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How can teachers improve or promote the conversation around mental and emotional health in primary school?

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The candidate confirms that the work submitted is her own and that appropriate credit has been given where reference has been made to the work of others.

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#### Abstract

Mental and Emotional health is a large part of the PSHE curriculum but still has a stigma attached as a controversial subject (Bahn, 2020). The purpose of this research was to explore how specified time put towards talking about mental and emotional health might develop conversation. Newman (2002 as cited in Goddard, Smith and Boycott, 2013) discusses the importance of resilience in school children to survive adversity – this research aims to ask how this can be done with a theoretical focus on dialogic teaching (Alexander, 2000).

The investigation focuses on PSHE (Personal Social Health and Economic education) and SEL (Social and Emotional Learning) and how the topic of mental and emotional health can be expanded in order to deepen learning and understanding both socially and personally. The research took place in a large suburban primary school in a class of 31 children aged 6-7. The findings were positive and discuss a strong dialogic approach to the conversation in classrooms as well as teacher modelling being a valuable asset in encouraging children to join in and express themselves too. The findings would be easy to bring into mainstream and specialist environments as well.

Word count: 6,070

### How can teachers improve or promote the conversation around mental and emotional health in primary school?

#### Introduction

The purpose of this study is to explore the environment around emotional and mental health in primary schools and how open the discussion can become. Over the period of lockdown, from 2020-2021, it became apparent that mental and emotional health should become a prevalent topic, both in media and in education de Miranda et al. (2020). This investigation aims to look at how mental health and emotional health topics are discussed in a primary classroom with hopes of promoting the conversation surrounding it, in and outside of the Personal Social Health and Economic (PSHE) space.

There is a strong personal connection to the understanding and ability to express emotion and mental health. Mental health or mental illness should not be considered a controversial subject. The more opportunity that is provided to open up in safe environments and understand the subject at a young age, the better equipped young people are to handle their own mental health and spot signs of needing help in others. This research has the potential to open up the conversation for students about emotional and mental health; to have the vocabulary and ability to speak about their emotions and move to destigmatising discussions around mental health.

This report will identify where there are opportunities to extend PSHE learning and conducts two rounds of interventions during a third School Experience (SE3) of teacher training in a large suburban primary school, focussing on a class of 31 year 2 students. Each intervention is conducted and assessed to lead to ideas for further interventions or research that could be conducted. Through questionnaires, observations and interviews, the findings were overall positive towards the progression and promotion of emotional and mental health information for young people.

#### **Literature Review**

#### Introduction

In the following literature review, five key themes are discussed surrounding existing literature regarding mental and emotional health in primary schools. For the purposes of clarity, mental health can be defined by the World Health Organisation (WHO) (2022; Crabbe, 2023; Weare 2000), and is qualified by the state of self – how one feels about themselves and how that leads to behaviour. The WHO classify emotional health within the umbrella of mental health but there are subtle differences found in other literature. Emotional health, defined in Crabbe (2023; Rogers, 2007; Weare, 2000) refers to the emotional state of a person, often influenced by outside factors – their personal wellbeing. Both are marginally different but intertwined as they work together, especially in the context of teaching primary education. The themes discussed below are the history surrounding the subject, emotional and mental health in primary schools, Relationships and Sex Education (RSE) PSHE education and Social and Emotional Learning (SEL), Classroom environment and Dialogic versus written teaching.

#### History of Mental and Emotional health education

This section of the literature review contains references from a significant breadth of time. This is done purposefully to illustrate the history of information and attitudes towards the subject matter. For many years mental and emotional health was not discussed in any form in classrooms. When the Elementary Education Reform Act (1870) was passed, the focus was on knowledge and providing adults who were ready for work (Middleton, 1970). The underpinning for the rest of education was set here and began to grow into what we know today (Mcculloch, 2020; Parker, Allen and Freathy, 2020; Mitch, 2019).

Lewis Terman, an American psychologist, proposed in 1914 that schools were no longer doing enough by merely educating in terms of knowledge, but should move towards educating the child in

the hopes of creating people of society (Hoag and Terman, 1914 as cited in Sedlak, 1997). Sedlak (1997) prefaces this by explaining that, due to the quickly expanding social classes to whom schooling was being made available, it was key to address the issues faced by the different classes (Flaherty and Osher, 2003; Mitch, 2019) in order to avoid criminality in adults of the future (Sedlake, 1997). This links with what Polanin et al. (2019; Olweus, 2011) discuss, with regards to the potential link between emotional and mental health regulation and early intervention, and criminal activity. Schools were no longer just for the privileged, it was for many walks of life too, and they had to learn to function together for the moving society (Flaherty and Osher, 2003; Mitch, 2019). This can be thought of as the first shift towards an education on social health and economic education (part of modern PSHE). This bears no similarity to what we see in regards to mental health support today but by the 1920s more focus was being put on mental health needs being addressed in schools (Sedlak, 1997; Flaherty and Osher, 2003).

