# 'They find their voice'

Supporting children's wellbeing and development of social and emotional competencies in the post-pandemic era:
A quasi-experimental study on the effectiveness of the Hamish & Milo SEMH Programme

Hamish & Milo University of Bath Evaluation Project
EXECUTIVE SUMMARY

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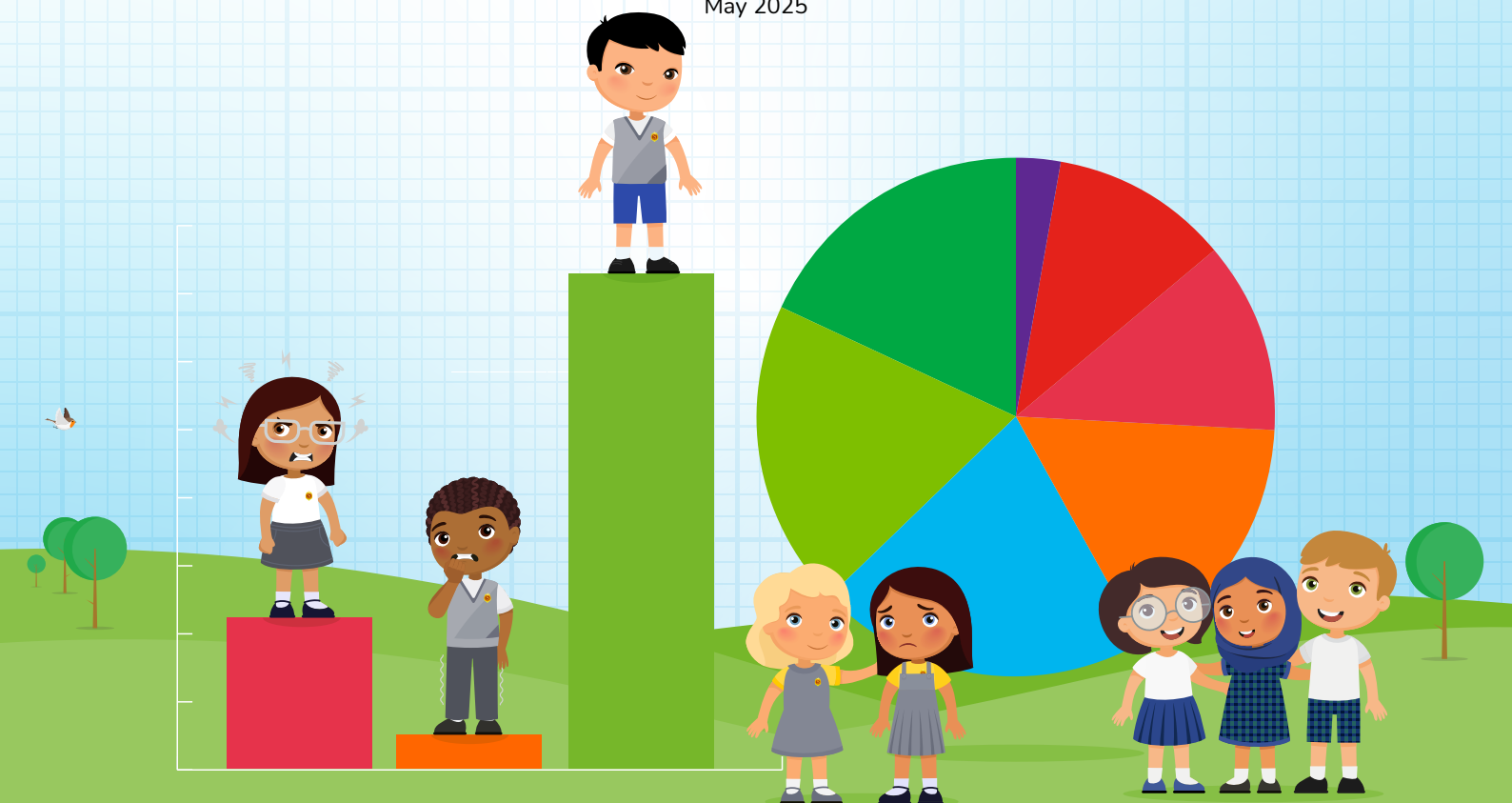
Preface

As an introductory note, this report brings together multiple perspectives from professionals who work in educational settings, based on their experiences and observations using Hamish & Milo when working with primary-aged children to support their social and emotional developmental competencies.

Hamish & Milo offers a wellbeing programme that can be effectively implemented in school settings and aims to foster these competencies whilst also supporting children's wellbeing and mental health more broadly through the delivery of small group sessions.

Through a collaborative approach to evaluation, and through an embedded evaluation team with Hamish & Milo, data has been collected, where resource has allowed this, through a real-world research lens. The findings to date show emerging and exciting potential for programmes such as Hamish & Milo to provide an important and useful resource in educational settings to support children's socio-emotional development.

Given the current landscape across education and health and social care sectors, where need outstrips resource in terms of children's mental health and wellbeing, educational settings provide a critical opportunity to support children through the delivery of wellbeing programmes.

Hamish & Milo provides a well-designed programme to meet a wide range of children's needs whilst fitting efficiently into PSHE and/or SENCO provision, offering valuable universal and targeted provision opportunities to schools.

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

In collaboration with the University of Bath, this study was conducted over a two-year period and involved over 1,600 pupils and 250 school staff, across 90+ schools located across England.

A quasi-experimental mixed-methods approach was employed using a range of outcome measures within a single sample (no comparison group) to evaluate the effectiveness of the Hamish & Milo Programme; to explore the experiences and perceptions of school staff engaged with the programme; and to derive findings that could complement and enhance insights from the statistical data analysis.

This study reveals valuable insight into the Hamish & Milo Programme, with the findings demonstrating statistically significant measurable improvements in pupil's behaviours, emotions, relationships and social and emotional competencies. Anecdotal evidence gathered from school staff demonstrated that positive outcomes were observed across the school community, including improved relationships, learning engagement, pupil wellbeing; and a reduction in behavioural escalations and school exclusions.

For a deeper exploration of the research methodology, impact data, and implementation strategies, we invite you to engage with the full report, visit www.hamishandmilo.org/evidence

Contents

If you're interested in discussing the findings, exploring research partnerships, or identifying potential funding opportunities to extend this work, we'd love to hear from you.

This project provides a robust foundation for further inquiry into the impact of social and emotional interventions on children's wellbeing and learning.

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Introduction

There is evidence suggesting that the best predictor for adult life satisfaction is subjective wellbeing and emotional health during childhood.[1]

The family is consistently regarded as the most important social context affecting the emotional health of the child, with the next most influential social context being the school.[2] The wellbeing and mental health of children and young people ('CYP') are the building blocks that form the foundation that supports all other aspects of their growth and development.

Sound mental health supports positive outcomes in many areas of a CYP's life, including the formation of friendships; the ability to cope with adversity; the achievement of success in school and in their wider lives.[3]
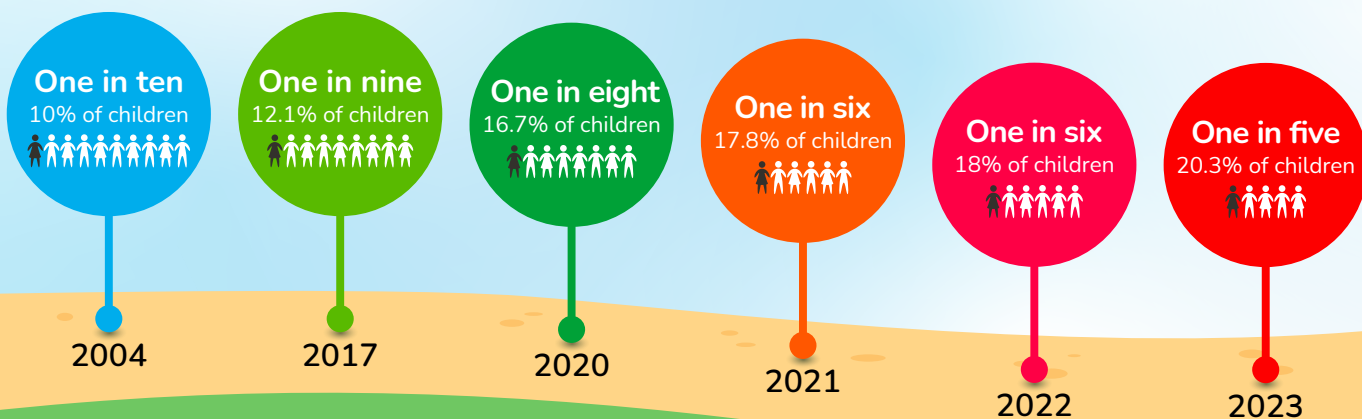
> Disruptions caused by adverse factors in their environments and relationships during this developmental process can impair a child's physical, psychological, cognitive, social, and emotional processes, along with their capacity for learning and relating to others, with lifelong implications.[4]

The prevailing theoretical framework for subjective wellbeing in childhood and adolescence suggests that an individual uses three factors to evaluate their levels of wellbeing: their experience of positive and negative emotions; levels of life satisfaction; and the extent to which their lives have meaning and purpose.[5]

The Children's Society's Good Childhood Report 2024 determined that the UK performed poorly compared to other countries across Europe on several wellbeing measures including school safety; school belonging; long-term absences from education; and the difficulties faced by CYP and their families in accessing support and treatment.[6]

Research conducted over the past 20 years suggests that there has been a sharp rise in mental ill-health among CYP in England during that period. Data collected in 2004 as part of the children and young people's mental health prevalence study found that 1 in 10 CYP aged between 5 and 16, were diagnosed as having a mental health difficulty.[7] The most current research, conducted in 2023, shows a significant increase with 1 in 5 CYP, or 20% of 8- to 16-year-olds, described as having a probable mental health disorder.[8]

Further evidence suggests that there are distinctive groups of CYP who are disproportionately represented in these statistics due to the presence of a complex interplay of social and environmental factors occurring in their environments. Of particular significance were findings of a higher prevalence of mental distress reported amongst CYP whose family circumstances were characterised by greater socioeconomic stress, including those with low household incomes and those from lone-parent or reconstituted families.[9]

One in ten
10% of children
2004

One in nine
12.1% of children
2017

One in eight
16.7% of children
2020

One in six
17.8% of children
2021

One in six
18% of children
2022

One in five
20.3% of children
2023

NHS Digital indicates a significant rise in CYP experiencing mental health problems, with a notable increase from one in ten in 2004 to one in five in 2023[22]

The environment of relationships affecting CYP

Children experience their world as an 'environment of relationships' and the quality of these connections influence virtually all aspects of their physical, social, emotional, cognitive, behavioural and moral/cultural development.[10]

CYP who grow and develop surrounded by adversity such as abuse, neglect, community violence, and homelessness - or those who live in households where adults are experiencing mental health issues or harmful addictions - are more likely to experience immediate and long-term deleterious effects to their physical health and wellbeing.[11]

The term 'Adverse Childhood Experiences' or 'ACEs' which rose to common use through a large-scale research study published over 25 years ago[12] identifies these highly stressful incidents or environments that CYP may be exposed to and describes the potential long-lasting trauma that they may cause. ACEs can negatively affect the developing brain and body and increase harmful risks relating to physical health and behaviour.[13] The effects of early life adversity and trauma have been documented in research which demonstrates the capacity for ACEs to disrupt the neurodevelopment of children.[14] Other studies describe the strong association between ACEs and cognitive, emotional and behavioural difficulties in childhood and adolescence, which can negatively impact upon their school experience.[15]

Research evidence demonstrates that by addressing common risk factors, a broad range of approaches can be used to prevent, respond to, and mitigate the impacts of ACEs.[16] Initiatives that support the development and continuance of safe, stable, nurturing relationships and environments for CYP, families, and wider communities - including programmes that develop CYP's physical, cognitive and SEL skills; parenting programmes that educate and support parents; and training programmes for professionals - have demonstrated their effectiveness in responding to the challenges and consequences of ACEs.[17]

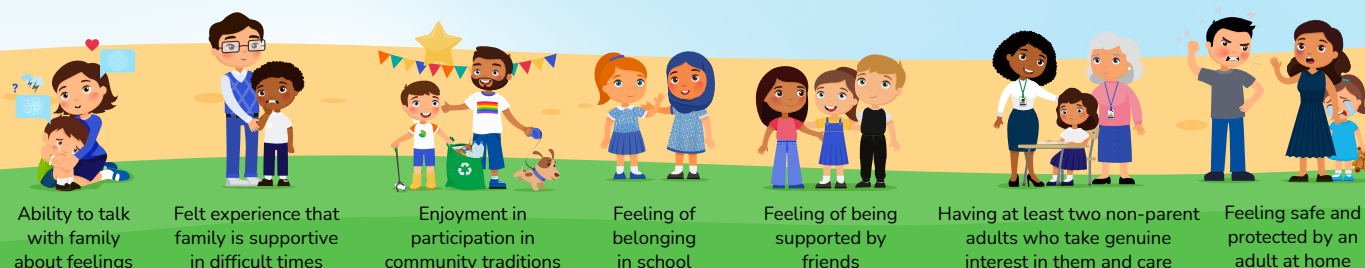**The seven Positive Childhood Experiences or 'PCEs'**

A groundbreaking study was conducted in 2015 with the aim of identifying any Positive Childhood Experiences or 'PCEs' that could buffer against the deleterious effects of ACEs, with researchers looking to identify the factors that created a level of resiliency in individuals which helped them to thrive despite the trauma present in their childhoods.[18]

> The results of the original study determined that there are seven PCEs that can be statistically linked to good wellbeing outcomes, despite the presence of adversity, and that the more PCEs an individual reported, the more likely they were to report few or no issues of poor mental health in adulthood.[19]

PCEs can be organised into four broad categories:

- Being in nurturing, supportive relationships;
- Living, developing, playing, and learning in safe, stable, protective, and equitable environments;
- Having opportunities for constructive social engagement and to develop a sense of connectedness;
- Learning social and emotional competencies.[20]

A recent study highlighted the significance of the domains wherein PCEs occur, inclusive of the home (parent relationships), at school (peer relationships and school climate), and in the wider community in relation to their protective associations in mitigation of ACEs through to adulthood.[21] The study described the supportive childhood school environment as one of these domains and specified the factors implicated in its protectiveness as being the caring relationships existing between CYP and school staff, the sense of belonging CYP felt at school, and safeguarding policies and practices employed by schools to keep pupils safe.

