University of Bath Research Study with Hamish & Milo

The emerging evidence

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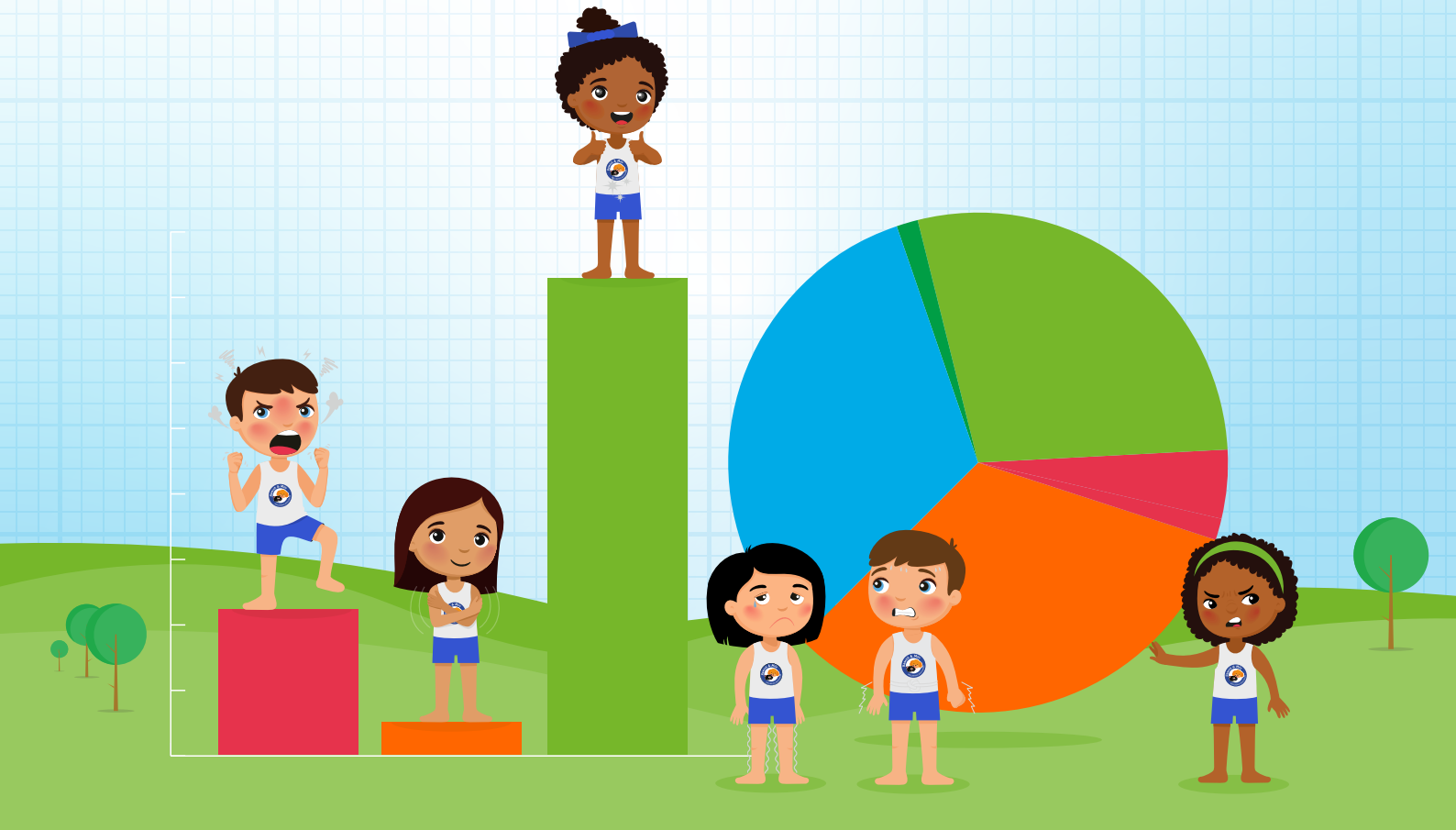


How do we support children to manage in a learning context when they are struggling with their social and emotional development and mental health?

How do we support children to express, understand and be able to regulate their feelings and experiences in order to manage in the learning environment and how do we equip the special educational needs and disabilities (SEND) and pastoral adults to feel confident to support the children in their care who have mental health and behaviour needs in a system where external services are stretched?

Emerging data shows statistically significant differences in observations about the emotional and behavioural presentation of children, pre and post Hamish & Milo SEMH intervention.

This report covers:

- The context and current climate for children's emotional and mental wellbeing.
- Whole school culture and how to ensure wellbeing is central through policy and practice.
- The vital need for qualitative and targeted intervention that centres around social and emotional development and acquisition of skills for life and learning.
- A comprehensive wellbeing intervention programme that offers creative activities, supporting resources and impact measurement tools.
- Emerging statistical data from the research study on the impact of the Hamish & Milo programmes.

University of Bath Research Project Team Professor Richard Joiner, Philip Clarke and Melissa Ellis

Hamish & Milo Team Anne Waddicor, Clare Williams, Andrea Middleton and Dave Grey

The University of Bath Department of Psychology is a department within the Faculty of Humanities and Social Sciences at The University of Bath. The department is consistently ranked within the top five departments in the UK for undergraduate Psychology degrees and has a outstanding reputation for research and teaching excellence.

- University of the Year in The Times and The Sunday Times Good University Guide 2023.
- Ranked 5th overall by the Complete University Guide 2024.
- Ranked 6th in the UK by the Guardian University Guide 2024.
- 92% of their research is classed as world-leading or internationally excellent by the Research Excellence Framework 2021.

Hamish & Milo is an organisation dedicated to improving children's mental health, wellbeing, social and emotional development through a range of wellbeing resources and training for schools and settings.

The Hamish & Milo mission is:

- To support children to feel happier, heard and connected.
- To provide an emotions curriculum to be used as targeted intervention to support all children with social, emotional and mental health needs.
- To provide pastoral leads, ELSAs and mental health champions with the programme and resources, training and pivotal digital impact platform to make a difference for children in their life and learning.

Contents

The current landscape in schools

Given the limited funding for schools and widespread service reductions, the demand remains to show sustained and robust pupil attainment. Against a landscape of increasingly high levels of exclusion and suspensions there is a growing need for child social, emotional and mental health (SEMH) support in education settings.

- Over recent years, there has been a continuous decline in children and young people's mental health and wellbeing, with now one in six children with a probable mental health disorder.[1]
- Thousands of children across the UK are waiting more than a year to access the Child and Adolescent Mental Health Services (CAMHS).[2]
- Children with SEMH identified as their primary need are 15 times more likely to be permanently excluded and 13.5 times more likely to be suspended than a child without.[3]
- Research consistently shows that the children at greater risk of developing mental health problems, include those with SEND, children living in lower income households and children from racialised communities.[4]
- The COVID-19 pandemic exacerbated concerns and evidence suggests that some children and young people's mental health and wellbeing has been substantially impacted during this period. In particular disadvantaged children and children with SEND, children with pre-existing mental health needs, particularly on accessing support,[5] those where domestic abuse was a factor and those bereaved during the pandemic. At least 10,000 children experienced the loss of a primary caregiver across the UK due to the pandemic.[6]

> "It is widely recognised that a child's emotional health and wellbeing influences their cognitive development and learning as well as their physical and social health and their mental wellbeing in adulthood."
>
> Promoting children and young people's mental health and wellbeing, Public Health England working with the Department for Education[7]

"I am particularly concerned to see such a surge in demand for help in my recent research. We're seeing waiting times increase for the first time in years, and evidence of an increasing postcode lottery for children referred for treatment... Support in school is vital and that's why we are increasing the number of school mental health teams to almost 400 by April 2023, providing support to 3 million children and young people."

Dame Rachel de Souza, Children's Commissioner for England[8]

Services referring children back to school

Long waiting lists for the CAMHS and other specialised services are evident, with mental health teams referring 25-40% of cases back to school for support.

Latest figures show that there has been an increase in the number of children referred to CAMHS - 734,000 in 2021-22, a 47% increase from the previous year and an 84% increase from 2018-19, the last year before COVID.[9]

Post lockdown NHS trusts were forced to raise the threshold to access support to tackle backlogs, resulting in hundreds of thousands of children being turned away or abandoning treatment. Almost 75% of English trusts said they had at least one young person who had been waiting at least a year, and 40% had children waiting at least two years - the average longest wait across all English trusts is currently 87 weeks.[10]

The impact is huge for our children and the consequences of delayed support are evident.

Mental health provision, organised through a tiered system, is shown in the diagram below.

Tier 1 provides early intervention and prevention services through schools with the teaching of the personal, social, health and economic (PSHE) curriculum and through community support services including health visitors and school nurses.

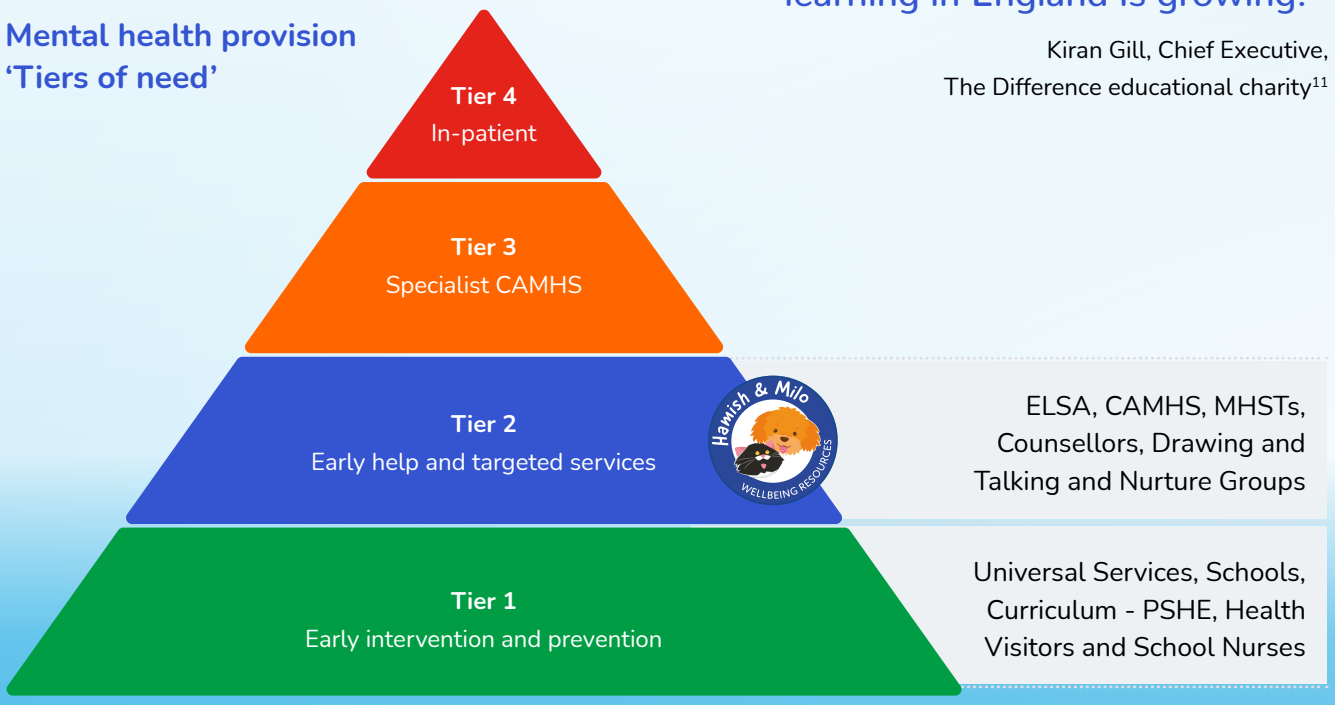
Tier 2 provides early help and targeted intervention aimed at supporting children with specific SEMH needs.

Tier 3 provides specialist CAMHS support.

Tier 4 provides specialised day and inpatient units, where people with more severe mental health needs can be assessed and treated.

> "The Covid-19 pandemic may be over but the pandemic of lost learning in England is growing."
>
> Kiran Gill, Chief Executive,
> The Difference educational charity[11]

Mental health provision 'Tiers of need'



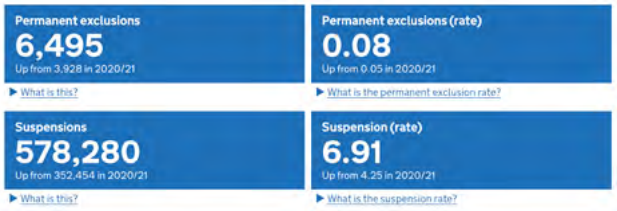
The context of distressed and dysregulated behaviour in schools

The rate of pupils suspended from school has risen for a fifth year running rising to 578,280 - increasing for primary pupils by 43%, from 46,200 to 66,200.[13]

That is the equivalent of 691 suspensions for every per 10,000 pupils.[12]

Permanent exclusions rose to 6,495 up from 3,928 in 2020/21, the equivalent of 8 for every 10,000 pupils.

'Persistent disruptive behaviour' was the most common reason - 50% of suspensions and 47% of all permanent exclusions - followed by physical assault against a pupil and verbal abuse or threatening behaviour against an adult and physical assault against an adult.

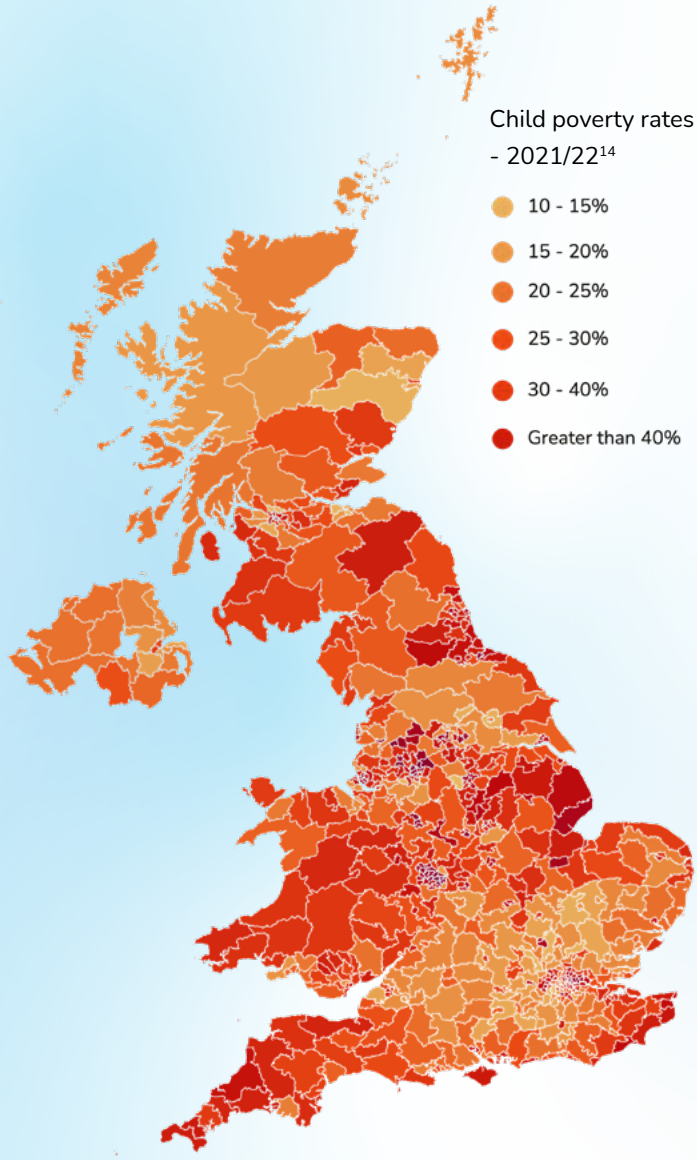


Source: Department for Education (DfE) Permanent exclusions and suspensions in England [18]

However, you can't legitimately think about children's 'challenging behaviour' in schools without thinking about the rates of childhood vulnerability and poverty.

4.2 million children are living in poverty in the UK. That is one in three children.

There were 4.2 million children living in poverty in the UK in 2021-22.[16] That's 29% of children, or nine in a classroom of 30.[17]



2.3 million children are living with risk because of a vulnerable family background

The Children's Commissioner's 2019 childhood vulnerability report

Analysis shows that since the pandemic those living in poverty were 3.7 times more likely to be sent home than other pupils and too many children from poor backgrounds are failing to meet expected standards in primary schools.[15]

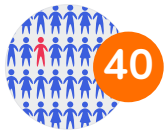
Persistent disruptive behaviour and exclusions

The reality is that children with social and emotional needs are at risk of exclusion and a long-term trajectory of social exclusion and mental and physical ill health.

Many children are living within environmental and relational contexts that hinder their capacity to thrive in life and learning. This demonstrates an even more urgent picture of the need for schools to provide enhanced wellbeing environments, a much greater focus on a social and emotional curriculum, wellbeing approaches and qualitative intervention.

Excluded children are more likely to be in care, have grown up in poverty, or have special educational needs.[20]

Schools need to be places of safety, nurture and care as well as providing environments for enriched learning.



There are on average 40 exclusions per day with one in 20 children given a temporary exclusion

Boys have higher suspension and permanent exclusions rates with nearly three times the number of permanent exclusions

The permanent exclusion rate for pupils eligible for free school meals (FSM) is around five times higher than for those not eligible

Persistent disruptive behaviour remains the main reason for suspensions and permanent exclusions

Looked after children are five times more likely to be temporarily excluded than pupils overall

More than half of all exclusions occur in Year 9 or above - suspensions and permanent exclusions peak at age 13

Black Caribbean pupils are over three times more likely to be permanently excluded

Pupils with special educational needs are six times more likely to be permanently excluded

The figures from the DfE published 20 July 2023 (collected from last year's school census) showed that the most common reason across all permanent exclusions was persistent disruptive behaviour, recorded 3,050 times (against 47% of permanent exclusions).