Adelman and Taylor (2000) go on to discuss the state of mental health in schools in the late 1980 – 1990s. They highlight the move towards a community and collaborative approach as the importance of social work and external mental health providers has risen. This is supported by Weare (2000) who discusses Gardener's (1993) theory of multiple intelligences: theorising that intelligence is not one dimensional but has multiple facets that specify that different situations call for different parts of the intelligence. In this case, referencing the interpersonal intelligence and intrapersonal intelligence Gardener's (1993, as cited in Christison and Kennedy, 1999) – the ability to understand others' feelings and your own.

The Children Act (1989) began to bring the mental welfare of children officially into legislation. Every Child Matters (Department for Education (DfE), 2003) states that all children have the right to be healthy – this includes well physical and mental health. Followed by Children Act (2004), this Act refers primarily to children in the legal system, rather than the education system specifically, but prioritises the health and wellbeing of children first.

We must also consider the impacts of COVID-19 on mental and emotional health and wellbeing. de Miranda et al. (2020; Meherali et al., 2021; Lee, 2020) discuss the initial impacts of the lockdowns and social distancing specifically on school children. These studies were conducted as the initial COVID lockdown was happening whereas Viner et al. (2022; Elharake et al., 2022; Barker et al., 2022; Asbury and Toseeb, 2023) discuss their findings with added retrospect and find similar effects. Arnal-Palacián, Arnal-Bailera and Blanco (2022) found a correlation between being confined and attempting to continue primary mathematics learning to cause anxiety while Viner et al. (2022) found a much broader but similar impact in that lockdown paired with attempting to continue learning at home and away from peers did correlate with an increase in mental and emotional health barriers in children and adolescents. The COVID-19 pandemic had a significant detriment to the mental and emotional wellbeing of most people (with these studies focussed primarily on children) and this has continued to be a prevalent topic in the years following. This has been seen to be addressed in classrooms across the UK (Creswell, 2023) in terms of rapid responses using interventions and specified curricular to address commonalities that communities faced such as loss and confinement.

#### PSHE, RSE and SEL

PSHE is a non-statutory but expected part of schooling in England (Long, 2021). The PSHE Association (2023) states that PSHE encompasses a wide range of wellbeing subjects, including RSE and SEL. In September 2020 most of the PSHE curriculum was made statutory, focussing primarily on relationships, under the Children and Social Work Act (DfE, 2017). This means that, in some literature, the subject falls under different names, with the statutory element often being referred to as RSHE (PSHE Association, 2023). The PSHE Association's Programme of Study (PoS) (PSHE Association, 2020) is widely used to comprehensively cover PSHE, RSE and SEL subjects, with supporting resources from schemes of learning such as Jigsaw (Jigsaw PSHE Ltd, 2023), Kapow

(Kapow Primary, 2023) or Twinkl (Twinkl.co.uk, 2023). The school in which this study took place studied PSHE through Twinkl and SEL independently.

Deglan and Leung (2021) promote the use of SEL with dialogic reading – that is to read with the students and discuss the book together. Dialogic teaching will be discussed in a later section of this literature review. The use of books and story as a model in SEL and PSHE is further supported by Pugh and Hughes (2021; Goddard, Smith and Boycott, 2013) as powerful tools to demonstrate learning in social situations that may otherwise be hard to replicate in a classroom. For example, books about race and diversity may be extremely helpful to teach in a school where the vast majority of the population is Caucasian or from similar socio-economic upbringings (Deglan and Leung, 2021; Doucet and Adair, 2013).

#### Metacognition

Metacognition is a pedagogical technique that can be applied to many different learning environments (Education Endowment Foundation (EEF), 2021). Goepel, Childerhouse and Sharpe (2014; Rose, 2010) discuss how the technique can be used to engage learners to understand their own learning. Similarly to using story to relate to real life experiences, as discussed above (Deglan and Leung, 2021; Doucet and Adair, 2013; Maine, 2015) metacognition is about recognising similarities in personal experiences rather than in external experiences of others. Mahdavi (2014) describes it as a way of knowing how one learns and trying to develop ways to recognise the easiest way to learn for the self. Linking to self-awareness, an aspect of PSHE that teaches the awareness of the body and emotions (Goddard, Smith and Boycott, 2013), metacognition can be used for academic learning, as well as personal and social learning (Deglan and Leung, 2021).

