

‘They find their voice’

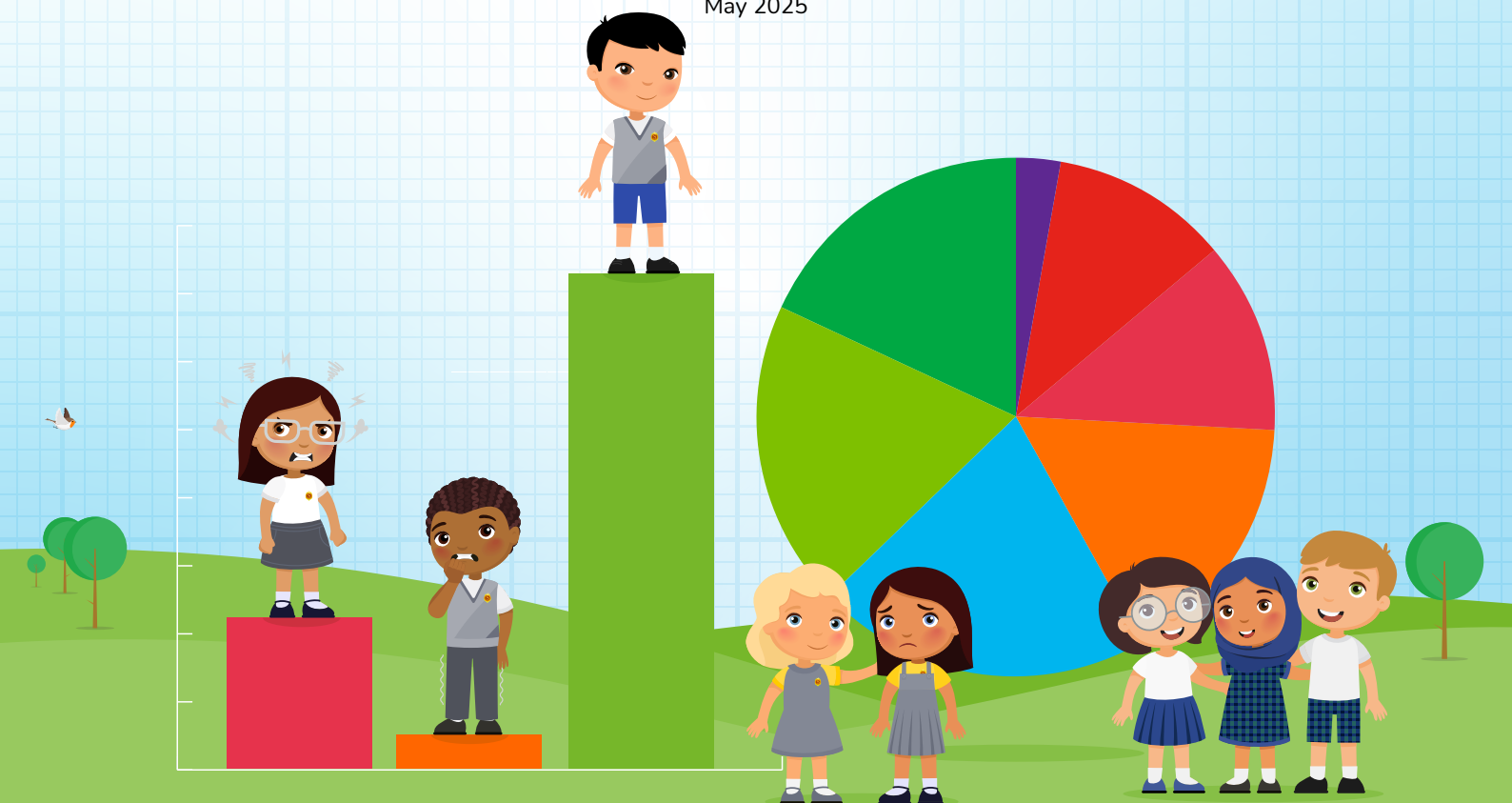
Supporting children’s wellbeing and development of social
and emotional competencies in the post-pandemic era:
A quasi-experimental study on the effectiveness
of the Hamish & Milo SEMH Programme

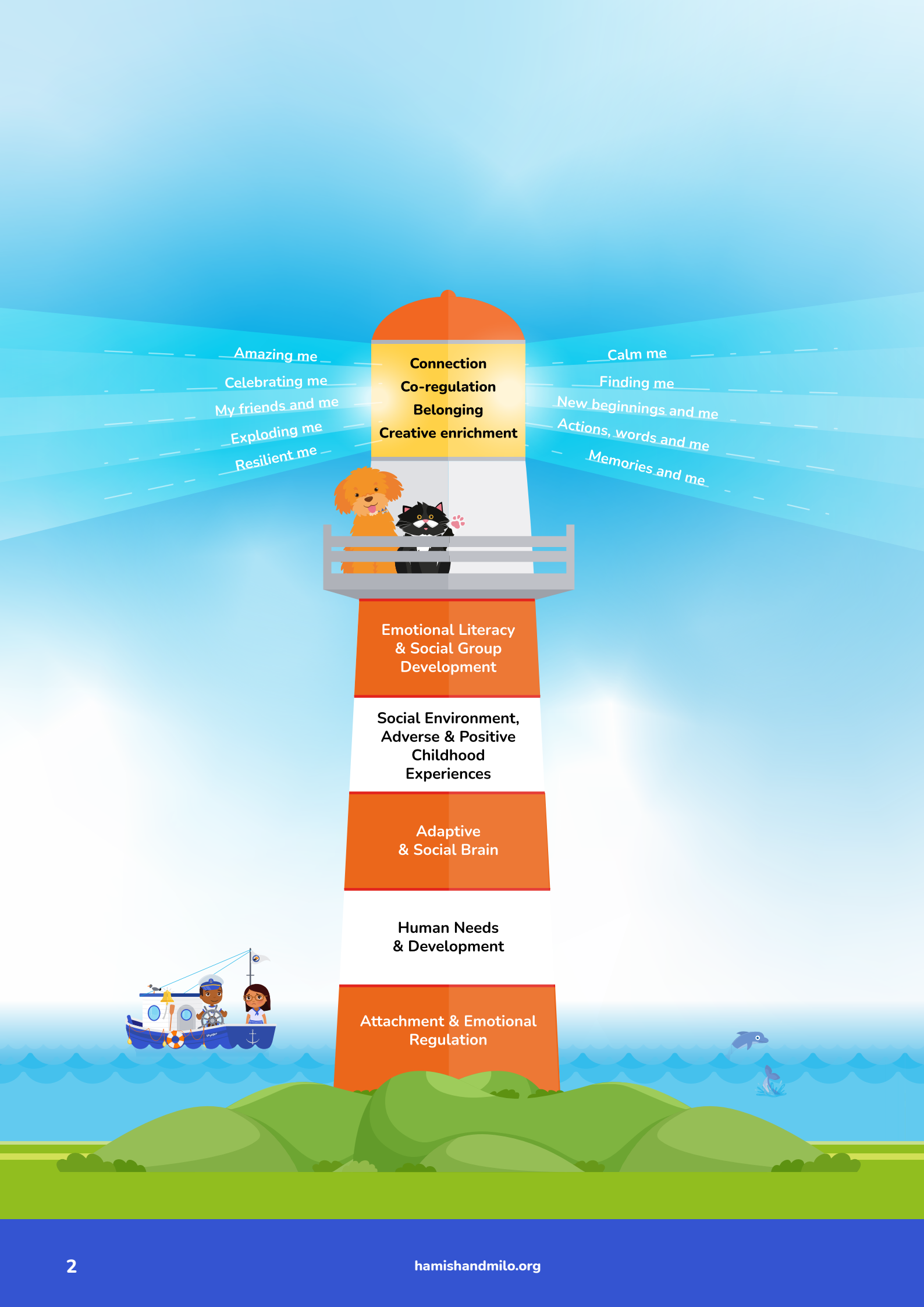
Hamish & Milo University of Bath Evaluation Project FULL REPORT

Professor Richard Joiner, Head of Department, University of Bath, Department of Psychology
and Andrea Middleton, Lead Consultant - Training & Research, Hamish & Milo

Key contributing authors: Anne Waddicor, Clare Williams, Philip Clarke, Martha Izzard and Melissa Ellis

May 2025





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

Connection
Co-regulation
Belonging
Creative enrichment

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

Emotional Literacy
& Social Group
Development

Social Environment,
Adverse & Positive
Childhood
Experiences

Adaptive
& Social Brain

Human Needs
& Development

Attachment & Emotional
Regulation

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

www.bath.ac.uk

Synopsis

Children's social, emotional and mental health needs have seen a dramatic rise in recent years, particularly following the pandemic.

Evidence strongly suggests that fostering wellbeing and emotional health during childhood is a key predictor of long-term life satisfaction and overall success. Schools play a crucial role in providing stable, nurturing environments that support social and emotional learning (SEL) and mental health, particularly for vulnerable pupils facing adversity. Evidence from the literature demonstrates that mainstream school settings can meet these growing demands with the provision of evidence-based SEL programmes.

In collaboration with the University of Bath, this project evaluates the effectiveness of the Hamish & Milo Wellbeing Programme, which aims to support the development of social and emotional competencies in primary-aged children and to enhance wellbeing through the provision of targeted social, emotional and mental health support through structured small-group sessions. The 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.

Overall, 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. The results indicate a positive and compelling set of findings demonstrating that the Hamish & Milo Programme is a promising social and emotional learning approach for improving individual, classroom, and school-level protective factors in primary-aged children.

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.

Please contact Andrea Middleton, Lead Consultant - Training & Research at Hamish & Milo
andrea@hamishandmilo.org



Contents

Introduction	7
Children and young people's mental health and wellbeing	7
The environment of relationships affecting children's development	8
Support for CYP with SEMHD	9
The school as a community of care	10
Current context for schools	11
SEN and SEMHD	11
The impact of COVID-19 pandemic on vulnerable children	12
Children missing from education	14
Exclusions	16
Pastoral support staff	18
The development of social and emotional competencies	19
Social and emotional learning	19
A whole-school approach	20
Identification and assessment of need	20
Evidence-based approaches	21
The Hamish & Milo Programme	22
Theoretical foundations of the Hamish & Milo Programme	23
The Hamish & Milo University of Bath Evaluation Project	25
Overview of the project	26
Phase 1 (September 2022 - October 2023)	26
Phase 2 (November 2023 - September 2024)	35
Research approach of Phase 2 of the study	36
Data collection	38
Measures	38
Participants	38
Procedures	41
Analysis	42
Qualitative data analysis	42
Ethical considerations	42
Findings	44
Quantitative findings	44
Qualitative findings	46

Theme 1. Perceptions of positive impact	47
Sub-theme 1: Pupils	48
Sub-theme 1.2: Teachers	52
Sub-theme 1.3: Parents	54
Theme 2. Meeting the needs of pupils	56
Sub-theme 2.1: Vulnerable pupils	56
Sub-theme 2.2: Hamish & Milo emotion themes	58
Sub-theme 2.3: Key features of the Hamish & Milo Programme	60
Theme 3. Social connectedness for pupils and practitioners	64
Sub-theme 3.1: Enjoyment	64
Sub-theme 3.2: Safe space to share	65
Sub-theme 3.3: Community	67
Theme 4: Hamish & Milo Champions	68
Sub-theme 4.1: Personal qualities	68
Sub-theme 4.2: Trusted relationships	69
Sub-theme 4.3: Professional experience and training	70
Summary of school needs, requirements and experiences	72
Discussion	74
Limitations, and directions for future research	79
Directions for future development	79
Conclusion	80
Hamish & Milo promotes social connectedness	81
Qualitative data analysis - interviews	82
Data analysis vignettes	82
Acknowledgements	86
Participating schools and trusts	86
References	88
Appendices	95
Appendix A	95
Appendix B	96
Appendix C	98
Appendix D	100

Introduction

There is evidence suggesting that the best predictor for adult life satisfaction is subjective wellbeing and emotional health during childhood (Helliwell, 2024).

The family is consistently regarded as the most important social context affecting the emotional health of the child, with the next most influential social factor being the school (Clark et al., 2019). The wellbeing and mental health of a child or young person 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 children and young people's (CYP) lives, including the formation of friendships; the ability to cope with adversity; the achievement of success in school and in their wider lives (National Scientific Council on the Developing Child, 2010).

A large body of child development research clearly demonstrates that the foundation for sound mental health is constructed early in life when the architecture of the developing brain is shaped through relational experiences in the child's environment, including children's relationships with significant adults at home and at school, including parents, caregivers, teachers, and their peers (National Scientific Council on the Developing Child, 2012). The quality of the child's home and school environment and positive early experiences within the sphere of their significant relationships shapes their wellbeing and can either strengthen or disrupt their developing biological systems, thereby determining whether the child is more likely to thrive and become a healthy adult, or not (World Health Organization, 2008).

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.

(National Scientific Council on the Developing Child, 2012; Darling-Hammond, 2019).

Children and young people's mental health and wellbeing

From a Western perspective, subjective wellbeing is described in the literature simply as the way in which CYP, and adults perceive and assess their own lives. 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 (Diener et al., 2002).

Insights from recently updated and released World Happiness Report which ranks the happiest countries in the world - based on factors like income, social support, and freedom to make life choices - shows that the countries that score among the top for happiness are known for their strong social welfare systems, high levels of trust, and overall quality of life (Helliwell et al., 2024). The self-reported experiences of young people worldwide captured in this report highlighted the UK's low ranking compared to other countries across the world - and reflects the findings from The Children's Society's household survey published earlier this year - showing that the UK performed poorly compared to other countries across Europe on several 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 (Chollet et al., 2024).

Research conducted over the past 20 years suggests that there has been a sharp rise in mental ill-health among CYP in England in 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 (Green et al., 2005). More than a decade later, data from the National Health Service (NHS) suggested a marginal increase in this figure, putting the number at 1 in 9 CYP experiencing mental health difficulties (NHS Digital, 2017).

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 (NHS Digital, 2023). The 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 (Fledderjohan et al., 2021).

The environment of relationships affecting children's development

Children experience their world as an 'environment of relationships' and the quality of these connections affects virtually all aspects of their physical, social, emotional, cognitive, behavioural and moral/cultural development (National Scientific Council on the Developing Child, 2004). Relational Developmental Systems Theory (RDST) is a conceptual framework that studies the interactions between individuals and their contexts and environments as the driving force behind human development (Fischer and Bidell, 2006; Rose et al., 2013).

In an educational context RDST posits that a child's learning is either enabled or undermined according to how the individual CYPs internal landscape (the physical, psychological, cognitive, social and emotional processes that effects functioning), is influenced and shaped by their interaction with the relationships and learning opportunities in their external environment, both within and outside of school (Lerner and Callina, 2014). CYP who grow and develop surrounded by adversity such as abuse, neglect, community violence, and homelessness, or 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 (Bellis et al., 2023).

The term 'Adverse Childhood Experiences' or 'ACEs' which rose to common use through a large-scale research study published by Felitti et al (1998) 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 the health and behaviour (Bellis et al., 2023).

Studies conducted since the original ACEs research in the United States, the United Kingdom and elsewhere in the world all clearly determine that ACEs are common across populations and that the prevalence of ACEs is affected by socio-demographics such as deprivation, ethnicity, race, etc. (Ibid.). A study conducted in 2014 showed that 46% of the adult population in England had at least one ACE, whilst 8% had four or more (Bellis, et al., 2014).

The effects of early life adversity and trauma have been documented in several research studies which demonstrate that they have the capacity to disrupt the neurodevelopment of children (McLaughlin et al., 2014) and are associated with cognitive, emotional and behavioural difficulties in childhood and adolescence which can negatively impact upon their school experience (Porche et al., 2016; Perfect et al., 2016).

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 (Bellis, 2023). Initiatives that support the development and continuance of safe, stable, nurturing relationships and environments for CYP, families, and wider communities - including programmes that develop CYPs 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 (Bellis, 2023).

A further 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 that helped them to thrive despite the trauma present in their childhoods (Bethell et al., 2019).

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 (Bethell et al., 2019).

The seven PCEs identified in the study are:

- ✔ Feeling safe and protected by an adult in the home;
- ✔ The ability to talk with family about feelings;
- ✔ The sense that family is supportive during difficult times;
- ✔ Feeling supported by friends;
- ✔ Feeling a sense of belonging in secondary school;
- ✔ Having at least two non-parent adults who genuinely cared;
- ✔ The enjoyment of participation in community traditions.

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 (Sege, 2017).

The seven Positive Childhood Experiences or 'PCEs'



The evidence suggests that when there is a focus on strengthening the capabilities and resources of parents and other significant adults in CYPs lives to promote PCEs, a strong foundation for learning, positive behaviour, and physical and mental health can be created (Han et al., 2023; Sege, 2017).

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 (La Charite et al., 2023). 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. The findings of the study reinforced prior evidence showing that both peer support and a supportive and safe school climate are associated with improved mental health outcomes and wellbeing into adulthood (Ibid).

Support for CYP with SEMHD

Within the NHS, mental health support provision for CYP is organised through a tiered system: Tier 1 delivers early intervention and prevention services, provided by professionals in educational settings who may not have specialist mental health training; Tier 2 delivers early intervention and prevention through professionals specialising in mental health e.g. counsellors as well as school staff delivering strategies such as nurture groups, LEGO® therapy, ELSA; and Tiers 3 and 4 provides specialist and in-patient services for advanced needs (NHS England, 2014). Alarming, 75% of CYP who experience mental health problems cannot access the required support with Children and Young People's Mental Health Services (CYPMHS) not able to meet the increased demand, resulting in referrals being declined and long waits for the young people who are seen (Pitchforth et al., 2019).

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 school teachers for help and advice more often than any other professional group (Newlove-Delgado et al., 2015).

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 (Department for Education, 2018). Schools are also well placed to identify emerging issues early and to provide tailored support that meets the specific needs of their pupils. Schools can also coordinate specialist support and treatment, if necessary, to help prevent impairment to pupils' health or development and enable them to attain the best possible outcomes (Public Health England, 2021).

There is strong evidence showing that school environments are well suited to graduated prevention approaches where there are both universal and targeted interventions; and 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 (Department of Health, 2017). 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 (Children's Commissioner, 2021).

The school as a community of care

The concept of 'care' - which is described as the process of protecting another person and providing for their needs - is one of the central activities of human life and a fundamental organising principle of human society (Tronto, 1993). The theory of care ethics emphasises the importance of relationships in an individual's context and considers how the concept of wellbeing is formed and understood from a person's experiences of being nurtured within authentic relationships of care.

In the context of education, Noddings (2006) 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. 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 (Baker et al., 2019; Noddings, 2006).

This ethic of care, grounded in the safety of authentic relationships, also forms the basis for a school-wide 'community of care' (Baker et al, 2019), consisting of pupils, school staff, and parents, wherein everyone feels valued and cared for. The school as a community of care exists 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 (Harrison et al., 2021). This concept has been the focus of research in primary schools in the United States for almost two decades, with the results of studies showing that schools as communities of care are associated with a wide range of positive outcomes for both pupils and teachers, with the potential benefits of enhancing such communities being greatest in schools with high numbers of vulnerable pupils (Battistich et al., 1997).

Overall, the research demonstrates that the concept of school as a community of care provides a compelling framework for viewing educational practice and guiding educational reform efforts.

(Battistich et al., 1997)



Current context for schools

SEN and SEMHD

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) (Department for Education, 2024).

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 recently revised SEN Code of Practice (SENCOP) (Department for Education, 2015), 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, and moderate learning difficulties (Department for Education, 2024).

The term SEMHD, which replaces the original nomenclature SEBD (social emotional behaviour difficulties) in the SENCOP, is a broad umbrella term that covers a wide range of difficulties that CYP may experience in managing their emotions and behaviour which affects their ability to make and maintain relationships with adults and peers. The SENCOP describes SEMHD presenting as possible withdrawal and isolation, as well as through dysregulated, challenging and concerning behaviours, and further acknowledges that these presentations may reflect an array of underlying mental health difficulties or disorders.

A full description of SEMHD are classified by mental health professionals in the guidance to schools document (Department for Education, 2018) into several categories of disorders including: emotional; conduct; hyperkinetic; developmental; attachment; trauma; and other mental health diagnoses.

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 (Martin-Denham, 2021).

The change in definition in the revised SENCOP reflects the increased awareness and understanding of the direct link between underlying mental health and wellbeing and presenting behaviours, and acknowledges the transition to more informed, whole-child approaches in supporting and addressing underlying needs, in contrast to previous approaches which were primarily concerned with subduing or managing behaviour.

The most recent data collected by The Department for Education showed that SEMHD are the second most common category of SEND amongst pupils with more than 316,000 CYP identified as having SEMHD in schools in England in 2023/24 (NHS Digital, 2024).

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 (Department for Education, 2015b).

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. In a Green Paper published pre-pandemic in 2017, the UK government set out a series of ambitious and transformational proposals for the health and education sectors by placing schools at the centre of plans to embed a culture of openness around mental health (Department of Health, 2017).

The objective of these reforms was to forge stronger connections between the sectors as a way of ensuring that CYP were able to access appropriate support, but the measures were not able to adequately address the surge in demand for support for SEMHD post-pandemic, particularly amongst CYP with SEND and vulnerable pupils from disadvantaged backgrounds (Children's Commissioner, 2023).

A policy review conducted in 2023 and reported by the Children and Young People's Mental Health Coalition (CYPMHC) later the same year, concluded that the recommended policies and reforms implemented to date by the government had not demonstrated sufficient impact in ensuring children and young people were able to access mental health support required (CYPMHC, 2023).

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 CAHMS 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 (House of Commons Health and Social Care Committee, 2021).

The impact of COVID-19 pandemic on vulnerable children

The impact of the COVID-19 pandemic has been extensively studied since 2020, with much evidence emerging highlighting the significant impact and fundamental changes to the lives of many CYP 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 (NSPCC Learning, 2022).

A vulnerable child is a CYP who has been identified as being at greater risk of experiencing physical or emotional harm, or who is at risk of achieving poor outcomes due to a range of factors in their lives, including: having additional physical, emotional, health and educational needs; having the presence of risk or having experienced harm; the inability of their primary caregivers to provide a safe living environment; the absence of supportive relationships in their home and wider environment; and the presence of wider community conditions beyond a family's control (Public Health England, 2020; Cordis Bright, 2017).

Many vulnerable children may also be exposed to a specific set of traumatic, stressful or adverse experiences during the pandemic, which are associated with long-term negative impacts on their health, wellbeing and life chances (Felitti et al., 1998). There is acknowledgement that the pandemic impacted the lives of all CYP in different ways, but some scholars have argued that due to either the direct or indirect impact of the experiences vulnerable CYP have endured during this period, COVID-19 should be regarded as an additional ACE (McManus & Ball, 2020).

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 (Public Health, 2021; CYPMHC, 2023) and that CYP with vulnerable characteristics - including CYP 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 (Ibid).

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 (CYPMHC, 2019).

CYP with SEND can face even greater challenges accessing the right mental health provision at the right time.



Previous research has shown that just 27.9% of CYP with SEND and SEMHD have had any contact with mental health services, with nearly one in four families reporting extraordinarily long waiting lists for referral to specialist services (CYPMHC, 2019). The extraordinary rise in demand for support has been attributed directly to the uncertainty, anxiety and disruption caused by the pandemic, which amplified and exacerbated the multiple existing pressures some CYP were already facing prior to this period, with delays in response to this need for care and treatment found to be causing further harm to these CYP at a crucial stage of their development (NHS Digital, 2023).

The findings of an investigation by The Guardian newspaper published in August 2024 concluded that more than 500 children a day in England were being referred to NHS mental health services for anxiety, these figures being more than double the rate reported before the COVID-19 pandemic began (Gregory, 2024). Ongoing educational research is providing a breadth of insight into the impact of the pandemic on children's learning, literacy and mental wellbeing (National Literacy Trust, 2025).

Several studies have shown that low-income working households, particularly single-parent families, were disproportionately affected by the economic fallout of the pandemic and subsequent lockdowns (Howes et al., 2020; Joseph Rowntree Foundation, 2023). Most of the families adversely affected during this period experienced a significant reduction in their earnings due to various factors such as redundancy, unemployment, and additionally were limited in their ability to maintain or find employment because of additional caring responsibilities and/or restrictions in childcare provision (Howes, 2020).

As with many other areas, such as health and employment, the pandemic both exposed and exacerbated pre-existing educational inequalities (National Literacy Trust, 2025). The term 'learning loss' describes differences between levels of learning in pupils affected by educational disruption related to the pandemic and what would be expected in a typical academic year (Gage et al., 2023).

Research conducted by the Department for Education revealed that vulnerable CYP from disadvantaged backgrounds in the poorest areas of the country, and in particular pupils with SEND, showed greater levels of learning loss than their peers from more financially advantaged backgrounds (Department for Education, 2021).

A report published by the Joseph Rowntree Foundation suggested that SEND can be a result of poverty as well as a cause of poverty (Shaw et al., 2016). The same study concluded that CYP across the UK with SEND were more likely to experience poverty than others, and as a result of their needs, were also less likely to experience a fulfilling education and were more likely to leave school with outcomes that reduced the chances of living in poverty as adults (Ibid).

Further studies also conclude that the impact of the pandemic on pupils' learning has been greater for those from disadvantaged backgrounds (National Literacy Trust, 2025). Free School Meal (FSM) eligibility is often utilised as the closest indicator for poverty, however, there is evidence to suggest that this measurement may represent a much smaller number than the overall number of school-age children living in poverty, with recent estimates suggesting there are approximately 900,000 children living in poverty who are not eligible for FSM (Child Poverty Action Group, 2024).

The latest government data indicates that of the 2.1 million pupils (26% of all pupils) from disadvantaged backgrounds who are eligible to receive FSM, a significant proportion of these also have SEND (Department for Education, 2024b). In 2024, 42.2% of pupils with an education, health and care plan (EHCP) and 38.3% of those receiving SEN support in schools were eligible for FSM, compared to 24.6% of all pupils (Department for Education, 2024c).

For CYP there is a gap in their educational attainment by parental income across all stages of education (Joseph Rowntree Foundation, 2023). This so-called attainment gap measures the learning gap between disadvantaged pupils (those eligible for receiving additional financial support in the form of the Pupil Premium) and their peers (Andrews et al., 2017).

Research conducted pre-pandemic showed that on entering primary school, the attainment of CYP from lower-income households was around 4.6 months behind that of their peers from higher-income households; the gap increases to around 9 months by the time they leave primary school, and then increases again at secondary school, with pupils from disadvantaged backgrounds leaving around 18 months behind their peers (Andrews et al., 2017).

One factor identified in relation to the lack of progress made in narrowing the gap is a higher proportion of CYP in persistent poverty (Hutchinson et al., 2020). The pandemic generally widened the attainment gap between the most and least disadvantaged pupils in the UK, likely driven by falling incomes, the differences in home learning environments such as the digital divide, and the additional multiple challenges faced by CYP from lower-income homes (Joseph Rowntree Foundation, 2023). Many of the most vulnerable groups before the COVID-19 pandemic continue to have a higher risk of living in poverty (Ibid.)

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 (Shafan-Azar and Bottomly, 2024).

The Children's Commissioner estimated that in the period between 2022 and 2023, approximately 117,100 CYP were missing from mainstream schools in England, which amounts to approximately one in five children who are persistently absent, meaning they may miss 10% or more of their school time (Shafan-Azar, 2024).

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.

305,000
Children were
entirely missing
from education
in 2023



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.

Prior to school closures during the pandemic, the government had made some progress in addressing rising school absences, however, since schools have reopened, persistent absences have risen significantly, beyond pre-lockdown levels (Hutchinson and Crenna-Jennings, 2019).

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 by a CYP due to emotional, mental health, and wellbeing issues (Halligan and Cryer, 2022). The change in terminology reflects the understanding that the reasons for EBSA are rooted in complex and interconnected individual, family, and school factors, often beyond the choice of individual CYP (King, 2001).

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: aspects specific to the CYP (e.g. mental health concerns such as anxiety, depression, etc.); factors concerning the family and home (e.g. poverty, domestic violence, etc.); and issues to do with school (e.g. lack of support and provision to meet needs) (Anna Freud Centre, 2024).

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

- 1 is classed as a child in need and under social care
- 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
- 6 have a mental health issue, but only 3 of them received even one contact with CYPMHS
- No apparent needs



Evidence from research suggests that CYP who are frequently absent from school experience feelings of anxiety (Finning et al., 2019) which can take many forms - such as separation anxiety, social anxiety, performance anxiety, etc. - caused by stressful experiences or events, e.g. academic difficulties, and which may result in the CYP experiencing physical symptoms, such as headaches (Wimmer, 2010).

Certain traumatic occurrences have also been posited to trigger the onset of EBSA, including the death of a loved one, illness of the CYP, moving to a new school, as well as transitions such as moving into a new class (Ibid.).

CYP who experience anxiety may find it difficult to cope socially and academically and may therefore wish to avoid or disengage from an environment that creates additional anxiety, thereby further exacerbating avoidance of school, resulting in lowered attendance (Heyne and Rollings, 2002). CYP that are faced with stressful situations often evoke an automatic fear survival response to protect themselves from a perceived threat, which inhibits executive functioning and commonly results in a fight-flight-freeze reaction (Paige, 1997).

If the CYP perceives the school itself as a potential threat, then the avoidance of this environment can be viewed as a neurological stress response to the perceived threat of the school environment which may further exasperate school refusal, resulting in lowered attendance (Frydman and Mayor, 2017).

A recent report published by the Children's Commissioner of England that examined the contextual circumstances of the children missing from education, described in popular media as 'ghost children' (GOV.UK, 2023), found that CYP living in the poorest, those with SEMHD and moderate special educational needs, and those with social care involvement were overrepresented in the statistics (Children's Commissioner, 2024a). The evidence also shows that school absence disproportionately affects children from disadvantaged regions of the UK, particularly the South West and North of England (Ibid.).

Another recent report issued by the think tank, the Centre for Young Lives (2024), makes the clear link between persistent absence and vulnerability by revealing that rates of persistent absence for FSM-eligible pupils since the COVID pandemic have risen by more than double the percentage points, compared to the rise among those not eligible for FSM (Centre for Young Lives, 2024). The same report also identifies that in instances where CYP are severely absent and missing more than 50% of schooling, the rate has risen by more than three times more percentage points for FSM-eligible pupils than non-eligible pupils (Ibid.).

Other recent research reports have found that the absence crisis is affecting the most vulnerable CYP, with statistics demonstrating that pupils with SEND and SEMHD - who attend both special schools and mainstream schools - are at higher risk of absence than their peers without special needs (The Centre for Social Justice, 2024); (Children's Commissioner, 2024).

For example, autistic pupils experience high rates of persistent absence, with a rate of 31% in 2020/21, and these same CYP are also twice as likely to be excluded from their schools compared to those without SEND (Bond et al., 2024).

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 (Children's Commissioner, 2024b).

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

(Wimmer, 2010; Halligan, 2022)

Social support is considered to be a significant factor implicated in wellbeing, when people feel like they have at least one person they can reach out to when they're in need, they are more likely to feel secure (Helliwell et al., 2024).

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 (Coleman, 1988), in that the participation by CYP in school activities that enable the building of relationships with peers and adults have been found to inhibit school avoidance (Sobba, 2019). For example, a recent study described how schools were successfully addressing severe cases of EBSA by actively building relationships between children, families, and schools, thereby encouraging and supporting CYP and their caregivers to feel a greater sense of belonging to the school (Centre for Young Lives, 2024).

Exclusions

It is reported that rates of both temporary (otherwise known as fixed term or suspensions) and permanent exclusions of CYP from schools across the UK are rising rapidly in both primary and secondary schools. In the autumn term of 2023/2024, almost 40,000 pupils were suspended, and over 500 were permanently excluded, from primary schools in England (GOV.UK, 2024).

