making others happy Making relationships with people Having help and support from others when I need To feel loved To feel happy with the relationships I have
<b>Achievement</b>	Feeling like I am doing well Reaching my own goals

	<p>Doing things right</p> <p>Making progress towards my goals</p> <p>Achieving goals you have set for yourself</p> <p>Being able to cope with what I have to do</p>
<b>Positive Emotion</b>	<p>Making new memories</p> <p>Making others happy</p> <p>Feeling happy and fulfilled</p> <p>Having fun</p> <p>Feeling happy</p> <p>Feel positive</p> <p>To feel grateful for what I have</p>
<b>Health</b>	<p>Keeping fit</p> <p>Taking part in exercise</p> <p>Having enough sleep</p> <p>Exercise</p>
<b>Safety</b>	<p>To feel safe</p> <p>Having a good environment where I feel safe</p>
<b>Nature/Freedom</b>	<p>Spending time outside</p> <p>Being able to travel</p>

### Appendix I: Q-Sort Second Stage Statement Refinement

Theme	Statement
<b>Meaning</b>	Know about and am involved in important world issues (e.g. politics social justice and equality) Make sure the things I do are meaningful and worth my time Feel like what I'm doing is important
<b>Autonomy</b>	Am able to make my own choices Have control over my wellbeing Am trusted to make my own choices Have time to myself Have my own space
<b>Respect</b>	Am listened to Am appreciated Have others show me respect
<b>Food</b>	Eat when I want to Try new foods Have chocolate or sweet foods
<b>Engagement</b>	Take part in organised activities (e.g. sport/ music lessons) Learn in school Spend time on things I enjoy (e.g. playing games, listening to music, watching films) Make new memories Feel absorbed in what I am doing Feel excited and interested in things
<b>Relationships</b>	Spend time with friends Spend time with family Am kind and help others Make others happy Make new friendships Have supportive and caring people around me Feeling loved Feel happy with the relationships I have (e.g. friendships/family)
<b>Achievement</b>	Feel like I am doing well Reach my own goals Feel like I'm doing things right Am able to cope with what I have to do
<b>Positive Emotion</b>	Feel happy and fulfilled Have fun Feel positive Feel grateful for what I have
<b>Health</b>	Keep fit Take part in exercise Have enough sleep

<b>Safety</b>	To feel safe Have a good environment where I feel safe
<b>Nature/Freedom</b>	Spend time outside Am able to travel

## Appendix J: Pilot Feedback and Post Trial Run Reflections

### Young Person Feedback

- On a 5 point scale, with 1 representing 'very easy' and 5 'very hard', the task was rated as a 4 ('hard')
- When asked what changes could be made to the activity to make it easier to understand the following points were shared:
  - *"The boxes, change them to more understandable things for children".* (It was suggested that these could be 'No, not important for my wellbeing', 'Kind of important to my wellbeing' and 'Yes, very important to my wellbeing')
  - *"When I start it I would prefer an adult to explain. It is easier if it is explained that it is important to my wellbeing not what happens or not".*
- No duplicates and no additional statements were identified by the young person

### Educational Psychologist Feedback/Reflections

- Rather than instructions indicating for sentence filler each item could be read as "It is important for my wellbeing that \*STATEMENT\*". This would aim to support participants understanding of the purpose of sorting (i.e. in order of importance, rather than into what they feel is true or not).
- Consider providing instructions. The interface of the online presentation is likely to be difficult for young participants to navigate alone.
- Change wording of sorting categories to make the activity easier to understand
- Researcher identification of duplicates and similarities in context (i.e. feel like what I'm doing is important/meaningful and worth my time and combination of items referring to exercising and keeping fit/providing some statements in combination with others as examples)
- Rewording of some items (e.g. absorbed reworded as 'focused')

## Appendix K: Parent/Carer Q-Sort Information and Consent

Dear Parent/Carer,

### What is the aim of this study?

This study aims to develop an understanding of adolescent wellbeing and what is felt to be important to young people. This will help to understand how those working with young people can best support them.

The findings will be written up and submitted to Cardiff University as part of the researcher's doctoral studies and may be used in presentations and published in a journal. If you would like to find out more, a summary of the findings can be made available to you by contacting the researcher via the email addresses provided below.

### What will taking part involve?

This study will involve your child reading a number of statements about wellbeing and ordering them into what they feel is most and least important to their wellbeing.

There are no right or wrong answers and will take approximately 30 minutes to complete.

Information will be gathered anonymously and will only be accessible to the researcher and research supervisor.

Participation is voluntary and you/your child have the right to withdraw participation until the point they have submitted their responses when it will become untraceable to them. Your/your child's decision to withdraw will have no negative consequences and there are no known risks/harm associated with taking part in this study.

This study has been reviewed and ethically approved by School of Psychology Research Ethics Committee.