Ability to talk with family about feelings

Felt experience that family is supportive in difficult times

Enjoyment in participation in community traditions

Feeling of belonging in school

Feeling of being supported by friends

Having at least two non-parent adults who take genuine interest in them and care

Feeling safe and protected by an adult at home

The school as a community of care

Most children spend more time in school than any other place outside their home, and parents concerned about their child's mental health turn to schoolteachers for help and advice more often than any other professional group.[23]

Schools have a statutory duty to promote the wellbeing of their pupils through the provision of a safe and rich learning environment that supports healthy development, and through a curriculum that raises levels of awareness and education around mental health.[24] Schools are also well placed to identify the emergence of issues early and provide tailored approaches to support the particular needs of their pupils as well as the coordination of specialist support and treatment, if necessary, which can prevent impairment of their health or development and enable them to attain the best possible outcomes.[25]

> There is strong evidence showing that school environments are well suited to graduated prevention approaches where there are both universal and targeted interventions.[26]

The same government research found that when school staff - including teachers and support staff members - receive appropriate training and support, they can achieve outcomes comparable to those accomplished by trained therapists for CYP with mild to moderate mental health concerns.[27]
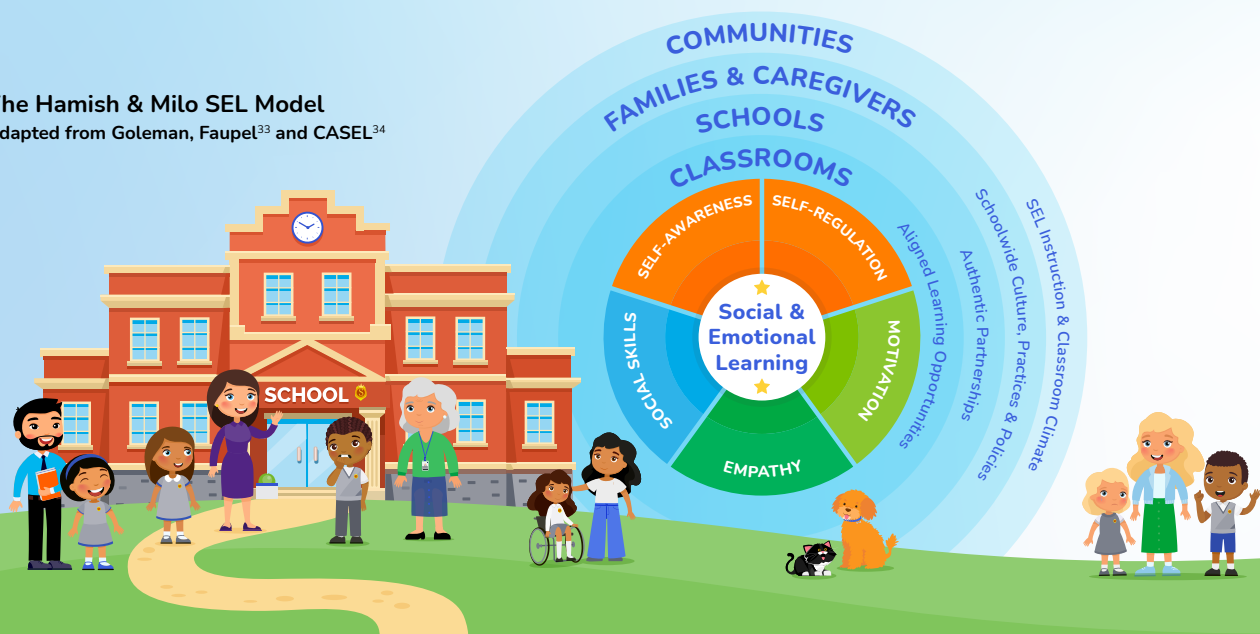
Previous research has demonstrated that whilst children differ in their help-seeking and preferences for mental health support, more would like to access help within their school than are currently able to do so.[28] The concept of 'care' within the context of education suggests that the purpose of schooling extends beyond the instructional and the academic to include a moral responsibility to care for pupils and their wellbeing, thereby enabling them to achieve their potential in all aspects of their lives.[29]

When this ethic of care is experienced by pupils themselves and is additionally modelled and taught in school, it not only forms the basis of a classroom community of independent learners but also promotes the development of social and emotional skills alongside academic learning that enhances the life of the wider community - as pupils grow to become good friends, neighbours, citizens, workers, parents and lifelong learners.[30] This ethic of care, grounded in the safety of authentic relationships, also forms the basis for a school-wide 'community of care'[31], consisting of pupils, school staff, and parents, wherein everyone feels valued and cared for.

The school as a community of care exists accordingly within a culture of mutual support and positive intent that prioritises the wellbeing of all its members and promotes a sense of belonging and psychological safety.[32]

The Hamish & Milo SEL Model
Adapted from Goleman, Faupel[33] and CASEL[34]

COMMUNITIES
FAMILIES & CAREGIVERS
SCHOOLS
CLASSROOMS

SELF-AWARENESS · SELF-REGULATION · SOCIAL SKILLS · MOTIVATION · EMPATHY

Social & Emotional Learning

Aligned Learning Opportunities · Authentic Partnerships · Schoolwide Culture, Practices & Policies · SEL Instruction & Classroom Climate

Current context for schools

According to a census of school provision conducted in the 2023/24 academic year, there are currently over 1.6 million pupils in England identified as having special educational needs (SEN),[35] with these figures reflect an increasing trend of SEN since 2016.
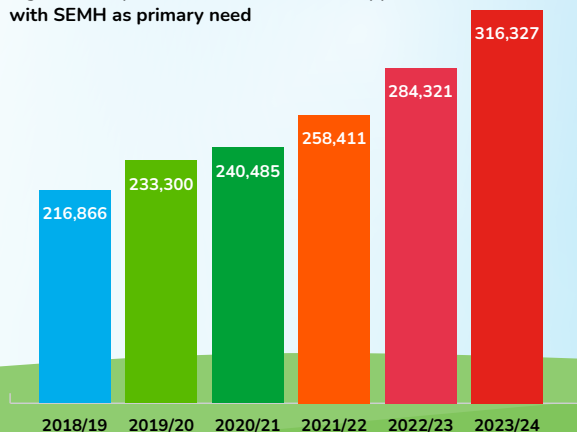
Social, Emotional and Mental Health Difficulties (SEMHD) are one of 11 primary types of SEN identified in the revised SEN Code of Practice,[36] which provides statutory guidance on the duties, policies and procedures to all organisations with responsibility for the education, health and wellbeing of CYP and their families in England. Speech, language, and communication needs (SLCN) are the most common among pupils receiving SEN support, followed by social, emotional, and mental health needs (SEMH), and moderate learning difficulties.[37]

The origins and causes of SEMHD can be attributed to a range of individual and co-occurring underlying factors, including the unique life experiences and genetic predispositions of a CYP, as well as the various environmental contexts that have influence over their lives.[38]

The most recent data collected by The Department for Education showed that more than 316,000 CYP were identified as having social, emotional and mental health needs in schools in England in 2023/24[39] and that CYP with SEMHD often struggle to engage in a structured learning environment and frequently require additional specialised support from schools to reach their full potential.[40]
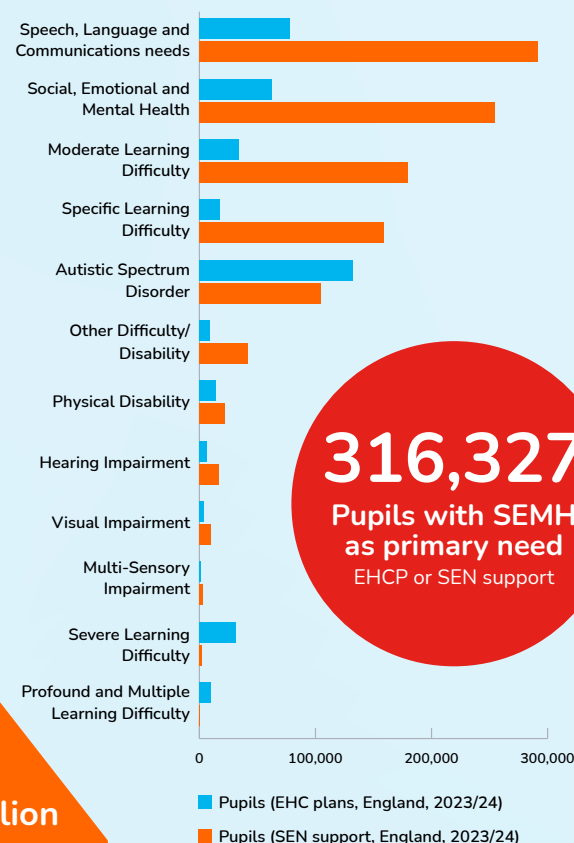
The alarming levels of SEMHD reported in recent years reflect the mounting concern within education about the prevalence of SEMHD, how this is affecting their pupils' engagement with learning, and how to effectively provide the required support to address the underlying needs.[41]

With the increased pressures placed upon the entirety of the workforce and services offered by the NHS during and after the pandemic, and access to specialist services including Children and Young People's Mental Health Services (CYPMHS) being severely delayed, schools are increasingly required to provide earlier identification for pupils who may be at risk and to provide mental health support for pupils with mild to moderate difficulties.[42]

Figure 2 - Number of pupils with an EHC plan or SEN support, by type of need, Academic Year 2023/24

316,327
Pupils with SEMH as primary need
EHCP or SEN support

Pupils (EHC plans, England, 2023/24)
Pupils (SEN support, England, 2023/24)

An additional 53,641 children have SEN support but no specialist assessment of type of need cited.

Figure 1 - Pupils with an EHCP or SEN support with SEMH as primary need

2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
216,866	233,300	240,485	258,411	284,321	316,327

1.6 million

Pupils in England have special educational needs (SEN)

Lasting impact of the COVID-19 pandemic

The impact of the COVID-19 pandemic has been extensively studied since 2020, with significant evidence highlighting fundamental changes to the lives of many children and young people during this period.

The research data reflects the impact felt upon personal relationships, financial circumstances, physical and mental health and acknowledges the heightened pressures that this caused some families during and following the pandemic.[43] Evidence emerging from recent reports suggests that there has been a sharp rise in mental ill-health among CYP in England since the start of the pandemic[44] and that CYP with vulnerable characteristics - including those with special educational needs and disabilities (SEND), those with pre-existing mental health needs; and those living in economically disadvantaged circumstances - appear to have experienced greater negative impacts on their mental health and wellbeing.

> A recent report published by the Children & Young People's Mental Health Coalition highlighted that CYP with SEND were more than four times more likely to develop a mental health problem than average, meaning that 14% - or one in seven of all CYP with SEMHD in the UK - will also have a learning disability.[45]

The pandemic not only amplified existing inequalities but also created new challenges for disadvantaged families. Economic hardship and financial instability led to increased stress, housing and food insecurity, all of which are closely linked to deteriorating mental health in children. Many families faced barriers in accessing essential services, and digital poverty exacerbated educational inequalities, further isolating CYP from their support networks.

The extraordinary rise in demand for support has been directly attributed to the uncertainty, anxiety and disruption caused by the pandemic amplified and exacerbated the multiple existing pressures some CYP were already facing prior to this period. Delays in responding to this need for care and treatment have further harmed these CYP at a crucial stage of their development, with long waiting times leaving many without the help they need.[46]

The term 'learning loss' describes the gap between expected academic progress in a typical academic year and actual learning outcomes due to educational disruption related to COVID-19.[47] Research conducted by the Department for Education revealed that vulnerable CYP from disadvantaged backgrounds in the poorest areas of the country, particularly those with SEND, experienced greater levels of learning loss than their peers from more financially advantaged backgrounds.[48]

UK Poverty Rates 2025[49]

- 16% - 18%
- 18% - 20%
- 20% - 22%
- 22% - 24%
- Greater than 24%
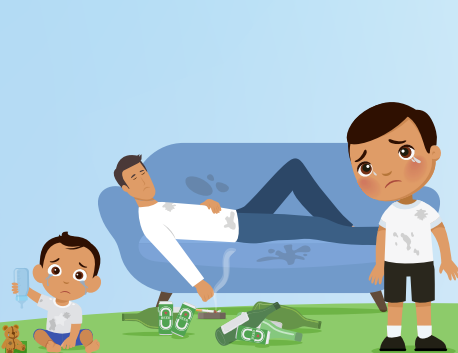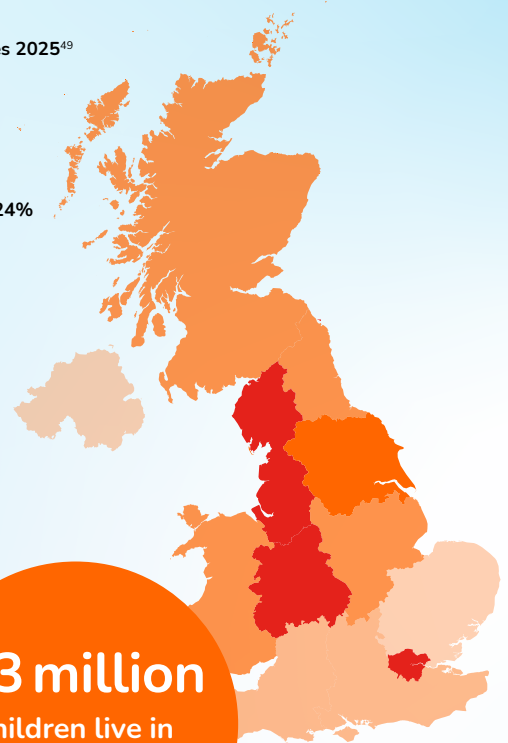
7 million low-income households (60%) are going without the essentials including 5.4 million experiencing food insecurity[50]

4.3 million children live in poverty - 30% of all children in the UK

Children missing from education

Since the pandemic, the issue of children missing from education has been widely reported and discussed in the mainstream media with the public interest heightening as these figures continue to soar beyond pre-pandemic levels.[51]

The Children's Commissioner estimated that in the period between 2022 and 2023, approximately 117,100 CYP were missing from mainstream schools in England,[52] which amounts to approximately one-in-five children who are persistently absent, meaning they may miss 10% or more of their school time.[53]

However, a report in December 2024 by the Education Policy Institute (EPI) suggested that the figure was actually significantly higher than official estimates. By comparing GP and school registrations, the study estimated that approximately 400,000 children aged 5–15 were not enrolled in school in 2023 - a 53% increase since 2017. This figure includes nearly 95,000 children formally registered for home education. After accounting for these, around 305,000 children were entirely missing from education, marking a 41% rise over the same period.[54]

Emotionally based school avoidance (EBSA) is a term which replaces previously used terms such as 'school refusal', 'truancy', etc. and is used to describe reduced or non-attendance at school due to emotional, mental health, and wellbeing issues.[55]

The Anna Freud National Centre for Children and Families acknowledges the complexity of the elemental causes of EBSA and suggests that the potential risk factors for non-attendance can be split into three main categories:[56]

- ✅ **Aspects specific to the child** e.g. mental health concerns such as anxiety, depression, etc.
- ✅ **Factors concerning the family and home** e.g. poverty, domestic violence, etc.
- ✅ **Issues to do with school** e.g. lack of support and provision to meet needs etc.

305,000 Children were entirely missing from education in 2023

A recent report published by the Children's Commissioner of England that examined the contextual circumstances of the children missing from education, described in the popular media as 'ghost children' [57] found that CYP living in the poorest conditions, those with SEMHD and moderate special educational needs, and those with social care involvement were overrepresented in the statistics.[58]

Despite the increasing numbers of CYP with EBSA, a recent investigation undertaken by the Children's Commissioner concluded that there is very little individualised or additional support available within schools to effectively reintegrate pupils missing from education.[59]

> Previous studies emphasise the importance of early identification and intervention when considering support for young people experiencing EBSA.[60]

The concept of social capital - the social networks that groups form to create a sense of belonging and ensure cohesion - has been suggested as a potential protective factor in promoting school attendance.[61] A review conducted in 2019 demonstrated that when CYP participated in school activities which enabled relationship formation between adults and peers, school avoidance was inhibited.[62]

In an average school class of 30 children data shows that...

- 🔴 1 is classed as a child in need and under social care [63]
- 🔴 2 live in households where domestic violence or abuse is present
- 🟠 4 live in households affected by domestic violence, substance misuse, and/or severe mental health problems
- 🟢 5 have an identified special educational need (SEN) although only 1 has a SEN statement or EHCP [64]
- 🔵 6 have a mental health issue, but only 3 of them received even one contact with CYPMHS [65]
- 🔵 No apparent needs

Exclusions

It is reported that rates of both temporary, otherwise known as fixed term or suspension, and permanent exclusions of CYP from schools across the UK are rising rapidly in both primary and secondary schools.

