Promoting children’s emotional well-being in pre-school settings:
A grounded theory study exploring the views of early years practitioners

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ABSTRACT

Working to promote the emotional well-being of children is currently a key area of development for the UK government. The increasing responsibility that professionals have for supporting children and young people’s mental health needs has been reflected in recent policy and legislation with particular prominence in the new Special Educational Needs and Disability (SEND) Code of Practice (DfE & DoH, 2014). In the context of early years education, the new legislation makes specific reference to the importance of early identification and provision in improving long-term outcomes. In that respect pre-school settings can offer the ideal context where the early intervention and prevention of mental health difficulties can take place. However, at present there is limited research in the UK which focuses on the views of early years practitioners particularly on their role in supporting children’s emotional needs. Semi-structured interviews were used to gather the views of seven early years practitioners from 4 different pre-school settings across an inner London Borough. The study aimed to explore and explain the contexts and mechanisms which facilitate or hinder the promotion of children’s emotional well-being in pre-school settings. A grounded theory methodology was used to analyse the data. The emergent theory proposes that early years practitioners’ experience of promoting children’s emotional well-being can be best understood as an interactive relationship between internal and external influences summarized by the overarching category labelled “Balancing internal and external factors to promote well-being”. The findings are discussed in relation to existing psychological theory and research and the implications for early years practitioners and Educational Psychologists considered.
ACKNOWLEDGMENTS

First, I would like to thank my family for their support and especially to Pablo. Your patience, love and understanding have given me the strength and motivation to carry on.

I also wish to thank Dr Adam Styles for his support and guidance throughout this process, and to Dr Chris Shaldon for the emotional support and containment along the journey.

I would like to extend my thanks to all the staff who kindly gave up their time to take part in this research.

Finally, thank you to Lau for your friendship that became an essential part of this journey.

This thesis is dedicated to my grandmother.
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Chapter 1

INTRODUCTION

1.1 Overview

This chapter provides an overview of the prevalence and impact of mental health problems amongst children and young people in the UK and the national policy that has been developed to address these issues. It then explores the specific role of early years education and early years practitioners in promoting children’s emotional well-being. Finally, it describes the local context in which the research was conducted as well as providing the rationale for the study and its relevance to the researcher from both a personal and professional perspective.

1.2 Terminology

The terms emotional well-being and mental health are often used interchangeably in the literature. Traditionally, the term mental health has been associated with medical and social care contexts based on a deficit model in which the concept of mental health assumes the absence of mental illness. There are a number of different definitions of mental health, and this reflects the complexity of providing a universally agreed definition. The definition of children’s mental health provided by The Mental Health Foundation (2005) includes:

*Children who are mentally healthy have the ability to develop psychologically, emotionally, creatively, intellectually, and spiritually; initiate and sustain mutually satisfying personal relationships; use and enjoy solitude; become aware of others and empathise with them; play and learn; develop a sense of right and wrong; and resolve problems and setbacks and learn from them.* (The Mental Health Foundation, 2005)
The above definition encompasses a broad conceptualisation of the term, in which mental health is not referred to as opposed to mental illness, but instead is viewed as a concept that involves individual capacities, emotions, behaviours and the ability to function socially.

In the context of education, there has been a tendency towards using the term ‘emotional well-being’ instead of ‘mental health’. Frederikson, Dunsmuir and Baxter (2009) argue that many professionals in education are reluctant to use the term mental health due to the stigma associated with mental illness. Although the term emotional well-being has been used repeatedly in several government publications, the definition, usage and function of the word ‘well-being’ is inconsistent, which has obvious implications for the way well-being is promoted by different groups, including its use by schools (Weare & Gray, 2003). However, recently published guidelines for schools have described emotional well-being as:

* A state of positive mental health and wellness. It involves a sense of optimism, confidence, happiness, clarity, vitality, self-worth, achievement, having a meaning and purpose, engagement, having supportive and satisfying relationships with others and understanding oneself, and responding effectively to one’s emotions. (Weare, 2015, p. 3)

For the purposes of this study the terms emotional well-being and mental health are understood as having similar meanings and implications as they both describe an ideal state of personal development and satisfaction. Therefore they will be used interchangeably throughout this paper.

1.3 Prevalence and Impact of Mental Health Difficulties

In the UK it is estimated that 10% of children and young people aged between 5 and 16 meet the diagnostic criteria for a mental health disorder and/or emotional problems (Office of
National Statistics [ONS], 2004). It is estimated that 1 in 7 children and young people have emotional or behavioural problems that interfere with their development and learning (Weare, 2015). The most commonly diagnosed mental health categories in children and young people are conduct disorders, anxiety, depression and hyperkinesia (The Mental Health Foundation, 2002).

It is widely recognised that a child’s emotional well-being effects learning (e.g. Durlack, Weissberg, Dymnicki, Taylor & Schellinger, 2014; Public Health England, 2014) and it is common for teachers to identify children experiencing mental health problems as having emotional or behavioural difficulties (Rothi, Leavey, Chamba & Best, 2005). Mental health difficulties may be externalised, resulting in aggression, antisocial behaviour, substance abuse or difficulties with social interactions (e.g. Laukanen, Shemeikka, Notkola, Koivumaa-Honkanen & Nissinen, 2002; Weare & Gray, 2003). Equally, they may be internalised and manifest as depression, anxiety and withdrawal (e.g. Weare & Gray, 2003; Weare, 2015). Such problems directly impact a child’s academic achievement (Department for Work and Pensions [DWP], 2011; Rothi & Leavey, 2006) but there are also indications of longer term impact, with studies showing an association between childhood psychological problems and the ability to work and earn in adulthood (DWP, 2011; Goodman, Joyce & Smith, 2011; National Child Development Study [NCDS], 2008). In the UK, mental ill health represents up to 23% of the total of ill health and is the largest single cause of disability (Centre of Mental Health, 2010).

According to the Department of Health (DoH, 2011) mental health problems tend to start early in life and half of those with lifetime mental health problems first experience symptoms by the age of fourteen. Conduct disorders are one of the most common childhood mental disorders, for which parenting support interventions are recommended as first-line treatment (Centre for Mental Health, 2015).
However, in spite of the evidence of the incidence and impact of mental health difficulties, a survey conducted by the Children’s Society in 2008 indicated that up to 70% of children with mental health problems had not received appropriate interventions at a sufficiently early age (Children’s Society, 2008).

1.4 National Policy Context

The role of schools in supporting the mental health and emotional well-being of children and young people is well established and is clearly stipulated in national policy: ‘In order to help their pupils succeed; schools have a role to play in supporting them to be resilient and mentally healthy’ (Department for Education [DfE], 2016, p. 6).

The UK Government first issued guidance to schools on promoting children’s mental health in early years and school settings in 2001 (Department for Education and Skills [DfES], 2001). This was followed in 2004 by a new National Service Framework for the Mental Health and Psychological Well-being of Children and Young People (Department of Health [DoH], 2004). This document set out the responsibilities of all professionals in promoting and supporting the mental health and well-being of children and identified the need for professionals to receive adequate training and support in identifying emotional needs at an early stage.

Building on this, the National Institute for Health and Clinical Excellence (NICE, 2008) published a set of guidelines for promoting children’s social and emotional well-being in primary and secondary education. This guidance placed further emphasis on the role of schools and schools’ staff in the early identification of mental health difficulties and advised
schools to adopt a comprehensive “whole-school” approach to promoting the social and emotional well-being of children and young people.

The whole-school approach is supported by research evidence from systematic reviews conducted internationally which suggest that it is the most effective way of promoting well-being when complemented by targeted programmes and interventions (Weare & Nind, 2011). A whole-school approach engages all staff, students, parents, the community and outside agencies and involves areas such as the curriculum, school policies, environment and relationships. *Promoting children and young people’s emotional health and well-being* (Public Health England, 2015) advocates a whole-school approach that encompasses the physical, social and the emotional environment. The role of the senior leadership team is identified as central to the implementation, monitoring and evaluation of the approach. The importance of staff training is also highlighted as well as the importance of referrals to specialist provision for pupils with particular mental health needs. Specific guidance on making appropriate referrals to specialist agencies such as Child and Adolescent Mental Health Services (CAMHS) is provided in *Mental Health and Behaviour in Schools: Departmental advice for school staff* (DfE, 2016). A number of studies have shown that effective parenting interventions and school-based programmes can result in significant improvements on behaviour and children’s general well-being (Centre for Mental Health, 2015).

National efforts towards promoting emotional well-being have also resulted in changes to the Office for Standards in Education (Ofsted) inspection framework. In 2015, a new category of ‘personal development, behaviour and welfare’ was added as well as criteria for mental well-being such as confidence, self-efficacy, self-discipline, communication skills and positive mind-set and attitude. The inspection framework also includes assessment of the way emotional and mental health are represented and delivered as part of the curriculum. This
new framework goes beyond supporting individual students with specific mental health or behavioural needs and aims to create a culture that promotes well-being for all students which also involves providing training opportunities in mental health to students and staff as part of a whole-school approach to mental health (Ofsted, 2015).

The recognition of mental health needs as a category of special educational needs has recently been reflected in the new Special Educational Needs and Disabilities (SEND) Code of Practice (DfE & DoH, 2014). The code has introduced the category ‘Social, Emotional and Mental Health Difficulties’ (SEMH) instead of ‘Social, Emotional and Behavioural Difficulties’ (SEBD) as one of the four broad areas of special educational needs (DfE & DoH, 2014, p. 85). This change emphasises the formal responsibilities of all practitioners to identify, assess and make provision for children with SEMH difficulties in order to respond appropriately to their needs.

In spite of the widely accepted responsibility of schools in the promotion of emotional well-being and the prevention of mental health problems in children, the precise nature of educators’ responsibilities in this area remains unclear. A survey conducted by Ofsted (2005) highlighted significant areas for development including the need for greater staff training on mental health issues and the need to improve practices when working with external agencies. Similarly, a research study by Kidger, Gunnell, Biddle, Campbell and Donovan (2010) identified a lack of understanding about the way the mental health agenda fits within the demands for schools to achieve academic targets. It indicated that some teachers and other school staff feel that their roles are unclear in relation to school-based emotional well-being, and that they are expected to have a wide range of different skills beyond their teaching responsibilities. Other studies (e.g. Conelly, Lockhart, Wilson, Furnivall, Bryce, Barbour & Phin, 2008; Ford & Nikapota, 2000; Rothi, Leavey & Best, 2008) have revealed that teachers feel that they have a
limited understanding and a lack of confidence in supporting children with emotional
difficulties or mental health needs.

1.5 Promoting Mental Health and Emotional Well-Being

From a theoretical perspective, mental health and well-being can be promoted by
minimising the impact of risk factors and maximising the development of protective factors,
also known as ‘resiliency’. Risk factors are events, experiences or features of a person’s
constitution that increase the probability of developing a mental health disorder (DfES, 2001).
According to Rutter (1985), resilience factors include several elements:

Firstly a sense of self-esteem and confidence; secondly a belief in one’s own
self-efficacy and ability to deal with change and adaptation; and thirdly, a repertoire of
social problem solving approaches. (p. 598)

Research evidence identifies a range of factors that have an impact on children and
young people’s mental health which can result in an increased risk for mental health problems
(Young Minds, 2015). Risk and Resilience factors are listed in the table below:
<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Resilience Factors</th>
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<tbody>
<tr>
<td><strong>In the Child</strong></td>
<td></td>
</tr>
<tr>
<td>• Genetic Influences</td>
<td>• Being female</td>
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<tr>
<td>• Learning difficulties, developmental delay or low IQ</td>
<td>• Secure attachment experience</td>
</tr>
<tr>
<td>• Communication difficulties</td>
<td>• Outgoing temperament as infant</td>
</tr>
<tr>
<td>• Difficult temperament</td>
<td>• Good communication skills, sociability</td>
</tr>
<tr>
<td>• Physical illness</td>
<td>• Being a planner and having belief in control</td>
</tr>
<tr>
<td>• Academic failure</td>
<td>• Humour</td>
</tr>
<tr>
<td>• Low self-esteem</td>
<td>• Problem solving skills and positive attitude</td>
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<tr>
<td></td>
<td>• Experiences of success and achievement</td>
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<tr>
<td></td>
<td>• Faith or spirituality</td>
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<tr>
<td></td>
<td>• Capacity to reflect</td>
</tr>
<tr>
<td><strong>In the family</strong></td>
<td></td>
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<tr>
<td>• Parental conflict including domestic violence</td>
<td>• At least one good parent child relationship (or one supportive adult)</td>
</tr>
<tr>
<td>• Family breakdown</td>
<td>• Affection</td>
</tr>
<tr>
<td>• Inconsistent or unclear discipline</td>
<td>• Clear consistent discipline</td>
</tr>
<tr>
<td>• Hostile relationships</td>
<td>• Support for education</td>
</tr>
<tr>
<td>• Failure to adapt to child’s need</td>
<td>• Absence of relationship conflict</td>
</tr>
<tr>
<td>• Physical, sexual or emotional abuse</td>
<td></td>
</tr>
<tr>
<td>• Parental mental health illness</td>
<td></td>
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<tr>
<td>• Parental criminality or substance abuse</td>
<td></td>
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<tr>
<td>• Death and loss</td>
<td></td>
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<tr>
<td>• Financial deprivation</td>
<td></td>
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<tr>
<td><strong>In the school</strong></td>
<td></td>
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<tr>
<td>• Bullying</td>
<td>• Clear policies on behaviour and bullying</td>
</tr>
<tr>
<td>• Discrimination</td>
<td>• Open-door policies for children to raise problems</td>
</tr>
<tr>
<td>• Breakdown or lack of positive friendships</td>
<td>• A whole-school approach to promoting good mental health and emotional well-being</td>
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<tr>
<td>• Negative peer influences</td>
<td>• Positive relationships</td>
</tr>
<tr>
<td>• Peer pressure</td>
<td></td>
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<tr>
<td>• Poor pupil/teacher relationships</td>
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Young Minds (2015)  

The role of schools in promoting the resilience of pupils is underlined as an essential aspect of promoting their well-being, and has been highlighted in the recent advice for school staff published by the Department for Education (DfE, 2016). The document indicates that an understanding of risk and resilience factors can help staff to identify pupils who are vulnerable to mental health problems and develop practical strategies for supporting them. Schools are expected to implement a risk and resilience framework as part of schools’ universal
approaches with staff developing specific activities to promote greater resilience in all their pupils (DfE, 2016).

1.6 Early Intervention

The prevention of mental health difficulties has become an increasing priority for the government (The Mental Health Foundation, 2005; Weare & Gray, 2003). Current guidelines underline the importance of early intervention in order to ‘tackle problems that have already emerged for children and young people before they become entrenched’ (DCSF, 2008, p.8). The importance of early intervention is well documented in research and government advice (e.g. DCSF, 2008; DfE, 2010). The independent report Early Intervention: The Next Steps (DWP, 2011) emphasised the role of early prevention and the identification of mental health problems to limit the detrimental effects on the individual’s life outcomes (e.g. poor educational attainment, reduced employment opportunities and ill physical health) and on wider society’s economic growth (DWP, 2011; Parry-Langdon, Clements, Fletcher & Goodman, 2008). At a similar time, an independent review of child protection in England (DfE, 2011) presented evidence for the effectiveness of Early Intervention for children and families identified as vulnerable or at risk.

Research evidence appears to indicate that early years settings can offer unique opportunities for the early identification and early intervention to promote children’s emotional well-being (Tickell, 2011) and prevent the emergence of mental health disorders from becoming permanent (Hillen & Gafson, 2014). The importance of early intervention implies not only responding to early signs of behavioural or emotional problems, but also mitigating the impact of risk factors (Evans, 2004) as well as implementing preventative strategies and interventions to enhance strengths (Webster-Stratton & Reid, 2004).
A comprehensive review conducted by Weare and Gray (2011) with data from national and international research reviews indicated that the most effective interventions were those targeted at pre-school and early primary years. Research studies in the USA found that the most successful interventions in the context of early years were those based on systemic approaches, targeting children and families and focusing on children’s primary relationships (parents, carers, grandparents and teachers) (Hamre & Pianta, 2001).

The importance of early identification and early intervention, of children and young people’s social, emotional and mental health needs has also been referred to in the new SEND Code of Practice (DfE & DoH, 2014).

1.6.1 Emotional Well-Being in the Early Years

There has been a growing governmental emphasis on developing good practice within early years education over the last decade. The Marmot review (2010) highlighted the importance of children’s early experiences for their later social and emotional development. The report stressed the importance of early learning and identified some of positive effects of early years intervention including improved readiness for school, better educational attainment and, in the long term, better future employment prospects (Marmot, 2010, p. 16).

The introduction of Early Years Foundation Stage Framework (EYFS, Department for Children, School and Families [DCSF]) in 2008 and the subsequent review in 2014 have cemented the emphasis on children’s emotional and social development in the context of early years education (DCSF, 2008; DfE, 2014). The EYFS defines the legal requirements and standards for promoting the care, learning and development for children from birth to five years and identifies three main obligations for providers:
• The provision of adequate activities to promote the learning and development of children.

• A detailed account of planning, assessment and monitoring of children’s progress.

• Ensuring the safeguarding and welfare of children in their care.

Non-statutory Early Years Outcomes guidance can be used to assess the extent to which a young child is developing at expected levels for their age in specific areas of development established in the EYFS document. These involve typical behaviours across seven different areas including personal, social and emotional development (DCSF, 2008; DfE, 2014).

In the context of pre-school\(^1\) settings in the UK, whole-school approaches such as ‘Social, Emotional Aspects of Learning’ (SEAL, DfES, 2005; 2007) have been developed to promote young children’s emotional well-being. However, the application of these programmes in the context of early years education has been less documented compared to primary and secondary schools settings.

### 1.6.2 The Key Persons Role

As part of the EYFS framework (DfES, 2008; DfE, 2014), early years practitioners are expected to take on a designated Key Person’s role as part of their professional responsibilities. The Key Person approach is mandatory (DfES, 2008; DfE, 2014) and is aimed at supporting close attachments between individual children, their families and individual practitioners (Elfer, Goldschmied & Selleck, 2012). The theoretical foundations of the Key

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\(^1\) The pre-schools settings referred to in this study include nursery schools and classes which are staffed by teachers and assistants and provide a non-compulsory phase of education suitable for children in the year before they immediately go to primary school.
Person’s approach lie on the principles of Attachment theory (Elfer et al., 2012) which will be discussed in detail in Chapter 2.

The current government guidance on the role of the Key Person states:

Each child must be assigned a key person. Their role is to help ensure that every child’s care is tailored to meet their individual needs to help the child become familiar with the setting, offer a settled relationship for the child and build a relationship with their parents. The key person must seek to engage and support parents and/or carers in guiding their child’s development at home. They should also help families engage with more specialist support if appropriate. (DfE, 2014, p. 10)

1.7 Local Context

The local context for the current research is an inner London borough. The borough has significant levels of economic deprivation, high unemployment and single parenthood which are all factors associated with a high risk for childhood mental health problems (Young Minds, 2015). There are currently 18,300 children aged 0-4 in the borough and approximately 2500 children and young people with a clinically identified mental health problem. One of the central aims of the borough’s corporate plan is to ‘reduce health inequalities and improve well-being through the implementation of prevention and early intervention strategies’ (ABC, Local Authority, 2014-2015:3). The current research is designed in line with both national and local priorities and hopes to add to knowledge and learning in this area.

1.8 The Personal Context

As well as reflecting national and local policy priorities, the choice of research study also stemmed from the researcher’s longstanding interest in the area of children’s emotional well-being and mental health. Previous experience as a child counsellor as well as involvement
in the Targeted Mental Health in Schools project (TaMHS), highlighted the importance of supporting children’s emotional well-being as a basis for learning and development. In addition, early years education has a personal connection for the researcher as a parent of a young child who has recently started pre-school.

As an Educational Psychologist (EP) in training, the researcher is aware of her significant role in supporting the emotional well-being of children and young people. The researcher feels committed to promoting children and young people’s emotional well-being and understands that she is in a privileged position to facilitate this. This research aims to add to the researcher’s own understanding and enhance her knowledge base to inform future practice.

1.9 Rationale

In light of the prevalence and impact of children and young people’s mental health difficulties in the UK previously discussed, promoting emotional well-being is currently a priority for the UK Government. In that respect, a number of initiatives have been implemented to promote children and young people’s emotional well-being in schools across the UK over time. These include Targeted Mental Health in Schools project (TAMHS, DCFS, 2010); Social and Emotional Aspects of Learning (SEAL) (DfES 2005, 2007), National Healthy Schools Status (DoH & DfES, 2005) and the inclusion of well-being as a category of the OFSTED inspection framework since 2009. Furthermore, the implementation of NICE guidelines (2008) for the promotion of emotional well-being in schools and more recently the publication

Mental health and behaviour in schools: Departmental advice for school staff (DfE, 2016) and

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TaMHS was a national project established from 2008 until 2011, and formed part of a governmental initiative to improve the psychological well-being of children, young people and their families. The aim of the project was to help schools to deliver timely interventions to help those with “mental health problems and those at risk of developing them” (DfE, 2011:7)
the document *Promoting children and young people’s emotional health and well-being* (Public Health England, 2015) highlight the importance given to the areas of mental health prevention and promotion of emotional well-being of children and young people. Furthermore, the SEND Code of Practice (DfE &DoH, 2014) introduced the category “social, emotional and mental health”, instead of the previous “emotional and behavioural difficulties”, as one of the four areas of special educational needs. This change highlights the schools’ obligations regarding the assessment of and provision for pupils’ emotional and mental health needs and describes a set of expectations for professionals who are now required to promote emotional well-being and mental health of all pupils including those with special educational needs.

In summary, the current policy and legislation context in the UK reflects the emphasis placed on the role of schools and educators in being responsible for the promotion of emotional well-being for children and young people.

The importance of intervening early for children in order to improve outcomes has been highlighted in the National strategy “No Health Without Mental Health” (DoH, 2011). Research evidence (DWP, 2011; Parry-Langdon, Clements, Fletcher & Goodman, 2008; Hillen & Gafson, 2014; Tickell, 2011) indicates that early interventions, particularly aimed at vulnerable children and young people, can help to identify signs and prevent the onset of mental health problems and reduce the negative long-term implications associated with mental illness such as high unemployment and poor overall health. Early identification of needs, alongside appropriate support has been associated with improved outcomes for children’s learning and development (Tickell, 2011).

Given the importance of targeting children’s mental health and emotional well-being and the significance of early intervention highlighted by research, it is apparent that preschool settings can provide optimal opportunities for promoting children’s emotional well-
being at an early stage. The UK Government currently provides free, part-time early years education for all children from the age of three until they enter primary school (DfE, 2011) and the number of children attending pre-school settings is likely to increase as a result of new Government plans to double the amount of free childcare provision for 3 to 4 year olds from September 2016 (DfE, 2015). Therefore the demands placed on pre-school settings are likely to increase along with the opportunities for early intervention. Early years practitioners are ideally placed to facilitate the promotion of emotional well-being as they are often the adults who have the most sustained contact with children outside of the family home. To date, however, little is known about the views of early years practitioners around what influences the promotion of children’s mental health and emotional well-being. An extensive search of the research literature failed to identify studies that have examined the perspectives of early years practitioners around their role in the promotion of children’s emotional well-being. More research is needed to gain a greater understanding of the experiences of promoting children’s emotional well-being for early years practitioners as well as the barriers they face in trying to achieve that. This is expected to inform practice around promoting emotional well-being in educational settings, in line with current Government expectations.

1.10 Aims

This research will seek to explore the views of early years practitioners and to make an original contribution to knowledge of early years education that could potentially support early intervention and prevention. This study aims to understand the contexts and mechanisms which facilitate or hinder the effective promotion of children’s emotional well-being in pre-school settings, according to the views of early years practitioners. The outcomes of this research intend to:
• Help support early years practitioners across the Borough in understanding the importance of their role in relation to the emotional well-being of children and explore ways in which they can be effectively supported.

• Help develop effective practice by focusing on what works well while addressing potential barriers to the effective promotion of emotional well-being.

• Inform Educational Psychologists’ practice to support early years practitioners and early years settings across the Local Authority to understand and prevent emotional difficulties through consultation and training.

• Provide a theoretical framework for the researcher’s Local Authority to best support early intervention approaches towards children’s emotional well-being, in order to improve outcomes for children by addressing National and Local priorities.

1.11 Research questions

1) According to the views of early years practitioners: What are the contexts and mechanisms which facilitate the promotion of children’s emotional well-being in pre-school settings?

2) What are the contexts and mechanisms which hinder early years practitioners’ ability to effectively promote children’s emotional well-being in pre-school settings?

1.12 Summary

Working to promote the emotional well-being of children is currently a key area for development in the UK. The UK government has attempted to clarify and support the role of schools and educators in promoting the emotional well-being of children and young people through policy, statutory guidance and the inspection framework, though more knowledge still needs to be generated in this area. In particular, greater attention is needed on the work
taking place in pre-school settings as these provide the contexts in which early intervention and prevention of mental health difficulties and the promotion of emotional well-being can take place. There is limited research on the topic of emotional well-being in early years in the UK and even less focussing directly on the views of early years practitioners and their role. This research study will address this gap and it is hoped that the outcomes of this study will inform theory and practice on the promotion of emotional well-being for pre-school children.
Chapter 2

LITERATURE REVIEW

2.1 Aims

This chapter provides an account of the existing literature and the current legislative context around the promotion of children’s emotional well-being in schools and early years education. Each section of the chapter presents a stage in the literature review. Firstly it contains a detailed account of the review process undertaken. The subsequent sections include an overview of current legislation and policy followed by a review of relevant research.

The completion of a systematic literature review is not normally conducted prior to grounded theory analysis (Glaser & Strauss, 1967). Therefore the researcher conducted most of the literature review after the completion of the data analysis. The systematic literature review will help to illustrate the gap in the current research base and how this study can provide a unique contribution to the field.

2.2 Search Method

An examination of the literature was undertaken to provide an overview of the subject area. It was specifically aimed at exploring existing research on the topic of children’s emotional well-being in the context of early years education. A range of procedures were used to ensure that the search yielded the highest possible number of relevant articles.

As the focus of the research was on the early years practitioners’ experiences of promoting emotional well-being in pre-school settings, the initial exploration was limited to the field of early years education in the United Kingdom. Although most research has been conducted in the USA, the choice not to include studies from the USA in the literature search
was because they involve different social and cultural contexts. The review was confined to those studies written in English language and published between 2000 and 2016. This was because within this time frame a wide range of UK government policies and initiatives focusing on supporting and promoting children and young people’s mental health and emotional well-being had taken place.

Educational settings other than primary schools, pre-schools and early years settings were excluded. The exclusion criteria for settings such as secondary schools, special schools or pupil referral units, responded to the significant differences existing between the type of educational contexts and their pupils’ stages of development in comparison to pre-school settings. The decision to review papers that included the views of teachers was taken because there was a limited body of research focused on the views of early years practitioners in the UK particularly on the topic of children’s emotional well-being and mental health.

The steps employed as part of the search are summarised below:

The literature review was carried out between December 2015 and March 2016, using the EBSCO online index. The following databases were accessed: PsychINFO, PEP archive, Psychology and Behavioural Sciences Collection, PsycARTICLES, and CINAHL. The search also included government sites such as Department for Children, Schools and Families (DCSF); Department of Health (DoH); National Institute for Health and Clinical Excellence (NICE); The Mental Health Foundation; The Department for Education (DfE) and the Department for Education and Skills (DfES) were also accessed.

The literature was searched using key words and subject headings. The terms used to search for abstracts included: “early years educators and emotional well-being” and “early years teachers and mental health”. A range of search terms were used to allow for variance in terminology. Further details are in Appendix 1.
An initial search retrieved a limited number of relevant papers. Therefore, new terms were included in order to expand the search, including “teachers and emotional well-being and school” and “teachers and mental health and schools”. This significantly increased the list of relevant articles. However, the majority of papers did not meet the inclusion criteria; for example some were focused on specific programmes and interventions and/or mental health disorders. Additional procedures were followed to ensure a comprehensive review of the literature, these were:

- Reference sections of identified studies were examined to further identify other appropriate articles for inclusion that might have been missed;
- Several articles from the same author were searched and examined;
- Recent key documents in the field of schools and mental health and/or emotional well-being were also examined and;
- Google Scholar was searched to identify unpublished theses.

Over the course of two separate searches at different times a total of 23 studies were relevant, of which 12 were excluded and 10 reviewed (six concerning schools and emotional well-being and four concerning early years education). Additionally, a systematic research review on approaches to emotional well-being was included as it offered information about evidence based interventions in schools.

The reviewed literature was guided by the general principles on how to appraise qualitative and quantitative research suggested by Aveyard (2011). Please refer to Appendix 2 for a detailed analysis of the key studies examined.
2.3 Critique of Identified Literature

Following the literature search, research articles and documents were grouped into three main categories:

- Overview of current policy and legislation regarding mental health and emotional well-being in schools;
- Research on educators and their role in the promotion of emotional well-being and mental health and;
- Research on early years education and early years educators in relation to children’s emotional development and well-being.

2.4 Schools and Emotional Well-Being

2.4.1 Context of policy and legislation

The role of schools and their legal responsibilities for promoting and supporting pupils’ mental health and emotional well-being has been documented in a number of policies and initiatives over time (see for example: Promoting Children’s Mental Health within Early Years and School Settings, DfES, 2001; Every Child Matters, DfES, 2003; Guidance for Schools on Developing Emotional Health and Well-being, DCSF/DoH, 2007; Social and Emotional Aspects of Learning, DfES, 2005a, 2007 and Targeted Mental Health in Schools Project, DCSF, 2008).

The UK Government first offered guidance to schools to support them in meeting the mental health needs of their pupils through Promoting children’s mental health in early years and school settings (DfES, 2001). The document offered guidance to schools about the promotion of mental health, placing particular emphasis on the responsibilities of professionals to do preventative work through early identification of mental health difficulties.
Furthermore, the five outcomes of the Every Child Matters agenda (2004) including being mentally and emotionally healthy, were established as essential conditions to be assessed when schools and Local Authorities are inspected by the Office for Standards in Education (Ofsted).

In 2008, the National Institute for Health and Clinical Excellence (NICE, 2008) published a set of guidelines for promoting children’s social and emotional well-being in primary and secondary education which placed further emphasis on the role of schools and staff around the early identification of mental health difficulties. It also advised schools to adopt a comprehensive “whole-school” approach to promoting the social and emotional well-being of children and young people. Until recently, this was the most comprehensive set of guidelines for schools and professionals in relation to the promotion of emotional well-being and the prevention of mental health difficulties that had been published in the UK (DfE, 2016).

At present, it is evident that working to promote the mental health and emotional well-being of children and young people is a key area of development for the government. In that respect, national efforts towards promoting emotional well-being have been reflected in a range of recent publications including Mental health and behaviour in schools: Departmental advice for school staff (DfE, 2016); Promoting children and young people’s emotional health and well-being (Public Health England, 2015); What works in promoting social and emotional well-being and responding to mental health problems in schools? (Weare, 2015; National Children’s Bureau) and changes in the Ofsted inspection framework (Ofsted, 2015).

The role of schools in the promotion of children’s emotional well-being has been emphasised in a document issued by Department for Education indicating that: ‘In order to help their pupils succeed; schools have a role to play supporting them to be resilient and mentally healthy’ (DfE, 2014). Following that, in the 2016 document Mental health and
behaviour in schools Departmental advice for school staff (DfE, 2016), included specific information to help schools to promote positive mental health in their pupils and identify and address those with problems at an early stage. Moreover, the document aims to help schools identify and support pupils with more severe needs and guide schools to make appropriate referrals to specialist agencies such as Child and Adolescent Mental Health Services (CAMHS).

Public Health England published: Promoting children and young people’s emotional health and well-being (Public Health England, 2015). This document establishes several principles to promoting children and young people’s emotional health and well-being and advocates a whole-school approach whereby the physical, social and the emotional environment support the well-being of all pupils and staff. The role of the senior leadership team is identified as a central component for the implementation, monitoring and evaluation of the whole-school approach. The document also highlights the current need for staff to access training in order to develop the ability to identify and support pupils’ emotional and mental health needs. The evidence for targeted support for children at risk is also underlined alongside the importance of making referrals to specialist provision for pupils with more specific mental health needs.