**Please read the following statements and check to indicate that you have read, understood and agree to each.**

	Please tick that you have read and agree to the relevant statement
I understand that taking part in this study will involve my child reading a number of statements about wellbeing and ordering them into what they feel is most or least important to them. This will take around 30 minutes of their time.	
I understand that my child does not have to take part if I/they do not want them to and that I can stop the study at any time without giving a reason.	
I understand that I/my child is free to ask any questions by emailing the researcher, Lauran Eckloff or the supervisor, Dr Rosanna Stenner.	

I understand that at the end of the study my child will be given more information and feedback about the purpose of the study.	
I understand that no one will be able to know that my child's answers belong to them. I understand that this information may be kept forever or published.	

I, \_\_\_\_\_ (Parent/Carer Name) parent of \_\_\_\_\_ (Child's Name) give consent for my child to participate in the study conducted by Luran Eckloff School of Psychology, Cardiff University with the supervision of Dr Rosanna Stenner.

To confirm that you have consented to your child's participation and to receive a link to access the activity, please provide your and your child's email addresses.

Parental Email Address:

Child/Participant Email Address:

If you have any questions or concerns, contacts are listed below.

Dr Rosanna Stenner (Research Supervisor)	StennerR@cardiff.ac.uk
Luran Eckloff (Researcher)	eckloffl@cardiff.ac.uk
Psychology Research Ethics Committee	<a href="mailto:psychethics@cardiff.ac.uk">psychethics@cardiff.ac.uk</a> Cardiff University Tower Building 70 Park Place Cardiff CF10 3AT  02920 870360

**Privacy Notice:**

The information provided on the consent form will be held in compliance with GDPR regulations. Cardiff University is the data controller and Matt Cooper is the data protection officer (inforequest@cardiff.ac.uk). This information is being collected by Luran Eckloff. This information will be held securely and separately from the research information you provide. Only the researcher will have access to this form and it will be destroyed after 7 years. The lawful basis for processing this information is public interest.

## Appendix L: Young Person Information and Consent Form

You are invited to take part in a study to understand views of adolescent wellbeing.

### What is the study about?

This study hopes to develop an understanding of adolescent wellbeing and what is felt to be important to young people. This will help to understand how those working with young people can best support them.

### What will I do?

- This study involves reading a number of statements about wellbeing and ordering them into what you feel is most and least important for you.
- There are no right or wrong answers
- The activity will take around 30 minutes to complete

### Some more information

- Information will not be traceable back to you. Information will only be accessible to the researcher and research supervisor.
- Taking part is voluntary and you can stop at any point. Once your responses have been submitted, they will become untraceable and unable to be removed from the study.
- You will not receive any negative consequences for choosing not to take part or to remove yourself from the study. There are no known risks/harm for taking part in this study.
- This study has been reviewed and ethically approved by School of Psychology Research Ethics Committee.

	Please tick that you have read and agree to the relevant statement
I understand that taking part in this study will involve reading a number of statements about wellbeing and ordering them into what I feel is most or least important to me. This will take around 30 minutes of my time.	
I understand that taking part in this study is entirely voluntary and that I can stop the study at any time without giving a reason.	
I understand that I am free to ask any questions at any time. I am free to stop taking part or discuss my	

concerns with the researcher, Lauran Eckloff or the supervisor, Dr Rosanna Stenner.	
I understand that at the end of the study I will be given more information and feedback about the purpose of the study.	
I understand that the research information provided by me will be impossible to trace back to me. I understand that this information may be kept forever or published.	
I consent to participate in the study conducted by Lauran Eckloff School of Psychology, Cardiff University with the supervision of Dr Rosanna Stenner.	

If you have any questions or concerns, contacts are listed below.

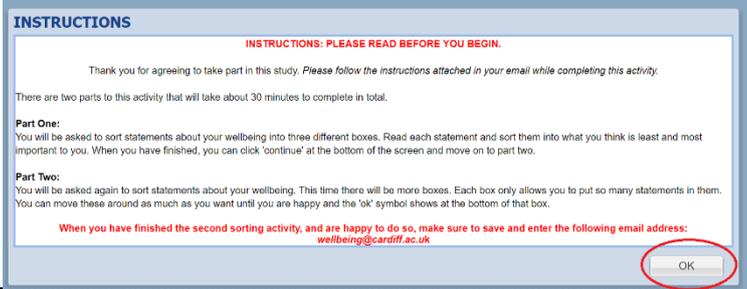
Dr Rosanna Stenner (Research Supervisor)	StennerR@cardiff.ac.uk
Lauran Eckloff (Researcher)	eckloffl@cardiff.ac.uk

**Privacy Notice:**

The information provided on the consent form will be held in compliance with GDPR regulations. Cardiff University is the data controller and Matt Cooper is the data protection officer ([inforequest@cardiff.ac.uk](mailto:inforequest@cardiff.ac.uk)). This information is being collected by Lauran Eckloff. This information will be held securely and separately from the research information you provide. Only the researcher will have access to this form and it will be destroyed after 7 years. The lawful basis for processing this information is public interest.