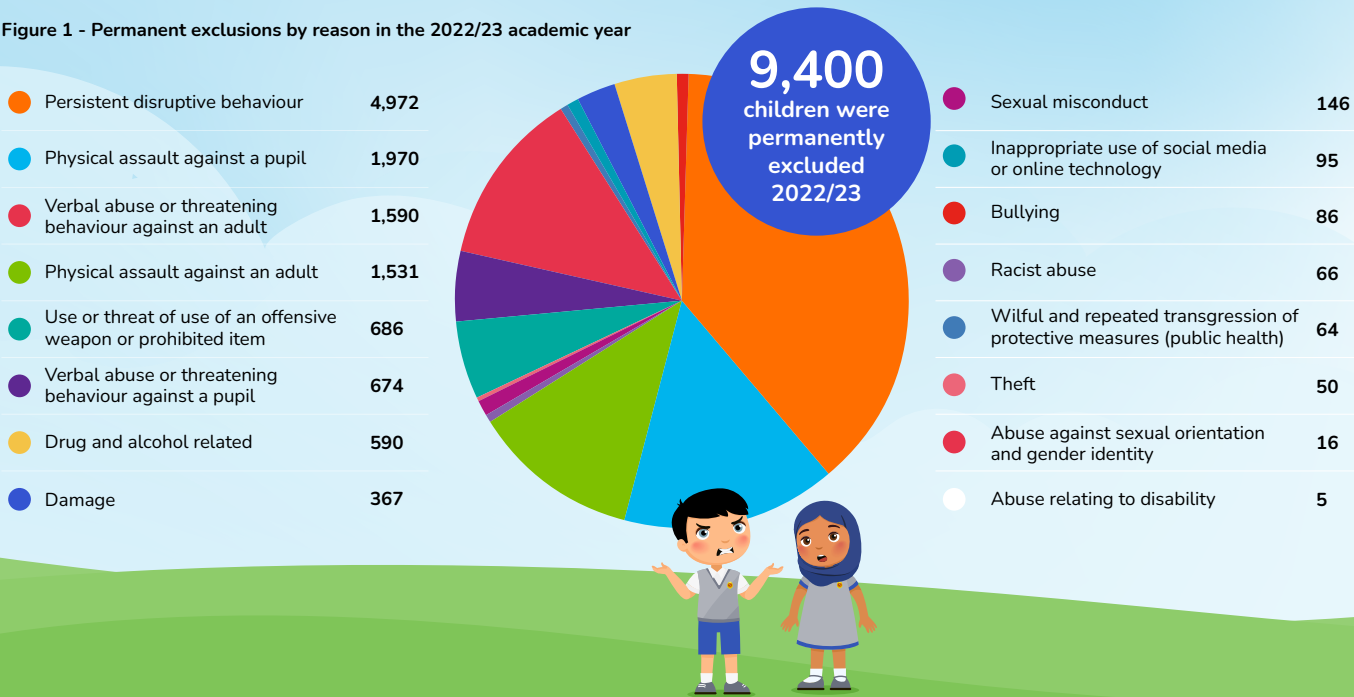
There is a concerning rise, particularly in primary school exclusions in England, with suspensions and permanent exclusions increasing significantly.

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 (GOV.UK, 2024). 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 the autumn term 2022/23, increasing in primary schools by 41% (GOV.UK, 2024). 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 recorded for permanent exclusions (accounting for 39% of cases for academic year 2022/23) 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 (Lereya and Deighton, 2019).

Figure 1 - Permanent exclusions by reason in the 2022/23 academic year



A recent report revealed a more detailed picture of the CYP 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 (Gill et al., 2024).

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 (Shaw and Audley, 2024), including poor academic outcomes.

For example, over 90% of children excluded from primary school do not pass GCSE English and maths; in comparison, only 25% of children who were never excluded or suspended did not achieve a Grade 4 in English GCSE.

(Westminster Foundation, 2024)

The investment and embedding of early intervention services in primary schools, at the point of need, has been shown to improve the outcomes for wellbeing and engagement in education for vulnerable CYP who may be at risk of exclusion (Snell et al, 2013). Evidence suggests that targeted initiatives that 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 (Gaffney et al, 2021).

Figure 2 - Types of support performed 'most' or 'some' of the time by TAs by setting

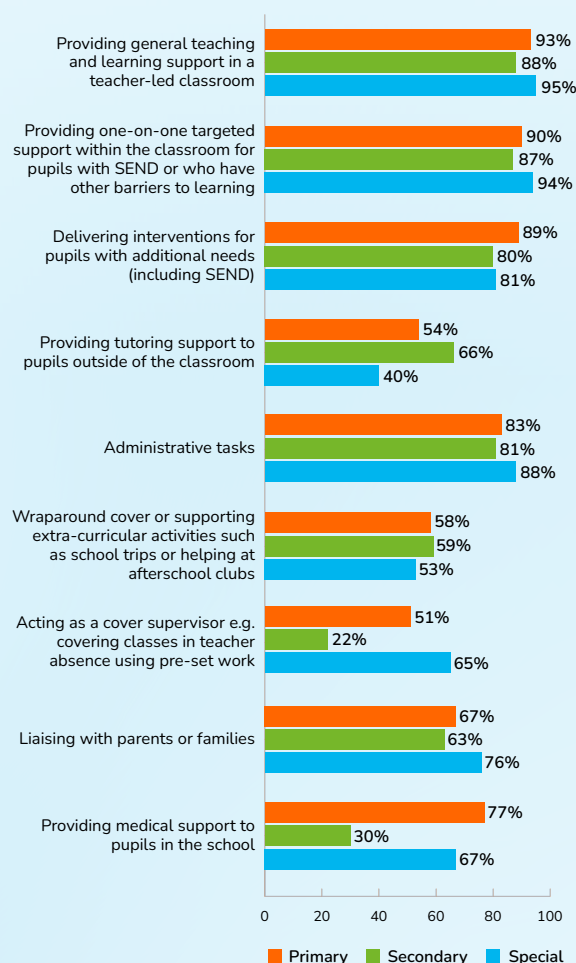
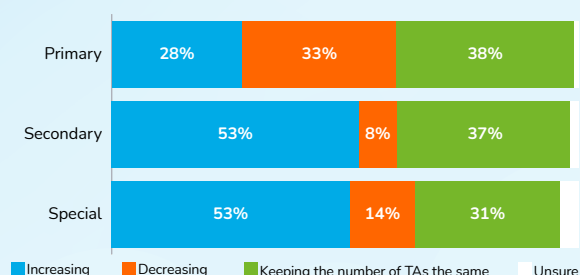


Figure 3 - Schools increasing or decreasing its TAs by phase



Pastoral support staff

There are currently almost 800,000 (over 500,000 full-time equivalent) support staff working in state-funded schools in England (UK Government, 2025), making up over 50% of the school workforce and encompassing a wide range of roles including Teaching Assistants (TAs), administrative staff, catering staff or caretakers (Department for Education, 2024).

Following the pandemic, one of the most pressing challenges that schools across the UK are facing is the significant shortage of TAs, with low recruitment activity and retention issues arising from poor working conditions, low pay, and the lack of career progression (Teach Now, 2020).

Recognising the value and professionalism of support staff - and the crucial role they play in ensuring the best life outcomes for children - the UK government recently reinstated the School Support Staff Negotiating Body to help raise standards in recruitment, training, and remuneration (UK Government, 2025).

A government report shows that the primary duties undertaken by most TAs is supporting teaching and academic learning, however increasingly they are assuming more varied and complex pastoral responsibilities, including providing SEMH intervention.

(Skipp and Hopwood, 2019)

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 (Department of Health and Department for Education, 2017).

Although pastoral roles in schools are often ill-defined (Rae, 2017) and the professional remit of TAs is yet unresolved (Middleton, 2018), it is widely recognised that this workforce play a vital role in supporting the wellbeing and safeguarding of CYP - particularly those with SEND - and that their professional skills are currently in demand (The Skills Network, 2020).

A research report from the Department for Education (DfE) published September 2024 with teaching assistants (TAs) and school leaders views revealed that many secondary (53%) and special schools (51%) are planning to hire more teaching assistants (TAs), mainly due to the growing number of students with SEND (DFE, 2024). Comparatively, over a third of primary school leaders (33%) report that their TA numbers will decrease, citing financial pressures as the main reason for this occurrence.

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 (Rae, 2017).

A tailored, supportive supervision structure can provide an essential, dedicated and safe space for pastoral staff to regularly reflect on their practice, process challenging experiences, develop their skills and maintain their own wellbeing, thereby increasing job satisfaction and reducing staff attrition rates (Lawrence, 2020).



The development of social and emotional competencies

Social and emotional learning

Social and emotional learning 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.’ (CASEL, 2025).

The development of social and emotional skills (SEL) 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 (Durlak, 2011).

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.

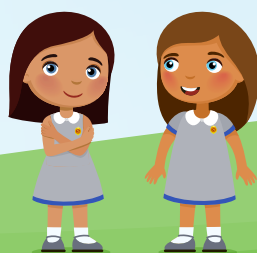
(OECD, 2015; Durlak, 2011).

There is extensive international evidence that teaching SEL 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 (Education Endowment Foundation, 2021) and that these beneficial outcomes can persist over time (Taylor, 2017).

In the educational context, the term ‘emotional literacy’ (EL) has commonly been used to describe this gradual development process of the awareness and capabilities CYP require to successfully navigate the social environment of school (Rae, 2012). Various models of EL are described in the literature, with Goleman’s (1996) and Faupel’s (2003) frameworks - both of which describe five components of the personal and social domains comprising the sum of social, emotional, and behavioural competencies - emerging as major models informing the EL development programmes comprising school-based provision in the UK (Alemdar and Amilan, 2020). The terms EL and SEL are often used interchangeably in both literature and practice, reflecting significant conceptual overlap. (Ibid.)

More recently, an updated SEL framework has been developed through consultation with leading academics, clinical, and practitioner experts in the field of human development (Royal Foundation Centre for Early Childhood, 2025). The framework offers a comprehensive description of SEL which is defined as two sets of closely related competencies that shape an individual and determine how they manage their emotions and thoughts, how they communicate and relate to others, and how they explore the world around them (Ibid.).

There is an extensive body of research evidence associating SEL skills development in childhood with improved school readiness and academic attainment (Domitrovich et al, 2017; OECD, 2015). For example, emotional self-regulation - described as the ability to successfully regulate one’s emotions, thoughts and behaviours in different situations (Education Endowment Foundation, 2021) - is a core social-emotional skill that is positively associated with teacher reports of children’s academic success (Graziano et al, 2007).



Self-regulation, along with other social-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 (Goodman et al, 2015).

SEL instruction is carried out most effectively in nurturing, safe environments, characterised by positive and caring relationships among pupils and trusted adults in the school environment.

(CASEL, 2020)

A whole-school approach

Published research used to inform world policymakers on matters of economic and social policy (OECD, 2015) suggests that schools provide a unique setting wherein CYP can learn the cognitive, social, and emotional skills critical for them to develop positively and be successful in life. Studies emerging from the health sector concur that schools have the opportunity to positively influence the quality of life and physical, mental, and social wellbeing of CYP; and that when schools promote CYPs wellbeing alongside the teaching and learning of the educational curriculum, they not only improve their academic achievements but also help to foster their health and reduce the prevalence of measurable unhealthy outcomes (Pulimeno, 2020; Kilgour, 2015; World Health Organization, 2008)

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 (Department of Health, 2017). Whole school or universal 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 pupils (Public Health England, 2021).

An effective whole-school approach integrates positive mental health across all aspects of school life - including leadership, staff-pupil relationships, and the curriculum (Anna Freud National Centre for Children and Families, 2025). In addition, a whole school approach includes a targeted element whereby schools identify pupils with emerging mental health needs, provide early intervention and support, and refer for more specialist help where necessary (House of Commons Health and Social Care Committee, 2021).

Identification and assessment of need

The prevalence of CYP with SEMHD who require additional support underscores the need for greater awareness among educators and highlights the importance of early identification and intervention as a preventative measure to address challenges before they escalate and become more complex (Martin-Denham, 2021).

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 (Education Endowment Foundation, 2021).



Figure 4 - Eight principles to promoting a whole school approach to mental health and wellbeing, Public Health England and the Department for Education, 2021

It can therefore be argued that in addition to a whole school approach, there is a significant need for targeted SEMH interventions in schools as a proactive and preventative measure for supporting pupils with emerging mental health needs and those that may require additional targeted support to alleviate impact on long-term mental health and emotional development (Public Health England and Department for Education, 2021).

CYP who have experienced adverse risk factors, those who have specific social and emotional learning needs, and those who may be struggling to feel included within the school culture would significantly benefit from targeted support in school (Department for Health and Department for Education, 2017).

Class teachers occupy a uniquely judicious position to observe and respond to their CYPs SEMH needs, and when they and other school staff are equipped with the knowledge and skills to identify these needs, they can proactively prevent escalation and create an inclusive, supportive learning environment where children feel safe to explore and learn (Mainstone-Cotton, 2021; Weare, 2015).

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

(Jaspers-van der Maten, 2024)

The implementation of intervention programmes and/or teaching strategies that support children's SEMH in schools can be influenced by teachers' attitudes about the benefits such programmes offer (Kallitsoglou, 2023). Therefore, it is essential that, for these programmes to be deemed effective, the relevance and value of the intervention must be recognised by the teachers of the children taking part in the programme.

Teachers are well placed to both identify concerns and to determine changes in behaviour, attainment and attendance following intervention.

To do this effectively, they are advised to make use of a reliable, standardised instrument of assessment to pinpoint the nature and scope of the difficulties (Weare, 2015). 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 (OECD, 2015).

Evidence-based approaches

Research evidence demonstrates that policymakers, schools and families each play a pivotal role in promoting and facilitating CYPs social and emotional skills development by improving learning environments - through teaching practices, parenting and intervention programmes - to enhance these skills (Weare, 2015).

For positive effects to be achieved, implementation quality and fidelity are identified as key factors in the effectiveness of SEL interventions (Barry et al, 2017). In recognition of the evidence supporting the development of SEL, schools are encouraged to prioritise and effectively implement evidence-based SEL approaches that are scientifically evaluated, grounded in research and based on principles of child development, and that produce multiple benefits for their pupils (CASEL, 2025).

The terms 'evidence-informed' or 'evidence-based' practices 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 (Kallitsoglou, 2020).

Data from a meta-analysis reviewing evidence from school-based SEL interventions found that the most effective programmes were those that provided sequenced activities that led - in a coordinated and connected way - to the development of SEL skills; and programmes that promoted active forms of learning that focussed on developing one or more skills, but were also explicit about targeting specific skills (Durlak et al., 2011).

Other key characteristics of effective SEL interventions identified in a subsequent evidence review include programmes with; a strong theoretical foundation with well-designed goals; that use a coordinated and sequenced approach to achieving their objectives; that are explicit about teaching skills that enhance SEL competencies; use empowering approaches including interactive teaching methods; that start early with the youngest and continue through the school year groups (Barry et al., 2017).

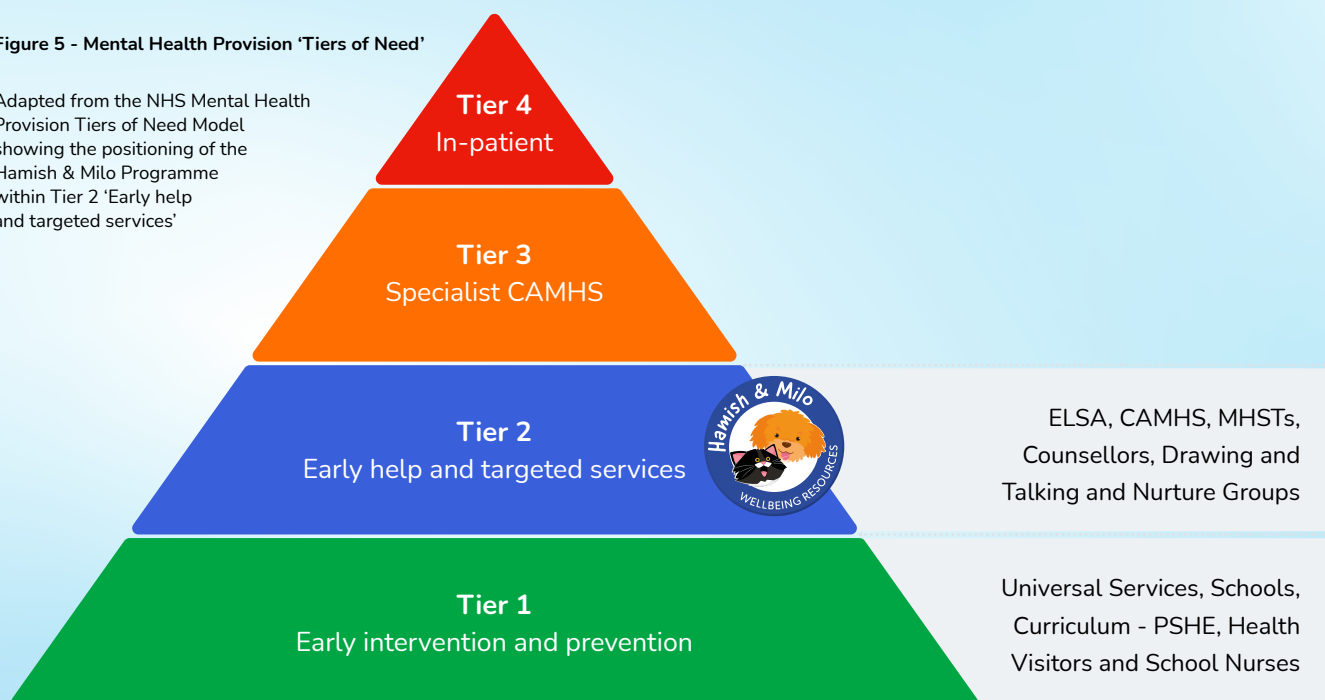
The Hamish & Milo Programme

Hamish & Milo is a comprehensive SEL and SEMH support programme for primary-aged children to develop pupils' SEL skills and improve 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 (Department for Education, 2021) currently taught in all schools in England.

Figure 5 - Mental Health Provision 'Tiers of Need'

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



The Hamish & Milo Programme provides early mental health support and targeted intervention services at Tier 2 of the NHS provision model and is facilitated and delivered by educational practitioners (referred to as Hamish & Milo 'Champions') based in schools - usually pastoral or mental health support members of staff.

A key element of this approach is the quality of the relationship between the adult group facilitator (Hamish & Milo Champion) and the CYP to ensure 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.

Figure 6 - The ten emotion theme units of the Hamish & Milo Programme



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.

Each Hamish & Milo emotion theme focuses on the development of the five SEL skills (self-awareness; self-regulation; motivation; empathy; and social skills) that have been linked to a range of positive outcomes and constitute emotional intelligence (CASEL, 2025; Goodman, 2015; Goleman, 1996).

The content of the Hamish & Milo Programme is informed by a wide range of theoretical contexts, models, and research evidence all of which place the significance of relationships at the core of optimal human development, including the Emotional Intelligence Model (Goleman, 1996); and Emotional Literacy Model (Faupel, 2003). Attachment Theory (Bowlby, 1978); (Ainsworth, et al., 1978); Emotional Regulation Theory (Schore, 2015); Psychosocial Development Theory (Erikson, 1980); Maslow's Theory of Motivation (Maslow, 1943); Adaptive Brain Theory (Steffen, Hedges & Matheson, 2022); Social Brain Hypothesis (Dunbar, 2009); (Adolphs, 2009); Adverse Childhood Experiences Model (Felitti et al., 1998); Positive Childhood Experiences Model (Bethell et al., 2019); and Group Development Theory (Tuckman & Jensen, 1977).

Theoretical foundations of the Hamish & Milo Programme

A large and growing body of literature emphasises that nurturing, reliable and responsive relationships are fundamental to optimal child development and wellbeing (National Scientific Council on the Developing Child, 2004). It is within an 'environment' of nurturing and trusted relationships, that CYP learn how to think, understand, communicate, express emotions, and develop social skills (National Scientific Council on the Developing Child, 2020).

At the core of the Hamish & Milo Programme is the understanding that nurturing relationships are crucial for CYP 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 framework for the Hamish & Milo Programme has been designed within the context of the theoretical landscape of Relational-Cultural Theory (Miller, 1986), which acknowledges the inherently social nature of human beings that drives an individual to grow through and toward connection throughout the lifespan.

These connections or 'growth-fostering' relationships (Miller, 1986), 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 (Jordan, 2017; Jordan and Hartling, 2008).

The relational foundation of the Hamish & Milo Programme acknowledges and actively promotes PCEs (Bethell, 2019), 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. The 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 (La Charite et al., 2023). 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, caregivers 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 (Faupel, 2003; CASEL, 2020) - 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 emotion themes support the development of social and emotional competencies, recognising that CYP acquire and advance these skills sequentially, through social connection, and in accordance with recognised stages of human psychosocial development (Erikson, 1980).

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



Figure 7 - The Hamish & Milo Emotional Literacy Pathway adapted from Faupel (2003); Goleman (1996); and Erikson (1980) and corresponding Hamish & Milo Programme Emotion Themes.

The Hamish & Milo Champions play a crucial role in supporting the pupils in their care by providing a consistent, safe, and supportive environment where social and emotional skills are modelled, facilitated, and fostered through trusted relationships (Early Intervention Foundation, 2015).

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 are protected and nurtured (Middleton et al., 2020). Peer supervision facilitates a community of practice (Wenger, 1998) that serves as a source of collective support and provides an environment wherein skills and learning through collaborative interaction can be developed.

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 (Schoore, 2015).

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.

(Payley & Hajal, 2022)



The Hamish & Milo University of Bath Evaluation Project

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.

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 (Durlak, 2011; Weare, 2015). In collaboration with the University of Bath's Department of Psychology, the Hamish & Milo University of Bath Evaluation Project (HMUoBEP) was developed 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.

Theory of change is a systematic methodology that draws on causal analysis based on available evidence which is used to evaluate a programme or intervention that is expected to lead to change (Funnell, 2011). The progression of undertakings and expected outcomes taking place over the course of the HMUoBEP are presented in the theory of change framework below.

Figure 8 - Theory of change showing guiding outcomes for evaluation of the HMUoBEP





Overview of the project

The Hamish & Milo University of Bath Evaluation Project (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?

Phase 1 (September 2022 - October 2023)

The initial phase 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 below), selected by each school, according to each pupil's indicated area of need.

Hamish & Milo Programme emotion theme		SEL focus area
	Actions, words and me - Helping children with conflict resolution	Conflict resolution
	Celebrating me - Helping children with difference, diversity and inclusion	Diversity and inclusion
	Resilient me - Helping children with resilience	Resilience
	Calm me - Helping children with anxiety	Anxiety
	Finding me - Helping children with sadness	Sadness
	New beginnings and me - Helping children with change and transition	Change and transition
	Memories and me - Helping children with loss, bereavement and grief	Loss, bereavement and grief
	Amazing me - Helping children with their self-esteem and self-worth	Self-esteem
	My friends and me - Helping children with friendships	Friendship
	Exploding me - Helping children with strong and angry feelings	Anger

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.

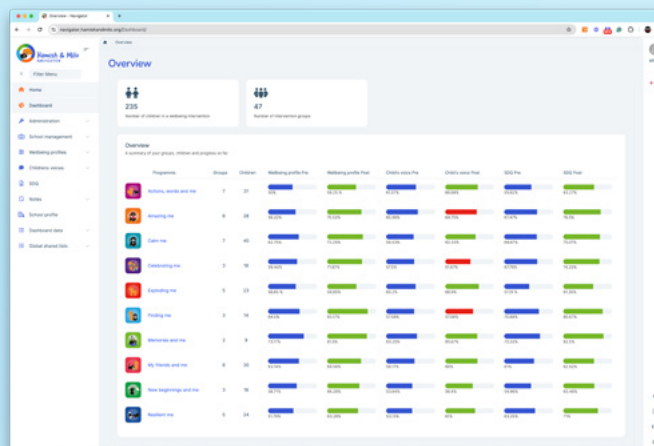
Pre- and post-intervention data for each participating child was collected using three prescribed impact measurement tools for impact evaluation:

- ✓ **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 pupils to identify their own areas for development, reflect on their experience of the programme, and measure their own 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.

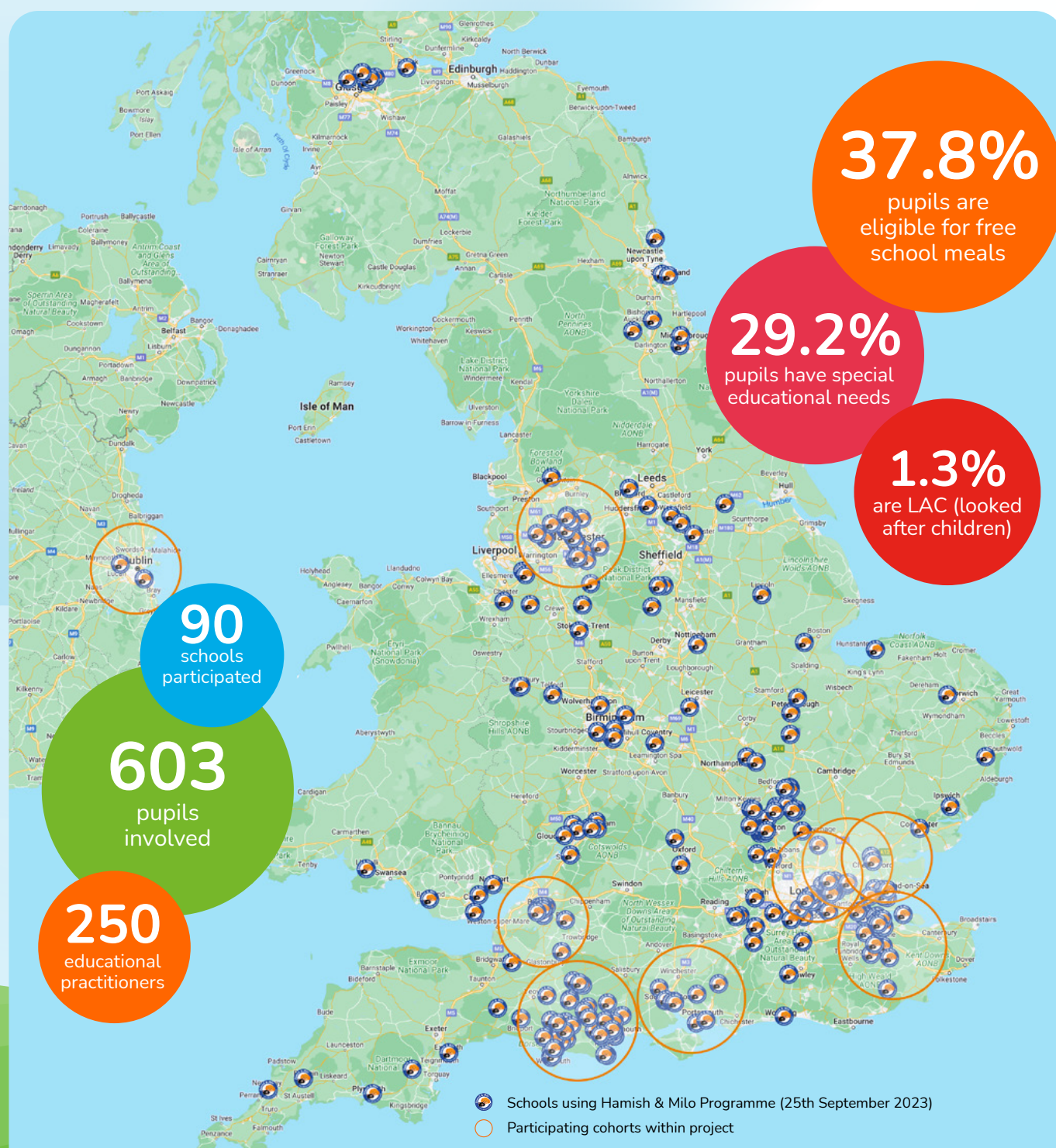
Hamish & Milo Navigator digital platform

See more in Appendix D



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 children, pre- and post-intervention across all impact measures:

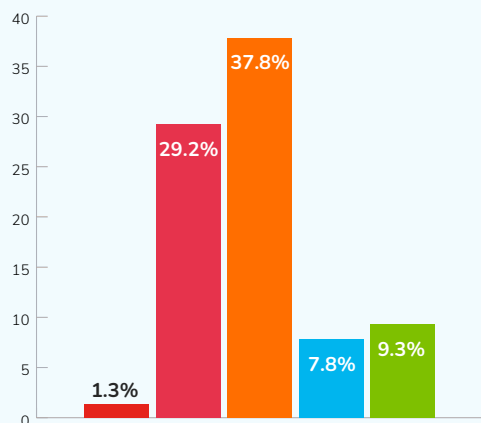
- ✓ **Strengths & Difficulties Questionnaire (SDQ)** - Overall improvement for children across all subscales (Figure 9)
- ✓ **Child's Voice Questionnaires (CVQ)** - Improvement across all measures (Figure 10)
- ✓ **Child Wellbeing Profiles (CWP)** - Improvement on all behaviour and protective factors scales (Pages 28-32)



Participants

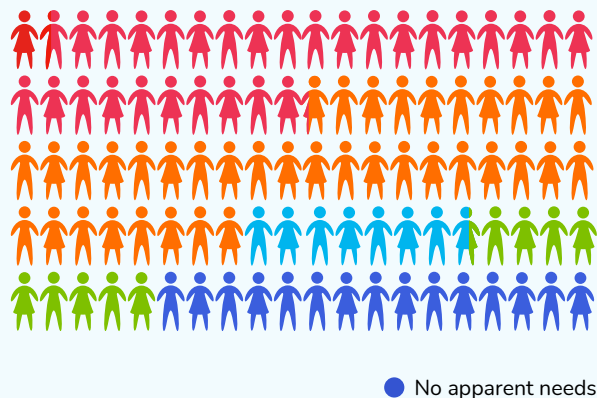
Pupil's situation

(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

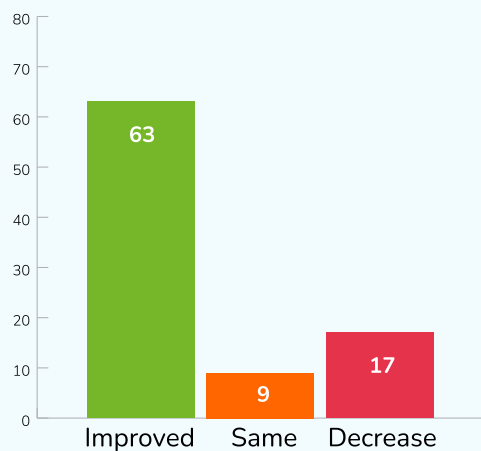


Outcomes

Figure 9 - Summary of SDQs outcomes for Phase 1

(N=478)

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

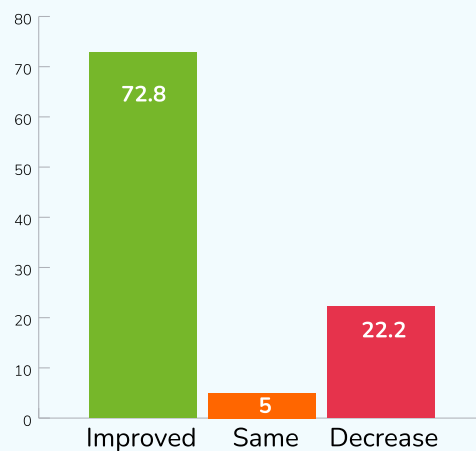


$t(427) = 13.53, p < 0.001, d = 0.65$

Figure 10 - Summary of CVQs for Phase 1

(N=478)

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



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

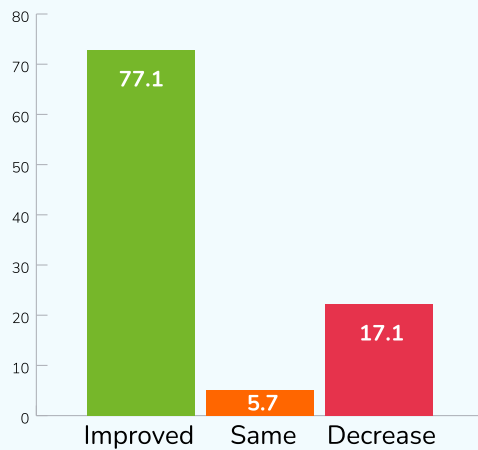


Actions, words and me

Helping children with conflict resolution

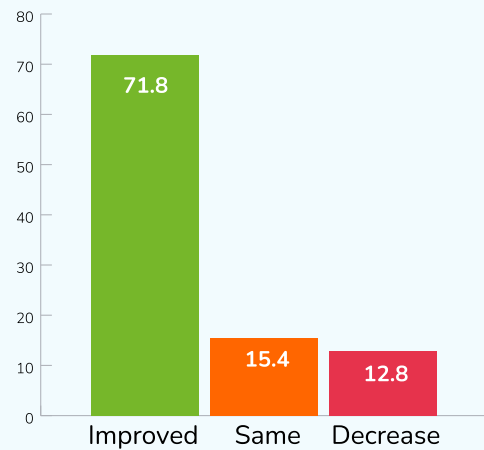
Actions, words and me Behaviour

(N=35)