National efforts towards promoting emotional well-being have also been reflected in changes to the Ofsted inspection framework in 2015. These changes involve the inclusion of a new category “personal development, behaviour and welfare”, which makes reference to student’s emotional and mental health. The framework also includes new assessment criteria for aspects related to emotional well-being such as confidence, self-efficacy, self-discipline, communication skills and positive mind-set and attitude, as defined by NICE (2008). The inspection also includes assessing the way emotional and mental health are represented and delivered as part of the curriculum. In summary, this new framework appears to go beyond
supporting individual students with specific mental health or behavioural needs and aims to create a culture that promotes well-being for all students which involves providing training opportunities in mental health to students and staff as part of a whole-school approach to mental health. Research evidence from systematic international reviews suggests that adopting a whole-school or multi-level approach is the most effective way of promoting well-being, when complemented with targeted programmes and interventions (Weare & Nind, 2011).

Overall, the initiatives above share the common objective of providing a practical framework for implementing the principles of evidence-based approaches to supporting children’s mental health and well-being in the context of schools. They highlight the responsibilities of school leaders in the implementation and dissemination of good practice, and advocate the use of evidence based whole-school approaches to promoting pupils’ emotional well-being and to preventing mental health problems.

The schools’ obligations regarding the assessment and provision for children and young people’s emotional and mental health needs, place significant responsibility on school staff. The National Service Framework for Children, Young People and Maternity Services (DoH, 2004) designates teachers as Tier One CAHMS practitioners who are responsible for recognising and preventing mental health problems in children and young people. More recently, the responsibilities towards pupils’ mental health have been emphasised in the Special Educational Needs and Disabilities (SEND) Code of Practice (DfE & DoH, 2014). The new code has given schools the formal responsibility of identifying and assessing children’s social, emotional and mental health needs with an emphasis on intervening at the earliest stages of difficulties.
In summary, national efforts towards improving children’s mental health and well-being have been evidenced in policy and initiatives overtime. The current context reflects an increased responsibility for schools and educators in promoting pupils’ emotional well-being including assessing and supporting their mental health needs in good time. Finally, the most recent publications emphasise the role of school leaders in supporting and monitoring the implementation of whole-school approaches, which according to research evidence are the most effective for promoting well-being and preventing mental health problems for children and young people in all stages of education.

2.4.2 Whole-School Approaches

Research evidence from systematic international reviews appears to suggest that adopting a whole-school or multi-level approach is the most effective way of promoting well-being when complemented with targeted programmes and interventions (Weare & Nind, 2011). A whole-school approach is described by Weare (2015) as:

A multi-component process which includes a supportive environment and school culture which encourages tolerance and acceptance at all levels, promotes staff well-being and development and ensures the prevention of pupils’ mental health difficulties by ensuring early identification. (p. 5)

Whole-school approaches comprise the totality of the school experience with the commitment of all staff, students, parents, the community and outside agencies to promote well-being. It involves areas such as the curriculum, school policies, school environment and relationships (Weare, 2015).

In the UK, a range of whole-school initiatives have been implemented. For example, the National Healthy Schools Programme (DfES & DoH, 2005); Social and Emotional Aspects of Learning (SEAL) in Primary and Secondary Schools (DfES 2005; 2007) and Social and Emotional
Aspects of Development (SEAD) in the early years (DfES, 2005) and Targeted Mental Health in Schools Projects (TaMHS), (DCFS, 2008). However, research on the effectiveness of these initiatives in the UK appears to be limited and has met with mixed reviews in respect of their impact on promoting emotional well-being and mental health of students (Weare & Gray, 2003).

Weare and Nind (2011) conducted a comprehensive international review which included the identification of a group of evidence-based interventions and programmes that had produced positive outcomes for children’s motivation for learning, staff and children’s well-being, social and emotional skills and on the prevention and reduction of mental health problems, behaviour improvement at school and reduction of risky behaviour. The review highlighted that whole-school approaches had the greatest impact on children’s overall well-being (Weare & Nind, 2011). The authors critiqued 52 systematic reviews of mental health interventions in schools, most of them from evaluations conducted in the US. Based on their review, Weare and Nind (2011) were able to report the characteristics of the most effective interventions. Those included interventions which offered a combination of universal approaches with interventions targeted at specific individuals or groups and involved integrating aspects of emotional well-being into academic learning. Weare and Nind (2011) identified that schools impacted positively on their students’ emotional well-being when this was embedded within a whole-school approach, including changes in the school ethos, and engaging with families and external agencies. Additionally, the review provided information about the circumstances under which school-based mental health interventions were most effective. Those included the programme design (e.g. clarity of rationale, teaching strategies); the programme co-ordination (e.g. within the school, and involving families and the wider community); staff preparation and support (e.g. formal training); the programme evaluation
(e.g. data collection to monitor implementation and impact) and working collaboratively with external agencies. Weare and Nind’s (2011) review offered a broad range of evidence-based interventions and programmes which had produced beneficial outcomes for children and young peoples’ mental health and emotional well-being. However, it only included evaluations using randomized control trials, omitting works evaluated in other ways, for example those involving qualitative approaches, which might be a limitation of the study.

An example of a whole-school approach that has been implemented and evaluated in pre-schools, primary and secondary schools in the UK, is SEAL. The programme has been one of the most widely implemented initiatives designed to promote pupils emotional well-being, foster positive relationships and improve behaviour. It was intended to be introduced as part of the curriculum to be taught in the classroom and in school assemblies (DfES, 2005, 2007). An evaluation of the SEAL programme appeared to indicate that the application of the programme in schools resulted in improved outcomes in academic achievement and attitudes towards school (Hallam, 2009). However, the study had significant methodological limitations, including lack of randomization, no control group and difficulties ensuring a consistent implementation of the programme across settings.

A previous study conducted by Weare and Gray (2003) sought to investigate the effectiveness of approaches to promote children’s emotional well-being and social competence in schools. The data was collected from interviews with 13 experts in the field and 13 managers from five local educational authorities (LEAs) considered to promote ‘good practice’. Data was also gathered from one case study from each LEA, examination of relevant websites, and attendance at meetings. Weare and Gray (2003) highlighted the need to develop a common understanding and use of the terminology around emotional well-being and mental health in educational policy. Weare and Gray (2003) suggested that the impact of
the school environment on emotional well-being is not limited to the students, but also influences staff’s well-being. The authors also highlighted the preventative role that schools have, emphasising the need for educational settings to be ‘environments that foster emotional and social well-being right from the start’ (p. 52). Furthermore, the authors indicated that promoting emotional well-being produced a range of additional benefits such as improved academic attainment, better behaviour and positive attitudes to learning. The authors concluded that working on the promotion of well-being should be a priority at national, LEA and school level.

The wide range of data collection procedures can be considered a strength of the study, the trustworthiness of the findings is limited as there was no description of how the different data were analysed. There was also limited information on the sampling criteria.

In summary, research literature highlighted the role of schools in promoting children’s emotional well-being and emphasised the importance of establishing whole-school approaches supported by targeted interventions for children at risk. Weare (2015) contends that programmes should aim to identify children, young people and families requiring support as early as possible, as a way to increase the likelihood of positive outcomes in all aspects of development. The role of school staff, especially of teachers, was highlighted as key in the identification and promotion of children and young people’s emotional well-being. Collaboration with outside agencies was identified as a significant aspect of the effective promotion of mental health and well-being. Finally, involving families and the community was considered a central aspect of meeting the emotional needs of children and young people.
2.5 The Role of Educators in Promoting Children’s Emotional Well-Being

This section of the literature will include the analysis of five research studies which are relevant to teachers’ views and responses to children and young people’s social, emotional and behavioural needs.

A qualitative study conducted in Scotland by Spratt, Shucksmith, Philip and Watson (2006) explored the views of professionals and students on the role of schools in promoting mental health and emotional well-being. The sample included 30 representatives of local authorities, 18 representative of health boards and 18 employees of voluntary sector organizations. A total of six case studies were selected for in-depth analysis, which included interviews with parents, pupils and teachers. The data were analysed using grounded theory. Research findings suggested that a schools’ main priorities were focused on improving attainment and that the emotional needs of pupils were often addressed when these needs impacted on academic achievement, or upon the teaching of the whole classroom. Teachers reported that reconciling the need to support pupils’ emotional well-being with raising academic attainment was a particular challenge for them. Spratt et al. (2006) reported that a lack of clear policies for promoting well-being and inconsistent initiatives were seen as barriers to promoting pupils’ emotional well-being. Another relevant theme was the teachers’ own well-being; teachers who reported feeling under pressure to meet academic targets and having to support pupils’ emotional needs was perceived as an additional burden. The findings also indicated that the referral to external agencies was often the last resort at times when problems were perceived to be beyond the expertise of the school.

Spratt et al. (2006) concluded that there was a need to review schools’ practices in order to identify the problems around the implementation of policy. The authors also proposed that in order to support children’s mental health needs more effectively, teachers
should work in collaboration with external agencies to improve prevention of mental health difficulties, instead of seeking their help as a last resort.

The above research provided a clear picture of mental health promotion in schools across Scotland, and addressed relevant systemic issues which may have impacted on the effective implementation of policy. It also highlighted the challenges faced by teachers in trying to support pupils with emotional needs while also facing pressures to achieve academic targets. It could be suggested that there was a reasonable sample size, but there was no specification of which participants took part in the different stages of the research or the criteria for participation. One strength relates to the use of different ways of gathering data. However, the respondents’ understanding of the term “low-level mental health difficulties” and “challenging behaviour” as proposed by the researchers could have impacted on the responses, which could be a limitation of the study.

Another study conducted in Scotland by Conelly, Lockhart, Wilson, Furnivall, Bryce, Barbour and Phin (2008) used questionnaires to gather the views of 365 teachers in different settings across 32 Local Authorities, including pre-school settings, primary and secondary schools. The authors collected information on the type of emotional and behavioural difficulties and mental health problems that teachers encountered in their everyday practice and the way they responded to those problems. The study also explored the teachers’ experiences of working with other professionals and external agencies in order to support pupils with emotional needs. Conelly et al. (2008) asked teachers to describe and comment on their “most recent case”, the “most worrying case” and the “most satisfying case” which involved working with a child or young person with emotional difficulties or mental health needs (p. 8). Consistent with Spratt et al. (2006) the findings showed that teachers perceived their primary task to be to ensure that children’s educational needs are met, as a result
dealing with children with behavioural and emotional difficulties was highlighted as both challenging and frustrating for most participants.

The authors reported that pupils’ family circumstances were described by teachers as having a detrimental effect on children and young people. Participants from pre-school settings described their role in providing support for parents and establishing regular communication with families as essential aspects of dealing with pupils’ emotional difficulties. Many teachers expressed feeling frustrated by the difficulties in accessing support from external agencies due to lengthy referral processes. A lack of training and clear guidance around mental health and emotional needs was also reported as a barrier to effectively supporting children with emotional difficulties.

One of the strengths of the study was the large sample which covered a wide range of settings within a large geographical area. However, some of the limitations of the study could be related to the lack of opportunities for in depth discussions with staff which could have provided more detailed information. Another possible limitation could be that many of the participants surveyed were head teachers, and their views might not have represented those of teachers and other members of the staff who worked with children and young people with emotional and behavioural difficulties on a more regular basis.

In the same year, a qualitative study conducted by Rothi, Leavey and Best (2008) explored the perceptions of teachers from primary, secondary and special schools on their role in pupils’ mental health. The sample included 30 participants including head teachers, teachers and support staff from different schools and nurseries in England. The findings indicated that teachers experience a professional responsibility towards the mental health and emotional well-being of children and young people but expressed concerns about their abilities to fulfil such responsibilities.
Consistent with Conelly et al. (2008), teachers indicated a lack of training and information as a barrier to the identification of mental health problems, a limited knowledge about early referral systems and a need for strategies to manage pupils with such needs in the context of the classroom. Rothi et al. (2008) indicated that the then current demands of the education system to improve academic standards could have had negative implications for the teachers’ role in supporting children’s emotional needs.

Rothi et al. (2008) concluded that teachers often saw children and young people as having behavioural problems, rather than thinking of behaviour as an expression of an underlying difficulty, and suggested that internalised problems might be overlooked. In addition, the authors indicated that teachers’ approach to children’s emotional needs was often intuitive and based on personal experience, and so highlighted the need for school staff to be trained on mental health related issues. Rothi et al. (2008) called for further research into teachers’ perceived roles and responsibilities.

One of the strengths of the research was the use of qualitative methodology which allowed for in depth information to be gathered. However, it was not clear whether the questions distinguished the concepts of mental health difficulties and social emotional and behavioural difficulties (SEBD) as two different categories. This distinction might have had direct implications on the way questions were interpreted and on the answers provided.

Training for school staff, particularly around identifying and responding to children’s mental health needs in time was also recommended by Loades and Mastroymannopoulou (2010) as a way to prevent the need for further interventions. The authors conducted a study using questionnaires, with a sample of 113 primary school teachers. The purpose was to explore their ability to differentiate symptoms of the same disorder at different levels of severity, and concluded that teachers were often more concerned when children presented
with behavioural disorders as compared to emotional disorders. They argued that this might be because the identification of overt symptoms is easier, and because behavioural difficulties can have a negative impact upon the whole class context. One of the strengths of Loades and Mastroymnopoulou’s (2010) study was the clear description of how validity was assured. However, it presented with some limitations, for example in terms of the sample: those who agreed to participate may have represented a biased sample, due to their particular interest in mental health issues. Another limitation could be that the views of other school staff, who also dealt with children’s emotional difficulties on a regular basis, were not considered. Furthermore, the use of vignettes might present limitations in terms of ecological validity. Teachers’ responses to behaviours in the context of the classroom may not have been the same as their responses to vignettes.

Further research has explored teachers’ attitudes towards children’s emotions and behaviour and their experiences of Mental Health Services. Ford and Nikapota (2000) conducted a qualitative study to gather the views of 25 participants from 11 primary schools using semi-structured interviews and vignettes. Ford and Nikapota (2000) reported that teachers’ attitudes towards pupils’ emotional needs were perceived to be influenced by their own personal experiences and background, rather than by formal training. Similar to Spratt et al. (2008) the findings suggested that teachers tended to exhaust all resources within the school before seeking external support from specialist agencies such as CAMHS. Whilst many teachers reported having had positive experiences of the services, other participants indicated facing barriers around accessing specialist support such as long waiting lists and lengthy referral processes.

Similar to the findings of Conelly et al. (2008), teachers perceived that families could have a detrimental impact on children’s emotional well-being including a lack of support from
parents, poor parenting skills and poor relationships between school and families (Ford & Nikapota, 2000).

The aims of the study were stated and the findings clearly presented. Although the authors discussed how ethical aspects were ensured, they did not reflect upon their position as researchers, therefore their interpretations may be biased. Another possible weakness of the study is that the authors did not discuss participants’ unique accounts, and only reported commonalities in their experiences. Further limitations could be in terms of the sample; participants who agreed to participate may have represented a biased sample, who volunteered to participate and might have had a particular interest in mental health issues. Despite these limitations, Ford and Nikapota’s (2000) findings promoted reflection upon the teachers’ role in relation to children’s emotional well-being and offered recommendations to improve collaborative work between mental health services and education.

Overall the evidence presented in this section suggested that educators are concerned about children and young people’s emotional well-being, and feel a responsibility towards helping those who are perceived as having emotional difficulties. However, the evidence also indicated that teachers found it hard to integrate their roles as Tier 1 professionals with their responsibilities of educating children, which was perceived as being their primary task. The research cited above also indicated that there were several barriers towards the promotion of mental health and well-being for educators. These included systemic aspects such as increasing pressures around meeting educational targets, difficult interactions with families, barriers around working in collaboration with external services and a lack of training around emotional and mental health issues.
Most of the research reviewed in this section focused on the views of teachers in primary and secondary school settings. The following section will focus on research conducted in early years settings.

2.6 Emotional Well-Being in the Context of Early Years Education

2.6.1 The impact of pre-school provision on children’s emotional development

Over the last decade there has been an increasing emphasis on early years education in the UK. Findings from the Effective Provision of Preschool Education (EPPE) project (Sylva, Meluish, Sammons, Siraj-Blatchford & Taggart, 2004) indicated that good quality early education has long-term benefits, in particular for disadvantaged children. The EPPE project which started in 1997 is a longitudinal study of a sample of young children’s development (intellectual, social and behavioural) from age three upwards. The focus of the study was on the impact of early childhood education and the home learning environment on educational and social development. One of the main purposes of the research was to assess the quality and practices in pre-school educational provision. Information was collected from a sample of over 3000 children, their families, their home environments and the pre-school settings they attended. The project which is currently in progress, has several subsequent stages collecting data on the primary, secondary schools attended by children in the sample. The sample included 141 pre-school settings randomly selected from all types of provision (e.g. nurseries, integrated children’s centres, private nurseries and playgroups). A sample of children who had no pre-school experience was also recruited for comparison with the pre-school group. In order to investigate the effects of personal, social and family background, and the quality of the home learning environment separate from the learning environment provided by the educational setting, the researchers applied a multi-level modelling in school effectiveness
design methodology. Demographic data was also collected, through questionnaires and parental interviews. Cognitive assessments and social development assessments were conducted at regular intervals. The quality of pre-school centres was assessed with observation-based rating scales such as the Early Childhood Ratings-Scales- Revised (ECRS-R). Case studies took place in 12 different pre-school centres (Siraj-Blatchford, Taggart, Sylva, Sammons & Meluish, 2008).

The main findings showed that: pre-school education enhanced all-round development in children in the short term (Key stage 1), medium term (Key stage 2) and long term (Key stage 3). Disadvantaged children benefited significantly from good quality pre-schooling, in particular in integrated settings (Children’s Centres) and nursery schools. Staff with higher qualifications offered richer learning environments, with sustained beneficial effects on all areas of development including attainment, social, emotional and behavioural development (Siraj-Blatchford et al, 2008). The issue of staff training and qualifications on children’s emotional well-being has been consistently highlighted by research studies previously outlined (e.g. Conelly et al., 2008; Loades & Mastroppannopoulou, 2010; Rothi et al., 2008; Weare, 2003; Weare, 2015).

Another relevant finding showed that in settings which saw educational aspects and social and emotional development as complementary and valued them equally, children made better progress in all areas of development including social, emotional and behavioural aspects. The findings were consistent with Weare and Nind’s (2011) review which indicated that the most effective approaches, with regards to well-being were found in those schools where social, emotional and academic learning were given the same importance. These were essential features of the whole-school approach advocated by Weare and Gray, (2003); Weare
and Nind (2011); Weare (2015) and reflected on recent government guidelines for schools mentioned in previous sections (DfE, 2016; Ofsted, 2015; Public Health England, 2015).

Consistent with previous studies, (Siraj-Blatchford et al., 2008) demonstrated the importance of parental involvement on children’s overall development, including social and emotional aspects. In settings where there was strong parental involvement children made better progress in all areas (Siraj-Blatchford et al., 2008). Parental involvement is also considered an essential component for the success of whole-school approaches to well-being (Weare, 2003; Weare & Nind, 2011) and a significant aspect of the key person’s role in early years settings (DCSF, 2008; DfE, 2014).

The authors concluded that where the quality of the pre-school setting was high, there was clear evidence that children had increased chances of success in their primary education and reduced chances of problems with attainment, relationships and behaviour in the future.

The strengths of the study lay in the large sample and the wide range of data collection strategies. The results had important implications for government policy around early years provision for disadvantaged children. However the study presented a potential limitation regarding the lack of information about how the settings’ quality indicators were determined, which might have impacted on the results.

A lack of parental engagement with schools has been identified as detrimental to supporting children’s emotional needs (Conelly et al., 2008; Ford & Nikapota, 2000).

McMillan (2005) argued for the need to explore the reasons behind communication difficulties in order to improve parental involvement. The author concluded that the key to a successful parental involvement required a clear policy and guidance that could be put into effect by staff who needed to be professionally trained.
The strengths of the study were the clear description of purpose and the range of background literature including definitions, relevant studies and policy in relation to the topic of the research. In addition, the study offered interesting insights into the issues underlying parental involvement from the perspectives of both teachers and parents. However, there were some criticisms of this study. The author did not specify the number of participants from each group that took part in the study and there was no reference to the criteria used to select participants, which may have been affected by researcher’s bias. The trustworthiness of the findings was also limited due to the method of data analysis is not being described.

2.6.2 The role of early years practitioners in children’s emotional well-being

2.6.2.1 The core concepts of Attachment Theory

A crucial aspect of children’s emotional well-being is the significance of their relationships and interactions with adults who are consistent, responsive and sensitive (Meluish, 2004). This has been reflected in early years education policy and legislation. The key person’s role which is essentially based on attachment theory principles, has been widely advocated in early years policy in the UK and has been mandatory since 2008 (DCSF, 2008; DfE, 2014). Underlying the key person’s approach is the belief that “young children cared for away from their homes and families, need to feel securely attached to one or two special adults” (Page & Elfer, 2013, p. 554). In early years settings this is enabled by allocating a member of staff to be mainly responsible for individual children and for sustaining relationships with their families (Elfer et al., 2012).

A central premise of attachment theory is that infants learn about ways of relating to others from the early relationships with their attachment figures. It was first developed in the 1950s by John Bowlby. Its principles contribute to a greater understanding of the influences of
early relationships which are directly linked to social, emotional and behavioural development in the context of early years settings.

The term “attachment” refers to the bond that develops between the infant and its primary caregiver, and which evolves over time as the infant and caregiver interact with each other. According to attachment theory the primary aim of the infant is to seek the presence of an attachment figure, (usually the mother) at times of distress. A central premise of Attachment theory is that infants can approach new situations based on how they experienced particular relationships with their caregivers. Infants’ expectations about themselves and others are carried onwards to subsequent interactions with other people, providing a template to make sense of new encounters. On the basis of those experiences infants built what Bowlby (1998) termed Internal Working Model (IWM). When attachment figures are consistent and provide love and care for their infants, children learn to rely on these interactions. Consequently, the child will be able to tolerate separation when this attachment figure, in his or her memory, is represented as an available and responsive carer.

The term “secure base” was developed by Mary Ainsworth (1978) to describe the infant’s use of mother or primary carer as a secure base from which to explore. In the 1960s Mary Ainsworth conducted research studies that provided further insight into attachment theory. Through her observations Ainsworth identified four attachment patterns: secure, insecure-avoidant, insecure ambivalent and insecure disorganised based on different patterns of a children’s responses to their mothers after separation. Secure attachments have been found to be an important protective factor for mental health in later childhood (DfE, 2016).

Findings from research studies and observations from clinical work have identified direct links between different attachment styles and children’s behaviour in school (Barret & Trevitt, 1991; Geddes, 2006). For example, insecurely attached children tend to seek attention
from their teachers more frequently than their securely attached peers (Sroufe, 1988, cited in Geddes, 2006), whereas securely attached children are generally less dependent on teacher’s attention (Sroufe, 1983, cited in Geddes, 2006) and are socially more competent (Geddes, 2006). Furthermore, there is literature that offers insights into how teacher-child relationships can be affected by particular ways of relating (e.g. Barrett & Trevitt, 1991; Geddes, 2006) and evidence that teachers are perceived as attachment figures who can provide a secure base for pupils (Geddes, 2006).

Attachment theory provides a useful framework for understanding how children relate and has had a dramatic influence in the way early years education in the UK is structured. The attachment principles underlying the key person’s role, centre in supporting children’s emotional well-being through relational processes. The ideas above can be conveyed in the following quote by Zulueta (2001, cited in Elfer et al., 2012):

*By attending to their infant’s needs parents and later nursery staff can provide children with a secure attachment which will enable them to develop fruitful long term relationships and a sense of being valued and lovable.* (p. 12)

Geddes (2006) maintains that there are several outcomes of positive attachment experiences on children’s emotional well-being. These are: a capacity to tolerate frustration and uncertainty, a sense of self-worth, a capacity to relate to others and a sense of individual agency.

**2.6.2.2 The concepts of projection and containment**

A significant aspect of early attachment experience in psychoanalytic theory includes the concepts of “projection” and “containment”. Projection is described as “the capacity to
split off painful feelings often locating negative feelings in others rather than in oneself” (Dearnley & Elfer, 2007, p. 268).

The concept of containment is described by Geddes (2006) based on Bion (1962) as:

A process whereby the infant, who has limited experience of the outside world, experiences needs as overwhelming. The “sensitive enough mother” understands her child’s desperation and can herself bear the anxious quality of it; she responds in a way that communicates this understanding. The infant is reassured by the mother’s response, and his or her anxiety diminished by the experience of being understood. (p. 39)

The theory of ‘container-contained’ proposed by Bion (1962) refers to the mother-infant relationship and links the early maternal bond with the origins of thinking and the capacity to learn. The mother (or primary care giver) will process and make sense of the infant’s primitive feelings. From this capacity to ‘contain’ the child’s confusion of impulses and sensations emerges a rudimentary form of thinking.

Geddes (2006) contends that without the process of containment the challenge of thinking and learning can be perceived by children as overwhelming and impact negatively on their experiences at school. Geddes (2006) argues for schools to be containing spaces for children where learning, social and emotional development can take place.

The concept of containment also applies to adults. Elfer (2007, cited in Dearnley & Elfer, 2007) describes the concept of containment in the context of adult relationships as:

A process of enabling people to think about and to talk through anxiety provoking ideas, with someone that can listen and think about them, returning them framed in an emotionally manageable way. (p. 269)

Winnicott’s (1965) concept of a good-enough facilitating environment is also relevant to containment. There is a distinction between Bion’s concept of container-contained and Winnicott’s concept of holding in that the former is concerned with the processing of
thoughts, whilst the latter is centrally concerned with a ‘reliable presence’ and environment (Bibby, 2011).

2.6.3 The role of the key person in the promotion of emotional well-being

The importance of attachment interactions in the context of early years education was explored by Page and Elfer (2013) who conducted a qualitative study based on a single case in a nursery setting. Previous studies by Dearnley and Elfer (2007) indicated that despite the widely implemented key person approach, ‘there is evidence of failure of its principles being applied consistently’ (Page & Elfer, 2013, p. 555). The authors explored early years practitioners’ understanding of attachment, how practitioners formed attachments with children and families, and how attachment principles translated into practice. The data collection included interviews, focus group discussions, diaries and staff reports with five participants in different roles. The data was analysed using the grounded theory approach outlined by Glaser and Strauss (1967). The reported findings indicate that the early years practitioners of the sample applied a mainly intuitive approach to the attachment based pedagogy that underlies the key person role. The authors reported that attachment appears to come ‘naturally, or as a personal belief, for participants which mainly relates to facilitating children’s transition and easing separation’ (Page & Elfer, 2013, p. 562). Furthermore, the authors reported that participants were unable to associate the term attachment with attachment theory. The authors concluded that children were held in mind and participants were keen to provide a sense of security for children, and highlighted the benefits of establishing trusting relationships with parents. However, they indicated that participants experienced difficulties with providing reliable and sensitive interactions in a consistent way due to time constraints, staff shortages and competing demands. The emotional complexities
of managing close relationships with children was also emphasised. For example there was a sense of increasing responsibilities for individual children combined with a perceived lack of support from management. The authors reported that participants generally lacked knowledge about the key person’s role and that most of the work was based on intuition, personal experience or a spontaneous sense of care rather than on any theoretical knowledge. Furthermore, the authors considered that early years practitioners’ own family background had direct implications for the way attachment was understood and translated into practice. Finally, the authors emphasised the need for attention to the personal and emotional dimension of early years work and argued for the need for training and professional development for practitioners. Additionally, Page and Elfer (2013) discussed the need for leadership staff to support and attend to the emotional needs of early years practitioners.

The strengths of the study included the depth of the analysis resulting from one case study and its contribution to the understanding of emotional life of nursery settings, which is an under researched area. However, the findings are limited in that they only related to a single case study and that there were manifested tensions between staff members which could have had implications for the information gathered through the focus group. In addition, there was limited information about what material was considered relevant for analysis from the participants’ diaries.

The topic of staff professional development and emotional well-being was explored in a study by Dearnley and Elfer (2007). The study consisted of the evaluation of a Continuous Professional Development (CPD) model, based on psychoanalytic principles, that was adapted for working with early years practitioners. Some of the conditions for the implementation of the model included a consistent meeting place and time boundaries, the use of facilitators who focused on meaning and group interactions and encouraged a non-judgemental
approach. The delivery of the model also involved many opportunities for reflection and discussion. The hypothesis was that the CPD model would provide staff with a space for reflecting on the emotions arising from their interactions with children and this in turn would enable them to be more emotionally connected with children and more effective in their roles. The CPD was implemented in two stages, the first stage was conducted with 12 head teachers and their staff. Dearnley and Elfer (2007) used a grounded theory methodology to analyse the data which was collected from records of discussions, anonymous written feedback and recorded discussions. The evaluation of the CPD model was rated positively. The participants reported having valued the space to discuss the emotional well-being of children as well as the opportunities to reflect on their own emotional responses that the CPD afforded. One of the aspects of the programme that was rated more positively was the opportunity to build trust within the team members which was perceived to impact positively on their interactions at work. A significant aspect of the programme was that it enabled participants to gain insight into children’s emotional experiences which resulted in them being more attentive to the impact of their interactions. However, some elements of the programme were identified as particularly challenging for the participants, these included talking in front of others and taking part in discussions which involved sharing personal memories or feelings.

The authors concluded that the discussions emerging from the CPD process highlighted the emotional complexity of the work of early years practitioners. They argued that in order to sustain effective professional practice, practitioners needed to be afforded a reflective space, based on the psychoanalytic principles of containment and attachment theory, as part of their professional development. The findings were consistent with Weare and Gray (2003), who highlighted the need to address teachers’ well-being in order for them to be able to support
children’s emotional needs and indicated that: ‘unless teachers feel their own emotional need are being met, they will be unable to support their pupils’ (p. 74).

The strength of the study lay in the in-depth analysis of people’s experiences which offered some insight into the experiences of early years professionals, an area which was particularly under researched in the UK. More importantly, it offered useful suggestions that could assist in the government’s commitment towards promoting children and young people’s emotional well-being particularly in the context of early years education. Recent guidelines refer to the need to support and promote staff development and well-being as integral aspects of an effective approach to promoting emotional well-being (Public Health England, 2015).

There were possible limitations with respect to the sample used for the study. Most participants were head teachers, whose experiences and interactions with children might differ from those of the key person. Other factors that may have contributed to researcher bias are that neither the demographic details nor the size of the staff sample are indicated.

In summary, the studies cited in the above section raised some interesting issues with regards to supporting children’s emotional well-being in the early years. These included the importance of settings where adults can offer emotional containment and who are sensitive to children’s needs, but also who are supported and given opportunities to reflect around their practice. One of the most salient issues in the literature reviewed in this chapter related to the need for staff to be offered training in order to be able to better respond to young children’s emotional and developmental needs.
2.7 The current research

Most of the research reviewed has centred on the views of teachers, there is limited research in the UK which focuses on the views of early years practitioners about their role in supporting children’s emotional needs. This study will explore the views of early years practitioners and will attempt to explain what are the contexts and mechanisms that facilitate and/or hinder the promotion of children’s emotional well-being in pre-school settings.
Chapter 3

METHODOLOGY

3.1 Overview of Methodology Chapter

This chapter provides a description of the researcher’s orientation and the rationale for conducting a qualitative research design. It outlines the sampling procedures, provides information about the participants and a justification for the methodology chosen. The remainder of the chapter includes a detailed description of the methods of data collection and analysis. Issues of trustworthiness and ethics are considered at the end of the chapter.

3.2 Purpose of Research

This qualitative research used a critical realist stance as a guiding epistemological position to explore the views of early years practitioners’ views and contribute to the understanding of the contexts and mechanisms which influence the promotion of children’s emotional well-being in pre-school settings.