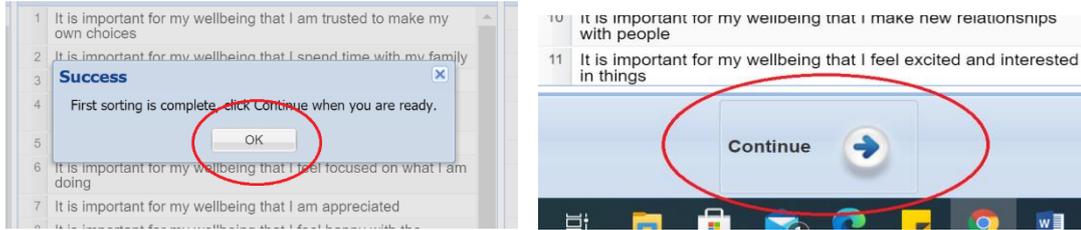
## Appendix M: Q-Sort Step by Step Guide

### Wellbeing Sorting Activity: A Step by Step Guide

<b>Step 1:</b>	<p>Follow the link to the activity by clicking on the link in your email or copying and pasting the link into your internet browser:</p> <p style="text-align: center;"><a href="https://application.qsoftware.net/user/LECKLOFF/">https://application.qsoftware.net/user/LECKLOFF/</a></p> <p>The activity works best on a computer or laptop rather than on your phone.</p>
<b>Step 2:</b>	<p>You will see a screen that looks like the one below. Click on the picture that says "Wellbeing Sorting Activity". Read the instructions and click 'OK' when you're ready to start.</p> <div style="display: flex; justify-content: space-around; align-items: center;">  </div> <div style="text-align: center; margin-top: 20px;">  </div>
<b>Step 3:</b>	<p>Sort each of the statements into what you think <i>is or is not important</i> for your wellbeing. Remember, this is about <i>what you think is important for you</i>, not what you think is true or not.</p> <p>Click on the statement and drag it to a box.</p> <p><i>Tip! Instructions are at the top of the page to help you 😊</i></p> <div style="text-align: center; margin-top: 20px;">  </div>

**Step 4:**

When you finish sorting, click OK and continue at the bottom of the page

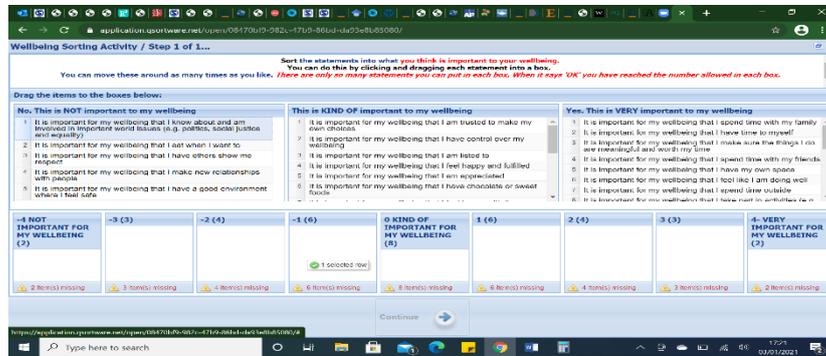


**Step 5:**

Again, you are sorting into what is important or is not important for YOU but this time we want to know which are the MOST versus LEAST important to you.

Click on the statement and drag it to a box.

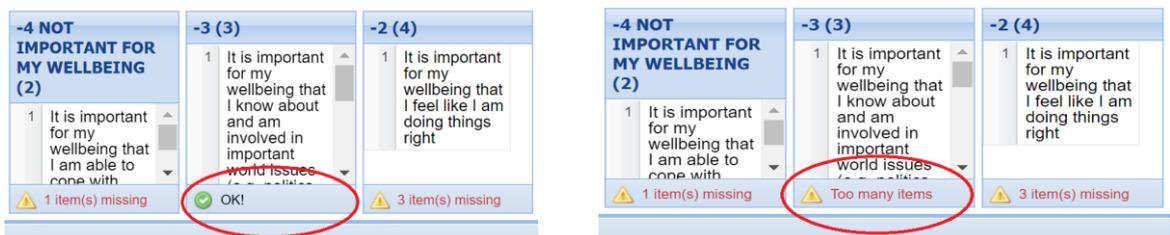
*Tip! Instructions are at the top of the page to help you 😊*



The number at the bottom of each box tells you how many statements you can put in each.