Self-regulation, the ability to recognise the link and normalise the body's physical state and mental state (or feelings), is also closely connected to metacognition (Robson, Allen and Howard, 2020; Mahdavi, 2014; Posner and Rothbart, 2000), in that the person must first learn about themselves, to recognise when self-regulation techniques may be needed to regulate the body and mind. Muijs and

Bokhove (2020) directly link metacognition and self-regulation as important support techniques for all learners. They support neurotypical and neurodivergent learners alike to know how to control their body's reactionary responses (Mitsea, Drigas and Mantas, 2021) this implies that the purpose of this study is replicable in multiple school environments.

#### **Dialogic teaching**

Dialogic teaching is a pedagogical approach put forth by Alexander (2000), proposing a new technique that brings conversation for learning to the forefront in the classroom. Alexander (2017) writes about the value of dialogic teaching – teaching using discussion and verbal based interactions to further push children's engagement. This is shown in research (Alexander, 2008; 2017; 2020; 2021) to aid in understanding, confidence and communication skills. It is not just about the speaking and listening aspect of classroom talk, but about noticing and seeing the value of conversation, in the same way as if it were written down (Alexander, 2017; 2020; Šeďová et al. 2020). Often it is seen in formative assessment, such as questioning, to deem where a student's understanding lies at a certain point in time. Lefstein and Snell (2014) discuss the process of dialogic teaching as being a collaborative and supportive one. In a classroom where this is done well, the students will feel confident and supported to speak their thoughts without worry of judgement (Lefstein and Snell, 2014; Littleton and Mercer, 2013; García-Carrión et al., 2020). In this respect is where it links very closely to the practice of PSHE and the surrounding subjects (Deglan and Leung, 2021; Doucet and Adair, 2013; Maine, 2015). Leftstein and Snell (2014; Alexander, 2020; Deglan and Leung, 2021) go on to discuss the importance of modelling and being an active part of the dialogic conversation in order for initial learning to occur. Moving on from the initial teaching, learners can then be engaged in exploratory talk. This is a step that can be done with or without adult interaction, in fact, Alexander (2008) directly suggests that a lack of adult interaction in this step can be important to the development of independent and new ideas - in this context, 'new' is in the context of the child, a new idea to them.

Alexander (2021) discusses the value of dialogic teaching in light of educational policy, highlighting some contradictions that policy and pedagogical research have. This is not necessarily relevant to this research study but is important in this section as a lot of dialogic research is in reference to Alexander. It must be taken in light of the bias that Alexander has towards his own pedagogical philosophy and away from some governmental policy.

In the context of mental and emotional health, dialogic teaching is seen in Goddard, Smith and Boycott (2013), using paired talk to bypass the potential anxiety of proposing new ideas to a whole class without talking them through first. The support of peers is important in terms of mental health, in order to lessen the anxiety of speaking, is explored through the concept of interthinking in Littleton and Mercer (2013). This is the concept of using small group discussions to vocalise ideas and concepts before presenting them to a larger group. The support of peers, in this case, creates a camaraderie where first concepts can be developed or improved before they are brought to other people. Feiss et al. (2019) discuss the links between mental health impacts on adolescents after COVID and a form of dialogic teaching – although it is not named as this outright. While this does look at studies regarding teenagers, the impact of discussion to aid in mental health is still relevant in this paper.

#### Conclusion

This study fits into the existing research in its investigation of conversation. Conversation relates heavily to the reading surrounding dialogic teaching and how bringing teacher/student talk into the classroom can encourage a deeper understanding. In the same way, dialogic teaching to deepen understanding surrounding PSHE will add to the research surrounding metacognition and self-regulation seen in practice in the primary classroom. The investigation aims to discover how the conversation surrounding emotional and mental health can be developed, with the hope of informing the students about how their mental and emotional health can be aided and improved through self-regulation methods.

#### **Research Data and Ethics**

#### **Research approach**

For this study, an action research approach was used. The manner in which the research question originated and was posed lent itself easily to this approach as it allowed for cyclical, intervention based research (Punch and Oancea, 2014; Hopkins, 2014; Mills and Butroyd, 2014). Punch and Oancea (2014) go on to discuss the characteristics of action research, wherein the researcher is more involved and invested within the research, as opposed to being the outside body looking in on the study. This was also supported by Stenhouse (1975, as cited in Breslin, 2014) who first proposed the idea of the teacher also being the researcher, working through their study to, hopefully, have more impact and detailed findings – however it is appropriate to acknowledge that, due to the age of this source, Breslin (2014) goes on to observe subsequent studies and occurrences – such as the Bullock Report (1975, as cited in Breslin, 2014) which further support and develop Stenhouse's work.

Using a four-phase approach (see figure 1), first put forward by Lewin (1952 as cited in Mills and Butroyd, 2014), an action research approach provided a clear structure to follow through with the



Figure 1 - Four-Phase action research approach (Lopez Franco, 2022)

study. The researcher can then split their findings and resulting interventions (the Act in figure 1) into easily comprehendible parts.