The research has two main purposes which are:

• Exploratory as it seeks to explore the views of early years practitioners and identify what contexts and mechanisms facilitate and/or hinder the promotion of emotional well-being of children in pre-school settings.

• Explanatory in that it seeks to understand and explain the contexts and mechanisms underlying the promotion of children’s emotional well-being in pre-school settings.
The research questions are:

1) According to the views of early years practitioners: What are the contexts and mechanisms which facilitate the promotion of children’s emotional well-being in pre-school settings?

2) What are the contexts and mechanisms which hinder early years practitioners’ ability to effectively promote children’s emotional well-being in pre-school settings?

3.3 Ontological and Epistemological Orientation

In order to understand the reasons behind the process in which the current study was designed and conducted, the researcher’s philosophical assumptions are presented below. Ontology refers to the study of the nature of the world (Willig, 2008). It is concerned with questions around the nature of the world and the nature of reality (Fox, Martin & Green, 2007). Ontologies range from realist positions such as positivism, which argues for an objective singular view of the world, otherwise known as objectivism, to relativist positions such as social constructionism, which argue that reality is socially constructed by people interacting in the social world (Fox et al., 2007).

The key purpose of research based on realist approaches is to produce findings that can be generalised to other people in similar circumstances (Fox et al., 2007). Research aligned with a positivist ontology offers a way to explain reality by testing hypotheses using experimental design (Robson, 2011).

In contrast, research studies underpinned by relativist ontology are presented as detailed explorations of people’s perspectives which are interpreted by the researcher (Yardley, 2000). Findings from research based on relativist ontology have limited generalisability, as studies are often bound to particular social, cultural and historical contexts.
Epistemology is a branch of philosophy that is concerned with how knowledge is acquired and what constitutes meaningful knowledge (Willig, 2008). Several authors agree on three main epistemological positions: Positivism, Phenomenology and Social Constructivism (Fox et al., 2007; Guba & Lincoln, 1994) which can be located within a spectrum ranging from Realism to Relativism (Harper, 2011). Epistemological assumptions cover the full range, from the notion that knowledge is totally objective to the view that knowledge is subjective.

Realists, also known as positivists, believe that knowledge is a direct reflection of the world which can be obtained through direct observation (Fox et al., 2007; Robson, 2011). This epistemological position underpins quantitative research, in which hypotheses are tested and cause is established in order to develop universal laws (Robson, 2011). Positivists believe there are facts which can be examined and established, independent of the researcher’s influence.

On the other end of the spectrum ‘relativists’ also known as ‘social constructionists’, argue that knowledge is constructed through social interactions (Robson, 2011; Willig, 2008). As such, they believe that personal experiences are not a direct reflection of reality but an interpretation that is influenced by the individual’s history, culture and language (Willig, 2008, p. 7). Social constructionists believe individuals can construct multiple interpretations of the same event which are all equally valid (Harper, 2011). From this perspective, the values of the researcher are seen as an integral part of the research process as she/he constructs a “reality” with the help of the research participant (Robson, 2011). This type of research aims to understand the construction and use of a social reality and to trace its implications for those under study, rather than the investigation of firm “facts” (Willig, 2008). In this way it is one of the epistemological positions which fits a qualitative methodology.
Ontological and epistemological positions have direct implications for research design and for the choice of methodologies that are most appropriate for a particular research study (Robson, 2011).

In the current study, the ontological and epistemological position of the researcher is underpinned by that of critical realism.

3.4 Critical Realism

Critical realism brings together elements of positivism and realism and aims to find a balance between experimental methods and subjective approaches such as constructionism. Critical realists tend to conduct research in a range of natural settings, and this can indeed offer an adequate way of approaching real life situations (Robson, 2011). Critical realism postulates that there is a reality independent of human perception whilst acknowledging that the researcher may not have direct access to this reality (Robson, 2011; Willig, 2008). In common with positivist approaches, critical realists consider that the world can be understood with relative objectivity, but unlike positivists they maintain that research can be affected by particular contexts which can result in multiple versions of that reality (Mathews, 2003).

Critical Realist approaches emphasize the importance of understanding the underlying mechanisms behind a phenomenon and acknowledge that such mechanisms are to be understood within the contexts in which they operate (Fox et al., 2007). Mechanisms refer to the interactions between social structures and an individual’s agency, in order to create a regularity of human experience. Outcomes are understood as the result of the interplay between mechanisms in context. Context refers to local, historical and social systems of rules and values that influence those mechanisms (Fox et al., 2007). Research from a Critical Realist perspective aims to identify the mechanisms in context to explain the reasons why certain
regularities take place (Mathews, 2003). The term “theory” in this sense refers to the identification of the mechanisms underlying actions which result in observable events (regularities) and the detailing of the conditions within which the mechanisms function (Robson, 2011).

A Critical Realist perspective advocates that there is a reality which exists separate from the researcher, but at the same time acknowledges that the researcher’s values, assumptions and interests place limitations on what can be “revealed” about reality (Mathews, 2003). The critical realist paradigm suits the research aims of this study, which is to explore and explain the mechanisms underlying the experiences of promoting children’s emotional well-being for early years practitioners in the context of pre-school settings.

The research hopes to be able to offer a better understanding of the experiences of early years practitioners in order to support them in their practice. Additionally, Pawson and Tilley (1997) maintain that research from a critical realist standpoint can enhance the understanding of social phenomena and therefore be used to support and influence the development of social policy and practice. This idea underlies the research’s aims which is to be able to influence policy and practice around early years approach to emotional well-being.

Critical realists argue that it is only by collecting, analysing and interpreting data the researcher will be able to uncover the mechanisms and the contexts in which these operate (Robson, 2011; Willig, 2008).

3.5 Rationale for Research Design and Method

Research design is concerned with finding the best way to answer the research questions. It is mainly influenced by the aims of the research, the researcher’s epistemological stance and other factors, such as time limitations and financial resources. The current research
adopts a qualitative methodology as it aims to capture experiences and perspectives, and to provide the opportunity to explore complex social and psychological processes (Willig, 2008). Traditionally, research has been divided into two approaches: qualitative and quantitative. Quantitative research methods are more suited to testing hypotheses and causal relationships and measuring the generalisability of phenomena (Yardley, 2000). Qualitative research methods are appropriate for exploratory studies concerned with understanding a particular topic through the participants’ perspectives (Creswell, 2007). Qualitative studies often provide detailed and extensive data for interpretation (Braun & Clarke, 2016).

The principles of qualitative research indicate that our knowledge and experiences are not based on an objective reality, but rather on subjective perceptions shaped by language, social interactions and cultural perspectives (Yardley, 2008). Thus, unlike quantitative methods, qualitative methods recognise there are various ways of interpreting data, rather than there being one objective truth. This is in line with the purpose of this research which is to explore early years practitioners’ views on their subjective experiences of promoting children’s emotional well-being.

Qualitative methods have also been recognised as a valuable approach to obtaining the views of individuals who are underrepresented in psychological research (Braun & Clarke, 2006). Research into the views of early years practitioners around the promotion of emotional well-being of children is lacking, and therefore qualitative methods are in line with the research aims which are to explore the views of this particular group of people. A qualitative methodology was chosen in order capture experiences and perspectives and to provide the opportunity to explore complex social and psychological processes (Willig, 2008).

Qualitative research has been criticised for not including a representative sample to allow findings to be replicated and generalised to a larger population (Willig, 2008). However,
qualitative researchers argue that obtaining large samples which are statistically representative can result in a high amount of data to the detriment of in-depth analysis. Thus qualitative research often requires recruiting a relatively small sample which presents particular attributes of interest for the research topic (Yardley, 2000). This research therefore consisted of recruiting a small sample of early years practitioners from various pre-school settings within an inner London Borough. This purposive recruitment process was consistent with the principles of qualitative research as it allowed opportunities for participants to provide relevant and detailed information regarding the research topic (Patton, 2002).

3.6 Data Collection Procedures

The researcher’s choice of research question and research design had implications for the selection of data collection and analysis. Interviews are considered to be one of the most common forms of data collection in qualitative research because they can provide opportunities for collecting rich data that can be compatible with various methods of analysis (Robson, 2011; Willig, 2013). Interviews have been described as a suitable form of data collection for grounded theory studies (Creswell, 2007).

The qualitative method selected for data collection for the current study was one-to-one semi-structured interviews. This style of interviewing was chosen because it allowed the participants to provide a first-person account of their experiences and to discuss those in detail, in line with one of the aims of the research (Willig, 2008). Furthermore, semi-structured interviews are considered a flexible method of data collection, which enabled the researcher and the participants to co-construct meanings or interpretations (Charmaz, 2014) and allowed the possibility of modifying the questions in order to achieve an in-depth exploration, or follow up interesting responses (Robson, 2011). The researcher understood that in order to
build rapport with the participants, this style of interviewing would be more appropriate. It was considered that participants would be more comfortable with a non-directive, flexible style of interviewing.

Willig (2013) maintains that semi-structured interviews are compatible with a critical realist research as they can be designed and applied to facilitate “true and undistorted representations” about the world (Willig, 2013, p. 11). In addition, semi-structured interviews can be used with most versions of grounded theory (Willig, 2013).

Some of the drawbacks of semi-structured interviews have been identified as the length of time they take and that they require a certain degree of skill and experience from the interviewer. In addition, the lack of structure raises issues around the potential biases which are difficult to eliminate (Robson, 2011).

Alternative data collection methods, such as questionnaires and focus groups, were not considered appropriate, as they would not have facilitated obtaining in-depth accounts of individual participants. In contrast with interviews, questionnaires tend to omit the complexity and richness of participants’ experiences (Yardley, 2000). Similarly, focus groups were considered inappropriate because they seek to obtain the views of several participants simultaneously which might have inhibited the participants in sharing their personal accounts and experiences (Smith, 2008).

3.7 Researcher’s Assumptions

It is important to consider the assumptions underlying the researcher’s approach to the research and the research questions:
• The researcher assumed that the use of the term “promotion” throughout the study, would help to contextualize the research within the current policy context around mental health prevention, as the term is widely used in official publications.

• The promotion of children’s emotional well-being is a topic of relevance for the government but the researcher’s experience indicated that it was unlikely that current policy and advice were fully reflected into early years practice.

• The researcher assumed that there were factors which may have facilitated and/or hindered how effectively early years practitioners promoted children’s emotional well-being and research was needed to identify these factors in order to improve practice.

• The researcher assumed that social phenomena take place within complex interactions and multiple contextual conditions. Therefore, a better understanding of those factors from the perspective of the participants would allow for the development of interventions which are appropriate to their needs.

3.8 Sample and Participants

The data for the current research study was obtained through a process of purposive sampling. Participants were selected according to specific criteria (Willig, 2008). There were three eligibility criteria for participants:

• Individuals currently working within a pre-school setting.

• Individuals who had been identified as early years practitioners.

• A minimum of two years of experience working as an early years practitioner.

The researcher conducted semi-structured interviews with seven participants in four different settings. This sample size allowed the researcher to explore in detail the accounts of
the participants, prioritizing quality over quantity. Most participants were recruited by the researcher contacting the Special Educational Needs Coordinator (SENCO) in different pre-school settings within the Local Authority via emails in which the researcher described the purpose of the research (see Appendix 3). Further participants were recruited by the researcher contacting early years practitioners (via e-mail) who volunteered to take part in the study. The final sample was obtained from three different nurseries that operated within local primary schools and one pre-school setting that was part of a Children’s Centre.

A total of six females and one male took part in the study. Participants sampled had a range of jobs which held a key person’s role responsibility in the pre-school settings where the research took place. Some participants held teaching roles; others held support staff roles; others held senior management positions or were in teaching roles with designated responsibilities.

See Table 3.1 for a breakdown of participants work roles. Participants’ ages ranged from 31 to 61 with a mean of 46 years of age.

Table 3.1: Participants Gender, Years of Experience and Work Roles

<table>
<thead>
<tr>
<th>Number of Participant</th>
<th>Gender</th>
<th>Years of experience as Early Years Practitioner</th>
<th>Designated work role</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Female</td>
<td>20-30</td>
<td>SNA (Special Needs Assistant)</td>
</tr>
<tr>
<td>2</td>
<td>Female</td>
<td>20</td>
<td>Nursery Teacher and Lead of Nursery</td>
</tr>
<tr>
<td>3</td>
<td>Female</td>
<td>10</td>
<td>Nursery Teacher and Pre-School Curriculum Leader</td>
</tr>
<tr>
<td>4</td>
<td>Male</td>
<td>5</td>
<td>Nursery Teacher and Lower Phase Leader</td>
</tr>
<tr>
<td>5</td>
<td>Female</td>
<td>38</td>
<td>Nursery Teacher</td>
</tr>
<tr>
<td>6</td>
<td>Female</td>
<td>15</td>
<td>Nursery Teacher and Nursery Manager</td>
</tr>
<tr>
<td>7</td>
<td>Female</td>
<td>15</td>
<td>Nursery Nurse</td>
</tr>
</tbody>
</table>
In this particular study the sample was from an inner London Borough, so was not necessarily representative of all pre-school settings across the country. However, the researcher did not attempt to make generalisations, but instead gathered data that would help build a theoretical understanding of the experiences of early years practitioners around the promotion of emotional well-being of children in pre-school settings within a local context. Table 3.2 shows the characteristics of the diverse types of pre-schools provision that the interviewees represented.

Table 3.2: Characteristics of pre-school settings according to participant

<table>
<thead>
<tr>
<th>Participant</th>
<th>Pre-school features</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 &amp; 2</td>
<td><em>Children’s Centre.</em>  The centre is located in an area of significant deprivation covering eight different areas. One of these is within the 5% most deprived in the country, five fall within the 10% most deprived and the remaining two fall within the 15% most deprived. Due to the significant levels of deprivation within the whole of the reach area, all families are regarded as target families. Families come from a variety of backgrounds with the largest ethnic groups being Black African, Black Caribbean, White British and Other White. There is also a significant number of families of Roma and Somali heritage. There are 42.6% of children living in households in receipt of out of work benefits in addition to 29.7% lone parents claiming income support. There are high levels of families living in temporary accommodation with 47.6% of the housing stock categorised as “non-decent”. Children’s levels on entry to primary school Early Years Foundation Stage are significantly lower than those expected for their age.</td>
</tr>
<tr>
<td>3 &amp; 4</td>
<td><em>A Church of England School.</em>  The nursery is part of the Infant school. The proportion of pupils from minority ethnic backgrounds is above average. Very few pupils are at an early stage of learning English. The proportion of pupils who are disabled or have special educational needs is above the national average. An average proportion has a statement of special educational needs. The proportion of pupils for whom the school receives the pupil premium (additional government funding for looked-after children, pupils known to be eligible for free school meals and the children of service families) is above the national average. Children in the Early Years Foundation Stage are taught in two Reception classes and one Nursery class, which children attend either part or full time. Ofsted overall rating of Infant School is “Good”.</td>
</tr>
<tr>
<td>5</td>
<td><em>Academy.</em>  Nursery is part of the Early Years Foundation Stage. Most pupils are from minority ethnic groups and of these, about two thirds speak English as an additional language. The proportion of disabled pupils and those who have special educational needs supported is above average. The proportion of children with a statement of special educational needs is lower than average. Ofsted rated this school as “Requires improvement”.</td>
</tr>
</tbody>
</table>
6 & 7

Roman Catholic School.
The nursery is part of the Infant school. Almost all pupils are from a wide range of minority ethnic backgrounds. The proportion who speak English as an additional language is high. Many are at the early stages of learning English. The school receives pupil premium funding for an above-average proportion of the pupils. The proportion of disabled pupils and those who have special educational needs is above average. The proportion of children with a statement of special educational needs is below average. Ofsted overall rate of Infant School is “Good”.

3.9 Pilot Interview Schedule

To assist in constructing the interview schedule, a pilot study was conducted. Robson (2011) suggests that in the first stage of data collecting it is important to conduct a pilot study in order to assess whether there are any problems with the selected methods of data collection.

One early years teacher was selected on an opportunity basis and due to her interest in the research study. The participant was interviewed in September 2015 and the researcher presented a list of interview questions and prompts.

One of the outcomes of the pilot study highlighted the need for the researcher to review the introductory questions in order to develop rapport with the participants. In the following interviews, introductory questions were added before posing the main body of the interview questions. These included questions about the participant’s role and professional background.

Another relevant outcome from the pilot study concerned the need for the researcher to use reassuring statements in order to ease participants’ anxiety about getting the questions right, as it was noticed that the participant in the pilot study asked if she had provided the right answer after every response. Additionally, the pilot interview indicated that some of the questions needed re-wording in order to improve clarity. Furthermore, the pilot study
identified that the researcher needed to use more prompts with the participants to elicit broader responses or, at times, to be more specific.

The outcomes of the pilot study including records of the participant’s feedback and the researcher’s reflections were kept in a research journal and were used for the development of a revised interview schedule (See Appendix 6).

3.9.1 Interview Schedule

The use of an interview schedule allowed the researcher to maintain control of the interview and helped in keeping the focus of the research. The structure of the interview schedule followed Robson’s (2011) guidelines including:

- Introductory comments
- List of key questions
- Prompts
- Closing comments

All interview questions were discussed with the researcher’s supervisor who verified that the questions were open. The questions were used as a flexible guide only. Additional questions were asked during the interviews in order to elicit further information or to explore other aspects relevant to the research questions.

All interviews were conducted at the participants’ schools. A suitable private location was designated for the interviews to take place and the interviews were conducted at a time convenient for the respondents. Interviews lasted between 30 and 55 minutes and were audio recorded using a digital audio recorder.
3.9.2 Transcription of interviews

The interviews were transcribed by a professional transcriber in a “true verbatim” style, where not only the words but also vocalisations, such as “umm” and “err”, as well as non-verbal communication, such as laughter and pauses, were recorded. After transcription, the researcher checked the transcript for accuracy against the original recordings. The transcript was also used to check whether the data generated was of relevance to the questions. For examples of interview transcripts see Appendix 9.

In accordance to ethical considerations regarding confidentiality, the independent transcriber was requested to sign a confidentiality agreement.

3.10 Qualitative Data Analysis

3.10.1 Rationale for using grounded theory

Strauss and Corbin (1998, p. 15) described analysis as the “interplay between researcher and data”. Decisions about the method of data analysis were influenced by the researcher’s philosophical orientation, the research questions and the type of data that had been obtained (Willig, 2013). Common methods of data analysis include: Thematic Analysis, Interpretative Phenomenological Analysis, Discourse Analysis and Grounded Theory, amongst others.

A number of qualitative methods of data analysis were considered while designing the research study. Initially, the possibility of using Thematic Analysis was explored. This methodology would have allowed the researcher to obtain a detailed thematic description of data. However, it would not have allowed the researcher to explore the relationships between concepts with the aim of developing a theoretical understanding of the mechanisms
underlying the promotion of children’s emotional well-being in the context of pre-school settings.

Similarly, neither Interpretative Phenomenological Analysis nor Discourse Analysis methodologies would have adequately addressed this study’s research questions, which involved an exploration of the mechanisms in context that underlie the experiences of promoting emotional well-being for early years practitioners. Interpretative Phenomenological Analysis methodology would not have been appropriate as it is concerned with the study of how people make meaning of their lived experience, and fits with a social constructivist view which considers that there is no reality independent of people’s perceptions (Willig, 2008). Discourse Analysis on the other hand, is concerned with the way participants use language to construct a shared understanding of reality, which was not the aim of the current study (Willig, 2008).

Grounded theory methodology was chosen as the research methodology for the current study because it allowed the researcher to generate theory that was grounded in the data, rather than imposing pre-conceived ideas upon the data. Grounded theory differs from other qualitative methods as it aims to go beyond description by capturing experience and develop theoretical conceptualisations. Therefore, it was considered the appropriate methodology to fit the research aim, which was to develop a contextualised theory of the factors which underlie the promotion of children’s emotional well-being, based on participants’ experiences.

In the current research a critical realist approach to grounded theory was adopted, which fitted with the epistemological view of the researcher. As a critical realist the researcher aims to understand and explain the contexts and mechanisms that influence early years practitioners’ experiences of promoting children’s emotional well-being in pre-school settings.
3.10.2 *Grounded Theory Methodology*

As a research methodology, grounded theory is one of the most widely employed qualitative methodologies in the social sciences (Corbin & Strauss, 2008). It is a methodology used to develop theory from data rather than to test or verify existing theories (Fox et al., 2007; Willig, 2013). It emerged in the 1960s, when qualitative research was seen as lacking scientific rigour (Robson, 2011). It was first developed by Glaser and Strauss (1967) as a method for qualitative research that provided reliability and validity measures comparable to quantitative methodologies. They proposed that there was a need to move beyond descriptive qualitative research towards a more theoretical understanding of social processes (Charmaz, 2014). Glaser and Strauss (1967) described a systematic process of qualitative analysis, which could generate theory that was grounded in the data. They described the components of grounded theory as including an ongoing iterative process of data collection and analysis whereby categories are constructed from data, thus leading away from pre-conceived ideas. Glaser and Strauss (1967) assumed an objective observer who discovers data, which is then reduced into categories that can be objectively analysed. Glaser and Strauss’ original conceptualisation of grounded theory were based on three main assumptions:

- The researcher can be separated from the phenomena under study.
- The theory is to be “discovered” by the researcher.
- The theory generated is a true and objective version of reality.

Glaser’s positivist research background and Strauss’s influences of symbolic interactionism led to a divide between the researchers and to the emergence of new versions of grounded theory (Charmaz, 2014). Since Glaser and Strauss’ first publication, grounded theory has experienced several modifications.
In 1990 Charmaz introduced a social constructionist version of grounded theory (Charmaz, 2014). This version of grounded theory assumes that neither data nor theory are discovered, and that the theory generated is a product of a researcher’s own assumptions and interpretations, within a world that is influenced by cultural, social, historical and political contexts. Therefore, constructivist grounded theory understands that any theoretical interpretation emerging from data can only offer a subjective version of the world under study (Charmaz, 2014).

The approach to grounded theory proposed by Corbin and Strauss (2008) argued that the researcher’s views and assumptions can influence the research process to a certain extent, but that there are aspects of social and psychological processes which exist independently of the researcher’s interpretations. The authors suggested that the researcher must try to put aside pre-conceived ideas and constantly compare findings across all stages of analysis (Corbin & Strauss, 2008).

Corbin and Strauss’s (2008) version of grounded theory fits well with a critical realist position of the researcher because it assumed that social and psychological processes can exist independently of the researcher’s awareness of it, but can also be interpreted through analysis.

Furthermore, the strategies for data analysis proposed by Corbin and Strauss (2008) included ways of exploring the data by taking into account the context or structural conditions that influenced the processes by which individuals responded to particular situations (e.g. their actions or emotions) and that resulted in particular responses or consequences. In this way, grounded theory helped the researcher to develop an explanation of how different contexts or conditions and mechanisms resulted in particular outcomes (i.e. the promotion of children’s emotional well-being).
3.10.3 Literature Review

The literature review process took place in two stages. In line with grounded theory methodology principles, most of the review was conducted after the data was gathered and the analysis was complete. Glaser & Strauss (1967) suggested that it is important to postpone the literature review until the analysis is finished in order to let the data speak for itself and avoid imposing pre-conceived ideas. As a doctoral student, the researcher was required to complete an initial literature review as part of a research protocol submitted for ethical approval. It needed both to demonstrate that there was a gap in the literature and also contextualise the research in order to provide a rationale for conducting the current study. In addition, the initial literature review allowed the researcher to justify the use of a qualitative approach and locate the chosen methodology within this.

3.11 Data Analysis

The current research adapted a set of grounded theory principles to analyse data. Analysis of the data in grounded theory is a process of reducing raw data into concepts which are then classified into categories. Emerging categories are developed and later integrated into a theory (Corbin & Strauss, 2008). The process involves coding the data, which is the first step of data analysis, and writing memos which assists the researcher in moving towards more abstract interpretations as the analysis progresses (Charmaz, 2014). In this study, data was coded and analysed using the three coding methods of the grounded theory model: open coding, axial coding and selective coding. For details of the complete grounded theory analysis refer to Appendix 7. Corbin and Strauss (2008) refer to the need for researchers to use a coding paradigm when they analyse the data. The approach to coding used in this study aligns
with the method outlined by Corbin and Strauss (2008) which suggests that researchers need to hold three main ideas in mind when analysing data:

- **Contextual conditions**: Refer to the circumstances in which a problem or a situation arises.
- **Processes**: Refer to social interactions, actions and emotions.
- **Outcomes**: Refer to the consequences of interactions, actions or emotions.

Most grounded theory researchers promote a process of simultaneous data collection and analysis in which the researcher collects further data in light of categories that emerge from early stages of data analysis (Willig, 2013). Due to time constraints and resource limitations the researcher used an abbreviated version of grounded theory which, in contrast to the full version, (moving back and forth from the data collection and analysis with the aim of theoretical saturation) involved only one round of data collection and analysis. This version of grounded theory did not allow the researcher to broaden or refine the original data and the following analysis (Willig, 2013). The process of coding, constant comparison, theoretical saturation and negative case analysis took place within the interview transcripts.

### 3.12 Analytic Tools

Corbin and Strauss (2008) described a set of analytic tools or strategies that the researcher used to facilitate the coding process. Analytic tools serve to aid the process of analysis by avoiding forcing pre-conceptions on data and allow new possibilities to emerge. Examples of analytic tools are explained below:
3.12.1 The use of Questioning

Corbin and Strauss (2008) maintain that the use of questioning is essential for the analysis because it enables the researcher to develop provisional answers, become familiar with the data and challenge assumptions. The researchers argue that this process of asking questions and thinking about many possible answers help the researcher to take on different perspectives and to decide on the next steps of analysis.

3.12.2 Constant Comparison

The method of constant comparison was followed throughout the analysis (Glaser & Strauss, 1967). This method ensured that theory develops by making comparisons and asking questions of the data, and allowed the researcher to identify similarities and differences and refine coding when appropriate. A number of techniques exist to aid researchers in making comparisons. For example, comparing incident by incident at the level of properties or dimensions. Incidents that are deemed to be similar are grouped together under higher order concepts. Another tool is theoretical comparison, which involves comparing incidents derived from theory or research experience with incidents in the data at the property or dimensional level (Strauss & Corbin, 1998).

3.12.3 Memo Writing

In grounded theory the process of coding and developing categories is complemented by memo writing. Memos are notes that include the researcher’s thoughts and reflections emerging throughout the process of analysis. Memos help the researcher to reflect on data analysis and theory development. During the data analysis the continuous process of memo writing was important for the development of conceptual categories, to establish the
relationships between them and finally in the construction of the grounded theory. Memos helped to summarise the concepts included in the axial codes. They were also important for reflecting upon the researcher’s pre-conceptions and biases. The memo below was written after the open codes were developed and it helped to reflect upon one of the main issues of the study and on some of the researcher’s emerging ideas:

I’ve been thinking about the central notion of the study. Each of the participants seem to have taken the task of educating children very seriously and they consider emotional well-being as a pre-requisite for learning. Whilst the success in educating children can be assessed against a set of targets, emotional well-being instead presents as an intangible concept that cannot be measured. At this point I asked myself whether it will be possible to determine if emotional well-being is actually promoted.

3.12.4 Negative Case Analysis

Negative case analysis is a technique within grounded theory which involves the researcher actively looking for information which contradicts the emerging concepts, particularly during the later stages of data analysis. According to Corbin & Strauss (2008) negative cases serve to add richness to the exploration by providing different or alternative explanations to phenomena. In the current study, this was evident when one of the participants commented that in her view, observing and monitoring children might hinder the promotion of their emotional well-being:

I think, I think we, I think there is too much reports and observations, and children feel constantly monitored, and I think children know that. I think they don’t feel free, like they used to in the past, they were free to learn, to explore not being monitored constantly. I think it affects their emotional well-being.”

Searching for negative cases allowed for a greater explanatory power of the conceptual categories that emerged through the analysis.
3.12.5 Theoretical Saturation

Glaser (1992) indicated that the aim of grounded theory research is to reach “theoretical saturation”. This idea refers to a point in the analysis by which no new meaningful data emerges. However, Dey (1999) suggests that in real world studies it is difficult to reach “theoretical saturation” and indicates that “sufficiency” rather than “saturation” can be used to describe how conceptual categories can lead to the development of a theory. This idea implies that data sources do not need to be exhausted in order to make claims that the great majority of the analysis is theoretically saturated. As analysis progressed, fewer codes were added and there was an increase in what was considered irrelevant and repetitive data. It was felt that theoretical sufficiency (Dey, 1999) was achieved, as no new conceptual categories emerged.

3.12.6 Computer Assisted Qualitative Data Analysis (CAQDAS) Software MAXqda

Qualitative research produces large volumes of data (Robson, 2011). In this study, the use of MAXqda-12 was used to analyse the data, particularly during open coding and axial coding stages. The researcher found the MAXqda 12 a useful tool for storage, management and analysis of interview data. Particular features of the programme that were found to be the most useful were:

- All the responses to one question could be displayed in one window which allowed the possibility of comparing all answers.
- Windows could be linked interactively so a single retrieved segment from a transcript can be also be shown within the context of the entire interview on another window.
- Codes could be organised hierarchically.
• Memos could be attached to codes to aid the analysis and were helpful reminders when returning to the analysis after an interruption.

• Coded segments and memos could be imported to WORD documents.

• Details of all stages of analysis and can be presented as part of an audit trail.

• Details of memos could be kept to increase the level of transparency of the analysis.

In spite of the time and effort that was required to gain the skills for the proficient use of MAXqda, the usefulness of the software was considered to compensate for those difficulties.
Figure 1 shows the basic features of the programme:

3.13 Stages of Analysis

Corbin and Strauss (2008) indicate that the process of theory generation involves generating categories of information (open coding), interconnecting the categories and locating them within a theoretical model (axial coding) and then establishing the core or central category which explains the interconnections of the categories through a “storyline” (selective coding) (Corbin and Strauss, 2008; Creswell, 2009).
3.13.1 Open Coding

Prior to the analysis it is important to become familiar with the data (Charmaz, 2014). This was achieved by the researcher reading all interview transcripts and later listening to the audio recordings of each interview.

Following this, the researcher embarked in the open coding stage of analysis. Open coding was the starting point in the process of data analysis and served to identify initial conceptual labels that appeared of significance to the interviewee, and involved examining fragments of data in order to identify the concepts they contained. Each fragment of text was assigned a code. In the current study the researcher chose to analyse text segments of varying lengths rather than rigidly focusing on sentences or lines. This preliminary stage of coding segments led to establishing low-level categories. These categories encompassed a variety of similar concepts that relate to the same incident or phenomena. During this stage many categories were identified. Some initial codes were “in vivo” codes in which the title of the code was taken exactly from the participants’ statements. This served to ensure that the theory developed remained grounded in the data.

An example of Open Coding of part of a transcript is shown in Figure 2. Light blue was coded as “Working as part of a team”. Grey was coded “Getting to the root of a problem” and green was coded “identifying and supporting children’s individual needs”.

Figure 2

“...What helps me? I suppose we work as part of a team. So, it’s very much a team and we, you know, good team work. What happens? Right. Well, first of all you have to identify, um, maybe what’s going on. We’re look, we’re looking for children that are, might be struggling, say for example, and then in our planning meeting we would identify an activity or something we would do the following week to support that child.”

Example of open coding

Figure 3 provides a screen shot of the initial stages of analysis using MAXqda:
3.13.2 Axial Coding

Axial coding was a stage in the data analysis which sought to make links between open codes in order to begin to group together concepts into broad categories, comprised of subcategories facilitating greater abstraction from the data (Corbin & Strauss, 2008). It involved identifying connections between open codes and bringing them together under more abstract and higher order conceptual categories (Corbin & Strauss, 2008). During axial coding the researcher systematically codes around the axis of a category to add depth and to develop links between categories. Axial coding is viewed as leading to an understanding of the central
phenomenon in the data in terms of the contexts, the actions and interactions that give rise to the consequences or outcomes (Robson, 2011). Figure 4 provides a screenshot of the axial codes identified.