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

Actions, words and me Protective Factors



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

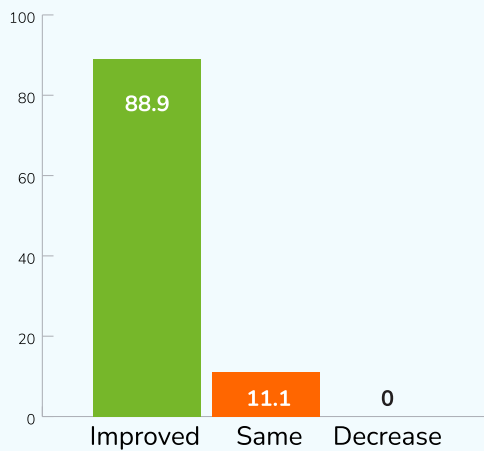


Celebrating me

Helping children with difference, diversity and inclusion

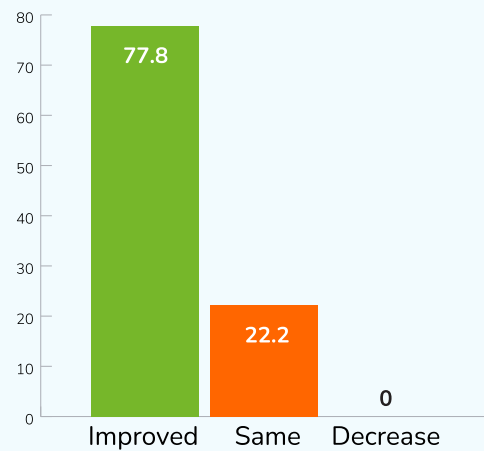
Celebrating me Behaviour

(N=9)



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

Celebrating me Protective Factors



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

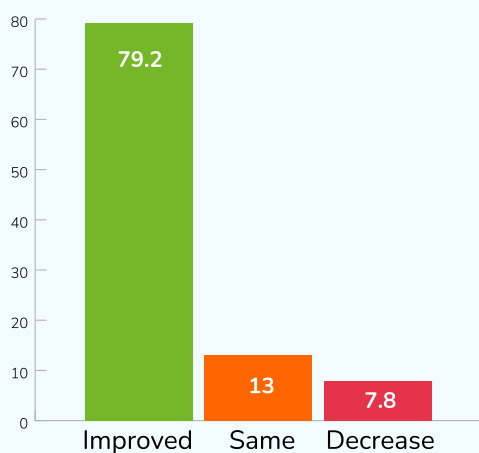


Resilient me

Helping children with resilience

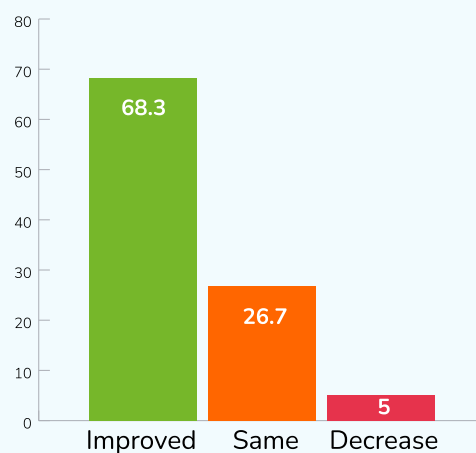
Resilient me Behaviour

(N=77)

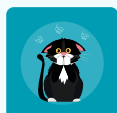


$t(76) = 8.1, p < 0.001, d = 0.92$

Resilient me Protective Factors



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

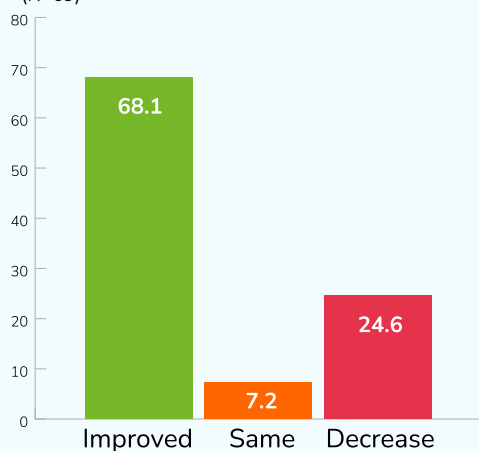


Calm me

Helping children with anxiety

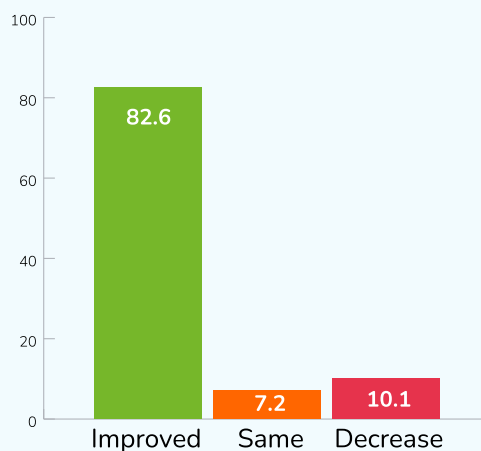
Calm me Behaviour

(N=69)



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

Calm me Protective Factors



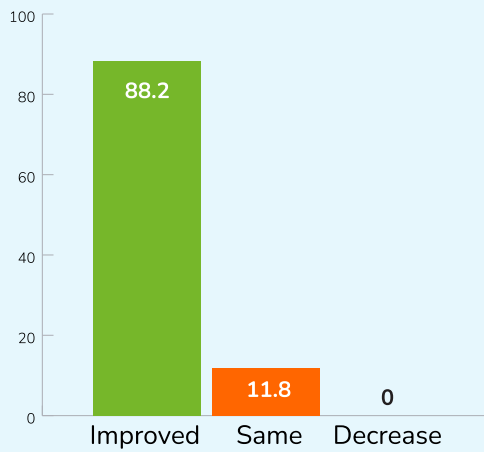
$t(68) = 7.4, p < 0.001, d = 0.89$



Finding me

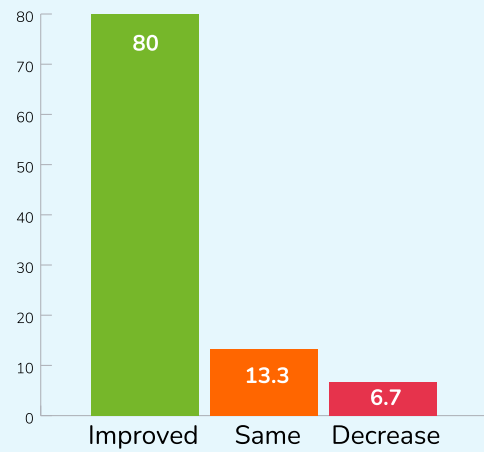
Helping children with sadness

**Finding me
Behaviour**
(N=17)



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

**Finding me
Protective Factors**



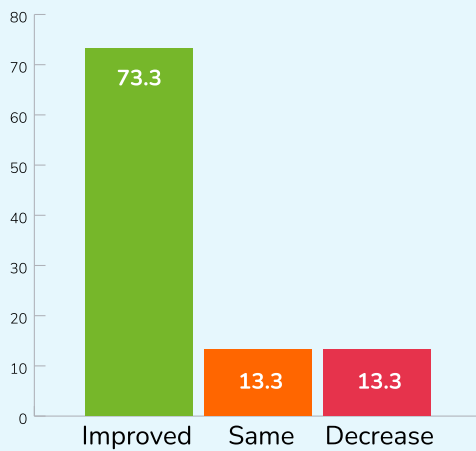
$t(14) = 3.5, p = 0.004, d = 0.89$



New beginnings and me

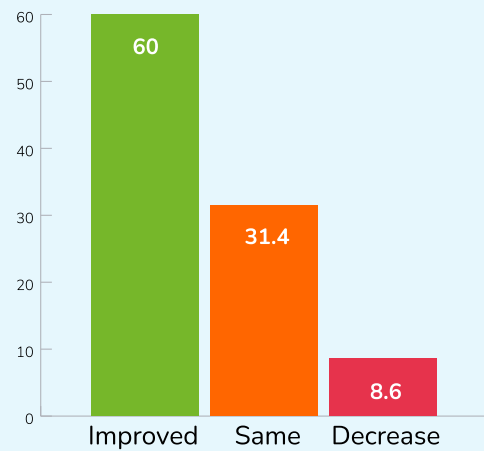
Helping children with change and transition

**New beginnings and me
Behaviour**
(N=45)



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

**New beginnings and me
Protective Factors**



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

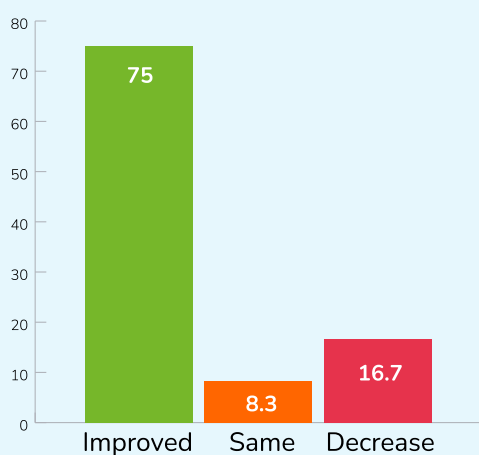


Memories and me

Helping children with loss, bereavement and grief

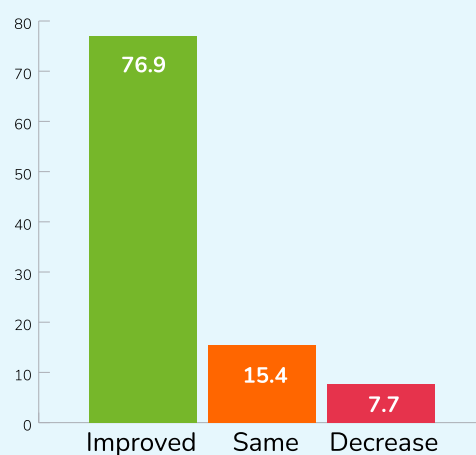
Memories and me Behaviour

(N=13)

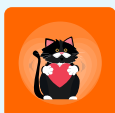


$t(11) = 3.1, p = 0.01, d = 0.90$

Memories and me Protective Factors



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

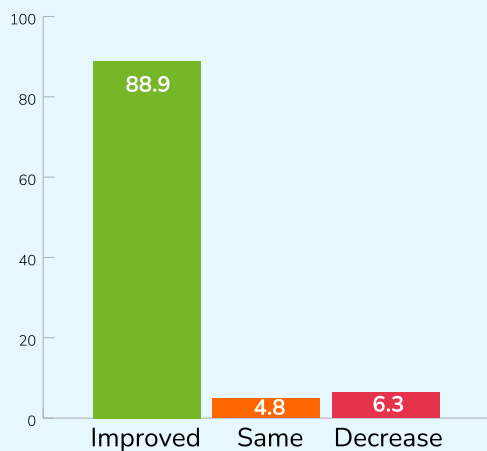


Amazing me

Helping children with their self-esteem and self-worth

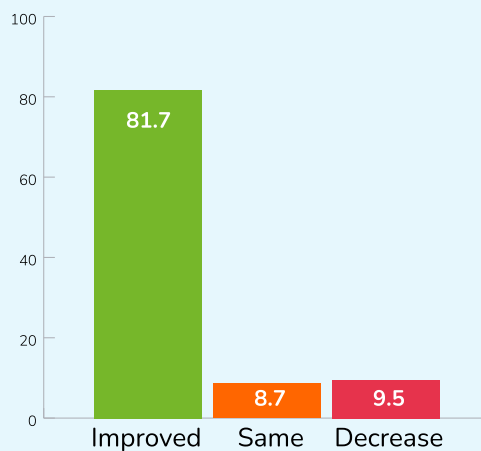
Amazing me Behaviour

(N=123)



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

Amazing me Protective Factors



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

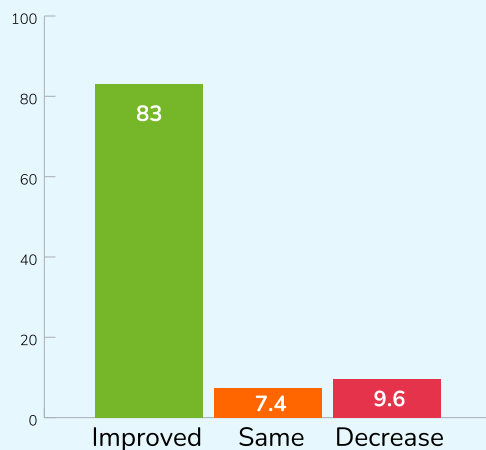


My friends and me

Helping children with friendships

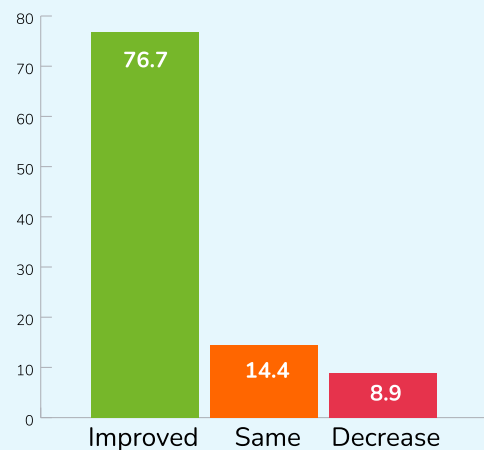
My friends and me Behaviour

(N=94)



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

My friends and me Protective Factors



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

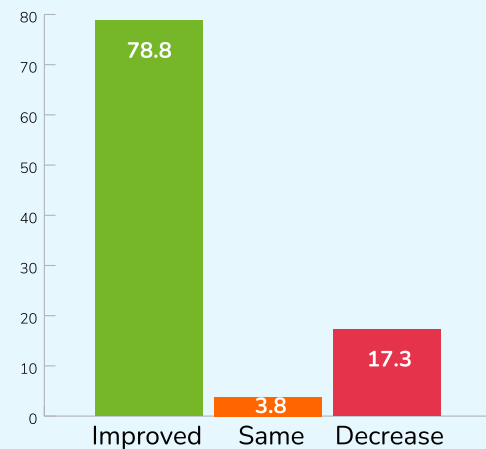


Exploding me

Helping children with strong and angry feelings

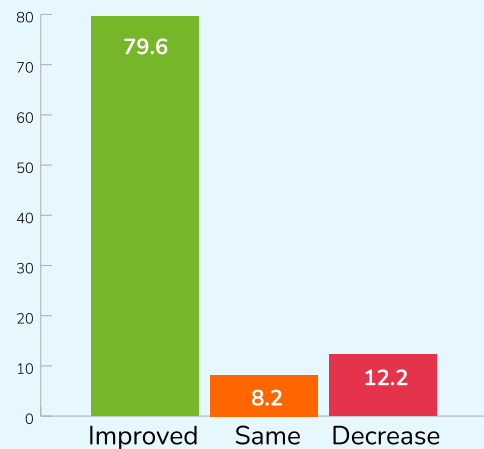
Exploding me Behaviour

(N=52)



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

Exploding me Protective Factors



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

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

Phase 2 (November 2023 - September 2024)

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 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 subscale 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.

Additionally, 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 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.



Research approach of Phase 2 of the study

Mixed methods research, employing both quantitative and qualitative data collection methods and analysis, can provide a more comprehensive and complete understanding of the multifaceted phenomenon and is predominantly employed to evaluate interventions and policies (Guetterman et al., 2020).

Advantages of mixed methods research include its provision of 'a more complete picture of the phenomenon under study than would be yielded by a single approach' (Denscombe, 2014 p.14); and its capability to increase the accuracy and reliability of data through triangulation, whilst also reducing bias in the research (Denscombe, 2014).

In two-phased mixed method research designs, strands of data collection and analysis are conducted separately from each other and the combination of quantitative and qualitative data occurs at the conclusion during interpretation stage so that the results of the qualitative data analysis build upon and inform the qualitative data analysis.

(Howitt & Cramer, 2008)

For the purposes of Phase 2 of this study, a quasi-experimental mixed-method research design (Teddle, 2009) was adopted and implemented in two distinct phases of data collection and analysis to: 1) ascertain whether the Hamish & Milo Programme is effective by collecting and analysing the results of teacher-reported pre- and post-intervention SDQs; and 2) 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.

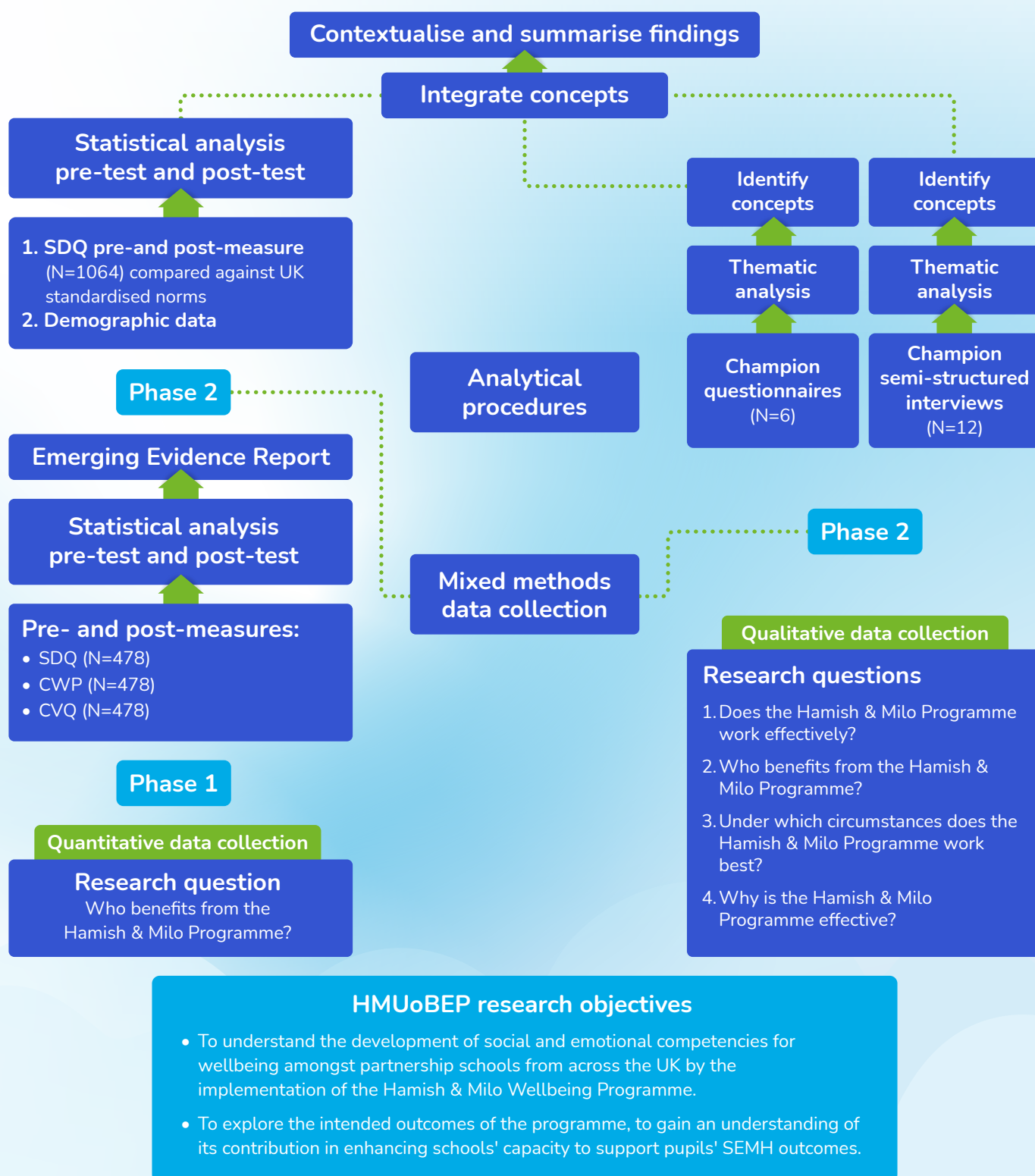
Thematic Analysis (TA) offers a structured and flexible means of extracting and analysing themes arising from a diverse set of data in mixed methods research and furthermore presents a theoretically flexible approach to interpreting complex data sets, allowing researchers to uncover rich and nuanced insights into the phenomena being investigated (Braun & Clarke, 2022).

Using Braun & Clarke's (2022) six-step approach to TA, a predominantly inductive TA approach was adopted for the purposes of this study wherein the perceptions and meanings of participants were emphasised through the use of open coding, yet a degree of deductive analysis was also employed to ensure that the codes generated contributed to producing themes that were meaningful to the research questions (Byrne, 2021).

A workflow of the data collection and analysis procedures employed are visually represented in Figure 11.



Figure 11 - Workflow of the quasi-experimental mixed methods data collection and analysis procedure for Phase 1 and Phase 2 of the HMUoBEP



Data collection

Measures

The 25-item Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997) is a reliable and valid screening instrument, designed to assess behaviours, emotions and relationships in CYP, that has been widely used in both research and practice (Stone, 2010). The SDQ is designed for researchers, clinicians, educators and parents to complete and measure five subscales: conduct problems; emotional symptoms; hyperactivity; peer problems; and prosocial behaviour.

Additionally, a Total Difficulties score can be generated by summing the scores of all scales except for the prosocial scale (Goodman, 1997). The SDQ fits the current paradigm in the assessment of psychosocial problems, wherein the measure includes competencies or strengths in addition to the assessment of problems (Rhee, 2001).

The SDQ is a commonly used measure which has been cited in both international and UK studies and there is evidence that the SDQ is reliable in detecting changes after participation in short interventions (Early Intervention Foundation, 2020). A systematic review concluded that the psychometric properties of the SDQ are robust, particularly for the teacher version, and implied that the use of the SDQ as a screening instrument should be continued (Stone, 2010).

Teachers rate the 25 items on a three-point Likert scale ranging (0 = Not true, 1 = Somewhat true, 2 = Certainly true). More significant emotional and behavioural difficulties are indicated by higher scores on the SDQ subscales, except for the prosocial subscale where higher scores indicate greater prosocial behaviour. Scores on the SDQ can be compared to norms to indicate the relative severity of symptoms and classify scores within the 'normal', 'borderline' or 'abnormal' range; the SDQ is not intended to diagnose but rather to screen for behaviours that could indicate clinical levels of symptoms in the present or risk for the future (Goodman A., 2010).

Semi-structured interview scripts (Appendix A) designed to capture experiences, perceptions and understanding were developed for Hamish & Milo Champions and senior leader interviews. This method of data collection afforded the researchers the utility of predetermined, yet flexible open-ended questions to explore and clarify points arising spontaneously from respondents during the interviews (Moser & Kalton, 1977). Additionally, anonymous, semi-structured and self-administered questionnaires (Appendix B) consisting of open-ended questions were designed and distributed to allow participants to write a free and unrestricted account of their responses, thereby generating valid, reliable and 'rich data' (Cohen et al., 2018, p.476) for further analysis. Data emerging from this additional source were utilised to triangulate data emerging from interviews, thereby allowing the researchers to cross-check findings and enhance the credibility and validity of the results obtained (Cresswell, 2017).

Participants

A probability sample comprising 1064 primary school pupils (52% males, N=553; 48% females, N=511) was drawn from the 71 schools participating in Phase 2 of the HMUoBEP.

The sample was comprised of randomly selected pupils who attended ten sessions of one of the Hamish & Milo emotion themes and who had complete SDQ measures for pre- and post-delivery of the programme.

Pupils ranged in age from 4 to 11 years. Further details of pupil's ages and situations appear on page 39.

Hamish & Milo Champions and school leaders from schools participating in the HMUoBEP were invited to participate in Phase 2 of the study by means of a research recruitment flyer emailed to each setting.

A purposive sample approach was chosen to achieve representativeness, to enable comparisons to be made, and to explore unique and collective issues through the gradual accumulation of data from different sources (Teddle & Yu, 2007).

Figure 12 - Pupil's ages

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)

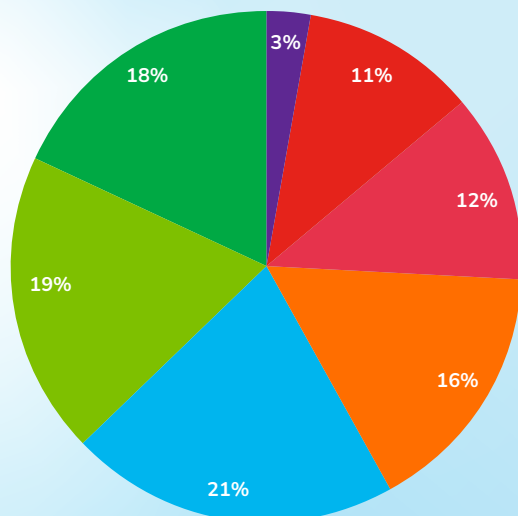
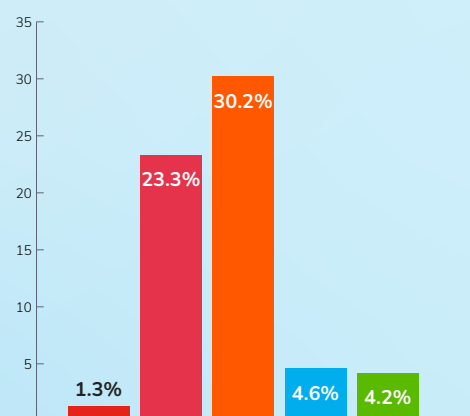


Figure 13 - Pupil's ages

Pupil's situation

(N=1064)



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

A purposive sample of 12 participants, representing 10 schools from across England volunteered to attend virtual semi-structured interviews and to submit written responses to questionnaires sent by email.

The primary inclusion criteria for participants prescribed that they had facilitated, whether individually or in a group, at least one of the Hamish & Milo emotion theme programmes.

School leaders who provided oversight of the purchasing, resourcing of staff, and assessment of the programme were also invited to attend the virtual semi-structured interviews alongside the Champion.

A range of primary school settings, including mainstream primary and specialist provision were represented by participants from across England holding a variety of professional pastoral care roles. In total, 10 Champions and 3 school leaders (N=12) were interviewed, and 6 Champions (N=6) completed questionnaires which were returned to the researchers by email. A summary of the participants, including characteristics of their pupil populations appears in Table 1 on page 40.



Table 1 - Semi-structured interview participants (N=12) with school pupil setting characteristics

Participant role	Setting type	Region	No. of pupils	School pupil population	Pupils engaged in Hamish & Milo Programmes
N=1 SENCO; DSL; SMHL; Pastoral; EAL Lead (Non-class based)	Primary School Nursery - Year 6 Ages 2 - 11	Northumberland North-East England	448	SEND 29%; EHCP 7%; PP 38% FSM 38%; LCDR 28%	62 Pupils; 16 Groups (14% of total pupils)
N=1 Assistant SENDCo; Wellbeing Lead	Junior School Year 3 - Year 6 Ages 7 - 11	Essex East England	266	SEND 2%; EHCP 5%; PP 14% FSM 14%; LCDR 21%	43 Pupils; 8 Groups (16% of total pupils)
N=1 Family Link Worker' Pastoral Support Lead	Primary School Nursery - Year 6 Ages 2 - 11	Bristol South-West England	427	SEND 14%; EHCP 1%; PP 16% FSM 16%; LCDR 15%	43 Pupils; 9 Groups (10% of total pupils)
N=1 Teaching Assistant	Primary School Nursery - Year 6 Ages 3 - 11	Birmingham West Midlands, England	457	SEND 8%; EHCP 6%; PP 47% FSM 53%; LCDR 38%	65 Pupils; 12 Groups (14% of total pupils)
N=1 Family Link Worker' Pastoral Support Worker	Junior School Year3 - Year 6 Ages 7 - 11	Bristol South-West England	240	SEND 17%; EHCP 0.4%; PP 22%; FSM 21%; LCDR 22%	83 Pupils; 16 Groups (35% of total pupils)
N=2 Family Link Worker; Pastoral Support; Deputy DSL	Primary School Nursery - Year 6 Ages 3 - 11	Bristol South-West England	157	SEND 2%; EHCP 0.6%; PP 47% FSM 47%; LCDR 15%	45 Pupils; 19 Groups (29% of total pupils)
N=2 Headteacher; ELSA; Pastoral Support	Primary School Year R - Year 6 Ages 4 - 11	Southampton South-East England	646	SEND 27%; EHCP 4%; PP 35% FSM 34%; LCDR 25%	190 Pupils; 38 Groups (29% of total pupils)
N=1 Pastoral Support Worker	Primary School Year R - Year 6 Ages 4 - 11	Medway South-East England	389	SEND 8%; EHCP 6%; PP 42% FSM 42%; LCDR 31%	70 Pupils; 17 Groups (18% of total pupils)
N=1 ELSA	Primary School Year 3 - Year 6 Ages 7 - 11	Southampton South-East England	355	SEND 4%; EHCP 3%; PP 34% FSM 32%; LCDR 36%; EAL 30%	233 Pupils; 47 Groups (66% of total pupils)
N=1 School Counsellor; ELSA	Primary School Nursery - Year 6 Ages 3 - 11	Redbridge Greater London	855	SEND 9%; EHCP 2%; PP 16%;FSM 18%; Lcdr 32%; EAL 69%	24 Pupils; 7 Groups (3% of total pupils)

Procedures

Leaders of schools who had previously purchased the full Hamish & Milo Programme were invited to participate in the HMUoBEP.

School leaders who consented to participate in the projects subsequently attended a short online briefing session (Hamish & Milo Discovery Training), where they received information regarding the project to share with their pastoral and/or mental health teams. School leaders designated one or more staff members to act as Hamish & Milo Champions to assist with the project and to facilitate the Hamish & Milo Programme within their schools.

Designated Hamish & Milo Champions attended a 90-minute comprehensive online training session (Hamish & Milo Explorer Training) which explained the objectives and expectations of the project; the theoretical basis of the Hamish & Milo approach; safeguarding; the implementation and method of delivery of the programme for individual pupils and small groups of pupils; and data collection and impact assessment methods.

Pupils were selected to participate in the Hamish & Milo Programme based on individual needs and according to the referral processes already established within each school for identifying pupils requiring SEL or SEMHD support.

Parent/carers information leaflets and consent forms were supplied to schools for distribution to the pupils selected for participation. Following training, the designated Hamish & Milo Champions delivered ten sessions of a selected Hamish & Milo emotion theme programme to pupils across a school term.

Programme delivery integrity was maintained in a number of ways:

- ✓ Hamish & Milo Champions referred to a detailed manual and followed fully scripted and detailed session plans, specific to the Hamish & Milo emotion theme chosen for the intervention, to guide them in the programme delivery.
- ✓ Hamish & Milo Champions were given additional training for data collection enabling them to anonymise and input pre- and post-intervention data using a secure online platform, Hamish & Milo Navigator.
- ✓ Hamish & Milo Champions were invited to attend twice-termly collaborative supervision sessions facilitated by a qualified Hamish & Milo Consultant to support the delivery of the programme.

For the purposes of this study, a within-subject repeated measures design was adopted with SDQs, Hamish & Milo Child Wellbeing Profiles and Child's Voice Questionnaires being completed in relation to each pupil by class teachers or Hamish & Milo Champions pre- and post-programme participation.

Primary data were collected by two researchers through pre-arranged, online interviews with Hamish & Milo Champions in virtual sessions utilising the Zoom Workplace® digital platform. The interview schedule consisted of eleven open-ended questions (see Appendix A) allowing each participant the opportunity to express their subjective perceptions and understanding of aspects of their experiences spontaneously and freely (Moser & Kalton, 1977).

Interviews were conducted between May and June 2024 with each session lasting approximately 60 minutes. Consent was obtained from each participant for interviews to be video recorded using Zoom Workplace® software. Transcripts of interview recordings were subsequently transcribed as Microsoft Word documents using [TurboScribe software](#). Video recordings and transcripts of interviews were stored securely in digital format until data analysis was completed, whereafter all files were deleted.

Ethical considerations

The HMUoBEP was carried out in accordance with the ethical guidelines set out by the British Educational Research Association (BERA), (2024), and in adherence to the principles as set out by the University of Bath in their Code of Ethics and Practice (University of Bath, 2021).

Informed consent for pupil participation in the project was gathered from school leaders, acting as gatekeepers in the first instance, who assumed responsibility for the collection of parent and pupil consent according to their individual settings policies, procedures and practices. Confidentiality and the protection of privacy of pupil participant data was maintained by the code assigned during all data submission at the school level, thereby ensuring anonymisation through the removal of any identifiable information pertaining to participants.

Voluntary interview participants were sent a brief description outlining the purpose and objectives of the study by email. Participants were notified of their rights, including the right to withdraw from the study at any time until the point of data reporting. Written informed consent was obtained by participants by email prior to the date of the interview.

Confidentiality was maintained by the anonymisation of all participant data and in compliance with the General Data Protection Act 2018, all raw data collected in the form of transcripts, research notes, etc., were stored securely for the duration of the study.