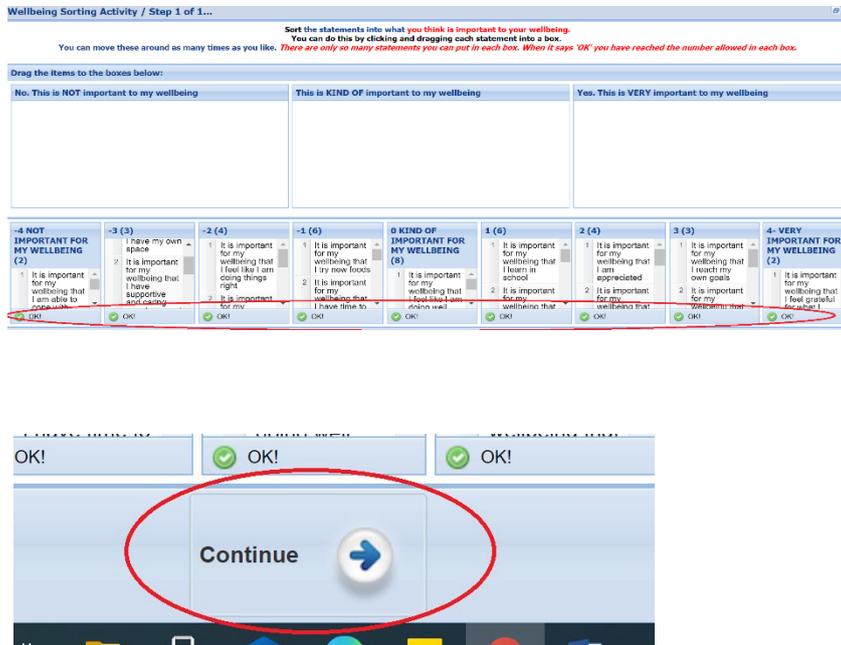
When it says 'OK', that is when you have the most amount of statements allowed into that box.



If you have too many statements, you need to move them around into different boxes. You can do this as much as you want or need to.

**Step 6:**

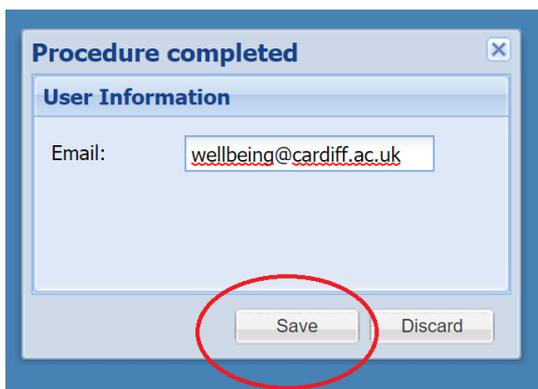
When your page looks like the one below and you are happy with how you have sorted the statements, *click 'continue'* at the bottom of the page.



**Step 7:**

*Make sure to save!* 😊

Enter the email address: [wellbeing@cardiff.ac.uk](mailto:wellbeing@cardiff.ac.uk) to make sure that your answers can not be linked to you.



Thank you for taking part! If you have any questions please email the researcher on [eckloffl@cardiff.ac.uk](mailto:eckloffl@cardiff.ac.uk)

## Appendix N: Young Person Q-Sort Debrief Form

Thank you for taking part in this sorting activity.

### What was the study about?

- To understand how young people view adolescent wellbeing.
- This study aims to develop an understanding of how young people view wellbeing and the similarities and differences between how professionals currently support wellbeing. It is hoped that the results will help professionals understand how to best work with young people to prevent mental ill health and support wellbeing.

### What will happen to the information gathered?

- The findings will be written up and submitted to Cardiff University as part of the researcher's doctoral studies and may be used in presentations and published in a journal.
- Data will not be traceable to you from the point of submission.
- If you would like to find out more, a summary of the findings can be made available to you by contacting the researcher via the email addresses provided below.

### Privacy Notice:

The information provided on the consent form will be held in compliance with GDPR regulations. Cardiff University is the data controller and Matt Cooper is the data protection officer ([inforequest@cardiff.ac.uk](mailto:inforequest@cardiff.ac.uk)). This information is being collected by Luran Eckloff. This information will be held securely and separately from the research information you provide. Only the researcher will have access to this form and it will be destroyed after 7 years. The lawful basis for processing this information is public interest.

If you have any questions or concerns, contacts are listed below

Dr Rosanna Stenner (Research Supervisor)	<a href="mailto:StennerR@cardiff.ac.uk">StennerR@cardiff.ac.uk</a>
Luran Eckloff (Researcher)	<a href="mailto:eckloffl@cardiff.ac.uk">eckloffl@cardiff.ac.uk</a>

### Appendix O: Factor 1 Interpretation Crib Sheet

Note: highlighted items identify distinguishing statements. Green indicates significance at  $p < 0.05$ , and at  $p < 0.01$

Item Rank	Statement
+4	(1) I am trusted to make my own choices (2) Spend time with family
+3	(33) Have supportive and caring people around me (12) Feel happy and fulfilled (24) Feel loved

	Statement and Array Rank
Items Ranked Higher in Factor 1 than in Any Other Factor Array	4: Have control over my wellbeing (+2) 12: Feel happy and fulfilled (+3) 15: Feel focused on what I'm doing (+1) 14: Take part in activities (+1) 31: Learn in school (+2) 33: Have supportive and caring people around me (+3) 34: Feel loved (+3)

	Statement and Array Rank
Items Ranked Lower in Factor 1 than in Any Other Factor Array	3: Have time to myself (-2) 5: Things I do are meaningful and worth my time (-2) 6: Spend time with friends (+1) 7: Have my own space (+1) 13: Eat when I want to (-3) 16: Reach my own goals (0) 17: Spend time on things I enjoy (-2) 18: Am appreciated (-2) 20: Have chocolate or sweet foods (-4)