For example, the axial code “Integrating personal and professional aspects” was comprised of open codes including “Holding responsibility for children’s emotional well-being”, “Influences of training and professional experience”, “Impact of personal life experience and background” and “Personal attributes, values and beliefs”.

**Figure 4**

![Axial Codes](image)

**Figure 4 MAXqda Screen Axial Coding**
3.13.3 Selective Coding and Grounding of Theory

Selective coding refers to the process of integrating and refining the emergent theory into one central category or (often referred to as a core category) which becomes the centrepiece of the analysis around which categories emerging from the axial coding are integrated. According to Corbin and Strauss (2008) the process of selective coding involves organising the categories around a central explanatory statement that indicates their relationships.

Selective coding theory occurred by integrating the axial codes by hypothesising links between them to generate an overarching category that represented the entire grounded theory and connected the theoretical concepts to produce a theory that explained the experiences of participants. Following the selective coding stage a central category was identified that could explain the relationships between the categories (Corbin & Strauss). This was “Balancing internal and external factors”. For details of the complete coding system refer to Appendix 7 and for details of all stages of analysis refer to Appendix 9.

3.14 Trustworthiness

There is a longstanding debate about whether measures of validity that are used in quantitative research are appropriate for qualitative methodologies (Creswell, 2009; Robson, 2011). The concept of “trustworthiness” was introduced by Guba and Lincoln (1981) as a way of thinking about qualitative research. The authors described four different indicators of trustworthiness that a grounded theory researcher needs to establish. These are: credibility, transferability, dependability and confirmability (Guba & Lincoln, 1981). It is through transparency in the data collection and analysis process, that a researcher is able to
demonstrate trustworthiness as this limits the possibility of researcher bias. The following sections describe how the researcher attempted to establish trustworthiness.

3.14.1 Transparency

Yardley (2008) states that transparency in a qualitative research refers to “how well the reader can see exactly what was done, and why” (p. 250). To achieve this, the researcher has provided a detailed description of the methods used, and in the next chapter will present enough data to clarify how the analytic interpretations emerged. Furthermore, verbatim extracts of the interviews are presented in order to ensure the interpretation of the data is clear (Smith, 2008). The data will be presented in the form of quotations from the semi-structured interviews.

An audit trail of the analysis was kept to aid transparency by recalling all its stages (Yardley, 2008). Memo writing (Corbin & Strauss, 2008) was used by the researcher to develop categories and then used in the writing of the results section. Furthermore, the coding and analysis of the interview transcripts was supported through the use of MAXqda 12 computer package. The use of MAXqda 12 aimed to increase the level of transparency by establishing a process for documentation of the data collected through the stages of analysis and by clearly presenting examples of the coding process and memos. Memo writing also contributed to the audit trail of grounded theory (Strauss & Corbin, 2008).

In order to establish whether the naming of the codes appropriately represented the concepts and with the purpose of enhancing clarity, the researcher asked a fellow trainee to code three interview transcripts during the final stage of analysis (at the axial coding stage). This coding was compared and differences were discussed which resulted in some of the conceptual labels being modified. For example “dealing with ambivalence” was changed for
“managing ambivalent feelings”, “adhering to EYFS principles” was changed to “following EYFS principles”. This process was recorded and reflected in memos such as in the following example:

After being immersed in the data analysis for so long, I felt I needed someone else’s perspective on the conceptual categories I developed, but I also wanted them to remain close to my interpretations. The discussion with a fellow trainee that followed the analysis indicated that we shared similar codes for most categories. However, the process was helpful for improving the clarity of some of my codes.

3.14.2 Reflexivity

Robson (2011) described reflexivity as “an awareness of the ways in which the researcher as an individual with a particular social identity and background has an impact on the research process” (p. 172). It refers to the notion that the research process and outcomes are influenced by the researcher’s assumptions and views (Willig, 2008). In the current research reflexivity was present at all stages of the study. The researcher was mindful of the way in which the researcher’s position, values and preconceptions may have influenced the way the research was conducted and the effect it might have had on the interpretation of results.

To support reflexivity, the researcher used various ways of identifying and eliminating potential researcher bias. This involved keeping a research diary that included a record of views and assumptions throughout the research process. This led the researcher to make explicit her personal value systems and assumptions, and hence enhance the reflexivity of the research process. Furthermore, the use of a constant comparative method in grounded theory allowed the researcher to stay open to new insights during the analysis and consider alternative interpretations (Strauss & Corbin, 2008). The use of memos at every stage of
analysis provided the researcher with a traceable record of interpretations from the first stages of data analysis, which aided reflexivity. Additionally, the process of supervision helped the researcher to reflect upon potential biases and acknowledge some preconceptions at each stage of the research process, particularly as this area of research is closely related to the researcher’s interest and experience.

### 3.15 Ethical Considerations

This research was informed by the British Psychological Society’s “Code of Human Research Ethics” (BPS, 2010) which is based on four ethical principles including:

- Respect
- Competence
- Responsibility
- Integrity

Ethical approval for this research was sought and obtained by the Tavistock Research Ethics Committee in August 2015 (see Appendix 8 for a copy of the researchers ethical approval letter).

#### 3.15.1 Informed Consent

Informed consent was obtained from all participants in the study. This involved all potential participants being sent an information sheet (see Appendix 4), which enabled the participants to make an informed decision based on a clear understanding of the research study (aims, methodology, confidentiality and anonymity).
The participants were asked to sign a consent form, which indicated their agreement to taking part in the study (Appendix 5). The consent forms detailed the participants’ right to withdraw from the research process and information about what would happen with the interview data once collected. However, participants were also informed of the existence of time limitations of data withdrawal, for example, after the commencing the analysis. Participants were told that the results of the research study were going to be fed back to them at the end of the 2015-2016 academic year. Before the interviews took place, the researcher talked through the participants’ information sheet and gave them an opportunity to ask questions. Participants were reminded of their right to withdraw and the time limitations for this. They were also told that they did not have to answer all the questions, and that in the event of any discomfort the interview would stop and the audio recorder would be turned off. They were also informed that the audio recording would be deleted once the transcription was complete.

3.15.2 Anonymity and Data Protection

Following the Data Protection Act (1998) participants’ anonymity and confidentiality were protected by the use of pseudonyms in the transcripts, along with extractions of any data that may have been confidential or gave information about the possible identity of the participants. All data was securely stored, using an encrypted USB and password protected computer. Digital interview recordings were destroyed after the completion of the study.

3.15.3 Protection of Participants

The Code of Human Research Ethics (BPS, 2010) indicates the need for a researcher to be sensitive to the potential risks that a research study can have for participants. One example
of this was the potential distress that could have arisen when participants discussed a sensitive topic such as children’s emotional well-being. In that respect, all participants were informed of their right to decline to answer any questions that produced discomfort and were told that the interviews could stop at any time if they felt distressed. Debriefing was provided at the end of each interview to ensure each participant understood the research fully, were happy for their data to be used and were able to discuss any issues arising from the interview. At the end of the interviews, participants were offered the opportunity to ask questions and seek advice or information. Interviews were scheduled at the convenience of the participants to minimise experiences of disruption to their routines. The interviews were conducted in a quiet and private location chosen by the participants.

3.16 Chapter Summary

This chapter outlined the overall purpose and design of the study alongside a detailed account of the methods employed. It provided a rationale for the critical realist approach to the current study and for the choice of grounded theory as the research methodology. The procedures, trustworthiness issues and ethical considerations were also discussed. Chapter Four will provide the findings from the grounded theory data analysis in detail.
Chapter 4

RESULTS

4.1 Aims

The purpose of the current study was to develop a theoretical understanding of the contexts and mechanisms underlying the promotion of children’s emotional well-being in preschool settings according to the views of early years practitioners. Grounded theory methodology was used to analyse interview data from seven early years practitioners. The study explored how participants understood the concept of emotional well-being and the factors which facilitated and/or hindered the effective promotion of children’s emotional well-being.

The emergent theory proposes that early years practitioners’ experience of promoting children’s emotional well-being can be best understood as an interactive relationship between internal and external influences which is summarized by the overarching central category labelled “Balancing internal and external factors to promote well-being”. Under this central category there are five main conceptual categories labelled “Integrating personal and professional aspects”, “Engaging with parents”, “Providing containment”, “Feeling contained” and “Managing the demands of systems”. Other sub-categories are subsumed under these main conceptual categories.

Internal influences or contexts refer to early years practitioners’ individual values, beliefs and understandings and their role in relation to promoting children’s emotional well-being. Internal influences also shape what participants perceive as barriers and facilitators to the promotion of children’s emotional well-being.
External influences or contexts refer to systemic factors that influence their practice including the local and the national context. These range from the individual setting and school’s approach to well-being including role expectations, to wider systemic aspects such as the context of early years education, UK’s education system and national policies and legislation. Furthermore, wider society and cultural factors are considered as external influences.

The grounded theory “balancing internal and external factors” highlights some of the challenges that participants face in their attempts to promote children’s emotional well-being. Barriers and facilitators to the effective promotion of well-being were perceived as arising from internal and external conditions.

The next section of this chapter provides a detailed examination of the five conceptual categories or axial codes that comprise the emergent theory. In discussing each category, direct quotations will be included in order to illustrate the emergent theory. Table 4.1 provides an outline of the conceptual categories, codes and sub-codes of the grounded theory with an indication of the number of sub-codes endorsed by each category.

<p>| Selective Code: Balancing internal and external factors to promote children’s emotional well-being |
|-----------------------------------------|---------------------------------------------|------------------------------------------|</p>
<table>
<thead>
<tr>
<th>Axial Code</th>
<th>Open Codes</th>
<th>Number of Sub-Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.Integrating personal and professional aspects</td>
<td>Holding responsibility for children’s emotional well-being</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Influences of training and professional experience</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Impact of personal life experience and background</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>Personal attributes, values and beliefs</td>
<td>25</td>
</tr>
<tr>
<td>2. Engaging with parents</td>
<td>Working with parents to support children</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>Barriers engaging with families</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Holding assumptions about families</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>Holding negative views about parent’s parenting abilities</td>
<td>14</td>
</tr>
<tr>
<td>3. Providing containment</td>
<td>Adapting practice to support children’s individual needs</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>Adopting a Key Person’s approach</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Supporting children’s emotional needs</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>Providing an adequate environment to support emotional well-being</td>
<td>12</td>
</tr>
<tr>
<td>4. Feeling contained</td>
<td>Working as a team</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Accessing support from external agencies and other professionals</td>
<td>11</td>
</tr>
<tr>
<td>5. Managing the demands of systems</td>
<td>Following EYFS principles</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Dealing with time constraints</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Feeling unsupported by the Education System</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Lacking training around emotional well-being and mental health of children</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>Facing pressures of meeting educational targets</td>
<td>22</td>
</tr>
</tbody>
</table>

**Description of Axial Codes/Themes, Open Codes and Sub-Codes**

**4.2 Complete grounded theory**

Tables 4.2 to 4.6 contain examples of text segments for important open codes and examples of sub-codes that informed each conceptual category or axial code. A table with examples of text segments will be presented followed by an explanation for each conceptual category, for each of the 5 categories of the grounded theory. Not every sub-code will be included in the tables. For a complete itemisation of the final coding system please refer to Appendix 7.
### 4.2.1 Conceptual Category 1: Integrating personal and professional aspects

#### Table 4.2: Integrating personal and professional aspects

<table>
<thead>
<tr>
<th>Open code</th>
<th>Grounded in data (example of text segments)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Holding responsibility for children’s emotional well-being</strong></td>
<td><strong>Recognising the Importance of well-being as a basis for learning</strong></td>
</tr>
<tr>
<td>“Um, well, er (...), unless a child has emotional well-being, they, there are barriers to learning.” (Participant 2)</td>
<td></td>
</tr>
<tr>
<td>“But I think until, er, there is a good level of emotional well-being in your class or of that, in that child, you always, I think you’ll always struggle a little bit with learning.” (Participant 3)</td>
<td></td>
</tr>
<tr>
<td><strong>Recognising indicators linked with emotional well-being</strong></td>
<td>“Er. I mean, there can be like physical indicators, I suppose, you know. If something’s going really wrong it could be like they’re wetting themselves quite a lot and things like that, um, you know, or they could get very nervous in certain situations, you know, and it, it could be, it manifests themselves and then feeling sick or things like that.” (Participant 3)</td>
</tr>
<tr>
<td>“Happiness. They, they, there’s, um, and all around them. They look happy, they look well, well looked after children. Um. Er. they tend to talk, you know, they’ll come up to you and have a conversation with you. Whereas some of the children, they, a child who is quite shy or maybe feeling sad will not be as, as, you know, will not come and respond as much as a, a well, you know (...), a happy child.” (Participant 6)</td>
<td></td>
</tr>
<tr>
<td><strong>Impact of training, knowledge and professional experience</strong></td>
<td>“Because of training, because of things that I’ve read.” (Participant 2)</td>
</tr>
<tr>
<td>“I suppose, I’ve had, um, experience, you know, years as a head and years as a deputy and, and you know, sort of supported teams through that.” (Participant 1)</td>
<td></td>
</tr>
<tr>
<td><strong>Training knowledge and experience</strong></td>
<td>“Yeah, mainly, er, life experience helps an awful lot, you know?” (Participant 1)</td>
</tr>
<tr>
<td><strong>Impact of personal life experience and background</strong></td>
<td></td>
</tr>
</tbody>
</table>

Number of contributing segments: 101
The promotion of emotional well-being was generally viewed by the majority of the participants both as a professional and a moral commitment. Supporting children’s emotional well-being appears to incorporate early years practitioners’ beliefs about their role, their knowledge and experience, their professional care and a personal interest in children’s well-being. Therefore it comprises both professional and personal aspects which could be seen as complementary. Promoting children’s emotional well-being is associated with job satisfaction, it is congruent with the participants’ role expectations and accords with their moral values and beliefs. The following quote illustrates these points:

*I think their well-being, in all my teaching career and involvement, has shown me how important this is, and that’s one of the reasons why I am in early years because I truly believe that it’s the foundations that are laid that are so important. (…)*
*My own personal views are that emotional well-being is paramount.* (Participant 6)

**Holding responsibility for children’s emotional well-being**

Most participants viewed that the promotion of emotional well-being could not be separated from their professional identity as “educators” which shapes the way in which participants understand their role around supporting emotional well-being, with learning
being the primary goal. All participants commonly viewed that achieving emotional well-being was paramount before learning could take place. The following quote serves to illustrate this point:

*Emotional well-being of young children. Well, for a child to learn, because I’m, I’m coming from an educational teacher perspective (…), a child’s emotional well-being has to be good.* (Participant 1)

The participant here highlights her professional responsibility for promoting children’s emotional well-being, essentially as part of accomplishing the primary aim of educating children. The following extract adds a personal dimension to the promotion of well-being reflecting both aspects of the participant’s role including her professional and personal values:

*Well, I think that when you’re an early year’s teacher, you kind of have that embedded in you to, um, nurture children and with that, you should be naturally supporting their well-being, and for me, that is like them as a whole, like you know (…) that is that child, their well-being.* (Participant 4)

**Impact of training and professional experience**

Most participants asserted that training, professional experiences and acquired knowledge were considered important aspects of understanding children’s emotional well-being and therefore fundamental for supporting their emotional needs. However, only two participants mentioned having received specific training around children’s emotional well-being or mental health related issues. The following quote highlights the importance of the participant’s extensive professional experience for identifying children’s emotional well-being for the participant:

*I’ve been teaching for a long time and because I can see the children’s well-being and emotion myself. That’s (…) it’s through practice, isn’t it, really?* (Participant 6)
The following participant mentioned that training and national guidance have contributed to her understanding of how to support children’s emotional well-being:

*Um, well, as a practitioner, I know that from past training and things like when you look at like ‘every child matters’, um, certain policies that have been put in place, um, that you’re, that we’re, we’re aware of that help support children’s well-being.* (Participant 4)

Defining the concept of emotional well-being was the basis for thinking about ways to promote it for the majority of respondents. Most participants appeared to be able to conceptualize emotional well-being by indicating the absence or the presence of certain observable behaviours and overt emotions. This section illustrates the difficulties in trying to define emotional well-being due to the abstract nature of the concept. The following quotes serve to illustrate these ideas:

*Sometimes you find it hard to explain what it means, you know what it is, um, and what to look for in children when, with their emotional well-being, you know.* (Participant 4)

The participants often associated the concept of children’s emotional well-being with the experience of them being able to feel safe and secure. In their descriptions, respondents implicitly reveal their sense of responsibility towards providing the adequate context to meet those needs. As illustrated by the quote below:

*To me, the concept of children and emotional well-being is (...) anything that makes them feel secure and happy within their environment, to feel relaxed and nurtured and safe. A lot of those things, to me, are what I believe the (...) that sort of underpin children’s well-being.* (Participant 4)
Many participants referred to children’s emotional well-being using abstract concepts such as “happiness”. However, some also referred to more observable aspects such as the ability to form and sustain relationships:

*Emotional well-being in a word..., I would think of a child who is happy, confident, not worried about taking risks, able to interact with adults and children.*

(Participant 5)

Most respondents indicated that the ability to infer internal emotional states from external behavioural signs was an important aspect of their practice, mainly based on professional experience and intuition. An aspect most participants considered fundamental to the promotion of emotional well-being was having the ability to identify overt signs and behaviours associated with emotional states. The following example illustrates this point:

*They need to come in and feel emotionally settled and secure and comfortable, and you can see by their facial expressions, by the way they move. They don’t have to talk all the time so you can see by their faces. You, as a teacher and as a practitioner and as anyone working in early years, needs to be able to read that. Sometimes a child doesn’t need to say a word. If it comes in smiling, if it comes and explores and, and, and shows us that even if it’s not talking, it will show us that they are feeling confident emotionally inside.*

(Participant 6)

Identifying behaviours that might denote the absence of emotional well-being was perceived as a significant aspect for promoting children’s emotional well-being, as exemplified by the following extract:

*If I, I find that if a child’s well-being, emotional well-being isn’t there, they might tend to stick to a particular adult, be withdrawn and won’t maybe actively start or play in games, only if invited into it. They, they won’t sort of go forward and play. They’ll, they’ll be withdrawn a little bit.*

(Participant 3)

It felt particularly important when those signs led to raising concerns about a child, as the extract below illustrates:
If the child was having, um (…) continuous behavioural problems, it might be underpinning something different under, um, like an underlying problem so obviously we may inter-, intervene and try to dig further into that. (Participant 4)

Professional experience was for the majority of the participants the most valuable resource to understanding and supporting children’s emotional needs. However the promotion of emotional well-being appeared to be based on a combination of formal training, professional experience and intuition. For example some participants highlighted the importance of recognising changes in children and others felt the need to “get to the root of a problem” in order to promote well-being. The following quote serves to illustrate these points:

So, I think it’s that ability to step aside from what manifests on the outside to actually thinking about what’s inside and how can you help with that or, or what’s happened to them. So, you can have a bit of explanation in, in your own head, I suppose, to say about what it’s like. (Participant 3)

Impact of personal life experience and background

Several participants mentioned that their personal life experiences and circumstances were contributors to their understanding of children's emotional well-being and therefore helped to facilitate its promotion at work.

Having come across many different aspects of where children settle and seeing many different ways that children settle means that you can draw on that life knowledge to support the children in different situations. (Participant 2)

Being a parent was mentioned by a few participants as an important factor in their understanding and supporting of children's emotional needs as part of their professional role.

I think that, yeah, also being a parent has helped me understand and make sense of children’s emotional well-being and the importance of it. (Participant 4)
Personal attributes, values and beliefs

Most participants mentioned specific personal characteristics and attributes that they perceived as being instrumental to facilitating the promotion of children’s well-being. Some of those attributes were thought to be acquired in response to the demands of their roles such as the “need to be flexible” or “coming down to the child’s level”, whilst other aspects related to their inherent character such as a “natural tendency to care for children” or “being caring”. Several participants mentioned having empathy and being a good listener as important attributes in promoting children’s well-being. The following quotes serve to demonstrate these points:

And I, as a person, um, I think having empathy with children is very important, and also personally I think that in, in Early Years practice and generally in schools. (Participant 5)

Being, I think being approachable, being approachable to a child, making a child feel secure that they can come and talk to you and, and being, sometimes being a good listener. (Participant 7)

Another significant aspect for effectively promoting children’s emotional well-being for some participants was their own well-being, as the following quote demonstrates:

You have to be emotionally well yourself to be able to support others. (Participant 1)
### 4.2.2 Conceptual Category 2: Engaging with parents

#### Table 4.3: Engaging with parents

<table>
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<th>Number of contributing segments : 81</th>
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<tbody>
<tr>
<td><strong>Open code</strong></td>
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<tr>
<td><strong>Working with parents to support children</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Facing barriers engaging with families</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Holding assumptions about families</strong></td>
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<tr>
<td></td>
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<tr>
<td></td>
</tr>
<tr>
<td><strong>Holding negative views about parent’s parenting abilities</strong></td>
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<td></td>
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</tbody>
</table>

*Text segment examples for grounded theory conceptual category 2 - “Engaging with Parents”*
Most participants held that engaging with parents was a key aspect of their role in promoting children’s emotional well-being. In accordance with the Key Person’s role specifications, engaging with families was perceived by the majority of early years practitioners as a key aspect of their everyday practice and paramount in supporting children’s emotional needs. Parents were perceived as potential co-workers in relation to supporting children’s learning and development and particularly significant during the transition from home into pre-school. Some participants expressed many positive aspects of working with parents, while others also highlighted some of the challenges they encountered. The following extracts point to some of the perceived advantages of working with parents to promote well-being:

*I need their help for me to understand their child’s needs because they understand their children (...) more than I do.* (Participant 2)

The above extract reflects the way the participant’s values the knowledge that parents hold about their children and indicates the importance of relying on parents to increase the understanding of children in order to support their needs. However, the same interviewee thinks that some parents can hinder their children’s emotional well-being by not having an understanding of their needs:

*Not understanding children’s needs, the way children develop, um, parents who don’t understand their children’s needs (...).* (Participant 2)

Another participant talks about the importance of sharing information about a child or their family circumstances in order to support their well-being:

*To facilitate that we need the-, we need to know that-, have the information. So working alongside parents is very important.* (Participant 5)
However, engaging with parents was perceived as a barrier for some participants particularly when parents were seen as not wanting to engage. As illustrated in the following quote:

*So, I find that that is, that is a massive barrier when parents don’t want to participate.* (Participant 4)

*Sometimes (...), yeah, I think basically it is that, just a lot of the time is the parents tend to, tend to put up their barriers, because everything else, I think we can sort of put into place.* (Participant 7)

There appears to be certain ambivalence as to whether participants view partnership with parents as a valuable resource to promoting children’s well-being or if they simply understood it as a necessary aspect of their roles. For most participants there were conflicting views around engaging with parents. The parent was seen as a potential co-worker as long as their actions were in accordance with the participants’ views on what is good or adequate parenting. Other times working with parents was perceived as positive when parents were accepting of the help offered or when support was sought by parents themselves. Two participants described the families themselves as potential barriers to the promotion of well-being because problems are perceived to lie within the family and therefore the whole family is in need for support. The accounts below are an example of this:

*Um, also another barrier is, um, is, is families. Some families when, it’s not just children that need support, it’s families as well.* (Participant 4)

The above extract serves to illustrate what participants perceive to be a direct relationship between children’s emotional well-being and their family circumstances, and therefore they assume the responsibility to support families in order to support children’s well-being.
Some participants held assumptions about family’s needs and circumstances, which impacted on the way in which they understood and supported children’s emotional needs. The account below is a further example:

“So, I suppose it’s, its, and a lot of the families are coming from, er, complex, sometimes complex issues around families and children’s behaviour. (Participant 1)

Underlying assumptions about family’s needs led early years practitioners to position themselves in the role of supporting parents, with the views that if parent’s needs are supported, the parent will be more able to support their child’s needs. As illustrated by the following extracts:

“So, er, mummy is quite needy herself so I think the stresses and strains of all that sometimes can, you know, fall back on the children. (Participant 6)

Parent that comes in, possibly with some mental health issues, whatever, and we try to help. (Participant 1)

However it appears as if sometimes it is assumed parents need support even when it has not been requested, or at times even rejected. This suggests that power struggle can exist between parents and early years practitioners, with the latter perceiving themselves to be in a position of having greater understanding of children’s needs and how to support them.

**Facing barriers engaging with families**

Regular communication with parents was seen as a positive factor in promoting children’s emotional well-being. However, several common areas of challenge were identified by participants. These challenges were related to interactions with families of diverse cultural or educational background. Communication with parents was perceived by the majority of the participants as an essential aspect of their role in promoting well-being, but several
participants mentioned factors such as communication differences impacted upon their interactions with parents and children. Communication barriers were often referred to as language differences between the family and the school which often led to misunderstandings, miscommunication and failure to attempt to communicate. As illustrated by the participant’s quote below:

*I’d say with some of the families I work with, the language barrier is definitely, is definitely something because, um, some of my children who might have English as additional, um, as an additional, sorry, English as a second language. Um, some of them obviously English isn’t their first language and they’ve got simple, they understand simple words in English but they couldn’t understand a whole sentence.* (Participant 4)

In spite of the challenges encountered around communicating with parents, most early years practitioners view communication with parents as an essential aspect of promoting children’s emotional well-being. This is mainly achieved through accessing information about home background, changes in family’s circumstances and sharing day to day information. There was a strong emphasis for most participants on accessing information from the home as illustrated by the quote below:

*We also, in this school, we also try and get across to parents, um, that anything that, that happens at home (…), we need to know about.* (Participant 2)

However, this persistent attempt to gain information from the parents appeared to result in them withdrawing from communication and an increased mistrust. Parental mistrust was perceived by many participants as a barrier in their attempts to engage with parents. This is clearly depicted in the account below:

*Sometimes the parents won’t always tell you things, you can tell that the parents are upset, so I’ll often say to a parent, you know, “Is anything, is, is something upsetting you? Has anything happened today or…” um, and they don’t all, some parents will not talk to you.* (Participant 7)
**Holding assumptions about families. Feeling the need to educate parents.**

Several participants discussed how differences in the perceived level of parental education and lack of familiarity with the UK education system posed challenges to parental engagement and therefore to their efforts of supporting children’s emotional well-being. Some respondents mentioned the need to educate parents as well as children as a way of supporting children’s well-being and development. As illustrated by the following quote:

> We’re also finding out how some of our parents are not literate and how they’re finding, they’re struggling with literacy, with, with lots of things like that, and stability, like with having parents that have been told that they might have to leave the country now. So, that’s also causing emotional problems with them and I think that’s sometimes transferring to their children. So, it’s difficult in this setting, particularly in this setting, to support the children and their parents. (Participant 6)

The above extracts appear to indicate that in order to effectively promote children’s emotional well-being, participants believe that it is essential to address and support parents’ emotional and educational needs as part of their roles.

**Holding negative views about parent’s parenting abilities**

There was a perceived lack of parental ability or a different approach to parenting to the one expected by the participants, that was often seen as a challenge to promoting children’s emotional well-being. However, participants did not mention what they understood as “good parenting” as if a common assumption was implicitly shared with the researcher. As represented in the following quote:

> Some of our children, uh, parents have only been taught one way of parenting and that’s not necessarily the right way. (Participant 6)
Others held the belief that some parental approaches were not supportive of children’s well-being which had negative implications for the way children interacted with others at school:

And also um, parents don’t interact enough with their children because, I think it might be to do with space and it might be to do with parents not being experienced, and there’s lots of technology now where small children are using iPhones and different types of technology, watching um, Disney films and playing games. So, they’re not actually interacting. It’s likely that will affect their emotional well-being because they have no-, they’re not interacting enough with anybody. (Participant 5)

### 4.2.3 Conceptual Category 3: Providing Containment

#### Table 4.4: Providing Containment

<table>
<thead>
<tr>
<th>Open code</th>
<th>Examples of Sub-codes</th>
<th>Grounded in data (example of text segments)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adapting practice to support children’s individual needs</td>
<td>“At planning meetings we would identify an activity or something we would do the following week to support that child.” (Participant 1)</td>
<td>“I think first of all, the most important thing is to know your children. All children are individuals. You need to know the child and ensure, if you’re talking about an Early Years practice, to plan activities we know they are going to be able to achieve and that would be suitable for their-, their development at the time.” (Participant 5)</td>
</tr>
<tr>
<td></td>
<td>“Plan that lesson or an activity around their interests.” (Participant 5)</td>
<td></td>
</tr>
<tr>
<td>Adopting a Key Person’s approach</td>
<td>Using a Key Person approach to build close relationships</td>
<td>“You’re the link for, that key person for the adults, sort of parents to come to, but then also, um, it’s also you are championing that child. So, you’ve got a really close relationship with that child.” (Participant 1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Twice a day in the morning and twice in the afternoon the children come into a small group with their key person.” (Participant 4)</td>
</tr>
<tr>
<td></td>
<td>Doing home visits</td>
<td>“We do very good home visits. So, the staff will go out and meet the, the children be, in their home before they start and then transition.” (Participant 1)</td>
</tr>
<tr>
<td>Supporting children’s transition into pre-school</td>
<td>“Early years practitioners do go to visit children in their homes, which is for a short time. It gives a picture of how things may look at home.” (Participant 5)</td>
<td></td>
</tr>
<tr>
<td>Supporting children’s emotional needs</td>
<td>“So, it’s about, a lot about the transition, making that smooth for the child.” (Participant 1)</td>
<td></td>
</tr>
<tr>
<td>Interventions to support emotional well-being</td>
<td>“At first, we, we run key groups. So, we have small groups of children that work with a particular adult.” (Participant 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“We have sort of a wide range of strategies to sort of look at how we can help and promote that. We also do like, things like circle time at least twice a week.” (Participant 3)</td>
<td></td>
</tr>
<tr>
<td>Listening and talking to Children</td>
<td>“Talking about, you know, getting them to talk about their home life.” (Participant 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“Um. Just (...), er, being a good listener I think, listening to them.” (Participant 7)</td>
<td></td>
</tr>
<tr>
<td>“Coming down to the child’s level”</td>
<td>“It’s about coming down to the child’s level, making eye contact with the child.” (Participant 1)</td>
<td></td>
</tr>
<tr>
<td>Providing and adequate environment to support emotional well-being</td>
<td>“Having a setting that is conducive to making children feel safe and comfortable, um, and having, um, the equipment that’s appropriate, space that is appropriate.” (Participant 2)</td>
<td></td>
</tr>
<tr>
<td>Setting clear boundaries and expectations</td>
<td>“So that they know there are rules that keep them safe.” (Participant 5)</td>
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</tbody>
</table>

*Text segment examples for grounded theory conceptual category 3 - “Providing containment”*

The concept of providing containment encompasses the idea of holding a holistic view of children’s needs in terms of their development and their emotional well-being.

**Adapting practice to support children’s individual needs**

All participants reported that an important aspect of their role in promoting children’s emotional well-being, was the need to be responsive to children’s individual needs in terms of their learning and development as well as to their emotional well-being. Getting to know children and adapting practice to meet their individual needs was perceived as an essential aspect of promoting well-being for most participants. As illustrated by the quote below:
I think first of all, the most important thing is to know your children. All children are individuals. You need to know the child and ensure, if you’re talking about an Early Years practice, to plan activities we know they are going to be able to achieve and that would be suitable for their-, their erm, development at the time. (Participant 5)

In this account the dual aspect of the early years practitioners’ roles as educators as well as emotional containers is evidenced when the participant talks about the importance of having an awareness of children’s needs and planning activities with those needs in mind.