Persistent disruptive behaviour was also the most common across all suspensions or 'fixed period exclusions', recorded 289,600 times (against 50% of fixed period exclusions). The total number of pupils with a suspension increased from 182,500 to 252,500, an increase of 38% from 2020/21.

The increase in suspensions in 2021/22 is across all school types:

- increased for secondary pupils by 68%
- increased for primary pupils by 43%
- increased for special school pupils by 39%

Boys have almost double the rate of suspensions, and nearly three times the number of permanent exclusions. The suspension rate for pupils with an education, health and care (EHC) plan is 17.63, and for pupils with SEN with no EHC plan (SEN support) is 18.59, compared to 4.69 for children without SEN. Permanent exclusions for pupils with an EHC plan is 0.13, and for pupils with SEN support is 0.25, compared to 0.05 for those without SEN.

The suspension rate is 16.02 for pupils eligible for free school meals (FSM), compared to 4.26 and the permanent exclusion rate for pupils eligible for FSM is 0.20, around five times higher than for those not eligible, at 0.04.

The highest suspension and permanent exclusions rates are in the North East, at 10.69 and 0.13. The lowest suspension rate is in Outer London at 4.14 and the lowest permanent exclusion rate is in Inner London at 0.03.

Source: Department for Education (DfE) Permanent exclusions and suspensions in England July 2023[19]

Attachment difficulties in the classroom

We know that many children with SEMH needs are struggling with environmental and relational experiences that prevent them from being able to thrive, and impacts directly on their physical and mental wellbeing.

Many lack the trust and the safety of having had their emotional needs met and consequently, face difficulties in engaging in learning, forming relationships, and trusting the adults and peers in their lives.

Given the challenging backdrop of adversity, stress, and complex environmental factors, vulnerable children are at a significantly high risk of falling through cracks in the system and of being failed due to early childhood experiences.

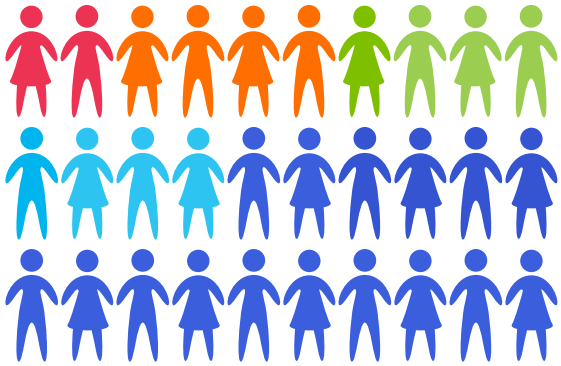
It is imperative that we provide these vulnerable children in our classrooms with a greater level of care, intervention and relationships with trusted adults who enable them to thrive in a learning context but who also give them a sense of safety, security and genuine care.

"Whole education approaches that prioritise and embed restorative and relational approaches are recognised as integral factors in improving behaviour and in protecting and promoting the mental health and wellbeing of pupils."

Behaviour and Mental Health in Schools Inquiry Report, 2022[21]

In a primary school average class of 30 children:[22]

- 2 live in a household where domestic violence or abuse is present
- 4 live in a household where domestic violence, substance misuse and/or severe mental health problems are present
- 4 have an identified special educational need (SEN) although only 1 have a SEN statement or Education, Health and Care Plan (EHCP)
- 4 have a mental health issue although only 1 will be accessing mental health services
- No apparent needs



29%

of children did not feel emotionally secure (e.g. trusting adults in school or asking for help when needed)

28%

of children were having difficulties giving purposeful attention (e.g. listening with interest or taking part in teacher-centered activities)

29%

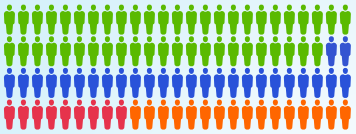
of children were having difficulties accommodating others (e.g. sharing classroom equipment with other children or being polite towards others)

Adverse childhood experiences

Adverse childhood experiences (ACEs) are stressful incidents or environments which children experience and which have the potential to cause long-lasting trauma and mental ill-health.

Psychological trauma is what happens when a person is overwhelmed by stress and feels that he or she is unable to return to a 'safe' state. When this occurs, it can cause lasting harm to the brain's stress responses, setting them on a trajectory for long term mental ill-health.

ACEs are traumatic events that can have negative, lasting effects on health and wellbeing

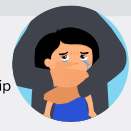


48% of the population have at least 1 ACE

Forms of ACEs

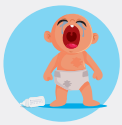
Abuse
- Verbal
- Emotional
- Physical
- Sexual

Violence
- Gang membership
- Crime victim
- High crime neighbourhood



Neglect
- Emotional
- Physical

Adjustment
- Asylum/refugee
- Migration



Prejudice
- LGBT+
- Sexism
- Racism
- Disablism

Traumatic loss
- Natural accident
- Illness
- Bereavement

Household and Family
- Poverty
- Substance/alcohol abuse
- Domestic violence
- Mental illness
- Young carer
- Parental separation/divorce
- Parental imprisonment

Consequences of ACEs

UK study suggests those with 4+ ACEs are:

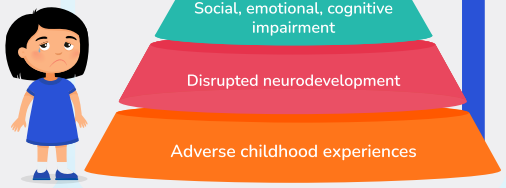
- **2x** more likely to binge drink and have a poor diet
- **3x** more likely to be a smoker
- **4x** more likely to have low levels of mental wellbeing and life satisfaction
- **5x** more likely to have had underage sex
- **6x** more likely to have an unplanned teenage pregnancy, or got someone accidently pregnant
- **7x** more likely to have been involved in recent violence
- **11x** more likely to have used illicit drugs e.g. heroin or crack
- **11x** more likely to have been imprisoned

Impact of ACEs

Around half of all adults living in England

have experienced at least one form of adversity in their childhood or adolescence 9% experienced 4+ ACEs

People with 6+ ACEs can die 20 years earlier than those who have none



Adapted from YoungMinds [23]

Children exposed to various ACEs early in life are at increased risk for a broad range of developmental difficulties, affecting both cognitive and emotional development.

Childhood trauma is at the root of many social and personal issues in our society. There is a huge link between ACEs and toxic stress and this impacts the developing brain and body when a prolonged activation of the stress response system occurs. Toxic stress can have damaging effects on learning, behaviour, and health across the lifespan.

Studies show clearly that ACEs can significantly raise the likelihood of over 80 damaging life outcomes, including alcoholism, drug addiction, criminality, mental ill health, suicide attempts, heart disease, liver disease, obesity and many more.

The greater the number of ACEs without a buffering relationship, the greater the exposure to toxic stress and risk of mental and physical ill health.

Children's social and emotional literacy

Social and emotional learning (SEL) is an integral part of education and human development. Learning to recognise and identify their own emotions and how to respond to the feelings of others is a core part of a child's social development.

The development of emotional literacy (EL) skills is important for developing a sense of self-awareness, boosting self-esteem, encouraging emotional self-regulation, and healthy emotional and social development.

There is growing evidence that children's skills can be improved through school-based SEL programmes. Numerous large evidence reviews indicate that, when well implemented, they have positive impacts on a range of outcomes, including:[25]

- Improved social and emotional skills
- Improved academic performance
- Improved attitudes, behaviour and relationships with peers
- Reduced emotional distress (student depression, anxiety, stress and social withdrawal)
- Reduced levels of bullying
- Reduced conduct problems
- Improved school connection

What becomes evident through the growing body of research, is the need for targeted social and emotional intervention and opportunities for children to develop social and emotional skills. They need to be heard and supported to talk about their lives and experiences.

All children, and especially those most disadvantaged, need to have their emotional literacy nurtured, supported and encouraged through feeling heard, understood and equipped with social and emotional skills.

"The process through which all young people and adults acquire and apply the knowledge, skills, and attitudes to develop healthy identities, manage emotions and achieve personal and collective goals, feel and show empathy for others, establish and maintain supportive relationships, and make responsible and caring decisions."

CASEL[24]

The development of social and emotional skills, in turn, predicts improved academic engagement and performance, more positive social behaviours, and lower rates of behaviour problems and psychological distress.[26]

The opportunity for schools

There is strong evidence to suggest that when staff members, including teachers and TAs, receive appropriate training and support, they can achieve outcomes comparable to those achieved by trained therapists for children with mild to moderate mental health concerns. The quality of the relationship is the powerful element that makes the difference to a child's ultimate wellbeing.[28]

There is a universal need to recognise the importance of staff emotional health and wellbeing and schools having a culture of collegial support, recognition and care. Good staff wellbeing is essential for cultivating a mentally healthy school, for retaining and motivating staff and for children's outcomes, wellbeing and attainment.

We have to start with the adults present in the lives of children and the significance of those trusted adults who show up for children every day, that check in with them, that show them they matter. These adults can actually do the deeper work if they are trained, supported and have qualitative programmes to use. These practitioners are often the holding point before referral to other services and actually can be the lifeline to the children in their care.

Qualitative SEMH intervention programmes and SEL resources for children, paired with training for pastoral staff and practitioners will maximise children's capacity to learn, engage within school life and to develop the social and emotional skills for learning and life-long mental wellbeing.

Schools should adopt and align evidence-based programme's to develop children's social and emotional skills throughout the school but it's especially important for children from disadvantaged backgrounds and other vulnerable groups, who, on average, have less developed SEL skills.

We also need a cultural shift in how we perceive 'behaviour' in schools. We must transition from considering behaviour as problematic and something that requires management, to adopting a more curious mindset about what a child's behaviour might be trying to communicate.

Schools cannot make these changes in isolation and action should be taken at national and local levels to build effective systems of support around schools and families.

A summary of the recommendations and key points from the Behaviour and Mental Health in Schools Report June 2023[27]

National Government

- A coordinated approach to school policy
- Staff development and wellbeing
- Improvement to SEN and disability system of support
- Embedding whole education approaches to mental health and wellbeing
- Role of Ofsted review

Schools

- Putting relationships at centre of culture
- Move away from one size fits all approach
- Improved mental health knowledge and awareness
- Listen to children and young people
- Work with families

Integrated care systems

- Building systems of support around families and integrating services

Social and emotional learning

Where social and emotional learning is embedded as part of a school approach, is embedded in the curriculum, explicitly taught and forms part of the ethos, culture and values of the school, research shows more advantageous educational and life outcomes for children and young people.

Within the societal context of emotional and mental health there is growing evidence to show the need for greater focus around targeted SEL intervention in schools, and particularly for children with greater levels of adversity in their experiences of life or children considered as disadvantaged.

We need to equip children with the language, tools and opportunities to talk about, share and reflect on their experiences. There is a need for:

- **A universal emotions curriculum** alongside PSHE
- **Enhanced intervention** for children with SEN and SEMH needs
- **A 'graduated response' approach** to support (moving between universal and targeted support as relevant) as an integral part of the whole school approach
- **Ensure that staff have support and continued professional development** to support both their own wellbeing and the implementation of the school's approach

Research indicates that children need strong, stable and nurturing relationships and opportunities where they feel safe enough to be able to talk about their experiences and feel understood.

The SAFE approach is included in the latest Education Endowment Foundation (EEF) 2021 recommendations for SEL provision in primary schools, alongside other recommendations for effective school practice:

- Teach SEL explicitly
- Integrate and model SEL skills through everyday teaching
- Plan carefully for adopting a SEL programme
- Use a SAFE curriculum
- Reinforce SEL skills through whole-school ethos and activities
- Plan, support, and monitor SEL implementation

There is extensive international evidence that teaching SEL through planned programmes can have a positive impact on children's attitudes to learning, relationships in school, academic attainment, and a range of other outcomes.

Improving Social & Emotional Learning in Primary Schools - Guidance Report[29]

The Emotional Literacy Pathway

Adapted from Faupel[30] and Goleman[31]

The Hamish & Milo Emotional Literacy Pathway supports the acquisition of social and emotional skills, recognising that children learn these skills sequentially, through connection creative activities and opportunities to talk about life situations.

Promoting children and young people's emotional health and wellbeing: A whole school approach

There are eight principles to promoting an effective whole school approach to mental health and wellbeing outlined in the PHE and DfE document that help contribute towards protecting and promoting children's mental health and wellbeing.

The eight principles has '**leadership and management**' at the core - responsible for the values, beliefs and clarity of vision, empowering others and ensuring that staff wellbeing is prioritised alongside provision for children - essential to ensure changes are accepted and embedded. Surrounding this are the seven other principles:

An ethos and environment that promotes respect and values diversity - The ethos is shaped by the way adults model interactions, how relationships are held as central to the values of the school and how all interactions show respect, care and value for everyone within the school community.

Curriculum teaching and learning to promote resilience and support social and emotional learning - This is both the 'taught' curriculum, through explicit PSHE and the direct focus on teaching social and emotional skills, and the experience of 'caught' social and emotional skill development gained through being part of a community where these skills are modelled through interactions, relationships and the social environment.

Enabling student voice to influence decisions - Empowering a sense of agency, involvement and the capacity to really listen to children and young people so that they feel heard and understood is vital. Children need to feel able to express their views and be included in decision-making, they need opportunities to feel safe enough to share their experiences and feelings and to know that they are valued, that they belong and that they matter.

Staff development - In order for staff to be able to respond to the wellbeing needs of the children in their care they need to feel well supported, heard and that they have an environment that prioritises their wellbeing too. We need to start with the adults and to ensure there are policies and practices in place to support professional development, provide collegial support and for formal, as well as informal measures such as supervision and staff forums that are accessible for all.

Identifying need and monitoring impact of interventions - There needs to be whole school awareness of emotional health and wellbeing so that robust measures are in place to identify need and ensure provision. Careful assessing, planning and monitoring of interventions is vital to ensure the best outcomes for children, with clear systems in place for reviews, report writing and provision mapping.

Working with parents and carers - Partnership working enhances outcomes for children and is of huge importance in enabling shared understanding and collaborative approaches to support the needs of the child as well as the family.

Targeted support and appropriate referral - Ensuring children have access to the right intervention, appropriate provision mapping to support their needs and systems of review is essential in promoting best outcomes, whilst having pathways of referral for wider services for multi agency intervention where needed.

Public Health England 2021[32]

Targeted SEMH intervention - an example programme and approach

Providing qualitative intervention, as part of a graduated response, is essential to enable children to engage in learning and to thrive. Hamish & Milo is a comprehensive emotions curriculum for use as a targeted intervention that provides pastoral staff with the programme, resources, training and impact measure tools to offer primary-aged children with SEMH the vital support for their social and emotional development.

All children need enhanced social and emotional teaching and can benefit from the Hamish & Milo programmes. The programme and resources provide everything mental health champions and pastoral staff need to deliver high quality nurture and small group intervention.

Hamish & Milo focuses on ten key emotional themes; friendship, resilience, anxiety, diversity, strong emotions and anger, change and transition, conflict resolution, loss and bereavement, sadness and self-esteem.

Actions words and me - conflict resolution. What is conflict and what is underneath it - rage, anger, hurt, pain, betrayal, shame, guilt. Helping children to be able to listen and really hear, to hear two sides of a situation, the beginnings of empathy, even though caught not taught... this helps to begin to see another's perspective and to feel compassion. This theme then looks at solutions, learning compromise whilst holding our own needs too. Learning and using scripts as a framework to help with these difficult conversations towards greater harmony and setting children ready for conflict and resolution through life.

Celebrating me - diversity. Celebrating who I am, looking at and celebrating diversity within our communities. But looking at the real feeling of when I feel I don't belong, when I feel different and to ensure children aren't feeling alone with that. With wide diversity, neurodiversity, gender, race, culture, LGBTQIA+ and disability we look at bullying, discrimination and how to stand up for a cause we believe in and to celebrate who we are, who we aspire to be and where we have come from.

Resilient me - resilience. Having resilience is a life skill that we all need to help us overcome obstacles, persevere and overcome adversity so that we can reach our own success and strive for our dreams. Resilience is having courage and finding inner strength even when it feels hard. But resilience can mean that we block feelings and avoid situations if we are not helped to overcome problems and gather our internalised strength by an empathic adult. It is through caring and containing relationships that we learn to express and talk about our feelings, obstacles and fears to be able to develop and grow our inner strength and resilience.

Calm me - anxiety. What it feels like to be anxious and worried. Where in my body and brain do I feel it and what sensations am I aware of, how does my body and brain react, what is panic, fear and how can I put images and words to the felt sense of it. Putting words to it begins to calm it and calm the amygdala panic state. Some of the activities are about challenging our worries and link to CBT approaches, scaling worries and managing the symptoms but also offer ways to express and make sense of our worries with mindfulness, self-care and compassion.

Finding me - sadness. This is missing from PSHE but so vital. Permission to feel sad, how we as adults can sit alongside and not jolly children out of sadness, permission to grieve, feel sad, recognise losses. Sometimes we know what we are sad about and sometimes it is too deep within... this is the road to depression unless we have chance to grieve, to feel heard and that we aren't alone with sadness. This theme looks at what is under sadness, how we mask it, our feelings on the outside and what is hidden. What to say and how we offer comfort and care when someone is sad, sometimes we don't know what to do as adults so how do we help children know how to respond.

New beginnings and me - change and transition. This theme looks at changes in terms of end of year, new teacher, class or school but other changes too, and sudden change and unwanted change, situations that can be a shock, the pandemic - unwanted and sudden change such as divorce and illness. These can bring huge feelings of fear, loss, uncertainty, anticipation, excitement so we look at hopes and fears how to plan for change, begin to accept elements of change and how to manage endings in order to move towards new beginnings.

Memories and me - loss, bereavement and grief. Looks at loss, grief and bereavement, cycles of loss, the range of feelings within loss, how to understand what is happening within loss and then how to create memories, to help the healing journey.