Item Rank	Statement
-4	(20) Have chocolate or sweet foods (36) Am involved in important world issues
-3	(8) Know about important world issues (32) Try new foods (13) Eat when I want to

### Appendix P: Factor 2 Interpretation Crib Sheet

Item Rank	Statement
+4	(38) Take part in exercise and keep fit (1) I am trusted to make my own choices
+3	(11) Spend time outside (6) Spend time with friends (17) Spend time on things I enjoy

	Statement and Array Rank
Items Ranked Higher in Factor 2 than in Any Other Factor Array	5: Things I do are meaningful and worth my time (+1) 13: Eat when I want to (+2) 20: Have chocolate or sweet foods (0) 28: Others show me respect (+1) 29: Make new relationships with people (0) 32: Try new foods (0) 37: Am able to travel (+1) 38: Take part in exercise and keep fit (+4)

	Statement and Array Rank
Items Ranked Lower in Factor 2 than in Any Other Factor Array	2: Spend time with family (-2) 4: Have control over my wellbeing (-2) 9: Feel like I am doing well (-1) 12: Feel happy and fulfilled (-2) 24: Feel safe (0) 25: Have fun (0) 27: Make others happy (-3) 30: Feel excited and interested in things (-2) 33: Have supportive and caring people around me (-3) 34: Feel loved (-4)

Item Rank	Statement
-4	(34) Feel loved (36) Am involved in important world issues
-3	(27) Make others happy (33) Have supportive and caring people around me (8) Know about important world issues

### Appendix Q- Factor 3 Interpretation Crib Sheet

Item Rank	Statement
+4	(2) Spend time with family (6) Spend time with friends
+3	(3) Have time to myself (17) Spend time on things I enjoy (18) Am appreciated

Statement and Array Rank	
<b>Items Ranked Higher in Factor 3 than in Any Other Factor Array</b>	3: Have time to myself (+3) 6: Spend time with friends (+4) 18: Am appreciated (+3) 19: Feel like I'm doing things right (+1) 22: Feel happy with the relationships I have (+2) 25: Have fun (+1) 27: Make others happy (+1) 30: Feel excited and interested in things (0) 36: Am involved in important world issues (-3)

Statement and Array Rank	
<b>Items Ranked Lower in Factor 3 than in Any Other Factor Array</b>	1: I am trusted to make my own choices (-1) 8: Know about important world issues (-4) 10: Am listened to (+1) 14: Take part in activities (-2) 15: Feel focused on what I'm doing (-2) 21: Make memories (-2) 23: Am able to cope with what I have to do (-1) 26: Feel grateful for what I have (0) 29: Make new relationships (-3) 32: Try new foods (-4) 35: Have enough sleep (0)

Item Rank	Statement
-4	(32) Try new foods (8) Know about important world issues
-3	(36) Am involved in important world issues (29) Make new relationships (20) have chocolate or sweet foods

### Appendix R: List of Consensus Statements

*Note: These are statements that do not distinguish between any pair of factors. All statements are non-significant  $t p > 0.01$ , and those flagged with a \* are also non-significant at  $p < 0.05$*

Statement	Factor		
	1	2	3
(7) Have my own space*	1	2	2
(8) Know about important world issues*	-3	-3	-4
(9) Feel like I'm doing well	0	-1	0
(10) Am listened to	2	2	1
(16) Reach my own goals*	0	1	1
(21) Make memories*	-1	-1	-2
(25) Have fun	0	-1	1
(26) Feel grateful for what I have	1	1	0
(30) Feel excited and interested in things	-1	-2	0
(35) Have enough sleep*	1	1	0
(36) Am involved in important world issues*	-4	-4	-3

## Appendix S: Q Analysis: Documentation of Factor Extraction

Step One:

PCA- eigenvalues highlight initial extraction of 5 factors (as they are more than 1)

```

Eigenvalues          As Percentages      Cumul. Percentag
es
-----
1  5.6124            40.0884            40.0884
2  1.3390            9.5646            49.6529
3  1.3205            9.4319            59.0848
4  1.2018            8.5841            67.6689
5  1.0179            7.2707            74.9397
6  0.7668            5.4771            80.4168
7  0.6595            4.7104            85.1272
8  0.5237            3.7410            88.8682
9  0.4457            3.1838            92.0520
10 0.3512            2.5087            94.5607
11 0.3112            2.2228            96.7834
12 0.2374            1.6957            98.4791
13 0.1164            0.8314            99.3105
14 0.0965            0.6895            100.0000
Press <ENTER> to continue
8 factors will be output to file C:\PQMethod\projects
\wellbein.unr
    
```