#### **Data collection**

For data collection, a range of methods – observation, questionnaires and interviews - were used to focus on the question and the best way to answer. An embedded design was used; qualitative data was collected primarily, with some quantitative data collected within questionnaires to support this. The main reason for this was to scale some questions to simplify for the sample to be able to easily answer an otherwise abstract question (see Appendix 1) (Punch and Oancea, 2014). The sample was a convenience sample of the Year 2 class, where the researcher was placed. In addition to this, purpose samples were chosen from Year 4 and Year 6 to measure attitudes across the school. Data was compiled with themes of vocabulary knowledge, awareness of self, and dialogic ability in mind.

In order to first refine how the research would be conducted, observations were needed. This was done to avoid theoretical assumptions that the researcher may have subconsciously made about what their research will be (Millar, 2016; McNiff, 2013). The initial observations aimed to find how the conversation around emotional and mental health was approached in the setting before any further study began. All observations were done discreetly, where the participants were allowed to behave in their own natural way while still understanding the research being conducted. This was important to reflect on for the ethical considerations (Millar, 2016; Punch, 2014; Wragg, 2011).

Walliman (2020) considers variables when discussing reliability. Kumar (2019) further supports this in their definition of reliability: posing the question can this be recreated? Even if some variables were changed, this study is replicable and therefore reliable, as similar results could be found in other settings. While this is a fair statement, it is also important to consider the small-scale nature of the study. Punch and Oancea (2014) review the value of small-scale studies in the depth that can be covered in a very specified area, but acknowledge the difficulty of breadth of understanding due to limited time and small sample sizes. This study was limited due to the sample size and the time

frame in which the study took place due to the time constraints of working in a busy school environment.

When considering validity Kumar (2019; Walliman, 2020) defines it by posing another question: Has the study answered the question it initially posed? Using the data collected and subsequent analysis, in addition to the research discussed in the literature review, the study can be considered valid. The embedded method was used, collecting qualitative data and making a conscious decision to support this with further quantitative data in a range of methods, gives a suitable basis to answer the question posed.

#### **Ethical Considerations**

Before beginning the project, an ethical review was undertaken to approve the research being performed. Children were part of the subject of the research and are considered vulnerable (Punch, 2014; Millar, 2016) and extra ethical consideration is needed. The researcher was aware of the power imbalance in the children/teacher dynamic. While it was appropriate and professional to keep this, while conducting any data collection, the practitioner ensured to reassure participants that they should state their own thoughts and opinion, regardless of what the adults may think (Millar, 2016). Throughout the research, York St. John University's ethical guidance was adhered to in line with the ethical clearance form.

In order to begin research, informed consent was sought by the researcher, as suggested in Punch (2014; Gajjar, 2013). As well as Gatekeeper permission from the head teacher of the placement school, every parent of potential participants were contacted to secure passive permission (Gajjar, 2013; Hopkins, 2014; Millar, 2016) (see Appendix 2) to allow their child to take part in any data collection in regards to this study. During active data collection such as intervention or interview, every participant was made aware of what and why the research was taking place. This aligns with what McNiff (2013) says about honesty and omission. It would not have been ethical to collect the data without offering the opportunity for withdrawal first. In regards to observation data, the

children were aware that observations were going to take place throughout the teacher's placement in their class and that key observations were centred around the interventions.

#### Findings and Discussion including implications for and application to practice

Due to the cyclical nature of action research (Punch and Oancea, 2014), also see figure. 1, the findings and discussion will be written side by side, to aid clarity.

#### Baseline

Initial findings were done through baseline assessments in the form of observations. Information was collected about the school and its approach to mental and emotional health. The school in which this study took place studied PSHE through Twinkl and SEL independently. It is a large, suburban school, with a big population from a very wide catchment area. The population is primarily white and has a vast mix of socio-economic classes. After discussion with the Year 2 class teacher, with whom the researcher was placed, it was determined that a convenience sample of the Year 2 class (known collectively as 2JW) was best. The class had a range of races, genders, family backgrounds and socio-economic backgrounds.

It was found that the school's approach to their children's mental and emotional health was very proactive. Every classroom contained an emotions wheel (Hodder, 2023) (see figure.2) that linked to each SEL session the children had. It should be mentioned that Hodder (2023) is not the only emotions wheel that is available, but is the one found and used for this study. This was used to explore vocabulary surrounding emotions. The use of the wheel was noted but considered potentially more useful in later interventions.