Amazing me - self-esteem. This is about mattering, this is about value, how I see myself and my capabilities, and loveableness. We feel this from within from the perceptions of those nearest to us, our primary carers, those who set us in a sense of being loved and that we matter. If we haven't had this we internalise a lack of self-worth and self-belief and the scripts often become set for life. So this is about recognising and celebrating our strengths, recognising how we can build our own self-esteem, develop a sense of self-worth and become assertive, to care and have strength to know inside ourselves that we matter.

My friends and me - friendship. Children need opportunities to talk about their friendships and the range of feelings and experiences within them and learn how to navigate the tricky times through strategies and activities. This is about qualities of friendship, the beauty of friendship but also when friendship hurts, when we feel betrayed, what to say and how to communicate. Being authentic in what we feel and need, the absolute importance of honesty and clarity and strength in saying how we feel - this sets us on a path for all relationships and in time intimacy where we can be our true selves and say what we feel whilst holding respect for another, problem solving too and how to navigate through the ups and downs.

Exploding me - strong and angry feelings. This is vital in giving permission and validation for angry and explosive feelings, challenging the sense of mad and bad and in fact celebrating the importance of anger in being our inner guard dog - signalling distress and feeling unsafe. Anger is what we see but underneath there are very different feelings - hurt, pain, fear, anxiety. We need to help children know what is happening in their bodies and brains and know that this is their in built amazing defense system of fight-flight. We need this for life, for survival and need to cherish and nourish it! Embrace it, recognise our triggers and then we need safe ways to expel it, to express it and regulate it.


Amazing me
Celebrating me
My friends and me
Exploding me
Resilient me
Connection
Co-regulation
Belonging
Creative enrichment
Calm me
Finding me
New beginnings and me
Actions, words and me
Memories and me
Emotional Literacy & Social Group Development
Social Environment, Adverse & Positive Childhood Experiences
Adaptive & Social Brain
Human Needs & Development
Attachment & Emotional Regulation

Hamish & Milo programme theoretical models

The fundamental principle underpinning the entire Hamish & Milo Wellbeing programme is that of the vital human need for 'connection and belonging.'

The approach is built within the theoretical landscape of relational connection, relational intervention and the evidenced-based premise that empathic and nurturing relationships build a safe and trusting connection that enable all people to: feel heard and understood, be seen and recognised and feel valued and responded to.

Nurturing relationships create a safe and trusting connection. The programme is supported by the school practitioners to enable emotional safety and a sense of belonging. This helps the children talk and express their feelings about what is happening in their lives, share experiences, develop empathy and friendships in a small group environment of safety, value and belonging.

The framework for Hamish & Milo therefore comes from a range of theoretical contexts which hold the quality of relationship at the core of support work, and togetherness with peers as a social group.

Hamish & Milo is based on Attachment Aware Theory and the importance of early social and emotional development, as well as understanding the emotional stress that many children with SEMH needs experience and the impact on the developing child.

The importance of co-regulation and emotional safety, having language and emotional vocabulary to help make sense of experiences and situations is crucial in the development of emotional literacy skills to enable social relationships, communication and emotional regulation.

Hamish & Milo supports the development of emotional literacy skills, recognising that children learn these skills sequentially, through connection and communication, in accordance with recognised stages of human psychosocial development.

"Connection is the energy that exists between people when they feel seen, heard and valued; when they can give and receive without judgement; and when they derive sustenance and strength from the relationship."

Dr Brené Brown[34]

Hamish & Milo programmes include creative enrichment activities designed to enable discussion about children's life experiences and emotions. Each activity includes a psychoeducation element to help children understand what is happening in their bodies and minds so that they can begin to regulate and reflect with an empathic adult in a way that supports their emotional wellbeing.

Hamish & Milo also adheres to the SAFE approach; Sequenced - connected and coordinated activities to foster skills development; Active - active forms of learning to help children master new skills; Focused - containing activities that clearly emphasise developing personal and social skills; Explicit - targeting specific social and emotional skills.[33]

SAFE Approach

Capturing the impact

Social emotional learning plays a crucial role in the success of children's education and overall wellbeing. As the saying goes, "what gets assessed gets addressed" so the importance of evaluating and addressing SEL and SEMH needs and programme impact is vital in order to nurture children's wellbeing and development.

Impact measures ensure progress can be monitored and reviewed through EHCP, SEND and PEP reviews, inform future planning and signposting, but vitally so that there is evidence of improved outcomes for children. When prioritising approaches and resources consider if the programme is paired with qualitative impact measurement tools.

Hamish & Milo provide a number of impact measure tools including:

Navigator Impact Dashboard

Navigator is an innovative digital developmental platform to assess social and emotional learning in schools, demonstrate the impact of Hamish & Milo resources and each child's journey. Practitioners can track progress, see trends at child, group, school and trust level, aligned to the emotion themes and provide reporting to demonstrate the impact of your SEMH interventions.

Child Wellbeing Profiles

Our primary impact measure tool is our Child Wellbeing Profiles which provide a descriptive impact framework of underlying needs and presenting behaviours, giving you a shared language and understanding of the mental health needs of individual children.

Child's Voice Questionnaire

The Child's Voice Questionnaire shows the experience from the child's perspective. Much of this is listened to throughout the group experience but the questionnaire is a resource to support in highlighting each child's experience.

Strengths and Difficulties Questionnaire (SDQ)[35]

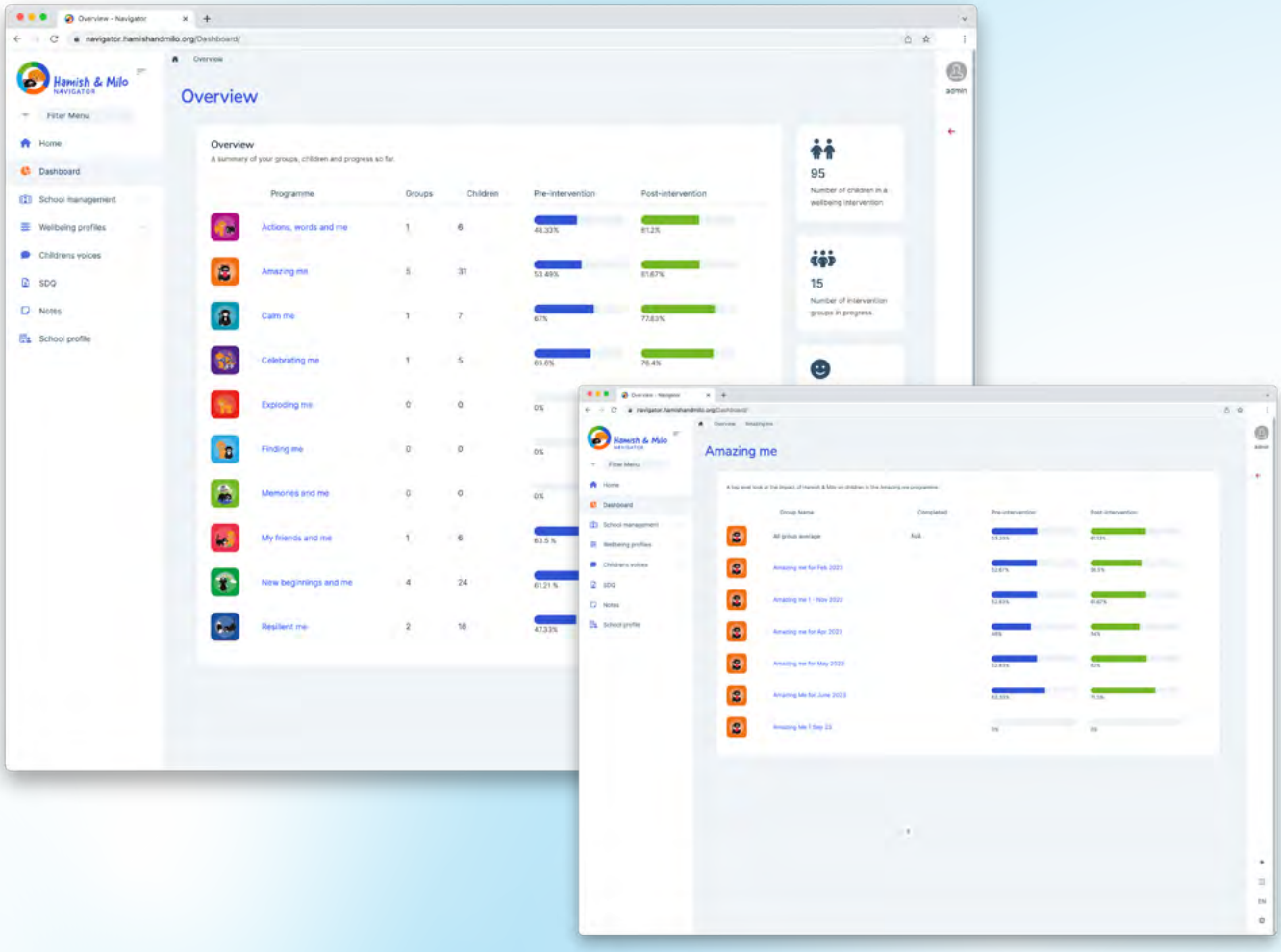
SDQ is a standardised clinical measure widely used in health surveys, research and clinical work to show changes in children's presenting behaviours, through five sub scales: emotional symptoms, conduct problems, hyperactivity - inattention, peer problems and prosocial behaviour.

Compass

Compass is a tool to identify individual child strengths and areas of need for social and emotional skill development. Compass provides a general overview of a child's emotional and social development highlighting the areas of strength and particularly opportunities for development and is a supplementary tool to aid in intervention planning and signposting.

Navigator - vital tracking and assessing of progress

With Navigator, schools have the ability to monitor progress and observe emerging patterns not only at the individual child level, but also within groups, schools, and trusts so they can demonstrate the tangible impact of their SEMH interventions.

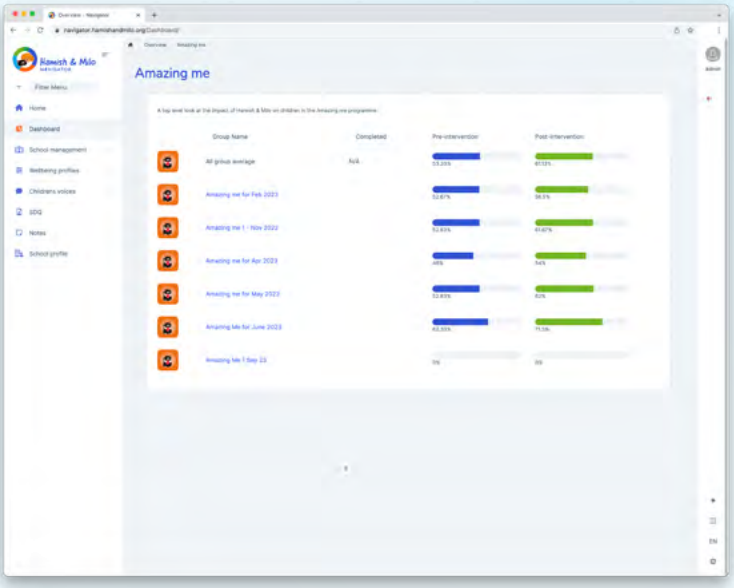


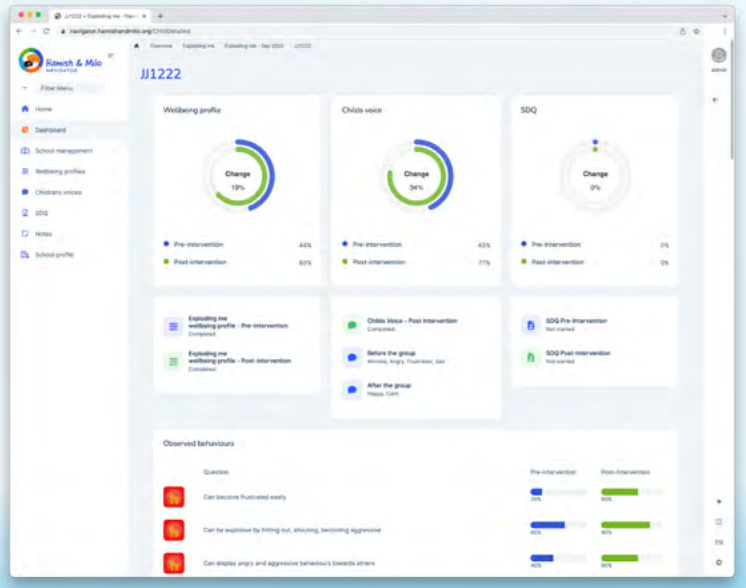
Through pre- and post-intervention data such as, Child Wellbeing Profiles and Child's Voice Questionnaires, practitioners can track progress, see trends at child, group, and school level, aligned to the different emotion themes and gain vital insight and reporting to support their SEND and inclusion strategy.

- **Live dashboards** - provide visually engaging, easily digestible data at individual child, group, programme, school, and trust levels, as well as representing the child's voice.
- **Evidence-graduated response plans** - data and information to support report writing, signposting to multi agencies and progress tracking for Individual Education Plan (IEP) and Personal Educational Plan (PEP) and enhanced provision.
- **Evidence EHCP plans and reviews** - a framework for SEMH support as part of the graduated response within EHCP provision.
- **Insight for Ofsted Inspections** - demonstrate the range and impact of targeted intervention, SEMH provision and evaluation.
- **GDPR compliant** - no child names, just child codes, and all the information is stored in state-of-the-art, secure Microsoft Azure data centres in the UK.

Assess at trust, school, group and child level

The Navigator dashboard provides access at trust or school level and presents the emotion theme programmes by groups with a top-level summary of each group and their improvement that allows you to build data trends over time to support the growing pedagogy in your setting.





The interactive data can be clicked on to 'drill-down' into more data per programme, group and child - vitally viewing the impact comparatively via Child Wellbeing Profiles, SDQs and the Child's Voice.

- Top level group summary to aid admin and management
- Data is aligned to the different emotion themes for insight and reporting
- Key statistics on improvement per child, group, school and trust
- Scores are pre- and post-intervention per child % aggregated up into group level
- 'Drill-down' to child level and the interactive data score 'rings' highlight impact
- See impact at micro-level e.g. each behaviour and protective factor

Assess each child week on week, track progress, see the pre- and post-data and record observations.

- Checklist for monitoring routine tasks such as completing a Child Wellbeing Profile and Child's Voice Questionnaire for each child
- Highlights commentary from child and adults
- Email child reports

Navigator provides data, insight and information to support report writing, signposting to additional services where required and tracks progress for IEPs, PEP's and enhanced provision.

The emerging tentative findings

In total over 90 schools, 600 children and 250 education professionals contributed to this initial study independently analysed by University of Bath, Department of Psychology led by Professor Richard Joiner.

What follows is the research framework thus far in terms of methodology and means of capturing the impact. The evidence from the initial study and the emerging tentative findings are then presented in visual form through tables, graphs and statistics, demonstrating the outcomes.

Our emerging process and methodology:

- Ethical approval secured through The University of Bath Ethics Committee.
- Engagement of schools and participants in the study.
- Training and orientation for schools in the implementation of the Hamish & Milo programmes and impact measurement tools.
- Gathering of data from observation and mixed qualitative questionnaires and quantitative methods - school stories, supervision and feedback.
- Data focus based on theme specific Child Wellbeing Profiles, Child's Voice Questionnaires and observation during sessions, and Strengths and Difficulties Questionnaires (SDQs) as the standardised measure.
- Analysis of data, evaluation, insights and sense making.
- Programme theory and research framework development and prioritisation of future research methods and focus.

Our research framework

Our research framework currently involves a single sample (children who engage with Hamish & Milo). We have used a before-after (or pre, post) research design, using reliable and valid outcome measures, and a range of bespoke measures too.

We have also used a mixed methods approach, that involves qualitative and quantitative data collection.

Over time, we would like to develop an understanding as to whom Hamish & Milo works for, under what circumstances and how it works.

Participating schools desired project outcomes

We asked all our participating schools what they hoped to achieve for their school by being part of this project, these are just some of the comments.

"We hope to be able to support our young individuals with their emotional and social development."

"To support our children with their range of needs related to social, emotional and mental health and their overall wellbeing, growth mindset and ability to deal with anything that comes their way."

"To provide children with the skills and strategies so that they are able to identify, express and manage their emotions."

"To provide targeted supported for children with high numbers of ACEs which is impacting on their wellbeing, self-esteem and readiness to learn."

"To better understand the needs of the children and their barriers to learning so that we can develop better practices with them. To further develop the skill set of the pastoral team and enhance the pastoral offer trust wide."

"I hope that children can access a meaningful intervention which will give them the skills to manage their issues. I hope that it will empower our support staff in helping to make a difference to children's emotional needs and mental health."

"To support and further improve the emotional wellbeing of our children."

"To be able to support our pupils with their social and emotional needs."

"Our intention is for the project to improve outcomes for our children. We also hope that we will have access to a data set that can support the work we are doing, particularly when sharing such information with outside agencies such as OFSTED and when working with governors."

"A wellbeing resource to support the ELSA work we started last year with the ability to track impact."

"We hope to gain knowledge and experience that can be applied to support some of our most emotionally vulnerable children."

"For staff to have a stronger awareness of the impact of emotional wellbeing on the children in our care. For children to have strategies to support them emotionally and be more confident.

"Support social emotional needs. Give children coping strategies."

"To empower and equip our children with the best strategies and support for the future in an ever-changing and complex world."

"We want the children to feel like they have a safe and secure environment where there needs are met and that they can discuss any concerns with us. We want to be able to measure the impact of the intervention and see positive outcomes for all the children who take part."

"Improving provision for pupils not reaching the threshold for CAMHS or other external therapies."

"We have identified the need for tailored interventions in particular in the areas of self-esteem and friendship issues. We look forward to being able to measure the outcome of interventions and developing staff confidence in delivering wellbeing interventions."