Rotation of 5 factors and analysis of loadings suggest a factor extraction of 3 (as these have appropriate loadings (2 or more).

```

          1      2      3      4      5
1 0.0000 0.0000 0.0000 0.0000 0.0000
2 0.0000 0.0000 0.0000 0.0000 0.0000
3 0.0000 0.0000 0.0000 0.0000 0.0000
4 0.0000 0.0000 0.0000 0.0000 0.0000
5 0.0000 0.0000 0.0000 0.0000 0.0000
6 0.0000 0.0000 0.0000 0.0000 0.0000
7 0.0000 0.0000 0.0000 0.0000 0.0000
8 0.0000 0.0000 0.0000 0.0000 0.0000
9 0.0000 0.0000 0.0000 0.0000 0.0000
10 0.0000 0.0000 0.0000 0.0000 0.0000
11 0.0000 0.0000 0.0000 0.0000 0.0000
12 0.0000 0.0000 0.0000 0.0000 0.0000
13 0.0000 0.0000 0.0000 0.0000 0.0000
14 0.0000 0.0000 0.0000 0.0000 0.0000
    
```

As the significance level can also be considered as a criterion, which increased the number of sorts loading onto factor 4. A Four factor model was initially considered.

```

          1      2      3      4
1 0.0000 0.0000 0.0000 0.0000
2 0.0000 0.0000 0.0000 0.0000
3 0.0000 0.0000 0.0000 0.0000
4 0.0000 0.0000 0.0000 0.0000
5 0.0000 0.0000 0.0000 0.0000
6 0.0000 0.0000 0.0000 0.0000
7 0.0000 0.0000 0.0000 0.0000
8 0.0000 0.0000 0.0000 0.0000
9 0.0000 0.0000 0.0000 0.0000
10 0.0000 0.0000 0.0000 0.0000
11 0.0000 0.0000 0.0000 0.0000
12 0.0000 0.0000 0.0000 0.0000
13 0.0000 0.0000 0.0000 0.0000
14 0.0000 0.0000 0.0000 0.0000
    
```

However, similar finding that factor 2, only had one sort loading on to it. Therefore, a 3 factor model was tried. Extraction of three factors showed more distinct loadings (with only one factor not loading on to any of the three factors. Therefore, this was considered most appropriate and formed the structure for subsequent analysis.

```

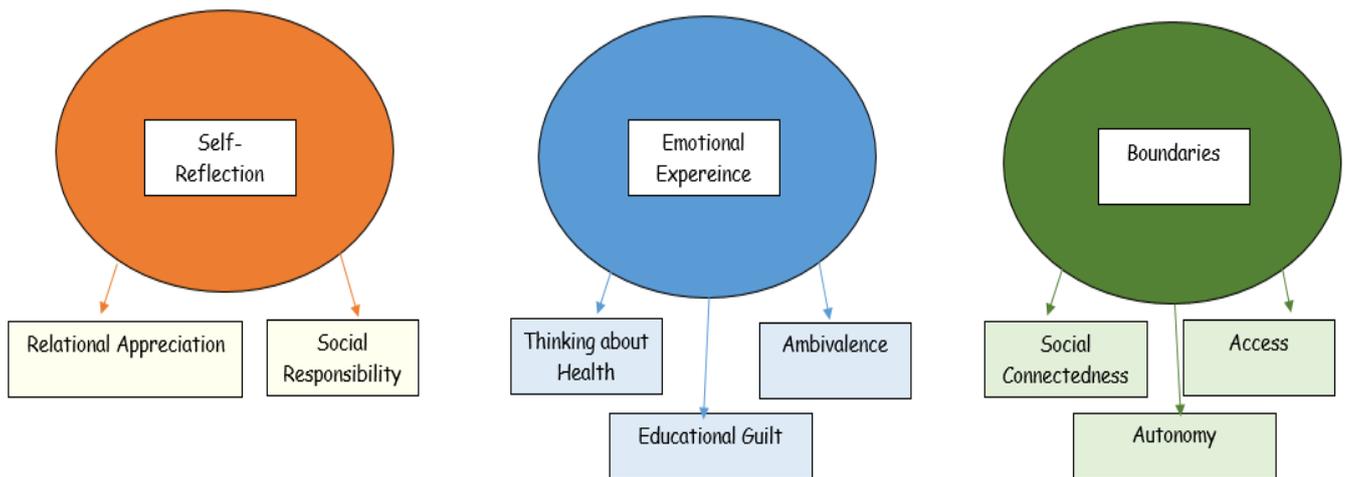
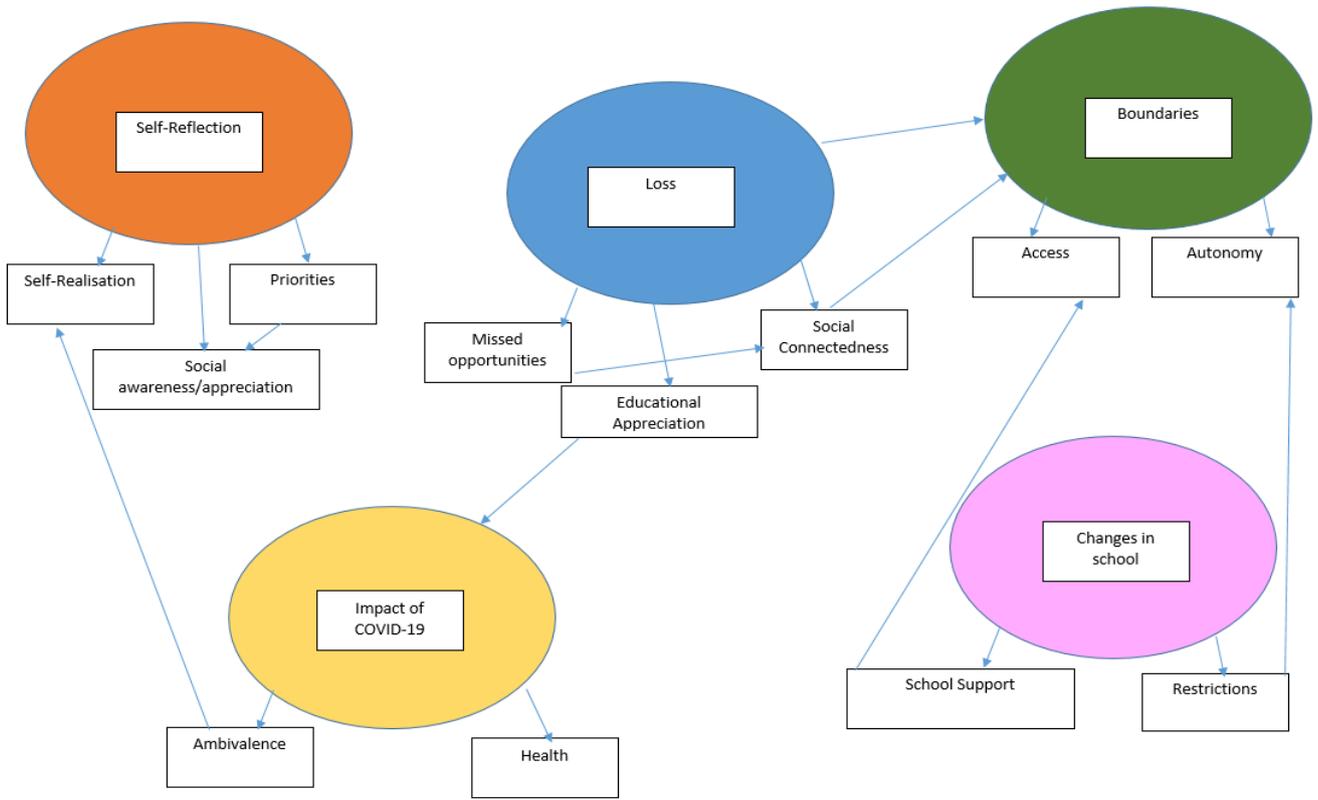
c:\pqmethod\pqrot.exe
          1      2      3
1 0.0000 0.0000 0.0000
2 0.0000 0.0000 0.0000
3 0.0000 0.0000 0.0000
4 0.0000 0.0000 0.0000
5 0.0000 0.0000 0.0000
6 0.0000 0.0000 0.0000
7 0.0000 0.0000 0.0000
8 0.0000 0.0000 0.0000
9 0.0000 0.0000 0.0000
10 0.0000 0.0000 0.0000
11 0.0000 0.0000 0.0000
12 0.0000 0.0000 0.0000
13 0.0000 0.0000 0.0000
14 0.0000 0.0000 0.0000
    
```