There is a concerning rise, particularly in primary school exclusions in England, with suspensions and permanent exclusions increasing significantly. The number of suspensions increased by 36%, from 578,300 in 2021/22 to 787,000 in 2022/23 increasing for primary aged children by 27%, from 66,200 to 84,300. The number of permanent exclusions increased by 44% from 6,500 in 2021/22 to 9,400 in 2022/23 increasing for primary pupils by 58%, from 760 to 1,200.[66]

The latest data for the Autumn term 2023/24 demonstrates a continuation of this trend, with 346,300 suspensions reported - an increase of 40% compared to Autumn term 2022/23, increasing in primary schools by 41%.[67]

> There were 4,200 permanent exclusions, an increase of 34% compared to the previous autumn term when there were 3,100 permanent exclusions increasing in primary schools by 35%.

The most common reason cited for suspensions (50% of cases) and exclusions (36% of cases) represented in these statistics - and for those in previous terms and years - was instances of 'persistently disruptive behaviour'.
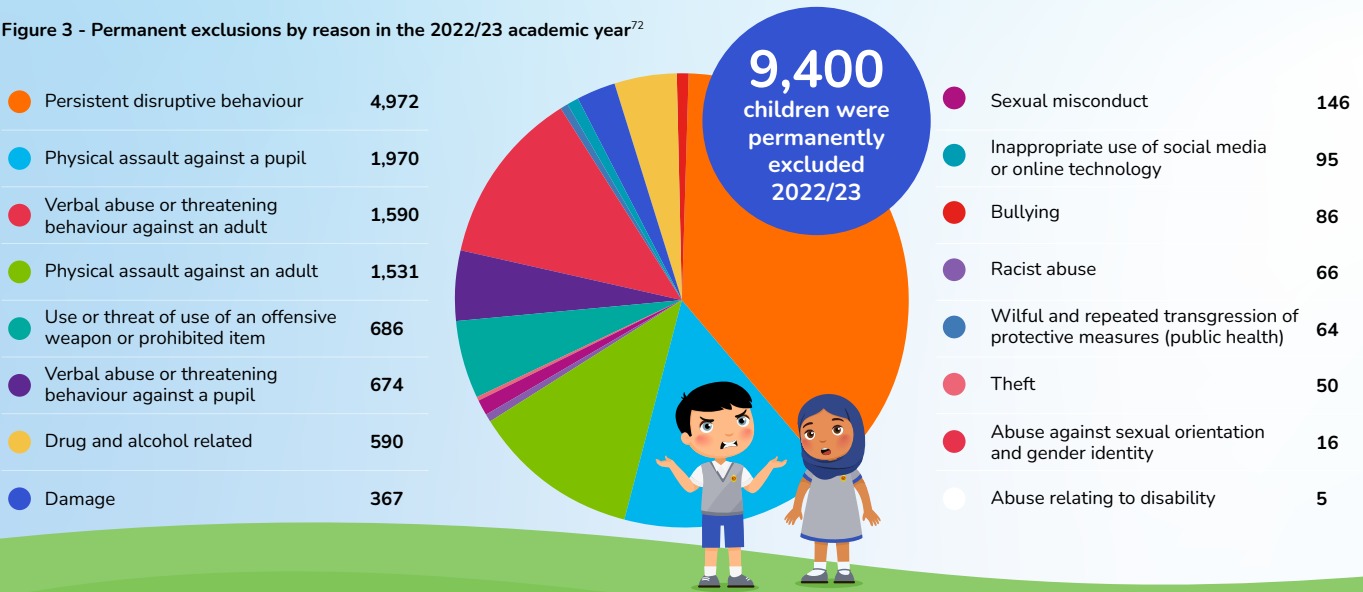
School exclusions are associated with a range of short- and long-term negative outcomes for CYP including, significantly lower educational attainment; increased risk of mental health issues; difficulties with social interaction; higher likelihood of unemployment; potential involvement in criminal activity; and a decreased sense of wellbeing.[68]

A recent report revealed a more detailed picture of the children behind the statistics and showed that those likely to suffer most from the negative outcomes of the lost learning opportunities caused by exclusions are those facing the greatest challenges of their lives, including poorer children; children known to social services; those with SEN and/or SEMHD; and children from ethnic minority backgrounds.[69]

The evidence suggests that exclusions are an ineffective strategy in changing pupil behaviour - particularly if the action does not address underlying causes - and that they can represent a critical missed opportunity in decreasing the likelihood of the excluded pupil developing multiple poor outcomes,[70] including poor academic outcomes.

Alternatively, research shows that targeted initiatives which promote positive teacher-student relationships, early mental health support, and problem-solving interventions can contribute to a more constructive and nurturing educational environment and reduce the instances of exclusions.[71]

Figure 3 - Permanent exclusions by reason in the 2022/23 academic year[72]

Persistent disruptive behaviour	4,972
Physical assault against a pupil	1,970
Verbal abuse or threatening behaviour against an adult	1,590
Physical assault against an adult	1,531
Use or threat of use of an offensive weapon or prohibited item	686
Verbal abuse or threatening behaviour against a pupil	674
Drug and alcohol related	590
Damage	367

9,400 children were permanently excluded 2022/23

Sexual misconduct	146
Inappropriate use of social media or online technology	95
Bullying	86
Racist abuse	66
Wilful and repeated transgression of protective measures (public health)	64
Theft	50
Abuse against sexual orientation and gender identity	16
Abuse relating to disability	5

Pastoral support staff

Following the pandemic, one of the most pressing challenges that schools across the UK are facing is the significant shortage of teaching assistants (TAs), with the low recruitment activity and retention issues arising from poor working conditions, low pay, and the lack of career progression.[73]

Although pastoral roles in schools are often ill-defined[74] and the professional remit of TAs is yet unresolved,[75] it is widely recognised that the roles and responsibilities of TAs have increased significantly in recent years and this workforce plays a vital role in supporting the wellbeing and safeguarding of CYP - particularly those with SEND - and that their professional skills are in high demand.[76]

The UK government's own research indicates that TAs are effective in providing early identification of SEMHD, and when they are properly supported and adequately trained, they can effectively deliver interventions for mild to moderate mental health issues, achieving outcomes similar to those provided by trained therapists.[77]

A research report from the Department for Education published September 2024 with TAs and school leaders views revealed that many secondary (53%) and special schools (51%) are planning to hire more TAs next year, mainly due to the growing number of students with special educational needs and disabilities (SEND).[78]

> Comparatively, over a third of primary school leaders (33%) say their TA numbers will decrease citing financial pressures as the main reason emphasising that they are having to reduce TA staff only because they can no longer afford to keep as many.

Due to the changing nature of education that requires schools to meet the needs of pupils, and the increased emotional labour of the staff engaged in supportive roles, it is recommended that schools engage with professional supervision provision that could address some of the psychological challenges faced by these workers.[79]

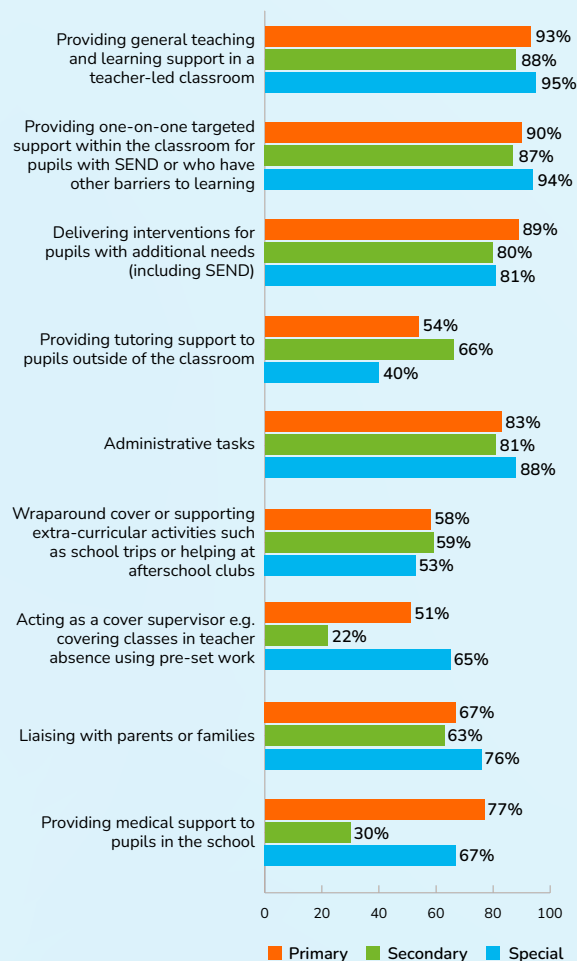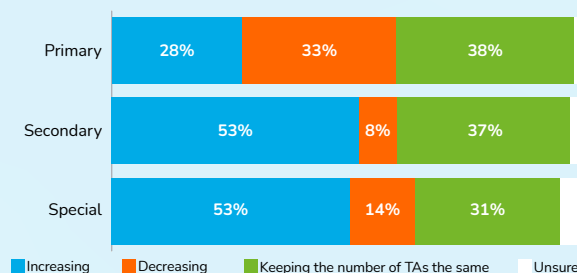**Figure 4 - Types of support performed 'most' or 'some' of the time by TAs by setting**

Providing general teaching and learning support in a teacher-led classroom
- Primary: 93%
- Secondary: 88%
- Special: 95%

Providing one-on-one targeted support within the classroom for pupils with SEND or who have other barriers to learning
- Primary: 90%
- Secondary: 87%
- Special: 94%

Delivering interventions for pupils with additional needs (including SEND)
- Primary: 89%
- Secondary: 80%
- Special: 81%

Providing tutoring support to pupils outside of the classroom
- Primary: 54%
- Secondary: 66%
- Special: 40%

Administrative tasks
- Primary: 83%
- Secondary: 81%
- Special: 88%

Wraparound cover or supporting extra-curricular activities such as school trips or helping at afterschool clubs
- Primary: 58%
- Secondary: 59%
- Special: 53%

Acting as a cover supervisor e.g. covering classes in teacher absence using pre-set work
- Primary: 51%
- Secondary: 22%
- Special: 65%

Liaising with parents or families
- Primary: 67%
- Secondary: 63%
- Special: 76%

Providing medical support to pupils in the school
- Primary: 77%
- Secondary: 30%
- Special: 67%

■ Primary ■ Secondary ■ Special

Figure 5 - Schools increasing or decreasing its TAs by phase

Phase	Increasing	Decreasing	Keeping the number of TAs the same	Unsure
Primary	28%	33%	38%	
Secondary	53%	8%	37%	
Special	53%	14%	31%	

■ Increasing ■ Decreasing ■ Keeping the number of TAs the same □ Unsure

The development of social and emotional competencies

Social and emotional learning (SEL)

SEL is described as 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.[80]

The development of social and emotional skills is recognised as being a protective factor for good mental health in that SEL competencies equip CYP with the inner resources and strategies to address mental health challenges that can impact their lives, learning experiences and wellbeing.[81]

> Prioritising and supporting the social and emotional wellbeing of children supports their development and enables them to achieve positive outcomes in school, work, and in life more generally.[82]

There is extensive international evidence that teaching social and emotional learning through planned programmes in school can have a positive impact on children's attitudes to learning, relationships in school, academic attainment, and a range of other outcomes[83] and that these beneficial outcomes can persist over time.[84]

Self-regulation, along with other social and emotional competencies, including self-awareness and social skills, developed in childhood are predictors of a range of adult outcomes such as life satisfaction, wellbeing, job success and physical health.[85] SEL instruction is carried out most effectively in nurturing, safe environments, characterised by positive and caring relationships among children and trusted adults in the school environment.[86]

Whole school approaches

Based on the available evidence, a range of government departments have identified a whole school or universal approach as an important tool for promoting good mental health in CYP.[87]

Whole school approaches that prioritise and embed relational and restorative principles and practices are identified as among the most effective means of protecting and promoting the mental health and wellbeing of CYP.[88] Additionally, a whole school approach involves a targeted element wherein schools can identify pupils with emerging mental health needs, provide early intervention and support for these needs; and refer pupils for more specialist support, if this is required.[89]

Figure 6 - Eight principles to promoting a whole school approach to mental health and wellbeing, Public Health England and the Department for Education, 2021[90]

Early identification and evidence-based intervention

The prevalence of pupils with SEMHD in schools requiring additional support indicates the necessity for an increased awareness of these needs amongst educators and highlights the importance of early identification and intervention as a preventative measure to address challenges before they become more complex.[91]

Although a substantive and growing body of research indicates that CYP can learn to develop social and emotional competencies in an educational context, schools report having limited resources to address the range of needs amidst the time constraints, competing demands, and the intense pressures to enhance academic performance they are experiencing.[92]

> Schools are considered ideal settings to identify SEMHD and educational professionals can play a pivotal role in this respect.[93]

Although the measurement of the development of social and emotional competencies can be challenging, innovation in psychosocial assessment suggests that the validity and reliability of several instruments already employed in a school context can be used to measure relevant social and emotional skills within a culture.[94]

Research evidence demonstrates that policymakers, schools and families each play a pivotal role in promoting and facilitating social and emotional skills development by improving learning environments - through teaching practices, parenting and intervention programmes - to enhance these skills.[95]

The terms 'evidence-informed' or 'evidence-based' practices (EBP) commonly refer to teaching approaches, intervention programmes, and resources used in educational settings that are supported by methodologically rigorous scientific studies demonstrating their effectiveness in improving pupil outcomes.[96]

For positive effects to be achieved, implementation quality and fidelity are identified as key factors in the effectiveness of SEL interventions. Some key characteristics of effective SEL interventions identified include programmes with a strong theoretical foundation with well-designed goals; those that use a coordinated and sequenced approach to achieving their objectives; programmes that are explicit about teaching skills that enhance SEL competencies; those that use empowering approaches including interactive teaching methods; and programmes that start early with the youngest and continue through the school year groups.[97]

Amazing me
Celebrating me
My friends and me
Exploding me
Resilient me

Calm me
Finding me
New beginnings and me
Actions, words and me
Memories and me

Connection
Co-regulation
Belonging
Creative enrichment

Emotional Literacy
& Social Group
Development

Social Environment,
Adverse & Positive
Childhood
Experiences

Adaptive
& Social Brain

Human Needs
& Development

Attachment & Emotional
Regulation

Figure 4 - The Hamish & Milo Theoretical Model

The Hamish & Milo Programme for SEL and SEMH support

A large and growing body of literature emphasises that nurturing, reliable and responsive relationships are fundamental to optimal child development and wellbeing.[98]

It is within an 'environment' of nurturing and trusted relationships, that children learn how to think, understand, communicate, express emotions, and develop social skills.[99]

At the core of the Hamish & Milo Programme is the understanding that nurturing relationships are crucial for children to develop healthy brain and body functioning which in turn, lays the foundation for later outcomes such as physical and mental wellbeing, academic performance, and interpersonal skills.