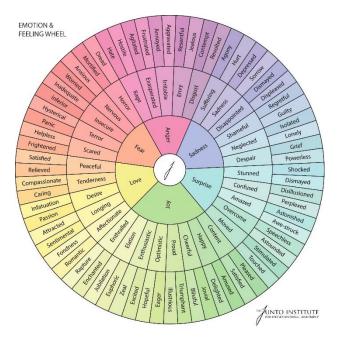


Figure 2: Emotions wheel (Hodder, 2023)

#### **Designing intervention 1**

In conceptualising the design of the initial intervention, the foundation knowledge that children already had from their SEL lessons was used as a starting point. The children were already familiar with the concept of discussing feelings and emotions and it was taken into account for use to advance the study. Philipson and Wegerif (2017) discuss the importance of talking and trust in what the conversations bring about. The SEL space that was created in school was based around trust and confidence that anything can be discussed in a kind and respectful manner – this is further reinforced in Rawsthorn (2021; Rogers, 2011).

When considering the question of this study, it was important to acknowledge that this school already had a prevalent and somewhat successful ability to discuss feelings and emotions, even though this may not be the case in other environments. It was observed that there was some active conversation regarding emotional health in the everyday environment, but not much in terms of mental health – which would be provided under PSHE. The discussion that did occur was often only during SEL sessions, not necessarily during the rest of the school day, unless an issue arose between children. This is where the gap for an intervention was identified. Could the topic be covered in more discreet circumstances, to encourage discussion in a more natural and unstructured way? The

premise of the first intervention would be through teacher modelling and observation. This is seen in Pugh (2021), who stresses that a successful PSHE curriculum should be integrated as part of daily classroom life and not just in PSHE lessons.

At this point, a questionnaire was done for all children in the sample class as well as children in year 4 and year 6. This was to provide a broader view of the attitudes towards discussion across the school. It was found that, while the school's ethos around SEL was very prevalent, the majority of pupils questioned here did not see the value in the discussion (figure 3).

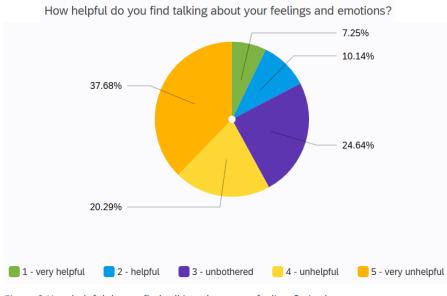


Figure 3 How helpful do you find talking about your feelings? pie chart

To break this down further it can be seen that the Year 2 sample was the vast majority of the 'very unhelpful' section (figure 4):

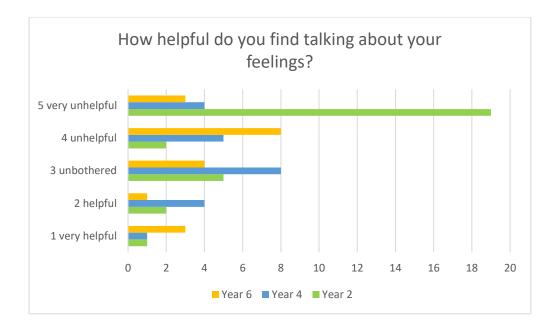
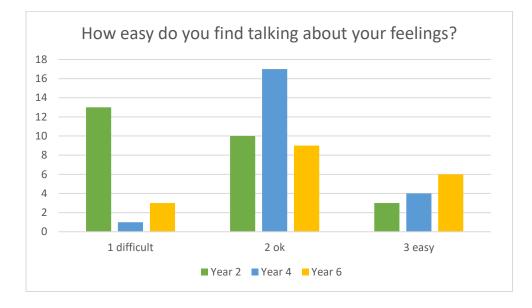


Figure 4 How helpful do you find talking about your feelings? bar chart



#### Furthering to this, the children were asked how easy they found discussing their feelings (figure 5):

#### Figure 5 How easy do you find talking about your feelings? bar chart

From this, it is evident that the Year 2 sample – the sample who took part in the intervention – were the least confident in this discussion. It was from here that the focus was very specifically put upon the Year 2 class as opposed to a whole school approach. This was done in order to be able to look with more specificity (Punch and Oancea, 2014) and in the hopes of gaining a more detailed understanding of how interventions may help. Due to the small scale of the study, this was a necessary adaptation.

#### **Intervention 1**

The first intervention was done through the teacher modelling a discussion of emotion and emotional regulation as the situation occurred. It was found that the children responded positively to the modelling and related it to their own emotions during and after the interaction.

The students already had the emotional intelligence to recognise the feeling (for example, frustration) and the reason for the feeling but responded well to the dialogic way that we discussed the situation. As a class, we discussed methods to all calm down and show emotional regulation (deep breathing and quietening our voices). This was a short 3 minute intervention in a mathematics session and was, overall, seen as successful. The children were calmer throughout the input of the class and refocussed on their initial task.

After this first intervention occurred it was found that the children then took to modelling their own feelings in a more dialogic way outside of the classroom too. There were observations from myself and other adults that pupils were discussing their feelings and helping to regulate each other. Taking space from friends if necessary became a key point of regulation for the year 2 class. There was also understanding between most pupils when this form of regulation happened. Due to the school being quite large, needing space was never an issue as both parties were often able to find another group to socialise with if they wished. This may have been different if it were a smaller school with fewer children to socialise with.