## Appendix T: Thematic Analysis Braun and Clark's (2006) Phase 2: Generation of Codes

Code	Quote
Sense of self	It's made me realise that too much Xbox makes me into a little brat that says horrible things to. People that I don't mean (Xbox rage)
No impact	No
Worries about health	I sometimes worry about the virus and if my family will be ill  I am scared my brother who has kidney problems will get coronavirus and have to go to hospital.
Barriers	I don't like that my brother can't come home from university and they said on the news before that they can't come home for Christmas
Social connectedness	I don't like all the new rules in school and not being able to play with my friend from other years
Support from school	I liked it in school when we did breathing exercises in likens box.
Awareness of others	Making sure I keep in contact with people I don't always talk to.
Awareness of others	Having an understanding of how difficult things can be for people.
Social connections	It's important to spend time/ check up on others
Keeping fit	Being able to Keep fit
Sense of control	It has restricted how much control I have
Sense of control	I am not allowed to leave my house without reason and I am not allowed to see my friend.
Safety	How important it is to keep safe
Missed activities	I realise school and learning is more important to me than I realised.
Important of exercise	Not being able to play my netball and hockey matches
Safety	Staying safe
Belief about cononavirus	It makes you healthy so you will be fine
Reflections on importance	How unimportant some things in life are and how important other things are
Social Connectedness	feel like I've become very isolated and lonely
Ambivalent change	I don't feel different. I feel fine
Ambivalent change	COVID hasn't impacted me. Since I spend a lot of my time in the house/upstairs, having to stay home just a little more than I did before isn't much of a sacrifice to me. So, I don't particularly mind it
Social appreciation	It has made me appreciate family and friends a lot more.
Social connectedness	Not being able to spend time with friends
Regularity of social contact	I haven't been able to see my friends as much as I would like to
Loss of education	I've missed months of school which I think has impacted my work ethic