Planning was seen as a significant element of their practice and crucial for supporting children’s individual needs by a number of respondents. As illustrated in the fragment below:

*Planning the lessons in different ways, so you need to know the child-, so what their interests are-, so plan that lesson or an activity around their interests.* (Participant 5)

**Adopting a Key Person’s approach**

The majority of participants considered the Key Persons approach to be one of the most significant aspects of early years practitioners’ roles in promoting well-being. A few respondents described some of the features of the Key Persons role in terms such as supporting close attachments between individual children, their families and individual practitioners, as exemplified in the fragment below:

*We have a key people, key person approach. Um. Most, we find most nurseries do that. We do that here and the idea is, behind a key person, is that you make, build a link with the family initially and then you’re, sort of, you’re the link for, that key person for the adults, sort of parents to come to, but then also, um, it’s also you are championing that child. So, you’ve got a really close relationship with that child. You would pick up if that child’s distressed about something or if that child’s not achieving. So, you’re basically championing that child and keeping the assessments and, um (...), and for, as, in it, and that child often builds a very close relationship with you because of that.* (Participant 1)
This extract shows how the caring aspect of the key persons role and the implicit role responsibilities of educating children are interlinked.

Home visits were seen as one of the strategies used by most early years practitioners for promoting children’s emotional well-being and is one of the expectations of the key persons approach. Most respondents shared an understanding that building relationships with families was a good way of promoting children’s well-being. Several respondents mentioned that home visits were essential to facilitate children’s transition into school, while others saw home visits as a way of accessing information of a child’s home context and relationships. The following quote illustrates how the participant views home visits as a way of supporting children’s transition into school:

You, we do home visits so that the child makes a connection and understands that their parents trust us to come into their home. So, they can come into the nursery and they will say, “Oh, you came to my house” and immediately there is a bond there. (Participant 2)

Promoting children’s emotional well-being involved supporting children in their transition into pre-school:

It’s very much about the transition from home, because often nursery, in preschool is, is the first point, point that a child separates from a parent into an establishment. (Participant 2)

Listening and talking to children was perceived by most participants as positive factors in supporting children’s emotional well-being. Additionally, allowing children to share their home experiences was also seen as potential way of protecting them from harm. As in the following extract:
Giving them the opportunity to talk about their home life to us, sometimes they often come and tell you things and we’ll report things that they’ve, you know, that’s happened at home. (Participant 7)

The above segment clearly shows how the emotionally containing elements of their role cannot be divorced from the firmly held professional expectations.

Two participants talked about non-verbal ways of providing containment:

Sometimes words aren’t needed, but just that sort of contact, being able to touch you and hold onto you and just to feel secure maybe and to watch what’s going on and, and be there with an adult that they feel safe with I think is really important. Yeah. (Participant 2)

Providing an adequate environment to support emotional well-being

A number of participants acknowledged the importance of establishing clear rules and expectations as part of promoting emotional well-being. These seemed to be related to the wider setting’s approach to behaviour. Participants commonly indicated the need to provide a safe and secure environment for children and referred to established guidance and policies as important aspects of promoting children’s well-being:

We actually set, I suppose, we have a set of rules the children have to follow, a set of guidelines. (Participant 7)
### 4.2.4 Conceptual Category 4: Feeling Contained

**Table 4.5: Feeling Contained**

<table>
<thead>
<tr>
<th>Open code</th>
<th>Examples of Sub-codes</th>
<th>Grounded in data (example of text segments)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Working as a team</strong></td>
<td><em>Sharing information/concerns</em></td>
<td>“I suppose we work as part of a team. So, it’s very much a team and we, you know, good team work.” (Participant 1)</td>
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<tr>
<td></td>
<td></td>
<td>“Talking to other practitioners. Talking within the group, within our team to make sure that we support children, um.” (Participant 2)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I think having other colleagues there because we can, we look at things, you know, view things in a different way.” (Participant 7)</td>
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<tr>
<td></td>
<td></td>
<td>“Talking to the other practitioners to see if they’ve noticed anything.” (Participant 2)</td>
</tr>
<tr>
<td><strong>Getting support from management</strong></td>
<td></td>
<td>“A clear line management so you can go to line management if, you know, if you’ve got any concerns or you’re struggling with something with a child.” (Participant 1)</td>
</tr>
<tr>
<td><strong>Accessing support from external agencies and other professionals</strong></td>
<td></td>
<td>“I would go and maybe make a referral and ask someone to come and, um, look at this child and see if they can help.” (Participant 4)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“If you need to, to provide agent, you know, other outside agencies, use their support.” (Participant 1)</td>
</tr>
</tbody>
</table>

*Text segment examples for grounded theory conceptual category 4 “Feeling Contained”*

The conceptual category “feeling contained” emanates from the mutual support and understanding that can result from sharing and communicating feelings and concerns with colleagues.

**Working as a team**

Most participants indicated that one of the most salient aspects of team work was the emotional support that it afforded. Talking and sharing concerns and experiences with colleagues were perceived as essential activities for supporting participants’ own emotional
needs, which had direct implications for their practice around promoting children’s emotional well-being. The quote below illustrates the idea:

*I think the team in itself, um, makes us, being a team because we’re working with so many children and the support of the adults as well is very important. Again, so coming in myself and the teams, and if the teams aren’t there then we just sort of say, “That’s fine”, and we support each other. If we have, you know, a problem with one little thing, we try and support each other because we are human as well and there is noth-, you know, we can have bad days as well as good days and that’s so important.* (Participant 6)

The above fragment also reflects how working as a team can help individual practitioners maintain realistic expectations with regards to their role:

*I have team members that have been upset about things that have gone on and we’ve talked about it, talked through it, how we can cope with it and stuff, um (...), and I know it’s hard for people to deal with and, and if we come across (...) Incidences that are very emotional and we’ve all been shocked, then we get together and we talk it through.* (Participant 2)

Sharing painful experiences as a team and discussing together about ways of coping with those experiences are felt as important ways of managing their own well-being.

**Accessing support from external agencies and other professionals**

Another aspect of feeling contained was perceived as the one provided by external agencies such as EPs. However this form of support was felt more at a practical than at an emotional level. External agencies were seen as valuable at times when the participants’ felt they needed the expertise and support from specific professionals when problems were beyond their remit. As illustrated by the following extract:

*If I felt like I wasn’t being successful as a teacher, that’s again, like I said earlier, I would go and maybe make a referral and ask someone to come and, um, look at this child and see if they can help.* (Participant 4)
### 4.2.5 Conceptual category 5: Managing the demands of systems

**Table 4.6: Managing the demands of systems**

<table>
<thead>
<tr>
<th>Number of contributing segments : 91</th>
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<tbody>
<tr>
<td>Open code</td>
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<tr>
<td>-------------------------------------</td>
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<tr>
<td>Following EYFS principles and national guidance</td>
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<td>Dealing with time constraints</td>
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<tr>
<td>Education system failing to address the emotional needs of children</td>
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<td></td>
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<tr>
<td>Emotional Needs of Children</td>
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<tr>
<td>----------------------------</td>
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</tbody>
</table>
| **Lacking training and external support around the emotional needs of children** | - "There’s not enough emphasis around that. It’s sort of the last thing you think of, I think." (Participant 5)  
- "There isn’t enough of that happening, because there is so much emphasis on learning." (Participant 5)  
- "There doesn’t seem to be much training around about it now, you know, or counselling, you know .” (Participant 1) |
| **Experiencing a lack of support from specialist services** | - "We’ve had very little training on it but I think, as a practitioner.” (Participant 6)  
- "There is training, but not enough training that affect the emotional well-being of children. I think we need more training around that.” (Participant 5)  
- "CAMHS. You know. I think that’s, it’s always said, it’s so hard to get contact, not, get any support from CAMHS and when you are struggling with children with really emotional severe, kids that it’s no point in referring because they haven’t got the capacity.” (Participant 1) |
| **Facing pressures of meeting educational targets** | - "The staff are under a lot of pressure to write reports, so they may at times put that pressure onto the children to learn.” (Participant 5)  
- "A lot of time we are trying to hit targets and we’ve got assessments to do, but we, I do try and sort of balance it out so I’m not, you know, take, it’s not taking me away from the children. I do try and put, especially in nursery, we do try and tend to put the children, try and put the children first.” (Participant 7)  
- "It’s pressure from OSTED in schools and primary schools and, you know, putting the pressure down.” (Participant 1)  
- "We do put an awful lot on younger children, expect an awful lot from our, from our, from the younger children.” (Participant 7) |
| **Pressures on children to achieve** | - "I find quite difficult in education at times, and more is expected for the children.” (Participant 6) |
Most participants felt that the Early Years Foundation Stage Framework (EYFS) supported them in working effectively with regards to promoting children’s emotional well-being. This included the need to do regular observations, support for planning and clear guidelines for assessing children’s development against age related expectations. However all participants held the view that their role in promoting emotional well-being was challenged by contextual factors. Systemic pressures and constraints were seen to place limitations on the perceived effectiveness of their practice towards supporting children’s emotional well-being. These include time pressures, staff shortages and an increasing workload. All respondents asserted that the increased focus on meeting educational targets has negative implications for their ability to focus on promoting children’s emotional well-being. Most participants used the expression feeling or being “under pressure” to define their current states. Some participants felt that a lack of training around the emotional needs of children hindered their ability to deal with more complex emotional needs or mental health issues.

Following EYFS Principles

The EYFS framework was perceived by the majority of respondents as a useful resource to support them in working effectively to promote children’s emotional well-being. The EYFS was seen to provide participants with official guidelines that enable them to track and assess individual children’s social and emotional development and compare it against age related expectations. It was also perceived as a helpful tool to plan activities according to children’s developmental stages. This is illustrated by the following extract:

Um, in our setting, we use the earliest foundation stage and, um, that has many factors in it which helps (...) Support children’s emotional well-being. For example, when you look at their personal, social and emotional development, there’s aspects in there that, um, for example, making relationships that would help support their, um, emotional well-being. (Participant 4)
Observations as part of the EYFS assessment requirements were seen as fundamental in addressing concerns and developing interventions as the following quote illustrates:

*If, for example, you’re assessing a child and they are, and they’re (...) Typically very below where they should be then that would be a way of highlighting perhaps maybe some cause for concern or some intervention put in place so, yeah, it can be useful.* (Participant 4)

**Dealing with time constraints**

The majority of participants shared that time constraints impacted on their ability to focus on different aspects of children’s emotional needs and cited this as a barrier for the promotion of children’s well-being. Respondents mentioned staff shortages and an increased workload as possible causes. Other respondents made more general statements indicating that they were restricted by an increasing number of children under their care. The responses reflected the impact of time constraints on their ability to provide individual support for children who might need it most, or discuss concerns with colleagues. The following quotes serve to illustrate this:

*Yes. Time, more time to, more time to talk, I think really, er, within the setting itself. You know, we do have planning meetings, but it, it, it’s very hard within a busy setting to have lots of time to sort of talk about children that you’re worried about.* (Participant 1)

*Like these days with budget cuts and things that are in place, you haven’t got the extra staff to put extra time, so that is something that is a big barrier for me at the moment, yeah.* (Participant 4)

**Feeling that UK’s Education System fails to address the emotional need of children**

The UK’s education system is viewed by many participants as conflicting with their attempts to promote well-being as it was seen as focusing mainly on academic achievement, and neglecting the emotional needs of children. Many participants mentioned the increasing
pressures to assess children and an increased focus on numerical data. Some felt that children’s emotional aspects are not sufficiently addressed, and there is a clear sense of them feeling constantly under pressure to reach targets.

*The emotional side can be lost in it a little bit because all you’re driving for is to get that child to over the mark.* (Participant 3)

The statement below captures the feelings of anger of one of the participants towards a system that is perceived to be failing children’s emotional and mental health needs. Her statement reflects that she feels partly responsible for this:

*Why aren’t we supporting those children? You know, because like mental health is quite a huge issue in this country.* (Participant 1)

The participant further elaborates and says that children’s emotional well-being is often addressed when there is a behaviour issue which might indicate an underlying emotional problem. As illustrated in the quote below:

*I think they don’t do enough in schools around that. I think the time it comes up is when there is an issue with the child to do with behaviour. Then we start digging into finding out what the reasons for the particular behaviours are, an emotional neglect or the child you know-, that might hinder their learning or promote that behaviour. Generally I don’t think there is enough around that. It’s mentioned but…* (Participant 5)

**Facing pressures of meeting educational targets**

Factors external to the early years practitioners were cited as impacting on their ability to effectively promote emotional well-being. Most respondents reported that systems pressures and constraints were seen to place limitations on their ability to promote well-being, on their own emotional well-being and job satisfaction. These pressures include a drive towards reaching academic targets and generating numerical data:
A lot of time we are, we are trying to hit targets and we’ve got assessments to do, but we, I do try and sort of balance it out so I’m not, you know, take, it’s not taking me away from the children. I do try and put, especially in nursery, we do try and tend to put the children, try and put the children first. (Participant 7)

The above extract illustrates the tension that exists between reaching academic targets and the need for spending time with children, which are perceived to be two conflicting aims. The idea of balancing internal and external factors is clearly depicted in this fragment. Similarly, the following interviewee talks about the conflict between assessing children and spending time with them:

I think it’s too much around, um, you know, um, exams and results and data (...) and that’s, that’s, that’s some, you know. Too much focus on that, yes, and even in nursery we have to, we have to decide where a child is on a level, what their next steps is, and yes it’s important, but also it’s also about spending time with, quality time with that child and not constantly assessing that child and moving that child on. (Participant 1)

Lacking knowledge and training around emotional well-being and mental health issues

Some participants believed that their ability to effectively promote children’s emotional well-being was hindered by a lack of training and information about children’s emotional needs and generally around mental health issues. The following quote serves to illustrate the point:

Certainly not enough knowledge or training, I wouldn’t say so>, I think so. (Participant 5)

Similarly, the participant’s response to the interview question below further illustrates the idea:

Interviewer: So, do you think there is not enough knowledge around the emotional needs of children in Early Years? Participant: Absolutely not. (Participant 5)
4.3 Overview of grounded theory

In grounded theory research, the overarching category is at the heart of the theory, it is an abstraction that represents the main theme of the research (Strauss & Corbin, 1998). Grounded theory researchers indicate that the overarching category (also referred to as the central category) demonstrates “analytic power” in its ability to “pull the other categories together to form an explanatory whole” (Strauss & Corbin, 1998, p. 146). In this case the participants’ experience of balancing internal and external factors is the core mechanism by which early years practitioners attempt to effectively promote children’s emotional well-being as part of their role. The main mechanism encompasses five other mechanisms which are represented by the five conceptual categories described earlier, which include: integrating personal and professional aspects, engaging with parents, providing containment and feeling contained and managing the demands of systems. Therefore, for early years practitioners, promoting children’s emotional well-being requires them to balance internal and external factors to their practice, thus for it to be effective, they must integrate personal and professional aspects, engage with parents, provide containment, feel contained and able to manage the pressures and constraints from external systems. However, such processes do not occur incidentally or solely as the result of one element/factor rather as an interaction between all five mechanisms which enable the promotion of children’s emotional well-being. The contexts in which those mechanisms operate can be thought of in terms of external or systemic influences that impact on practice. Contexts as defined by Corbin and Strauss (2008) refer to: ‘Structural conditions that shape the nature of situations, circumstances or problems to which individuals respond by means or/actions/interactions and emotions.’ (p. 87)
4.3.1 Internal influences impacting on the promotion of emotional well-being

The internal influences refer to the early years practitioners’ individual beliefs, values and understanding of their role. Participants generally saw their role in promoting children’s emotional well-being as involving a broad and complex process comprised of many different interrelated aspects, such as assessing and supporting children’s learning and development, engaging and supporting parents and working with others (e.g. colleagues, managers or external agencies).

As part of their role, participants perceived to hold the responsibility of promoting and supporting children’s emotional well-being, mainly because of the direct link with their primary task of educating children.

The participants’ beliefs about what facilitates or hinders the effective promotion of children’s emotional well-being influenced their practice around meeting children’s emotional needs. Drawbacks to the promotion of well-being were perceived to be difficulties engaging with parents and gaining their trust, issues around communication barriers and participants’ assumptions about parental abilities, family circumstances or different cultural backgrounds. However, engaging with parents was seen as a key aspect of their role in supporting children’s emotional well-being and considered to be actively sought.

Participants drew on their personal life experiences, their personal attributes and beliefs and commonly held that they had an intuitive approach to supporting children’s emotional needs. However, some participants view professional experience and training as an important factor in working effectively to support children’s emotional well-being. Regular observations and EYFS guidelines enabled participants to assess aspects of children’s development against age related expectations which helped them to identify concerns and plan appropriate interventions.
Participants felt that a number of factors supported them in working effectively. These included adopting a key person’s approach, which involved establishing close relationships with children and parents and focusing on the needs of individual children and their families.

Participants’ attention to their own emotional well-being was seen as an essential factor for being able to support children’s emotional needs. The containment provided by other team members and colleagues in the form of “talking through” and sharing concerns was perceived to be important for being able to promote children’s emotional well-being. However, these opportunities were rather informal and felt to be threatened by a lack of time or a space to meet with others.

A sense of ambivalence towards the support provided from external agencies was present in the accounts of some of the respondents. External input was felt valuable at times when the needs of a child required the specific professional expertise that could not be managed with the setting’s internal resources. However, there was an apparent sense of frustration with the length of the referral process which deterred some professionals from seeking external services.

### 4.3.2 External influences impacting on the promotion of emotional well-being

External influences determine the contextual conditions that impact on the way early years practitioners promote children’s well-being. These conditions are specific to each setting, but are also related to wider systems such as early years education, wider UK education system, the local authority; and national policy and legislation. These different systems in combination set the conditions for how early years practitioners’ support and promote children’s emotional well-being.
Systemic pressures and role expectations were seen to place limitations on the perceived effectiveness of the early years practitioners’ role in promoting emotional well-being. Many participants identified a need to balance competing tensions between meeting assessment targets and promoting children’s well-being as they were perceived as two conflicting objectives. Pressures included time constraints, reduced staff ratios, a greater focus on assessment and on numerical data; which were seen to be underpinned by the way the current educational system operates.

Another area commonly identified as a barrier to responding effectively to children’s emotional well-being involved a perceived lack of available training and specialized support with regards to children’s emotional needs or mental health related issues.

However, there were external systems that were perceived to facilitate early years practice around promoting well-being and those included the EYFS guidelines and assessment materials, as well as clear safeguarding procedures. The key person’s role was perceived as an important aspect of supporting children’s emotional well-being, particularly through providing support during transition times and establishing regular contact with families. At the level of the setting, the support provided by team members and other colleagues was one of the aspects that supported practitioners both emotionally and practically.

4.4 Chapter Summary

This chapter presented the main conceptual categories that compose the emergent theory “Balancing internal and external factors to promote well-being”. This constitutes the core mechanism by which early years practitioners attempt to effectively promote children’s emotional well-being as part of their role. The main mechanism encompasses five other mechanisms which include: “Integrating personal and professional aspects”, “Engaging with
parents”, “Providing containment”, “Feeling contained” and “Managing the demands of systems”. The contextual influences were also presented with reference to internal and external factors impacting on the promotion of emotional well-being for the participants. Barriers and facilitators were identified amongst the conceptual categories or mechanisms.

The following chapter will review the results in regards to the research questions that guided the study and will be contrasted with the literature in the field while highlighting how the current findings can contribute to the existing research. The practical implications and research limitations will be discussed. In addition the researcher will reflect on the research process and describe the dissemination strategy.
Chapter 5

DISCUSSION

5.1 Overview

This chapter provides a discussion of the findings of the study in relation to the research questions, and will consider how the five conceptual categories of the emergent grounded theory relate to existing research in the field. This will be followed by a consideration of the study’s limitations and implications for future research. Implications for future EP practice will be discussed and the dissemination process will be detailed. Finally, it will present a conclusion and the researcher’s reflections on the research process.

5.2 Revisiting the Literature

The five conceptual categories were used to direct a second stage of the literature search. These included: Integrating personal and professional aspects; Engaging with parents; Providing containment; Feeling contained and Managing the demands of systems. The current research findings were also discussed in relation to the research literature presented in Chapter two. The revisiting of the literature began when the following databases were searched for all conceptual categories:

- PsycINFO
- PsychArticles

All searches used the following inclusion criteria:

- All published literature between 2000 and 2016.
- All peer reviewed literature.
The internet search engines (Google and Google Scholar) were also searched using the same key words used to search the electronic databases. The search was conducted using terms associated with themes covered by each conceptual category. After each search (containing phrases and words from the conceptual categories) was conducted, titles and abstracts were selected on the basis of the inclusion of key words and phrases relating to early years practitioners and pre-school settings. An overarching criteria was applied to all papers selected for review, this included that early years practitioners were either participants in the research or pre-school/early years settings were the included in the studies. The researcher reviewed the papers that included most of the key terms from each conceptual category.

5.3 Research Questions

The aim of the current research was to explore the views of early years practitioners in order to understand the contexts and mechanisms which were perceived to facilitate and/or hinder the promotion of children’s emotional well-being in pre-school settings. The research questions asked:

- According to the views of early years practitioners: What are the contexts and mechanisms which facilitate the promotion of children’s emotional well-being in pre-school settings?
- What are the contexts and mechanisms which hinder early years practitioners’ ability to effectively promote children’s emotional well-being in pre-school settings?

The participants’ experience of balancing internal and external factors was found to be the core mechanism by which early years practitioners attempted to effectively promote
children’s emotional well-being as part of their role. Underlying this main mechanism there are five other interrelated mechanisms at play, which are represented by five conceptual categories including: integrating personal and professional aspects, engaging with parents, providing containment and feeling contained and managing the demands of systems. However, contextual conditions have implications for the way those mechanisms operate and for the outcomes they produce.

The contexts that influence the working of those mechanisms concern both internal and external conditions and circumstances. Internal conditions refer to the participants’ individual emotional resources, personal values and beliefs, cultural background and personal and professional experience.

The external conditions (contexts) refer to the systems around professional practice and involve role expectations, policy and guidance, the pre-school settings’ approach to well-being, the Local Authority (LA) as well as the context of early years education and the wider education system. External context also includes the socio–demographic characteristics of the particular setting, and socially constructed views about “well-being” and parenting practices. The interaction of the internal and external contexts provides the conditions that shape the participants’ approach to promoting emotional well-being.

5.3.1 Conceptual Category One: Integrating personal and professional aspects

The search used the following terms from conceptual category one and associated sub-categories: ‘Early years practitioners and personal and professional awareness of children’s emotional well-being’; ‘early years practitioners and professional role in supporting children’s emotional well-being’; ‘early years practitioners and professionalism’; ‘impact of personal attributes on early years practitioner’s role’; ‘professional training of early years practitioners’;
'impact of personal life experience and background on the early years practitioner’s role’. The searches yielded twenty six results, but no papers were found to be relevant.

The current research findings from conceptual category one suggested that participants in this study have a strong sense of commitment towards children’s emotional well-being, although this was seen as part of the primary task of educating children. Emotional well-being is seen by early years practitioners as a necessary condition for learning, therefore being an educator implies supporting children’s emotional needs as part of their role. This is consistent with research findings presented in the literature review chapter (e.g. Conelly et al., 2008; Spratt et al., 2006) which indicated that teachers perceived that supporting children with emotional needs was a secondary aspect of their roles for which they felt under skilled and unprepared.

A paper entitled *An exploration of role* by Reed (1999) provides an interesting way of looking at educators’ experiences of taking up their role in promoting well-being within the context of their professional identities. Reed (1999) proposes that role is ‘an idea in the mind’ (p. 3) in which expected behaviours and knowledge are integrated internally (in the mind) in preparation for achieving the outcomes defined by external systems or situations. The participants’ role expectations (those internal and determined by the context) involve primarily educating children. The findings suggest that participants’ role responsibilities around promoting children’s well-being are perceived as to underlying the need to successfully achieve the primary task of educating children. As illustrated in the following quotes:

*Emotional well-being of young children. Well, for a child to learn, because I’m coming from an educational, teacher perspective, a child’s emotional well-being has to be good. (...) Just ensuring they are happy, happy and they are ready, ready to learn in school.* (Participant 1)
The clear division between “education” and “emotional well-being”, appears to be something that permeates the current education system. Research studies have highlighted some of the potential risks of focusing on academic learning, above the development of emotional well-being, such as increased behavioural difficulties, school disengagement and higher level of stress amongst staff (Shucksmith, Philip, Spratt, & Watson, 2005; Weare & Gray, 2003).

When participants were asked about what supported them in their role in promoting children’s emotional well-being they predominantly referred to their personal interests, moral values and individual personality aspects. Fewer participants indicated that their professional experience was also an important factor that influenced how effectively they promoted children’s well-being in their practice.

The current findings indicate that early years practitioners’ approach to promoting children’s emotional well-being is primarily based on intuition and their individual background rather than on professional training or theoretical understanding. Similar findings were reported by Page and Elfer’s (2013) research in early years and Ford and Nikapota (2000) who argued that most of teachers’ work supporting children’s emotional needs is based on intuition and individual factors.

An explanation for the prevalence of an intuitive approach towards promoting emotional well-being could be approached by thinking about the challenge of providing a clear definition of emotional well-being. The abstract quality of the concept and a lack of clarity around terminology in policy and legislation are issues that have been identified by Weare and Gray (2003). The authors maintained that there was a lack of clarity and consistency of terminology in the area of emotional well-being in policy and legislation. Weare and Grey
(2003) suggested that this lack of clarity might have implications for the way terminology is conveyed in policy, and on how the information is interpreted and acted upon.

The participants’ conceptualization of emotional well-being included associations with broad subjective emotional states, such as “happiness” and having a “sense of security”, and with the presence of overt behaviours that often denote emotional states.

Promoting emotional well-being was perceived as to having the ability to identify children’s emotional needs, for example by recognising particular physical indicators commonly associated with emotional states (e.g. toileting problems) or externalised behaviours (e.g. aggression or tantrums). However, most participants mentioned being concerned when children presented with signs of internalised behaviours, such as withdrawal, anxiety or social isolation. Interestingly, these findings seem to disagree with those from studies conducted in primary and secondary schools, which indicated that teachers' concerns for children’s emotional problems were significantly higher when associated with externalised behaviours compared to internalised behaviours such as anxiety or depression (Loades & Mastroymannopoulou, 2010) or when a child’s behaviour was perceived not fit with the educational expectations of the school (Spratt et al., 2006). The findings of this study also contrast with the findings from a study in primary schools by Rothi et al. (2008) who indicated that children’s emotional needs in schools tended to be overlooked by teachers if not accompanied by disruptive behaviour.

It is possible to explain this difference by looking at the characteristics of pre-school settings in comparison to schools. These include higher staff ratios, different approaches to teaching and learning and fundamentally, the use of regular individual observations. These are key elements of practice in early years education, established in EYFS (DfE, 2014) framework,
which allow practitioners to closely monitor children’s everyday development and identify aspects of behaviour which might be overlooked in a more traditional classroom environment. Some participants mentioned that their own experiences of parenting supported them in meeting children’s emotional needs in the context of their work.

Training and knowledge were perceived as necessary for being able to support children’s emotional needs effectively. A clear finding from the research was the participants’ lack of knowledge and training around children’s emotional well-being and mental health related issues. These included a limited knowledge of school approaches to emotional well-being, (e.g. only one participant mentioned the Every Child Matters as a guidance she referred to when thinking about children’s well-being) and general theoretical knowledge of the key person’s approach. In general, there was evidence of a lack of reference to current guidance or new legislation regarding mental health or emotional well-being.

Issues regarding a lack of training and knowledge about emotional well-being and mental health for educators have been consistently highlighted in research (e.g. Conelly et al., 2008; Loades & Mastroyanopoulou, 2010; Rothi et al., 2008; Spratt et al., 2006; Weare & Gray, 2003). This is an aspect that needs consideration. The current research supports previous research findings that indicate that national efforts to promote emotional well-being through guidance and policy might not be reflected in schools’ practice (Conelly et al., 2008; Rothi et al., 2008; Spratt et al., 2006).

In the context of pre-school education, three possible reasons for this discrepancy could be suggested; first, there is a lack of current policy and advice which refers specifically to the topic of children’s emotional well-being or mental health in early years education, with the exception of the EYFS guidance, which sets the expectations for children’s personal, social and
emotional development (DfE, 2014). Secondly, all recent publications (DoH, 2015; DfE, 2016) are directed at school leaders, whose role of promoting emotional well-being differs from those who are in contact with the children on a regular basis, and whose priorities might be centred around meeting academic targets and raising educational standards. Lastly, there is a question whether there is a socially constructed belief that early years practitioners, and possibly educators in general, have a “natural tendency” to care for children, and therefore promoting children’s emotional well-being is something that occurs rather intuitively.

5.3.2 Conceptual Category Two: Engaging with parents

The search used the following terms from conceptual category two and sub-categories within it: ‘Early years practitioners and parental engagement’; ‘pre-schools and parental engagement’; ‘pre-school and barriers engaging with parents’; ‘early years practitioners and barriers engaging with parents’. The search yielded thirteen results, two of which were considered relevant.

One of the mechanisms which participants in the current study described as essential in promoting children’s emotional well-being was engaging with parents. The importance of engaging with parents has been consistently highlighted in research (Conelly et al., 2008; Ford & Nikapota, 2000; Sammonds et al., 2005; Weare & Gray, 2003) and the evidence for the success of whole-school approaches to well-being indicates the need for parental involvement as an essential aspect of the programmes’ implementation (Weare & Nind, 2011). The findings of the current research indicate that parental engagement is perceived by participants as involving several elements, these include communicating, sharing information and supporting parents in order to support children.
In the context of early years, the EYFS framework establishes the principles of working with parents through the key person approach (DfE, 2014). Results from the longitudinal study in pre-school settings EEPE study (Sammonds et al., 2005) have demonstrated the significant impact of parents on children’s overall development, including emotional and social aspects. In spite of participants considering parental engagement an essential and a mandatory aspect of their role, as established in the key person’s role specifications (DfE, 2014).

According to participants parental engagement appears to be positive for supporting children’s well-being, but there are some perceived limitations to engaging with parents. For example, communication with parents is described as positive when it involves a two way process characterised by a mutual exchange of information. However, it is perceived as a potential barrier when parents are expected to share information about their family circumstances and they do not, which is often perceived as mistrusting the practitioner. Parental mistrust is perceived as a barrier to engagement which, according to early years practitioners, can negatively affects a child’s emotional well-being. Interestingly, parental mistrust appears to contradict practitioners’ efforts to engage parents. It raises questions around how communication is sought and how this is perceived by parents.

The findings of the current study share similarities with a research study conducted by McMillan (2005). The author set out to explore and compare the meaning of parental involvement for early years practitioners and parents. The results revealed a significant mismatch between parents’ and practitioners’ expectations with regards to their reasons for communicating and around the preferred ways of involvement. McMillan (2005) gathered the views of pre-school staff and parents from 56 pre-school settings in Northern Ireland. Data was collected through questionnaires, interviews and focus groups. McMillan (2005) explored the types of parental involvement that took place in pre-school settings, the perceived barriers...
and advantages, and compared teachers and parents’ views. The author reported that all pre-
school providers recognised the importance of parental involvement for children’s
development, particularly around social and emotional development, but indicated that the
main barriers centred on the conflicting views between parents and teachers. A lack of
agreement on the purpose of involvement and the insufficient clarity around the expectations
of parental collaboration, were some of the challenges for a successful interaction between
parents and teachers. In addition, parents’ reluctance to engage as well as communication
barriers were perceived to hinder the pre-schools’ efforts towards parental involvement.

From the perspective of the participants in the current study, the barriers to parental
involvement were perceived as to mainly result from communication difficulties such as
parents’ limited knowledge of English language, cultural differences or parents’ educational
background. Indirectly, these factors were perceived as hindering the participants’ ability to
effectively promote children’s well-being, due to a lack of mutual understanding between
practitioners and parents. Some participants emphasised the need for parents to fit the
system, with others feeling the need to educate parents. As in the following quote:

> So, we’re, really, we’re teaching not just the child here, we’re teaching parents
> in some cases. There are some cases that we don’t need to do that, but a lot of the
time, I would say a good seventy percent of the parents we’re actually teaching them.
> (Participant 6)

The way communication with parents is achieved for the participants in the current
study is an aspect to be considered. From the participants’ accounts, it seems that the
opportunities for regular communication are rather informal or based on chance, which in the
context of time constraints and staff shortages might be considerably limited. This is quite an
interesting point, considering the importance given to parental involvement for young
children both in research literature and policy (DfE, 2014; Sammonds et al., 2005; Weare & Gray, 2003).