Analysis

Quantitative data analysis

Phase 2 of the HMUoBEP used data collected from primary school pupils (N=1064) across pre- and post-intervention data using the SDQ as the pupil outcome measure. Using the full SDQ measure and for each of its five core subscales, the mean difference in pre-post intervention scores was calculated for the full sample (N=1064) and subsequently compared with standardised SDQ UK norm scores using paired sample t-tests based on n-1 degrees of freedom.

Effect sizes were calculated as Cohen's d values, given the equal size of the pre- and post-samples, and were interpreted in line with Cohen's (Cohen, 1960) criteria: (i.e. small ≥ 0.2 , medium ≥ 0.5 , and a large effect ≥ 0.8). Effect sizes and confidence intervals (95%) were calculated via online calculators using the mean scores and standard deviations from the pre-and post-intervention SDQ sample scores.

Qualitative data analysis

Utilising Braun & Clarke's (2022) approach, a recursive six-step process of thematic analysis (TA) was undertaken to recognise and observe patterns strongly linked to the data and to apprehend repeated patterns of meaning across both qualitative data sets.

Following data familiarisation, the TA of the questionnaire data was conducted using the ATLAS.ti qualitative analysis software programme and through the adoption of an in vivo coding approach, utilising the direct language of the participants in the generation of open codes which honoured their 'voices' and grounded the analysis in their perspectives (Saldana, 2016).

Progressing from the first cycle through to the second cycle of coding, initial themes were generated from thematic patterns emerging from the data, and after a process of refinement were recorded in the form of thematic maps to bring meaning, structure and order to the data in alignment with the research questions and objectives (Anfara, 2014). The processes of first and second-cycle coding were repeated for the semi-structured interview data.

Thereafter, simple summary tables were created to array primary data and develop initial assertions to explore possible dimensions which might be found in the range of themes (Miles et al., 2014).

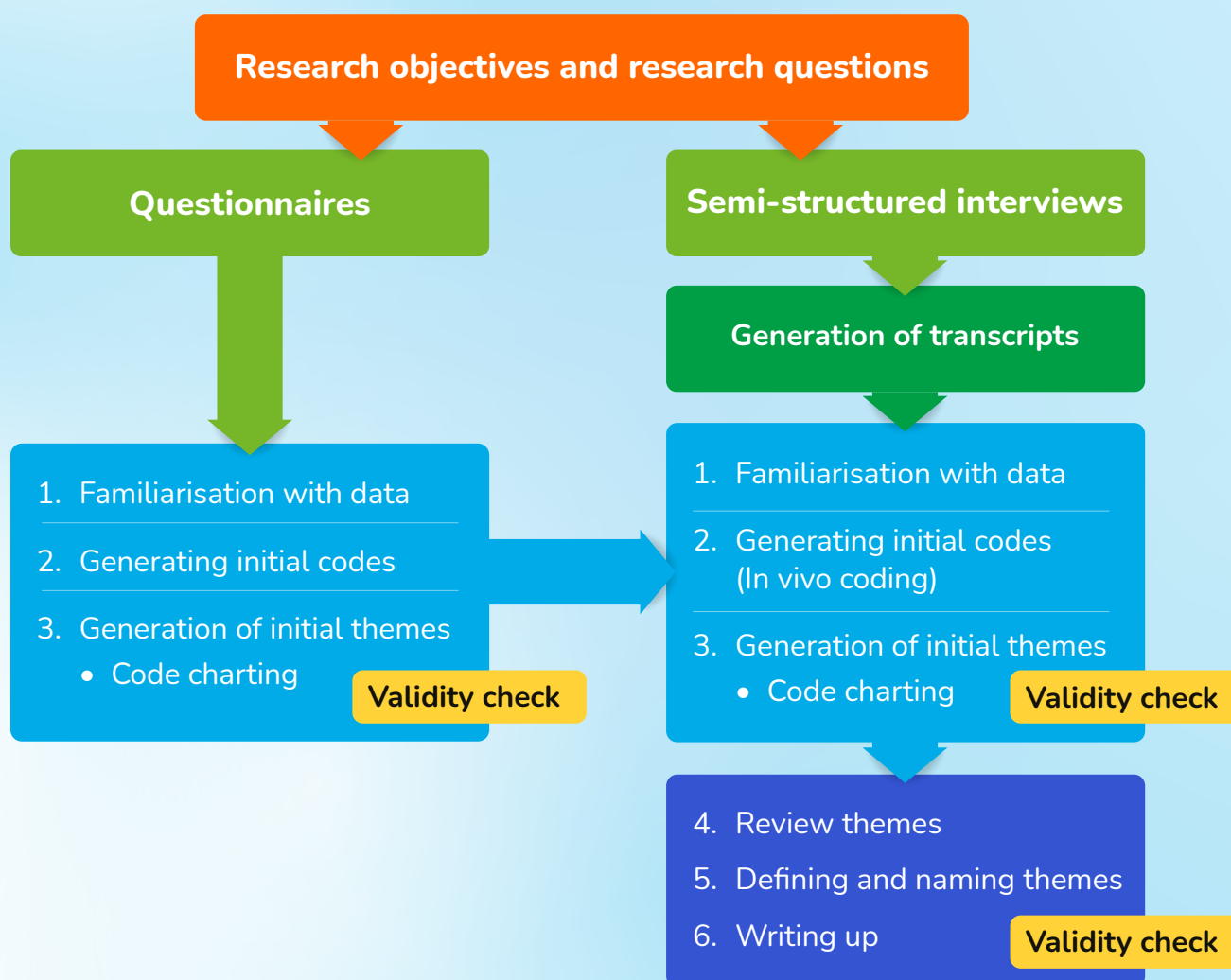
After comparing, combining, dividing and eliminating themes from each data set using a code charting technique (Harding & Whitehead, 2013), a single thematic map was produced. At this stage, validity checks were conducted to review the coded data extracts for each theme in consideration of the formation of a coherent pattern and to determine whether the themes accurately reflected the meanings evident in the data set as a whole (Braun & Clarke, 2022).

To minimise the risk of researcher bias and for the purpose of clarifying the themes and sub-themes, a second researcher checked and assisted in refining the thematic map.

Following the review process during which some themes were split, combined and discarded, the final themes and sub-themes were defined and named according to the essence of what each represented about the data and their significance in relation to the research questions (Braun & Clarke, 2022).

The workflow of the Braun & Clarke (2022) model of TA utilised in this study is depicted in the figure below.

Figure 14 - Workflow of the Braun & Clarke (2022) model of Thematic Analysis of qualitative data sets



Findings

Quantitative findings

Quantitative data analysis of a probability sample consisting of 1064 pupils was conducted in Phase 2, comparing SDQ outcomes 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.

Generally, a negative pre-post change in the distribution of children scoring within the 'abnormal' and 'borderline' score ranges represents a reduction in the behavioural/emotional difficulties scored in each subscale. This was the case across all six scales and subscales, with a pre-post increase in the proportion of children scoring within the 'normal' range, supporting the effectiveness of the programme.

Notably, the largest shift in distribution was within the Emotional Problems subscales, with a 24.7% pre-post reduction of children scoring within the 'abnormal' range. However, increases were found for children in both the 'borderline' and 'normal' ranges, suggesting a more mixed response to the Hamish & Milo Programme in terms of children feeling more confident in their emotional literacy skills.

Table 2 - SDQ subscale range scores pre- and post-completion of the Hamish & Milo Programme

SDQ subscale		% of students within score range (Total=100)		
		Abnormal	Borderline	Normal
Total Difficulties	Pre-intervention	48.9	20.7	30.5
	Post-intervention	25.9	19.5	54.6
	Pre-post change (%)	-23.0	-1.2	24.1
Emotional Problems	Pre-intervention	42.0	12.9	45.1
	Post-intervention	17.3	15.2	67.5
	Pre-post change (%)	-24.7	2.3	22.4
Conduct Problems	Pre-intervention	29.2	10.8	60.0
	Post-intervention	21.0	8.6	70.5
	Pre-post change (%)	-8.2	-2.2	10.5
Hyperactivity	Pre-intervention	36.6	10.6	52.8
	Post-intervention	25.5	6.5	68.0
	Pre-post change (%)	-11.1	-4.1	15.2
Peer Problems	Pre-intervention	23.9	13.7	62.4
	Post-intervention	12.9	10.5	76.6
	Pre-post change (%)	-11.0	-3.2	14.2
Prosocial	Pre-intervention	25.8	17.1	57.1
	Post-intervention	14.9	11.6	73.5
	Pre-post change (%)	-10.9	-5.5	16.4

Note: SDQ = The Strengths and Difficulties Questionnaire; Number of students completing all measures (N) = 1064. Prosocial scale reverse-scored for consistency alongside other measures.

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

16.4%
increase for
Prosocial SDQ
Subscale 'Normal'
sample

Paired sample t-testing (Table 3) also demonstrated pre-post improvements in all six SDQ measures completed by the full purposive sample of pupils in comparison to UK national statistical norms for SDQ to determine how outcomes of pupils who participated in the Hamish & Milo Programme compared or contrasted to standardised normative scores of children across the UK. In addition to distribution data for the score ranges, increases in mean subscale scores represented by positive mean differences indicate a pre-post intervention increase in students' emotional and social wellbeing.

Positive mean differences were reported for all six measures, with the greatest difference found for the full scale (N=1064, mean difference = 0.47, 95%CI [0.41, 0.54], $p < .05$).

Strong standardised effect sizes were also found for four of the five subscales ($d > .08$) (Cohen, 1960), with the strongest effects found in the 'Emotional Problems' and 'Hyperactivity' subscales ($d = 1.22$ and 1.34 respectively). This was similarly true for the full SDQ scale ($d = 1.08$), supporting the overall effectiveness of the Hamish & Milo Programme. However, the analysis of scores for the prosocial subscale reported a small-moderate effect ($0.3 < d < 0.5$), suggesting that the Hamish & Milo Programme had a greater impact in supporting children's emotional wellbeing than teaching prosocial behaviours. The positive mean differences across all six measures were similarly statistically significant ($p < 0.05$).

Table 3 - Pre- and post-Hamish & Milo Programme intervention descriptive statistics (N=1064 completions) and paired sample t-test results with (standardised) Cohen's D - Effect Sizes

SDQ Subscale				95% CI			95% CI	
	Mean difference	Standard deviation	Standard error of mean	Lower	Upper	d	Lower	Upper
Total Difficulties	0.47	1.08	0.03	0.41	0.54	1.08*	0.37	0.50
Emotional Problems	0.47	1.22	0.04	0.40	0.54	1.22*	0.32	0.45
Conduct Problems	0.19	1.05	0.02	0.13	0.25	1.05*	0.12	0.24
Hyperactivity	0.26	1.23	0.04	0.19	0.34	1.23*	0.15	0.27
Peer Problems	0.25	0.97	0.03	0.19	0.31	0.97*	0.20	0.32
Prosocial*	0.27	0.45	0.01	0.25	0.30	0.45*	0.55	0.68

Note: SDQ = The Strengths and Difficulties Questionnaire; number of students completing all measures (N) = 1064.; * = p (one and two-sided)

< 0.01 and 95% Confidence Intervals (CIs) do not cross zero; d = standardised effect; 95% CI for d calculated using the standard deviation for Cohen's d (Cohen, 1960).

*An increase in prosocial subscale indicates greater prosocial behaviour

d-number

This statistic states the 'effect size' - the size of the difference in mean scores between the pre- and post-intervention outcome measure scores (SDQ). An effect size of 0.2 = small effect; 0.5 = moderate effect; 0.8 = large effect. The greater the d statistic, the larger the effect (difference between pre- and post-scores)



Qualitative findings

Four main themes and twelve sub-themes were identified through the process of TA in relation to the full qualitative dataset (see Figure 15). This section will present the sub-themes as they relate to the main themes in response to the research questions.

Figure 15 - Refined Thematic Map for Effectiveness of the Hamish & Milo Programme

Identifying information, including the names and locations of schools and names of participants, has been anonymised using indirect identifiers (e.g. PS1) following data collection to protect privacy.

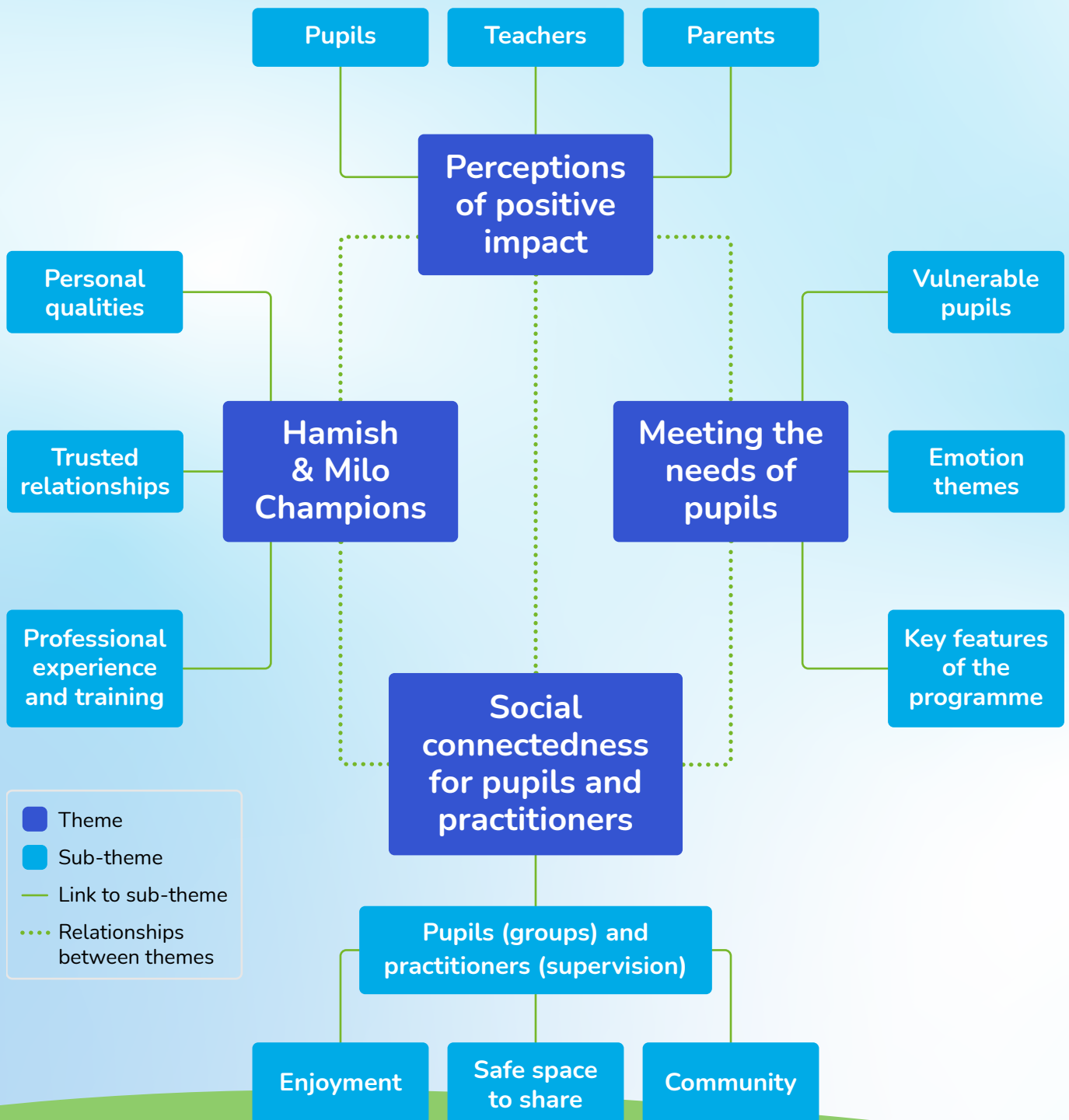


Table 4 - Themes and sub-themes for the effectiveness of the Hamish & Milo Programme identified through thematic analysis represented in tabular form

Themes	Sub-themes
1. Perceptions of positive impact	1.1. Pupils 1.2. Teachers 1.3. Parents
2. Meeting the needs of pupils	2.1. Vulnerable pupils 2.2. Hamish & Milo emotion themes 2.3. Key features of the Hamish & Milo Programme
3. Social connectedness for pupils and practitioners	3.1. Enjoyment 3.2. Safe space to share 3.3. Community
4. Hamish & Milo Champions	4.1. Personal qualities 4.2. Trusted relationships 4.3. Professional experience and training

Theme 1. Perceptions of positive impact

Table 5 - Characteristics of sub-themes for the theme 'Perceptions of positive impact'

Themes	Sub-themes
1. Perceptions of positive impact	1.1. Pupils <ul style="list-style-type: none"> ✓ "Found their voice" <ul style="list-style-type: none"> • Self-confidence; Self-belief; Social confidence; Communication ✓ Improved SEL competencies <ul style="list-style-type: none"> • Self-awareness; Self-regulation; Resilience; Empathy; Social skills ✓ Improved wellbeing <ul style="list-style-type: none"> • Happier; Calmer; Belonging; Validation; Friendships; Shared experiences
	1.2. Teachers <ul style="list-style-type: none"> ✓ Identifying needs; Well-placed to notice improvements ✓ Observed positive changes in pupils <ul style="list-style-type: none"> • Increased confidence; Optimist; Improved self-regulation; Classroom and learning engagement ✓ Whole school impact <ul style="list-style-type: none"> • Increased engagement of teachers with SEMH support; Better understanding of root causes of difficulties
	1.3. Parents <ul style="list-style-type: none"> ✓ Trusted relationships established between school and families <ul style="list-style-type: none"> • Confidence in requesting support; Communication • Children's enjoyment and enthusiasm for Hamish & Milo valued by parents; Positive towards programme ✓ Children sharing Hamish & Milo experiences and strategies in the home <ul style="list-style-type: none"> • Using strategies successfully at home; Deepening of relationships between home and school

Sub-theme 1: Pupils

From the perspective of interview participants, the children who have taken part in the Hamish & Milo Programme experienced significant improvements in their self-esteem.

These positive changes in the perception of their value and self-worth have resulted in these children becoming more confident in expressing their thoughts, feelings and experiences, and in their ability to relate to others socially. Participants articulated that the increased confidence observed in the children was a direct result of their engagement in the Hamish & Milo Programme they attended because it facilitated the establishment of meaningful connections between the practitioners leading the groups and the children, and the group of children as a whole.

Interview Participant PS1: “They’ve got a voice! They have got the confidence and the freedom to speak; they are enabled to express deeper feelings; they are making connections with their peers [and] myself.”

Interview Participant PS1: “What Hamish & Milo has done for children is that it has empowered them with confidence and created these memories with myself and their peers together... and it’s a long-term sense of connection that’s been built between us with the fond memories that we’ve created through this intervention. And I don’t think they’ll ever otherwise would have experienced any of this if it hadn’t been for Hamish & Milo.”

Interview participants reflected that the children attending Hamish & Milo sessions in groups developed greater confidence through interactions with their peers and through the acknowledgement of shared experiences. Group interactions and the sharing of experiences between the children created a sense of belonging and validation among them.

Children that felt accepted and understood gained a better understanding of themselves, so could reason about what they knew from their own experiences. There was a recognition of the similitude of experience amongst the children in the group, and this enabled them to find and share solutions with each other.

Interview Participant PS1: “So, it is not just them having the voice. They are actually seeing their peers around them [and] are able to [notice that] actually, they are having a similar problem to me. [They say], ‘I didn’t realise other children are having the same problems as me and it’s not just me having that problem.’ They are seeing and I have seen, obviously, a noticeable change in their social and emotional behaviour.”

Interview Participant PS4: “You have whole groups of children understanding their emotions in a way that perhaps you would only have the odd child before, really. I think from running the groups, the biggest impact I find is the impact from the other children - when they recognise that other people feel the same way [as they do]. I think they gain more from that than an adult telling them [because] they realise [that] they are not alone - and that has had a massive impact! [There is] always one child [saying], ‘...actually, I think I know how you feel - I think I know what to do.’”

The children’s confidence continued to grow through subsequent sessions alongside the deepening of the connections made between them.

Interview Participant PS8: “[Children are now] listening to others [and the children] that would not usually speak to because they are in different groups or different classes [are now] able to have positive interactions with other people... that is the main [difference].”

Interview Participant PS9: “...seeing the children within the group, how they interact with each other, and kind of going through that, and seeing just sort of change from the beginning when the first started to when they finished... certain particular individual children, you have seen their confidence grow through those sessions.”

Interview participants related instances of individual children who attended Hamish & Milo groups and were experiencing low confidence, due to a range of circumstances. In each case, through participation in the groups, and in a relatively short space of time, the children developed increased levels of belief in themselves and in their abilities which allowed them to become more comfortable socially.

Interview Participant PS9: “[I am] thinking about one particular child who has got quite complex needs. [He] is a real shy little boy - quite emotional, extremely sensitive. He has developed this newfound kind of pride in himself and in the work that he’s producing, and he’s got that confidence to actually say to not just his peers, but adults, ‘Look, this is what I’ve done, this is something that I’ve produced [and] I’m really proud of it!’ Whereas beforehand, he would never, ever have done that. So it has been nice to see individual children flourish within a short space of time of accessing support.”

Interview Participant PS1: “I had six children [in a] mixed [Hamish & Milo group] and there one girl, Girl S, [who] has become more shy in recent months. This is the pre[-intervention] comments by the teacher: ‘[Child S] tends not to interact with others due to multiple friendship fallouts; [she] has lost a lot of confidence and does not back herself to complete tasks.’ The teacher’s comments after the intervention: ‘Child S’s social relationships with peers have improved since the intervention and [she] has maintained friendships with no fallout since.’”

Interview Participant PS1: “Now, this is what the teacher wrote: ‘Girl L showed [a] lack of confidence when starting Year 3. She does not believe in herself and needs a lot of praise, especially in maths.’ And then post-[intervention] comments from the teacher: ‘Girl L has made great strides in all her emotional, educational and social development.’”

An interview participant recounted an insight shared by a child during a Hamish & Milo group session, describing the significance of the child having the confidence to articulate their desires and needs clearly.

Interview Participant PS7: “...a lot of them were, ‘Well, if I’m being asked to play, I should be saying yes’. The one child within that group turned around and she said, ‘Well, I was watching TV and my sister wanted me to go and play a game and I told her no’. And it’s like, well, that’s OK - It’s alright to say no. And it’s kind of building that confidence of it’s a good thing to say no as well, whereas a lot of them, the majority of them just go into that natural instinct of I need to make others happy. So I need to say yes.”

Interview participants noted that children who attended Hamish & Milo sessions were more confident in recognising and articulating their concerns to adults in school and were more able to request support with the issues that they were struggling with, trusting that the support would be available to them.

Interview Participant PS9: “...definitely, the confidence in the children to be able to recognise when they are struggling and knowing people that they can go to, to kind of support them. We have found that the children that have been in Hamish & Milo are more likely to come forward and share their worries that they’ve got about things, whereas previously they might not have had the confidence to go to their class teacher or the class TA.”

Interview Participant PS9: “The children that have been in Hamish & Milo have definitely found their voice and have got that increased confidence to be able to go to their key person or their trusted member of staff to be able to say, you know, I’m worried about this or this has happened, or I need some help to support me through this.”

Interview participants described how the connections made between the children during Hamish & Milo group sessions developed into steadfast friendships, regardless of age differences and perhaps as a consequence of attending groups composed of mixed-aged children, with these friendships continuing to flourish outside of the group and in the context of the playground.

Interview Participant PS9: “I think the biggest thing we have seen is the confidence in the children. I have touched on it before about those children making those new friendships and new bonds with other children across the school.”

Interview Participant PS7: “There [are] a couple of children that have been in my group that are [a mix of] Year 5 and Year 6 [children, who have] actually started to buddy up a lot more. They are going out to play [and] they are keeping that friendship [they made in the Hamish & Milo group] on the playground as well. So, it’s not just in the safe environment of the room, [but] they are then carrying that [outside] and they’re able to do that [there].”

Interview participants confirmed that after attending a Hamish & Milo Programme, children had developed a range of social and emotional literacy competencies, including increased self-awareness, self-regulation, resilience, empathy and social skills.

Interview Participant PS9: “The [children] that have been through the [Hamish & Milo] programme understand and recognise their own emotions and feelings... they are more equipped to strategise and decide ‘this is how I’m feeling, this is how I can support myself’. They have the tools to be able to do that [and] they wouldn’t have had beforehand.”

Interview Participant PS4: “I think the biggest thing for me that I have noticed is the number of children that [Hamish & Milo] is impacting positively on in terms of their emotional literacy.”

Interview Participant PS1: “... [I did] ‘Memories and me’ as a one-to-one intervention with a Year 6 boy. His [teacher commented pre-intervention] was he fails to follow reasonable instructions, and he cannot stop laughing and smiling when adults tell him what he is doing is wrong. I believe that that could be a nervous reaction as well, but that is just my opinion. [The teacher’s post-intervention] comments [show that] he is now able to identify the cause of his emotions and come up with possible solutions. A trail of empathy is now becoming visible through his interactions with peers.”

An interview participant gave an account of a child whose resilience had improved through attending a Hamish & Milo Programme and the friendships she had established within the group. The connections made, including the relationship established between the practitioner and the child, and her increased confidence, positively affected her attendance at school.

Interview Participant PS6: “We’ve not done anything else resilience-wise with her because [Hamish & Milo Programme] was enough for her. And I would say her attendance has improved slightly. She is enjoying coming to school because she has those friendships. She feels connected. She has got special safe adults in school, and she can articulate how she’s feeling now, whereas she wouldn’t before - she didn’t have the vocabulary to do that.”

Interview Participant PS1: “...they are actually beginning to learn to empathise and to be compassionate towards others; and they are listening to peers talking about how they feel personally and their personal experiences.”

The effectiveness of the Hamish & Milo Programme in supporting children's social and emotional literacy competencies has facilitated increased communication, resulting in better understanding of the root causes of the children's difficulties for school staff and for their parents, thereby affecting attendance positively.

Interview Participant PS6: "We did have a lot of children that find it difficult to come in and those Hamish & Milo strategies have helped with that. [The] calming strategies and understanding [of] emotional literacy around what they're feeling [and their ability] to communicate that [has] helped an awful lot - with us and with their parents - to help them understand what's going on and why they're feeling the way that they're feeling."

An interview participant, who is a senior leader of a primary school, expressed her belief that improved SEL competencies observed in the children who had participated in the Hamish & Milo Programme reduced instances of dysregulated behaviours and thus prevented probable exclusions.

Interview Participant PS6: "I do wonder whether [that] if we did not have Hamish & Milo, whether the number of exclusions or suspensions I would have had to dish out would have been increased, and I think it would! It is a general feeling - a sense - that their behaviour would have just escalated and gone out of control, and they wouldn't necessarily have built relationships with me and [the Hamish & Milo Practitioner] to feel comfortable and trusting to be able to come to us. Quite often it is just a hug [they need, and it is just that connection that they want.]"

Interview participants described specific examples of individual children who had experienced improvements in their wellbeing and who were thriving after participating in the Hamish & Milo Programme.

Participants also shared changes that the children experienced themselves, including feeling calmer and happier, captured in Child's Voice Questionnaires that the children completed pre- and post-intervention. Some of the positive changes were observed after the children completed 10 sessions over the course of one term.

Interview Participant PS5: "[The children are] more settled - more settled in class [and] more able to cope with life... One boy stands out [for] me...it was really upsetting [because] he just basically hated himself, he thought [he] was a failure, and his life was over. He is a primary school child and [he thought] his life was over! And then watching him grow and become happy. He had very bad mental health, really poor mental health...[and] was at risk of exclusion. [Now he] is a success story!"

Interview Participant PS1: "I would like to share some of the experiences with you, using direct quotes from the children's [pre- and post-intervention] questionnaires. Boy C: 'My favourite part was making the sock puppet and doing the miniature garden. What I learned about myself is that I have got new talents.' At the start, he said he felt calm and sad [and] post-intervention, he felt calm and happy. Boy J: 'Something I wanted help with is making new friends. What I liked about being in the group is everyone was treated equally and given the same help. What I learned about myself is sometimes I might feel weak on the inside, but I show that I can be strong on the outside.' At the start, he felt happy and angry and then post-intervention, he felt happy and calm."

Interview Participant PS9: "...it has been nice to see individual children flourish within a short space of time of accessing this kind of the support that we have had."

Sub-theme 1.2: Teachers

Responses from interview participants suggests that class teachers are frequently responsible for flagging potential concerns about individual children within their classes, and additionally often refer children for targeted SEMH support to the pastoral or safeguarding teams within the school following discussions.

Interview Participant PS1: “[We] either have teachers requesting the SEMH support -and sometimes they themselves will know exactly what the children need - or they will come to me, the teachers, and say, look, this is what’s happening with some of the children in our year group, is there any support we can give them?”

Interview Participant PS7: “We are using any highlights that we notice from our inclusion team that are put forward, any concerns that are raised by teachers, and any concerns that are raised by parents as well. So, we are getting a lot of the teacher voice, [and] the parent voice and how we can support those in that way as well on top of that.”

Respondents in this study confirmed that teachers who referred children for Hamish & Milo interventions were also most likely to have completed the CWP and SDQ impact measures pre- and post-intervention, and therefore would be well placed to comment on both the short-term and longer-term effectiveness of the programme.

Questionnaire Participant 6: “[Teachers] have to complete the post questionnaire, [and] they have commented on the reduced dysregulation they have seen in class and on the playground.”

Questionnaire Participant 6: “In general the children responded extremely well to the programme with a noticeable difference [reported] by class teachers. There were very few children that needed additional support either from other programmes or outside agencies since completing a [Hamish & Milo] programme.”

Questionnaire respondents described how the class teachers of children engaging in the Hamish & Milo Programmes generally observed and communicated positive changes for pupils, including increased confidence and optimism, along with improved emotional literacy competencies such as self-regulation.

The improvements reported by teachers positively impacted classroom engagement and learning, as well as attendance.

Questionnaire Participant 2: “Teachers have seen the benefits of Hamish & Milo and commented on the confidence it has given the child.”

Interview Participant PS1: “...the teacher wrote [that], ‘Girl L showed lack of confidence when starting Year 3 [and that] she does not believe in herself and needs a lot of praise, especially in maths.’ Then, post[-intervention] comments from the teacher [said] that, ‘Child L has made great strides in all her emotional, educational and social development; she has become a lot more confident holistically, and I am grateful that this intervention took place for Child L.’”

Questionnaire Participant 1: “Teachers often mentioned that they have seen a change in the child - whether that is the child being more focused with their learning; whether they have been more confident, able to self-regulate, they have a more positive outlook, or they’ve built self-esteem; or they’re just simply focused [on] their learning. This is either stated as part of the teacher’s comments during or during conversation around the child.”

Interview Participant PS1: “I feel that Hamish & Milo was the catalyst in improving his overall attendance. It was something he began to look forward to... He would often tell me at the start of the session which number session we were having, and he was attending school daily. And I noticed he did not miss the Hamish & Milo days on a Friday, which was one of the trigger days... So that was something that I’d noticed, and from there, teachers often mentioned that they’ve seen a change in the child.”

Interview participants and respondents reflected that many teachers had noticed a marked improvement in self-regulation skills in pupils that attended Hamish & Milo Programmes and that these advancements led to improved classroom and learning engagement.

Despite some teachers finding it challenging to commit to their pupils to attend a 10-week programme within class times, they found the longer-term and wider benefits gained outweighed the instructional time sacrificed.

Questionnaire Participant 5: “Many teachers have informed us that the children in Hamish & Milo have improved in their emotional understanding and regulation in class, which has had a knock-on effect for their attendance or/and completed work.”

Interview Participant PS4: “[The teachers have] seen a difference - not in every single child, obviously, I mean that would be great - but in some of the children they have noticed a massive difference in them. One of the teachers [told me that with] one of the children that was doing [Hamish & Milo] with me they noticed a massive difference in him. He was contributing more in class, [and] he was putting his hand up more.”

One participant’s observations reflected that the Hamish & Milo Programme had an impact across the whole school, with teachers more willing to take an active role in identifying and engaging with support for children’s SEMH needs.

Interview Participant PS4: “...as a school, we have taken [the Hamish & Milo Programme] on board and we have run with it, and it has had a massive impact on staff and children across the whole school. [Teachers] are willing to get involved and they want to know what they can put in place for the children. They ask me questions about it, or they might turn around and say, ‘Oh, this has come up [with a pupil] this week... [would you] mind sort of dropping into a conversation in the [Hamish & Milo] sessions.’ So, for me, it has [had an] impact across the whole school.”

Sub-theme 1.3: Parents

Interview participants described the trusted relationships they had built with parents in their communities and discussed how the sense of trust and safety facilitated the process of supporting the children's needs.