The theoretical framework for the Hamish & Milo Programme has been designed within the context of the theoretical landscape of Relational-Cultural Theory,[100] which acknowledges the inherently social nature of human beings which drives an individual to grow through and toward connection throughout the lifespan. These connections or 'growth-fostering' relationships,[101] built on mutual empathy and mutual empowerment, allow CYP to feel safe and comforted, and have a sense of belonging which supports their wellbeing, self-worth; awareness of self and others, and creates an inclination for continued connection.[102]

The relational foundation of the Hamish & Milo Programme acknowledges and actively promotes Positive Childhood Experiences,[103] acknowledging them as essential, interrelated experiences of connectedness in the social contexts of CYP that promote a sense of attachment, belonging, personal value, and positive regard. Available evidence suggests that CYP with positive childhood mental health are better equipped to form strong peer relationships and enjoy their school experience to a greater extent than children with poor mental health.[104]

Additionally, the Hamish & Milo Programme is designed to generate and promote positive experiences that engage CYP with the wider relationships in their environments - relationships with adults in school; their friends; their parents and families; and their relationships with members of their wider communities. Through the facilitation of opportunities for PCEs at school, whilst simultaneously providing learning opportunities for the development of five core SEL competencies - self-awareness; self-regulation; motivation; empathy; and social skills[105] - the Hamish & Milo Programme aims to ease emotional distress, prevent vulnerability to negative outcomes, and to promote positive mental health and wellbeing.

> The Hamish & Milo Programme is a comprehensive SEL and SEMH support intervention for primary-aged children which aims to support the development of pupils' SEL skills and improve their wellbeing.

The Hamish & Milo Programme has been designed to provide an explicit framework that provides pastoral staff in schools with a range of resources to support pupils' social and emotional wellbeing through the development of SEL competencies, and to enhance the non-statutory personal, social, health, and economic education (PSHE) curriculum[106] currently taught in all schools in England.
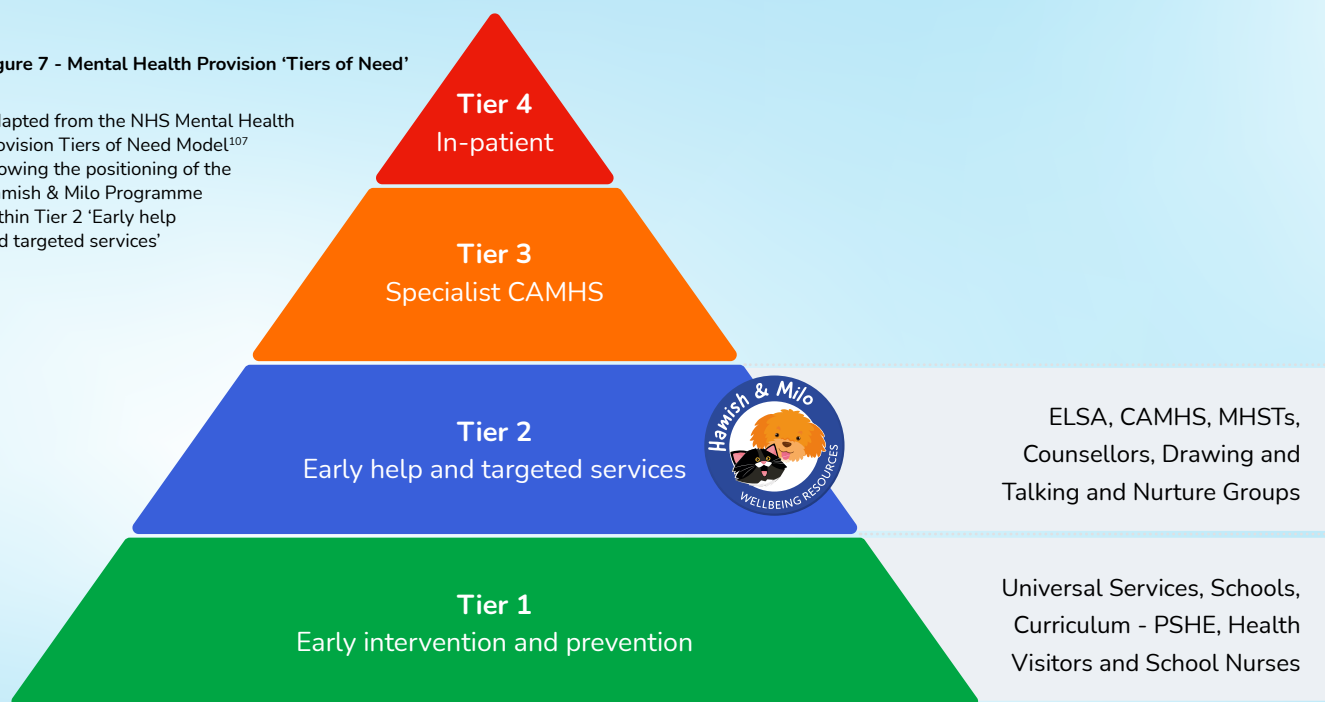
The Hamish & Milo Programme provides early mental health support and targeted intervention services at Tier 2 of the NHS provision model.

The Hamish & Milo Programme is facilitated and delivered by educational practitioners based in schools, usually pastoral or mental health support members of staff, referred to as Hamish & Milo 'Champions.'

Figure 7 - Mental Health Provision 'Tiers of Need'

Adapted from the NHS Mental Health Provision Tiers of Need Model[107] showing the positioning of the Hamish & Milo Programme within Tier 2 'Early help and targeted services'

Tier 4
In-patient

Tier 3
Specialist CAMHS

Tier 2
Early help and targeted services

ELSA, CAMHS, MHSTs, Counsellors, Drawing and Talking and Nurture Groups

Tier 1
Early intervention and prevention

Universal Services, Schools, Curriculum - PSHE, Health Visitors and School Nurses

The content of the Hamish & Milo Programme is informed by a wide range of theoretical contexts, models, and research evidence that place the significance of relationships at the core of optimal human development.

A key element of this approach is the establishment of a trusted relationship between the adult group facilitator (Hamish & Milo Champion) and the children to ensure that they experience a sense of emotional safety and belonging.

Support is provided individually or most often, in a co-regulated small-group structure, with the aim being to address key areas of each child's emotional development needs.

The Hamish & Milo Programme consists of ten emotion-themed units focussing on the concepts of friendship, resilience, anxiety, diversity/inclusion, angry feelings, transition/change, conflict, loss, sadness and self-esteem. Through the approach and activities, the programme provides opportunities for SEL skills development and psychoeducation, and for children to gain an understanding of and share their emotional experiences through discussion. During weekly sessions carried out over a school term, the Hamish & Milo Champion facilitates a pre-planned and detailed session plan allowing pupils to participate in creative activities, group discussions, and reflections about their experiences, feelings, and situations, that may be significant in their lives.

Figure 8 - The ten emotion themes of the Hamish & Milo Programme

The Hamish & Milo emotion theme programmes support the development of the five social and emotional competencies (self-awareness; self-regulation; motivation; empathy; and social skills) that have been linked to a range of positive outcomes and that constitute emotional intelligence.[108]

The Hamish & Milo Programme aligns with research evidence that CYP acquire and advance these competencies sequentially, through social connection, and in accordance with recognised stages of human psychosocial development.[109]

The developmental pathway for social and emotional literacy (SEL) emotional literacy (EL) according to the Hamish & Milo Programme is detailed below in Figure 9 which demonstrates the sequence of competency development with the corresponding Hamish & Milo emotion theme programme and resource linked to each skill.

Self-regulated Adult	Establishing emotional safety	Co-regulation	Self-awareness	Self-regulation	Motivation	Empathy	Social skills
Supervision	Connection Attachment Relationship						
	All ten themes	All ten themes	Amazing me	Calm me	Resilient me	Memories and me	Actions words and me
		Sock puppets	Celebrating me	Exploding me	New beginnings and me	Finding me	My friends and me

Figure 9 - The Hamish & Milo Social Emotional Literacy Pathway adapted from Faupel, 2003 [110] ; Goleman, 1995 [111]; and Schore, 2015 [112] and corresponding Hamish & Milo Programme Emotion Themes.

The Hamish & Milo Champions play a crucial role in supporting the children in their care by providing a consistent, safe, and supportive environment where social and emotional skills are modelled, facilitated, and fostered through trusted relationships.[113]

The Hamish & Milo Programme acknowledges the necessity for Hamish & Milo Champions to be self-aware, self-regulated, attuned and empathic in developing trusted relationships with the children in their care.

The Hamish & Milo Programme acknowledges the emotional labour of pastoral support staff in schools and offers professional supervision opportunities for Hamish & Milo Champions through facilitated, collaborative peer supervision sessions to ensure that their own wellbeing and mental health is protected and nurtured.[114]

The Hamish & Milo Programme also acknowledges the importance of co-regulation - enabled through trusted adult-child relationships - in establishing biological and emotional safety as a key factor in supporting children to develop their emotional vocabulary in navigating their emotional experiences.[115]

Consistent experiences of co-regulation empower children to develop increasingly complex SEL skills, learning to identify emotions, connect emotions to experiences, and respond adaptively to their emotional experiences, alongside the growth of their cognitive and language skills.[116]

Hamish & Milo University of Bath Evaluation Project

A substantive body of research evidence indicates that children can learn to develop social and emotional competencies and that engagement with skills-based programmes in schools can positively impact their social, emotional, behavioural, and academic development.[117]

The Hamish & Milo Programme was introduced in response to the increased numbers of CYP whose SEMH needs are adversely affecting their wellbeing and school engagement, and as a result, may be experiencing significant disruption to their educational experiences. In collaboration with the University of Bath's Department of Psychology, the Hamish & Milo University of Bath Evaluation Project (HMUoBEP) was devised with the objectives of:

- ✓ Understanding the development of social and emotional competencies for wellbeing amongst partnership schools from across the UK by the implementation of the Hamish & Milo Wellbeing Programmes.

- ✓ Exploring the intended outcomes of the programme to gain an understanding of its contribution in enhancing schools' capacity to support pupils' SEMH outcomes.

The HMUoBEP was implemented between September 2022 and September 2024 and consisted of two phases:

- ✓ **Phase 1 - Evaluate the effectiveness of the Hamish & Milo Programme using a range of measures.**

- ✓ **Phase 2 - Compare outcomes of pupils participating in the Hamish & Milo Programme against standardised UK norms, and explore the perceptions of school staff engaged with the Hamish & Milo Programme to answer the following research questions:**

  - ✓ Does the Hamish & Milo Programme work effectively?

  - ✓ Who benefits from the Hamish & Milo Programme?

  - ✓ Under which circumstances does the Hamish & Milo Programme work best?

  - ✓ Why is the Hamish & Milo Programme effective?

The project sequence and outcomes that were expected to take place over the course of the HMUoBEP are presented in the theory of change in the full report available online at www.hamishandmilo.org/evidence

Phase 1 - Evaluate the effectiveness of the Hamish & Milo Programme

The initial phase (September 2022 - October 2023) involved 603 children and 250 educational practitioners from over 90 schools across England with the research objective being to evaluate the effectiveness of the Hamish & Milo Programme.

Each participating school had purchased the full Hamish & Milo Programme, committed to assessing children with SEMHD and allowing children to complete ten sessions of a Hamish & Milo emotional theme programme (see the full list of the Hamish & Milo emotion themes and their corresponding SEL areas of focus in Figure 10), selected by each school, according to each pupil's indicated area of need.

School leaders attended a short online briefing session (Hamish & Milo Discovery Training) which set out the objectives of the project and provided an overview of the expected activities and outcomes. Thereafter, pastoral practitioners, the Hamish & Milo Champions, selected by schools to facilitate the programme(s), attended a comprehensive online training session (Hamish & Milo Explorer Training) which introduced the programme and provided practical assistance in launching the programmes in their schools. Additionally, Hamish & Milo Champions across school settings were grouped, according to similar geographical locations, into cohorts which met twice a term for online collaborative peer supervision sessions facilitated by a Hamish & Milo Lead Consultant.

Figure 10 - The ten emotion themes of the Hamish & Milo Programme and their corresponding social and emotional areas of focus
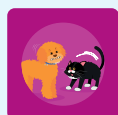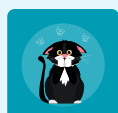

Actions, words and me
Helping children with conflict resolution

Celebrating me
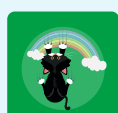Helping children with difference, diversity and inclusion

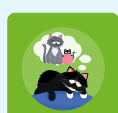**Resilient me**
Helping children with resilience
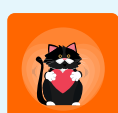

Calm me
Helping children with anxiety
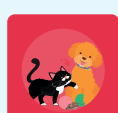

Finding me
Helping children with sadness

New beginnings and me
Helping children with change and transition

Memories and me
Helping children with loss, bereavement and grief

Amazing me
Helping children with their self-esteem and self-worth

My friends and me
Helping children with friendships
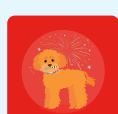
Exploding me
Helping children with strong and angry feelings

Pre- and post-intervention data for each participating child was collected using three prescribed impact measurement tools for impact evaluation:

- **Strengths and Difficulties Questionnaire (SDQ)** - an evidence-based, standardised clinical measure, widely used by clinical professionals in clinical work, educational settings, local authorities, and research. When completed by a class teacher or pastoral support practitioner, the SDQ can indicate areas requiring support in five subscales: emotional symptoms, conduct problems, hyperactivity - inattention, peer problems and prosocial behaviour, and measure changes in behaviours, emotions, and relationships in children and young people.

- **Hamish & Milo Child's Voice Questionnaire (CVQ)** - a self-evaluation questionnaire that captures the child's thoughts, feelings, and opinions from their perspective. The child-friendly format of the assessment empowers the pupil to identify areas of development as well their experience of participating in the programme themselves, and additionally, provides a self-measure of progress.