The way parental engagement is interpreted and accomplished by the participants could be explained by looking at individual, as well systemic, influences. It was evident from the participants’ accounts that the barriers to engagement were perceived to be mainly located within the parents and little was mentioned about the systemic conditions that influence parental engagement.

Findings from a review conducted by Desforges and Abouchaar (2003) share similarities with the themes included within the current conceptual category. The authors conducted a comprehensive international literature review including research studies which explored the impact of parental involvement on pupils’ attainment and engagement including early years settings. Desforges and Abouchaar’s (2003) review revealed that the degree of parental involvement was strongly related to the family’s social class: the higher the social class the more the involvement; was strongly related to the level of mothers’ education and diminished by material deprivation, maternal mental ill health, and single parenthood. This is consistent with the perspectives of the participants of the current research study who indicated that the barriers to parental engagement were perceived to be related to parental education, social class and family’s adverse circumstances.

Internal and external influences seem to underlie the participants’ responses when they described barriers to promoting emotional well-being, such as families’ circumstances and parental abilities. Families’ adverse circumstances and a lack of parenting skills were perceived to be detrimental to children’s emotional well-being, and therefore had an impact on the participants’ efforts to promote well-being.
Yeah, it depends on how the parents have been brought up and how they've been educated, and sometimes the economics of these parents, you know, how, how financially, you know, economically stable they are and if they're, you know, struggling. (Participant 7)

The present findings are also consistent with findings from Ford and Nikapota (2000) who found that teachers perceived poor parenting as a barrier to dealing with children with emotional difficulties in school. Similar issues were identified in Conelly et al.'s (2008) study in which teachers perceived that their effectiveness in supporting children's emotional needs was limited by some of the children's family circumstances.

The issues around parental engagement discussed so far could be thought about from an eco-systemic perspective. Bronfenbrenner (1989) eco-systemic theory offers a model which recognises many influences on a child's well-being. According to this model, the child lies at the centre of a set of nested systems, which is frequently represented as a set of concentric circles. The child is located in the family, which is in turn located in a community, the school setting and health and education services. The various levels of these systems structure the child's environment, with the immediate surroundings having a direct influence and distal surroundings having indirect effects. Eco-systemic models provide a useful starting point for thinking about pre-schools as contexts for promoting children's emotional well-being, and could contribute to identify the factors that facilitate or hinder parental engagement. Later in the chapter, implications for EPs will be discussed with reference to the application of systemic approaches to promoting emotional well-being in early years education.

It is possible that various systemic factors at the level of the settings that took part in the current study could impact on parental engagement. For example the settings’ approaches to inclusion, with regards to the way difference and diversity are dealt with; most particularly for those parents who are from diverse cultural backgrounds or have language barriers.
The current findings showed no evidence of the implementation of whole-school approaches to emotional well-being that have been widely recommended in government publications for schools (DfE, 2016; Public Health England, 2015; Weare, 2015). In the light of these findings, the role of the EP seems relevant in order to support the implementation of evidence-based whole-school approaches to promote well-being.

5.3.3 Conceptual Category Three: Providing containment

The search used the following terms from conceptual category three and the sub-categories within it: ‘Early years practitioners understanding of the key person’s role; ‘early years practitioners understanding of emotional containment’; ‘early years practitioner’s role in supporting children’s emotional regulation’; ‘early years practitioners’ understanding of children’s attachment’. The search yielded four results and one paper was considered relevant.

Providing children with a sense of security was one of the mechanisms described by participants as underlying the promotion of children’s well-being. This is consistent with the principles underlying the key person’s role stipulated in the EYFS framework (DfE, 2014) and based on attachment theory (Elfer et al., 2012). The participants associated the idea of promoting children’s emotional well-being with the concept of providing children with a sense of security. One participant mentioned “attachment theory” as a notion that was related to the key person’s role. This is consistent with a study conducted in a nursery setting by Page and Elfer (2013) who found that most early years practitioners in the study had limited knowledge of the principles of attachment theory that underlie the Key Person’s role. Similarly to Page and Elfer’s findings, the participants of the current study perceived their personal history as well as “a natural tendency to care for children” (Participants 2 & 6) to be more influential in
supporting children’s emotional well-being than the theoretical principles on which their roles are based.

Participants mentioned that using the EYFS assessment tools helped them to identify concerns and plan activities to support children’s development. However, intuition, personal background and experience were considered by most participants as one of the most significant factors for promoting children’s well-being.

Aubrey and Ward (2013) conducted a survey and interviewed 46 early years practitioners in pre-schools settings across urban and rural areas of Birmingham. The study aimed at exploring the perceptions of early years practitioners with regards to the impact of policy on practice in relation to dealing with children who presented difficulties in the areas of personal, social and emotional development. The researchers used qualitative methodology to analyse the data. The results indicated that EYFS guidance was used by practitioners as a tool to link children’s behaviour to the age related expectations established within the area of personal, social and emotional development (PSED) of the EYFS, and this was viewed as helpful to plan interventions. This is consistent with the findings of the current study. An element that the participants of the current research perceived to support them in promoting children’s emotional development was the EYFS framework (DfE, 2014). One of the aspects of the EYFS that was perceived as being particularly helpful, referred to the EYFS developmental norms that practitioners use to assess children’s progress in various areas including Personal, Social and Emotional Development (PSED) with the aim of planning interventions and providing support.

Setting clear expectations and a consistent approach around behaviour was also a theme that permeated the participants’ accounts with regards to supporting children’s emotional needs and promoting their well-being. This is similar to the results from Aubrey and
Ward’s (2013) study in which the early years practitioners from the sample, indicated that communicating clear expectations around behaviour was an aspect of importance in supporting and addressing pre-school children’s social, emotional and personal development needs, in response to the aims established in EYFS guidance.

5.3.4 Conceptual Category Four: Feeling contained

The search used the following terms from conceptual category four and the related sub-categories: ‘External support for early years practitioners in the context of pre-school settings’; ‘pre-schools settings and access to support from agencies and external services’; ‘support structures for early years practitioners in the work place’; ‘communication between practitioners in pre-school settings’; ‘emotional support for early years practitioners in the context of pre-school settings’. The search yielded five results and one was paper considered relevant.

The mechanism “feeling contained” highlights the significance of other colleagues and external services in providing either emotional or practical support towards meeting children’s emotional needs. The participants’ accounts highlighted how emotional and/or professional support from others was a factor that enhanced their ability to support children’s emotional well-being.

Research literature in nursery settings by Darnley and Elfer (2007) indicates that a space and time for reflective practice needs to be facilitated and sustained at the level of the organisation, and this is essential for staff to be able to meet the emotional demands of early years work. Similarly, Weare and Gray (2003) indicate, school staff ‘cannot transmit emotional and social competence and wellbeing effectively if their own social needs are not met’ (p. 7), if they do not experience containment within the organisation. Whole-school approaches to
emotional well-being and mental health prevention indicate the need to promote staff well-being by routinely assessing their stress levels and providing services such as counselling, or training on relaxation skills (Weare, 2015). Furthermore, Weare (2010) indicated that school staff, through professional development sessions, could improve their capacity to relate to students’ needs by managing their own emotions.

Participants in the current study revealed that working as a team allowed them to share information and discuss concerns, which was felt as a fundamental aspect of their practice. This is consistent with the findings of a study conducted by Giardino, McNulty and Anderson (2013) who explored the views of 10 early years practitioners in an early years setting with regards to what influenced their practice. The research questions explored three main aspects of their role based on EYFS guidance, these included strategies used for observation; and how was observation linked to assessment and planning. The participants agreed that regular communication and collaboration with colleagues was essential to identify areas for development and fundamental for an effective practice. Sharing observations and planning accordingly were seen as fundamental aspects of addressing children’s individual needs.

In spite of the participants of the current study identifying the need to communicate and collaborate with colleagues, it seemed apparent that the opportunities for sharing information and discussing with other professionals often took place through informal encounters, with the exception for planning meetings, which were described as mainly focused on curriculum based issues. The desire to have regular opportunities for team discussions was something that most participants expressed. The support from colleagues in the form of “talking” was also perceived by participants as a way of looking after their own emotional well-being as well as supporting their professional practice.
In contrast to the support perceived from colleagues and team members, the present findings suggest that the support provided from external services is experienced more at a practical than at an emotional level for most participants. EPs were regarded as professionals whose services were highly valuable particularly at times when a child’s behaviour interrupted their ability to engage in learning. However, early years practitioners stated that they tended to seek support only when they had exhausted all the resources available within their settings. This is consistent with previous research by Conelly et al. (2008), who identified that school teachers tried to contain the majority of the problems within the school, only referring to services when the difficulties were perceived to be severe or persistent.

Previous research has indicated that education services are often requested before mental health services (Ford & Nikapota, 2000). Similarly, other studies (Conelly et al., 2008; Ford & Nikapota, 2000; Rothi et al., 2008) have underlined teachers’ frustration towards specialist services like CAMHS, which have been described as having complicated and lengthy referral processes and long waiting lists. Similar issues were raised by participants in the current study. For example, the participants highlighted the need for a clearer referral process and improved response times.

Most of the research reviewed in the current study, was conducted in the context of primary and secondary schools, which might present a considerable variation compared to the way referrals systems operate in the context of pre-school settings. Conelly et al. (2008) argue that in order to effectively support children and young people’s emotional needs, it is necessary to improve schools’ access to external agencies, which then need to respond in good time. Advice on working with external agencies and referral to CAMHS is indicated in the recent publication Mental Health and Behaviour in Schools (DfE, 2016). Furthermore, the need for professionals to work in collaboration with external services is key to the success of whole-
school approaches to emotional well-being, indicated by Weare and Nind (2011; Weare, 2015).

5.3.5 Conceptual Category Five: Managing the demands of systems

The search used the following terms from conceptual category five and the sub-categories within it: ‘Early years practitioners and their understanding/knowledge of EYFS guidance/principles’; ‘pressures of the early years practitioner’s role’; ‘early years practitioners training on children’s emotional needs’; ‘challenges and conflicts of early years practitioners supporting children’s emotional needs’; ‘challenges of current political and financial landscape on outcomes for children’s emotional well-being in pre-school settings’. The search yielded eighteen results, two of which were considered relevant.

Participants in the present study perceived that dealing with external pressures was an aspect of their role that impacted in their ability to promote children’s well-being. External demands such as following EYFS principles was, however seen as helpful in supporting the early years practitioners’ practice. For example, the need to conduct regular observations and the use of developmental goals for planning and assessment allowed the participants to track children’s progress and accommodate their practice to suit children’s developmental needs. Participants in the current study expressed that the EYFS assessment guidelines allowed them to identify areas for development and plan activities and develop interventions targeted at children with emotional needs.

While the EYFS framework was considered useful for promoting children’s well-being, practitioners discussed their concerns about the target-focused approach to early years education and felt that it restricted their opportunities to effectively support children’s emotional well-being. For most participants the pressure to work towards meeting targets and
the need to conduct regular assessments was perceived to be at the expense of spending quality time with children. This is consistent with findings from Spratt et al. (2008) who identified that educators in primary schools felt under pressure to concentrate on the measurable attainments of children, and as a result their emotional needs were less of a priority. Similarly, a study conducted in early years settings in London by Cottle and Alexander (2012) revealed that early years practitioners in the sample felt under pressure to comply with the Government’s expectations of ‘quality’ which were directly linked to children achieving the targets established by the EYFS. The authors set out to explore the views of early years practitioners about how the concepts of ‘quality’ and ‘success’ outlined in Government policy, were interpreted and applied in the context their everyday practice. The participants of the study were 165 early years practitioners selected from 18 early years settings across 2 London boroughs. The findings revealed that participants experienced a sense of frustration as a result of the outcomes-based agenda, which was perceived as conflicting with their personal values. Similarly to Cottle and Alexandre’s (2012) study, the findings of the current research indicate that the increasing pressures on early years practitioners to assess children as well as the focus on measurable outcomes, conflict with their aims of supporting children’s emotional well-being. Feelings of frustration were evident in some participants’ accounts, and this was clearly reflected in one of the statements:

*I think why in this country, you know, I think that it’s, it might be one of the highest, the children are quite unhappy. So a lot of the surveys are saying and I think it’s because of the pressure of the education system.* (Participant 1)

Most participants in the current study, addressed the challenges arising from time constraints, which were perceived to result from external systems. Time constraints were thought to relate to an increasing workload, staff shortages and financial cuts. These factors
appeared to limit the time that was available to support individual children who might require additional help, including those with emotional needs. This finding is consistent with Page and Elfer’s (2013) study, who reported that staff in nurseries often lacked the time to have consistent interactions with children. Time constraint was also an issue mentioned in the context of participants needing more time and opportunities to discuss cases with other colleagues in order to be able to effectively meet the emotional demands of children. The present findings are also consistent with a study by Giardino et al. (2013) which indicated that time constraints and higher child-staff ratios limited the effectiveness of early years practice in supporting children’s overall development.

A lack of training and information around children’s emotional needs and mental health issues was perceived by the participants as hindering their ability to promote children’s well-being. The lack of staff training on emotional and mental health issues has been consistently highlighted in the literature (Conelly et al., 2008; Ford & Nikapota, 2000; Ofsted, 2005; Rothi et al., 2008).

Several authors agree that there is a need for teachers to take part in formal training sessions in which they learn about children’s emotional needs and be informed about appropriate interventions (Shucksmith et al., 2005; Weare & Gray, 2003). The importance of training has also been highlighted by Loades and Matroyannopoulou’s (2010), who suggest that teachers could benefit from training to improve their ability to identify and respond to students’ emotional disorders.

5.4 Limitations

The critical realist approach underlying this research, indicates that this particular study is bound to the time, socio-political and the specific contexts in which it took place.
Although pre-school settings may be similar in general aspects of their practice, there are clearly divergent approaches to well-being across different settings. Therefore this study is bound by these factors, which makes it difficult to generalise the findings to other contexts.

Further limitations to be considered when interpreting the results are the small sample size and the limited diversity of the group, which are aspects that do not allow for generalisation. The sample was predominantly white British and the majority of participants were female. Future research should consider using a larger sample and wider representative sample across different settings.

Some of the limitations of the current study stem from the limitations that have been generally associated with grounded theory methodology. The original purpose of grounded theory involved an inductive method in which new theory could emerge from the data. However, its critics argue that data analysis is always theoretically informed because it is guided by the questions posed by the researcher. As Dey (1999: 104) states: “Even if we accept the proposition that categories are discovered, what we discover will depend in some degree on what we are looking for”

One of the most significant limitations of grounded theory has been concerned with the issue of reflexivity (Willig, 2013). In that respect, grounded theory has long being criticized for not sufficiently addressing the way in which the researcher’s values and assumptions impact on the analysis and interpretations which shape the entire research process (Willig, 2013). In order to address the question of reflexivity, the researcher’s own reflections, assumptions and experiences throughout the data collection and analysis stages were recorded in a research diary and in memos which were shared and discussed with the researcher’s supervisor. However, it is likely that the researcher’s values, personal experiences
and assumptions might have impacted on the way data was collected, analysed and interpreted.

It is possible that an alternative version of grounded theory proposed by Charmaz (2014) could have addressed more satisfactorily the issue of reflexivity. The social constructivist version of grounded theory (Charmaz, 2006, 2014) attempts to address the shortcomings of grounded theory by recognizing that the categories emerging from the data analysis are constructed by the researcher during the research process, and that the researcher actively constructs a particular understanding of the phenomenon he is studying.

Possibly, an alternative methodology such as Interpretative Phenomenological Analysis methodology would have been appropriate to explore how participants make meaning of their lived experience in accordance with a social constructivist view which considers that there is no reality independent of people’s perceptions (Willig, 2008). Other methodologies such as Thematic Analysis and Discourse Analysis were initially explored, but as previously discussed in Chapter 3, they would not have appropriately addressed the research questions of this research study.

In the current study the process of grounded theory was described transparently and evidenced in an audit trail and many steps were taken to reduce bias in the research as outlined in the methodology chapter. This includes, for example, the choice of questions and the way the findings were interpreted. One of the attempts to protect against researcher bias was to conduct most of the literature review after the data analysis, in accordance to grounded theory methodology.

Another limitation of the study lies in the methodology that only relied on participants accurately reporting their perceptions and beliefs. Participants’ answers may have been given to conform the researcher’s expectations, and not as a true reflection of their experiences and
beliefs. The researcher is aware the role of trainee EP, as well as a researcher might have influenced the responses. This was addressed by developing good rapport, ensuring confidentiality and encouraging participants to provide honest accounts.

Despite the search for negative case analysis examples, as part of the grounded theory analysis (Corbin & Strauss, 2008), the reduction of complex phenomena into simplified theory was based on commonalities of participants’ experiences, might be a limitation.

Furthermore, the theoretical saturation or more accurately, the theoretical sufficiency (Dey, 1999) was achieved after 7 interviews, which represents a small number from which to make claims of relevance to a wider population of early years practitioners.

5.5 Future research

This research has gathered some evidence of the contexts and mechanisms that facilitate and/or hinder the promotion of emotional well-being in pre-school settings. The findings are tentative due to the small sample size, therefore a firm theoretical contribution to the literature could not be established. Further research could:

- Include a further exploration of the barriers to promoting children’s emotional well-being in early years education, using a larger sample across different early years settings.
- Use a case study research to explore how emotional well-being is promoted in an individual setting, taking into account the views of different members of the system.
- Replicate the current study focusing on one individual type of pre-school setting. (Children’s Centres, nurseries or play Groups).
• Explore the views of different professionals separately (teachers, non-qualifies staff, managers) around the barriers and facilitators to the promotion of emotional well-being.

• Explore the views of parents in pre-schools settings about their perceived barriers and facilitators for engagement.

5.6 Dissemination Process

Participants will be invited to attend individual feedback meetings. In addition the presentation of the research findings and recommendations will be part of a Continuing Professional Development session for the team members of the EPS where the researcher is currently in placement.

Opportunities to feedback the research findings to head teachers and leaders in pre-school settings in the borough will be pursued, due to their key role in the direction and development of schools. It will be relevant to undertake a broader dissemination of the findings in order to share with other professionals the insights that this study offered about early years practitioners’ role in relation to children’s emotional well-being. Opportunities to present the findings at mental health conferences and workshops regarding training and developing an awareness of emotional well-being in early years education will also be sought. This thesis will be available in written form at the Tavistock Centre and the EPS. The researcher also wishes to be able to publish this work.
5.7 Implications for EP Practice

This research study highlighted several implications for EPs. The current findings support the need to expand the EP role in early years at different levels. There is also a general consensus within the profession that EPs should play a larger role in supporting educational settings to promote early identification, assessment and intervention (Frederickson, Miller & Cline, 2008).

This research is relevant with respect to the new SEND Code of Practice (DfE & DoH, 2014) and the current government’s drive for early intervention and mental health prevention outlined in recent publications (DfE, 2016; Public Health England, 2015). EPs are ideally placed to support early years settings in bridging the gap between policy, legislation and practice.

The current study provides insight into the views of early years practitioners and highlights key issues for consideration particularly with regards to training on how to identify, assess and respond promptly to children’s emotional and mental health needs (DfE & DoH, 2014; Loades & Mastroypanopoulos, 2010), while also disseminating evidence-based practice in relation to effective work on emotional well-being in schools.

EPs could be involved in supporting early years practitioners to enhance their knowledge and understanding of children’s emotional well-being, in particular through highlighting the potential impact of their roles on children’s emotional development. This could be achieved by EPs delivering training on attachment theory and its practical applications in the context of the key person role.

Most participants identified professional and personal support as a factor that facilitated their role in relation to promoting children’s emotional well-being. EPs could provide those opportunities, for example, through running regular work discussion groups. Work discussion groups could ‘offer one of the most powerful models of learning, training and
development’ (Jackson, 2008, p. 62), providing early years practitioners with the opportunity to reflect and discuss with colleagues the different ways of making their practice more effective for supporting children’s emotional needs.

EPs could also offer early years settings opportunities for regular consultations focused on discussing concerns about individual cases, but also aimed at exploring and understanding the emotional aspects of their work and how this could impact on their interactions with children.

At a systems level, this research has implications for EPs engaging with organisations and enhancing organisational change. The findings of this research highlight the way that EPs could potentially contribute to support organisations such as pre-school settings around mental health and emotional well-being and help to implement policy. EPs could contribute by encouraging staff to reflect on the systemic barriers that impact on the promotion of emotional well-being and support the implementation of whole-school approaches.

Participants identified the referral process to specialist mental health services as one of the factors hindering their role in relation to promoting children’s emotional well-being. This is supported by other research findings that indicate that only a small proportion of children experiencing emotional difficulties receive the specialist support that they need (Children’s Society, 2008). The psychological knowledge and the range of skills that EPs could offer include the capacity to take up a therapeutic role in schools and run interventions to support children with emotional needs and have links with their parents. This could contribute to the provision of early interventions and to the reduction of schools’ referrals to mental health services.

EPs could also facilitate the communication and interactions between parents and early years practitioners, by applying solution-focused approaches in consultation with school
and family. In terms of facilitating parental engagement EPs are well placed to support settings in their commitment towards inclusive practice by challenging stereotypes or discriminatory attitudes and taking a systemic approach while keeping the child at the centre.

In addition EPs have a great understanding of the social and emotional foundations of learning and of the importance of thinking systemically in terms of supporting emotionally healthy environments that increase the likelihood of improved emotional well-being for all members of the system i.e. children, staff and parents. Therefore EPs have a role to play in supporting the implementation of whole-school approaches by working at different system levels.

Finally, possibly a more ambitious goal for EPs, is trying to support the change in paradigm that permeates the UK’s education system in which education is focused primarily on academic achievement. Through our work, EPs could promote or inspire a cultural change in helping educators to understand the link between emotion and cognition and transmit the idea that learning cannot take place without addressing the emotional needs first. As Weare (2000) puts it:

> It is vital that those who seek to promote high academic standards and those who seek to promote mental, emotional and social health realise that they are on the same side, and that social and affective education can support academic learning, not simply take away time from it. (p. 5)

### 5.8 Conclusions and reflections

The current study provides insight into how a small sample of early years practitioners perceive they could promote children’s well-being efficiently, and the factors that influence and limit their practice.
Some of the strengths of the current study are that it offers a picture of the promotion of emotional well-being in a sample of pre-school settings by drawing together many of the findings that were identified by previous research in schools. This research incorporates elements which are particular to the context of pre-school education, which is an area under researched in the UK. Therefore, these findings adds to the understanding of early years practitioners’ experiences of promoting well-being and what are the enablers and barriers that they encounter in practice.

Research studies have demonstrated that the effective promotion of emotional well-being underlies the prevention of mental health problems, supports academic attainment and boosts social and emotional development (Weare & Nind, 2011). The role of schools and educators in the promotion of emotional well-being is clearly emphasised in policy and legislation (e.g. DfE & DoH, 2014; DfE, 2016; Ofsted, 2015).

International research evidence indicated that the most successful approaches to the promotion of emotional well-being and the prevention of mental health difficulties are whole-school programmes that combine a universal approach with targeted interventions (DfE, 2015; Weare & Nind, 2011; Weare, 2015). Current policy and advice highlights the use of these approaches which are supported by research evidence.

Research studies exploring teachers’ role in supporting children’s emotional needs indicated that teachers take their roles in promoting children’s well-being seriously but identify several areas for development. These include the need for training on emotional and mental health issues, improved support for staff, better collaboration between schools and external agencies and the need for clearer referral processes (Conelly et al., 2008; Ford & Nikapota, 2000; Loades & Mastroymannopoulou, 2010; Rothi et al., 2008; Spratt et al., 2008; Weare & Gray, 2003). The impact of families on children’s emotional development was also
highlighted in research (Sammonds et al., 2005) and the need to improve relationships with parents in order to support children was also documented (McMillan, 2005).

In spite of a current government drive to promote well-being and prevent mental health problems within the context of schools, research presented in the current study generally highlighted a mismatch between what is stipulated in policy and what happens in practice.

In the context of early years education, the emotional well-being of children is promoted mainly through the key person’s approach and through following EYFS guidance (DfE, 2014). Research in early years in the UK is generally lacking, particularly in the context of pre-school education. Therefore, the current research provides insights into different elements which are particular to the context of pre-school education. Those elements include closer relationships between children and adults, regular interactions with parents, combined with the additional demands of working with young children. Furthermore, the transient nature of pre-school experience adds another dimension to the support that is required to meet young children’s emotional needs, which includes supporting transition from home into pre-school and later into primary school, with the potential challenges that might arise from children who might not have experienced any previous type of formal education.

The findings presented here suggest that early years practitioners in the current study are committed to children’s well-being mainly as part of their primary role as educators. Promoting well-being effectively requires them to balance internal factors which include their beliefs, feelings and backgrounds; and external factors which include the specific setting’s practices, the wider education system and social and political influences. A combination of internal and external conditions determine how the participants perceive to promote children’s well-being.
The main way the participants promote children’s well-being is through several mechanisms that interact with each other. These include integrating personal and professional aspects, engaging with parents, providing containment and feeling contained, and managing the demands of systems. Different aspects of these mechanisms are perceived to facilitate or hinder their practice.

According to the results of the current study, intuition and personal experience are more influential to promoting well-being than any training or theoretical understanding for the participants in the study. Participants highlighted the importance of personal characteristics that helped them in their practice such as and personality natural tendency to care for children. Working as a team and the support provided from some external services was highlighted as positive. Engaging with parents was quite an ambivalent aspect of their practice which was perceived as helpful when families presented no issues to engage or when they accepted support and a barrier when engagement was limited by factors related to the parents themselves (language, mistrust or disinterest).

Consistent with previous research, several areas for development were highlighted, including the need for training and support for meeting the emotional and mental health needs of children. In addition, the need for opportunities to share concerns and collaborative work was emphasised. Other aspects that were perceived to hinder their practice involved difficulties engaging with parents, the pressures of meeting targets, an increasing workload and time constraints. Working with external agencies was also an area of frustration, and only requested as a last resort. A lack of reflection and systemic thinking was highlighted by the researcher as a potential limitation to inclusive practice and to the effective promotion of well-being.
The researcher attempted to provide several potential explanations for some of the barriers which included a wide range of contextual factors. In terms of external factors, the impact of financial cuts at the level of the LA, the settings’ approach to well-being, the wider education system and socially constructed ideas about emotional well-being and parenting were discussed. The abstract nature of the concept of emotional well-being presented some difficulties in trying to describe ways to promote it. A potential difficulty in implementing policy into practice also relates to the lack of a clear definition of emotional well-being in official documents (Weare, 2003).

Finally, the attempt to balance internal and external factors is undoubtedly an everyday challenge for the early years practitioners of the current study, there is a question as to whether this balance is always achieved and if emotional well-being is effectively promoted across all settings that participated in the study. That question remains unanswered. The current research could contribute to supporting the early years practitioners and pre-school settings in the study to improve their practice by focusing on what helps, and reflecting on the barriers to effectively promoting children’s emotional well-being.

This research highlighted several areas in which EPs could be involved including training, consultation, therapeutic work and a contribution to systemic change. Reference to SEND legislation was also made with respect to EPs supporting the early intervention and assessment of children with SEMH difficulties.

The journey throughout this research study has been emotionally and intellectually challenging. It has changed the way this researcher views her role and has inspired her to pursue her ambitions towards improving her professional practice with regards to children’s emotional well-being at all levels of her work. It has equipped her with theoretical knowledge
in the area of emotional well-being and mental health approaches in schools, and has helped her to understand and empathise with early years practitioners.

Although the researcher used a high level of reflexivity, it is possible that the development, execution and interpretation of the research process will inevitably be somewhat influenced by her experiences and beliefs. The theoretical frameworks used clearly influenced the inferences made through the analysis and the choice of literature. However, most of the findings suggest that the research process allowed the researcher to go beyond her initial assumptions. It was the researcher’s intention to remain curious and open. It is hoped that the transparency of the analysis can reflect the researcher’s attempts to set aside any pre-conceptions to enable new understandings to emerge.
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➢ Sylva, K.; Melhuish, E.; Sammonds, P.; Siraj-Blatchford, I. & Taggart, B. (2004): *The Effective Provision of Pre-school Education (EPPE) project findings from pre-school to end of Key Stage 1* (London, Sure Start)


http://www.youngminds.org.uk/training_services/training_and_consultancy/for_schools/wellbeing/risk_and_resilience
APPENDICES
## Appendix 1

### INCLUSION AND EXCLUSION CRITERIA TABLE

<table>
<thead>
<tr>
<th>Review Question</th>
<th>Search terms</th>
<th>Inclusion Criteria</th>
<th>Exclusion Criteria</th>
</tr>
</thead>
</table>
| How is the role of schools/pre-schools and early years settings in relation to the emotional well-being of children? | • Schools  
• Pre-school  
• Preschool  
• Nursery  
• Early years education  
• Mental-health  
• Emotional well-being  
• Emotional wellbeing  
• Emotional health  
• Social–emotional development | Papers focused on early years and emotional well-being, which might include National Initiatives, guidance or legislation. | Papers focused on specific interventions or initiatives or other than national initiatives or services.  
Papers focused on emotional difficulties or specific mental health problems. |
| Teachers/early years practitioners | • Teachers  
• Early years practitioners educators  
• Early years staff  
• Early years teachers  
• Early years workers educators  
• Nursery nurse  
• Key person  
• Pre-school worker | Papers focus manly upon schools/pre-school and early years settings. | Papers focused on settings other than early years settings or school settings (special schools pupil referral units or colleges of further education). |
| Common Criteria | | Papers focused on teachers and early years practitioners. | Papers focused on other education professionals. |
| | | Papers written in English language | Papers not written in English language |
| | | UK Papers | Non-UK Papers |
| | | Research papers | Papers not based on research studies |
| | | Publication date after year 2000 | Publication date before year 2000 |
### LITERATURE REVIEW TABLES

<table>
<thead>
<tr>
<th>BASICS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>AUTHOR</td>
<td>CONELLY, G.; LOCKHART, E.; WILSON, P.; FURNIVALL, J.; BRYCE G.; BARBOUR, R. &amp; PHIN, L.</td>
</tr>
<tr>
<td>YEAR</td>
<td>2008</td>
</tr>
<tr>
<td>TITLE</td>
<td>Teachers’ responses to the emotional needs of children and young people. Results from the Scottish Needs Assessment Programme.</td>
</tr>
<tr>
<td>JOURNAL</td>
<td>Emotional and Behavioural Difficulties</td>
</tr>
<tr>
<td>VOLUME, ISSUE, PAGES</td>
<td>Vol. 13, N 1, pp. 7-19</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LITERATURE REVIEW</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SUMMARY OF PREVIOUS RESEARCH</td>
<td>Previous research highlighted concerns about the emotional health of children and young people in Scotland and the importance of teachers and schools in promoting emotional health. (Weare, 2000)</td>
</tr>
<tr>
<td>RATIONALE FOR RESEARCH</td>
<td>Second phase of a Scottish Needs Assessment Programme to advise the government on the emotional health of children and young people. To outline the emotional difficulties faced by children and young people in educational settings and describe ways in which educators are responding to those needs. Discuss the experiences of teachers working with other professionals and agencies.</td>
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<table>
<thead>
<tr>
<th>RESEARCH QUESTIONS</th>
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</thead>
<tbody>
<tr>
<td>RESEARCH QUESTIONS</td>
<td>What are the emotional difficulties most commonly faced by CYP in educational settings and how teachers respond to them; What are teacher’s experiences of working with other professionals and agencies.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>METHODOLOGY</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>DATES OF STUDY</td>
<td>2002-2003</td>
</tr>
<tr>
<td>LOCATION</td>
<td>Scotland/32 LEA</td>
</tr>
<tr>
<td>SAMPLE CHARACTERISTICS</td>
<td>603 questionnaires distributed amongst head teachers of different settings (nursery-pre-school, primary, secondary and one special school and one teacher of a school for children with emotional and behavioural difficulties). Responses from a sample of 365 teachers (159 head teachers, 206 teachers) in different settings across LEA. 61 % response rate.</td>
</tr>
<tr>
<td>SAMPLING PROCEDURE &amp; SAMPLE SIZE</td>
<td></td>
</tr>
<tr>
<td>METHOD OF DATA COLLECTION</td>
<td>Questionnaires with 3 open ended questions asking them the “most worrying”, the “most satisfactory” and the “most recent” experience of working with a child with emotional, behavioural and mental health difficulties.</td>
</tr>
<tr>
<td>ANALYSIS USED</td>
<td>Microsoft Access database for quantitative data and QSR N6 for coding analysis and identification of main themes. Data was interpreted including a range of professional working with children, which allowed for different perspectives.</td>
</tr>
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</table>

<table>
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<tr>
<th>RESULTS</th>
<th></th>
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<tbody>
<tr>
<td>SUMMARY OF RESULTS</td>
<td>Many respondents unable to describe a satisfying case, satisfaction was related to good results and cooperation with others (colleagues or parents). Problems were categorised as “other problems” or using diagnostic categories such as ADHD, ASD. Other problems were emotional or behavioural problems ranging from short term to severe psychiatric problems. The teachers perceived that their primary task is a pedagogical one, teaching effectively and meeting demands of fulfilling their educational functions. Challenge of trying to provide an education and dealing with children’s emotional and behavioural difficulties. In pre-school teachers respond to requests to support children’s behaviour at home. Parenting programmes to support behaviour were used. Emotional difficulties were seen as having an adverse effect on children’s ability to do school work. Providing a caring environment and small group work for behaviour difficulties. Importance of</td>
</tr>
</tbody>
</table>
working with parents, providing them with support and help as well as information. Problems that were the most challenging required the support from external agencies, which was considered essential such as Eps, behavioural support staff. Some family circumstances were described as having a detrimental impact on CY, which placed limitations on their ability to effect changes on pupils. Multiagency approach was positive at times when dealing with CYP emotional difficulties. Need for regular communication with parents. Team work with respect to having a consistency of approach amongst staff, and meeting to work out action plans. Lack of time results in difficulties in giving time to individual children in need for support, conflict with their responsibilities to work with many others and perform their primary pedagogical functions. The main source of frustration was the “system” referring to organisational frameworks around service delivery and collaboration work. System that does not adequately meet children’s emotional needs. The systemic sources of frustration relate to delays in accessing assessment or provision, funding difficulties gaps in services and impact of policies. High level of frustration through not being able to provide a service that matches the professionals’ own expectations. Delays in referrals, and poor response times. Lack of training and need for clear guidance around emotional needs. Insufficient funding that impact on staff and resources and training. Lack of specialist support and long waiting lists.