Loss of support	I've struggled myself personally quite a bit more during COVID 19. I found lockdown very difficult, not being able to attend CAMHS
Loss of support	I had a lot more time to consider my feelings, and the things I used to do to improve my wellbeing were no longer available.
Gratitude for normality	It has made me more grateful for my education
Importance of exercise	going outside
Social connectedness	keeping in contact with family basic human interaction
Social engagement	Friendships
Active Involvement	Activities
Social appreciation	It has made me appreciate my loved ones more
Impact of loss	made me realise how much not being able to socialise can affect me
Loss of normality	Takeaways have been closed and that is very important to my wellbeing.
Regularity of social contact	not being able to visit family members.
Ambivalent change	Only changes in my maturity really
Regularity of social contact	the way I socialise with people
Ability to enjoy activities	. I've still been able to exercise and play my video games regularly.
Social connectedness	Not being able to see my friends and family had had a huge impact on my health/wellbeing
Regularity of contact	It's hard not being able to spend time with my friends and family as much as I want to.
Guilt about education	Learning online has been harder and I feel bad that I haven't been in school as much as I should have
Positive connections	It's been good to spend more time with my family it has made me see how much I like spending time with them.
Sense of control	But I hate that I cant just choose to do something

**Appendix U: Thematic Analysis Braun and Clark's (2006) Phase 3 and 4: Searching and Reviewing Themes**



**Appendix V: Braun and Clark's (2006) Phase 5: Defined and Refined Themes and Subthemes Including Quotes**

Main Theme	Subtheme	Code	Quote
Social Self-Reflection	Relational Appreciation	Social connectedness	<i>"basic human interaction"</i>
		Priorities	<i>"How important some thing in life are and how important other things are"</i>
		Social appreciation	<i>It has made me appreciate my loved ones more"</i> <i>"It has made me appreciate family and friends a lot more".</i> <i>"made me realise how much not being able to socialise can affect me"</i>
		Positive connections	<i>"It's been good to spend more time with my family it has made me see how much I like spending time with them".</i>
	Social Responsibility	Social connectedness	<i>"Keeping in contact with family"</i> <i>"It's important to spend time/ check up on others"</i>
		Awareness of others	<i>"Having an understanding of how difficult things can be for people"</i> <i>"Making sure I keep in contact with people I don't always talk to".</i>
Emotional Experience	Thinking about Health	Worries about health	<i>"I sometimes worry about the virus and if my family will be ill"</i> <i>"I am scared my brother who has kidney problems will get coronavirus and have to go to hospital"</i>
		Safety	<i>"Staying safe"</i>
		Importance of exercise	<i>"Being able to Keep fit"</i> <i>"Going outside"</i>

	Educational Guilt	Guilt about Education	<i>"Learning online has been harder and I feel bad that I haven't been in school as much as I should have"</i>
		Loss of Education	<i>"I've missed months of school which I think has impacted my work ethic"</i>
		Reflection of importance	<i>"I realise school and learning is more important to me than I realised"</i>
	Ambivalence	Ambivalent change	<i>"COVID hasn't impacted me. Since I spend a lot of my time in the house/upstairs, having to stay home just a little more than I did before isn't much of a sacrifice to me. So, I don't particularly mind it"</i>  <i>"I don't feel different. I feel fine"</i>  <i>Only changes in my maturity really</i>
		Belief about coronavirus	<i>"It makes you healthy so you will be fine"</i>
		Ability to enjoy activities	<i>"I've still been able to exercise and play my video games regularly"</i>
Boundaries	Social Connectedness	Social connectedness	<i>"Not being able to see my friends and family had had a huge impact on my health/wellbeing"</i>  <i>"I am not allowed to see my friend."</i>  <i>"feel like I've become very isolated and lonely"</i>  <i>"Not being able to play with my friend from other years"</i>  <i>"Not being able to spend time with friends"</i>  <i>"Not being able to visit family members"</i>
		Regularity of contact	<i>"the way I socialise with people"</i>  <i>"It's hard not being able to spend time with my friends and family as much as I want to".</i>  <i>"I haven't been able to see my friends as much as I would like to"</i>

	Autonomy	Sense of control	<p><i>It has restricted how much control I have</i></p> <p><i>But I hate that I cant just choose to do something</i></p> <p><i>I am not allowed to leave my house without reason</i></p>
		Change	<i>I don't like all the new rules in school</i>
	Access	Loss of normality	<i>"Takeaways have been closed and that is very important to my wellbeing"</i>
		Loss of support	<p><i>"I've struggled myself personally quite a bit more during COVID 19. I found lockdown very difficult, not being able to attend CAMHS I've struggled myself personally quite a bit more during COVID 19. I found lockdown very difficult, not being able to attend CAMHS"</i></p> <p><i>"I had a lot more time to consider my feelings, and the things I used to do to improve my wellbeing were no longer available".</i></p>
		Missed activities	<i>"Not being able to play my netball and hockey"</i>