

Title

A Collaborative Strength Based Intervention Promoting Resilience through Solution Oriented Approaches

What did we ask? (Research Questions)

What is the impact of 'Working on What Works' on children's resilience?

What is the influence of 'Working on What Works' on teacher practices in the classroom?

What is the evidence base?

Within the local context of West Dunbartonshire, a disproportionate representation of children live in SIMD 1 and 2 with 42% of primary ages children residing in these deciles. The relationship between poverty and attainment has been well characterised and local evidence suggests that an equality gap between the most and least deprived continues to remain. Head Teachers within one learning community alongside their link Educational Psychologist collaboratively planned, implemented and evaluated to promote children's wellbeing as part of their Pupil Equity Fund plan. The focal desired outcome was to improve emotional health and social and emotional learning.

Following a needs analysis involving children, parents and teachers, Primary 7 children were identified as a target group because of vulnerabilities at the point of transition and children's own self-report ratings on a range of outcome measures indicated development areas of self-concept and expectations of their own learning. Head Teachers reported there was a need to support children's learning by developing qualities such as persistence and perseverance.

The needs analysis provided a rationale for a universal solution oriented classroom intervention called Working on What Works (WOWW). WOWW works with teachers and children to set goals for change and focuses on the solution rather than the problem. An important element was that learning was shaped by the children who set their own goals and measure progress, a key driver in developing children's resilience. Research has demonstrated that WOWW has led to improved cooperation, respect and relationships between peers (Brown, Powell & Clark, 2012) and that the approach is empowering and enjoyable for the children involved (Lloyd, Bruce & Macintosh, 2012). WOWW supports key National Improvement Framework drivers of teacher professionalism and school improvement by focusing on the quality of learning and teaching experiences in context.



What did we do?

Class Teachers (CTs) and Senior Managers were introduced to solution oriented approaches and the WOWW approach through an initial training session. Teachers identified and rated goals for themselves and the class. WOWW took place over 10 sessions and was implemented in 8 classes across 5 primary schools involving 177 children. A high proportion of children were living in areas high deprivation and in one school 84% of children were living in deciles 1 and 2.

Each of the sessions began by the EP observing the lesson and then provided feedback to each child and the class teacher. A class goal was agreed upon and observations continued with specific goals in mind. Children were asked to rate where they felt they were in terms of their goal and considered what would make them move one point up the scale. As the sessions progressed, feedback became more specific and positive interactions and behaviours were highlighted through noticing cards. The EP and class teacher met throughout the sessions to review progress and consider areas for development.

What have we found?

Quantitative Data

The collated findings through the use of the Strength and Difficulties Questionnaire and Stirling Children's Wellbeing Questionnaire indicated a ceiling effect. Children, teachers and parents rated within a desirable range and therefore demonstrating a high degree of prosocial behaviour alongside low levels of emotional and behavioural difficulties on each of the outcome measures prior to and following WOWW. The findings were consistent across all children and specifically those living in SIMD 1 and 2.

Within the group analysis there were however, individual children who expressed difficulties which reduced over time. The use of a targeted, case study approach to evaluation with individual children may be more suitable in view of finding that individual changes were subsumed within group scores. The outcome of quantitative data highlights challenges associated with capturing change in children's wellbeing over short periods of time and that the self-report measures in this instance were not sensitive enough to reflect changes.

Qualitative Data

Interestingly, the qualitative data collected through interviews with teachers and focus groups with children highlighted a positive impact despite no significant change evidenced through quantitative data. CTs reflected that "children were more tolerant and supportive of others in the class and encouraged one another to take part." CTs reported that they were more aware of the



importance of feedback and modelling in their own practice. They felt there was scope to use the approach for moderation purposes. All CTs reported that they made progress towards their individual targets. The teacher goal ratings reflected a positive influence on children becoming more independent in their learning, demonstrating more persistence in tasks and that children were more respectful and accepting of one another.

Focus groups with children highlighted that they understood the purpose of the feedback was "to help us build up our self-esteem and confidence" and the impact it had included "we say more compliments to each other so it brings brightness to their day" and "we build up what we think and feel each week, one teeny bit at a time." Children also noticed differences in themselves, for example one child with expressive language difficulties was initially a reluctant talker often opting to not talk in front of peers. This child's individual feedback was primarily focused on emphasising that he shared an idea with a partner, his 'noticing card' highlighted that he spoke to a group during session 7 and at week 10 his feedback drew positive attention to when he confidently spoke to the whole class.

What do we plan to do next?

Resilience can be a challenging construct to measure and therefore, caution must be exerted when interpreting the collected data. The long term effects and trajectories of children have not been considered within this project. Research has highlighted that when measuring strengths the value of qualitative evidence should not be underestimated. Unlike capturing progress in literacy and numeracy, resilience can be considered a dynamic developmental process which can be influenced by a range of factors including individual attributes, family environment and wider contextual variables. Resilience has been consistently reported to be influenced by connections with caring adults in the family, school and community, self-regulation and positive views. The benefits of a sense of connection to each other and school lead to positive academic and psychosocial outcomes (Allen, Kern, Vella-Brodrick, Hattie & Waters, 2018). Fostering positive relationships with teachers and a sense of belonging to a school community are protective factors against risks including poverty for vulnerable children and young people (Niehaus, Rudasil & Rakes, 2012). Therefore, focusing on developing relationships and children's strengths within school continues to be a worthwhile focus.

The EP is supporting CTs to share their learning within each of the schools ensuring a sustainable approach to dissemination. This involves building capacity of other teachers and to monitor the longer term impact. Promoting children's resilience underpins academic functioning and achievement. Fostering social competence, problem-solving skills, autonomy and self-efficacy continues to be the core of the collaborative project. As the project is ongoing, the next step is to support senior managers to reflect on the effectiveness of practice in a comprehensive way to consider how pedagogical approaches to teaching and learning relate to activities promoting social and emotional learning and how programmes can be operating at different levels for



example, targeted work nested within universal prevention programmes in order to achieve these aims.

References

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