**DISCUSSION**

**AUTHOR’S CONCLUSIONS**

Teachers take seriously their roles as supporters and facilitators of access to specialist services, as well as being educators, and use different strategies to provide help for children and young people and their families. Some of the difficulties seem overwhelming and there are frustrations in trying to provide direct support for children and families of children with emotional and behavioural difficulties and in relation of the help they can access from specialist services.

**RELEVANT POINTS TO PURSUE/FUTURE RESEARCH**

Need for closer study of the ways in which teachers and schools of different types and stages provide direct support and also work directly with other services. Areas for policy development: the experiences of teachers being overwhelmed need to be taken seriously, need more support for CYP with emotional and behavioural difficulties. Teachers need time to provide support and agencies need to have the capacity to respond in time. Teachers need to have better training and access to advice for supporting CYP with emotional and behavioural difficulties and around specific disorders. The effective support will depend on teachers having access to a good support network and collaborative work. Shared understanding between schools and other services. Need for teachers’ frustrations to be addressed. Better communication between schools and other agencies. Understand the obstacles to good communication.

**POINTS OF CRITIQUE**

**STRENGTHS**


**LIMITATIONS**

Questions to teachers were not specified, terminology not clear around how teachers described social, emotional and mental health problems. No opportunities for in depth discussion with staff. Most respondents were head teachers which might not represent the views of staff who deal with issues in the classroom. Use of questionnaire may have limited the amount of information around teacher’s attitudes towards CYP SEMH difficulties.

**BASICS**

**AUTHOR**  
DEARNLEY, K. & ELFER, P.

**YEAR**  
2007

**TITLE**  
Nurseries and emotional well-being. Evaluating and emotionally containing model of professional development.

**JOURNAL**  
International Journal of Research and Development

**VOLUME, ISSUE, PAGES**  
27(3). Pp. 267-279

**LITERATURE REVIEW**

**DEFINITIONS**  
Social Defence/Projection/Containment

**THEORY OR CONCEPTUAL MODELS**  
Attachment theory/Psychoanalytic theory: Containment and Social defence construct.
| **SUMMARY OF PREVIOUS RESEARCH** | Attachment principles in nursery work often not in practice. Children’s emotional well-being facilitated by interactions with adults that are consistent, reliable and sensitive (Meluish, 2004). Key person approach. Evidence of inconsistent adult attention to children in nurseries, failure to implement the key person approach. Difficulties for professional to access CPD. Not understanding the rationale under the key person approach. Child protection policies prevent adults from close physical contact with children. Work into organisational processes from psychoanalytic perspectives indicated that emotionally containing organisations and training can help staff respond to the emotional demands of nursery work. (Hopkins, 1988) |
| **CRITIQUE/GAP IN PREVIOUS RESEARCH** | Authors argue that the significance of many interacting factors that undermine the consistency and intimacy in interactions with children needs further investigation. |
| **RATIONALE FOR RESEARCH** | Evaluation of a professional development programme designed to explore emotional experiences in professional work. Draw attention to underlying aspects of nursery organisations. |
| **RESEARCH QUESTIONS** | | |

| **RESEARCH QUESTIONS** | What are the necessary elements to facilitate an emotionally containing CPD process? How would that process be experienced by participants? How would participants experience the effectiveness of this model in strengthening practice? |
| **METHODOLOGY** | | |

| **DATES OF STUDY** | 2005/2006 |
| **CHARACTERISTICS OF POPULATION** | 12 Head teachers and nursery staff |
| **SAMPLING PROCEDURE & SAMPLE SIZE** | Invited by early years development officer at LEA, voluntary participation |
| **METHOD OF DATA COLLECTION** | Action research methodology, interviews and observations, written evaluations |
| **ANALYSIS USED** | Grounded theory |

| **RESULTS** | | |

| **DESCRIPTION OF INTERVENTION** | Phase 1 Taught topics and discussion. Phase 2 Working in pairs of head teachers and own staff using the CPD model and evaluation meetings. |
| **SUMMARY OF RESULTS** | Phase 1: Defensiveness, preoccupation with roles and planning. CPD Evaluated positively. CPD provided opportunities to discuss different points of view. Explored links between staff own experiences and interactions with children. Group reported increase attention to children who are quiet and towards non-verbal behaviours of children. New depth of reflection re attachment issues. Increased willingness to share experiences. Increased empathy for parents. Phase 2: CPD greater impact on their work than other CPD. Better team relationships, sharing and tolerance of different ideas. Clear focus on child’s perspective to a lesser extent. Negative: having to sit for a long time, thinking of own childhood experiences and impact on work, challenges of speaking in group. CPD needs to respond to particular characteristics: number of trainers, time to be established, boundaries (time, confidentiality), supervision for trainers. |
| **DISCUSSION** | | |

| **AUTHOR’S CONCLUSIONS** | Need to evaluate methods of CPD, Psychoanalytic approach into group processes offers such method. The research highlighted the emotional complexity of nursery work and the intense demands of staff. Provision for a reflective space should be built into institutional structures. Needs commitment from senior management. Needs to be systematic and ongoing practice. Allocation of time and resources. Allow reflection of staff individual feelings evoked by the work. Staff need to see reflective practice as a legitimately and necessary aspect of their work. |
| **POINTS OF CRITIQUE** | | |

| **STRENGTHS** | Clear aims and purpose, clearly identified theoretical perspectives and literature review is included. Insights into the emotional impact of nursery work and the importance of a reflective space for staff. |
| **LIMITATIONS** | The methodology is mentioned but interview questions are not stated and there is not sufficient data to corroborate if the findings are reflective of data. Limitations of sample which was only of head teachers which might not represent the views of staff who deal with children on an everyday basis. Sample is also voluntary and might have only included people who were interested in the topic. The second phase of the study included head teachers working on pairs with staff members, there is no indication of participant selection procedures, which might have biased results of evaluation. |
**LITERATURE REVIEW**

**THEORY OR CONCEPTUAL MODELS**  
Not literature review specified, but mentions some research in the field.

**SUMMARY OF PREVIOUS RESEARCH**  
Overview of previous research: Schools as a point of intervention for mental health services, but services capacity is limited and need the schools to meet the emotional needs of children. Mental Health Foundation, 1999.

**RATIONALE FOR RESEARCH**  
Improve an understanding of teacher’s experiences of CAMHS in order to improve collaboration. Teachers overwhelmed by behaviour problems.

**RESEARCH QUESTIONS**  
Desirable and undesirable attributes and how can they be fostered or encouraged. How they identify and deal with a child with behavioural problems. Sources of advice and experience of those services and type of problems that they would refer.

**METHODOLOGY**  
**DATES OF STUDY**  
Not specified

**LOCATION**  
Not specified

**CHARACTERISTICS OF POPULATION**  
Teachers of 9-11 year old school children, 21-61 years old, 3 years median experience of teaching.

**SAMPLING PROCEDURE & SAMPLE SIZE**  
28 primary schools in LA were contacted, 11 schools agreed to participate. 25 volunteers agreed to participate.

**METHOD OF DATA COLLECTION**  

**ANALYSIS USED**  
Qualitative. Framework model of quantitative analysis (Ritchie & Spencer) to analyse themes to apply to raw data. Not mention of philosophical approach.

**RESULTS**

**SUMMARY OF RESULTS**  
Attributes: Teachers saw themselves as role models, used a combination of clear rewards and sanctions. Teachers’ attitudes towards children’s emotions were perceived to be influenced by their own upbringing and their professional experience whereas training and environment were viewed as less influential. Difficult relationships with parents was commonly seen as a barrier to promoting children’s behaviour. Lack of support from parents and poor parenting as barriers to managing children with emotional and behavioural difficulties. External agencies as CAMHS, were viewed as slow in their response and poor communication.

**DISCUSSION**

**AUTHOR’S CONCLUSIONS**  
Teacher contained the majority of problems within the school, referring only when difficulties persist or are severe. Teachers use education based services before recurring to CAMHS. Frustration with services. Confidentiality issues when school and CAMHS are joint. CAMHS services need to explore how to promote collaboration and communication.

**POINTS OF CRITIQUE**

**STRENGTHS**  
Suitable sample, inter–rater check 60% increased validity. Results are clearly presented. The teacher’s answers are described and used percentages and fractions to represent the frequency of responses in comparison to the whole group of participants. Used tables to present findings, which makes the reading easier. The purpose of the study was clearly stated. Implications were made explicit. Emphasis on the role of teachers in mental health promotion. Provides advice for CAMHS (highlights the need for better communication and rapid provision).

**LIMITATIONS**  
Sample some limitations as participants were volunteers (not representative). Ethical considerations not discussed.
### SUMMARY OF PREVIOUS RESEARCH
Data of prevalence of mental health disorders in children and young people. Increase in likelihood of academic failure, poor behaviour and exclusion from school (Rothi & Leavay, 2006), problems in adulthood. Minorities do not always seek help for their children for cultural or religious beliefs. Teacher’s role in policy and legislation is outlined.

### CRITIQUE/GAP IN PREVIOUS RESEARCH
Literature on teacher’s role in recognising and seeking help for pupils is limited. Rothi & Best (2008) found that teachers often unable to identify MH problems and confused terminology and concerned about not having specific training. Help seeking is higher for externalising behaviours.

### RATIONALE FOR RESEARCH
Unmet needs with respect of children’s mental health. Need to improve identification and help seeking action. Teachers have a potential role for identifying and seeking help for children with MH problems. Not clear if they are equipped with knowledge and skills to fulfil their TIER 1 role.

### RESEARCH QUESTIONS
Can teachers distinguish between children presenting symptoms of the same disorder at different levels of severity? Are teachers more concerned with a child presenting symptoms of a behavioural disorders compared to an emotional disorder? A number of factors that can predict the teachers’ accurate recognition of a mental health disorder.

### METHODOLOGY

<table>
<thead>
<tr>
<th>DATES OF STUDY</th>
<th>Not specified</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOCATION</td>
<td>Not Specified</td>
</tr>
<tr>
<td>SAMPLE CHARACTERISTICS, SAMPLING PROCEDURE &amp; SAMPLE SIZE</td>
<td>100 primary schools in Cambridgeshire randomly selected, 14 schools agreed to participate. 113 teachers participated.</td>
</tr>
<tr>
<td>METHOD OF DATA COLLECTION</td>
<td>Quantitative, cross sectional design was used. A pen and paper questionnaire was designed which had a series of vignettes and closed and open questions. The vignettes were based on previous measures (Day, 2002; Stein, Christie, Hunt, Dabney &amp; Wolpert, 2001). The disorders that were selected (Oppositional Defiant Disorder and Separation Anxiety Disorder) were based on disorders that teachers are likely to experience in their classrooms. The measure was reviewed by several clinical psychologists, and then piloted in a sample of trainee clinical psychologists to ensure face and validity.</td>
</tr>
<tr>
<td>ANALYSIS USED</td>
<td>The Wilcoxon test was used to explore differences in a teacher’s degree of concern for a child’s symptoms of behavioural disorders in comparison to symptoms of emotional disorders. Finally, the authors used binary logistic regression to establish whether a number of factors predicted teachers’ accurate recognition of the presence of a mental health problem. The authors mentioned, but do not describe the tests used to analyse the data.</td>
</tr>
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</table>

### RESULTS
Teachers rating of problem severity were greater for a vignette of a child presenting with clinical symptoms compared with sub-clinical symptoms. Teachers were able to distinguish problem severity from a common behavioural disorder and a common emotional disorder in childhood. Teachers show more concern for a child with clinical symptom of an emotional disorder than a behavioural disorder.

### DISCUSSION
Teachers often seek help when children with a behavioural disorder as compared to an emotional disorder. Consistent with Mental Health Foundation (2008) that anxiety and depression symptoms might be neglected. Or that the context of the classroom that makes symptoms easier to identify and they are more disruptive to the class as a whole (Rothi et al., 2008).

### AUTHOR’S CONCLUSIONS
Teachers in the study appeared more concerned about children displaying behavioural disorders than emotional disorders. Teachers could benefit from further training in terms of their ability to identify and act upon children’s mental health problems early, in order to minimise future interventions.

### RELEVANT POINTS TO PURSUE/FUTURE RESEARCH
A study to compare these results with those of other educational professionals in Tier 1.

### POINTS OF CRITIQUE
Aims of the study made explicit. Presented an overview of the research context. Exploration of the role of the teacher relevant to the research question. The results are clearly presented according to the research questions. The authors used tables which support the understanding. The authors identified some implications of the study, such as the need to offer teachers training in terms of their ability to identify and respond to children’s mental health needs. In the discussion the authors presented their results linked with relevant literature.
LIMITATIONS

Ethical consideration not discussed. The authors mentioned, but do not describe the tests used to analyse the data. They did not make explicit the reasons why they chose those tests and not others. The generalizability of the findings was constrained by the methodology (e.g. the schools that decided to participate may represent a biased sample, the sample was constrained by a small geographical area, and the questionnaire was not standardised). Responses to vignettes might differ from responses in a real setting. (limited ecological validity).

**BASICS**

**AUTHOR**
McMILLAN, D.

**YEAR**
2005

**TITLE**
Close Encounters: Issues in Pre-School Parental Involvement in Northern Ireland

**JOURNAL**
Child Care In Practice

**VOLUME, ISSUE, PAGES**
11 (2) pp. 119-134

**LITERATURE REVIEW**

**DEFINITIONS**
Parental Involvement: A working relationship that is characterised by a shared sense of purpose, mutual respect and the willingness to negotiate (Wolfendale, 1989, p. 5).

**THEORY OR CONCEPTUAL MODELS**
Parental Involvement is promoted as part of government initiative.

**SUMMARY OF PREVIOUS RESEARCH**
Historical overview of parental involvement in the pre-school setting, importance of parents involvement. Parents rights and responsibilities. Levels of involvement. Barriers to involvement. Partnership is essential for educational success (Moyles, 1989).

**RATIONALE FOR RESEARCH**
To examine the definition, level and type of parental involvement that exists in nursery schools, nursery classes and playgroups in N. Ireland. To focus on the reasons for involvement, with perceived problems and advantages. To compare parental and professional viewpoints to ascertain whether definitions, expectations and perceptions match. To critically analyse the findings of study within the context of the literature.

**RESEARCH QUESTIONS**

**RESEARCH QUESTIONS**
What is the definition, level and types of parental involvement in pre-school settings? What are the reasons for involvement and the perceived problems/advantages? Compare parents/practitioners views.

**METHODOLOGY**

**DATES OF STUDY**
Not specified

**LOCATION**
Northern Ireland

**CHARACTERISTICS OF POPULATION**
Pre-school providers and parents of pre-school children

**SAMPLING PROCEDURE & SAMPLE SIZE**
Equal number of pre-schools selected private and state funded settings. Total of 56 settings.

**METHOD OF DATA COLLECTION**
Questionnaires, interviews and focus groups.

**ANALYSIS USED**

**RESULTS**

**SUMMARY OF RESULTS**
All providers recognised the importance of parental involvement for child sense of security, self-confidence, settling in understanding their child better and their own self-esteem by attending courses for parents. Current practice: parents role is more observational than actively participating in most settings. Main communication through open door approach (staff available at the beginning and end of day), but parents less keen on this informal approach. Defining how parents should be involved, more as supporters than policy makers. Providers value parents as supplying info about their children, parents did not. Providers prefer to select on which activities parents are involved, rather than open. Lack of training in how to manage involvement (lack of trust and mutual respect). Providers felt that parental involvement brings benefits to parents with less perceived benefits to the children. Parents and teachers differ in their reasons for communicating. Parents felt no meaningful communication happened. Some parents not wanting to be involved.

**DISCUSSION**

**RESULTS CONSISTENT WITH LITERATURE**
Consistent with some of the current research findings.

**AUTHOR’S CONCLUSIONS**
Not enough meaningful communication opportunities. If communication is to be improved there should be opportunities to discuss the reasons for the lack of communication. (Holden, Huges & Desforges, 1994, p. 64) said “both schools and government have assumed they know what parents want and have assumed they provide
it". Some providers feel that they know what parents want because they are parents. More questionnaires, discussion groups and consultations should be used to improve communication. Evidence of high level of commitment from EYP towards parental involvement, however lack of professional training. Key to parental involvement is having professionally trained staff, management equally committed to partnership with parents. The most difficult challenge for all staff (David, 1990, p. 128) is their reluctance to give up their position of power, from those who opposed to parental involvement often feel threatened and lacking self-confidence. Successful settings had a clear policy on parental engagement and translated policy into practice, embedded in the ethos rather than single events.

### RELEVANT POINTS TO PURSUE/FUTURE RESEARCH
Evaluate programmes for improving communication with parents

### POINTS OF CRITIQUE

#### STRENGTHS
Clear statement of aims and purpose. Background literature described. Clarity from displaying results in tables. Used a mixed method design to gather information. Provides some recommendations to improve practice.

#### LIMITATIONS
It does not specify the number of participants that took part in the study at any stage. Does not specify how participants were selected. Not description of status and qualifications of participants in each setting, whether they were managers or support staff. (might have different views). Not specified how parents were selected, if was voluntary maybe those who already participate (sample bias). Method of analysis of qualitative data is not specified.

### BASICS

| AUTHOR | PAGE, J. & ELFER, P. |
| YEAR | 2013 |
| TITLE | The emotional complexity of attachment interactions in nursery |
| JOURNAL | European Early Childhood Education Research Journal |
| VOLUME, ISSUE, PAGES | Volume 21, n 4 (553-567) |

### LITERATURE REVIEW

#### DEFINITIONS
Attachment based pedagogy, DCFS, 2008

#### THEORY OR CONCEPTUAL MODELS
Attachment, key person approach, professional love, social defence system.

#### SUMMARY OF PREVIOUS RESEARCH
Some evidence of failure of approach, eppe project. Complexity of physical safety on one member of staff (Elfer, 2008) anxiety about physical contact with children, children over-demanding and possessive, tension with parents, losses from separation. Page 2008.

#### CRITIQUE/GAP IN PREVIOUS RESEARCH
Personal dimension of professional work is not addressed in training and professional development.

#### RATIONALE FOR RESEARCH
Explore the complexities of professional role in attachment based pedagogy.

### RESEARCH QUESTIONS

#### RESEARCH QUESTIONS
What are the practitioners “understanding of attachment in nurseries? How do practitioners form attachments with children and families? How does this attachment translate into practice?

### METHODOLOGY

| LOCATION | UK, urban region |
| CHARACTERISTICS OF POPULATION | Case study involving staff in a children’ centre |
| SAMPLING PROCEDURE & SAMPLE SIZE | 5 participants: manager, room leader, toddler room leader, baby room practitioner, deputy head of centre. |
| METHOD OF DATA COLLECTION | Individual interviews, focus group with all participants, practitioners’ diaries |
| ANALYSIS USED | Grounded theory |

### RESULTS

#### SUMMARY OF RESULTS
A mainly intuitive approach to attachment based pedagogy. Attachment comes “naturally”, or as a belief, facilitation transition and easing separation. Attachment was referred to as family attachment or family interactions. Children are held in mind. Providing a sense of security for children. Establishing trusting relationships with parents. Evidence of the difficulties of consistent interactions, reliable and sensitive due to staff hours of work, no spare capacity (parents requests) staff levels at minimum. Fear of emotional exhaustion from demands of the work. Lack of support from management/no
supervision. Lack of knowledge of key person role. Diaries showed accounts of staff feeling overwhelmed and isolated. Staff showed professionalism. Key person approach failed in practice at times. Manager lacked skills and training to support staff.

DISCUSSION

RESULTS CONSISTENT WITH LITERATURE
Previous research on teachers and emotional well-being, lacking skills knowledge, ofsted report, underdeveloped key person approach.

AUTHOR’S CONCLUSIONS
Much of the work comes from personal experience and personality, spontaneous warmth and empathy. Difficulties providing sustained and thoughtful attention to individual children in line with the key person approach. Staff’s family background has implications on the way attachment is understood and translated into practice, difficult to agree on. Status difference = tension. Insufficient attention has been paid to organisational and emotional complexities of the key personal approach.

RELEVANT POINTS TO PURSUE/FUTURE RESEARCH
Discussion about attachment needs to be undertaken in an open way facilitated by managers, need for critical reflection.

POINTS OF CRITIQUE

STRENGTHS
In depth case study, contributes to the understanding of emotional life of nursery settings.

LIMITATIONS
The findings relate to a single setting, there were manifested tensions between staff members and that could have had implications for the information gathered through the focus group study. There is limited information about what information was considered relevant from the participants’ diaries.

LITERATURE REVIEW

THEORY OR CONCEPTUAL MODELS
Role of teachers in policy and legislation Tier 1 professionals. Relation with inclusion policies. SEN guidance to identify children with SEBD not for children with SEMH difficulties. Defining mental health as Mental Health Foundation Schools’ role in promotion and prevention of MH.

SUMMARY OF PREVIOUS RESEARCH
Teachers unable to provide a definition of EBD but they can understand the symptoms outlined by DfEE (1994): age inappropriate behaviour, behaviour which interferes with learning, difficulties with social interactions. Rise in mh difficulties and long waiting lists for specialist services. Rise on exclusions. Tension between inclusion policy and academic targets. Exclusions to get rid of problem or to access services. Teacher training insufficient to identify children with mh needs. Most of the training is on management of behaviour, but no dealing with underlying causes. Quiet children with underlying issues get overlooked. Inclusion policy has added pressures on teachers who report to be ill equipped. Schools deal with mental health only when it is a direct barrier for learning.

CRITIQUE/GAP IN PREVIOUS RESEARCH
Ofsted (2005): training for staff on MH was found to be inadequate in ¾ of schools and multiagency working was unsatisfactory in ¼ of schools.

RATIONALE FOR RESEARCH
Explore teachers’ ability to identify pupils with mental health problems rather than SEBD and acknowledge an overlap between these group as children with SEBD are likely to experience MH difficulties. Worrying data: prevalence, length of referral and higher rate of exclusions. Examine the self-perceptions and experiences of school teachers regarding their perceived duty and competency in recognition and management of pupils with mental health problems.

RESEARCH QUESTIONS
To what extent do teachers feel that it is their responsibility to identify pupils with mental health problems? Do they believe they have the necessary training and skills to effectively perform this responsibility?

METHODOLOGY

DATES OF STUDY
Not specified

LOCATION
England

CHARACTERISTICS OF POPULATION
Teachers from different schools in England (Primary, secondary, special schools and nursery), 3 head teachers and 4 deputy, Support staff.

SAMPLING PROCEDURE & SAMPLE SIZE
19 females and 11 male teachers
<table>
<thead>
<tr>
<th>METHOD OF DATA COLLECTION</th>
<th>Semi structured interviews</th>
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<tbody>
<tr>
<td>ANALYSIS USED</td>
<td>Thematic analysis, using specific software</td>
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**RESULTS**

<table>
<thead>
<tr>
<th>SUMMARY OF RESULTS</th>
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<tr>
<td>4 main themes: Perceptions related to tier 1 responsibilities: teachers recognise responsibility for MH of their children as part of their role of educating children. Teachers felt inadequately supported to recognise mental health problems and incompetent. Lack of policy or strategies at the level of the school beyond punishment. Lack of training to support inclusion of children with MH needs. Mental-health related training: Need for mental health training, would appreciate INSET training as PGCE would be difficult to fit any more content (on early recognition). Knowledge of resources and strategies and raising concerns. Need for expert advice on recognition and sources of support, referral agencies and procedures how to manage CYP with MH issues in the classroom. Working collaboratively. Language and discourse. BSED was preferred language instead of mental health (more educational language) avoid stigma, not feeling experts. The ambiguity about the term mental health was salient. Difficulties distinguishing between SEBD and mental health. Recognise children with mental ill health. Teachers identify children using a set of indicators: rule following, social interactions, and behaviour that deviates from others or developmental norm. Tendency to make normative assessment of behaviour to identify children who might potentially have problems. But most commonly used intuition and their experience. Reliance on personal experience. Knowing children and changes in behaviour to reveal an underlying problem. Concerns about internalising problems may be overlooked.</td>
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**DISCUSSION**

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<thead>
<tr>
<th>AUTHOR’S CONCLUSIONS</th>
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<tr>
<td>Teachers have a duty of care but at the same time they are concerned by a perceived lack of preparation and support to assume the responsibilities of Tier 1 role. The concern is motivated by their demands of teaching and pedagogic emphasis, which can lead to identifying a CYP with mental health problems only when this affects academic performance. Concerns re unmet mental health needs. Teachers overreliance on experience and intuition to assess normal behaviour can be problematic as social norms are fluid and contextual and likely to change overtime. Newly qualified teachers might be at a disadvantage due to limited work experience and use developmental norms. Inconsistent and unsystematic manner in which identification can occur. Without training and guidance as well as systemic factors and procedures identification is based on chance, motivation knowledge of individual in the school environment. Teachers were not always able to articulate or identify specifically what concerns them about a pupil’s they tend to use multiple indicators. Behavioural observations, assessment of academic progression and difficulties with social interactions against age appropriate targets. Teachers feel they lost faith in the system, high demands, feeling untrained raising educational standards and time constraints which decline their pastoral role. These coupled with Tier 1 responsibilities have the potential to overburden teachers particularly in settings where there is high level of need. Teachers are more concerned with externalising behaviour and are disruptive to the learning environment. Significant changes, lack of progress and ability to relate. Teachers refer to the need for expert advice, and to be able to know when and how to refer to specialist. Teachers felt able to identify problems but not if there were mental health or behavioural or distress. Teachers refer to the need for training in mental health related skills (identifications, support and referral) INSET.</td>
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<table>
<thead>
<tr>
<th>RELEVANT POINTS TO PURSUE/FUTURE RESEARCH</th>
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<tbody>
<tr>
<td>Need for changes in the mental health advice and support for teachers, alternative models of school based mental health provision. Nominate staff and train them on pastoral responsibilities. Need for training and consultation.</td>
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<th>POINTS OF CRITIQUE</th>
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<tr>
<td>STRENGTHS</td>
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<tr>
<td>LIMITATIONS</td>
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**BASICS**

<table>
<thead>
<tr>
<th>AUTHOR</th>
<th>SAMMONDS, P.; SIRAJ-BLATCHFORD, I.; SYLVA, K.; MELHUISH, E.; TAGGART, B.; &amp; ELLIOT, K.</th>
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</thead>
<tbody>
<tr>
<td>YEAR</td>
<td>2005</td>
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</table>
**TITLE**

Investigation the Effects of Pre-school provision; Using Mixed Methods in the EPPE Research

**JOURNAL**

Social Research Methodology

**VOLUME, ISSUE, PAGES**

Vol 8 (3) pp. 207-224

**LITERATURE REVIEW**

**SUMMARY OF PREVIOUS RESEARCH**

NICHD study, (2002) children with a form of pre-school education did better at school.

**CRITIQUE/GAP IN PREVIOUS RESEARCH**

NICHD excluded at risk families, effects of parenting and not educational effectiveness, not impact of individual centres. Little longitudinal research on the effects of pre-school education in the UK.

**RATIONALE FOR RESEARCH**

Funded by government (DFES), explore the effects of early years education applying educational effectiveness design to investigate impact of pre-school education on child outcomes (behavioural and cognitive) in order to inform policy and practice and improve academic understanding of the influence of pre-school education on young children. Contrast and compare the development of 300 children from a wide range of social and cultural backgrounds who had different pre-school experiences. Separating the effects of pre-school experience from school education. Establish whether some pre-schools were more effective than others in promoting children’s cognition, social/emotional development during the pre-school years (3-5). Discovering the characteristics of the most effective pre-school settings.

**RESEARCH QUESTIONS**

Examine the impact of individual pre-school setting in promoting different child outcomes (cognitive/social/emotional/behavioural). Comparison with home sample (children not attending pre-school).

**METHODOLOGY**

**DATES OF STUDY**

Longitudinal study, beginning in 1997

**LOCATION**

6 LEA in England

**SAMPLE CHARACTERISTICS/SAMPLING PROCEDURE & SAMPLE SIZE**

3000 children 3-7 years, 141 centres from 6 different types of providers, a sample of children not attending pre-school.

**METHOD OF DATA COLLECTION**

Observational data, interviews, 12 case studies (on more effective settings).

**ANALYSIS USED**

Mixed methods. 1st phase quantitative analysis, supported by qualitative. Children assessed at entry to primary. BAS II (cognitive), pre-reading skills and Child Social behaviour questionnaire. Parent interviews (demographic info, child history info).

**RESULTS**

1st phase Impact of child, family and Home learning environment on attainment and behaviour at start of study. 2nd Progress and development over pre-school period.

**BASICS**

**AUTHOR**

SPRATT, J.; SHUCKSMITH, J.; PHILLIP, K. & WATSON, C.

**YEAR**

2006

**TITLE**

"Part of Who we are as a School Should Include Responsibility for Well-Being": Links between the School Environment, Mental Health and Behaviour

**JOURNAL**

Pastoral Care

**VOLUME, ISSUE, PAGES**

Sep 2006

**LITERATURE REVIEW**

**THEORY OR CONCEPTUAL MODELS**

Mental health concept moving away from deficit model, but still complex to define. Provides a definition of mental health by Mental Health Foundation, 1999. Importance of environment for enhancing or deploying mental health. Systems Theory (not specified). Existing school culture creates stress by target driven education.

**SUMMARY OF PREVIOUS RESEARCH**

Context of policy and legislation mentioned (e.g. Every Child Matters DFES, 2004)

**RATIONALE FOR RESEARCH**

Examines ways the school environment can impact on children’s well-being and associated behaviour. Consider ways in which inter-agency workers can support school to develop appropriate responses. Examines the potential of other professionals’ viewpoints to influence the wider school environment.