- **Hamish & Milo Child Wellbeing Profile (CWP)** - an observational assessment tool, designed to identify areas of strength and areas of development for social and emotional learning (SEL) competencies for each of the ten Hamish & Milo emotion theme programmes. The CWP is a quick and comprehensive checklist that is completed by a class teacher or pastoral support practitioner to measure changes in SEL.
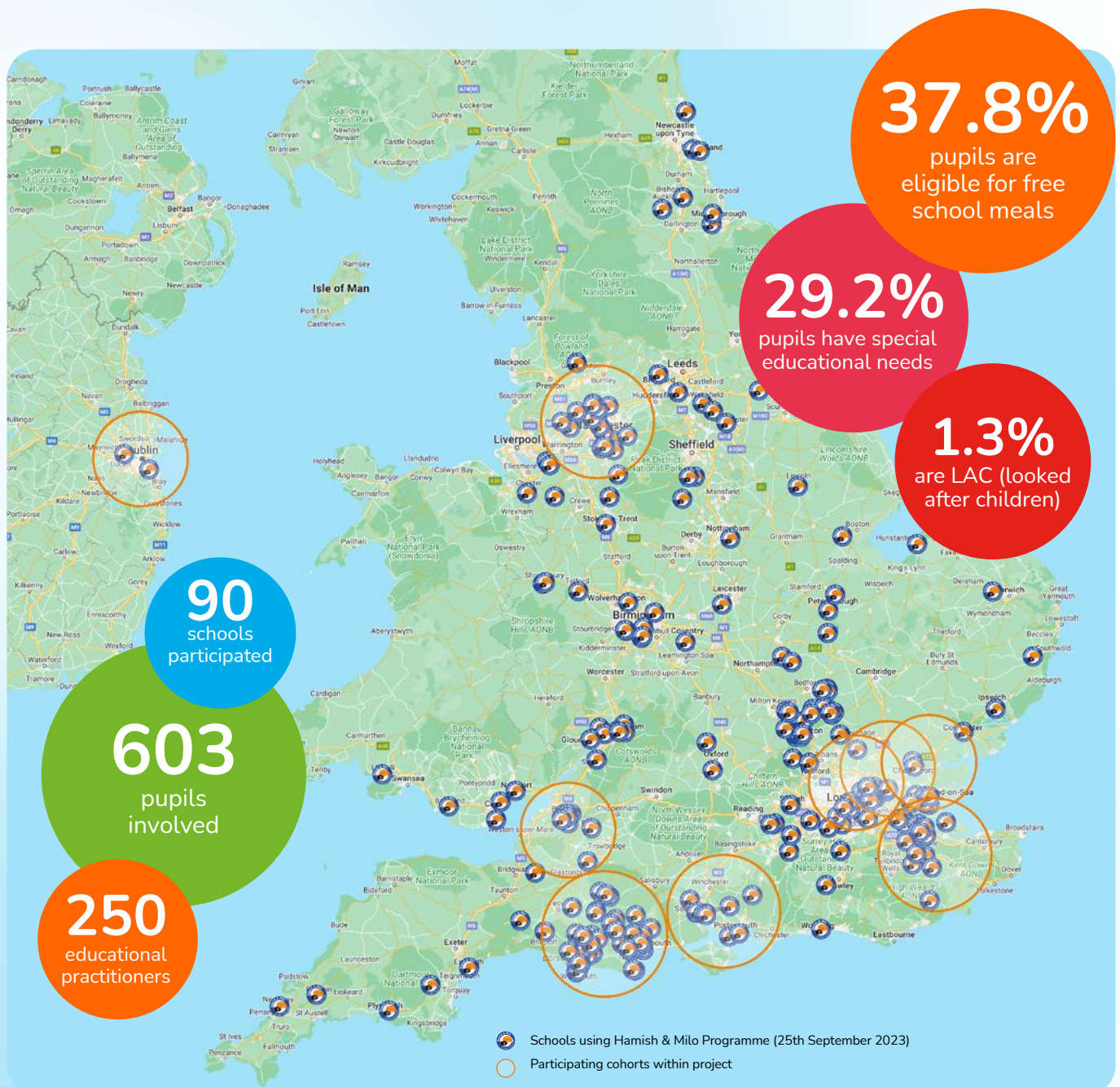
Participating schools transferred pre- and post- intervention data collected from the measurement tools directly to the Hamish & Milo Navigator digital platform, which also enabled them to track children's progress through changes; observe emerging patterns; and gather vital insight to support their SEMH intervention strategies.
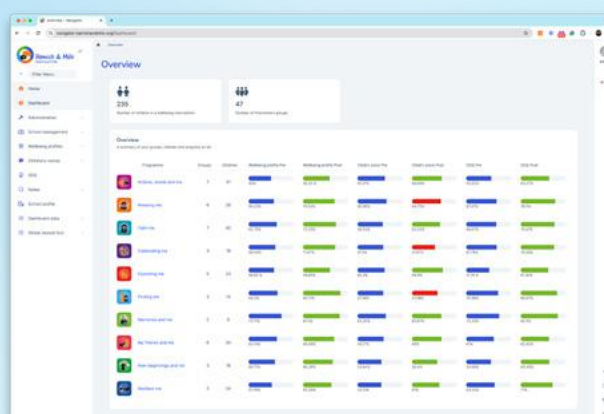
Outcomes of Phase 1 of the Hamish & Milo University of Bath Evaluation Project

Preliminary results for the initial stage of the project, published in October 2023 indicated that the emerging data "showed statistically significant differences in observations about the emotional and behavioural presentation of pupils, pre- and post- intervention"[118] across all impact measures.
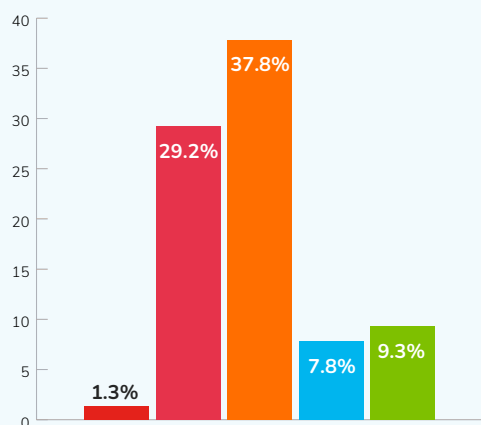
- **Strengths & Difficulties Questionnaire (SDQ)** - Overall improvement for children across all subscales (Figure 11)
- **Child's Voice Questionnaires (CVQ)** - Improvement across all measures (Figure 12)
- **Child Wellbeing Profiles (CWP)** - Improvement on all behaviour and protective factors scales (Pages 22-26)

37.8% pupils are eligible for free school meals

29.2% pupils have special educational needs

1.3% are LAC (looked after children)

90 schools participated

603 pupils involved

250 educational practitioners

Schools using Hamish & Milo Programme (25th September 2023)

Participating cohorts within project

Participants

Pupil's situation

(N=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 pupils in phase 1 and their situation

● No apparent needs
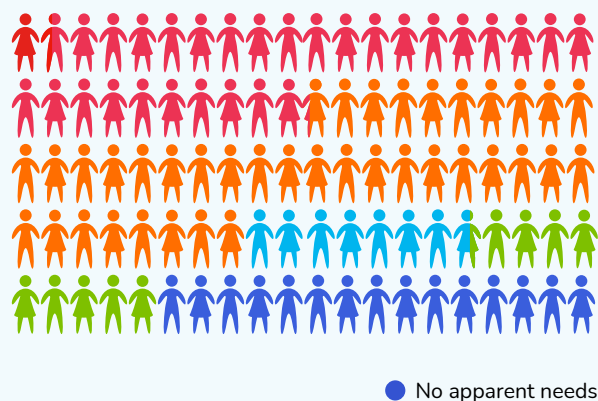
Outcomes

Figure 11 - Summary of SDQs outcomes for Phase 1

(N=478)

Strengths and Difficulties Questionnaire (SDQ) Improvement Score (%)
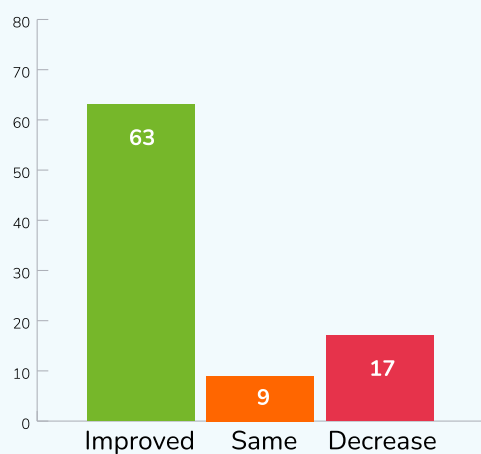
$t(427) = 13.53, p < 0.001, d = 0.65$

Figure 12 - Summary of CVQs for Phase 1

(N=478)

Children's Voices: Social, Emotional and Support Experiences (%)
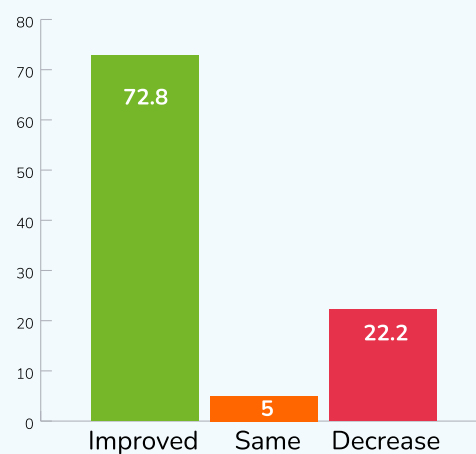
$t(477) = 13.6, p < 0.001, d = 62$

Actions, words and me
Helping children with conflict resolution

**Actions, words and me
Behaviour**

(N=35)

Improved	Same	Decrease
77.1	5.7	17.1
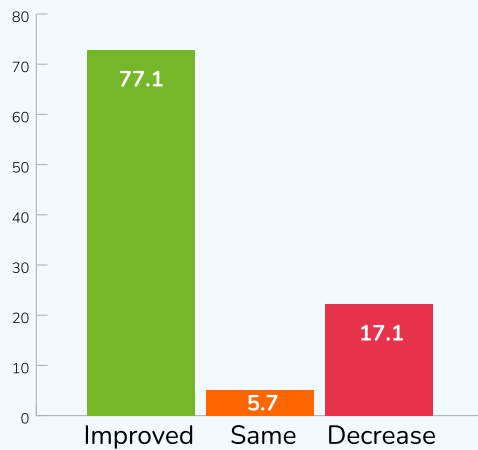
t(34) = 4.5, p < 0.001, d = 0.76

**Actions, words and me
Protective Factors**

Improved	Same	Decrease
71.8	15.4	12.8
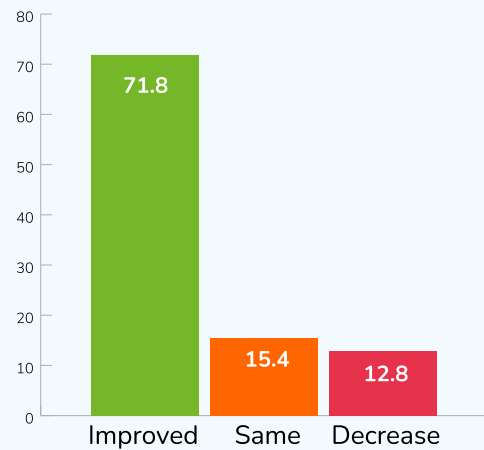
t(38) = 5.5, p < 0.001, d = 0.89

Celebrating me
Helping children with difference, diversity and inclusion

**Celebrating me
Behaviour**

(N=9)

Improved	Same	Decrease
88.9	11.1	0
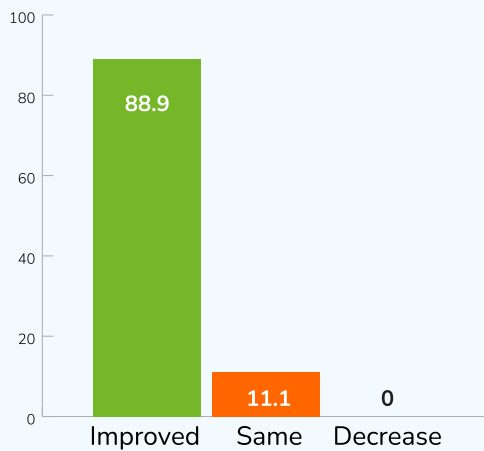
t(68) = 5.4, p < 0.001, d = 0.65

**Celebrating me
Protective Factors**

Improved	Same	Decrease
77.8	22.2	0
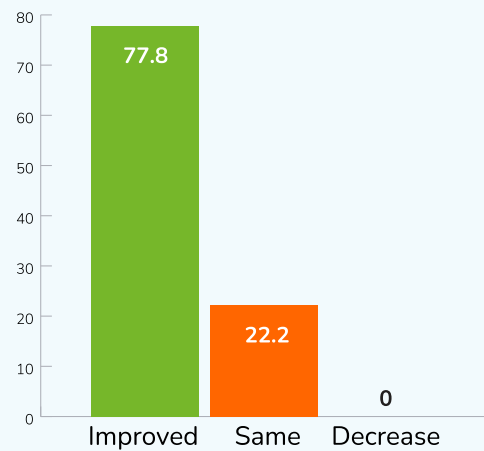
t(68) = 7.4, p < 0.001, d = 0.89

Resilient me
Helping children with resilience

Resilient me
Behaviour
(N=77)
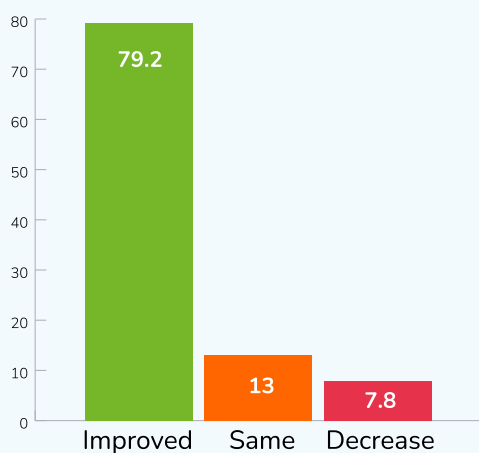
t(76) = 8.1, p < 0.001, d = 0.92

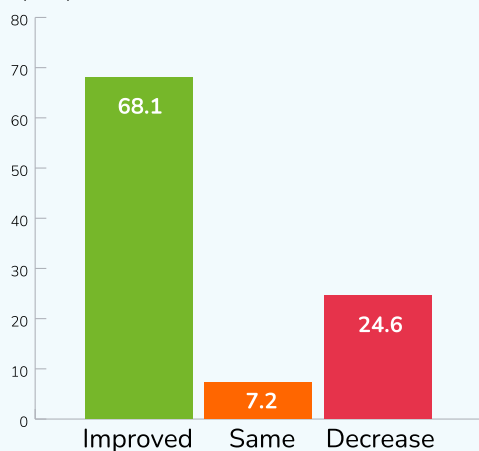### Resilient me
Protective Factors
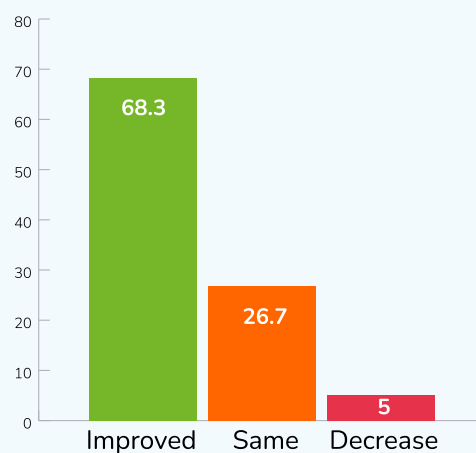
t(59) = 6.6, p < 0.001, d = 0.85
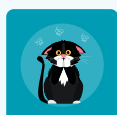
Calm me
Helping children with anxiety

Calm me
Behaviour
(N=69)

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

Calm me
Protective Factors
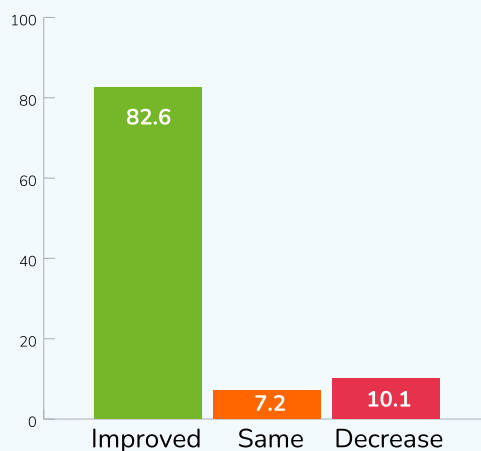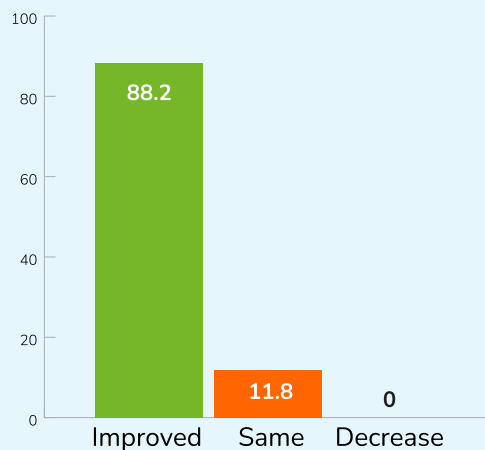

t(68) = 7.4, p < 0.001, d = 0.89

Finding me
Helping children with sadness

**Finding me
Behaviour**

(N=17)