Interview Participant PS6: "A lot of our referrals [result from] the relationship we have built up with the families. Seeing and chatting with them every week, for the same things, we [realised] that actually, there is something there that we need to work with... because we've got that relationship [with them], they are happy to go with Hamish & Milo and trust us. There [must] be an element of trust with the families in us that what we're offering is going to be the best for their child, I think, because it can be quite empty if you're just saying, there's this programme and I think your child will fit it."

Interview Participant PS2: "The parents have a big say in regard to coming to us, but they feel comfortable because we are such a small school, [so] they feel comfortable enough to be able to speak to us [and] to let us know if they are having particular issues at home as well, to see if there's anything that we can help with."

Participants referred to the trusted relationships established with parents and recounted that this accorded parents more confidence in discussing concerns or requesting support for their children.

Interview Participant PS1: "The parents themselves might speak to the class teacher and say, 'Look, this is what is happening with my child - is there any other support we can give them? I have also had parents come and feedback to me after the [Hamish & Milo] intervention, and they have come to thank me because of the positive changes they have noted in their own child. I even had a parent come to see me and say to me how much fun her child had in this group. One parent told me how her child loves the sock puppet."

Interview participants also noted that some parents could be reluctant for their children to take part in the programme, citing concerns about the loss of instruction time in the classroom, and the effect this may have on their academic attainment. Other parents were hesitant to discuss issues pertaining to mental health and were therefore initially resistant to the support suggested by school staff.

Participants described leveraging the trusted relationships they had established with parents in exploring the source of their reluctance through discussions wherein they were able to explain the benefits to be gained from their children engaging with the programme.

Interview Participant PS1: "The parent was also reluctant on the impact of taking him out each week for Hamish & Milo [and] the impact that would be on his learning... it was quite difficult for me because I had to really speak to this parent a few times to explain how difficult it is for a child to focus when they are not able to express their grief and [then] they are expected to do learning [and] expected to do the day to day routine straight after something so major. I had to have lots of conversations with [the] Mum, and once I once we got there, eventually, I feel that Hamish & Milo was the catalyst in improving his overall attendance. It was something he began to look forward to."

Interview Participant PS1: "I have had a lot of tricky parents because of the fact when they hear or see the words mental health, it just shuts them down. But you know, you just [must] keep trying, keep trying and [have] hope. I have had parents, leaders and teachers all requesting for specific SEMH support and [I have] directed them all towards Hamish & Milo because of the wide range of support available."

Participants also commented that the children's enjoyment of the programme and the enthusiasm with which their children engaged with the programme was noticed and acknowledged by parents after their children attended Hamish & Milo sessions. These observations led to more parents feeling more positive about the intervention and their engagement with their children's participation.

Interview Participant PS9: “I have also had parents come and feedback to me after the intervention so far. They have come to thank me because of the positive changes they’ve noted in their own child. I even had a parent come to see her and say to me how much fun her child had in this group. One told me, a parent told me how her child loves the sock puppet.”

Interview Participant PS10: “[The children ask], ‘Is it Hamish & Milo today? And then even the parents, because I stand out at the gate every morning to welcome everybody, parents will be saying, ‘Oh, they’re so glad it’s Thursday today!’ because they know it’s Hamish & Milo day.”

Interview Participant 2: “I have even had parents messaging [and] emailing me asking ‘Please can my child do something?’, and things like that. I think [Hamish & Milo] has definitely settled well within our school.”

Interview participants reflected that some children discussed the activities they encountered in the Hamish & Milo group sessions with their parents and that parents themselves were benefitting from the strategies and approaches the children had learned and were sharing with them at home. In some instances, when this learning was implemented successfully at home, it provided the catalyst that improved relationships between parents and school staff.

Interview Participant PS5: “‘My mum loves you’, one girl said to me. I said, but your Mum has never met me. She goes, ‘Oh, no, it’s because I’m telling her all the strategies at home.’ The children from Hamish & Milo go home, a lot of them will explain the whole session... they will say, ‘this is what we’re doing [and] this is why we’re doing it... and maybe it’ll help you.’ This girl was grieving for her granddad, and her mum was grieving as well, so she was going home [and] giving her mum the Hamish & Milo strategies.”

Interview Participant PS6: “The parents have a bit of an input too. [One Mum] coming and saying to me, ‘When they did this session, we spoke about this at home. She got an awful lot out of the things her children were coming home and telling her that they had done [in the Hamish & Milo group]. She said that they’ve been trying to do more of those things as a family. And actually, it built our relationship with her as well. She used to come to us... and would shout at us on the gates and we could not do anything right. And then all of a sudden, the Hamish & Milo Programme came in and she could see the difference in her children. She was doing some of these things at home herself. And that really built that relationship [between her and us].”

One participant described facilitating Hamish & Milo as a one-to-one intervention with a child who was reluctant to attend school, where the parent was present in the sessions. During the sessions, the parent acquired approaches and developed skills that they were able to implement themselves.

Interview Participant PS5: “I have had a parent sit in and do it with [their child who is] a school refuser. So, his Mum had to sit in and listen and she absolutely loved it! She said, ‘I need to talk to him the way you talk to him so I’m just trying to pick up tips from you about the way you deal with him all the time’. She loved it - being a part of Hamish & Milo. She was not meant to be there really, but [her son] would not leave her side without having an absolute meltdown.”



Theme 2. Meeting the needs of pupils

Table 6 - Characteristics of sub-themes for the theme 'Meeting the needs of children'

Themes	Sub-themes
2. Meeting the needs of pupils	2.1. Vulnerable pupils ✓ Early intervention; Effective support; Protective experiences; SEND; SEMH (anxiety, bereavement, etc.)
	2.2. Hamish & Milo emotion themes
	2.3. Key features of the Hamish & Milo Programme ✓ Explicit framework; Needs-based adaptable structure; Pre-planned lessons; Sock puppets and creative activities; Progress assessment

Sub-theme 2.1: Vulnerable pupils

Early identification of pupils, and providing effective support for, pupils affected by adversity is essential and necessary.

The Hamish & Milo Programme was considered to be effective in providing early intervention for vulnerable pupils through providing the protective factors that mitigate the negative effects of adversity.

Interview Participant PS2: “For a year, [I would] go for all these trainings and it was, ‘...these are the ACEs... this is what can cause it, and this is what’s going to happen if [the children] don’t get anything done.’ And then [I would think], ‘OK, so when are you going to tell us how we can help them?’ With [the Hamish & Milo Programme] we now have [an] early start, [an] early recognition and [we are] getting in there when we can, because it is us that can stop them from it [getting worse]. We are not ever going to take the ACEs away, but we can put in the stepping stones now for them - not to recover from them - but [to] have the tools themselves to survive the rest of their adulthood because they will take it all in up until then. You got to catch it early, and now we have Hamish & Milo, we can catch it early.”

Interview Participant PS1: “As a school, we wanted to see how we could further support these [vulnerable] children through SEMH provisions, such as the Hamish & Milo Programme. Having this programme available to our vulnerable children puts protective factors in place immediately, therefore beginning the process to help decrease the risk of possible mental illness and attachment issues into adult and adulthood. So, it is already the catalyst, Hamish & Milo, from the start.”

Study participants described the social deprivation of the communities in which their pupils lived and how these disadvantaged circumstances impact the children’s emotional and mental health and their engagement with school.

Interview Participant PS9: “We live in quite a disadvantaged area as well. So, as you know, alongside that does come significant needs, particularly around social, emotional, mental health difficulties. [And that is], not just of the children that we work with, but of our families and parents as well - the whole community.”

Participants described the flexibility of the Hamish & Milo Programme in supporting their most vulnerable children, according to each pupil's needs, through individualised support or within a small group structure. It was selected by schools for the potential it offered across its range of emotion themes to offer effective and targeted support for their vulnerable pupils.

Interview Participant PS1: “We have a very large school; I think it is the largest in [our borough] for sure. And we have a lot of SEMH needs across the school, as you could imagine as we are in quite a deprived area... and [Hamish & Milo] was basically put in place because the school wanted me to work with the most vulnerable children.”

Questionnaire respondents and interview participants indicated that many of the children taking part in Hamish & Milo Programmes were designated within the vulnerable children category, as they were pupils: who had SEND; who were looked after by local authorities; with caring responsibilities; who were assessed as being in need and had a child protection plan; who had experienced trauma such as bereavement; who experienced anxiety that affected their behaviour and impacted their attendance at school.

Interview Participant PS9: “We are sitting at 29% SEN needs, so, significantly above national average. And we have 7% [of our children with] Education and Health Care Plans as well. So [we] currently [have] 34 EHCPs across the school, which is also significantly above national average, and 38% pupil premium.”

Interview Participant PS1: “[The] majority of my work involves working with vulnerable children. This includes child protection children; child in need; children with social workers; children who have external agencies working with them, their families; children that have suffered or are suffering from trauma; [and] children with high ACEs... this role has allowed me to work with the most vulnerable children.”

For some vulnerable children, participating in a Hamish & Milo Programme group was an incentive to engage with school, despite the challenges they were facing, and to attend regularly.

Interview Participant PS9: “We do have some children that experience emotionally based school avoidance... [and] for those children that we’re trying to work with to increase their attendance [and] make sure they are here on time, we do use Hamish & Milo almost as a bit of a carrot, because we will say to them, ‘...but if you’re not in school, then you’re not going to get your session.’ And because they really like the sessions, that does make them want to come to school.”



Sub-theme 2.2: Hamish & Milo emotion themes

The Hamish & Milo Programme provides an explicit framework to support the development of SEL through ten modules or ‘emotions themes’ including: friendship; resilience; anxiety; diversity; strong and angry feelings; transition and change; conflict resolution; loss, bereavement, and grief; sadness; and self-esteem.

There was a sense that school leaders selected the Hamish & Milo Programme based on its ability to support the full range of pupil needs.

Interview Participant PS1: “[Hamish & Milo] is a comprehensive wellbeing emotions curriculum... [and] this SEMH intervention programme focuses on the ten key emotional themes. Hamish & Milo have developed a framework for language and courageous conversations about mental health and emotions, helping primary aged children develop emotional literacy skills to have a voice [and] to feel heard. [It] supports them in the long term with their life and their learning, especially as the children I work with have very few opportunities to express their SEMH needs, due to their vulnerability.”

Interview Participant PS9: “...We did not have - [and] what I was looking for - was a programme that could cover those issues that kind of come up within school, but needed, sort of like, that tailored approach... And that was kind of what I felt we were missing, was to have an overarching programme that addressed all these different themes.”

The school’s pastoral and wellbeing teams and practitioners select a 10-session emotion theme based on individual pupil’s needs, based on their professional judgement and knowledge of the pupils. Pupils are typically referred for inclusion in the programme by teachers, parents, and pastoral staff following joint discussions.

Interview Participant PS9: “...because we’ve got that strong team approach, between us all, we can kind of thrash out where we think those children are best placed for [and] what they actually need. You are really matching for need, aren’t you, based on professional judgment?”

Interview Participant PS8: “It is a case of us really knowing the children, knowing what characters go together. The children are allocated to the groups is very much [based on] conversations with parents [and] things we’ve noticed on the playground.”

Table 7 below shows the most popular emotion theme units selected by participants for their pupils.

Table 7 - The most utilised Hamish & Milo Programme emotion themes used by participants, selected according to individual pupils SEMH needs (collated from interviews and questionnaires)

	Hamish & Milo Programme emotion theme	SEL focus area
1	Amazing me - Helping children with their self-esteem and self-worth	Self-esteem
2	My friends and me - Helping children with friendships	Friendship
3	Exploding me - Helping children with strong and angry feelings	Anger
4	Resilient me - Helping children with resilience	Resilience
5	Calm me - Helping children with anxiety	Anxiety
6	Actions, words and me - Helping children with conflict resolution	Conflict resolution
7	Memories and me - Helping children with loss, bereavement and grief	Loss, bereavement and grief
	New beginnings and me - Helping children with change and transition	Change and transition
8	Celebrating me - Helping children with difference, diversity and inclusion	Diversity and inclusion
9	Finding me - Helping children with sadness	Sadness

Amazing me is a Hamish & Milo emotion theme that aims to recognise, celebrate, and develop children's self-esteem, sense of self-worth and self-awareness. This emotion theme was successfully used as a starting point for pupils, including those with complex needs.

Interview Participant PS8: "Very often using Amazing me as a starting point works really well for children, and then they can go on to other themes from there. So, I found [that] I have had more successful children that have started with Amazing me and moved on to other themes."

Examples of individual pupils, described as 'vulnerable children' (children with SEND; young carers; and children experiencing bereavement and anxiety) and recounted by interview participants, describe each pupil's specific challenges and their experiences of taking part in specific Hamish & Milo emotion theme programmes. In each instance, the emotion theme selected to address the particular needs is shown to produce positive outcomes.

Interview Participant PS10: "I am doing Celebrating me [at the moment] and that's with three of the children that have got quite high SEN needs and then one other child that hasn't got SEN needs but has had a really tricky time at home... she has [joined] in because of the negative comments that were being made to her constantly, and the other ones are there because I want to celebrate how great they are, although, you know, they might be slightly different to their friends. It has worked really well, to be honest with you."

Interview Participant PS2: "The two girls that I am thinking of, they're also young carers, so it is hard to get them to have a good attendance because sometimes this is out of their control. But we have done [My friends and me] intervention with both young carers... I think they are a bit more mature with their communication because they've got to look after somebody at home so that they have a few extra friendship issues... I have three young carers and all three of them have done [My friends and me], and then the brother and the sister did [New beginnings and me]... It is moments when children that you don't often see relaxing and enjoying the moment. You know, it is those ones that stand out for me."

Interview Participant PS3: "There is one girl, who is five, [and] lost her dad through cancer. When she first came to me for Hamish & Milo, she was very - I don't want to say nervous because she is - but it's all that trauma all around her and she's had the Mental Health School Team in to support her and everything. We did, Memories and me with her and her cousin, and it was like this light bulb moment for her... that she realised that she had a voice, and she could talk about it."

Interview Participant PS7: "Her anxiety was very strong and she had quite a low self-esteem as well, so we started her off with Calm me because she had quite a few familiar people in that group and we thought that might be a nice way to kind of just start her off... She's now in a transition group ready to help build her up for Year 5 [and] to just give her that confidence there as well... She still [has] got a bit to go on her journey, but you can see across the year the progress she's made; her personal journey has been incredible because she's gone from shutdown to starting to join in a little bit more, to now where she's beginning to open up a bit more."

Sub-theme 2.3: Key features of the Hamish & Milo Programme

Pastoral staff identified pupils who would benefit from participating in a Hamish & Milo Programme, based on their circumstances and needs.

Pupils either worked individually with a practitioner or were grouped into small cohorts consisting of four to six children with similar needs. Positive outcomes were reported for all types of delivery.

Interview Participant PS1: "I started off with small groups, which is up to six children. I also do one-to-one, and they both work really well."

Interview Participant PS8: "The structure was mainly small groups [and] where needed, one-to-one. Really choosing the children is based on knowing the children, teacher referral, parent referral, conversations, and observations that look at what the children's needs might be and then matching them to specific groups."

Interview Participant PS1: "I feel every single child would benefit from the SEMH program, this Hamish & Milo SEMH programme. It will touch every child, no matter what. I believe, I have so much belief in this because the amount of, the way it's structured as well, it will just reach everyone."

Although it could be difficult for practitioners to justify and find the time required for the sessions, the positive outcomes provided a compelling rationale for the sacrifice made.

Interview Participant PS3: "I am sure lots of people struggle with that - to give the time over to do this - because you're missing something else. So, it has got to be worth it in some way, doesn't it, to kind of have to carve out the time to do that?"

Small groups were deemed to be the most effective for practitioners delivering the sessions and for the children's optimal involvement and engagement.

Interview Participant PS3: "I think being in those small groups they gain the confidence to speak, and it always amazes me that these small people can sit around this table and have these big discussions... it just blows me away every time because I think WOW this is so great, this is so good! That is what I see - their involvement, their enjoyment, the stories that they come up with, [and] the adventures that the puppets go on."

Typically, a 10-week emotion theme was delivered over the course of a term comprised of 10-12 weeks, with sessions occurring once each week and sessions lasting an average of 45-60 minutes each.

Interview Participant PS9: "For Hamish & Milo, [we have adopted] a group work approach. We are running them over 12 weeks - I know it is a 10-week programme, but we have your introduction week at the beginning, and then they do a final week at the end, so ours runs over about 12 weeks rather than 10... Our sessions are sort of 45 minutes to an hour long. Just having that time and that space to just really be themselves as well in a safe space."

Hamish & Milo groups included either pupils of similar ages or pupils of mixed-age groups. Participants found that composing small groups of mixed-aged children with similar needs, particularly if the children were in similar key stages, was very successful.

Interview Participant PS9: "So we have kind of done it on a small group basis; sometimes those children might be from the same year group [and] sometimes they might be mixed year groups. It depends on our family team meetings [when] we will identify those children that might need some support and what it is they will benefit from... [we] will look at those children that might not necessarily be from the same year group."

The Hamish & Milo Programme was perceived to be the inducement in connections and friendships being formed between older and younger pupils.

Interview Participant PS7: “The [older children] might not have mixed with [the younger children]; they might have stayed separate, whereas [Hamish & Milo] kind of opened that window... they [may] have already started to mix before, but it has just opened that extra window to help build those connections for them.”

Pupils participating in mixed-aged Hamish & Milo groups were able to form social connections and friendships that may not have occurred otherwise. At first, the grouping of different ages could be challenging, but if the individual pupil's needs were considered carefully in the group formation, as the children progressed through the later sessions of the programme, they cultivated relationships between themselves, which also extended and endured outside of the groups and on the playground.

Interview Participant PS9: “...and actually those children who might not have had those friendships, particularly with children in different year group, have actually made new friendships. So, you know, in the long run, it has actually worked really well, but can sometimes go through a bit of a rocky path around that sort of week four, five, six mark.”

Interview Participant PS8: “The [children in Hamish & Milo groups] have familiar faces in other year groups, which is beneficial. Generally, having those deeper connections with the [other] children is really helpful and them seeing [other children] in a different capacity in a group - seeing their skills in a group as opposed to maybe in a big classroom where it's that bit more overwhelming - [and] on the playground.”

In mixed-age groups, older children often spontaneously took on the role of helping and supporting the younger children in the group. Participants observed that the connections and friendships made within the groups were maintained in social settings outside of the group, such as the playground.

Interview Participant PS10: “What I try to do with some of my groups is [to] mix the ages a little bit... I try to always have an older child in the group because then they can help a little bit... The [older children] have said that the younger ones out on the playground, at lunchtime and stuff, seek them out during that time [and say]: ‘ Oh, hi, so-and-so, we could do a Hamish &

Milo next week’, or if they have a problem, the [older ones] will go up to them and they will talk to them.”

The Hamish & Milo emotion themes contain pre-planned and fully resourced lesson plans, allowing ease of use and enabling practitioners to facilitate effective targeted SEMHD support.

Interview Participant PS6: “...having the resources there in boxes and it [is] all ready to go [is] life-saving [because] we just don't have time in schools to be able to put stuff together. And that's what I was finding when I was first within Pastoral [work], you could see the need for things and I was cobbling all sorts of bits and pieces together, but I didn't have hours and hours to be able to create the right programme. So, having it ready made on the cards just there, I mean, some days I know it well enough now that I can just pick it up and go... and I've got the resources ready, and I can run with it.”

Although the sessions for each emotion theme are pre-planned, the activities can easily be adapted by the practitioner to meet the needs and requirements of individual pupils, whether they are participating in a Hamish & Milo group or working individually with a practitioner.

Interview Participant PS9: “So what I liked was the fact that it had that 10-week approach, it was planned for you. We make adaptations, kind of as and where as needed, but you know, you're following that approach. And it was the same approach across all the different themes. Because at the time, we were kind of sort of making up our own things to kind of go along as you do. And this kind of sort of filled that gap. So yeah, Hamish & Milo has become kind of like our foundation resource for those children that might just need something short term within a group.”

A key element of the Hamish & Milo Programme is the use of sock puppets as ‘pets’ for each pupil participating. The sock puppets are a method used to establish emotional safety and feature in all ten emotion theme units forming the Hamish & Milo Programme. Some participants were sceptical regarding the use of sock puppets, fearing that particularly older children would be reluctant to participate, but this proved not to be the case.

Interview Participant PS9: “I must admit, right at the very beginning, I was a little bit sceptical - not [with] the younger ones, but with the older ones - around where they really want to do this. But yeah, they most definitely do!”

The sock puppets afforded each child a sense of agency and autonomy and they were used to create an atmosphere that felt playful and nurturing, thereby allowing children to explore sensitive emotional themes and experiences safely and effectively.

Interview Participant PS1: “[Sock puppets] have been a wonderful tool for the children. I mean, they are amazing! I love using them, but the children absolutely love using them - and I am talking from Reception to Year 6! The puppets help children to think about their feelings, to express and explore difficult emotions and experiences in a non-threatening way.”

Interview Participant PS9: “You create your sock puppet however you want it and use your sock puppet how you want to - [it] is yours. It gives them that autonomy over, ‘Yes, this is this is mine and it belongs to me!’ And it becomes like a bit of a part of them. [The sock puppets are] definitely something that they love to do. They come up with their own names and then [they are] used really well throughout those sessions. They channel a lot of, you know, what they want to share through the sock puppets. So, it has been something that’s been really, really effective.”

Sock puppets act as a relatable and light-hearted instrument for effectively channelling and expressing the children’s feelings, thereby supporting the development of emotional regulation.

Interview Participant PS1: “They can express it through their voice, through the puppet, through play. The child’s given the freedom to express their feelings through the puppet. Children are able to let their guard down, be silly, have fun through the puppets, as do I. I find the sock puppets help children regulate their emotions.”

The sock-puppet-making activity at the start of the programme allows both the children and the adults to be playful, creative, imaginative, and expressive in a fun and relaxed way and it sets the tone for the sessions throughout.

Interview Participant PS8: “It starts [at the] beginning with making the sock puppets and seeing the ideas they come up with: ‘... my favourite sock and my sock puppets’ favourite meal is fish and chips’ or whatever. It is [that] kind of laughter they share at the beginning that kind of carries on.”

Interview Participant PS9: “Being able to show the children that you can channel yourself and your own personality through your sock puppet was really nice and I think that that helps [in] building relationships with children and developing that trust with them. Being able to show that and share that with that particular group of children, sets the tone right at the beginning of the sessions.”

Creativity is a primary constituent of the effectiveness of the Hamish & Milo Programme and each session offers pupils the opportunity to take part in a creative activity. Participants reflected that within the rigid structure of classroom learning, the freedom to create is an element that is not always easily accessible to pupils.

Interview Participant PS9: “All the children like the creative part - that is the bit that they really look forward to in the sessions.”

Interview Participant PS9: “I think there is part of it is that [children] do not get that opportunity, particularly up to [Key] Stage 2, to show that creativity, because the curriculum is so jammed-packed. And it is all concentrated on stats and there isn’t that time and space in the curriculum for them to be like that. Whereas in the Hamish & Milo sessions, they have that absolute freedom...”

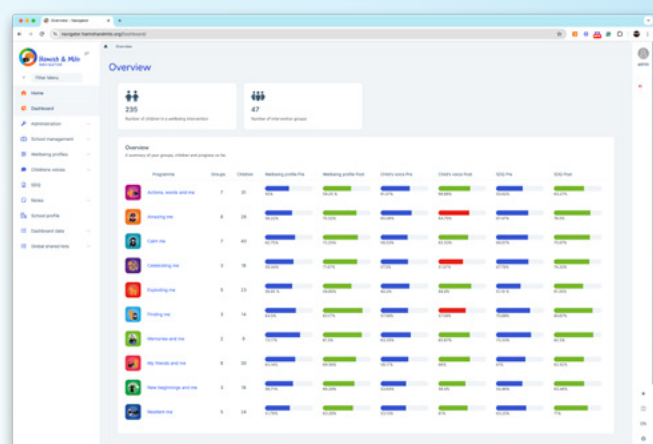


The creative activities and tasks in each session facilitate opportunities for sharing thoughts and ideas through discussions and reflection and allow for further exploration of the emotional concepts brought into focus. The activities allow each child to feel recognised and valued, and they promote the formation of social connections and friendships within the group.

Interview Participant PS1: “When I talk about the activity, this is where the children are inspired to think, learn, to investigate the theme and develop their own ideas through discussion and creative play... this is where I do observe and reflect with the children to help develop and respond to their ideas and thoughts [as] a lot of it is done through group discussions. The activity provides the children with the opportunity for their self-expression, of the understanding of what they have or what they are learning [through] sharing ideas.”

Practitioners are able to chart the progress they are observing the children make throughout the programme using a range of impact measures. SDQs provide a standardised pre- and post-intervention measure; CWPAs assess progress pre- and post-intervention for each of the emotion themes; and CVQs capture the perspectives and experiences of the pupils participating in the programme.

Interview Participant PS10: “This is their voice! I think for me, the SDQs from the teachers is not as important to me as the Child's Voice [Questionnaire], because I am doing it for that child.”



The data generated from these measures can be collected using Hamish & Milo Navigator, a convenient and intuitive digital platform that allows for impact to be observed through the use of charts and graphs.

Interview Participant PS1: “The Navigator dashboard is clear when measuring the child’s SEMH journey visually, through the charts and the graphs, to observe the progression or changes a child has made through the intervention. All the documentation - such as the child’s voice, the child’s wellbeing profiles, the SDQs pre and post, especially with the colour coding blue, green and red - you are clearly able to identify the child’s complete SEMH journey. It is a way to store all the data in one place. You can see the difference that you’re making - the shift, and the change within the children individually [and] as a group, so it is amazing!”

Interview Participant PS8: “...and then at the end, the data, seeing it, I’m a visual person, so seeing it is very satisfying.”

The impact data can be used as quantifiable evidence of the progress made by each child participating in the programme.

Interview Participant PS9: “So, you are putting all of that data in, and it gives you that quantitative data that is definite proof of impact that you can see. I think the Navigator tool has been really, really helpful in being able to see that impact.”

Interview Participant PS10: “I can say to the teachers that come and have a look at the difference. I think [that] it is nice to be able to show the teachers and [the school leaders] the data. If Ofsted turn up it is really good to be able to pull that data up and be able to show them [that] this is the impact that this is having on the children.”

Theme 3. Social connectedness for pupils and practitioners

Social connection as an element of success for pupils (Hamish & Milo groups) and practitioners (supervision).

Table 8 - Characteristics of sub-themes for the theme 'Social connectedness for pupils and practitioners'

Themes	Sub-themes
3. Social connectedness for pupils and practitioners	3.1. Enjoyment ✓ Attendance; Fun; Enthusiasm; Positive engagement; Shared experiences; Uncertain/hesitant at first
	3.2. Safe space to share ✓ Emotional and physical safety; Welcoming and safe space for sharing; Access support beyond group
	3.3. Community ✓ Connection/bonds; Belonging; Safety; Helping

The concept of social connectedness was identified as a distinctive leitmotif throughout the qualitative data-gathering process.

Participants shared their perceptions of the children's experiences of taking part in the Hamish & Milo programmes, as well as their own experiences of attending the Hamish & Milo practitioner peer supervision sessions. Several of the concepts identified as key elements of success by participants were similar in both the children's experiences of emotion theme groups and those of the practitioners attending supervision groups.

Sub-theme 3.1: Enjoyment

The children's enjoyment of the Hamish & Milo Programme and the enthusiasm they showed for participating in the activities and discussions was perceived to be an indispensable factor in their positive engagement with it.

Interview Participant PS3: "[The children] always really enjoy coming in. When I've gone round to pick any of them up, they never go, 'I don't want to come', you know, they are always positive [because] it is always enjoyable."

Interview Participant PS7: "They are very excited [and] very engaged for the activities as well, especially when it becomes a very practical activity. They are more than willing to take part in discussions and as the sessions progress, you can see where they are opening up a lot more and they are happy to share those experiences a lot [more freely]."

Similarly, participants described their enjoyment of attending peer supervision sessions and the benefits of discussions and shared experiences of practice.

Interview Participant PS2: "I do enjoy [supervision sessions]! I see how everybody else is doing [and I] get different ideas from them as well."

Interview Participant PS3: "I've really enjoyed [supervision sessions] and I get a lot out of them. Because it's just me in this school that does [Hamish & Milo, it is nice to hear other people and what is going on around, you know. I learned so much... It is always a really lovely space for highlighting and sharing of practice."

When first taking part in a Hamish & Milo Programme, some of the children can be hesitant, but these feelings are soon replaced with enthusiasm and enjoyment. At the end of a session, and on completion of the 10-week programme, children often ask if they may participate in another emotion theme group.

Survey Participant PS2: “They all love it! I have never had a child say they don’t like it. They can be resistant to start, due to not knowing what to expect, [but] once they have been [for the first time], they are asking when the next session is.”

Interview Participant PS9: “...when they finished one session, one theme... [they are] constantly asking, ‘Can I do another one? Can we do another one?’ They are always wanting to be in another Hamish & Milo group because they do love it.”

Likewise, practitioners described feelings of uncertainty when they first began using the Hamish & Milo Programme and articulated the benefits of participating in peer supervision and expressing their preference for continuing to attend the sessions.

Interview Participant PS8: “In the beginning, I was muddling through it a little bit, and I wasn’t OK with it all, and I kind of had to start from the beginning. Having those supervisions [I could see] all the struggles that I was having with staffing and things like that, [another practitioner] was having as well. So that was really nice to know... It is nice to hear other ideas as well.”

Interview Participant PS4: “If we [have] difficulties, we [discuss what we] can do about them. I think I would miss [supervision] if it went. I think you need [supervision] because things are constantly changing, and I it is nice to stay up to date with things and [discuss] how we can adapt things and bits and pieces. So, it has been really beneficial to have the supervision [sessions].”

One key indicator of the children’s enjoyment of the Hamish & Milo Programme was described by participants as being the fact that they spoke about and shared their experiences with their peers. These personal recommendations to peers about the programme generated interest and new requests from pupils to participate, and reduced anxiety amongst children beginning sessions.

Interview Participant PS10: “The children talk to their friends about Hamish & Milo, which to me shows that they love it. And then their friends come and ask me, ‘Can I do one?’ So, I think that what stands out to me [is] the fact that they go and they talk to their friends about it.”

Interview Participant PS4: “I think that they do talk about [Hamish & Milo] when they come back [to class]. They do talk to their friends and their peers... and I think that’s quite nice, because when we do go to pick up new children for a group, they’re not worried about coming.”

Sub-theme 3.2: Safe space to share

Hamish & Milo sessions provide a safe, supportive space where children feel secure in themselves and their school environment. Within this sense of emotional and physical safety, their views and feelings are respected and valued.

Interview Participant PS7: “They’ve got that safe space where they can talk, and it will be respected.”

Interview Participant PS9: “...just having that time and that space to just really be themselves as well in a safe space.”

Interview Participant PS10: “I’ve got a lovely room. We just sit on the beanbags, and they get time to talk. And it’s not, you know - Maths, English, Geography - it is about them and how they feel, and how we can help them.”

In a similar sense, participants describe the supervision sessions as a welcoming space for reflection and for sharing views, ideas, and solutions.

Interview Participant PS8: “[Supervision sessions are great] for reflection, and just for you to catch your thoughts, really - and it’s nice to hear other ideas as well. [It is] reflective, even when you’re just kind of talking about it... sharing ideas and stuff.”

The children's sense of safety and comfort during Hamish & Milo sessions enabled the sharing of deeply personal occurrences, which although experienced differently by each individual, the shared resonance facilitated open discussions which deepened the connection between the members of the group.

Interview Participant PS3: "[Hamish & Milo has] given them a safe space to be able to share [their experiences], but also to know [that] they are not alone - even though their own individual experience will be so different - but they have some things that connect and resonate with each other, and you know, how powerful to have that chance to talk about it with others."

Interview Participant PS3: "The second group I did for Memories and me was a group of six. My standout moment from [the group], (they had all lost a parent to cancer), [was] when they each were saying, 'What, really - you as well? Oh, my goodness!' And it was that connection - I'm not the only person to have lost a parent to this - and feeling comfortable to talk about their feelings. One of the little boys said, 'My mum only died three months ago'. It was just all matter of a fact, you know. One of the other ones [replied], 'My mum died of cancer, but I can't really remember what she looked like now'... and it was that sort of thing going around the table, [which was] just amazing!"

Similarly, participants described the feelings of reassurance and connection they experienced during supervision sessions which supported feelings of connection between practitioners and ensuing perceptions of shared experience.

Interview Participant PS6: "[Being a] standalone practitioner, sometimes, it can feel quite isolating, so feeling part of something and connected to others that are experiencing the same thing [is great]."