"Improved interactions between some of our children, staff empowered to begin and see through a project to support children, enthused children who have the confidence to freely communicate."

"Support for staff (ELSA) to deliver SEMH programmes and support for students who need SEMH support."

"To be able to implement a specific programme that supports our children with SEMH needs. A tailored, targeted package will hopefully impact positively on wellbeing as opposed to trying to source various resources from various places. For my staff to feel confident in being able to support the children within their care, knowing that there is a resource in place which they could use to support children."

"To provide emotional support for a wider range of pupils across the school. To enable pupils to develop strategies for self help and to build resilience. Pupils to become more emotionally aware to improve their overall mental health and wellbeing."

"Improved outcomes for pupils with increased staff knowledge and skills."

"To support pupil wellbeing to improve behaviour and attendance."

"To improve our provision and support for children who are finding elements of wellbeing difficult. To increase staff capacity to respond to children who are struggling."

"To create a happier school."

"I hope that as a ARP, we can provide a stronger therapeutic approach and that the child gain strategies, work through trauma and increase their capacity to manage their own feelings and thoughts."

"To support the mental health and wellbeing of more children in the school alongside our Trauma Informed Schools work."

"Structured approach to wellbeing with specific focus, measurable results and children needs supported."

"We have worked hard to improve our SEMH offer for pupils but we are finding an increase in needs of pupils. We have some staff that are able to support pupils but we feel that by using a programme like this we will be able to train and utilise the support of more staff members. We also needed a way to formalise measuring impact."

"To support and improve the outcomes for those children with SEMH needs using a research based intervention. To upskill a teacher and a TA so they can deliver a research based intervention and to support children with SEMH needs and their families."

"All TAs and new ELSA role to be using the programme to respond and support the children's emotional needs. To support staff development to be in a better position to spot and respond to needs at early onset rather than once problems have manifested."

"As a staff we feel very passionate about children's wellbeing, we want to become more knowledgeable about how we can support the various needs of our children. We strongly feel that if children are not happy and settled then they will struggle to achieve. We are keen to improve our attendance and decrease our persistent absences."

"A deep and effective understanding and support of SEMH within our school and expertise in a programme that can help us deliver effective support and interventions where needed."

"We hope to develop further skills and strategies to support our young people's social, emotional and mental health and enable them to become more independent and confident in managing their emotions."

"For school to have a suitable and established intervention for children with emotional and mental health wellbeing needs."

"We hope to promote better communication between children in being able to talk about their feelings to improve their relationships to develop inclusion."

"To strengthen and empower our staff to understand trauma response in our younger students and how we can support them in the short time they are with us. As our children are all in hospital or have serious mental and physical health conditions, there are commonalities in the types of trauma we see, and so we would like to be able to fully understand and support our cohort in their time with us and their journey back to life beyond the hospital."

"By being part of the project, we hope to draw on other school's experiences to influence our practice and have positive outcomes at an early intervention level."

"To allow children early access to mental health interventions before their need is greater. To give children strategies to cope in modern life."

"We hope that by teaching a structured program of emotional literacy we will be able to equip our children with the skills they need to manage school life, increase their resilience and be able to emotionally regulate. We also hope to improve communication with home and be able to monitor and track progress more effectively."

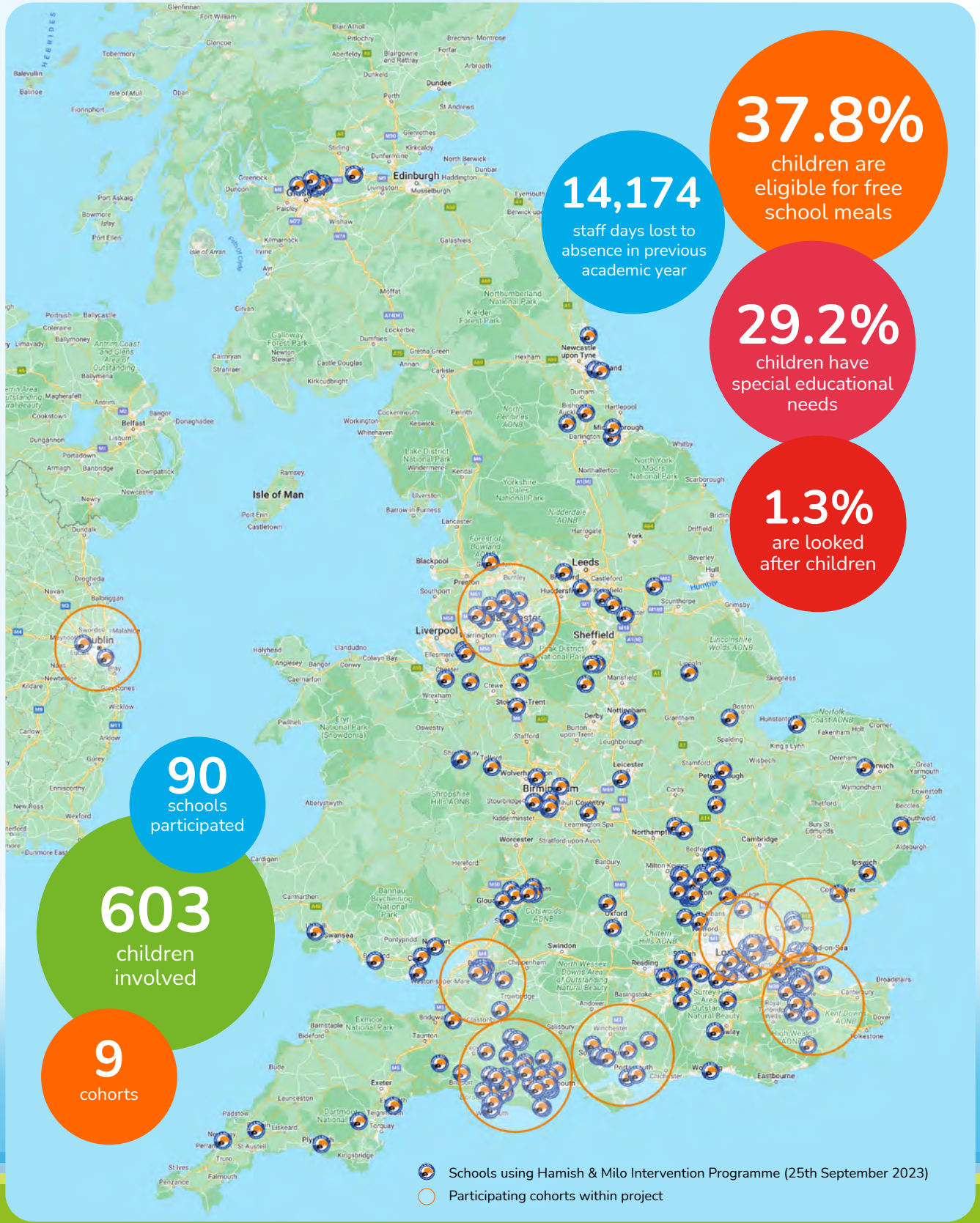
"To develop our SEMH offer and to meet the needs of our children."

"To have a fit for purpose scheme to support the SEMH needs of all pupils. Since Covid, we have seen increased numbers of children with a range of SEMH needs for which we did not have an easily accessible scheme to support. We hope that this scheme will allow us to provide an intervention that is consistent and meet the needs of the children enabling them to be successful learners and happier individuals."

"We hope to make a difference to our children's lives by providing tailored, focussed, fun interventions. Measuring the impact will also be invaluable."

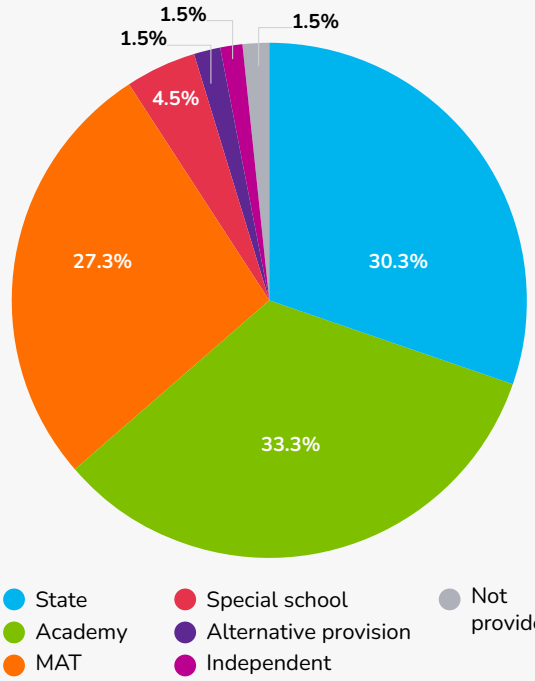
"To support a higher number of children needing SEMH support through working in small groups rather than just with individuals. To train up more staff to be able to carry out group interventions."

Demographic overview



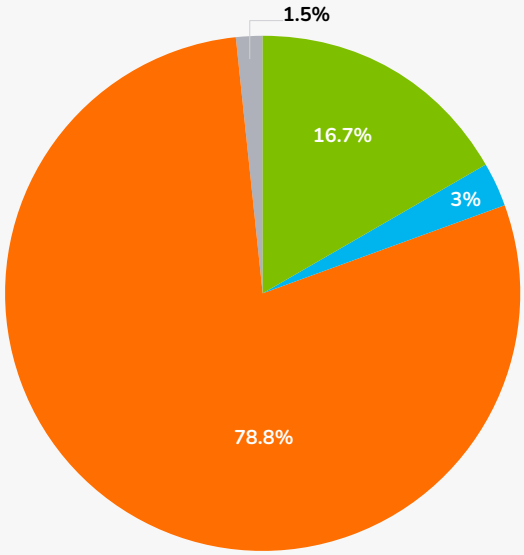
Participating schools demographics

Type of provision/establishment



State
Academy
MAT
Special school
Alternative provision
Independent
Not provided

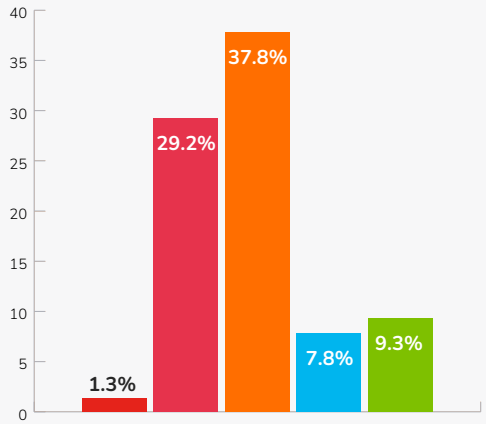
School religious denomination



Christian
Roman Catholic
No religious character
Not provided

Children's situation

Children = 603



LAC (Looked after child)
SEND (special educational needs or disability)
FSM (free school meals)
EHCP (Education & Health Care Plan)
SW (Social worker involvement)

A visual representation of the children in this study and their situation

No apparent needs

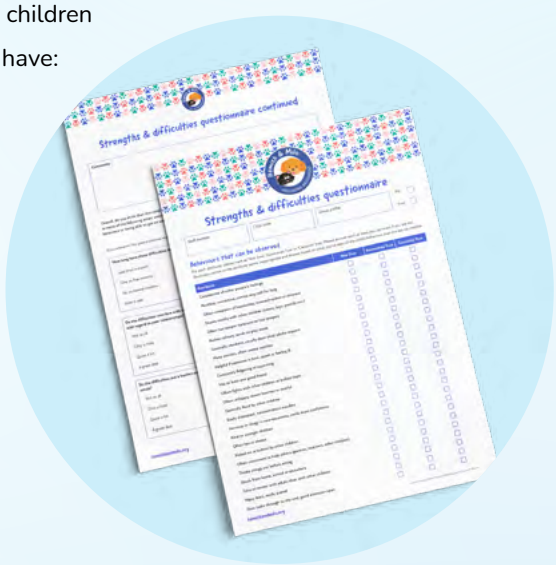
Strengths and Difficulties Questionnaire (SDQ)

This section covers the data relating to the SDQs a short emotional and behavioural screening questionnaire for children aged 3 to 16. It exists in several versions to meet the needs of researchers, clinicians, and educators and was chosen for this study as it is probably the most widely used measure of its kind globally.

The SDQ asks about positive and negative psychological attributes across five scales with a total of 25 items of emotional, behavioural, hyperactivity/inattention, peer and prosocial behaviours. Each psychological attribute is scored based on answers of, 'Somewhat True' 'Not True' and 'Certainly True' providing a score indicating area(s) of difficulty.

SDQs

- Before and after measure
- Trusted adults completed, based on observations when working with children
- The areas of focus are on five types of experiences that children may have:
  - Emotional experiences
  - Behavioural experiences ('Conduct')
  - Behavioural and interaction energy ('Hyperactivity')
  - Difficulties when interacting with peers ('Peer problems')
  - Positive interactions with peers ('Prosocial behaviours')
- The SDQ is viewed as an industry standard in some areas education, health and social care. The measure is 'reliable' and 'valid' and there are 'norm tables' and indications for clinical support



A short note about the data presented underneath each graph

This data in this report has been presented visually and using percentages with the aim of being 'plain speaking' to different audiences. Underneath each graph, there is a short line of data that looks like this: **t(number), p<number, d=number**

This information has been presented for audiences who need to interpret the graphs according to the statistical tests that were used. The statistics key for those audiences is:

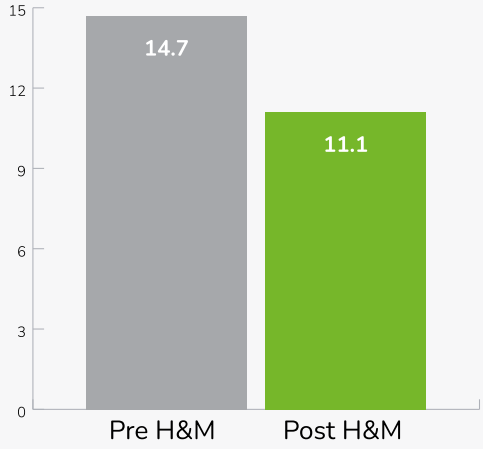
t(number)	t: t score from the inferential t-test - (number): degrees of freedom, showing how much the data varies within the distribution of scores from the pupil outcome measurement data.
p<number	The p-value or probability value, is a number that shows how likely it is that the data would have occurred by random chance (i.e. that the null hypothesis is true). The level of statistical significance is usually expressed as a p-value between 0 and 1. The smaller the p-value the less likely the results occurred by random chance, and the stronger the evidence that the null hypothesis should be rejected. The p-value doesn't say if the null hypothesis is true or false. It only says how likely it is that the data observed (or more extreme data) if the null hypothesis was true.
d-number	This statistic states the 'effect size'. This is the size of the difference in the mean scores between the before and after (or pre, post) outcome measure scores at the start and end of the Hamish & Milo intervention. An effect size of 0.2 = small effect. An effect size of 0.5 = moderate effect. Finally, an effect size of 0.8 = large effect. So, the greater the d statistic, the larger the effect (or difference between the pre, post scores). There are large effects in some domains and smaller effects in other domains, when pupils engage with the Hamish & Milo programme.

More information on Strengths and Difficulties Questionnaire (SDQ) from Youth in Mind youthinmind.com and sdqscore.org

Strengths and Difficulties Questionnaire (SDQ)

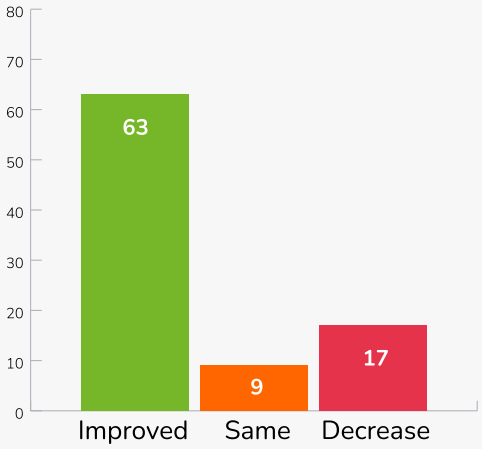
Strengths and Difficulties Questionnaire (SDQ) Overall

Children = 478



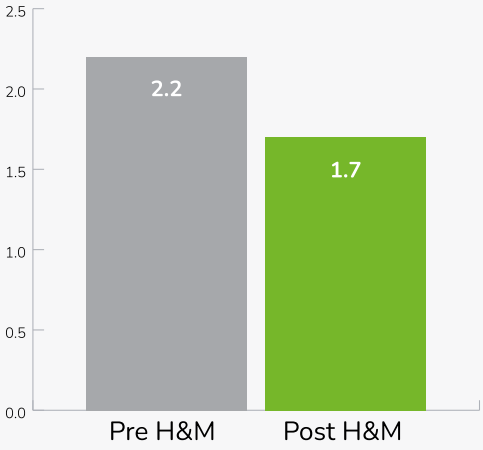
t(427) = 13.53, p < 0.001, d = 0.65

Strengths and Difficulties Questionnaire (SDQ) Improvement Score (%)