**RESEARCH QUESTIONS**

Explores the tensions that schools face in developing a mental health promoting approach within existing school cultures.

**METHODOLOGY**

**DATES OF STUDY**

Not specified

**LOCATION**

Scotland
SAMPLE CHARACTERISTICS, SAMPLING PROCEDURE & SAMPLE SIZE

30 representatives of local authorities, 18 representatives of health boards and 18 employees of voluntary organisations. Interviews provided a picture of mental health interventions and activities across Scotland. 6 local authorities were selected for innovative practice.

METHOD OF DATA COLLECTION

1st Phase semi structured interviews, 2nd Phase Case Study (face to face interviews)

ANALYSIS USED

Interpretative qualitative methods, Grounded Theory

RESULTS

SUMMARY OF RESULTS

Complex policy landscape, specific policies but fragmented initiatives rather than significant impact on whole school policy. Fragile and patchy provision of mental health staff such as counsellors. Mental health work not embedded in the school. School focus on academic achievement, seen as detrimental to children’s emotional well-being. Perceived that priority for schools was improved academic outcomes. Managers under pressure to concentrate on the measurable attainments of children. Children with emotional needs did not fit with those expectations. Teachers and local authority representatives made reference to the tensions they faced between reconciling an individualized approach to the difficulties of particular children with the structures and expectations of the school. This linked to the notion that the main business of the school is to deliver academic results, which for some people was in opposition of prioritizing emotional well-being. Targeted interventions were offered to vulnerable pupils, mostly linked to improving academic targets and fit better into the system. The quality of the relationships between pupils and staff were considered critical. Teachers reported difficulties identifying mental health issues if children were withdrawn. Teachers own well-being impacts upon their ability to respond to children with emotional difficulties. Professionals from other backgrounds not fully integrated and feel to be expected to fix children.

DISCUSSION

RESULTS CONSISTENT WITH LITERATURE

Weare (2000) argues that approach to mental health should be complementary not opposed to curriculum delivery.

AUTHOR’S CONCLUSIONS

Need to review school structures and practice to identify the points of tension between policy and implementation around children’s well-being and ask themselves what is their main purpose. Teachers need to view other professionals not only as the last resource or trouble shooters, but also as a source of advice, consultation and professional development. Taking ownership of the mental health promotion of children by working collaboratively rather than in parallel with other services.

POINTS OF CRITIQUE

STRENGTHS

Large sample size which allows to provide a broad picture of mental health activities and interventions in Scotland.

LIMITATIONS

Doesn’t specify the criteria for selecting 6 Las. Ethical issues were not discussed. Sample presents potential bias as participants were volunteers who showed interest in the study.

BASICS

AUTHOR

WEARE, K. & GRAY, G.

YEAR

(2003)

TITLE


LITERATURE REVIEW

SUMMARY OF PREVIOUS RESEARCH

Key areas of research literature, evidence based approaches reviews conducted in the USA, favouring whole school approaches.

CRITIQUE/GAP IN PREVIOUS RESEARCH

Lack of evidence based research in the UK regarding the effectiveness of approaches to promote well-being in schools.

RATIONALE FOR RESEARCH

To suggest how to work effectively to promote children’ emotional and social competence and well-being at national and local level. To determine which broad approaches are more effective in improving schools and children’s behaviour, attitudes, self-esteem and academic attainment.

RESEARCH QUESTIONS

RESEARCH QUESTIONS

Not specified

METHODODOLOGY

DATES OF STUDY

January 2002

LOCATION

UK
### SAMPLE CHARACTERISTICS/SAMPLING PROCEDURE & SAMPLE SIZE

13 experts interviewed. These participants were identified by contacting and visiting centres of expertise in England. 12 LEAs managers were interviewed. The researchers discussed how they intended to select representative LEAs in relation to specific criteria (e.g. regions and type of authority). The LEAs were also selected in relation to what extent the areas identified as necessary in fostering emotional and social competence were being addressed (appropriate environments, appropriate programmes for learning and teaching specific emotional and social competence for the whole school community, and effective responses to behavioural and emotional difficulties). The LEAs were: Birmingham, Cumbria, Leicester, North Tyneside and Southampton.

### METHOD OF DATA COLLECTION

Interviews, case studies in 5 LEA, published work by different relevant organisations, review of relevant literature.

### ANALYSIS USED

Not Specified

### RESULTS

Wide range of terminology used in the field and across agencies has implications for the way the work is interpreted and implemented. Word well-being implies underlying contextual factors. Evidence from research that promoting emotional well-being has a range of social and educational benefits and improvements to mental health.

### DISCUSSION

**AUTHOR’S CONCLUSIONS**

Need to DfES and professional to achieve a common terminology and understanding. Recommends the use of emotional and social well-being as common terminology. Need to extend the evidence base to develop practice in this area. Develop practice which emphasises the synergy between the promotion of emotional well-being and social competence with the more traditional educational goals by promoting the benefits for academic outcomes. Higher priority to be given to promotion of social and emotional well-being at national, local and school levels. Take a whole school approach, based on international research evidence, universal approaches combined with targeted interventions for those with behavioural and emotional problems. Team work and multi-professional approach at national, LEA and school level to develop practical strategies, a coherent framework. Involve parents and communities. Early intervention and long developmental approach, schools and LEAs to identify problems early and target them quickly as part of a whole school approach. School environment determinant of level of emotional well-being and social competence in pupils and teachers. Rules, expectations and clear boundaries, warm relationships, participation. Incorporate specific teaching programmes incorporated in the curriculum. Promote teachers’ competence and well-being. Evidence that teachers cannot promote emotional well-being if their emotional needs are not met. Need for teacher training in the area of emotional well-being.

### POINTS OF CRITIQUE

**STRENGTHS**

The authors undertook an extensive and detailed literature review. However, as they indicated, this was not a ‘systematic’ review. Particular use was made of systematic reviews in the topic. Overall there is a very clear description of the sample and the reasons why the participants were selected. The data collection strategies are well described. Examples of the interview schedules are offered. The purpose of the study is addressed. The use of quotations added to the understanding of the themes. The data from the literature review is interwoven with the data from the interviews. The authors discussed the implications of each of the research findings.

**LIMITATIONS**

The researchers did not make explicit their philosophical approach. Ethical considerations not discussed. There is no information about how the data was analysed. There is no discussion about what the researchers did to assure rigour.
Guidelines used for critiquing systematic literature review (based on CASP, 2010).

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<thead>
<tr>
<th>Are the results of the review valid?</th>
<th>YES</th>
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<tr>
<td>Screening questions</td>
<td></td>
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<tr>
<td>Did the review address a clearly focused question? (e.g. population studied/intervention given/the outcome considered)</td>
<td>X. To review mental health/emotional wellbeing interventions in schools.</td>
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<tr>
<td>Did the authors look for the appropriate sort of papers? (e.g. have an appropriate study design)</td>
<td>X. Reviewed “good quality systematic reviews, reviews of reviews, -analysis and evidence-based databases”.</td>
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<tr>
<td>Is it worth continuing?</td>
<td>X</td>
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<tr>
<td>Detailed questions</td>
<td></td>
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<tr>
<td>Do you think the important relevant studies were included? (e.g. which bibliographic databases were used, follow up from reference lists, personal contact with experts)</td>
<td>X. “Over 500 studies were identified, of which 52 reviews met the inclusion criteria”. Including a detailed description of how the studies were searched (data bases, criteria and contacts with established reviewers, looking references from pervious reviewers, and hand searching.</td>
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<tr>
<td>Did the review’s authors do enough to assess the quality of the included studies? (e.g. The authors need to consider the rigour of the studies they have identified. Lack of rigour may affect the studies)</td>
<td>X. The authors used a critical appraisal to review the literature. The quality of the reviews was rated to be high, medium or low. The authors showed transparency in their process of reviewing (the criteria used was outlined in tables)</td>
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<tr>
<td>If the results of the review have been combined, was it reasonable to do so? (e.g. consider whether the results were similar from study to study, the results of all the included studies are clearly displayed, the results of the different studies are similar)</td>
<td>X. The authors presented the similarities and differences between reviews and studies..</td>
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<tr>
<td>What are the results?</td>
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<tr>
<td>What are the overall result of the reviews? (e.g. if you are clear about the review’s ‘bottom line’ results: what these are (numerically if appropriate), how were the results expressed)</td>
<td>X. The results were presented in themes. The results are presented in tables, which facilitates the understanding of the data.</td>
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<tr>
<td>Will the results help locally?</td>
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Can the results be applied to the local population? (e.g. your local setting is likely to differ much from that of the review)

X The results of this review are relevant for UK government, schools and educators and professionals working in relation to children’s emotional. This review offers an evaluation of evidence of how effective schools’ interventions which result in positive outcomes for children and young people’s emotional well-being.

Weighting of the relevance of the systematic review in relation to the rational of the current study. High: included a clear purpose, detailed review methodology & comprehensive findings. A detailed discussion and implications for practice. Medium: included some evidence of previous elements. Low: lacked an in-depth exploration of previous elements.

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<th>Weighting</th>
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<td>Medium</td>
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<td>Low</td>
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Second stage of Literature Review

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<tr>
<th>BASICS</th>
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<tbody>
<tr>
<td>AUTHOR</td>
<td>AUBREY, C &amp; WARD, K.</td>
</tr>
<tr>
<td>YEAR</td>
<td>2013</td>
</tr>
<tr>
<td>TITLE</td>
<td>Early years practitioners’ views on early personal, social and emotional development</td>
</tr>
<tr>
<td>JOURNAL</td>
<td>Emotional and Behavioural Difficulties</td>
</tr>
<tr>
<td>VOLUME, ISSUE, PAGES</td>
<td>Vol 18, No 4, 435-447</td>
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</table>

| CRITIQUE/GAP IN PREVIOUS RESEARCH | Lack of research in pre-school settings |
| RATIONALE FOR RESEARCH | Current emphasis on early intervention and identification of children with social and emotional difficulties to prevent undesired outcomes and remove obstacles to learning |

<table>
<thead>
<tr>
<th>RESEARCH QUESTIONS</th>
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<tbody>
<tr>
<td>RESEARCH QUESTIONS</td>
<td>What is the policy to practice context that relates to young children with difficulties in the areas of PSED? What behaviours, dispositions and attitudes cause caregivers concerns? What do caregivers do about such behaviour and how do children respond? What are the implications for practice?</td>
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<tr>
<th>METHODOLOGY</th>
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<tbody>
<tr>
<td>LOCATION</td>
<td>UK/ Birmingham</td>
</tr>
<tr>
<td>CHARACTERISTICS OF POPULATION</td>
<td>Early years practitioners</td>
</tr>
<tr>
<td>SAMPLING PROCEDURE &amp; SAMPLE SIZE</td>
<td>46 participants from pre-school settings attached to primary schools</td>
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<tr>
<td>METHOD OF DATA COLLECTION</td>
<td>Survey and follow up interview</td>
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<tr>
<td>ANALYSIS USED</td>
<td>Quantitative and Grounded Theory (Corbin and Strauss)</td>
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<tr>
<th>RESULTS</th>
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<tr>
<td>SUMMARY OF RESULTS</td>
<td>Behaviours that caused concerns: low level behaviours such as not listening and following instructions, and violent and aggressive behaviour as well as lack of social skills. Most frequent behaviour of concern: Low level behaviours. Five respondents were able to relate children’s behaviour to age and developmental expectations of PSED of EYFS 2 linked children’s difficulties to adapting to setting and need to learn expectations. Setting expectations and modelling of social behaviour was perceived as crucial Understanding of EYFS expectations in order to support children’s behaviour. Strong emphasis on working with parents, early identification and professionalism. Communicating expectations clearly to children and parents</td>
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<tr>
<th>DISCUSSION</th>
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<tr>
<td>RESULTS CONSISTENT WITH LITERATURE</td>
<td>Similar to studies for school aged children. Where the focus of concerns is low level behaviour. The use of effective strategies consistently improve behaviour overtime.</td>
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<tr>
<td>AUTHOR’S CONCLUSIONS</td>
<td>Young children need to learn context specific expectations for behaviour, there is an</td>
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</table>
associating between a nurturing approach and reduction of troublesome behaviour over time. Need for effective strategies to meet the needs for individual children and expectations are communicated effectively.

**RELEVANT POINTS TO PURSUE/FUTURE RESEARCH**
Support the views that EY practitioners support the emotional and social development of children in the context of warm relationships with clear expectations.

**POINTS OF CRITIQUE**

**STRENGTHS**
Capture the views of early years practitioners Clear aims and purpose. Qualitative methodology allowed to gather in depth data from participants, vast information, ethical issues described

**LIMITATIONS**
Small scale study

---

**AUTHOR**
COTTLE, M. & ALEXANDER, E.

**YEAR**
2012

**TITLE**
Quality in early years settings, research and practitioners' perspectives.

**JOURNAL**
British Educational Research Journal

**VOLUME, ISSUE, PAGES**
VOL 38, no 4, pp 635-654

---

**SUMMARY OF PREVIOUS RESEARCH**
Outlines Government policy context

**CRITIQUE/GAP IN PREVIOUS RESEARCH**
Inconsistencies in government discourses regarding the nature of quality in early years settings

**RATIONALE FOR RESEARCH**
To explore whether practitioners understanding of quality has implications for children's experiences and training and development of practitioners

---

**RESEARCH QUESTIONS**
How do early years practitioners understand quality and success in the context of their particular setting? How are these understandings expressed in the daily experiences of the children with whom they work? What are the implications of these understandings in planning for practitioners' professional development?

---

**METHODOLOGY**
UK

**CHARACTERISTICS OF POPULATION**
Early years practitioners

**SAMPLING PROCEDURE & SAMPLE SIZE**
18 early years settings across 2 London boroughs and 2 shire counties. 165 participants

**METHOD OF DATA COLLECTION**
Symbolic interactionist approach (interview, focus groups, observations and consultations with children)

**ANALYSIS USED**
Thematic analysis

---

**RESULTS**
Interpretations of quality varied but were influenced by official discourses an ‘aspiration’. Quality understood by a combination of the settings’ expectations and personal and professional values. Pressure felt by the practices prescribed by the government, and children’s attainment being measured against EYFS but not always indicative of quality. Practitioners expressed frustration at the power of current outcomes-based agenda which conflicted with their own personal values. Practitioners demonstrated commitment to children’s welfare and development through warm relationships Practitioners said that children’s activities should be based on children’s interests and some interactions were for observational or managerial purposes rather than other more socially driven. Ongoing professional development was viewed as essential to quality in all settings. Differing priorities in the settings resulted in partnership with parents being understood in different ways.

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**SUMMARY OF RESULTS**
### RESULTS CONSISTENT WITH LITERATURE
- Pressures around outcomes
- Need for ongoing professional development
- Different understanding of partnership with parents

### AUTHOR’S CONCLUSIONS
- Inequalities in services and in children’s experiences
- Official discourses influenced understanding of quality, but definition was different according to settings/individual’s personal and professional histories.
- Principles and professional values clashed with the systems of targets defined by EYFS creating tensions and pressure.
- Need more sensitivity to local differences.

### POINTS OF CRITIQUE

#### STRENGTHS
- Good background of policy in early years. The authors undertook an extensive and detailed literature review. Clear aims and purpose. Qualitative methodology allowed to gather in depth data from participants, vast information, ethical issues described

#### LIMITATIONS
- Small sample. Themes were not described as part of results.

### BASICS

| AUTHOR | GIARDINO, P, McNULTY J., & ANDERSON, B. |
| YEAR | 2013 |
| TITLE | Observation, assessment and planning practices in a children’s centre. |
| JOURNAL | Child Care in Practice |
| VOLUME ISSUE PAGES | VOL 19, No2, pp. 118-137 |

### LITERATURE REVIEW

- **SUMMARY OF PREVIOUS RESEARCH**: EPPE project (2004)
- **CRITIQUE/GAP IN PREVIOUS RESEARCH**: Concerns in regards to the outcomes focus of EYFS, Issues addressing children’s development against fixed developmental norms. Developmental norms rigid not addressing the holistic nature of development
- **RATIONALE FOR RESEARCH**: Review of current strategies in observation, assessment and planning in an early years setting

### RESEARCH QUESTIONS

- **RESEARCH QUESTIONS**: What are the current practices of observation? How do they link to assessment? How does assessment inform practice?

### METHODOLOGY

| LOCATION | UK |
| CHARACTERISTICS OF POPULATION | 10 Early years practitioners |
| SAMPLING PROCEDURE & SAMPLE SIZE | Case study-Action Research |
| METHOD OF DATA COLLECTION | Interview |
| ANALYSIS USED | Block and file approach and conceptual mapping. |

### RESULTS

- **SUMMARY OF RESULTS**: Practitioners coincided that investing time and effort through a communicative space to discuss practice was essential to identify areas for development. Collaboration was seen as fundamental to examine role and responsibilities with regards to effective practice
- Practitioners demonstrated a clear understanding of the key person role and working with a small number of children enable them to feel safe and cared for and focus the observations on few children.
- Importance of sharing observations
- Some limitations as some children do not get to be observed regularly, sometimes unrealistic expectations in the context of staff ratios and time constraints. (such as organising resources, meals and snacks and communicating with parents)
- Weekly meetings allow for observations to inform planning for individual children.
EYFS is used as a tool to identify gaps in a child’s learning and development rather than on interests. Challenges of reaching targets or assessing children’s progress and how this translate in effective provision is seen as problematic. Need a greater understanding of EYFS and little consistency across settings around planning. Further opportunities for training in observation, assessment and planning in line with the EYFS were requested.

Practitioners are open to new ideas. Need a consistent approach with practitioners informed about child development and improved techniques of observation, assessment and planning. Self-reflection is important in improving practice for early years practitioners. Observations to not only as a measuring tool but to explore children’s interests and strengths and develop their social and emotional skills. Need for continuing professional development.

Insights into the way observations are perceived by early years practitioners. Space for self-reflections for practitioners. Identified gaps in knowledge around effective observation. Detailed analysis of interviews and results was presented.

Small study. Not clear how the participants were selected. Not clear how the methodology was applied.

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<tr>
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<tr>
<td>Screening questions</td>
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<tr>
<td>Did the review address a clearly focused question? (e.g. population studied/intervention given/the outcome considered)</td>
<td>X. To review research studies which explored relationships between parental engagement, parental support and family education on pupils educational outcomes.</td>
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<tr>
<td>Did the authors look for the appropriate sort of papers? (e.g. have an appropriate study design)</td>
<td>X. Building on previous reviews in the field</td>
</tr>
<tr>
<td>Is it worth continuing?</td>
<td>X</td>
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<tr>
<td>Detailed questions</td>
<td></td>
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<tr>
<td>Do you think the important relevant studies were included? (e.g. which bibliographic databases were used, follow up from reference lists, personal contact with experts)</td>
<td>X. “14 studies were included that met the inclusion criteria”. The authors gave a detailed description of how the studies were searched (data bases, criteria, looking references from previous reviewers, and hand searching journals). Experts in the field from the UK, Australia, USA, New Zealand and Scandinavia were contacted.</td>
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</table>
Did the review’s authors do enough to assess the quality of the included studies? (e.g. The authors need to consider the rigour of the studies they have identified. Lack of rigour may affect the studies)

| X. Not specified |

If the results of the review have been combined, was it reasonable to do so? (e.g. consider whether the results were similar from study to study, the results of all the included studies are clearly displayed, the results of the different studies are similar)

| X. It was reasonable to combine the results of the review because these complemented each other. The authors presented the similarities and differences between studies and theoretical perspectives to aid understanding. |

What are the results?

| X. The results were presented in themes. |

What are the overall result of the reviews? (e.g. if you are clear about the review’s ‘bottom line’ results: what these are (numerically if appropriate), how were the results expressed)

| X. The results were presented in themes. |

Will the results help locally?

| X. The results of this review are relevant for professionals working in education. This review offers an evaluation of evidence how does parental engagement work and plan for interventions. |

Weighting of the relevance of the systematic review in relation to the rational of the current study. High: included a clear purpose, detailed review methodology & comprehensive findings. A detailed discussion and implications for practice. Medium: included some evidence of previous elements. Low: lacked an in-depth exploration of previous elements.

| HIGH |
Appendix 3

LETTER OF CONTACT TO PARTICIPANTS

Dear Early Years Practitioner:

I am writing to you to ask if you would agree to take part in a doctoral research study designed to explore the perspectives of early years practitioners on the promotion of emotional well-being of children attending pre-school settings. The study is being conducted by myself, Paula Bertagno, a trainee in Child, Community and Educational Psychology at the Tavistock and Portman NHS Foundation Trust, and University of Essex, and it is part of the requirements for my doctoral qualification.

The focus of my research are the views and experiences of early years practitioners on the promotion of emotional well-being of children in pre-school settings. I believe that your views and experience as an early years practitioner can contribute to improve early years practice around the promotion of children’s emotional well-being.

All that will be required is for you to take part in a semi-structured, individual interview with me about your experience of promoting emotional well-being of children. The interview would last for approximately 40 minutes. The location for the interview would ideally be a quiet room in your setting at a time and date that are convenient for you.

Your participation in the study will be kept anonymous; the same as any names that would be mentioned during the interview, such as the name of school, people or local areas. I can reassure you that the content and analysis of the interviews will be confidential and in my final write-up everything will be completely anonymised. I will be doing an audio recording of the interview for the purposes of my analysis. I would hope that as an interviewee the process of reflecting on your experience of will also provide some beneficial reflective outcome.

If you could e-mail me back to indicate whether you are happy to be a participant in this research, I would be very grateful. If you are willing to participate, please also indicate when (i.e. preferred days of week) and where would suit you best. My plan would be to conduct the interview before the end of autumn term 2015 if possible.

I would be pleased to answer any questions that you might have before agreeing to take part. I can be contacted on: ........................................ or on my mobile:.................................

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

Best wishes,

Paula Bertagno
PARTICIPANT INFORMATION SHEET

You are invited to participate in a research study designed to explore the perspectives of early years practitioners on the promotion of emotional well-being of children attending pre-school settings.

The study is being conducted by Paula Bertagno who is a trainee in Child, Community and Educational Psychology at the Tavistock and Portman NHS Foundation Trust, and University of Essex, and it is part of the requirements for her doctoral qualification.

Before you decide whether or not to take part in this study, it is important for you to understand the reasons why this research is being done and what it entails. Please take time to read the information below and discuss it with others if you consider it relevant.

If you agree to participate in the study, you will be asked to sign the attached participant consent form.

Type of research intervention
The research will involve your participation in a semi-interview with the researcher (name of the researcher). The interview will last approximately 1 hour, and it will be audio-recorded. During the interview the researcher will ask participants to talk about their experiences and views on how is children’s emotional well-being promoted in their pre-school settings, and what are the factors that facilitate or hinder that. If you do not wish to answer any of the questions during the interview, you may say so and she will move on to the next question.

Participant Selection
You have been invited to take part in this research because your views and experience as an early years practitioner can contribute to improve early years practice around the promotion of children’s emotional well-being.

Voluntary participation
The participation in this research is completely voluntary. It is your choice whether to participate or not. If you decide to participate, you have the option of withdrawing before the study commences or discontinuing after the data collection has started. You can also withdraw permission to use the data before December 2015, in which case the material will be deleted. In December 2015, the writing of the discussion will have started, which is the reason why it would not be possible to withdraw after that time.
Confidentiality
Your participation in the study will be kept anonymous; the same as any names that would be mentioned during the interview, such as the name of school, people or local areas. The information that you give will be kept confidential from third parties, such as school staff or local authority workers. On completion of the thesis, the information will be stored securely for 2 years, and then destroyed.

Risks
There are no foreseeable negative consequences to you taking part in this research. However, it is possible that reflecting upon your experience may cause some distress. If that is the case, the researcher will be available to discuss any of these issues post-interview. In case you consider that your participation in the research has impacted negatively into your emotional well-being, you will be advised to seek further support with specialist agencies.

Sharing the results
A summary of the research findings will be sent to you, and to the other participants of the study. If you would like to discuss the findings with the researcher, a meeting will be organised. The research results will also be presented to the Educational Psychology Service within the local authority that commissioned the study. The thesis may be read by other students or people interested in the topic.

If you have any concerns about the conduct of this study
This study has been approved by The Tavistock and Portman Foundation Trust’s and University of Essex’s Research Ethics Committees. Any person with concerns or complaints about the conduct of this study should contact the researcher’s supervisor at the Educational Psychology Service, (name of supervisor), or her researcher supervisor at the Tavistock, (name of supervisor).

In case of queries
When you have read this information, the researcher, (name of the researcher), will discuss it with you if you wish, and answer any questions you may have. (Name of the researcher)’s contact details are: mobile number (………………………….), address (……………………………………………………..), (name of the researcher)@ABC.gov.uk.

Thank you for taking the time to consider this study. If you wish to participate in it, please sign the attached consent form.
Appendix 5

CONSENT FORM

I ……………………………………………………………………… agree to participate in the research entitled:

Promoting children’s emotional well-being in pre-school settings. A grounded theory study exploring
the views of early years practitioners.

I am participating voluntarily, and I give permission for my interview to be audio-recoded, and for the
researcher to use quotations from my interview in the research report, maintaining anonymity.

☐ Please initial box

I understand that I can withdraw from the study, without repercussions, at any time, whether before it
starts or while I am participating. I also understand that I can withdraw permission to use my interview
before December 2015, in which case the material will be deleted. In December 2015, the analysis of
the data will have started, which is the reason why it would not be possible to withdraw after this time.

☐ Please initial box

I understand that anonymity will be ensured in the write-up by disguising my identity.

☐ Please initial box

Signed…………………………………………….                 Date…………………….
Appendix 6

FINAL INTERVIEW SCHEDULE

1. How long have you been an early years practitioner for?
2. What does the concept of emotional well-being mean to you?
3. What do you understand by children’s emotional well-being?
4. How is the emotional well-being of children promoted in your setting?
5. What in your opinion facilitates the promotion of emotional well-being of children in your setting?
6. What do you think hinders the promotion of emotional well-being in your setting?
Appendix 7

COMPLETE CODING SYSTEM

- **Code System**

- **INTEGRATING PERSONAL AND PROFESSIONAL ASPECTS**
  - **HOLDING RESPONSIBILITY FOR CHILDREN’S EMOTIONAL WELL-BEING**
    - Recognising the Importance of well-being for learning
  - **IMPACT OF TRAINING, KNOWLEDGE AND PROFESSIONAL EXPERIENCE**
    - Training, knowledge and experience
    - Recognising indicators linked with emotional well-being
      - Having an understanding of emotional well-being
      - Identifying overt behaviours linked to emotional needs
      - Identifying physical indicators linked to emotional needs
      - Getting to the root of a problem
      - Being aware of changes in children circumstances
      - Keeping updated with information
      - Using scales to assess well-being
  - **IMPACT OF PERSONAL LIFE EXPERIENCE AND BACKGROUND**
    - Influence of personal life experience
  - **PERSONAL ATTRIBUTES VALUES AND BELIEFS**
    - Holding beliefs about the self
      - Perceived strength to deal with challenging circumstances (L)
      - Resilience
      - Being non judgemental
      - Being flexible - Adapting to individual’s needs
      - Being curious
      - Predisposition to care for children’s emotional needs
      - Having empathy
    - Holding beliefs around the importance of emotional well-being
    - Acknowledging own feelings
    - Accepting limitations of own role
    - Looking after yourself as an individual

- **ENGAGING WITH PARENTS**

  - Working with parents to support children
  - Working in partnership with parents
  - Supporting parents to support children
  - Communicating with parents
  - Keeping parents happy
  - Valuing parent’s views and knowledge

- **FACING BARRIERS ENGAGING WITH FAMILIES**

  - Dealing with communication barriers
    - Language barriers / Communicating and understanding children’s
    - Managing communication difficulties

- ** ISSUES AROUND TRUST**

  - Believing parent is covering up the truth
  - Challenges earning parents’ trust
HOLDING ASSUMPTIONS ABOUT FAMILIES
- Feeling the need to educate parents
- Parents’ background and circumstances affect children’s emotion
- Assumptions about family’s needs

HOLDING NEGATIVE VIEWS ABOUT PARENTS’ PARENTING ABILITIES
- Parents don’t want to engage
- Holding negative views about parent’s parenting ability

PROVIDING CONTAINMENT

ADAPTING PRACTICE TO SUPPORT CHILDREN’S INDIVIDUAL NEEDS
- Importance of knowing children
- Planning to support children’s individual needs

ADOPTING A KEY PERSON’S APPROACH
- Adhering to setting’s settling in practices
- Doing home visits
- Supporting children’s transition into pre-school
- Managing children’s attachment issues
- Using a key person approach for building close relationships

SUPPORTING CHILDREN’S EMOTIONAL NEEDS
- Interventions to support emotional well-being
  - Planning activities to promote well-being
  - Using persona dolls
  - Small group interventions
  - Providing children with emotional support
    - Helping children understand their feelings
    - Listening and talking to children
    - Modelling expected behavior
    - Coming down to the child’s level
    - Boosting children’s self esteem through praise
    - Reassuring children by physical contact
  - Providing children with unmet basic needs

PROVIDING AN ADEQUATE ENVIRONMENT TO PROMOTE EMOTIONAL WELL-BEING
- Providing a safe and secure environment
- Providing children with the right environment
- Setting clear boundaries and expectations

FEELING CONTAINED

WORKING AS PART OF A TEAM
- Seeking support from experienced others
- Getting support from management
- Sharing ideas and resources
- Sharing information and concerns
- Taking time to talk

ACCESSING SUPPORT FROM EXTERNAL AGENCIES AND OTHER PROFESSIONALS
- Seeking support from external agencies
BALANCING PRESSURES OF SYSTEMS

FOLLOWING EYFS PRINCIPLES AND NATIONAL GUIDANCE
- Adhering to EYFS principles
  - Keeping records
  - Doing observations
  - Assessing against EYFS criteria
  - Following national guidance around emotional well-being
  - Providing an environment to suit developmental needs

FOLLOWING SAFEGUARDING PROCEDURES
- Following safeguarding procedures

DEALING WITH TIME CONSTRAINTS
- Meeting demands of a group of children
- Impact of staff shortages/ratios
- Lacking time to interact with children
- Lacking time to support children

EDUCATION SYSTEM FAIL TO ADDRESS THE EMOTIONAL NEEDS OF CHILDREN
- Focusing on learning before well-being
- Not seeing the child who isetically
- Losing sight of children's emotional well-being

LACK OF TRAINING AND EXT SUPPORT AROUND THE EMOTIONAL
- Lengthy referral process
- Lacking knowledge and training around emotional well-being
- Need for training to support parents
- Experiencing a lack of support from specialist services

FACING PRESSURES OF MEETING EDUCATIONAL TARGETS
- Pressures on staff around meeting children's academic targets
- "Assessment puts some children at a disadvantage"
- Monitoring of children negative for their emotional well-being
- Pressures on children to achieve
  - Pressures from parents on children to achieve
Appendix 8

LETTER OF ETHICAL APPROVAL

The Tavistock and Portman NHS Foundation Trust
Quality Assurance & Enhancement
Directorate of Education & Training
Tavistock Centre
720 Belsize Lane
London
NW3 5BA

Tel: 020 8938 2548
Fax: 020 7447 3837
http://tavistockandportman.nhs.uk/research

Paula Bertagno

20 August 2015

Re: Research Ethics Application

Title: What are the factors that facilitate or hinder the effective promotion of children’s emotional wellbeing in early years settings? A Grounded Theory study based on the perspectives of early years practitioners

Dear Paula,

I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

If you have any further questions or require any clarification do not hesitate to contact me.

I am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,

Louis Taussig
Secretary to the Trust Research Ethics Committee

Cc Brian Davis
Appendix 9

DATA ANALYSIS

(See attached CD)

A. Interview Transcripts
B. Code System and Memos
C. Initial Coding Stage
D. Middle Coding Stage
E. Final Coding Stage