Interview Participant PS8: "I did find with supervision [that] it was, kind of, 'I'm not the only one struggling with this sort of thing; it is not [that] I'm doing something wrong.' It's just that it's so reassuring!"

Interview Participant PS7: "It is knowing [that] I am not alone in that - it is not just something I have had to work around or deal with, [because] other schools are having a similar issue there as well. It gives you [a] bit more confidence that it's not just you. And then hearing some of the things that they've tried that I can then try with some of mine as well. And it's getting those ideas and sharing that, which is really nice."

The concept of the safe space was extended to pupils beyond their participation in the Hamish & Milo Programme so that they were able to engage with support from safe adults outside of the sessions.

Interview Participant PS7: "It is also making sure that they are aware that the safe space isn't just the room, it's the person. So, even if we're not in that room and we're not doing that group and we're further around the school; if they have any worries or doubts or anything they want to talk about, that they know there is an adult they can talk to in the school..."

Practitioners attending supervision sessions also had an awareness of being able to access support from the Hamish & Milo supervision facilitator as and when it was required, in addition to the support provided in supervision sessions.

Interview Participant PS10: "I think [supervision] works really well and I know that if there was a time that any of us needed to talk in between those supervision dates, we could always give you a call and just say, 'I'm really struggling with this - what can I do? This has gone wrong, and I don't know what to do about it.' So, I know that that help is there as well, if we needed it, as well as the supervision [sessions]."



Sub-theme 3.3: Community

Many of the pupils participating in the Hamish & Milo Programmes experience a sense of connection with the practitioner and with the other children they attend sessions with.

The mutual experience of safety perceived within the groups supports and facilitates the sense of the establishment of community.

Interview Participant PS1: “Not all children, but the majority, I would say. There is definitely a sense of connections and community. There’s a special bond made between the group and myself, and it creates that safe environment for them.”

A participant recounted an example of the bonds created between the children attending a ‘My friends and me’ group and how the community of children supporting a child, who was anxious to attend, was effective in him overcoming his fears.

Interview Participant PS1: “So one of my very first groups was My friends and me [that included] one child, he’s a looked after child... a Reception boy who presented [with] defiant behaviour. I would always collect him first. The rest of the children were all Year 1 children. He was the only reception child in that group, and he would often resist and say he [didn’t] want to come. So, I decided [to collect] the Year 1 children first and then [them] go and collect him in his classroom. They would go up to him, greet him... they would hold his hand, and he would happily come with the rest of the group. They would have their little chats whilst walking to the hut where I work. With the bond that they had created because he had made these powerful connections with these Year 1 children through Hamish & Milo. The moment his friends just come to collect him, it was just so beautiful just to see them chatting away, holding his hand, looking after him.”

Similarly, a participant described their experience of extending support to fellow practitioners within supervision sessions as gratifying and how the help offered was a function of the sense of belonging within a community.

Interview Participant PS6: “The supervision is very useful. I quite like being able to help the other new [practitioners], because you need someone that [has] the experience of it to say, ‘this worked for us.’ It is nice to be part of a community of something, to feel that you belong as well. [Being] a standalone practitioner can sometimes feel quite isolating, so feeling part of something and connected to others that are experiencing the same thing [is nice].”

Theme 4: Hamish & Milo Champions

Table 9 - Characteristics of sub-themes for the theme Hamish & Milo practitioners aka 'Champions'

Themes	Sub-themes
4. Hamish & Milo Champions	4.1. Personal qualities ✓ Caring; Inclusion; Approachable; Warm; Patient; Nurturing; Fair; Consistent; Empathy
	4.2. Trusted relationships ✓ Consistent and nurturing encounters; Emotional safety; Unique association; Nurturing presence
	4.3. Professional experience and training ✓ Varied training and experience; Pastoral care; Counselling; Social care

Referred to as Hamish & Milo Champions ('Champions'), these individuals are an essential element contributing to the programme's effectiveness.

Successful Champions draw upon numerous personal qualities when establishing trusted relationships with individual pupils and in the formation of the social groupings of children participating in the Hamish & Milo Programme. Through the formation of trusted relationships and drawing upon their experience and training, Champions facilitate pupil engagement, the sharing of experiences, and the development of social and emotional competencies within the group. Champions also utilise these same mechanisms in the formation of trusted relationships with parents.

Sub-theme 4.1: Personal qualities

Effective Champions care about the pupils that they work with, are interested in them as unique human beings, are fully accepting of them, and believe that their thoughts and feelings matter.

Interview Participant PS8: "You have to [have] that kind of 'deliberate botheredness' - you have to be interested in them."

Interview Participant PS3: "I just believe that everyone should be able to have a voice and be able to say what they need to say without judgment."

Similarly, Champions who are dedicated to supporting not only the pupils they work with but also the parents and families.

Interview Participant PS4: "We are living here in the community where it is hard, and that is what [practitioners] are bringing to [this work] - a sense of wanting to be able to support the other people in the community and the other families who live in the community."

Participants described successful Champions as being approachable, patient, warm and nurturing, yet also consistent and trustworthy, thereby able to establish consistent and dependable emotional boundaries.

Interview Participant PS10: "I will give them a hug, so they know they come and talk to me, and they also know I am really clear on confidentiality with them. I say all the time... 'what we talk about is between us, but if you say something that makes me worried - that I need to tell somebody else, or I need to tell your parents - then I will always tell you first.' I think that for them is good, because they know where they stand."

Interview Participant PS5: "I am fun, I am fair, but I have boundaries, strong boundaries."

Interview Participant PS5: “I think it is because I’m honest... and I do not ever make promises I can’t keep. I am reliable... So that they know I’m a constant in their life.”

Interview Participant PS2: “Success is also testament to your patience and your energy that you’ve put into it.”

Effective Champions extend the same warmth, approachability and consistency in their associations with parents, which allows them to address even challenging issues with patience and care.

Interview Participant PS2: “It is difficult when we have the child protection side of things, because obviously I have to have conversations [with parents] that are quite difficult. I am the comforter... I have that good relationship with the families. So, although I do phone them - and I do have those conversations that aren’t very nice - I am also the one that they will phone up, you know.”

Participants expressed that Champions were able to identify with and show empathy for the children they work with, and their parents, due to their own personal experiences.

Interview Participant PS5: “When [the children] come to me with something, I might have experienced it, and know that feeling inside; I can identify and empathise with them... It is just being aware of [other] people’s trauma, and I am aware of trauma behaviour and ACEs”.

Interview Participant PS3: “I feel like I am able to support the kids because of my [personal] journey. I say to parents, ...trust me, I really know what you are going through; I really understand how it feels because I have been there and I have done it, you know?”

Sub-theme 4.2: Trusted relationships

The Hamish & Milo Champions understand that establishing and maintaining trust through consistent and nurturing encounters with pupils is the key to building meaningful relationships wherein children experience emotional safety.

The Champion becomes a positive emotional figure within the pupil’s experience of school, and the consistency and safety the trusted relationship offers, empowers the child to succeed.

Interview Participant PS3: “...[the difference is] having that trusted adult, because he sees me a lot with my colleague, just knowing that this is safe, and this is OK... I can’t put it into words... he just opened up like a little flower yesterday and it was lovely!”

Interview Participant PS1: “I will often model to children throughout the session, whether that is through talking [or] using the puppets with my silly accents. But having that one constant [trusted adult] and that consistency of the programme in their life for that timeframe can mean so much to them.”

Interview Participant PS2: “He just craves that positive emotional adult, which he doesn’t always have at home, unfortunately... He can have those times where he’s having a successful time with the [other] children [in the group], not one where he’s had a meltdown and they’ve all got scared of him. You know, it’s got to be about him having successful times. For him, it’s having that positive adult time - that’s what he needs.”

Interview Participant PS4: “I think being a trusted adult is really important. I will go into a classroom and the ones that are misbehaving - the ones that I can see need that support - will be the ones I focus on first, because once you have that relationship, it is going to have a massive impact on them moving forward. You can see some of them are not in a place to learn because they need something first, and I am the type of person that will focus on them first because they’re missing something... I like understanding them, and I like a challenge!”

Participants described the trusted relationship as a unique association in the context of school. From the pupil's perspective the Champion is not considered to be an authoritative figure, as a teacher may be. Owing to the trusted relationship established between the pupil and the Champion, they are instead regarded as more nurturing presence, more akin to a mother or auntie. This unique relationship between Champion and pupil is seen as a distinct advantage, in that it carries significant meaning for both parties.

Interview Participant PS9: "I think [the Hamish & Milo Champion] is not seen as an authoritative figure in school because... [they are] not a teacher. I think that does work really well, whereas sometimes I think when it's me - although my role is very different - they still see me as a senior leader in school."

Interview Participant PS10: "I think the fact that I am not a teacher is helpful to them because they already [have] that relationship with me and I am not that authoritative figure, you know, I am the 'nice' one."

Interview Participant PS6: "When the children are able to just come and give me a hug... I don't expect them to say thank you ever, but when they do just say thank you, because it's obviously meant a huge amount to them to have someone in school... I guess they look at me a little bit like a mother figure and someone that they can trust. I just feel hugely [privileged] to share those experiences with those children and for them to start opening up to me."

Interview Participant PS2: "I am kind of the mum and the auntie..."

Sub-theme 4.3: Professional experience and training

Participants reflected that the professional training and experience in other areas, including counselling and pastoral care, that they had accumulated prior to becoming Hamish & Milo Champions, had been beneficial, but not essential, to their practice of the programme.

The simplicity and the pre-planned structure of the Hamish & Milo Programme, as well as the support provided through supervision, enabled Champions to successfully implement the programme, regardless of levels of previous experience and training.

Interview Participant PS9: "...having that sort of additional [counselling] training, I think, has probably helped our sessions run really successfully... if you were a school that bought into [the Hamish & Milo Programme], I don't think you could just say to a [Teaching Assistant], 'There is the box, off you go and run it!'"

Interview Participant PS6: "If I was completely new to the post, I think that would have been even more terrifying. I think having experience in pastoral helps an awful lot. But that being said, the support that I do see happening is very beneficial."

Interview Participant PS7: "...the beauty of [the Hamish & Milo Programme] is that it did not need a lot of training, necessarily. I know, obviously [that] the training would have been important, and it would have raised really important things but at the same time, it is something that you can just pick up and you can just roll with it; It is not a complicated programme to run, it is really nice and simple."

From a leadership perspective, participants indicated that selecting a Champion with desirable personal qualities was a greater consideration, but that training and accessing support through supervision were also key to ensuring the effective implementation of the Hamish & Milo Programme.

Interview Participant PS9: “I think [that] you definitely need to be very mindful about which [practitioners] run the sessions... making sure that they do have that training [that] they are also having supervision time.”

Interview Participant PS8: “I think it is about how you deliver [the Hamish & Milo Programme]... because [the lesson plans are] all there in front of you. I think [training] helps to reassure you in that kind of sense, but you do not have to have background knowledge.”

Participants described how their previous experience working in other professional areas of social care, prior to their working in schools, had assisted them in establishing positive and trusting working relationships with vulnerable pupils and their families.

Interview Participant PS5: “Other people [ask], ‘how do you work there - it is so challenging?’ But to me, like I have worked with much worse. I used to work in a teenager’s homeless hostel and they had addiction issues.”

Interview Participant PS6: “I think seeing the impact of how things affect families, whether that’s positive or negative and that understanding of what it feels like to them at that point, and needing to have help and how you go around building those relationships in order to make sure they don’t feel judged and that they don’t feel that school is like this big hierarchy that they can’t access - that we are human beings, I think. That is one of the skills that I have is the ability to talk to people on a level, but [also] get information across. That comes from having worked in social care with families, where you really have to be on a level with them but be supportive at the same time.”

Interview Participant PS2: “I have a couple of parents that I have known since their children were babies, because I used to work in the Children’s Centre, so I have a really, really close relationship with them.”

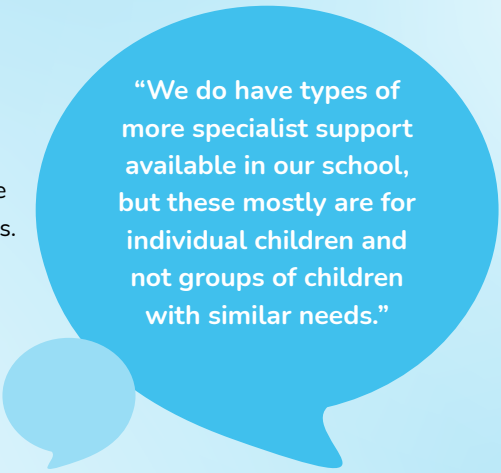
Summary of school needs, requirements and experiences

Data gathered from several sources - including school profiles from the Hamish & Milo Navigator online platform, questionnaire responses, and participant comments from semi-structured interviews about schools' needs prior to the HMUoBEP 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."

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.

A large blue speech bubble with a tail pointing towards the bottom left.

“The programme provides effective and comprehensive support within a short timeframe.”

A blue speech bubble with a tail pointing towards the bottom left.

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

Discussion

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 specific standardised outcomes measures (SDQ) for 1064 pupils participating in the Hamish & Milo Programme was completed in Phase 2 of the project implementation and demonstrated statistically significant changes pre- and post-intervention, consistent with the interim findings. Interpreting the meaning behind the consistent strong effect sizes (Cohen's d; Cohen, 1960) reported in the data, they imply that the difference in mean scores after the intervention are practically significant.

Practical significance via high d values means that the positive effects of the Hamish & Milo Programme on children's social and emotional wellbeing produced from the analysis occurred irrespective of the sample size (Bhandari, 2023). Practical significance (effect sizes) is considered alongside statistical significance (p values), which shows how likely it is that the data would have occurred by random chance. The smaller the p-value, the less likely the results occurred by random chance, with a value below .05 to be considered the point of statistical significance.

The findings therefore show statistically significant changes in pupil outcomes from pre- to post-Hamish & Milo Programme intervention. Additionally, when pupil outcomes pre- and post-Hamish & Milo Programme intervention were compared to UK norm tables - providing a 'normal' borderline and 'abnormal' range - a reduction of pupils whose outcomes were grouped compared to 'abnormal' shows a significant decrease.

The positive outcomes for pupils observed in the quantitative data analysis during Phase 2 of the project implementation were reflected in the analysis of qualitative data drawn from the responses of pastoral practitioners as study participants shared their perspectives and experiences in questionnaires and during interviews.

Thematic analysis of qualitative data suggested that the Hamish & Milo Programme was effective in providing early identification of SEMHD and was considered to offer flexible solutions for successful intervention overall.

Following pupils' participation in the Hamish & Milo Programme, significant improvements in their self-worth were noticed, resulting in enhanced self-confidence and self-esteem. Having high self-esteem is associated with positive consequences including, enjoying better social relationships; experiencing more success at school; having better mental and physical health; and increased prosocial behaviour (Orth and Robins, 2022).

These outcomes were described by teachers and pastoral practitioners who observed that pupils who participated in the Hamish & Milo Programme were better able to express their thoughts, feelings, and experiences and, were better able to relate to their peers socially. Improved self-confidence also facilitated better communication - with pupils being better able to articulate their concerns and seek assistance from school staff members when they required support.

Hamish & Milo Champions, teachers, and school leaders recounted many examples of pupils who benefitted from their participation in Hamish & Milo sessions. In some case examples, following attendance of ten sessions, there were fewer instances of dysregulated behaviour, leading to fewer exclusions.

Outcomes for pupil participation in the Hamish & Milo Programme were recorded as quantifiable evidence of progress through pre- and post- intervention assessment, with the Hamish & Milo Navigator platform providing a convenient and valued resource to track pupil SEL progress.

As class teachers often identified concerns about pupils in the first instance and frequently referred them for targeted support, they were well placed to assess both short-term and longer-term changes related to improved SEL competencies after participation in the Hamish & Milo Programme. Teachers reported improvements in their pupils after participation, including increased confidence, optimism, and resilience which resulted in improved classroom engagement, attendance, and academic learning.

Participants observed that Teachers also reported a decrease in instances of dysregulated behaviour among pupils after their participation in the Hamish & Milo Programmes, which they attributed to SEL competency development, and that these changes resulted in improved attendance and the prevention of possible pupil exclusions.

Previous research demonstrates that teacher attitudes towards SEL interventions can vary, with some teachers expressing strong support and actively incorporating SEL practices into their classrooms, while others may feel less confident or even resistant due to concerns about time constraints, lack of training, or uncertainty about how to effectively implement SEL strategies (Sharma et al., 2024).

Participants perceived that the positive outcomes of pupils attending Hamish & Milo sessions had a wider impact on teachers, who appeared more willing to identify and engage with the support of their pupil's SEMH needs.

Although participants acknowledged that some teachers were concerned about their pupils missing classroom instruction during attendance of the Hamish & Milo Programme, after observing the positive outcomes in their pupil's post-intervention, they felt that the benefits outweighed the deficits.

Within an ecological systems framework (Bronfenbrenner, 1979), the school is seen as a significant cultural context that shapes children's learning and development through relationships, instruction and interactions, therefore connections between home and school are deemed critical in providing aligned supports for children (Darling-Hammond, 2019).

Some parents were reluctant for their children to participate in the Hamish & Milo Programme due to similar concerns raised by class teachers about lost instruction time and the possible resulting effects on academic attainment, however once they observed the enjoyment and enthusiasm of their children post-attendance, their engagement became more positive.

Research knowledge and collective best practice summaries of SEL programme outcomes (Drew et al., 2024; CASEL, 2025), emphasise the importance of parental involvement - in the home and at school - and acknowledge that strong partnerships between parents and teachers are associated with better overall outcomes, including improved confidence, behaviour, attendance; and academic attainment (Harris & Goodall, 2008; Apps et al, 2019).

The presence of the relational components of trust, communication, and respect in connections between parents and school increase parental engagement are associated with pupil academic success (Houry et al., 2019).

Previous research has demonstrated that relational trust between the school and parents is constructed through an understanding of mutual goals and efforts established upon a sense of mutual obligation (Darling-Hammond et al, 2019) and that discussion and discourse between home and schools strengthen parental trust, leading to increased parent engagement (Houry et al., 2019).

Study participants confirmed that the trusted relationships they had built with parents, and the positive outcomes observed by parents of children engaged with the Hamish & Milo Programme, enhanced the sense of trust between home and school. Increased trust allowed opportunities for more in-depth discussions, and enabled parents to feel more able to seek support.

The children's enthusiasm for, and enjoyment of, participation in the Hamish & Milo sessions facilitated discussions in the home and some parents reported implementing strategies and learning experienced by their children successfully at home.

Pupils participating in the Hamish & Milo Programme were identified as being 'vulnerable' by school staff and were referred for support for a range of needs including, SEMHD (e.g. anxiety, dysregulated behaviour, etc.); SEND; children looked after; children with caring responsibilities, children in need with child protection plans; bereavement and other trauma. The links between adverse and traumatic experiences, deprivation, and poverty in childhood are complex, but there is growing evidence of the association between these risk factors and how the 'clustering' of them negatively impacts the lives of the most vulnerable CYP (Camacho and Henderson, 2022).

Previous research has demonstrated that to address these factors at the school level, any intervention must include working with vulnerable children and supporting their families, to provide the protective factors which are needed support them in reducing the risks and mitigating the harms of adversity (Longfield, 2020).

Based on their knowledge of the pupil's circumstances and needs and using their professional judgement, school leaders, teachers, and pastoral staff felt empowered to select one of the Hamish & Milo Programme emotion themes to address the individual circumstances and needs of each pupil.

The Hamish & Milo Programme provided them with a pre-planned, fully resourced, and comprehensive framework and included lesson plans that were easily adaptable to effectively support the needs of each individual pupil.

The Hamish & Milo Programme promotes the concept of emotionally safe spaces in schools through the establishment of trusted relationships within the school community. Contemporary research in the field of neurobiology shows that emotional and psychological safety is one of the most important aspects of satisfying connections in social relationships (Porges, 2017). A safe environment is also a prerequisite for productive learning (Maslow, 1970) and for positive school engagement.

When pupils feel unsafe at school, they may be less able to focus on learning, may be less likely to attend regularly, and may be more dysregulated, thereby causing peers to feel less safe and able to learn (Lacoe, 2020). A safe, nurturing relationship with a trusted adult is one of the most important protective factors in promoting resilience and overcoming exposure to adversity (Bellis et al., 2018).

Through their warmth and consistency, Hamish & Milo Champions are empowered to create a culture of trust with groups of pupils where everyone is accepted and valued. In this nurturing space, Hamish & Milo Champions encourage and facilitate open communication through discussions and interactions where different experiences and perspectives are welcomed. Through the establishment of trusted relationships with the adult facilitator during sessions, pupils created an additional point of safety outside of the groups, knowing they could seek out the support of the Hamish & Milo Champion whenever necessary.

One of the key methods used within the Hamish & Milo Programme to establish emotional safety, is the use of sock puppets as 'pets' for each of the children participating.

The use of puppets has long been used as an educational tool to animate and communicate key ideas and needs as part of human culture and oral tradition (Fourie, 2009). Using puppets as a tool for developing social and emotional learning has been shown to bolster confidence and communication skills; foster relationships; build connections; and develop a community of learners who are respectful and inclusive (Kröger and Nupponen, 2019).

Research evidence also suggests that participating in shared creative experiences in schools enhances the development of SEL and increases feelings of enjoyment, belonging and wellbeing (Reis et al., 2016) and encourages curiosity, humour, gratitude and tolerance for ambiguity, thereby helping both pupils and teachers to build emotional resilience and to forge deeper connections with one another (Anderson, 2022).

The enjoyment and enthusiasm of pupils who participated in the Hamish & Milo Programme was perceived to be significant in their positive engagement with it. The creative activities and tasks included in the Hamish & Milo Programme - most particularly, the creation and use of sock puppets - were enjoyable and provided opportunities for pupils to share thoughts, ideas, experiences, and reflections and promoted the formation of social connections.

A recent study showed that positivity and closeness experienced by social group members is particularly notable when emotional experiences are communicated within a group and the mutual awareness of experiencing similar emotions results in an alignment of emotional responses between group members (Chung et al., 2024).

The shared emotional experiences during Hamish & Milo sessions enabled pupils to increase their self-awareness, thereby empowering them to self-regulate and show empathy to others within the group.

Practitioners reported that the group interaction and sharing of experiences in the Hamish & Milo sessions also enabled pupils to experience a sense of belonging and validation which reduced anxiety and resulted in them feeling calmer, happier, and more able to thrive outside of the groups and in their classrooms.

Generally, Hamish & Milo groups were considered most effective for optimal involvement and engagement when comprised of small cohorts of between 4-6 children, facilitated by an adult (usually a member of staff trained in pastoral support), although one-to-one individual support using the programme was also found to be effective.

Some research evidence suggests that people see their social experiences as having greater emotional impact than their solitary experiences (Jaremka et al., 2011). Belongingness theory (Baumeister and Leary, 1995) suggests that people develop and maintain fulfilling social relationships to experience a sense of belonging with others and that such relatedness needs are met through social connection with members of their social networks. The interpersonal and interdependent closeness or 'social connectedness' (Lee & Robbins, 1995) formed through shared experiences creates a sense of acceptance, appreciation and ease within the individuals concerned and generates sense of trust and belonging within the social circle or community.

Pupils who attended Hamish & Milo groups established meaningful social connections - between themselves and the Hamish & Milo Champions facilitating the sessions, and amongst each other - regardless of any obvious age differences or similarities and often extended beyond the boundaries of the Hamish & Milo sessions. Examples from practice in the research literature demonstrate that children experience enhanced development of social and emotional skills when placed in groups with peers of different ages (Black, 2022).

In these types of dynamic environments, older children often act as mentors and role models - fostering empathy, patience, and leadership abilities - whilst younger children learn from their interactions with more mature peers, resulting in the encouragement of positive social interactions and the development of strong interpersonal relationships across age ranges (Gedikoglu, 2021).

When pupils' needs were considered carefully in the formation of mixed-aged group cohorts, children were able to form social connections and friendships that extended beyond the Hamish & Milo sessions, as observed by teachers in the wider school environment.

Because cognitive processes are inextricably linked in the brain to emotional processes, in the educational context, social connectedness is especially critical (Chuter, 2020). Whereas in the past the link was considered to have been incidental to learning and cognition, it is now increasingly evident from neuroscientific research that a sense of belonging has a profound effect on the knowledge and skills - whether cognitive or mental and emotional - that pupils can learn, retain, and apply (Benningfield et al., 2015). A sense of community belonging describes the degree to which individuals are, or judge themselves to be, connected to their community and their place within it (Tartaglia, 2006).

For many pupils, the sense of acceptance, care, safety and belonging they experienced as valued members of a Hamish & Milo group enabled them to forge strong bonds and establish a sense of community.

Communities are characterised by frequent interactions leading to the establishment of a network of support wherein its members feel connected to and cared for by those around them through a sense of collective responsibility where each member's wellbeing is prioritised through acts of kindness, compassion and mutual assistance (Treffinger, 2006).

Elements of this conceptualisation of community was evidenced in examples shared by study participants showing how pupils in Hamish & Milo groups developed the social and emotional competencies

needed to support, encourage and demonstrate care for each other, during group activities and outside of the group in the wider school, independently of any intervention from adult facilitators.

The Hamish & Milo Champions were identified as an essential element contributing to the effectiveness of the programme. Although the range of professional training and experience of the Champions varied considerably and was not directly associated with their ability to effectively facilitate the groups, many reported having specialist SEMH support skills and qualifications. From a school leadership perspective, effective implementation of the Hamish & Milo Programme was associated with the Champion's engagement with the supervision and training provided by Hamish & Milo.

Additionally, Hamish & Milo Champions were considered to possess specific personal attributes - including warmth, empathy, trustworthiness, resilience and the ability to establish consistent emotional boundaries - and were often selected by school leaders to facilitate Hamish & Milo groups owing to these qualities. The Hamish & Milo Champions drew from these qualities to form trusted relationships with both pupils, their parents and families.

Available evidence suggests that the quality of social connection does not depend on the number of, or proximity to social group members, or even the frequency of interactions between them, but is rather associated with the positivity and closeness experienced by group members (Chuter, 2020). Corresponding to pupil's positive experiences of the engagement in Hamish & Milo sessions, Hamish & Milo Champions similarly described the benefits and enjoyment of attending virtual peer supervision sessions where they felt welcomed and felt free to reflect and share experiences, ideas and solutions from their practice with colleagues from other settings in varied geographical locations.

Hamish & Milo Champions who regularly attend supervision can be considered as a 'community of practice' (Wenger, 1998), owing to their of a shared common professional interest wherein they engage in joint activities and discussions; offer assistance and share information; build relationships that enable them to learn from each other; and they care for and support each other (Wenger-Trayner and Wenger-Trayner, 2015).

Limitations, and directions for future research

The HMUoBEP study provides practical and valuable insights that contribute towards building an evidence base around the effectiveness of a programme designed to support the development of social and emotional competencies for pupil wellbeing.

Although this study indicated clear positive outcomes for pupils engaging in the programme and descriptive findings described positive benefits for the school community, several limitations relating to the methodology should be considered.

First, as quantitative data was collected from social and emotional competence ratings based solely on teacher reports, including other methods, e.g. classroom observation and parent reports would have increased objectivity. Secondly, the qualitative data presented the perceptions of a limited sample size of pastoral practitioners, which may have resulted in some sampling bias.

Recruiting a larger sample size that includes study participants with more varied roles and responsibilities, including school leaders, would have enhanced the findings of the study.

This study involved the analysis of quantitative data measures to explore whether the Hamish & Milo Programme is associated with the change in a range of pupil outcomes and additionally utilised qualitative data to explore whether school staff link pupils' experiences and their own to these (and other) changes.

Given the contexts around providing an intervention designed to meet the needs of pupils, a decision was made to not withhold the intervention for the purposes of providing a control group (at the time). Subsequently, we plan to identify whether evaluation funding may be possible to introduce a comparison group, which will be useful to explore the counterfactual question and to isolate and explore other factors that may have impacted pupil outcomes.

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 were 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 schools 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.

Conclusion

Over a two-year implementation period, the research objectives of the Hamish & Milo University of Bath Evaluation Project aimed to understand the development of social and emotional competencies for wellbeing amongst partnership schools from across the UK through the implementation of the Hamish & Milo Wellbeing Programme; and to explore the intended outcomes of the Programme, to gain an understanding of its contribution in enhancing schools' capacity to support pupils' SEMH outcomes.

The emerging findings are positive and have shown that there is a consistency of evaluation outcomes across the two phases of the work, with results demonstrating 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, findings from the qualitative data set during Phase 2 of the project showed that a wide range of children 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.

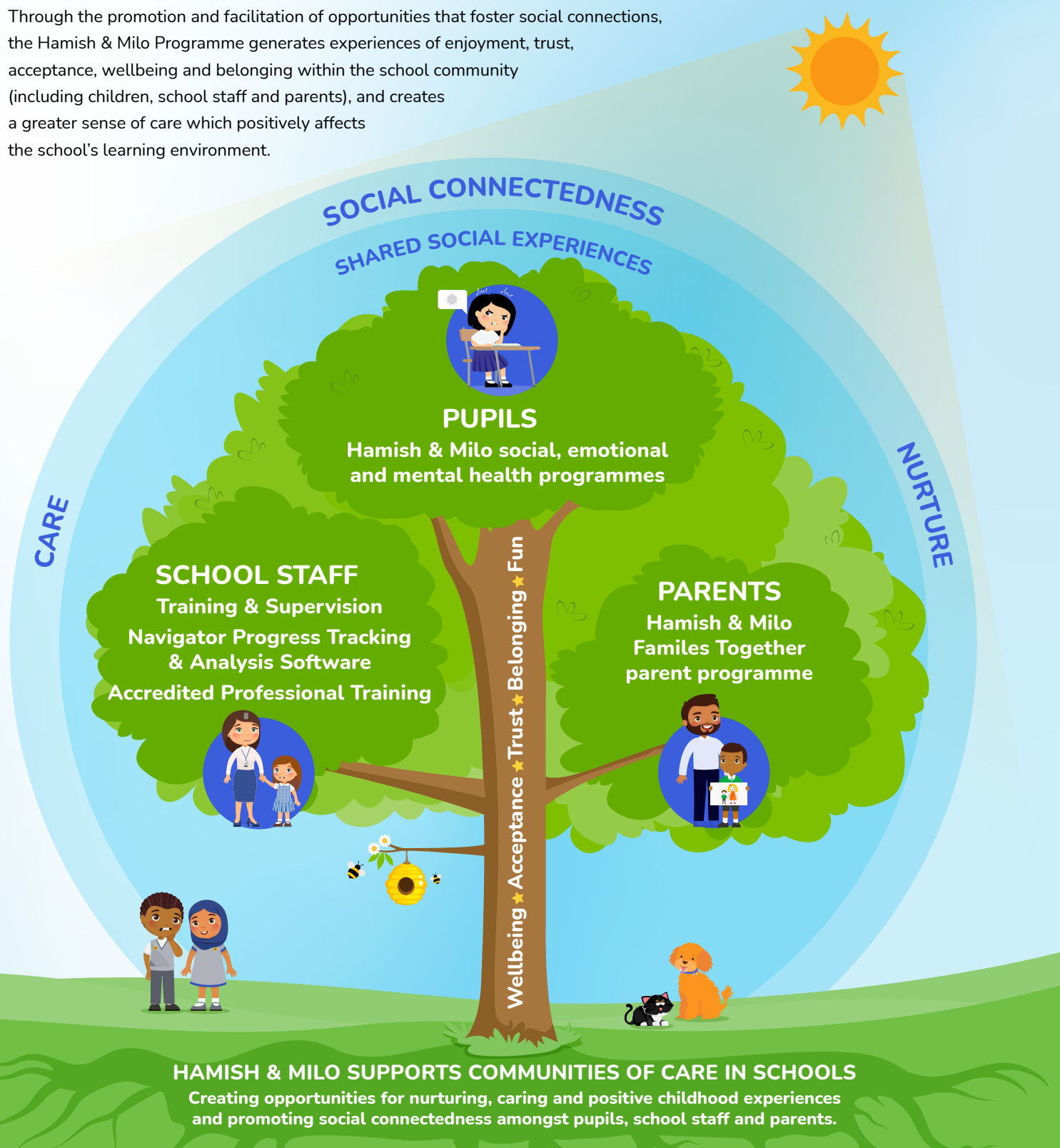
Additionally, findings from qualitative data gathered during Phase 2 of the project, comprising the perspectives and experiences of school staff, indicated that positive outcomes were reported by school leaders, teachers, pastoral practitioners and parents after engagement with the Hamish & Milo Programme. Some of these outcomes are summarised below:

- ✔ **Pupils '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.
- ✔ **Pupil's social and emotional skills improved** - their self-awareness, resilience, and self-regulation increased so they were able to experience more empathy and build stronger, long-lasting social connections.
- ✔ **Pupil's wellbeing improved** - they were happier, calmer, more positive and were thriving.
- ✔ **Pupil's academic learning improved** - some pupils developed a more positive attitude towards learning and became more independent, which was reflected in the classroom.
- ✔ **Parents noticed the changes in their children** and reported the positive impacts they were seeing at home.
- ✔ **School leaders noticed a decrease in escalations** of dysregulated behaviour and a reduction in exclusions.
- ✔ The positive impact for pupils and staff was **noticed across the school**.