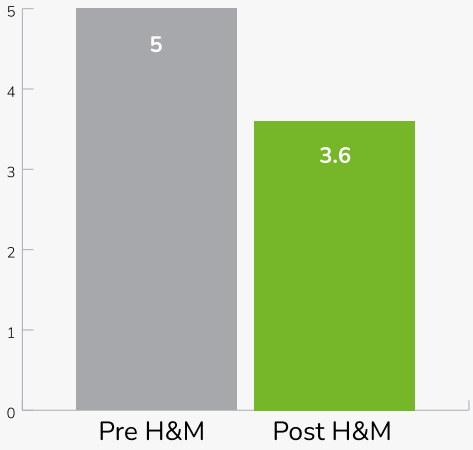
t(427) = 13.53, p < 0.001, d = 0.65

Strengths and Difficulties Questionnaire (SDQ) SDQ Mean Levels



t(427) = 9.49, p < 0.001, d = 0.46

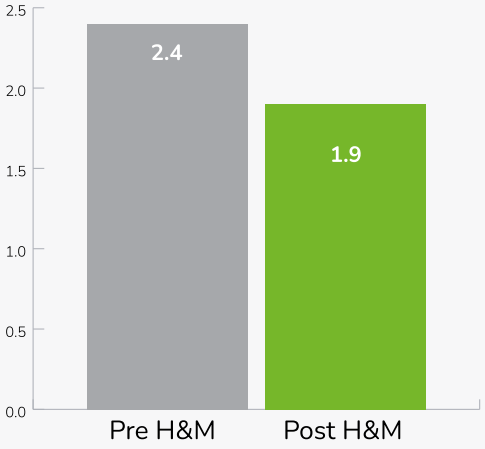
Emotional Problems



t(447) = 11.9, p < 0.001, d = 0.56

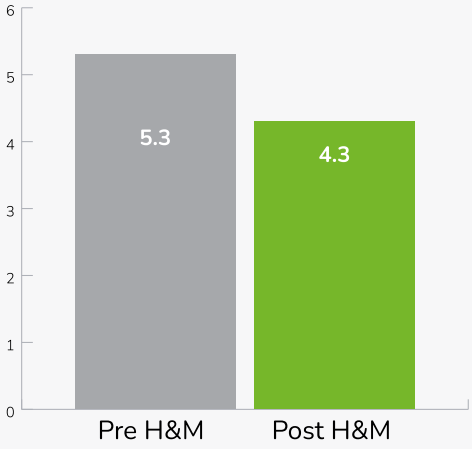
Strengths and Difficulties Questionnaire (SDQ) - Subscales

Conduct Problems



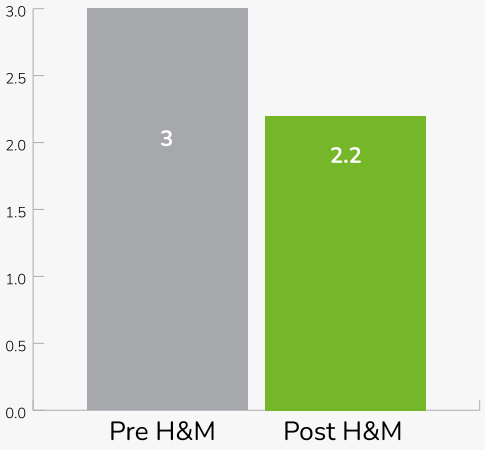
t(449) = 7.2, p < 0.001, d = 0.34

Hyperactivity



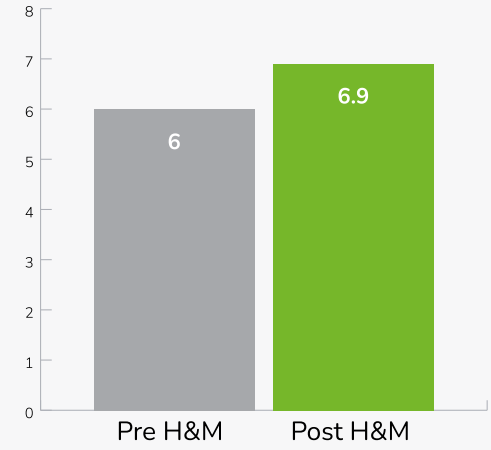
t(447) = 9.8, p < 0.001, d = 0.46

Peer Problems



t(442) = 9.7, p < 0.001, d = 0.46

Prosocial



t(444) = -9.9, p < 0.001, d = -0.47

The Child's Voice

This section covers the data relating to the Child's Voice Questionnaires. Children are given the means to share their thoughts and feelings and to reflect on their experiences.

Giving children opportunities to feel heard and valued is essential in creating wellbeing cultures in schools, as well as being vital for mental health, relationships and social and emotional development.

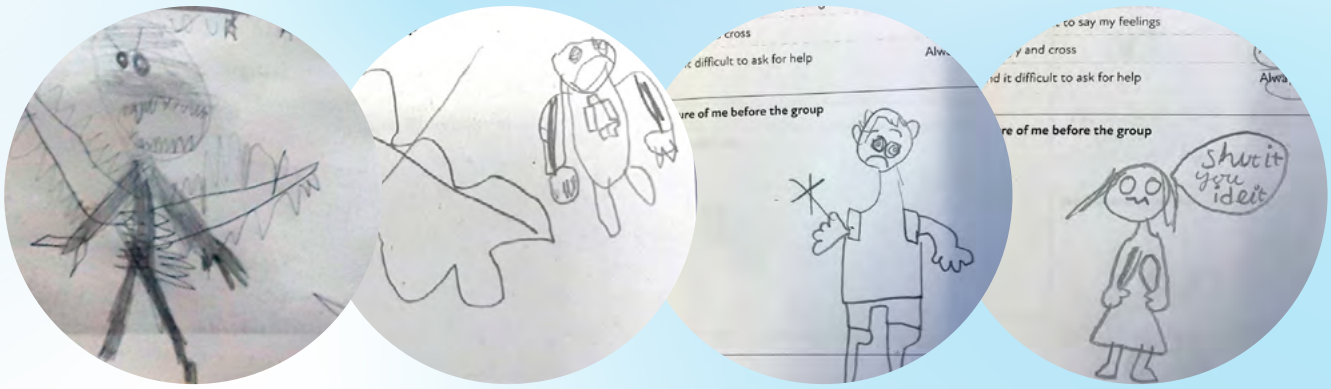
Our Child's Voice Questionnaire is an opportunity to capture a sense of where a child is at prior to one of the Hamish & Milo wellbeing intervention groups and then show the difference in their perception of what has changed, any new feelings and the development of self-awareness.

Child's Voice Questionnaire

- Before and after measure
- Children self-identify their feelings
- Children self-identify the frequency of their feelings
- The areas of focus are: Worry, sadness, feeling bad about abilities, friendship struggles, talking about feelings, anger and frustration, asking for help.
- Children draw pictures about themselves
- Children draw pictures about things they would like help with
- Children say what they like and what they don't like about being in the group
- Children say what their favourite parts of the group were
- Children say what they have learnt about themselves

Navigator is used to collect data including their commentary and images

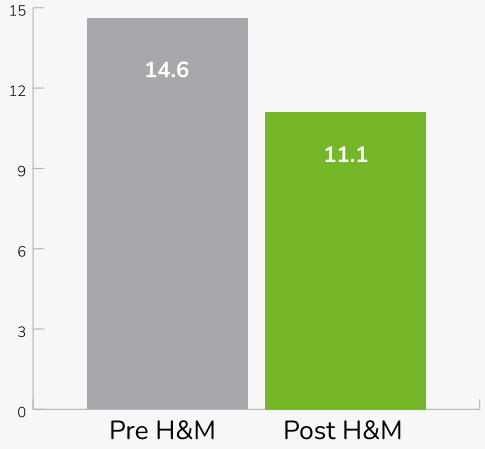
The child's voice through their drawings and self portraits



The Child's Voice

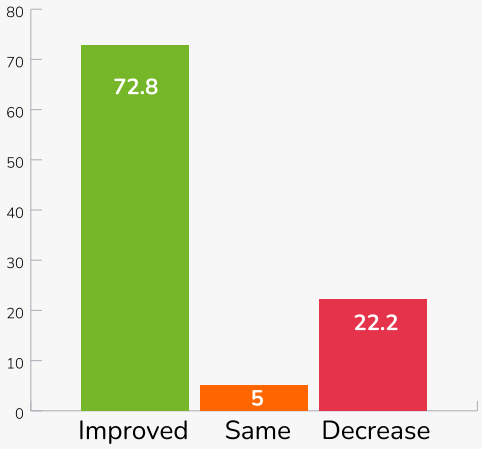
Children's Voices: Social, Emotional and Support Experiences Overall

Children = 478



t(477) = 13.6, p < 0.001, d = 62

Children's Voices: Social, Emotional and Support Experiences (%)



t(477) = 13.6, p < 0.001, d = 62

'Felt safety' to speak about experiences...

"I don't feel safe at home, but I feel safe here."

"I wish the group went on longer."

"I feel listened to."

"Telling others how you feel and talking feels good to me."

"It's helped me think and not worry and just relax. I worry about learning and I don't have to when I'm in here."

"It helps with my depression and makes me calmer in the day. The classroom gets too loud for me and I feel relief in this group."

"Something I want help with is..."

"I want help with saying how I feel without offending anyone."

"Making friends and being confident."

"To be able to say why I was sad."

"School stress, emotions and anger."

"Finding friends, being different to others and sharing my feelings."

"Making friends, not feeling anxious, sad lonely and worried."

"Feelings. I hide how I feel. I would like people to know."

"To control my anger."

"To overcome nervousness."

"Getting friends."

"They just wouldn't speak this freely in a busy classroom."

Jill Wilcock - PSHE and Intervention Lead, St John with St Mark Primary School

What I have learnt about myself is...

"I can talk to people about my bereavement."

"I have got better by not bottling things up."

"I am able to cry now and know that's OK."

"I have learnt all about my feelings a techniques to manage my anxiety better."

"That I can be brave."

"That I can be brave when I want to and that I do have friends."

"I'm perfect just the way I am."

"It is OK to have feelings."

"I need to talk about my feelings and it is OK to cry."

"I learnt about loss about daddy."

"I have empathy."

"Don't have to deal with things on my own."

"I am not the only one."

"I am great at pushing myself through a challenge."

"I have learned that I tense my fists when I get angry. This is a warning sign."

"I have learned to let my mum know when I am feeling angry, and I ask for paper to rip up to help me."

"It's OK to be angry."

"I can breathe with a teddy on my tummy or relax on my bed. I also like writing worries down."

"I believe in myself more."

"I try harder in class."

"I can read now, I kept trying."

"Everyone is not the same."

"I'm good at art, I am helpful and I am kind."

"That I can be brave when I want to and that I do have friends."

"I can stand up for myself."

"I can do something hard."

"Learnt I am a good friend."

"That my brain is actually functional."

"I recognise that I start to make growling noises when I am getting angry."

"I can believe in myself."

"Talking to others helps me feel better."

"I am a calm wonderful person."

"Learning how I am able to say no."

"I can stand up for myself."

"I can be who I want to be."

"It is OK to let your anger out."

"That I will become happy again and that you never have to feel ashamed because of your feelings."

"I have a voice."

"I can use my words to help sort out issues."

"If you have a worry there are people around to tell."

"I worry less and feel less angry"

"I'm getting better at teamwork."

"Thought I wasn't good at maths but actually think I'm better than I thought I was."

"Learning how I am able to say no."

"I'm excited about moving to my new class now."

"Changes are big but they are OK."

"To be kind and honest and not to lie."

"Things are not as bad as they seem."

"That I believe in myself even when I'm feeling down."

"I'm trying harder in my lessons."

"I feel I can do things now. I can come to school."

"I can be a good listener."

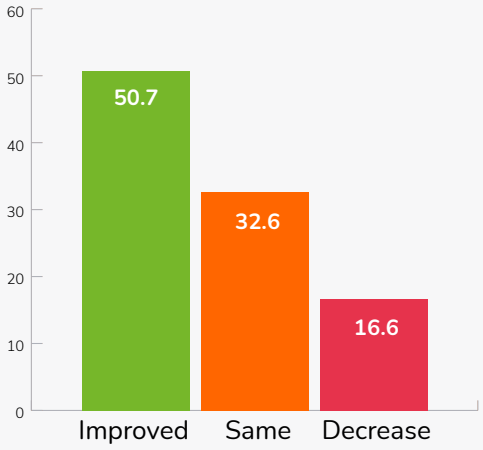
"I feel I can do things now and come to school."

"I feel more confident. I actually completed two and a half pages of English in one lesson."

"That I don't need to fight with my friends when angry."

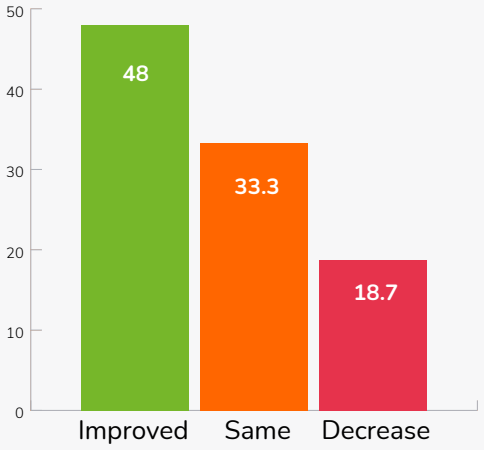
The Child's Voice - Subscales

I worry about things



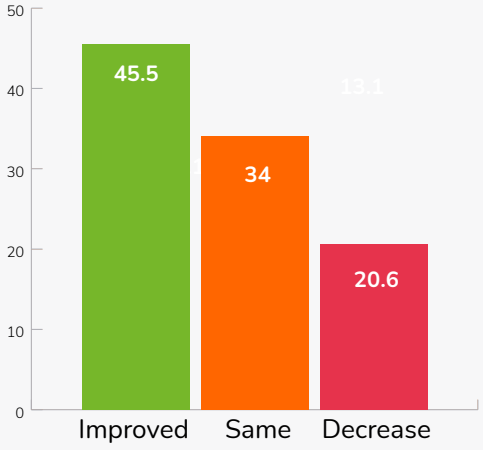
t(486) = 8.9, p < 0.001, d = 0.40

I feel sad and empty



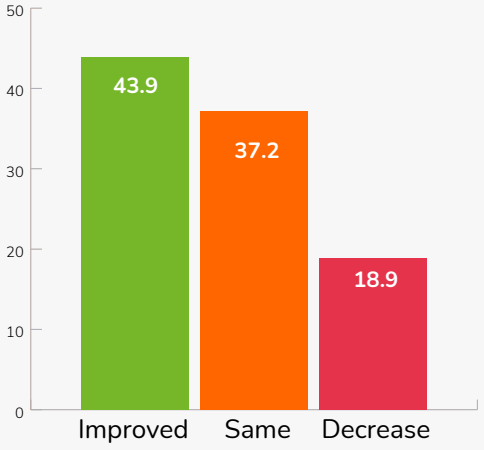
t(486) = 8.6, p < 0.001, d = 0.39

I feel that I'm not good at anything



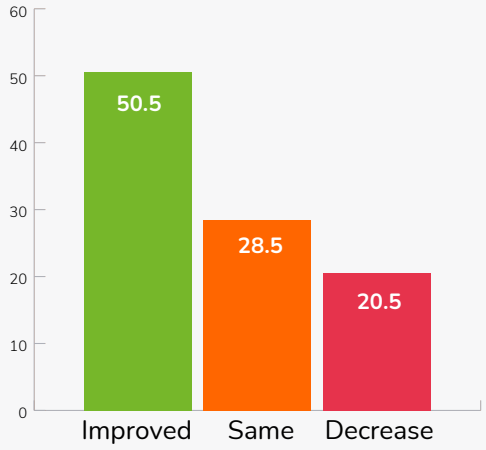
t(484) = 6.4, p < 0.001, d = 0.29

I find it difficult to have friends



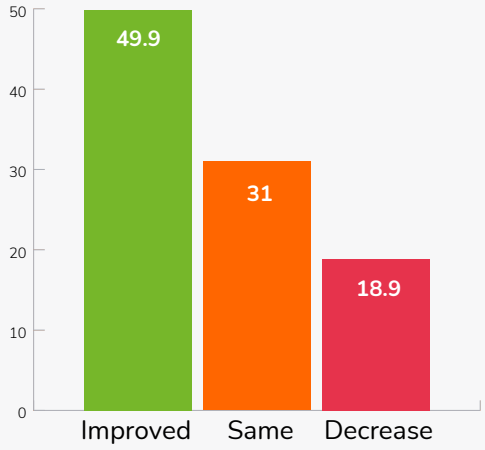
t(484) = 6.8, p < 0.001, d = 0.31

I find it difficult to say my feelings



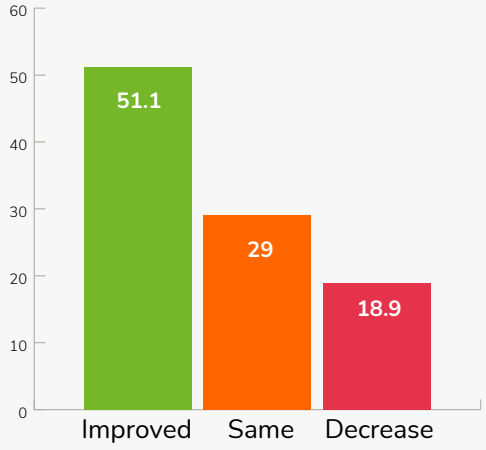
t(484) = 7.9, p < 0.001, d = 0.36

I feel angry and cross



t(484) = 8.3, p < 0.001, d = 0.38

I find it difficult to ask for help



t(481) = 8.7, p < 0.001, d = 0.40

Pupil voice in schools means a whole-school commitment to listening to the views, wishes and experiences of all children and young people. It means placing value on what children and young people tell school staff about their experiences.

Anna Freud Mentally Healthy Schools[36]

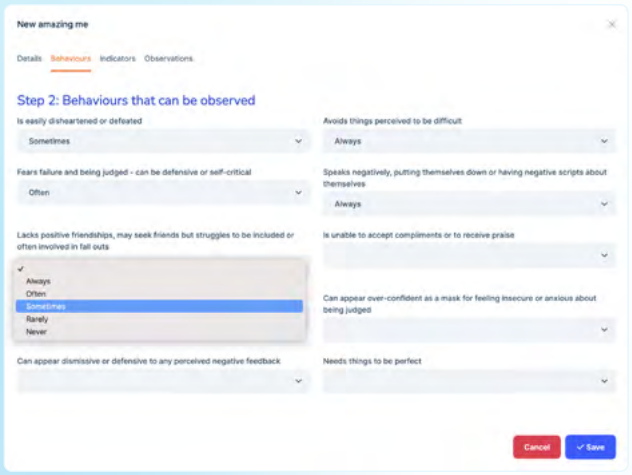
Presenting behaviours and protective factors by programme

This section covers the data relating to the Child Wellbeing Profiles our primary impact measure tools which are unique to each emotion theme programme.