This model-based intervention was repeated four more times, each time being impromptu and discreet. Similar, positive, results were observed after the intervention. With continued reminders of regulation or of how to model the emotion, the results were noted as being quite well integrated into the student's everyday interactions.

#### **Reflection 1**

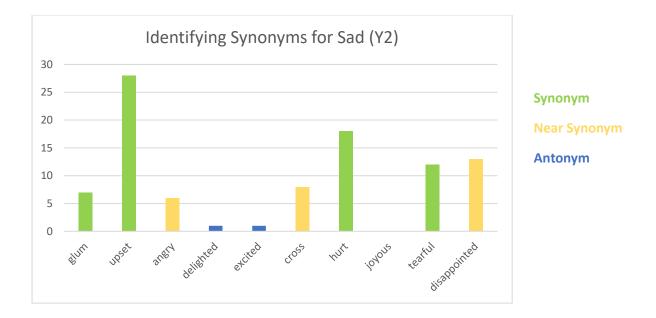
During the first intervention period, an interview was conducted with a class teacher in a Special School, whose class has varying SEND. Her school focuses on Social Emotion and Mental Health (SEMH) and PSHE as part of their core curriculum. The results of this interview showed similar methods being modelled in this Special School as was being done in this investigation. The similarities between the experiences of a teacher in a Special School environment and of one in a mainstream setting are written about in Mitsea, Drigas and Mantas (2021), this further supports the potential reliability of this study – no matter the setting, similar techniques can be used to get the desired result of self-regulation. The teacher expressed that modelling emotions and regulation methods as a teacher has been effective in allowing her pupils to see the relationship between feelings and actions. Her school also uses the zones of regulation (Kuypers, 2011; Sanger 2020) method to help the pupils to identify their feelings, emotions and how in control of their bodies they are. This was not applicable to 2JW at this time but would be an interesting tool to explore if needed in regards to emotional and behaviour management.

After observing the results of this intervention, I noticed three main areas that could potentially be addressed next: vocabulary knowledge, awareness of self, and dialogic ability. Vocabulary knowledge refers to the children's ability to recognise synonyms, near synonyms and the slight variation between the meanings of words. The children had already demonstrated their ability to use verbal language to express themselves in simple and heavily modelled examples. The next question that occurred was, could the children take their own pre-existing knowledge to apply it in terms of their own feelings, away from the impact their feelings may have on others? This is in reference to their awareness of self.

#### **Designing Intervention 2**

For the second intervention, it was decided to observe how to make the emotional learning about the self. To do this a simple worksheet was designed to focus on metacognitively identifying each emotion and taking time to consider the emotion being focussed on.

Taking from intervention 1 and the initial questionnaire (see figure 6), it was clear that the nuances between synonyms could be something to address so this was added to the worksheet.



#### Figure 6 Children were asked to identify synonyms for sad

While filling out the questionnaire it was important to explain this question. The purpose of the questionnaire was not to test reading ability, but their vocabulary knowledge. For this reason, the term synonym was defined to the children as 'a word that means the same as' (in this instance: sad). The words were then read through so that the children could tick which words they found to be synonymous. It was expected that the children may be quite successful in finding the correct synonyms, as the emotions wheel (figure 2) was a resource they were familiar with. Evidently, the pupils were aware of some synonyms but also identified words that may class as near synonyms in this investigation. 'Angry', 'disappointed' and 'cross' were all chosen with noticeable commonality, as

opposed to the outliers of 'delighted' and 'excited'. This indicated a lack of understanding of the nuances between these emotions. This was to be addressed in intervention 2.

To explore further away from completely dialogic teaching, I also wanted to include more abstract methods of identifying emotions. Jonauskaite et al. (2020; Godwin et al., 2022) discuss the effects of colour on emotions and so it may help to visualise and discuss emotions if the conversation begins in a non-confrontational question such as what colour do you think of when discussing (emotion). For this reason, the intervention sheet (Appendix 3) began with a challenge to imagine the colour and texture of an emotion.

#### **Intervention 2**

The premise was to see what words the children associated with the feeling and to expand their vocabulary knowledge in this way and hopefully expand their emotional maturity to identify the differences. This can then support future SEL lessons and encourage the more frequent use of the emotions wheel (figure 2), so that the children see more value in this resource. For example, in Appendix 4 a child has recognised a synonym for excited/excitement. As a class, this was discussed and other examples were given (Appendix 5 and 6) some of which were of varying accuracy. The accuracy of the synonym, or 'words that are like that emotion' as explained on the sheet, did not matter initially as the focus was on finding out where their vocabulary knowledge stood. Further examples can be seen in Appendix 7. The conversation afterwards was then a teaching opportunity to explore language. The intervention was done anonymously in order to keep in line with the ethics of the study. It was found that this anonymity also opened up the children to be more relaxed in their responses (figure 7):

Child A :"Miss Stead, do we have to put our name on it?"