Hamish & Milo promotes social connectedness

Insights provided by pastoral practitioners facilitating the Hamish & Milo Programme in schools indicated that the Hamish & Milo Programme promotes social connectedness through shared social experiences throughout the school community, positively impacting pupils, school staff, and parents.

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.



Qualitative data analysis - interviews

Data analysis vignettes

Vignettes are brief descriptions, rooted in empirical data findings and constructed during data analysis (Klotz et al. 2022). 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.

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 HMUoBP

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!

Vignette 7

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.

Vignette 8

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.



Acknowledgements

Participating schools and trusts

We extend sincere gratitude to all the schools and organisations that participated in Phase 2 of this research study.

Ash Grove Primary Academy
ashgrove.ipmat.co.uk

Inspire Partnership
Multi-Academy Trust
ipmat.co.uk

Bardfield Academy
bardfieldacademy.org

Barley Lane Primary School
barleylane.redbridge.sch.uk

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

Beechwood Junior School
beechwoodjuniorschool.co.uk

Broadmayne First School
broadmayne.dorset.sch.uk

Broomhill Junior School
broomhill-jun.bristol.sch.uk

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

Castle Hill St Philip's C.E.
Primary School
castlehill.wigan.sch.uk

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

Cheselbourne Village School
cheselbourne.dorset.sch.uk

Clore Tikva Primary School
cloretikva.redbridge.sch.uk

Colehill First School
colehillfirstschool.org

Damers First School
damers.dorset.sch.uk

Delce Academy
inspiredelce.co.uk

Dunstable Icknield Lower School
dunstableicknield.co.uk

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

Essex Virtual Schools
essex.gov.uk

Harefield Primary School
harefieldprimaryschool.net

Harold Court Primary School
haroldcourt.org.uk

Hayeswood First School
hayeswoodfirstschool.org

Headcorn Primary School
headcorn.kent.sch.uk

Hempstead Schools Federation
hempsteadschools federation.org.uk

Holymead Primary School
holymeadp.bristol.sch.uk

Holy Trinity National School
holytrinity.ie

Holy Trinity CofE Primary School
holytrinitycofe.org.uk

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

Laleham Gap School
lgs.kent.sch.uk

Livingstone Road Primary Federation
livingstoneprimary.org

Lubbins Park Primary
lubbinspark.essex.sch.uk

Lytchett Matravers Primary School
lmps.dorset.co.uk

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

Manor Junior School
manorjunior.co.uk

Medway Virtual School
medway.gov.uk

Milborne St Andrew First School
milborne.wessex.ac

Minerva Primary
minervaprimarieschool.co.uk

Mountjoy School
mountjoy.dorset.sch.uk

Muscliff Primary School
muscliffprimary.co.uk

New Road Primary School
newroad.medway.sch.uk

Old Sarum Primary School
oldsarum.wilts.sch.uk

Parkwood Academy
parkwood-academy.org

Percy Shurmer Academy
percysurmeracademy.org

Redbridge Virtual Schools
redbridge.gov.uk

Ripple Primary School
rippleprimary.co.uk

Rowanfield Junior School
rowanfieldjuniorschool.org.uk

Rowanfield Infant School
rowanfieldinfant.co.uk

Saxon Way Primary School
saxonway-gst.org

Sevenoaks Primary School
sevenoaks.kent.sch.uk

Shirley Infant School
shirleyschools.co.uk

Southville Primary School
southville.bristol.sch.uk

Southwood Primary School
southwoodprimary.co.uk

South Essex Academy Trust
seacademytrust.co.uk

Springside Primary School
springsideprimary.co.uk

St Anne's Infants' School
stannesinfants.co.uk

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

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

Thornhill Primary School
thornhillsch.net

Tithe Farm Primary School
tithefarmprimary.co.uk

Totternhoe CE Academy
totternhoe.beds.sch.uk

Uphall Primary School
uphallprimary.co.uk

Victoria Road Primary School
victoriaroadprimary.uk

Waycroft Academy
waycroftacademy.com

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

West Town Lane Academy
wtlacademy.bristol.sch.uk

Westover Primary School
westoverprimary.co.uk

Wicklea Academy
wickleaacademy.com

Wimborne First School
wimbornefirst.dorset.sch.uk

William Ford C of E Junior School
williamfordschool.co.uk

William Read Primary Academy
williamread.essex.sch.uk

Winter Gardens Academy
wintergardensacademy.org

Woodlands Academy
woodlandsacademybristol.com

Wordsworth Primary School
wordsworthprimary.co.uk

And last, but by no means least, a heartfelt thank you to our truly wonderful, dedicated, and passionate team members - Dave Grey, Donna Holgate, Sam Isham and Kate Waddicor - each of whom played a vital role in this extensive project.

References

- Adolphs, R. (2009). The Social Brain: Neural Basis of Social Knowledge. *Review of Psychology*, 60, 693-716. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2588649/>
- Ainsworth, M. D. S., Blehar, M. C., Waters, E., & Wall, S. (1978). Patterns of attachment: A psychological study of the strange situation. Lawrence Erlbaum.
- Alemdar, M., & Anilan, H. (2020). The Development and Validation of the Emotional Literacy Skills Scale. *International Journal of Contemporary Educational Research*, 7(2), 258-270. <https://dergipark.org.tr/en/download/article-file/1168732>
- Anderson, R. C. (2022, 24th February). How Does Creativity Connect to Social and Emotional Skills for Greater Well-Being in School? <https://casel.org/blog/how-does-creativity-connect-to-social-and-emotional-skills-for-greater-well-being-in-school/>
- Andrews, J., Robinson, D., & Hutchinson, J. (2017). Closing the Gap? Trends in Educational Attainment and Disadvantage. https://epi.org.uk/wp-content/uploads/2017/08/Closing-the-Gap_EPI-.pdf
- Anfara, V. (2014). *Theoretical Frameworks in Qualitative Research* (2nd ed ed.). SAGE.
- Anna Freud Centre. (2024). School Attendance and Mental Wellbeing. file:///C:/Users/middl/Downloads/School%20attendance%20and%20mental%20wellbeing%202024.pdf
- Anna Freud National Centre for Children and Families. (2025). Whole-school Approach. <https://www.mentallyhealthyschools.org.uk/whole-school-approach/>
- Apps, J., Christie, S., Rogers, R., Ali, Z., & Cowie, C. (2019). Parent Participation Framework: Report for Parentkind. <https://www.parentkind.org.uk/assets/resources/Parentkind-Parent-Participation-Framework-Report-March-2019.pdf>
- Baker, J. A., Bridger, R., Terry, T., & Winsor, A. (2019). Schools as Caring Communities: A Relational Approach to School Reform. *School Psychology Review*, 26(4), 586-602. <https://www.tandfonline.com/doi/abs/10.1080/02796015.1997.12085888>
- Barry, M., M. Clarke, A., Mary, & Dowling, K. (2017). Promoting social and emotional well-being in schools. *Health Education*, 117(5), 434-451. https://www.researchgate.net/profile/Margaret-Barry-2/publication/317834703_Promoting_social_and_emotional_well-being_in_schools/links/59f99dc4458515547c26c9ab/Promoting-social-and-emotional-well-being-in-schools.pdf
- Battistich, V., Solomon, D., Watson, M., & Schaps, E. (1997). Caring School Communities. *Educational Psychologist*, 32(3), 137-151. https://www.researchgate.net/publication/233346529_Caring_School_Communities
- [BERA], B. E. R. A. (2024). *Ethical Guidelines for Educational Research* (5th ed ed.) <https://www.bera.ac.uk/researchers-resources/publications/ethical-guidelines-for-educational-research-2018>
- Baumeister, R. F., & Leary, M. R. (1995). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. *Psychological Bulletin*, 117(3), 497-529. <https://doi.org/10.1037/0033-2909.117.3.497>
- Bellis, M. A., Hughes, K., Ford, K., & al, e. (2014). National household survey of adverse childhood experiences and their relationship with resilience to health-harming behaviours in England. *BMC Med*, 12(1).
- Bellis, M. A., Hughes, K., Ford, K., Hardcastle, K. A., Sharp, C. A., Wood, S., & Davies, A. (2018). Adverse childhood experiences and sources of childhood resilience: A retrospective study of their combined relationships with child health and educational attendance. *BMC Public Health*, 18(1), 1-12. https://doi.org/10.1300/J007v19n02_1
- Bellis, M. A., Wood, S., Hughes, K., Quigg, Z., & Butler, N. (2023). Tackling Adverse Childhood Experiences (ACES): State of the Art and Options for Action. <https://phwww.hocc.co.uk/wp-content/uploads/2023/03/2023-01-state-of-the-art-report-eng.pdf>
- Benningfield, M. M., Potter, M. P., & Bostic, J. Q. (2015). Educational Impacts of the Social and Emotional Brain. *Child and Adolescent Psychiatric Clinics*, 24(2), 261-275.
- Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood Experiences Levels. *JAMA Paediatrics*, 173(11). <https://pubmed.ncbi.nlm.nih.gov/31498386/>
- Bhandari, P. (2023). What is effect size and why does it matter? (Examples). Knowledge Base. <https://www.scribbr.co.uk/stats/effect-sizes/>
- Black, N. (2022). Effects of a Nontraditional Multi-Age Learning Environment on Academic and Social Emotional Learning: A Case Study School of Education and Leadership Student (Publication Number 4550) [Capstone Theses and Dissertations, Hamline University]. https://digitalcommons.hamline.edu/hse_all/4550
- Bond, C., Munford, L., Birks, D., Shobande, O., Denny, S., Hatton-Corcoran, S., Qualter, P., Wood, M. L., & al, e. (2024). A country that works for all children and young people: An evidence based plan for improving school attendance. https://www.n8research.org.uk/media/CotN_Attendance_Report_10.pdf
- Bowlby, J. (1978). Attachment theory and its therapeutic implications. *Adolescent Psychiatry*, 6, 5-33. <https://psynet.apa.org/record/1982-00026-001>
- Braun, V., & Clarke, V. (2022). *Thematic Analysis: A Practical Guide*. SAGE.
- Bronfenbrenner, U. (1979). *The Ecology of Human Development: Experiments by Nature and Design*. Cambridge University Press.
- Byrne, D. (2021). A worked example of Braun and Clarke's approach to reflexive thematic analysis. *Quality & Quantity*, 54, 1391-1412. <https://link.springer.com/article/10.1007/s11135-021-01182-y>
- Camacho, S., & Henderson, S. C. (2022). The Social Determinants of Adverse Childhood Experiences: An Intersectional Analysis of Place, Access to Resources, and Compounding Effects. *International Journal of Environmental Research and Public Health*, 19(17). <https://doi.org/10.3390/ijerph191710670>
- CASEL. (2020). CASEL's SEL Framework: What are the core competence areas and where are they promoted? <https://casel.org/casel-sel-framework-11-2020/>

CASEL. (2025). State Resource Center: Evidence-based programs. Collaborative for Academic, Social, and Emotional Literacy. <https://casel.org/state-resource-center/evidence-based-programs/>

Centre for Young Lives. (2024). Too Skint for School: Breaking the Link between Poverty and Attendance. https://cdn.prod.website-files.com/65b6b3c3bd2e7d160db2dbc0/6749a0f54b2bfb3ef7f498b5_TSF%20Final%20-%20Gen%20%20Group%20Mail.pdf

Child Poverty Action Group. (2024). New official data shows 900,000 children in poverty don't qualify for free school meals under national policy. News. <https://cpag.org.uk/news/new-official-data-shows-900000-children-poverty-dont-quality-free-school-meals-under-national-policy>

Children's Commissioner. (2021). The state of children's mental health services 2020/21.

Children's Commissioner. (2023). Children's Mental Health Services 2021-22. <https://assets.childrenscommissioner.gov.uk/wpuploads/2023/03/Childrens-Mental-Health-Services-2021-2022-2.pdf>

Children's Commissioner. (2024a). Children Missing Education: The Unrolled Story. <https://assets.childrenscommissioner.gov.uk/wpuploads/2024/09/Children-Missing-Education-The-Unrolled-Story.pdf>

Children's Commissioner. (2024b). Lost in transition? The destinations of children who leave the state education system. C. s. Commissioner. <https://www.childrenscommissioner.gov.uk/resource/lost-in-transition/>

Chollet, D., Turner, A., Marquez, J., O'Niell, J., & Moore, L. (2024). The Good Childhood Report 2024. T. C. s. Society. <https://www.childrenssociety.org.uk/sites/default/files/2024-08/Good%20Childhood%20Report-Main-Report.pdf>

Chung, V., Mennella, R., Pacherie, E., & Grezes, J. (2024). Social bonding through shared experiences: the role of emotional intensity. Royal Society Open Science, 11(10). <https://doi.org/10.1098/rsos.240048>

Chuter, C. (2020). The Importance of Social Connections in Schools. The Education Hub. Retrieved 19th February 2024, from <https://theeducationhub.org.nz/social-connection/>

Clark, A., E., Flèche, S., Layard, R., Powdthavee, N., & Ward, G. (2019). The Origins of Happiness: The Science of Well-Being over the Life Course. Princeton University Press.

Cohen, J. (1960). A Coefficient of Agreement for Nominal Scales. Educational and Psychological Measurement, 20(1). <https://journals.sagepub.com/doi/10.1177/001316446002000104>

Cohen, L., Manion, L., & Morrison, K. (2018). Research Methods in Education (8th ed ed.). Routledge.

Coleman, J. S. (1988). Social capital in the creation of human capital. American Journal of Sociology, 94, 95-120.

Cordis Bright. (2017). Defining child vulnerability: Definitions, frameworks and groups (Technical Paper 2 in Children's Commissioner project on vulnerable children, Issue. C. s. C. f. England. <https://assets.childrenscommissioner.gov.uk/wpuploads/2017/07/CCO-TP2-Defining-Vulnerability-Cordis-Bright-2.pdf>

Crenna-Jennings, W., & Hutchinson, J. (2020). Access to child and adolescent mental health services in 2019. <https://dera.ioe.ac.uk/id/eprint/34811>

Cresswell, J. (2017). Research Design: Qualitative, Quantitative, and Mixed Methods Approaches (3rd edition ed.). SAGE Publications. https://www.ucg.ac.me/skladiste/blog_609332/objava_105202/fajlovi/Creswell.pdf

CYPMHCH. (2019). Overshadowed: The mental health needs of children and young people with learning difficulties. <https://cypmhc.org.uk/wp-content/uploads/2019/11/Overshadowed.pdf>

CYPMHCH. (2023). Children and Young People's Mental Health: An independent review in policy success and challenges over the last decade. Children & Young People's Mental Health Coalition & L. G. Association. <https://cypmhc.org.uk/wp-content/uploads/2023/06/Review-of-CYP-Mental-Health-Policy-Final-Report.-2023.pdf>

Darling-Hammond, L., Flook, L., Cook-Harvey, C., Barron, B., & Osher, D. (2019). Implications for educational practice of the science of learning and development. Applied Developmental Science, 24(2), 97-140. <https://doi.org/10.1080/10888691.2018.1537791>

Denscombe, M. (2014). The Good Research Guide (4th edition ed.). Open University Press.

Department for Education. (2015a). Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges on Safeguarding Children and Safe Recruitment. <https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

Department for Education. (2015b). Special Educational Needs and Disability Code of Practice: 0-25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities. https://assets.publishing.service.gov.uk/media/5a7dcb85ed915d2ac884d995/SEND_Code_of_Practice_January_2015.pdf

Department for Education. (2018). Mental Health and Behaviour in Schools. https://assets.publishing.service.gov.uk/media/625ee6148fa8f54a8bb65ba9/Mental_health_and_behaviour_in_schools.pdf

Department for Education. (2021a). Personal, social, health and economic education. GOV.UK. <https://www.gov.uk/government/publications/personal-social-health-and-economic-education-pshe/personal-social-health-and-economic-pshe-education>

Department for Education. (2021b). Research and analysis: Pupils' progress in the 2020 to 2022 academic years. Retrieved from GOV. UK <https://www.gov.uk/government/publications/pupils-progress-in-the-2020-to-2022-academic-years>

Department for Education. (2024a). Academic Year 2023/24: Schools, pupils and their characteristics. <https://explore-education-statistics.service.gov.uk/find-statistics/school-pupils-and-their-characteristics>

Department for Education. (2024b). Reporting Year 2024: Education, health care plans. Retrieved from <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans>

Department for Education. (2024c). Special educational needs in England: Academic year 2023/24. Department for Education. <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england>

Department for Education. (2024d). Support Staff Body Reinstated <https://www.gov.uk/government/news/school-support-staff-body-reinstated>

- Department of Health, & Department for Education. (2017). Transforming Children and Young People's Mental Health Provision: A Green Paper. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664855/Transforming_children_and_young_people_s_mental_health_provision.pdf
- Diener, E., Lucas, R. E., & Oishi, S. (2002). Subjective Well-Being: The Science of Happiness and Life Satisfaction. In C. Snyder, R. & S. Lopez, J (Eds.), *Handbook of Positive Psychology* (pp. 463-473). Oxford University Press. https://greatergood.berkeley.edu/images/uploads/Diener-Subjective_Well-Being.pdf
- Domitrovich, C. E., Durlak, J. A., Staley, K. C., & Weissberg, R. P. (2017). Social-Emotional Competence: An Essential Factor for Promoting Positive Adjustment and Reducing Risk in School Children. *Child Development*, 88(2), 408-416. <https://doi.org/10.1111/cdev.12739>
- Drew, A. L., Rhoades, K. A., Eddy, J. M., Smith Slep, A. M., Kim, T. E., & Currie, C. (2024). What do parents know about social-emotional learning in their children's schools? Gaps and opportunities for strengthening intervention impact. *Social and Emotional Learning: Research, Practice, and Policy*, 4. <https://doi.org/10.1016/j.sel.2024.100065>
- Dunbar, R. I. M. (2009). The social brain hypothesis and its implications for social evolution. *Annals of Human Biology*, 36(5), 562-572. <https://www.psy.ox.ac.uk/publications/295994>
- Durlak, J. A., Weissberg, R. P., Dymneci, A. B., Taylor, R. D., & Shellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: a meta-analysis of school-based universal interventions. *Child Development*, 82(1), 405-432. <https://library.bsl.org.au/jspui/bitstream/1/3563/1/Impact%20of%20enhancing%20students%20social%20and%20emotional%20learning.pdf>
- Early Intervention Foundation. (2015). Social and Emotional Learning: Skills for Life and Work. file:///C:/Users/middl/Downloads/social-and-emotional-learning-skills-for-life-and-work.pdf
- Early Intervention Foundation. (2020). Child Outcomes Measure: Strength and Difficulties Questionnaire (SDQ). file:///C:/Users/middl/Downloads/measure-report-child-sdq.pdf
- Education Endowment Foundation. (2021). Improving Social and Emotional Learning in Primary Schools: Guidance Report. https://d2tic4wvo1iusb.cloudfront.net/production/eef-guidance-reports/primary-sel/EEF_Social_and_Emotional_Learning.pdf?v=1728829494
- Erikson, E. (1980). Identity and the Life Cycle. W. W. Norton & Company.
- Faupel, A. (Ed.). (2003). Emotional Literacy Assessment and Intervention Ages 11-16. GL Assessment.
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventative Medicine*, 14(4), 245-258. <https://www.sciencedirect.com/science/article/abs/pii/S0749379798000178>
- Finning, K., Ukoumunne, O. C., Ford, T., Danielson-Waters, E., Shaw, L., Romero De Jager, I., & Moore, D. A. (2019). The association between anxiety and poor attendance at school—a systematic review. *Child and Adolescent Mental Health*, 24(3), 205-216. <https://acamh.onlinelibrary.wiley.com/doi/abs/10.1111/camh.12322>
- Fischer, K. W., & Bidell, T. R. (2006). Dynamic development of action and thought and emotion. In R. M. Lerner & W. Damon (Eds.), *Theoretical Models of Human Development. Handbook of Child Psychology* (6th ed ed., Vol. 1, pp. 313-399). John Wiley & Sons.
- Fledderjohan, J., Erlam, J., Knowles, B., & Broadhursts, K. (2021). Mental Health and Care Needs of British Children and Young People Aged 6-17. *Children and Youth Services Review*, 126(106033). [https://www.sciencedirect.com/science/article/pii/S0190740921001122#:~:text=The%20survey%20found%20that%201,\(NHS%20Digital%2C%202020\).](https://www.sciencedirect.com/science/article/pii/S0190740921001122#:~:text=The%20survey%20found%20that%201,(NHS%20Digital%2C%202020).)
- Fourie, A. (2009). Pupperty as An Educational Tool: An Explanatory Study On the Perceptions of Foundation Phase Educators and Learners Tshwane University of Technology]. https://www.researchgate.net/publication/313881429_PUPPETRY_AS_AN_EDUCATIONAL_TOOL_AN_EXPLORATORY_STUDY_ON_THE_PERCEPTIONS_OF_FOUNDATION_PHASE_EDUCATORS_AND_LEARNERS
- Frydman, J. S., & Mayor, C. (2017). Trauma and Early Adolescent Development: Case Examples from a Trauma-Informed Public Health Middle School Program. *Children & Schools*, 39(4), 238-247. <https://academic.oup.com/cs/article/39/4/238/4091324>
- Funnell, S., C., & Rogers, P., J. (2011). Purposeful Program Theory: Effective Use of Theories of Change and Logic Models (1st Edition ed.). Jossey-Bass.
- Gaffney, H., Farrington, D. P., & White, H. (2021). Interventions to prevent school exclusion: Toolkit Technical Report. <https://youthendowmentfund.org.uk/wp-content/uploads/2021/06/School-exclusions-technical-report-june.pdf>
- Gage, N., MacSuga-Gage, A., Crawley, W., & Morse, T. E. (2023). Defining learning loss in relation to the Covid-19 pandemic. Preventing School Failure: Alternative Education for Children and Youth, 67(13), 121-126. <https://www.tandfonline.com/doi/full/10.1080/1045988X.2023.2204826>
- Gedikoglu, M. (2021). Social and Emotional Learning: An evidence review and synthesis of key issues. <https://epi.org.uk/wp-content/uploads/2021/11/SEL-paper-Nov2021-EPI.pdf>
- Gill, K., Brown, S., O'Brien, C., Jenny Graham, J., & Poku-Amanfo, E. (2024). Who is losing learning? The case for reducing exclusions across mainstream schools. <https://www.ippr.org/articles/who-is-losing-learning>
- Goleman, D. (1996). Emotional Intelligence: Why It Can Matter More than IQ. Bloomsbury.
- Goodman, A., Joshi, H., Nasim, B., & Tyler, C. (2015). Social and emotional skills in childhood and their long-term effects on adult life. <https://www.eif.org.uk/report/social-and-emotional-skills-in-childhood-and-their-long-term-effects-on-adult-life>
- Goodman A., Lamping D. L., & Ploubidis G. B. (2010). When to use broader internalising and externalising subscales instead of the hypothesised five subscales on the strengths and difficulties questionnaire (SDQ): Data from British parents, teachers and children. *Journal of Abnormal Child Psychology*, 38(8), 1179-1191. https://researchonline.lshtm.ac.uk/id/eprint/3300/1/sa2010Goodman_SDQstructure.pdf
- Goodman, R. (1997). The Strengths and Difficulties Questionnaire: A Research Note. *Journal of Child Psychology and Psychiatry*, 38, 581-586.

- GOV.UK. (2023, 6 February). Why is school attendance important and what support is available? The Education Hub. <https://educationhub.blog.gov.uk/2023/09/what-are-ghost-children-and-why-is-school-attendance-important/>
- GOV.UK. (2024). Suspensions and Permanent Exclusions in England. Retrieved from <https://explore-education-statistics.service.gov.uk/find-statistics/suspensions-and-permanent-exclusions-in-england>
- Graziano, P., A., Reavis, R., D., Keane, S., P., & Calkins, S., D. (2007). The Role of Emotion Regulation and Children's Early Academic Success. *Journal of School Psychology*, 45(1), 3-19. <https://doi.org/10.1016/j.jsp.2006.09.002>
- Green, H., McGinnity, A., Meltzer H, Ford, T., & Goodman, R. (2005). Mental health of children and young people in Great Britain (O. f. N. Statistics, Ed.). Palgrave Macmillan. <https://doc.ukdataservice.ac.uk/doc/5269/mrdoc/pdf/5269technicalreport.pdf>
- Gregory, A. (2024). NHS referrals for anxiety in children more than double pre-Covid levels. https://www.theguardian.com/society/article/2024/aug/27/nhs-referrals-for-anxiety-in-children-more-than-double-pre-covid-levels-england?CMP=Share_iOSApp_Other
- Guetterman, T., C, Molina-Azorin, J., F, & Fettes, M., D. (2020). Virtual Special Issue on "Integration in Mixed Methods Research". *Journal of Mixed Methods Research*, 14(4). <https://journals.sagepub.com/doi/10.1177/1558689820956401>
- Halligan, C., & Cryer, S. (2022). Emotionally Based School Avoidance (EBSA): Students' Views of What Works in a Specialist Setting. *Continuity in Education*, 18(3), 13-24. <https://pmc.ncbi.nlm.nih.gov/articles/PMC11104314/pdf/cie-3-1-38.pdf>
- Han, D., Dieujeste, N., Doom, J. R., & Narayan, A. J. (2023). A systematic review of positive childhood experiences and adult outcomes: Promotive and protective processes for resilience in the context of childhood adversity. *Child Abuse & Neglect*, 144. <https://doi.org/10.1016/j.chiabu.2023.106346>
- Harding, T., S, & Whitehead, D. (Eds.). (2013). *Analysing data in qualitative research* (5th ed ed.). Elsevier.
- Harris, A., & Goodall, J. (2008). Do parents know they matter? Engaging all parents in learning. *Educational Research*, 50(3), 277-289. <https://doi.org/doi:10.1080/00131880802309424>
- Harrison, M., Chatelier, S., & Van dermijnsbrugge, E. (2021). Wellbeing, Relationships, and Teaching as a Caring Profession? *The International Educator*. <https://www.tieonline.com/article/2925/wellbeing-relationships-and-teaching-as-a-caring-profession>
- Helliwell, J., F., Layard, R., Sachs, J., D., De Neve, J.-E., Akin, L., B. & Wang, S. (2024). *World Happiness Report 2024*. U. o. O. W. R. Centre. <https://happiness-report.s3.amazonaws.com/2024/WHR+24.pdf>
- Heyne, D., & Rollings, S. (2002). *School Refusal*. Blackwell.
- Houri, A. K., Thayer, A. J., & Cook, C. R. (2019). Targeting parent trust to enhance engagement in a school-home communication system: A double-blind experiment of a parental wise feedback intervention. *School Psychology*, 34(4), 421-432. <https://doi.org/10.1037/spq0000318>
- House of Commons Health and Social Care Committee. (2021). *Children and Young People's Mental Health: Eighth Report of Session 2021-22*. Westminster: Parliamentary House of Commons Retrieved from <https://committees.parliament.uk/publications/8153/documents/170201/default/>
- Howes, S., Monk-Winstanley, R., Sefton, T., & Woudhuysen, A. (2020). Poverty in the pandemic: The impact of coronavirus on low-income families and children. <https://cpag.org.uk/sites/default/files/2023-08/Poverty%20in%20the%20pandemic-%20The%20impact%20of%20coronavirus%20on%20low-income%20families%20and%20children.pdf>
- Howitt, D., & Cramer, D. (2008). *Introduction to Research Methods in Psychology* (2nd ed ed.). Pearson Education Limited.
- Hutchinson, J., Reader, M., & Akhal, A. (2020). *Education in England: Annual Report 2020*. <https://epi.org.uk/publications-and-research/education-in-england-annual-report-2020/>
- Jaremka, L. M., Gabriel, S., & Carvallo, M. (2011). What makes us feel the best also makes us feel the worst: The emotional impact of independent and interdependent experiences. *Self and Identity*, 10, 44-63.
- Jaspers-van der Maten, M., & Rommes, E., W, M. (2024). Early Identification of Social, Emotional, and Behavioral Difficulties in Primary Schools: Explanations for Special Educational Needs Coordinators' Different Practices. *School Mental Health*. <https://doi.org/https://doi.org/10.1007/s12310-024-09690-6>
- Joiner, R., Waddicor, A., Williams, C., Middleton, A., Clarke, P., Harris, S., & Ellis, M. (2023). *University of Bath Research Study with Hamish & Milo: The Emerging Evidence*. H. Milo.
- Jordan, J. V. (2017). Relational-Cultural Theory: The Power of Connection to Transform Our Lives. *Journal of Humanistic Counseling*, 56(3), 228-243. <https://doi.org/10.1002/johc.12055>
- Jordan, J. V., & Hartling, L. M. (2008). The Development of Relational-Cultural Theory. https://www.researchgate.net/publication/247836552_The_Development_of_Relational-Cultural_Theory
- Joseph Rowntree Foundation. (2023). *UK Poverty 2023*. <https://www.jrf.org.uk/uk-poverty-2023-the-essential-guide-to-understanding-poverty-in-the-uk>
- Kallitsoglou, A. (2020). Implementation of Evidence-Based Practices for Early Childhood Social Learning: A Viewpoint on the Role of Teacher Attitudes. *Journal of Children's Services*, 15(2), 61-74. <https://doi.org/10.1108/JCS-04-2019-0022>
- Kallitsoglou, A., & Mahmud, A. (2023). Teacher attitudes towards evidence-based practices for social, emotional and mental health difficulties in school and association with teacher academic research engagement. *Emotional & Behavioural Difficulties*, 28(4), 263 - 281. <https://doi.org/10.1080/13632752.2023.2276024>
- Kilgour, L., Matthews, N., Christian, P., & Shire, J. (2015). Health Literacy in Schools: Prioritising Health and Well-being Issues Through the Curriculum. *Sport, Education and Society*, 20(4), 485-500. <https://eprints.glos.ac.uk/1297/1/1297-Kilgour-%282015%29-Health-literacy-in-schools.pdf>
- King, N., & Bernstein, G. (2001). School refusal in children and adolescents: A review of the past 10 years. *Journal of American Academy of Child Adolescent Psychiatry*, 40(2), 197-205. <https://doi.org/DOI: 10.1097/00004583-200102000-00014>
- Kröger, T., & Nupponen, A.-M. (2019). Puppets as a Pedagogical Tool: A Literature Review. *International Electronic Journal of Elementary Education*, 11(4), 393-401. <https://files.eric.ed.gov/fulltext/EJ1212334.pdf>

La Charite, J., Khan, M., Dudovitz, R., Nuckols, T., Sastry, N., Huang, C., Lei, Y., & Schickendanz, A. (2023). Specific domains of positive childhood experiences (PCEs) associated with improved adult health: A nationally representative study. *SSM Population Health*, 24. <https://www.sciencedirect.com/science/article/pii/S2352827323002239#:~:text=Background,planning%20to%20foster%20PCE%20exposure>.

Lacoe, J. (2020). Too Scared to Learn: The academic consequences of feeling unsafe in the classroom. *Urban Education*, 55(10), 1385-1418. <https://files.eric.ed.gov/fulltext/EJ1265973.pdf>

Lawrence, N. (2020). Supervision in Education - Healthier Schools for All: Barnardo's Scotland Report on the Use of Professional or Reflective Supervision in Education. https://www.barnardos.org.uk/sites/default/files/uploads/Supervision%20in%20Education%20-%20Healthier%20Schools%20For%20All%20-%20Main%20report_0.pdf

Lee, R. M., & Robbins, S. B. (1995). Measuring belongingness: The Social Connectedness and the Social Assurance scales. *Journal of Counseling Psychology*, 42(2), 232-241. <https://doi.org/10.1037/0022-0167.42.2.232>

Lereya, T., & Deighton, J. (2019). Learning from HeadStart: the relationship between mental health and school attainment, attendance and exclusions in young people aged 11 to 14. https://www.ucl.ac.uk/evidence-based-practice-unit/sites/evidence-based-practice-unit/files/headstart_evidence_briefing_3.pdf

Lerner, R. M., & Callina, K. S. (2014). Relational Developmental Systems Theories and the Ecological Validity of Experimental Designs: Commentary on Freund and Isaacowitz. *Human Development*, 56(6), 372-380. <https://karger.com/hde/article/56/6/372/158017/Relational-Developmental-Systems-Theories-and-the>

Longfield, A. (2020, 24th February). Vulnerability and resilience: how ACEs can help us to identify and reduce risks in children's lives. What Works for Children's Social Care. <https://www.eif.org.uk/blog/vulnerability-and-resilience-how-aces-can-help-us-to-identify-and-reduce-risks-in-childrens-lives>

Mainstone-Cotton, S. (2021). Supporting Children with Social, Emotional and Mental Health Needs in the Early Years: Practical Solutions and Strategies for Every Setting. Routledge.