Improved: 88.2
Same: 11.8
Decrease: 0

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

**Finding me
Protective Factors**

Improved: 80
Same: 13.3
Decrease: 6.7
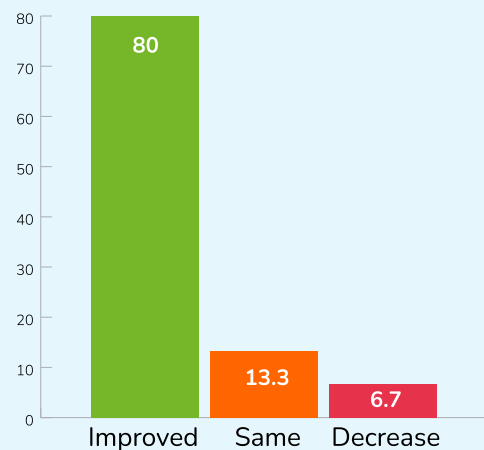
t(14) = 3.5, p = 0.004, d = 0.89
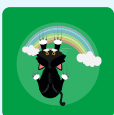
New beginnings and me
Helping children with change and transition

**New beginnings and me
Behaviour**

(N=45)

Improved: 73.3
Same: 13.3
Decrease: 13.3
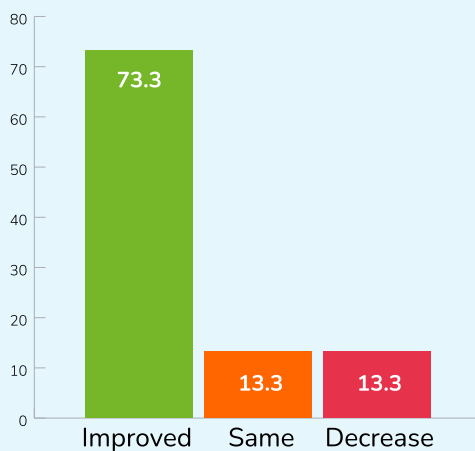
t(44) = 10.6, p < 0.001, d = 0.92

**New beginnings and me
Protective Factors**

Improved: 60
Same: 31.4
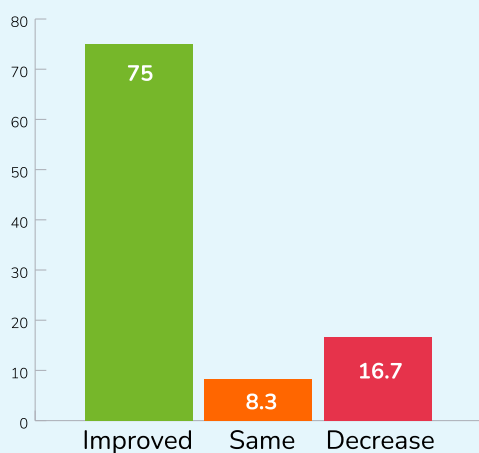Decrease: 8.6
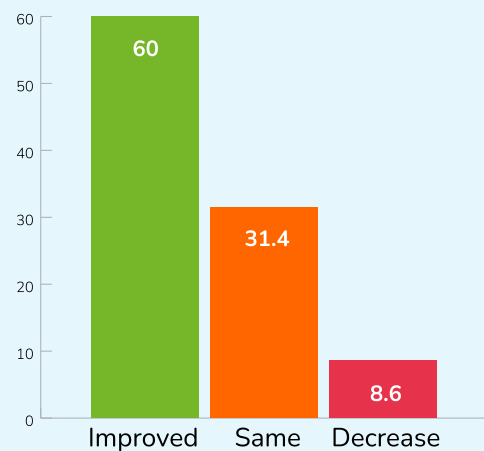
t(34) = 4.8, p < 0.001, d = 0.85

Memories and me
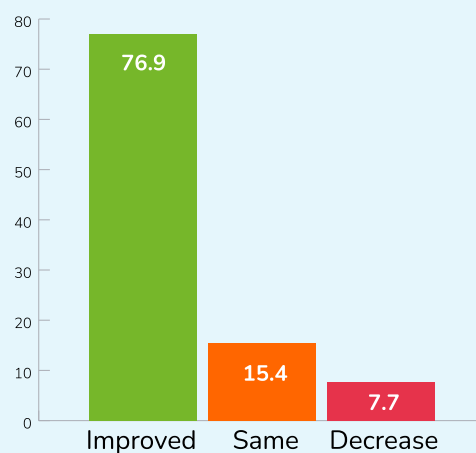### Helping children with loss, bereavement and grief

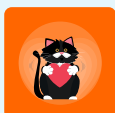**Memories and me**
Behaviour
(N=13)

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

Memories and me
Protective Factors

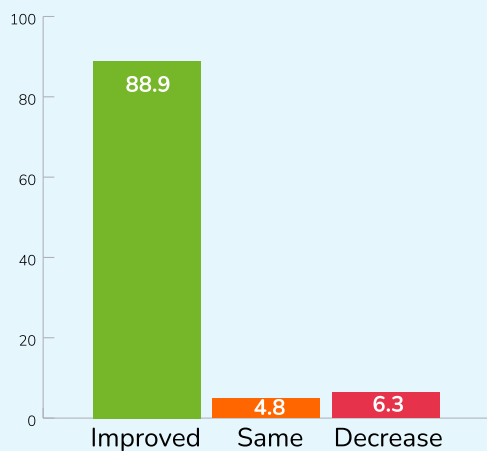t(12) = 3.0, p = 0.01, d = 0.84

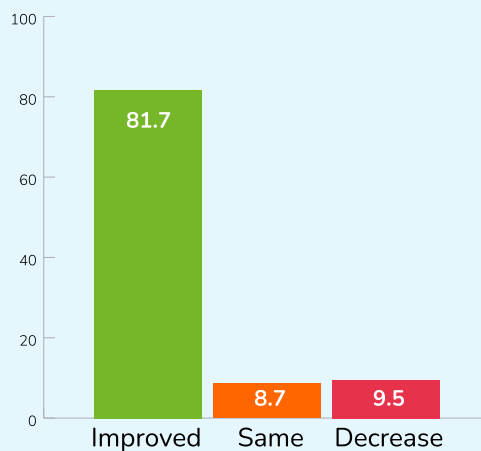## Amazing me
Helping children with their self-esteem and self-worth

Amazing me
Behaviour
(N=123)

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

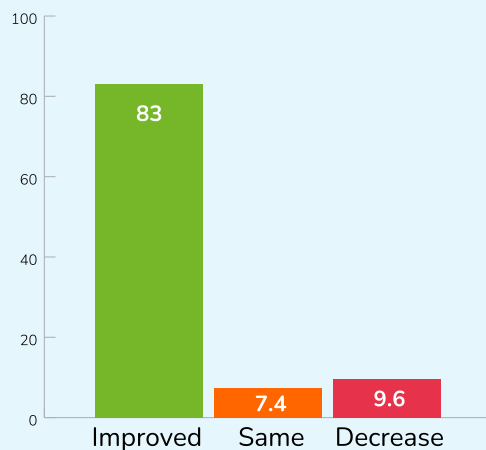**Amazing me**
Protective Factors

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

My friends and me
Helping children with friendships

**My friends and me
Behaviour**

(N=94)

Improved	Same	Decrease
83	7.4	9.6

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

**My friends and me
Protective Factors**

Improved	Same	Decrease
76.7	14.4	8.9
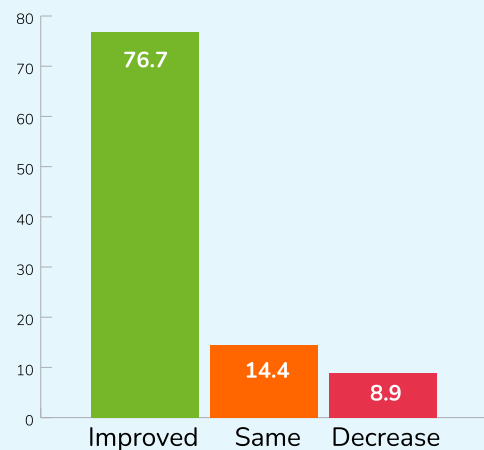
t(89) = 6.9, p < 0.001, d = 0.73

Exploding me
Helping children with strong and angry feelings

**Exploding me
Behaviour**

(N=52)

Improved	Same	Decrease
78.8	3.8	17.3
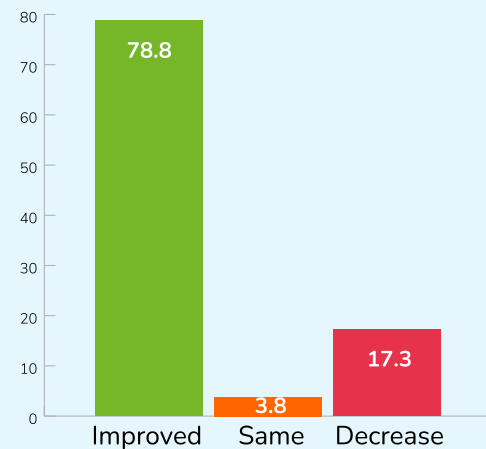
t(51) = 6.4, p < 0.001, d = 0.89

**Exploding me
Protective Factors**

Improved	Same	Decrease
79.6	8.2	12.2
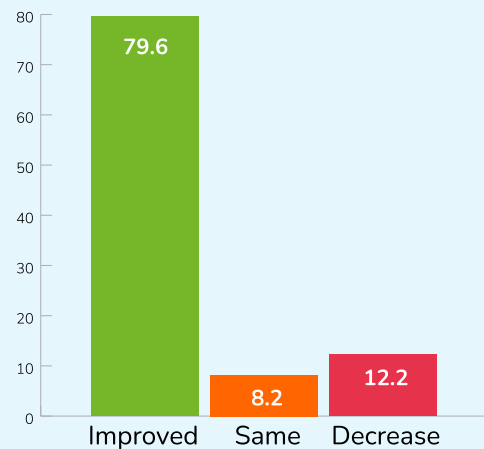
t(48) = 6.8, p < 0.001, d = 0.96

The full range of Phase 1 impact outcomes can be found in the Emerging Evidence Report[119] which can be accessed at: www.hamishandmilo.org/evidence

Phase 2 - Evaluating pupil outcomes compared to UK norms and exploring and evaluating staff perceptions of the Hamish & Milo Programme

The research objective of Phase 2 of the HMUoBEP was twofold, compare outcomes of pupils participating in the Hamish & Milo Programme against standardised UK norms and explore the experiences and perceptions of school staff.

The second phase (November 2023 - September 2024) objective in the first instance, was to differentiate the outcomes of pupils participating in the Hamish & Milo Programme against standardised UK norms to assess its effectiveness. The second research objective was exploratory and aimed to consider and analyse the experiences and perceptions of school staff engaged with the Hamish & Milo Programme and to answer the following research questions:

- Does the Hamish & Milo Programme work effectively?
- Who benefits from the Hamish & Milo Programme?
- Under which circumstances does the Hamish & Milo Programme work best?
- Why is the Hamish & Milo Programme effective?

To achieve these objectives, a quasi-experimental mixed methods research design was adopted and implemented in two distinct phases of quantitative and qualitative data collection and analysis:

Quantitative data using pre- and post-SDQ scores was collected using a probability sample of 1064 pupils drawn from schools engaged with the project located across the UK.

The dataset was analysed for outcomes across the full SDQ measures, including its five subscales measures: total difficulties; emotional problems; conduct problems; hyperactivity; peer problems; and prosocial competencies.

Results were then compared against the UK SDQ norm tables to provide a 'normal borderline' and 'abnormal range' to demonstrate how pupils who participated in the Hamish & Milo Programme compared or contrasted to UK norms of SDQ outcomes.

Qualitative data was collected using a purposive sample of 12 school staff from 10 primary schools located across England who were engaged with the Hamish & Milo Programme, with participants attending semi-structured interviews and providing questionnaire responses.

Analysis of this data set aimed to identify and examine common themes from participant's experiences, accounts, and views of the Hamish & Milo Programme to derive qualitative findings that could complement and enhance insights from the quantitative data analysis.

A recursive six-step thematic analysis[120] was conducted to observe and recognise patterns of meaning across both qualitative data sets to attempt to understand the interrelating factors which contributed to the effectiveness of the Hamish & Milo Programme.
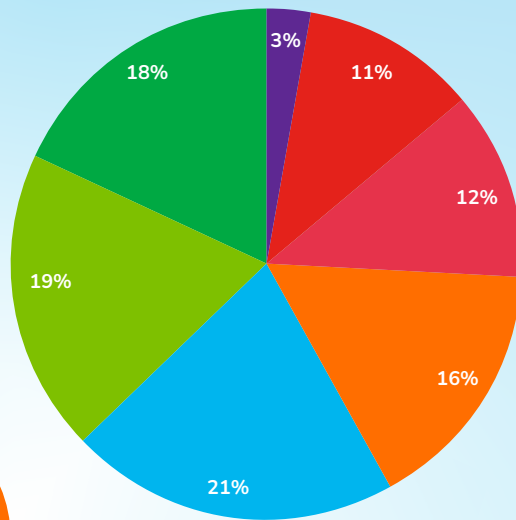
Quantitative data analysis participants

Quantitative data using pre- and post-SDQ scores was collected using a probability sample of 1064 pupils.

Pupil's ages

- 4-5yrs (Reception)
- 5-6yrs (Year 1)
- 6-7yrs (Year 2)
- 7-8yrs (Year 3)
- 8-9yrs (Year 4)
- 9-10yrs (Year 5)
- 10-11yrs (Year 6)

Pie chart values: 3%, 11%, 12%, 16%, 21%, 19%, 18%

Pupil's gender

52% boys
48% girls
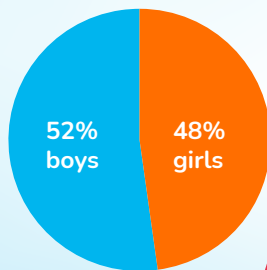
Pupil's situation (N=1064)

LAC (Looked after child): 1.3%
SEND (Special educational needs or disability): 23.3%
FSM (Free school meals): 30.2%
EHCP (Education & Health Care Plan): 4.6%
SW (Social worker involvement): 4.2%