Researcher: "No, no, I'd like it to be anonymous, that means I don't know who's done what. It's your work so you can fill it out how you'd like."

Child A: "So you won't know we've done it?"

Child B: "And it doesn't matter if we do it wrong?"

Researcher: "Well there's not really any wrong way to do it, it's whatever you want to get out of it, or want me to know."

Child A and C: "Ohhhh"

Figure 7: excerpt from observation recording.

The response observed from these interventions (3 in total – discussing 'joy', 'excitement' and 'worry') was generally positive. Children were bright and talkative during the input and activities; it was a brief activity that was able to be done in a small amount of time meaning they were often finished before they got too excitable or bored. The beginning colour and texture elements eased them into discussions together and had an unexpected addition of opening further conversation about how people experience things in different ways (prompted by different colours found for emotions, between friendship groups).

Another observation that contradicts this slightly was when 'worried' was the topic of the worksheet. The conversation was quieter and it prompted a lot of children to use the class 'worry bag' – a similar concept to that of the worry monster discussed in Norris and Kendall (2020)- or come to talk to me. This was not seen as a negative result. The children were demonstrating an awareness of self where they needed to express themselves in a constructive way and were doing so independently. This is a crucial part of developing emotional maturity (Department for Education (DfE) 2021). However, this may inform the overall results and feedback that the children gave in their final group interview about the investigation.

#### **Reflection 2**

In terms of researcher observation, the final intervention allowed the children to experience a metacognitive approach to emotional learning. The worksheet was able to break down different aspects of their own feelings and make them consider how an emotion makes them feel and what outside influence has on this emotion. They had the freedom to control their own outcome of the task and this was seen to influence how they behaved in the short term.

An interview was conducted with the whole class after the intervention sequence had been finished. It was found that, while the children enjoyed the first 2 sheets they filled out (regarding 'Joy' and 'Excitement') the third ('Worry') was not received in the same positive way. Their opinion was that of enjoyment for drawing and writing about positive emotions, but only using verbal communication for the emotions with more negative connotations.

A final questionnaire was conducted to ensure every child's voice was heard in the final result of the study (as this was not possible in the interview format). Below are some results from questionnaire 1 (Before) beside questionnaire 2 (After) (see figures 8-11).

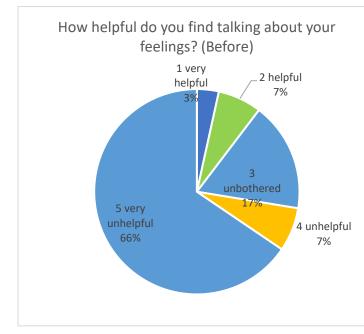


Figure 8 How helpful do you find talking about your feelings - Before intervention

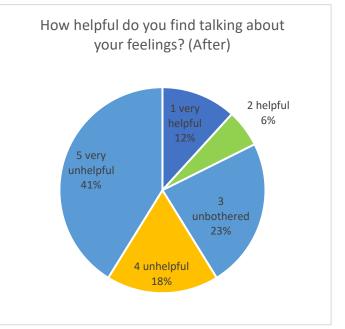
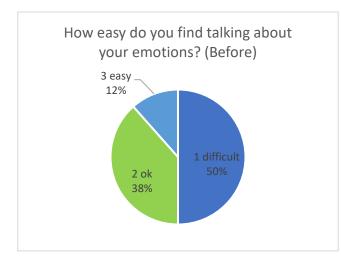


Figure 9 How helpful do you find talking about your feelings - After intervention



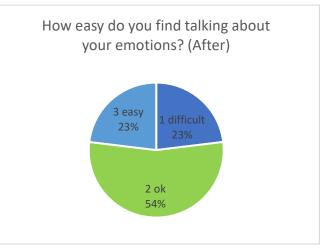


Figure 10 How easy do you find talking about your feelings -Before Intervention



It is clear from this that some improvement was made in regards to how children perceive the conversation around emotional health in primary education. In this study there could have been potential for more work on mental health in the conversation, however, this was been covered as a background topic around emotional education. By discussing how to self-regulate, there are underlying implications and methods towards good care of mental health.

#### **Conclusion of findings and research**

In the final interview with the class, it was found that the children had, overall, enjoyed their conversations and exploring self-regulation as a class. The class was successful in understanding how mental health is linked to our emotions and how talking about them has helped them navigate some social situations. Vocabulary knowledge may still need to be developed but this should improve with age and education in their English lessons. The main successes of the study were in terms of dialogic ability and awareness of the self, especially for children so young. The study had positive results in terms of the promotion of an open conversation and will hopefully continue, based on the attitudes that the children expressed.