Martin-Denham, S. (2021). Defining, identifying, and recognising underlying causes of social, emotional and mental health difficulties. Thematic analysis of interviews with headteachers in England. *Emotional and Behavioural Difficulties*, 26(2), 187-205. <https://sure.sunderland.ac.uk/id/eprint/13117/1/13117.pdf>

Maslow, A. (1943). Toward a Psychology of Being. Van Nostrand.

Maslow, A. H. (1970). *Motivation and Personality*. Harper & Row.

McLaughlin, K. A., Sheridan, M. A., & Lambert, H. K. (2014). Childhood adversity and neural development: Deprivation and threat as distinct dimensions of early experience. *Neuroscience & Behavioural Reviews*, 47, 579-591.

McManus, M. A., & Ball, E. (2020). Covid-19 should be considered an Adverse Childhood Experience (ACE). *Journal of Community Safety & Wellbeing*, 5(4), 164-167. [file:///C:/Users/midl/Downloads/llhope,+CSWB-5-164%20\(1\).pdf](file:///C:/Users/midl/Downloads/llhope,+CSWB-5-164%20(1).pdf)

Middleton, T. (2018). Working with children with social, emotional and mental health needs in a nurture group setting: the professional and personal impact. *The International Journal of Nurture in Education*, 4, 22-32. https://www.nurtureuk.org/wp-content/uploads/2021/10/IJNE_Volume4_FINAL.pdf

Middleton, T., Rae, T., & Walshe, J. (2020). *Nurturing Peer Supervision: Supporting the wellbeing of those who nurture*. nurtureuk.

Miles, M., B., Huberman, M., A., & Saldana, J. (2014). *Qualitative Data Analysis*. SAGE.

Miller, J. (1986). *Toward a new psychology of women* (2nd ed ed.). Beacon Press.

Moser, C., & Kalton, G. (1977). *Survey Methods in Social Investigation* (2nd ed ed.). Heinemann.

National Literacy Trust. (2025). Covid-19 and literacy: The attainment gap and learning loss. <https://literacytrust.org.uk/information/what-is-literacy/covid-19-and-literacy/covid-19-and-literacy-the-attainment-gap-and-learning-loss/>

National Scientific Council on the Developing Child. (2004). Young Children Develop in an Environment of Relationships: Working Paper No. 1. <https://developingchild.harvard.edu/resources/wp1/>

National Scientific Council on the Developing Child. (2012). Establishing a Level Foundation for Life: Mental Health Begins in Early Childhood: Working Paper 6. <https://harvardcenter.wpenginpowered.com/wp-content/uploads/2008/05/Establishing-a-Level-Foundation-for-Life-Mental-Health-Begins-in-Early-Childhood.pdf>

National Scientific Council on the Developing Child. (2020). Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined: Working Paper No. 15. <https://developingchild.harvard.edu/resources/connecting-the-brain-to-the-rest-of-the-body-early-childhood-development-and-lifelong-health-are-deeply-intertwined/>

Newlove-Delgado, T., Moore, D., Ukoumunne, O. C., Stein, K., & Ford, T. (2015). Mental health related contact with education professionals in the British Child and Adolescent Mental Health Survey 2004. *The Journal of Mental Health Training, Education and Practice*, 10(3), 159-169. <https://doi.org/doi: 10.1108/JMHTEP-02-2015-0007>.

NHS Digital. (2023). Mental Health of Children and Young People in England, 2023 - Wave 4 follow up to the 2017 survey. N. England. <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2023-wave-4-follow-up>

NHS England. (2014). Child and Adolescent Mental Health Services (CAMHS) Tier 4 Report. Retrieved from <https://www.england.nhs.uk/wp-content/uploads/2014/07/camhs-tier-4-rep.pdf>

Noddings, N. (2006). Educational Leaders as Caring Teachers. *School Leadership & Management*, 26(4), 339-345.

NSPCC Learning. (2022). The Impact of Coronavirus (COVID-19) Statistics Briefing. <https://learning.nspcc.org.uk/media/2747/statistics-briefing-impact-of-coronavirus.pdf>

OECD. (2015). *Skills for Social Progress: The Power of Social and Emotional Skills* (OECD Skills Studies, Issue. O. Publishing. OECD (2015), "Skills for social progress: the power of social and emotional skills"

- Orth, U., & Robins, R. W. (2022). Is High Self-Esteem Beneficial? Revisiting a classic question. *American Psychologist*, 77(1), 5-17. <https://psycnet.apa.org/fulltext/2022-48842-002.html>
- Paige, L. Z. (1997). School Phobia, School Refusal, and School Avoidance. In G. G. Bear, K. M. Minke, & A. Thomas (Eds.), *Children's Needs II: Development, Problems and Alternatives* (pp. 339-347). National Association of School Psychologists.
- Payley, B., & Hajal, N. J. (2022). Conceptualizing Emotion Regulation and Coregulation as Family-Level Phenomena. *Clinical Child and Family Psychology Review*, 1, 19-43. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8801237/#CR166>
- Perfect, M. M., Turley, M. R., Carlson, J. S., Yohnna, J., & Saint Gilles, M. P. (2016). School-Related Outcomes of Traumatic Event Exposure and Traumatic Stress Symptoms in Students: A systematic review of research from 1990-2015. *School Mental Health*, 8, 7-43.
- Pitchforth, J., Fahy, K., Ford, T., Wolpert, M., Viner R M, & Hargreaves, D. S. (2019). Mental health and well-being trends among children and young people in the UK, 1995-2014: analysis of repeated cross-sectional national health surveys. *Psychological Medicine*, 49(8), 1275-1285. <https://www.cambridge.org/core/journals/psychological-medicine/article/mental-health-and-wellbeing-trends-among-children-and-young-people-in-the-uk-19952014-analysis-of-repeated-crosssectional-national-health-surveys/AB71DE760C0027EDC5F5CF0AF507FD1B>
- Porche, M. V., Costello, D. M., & Rosen-Reynoso, M. (2016). Adverse family experiences, child mental health, and educational outcomes for a national sample of students. *School Mental Health*, 8, 44-60.
- Porges, S. W. (2017). *The Pocket Guide to The Polyvagal Theory: The Transformative Power of Feeling Safe*. W. W. Norton & Company.
- Public Health, England. (2021). COVID-19 mental health and wellbeing surveillance report. London: Public Health England Retrieved from <https://www.gov.uk/government/publications/covid-19-mental-health-and-wellbeing-surveillance-report/7-children-and-young-people>
- Public Health England. (2020). No Child Left Behind: Understanding and Quantifying Vulnerability. https://assets.publishing.service.gov.uk/media/5f4f72c68fa8f523f4c3c0ed/Understanding_and_quantifying_vulnerability_in_childhood.pdf
- Public Health England, Department for Education, & Children & Young People's Mental Health Coalition. (2021). Promoting children and young people's mental health and wellbeing: A whole school or college approach. London: Public Health England Retrieved from https://assets.publishing.service.gov.uk/media/614cc965d3bf7f718518029c/Promoting_children_and_young_people_s_mental_health_and_wellbeing.pdf
- Pulimeno, M., Pisatelli, P., Colazzo, S., Colao, A., & Miani, A. (2020). Schools as ideal settings to promote health and wellbeing among young people. *Health Promotion Perspectives*, 10(4), 316-324. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7723000/>
- Rae, T. (2012). Developing Emotional Literacy – Approaches for Staff and Students Developing an Approach in the SEBD School. In J. Visser, H. Daniels, & T. Cole (Eds.), *Transforming Troubled Lives: Strategies and Interventions for Children with Social, Emotional and Behavioural Difficulties* (Vol. 2, pp. 1-18). Emerald Group Publishing Limited. [https://doi.org/10.1108/S1479-3636\(2012\)0000002004](https://doi.org/10.1108/S1479-3636(2012)0000002004)
- Rae, T., Cowell, N., & Field, L. (2017). Supporting teachers' well-being in the context of schools for children with social, emotional and behavioural difficulties. *Emotional & Behavioural Difficulties*, 22, 200-218. <https://doi.org/10.1080/13632752.2017.1331969>
- Reis, H. T., O'Keefe, S. D., & Lane, R. D. (2016). Fun Is More Fun When Others Are Involved. *The Journal of Positive Psychology*, 12(6), 547-557. <https://doi.org/10.1080/17439760.2016.1221123>
- Rhee, S., Furlong, M. J., Turner, J. A., & Harari, I. (2001). Integrating strength-based perspectives in psychoeducational evaluations. *California School Psychologist* (6), 5-17.
- Rose, L. T., Rouhani, P., & Fischer, K. W. (2013). The Science of the Individual. *Mind, Brain, And Education*, 7(3), 152-158. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/mbe.12021>
- Royal Foundation Centre for Early Childhood. (2025). The Shaping Us Framework. <https://centreforearlychildhood.org/our-work/research/the-shaping-us-framework/>
- Saldana, J. (2016). *The Coding Manual for Qualitative Researchers*. SAGE.
- Schore. (2015). *Affect Regulation and the Origin of the Self: The Neurobiology of Emotional Development*. Routledge.
- Sege, R. D., & Harper Browne, C. (2017). Responding to ACEs With HOPE: Health Outcomes From Positive Experiences. *Academic Pediatrics*, 17(7S), S79-S85. <https://www.academicpedsjnl.net/action/showPdf?pii=S1876-2859%2817%2930107-9>
- Shafan-Azar, Z., & Bottomley, B. (2024). Not in School: The Mental Health Barriers to School Attendance.
- Sharma, M., Chakraborty, A., & Chatterjee Singh, N. (2024). Measuring teacher beliefs about factors that promote Classroom Social and Emotional Learning (CSEL). *Social and Emotional Learning: Research, Practice, and Policy*, 3. <https://doi.org/10.1016/j.sel.2024.100049>
- Shaw, B., Benardes, E., Trethewey, A., & Menzies, L. (2016). Special Educational Needs and their links to poverty. file:///C:/Users/middl/Downloads/2016_menzies_et_al_report_3184_final.pdf
- Shaw, M., & Audley, J. (2024). The prevalence of school exclusions in the UK, their root causes, and the importance of preventative offerings over reactive interventions: Literature review. <https://d1mdc3nx9zxju4.cloudfront.net/prod/uploads/2024/06/The-prevalence-of-school-exclusions-in-the-UK-Literature-Review-2024.pdf>
- Skipp, A., & Hopwood, V. (2019). Deployment of teaching assistants in schools. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/812507/Deployment_of_teaching_assistants_report.pdf
- Snell, T., Knapp, M., Healey, A., Guglani, S., Evans-Lacko, S., Fernandez, J., & Ford, T. (2013). Economic impact of childhood psychiatric disorder on public sector services. *The Journal of Child Psychology and Psychiatry*, 54(9), 977-985. <https://doi.org/10.1111/jcpp.12055>
- Sobba, K. N. (2019). Correlates and buffers of school avoidance: A review of school avoidance literature and applying social capital as a potential safeguard. *International Journal of Adolescence and Youth*, 24(3), 280-397. <https://doi.org/10.1080/02673843.2018.1524772>

- Steffen, P. R., Hedges, D., & Matheson, R. (2022). The Brain Is Adaptive Not Triune: How the Brain Responds to Threat, Challenge, and Change. *Frontiers in Psychiatry*, 13. <https://www.frontiersin.org/journals/psychiatry/articles/10.3389/fpsy.2022.802606/full>
- Stone, L., L. Otten, R., Engels, R., C M E., Vermulst, A. A. & Janssens, J., M A M. (2010). Psychometric Properties of the Parent and Teacher Versions of the Strengths and Difficulties Questionnaire for 4- to 12-Year-Olds: A Review. *Clinical Child Family Psychology Review*, 13, 254-274. <https://link.springer.com/article/10.1007/s10567-010-0071-2>
- Tartaglia S. (2006). A preliminary study for a new model of sense of community. *Journal of Community Psychology*, 34(1), 25-36. <https://doi.org/10.1002/jcop.20081>
- Taylor, R., D., Oberle, E., Durlak, J., A., & Weissberg, R., P. (2017). Promoting Positive Youth Development Through School-Based Social and Emotional Learning Interventions: A Meta-Analysis of Follow-Up Effects. *Child Development*, 88(4), 1156-1171. <https://doi.org/doi: 10.1111/cdev.12864>
- Teach Now. (2020). Tackling the Teaching Assistant Shortage. <https://teach-now.co.uk/tackling-the-teaching-assistant-shortage>
- Teddlie, C., & Tashakkori, A. (2009). *Foundations of Mixed Methods Research*. Sage.
- Teddlie, C., & Yu, F. (2007). Mixed methods sampling: a typology with examples. *Journal of Mixed Methods Research*, 1(1), 77-100.
- The Centre for Social Justice. (2024). School Absence Tracker: A Termly Analysis of Official Data Relating to Absence from Schools. https://www.centreforsocialjustice.org.uk/wp-content/uploads/2024/03/CSJ-Absence_Tracker_March24-1.pdf
- The Skills Network. (2020). Skills and Employment Trend Report. <https://blog.theskillsnetwork.com/hubfs/TSN%20and%20EMI%20-%20Skills%20and%20Employment%20Trend%20Report%202020.pdf>
- Treffinger, D. J. (2006). The Role of Creativity and Problem Solving in Building and Sustaining Caring Communities. <https://www.creativelearning.com/>
- Tronto, J. (1993). *Moral Boundaries: A political argument for an ethic of care* (1st ed ed.). Routledge.
- Tuckman, B. W., & Jensen, M. C. (1977). Stages of Small-Group Development Revisited. *Group and Organization Management*, 2(4), 419-427. <https://www.proquest.com/openview/7a631d0ce4dd732776cd6ebec074105f/1?pq-origsite=gscholar&cbl=43244>
- UK Government. (2025). Factsheet: School Support Staff Negotiating Body in the Employment Rights Bill. Retrieved from <https://assets.publishing.service.gov.uk/media/67125b4c8a62ffa8df77b391/school-support-staff-negotiating-body.pdf>
- University of Bath. (2021). Code of Ethics. <https://www.bath.ac.uk/legal-information/code-of-ethics/>
- Weare, K. (2015). What works in promoting social and emotional wellbeing and responding to mental health problems in schools? Advice for schools and framework document. N. C. s. Bureau. https://www.ncb.org.uk/sites/default/files/uploads/files/ncb_framework_for_promoting_well-being_and_responding_to_mental_health_in_schools.pdf
- Wenger-Trayner, E., & Wenger-Trayner, B. (2015). Introduction to Communities of Practice: A brief overview of the concepts and its uses. <https://www.wenger-trayner.com/introduction-to-communities-of-practice>.
- Wenger, E. (1998). *Communities of Practice: Learning, meaning and identity*. Cambridge University Press.
- Westminster Foundation. (2024, 17th April). The Profound Impact of Exclusions at Primary School. News: Guest Blog. <https://westminsterfoundation.org.uk/news/guest-blog-the-profound-impact-of-exclusions-at-primary-school>
- Wimmer, M. (2010). School refusal: Information for educators. Helping children at home and school III: Handouts for educators. In N. A. o. S. Psychologists (Ed.). Bethesda: National Association of School Psychologists.
- World Health Organization. (2008). *School Policy Framework: Implementation of the WHO Global Strategy on Diet, Physical Activity, and Health*. WHO.

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

Appendices

Appendix A

Hamish & Milo Champion semi-structured interview script

1. What structure did you adopt when running the Hamish & Milo Programme? (one-to-one, small group, whole class)
2. What impact have you observed since you started using the Hamish & Milo Programme?
3. Has there been any impact on attendance/exclusions/engagement in learning for the children since starting the Hamish & Milo Programme?
4. Have there been any 'stand-out' moments for individual children participating in the Hamish & Milo Programme?
5. What have the children participating in the Hamish & Milo Programme communicated about their experiences?
6. What has been your personal highlight in using the Hamish & Milo resources?
7. How/if did the supervision groups you attended support you in facilitating the Hamish & Milo Programme?
8. Did the Hamish & Milo training (Discovery and Explorer) support you in facilitating the programme?
9. Do you think that your relationship with the children impacts the outcomes for them?
10. Do you think your previous experience/training/personal qualities impacts the outcomes for the children in the programme?
11. Is there anything else you would like to comment on?



Appendix B

Hamish & Milo Champion / senior leader questionnaire


1. What structure did you adopt when running the programme, one-to-one, small group, whole class?
2. What were the emotion themes you used in the main, and what were the reasons behind choosing those themes/resources?
3. What made you/how did you select the children taking part in the Hamish & Milo programme?
4. What concerns, issues and/or behaviours were you observing in these children?
5. What indicators in the children's context made them a good fit for the selection?
 - FSM (free school meals).
 - EHCP (Education & Health Care Plan)
 - SEND (special educational needs or disability)
 - LAC (Looked after child)
 - SW (Social worker involvement)
6. How did you go about selecting the children to form a group? e.g. teacher referral, pastoral team meeting, SENCO referral
7. How did the children respond to the programme, in general, and in specific cases?
8. Have any teachers commented about the experiences of their pupils) participating in the Hamish & Milo programme?
9. Have any parents commented about the experiences of their child participating in the Hamish & Milo programme?
10. Are you currently using any other SEMH programmes, resources or interventions to support the children in your setting?

The image displays four screenshots of the 'Hamish & Milo Evaluation Survey' interface. The first screenshot is the start screen, featuring the University of Bath logo, the survey title, a brief description of the survey (10 questions, 10 minutes), a confidentiality statement, and a 'Start the survey' button. The second screenshot shows 'Question 1' asking about the structure adopted (one-to-one, small group, or whole class), with radio button options and 'Go Back'/'Continue' buttons. The third screenshot shows 'Question 2' asking about emotion themes used, with a text input field and 'Go Back'/'Continue' buttons. The fourth screenshot shows 'Question 3' asking about selection criteria, with a text input field and 'Go Back'/'Continue' buttons. Each question screen includes an illustration of Hamish (an orange dog) and Milo (a black and white cat) on the right side.

Question 4

What concerns, issues and/or behaviours were you observing in these children?

Go Back
Continue



Strictly Private & Confidential

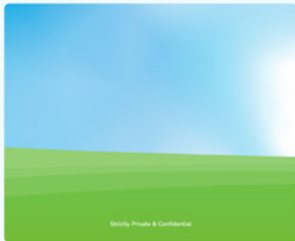
Question 5

What indicators in the children's context made them a good fit for the selection?

Please select all that apply

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

Go Back
Continue




Strictly Private & Confidential

Question 6

How did you go about selecting the children to form a group?

e.g. teacher referral, pastoral team meeting, SENCO referral

Go Back
Continue




Strictly Private & Confidential

Question 7

How did the children respond to the programme, in general, and in specific cases?

Go Back
Continue




Strictly Private & Confidential

Question 8

Have any teachers commented about the experiences of their pupil(s) participating in the Hamish & Milo programme?

Go Back
Continue

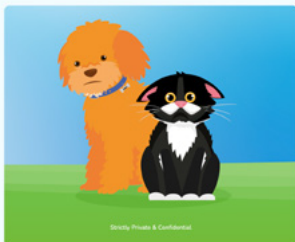


Strictly Private & Confidential

Question 9

Have any parents commented about the experiences of their child participating in the Hamish & Milo programme?

Go Back
Continue

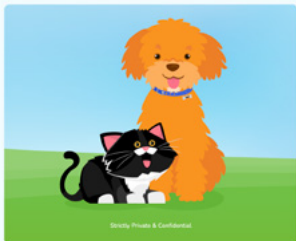


Strictly Private & Confidential

Question 10

Are you currently using any other SEMH programmes, resources or interventions to support the children in your setting?

Go Back
Continue



Strictly Private & Confidential

View survey online
hamishandmilo.org/uob-survey

Appendix C

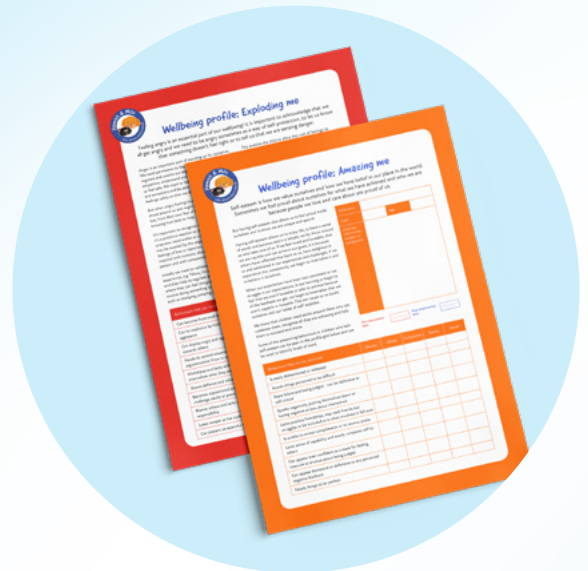
Strengths & Difficulties Questionnaire (SDQ)

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



Child Wellbeing Profiles (CWP)

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



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

New amazing me

Details Behaviours Indicators Observations

Step 2: Behaviours that can be observed

Is easily disheartened or defeated

Sometimes

Avoids things perceived to be difficult

Always

Fears failure and being judged - can be defensive or self-critical

Often

Speaks negatively, putting themselves down or having negative scripts about themselves

Always

Lacks positive friendships, may seek friends but struggles to be included or often involved in fall outs

Always

Is unable to accept compliments or to receive praise

Sometimes

Can appear over-confident as a mask for feeling insecure or anxious about being judged

Never

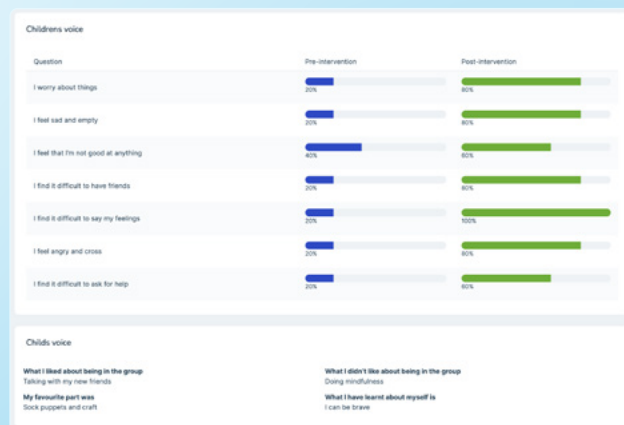
Needs things to be perfect

Can appear dismissive or defensive to any perceived negative feedback

Cancel Save

Child's Voice Questionnaire (CVQ)

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



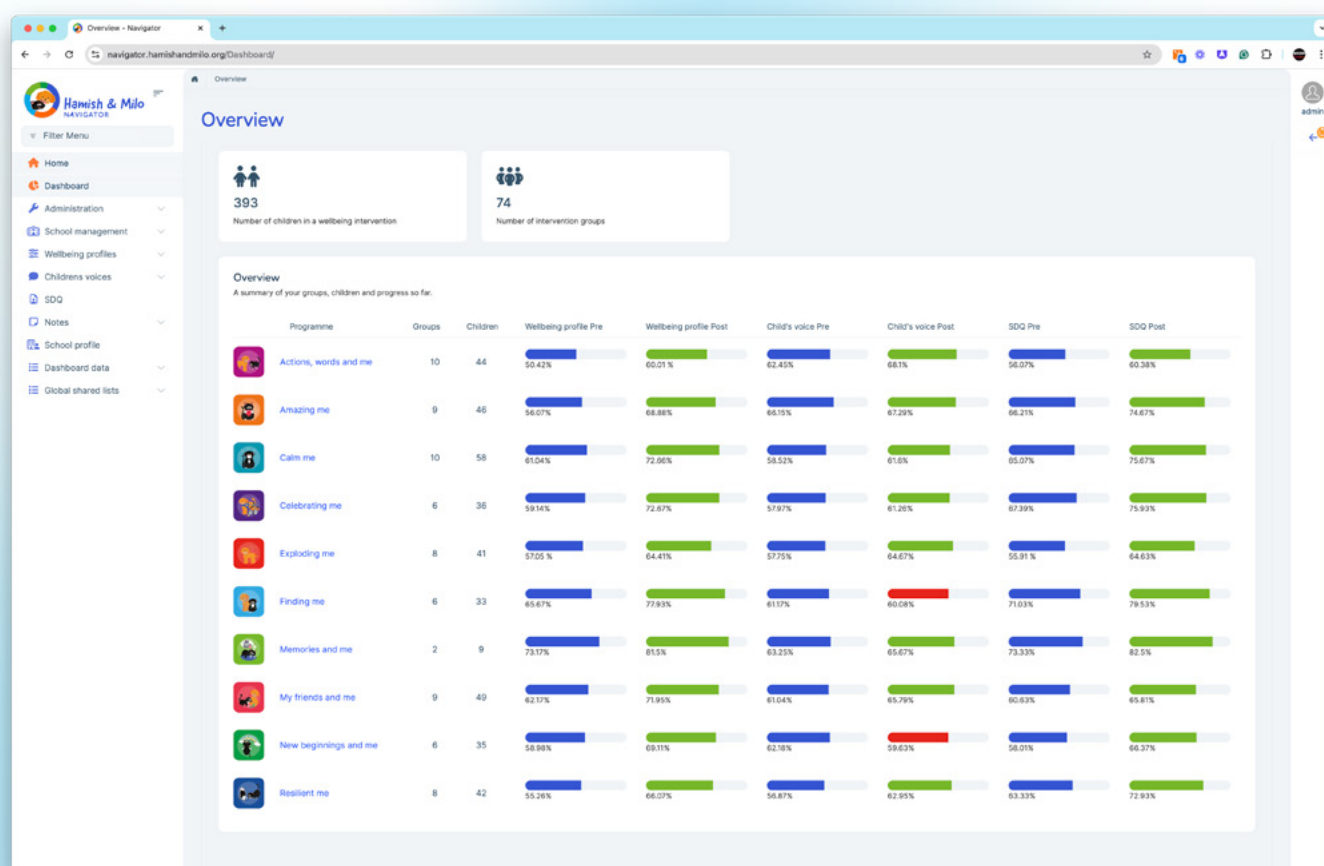
Navigator is used to collect data including their commentary and images

Appendix D

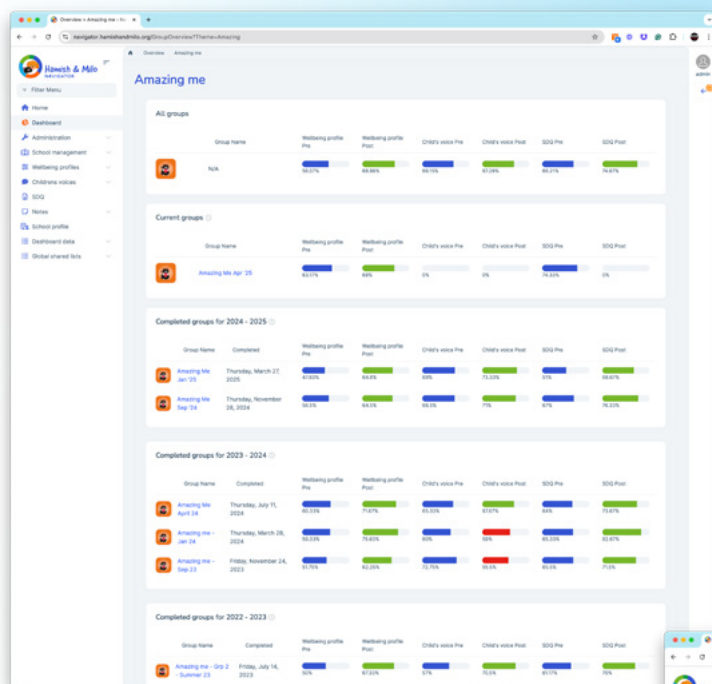
Navigator - Impact & Progress Reporting Dashboard

Participating schools uploaded pre- and post-intervention data from the measurement tools (see Appendix C) directly to the Hamish & Milo Navigator platform. Navigator enables schools to track children's progress, identify emerging patterns, and generate valuable insights to inform and support decision-making. Navigator evidences the impact of programmes and interventions at every level - from individual pupils and groups to whole trusts and local authorities - providing robust, evidence-based reporting for school leadership and external agencies.

- ✔ **Visual, dynamic analytics at your fingertips:** Interactive, real-time graphs and charts simplify interpretation of fast-changing data across schools and trusts.
- ✔ **Identification and assessment tools:** Help staff identify the right programme for children to be involved in.
- ✔ **Support for graduated response and EHCPs:** Data and insight to inform IEPs, PEPs, enhanced provision, SEND and EHCP reviews, strengthening the graduated response for SEMH support.
- ✔ **Easy-to-use, browser-based, cloud software -** with clear easy configuration and data forms.
- ✔ **Secure platform and robust data protection:** built on Azure App Services, protected by an Application Gateway with Web Application Firewall for fully comprehensive cybersecurity.
- ✔ **GDPR compliant:** no child names are used just child codes and all data is stored in state-of-the-art secure Microsoft Azure data centres in the UK.
- ✔ **Inspection and evaluation:** Schools can evidence the scope and effectiveness of their SEMH provision and targeted interventions, supporting Ofsted and ISI inspections and internal evaluations.



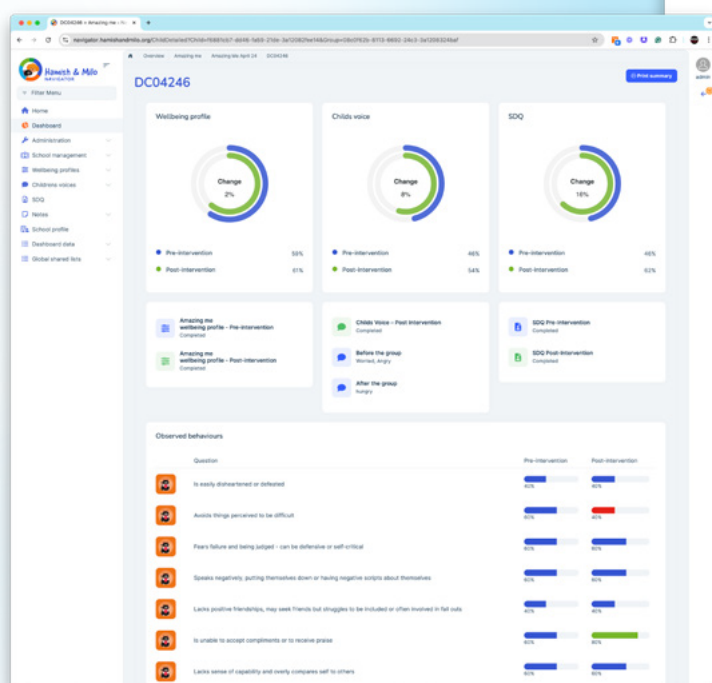
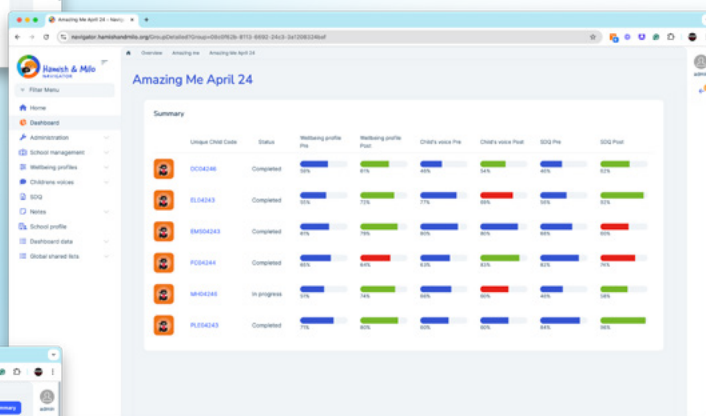
Beechwood Junior School Dashboard



Beechwood Junior School 'Amazing me' Programme Dashboard detailing current and completed intervention groups with a collective 'All groups' summary at the top.

Past years data can be archived.

Beechwood Junior School 'Amazing me' Programme group detailing six participating children



Drill down from theme, group, to child level report.

Example report for child DC04246 shows the change in pre- and post-intervention data and micro impact data for SDQ, CWP and CVQ.

Reports additionally include recorded observations throughout 10 week programme from practitioners, child's voice commentary and drawings. Child reports can be printed and emailed.