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

23.3% pupils have special educational needs

30.2% pupils are eligible for free school meals

1064 pupils involved

Schools using Hamish & Milo Programme (20th December 2024)

hamishandmilo.org

Outcomes of Phase 2 of the Hamish & Milo University of Bath Evaluation Project

Quantitative findings

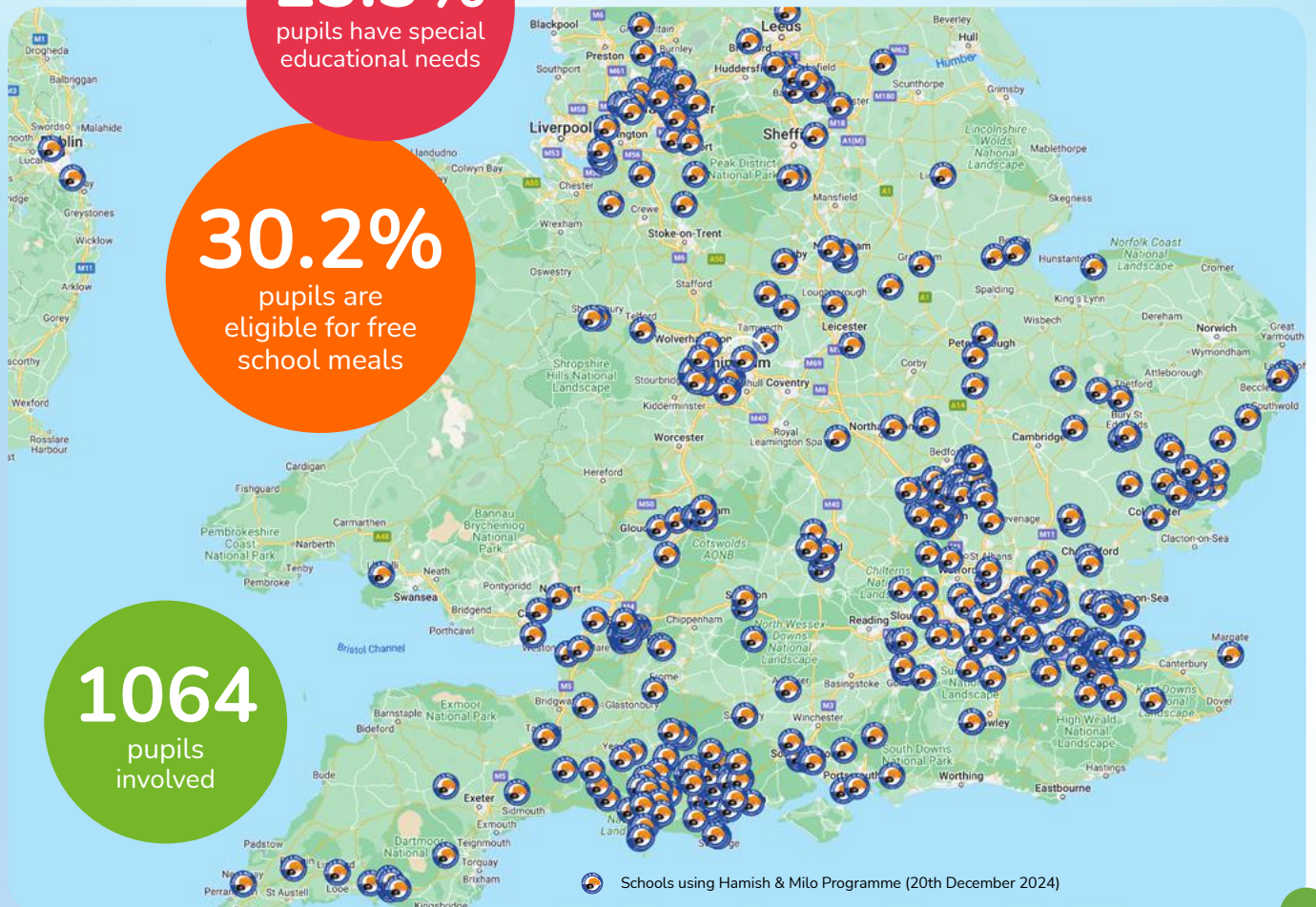**The findings of quantitative statistical data analysis across all three impact measures at the conclusion of Phase 1 of this study showed statistically significant differences in pre- and post-observations concerning the emotional and behavioural presentation of pupils.**

Further quantitative data analysis of a probability sample consisting of 1064 pupils was conducted in Phase 2 comparing SDQ outcome measures for pupils pre- and post-participation in the Hamish & Milo Programme against UK child SDQ standardised norm tables, providing a 'normal', 'borderline' and 'abnormal' differential range.

> Findings show a 23% reduction in the 'abnormal' total difficulties range comparative scores and a 1.2% reduction in 'borderline' range comparative scores for pupils who participated in the Hamish & Milo Programme.

In summary, the results demonstrated:

- ✅ Pupils in the 'abnormal' range, comparative scores showed a significant decrease in 4 of the 5 subscale scores post-intervention (emotional problems; conduct problems; hyperactivity; and peer problems).

- ✅ Pupils in the 'borderline' range of comparative scores showed a decrease in 3 of the 5 subscale scores post-intervention (conduct problems; hyperactivity; and peer problems).

- ✅ Pupils in the 'normal' range of comparative scores showed a significant increase in the prosocial subscale.

16.4% increase for Prosocial SDQ Subscale 'Normal' sample (N=1064)

Figure 13 - Improvement scores (%) for Strengths and Difficulties Questionnaire (SDQ) 'Abnormal' sample pre- and post-intervention (N=1064)

Total Difficulties score can is generated by summing the scores of all scales except for the prosocial scale

Prosocial Scale
25.8
14.9

An increase in this subscale indicates greater prosocial behaviour

Pre-intervention   Post-intervention
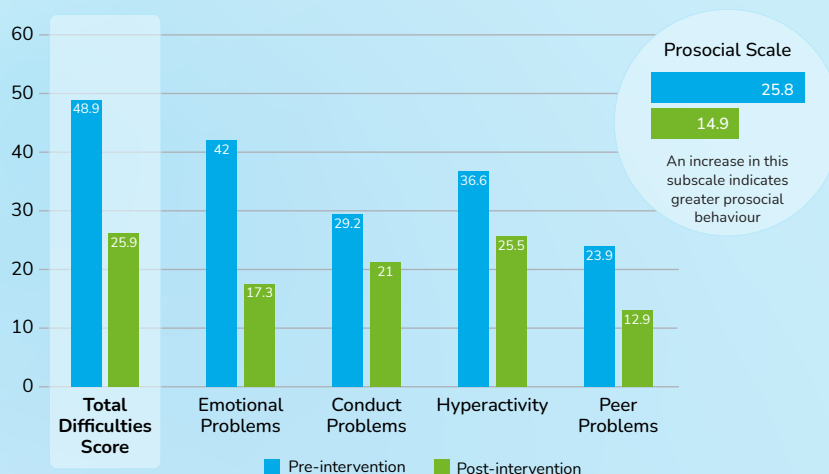
Figure 14 - Improvement scores (%) for Strengths and Difficulties Questionnaire (SDQ) 'Borderline' sample pre- and post-intervention (N=1064)

Prosocial Scale
17.1
11.6

An increase in this subscale indicates greater prosocial behaviour

Pre-intervention   Post-intervention
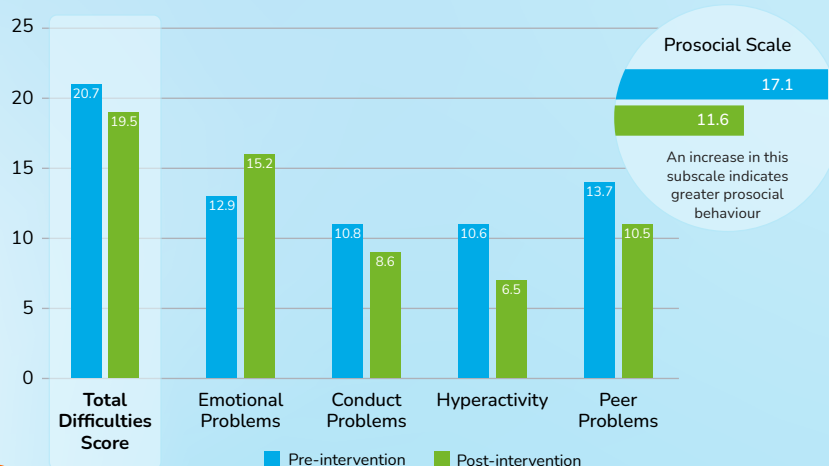
A reduction in scores on the emotional problems, conduct problems, hyperactivity, and peer problems SDQ subscales indicates a decrease in the reported difficulties in those areas; and an increase in scores on the prosocial SDQ subscale scores indicates a rise in areas of strengths. Thus these findings suggest that after participation in the Hamish & Milo Programme, pupils were observed to have fewer difficulties and improved levels of mental health and wellbeing.

Qualitative data analysis

Figure 15 - Phase 2 participant characteristics

Qualitative data analysis
Educational practitioners
Data collection tools
Questionnaires and semi-structured interviews
12 Participants
Headteacher (1), SENDCO (2), School Counsellor (1), ELSA (3), Family Link Worker / Pastoral Support Worker (4), Teaching Assistant (1)
10 Schools
Primary School (8) Junior School (2) Average number of pupils = 424

"We had a PSHE structure, but a lot of children were needing targeted support and thresholds for accessing support were high."

"We need a programme that allows children to feel safe, and build relationships of trust with adults so that they feel confident and free to express themselves."

Qualitative findings

The emerging findings indicate that the Hamish & Milo Programme is effective and that engagement with the programme led to significant positive outcomes for children and other members of the school community.

The results demonstrate that the Hamish & Milo Programme has been well received in the delivery settings and has become an important resource to schools and other members of the school community in promoting the wellbeing, and supporting the development of SEL competencies of their pupils. Furthermore, a wide range of children have benefitted from the Hamish & Milo Programme including vulnerable pupils from disadvantaged backgrounds experiencing adversity; pupils with social, emotional and mental health difficulties; and pupils with special educational needs and disabilities.

The study showed that the Hamish & Milo Programme is effective in supporting:

**1** Vulnerable children from disadvantaged backgrounds experiencing adversity.

2 Children with social, emotional, and mental health difficulties.

3 Children with special educational needs and disabilities.

Significant positive outcomes were observed by school leaders, teachers, pastoral practitioners, and parents alike, who reported that after engagement with the Hamish & Milo Programme:

1 **The children "found their voice."**
Their self-esteem and confidence increased so they could more easily share their feelings and experiences and ask for help and support when they needed it.

2 **Children's social and emotional skills improved.**
Children's self-awareness, resilience, and self-regulation increased so they were able to experience more empathy and build stronger, long-lasting social connections.

3 **Children's wellbeing improved.**
Teachers noted improved relationships, and happier, more positive, calmer pupils thriving in class.

4 **Children's academic learning improved.**
Some pupils developed a more positive attitude towards learning and became more independent, which was reflected in the classroom.

5 **Parents noticed the changes in their children.**
Parents reported the positive impacts they were seeing at home, children were happier and more settled.

6 **School leaders noticed a decrease in escalations and exclusions.**
A decrease of dysregulated behaviour and a reduction in exclusions was experienced.

7 **The impact was felt school-wide.**
The positive impact for pupils and staff was noticed across the school.
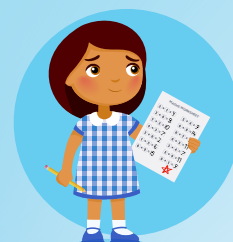
For a deeper exploration of the research methodology, impact data, and implementation strategies, we invite you to engage with the full report, visit www.hamishandmilo.org/evidence

Data gathered from several sources, school profiles, questionnaire responses, and semi-structured interviews, regarding the needs and requirements of schools before implementation, and their experiences of using the Hamish & Milo Programme, was collated and is summarised below.

What schools told us...

Before starting Hamish & Milo

- We had a PSHE structure, but a lot of children were needing targeted support and thresholds for accessing support were high.
- We do have types of more specialist support available in our school, but these mostly are for individual children and not groups of children with similar needs.
- Our budgets are tight, and our staff resources are stretched, so we do not have enough members of staff to be able to support the needs.
- The children and families in our school community want effective support that will meet their needs.

"We do have types of more specialist support available in our school, but these mostly are for individual children and not groups of children with similar needs."

What support was missing but needed?

We need resources or a programme that:

- Supports the social and emotional skills that will allow children to live and learn successfully.
- Is proactive and considers the whole picture of a child, so helps to address the root causes of issues.
- Promotes protective long-term solutions, and not only an immediate safeguarding strategy.
- Has a pre-planned structure that could be ready to run with.
- Is consistent in structure and language over the full range of support needed.
- Allows children to feel safe, and build relationships of trust with adults so that they feel confident and free to express themselves.
- Provides a vocabulary for children to express their feelings and strategies for managing big emotions like anxiety.
- Offers inclusive activities that celebrate each child's uniqueness.
- Builds confidence and independence.
- Encompasses and benefits the whole family around the child.
- Has the support of the school leaders who understand the value and need for it as part of their vision and values.
- Offers ongoing support to the staff leading the programme.
- Is fun for children to engage with.

"We need a programme that allows children to feel safe, and build relationships of trust with adults so that they feel confident and free to express themselves."

"Hamish & Milo is flexible and fully adaptable for individual or group support."

What makes Hamish & Milo resources effective and good to work with?

The programme:

- Is modern and incorporates the latest research and thinking.
- Is well-structured with pre-planned sessions and a consistent format.
- Is aesthetically pleasing and the resources are easy for staff to understand, access, and use effectively.
- Provides effective and comprehensive support within a short timeframe.
- Is a foundation resource that wraps around other interventions.
- Provides a tailored approach for targeted support, yet provides a consistency in structure across all the 10 different emotion themes.
- Resources are flexible and fully adaptable for individual or group support.
- Allows more children to be supported in groups, which also provides good value for money.
- Offers a simple process to instruct or train pastoral staff to use the resources effectively.

> "The programme provides effective and comprehensive support within a short timeframe."

Directions for future development

Over the course of the project feedback received from school staff engaged in the facilitation of the Hamish & Milo Programme highlighted possible areas for advancement, including the development of additional resources, that could improve implementation of the programme and enhance outcomes.

One such area was identified during discussions in collaborative supervision sessions related to training opportunities for Hamish & Milo Champions. Although complimentary 90 minute introductory training sessions are provided to all Champions as a short guide to implementing the programme at the start of the project, the need for more extensive instruction into the foundational theories and scholarship informing the practices of the programme was identified.

In response to this, the **Hamish & Milo Voyager training course** was developed. This five-day programme offers a Level 3 NCFE Accredited 'Wellbeing in Education' qualification for Hamish & Milo Champions, addressing the recommendations for more comprehensive training.

Additionally, feedback received from school leaders during the project implementation highlighted the need for greater engagement between school staff and parents to enhance the positive outcomes of the Hamish & Milo Programme.

To address this, the **Hamish & Milo Families Together Programme** was developed to offer a framework for more extensive collaboration between school and families. This series of workshops for parents, carers, and family members directly aligns with the Hamish & Milo Wellbeing Programme for pupils. Families Together provides insight into the programme's themes, concepts, and theoretical foundations, strengthening the partnership between parents and schools. Family members engage with Hamish & Milo content, gain a better understanding of what their children are learning, share home-to-school experiences in a supportive environment, and connect with other families to build a mutual support network.

The Families Together programme was recently piloted in a primary school in South West England, and further research is planned to explore the scope and outcomes of this resource.

Hamish & Milo promotes social connectedness

Insights provided by education practitioners facilitating the Hamish & Milo University of Bath Evaluation Project in their schools indicated that the Hamish & Milo Programme promotes social connectedness through shared social experiences throughout the school community.

Through the promotion and facilitation of opportunities that foster social connections, the Hamish & Milo Programme generates experiences of enjoyment, trust, acceptance, wellbeing and belonging within the school community (including children, school staff and parents), and creates a greater sense of care which positively affects the school's learning environment.

SOCIAL CONNECTEDNESS

SHARED SOCIAL EXPERIENCES

CARE

NURTURE

Wellbeing ★ Acceptance ★ Trust ★ Belonging ★ Fun

PUPILS
Hamish & Milo social, emotional and mental health programmes

SCHOOL STAFF
Training & Supervision

Navigator Progress Tracking & Analysis Software

Accredited Professional Training

PARENTS
Hamish & Milo Familes Together parent programme

HAMISH & MILO SUPPORTS COMMUNITIES OF CARE IN SCHOOLS
Creating opportunities for nurturing, caring and positive childhood experiences and promoting social connectedness amongst pupils, school staff and parents.

Qualitative data analysis - interviews

Data analysis vignettes

Vignettes are brief descriptions, rooted in empirical data findings and constructed during data analysis. These descriptions are frequently utilised for the purposes of research communication as they provide vivid, authentic, and evocative accounts of the events with a narrative flow.[121]

During Phase 2 of the HMUoBEP, Hamish & Milo Champions shared brief accounts of experiences from their engagement with the Hamish & Milo Programme and resources that were captured in the form of vignettes to highlight specific areas of application.

Vignette 1

Portrait of a typical school participating in the HMUoBEP

Recounted by Senior Leader working in an infant and junior school situated in North-East England.