The structure of intervention 1 is also one that will easily transfer to the wider curriculum as it can be done as the situation arises in any lesson. It may be especially valuable during PE where competitive spirit may give rise to increased emotion (Jiménez-Barbero, 2020).

#### Conclusion

The conversation around emotional and mental health is a broad and valuable asset to develop in the classroom. One of the key ways that this can be done is through open communication with all children and adults in the classroom in appropriate and respectful ways. Modelling this communication was a large success in this study and allowed children to mimic this independently both in and outside of the classroom.

Future practice should allow for this to be integrated seamlessly into the everyday primary school environment to work alongside subjects such as SEL and PSHE. A more practical worksheet based task, as seen in the second intervention could be used in these lessons to further explore emotions and develop emotional intelligence. In terms of discreet teaching, the teacher should try to be a model for emotional regulation and talk through the steps they have covered in the class to selfregulate. A whole class approach to self-regulation was seen to be effective and often productive. This practice should be transferrable to multiple settings including mainstream and special schools, with few adjustments necessary. A key feature would be to ensure trust and respect in the class community before beginning (Milkie and Warner, 2011; DfE, 2021), however, the practice can be done whilst building this environment to support the positive atmosphere that should be strived for. Further research can look at a broader range of samples, including that of different age groups to gather further data and identify any appropriate adjustments to cater for the changes in age. There is also potential to further research the mental health aspect of the question. While this was covered within the subject of self-regulation in this study – it could be addressed more directly to find misconceptions and begin age appropriate education and representation outside of the PSHE space.

This could be done similarly to intervention 2, but looking further into how a person can look after themselves during negative emotional incidences that may last longer than a fleeting emotion. This could be valuable to begin before puberty in children to address aspects of mental self-care as a forethought rather than a reactionary education to what they could experience (Islam et al., 2019).

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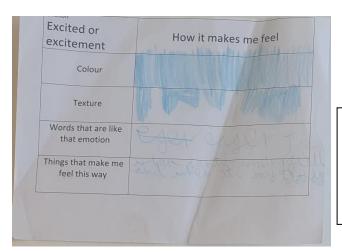
#### **Appendices**

Appendix 1: Example Quantitative Questionnaire question. A sliding scale. The face has 5 levels which are converted into the numbers 1-5. 1 = very helpful (grinning face) 5 = very unhelpful (grumpy face)

	•• •			
	Q3		.Ô.	
	How helpful do you find it to talk about your feelings?			
	Appendix 2 : Parent informed consent form for passive permission			
	Dear Parent/Carer			
	My name is Miss Stead. I am a trainee teacher at Yearsley Grove Primary school, in Year 2.			
	I am carrying out a research project during my final school placement as part of my BA Primary Education degree at York St John University.			
	My investigation aims to look at how mental health and emotional health topics are discussed in a primary classroom. I then hope to promote the conversation, in and outside of the PSHE space.			
	I want my research to further open up the conversation for students about emotional and mental health; to have the vocabulary and ability to speak about their emotions and, in general, about mental health issues.			
	I hope to gather data via questionnaires (pupils), group interviews (KS2 pupils) and observations of interventions with my class.			
	The participants will be completely anonymised in my paper and in any recordings taken. Records will mostly be taken in notes or voice recording if absolutely necessary.			
	If you <b>do not</b> wish your child to take part in any of this please fill in the slip below and return by <b>3<sup>rd</sup> February 2023.</b>	_		
	Please return this slip by 3 <sup>rd</sup> February 2023	_		
	NameYear Group			
	I <b>do not</b> give permission for my child to take part in this research project, run by Miss Stead.			
	Signed Date			

Emotion:	How it makes me feel
Colour	
Texture	
Words that are like that emotion	
Things that make me feel this way.	

Appendix 4: An example response of Intervention 2. The child has recognised a synonym for Excited/excitement



Written:

Words that are like that emotion: eager Joy full

Things that make me feel this way: when santa's coming and when its my birthday

# Appendix 5: An example response of Intervention 2. The child has thought of another word for Excited/excitement Excited or excitement Colour Texture Words that are like that emotion Lo ring Things that make me feel this way Feel this way

Appendix 6: An example response of Intervention 2. The child has thought of another word for Excited/excitement

	Excited or excitement	How it makes me feel
	Colour	
	Texture	
	Words that are like that emotion	Peake and
	Things that make me feel this way	Fiday because
G	whith my	Vinter ytobylub

Written:

Words that are like that emotion: Peaceful

Things that make me feel this way: Friday because I go to my club whith my freind toby.

Appendix 7: Three example responses of another round of Intervention 2.