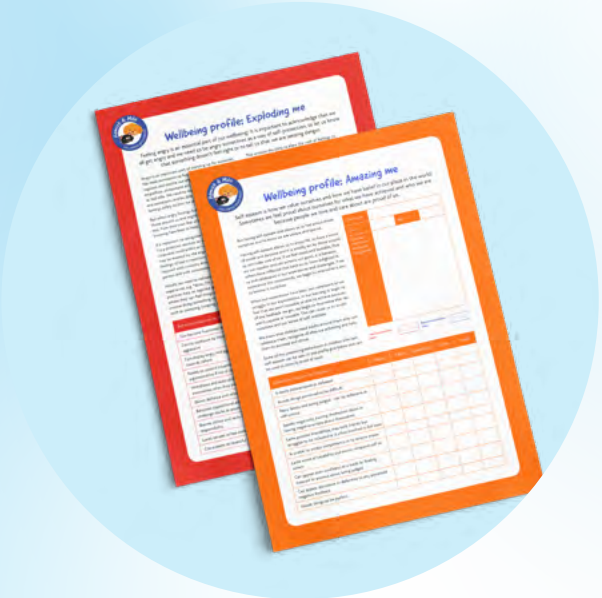
The complete wellbeing programme consists of ten different emotion theme programmes on key emotional themes; friendship, resilience, anxiety, diversity, strong emotions and anger, change and transition, conflict resolution, loss and bereavement, sadness and self-esteem, so there is a Child Wellbeing Profile and data set for each.

Child Wellbeing Profiles

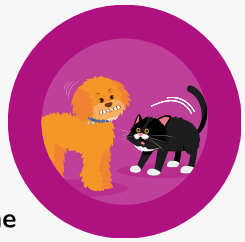
- Before and after measure
- Trusted adults completed, based on observations when working with children.
- The areas of focus on a child's behaviour, where they may struggle such as: Reassurance, attention seeking, taking control, avoiding situations, anxiety, restlessness, frustration, anger, repetitive behaviours.
- The areas of focus on a child's behaviour, where they may thrive such as: Awareness of emotions and sensations, identifying emotions, asking for help or reassurance, using coping mechanisms such as breathing exercises, awareness of coping strategies to calm, talking with friends and others and seeking support with them.
- Observations and reflections at the start of the intervention.
- Observations and reflections at the end of the intervention.
- Summarising perspectives or viewpoints.
- Areas for action and recommendations.



Navigator is used to collect data on behaviours that can be observed as well as protective factors and progress indicators.