The study participant is a SENDCO working in a two-form entry primary school based in the North East of England. 29% of pupils attending the school have SEN, a figure which is significantly above the national average (13.5%). 38% of the school population receive Pupil Premium, and it is reported that parents within the school community have high levels of mental health needs.

The school has created a Mental Health Support Team comprised of two Nurture Teaching Assistants; a Pastoral Support Worker; and a Speech, Language, and Communications Needs Support Assistant. The members of the team have all received specific training and provide therapeutic support approaches including counselling; Emotional Literacy Support (ELSA); Sandplay Therapy; and LEGO® Therapy.

The school identified a gap in their support provision and began using the Hamish & Milo programme because it was able to address the full range of general SEMH skills development, in addition to more targeted support for specific needs, for groups of children. The resources provided a structured and targeted framework for sessions, thereby reducing the need for planning and saving precious time and resources for pastoral support workers using them.

The school use Hamish & Milo as the foundation resource for all pupils requiring SEMH support, with the additional support approaches utilised as targeted individual interventions thereafter.

Vignette 2

Portrait of a pupil with anxiety and selective mutism

Recounted by a Pastoral Lead in a primary school located in South-West England.

When I first started out and was working with children who found it difficult to speak, there were so few interventions that worked for those children with selective mutism. Hamish & Milo really worked for one Year 4 boy in our school. Although he has a very supportive family, English is not his first language, and he really struggled to interact in class and with his peers. Before he started the Hamish & Milo group, when other children were talking, he could not make eye contact with them.

We started him with 'Amazing me' within a small group of children. He got involved in absolutely everything around the activities. He was able to create artwork and express himself through that. Being in a really supportive group built his confidence and then he started to talk to the other children in the group and was able to express how he was feeling, with the other children really supporting him.

After some time he was able to take that into the classroom and begin talking there. Now he is even reading things out of his book in class and his class teacher is blown away by the difference in him! He now participates in whole class activities, for example when they took part in a cooking activity. He had never cooked before - something really small but massive for him - but he did it in front of the class with his class teacher, with everybody watching him. He would never have done that before as he probably wouldn't even have been able to look around. Now he is socially blooming! He was able to stand up in front of the whole school to get a certificate; able to come to the front during assembly, accept his reward and praise and even have his photograph taken for the website.

A few months ago, I met him and his family by chance out of school in a shop and he just kind of acknowledged me without saying much to me directly. But then on the Monday morning, he came up to me and said, "I saw you in the supermarket". His progress blew me away; I feel really emotional about it! He has really come out of himself.

Vignette 3

Portrait of a young carer participating in Hamish & Milo 'Amazing me'

(Recounted by a Pastoral Lead working in a primary school in South-West England)

For every single child that has experienced Hamish & Milo, there have been little glimmers. A young person in our school is a young carer with quite a troubled background. She was very withdrawn, so shied away from friendships, and as a result was becoming very insular and isolated. She became reluctant to come in to school, so we decided to include her in a small group that was using Amazing me.

Through her experience of Amazing me, she has developed friendships, and she is enjoying coming to school because she feels connected and has those friendships. She now has special safe adults within school, and she can articulate how she is feeling now, whereas she would not have had the vocabulary to do so previously. We have not done any other interventions to build her resilience as this group was enough for her needs and her attendance has improved slightly. Although her family circumstances have not really changed, she has been able to build her resilience.

Vignette 4

Portrait of a pupil experiencing bereavement and participating in Hamish & Milo 'Memories and me'

Recounted by an Emotional Literacy Support Assistant working in a junior school in Hampshire, South-East England.

A five-year-old pupil in our school sadly lost their father who had been suffering from a terminal illness. At the time they were being supported by our school's local authority mental health team due to the adversity and trauma she had experienced in her life outside of school. The child's mother was reluctant for them to do the intervention that we had available, so it was decided to pair them up with a young relative, who also attends our school, to work together with me, the school's Emotional Literacy Support Assistant, using the 'Memories and me' programme.

When the children first started, they were nervous and apprehensive, but I soon noticed that they had a 'light bulb moment' when they realised that they had a voice and were free to talk about their experiences. Both pupils got a lot out of doing Memories and me and after we completed the programme, we decided to continue working through the Finding me programme; the positives continued to grow!

The five-year-old has done marvellously well and has been able to form connections with others within the school. We have forged a truly trusting relationship with each other through doing the programmes. At the time when we were working through Finding me, I was going through the death of my own father, and we cried together through some of the sessions. The trusted relationship is still there as the pupil will often drop in to talk to me and to share their thoughts and her concerns or worries.

I think that the Hamish & Milo work has given them the strength to be able to talk about their experiences. She still has worries about many things, but she is now able to give voice to them and to work out some of the issues independently after being heard.

Portrait of a pupil experiencing emotionally-based school avoidance (ESBA) due to bereavement

Recounted by a School Counsellor working in a primary school in London, South-East England.

A child in Year 6 would be absent on average between one to three days each week. There had been a recent bereavement in the family but at the time, the school were unaware of this event. The class teacher only became aware of the loss because of the child's frequent absences from school and after subsequent discussions about the child between the Designated Safeguarding Officer and the school's Attendance Officer, a clear pattern of absences occurring directly after the bereavement occurred was identified.

The child's parent was invited to attend a meeting to discuss the absences and what could be offered to support them. During this meeting, it was apparent that the child was finding the school environment challenging to be in. The parent felt that there was no space for their child to express their feelings of grief at school, so preferred to be with their family in the safety of home. We discussed the 'Memories and me' programme, but initially, the parent was reluctant for the child to attend sessions out of class in case there would be a negative impact on his academic learning. After several discussions with the parent, I was able to explain how difficult it would be for their child to focus their brain and body for learning and to follow the daily learning routine in school after such a traumatic event if they were not able to safely express their feelings.

After many conversations, the parent eventually gave consent for the child to attend Memories and me sessions, which was the beginning of a big shift for this child. I feel that the programme was the catalyst in improving his overall attendance, as the sessions became something to look forward to. As we continued with the sessions, I observed how he was beginning to grow around his grief. The child would often tell me at the start of the session which number session we were having and at this point, they were attending school regularly. Before starting Memories and me, certain days - Mondays, Thursdays, and Fridays - would be 'trigger' days, when there would be frequent absences.

Soon after starting the sessions, I noticed that the child would attend each Friday because he did not miss them.

From discussions with the child's teachers, they report that they have also noticed changes in the child and have observed that they are more focused with their learning, are more confident and able to self-regulate, and they have a more positive outlook generally.

Portrait of a looked after child participating in a mixed-age Hamish & Milo group

Recounted by a School Counsellor working in a school located in London, South-East England.

A young child in care was referred to be included in one of my Hamish & Milo groups presenting with defiant behaviour. The child was in Reception, with the rest of the children attending the group in Year 1.

I would always collect him first from his classroom to attend the group, but he would often resist and not want to come with me. It was very difficult for me to talk him around, so for the following session, I decided instead to collect the Year 1 children first and then proceed to the Reception class. So instead of me being the one to meet him at the door (I would wait in the background), the older children would ask for him, greet him and ask him to come with them. I noticed that they reached for his hand, and he happily accepted this and took theirs, proceeding happily with the rest of the group to our room. It was beautiful seeing the older children looking after this child and lovely to hear them chatting amongst themselves along the way.

I feel that the sense of friendship and the feeling of belonging that this child felt throughout the sessions was massively helpful. Through the programme, this little group formed powerful connections and created a very strong bond between themselves. I have also received wonderful feedback from the parents as we were working through the sessions, saying how much fun the children were having and thanking me for the positive changes they have observed in their children - one parent was very keen to tell me how much their child especially loved their sock puppet!

A Hamish & Milo Champion's experience of using sock puppet pets

Recounted by a School Counsellor working in a school located in London, South-East England.

The sock puppets are a powerful tool, enabling children to have a voice and to feel heard, particularly for the shy, quiet, and introverted children who feel invisible. I use the sock puppets when we have our welcome and check-in at the start of each session, which helps the children activate anti-stress, feel-good chemicals in their brains and bodies. The puppets and the connections made with the other children and with me become very powerful meet-and-greet moments that are filled with absolute joy and delight. Using the puppets also allows me to assess whether a child needs further support, depending on the language they use to name their feelings, which informs me for the next parts of the session.

When using the sock puppets, attention is not directed directly on the child but is instead directed towards the puppet. The child can express their feelings using the puppet's 'voice' through play, which gives them the freedom to let their guard down, be silly, and have fun. It gives me the freedom to do the same! Because the puppets provide a non-threatening way for children to explore and express their feelings, as well as help them to understand and manage their emotions better, they are a great tool for helping to regulate their emotions.

Portrait of parents participating in the Hamish & Milo 'Families Together' Programme

Recounted by a Pastoral Lead working in a primary school in South-West England.

We have used the Families Together Programme with a small group of parents and their children from our school community and we have found that Hamish & Milo has the same effect on the adults as it does on the children! I think that one reason for this is because I trust the programme, having seen the positive impact it has had on the children in our school.

During the Families Together sessions, I sometimes found myself looking away because I felt so emotional realising that it was likely that the parents and children had likely never had the opportunity to have these kinds of connections - it was amazing to see! Many awesome conversations have taken place and one that stands out for me happened after the parents and children created an incredible artwork about anger, which then led to a very productive discussion.

From my office, I can look out onto the courtyard where all the children are collected at the end of the day. One scene that I witnessed moved me when I saw a group of about six or seven parents just after they completed a Families Together session. They went over and sat on a bench just below my window and I noticed how they were talking and smiling together. It was significant because I knew that this particular group of parents might never have spoken to each other before; included in the group were parents whose children have additional needs and so they tend to be quite isolated and disconnected. It was wonderful to see them sitting there together in such a relaxed way, connecting and sharing their stories and common experiences whilst waiting for their children to come out, and then to see them leave smiling and happy. I have also noticed that they are also keeping the connections beyond the school playground, by meeting up outside of school and in the holidays.

The parents really understand the programme now and they are coming back to me saying that spending this time in the sessions with their child, and the deeper connections they are making, have made a difference. They are also noticing a difference in their children's behaviour at home. We plan to run a Families Together group for parents at least once a year now. Additionally, I would like to support these continued connections so that the positive gains can benefit other parents too, so I am considering making the school facilities available to them to meet up on a weekly basis to share hot drinks and be able to have conversations together to talk about the challenges they face.

The impact of the Families Together Programme

When educators and families work together, they can build strong connections with each other that reinforce social and emotional skills developed in the home, in schools, and in their communities.[122]

This study has found that the Hamish & Milo programme promotes social connectedness through shared social experiences throughout the school community, positively impacting pupils, school staff, and parents. By facilitating opportunities that foster social connections, the Hamish & Milo Programme promotes increased acceptance, trust and belonging within the environment of the school community, resulting in a greater sense of care which improves the learning environments for all its members.

Hamish & Milo Families Together is a series of workshops for parents, carers, and family members that link directly to the Hamish & Milo Programme. Families Together offers insight into the programme themes, concepts, theory, and content of the Hamish & Milo approach and further builds upon the collaborative partnership between parents and the school. Family members experience Hamish & Milo, gain insight into what their children are learning, share home-to-school experiences in a safe environment, and meet other families to benefit from a mutual support network.

The Families Together programme was piloted in a primary school in Bristol. Parents of children who had previously attended at least one Hamish & Milo Programme at school attended 10 Families Together sessions. To assess impact, a focus group was conducted with the parents who attended the programme to gather their perspectives and insights, and a semi-structured interview was conducted with a Family Support Worker who facilitated the programme on behalf of the school, with the results presented in the form of a single case study.

What the parents told us

Why the Families Together Programme was needed

Parents felt that their children have a lot of different needs e.g. feeling anxious, lonely and lost, low self-esteem, which affects their lives at school and required a different kind of support.

What the Families Together Programme provided that was different or missing previously

1 Dedicated, focused, quality **time** and **space** to connect with their child and other parents, where they could meet and chat about the full range of their experiences.

2 A sense of **belonging** and **connectedness** in shared experiences and understanding.

3 A felt sense of comfort in being **accepted** for their uniqueness, with no judgement.

4 **Friendships** formed with people they may not have met otherwise.

5 A sense of **enjoyment** in coming together felt by both the children and their parents.

6 Parents felt that they gained valuable **insight** and opportunities for **reflection** and **sharing** from each session.

Impact on the parents

- ✓ The sessions helped them be more present with their children, to feel closer to them and to be better parents.
- ✓ The programme allowed them to be more reflective about their own childhoods, their relationships, and their parenting.
- ✓ Sharing experiences with their children and other parents, where there was a lot of laughter and fun, helped the parents to build deeper relationships.
- ✓ Parents really enjoyed the programme and felt grateful, and more optimistic, hopeful, and positive after 10 weeks.

Impact on the children

- ✓ Has had a big impact on their self-esteem, supporting them to develop an emotional toolbox that helps them feel less anxious and more confident.
- ✓ They looked forward to their parents coming to the sessions and felt that they were able to open up and enjoy sharing experiences with their parents and others in the group.

Workshop format

Each session of the 10-week programme focusses on a different emotion theme covering the main theory and learning, practical techniques and skills that form the foundation of the Hamish & Milo wellbeing programme. At the start of each session, parents meet together to talk through key points of each theme, with their child joining at the halfway point to complete an activity alongside their parent.

Each session provides opportunities for the parents to share their thoughts and experiences and to develop a common language to help better support their children's social and emotional development and wellbeing.

"During the Families Together sessions, I sometimes found myself looking away because I felt so emotional realising that it was likely that the parents and children had likely never had the opportunity to have these kinds of connections - it was amazing to see! Many awesome conversations have taken place and one that stands out for me happened after the parents and children created an incredible artwork about anger, which then led to a very productive discussion."

"The parents really understand the programme now and they are coming back to me saying that spending this time in the sessions with their child, and the deeper connections they are making, have made a difference. They are also noticing a difference in their children's behaviour at home."

"From my office I can look out onto the courtyard where all the children are collected at the end of the day. One scene that I witnessed moved me when I saw a group of about 6 or 7 parents just after they completed a Families together session. They went over and sat on a bench just below my window and I noticed how they were talking and smiling together. It was significant because I knew that this particular group of parents might never have spoken to each other before; included in the group were parents whose children have additional needs, and so they tend to be quite isolated and quite disconnected. It was wonderful to see them sitting there together in such a relaxed way, connecting and sharing their stories and common experiences whilst waiting for their children to come out, and then to see them leave smiling and happy. I have also noticed that they are also keeping the connections beyond the school playground, by meeting up outside of school and in the holidays."

"We have used the Families Together programme with a small group of parents and their children from our school community and we have found that Hamish & Milo has the same effect on the adults as it does on the children! I think that one reason for this is because I trust the programme, having seen the positive impact it has had on the children in our school."

Families Together

Ready the full Families Together case study available online at hamishandmilo.org/evidence

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Hamish & Milo's mission

At Hamish & Milo, we are dedicated to improving children's mental health, emotional wellbeing, and social and emotional development by equipping schools and settings with a complete package of evidence-based programmes, curriculum resources, training, and a digital impact platform.

We provide everything schools need to support a whole-school approach to social, emotional, and mental health (SEMH) - empowering pastoral teams, ELSAs, and mental health leads to deliver targeted interventions and universal provision that meet the diverse needs of all children, particularly the most vulnerable.

Through comprehensive training, supervision, engaging resources and practical tools, we help build the confidence and capacity of school staff to create safe, nurturing environments where children can thrive - helping children feel happier, heard, and connected.

Discover how Hamish & Milo can make a difference in your setting.
Please contact the team at hello@hamishandmilo.org

Hamish & Milo

WELLBEING RESOURCES