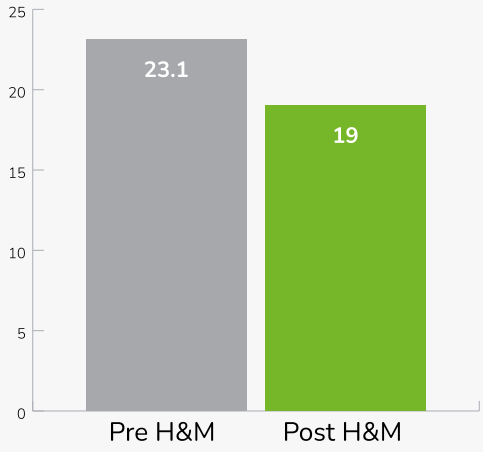


Actions, words and me - Helping children with conflict resolution



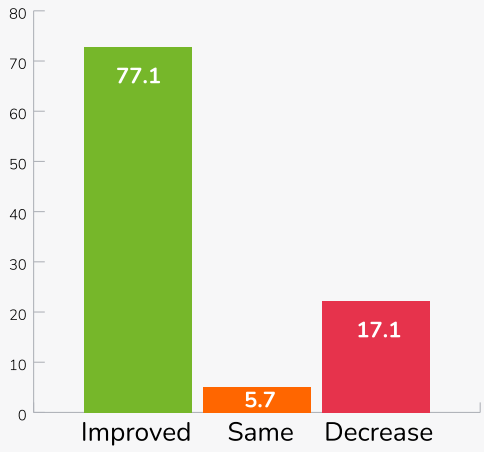
Actions, words and me
Behaviour

Children = 35



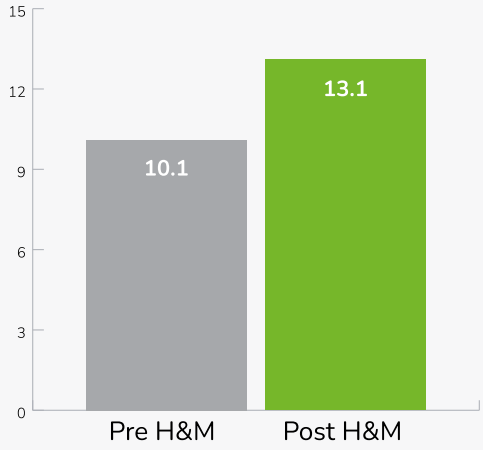
t(34) = 4.5, p < 0.001, d = 0.76

Actions, words and me
Behaviour



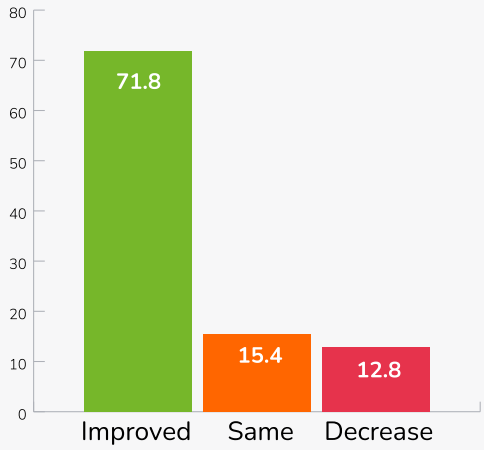
t(34) = 4.5, p < 0.001, d = 0.76

Actions, words and me
Protective Factors



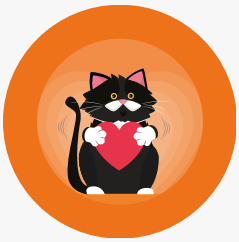
t(38) = 5.5, p < 0.001, d = 0.89

Actions, words and me
Protective Factors



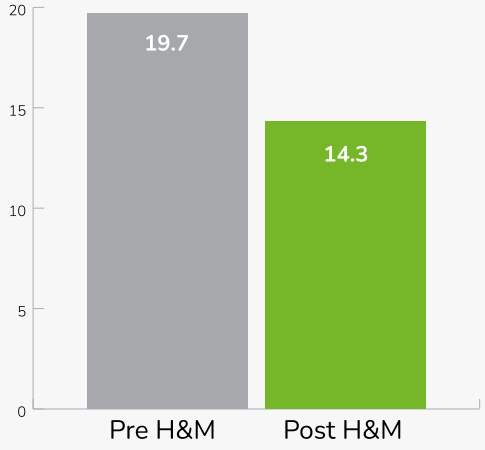
t(38) = 5.5, p < 0.001, d = 0.89

Amazing me - Helping children with self-esteem



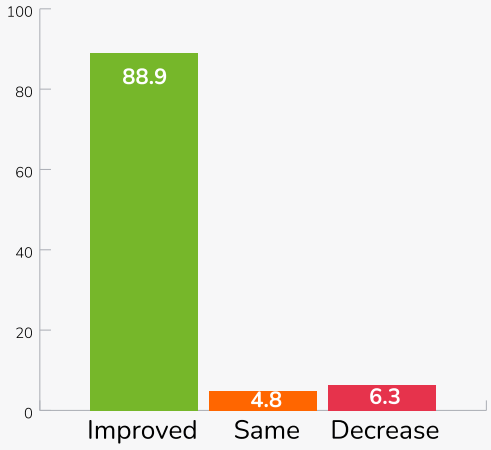
Amazing me
Behaviour

Children = 123



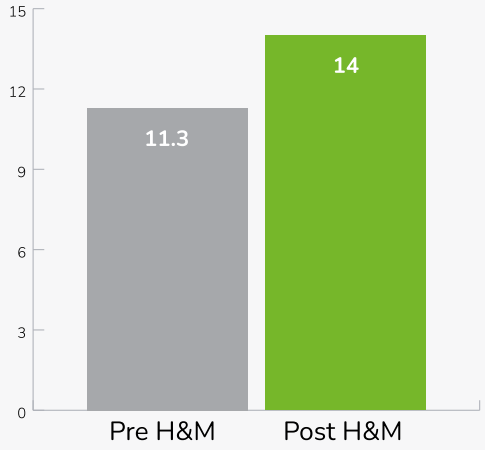
t(122) = 14.4, p < 0.001, d = 1.3

Amazing me
Behaviour



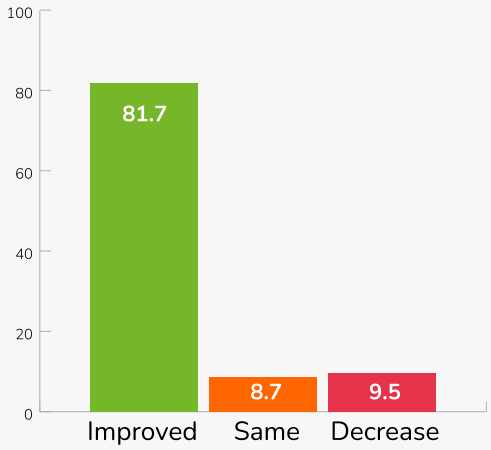
t(122) = 14.4, p < 0.001, d = 1.3

Amazing me
Protective Factors



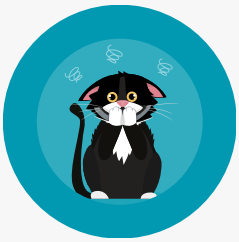
t(122) = 9.0, p < 0.001, d = 0.80

Amazing me
Protective Factors



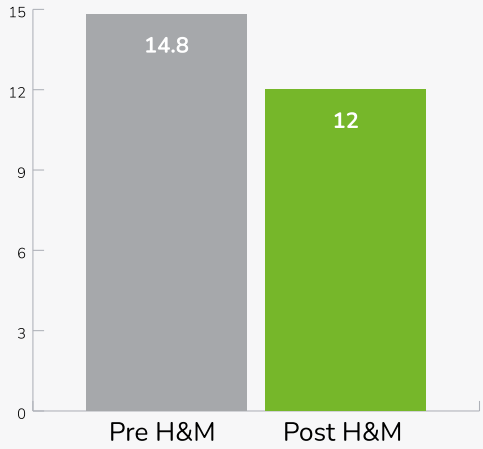
t(122) = 9.0, p < 0.001, d = 0.80

Calm me - Helping children with anxiety



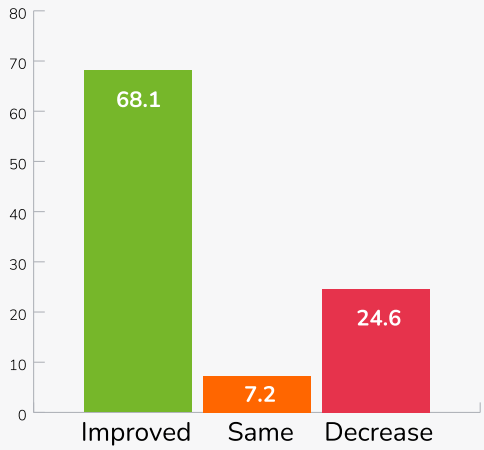
Calm me
Behaviour

Children = 69



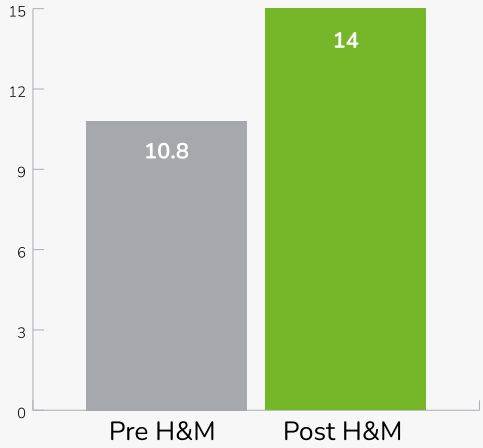
t(68) = 5.4, p < 0.001, d = 0.65

Calm me
Behaviour



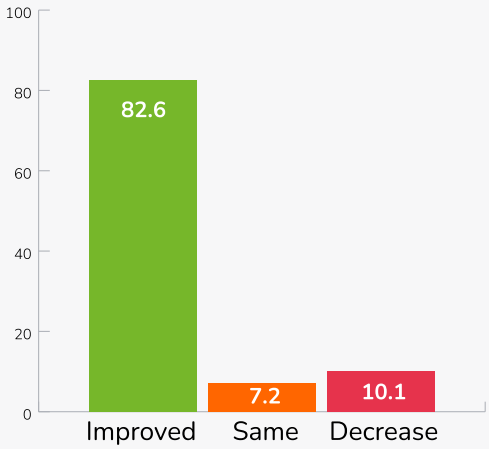
t(68) = 5.4, p < 0.001, d = 0.65

Calm me
Protective Factors



t(68) = 7.4, p < 0.001, d = 0.89

Calm me
Protective Factors

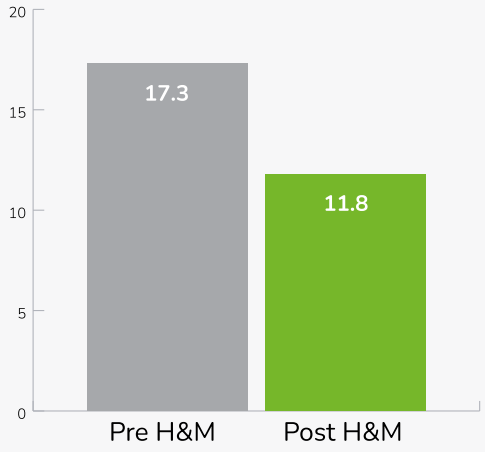


t(68) = 7.4, p < 0.001, d = 0.89

Celebrating me - Helping children with difference and diversity

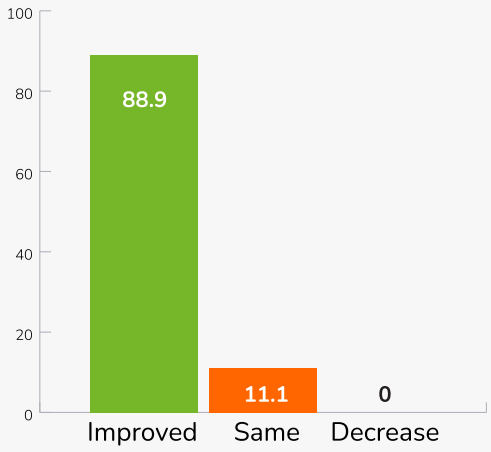
Celebrating me
Behaviour

Children = 9



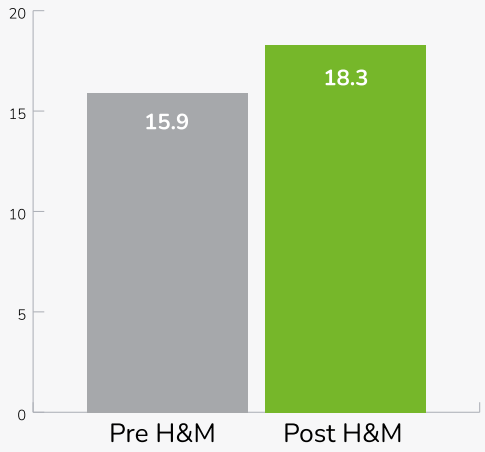
t(8) = 4.9, p = 0.001, d = 1.65

Celebrating me
Behaviour



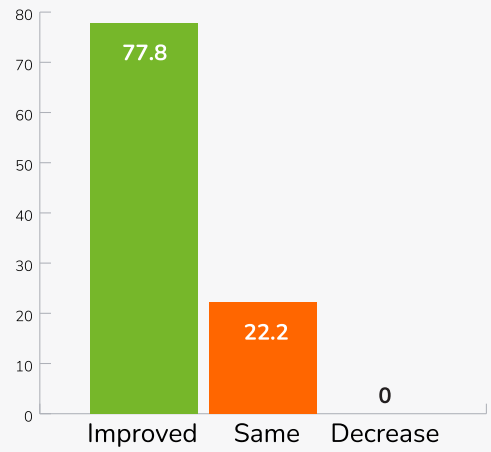
t(68) = 5.4, p < 0.001, d = 0.65

Celebrating me
Protective Factors



t(8) = 2.2, p = 0.058, d = 0.70

Celebrating me
Protective Factors

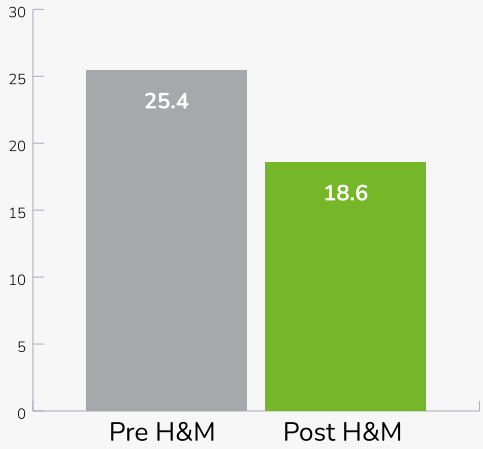


t(68) = 7.4, p < 0.001, d = 0.89

Exploding me - Helping children with strong emotions

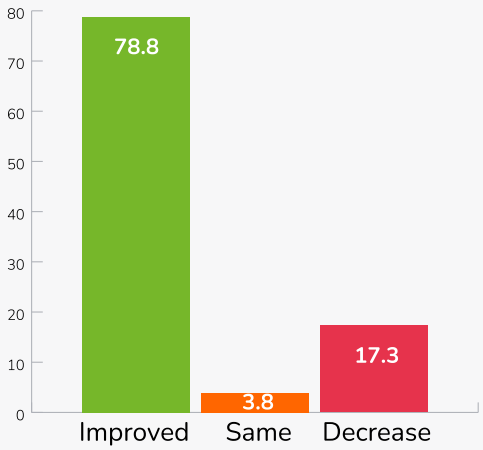
Exploding me
Behaviour

Children = 52



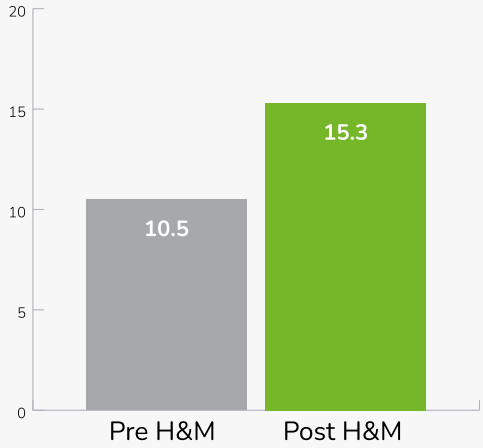
t(51) = 6.4, p < 0.001, d = 0.89

Exploding me
Behaviour



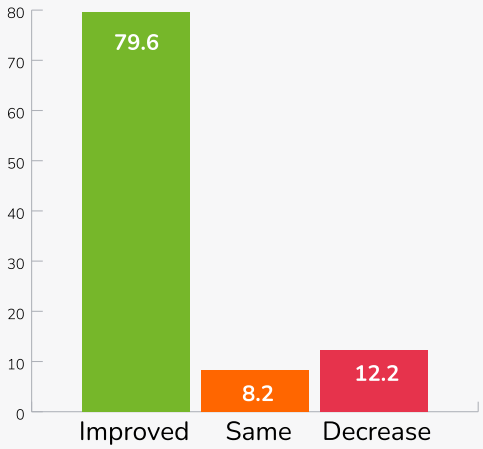
t(51) = 6.4, p < 0.001, d = 0.89

Exploding me
Protective Factors



t(48) = 6.8, p < 0.001, d = 0.96

Exploding me
Protective Factors

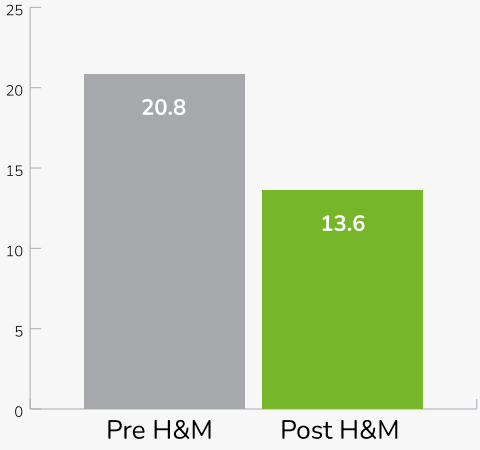


t(48) = 6.8, p < 0.001, d = 0.96

Finding me - Helping children with sadness

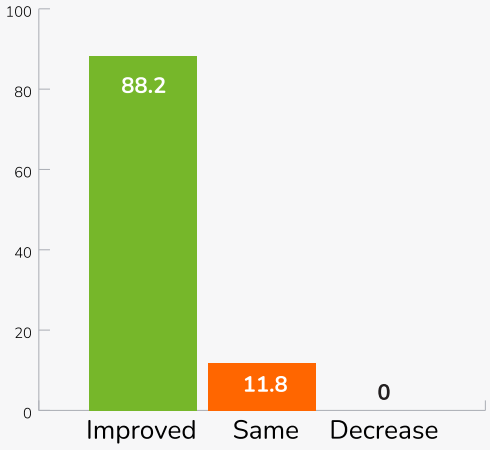
Finding me
Behaviour

Children = 17



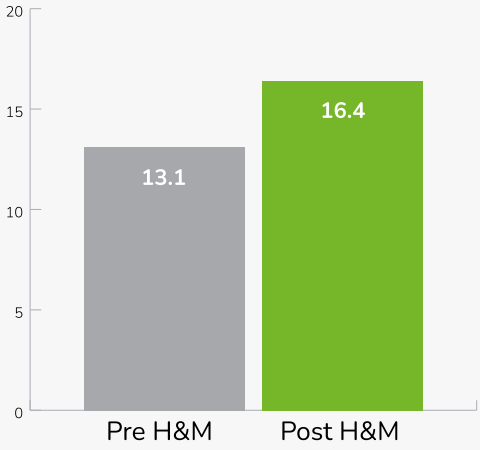
t(16) = 4.5, p < 0.001, d = 1.08

Finding me
Behaviour



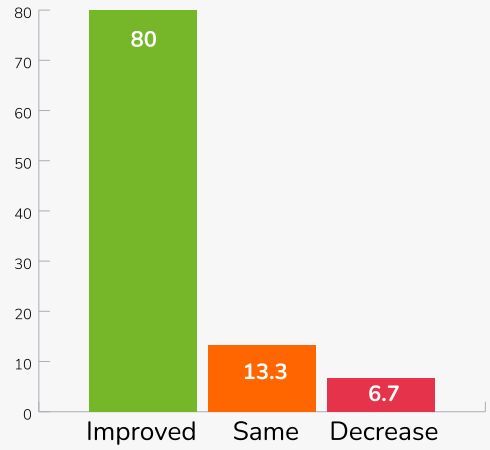
t(16) = 4.5, p < 0.001, d = 1.08

Finding me
Protective Factors



t(14) = 3.5, p = 0.004, d = 0.89

Finding me
Protective Factors

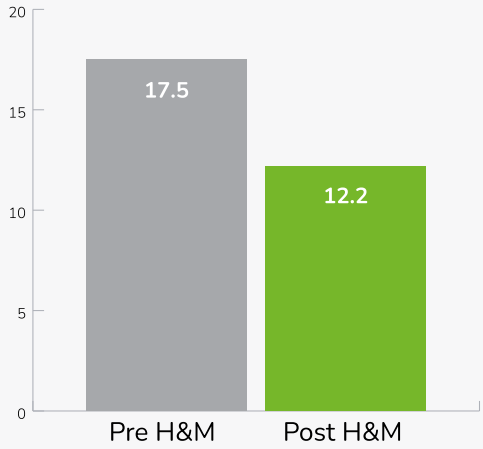


t(14) = 3.5, p = 0.004, d = 0.89

Memories and me - Helping children with loss and bereavement

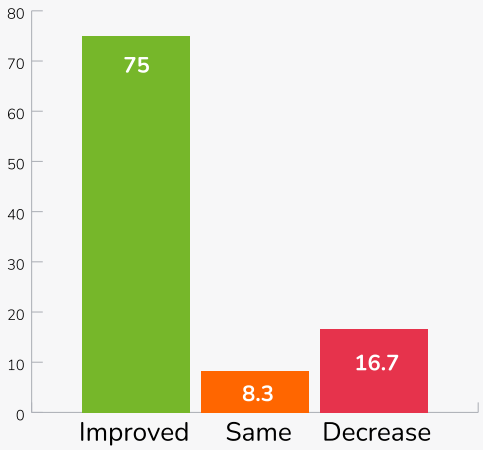
Memories and me
Behaviour

Children = 13



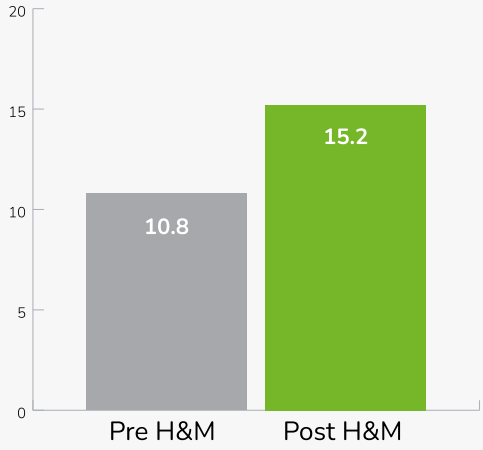
t(11) = 3.1, p = 0.01, d = 0.90

Memories and me
Behaviour



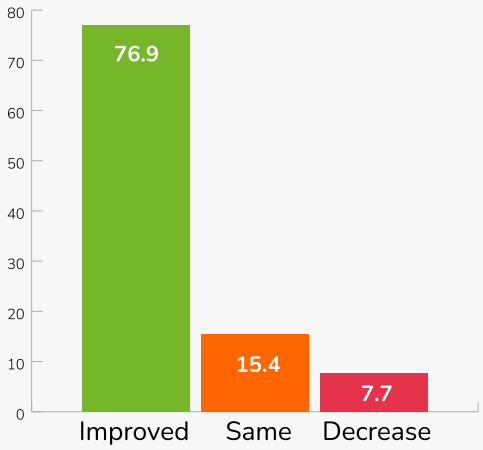
t(11) = 3.1, p = 0.01, d = 0.90

Memories and me
Protective Factors



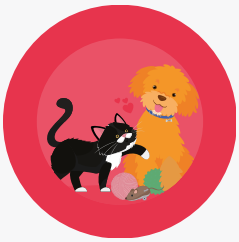
t(12) = 3.0, p = 0.01, d = 0.84

Memories and me
Protective Factors



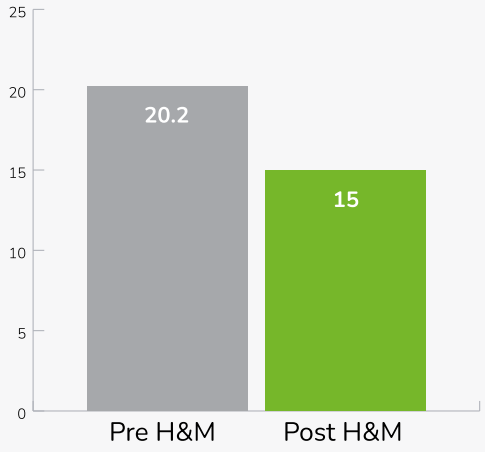
t(12) = 3.0, p = 0.01, d = 0.84

My friends and me - Helping children with friendships



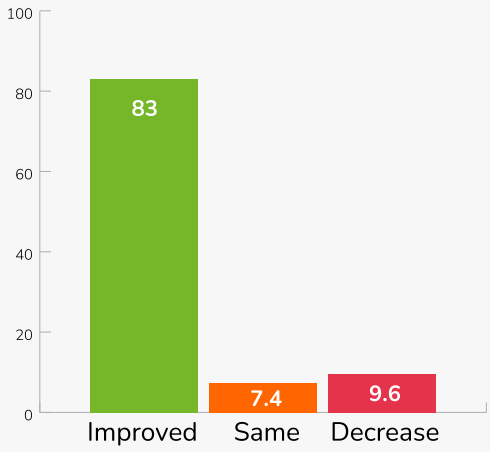
My friends and me Behaviour

Children = 94



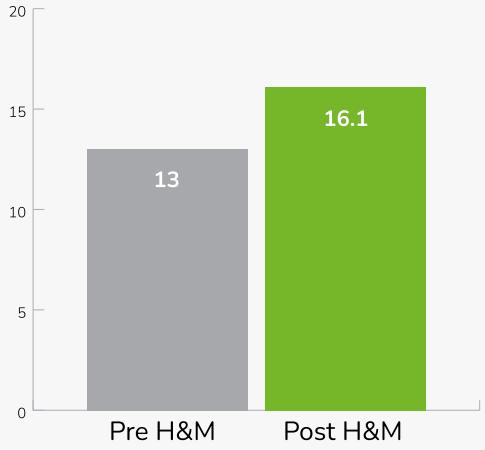
t(93) = 10.6, p < 0.001, d = 1.1

My friends and me Behaviour



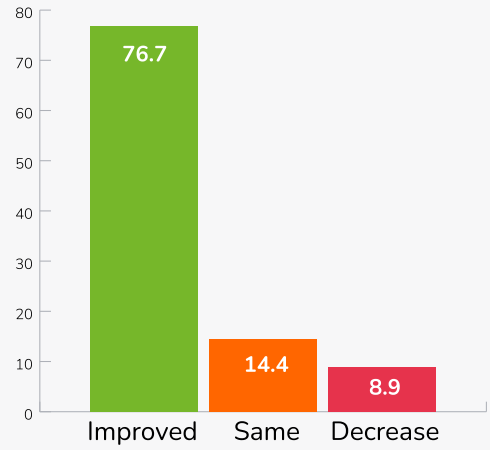
t(93) = 10.6, p < 0.001, d = 1.1

My friends and me Protective Factors



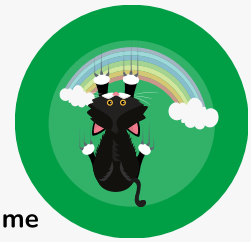
t(89) = 6.9, p < 0.001, d = 0.73

My friends and me Protective Factors



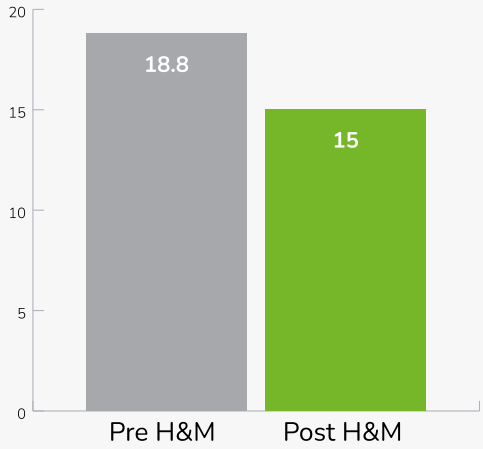
t(89) = 6.9, p < 0.001, d = 0.73

New beginnings and me - Helping children with change and transitions



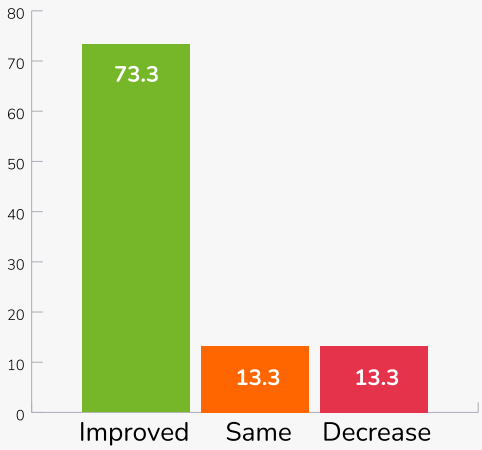
New beginnings and me
Behaviour

Children = 45



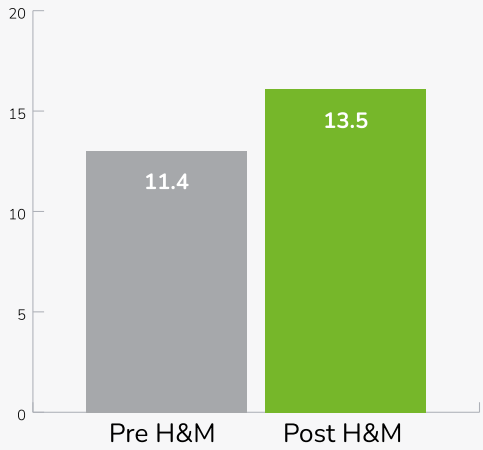
t(44) = 10.6, p < 0.001, d = 0.92

New beginnings and me
Behaviour



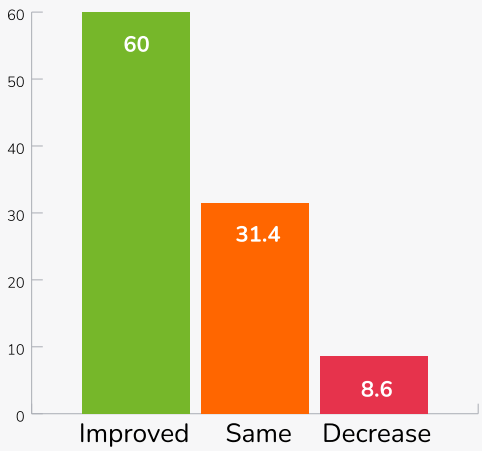
t(44) = 10.6, p < 0.001, d = 0.92

New beginnings and me
Protective Factors



t(34) = 4.8, p < 0.001, d = 0.85

New beginnings and me
Protective Factors

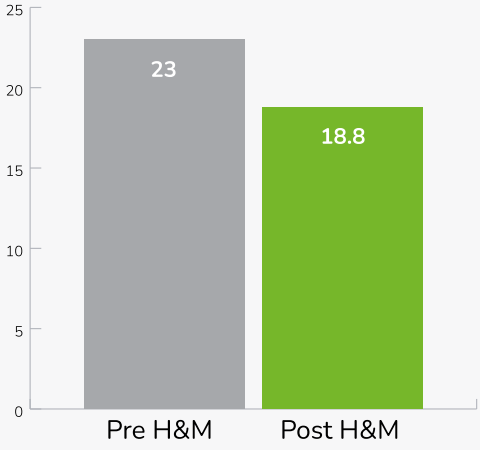


t(34) = 4.8, p < 0.001, d = 0.85

Resilient me - Helping children with resilience

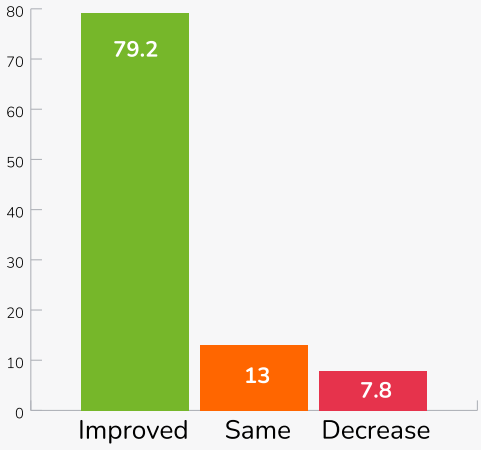
Resilient me
Behaviour

Children = 77



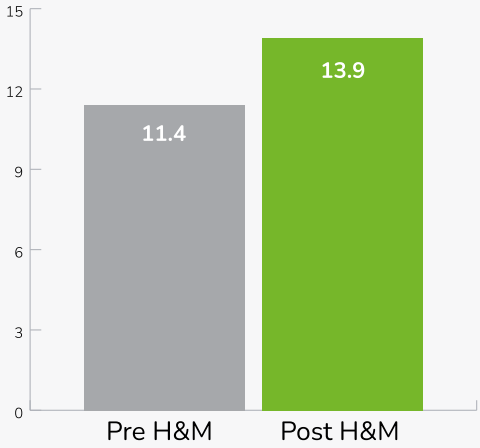
t(76) = 8.1, p < 0.001, d = 0.92

Resilient me
Behaviour



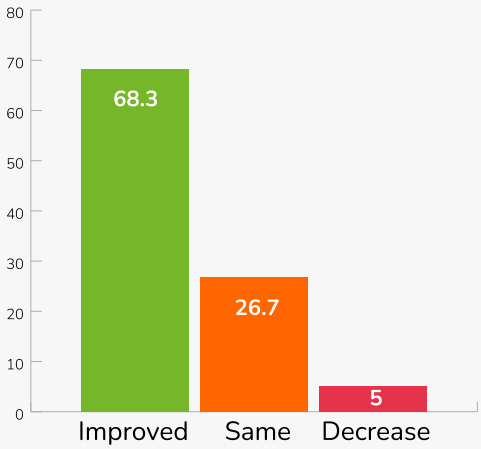
t(76) = 8.1, p < 0.001, d = 0.92

Resilient me
Protective Factors



t(59) = 6.6, p < 0.001, d = 0.85

Resilient me
Protective Factors



t(59) = 6.6, p < 0.001, d = 0.85

Summary of emerging evidence

"Emerging data shows statistically significant differences in observations about the emotional and behavioural presentation of children, pre and post intervention."

Professor Richard Joiner, Head of Department, University of Bath, Department of Psychology

- Statistical changes across all of the initial impact measures occur in a positive direction (attribution is an area to understand next).
  - **SDQs** - Improved overall and all subscales
  - **Child Wellbeing Profiles** - Improved on all behaviour and protective factors scales*
  - **Child's Voices** - Improved on all measures
- Whilst tentative and emerging, there are statistically significant differences between before and after observations and the experiences of the children. Further evaluation of the Hamish & Milo intervention is essential, to explore if and if so, how, the outcomes can be attributed to the intervention directly.
- There is a significant body of data that needs to be analysed to really capture the stories of change for children and trusted adults who engage with Hamish & Milo.

2023-2024 and onwards

Our ongoing mission is to make a real difference to children's mental health and wellbeing. We are committed to listening to schools, to understand the evolving needs of children, their families and the settings that support them and to develop our resources, training and supervision so that children can thrive, aspire and achieve their dreams.

The University of Bath Research will continue for 2023-2024 and beyond as our project continues to grow with now more than 90 schools across the UK and Ireland participating.

Following the initial research model there are plans now to develop the programme theory and research framework to capture more explicit layers of impact for children, parents and carers as well as schools, supporting staff, social and healthcare professionals to make the most effective use of the evidence.

Get involved!

This is a very exciting opportunity and we are still interested in hearing from any individual school, groups of schools, or Academy Trust that is interested in joining this research study.

If you are interested or would like to find out more please email clare@hamishandmilo.org

Register for future reports

Simply email hello@hamishandmilo.org and provide your name and email address to be notified of all future reports.

*Except for Protective Factors for Celebrating Me and that was because there were only 8 children whose data was supplied

Participating schools and trusts

We extend sincere gratitude to all the schools that participated in our research study.

Ash Grove Primary Academy
ashgrove.ipmat.co.uk

Inspire Partnership Multi-Academy Trust
ipmat.co.uk

Bardfield Academy
bardfieldacademy.org

Barley Lane Primary School
barleylane.redbridge.sch.uk

BDSIP - Barking & Dagenham School Improvement Partnership
bdsip.co.uk

Beechwood Junior School
beechwoodjuniorschool.co.uk

Bramfield House School
bramfieldhouse.co.uk

Broadmayne First School
broadmayne.dorset.sch.uk

Canvey Junior School
canvey-jun.essex.sch.uk

Cerne Abbas CE VC First School
cerneabbas.dorset.sch.uk

Cheselbourne Village School
cheselbourne.dorset.sch.uk

Chesham Primary School
cheshamprimary.co.uk

Clore Tikva Primary School
cloretikva.redbridge.sch.uk

Damers First School
damers.dorset.sch.uk

Delce Academy
inspiredelce.co.uk

Eastbury Community School (Primary)
eastbury.bardaglea.org.uk

Elaine Primary School
elaine.medway.sch.uk

Elton Primary School
eltonprimary.bc-et.co.uk

Essex Virtual Schools
essex.gov.uk

Fairfield Community Primary School
fairfieldprimarybury.org.uk

Frome Valley CE First School
fromevalley.dorset.sch.uk

Gascoigne Primary
gascoigne.co.uk

Federation of Hamworthy Primary Schools
hamworthyprimaryschools.co.uk

Harold Court Primary School
haroldcourt.org.uk

Highlands Primary School
highlandsprimary.net

Holymead Primary School
holymeadprimary.co.uk

Holy Trinity National School
holytrinity.ie

Holy Trinity CE Primary School
holytrinitybury.org.uk

Kents Hill Junior School
kentshill-jun.essex.sch.uk

Kents Hill Infant Academy
khiacademy.co.uk

Livingstone Road Infant School
livingstoneprimary.org

Lubbins Park Primary
lubbinspark.essex.sch.uk

Lytchett Matravers Primary School
lmpsdorset.co.uk

Malvin's Close Academy
malvinsclose.wiseacademies.co.uk

Manor Park CE VC First School
manorpark.dorset.sch.uk

Manor Junior School
manorjunior.co.uk

Medway Virtual School
medway.gov.uk

Milborne St Andrew First School
milborne.dorset.sch.uk

Minerva Primary
minervaprimaryschool.co.uk

The Redstart Learning Partnership
theredstartlearningpartnership.co.uk

Mountjoy School
mountjoy.dorset.sch.uk

Muscliff Primary School
muscliffprimary.co.uk

New Horizons Children's Academy
newhorizons.tsat.uk

New Road Primary School
newroad.medway.sch.uk

Northwick Park Multi Academy Trust
northwickpark.essex.sch.uk

Parkwood Academy
parkwood-academy.org

Phoenix Park School
phoenixparkschool.ie

Piddle Valley CE First School
piddlevalley.dorset.sch.uk

Puddletown C Of E First School
puddletownfirst.dorset.sch.uk

Information is accurate at the time of printing (October 2023)

Redbridge Virtual Schools
redbridge.gov.uk

Redden Court School
reddencourtcloud.co.uk

Redstart Partnership
redstartpartnership.co.uk

Ripple Primary School
ripple.bardaglea.org.uk

Roding Primary School
rodingprimary.co.uk

Rowanfield Junior School
rowanfield-junior.gloucs.sch.uk

Rowanfield Infant School
rowanfieldinfant.org.uk

Saltersgate Infant School
saltersgate-inf.doncaster.sch.uk

Shaftesbury CE Primary School
shaftesburyprimary.co.uk

Shirley Junior School
shirleyjuniorschool.org

Shirley Infant School
shirleyschools.co.uk

Southampton Hospital School
southamptonhospitalschool.co.uk

South Essex Academy Trust
seacademytrust.co.uk

Southwood Primary School
southwood.bardaglea.org.uk

Springbank Primary Academy
springbankpri-ac.gloucs.sch.uk

Springside Primary
springsideprimary.co.uk

St. Thomas More Catholic Primary School
st-thomasmore.medway.sch.uk

St John's RC School
stjohnsrcschool.co.uk

St. Marie's RC Primary School
stmariesrcp.co.uk

St Michael's CofE Primary School
stmichaelsprimary.org

St Olave's Prep School
stolaves.org.uk

St Paul's CE Primary
stpaulsbury.co.uk

St Thomas's C.E. Primary School
stthomascep.co.uk

Talbot Primary School
talbot.poole.sch.uk

Temple Mill Primary School
templemill.medway.sch.uk

The Forest Academy
theforestacademy.co.uk

Uphall Primary School
uphallprimary.co.uk

Wainscott Primary School
wainscottschool.org.uk

Waycroft Academy
waycroftacademy.com

Waycroft Multi-Academy Trust
www.waycroft.co.uk

Wayfield Primary School
wayfield.medway.sch.uk

Westover Primary School
westoverprimary.co.uk

Westwood Academy
westwoodacademy.org

Wicklea Academy
wickleaacademy.com

Wimborne First School
wimbornefirst.dorset.sch.uk

Winter Gardens Academy
wintergardensacademy.org

Woodbank Primary
woodbankprimary.co.uk

Woodlands Academy
woodlandsacademybristol.com

Wordsworth Primary School
wordsworthprimary.co.uk

Get involved

This is a very exciting opportunity and we are still interested in hearing from any individual school, groups of schools, or Academy Trust interested in joining this research study.

If you are interested or would like to find out more please email **clare@hamishandmilo.org**

Hamish & Milo school stories

To close this report we wanted to share some final comments from some of our schools, some are in the research study, some are not - such wonderful stories of successful outcomes for children.

"... Lots of safeguarding things have come out and we would never have found out without these sessions."

Amy Warren, The Forest Academy, Redbridge

"One boy surprised me as he gets angry a lot in the playground. He is starting to understand what your emotions do to you. One day he couldn't tell me what had happened but he handed me a folded note which said how he had started to get angry and could recognise it. He was able to acknowledge what had happened for him."

Lisa Clark, Wyke Regis Federation, Weymouth

"One of our boys who usually would blow up, walked out of the room, but then came back to give it another go! We were amazed. It was a light bulb moment for him."

Jacqui Bragginton, Kingsleigh Primary School, Bournemouth, Dorset

"...the children are verbalising things they wouldn't have verbalised before."

Heather Helm, Lytchett Matravers Primary School, Dorset

"Knowing his life experiences, we didn't think he would even come into school but we got him in and into a Hamish & Milo group. He came into the group late but he would come into school to do the group. He made a sock puppet and he loved it. He took so much care in making it and he was so proud of it."

Di Jenkins, Rowanfield Infant & Junior Schools, Gloucestershire

"I am working with a child who is selective mute and who finds it really hard to ask for help. He is putting his hand up now and is contributing in the group. His sock puppet is a dog and he comes in and kisses it."

Marian Lister, Shirley Infant School, Southampton

"The biggest highlight for me is how quickly a particular child has got involved and how much he engages in conversations. It is so rewarding to see him engage. He is more relaxed, happier and he seems less like a rabbit in the headlights."

Dawn Chant, William Barnes Primary School, Dorset

"Last week we were writing poems and I was feeling so emotional hearing them from the children and one girl particularly who never really says anything but suddenly it just all came out."

Jo Borowy, Barley Lane Primary, Redbridge

"Seeing the joy on the children's faces when they are collected for our sessions is magical, particularly more meaningful as many of our children were often finding aspects of school life tricky."

Sally Campbell, Damers First School, Dorchester, Dorset

"Since joining the group, he has been able to handle his emotions more. He will come and talk to me and will use all the strategies for getting his feelings out and calming down. One day in the classroom he wasn't allowed to do bench ball. Usually, he would be angry but he just stood and listened and the way he handled it was amazing. It has been really good that he can recognise his feelings."

Sarah Johnson, Radipole Primary School, Weymouth

"We have one boy who English isn't his first language and he struggles to be understood. When he uses his sock puppet everyone can understand him better! This has identified to me that he really feels misunderstood a lot of the time and the importance of feeling heard."

Michelle Haynes, Luton Primary School, Kent

"We have one looked after child who is having a really hard time at the moment. He often comes in to see his puppet, even on days when we don't have the group. Yesterday he came in and he wouldn't talk to us, but he sat in his safe space and told his puppet. The eye contact between him and the sock puppet is amazing as he doesn't usually give eye contact."

Natalie Green, Byron Academy, Gillingham, Kent

"I've been doing memories and me with a 13-year-old girl whose mum died a year ago and she is now living with her aunt and sees her dad at weekends. She has written some beautiful things in the sessions about her mum and the memories she has. She is Autistic and has learning difficulties and for her to open up it has been amazing. She loves the sessions and keeps asking to come."

Mel Singleton, Mountjoy Special School, Dorset

"We found that there were quite a few children in Reception who were showing anxiety, so we were able to give the teacher some of the ideas for the whole class. They are now using the resource as their PSHE curriculum."

Sue Turtle, Saltersgate Infant School, Doncaster

"I'm using the resources with secondary aged students 1:1 at the moment. There is one girl I'm doing 'Exploding me' with and the difference in her is huge. She has a lot of ACEs and seemed not to care whenever anything happened but now with the group, she wants to repair things. She has become more self-aware and able to regulate herself... "

Amy Warren, The Forest Academy, Redbridge

"Another girl we have in our group is incredibly anxious and will run at the slightest thing. She has an incredibly turbulent home life. The group has given her faith and safety. She loves her sock puppet, it even has its own leash. She loves our room and now if she runs, she comes straight here and finds her sock puppet pet."

Emma Berry, Rowanfield Infant & Junior Schools, Gloucestershire

"One boy in Reception is a looked after child (LAC). He often presents as defiant and it's hard to get him to come to the group. But last time one of the girls in Year 1 went to collect him, she just put her hand out and he came!"

Satvinder Lotay, Uphall Primary, Redbridge

"I've been doing my friends and me with a group of Year 5 girls. The girls used to come to the adults every day and moan about their friends and how they had fallen out. They spoke to me and said "We fell out this morning but we knew what to do and used the problem solving language and we are proud to say we are friends again!" The children are really reflecting on what they are saying to each other and know how to make friends again."

Naomi Trickey, Waycroft Academy, Bristol

"One of my wow moments was for a boy who was struggling with angry feelings. He loved being able to talk about his 'inner guard dog' and began to recognise that it's OK to feel angry and that it was his inner guard dog and he just needed a bit of time. His angry moments lessened, and he could regulate himself more easily... "

Chloe Ellis, Hazlehurst Community Primary School, Bury, Lancashire

"By using Calm me she is able to recognise she goes into freeze. We were able to log this on our CPOMS safeguarding system and when this was happening in the class the teacher was able to say: 'I can see you are anxious' and helped her to use the strategies from Hamish & Milo to help regulate her. It has had a massive impact because she is able to now recognise her feelings and knows what to do."

Emma Berry, Rowanfield Infant & Junior School, Gloucestershire

"Hamish & Milo has supported a real shift towards consistency and focus on the social and emotional needs of our children. The resource is manageable with the planning and progression done so that the time is focused on being with the children. There is now more of a robust organisational process in how we target and support need with the flexibility for group or one-to-one intervention."

Cassie Langmead, Burraton Community Primary School, Cornwall

"One of the other factors that has been noticed through using the resource is the development of language with the children using a wider range of vocabulary."

Sue Turtle, Saltersgate Infant School, Doncaster, South Yorkshire

"It just highlights the need for this programme. The children are using the strategies back in class and it fits in with our whole school ethos and values of compassion and respect. We use it in our assemblies as a whole school approach, and it is being used across the school. The feedback from teachers is that children are coming back from the groups ready and able to learn."

Jill Wilcock, St John with St Mark CoE Primary School, Bury

"Providing reflective and clear data to measure how effective SEMH interventions are is notoriously difficult. We have found the supporting impact measure tools that come with the programme a fantastic resource. It has made sharing feedback to Senior Leadership Team and Governors so much easier and clearer, as well as giving us the information we need to make sure we are delivering the most impactful programme to the right children."

Sandra Scott, Damers First School, Dorchester, Dorset

"The children are loving the programme. We have run social skills group for years but these are much better than the ones we have made ourselves. They are more focussed and the adults really like the guidance they are given. Our teachers are noticing differences in pupils in the classroom."

Kerry Johns, Northwick Park Primary School, Essex

"We have never really found anything before Hamish & Milo that is bespoke enough and where we can see this level of impact. We now have developed the role of our support staff to be able to deliver this across the school and to do more of this work."

Lee Bell, Saltersgate Infant School, Doncaster, South Yorkshire

"Every child who has taken part in the intervention programme has made progress. We can even see the children going back into class and using the strategies, so it is transferring back into class as well as during the intervention itself."

Emma Berry, Rowanfield Infant & Junior school, Gloucestershire

Read more school stories at
hamishandmilo.org/school-stories/

References and sources

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4 Timpson review of school exclusion https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/807862/Timpson_review.pdf May 2019

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6 National Children's Bureau https://www.ncb.org.uk/about-us/media-centre/news-opinion/radar-children-who-lost-parent-during-covid Nov 2021

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13 School Census Statistics Team, National statistics https://explore-education-statistics.service.gov.uk/find-statistics/permanent-and-fixed-period-exclusions-in-england July 2023

14 Action for Children https://www.actionforchildren.org.uk/blog/where-is-child-poverty-increasing-in-the-uk/ Source: End Child Poverty Coalition This data is based on the DWP/HMRC statistics 'Children in low income families: local area statistics 2014 to 2022' March 2023

15 Guardian News & Media Limited https://www.theguardian.com/education/2023/sep/13/school-suspensions-rise-sharply-among-disadvantaged-children-in-england Sept 2023

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17 Households Below Average Income, Statistics on the number and percentage of people living in low income households for financial years 1994/95 to 2021/22, Table 1.4a. Department for Work and Pensions, 2023 https://cpag.org.uk/child-poverty/child-poverty-facts-and-figures#footnote2_dq76ukp

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